

COVID-19 Vaccine Provider Enrollment Checklist

Please use the following checklist to help you complete all the sections in the COVID-19 Enrollment. Review the checklist to make sure your clinic has completed all the proper paperwork and steps needed. **This checklist is just to help you. It does not need to be completed only viewed in the enrollment.**

Prior to completing the Enrollment

- Make sure the Primary/Backup Coordinator, Chief Medical Officer (or Equivalent) and the Chief Executive Officer (or Chief Fiduciary) have access to CT WiZ. If you need to request access, please visit <https://ctwiz.dph.ct.gov/ctwiz/Login.aspx> and click on “Request User Account.” Coordinators should pick the appropriate “Access Requested” (primary or backup), and physician’s signing the agreement (or equivalent) should choose “Chief Medical Officer/Physician Signing Agreement”.
- Confirm that the Primary and Backup coordinators have completed the CDC module [You Call the Shots-Module Ten-Storage and Handling](#).
- To avoid having to do so during the enrollment, update all clinic information and assets in CT WiZ using the Clinic Tools screen. This includes your clinic’s assets, address, contact information, delivery hours, staff, and staff training. **For Chief Medical Officer, please select the option of “Physician Signing the Agreement” as the contact type.**
- You will need the following information for the enrollment so have it handy:
 - Approximate number of children 18 years and younger at your location _____
 - Approximate number of adults 19-64 years of age at your location _____
 - Approximate number of adults 65 years of age and older at your location _____
 - Approximate number of unique patients seen per week on average _____
 - Approximate number of influenza vaccine doses administered during the **peak week** of the 2019-20 influenza season _____
 - How many full-time equivalent providers at your clinic can administer immunizations _____
 - What is the maximum number of immunizations your clinic can administer in a single day _____
 - How many days per week does your clinic offer immunizations _____

When Completing the Enrollment

- After the enrollment is completed, remember that the Chief Medical Officer and Chief Executive Officer (or equivalent) must log in to CT WiZ to electronically sign the agreement. **The Primary Coordinator cannot sign the document.**
- If a question is not applicable to your clinic, please write UNK, NA or enter a 0. All questions must have a value in the field to submit the enrollment.
- Click ‘Save Progress’ in the upper right-hand corner after completing each section to save your work.
- All providers must enroll with the COVID-19 Vaccine Enrollment directly in CT WiZ to receive COVID-19 vaccines.