

IHS Supplemental Redistribution Guidance for the CDC COVID-19 Vaccination Program

This document provides supplemental guidance to the *CDC COVID-19 Vaccine Redistribution Agreement for Tribal Health Programs and Urban Indian Organizations – Vaccines Coordinated through IHS*. The requirements included in this guidance should be considered when documenting COVID-19 vaccine redistribution for facilities operated by the IHS, Tribal Health Programs, and Urban Indian Organizations.

The facility conducting redistribution (the sending facility) must sign (1) *CDC COVID-19 Vaccine Redistribution Agreement for Tribal Health Programs and Urban Indian Organizations – Vaccines Coordinated through IHS*, and (2) the *IHS Supplemental Redistribution Information Worksheet*. Also, the receiving facility must sign *CDC COVID-19 Vaccination Program Provider Profile Information* form (Section B of the *CDC COVID-19 Vaccination Program Tribal Health Program or Urban Indian Organization Agreement – Vaccines Coordinated through IHS* or *COVID-19 Vaccination Program for IHS-operated Facilities*). The Redistribution Agreement is required to be complete prior to redistribution. There are two redistribution scenarios:

- IHS, Tribal Health Programs, and Urban Indian Organizations are allowed to redistribute vaccine to IHS, other Tribal Health Programs and Urban Indian Organizations (I/T/U) in the vaccination program coordinated through IHS, after notification to the IHS National Supply Service Center (NSSC) and if validated cold-chain procedures are in place in accordance with the manufacturer's instructions and CDC's guidance on COVID-19 vaccine storage and handling.
- If the Tribal Health Programs and Urban Indian Organization intends to redistribute to providers not being coordinated through IHS, such redistribution may only occur after notification to IHS and approval by the relevant jurisdiction's immunization program.

Redistribution Considerations

- Because of sensitive cold-chain requirements, the I/T/U facilities should closely coordinate transport and delivery with the receiving I/T/U facility to minimize vaccine loss due to temperature excursions.
- Redistribution costs are the responsibility of the receiving facility. Ultimately, the facility requesting the vaccine is responsible for obtaining the vaccine, though the redistribution (sending) facility can coordinate and assist with packing and transport, if desired and able.
- Vaccine will only be redistributed according to manufacturer guidance.
- Vaccine will only be redistributed via local personnel trained in vaccine cold-chain management and transport.
- Vaccine will not be redistributed via commercial couriers.
- The receiving facility is responsible for ensuring:
 - Transport of vaccine in appropriate containers and packing.
 - Appropriate monitoring of temperature during transport.
 - Considerations of a backup plan in the case of unexpected circumstances (vehicle trouble or other).

Redistribution Requirements

- The I/T/U facility redistributing (sending) vaccine and appropriate ancillary kit must submit an email notification to the [Area Vaccine Point of Contact \(AVPOC\)](#) containing the following documents. The AVPOC will upload the following documents to the [VTF CDC Agreements](#) folder in ICS SharePoint and email them to NSSC at: IHSCOVIDVaccine-Distribution@ihs.gov.
 - Completed *CDC COVID-19 Vaccine Redistribution Agreement for Tribal Health Programs and Urban Indian Organizations – Vaccines Coordinated through IHS*; agreement is to be completed by the sending facility.
 - Completed *IHS Supplemental Redistribution Information Worksheet* including the following required information: vaccine, manufacturer, lot numbers, initial expiration, any modified expiration due to storage conditions, number of vaccine doses, and matching ancillary kits (and adjuvant or diluent, if appropriate), as well as dates and times of redistribution and sending and receiving locations and the VTrckS Partner Order Portal (VPoP) PIN. The attached *IHS Supplemental Redistribution Information Worksheet* includes the required information and a checklist for redistribution.
- Inventory will be adjusted by the sending and receiving I/T/U facility to reflect the inventory change and details of the transfer in the VPoP.
- Records must be maintained by sending facility for six (6) years.

IHS COVID-19 Vaccine Supplemental Redistribution Information Worksheet

Redistribution (Sending) Facility:	Provider PIN:
Receiving Facility:	Provider PIN:

Transport Logistics:

Redistribution Date:	Redistribution Time:
Point of Contact (POC)/ arrangements made with:	POC Contact info (office or cell phone number):

Redistribution Plan (e.g., flight number, pick up/delivery time or location, etc.):
Planned Vaccine Temperature During Transport (check one): <div style="display: flex; justify-content: space-around; width: 100%;"> Ultra-cold Frozen Refrigerated </div>

Manufacturer	Lot Number	Original Manufacturer Expiration Date	Extended Manufacturer Expiration Date (if applicable)	Storage Temp Before Redistribution	At This Storage Temp Since (Date)	Beyond Use Date (BUD) (as a result of step down storage conditions, if applicable)	Number of Doses	Ancillary Kit Supplies Provided including diluent, if applicable
								Yes
								No
								Yes
								No

Sending Facility Action Item Checklist (review with receiving facility prior to redistribution):

CDC Supplemental COVID-19 Vaccine Redistribution Agreement for Tribal Health Programs and Urban Indian Organizations – Vaccines Coordinated through IHS form is complete and includes signatures.
Copy of (1) CDC Supplemental COVID-19 Vaccine Redistribution Agreement for Tribal Health Programs and Urban Indian Organizations – Vaccines Coordinated through IHS completed form and (2) Supplemental Redistribution Information Worksheet provided to receiving facility.
(1) Ancillary kit supplies and (2) adjuvant or diluent (as applicable) matches the dose quantity of vaccine to be redistributed.
(1) Inventory updated and (2) transfer entry completed (as applicable) in the VTrckS Partner Order Portal (VPoP).

Receiving Facility Action Item Checklist (to be completed by transporters/receiving facility):

Vaccine/Ancillary Kit Transporter Print Name:	Signature:
2 nd Vaccine/Ancillary Kit Transporter Print Name:	Signature:
Vaccine/Ancillary Kit Received By Print Name:	Signature:

Receipt Date:	Receipt Time:	Arrival Temp:	Actual Transport Temp: <div style="display: flex; justify-content: space-around;"> Ultra-cold Frozen Refrigerated </div>
----------------------	----------------------	----------------------	---

Inventory updated in the VTrckS Partner Order Portal (VPoP).
Ultra-cold thermal shipping container was <u>not used</u> to redistribute vaccine.
(OR) Ultra-cold thermal shipping container <u>used</u> to redistribute vaccine. <ul style="list-style-type: none"> Ultra-cold thermal shipping containers require return to the manufacturer. By accepting the ultra-cold shipping container, the sending facility requires confirmation from the receiving facility that the ultra-cold shipper was returned to the manufacturer. Once thermal shipping container is returned, notify (sending facility POC name) _____ via email at: _____.
Copy of completed <i>Supplemental Redistribution Information Worksheet</i> returned to sending facility.

Sending Facility Reporting and Keeping Records

Sending facility emailed Area Vaccine Point of Contact (AVPOC) with (1) completed <i>CDC Supplemental COVID-19 Vaccine Redistribution Agreement</i> and (2) completed <i>Supplemental Redistribution Information Worksheet</i> . <ul style="list-style-type: none"> Date Submitted to AVPOC: _____

Records must be maintained by sending facility for six (6) years.