COVID-19 Vaccine Management System (CVMS)
Provider Enrollment Portal
Sign a Redistribution Agreement Job Aid

Please follow these instructions if your organization is already enrolled in the North Carolina COVID-19 Vaccination Program and needs to sign the CDC SUPPLEMENTAL COVID-19 VACCINE REDISTRIBUTION AGREEMENT.

The first step is for the user in your organization that has the ORGANIZATION ADMINISTRATOR profile to indicate that your organization is a REDISTRIBUTION PARTICIPANT (see Section A of this Job Aid). The next step is for the users in your organization with the CHIEF EXECUTIVE OFFICER (CEO) and/or CHIEF MEDICAL OFFICER (CMO) profiles to review and sign the CDC SUPPLEMENTAL COVID-19 VACCINE REDISTRIBUTION AGREEMENT (see Section B of this Job Aid).

A. User with an Organization Administrator Profile Prepares Application

1. Navigate to the CVMS Provider Enrollment Portal at https://covid-enroll.ncdhhs.gov/
2. Log in using your USERNAME (usually the email address you registered with) and PASSWORD

Tip: If your organization enrolled via REDCAP and you did not later create a login for the CVMS Provider Enrollment Portal, you must register for an account. Click REGISTER and enter your full name, and the email address associated with your Provider Enrollment Agreement from REDCAP. Create a password (12 characters, 1 uppercase letter, 1 lowercase letter, 1 special character, 1 number)

3. Select REVIEW under the question “Would you like to review or resubmit the organization record?”, then click Next

Note: If you do not see this page, you most likely are not the Organization Administrator. Contact the COVID-19 Vaccine Provider Help Center for assistance at (877) 873-6247 (option 1) to retrieve the name of this user.

4. Search for the field REDISTRIBUTION PARTICIPANT under the Organization Identification header, and confirm if it is set to NO (if set to YES, your organization already signed the REDISTRIBUTION AGREEMENT, and no further action is required)

5. Click HOME at the top of the page
6. Select RESUBMIT FOR CHANGES under the question “Would you like to review or resubmit the organization record?”, then click Next

7. Select YES at REDISTRIBUTION PARTICIPANT.

8. Click NEXT two times until you reach the RESPONSIBLE OFFICERS page and check the names and email addresses of the Chief Medical Officer and the Chief Executive Officer

Tip: Inform the CMO and CEO they will need to log-in to the CVMS Provider Enrollment Portal using the email addresses filled in on this page, and then electronically sign the Redistribution Agreement
9. Click NEXT two more times until you reach the NEXT STEPS page

B. User(s) with CEO and CMO Profiles Sign the Agreement

1. Navigate to the CVMS Provider Enrollment Portal at https://covid-enroll.ncdhhs.gov/

2. Log in using your USERNAME (email address) and PASSWORD

3. Navigate to the CEO Review/Sign tab if you are the CEO and/or the CMO Review/Sign tab if you are the CMO

4. Sign the re-submission of the enrollment application by DRAWING YOUR SIGNATURE in the box, click ADOPT AND USE, and click Next

5. Then sign the CDC Supplemental COVID-19 Vaccine Redistribution Agreement by DRAWING YOUR SIGNATURE in the box, click ADOPT AND USE, and click Next
6. The redistribution agreement is fully signed once both the CEO and the CMO electronic signatures have been added.

7. Users with an ORGANIZATION ADMINISTRATOR, CEO and CMO profiles will receive a confirmation by email once the agreement has been reviewed by the NCDHHS team.

If you have any questions or issues, please go to the CVMS Help Desk Portal at https://ncgov.servicenowservices.com/csm_vaccine and select the "Vaccine Provider" option to submit your question or issue.
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 to Friday: 7 am – 7 pm ET
   Saturday & Sunday: 10 am – 6 pm ET

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