North Carolina COVID-19 Vaccine Management System (CVMS)

Provider Enrollment Portal

Organization Administrator User Guide

Version 7

April 13, 2021

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

If you have any questions, issues or requests, please go to the

CVMS Help Desk Portal* at https://ncgov.servicenowservices.com/csm_vaccine

You can also call the COVID-19 Vaccine Provider Help Center at (877) 873-6247 and select option 1.
The COVID-19 Vaccine Provider Help Center is available during the following hours:

Monday – Friday: 7:00 AM – 7:00 PM ET

Saturday – Sunday: 10:00 AM – 6:00 PM ET

* On the home page of the CVMS Help Desk Portal, select the "**Vaccine Provider**" option to submit your question, issue, or request.

Providers that are first time users of the CVMS Help Desk Portal will have to follow the steps below:

1. Register for an account on the portal by clicking 'Register' in the top right-hand corner
2. Populate your first name, last name, business e-mail, and your registration code

   NOTE: The registration code is your Provider PIN (i.e., NCA650001), which can be found on the packing lists received with your Vaccines For Children shipments, or in the top right-hand corner of a wasted / expired report generated from the North Carolina Immunization Registry (please add "NCA" to the front of the six-digit PIN#)

   For providers who are not enrolled or may not have a Provider PIN, you may use the following generic Provider PIN to register: VAC2021
3. You will receive an e-mail with your username and temporary password to log into the portal

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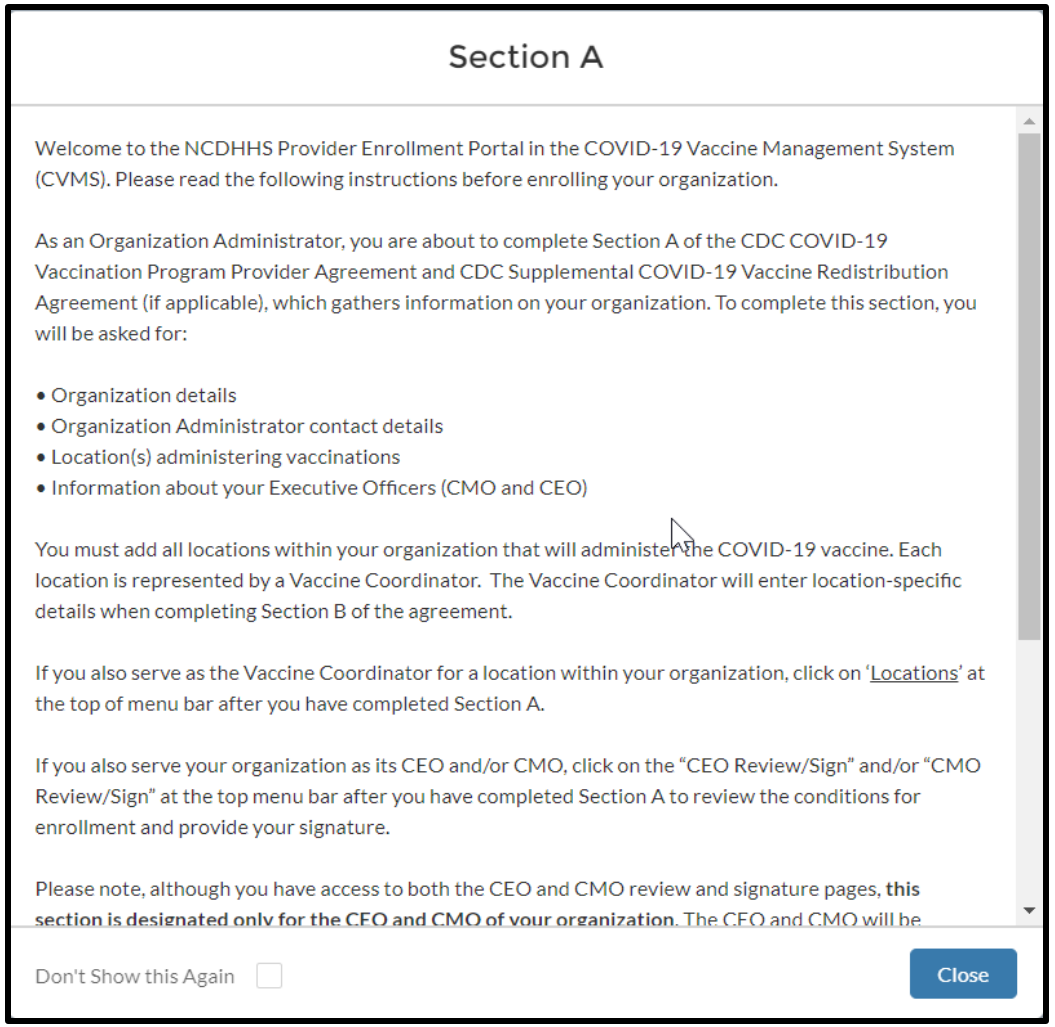
Overview



Section A

Welcome to the NCDHHS Provider Enrollment Portal in the COVID-19 Vaccine Management System (CVMS). Please read the following instructions before enrolling your organization.

As an Organization Administrator, you are about to complete Section A of the CDC COVID-19 Vaccination Program Provider Agreement and CDC Supplemental COVID-19 Vaccine Redistribution Agreement (if applicable), which gathers information on your organization. To complete this section, you will be asked for:

- Organization details
- Organization Administrator contact details
- Location(s) administering vaccinations
- Information about your Executive Officers (CMO and CEO)

You must add all locations within your organization that will administer the COVID-19 vaccine. Each location is represented by a Vaccine Coordinator. The Vaccine Coordinator will enter location-specific details when completing Section B of the agreement.

If you also serve as the Vaccine Coordinator for a location within your organization, click on 'Locations' at the top of menu bar after you have completed Section A.

If you also serve your organization as its CEO and/or CMO, click on the "CEO Review/Sign" and/or "CMO Review/Sign" at the top menu bar after you have completed Section A to review the conditions for enrollment and provide your signature.

Please note, although you have access to both the CEO and CMO review and signature pages, **this section is designated only for the CEO and CMO of your organization**. The CEO and CMO will be

Don't Show this Again

Close

In this user guide, we will discuss how to complete Section A of the Provider Enrollment process in the CVMS Provider Enrollment Portal.

The content included in this user guide is for the following role: **Organization Administrator**

Additionally, you will need to:

- Use the latest version of Chrome, Firefox, Edge Chromium, or Safari browsers
- Log into the CVMS Provider Enrollment Portal (https://covid-enroll.ncdhhs.gov/)

Now, let's get started!

Provider Enrollment Process Overview

CVMS Provider Enrollment Process Overview

The COVID-19 Vaccination Program Provider Enrollment Process takes place in the **CVMS PROVIDER ENROLLMENT PORTAL**. The CVMS Provider Enrollment Portal is a cloud-based solution.

Start
- Provider Enrollment

→

Section A
(Organization Administrator)
- Organization Details
- Location(s) Contact Information
- Responsible Officer

→

Section B
(Vaccine Coordinator)
- Location Details
- Practicing Provider Details
- Vaccine Shipping/Storage Details

→

End
- Responsible Officer E-signs

Additional Resources

- Provider Enrollment Portal - https://covid-enroll.ncdhhs.gov/
- Provider Enrollment Checklist - https://covid19.ncdhhs.gov/covid-19-vaccine-readiness-checklist-download/download

Relevant Roles

- Organization Administrator
- Vaccine Coordinator
- Responsible Officer (CEO and CMO)

Provider Enrollment Roles

A provider is anyone who provides and administers healthcare services.

Providers

- Pharmacies
- Community health centers
- Hospitals
- Clinics
- Long-term care facilities
- Acute care hospitals
- Urgent care clinics
- Other medical care facilities

Organization Administrator	• Completes Section A for the entire organization. • Can also complete all actions a Vaccine Coordinator, CEO or CMO is completing
Vaccine Coordinator	• Completes Section B for their assigned location(s) • On-site at the location
Chief Executive Officer (CEO)	• Reviews and signs on behalf of all locations within the organization
Chief Medical Officer (CMO)	• Reviews and signs on behalf of all locations within the organization

Provider Enrollment Role Checklist

COMPLETE THE CHECKLIST below for **EACH ROLE** that you serve in your organization

Organization Administrator

- ❑ **Register** for a Provider Enrollment account
- ❑ Mark if your organization is a **Redistribution Participant**
- ❑ **Add** all locations
- ❑ Add your organization's **CMO**
- ❑ Add your organization's **CEO**

Vaccine Coordinator

- ❑ **Register** for a Provider Enrollment account via the link in the welcome email
- ❑ **Upload pictures** of the interior and exterior of your **storage units**
- ❑ **Input all practicing providers** at your location
- ❑ **Add initial HCP Location Managers**
- ❑ Review and sign the **CDC COVID-19 Vaccination Program Provider Agreement**
- ❑ Review and sign the **Storage and Handling Attestation**

For locations with at least 25 practicing providers, return completed **Practicing Provider Bulk Upload Template** to the CVMS Help Desk Portal at https://ncgov.servicenowservices.com/csm_vaccine

Chief Executive Officer (CEO)

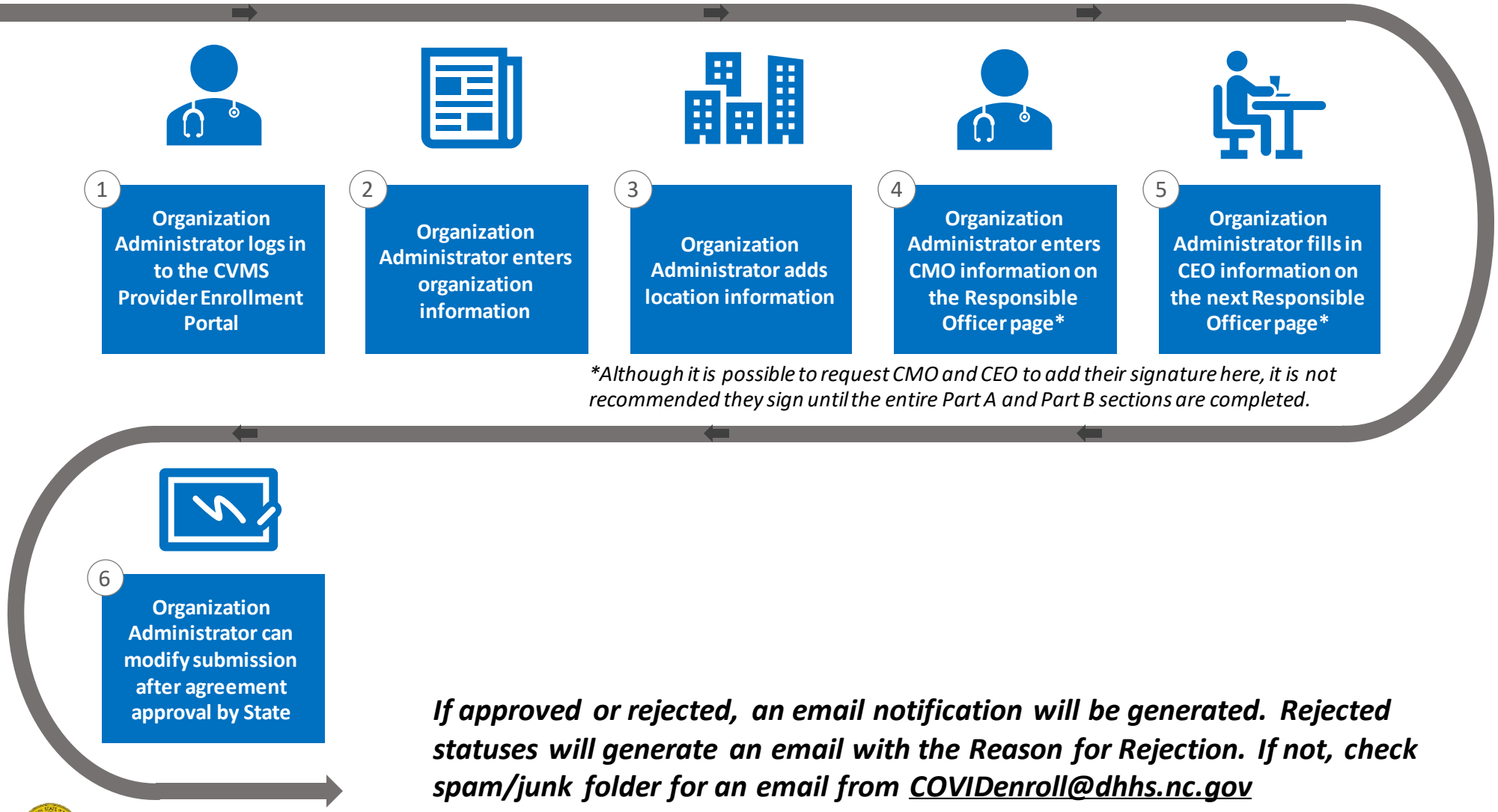
- ❑ **Register** for a Provider Enrollment account via the link in the welcome email
- ❑ Review and sign the **CDC COVID-19 Vaccination Program Provider Agreement**
- ❑ If applicable, review and sign the **CDC Supplemental COVID-19 Vaccine Redistribution Agreement**

Chief Medical Officer (CMO)

- ❑ **Register** for a Provider Enrollment account via the link in the welcome email
- ❑ Review and sign **the CDC COVID-19 Vaccination Program Provider Agreement**
- ❑ If applicable, review and sign the **CDC Supplemental COVID-19 Vaccine Redistribution Agreement**

Completing Section A

Provider Enrollment Workflow – Section A



If approved or rejected, an email notification will be generated. Rejected statuses will generate an email with the Reason for Rejection. If not, check spam/junk folder for an email from COVIDenroll@dhhs.nc.gov

Audience

Organization Administrator

Time Estimate

- <20 minutes to enter information

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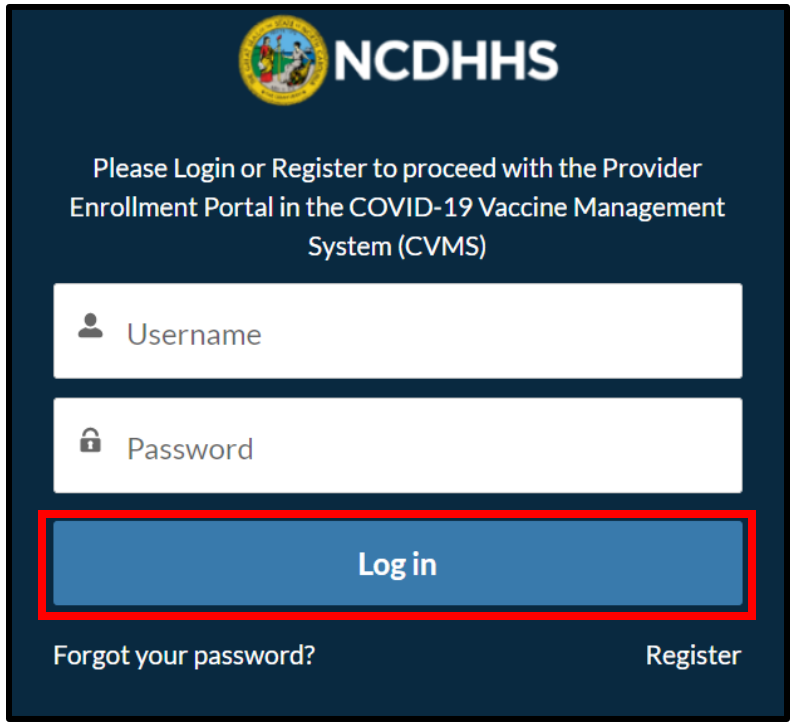
Step 1 of 9: Log into the CVMS Provider Enrollment Portal



When you are ready to begin the Provider Enrollment process, navigate to the CVMS Provider Enrollment Portal.

1. Enter your **USERNAME**
2. Enter your **PASSWORD**
3. Click **LOG IN**
4. After clicking log in, you will be directed to **COMPLETE SECTION A**

Reference the CVMS Provider Enrollment Account Registration and Password Reset User Guide for more information about account creation, which is available on the NC Immunization Branch website at https://covid19.ncdhhs.gov/cvms-provider-enrollment-account-registration-and-password-reset-user-guide/download.

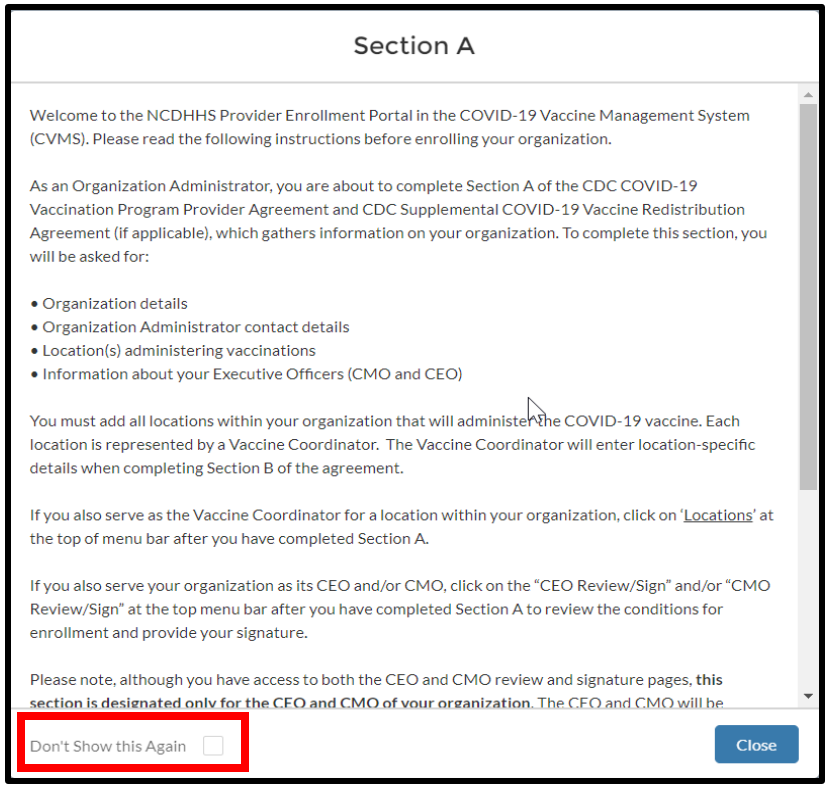
Audience

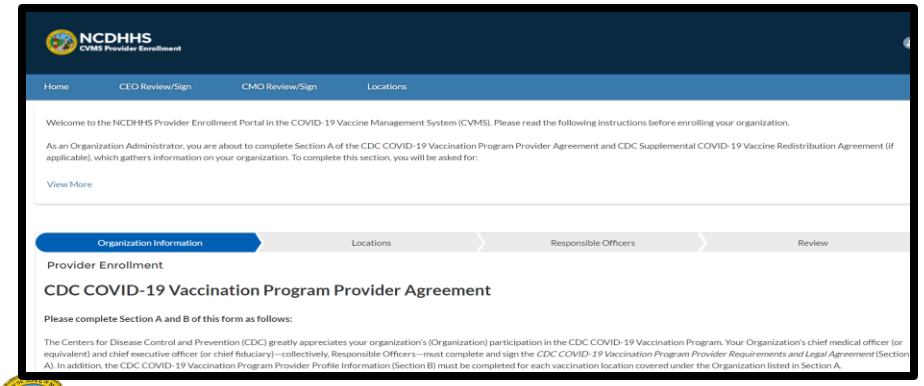
Organization Administrator

Tips

The link to the CVMS Provider Enrollment Portal is https://covid-enroll.ncdhhs.gov/.

Step 2 of 9: Collect Key Details Before Beginning Section A





After logging in, you will see a message reminding you of the details you will need to complete **SECTION A**:

- Organization Details
- Organization Administrator Contact Details
- Location(s) administering vaccination
- Information about your Executive Officers (CEO / CMO)

1. **COLLECT THESE DETAILS** beforehand
2. **CLOSE** the window
3. You will be directed to Section A.

Audience

Organization Administrator

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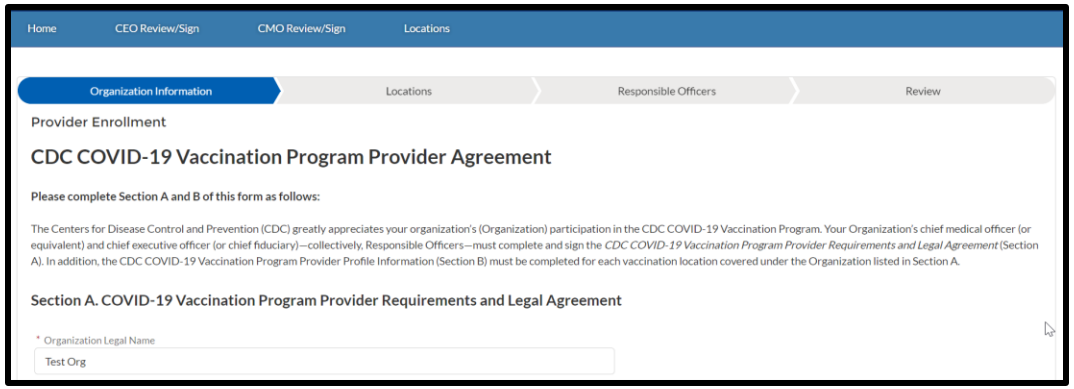
Step 3 of 9: Enter Your Organization Details



Once you begin Section A, you will be prompted to enter your **organization details** and indicate if your **organization is a redistribution participant**.

1. Populate **ALL REQUIRED ORGANIZATION DETAILS**
2. If your organization is a redistribution participant, select **YES** next to **REDISTRIBUTION PARTICIPANT**
3. If you select Yes, your **CEO and CMO** will be required to **SIGN AN ADDITIONAL AGREEMENT** indicating that they have reviewed the submitted information and signed the redistribution agreement.
4. Review all details entered
5. Click **NEXT**

Audience

Organization Administrator

Tips

You can pause and save your progress at any point before submitting Section A.

If you pause, you must logout before logging in and continuing your session.

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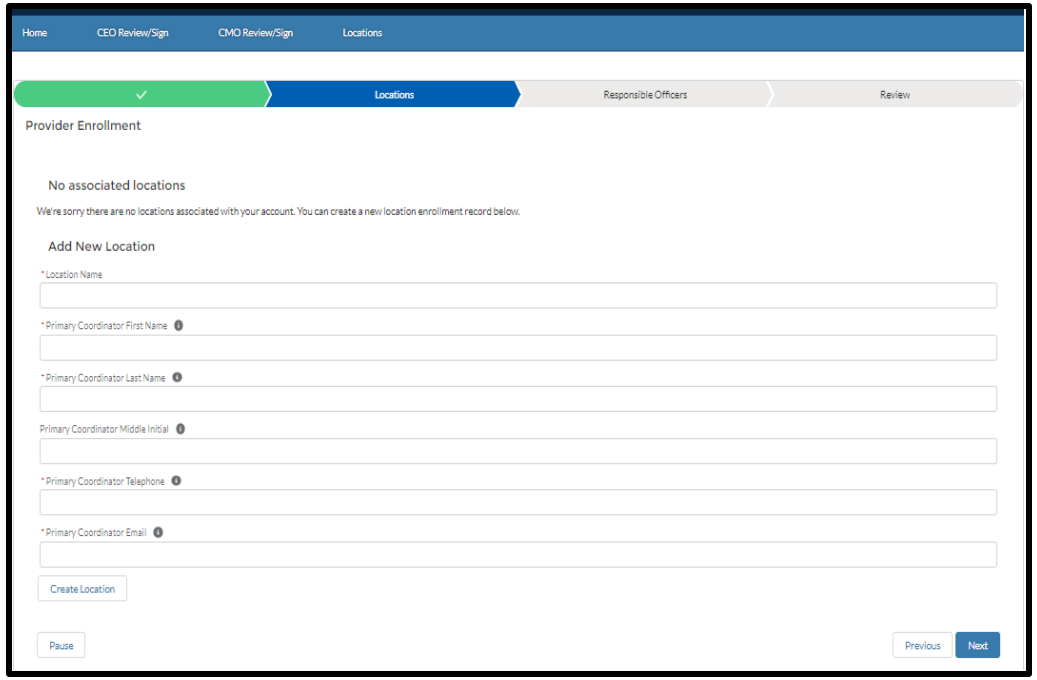
Step 4 of 9: Add Your Location(s) Details



After entering your organization's details, you will now be able to **ADD ONE OR MORE LOCATIONS** and their respective details.

On this page, you will see a list of **PENDING AND APPROVED LOCATIONS.**

1. Complete the information for the **FIRST LOCATION** in the organization
2. Click **CREATE LOCATION**
3. You will see the location details appear in the list of **PENDING LOCATIONS**
4. Repeat this process for each location you wish to add
5. Click **NEXT**

Audience

Organization Administrator

Tips

All locations within an organization must have the same CMO and CEO.

If a location has a different CMO or CEO, a unique Organization Administrator representing the organization will have to complete a separate Section A.

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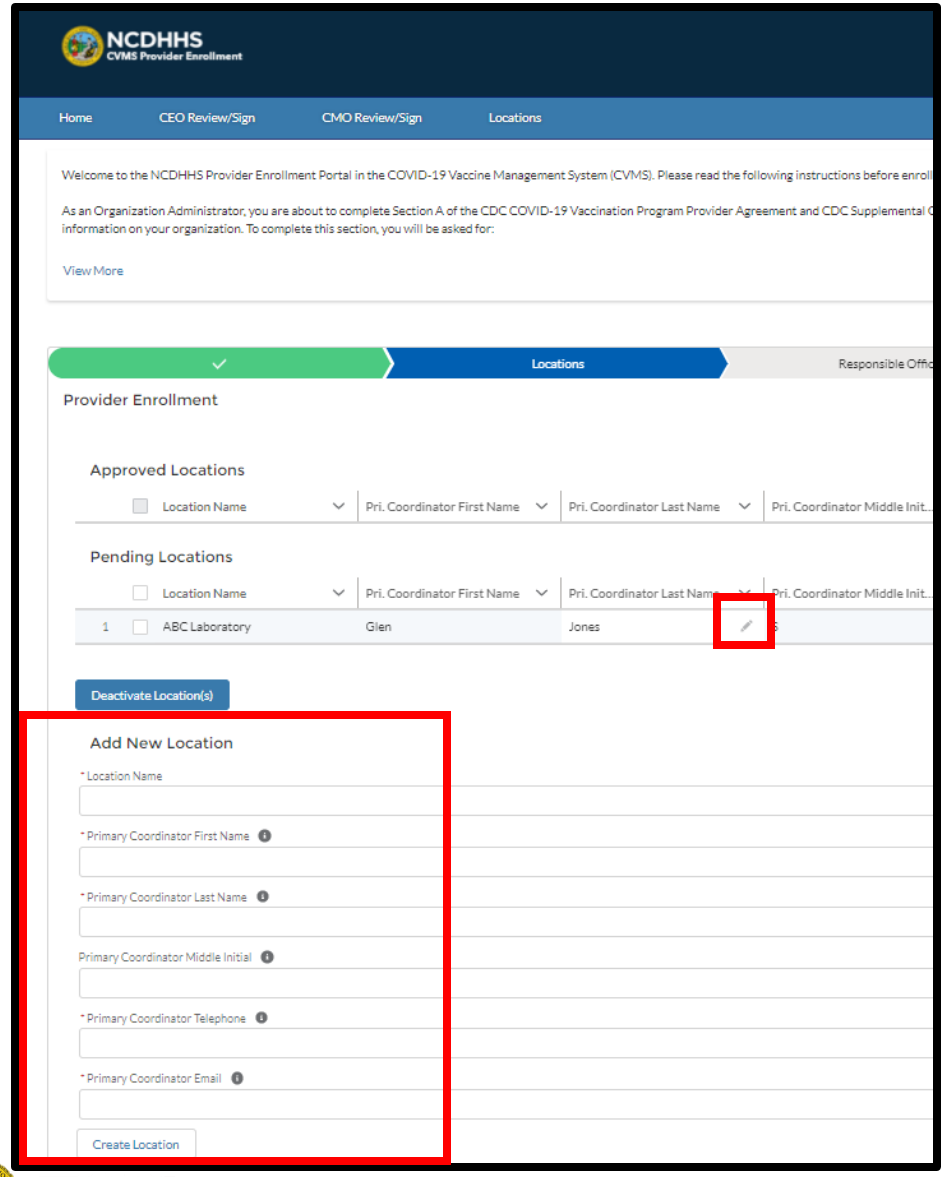
Step 5 of 9: Edit Your Location(s) Details



After adding a location, you are able to edit and update the information.

1. Locate the **LOCATION** you wish to edit
2. Click the **PENCIL ICON** next to the field you wish to update
3. Update the information
4. Review the information. Repeat for all details you wish to update.
5. Click **NEXT**

Audience

Organization Administrator

Tips

If you wish to manage your location(s) details after submitting Section A, review the **CVMS Provider Enrollment Account Management User Guide** located at [CVMS User Guides, Recorded Trainings and Upcoming Trainings | NC DHHS COVID-19](#).

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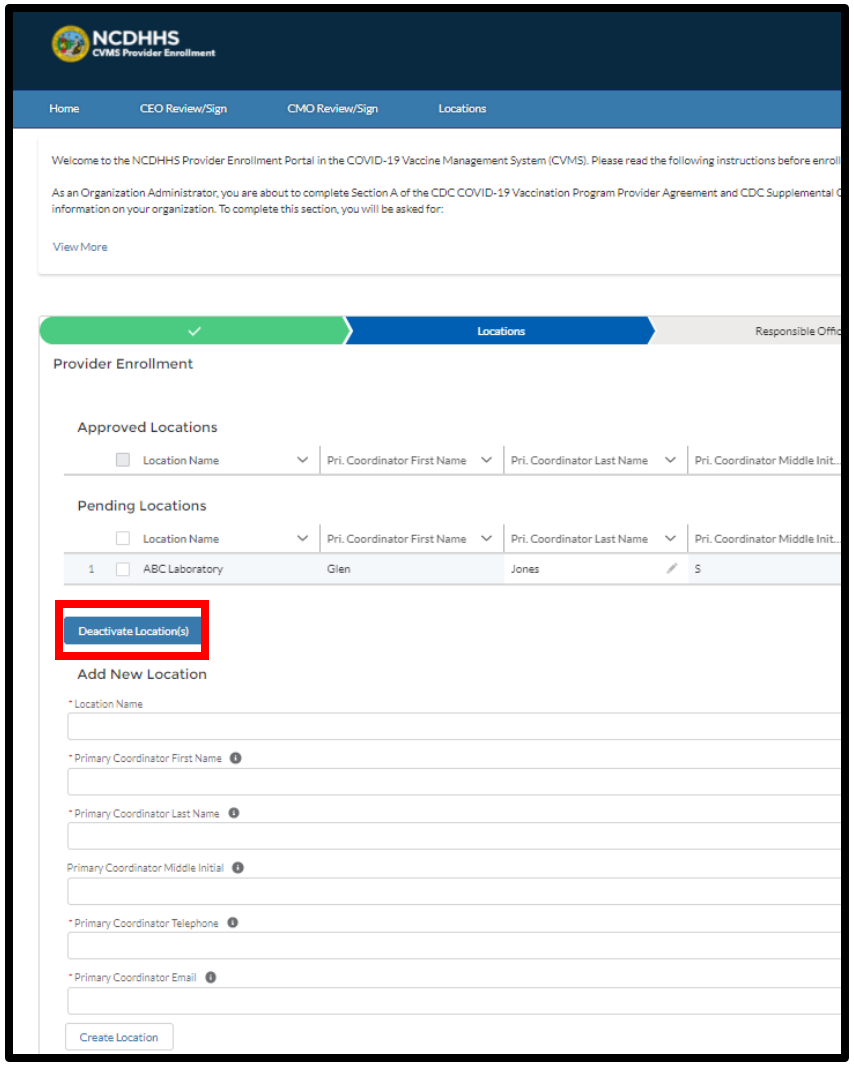
Step 6 of 9: Deactivate Your Location(s)



After adding a location, you can deactivate location(s). If you wish you manage your location(s) details after submitting Section A, review the **CVMS Provider Enrollment Location Management User Guide.**

1. Locate the **LOCATION** you wish to deactivate
2. Select the **CHECKBOX** for one or more locations
3. Review the locations you have selected to deactivate
4. Click the **DEACTIVATE LOCATION(S)** button
5. Click **NEXT**

Audience

Organization Administrator

Tips

Click **Previous** if you need to go back and edit a location.

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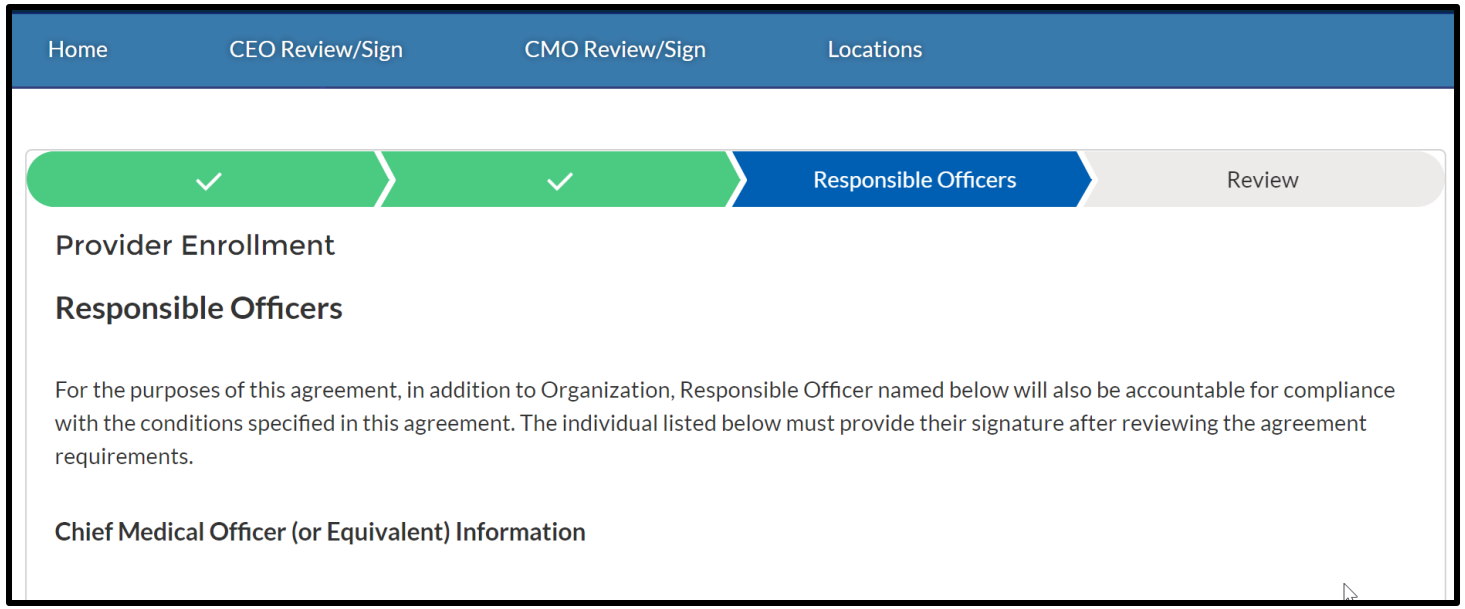
Step 7 of 9: Complete CMO Information

After adding your locations, you will enter your **CHIEF MEDICAL OFFICER** (CMO) Information on the Responsible Officers page.

At the bottom, you will see the box **SEND REQUEST FOR SIGNATURE NOW** checkbox. This will immediately generate an email to the CMO requesting their review and approval. **WE RECOMMEND THAT YOU DO NOT SELECT THIS BOX AT THIS TIME.**

If you do not select this checkbox, the CMO will receive an email once all Vaccine Coordinators submit the Section B flow for their location. This way, they review and sign the complete agreement at one time.

1. Enter **ALL CMO DETAILS**
2. Click **NEXT**



Audience

Organization Administrator

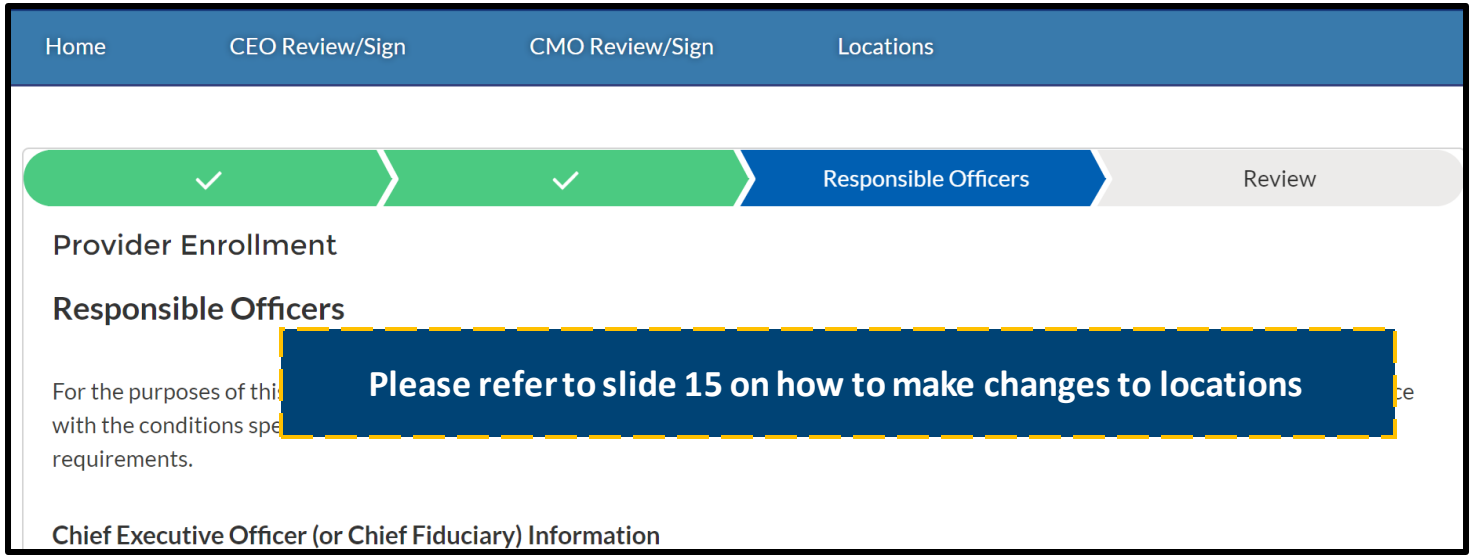
Step 8 of 9: Complete CEO Information

After entering the CMO details, you will be directed to enter your **CHIEF EXECUTIVE OFFICER** (CEO) Information on the Responsible Officers page.

You will see the same **SEND REQUEST FOR SIGNATURE** checkbox. This will immediately generate an email to the CEO requesting their approval and signature. **WE RECOMMEND THAT YOU DO <u>NOT</u> SELECT THIS BOX AT THIS TIME.**

If you do not select this checkbox, the CEO will receive an email once all Vaccine Coordinators submit the Section B flow for their location. This way, they review and sign the complete agreement at one time.

1. Enter **ALL CEO DETAILS**



Audience

Organization Administrator

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Step 9 of 9: Complete Section A

Once all CEO details are entered, you are ready to **COMPLETE SECTION A**.

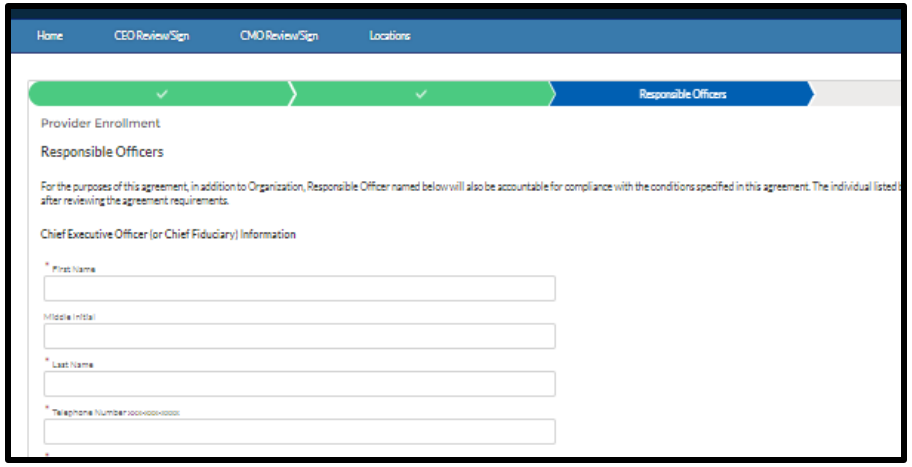
If you need to make any changes before completing Section A, use the **PREVIOUS BUTTON** to go back and **MAKE UPDATES**.

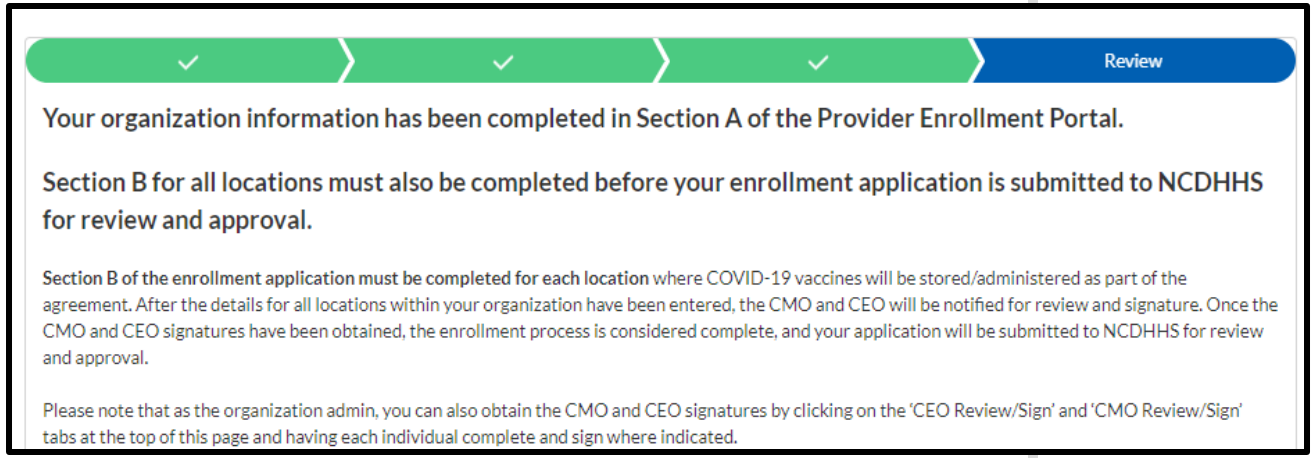
After submitting Section A, you will be reminded to complete Section B for all identified locations.

1. Confirm that **DETAILS ARE CORRECT**
2. Once the CEO page is complete, click **NEXT**
3. You will be directed to the **REVIEW PAGE**

Audience

Organization Administrator



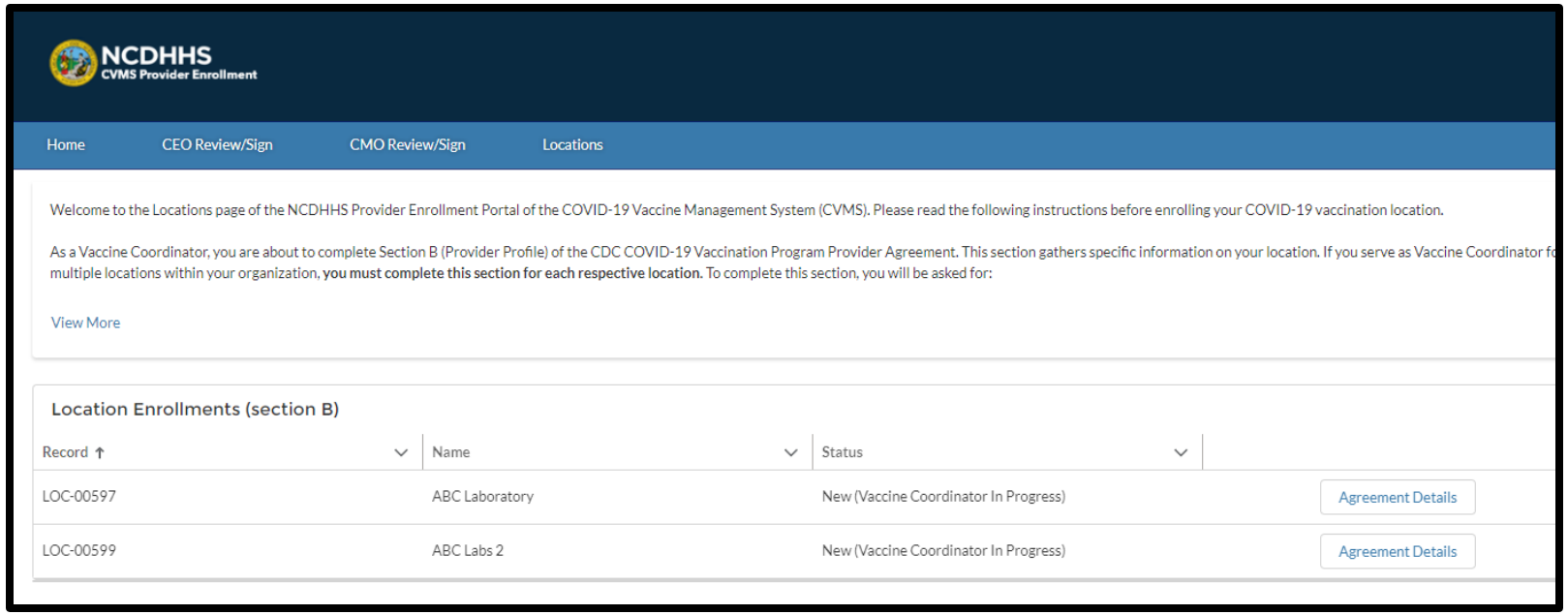


Steps After Completing Section A

Primary Vaccine Coordinator – Section B

If you are also the **PRIMARY VACCINE COORDINATOR** for the location in your organization, you can now begin Section B of the Provider Enrollment process.

For more guidance on how to complete Section B of the Provider Enrollment Process, please review **CVMS Provider Enrollment Vaccine Coordinator User Guide,** which is located on the NC Immunization Branch website: https://covid19.ncdhhs.gov/cvms-provider-enrollment-vaccine-coordinator-user-guide-0/download.



Audience

Organization Administrator

Vaccine Coordinator

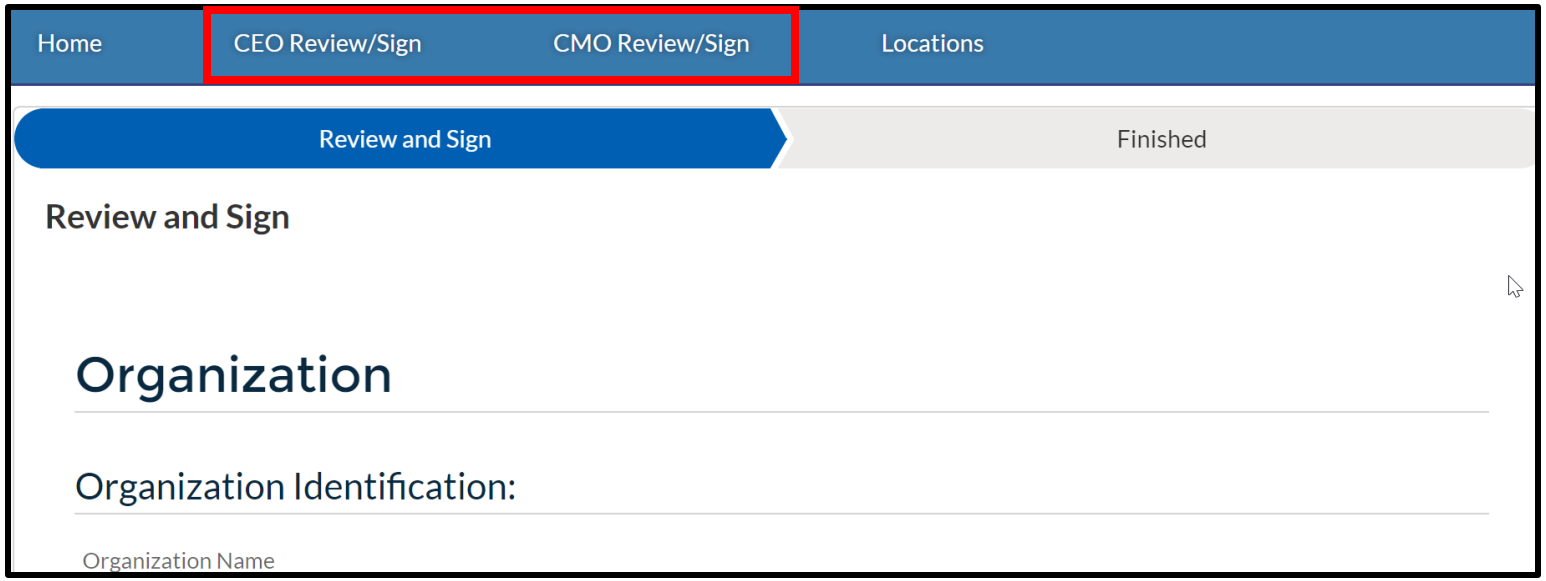
Tips

Review Slide 7 for details on activities each Role must complete in the Provider Enrollment Process.

CMO & CEO – Review & Sign the CDC COVID-19 Vaccination Program Provider Agreement

If you are also the CMO and / or CEO for your organization, you can now review and sign the CDC COVID-19 Vaccination Program Provider Agreement and the CDC Supplemental COVID-19 Vaccine Redistribution Agreement, if applicable.

For more guidance on how to complete these steps, please review **CVMS Provider Enrollment Responsible Officer User Guide ,** which is located on the NC Immunization Branch website: https://covid19.ncdhhs.gov/cvms-provider-enrollment-responsible-officer-user-guide-3/download.



Audience

CEO

CMO

Organization Administrator

Tips

Review Slide 7 for details on activities each Role must complete in the Provider Enrollment Process.

Organization Registration Status Notification

You will receive an **EMAIL NOTIFICATION** once the status of your organization changes to **APPROVED** or **REJECTED**. Rejected statuses will generate an email with the **REASON FOR REJECTION**.

Your organization can be approved after at least one location is approved and your Responsible Officer signatures have been captured. Organization Administrators and the Primary Vaccine Coordinator will receive an automatic email notification when an additional location is approved after the organization has already been approved. Please coordinate with all Primary Vaccine Coordinators to complete Section B fully.

Dear COVID-19 Vaccine Provider Applicant,

This memo confirms your enrollment in the Centers for Disease Control and Prevention (CDC) COVID-19 Vaccination Program in North Carolina and provides next steps for activation in the COVID-19 Vaccine Management System (CVMS). Your CDC COVID-19 Vaccination Program Provider Agreement and Provider Profile have been reviewed and accepted. Now that you have enrolled, you can complete the activation process in CVMS. **You do not have access to CVMS until you are enrolled AND you complete the activation process**. CVMS activation is required for all sites that will receive COVID-19 vaccine (either as direct allocation or transferred vaccine from another enrolled provider) but does not guarantee vaccine availability. If you have already started the activation process, please use the steps below to complete activation.

As a reminder, providers must be able to meet all participation requirements outlined in Section A of the CDC COVID-19 Vaccination Program Provider Agreement. Below is a summary of the information you provided and the status of each location:

Number of Locations requested: 2.
Number of Locations approved: 1.
Number of Locations rejected: 0.
Number of Practicing Providers requested: 1.
Number of Practicing Providers approved: 1.
Number of Practicing Providers rejected: 0.

Please ensure that any changes to Section B of your CDC COVID-19 Vaccination Program Provider Agreement and Provider Profile are updated in within 30 days. If there is a change to the signing Chief Medical Officer (or equivalent) and/or Chief Executive (or Fiduciary) Officer, the North Carolina Immunization Branch must be notified immediately by submitting a ticket to the CVMS Help Desk Portal (see instructions for registering below) and a new agreement must be issued.

Audience

Organization Administrator

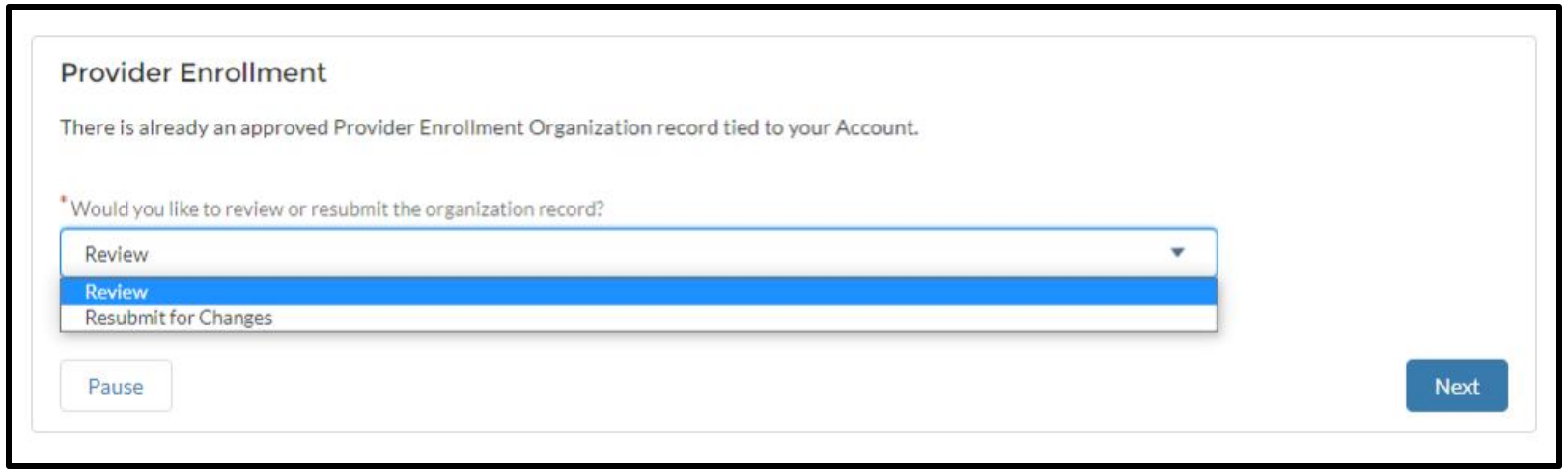
Tips

Check the spam/junk folder if an email is not received. Emails will be sent from the CVMS Enrollment team.

Update Section A After Submission

You will be able to **UPDATE SECTION A** after your organization's provider enrollment agreement has been approved. It is important to know that if you **RESUBMIT SECTION A**, your **CEO AND CMO WILL BE REQUIRED TO SIGN AGAIN** the CDC COVID-19 Vaccination Program Provider Agreement and the CDC Supplemental COVID-19 Vaccine Redistribution Agreement, if applicable. Your **ORGANIZATION** will also have to be **REAPPROVED**.

1. Log into the **CVMS PROVIDER ENROLLMENT PORTAL**
2. If you want to **REVIEW THE STATUS** of your Provider Enrollment Agreement, **SELECT REVIEW**
3. If you want to **MAKE UPDATES**, select **RESUBMIT FOR CHANGES**



Audience

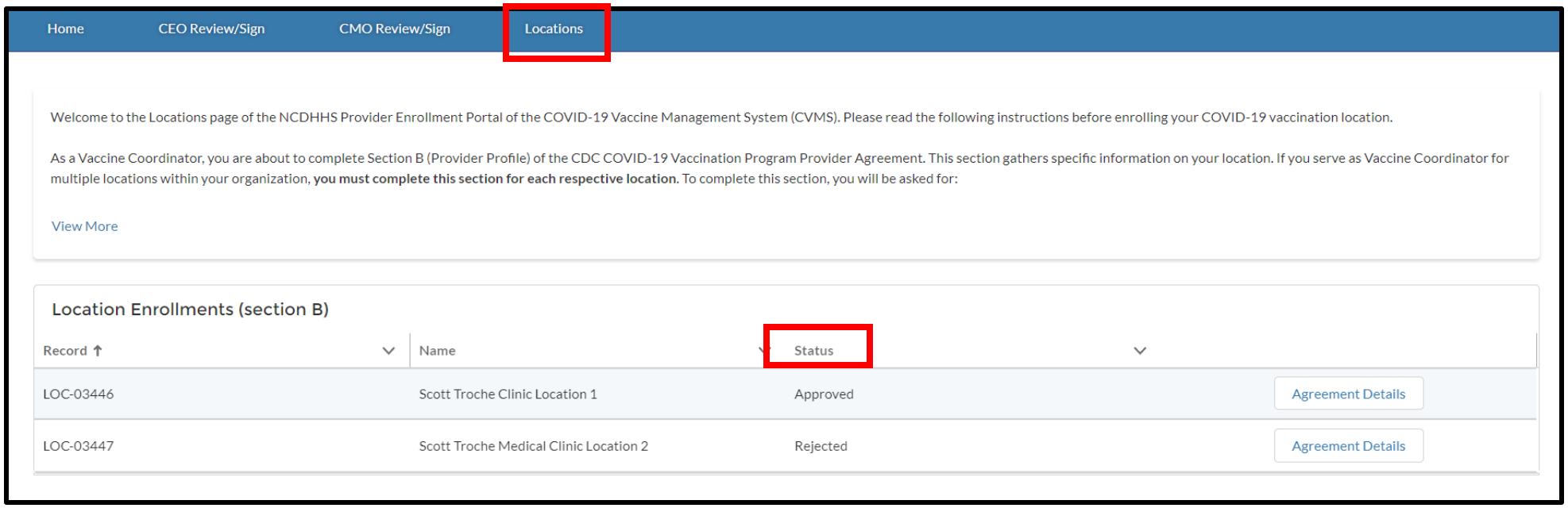
Organization Administrator

Checking the Registration Status of a Location

Step 1 of 2: How to check Provider Enrollment Location Registration Status

You will be able to review the registration status for each location within your organization. Please work with your Primary Vaccine Coordinators to complete your Provider Enrollment registration.

1. From your home page, click **LOCATIONS**
2. Review the **STATUS** for each location

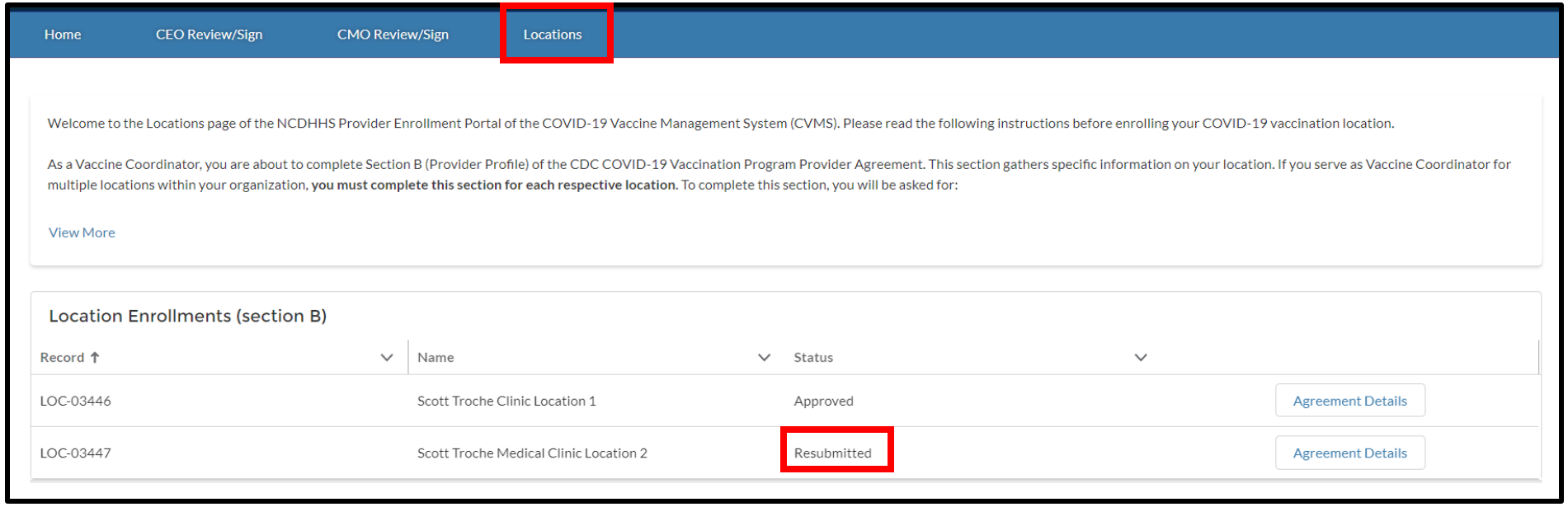


Audience

Organization Administrator

Step 2 of 2: Provider Enrollment Location Resubmitted Status

You will be able to see when a Primary Vaccine Coordinator has RESUBMITTED their Section B after rejection or approval.



Audience

Organization Administrator

Tips

When a location is rejected, you will be copied on the email to the Primary Vaccine Coordinator.

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Appendix

Organization Status Notification

The Organization Administrator, CEO, and CMO will receive an **EMAIL NOTIFICATION** once the status of the organization changes to **APPROVED** or **REJECTED**. Rejected statuses will generate an email with the **REASON FOR REJECTION**.

Organization Administrators and the Primary Vaccine Coordinator will receive an automatic email notification when an additional location is approved after the organization has already been approved. Please coordinate with all Primary Vaccine Coordinators to complete Section B fully.

Dear COVID-19 Vaccine Provider Applicant,

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As a reminder, providers must be able to meet all participation requirements outlined in Section A of the CDC COVID-19 Vaccination Program Provider Agreement. Below is a summary of the information you provided and the status of each location:

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Number of Practicing Providers requested: 1.
Number of Practicing Providers approved: 1.
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Please ensure that any changes to Section B of your CDC COVID-19 Vaccination Program Provider Agreement and Provider Profile are updated in within 30 days. If there is a change to the signing Chief Medical Officer (or equivalent) and/or Chief Executive (or Fiduciary) Officer, the North Carolina Immunization Branch must be notified immediately by submitting a ticket to the CVMS Help Desk Portal (see instructions for registering below) and a new agreement must be issued.

Directions for CVMS Help Desk Portal Registration
Before you can submit a help desk ticket, you must register for an account within the CVMS Help Desk Portal, following the below instructions:

1. Visit the CVMS Help Desk Portal

Audience

- Organization Administrator
- CEO
- CMO

Additional Notes

Key Items:

- **Hyperlinks** appear as light blue and will provide additional information or navigation.
- *** Asterisks** are used to denote required information.
- A Toggle can be clicked to see selectable options.
- A Pen can be clicked to make edits to the field.
- Previous Next Navigation Buttons can be clicked on to progress to the "next" or the "previous" step in a task.
- Pause A Pause button can be clicked if you wish to step away / and return to your form later. You will be prompted to review your previously entered data upon your return/ login.

Contact Information:

- All questions should be directed to the CVMS Help Desk Portal at https://ncgov.servicenowservices.com/csm_vaccine

Supported Web Browsers:

- Please use the latest version of Chrome, Firefox, Safari, or Edge Chromium browser to access CVMS.
- For more details on supported browsers, see **https://help.salesforce.com/articleView?id=getstart_browsers_sfx.htm&type=5**
- Note: Internet Explorer and Edge (Non-Chromium) are not supported.

User Guide Change Log

Version	Date of Change	Changes Made	Impacted Slides	Author
1	12/10/2020	• Original version		Kevin Kauffman
2	12/31/2020	• Removed link to the Provider Enrollment portal	4, 6	Simon Couderc
3	1/8/2021	• Removed any mention of the 2 CVMS Help Desk emails. Added CVMS Help Desk Portal information.	1, 2, 8, 21, 26, 27	Courtney Seward
4	1/13/2021	• Replaced screenshots with updated Provider Enrollment Portal branding	12, 15, 16, 23	Kechia Scott
5	2/11/2021	• Took out any mention of the covidhelp email	21, 26	Courtney Seward
6	3/9/2021	• Updated organization approval requirements	17-18 , 21, 25-27, 29	Azalea Troche
7	4/13/2021	• Updated text for Section A completion; added update on automatic email notification sent for approved locations	19, 23, 29	Azalea Troche