

Special Event Vaccine Request

MIIC USER GUIDANCE TRAINING RESOURCE

This guide describes how to use the Minnesota Immunization Information Connection (MIIC) to request special event vaccine from the Minnesota Department of Health (MDH). The health department will review the request and create vaccine order(s) to fill the request as current vaccine supply allows. Examples of special event vaccine include requesting COVID-19 vaccine, and prebooking influenza doses for the Minnesota Vaccines for Children (MnVFC) and Uninsured and Underinsured Adult Vaccine (UUAV) programs.

Submitting your special event vaccine request

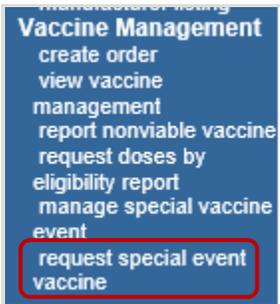
1. Enter your organization code, username and password to log into MIIC. The URL is <https://miic.health.state.mn.us/miic/psp?cmd=SplashHandler>. Select **Login**. If you need help, contact your organization’s MIIC administrator or the MIIC Help Desk at health.miichelp@state.mn.us or 651-201-5207.

You must have ordering privileges in MIIC to request special event vaccine. If you need to change your MIIC user role, contact the immunization program staff at health.mdhvaccine@state.mn.us or 651-201-5522 (800-657-3970).

It is recommended that you use Internet Explorer to access MIIC.

MIIC PROVIDER USER GUIDE: SPECIAL EVENT VACCINE REQUEST

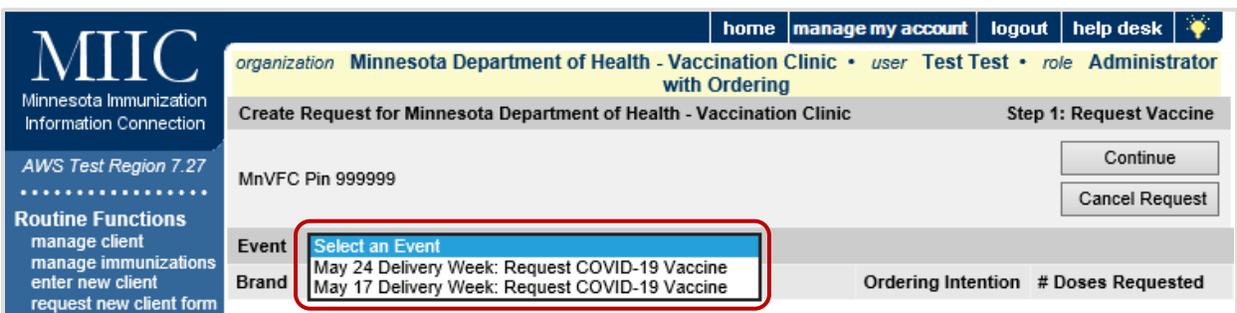
2. Select “request special event vaccine” under “Vaccine Management” on the left menu. You may need to scroll down to see it. If you don’t see it, please contact health.mdhvaccine@state.mn.us to have your user role changed.



3. Enter your organization’s PIN in the “Search String” field. Make sure the “Search Field” has “MnVFC Pin” selected. (If you only have access to one site, you will not need to enter your PIN, since you will be taken directly to the next step.) Then select “Create Request” next to the site of interest.



4. Select the event of interest from the dropdown menu. This may be for COVID-19 or for flu vaccine prebook.



5. Enter the number of desired doses in the “Doses Requested” field next to the type of vaccine you are requesting. Please note the special instructions notice, which will contain important information from MDH about your orders.

“Doses Requested” must be an exact multiple of the doses in the packaging, which is indicated under the “Packaging” header.

MIIC PROVIDER USER GUIDE: SPECIAL EVENT VACCINE REQUEST

COVID-19 vaccine requests need to be made in specific multiples of shipment packaging sizes:

- Janssen/Johnson & Johnson COVID-19 multi-dose vials of 5 doses: requests must be made in 100 dose increments. We cannot ship less than 100 doses.
- Moderna COVID-19 multi-dose vials of 10 doses: requests must be made in 100 dose-increments. We cannot ship less than 100 doses.
- Moderna COVID-19 multi-dose vials of 14 doses: requests must be made in 140 dose increments. We cannot ship less than 140 doses.
- Pfizer COVID-19 6 dose vials: request must be made in 1170 dose increments. We cannot ship less than 1170 doses.

organization Minnesota Department of Health - Vaccination Clinic • user Test Test • role Administrator with Ordering

Create Request for Minnesota Department of Health - Vaccination Clinic Step 1: Request Vaccine

MnVFC Pin 999999

Event May 24 Delivery Week: Request CC

ATTENTION: Special instructions regarding your orders will appear here. Please make sure to read these instructions.

Brand	Packaging	Ordering Intention	# Doses Requested
Janssen COVID-19 Vaccine - JSN	1 multi-dose vial of 5 doses	ADU	100
Moderna COVID-19 Vaccine - MOD	1 multi-dose vial of 14 doses	ADU	140
Pfizer COVID-19 Vaccine - PFR	1 multi-dose vial of 6 doses	ADU	1170
Total	-	-	1410

6. After entering the number of doses, click “Continue.”

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Pfizer COVID-19 Vaccine - PFR	1 multi-dose vial of 6 doses	ADU	1170
Total	-	-	1410

7. Enter your email address and update the shipping information if needed by selecting the “There has been a change to my shipping information” box. Add any special delivery instructions if needed. Then click “Continue.”

- Note: MDH will use the email address provided on this step to reach out with any questions on the specific request. Once vaccine orders are placed, order and shipping confirmation emails will be sent to the Primary and Backup Vaccine Coordinator contacts we have in our system for your site.

organization Minnesota Department of Health - Vaccination Clinic • user Test Test • role Administrator with Ordering

Create Request for Minnesota Department of Health - Vaccination Clinic Step 2: Verify Contact and Shipping Information

Shipping Information

MnVFC Pin 999999

Delivery Address 625 Robert Street North, 2nd Floor-Loading Dock, St Paul, MN 55164

Delivery Days/Hours MO: 8:00 AM -4:00 PM, TU: 8:00 AM -4:00 PM, WE: 8:00 AM -4:00 PM, TH: 8:00 AM -4:00 PM, FR: 8:00 AM -4:00 PM

If you would like to request doses for another site, please log in under that site's PIN.

There has been a change to my shipping information

Special Delivery Instructions

Email testemail@state.mn.us Contact email if there are issues with the request.

Continue, Back to Step 1, Cancel Request

- Enter the name of the prescribing professional. Select the radio button according to whether you are the prescriber or are ordering on behalf of the provider. Then click "Preview Request," or click "Back to Step 2" to return to the previous page.

organization Minnesota Department of Health - Vaccination Clinic • user Test Test • role Administrator with Ordering

Create Request for Minnesota Department of Health - Vaccination Clinic Step 3: Verify Authorization

MnVFC Pin 999999

Name of Licensed Prescribing Professional Title

Authorization

I am a licensed practitioner and am authorized to procure vaccine/biologicals according to Minnesota Statutes, Section 151.37, (e.g., M.D., D.O., N.P., P.A., OR R.Ph only).

I attest that I have the authority to complete this vaccine order form on behalf of the "Prescribing Professional" on this form whose signature is on file at our site as required by state law.

Preview Request, Back to Step 2, Cancel Request

MIIC PROVIDER USER GUIDE: SPECIAL EVENT VACCINE REQUEST

- Review the information you have entered. If it looks correct, click “Submit Request.” If you need to edit it, click “Modify Request.”

Preview Vaccine Request for Minnesota Department of Health - Vaccination Clinic

If the Request is final select Submit Request. If changes are necessary select Modify Request.

Shipping Information		Prescribing Professional Test Test	Submit Request
MnVFC Pin	999999	Title D.O.	
Delivery Address	625 Robert Street North, 2nd Floor- Loading Dock St Paul, MN 55164	I attest that I have the authority to complete this vaccine order form on behalf of the "Prescribing Professional" on this form whose signature is on file at our site as required by state law.	
Delivery Days/Hours	MO: 8:00 AM -4:00 PM TU: 8:00 AM -4:00 PM WE: 8:00 AM -4:00 PM TH: 8:00 AM -4:00 PM FR: 8:00 AM -4:00 PM	Cancel Request	

Requested by SMPOXMDH

User	Test Test
Email	claire.nyquist@state.mn.us

Vaccine Request

Brand	Packaging	Ordering Intention	Doses Ordered
Janssen COVID-19 Vaccine - JSN	1 multi-dose vial of 5 doses	ADU	100
Moderna COVID-19 Vaccine - MOD	1 multi-dose vial of 14 doses	ADU	140
Pfizer COVID-19 Vaccine - PFR	1 multi-dose vial of 6 doses	ADU	1170
Total	-	-	1410

- You will be taken to a page where you can enter your PIN to review your submission. The title of this page appears as “Vaccine List.” The Primary and Backup COVID-19 Vaccine Coordinator contacts will receive order and shipping confirmation emails once MDH has created the orders.

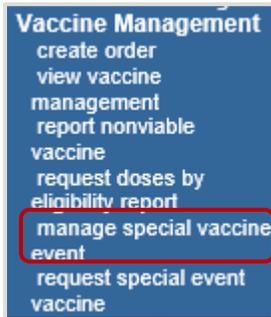
Vaccine List

Event	All Events	Search
Organization Type	All Orgs	
Search Field	MnVFC Pin	
Search String	<input type="text"/>	

Vaccine List Search Results

Viewing the status of your special event vaccine request

1. You can login and review the status of your request anytime by clicking on the “Manage Special Vaccine Event” link on the left under “Vaccine Management.”



2. After clicking on “Manage Special Vaccine Event” you will be taken to a page titled “Vaccine List” where you can search by your PIN.

Vaccine List

Event: All Events
 Organization Type: All Orgs
 Search Field: MnVFC Pin
 Search String:

Vaccine List Search Results

3. After entering your PIN, you can see your Special Vaccine Event requests and their statuses. Statuses can include:

- Submitted: MDH has received your request
- Allocated: MDH has placed vaccine order(s) to fulfill part of your request
- Completed: MDH has placed vaccine order(s) to completely fulfill your request

Click on the hyperlinked number under “Total Doses Ordered” to see details about your vaccine order including “Order Status,” “Lot Number,” and “Tracking Number” among other details.

Vaccine List

Event: All Events
 Organization Type: All Orgs
 Search Field: MnVFC Pin
 Search String: 999999

Vaccine List Search Results

Filter by NDC: All NDC

MnVFC PIN	Site	NDC	Brand, Maker	Packaging	Ordering Intention	Event	Request Date	Request Status	Doses Requested	Total Doses Ordered
999999	Minnesota Department of Health - Vaccination Clinic	59267-1000-02	Pfizer COVID-19 Vaccine, PFR	1 multi-dose vial of 6 doses	ADU	May 24 Delivery Week: Request COVID-19 Vaccine	05/12/2021	COMPLETED	1170	1170
999999	Minnesota Department of Health - Vaccination Clinic	59676-0580-15	Janssen COVID-19 Vaccine, JSN	1 multi-dose vial of 5 doses	ADU	May 24 Delivery Week: Request COVID-19 Vaccine	05/12/2021	SUBMITTED	100	0
999999	Minnesota Department of Health - Vaccination Clinic	80777-0273-98	Moderna COVID-19 Vaccine, MOD	1 multi-dose vial of 14 doses	ADU	May 24 Delivery Week: Request COVID-19 Vaccine	05/12/2021	COMPLETED	140	140

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Minnesota Department of Health
Minnesota Immunization Information Connection
P.O. Box 64975
St. Paul, MN 55164-0975
651-201-5207
health.miichelp@state.mn.us
www.health.state.mn.us/people/immunize/miic

5/20/21

To obtain this information in a different format, call: 651-201-5207