

Vaccine Transfers in the Vaccine Allocation and Ordering System (VAOS)

Last Updated: November 14th, 2023



Overview

Purpose

- The Vaccine Transfers job aid provides step-by-step instructions for Texas Vaccines for Children (TVFC) and Adult Safety Net (ASN) providers to enter Vaccine Transfer Requests and generate a Transfer Report in the Vaccine Allocation and Ordering System (VAOS).
- The job aid includes relevant transfer requirements and coordination instructions.

Audience

- TVFC and ASN providers who access VAOS



Vaccine Transfers in VAOS

1. Transfer Requirements
2. Submitting a Transfer Request
3. Transfer Authorization Form (EC-67)
4. Transfer Reports



VAOS Tips & Tricks

Keep in mind...



VAOS works best with **Chrome** as your browser.



Please **check your Spam** folder for emails from noreply@salesforce.com as needed. You may also receive emails from CDCCustomerService@McKesson.com.

If possible, flag these addresses as safe-senders to avoid emails being sent to Spam.



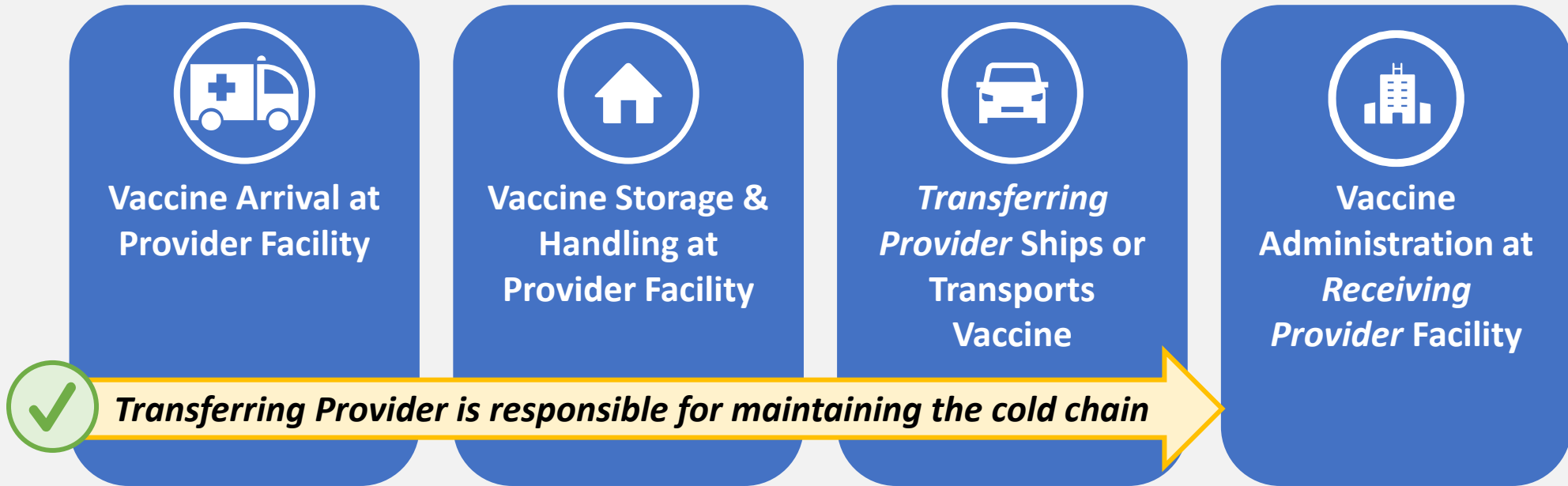
Regardless of the number of facilities you are associated with, you will have **one set of login credentials**.

1. Transfer Requirements



Request to Transfer Vaccine

Before requesting to transfer vaccines, note that it is the responsibility of the *Transferring Provider* to ship or physically transport the vaccine. *Transferring Providers* are responsible for any costs incurred in transferring vaccines and should consider the transport of ancillary supplies.



Before requesting a transfer, **verify that the facility you want to receive the vaccine is an approved provider.** TVFC/ASN vaccines may only be transferred to an approved TVFC/ASN Provider.

Vaccine Transfer Checklist

Preparing to Request a Transfer

Make sure you have this information ready before beginning your vaccine transfer request.

Ensure You Have the Following:

- Transferring Provider PIN and Receiving Provider PIN
- Reason for transfer
- Vaccines to transfer
- Lot numbers for the vaccines to transfer
- Quantities to transfer

Before submitting a request to transfer, you should coordinate with the *Receiving Provider* so that you can submit their correct information – **including their 6-digit Provider PIN.**

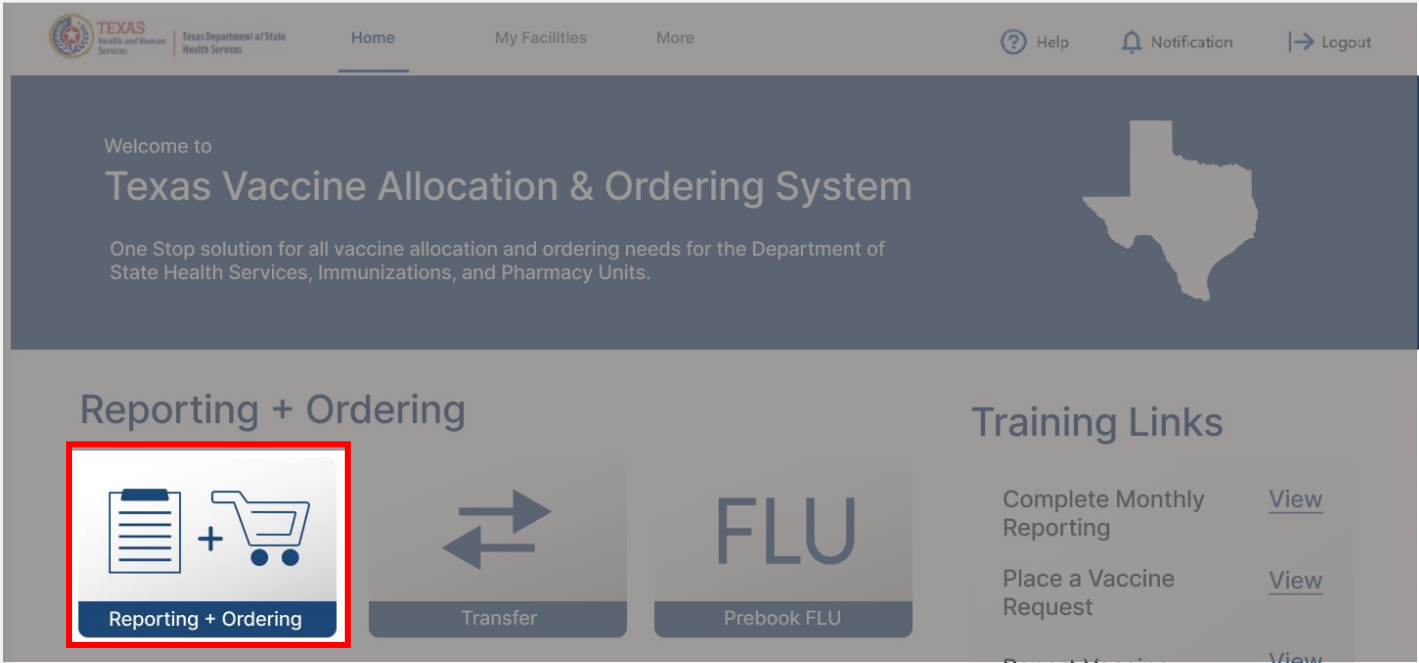
2. Submitting a Transfer Request

Entering Transfer Requests in VAOS



Navigate to the VAOS Provider Portal

Log into your VAOS Provider Portal and navigate to the **Reporting and Ordering** tile.



Navigate to Reporting

1. Select the facility you wish to transfer vaccine from by clicking the drop-down menu under ***Ordering facility**.
2. Verify your shipping information and click Continue.

Open Ordering

FACILITY SHIPMENTS REPORTING INVENTORY INPUT ORDER ORDER REVIEW CONFIRMATION

1. Select Facility and Upload Temperature Log

Please select your facility name and upload your temperature log to begin the reporting process.
Please Note: All fields marked with * are required.

* Ordering facility
ZZ TEST Data Purge

Temperature Log:
Upload Files Or drop files

2. Verify Shipping Information

Please confirm that you have complied with the required conditions for your vaccine order that are listed below.
If there are changes needed to address or normal hours of operation, please reach out to the enrollment team at VacCallCenter@dshs.texas.gov.

Shipping Address

Shipping Address: Preston Smith Road, Odessa, TX 79762

Please list all dates in the next two months when your office will be closed outside of your normal business hours:

I verify that the above shipping address and my hours of operation are correct; and that staff are available to receive and store vaccine deliveries promptly during these times.

Back Continue

NOTE: The **Continue** button will be greyed out until you verify that your shipping information is correct.

Navigate to Reporting

Click **Continue** until you reach the Reporting page of the Ordering and Reporting module. Click the **Transfer** tab.

✓ ✓ **REPORTING** INVENTORY INPUT ORDER ORDER REVIEW CONFIRMATION

Admin Loss **Transfer**

TVFC/ASN/FLU Vaccine Transfer Reporting

1. Communicate with the receiving provider. Confirm the address and hours of operation before shipping any vaccine.
2. Enter the six digit PIN of the receiving provider.
3. From the vaccine in your inventory, enter the number of doses for each lot number and the associated reason for transfer.
4. Select the checkbox on the top left of the list view to select and edit more than one record.
5. Add any additional details.
6. Click Save.

* Select Transferring provider: Choose Transferring provider

* Enter Receiving provider PIN: Enter Receiving provider PIN

Additional Details: Enter Additional Details

<input type="checkbox"/>	Inventor... ▾	Vaccine ▾	Vaccine Inte...	NDC	Lot Number	Expiration D...	Quantity On...	Quantity To...	Select Reason	Selected Rea...	Explanation
--------------------------	---------------	-----------	-----------------	-----	------------	-----------------	----------------	----------------	---------------	-----------------	-------------

Back Continue

Vaccine Transfer Request

1. Select the transferring Provider from the drop-down menu under **Select Transferring Provider**. The current inventory will populate at the bottom of the screen after the facility is selected.
2. Enter the 6-digit PIN of the receiving provider under **Enter Receiving Provider PIN**. If the PIN is invalid, you will receive an error message.
3. If needed, enter additional details.

TVFC/ASN/FLU Vaccine Transfer Reporting

1. Communicate with the receiving provider. Confirm the address and hours of operation before shipping any vaccine.
2. Enter the six digit PIN of the receiving provider.
3. From the vaccine in your inventory, enter the number of doses for each lot number and the associated reason for transfer.
4. Select the checkbox on the top left of the list view to select and edit more than one record.
5. Add any additional details.
6. Click Save.

* Select Transferring provider

ZZ TEST Data Purge

* Enter Receiving provider PIN

999988

Additional Details

Short-Dated Vaccines

Vaccine Transfer Request (Continued)

- For each inventory record you are transferring, select the check mark on the left side of the screen. Utilize the top check mark to select all inventory if you are transferring your entire stock to the provider.
- The **Quantity to transfer** will be pre-populated with your total quantity on hand. Ensure you edit the quantity if you are not transferring the entire quantity on hand. You will not be able to transfer more doses than your quantity on hand.
- Select the reason for the transfer under **Select Reason**.
 - NOTE: If you select **Other** as the transfer reason, a detailed reason is required under the **Explanation** column.
- Click **Save**. If you do not see the save button, that is because no changes were made to the Quantity to Transfer or Select Reason fields.

1

	<input checked="" type="checkbox"/>	Inventory ...
1	<input checked="" type="checkbox"/>	VI-0282815
2	<input checked="" type="checkbox"/>	VI-0282811
3	<input checked="" type="checkbox"/>	VI-0282857
4	<input checked="" type="checkbox"/>	VI-0282915
5	<input checked="" type="checkbox"/>	VI-0282858
6	<input checked="" type="checkbox"/>	VI-0282859

	<input type="checkbox"/>	Inventory ...
1	<input type="checkbox"/>	VI-0282815
2	<input checked="" type="checkbox"/>	VI-0282811

2

	<input type="checkbox"/>	Inventory ...	Vaccine	Vaccine Intent...	NDC	Lot Number	Expiration Date	Quantity On H...	Quantity To Transfer	Select Reason	Selected Reason
1	<input type="checkbox"/>	VI-0282815	*Fluarix Quad ...	PED	58160-0896-52	635434	04/09/2022	58	58		
2	<input checked="" type="checkbox"/>	VI-0282811	*FLUARIX, (FL...	PED	58160-0898-52	2342341	04/09/2022	63	50		

3

Quantity On H...	Quantity To Transfer	Select Reason
58	58	
63	50	<div style="border: 2px solid red; padding: 5px;"> Short-Dated Vaccine Withdrawal from the TVFC/ASN/FLU Program Other </div>

4

	<input type="checkbox"/>	Invent...	Vaccine	Vaccine In...	NDC	Lot Number	Expiration Date	Quantity ...	Quantity T...	Select Reason	Selected Reason	Explanation
1	<input type="checkbox"/>	VI-0448931	ActHib SD...	PED	49281-05...	TT546546	10/13/2062	886	886			
2	<input checked="" type="checkbox"/>	VI-0449031	ActHib SD...	PED	49281-05...	UJ652AAA	10/15/2024	413	100		Other (please specify)	Stora...
3	<input type="checkbox"/>	VI-0448998	ActHib SD...	PED	49281-05...	UJ649AAA	10/15/2024	431	431			
4	<input type="checkbox"/>	VI-0448973	ActHib SD...	PED	49281-05...	UJ642AAA	10/15/2024	444	444			
5	<input type="checkbox"/>	VI-0448970	ActHib SD...	PED	49281-05...	UJ740AAA	10/15/2024	441	441			
6	<input type="checkbox"/>	VI-0448957	ActHib SD...	PED	49281-05...	UJ614ABA	10/15/2024	453	453			
7	<input type="checkbox"/>	VI-0449051	Adacel PF...	ADU	49281-04...	U7528BA	10/15/2024	431	431			
8	<input type="checkbox"/>	VI-0541178	Adacel PF...	ADU	49281-04...	Ty123456	03/01/2025	9	9			
9	<input type="checkbox"/>	VI-0628940	Adacel PF...	PED	49281-04...	Ty123456	03/01/2025	860	860			
10	<input type="checkbox"/>	VI-0624249	Adacel PF...	PED	49281-04...	TestPDV7...	07/31/2024	19	19			
11	<input checked="" type="checkbox"/>	VI-0479094	Adacel PF...	PED	49281-04...	TyTest111	04/14/2023	1	1		Short-Dated Vaccine	

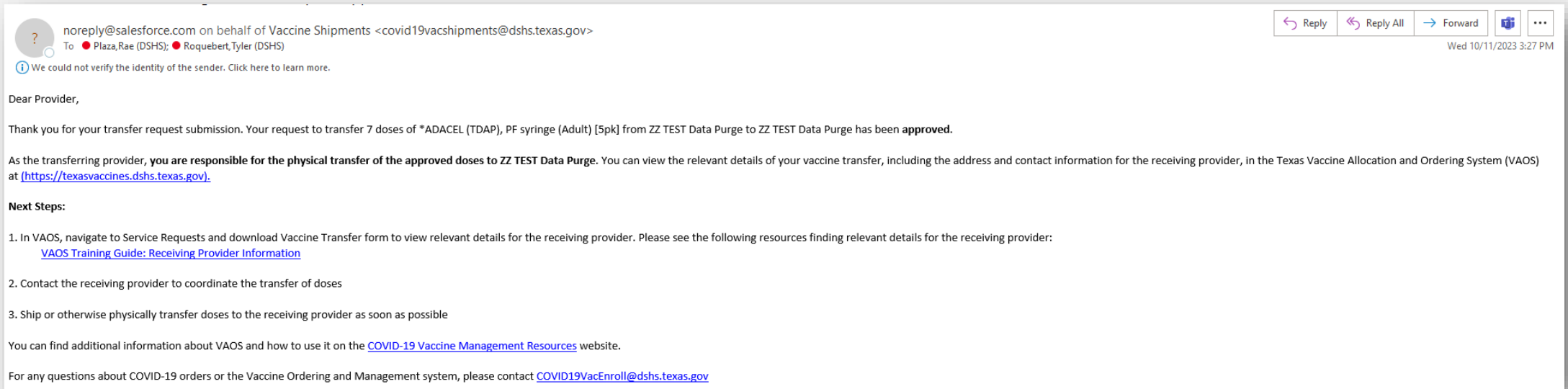
Vaccine Transfer Request (Continued)

1. Once your transfer request has been saved, your Responsible Entity (RE) will approve or deny your request within 14 days. **Do not coordinate the physical transfer until the transfer request has been approved.**
2. You can view submitted Transfers by selecting Service Requests on the Accounts module.

The screenshot displays the Texas Vaccine Allocation & Ordering System interface. The top navigation bar includes the Texas Department of State Health Services logo, a search icon, and a user profile for 'andy.doran'. The main header area says 'Welcome to Texas Vaccine Allocation & Ordering System' and describes it as a central system for vaccine allocation and pharmacy ordering. Below this, a breadcrumb trail 'Accounts > SQA Test Facility' is highlighted with a red box, followed by 'Service Requests (Facility)'. Below the breadcrumb, it shows '10 items • Updated a few seconds ago'. The interface also features a 'New' button and icons for settings, refresh, and filter. At the bottom, a table header is visible with columns for 'Service Request Name', 'Record Type', and 'Created Date'.

Provider E-Mail Notification

When a transfer is **approved**, the **primary & backup vaccine coordinators at the *transferring provider*** will receive an email notification.



The screenshot shows an email interface with the following content:

From: noreply@salesforce.com on behalf of Vaccine Shipments < covid19vacshipments@dshs.texas.gov >
To: Plaza, Rae (DSHS); Roquebert, Tyler (DSHS)
We could not verify the identity of the sender. Click here to learn more.

Dear Provider,

Thank you for your transfer request submission. Your request to transfer 7 doses of *ADACEL (TDAP), PF syringe (Adult) [5pk] from ZZ TEST Data Purge to ZZ TEST Data Purge has been **approved**.

As the transferring provider, **you are responsible for the physical transfer of the approved doses to ZZ TEST Data Purge**. You can view the relevant details of your vaccine transfer, including the address and contact information for the receiving provider, in the Texas Vaccine Allocation and Ordering System (VAOS) at (<https://texasvaccines.dshs.texas.gov>).

Next Steps:

1. In VAOS, navigate to Service Requests and download Vaccine Transfer form to view relevant details for the receiving provider. Please see the following resources finding relevant details for the receiving provider:
[VAOS Training Guide: Receiving Provider Information](#)
2. Contact the receiving provider to coordinate the transfer of doses
3. Ship or otherwise physically transfer doses to the receiving provider as soon as possible

You can find additional information about VAOS and how to use it on the [COVID-19 Vaccine Management Resources](#) website.

For any questions about COVID-19 orders or the Vaccine Ordering and Management system, please contact COVID19VacEnroll@dshs.texas.gov

Wed 10/11/2023 3:27 PM

Receiving providers do not need to confirm receipt of the transfer in VAOS. The inventory will update automatically.

3. Transfer Authorization Form



TVFC/ASN Vaccine Transfer Authorization Form

Once a transfer is submitted, you or your RE can download the Vaccine Transfer Authorization Form (EC-67) in VAOS with all the transfer information pre-populated.

In the case you need to access a blank form, navigate to the TVFC Program Landing Page on the DSHS website. Go to **Forms and Publications**. Scroll down to form EC-67, **Vaccine Transfer Authorization Form**.

Home > Immunizations > Texas Vaccines for Children > Forms & Publications - Texas Vaccines for Children

Forms & Publications - Texas Vaccines for Children

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TVFC Forms

- [Texas Vaccines for Children Provider Manual](#)
- [Vaccine Inventory, Storage, and Reporting](#)
- [Patient Eligibility / Referral](#)
- [Provider Enrollment and Withdrawal](#)

Vaccine Inventory, Storage, and Reporting

Stock Number	Title
C-33	Monthly Biological Report (PDF)
EC-68-1	Pediatric Biological Order Form (PDF)
C-88	Combined Tally and Physical Inventory (XLS)
E11-14498	Vaccine Management Plan Templates
EC-67	Vaccine Transfer Authorization Form (PDF)

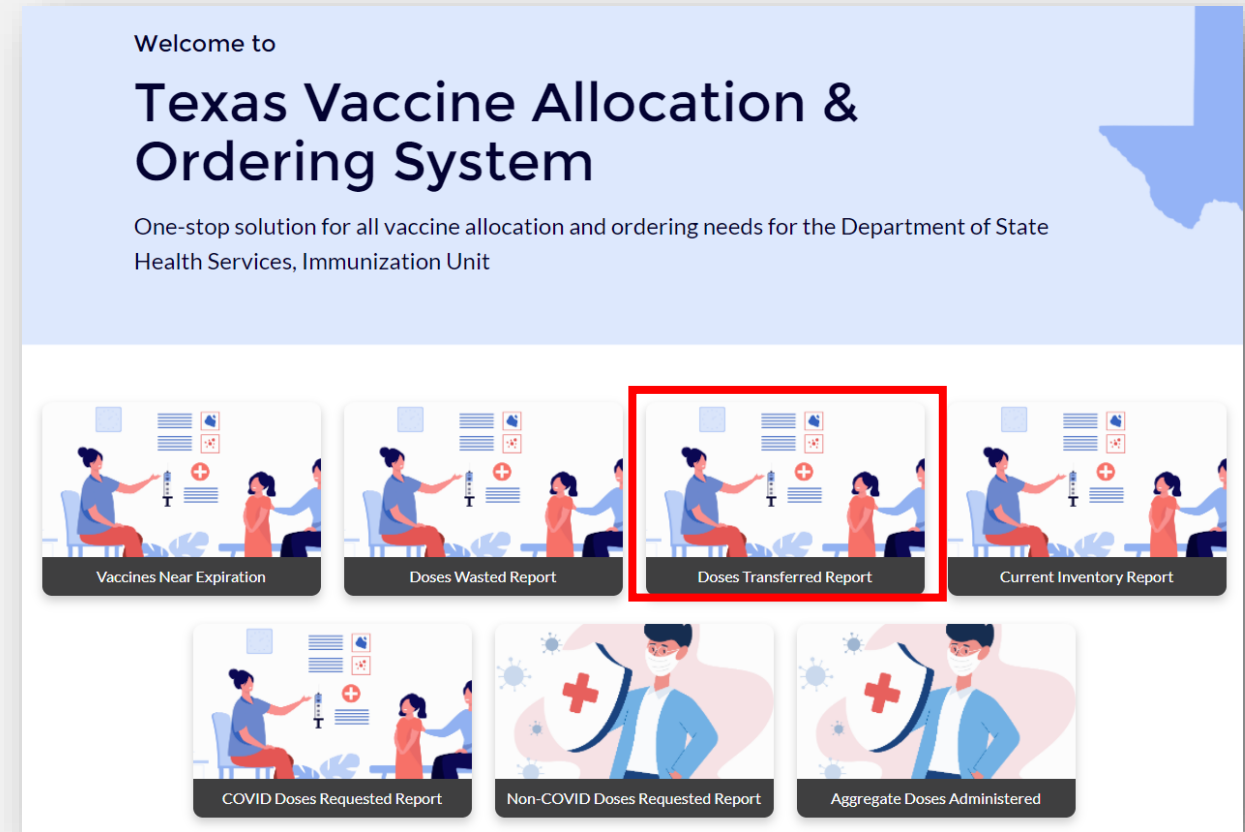
4. Transfer Reports

Generating a Report of Previous Transfers in VAOS



Navigate to Reports

1. Login to your VAOS Provider portal and navigate to the **Reports** tab.
2. Select the **Doses Transferred Report** tile.



Select Report Dates

1. Enter the **date range** you would like the report to capture.
2. Select **Fetch**.

Please Select Date Range to fetch Provider Doses Transferred Report

Start Date End Date

PIN	Provider	NDC	Intent	Lot Number	Expiration Date	Vaccine Group	Vaccine Description	Receiving Provider PIN	Receiving Provider Name	Quantity Sent	Transfer Status	Date
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View and Export Shipment Record

1. Your report will populate in a table containing data from the date range you selected.
2. Select **Download Report** to export your report to a spreadsheet.

Please Select Date Range to fetch Provider Doses Transferred Report

Start Date: 03/01/2021 End Date: 05/21/2021 Fetch **Download Report** 2

PIN	Provider	NDC	Intent	Lot Number	Expiration Date	Vaccine Group	Vaccine Description	Receiving Provider PIN	Receiving Provider Name	Quantity Sent	Transfer Status	Date
300018		80777-0273-99	ADU	022M20A		COVID	COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose			20	New	20210519
A300425		80777-023-12	ADU	022M20A		COVID	COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose			10	New	20210518
A300425		80777-0273-99	ADU	022M20A		COVID	COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose			10	New	20210517
A300425		80777-023-12	ADU	022M20A		COVID	COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose			10	New	20210518
A300425		80777-0273-99	ADU	022M20A		COVID	COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose			10	New	20210517
A300425		80777-0273-99	ADU	022M20A		COVID	COVID-19, mRNA, LNP-S, PF, 100 mcg/0.5 mL dose			25	New	20210517