

To: Providers participating in the Arizona Vaccines for Children Program

Thank you for being a part of the Arizona Vaccines for Children Program. Each year, providers must renew their Provider Agreement for the receipt of VFC vaccine.

With this letter, we are sending the [2020 Electronic Re-enrollment Provider Guide](#). **The guide includes important information and detailed instructions with screenshots to help you complete your Provider Agreement.** Use the guide to help you work through the four screens needed to complete the agreement. Use the checklist on the last page of the guide to track your progress.

Most of the information you will need to complete your 2020 Provider Agreement is prepopulated in ASIIS. You will see it when you create the new agreement this year. Please review the information and make sure it is correct. Update everything that has changed.

You will need to gather some information for verification before starting the online re-enrollment. Gathering the information ahead of time will save time and help the process go smoothly.

- ⊕ **Practice Details** – *This information will be prepopulated in ASIIS*
 - **Facility Details** – verify that the physical address where the vaccines are administered **is the same as** the vaccine delivery address. Verify the mailing address for your practice.
 - **Contact Details** – verify the names, email addresses, telephone and fax numbers for the facility contacts. Contact details for primary vaccine coordinator, backup vaccine coordinators and either signatory physician or office manager are required. Add any contact details that is missing. Make sure emails are correct. Include phone and fax numbers for all contacts even if they are the same.
 - **Shipping Days and Times** – verify the **days of the week** and **core business hours** that staff is available to receive vaccine shipments. There must be staff on site to receive vaccines **at least four (4) days of the week and four (4) consecutive hours a day.**

- ⊕ **Authorized Providers – Prescribing Physician Details** – *This information will be prepopulated in ASIIS* – verify the name, specialty, Arizona State Medical License Number and National Provider ID (NPI) for each physician prescribing vaccines in your practice.
 - Here is a link to help you locate Medical License Numbers:
<http://www.azmd.gov/glsuiteweb/clients/azbom/public/WebVerificationSearch.aspx>
 - Link for Board of Nursing website: <https://www.nursys.com/LQC/LQCTerms.aspx>
 - The National Provider ID (NPI) is required for each physician/vaccinator in your practice. Here is a link to help you locate NPI numbers: <https://npiregistry.cms.hhs.gov/>

- ⊕ **Practice/Provider Profile** – information about the number of children who received immunizations at your practice during the previous calendar year (January 1, 2019 – December 31, 2019), by age group, insurance type and demographics. **Please allow extra time to gather this information. You will need to update this information in ASIIS to complete your agreement.**
 - If you captured VFC patient eligibility in ASIIS in 2019, this information will be prepopulated in ASIIS, and you can verify and adjust the data if necessary.
 - If you have not captured VFC patient eligibility in ASIIS, your billing staff may be the best source for this information. *Please note that VFC eligibility must be documented for every visit.

- ⊕ **Cold Storage Unit Details** – *This information will be prepopulated in ASIIS* – verify the information about the storage units used to store VFC vaccines and the data loggers you use to monitor temperatures in those storage units. If you have been approved and want to recertify for frozen vaccine, you need to verify the information about the freezer used to store VFC vaccines. The required information is: unit

name, manufacturer and model number; thermometer type, temperature scale and date of last calibration of the data logger.

****Please note that data loggers are required and are the ONLY acceptable temperature monitoring devices for all units storing VFC vaccines, including the backup device.***

- ⊕ **Certificates for Completed Annual Training** for the primary and backup vaccine coordinators. Annual training is a VFC requirement which can be fulfilled by passing **one of the available training options** and sending the certificate to AIPO with the re-enrollment:
 - CDC “You Call the Shots” (YCTS) [Vaccines for Children \(VFC\) Jan 2020](#) - OR -
 - CDC “You Call the Shots” (YCTS) [Vaccine Storage and Handling Jan 2020](#) - OR -
 - [AIPO Train](#) - Arizona Vaccines for Children Training - OR -
 - Certificate of Completion from AIPO Train: Keeping on track with ASIIS and Vaccine Storage and Handling
- ⊕ [Vaccine Accountability and Management Plan](#) – completed and signed
- ⊕ **Valid data logger calibration certificates** for all units storing VFC vaccines and the back-up data logger.

Completing the re-enrollment process could take 20 minutes or longer depending on what you need to report. You must complete all required fields in each section of the agreement to proceed to the next screen. The information you enter will be saved as you complete each screen. If you need to stop before you have completed the agreement, be sure to save the screen you are on so you can come back later and complete the process. You must complete all four screens of the online agreement before you submit it to the state.

All parts of the agreement must be signed by the person within your practice that is licensed in the State of Arizona to prescribe vaccines (M.D., D.O., NP or FNP) and who has primary responsibility for making decisions about your practice and its operations.

Keep the **original** signature document(s).

After completing the Provider Agreement in ASIIS, use this website to upload ALL required re-enrollment documents (follow the link below):

<https://redcapaiipo.azdhs.gov/surveys/?s=PEWDA4F9TC>

The required documents are: **signed VFC Provider Agreement Signature Page**, all 5 pages of the completed and signed [Vaccine Accountability and Management Plan](#), certificates for completed annual training for the primary and backup coordinators, signed Refrigerator and Freezer Verification Form and the valid data logger calibration certificates for all units storing VFC vaccines and the back-up data logger.

The Provider Agreement is the official form approved by the CDC. ***No changes can be made to the provider enrollment requirements without prior approval from the CDC. Do not modify, remove, or add any requirements or information to the Provider Agreement form.***

The 2020 re-enrollment starts March 1st, 2020. You will then be able to add a new Provider Agreement, prepare it and submit it for review. The re-enrollment process will close June 30th, 2020. If a location fails to re-enroll by June 30th, that location may be inactivated from the VFC program for non-compliance. The provider may be permitted to return to the VFC program by submitting a new enrollment, no earlier than one (1) year after the Notice of Action.

The Arizona Immunization Program Office cannot approve your Provider Agreement until it is completed in ASIIS and all required documents are uploaded to the upload website.

Please be aware that if your 2019 Provider Agreement expires, you will not be able to order VFC vaccines until your 2020 re-enrollment is submitted and approved.

Ensure your vaccine ordering is not disrupted.

Do not wait until the last minute to complete your online re-enrollment!

If you have questions regarding the re-enrollment process or the online forms, please contact the Arizona Immunization Program Office, at (602) 364-3642 and (602) 364-3899 or e-mail us at: ArizonaVFC@azdhs.gov or ASISHelpDesk@azdhs.gov or contact your Immunization Program Specialist directly.