

<b>Policy &amp; Procedure Title</b>	Vaccine Order Management-Provider Orders	<b>Issuing Date</b>	07/17/2012
<b>Policy &amp; Procedure Number</b>	13	<b>Revision Date</b>	02/18/2020
<b>Policy &amp; Procedure Approval Authority</b>	<i>Dave McConnick</i>		

### Policy Statement

Once enrolled, providers can place vaccine orders with the Immunization Division for any publicly funded vaccine using the Vaccine Ordering Management System, VOMS. The Immunization Division has undergone a reorganization within the department. There is now a Vaccine Ordering and Accountability Coordinator and a team of Regional Vaccine Ordering and Accountability Specialists. Their job is to validate providers orders, as well as verify vaccine accountability.

All persons who are responsible for ordering publicly funded vaccines in their facility will need to obtain VOMS access through CHIRP. New providers that do not have access to CHIRP must submit an Individual User Agreement form (State Form 52303) and a VOMS Individual User Access Form to obtain a username and password prior to being granted VOMS access.

Providers are required to notify the Immunization Division *immediately* when there are changes in the primary vaccine coordinator, the back-up coordinator, and/or the medical director. This includes the need to terminate VOMS accounts for a former employee within 24 hours.

Vaccine coordinators should request delivery during regular office hours. Vaccine shipments should be delivered when staff is available to unpack and store the vaccine properly. Shipment times should be updated at the time each vaccine order is submitted and should reflect any period of time the office will be closed, such as holidays, scheduled vacation, and change in hours of operation and/or lunch hour. Providers must be on site with appropriate staff available to receive vaccine at least one day a week other than Monday, and for at least four consecutive hours during that day.

### Vaccine Ordering Requirements

- A. All providers will follow the ordering requirements set by the Immunization Division.
  1. All providers will use Vaccine Ordering Management System, VOMS, to place all regular vaccine orders. The VOMS application will help providers order and manage all publicly funded vaccines efficiently.
  
- B. VOMS will maintain the following provider specific information. Providers can change the email address, phone and fax number in VOMS. Providers must contact the Immunization Division for all other changes at 800-701-0704 or email at [immunize@isdh.in.gov](mailto:immunize@isdh.in.gov).
  1. Facility Name
  2. Address, City, Zip Code

*Providers should verify this information each time a vaccine order is submitted. If this information changes at any time, providers should submit the Provider Change of Contact Information Form. If the delivery days or times have changed, correct it, and once you submit your order, the information will be saved.*



**Create Order**

Organization (IRMS): NM PEDIATRICS      First Name: SARA  
 Facility: NM PEDIATRICS                      Middle Name:  
 Phone Number: (559)325-1102              Last Name: ADAMS  
 Phone    Address: 1005 SOMEWHERE ST  
 Extension:                                      City: SANTA FE  
 Email:    State: NM  
     Zip: 87508

Monday:  09:00 - 12:00       13:00 - 17:00      Tuesday:  09:00 - 12:00       13:00 - 17:00  
 Wednesday:  09:00 - 12:00       13:00 - 17:00      Thursday:  09:00 - 12:00       13:00 - 17:00  
 Friday:  09:00 - 12:00       13:00 - 17:00

PIN: 100801                                      Instructions:  
 Order Date: 04/28/2014                      Order Status: In Progress  
 Submitter: LINDA PURSLEY (LINDA RC)  
 Comments:  
 Inventory Last Submitted: 04/28/2014  
 Order Set: VFC ORDER SET 1 / Distributor

Inventory Transaction Report | Lot Number Summary | Edit Temperature

Order Frequency: Twice Monthly      Order Timing: 15th to End of Month  
 Order Schedule:

Vaccine	Description	Dose Used Last Month	Physical Inventory	Recommended Quantity	Order Quantity	Urgent	Priority Reason	Comments
DTaP	DAPTACEL®	1	9	0	10	<input type="checkbox"/>	--select--	
DTaP	INFANRIX®				0	<input type="checkbox"/>	--select--	

C. Submitting vaccine orders

1. Providers are responsible for providing all required data in VOMS in order for a vaccine order to be successfully submitted and approved. Inventory MUST be submitted before the vaccine order will be approved.
2. Providers can submit **one** regular order via VOMS and **one** influenza order at any time during the calendar month (i.e. if you ordered Jan 30<sup>th</sup>, you can order Feb 1st).
3. Orders will be reviewed and approved in VOMS daily by the Immunization Division Vaccine Management staff. Delivery can be expected within 7 to 10 business days from the time the vaccine order was submitted. Varicella and Proquad vaccine orders are shipped directly from the manufacturer and may take up to 14 business days for delivery.

*PLEASE NOTE: Any vaccine order may be delayed due to extenuating circumstances.*

4. To avoid vaccine wastage and to keep the most appropriate vaccine inventory on hand, the Immunization Division strongly recommends that providers watch inventory closely and order to maintain a 30-45 day supply (roughly 5 weeks) of vaccine.

**Providers must submit an inventory monthly, even if a vaccine order is not placed**

**Receiving Vaccine Orders:**

Once proper cold chain has been verified, the vaccine order must be received in VOMS. Do NOT manually enter inventory in VOMS when receiving an order.

*Failure to follow procedures for receiving vaccine orders will result in having large discrepancies in inventory and may result in suspension from the VFC program.*



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**References and Resources**

Sample Vaccine Order Form (State Form 52775 R4 9-10)

Individual User Agreement (State Form 52303 R4 8-16)

**Revision History**

07/17/2012, Created

03/01/2014, Revised

04/01/2017, Revised

02/18/2020, Revised