



CVFA Enrollment Checklist

Please use the following checklist to help you complete all the sections in the Re-Enrollment process. Review the checklist to make sure your clinic has completed all the proper paperwork and steps needed.

Prior to completing the Re-Enrollment:

- ☐ Make sure the Primary Vaccine Coordinator, Back-up Vaccine Coordinator and the Physician Signing the Agreement (or equivalent) have access to CT WiZ. If you need to request access, please visit the [CT WiZ login page](#) and click on "Request User Account." Coordinators should pick the appropriate "Access Requested" (Primary or Back-up), and Physician Signing the Agreement (or equivalent) should choose Chief Medical Officer/Physician Signing Agreement contact type. Please remember the PIN should be included with all CT WiZ requests. For more information on user accounts, visit our [user account webpage](#).
- ☐ Confirm that the Primary and Back-up have completed the required training within the last 12 calendar months. The Primary and Backup Vaccine Coordinators must complete [Vaccine Storage and Handling](#).
- ☐ **Please keep your clinic information and staff up to date throughout the year and make changes as they occur.** During re-enrollment, review and [update all clinic information](#) in CT WiZ using the Clinic Tools, Clinic Information screens. This includes your clinic's address, contact information, delivery hours, staff and staff training. As a reminder, there can only be one Primary Vaccine Coordinator, one Backup Vaccine Coordinator, and a Physician Signing the Agreement.
- ☐ Review the [vaccine eligibility screening document](#) and [CVFA Patient Eligibility Screening Cheat Sheet](#).
- ☐ Gather the following breakdown of all uninsured and underinsured adult patients in your practice. If you are unsure how many patients you anticipate seeing, please give a rough estimate. You may need to consult with your billing department or your electronic health record (EHR) to complete this portion. The breakdown of the insurances are as follows:

	19-24 yrs.	25-49 yrs.	50 yrs. +	Total
317 Adult (Uninsured and underinsured patients)				
Not VFC eligible (all other insurance types) <i>this number does not need to be included. Simply put a "0" for this category.</i>				

When filling out the Re-enrollment:

- ☐ Visit our [website](#) to find step by step instructions on how to complete the re-enrollment process.
- ☐ Please remember that the **Physician Signing the Agreement (or equivalent) must log in to CT WiZ to electronically sign the agreement.** The Primary Vaccine Coordinator *cannot* sign the agreement for the Physician.
- ☐ Answer all questions listed under the Additional Questions tab of the re-enrollment. You will not be able to submit the re-enrollment unless these fields have been completed.
- ☐ **The 2026 Re-enrollment must be completed by Friday, November 21, 2025.** Failure to do so will result in suspension from the program and you will not be allowed to order any vaccines until the re-enrollment is complete.

Need additional support: [submit a helpdesk ticket](#) – select Immunizations (CT WiZ) – Clinic Administration – Enroll/Re-enroll in CVP.