



Department of Health

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Executive Deputy Commissioner

October 23, 2020

Dear Long-Term Care Facility Administrator:

The purpose of this letter is to inform you about how your facility can enroll and participate in the COVID-19 Vaccination Program. New York State long-term care facilities (LTCFs) outside of New York City, interested in administering COVID-19 vaccine to staff, residents, or both, must enroll in the New York State COVID-19 Vaccination Program to order and receive publicly supplied COVID-19 vaccine and ancillary supplies. This enrollment process is separate from a federal initiative led by CDC involving LTCFs and two large chain pharmacies (CVS and Walgreens) which is primarily focused on the vaccination of residents.

NYSDOH's COVID-19 Vaccination Program enrollment will enable LTCFs to order vaccine for both staff and residents. You may also enroll in the federal program if you determine it will meet your needs. We strongly encourage you to enroll in the NYSDOH Program now so that you will have the flexibility to order vaccine for staff and/or residents.

An online enrollment application tool named "COVID-19 Vaccine Program Provider Enrollment" that contains the Provider Agreement and Profile forms outlined below, is now accessible through the Health Commerce System (HCS). To assist you in collecting all enrollment information in advance, we have attached copies of the relevant forms as the online application in HCS must be completed in its entirety in one attempt/sitting. Please review the information in this letter and the attached documents and be ready to complete the enrollment fields in the HCS online application tool by COB, Tuesday, November 3, 2020.

The enrollment forms include the following:

The **CDC COVID-19 Vaccination Program Provider Requirements and Legal Agreement** (Section A) specifies the conditions of participation for vaccination provider organizations and their constituent facilities. The chief medical officer (or equivalent) and chief executive officer (or chief fiduciary officer) signing this agreement must be the individuals who will be held accountable for and responsible for compliance with the conditions outlined in the agreement. This section of the form will only be completed once, regardless of the number of location sites you are enrolling. Each location site will be entered under the profile section.

The **CDC COVID-19 Vaccination Program Provider Profile Form and Addendum** (Section B) outlines key minimum data elements required to be collected from every vaccination provider location receiving COVID-19 vaccine and ancillary products, such as receiving site address information, practice type, and patient population size and volume. This information must be completed and signed (electronically) for **each** location covered under the Organization listed in Section A.

Also attached is the **CDC Supplemental COVID-19 Vaccine Redistribution Agreement** which recognizes that for some large healthcare organizations, there are special circumstances in which COVID-19 vaccine would need to be redistributed. For example, a large organization may receive initial COVID-19 vaccine shipments at a central depot and then wish to redistribute vaccine to additional clinic locations/sites. If this applies to your organization, complete a Redistribution Agreement to request prior approval for vaccine redistribution. A Redistribution Agreement is not required and does not guarantee approval. This redistribution agreement is not available in the online application tool. It must be completed electronically (it is a fillable PDF) and emailed to COVID19vaccine@health.ny.gov.

New York State Immunization Information System (NYSIIS) accounts:

All COVID-19 Vaccine Program Providers (each site submitting a profile) will need a New York State Immunization Information System (NYSIIS) account. Your organization may currently have a NYSIIS account, but it is important to ensure that the appropriate staff have access. Functions staff perform in NYSIIS include placing vaccine orders; monitoring vaccine inventory; entering doses administered; performing data exchange (uploading and downloading data) between the provider's electronic health system and NYSIIS; entering vaccine returns and wastage; and generating reports for internal review (e.g. doses administered).

Please take the following steps to receive access for new users, if needed:

1. NYSIIS is located on the Health Commerce System. If responsible staff do not yet have an HCS account, they must apply for one. Please refer to the attached instructions for requesting an HCS account.
2. Take the NYSIIS Administrative User training located at https://www.health.ny.gov/prevention/immunization/information_system/status.htm. You must have an HCS ID (step 1 above) to register for the training.

Submission deadline:

Please enter the Provider Agreement and Profile information in the online application tool in HCS and separately complete and email the Redistribution Agreement (if applicable) to COVID19Vaccine@health.ny.gov by COB, Tuesday, November 3, 2020.

Any questions about these forms should be directed to the email above.

Sincerely,



Debra S. Blog, MD, MPH
Director, Division of Epidemiology

Attachments:

COVID-19 Vaccination Program Provider Agreement and Profile Form
NYS COVID-19 Vaccine Provider Profile Addendum
Supplemental COVID-19 Vaccine Redistribution Agreement
Instructions for Requesting a HCS Account
Accessing the Enrollment Application Tool in HCS