

To improve vaccine equity among the vulnerable population, CDC's Bridge Access Program will continue to provide free COVID-19 vaccines for a limited time after these products move onto the commercial market in Fall 2023. The eligible population includes uninsured and under-insured adults, and children under the Vaccines for Children (VFC) program. This guide will assist COVID-19 vaccinators who serve the eligible population with registration and ordering in ImmuNet.

NOTE: You must have an ImmuNet account to register in ImmuNet. If not, complete an ImmuNet Enrollment Form [here](#). Only one registration is needed per location. **Note that practices with multiple locations must separately register each location that plans to order and have vaccines shipped to and stored at that location.**

This guide has four sections:

[\(1\) Non-VFC Provider Profile Registration](#) - all organizations that serve uninsured and under-insured adults need to complete a Non-VFC Profile registration except participating Vaccines For Children (VFC) organizations

[\(2\) VFC Provider Profile Registration](#) - all Vaccines for Children (VFC) organizations that serve uninsured and under-insured adults need to complete the COVID-19 sections in their existing VFC Profiles

[\(3\) Ordering COVID-19 Vaccines](#)

[\(4\) Reporting Administered Doses of COVID-19 Vaccines](#)

[Attachment: COVID-19 Vaccine Storage Unit Guidelines](#)

Notes:

- Providers must have both an acceptable refrigerator and freezer unit(s). Dorm style (refrigerator with internal freezer section) refrigerators are **NOT** an acceptable storage unit for COVID-19 vaccines. Please see the guidelines in the attachment of this guide.
- Eligible organizations should designate a vaccine contact who has ImmuNet Admin User role to sign in to ImmuNet and create or complete their Adult COVID-19 Vaccine Profile registration.
- Non-VFC providers not participating in the VFC Program but have an inactive/pending VFC Profile should NOT create/complete a VFC Profile. Please contact the ImmuNet Support Team to create a new org/Org ID so you can create/complete a Non-VFC Profile registration in ImmuNet. Providers interested to participate or be reinstated in the VFC Program can learn more at www.marylandvfc.org.
- Be sure to read the instructions in this guide and in ImmuNet carefully. The screen may look different, if a staff member from your organization has previously created a profile.

(1) Non-VFC Provider Profile Registration

Providers not participating in the VFC Program but serve the uninsured and under-insured adults can order and administer adult COVID-19 vaccine by completing a Non-VFC Profile. Once signed in to ImmuNet, click on the **'Create Non-VFC Profile'** button or if you already have an existing registration, click on the **'Non-VFC Order'** button. If you do not see either of these buttons, you do not have the correct user role in ImmuNet or have an existing Inactive/Pending VFC Profile. Please contact ImmuNet Support to have this updated.



Create Non-VFC Profile

If you are a Non-VFC Provider who serves uninsured or under-insured adults, create a Non-VFC Profile which is required before placing an order for **COVID-19 vaccines**.

The Non-VFC Profile is divided into several sections as shown below. Before you can view all the sections, you must ascertain that you serve the eligible population under the Provider Population tab. The other tabs will then be displayed and you can click on each section header to collapse or expand each section. All required information must be completed in each section.

Notes: (a) Be sure to have all the requested information on hand to complete the registration so you will not lose any entered data if you need to step away and ImmuNet times out (in about one hour). (b) If you need to check your PIN (VFC or Non-VFC), it will be under the 'Provider Pin' (Non-VFC pins start with a letter N). (c) The delivery contact entered email

address must be verified before the registration is complete and ready for MDH review/approval. **Please ensure the auto-verification email reaches the delivery contact you entered in the registration.**

Edit Non-VFC Profile

Instructions for Completing the Non-VFC Profile [Click Here](#)
 I have read and understood the above instructions.

Non-VFC Profile

NOTE: The Org Type and Org Sub-Type information is not editable. The Delivery Address and RMP details are not editable once the profile is completed and approved. Please contact the COVID vax team at mdh.covidvax@maryland.gov to make any updates to Org/Sub type, Delivery Address, or RMP.

Provider Pin: Save

* Organization Type: Cancel

* Sub Type:

<input type="text" value="Family Medicine"/> <input type="text" value="OB/GYN"/> <input type="text" value="Other Specialty"/> <input type="text" value="Pediatrics"/>	Add > < Remove	<input type="text" value="Internal Medicine"/>
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Initiating Organization: Sample Clinic
 Initiating User: Admin User

Provider Population ▲

Delivery Contact Information ▲

Provider Practice/Facility Information ▲

Responsible Medical Provider ▲

Vaccine Storage and Handling Information ▲

Adult COVID-19 Vaccine Administration Reporting Information ▲

Adult COVID-19 Vaccine Primary Contact Information ▲

Adult COVID-19 Vaccine Backup Contact Information ▲

Adult COVID-19 Vaccine Agreement ▲

- **Organization Type** - verify your Org Type and Sub Type
- **Provider Population** - you must ascertain that you serve the eligible population by selecting the applicable box before the other sections of the registration will display.

- **Delivery Contact Information** - add your practice's vaccine delivery contact, address, days and times, phone number and email address.

Note that the entered email address must be verified before the registration is complete and ready for MDH review/approval. **Please ensure the auto-verification email reaches the delivery contact you entered in the registration.**

Delivery Contact Information ▲

* Delivery Contact First Name:

* Delivery Contact Last Name:

Delivery Contact Middle Name:

* Delivery Address Line 1:

Delivery Address Line 2:

* Delivery City: Delivery State: MD

* Delivery Zip: +4: * Delivery County:

* Delivery Phone: Ext. Delivery Fax:

* Delivery Alternative Phone:

* Delivery Email - limited to 35 characters:

Email Verified (This box will be auto checked when email is verified by the recipient)


Note: After clicking Save, if the profile is eligible to order COVID-19 an automated email will be sent to all the email address(es) added in this profile. Each email recipient must check their email and click the verification link. Once all the emails are verified, the staff completing this profile will receive an email and the profile will be automatically sent for state review.

In the Delivery Window section, there must be a minimum 5-hour time for each window. If your org does not have 5-hour windows, you can enter your org's opening and closing times under Delivery Window #1 (example 0800 - 1700) and add in the 'Special Delivery Instructions' the times that your organization is closed for lunch.

- **Provider Practice/Facility Information** – enter your practice/facility address and phone numbers
 - **Responsible Medical Provider** - person accountable for compliance with agreement conditions
- Note: The License Number for MD/DO/PA/NP/Pharm who will be listed as your organization's Responsible Medical Provider must be validated. For MD license number, please add zeros between the alphabet and numbers to make up 8 characters (same format as renewal registration number)

Responsible Medical Provider ▼

The official registered health care provider signing the agreement must be a practitioner authorized to administer vaccines under Maryland law, who will also be held accountable for compliance by the entire organization and its providers with the responsible conditions outlined in the provider enrollment agreement. The individual listed here must sign the provider agreement.

*Medical License Number: 

Enter the full medical license number, including any leading zeros.

NOTE: The Medical License Number must be validated using the "Validate" button.

Note: The License Number for MD/DO/PA/NP/Pharm must be validated. For MD license number, please add zeros between the alphabet and numbers to make up 8 characters (same format as renewal registration number).

- **Vaccine Storage and Handling Information** - information about your vaccine storage unit(s)
- Note: Providers must have both an acceptable refrigerator and freezer unit(s). Dorm style (refrigerator with internal freezer section) refrigerators are NOT an acceptable storage unit for COVID-19 vaccines. Please see the guidelines in the attachment of this guide.
- **Adult COVID-19 Vaccine Administration Reporting Information** – information about your organization's vaccination data reporting

- **Adult COVID-19 Vaccine Primary Contact Information** - this will be your COVID-19 vaccine coordinator, whether s/he is the same as or different from the staff who is normally responsible for your org's vaccine supply
- **Adult COVID-19 Vaccine Backup Contact Information** - this will be your COVID-19 vaccine backup coordinator, whether s/he is same as or different from the backup staff who is normally responsible for your org's vaccine supply
- **Adult COVID-19 Vaccine Agreement** - this must be completed by the org's responsible medical provider. Please click the link 'Adult COVID-19 Agreement' to open the pdf and read the agreement in full before typing your first name and last name, in lieu of an actual or electronic signature. **This section will only be viewable by organizations that meet eligibility requirements.**

Adult COVID-19 Vaccine Agreement ▼

Adult COVID-19 Vaccine Agreement pertains to this organization only and does not cover affiliated vaccination locations.

[Adult COVID-19 Agreement](#)

Click the link above to read the Adult COVID-19 Agreement. Accepting the terms of the agreement includes reporting administered Adult COVID-19 vaccine data to ImmuNet. See the ImmuNet website ([here](#)) for more information.

NOTE: The Responsible Medical Provider must read the Adult COVID-19 Vaccine Provider Agreement linked above. Once this is complete, checking the checkbox and entering the name of the Responsible Medical Provider will be accepted in place of an electronic signature.

I have read and agree to the requirements outlined in the Adult COVID-19 Agreement and understand that I am accountable for compliance with these requirements.

***Responsible Medical Provider Signature:**

Once your Non-VFC Profile has been saved/submitted and the delivery contact email has been verified, it will go into a queue for MDH to review and approve your profile registration. If you encounter an error submitting your Non-VFC Profile, click the 'Home' link at the top, then click on 'Create Non-VFC Profile' to complete your profile.

If your profile is already submitted and you wish to view or edit your profile, click on 'Inventory and Ordering' from the left menu, then click on 'Create and View Orders'. Click the 'Edit Non-VFC Profile' to edit or view your profile.

<p>Production Region</p> <p>Patients</p> <p>Organization Reports</p> <p>Inventory and Ordering</p> <ul style="list-style-type: none"> > Create and View Orders > Manage Inventory > Manage Transfers 	<div style="background-color: #f0f0f0; padding: 5px;">Create and View Orders</div> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Non-VFC Profile</td> <td style="text-align: right;">Status: Pending</td> </tr> <tr> <td colspan="2" style="color: red; font-size: small;">Your organization's Non-VFC account is Pending. Please contact the COVID-19 Vaccine Team with any questions.</td> </tr> <tr> <td colspan="2">Provider Pin:</td> </tr> <tr> <td colspan="2">Initiating Organization: ABC Clinic</td> </tr> <tr> <td colspan="2">Initiating User: Jane Smith</td> </tr> <tr> <td colspan="2">Delivery Contact Last Name: Smith</td> </tr> <tr> <td colspan="2">Delivery Contact First Name: Jane</td> </tr> </table> <div style="margin-top: 10px;"> <div style="float: right; border: 2px solid red; padding: 5px; text-decoration: none; color: white; background-color: #0056b3; width: 150px;">Edit Non-VFC Profile</div> <div style="float: right; border: 1px solid #0056b3; padding: 5px; text-decoration: none; color: white; background-color: #0056b3; width: 150px; margin-top: 5px;">Order Specialty/Flu Vaccines</div> </div>	Non-VFC Profile	Status: Pending	Your organization's Non-VFC account is Pending. Please contact the COVID-19 Vaccine Team with any questions.		Provider Pin:		Initiating Organization: ABC Clinic		Initiating User: Jane Smith		Delivery Contact Last Name: Smith		Delivery Contact First Name: Jane	
Non-VFC Profile	Status: Pending														
Your organization's Non-VFC account is Pending. Please contact the COVID-19 Vaccine Team with any questions.															
Provider Pin:															
Initiating Organization: ABC Clinic															
Initiating User: Jane Smith															
Delivery Contact Last Name: Smith															
Delivery Contact First Name: Jane															

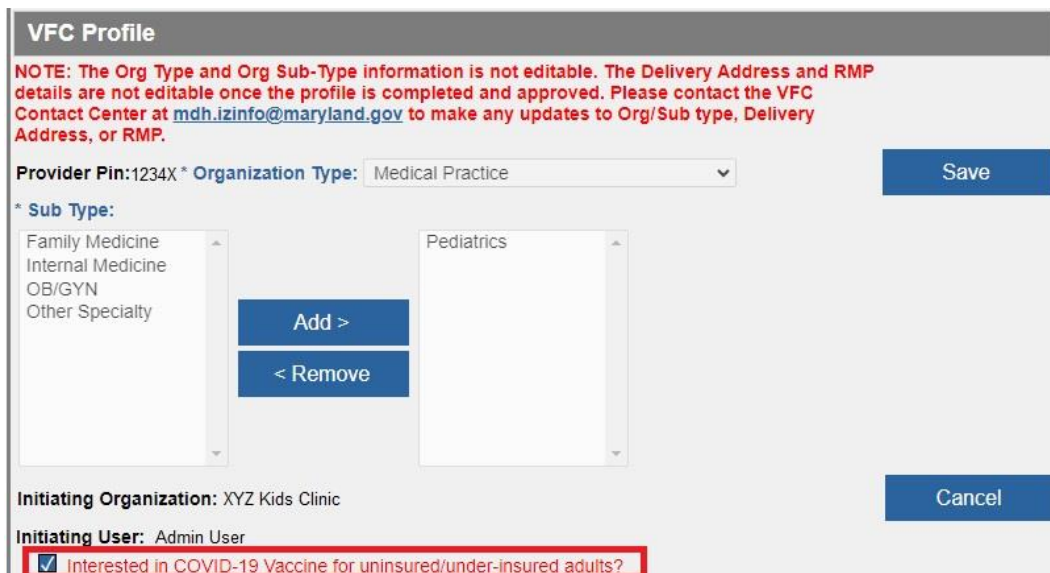
You will be notified when you can place orders once your registration has been reviewed/approved. Please refer to the last section of this guide on how to place vaccine orders in ImmuNet.

(2) VFC Provider Profile Registration

Providers participating in the VFC Program are eligible to order adult COVID-19 vaccines by reviewing their existing profiles for children and if they serve uninsured and under-insured adults, reviewing or completing the COVID-19 sections (for adult COVID-19 vaccine). Note: VFC providers who do not serve uninsured and under-insured adults do not need to complete the COVID-19 sections for adult COVID-19 vaccine as children's COVID-19 vaccines are already available under VFC Routine Vaccine Ordering. Sign in to ImmuNet to edit your VFC Profile ('Inventory and Ordering' > 'Create and View Orders' > 'Edit VFC Profile').

Notes: (a) Be sure to have all the requested information on hand to complete the registration so you will not lose any entered data if you need to step away and ImmuNet times out. (b) The delivery contact entered email address must be verified before the registration is complete and ready for MDH review/approval. **Please ensure the auto-verification email reaches the delivery contact you entered in the registration.**

- **Organization Type** - verify your Org Type and Sub Type
 - Indicate a check mark on the radio button beside 'Interested in COVID-19 Vaccine for uninsured/under-insured adults?'



VFC Profile

NOTE: The Org Type and Org Sub-Type information is not editable. The Delivery Address and RMP details are not editable once the profile is completed and approved. Please contact the VFC Contact Center at mdh.izinfo@maryland.gov to make any updates to Org/Sub type, Delivery Address, or RMP.

Provider Pin: 1234X * Organization Type: Medical Practice

* Sub Type:

Family Medicine
Internal Medicine
OB/GYN
Other Specialty

Pediatrics

Add >

< Remove

Initiating Organization: XYZ Kids Clinic

Initiating User: Admin User

Interested in COVID-19 Vaccine for uninsured/under-insured adults?

Save

Cancel

- **Review and update, if necessary, your existing VFC information for the following sections:**
 - **Delivery/Primary Contact Information**
Note that the delivery contact entered email address must be verified before the registration is complete and ready for MDH review/approval. **Please ensure the auto-verification email reaches the delivery contact you entered in the registration.**
 - **Mailing Address**
 - **VFC 1st Backup Contact Information**
 - **VFC 2nd Backup Contact Information**
 - **Complete the new 'Provider Population' section:**
 - Select the applicable uninsured/under-insured adult population served by your organization
 - **Responsible Medical Provider** - person accountable for compliance with agreement conditions
Note: The License Number for MD/DO/PA/NP/Pharm who will be listed as your organization's Responsible Medical Provider must be validated. For MD license number, please add zeros between the alphabet and numbers to make up 8 characters (same format as renewal registration number).

- **Adult COVID-19 Vaccine Storage and Handling Information** - complete new fields for Adult COVID-19 vaccine storage information
Note: Providers must have both an acceptable refrigerator and freezer unit(s). Dorm style (refrigerator with internal freezer section) refrigerators are NOT an acceptable storage unit for COVID-19 vaccines. Please see the guidelines in the attachment of this guide.
- **Adult COVID-19 Vaccine Administration Reporting Information** – information about your organization’s vaccine administration data reporting
- **Adult COVID-19 Vaccine Backup Contact Information** - complete this section whether s/he is same as or different from the backup staff who is normally responsible for your org’s vaccine supply.
- **Adult COVID-19 Vaccine Agreement** - this must be completed by your org’s responsible medical provider. Please click the link ‘Adult COVID-19 Agreement’ to open the pdf and read the agreement in full before typing your first name and last name, in lieu of an actual or electronic signature. **This section will only be viewable by organizations that meet eligibility requirements.**

Adult COVID-19 Vaccine Agreement ▲

Adult COVID-19 Vaccine Agreement pertains to this organization only and does not cover affiliated vaccination locations.

[Adult COVID-19 Agreement](#)

Click the link above to read the Adult COVID-19 Agreement. Accepting the terms of the agreement includes reporting administered COVID-19 vaccine data to ImmuNet. See the ImmuNet website ([here](#)) for more information.

NOTE: The Responsible Medical Provider must read the Adult COVID-19 Vaccine Provider Agreement linked above. Once this is complete, checking the checkbox and entering the name of the Responsible Medical Provider will be accepted in place of an electronic signature.

I have read and agree to the requirements outlined in the Adult COVID-19 Agreement and understand that I am accountable for compliance with these requirements.

Responsible Medical Provider Signature:

Note: Please click the Save button to save the Adult COVID-19 Agreement information.

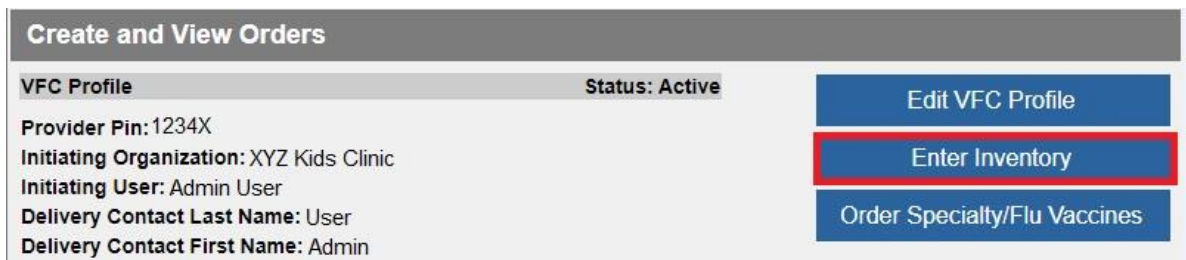
Once your VFC Profile has been submitted and all emails have been verified, MDH will review/approve your new COVID-19 information. Similar to your existing VFC Profile views, you should be able to edit/view your completed Adult COVID-19 Vaccine Registration sections under ‘**Edit VFC Profile**’.

You will be notified when your organization can place orders once your profile’s Adult COVID-19 Vaccine Registration have been reviewed/approved. Please refer to the last section of this guide on how to place vaccine orders in ImmuNet.

(3) Ordering COVID-19 Vaccines

Once your profile registration has been reviewed/approved, you will be notified when you can place orders.

- (a) **Non-VFC providers** should send their Adult COVID-19 vaccine orders by emailing the COVID vaccine team at mdh.covidvax@maryland.gov.
- (b) Existing **VFC providers** can click on the 'VFC Inventory/Order' blue button or use the left menu links.
 - (i) **Pediatric and Adolescent COVID-19 vaccines**
According to ACIP recommendation, Pediatric and Adolescent COVID-19 vaccines are now a part of the standard VFC vaccine inventory and providers can expect to receive these COVID-19 vaccines as part of their routine orders.
VFC providers should enter/order Pediatric and Adolescent COVID-19 vaccines like they currently do for other VFC vaccines in the 'Enter Inventory' screen:



Create and View Orders	
VFC Profile	Status: Active
Provider Pin: 1234X	
Initiating Organization: XYZ Kids Clinic	
Initiating User: Admin User	
Delivery Contact Last Name: User	
Delivery Contact First Name: Admin	
	Edit VFC Profile
	Enter Inventory
	Order Specialty/Flu Vaccines

- (ii) **Adult COVID-19 vaccines**
VFC providers who serve uninsured/under-insured adults with an approved Adult COVID-19 Vaccine Registration should send their Adult COVID-19 vaccine orders by emailing the COVID vaccine team at mdh.covidvax@maryland.gov.

NOTE: Do not enter/order for adults in the 'Enter Inventory' screen. Doing so will significantly delay your COVID-19 vaccine orders.

Refer to the [ImmuNet COVID-19 Vaccine Order Status Guide](#) for more information on how to track your order and the delivery/shipment of your vaccines in ImmuNet. Refer to the [Vaccine Inventory Guide](#) to learn how to manage your inventory in ImmuNet.

CDC Vaccine Finder

CDC Vaccine Finder – CDC no longer requires MDH to submit providers' inventory from ImmuNet to Vaccine Finder, however, per the Adult COVID-19 Vaccine Provider Agreement, providers are required to sign up directly with Vaccine Finder to post your practice's Adult COVID-19 vaccine availability to uninsured/under-insured adults. See this [CDC Vaccine Finder webpage](#) to get started.

(4) Reporting Administered Doses of COVID-19 Vaccines

All administered doses of COVID-19 vaccines should be reported to ImmuNet within one (1) day (per CDC target recommendation).

See the ImmuNet website ([here](#)) for more information about reporting COVID-19 vaccinations to ImmuNet, including links to the list of required data elements. Note the following codes specifically for reporting administered Adult COVID-19 vaccines under the Bridge Access Program:

Financial Class = v23 (317)

Funding Source = VXC50 (Public)

Practices with multiple locations that separately register and place orders for each location are assigned a unique ImmuNet Organization ID. Each location must report administered doses under their unique Org ID for MDH to reconcile your vaccine inventory (through ImmuNet's Decrement Inventory functionality) and hence, allocate the correct number of COVID-19 vaccines in your next order.

If these practices use the same Electronic Health Record (EHR) system, contact the vendor to set up reporting under each unique Org ID instead of reporting under a parent/umbrella Org ID.

If your patients request that you add their COVID-19 vaccinations in your Electronic Health/Medical Record (EMR/EHR) system or directly into ImmuNet, please be sure to check ImmuNet first, to see if those vaccinations have already been reported. Adding a historical dose without the manufacturer or lot number in ImmuNet may result in additional doses in the patient record. This may, in turn, cause previously submitted doses to be invalid and put the patient's COVID-19 vaccinations in question, especially when the patients try to access their COVID-19 certificates in MD MyIR.

More information about reporting to ImmuNet is available on the [ImmuNet website](#) under the 'Report to ImmuNet' link (left menu).

Attachment: COVID-19 VACCINE STORAGE UNIT REQUIREMENTS

All providers who register to receive COVID-19 vaccines must have a suitable refrigerator and freezer to store vaccines.

At this time, due to limited quantities of vaccine and an uncertainty about which vaccines brands will ship, **ALL COVID-19 providers MUST be prepared to store and handle any vaccine product** even if you desire to only receive vaccine stored at refrigerated temperatures.

COVID-19 VACCINE STORAGE UNIT GUIDELINES

The CDC recommends the use of stand-alone refrigerator and stand-alone freezer units of pharmaceutical/ medical grade. Dorm style refrigerators CANNOT be used (even for temporary vaccine storage). See [this CDC webpage](#) for more information.

Acceptable Vaccine Storage Units



Stand Alone Refrigerator



Stand Alone Freezer



Pharmaceutical Grade Refrigerator



Under-counter refrigerator



Under-counter Freezer



Combination Refrigerator/Freezer in good working order

- **Refrigerator** (Stand Alone and/or Pharmaceutical grade).
- **Freezer** (Stand Alone and/or Pharmaceutical grade).
- **Combination household unit** (refrigerator and freezer in one unit with one compressor) using refrigerator or freezer compartment only for vaccines.

Your COVID-19 vaccine storage units **MUST** be large enough to hold enough vaccines for the population identified in your COVID-19 registration.

Your COVID-19 Provider registration may be delayed if you are not registering an acceptable vaccine storage unit. Please do not purchase or use any of the units listed below.

Unacceptable storage unit(s)



Dorm style with internal freezer section



Refrigerators that are smaller than 1 cubic foot.

- Dorm style refrigerator – Freezer located inside of the refrigerator.
- Mini refrigerator – Any unit less than 1 cu ft.
- Small under the counter refrigerator with a freezer/refrigerator combination.

You will be required to document the make and model # of your vaccine storage unit(s) when completing registration.