

**An Important Message from
The Texas Health and Human Services Commission (HHSC)**

COVID-19 Vaccine Availability Information for Providers

Background:

VDP received a question concerning COVID-19 vaccine availability, as some MCOs have stated that pediatric providers are struggling to obtain COVID-19 vaccines for children. The following is information for MCOs to distribute to their providers regarding COVID-19 vaccine availability.

Key Details:

As confirmed with the Texas Vaccines for children program (TVFC), COVID-19 vaccines are available for 6 months and older through TVFC within the Vaccine Allocation and Ordering System (VAOS), with no identified supply or ordering issues. The Texas Medicaid pharmacy benefit does not cover COVID-19 vaccines for children.

Vaccines available through TVFC for children over 6 months are summarized in the table below. The sole FDA-approved choice available for children 6 months through 4 years is the Moderna COVID-19 vaccine, which is approved for children 6 months through 11 years. TVFC has added the updated 2025–2026 COVID-19 vaccines to the vaccine choice page in VAOS. Providers should adjust their vaccine choice as needed. An ordering walkthrough is attached to this notice. To update vaccine choices, follow these steps:

- Access the VAOS Provider Portal and select “Vaccine Choice” from the top menu bar.
- Select the ordering facility from the drop-down menu. Once completed, click submit.
- Return to the homepage and select “Reporting and Ordering” to place a vaccine order.

Program	Manufacturer	NDC	Brand
TVFC	Moderna	80777-0113-80	SPIKEVAX 6m to 11y, 10 Pack - single dose syringe
TVFC	Moderna	80777-0112-96	SPIKEVAX for 12y+, 10 Pack - single dose syringe
TVFC	Pfizer	00069-2501-10	COMIRNATY 5y to 11y, 10 Pack - single dose syringe
TVFC	Pfizer	00069-2528-10	COMIRNATY for 12y+, 10 Pack - single dose syringe
TVFC	Sanofi Pasteur	80631-0207-10	NUVAXOVID for 12y+, 10 Pack – single dose syringe

Action:

MCOs should distribute this information to your providers and work with them to resolve any issues obtaining these vaccines. Contact the VFC program if your providers have further issues. We appreciate you sharing this information with your network providers as needed to ensure continued access for all VFC-eligible children. HHSC also recommends MCOs to reach out to in-network, non-TVFC providers that provide care for children to encourage them to enroll in the program.

Resources:

TVFC-ASN_Ordering-Reporting_VAOS.pdf

Questions?

For additional questions, please contact **UnitedHealthcare Customer Service at 888-887-9003, 8 a.m.–6 p.m. CT, Monday–Friday.**

Vaccine Allocation and Ordering System (VAOS) - Reporting and Ordering Module

Texas Vaccines for Children (TVFC) and Adult Safety Net (ASN)
Last Updated: October 19th, 2023



TEXAS
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Services

Texas Department of State
Health Services

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Texas Department of State
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Overview

Purpose

- The Reporting and Ordering job aid provides step-by-step instructions for TVFC/ASN program providers to complete required reporting and submit vaccine requests in the Vaccine Ordering and Allocation System (VAOS).
- The job aid includes relevant checklists and prerequisite ordering instructions.

Audience

- TVFC and ASN providers who access VAOS



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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**.

TVFC and ASN Providers:

Update Vaccine Choice

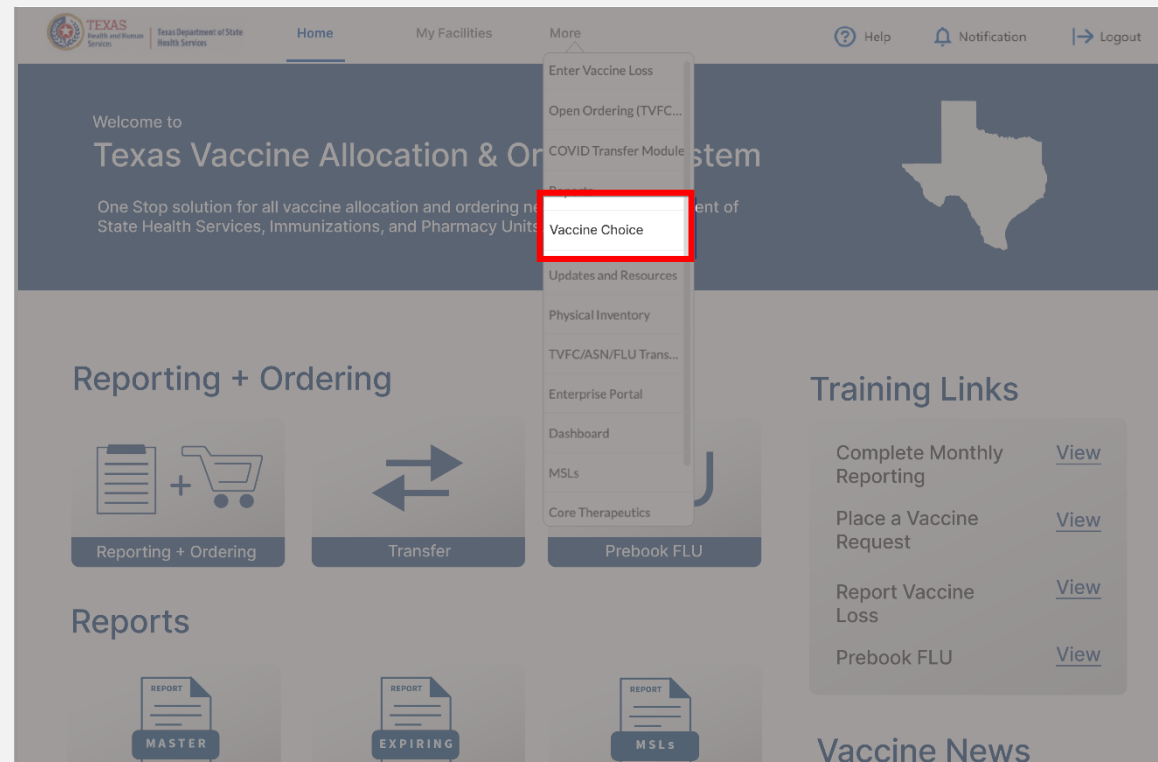


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Update Vaccine Choice

If you are a new TVFC/ASN provider, or you have not reviewed your vaccine selections recently, update your vaccine choice before reporting and ordering. On the VAOS Provider Portal, select **Vaccine Choice** from the **More** menu.



Update Vaccine Choice

1. Select your facility from the drop-down menu.
2. Each program you are enrolled in will populate on the screen. Expand each list and select or un-select the presentations you wish to view on your order screen.
3. After making all changes, click Submit.

Vaccine Choice

- Select the checkbox next to each vaccine that you would like to order for your facility. Ensure you select the correct facility from the drop-down menu.
 - If this is your first time updating Vaccine Choice, de-select any vaccine not offered.
 - If everything looks accurate, you do not have to do anything!
 - After changes are made, select Submit at the bottom of the page.

1

Select Facility

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☒ Check All / Uncheck All

> Texas Vaccines for Children (TVFC)

> Adult Safety Net (ASN)

Submit

☒ Check All / Uncheck All

▼ Texas Vaccines for Children (TVFC)

COVID (Pediatric)

☒ Pfizer SDV, 10 Pack (12y+); PED

☒ Pfizer MDV3, 30 Pack (6m-4y); PED

☒ Pfizer SDV, 10 Pack (5y-11y); PED

☒ Novavax MDV5, 2-Pack (12y+); PED

☒ Moderna SDV, 10 Pack (12y+); PED

☒ Moderna SDV, 10 Pack (6m-11y); PED

DTaP

☒ Daptacel SDV 10 Pack; Ped

☒ Infanrix PFS 10 Pack; Ped

DTaP-Hep B-IPV

☒ Pediarix PFS 10 Pack; Ped

DTaP-IPV

DTaP-IPV-HIB

DTaP-IPV-HIB-Hep B

Td (Adult)

☐ Tenivac PFS 10 Pack; Adu

☐ Tenivac SDV 10 Pack; Adu

☒ Td VAX SDV 10 Pack; Adu

Tdap (Adult)

☐ Boostrix PFS 10 Pack; Adu

☒ Boostrix SDV 10 Pack; Adu

☐ Adacel PFS 5 Pack; Adu

☒ Adacel SDV 10 Pack; Adu

Submit

TVFC and ASN Providers:

Reporting and Ordering Steps in VAOS



TVFC/ASN Reporting and Ordering Checklist

Preparing to Request an Order

Have this information ready before beginning the reporting and ordering module.



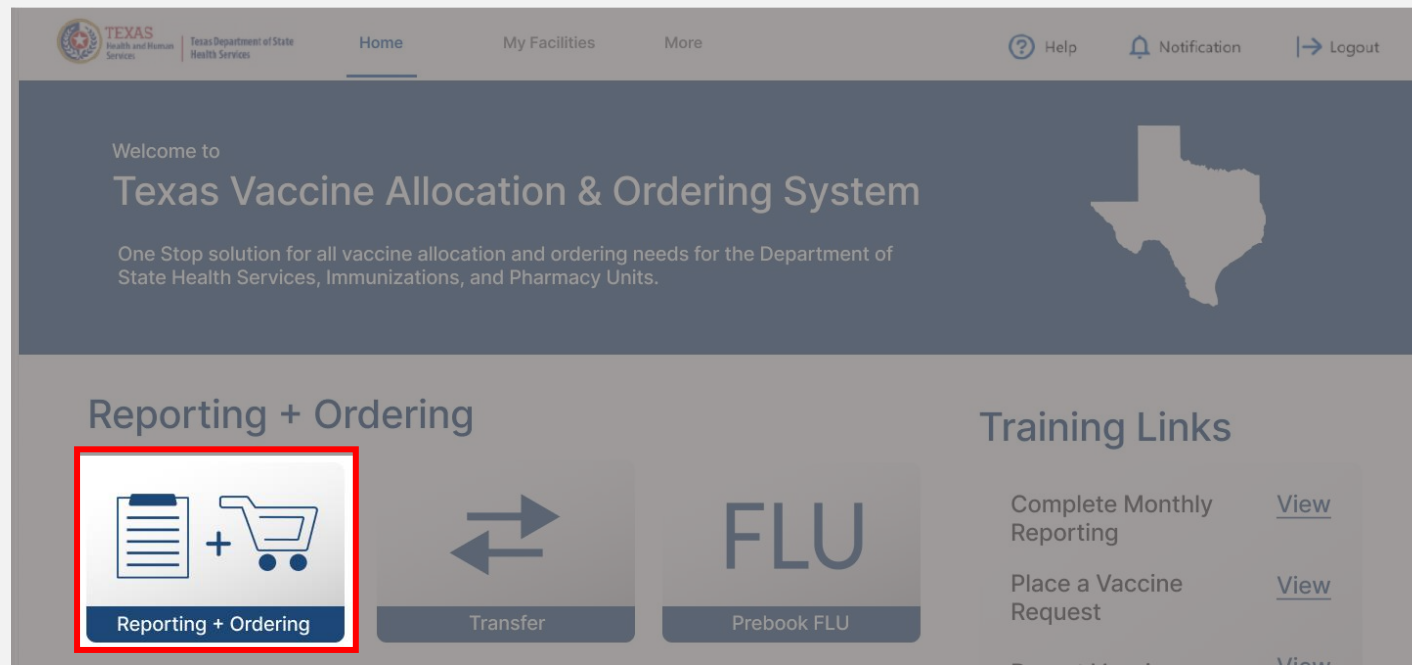
Reporting Checklist:

- ☐ Upload Current Temperature Log (C-105)
- ☐ Confirm Receipt of Vaccine Shipments (if needed)
- ☐ Enter Doses Administered up to the Current Date
- ☐ Enter Vaccine Loss (if needed)
- ☐ Complete Transfer Requests (if needed)
- ☐ Reconcile Physical Inventory



Navigate to the VAOS Provider Portal

Log into VAOS from the HHS Enterprise Portal and navigate to the **Reporting and Ordering** tile.



Step 1: Facility

1. Select the facility you wish to report and place an order for from the drop-down menu under ***Ordering facility**.
2. Select **Upload Files** to upload your Temperature Log.
3. Verify your shipping information and list any out of office dates that are outside of your normal business hours.

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
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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

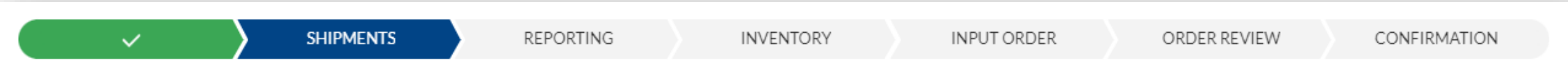
Please list all dates in the next two months when your office will be closed outside of your normal business hours:

* ☐ 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.

Step 2: Shipments



1. Confirm receipt of all pending vaccine shipments. Review the vaccine, lot ID, and expiration date for each item in the shipment.
 - For any shipments failing inspection, enter the number of doses failing inspection, and report the reason for the discrepancy.
2. If all information is correct, check mark all records.
3. Click **Pre-Fill Selected Shipments**.
4. Click **Save**.
5. Click **Continue** to proceed to the next module (the Continue button will be greyed out if you do not save your changes).

3

Pre-Fill Selected Shipments

Search this list...

1

Facility: ZZ TEST Data Purge

	2	Vaccine Shi...	Vaccine Name	Lot ID	Quantity Se...	Quantity Recei...	Doses Passing Ins...	Doses Failed Insp...	Select Disc...	Selected Discr...
1	<input checked="" type="checkbox"/>	VSN-925502	Daptacel SDV 10 Pack; Ped	G67J...	10	10	10	0	<input type="text"/>	
2	<input checked="" type="checkbox"/>	VSN-925503	Infanrix PFS 10 Pack; Ped	456H...	10	10	10	0	<input type="text"/>	
3	<input checked="" type="checkbox"/>	VSN-925504	Vaxelis SDV 10 Pack; Ped	K48...	10	10	10	0	<input type="text"/>	
4	<input checked="" type="checkbox"/>	VSN-925505	Vaxelis SDV 10 Pack; Ped	PLJ9...	10	10	10	0	<input type="text"/>	

Cancel

4 Save

5 Continue

Step 3: Reporting (Administration)

- 1. Report doses administered under the **Admin** tab of the Reporting page. You **MUST** report administrations up to the current day prior to placing an order.
- 2. After entering the quantity administered under the appropriate 0-18 or 19 and Over columns, click **Save**. Repeat the process until you receive the **Task Complete** notification.

Task Complete

Doses administered have been recorded. If needed, please use the other tabs to report Vaccine Loss and Vaccine Transfer.

Continue

✓✓REPORTINGINVENTORYINPUT ORDERORDER REVIEWCONFIRMATION

1

AdminLossTransfer

Facility: ZZ TEST Data Purge

- Record your doses administered under the appropriate age group for each vaccine administered within the given date range.
- If a vaccine is administered to an age group different from the intended age group, a reason for administering to the incorrect population is a required field.
- Doses administered **MUST** be reported up to the current day in order to proceed to the Ordering screen.

Important: COVID-19 vaccine immunizations should not be reported in VAOS. Please enter COVID-19 vaccine doses administered in ImmTrac2.

Report Doses Administered

From10/12/2023To10/18/2023

	<input type="checkbox"/> Vaccine	Vaccine Family	Item Number	Lot Number	Expiration Date	Quantity On Hand	0-18	19 and Over	Select Reason	Selected Reason
1	<input type="checkbox"/> Pfizer MDV3, 30 Pack (6m-4y); PED	COVID (Pediatric)	59267-4315-02	123456	10/15/2065	198				
2	<input type="checkbox"/> *DT SDV 1 Pack; Ped	DT	49281-0225-10	C5864AA	10/15/2024	435				
3	<input type="checkbox"/> Daptacel SDV 10 Pack; Ped	DTaP	49281-0286-10	C5883AA	10/15/2024	460				

151	<input checked="" type="checkbox"/>	Varivax SDV 10 Pack; Ped	PED	Varicella (Pediatric)	00006-4827-00	W017551	10/15/2024	468	2		
152	<input checked="" type="checkbox"/>	Varivax SDV 10 Pack; Ped	PED	Varicella (Pediatric)	00006-4827-00	W018824	10/15/2024	468	2		

CancelSave

2

Step 4: Reporting (Vaccine Loss)

- 1. If needed, report vaccine loss under the **Loss** tab of the Reporting page.
- 2. Check mark all the training conditions that apply.
- 3. Check mark the inventory record, and enter the quantity wasted, the reason for the vaccine loss, the description of the loss, and how you will prevent future losses for each appropriate vaccine and lot number.
- 4. Click Save.

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REPORTING

INVENTORY

INPUT ORDER

ORDER REVIEW

CONFIRMATION

Admin

Loss

Transfer

Facility: ZZ TEST Data Purge

1. From the vaccine in your inventory, enter the number of doses that were wasted or expired for each vaccine lot. Use the drop down to select the reason for the loss

2. In the details box, enter a thorough explanation of the waste

3. Check any applicable boxes for the training that was conducted in order to prevent further loss. At least one check box must be checked.

4. Click Save.

5. After your Vaccine Loss records are saved and the green "Success" banner appears, use the "Download Vaccine Loss Report" button to retrieve your VLR in a PDF format.

6. If submitting waste for vaccines eligible for return, you will receive a return label from pkginfo@ups.com within one week.

* Check All That Apply (must check at least one)

☐ Trained staff to notify HSR or LHD 90 days before expiration for any vaccine that will not be used by the expiration date.

☐ Trained Staff to rotate stock and use the vaccine with the soonest expiration date first.

☐ Trained staff to take immediate action to correct out-of-range temperatures and to contact their HD.

☐ None of the Above.

Vaccine Loss

	<input type="checkbox"/> Vaccine	Vac...	Vaccine Fam...	NDC	Lot Number	Expiration D...	Quantit...	Quantit...	Select Reason	Selecte...	Descrip...	How wil...
1	<input type="checkbox"/>	*DT SDV 1 Pack; Ped	PED	DT	49281-0225-10	C5864AA	10/15/2024	434				
2	<input type="checkbox"/>	*Fluarix Quad PFS; Ped; 2022-2023	PED	FLU (Pediatric)	58160-0890-52	ty599899	10/07/2033	960				
3	<input type="checkbox"/>	*Fluarix Quad PFS; Ped; 2022-2023	PED	FLU (Pediatric)	58160-0890-52	953Y2	10/15/2024	466				

Quantity Wasted

Select Reason

Selected Reason

Description

How will you prevent future losses?

5

Damaged needle/seal, particulate, discolored, etc.

Damaged

Will inspect doses better upon receiving shipment.

Cancel

Save

4

Step 5: Reporting (Vaccine Transfer)

- 1. If needed, report vaccine transfer requests under the **Transfer** tab of the Reporting page.
- 2. Select the transferring facility, enter the 6-digit provider PIN of the receiving facility, and enter any additional details.
- 3. Check mark the inventory record, and enter the quantity of doses to transfer, the reason for the transfer, and an explanation. If you select “Other” as the reason for the transfer, an explanation is required.
- 4. Repeat step 3 for all inventory being transferred. Click **Save**.
- 5. Click **Continue** to proceed. The Continue button will be greyed out if you did not save or cancel your changes.

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AdminLossTransfer1

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

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Enter Receiving provider PIN

999988

Additional Details

Enter Additional Details

2

Quantity On Hand	Quantity To Transfer	Select Reason	Selected Reason	Explanation
47	47	▼	Withdrawal from the TVFC/ASN/FLU Program	Withdrawing

CancelSave4

Continue5

Step 6: Inventory

1. After completing all other reporting, review your quantity on hand on the **Inventory** page to ensure that it matches your physical inventory.
2. If you need to make an adjustment, click the **Vaccine Item Number** to adjust the quantity on hand and to list a reason for the adjustment.
3. If no changes need to be made, skip step 2 and click **No Inventory Changes**. Wait for the green confirmation message.
4. Click **Continue** to proceed.

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INVENTORY

INPUT ORDER

ORDER REVIEW

CONFIRMATION

Facility: ZZ TEST Data Purge

Ensure that you complete all other transactions prior to this step in the open ordering Module so that your quantity on hand is up to date.

- If inventory is correct, please select "No Inventory Changes".
- This page shows your current quantity on hand (TVFC/ASN/FLU Only) according to your most recent transactions.
- For any incorrect quantities, click the vaccine item number located on the left side of the screen. You must list a reason for any adjustment made to your quantity on hand.
- Please click 'Addline' to add any items that are not in your Electronic Inventory (example: received extra vaccine by mistake in a shipment). As a reminder, do NOT add private inventory into VAOS.

No Inventory Changes

Addline

	Vaccine Item Nu...	Inte...	Vaccine Family	Vaccine	Vaccine Alert	Lot ID	Expiration Date	Quantity On Hand	Reason for Adjust...
1	VI-0448888	PED	Hep A (Pediatric)	Havrix PFS 10 Pack; Ped		ty1111	10/06/2061	4	Others
2	VI-0448890	PED	MMRV (Proquad)	Proquad SDV 10 Pack; Ped		ty789789	10/04/2031	116	Others
3	VI-0448892	PED	PCV (Pediatric)	Prevnar 13 PFS 10 Pack; Ped		ty18298393	10/26/2040	12	Others

Vaccine Item Number

VI-0448888

Facility

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Intent

PED

Vaccine Family

Hep A (Pediatric)

Vaccine

Havrix PFS 10 Pack; Ped

Lot ID

ty1111

Expiration Date

10/6/2061

Total Received

Quantity On Hand

5

Reason for Adjustment

Error in Receiving

Reason for Add line

Cancel

Save

Continue

Step 7: Input Order

NOTE: If you did not upload a temperature log, or report administrations up to the current day, you will be prompted to do so upon accessing the order screen and must complete this to submit an order.

1. Open each program's section and enter your vaccine requests in doses and in multiples of the pack size.
2. Enter a reason for deviation for each quantity requested that is greater than your suggested quantity.
3. After entering all vaccines you wish to request, click **Continue**.

Input Order

Tips:

- Please select the vaccine(s) below and provide the quantity. If you order more than the suggested quantity, you should provide the reason for the deviation.
- Vaccines may be ordered only in increments according to the pack size.
- TVFC requires recording of doses administered up to the current date, inventory review and reconciliation (Master Vaccine Report) of all vaccines before an order can be submitted.
- If you are trying to order a vaccine that is not listed below, please ensure your Facility's Vaccine Choice is up to date.

Facility : ZZ TEST Data Purge

> [Texas Vaccines for Children \(TVFC\)](#)

> [Adult Safety Net \(ASN\)](#)

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Back Continue

▼ Texas Vaccines for Children (TVFC)

Vaccine Family : DTaP Suggested Quantity : 2620

<input checked="" type="checkbox"/> Daptacel SDV 10 Pack; Ped	Pack Size	10	50	increase in patient population
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Step 8: Order Review

- 1. Review all the vaccines requested on the **Order Review** Page.
- 2. If you need to change any vaccines or quantities requested, click **Back**. If you have no changes and are ready to submit your order, click **Submit**.

✓

✓

✓

✓

✓

ORDER REVIEW

CONFIRMATION

Review and Submit

Please review the items below. If you need to make changes to your order, select Back. If you have no changes to your order, select the Submit button on the bottom right.

Shipping Details

Facility: ZZ TEST Data Purge

Shipping Address: Preston Smith Road, Odessa, TX 79762

Vaccine Family	Name	Requested Quantity	Reason for Deviation
DTaP	Daptacel SDV 10 Pack; Ped	50	increase in patient population
DTaP-Hep B-IPV	Pediarix PFS 10 Pack; Ped	10	
DTaP-IPV	Quadracel PFS 10 Pack; Ped	20	
Hep B (Adult)	Engerix-B PFS 10 Pack; Adu	10	increase
MCV4 (Adult)	MenQuadFi SDV 5 Pack; Adu	5	
MMRV (Proquad)	Proquad SDV 10 Pack; Ped	10	
PPSV23 (Pediatric)	Pneumovax 23 PFS 1 Pack; Ped	4	

Back

Submit

Step 9: Order Confirmation

You will receive an order confirmation message. Click **Take Me Home** to return to the homepage of your VAOS Provider Portal.



Your order request has been submitted!

What's Next?

- Your Responsible Entity will now review your vaccine requests.
- Once approved, delivery can be expected between 3 - 15 business days.
(depending on the presentation and storage requirements)
- After delivery, mark shipments as received, and if necessary, report discrepancies.

TAKE ME HOME