

**CDC COVID-19 Vaccine Allocation Transfer and Redistribution Guidance
for
IHS-operated facilities and facilities operated by Tribal Health Programs and Urban
Indian Organizations Participating in the
CDC COVID-19 Vaccination Program coordinated through Indian Health Service**

This guidance outlines two methods to transfer vaccines to IHS-operated facilities and facilities operated by Tribal Health Program and Urban Indian Organization (I/T/U) participating in the CDC COVID-19 Vaccination Program coordinated through IHS. The transfer of vaccines under these two methods eliminates the need for Tribal Health Programs and Urban Indian Organizations to sign separate CDC COVID-19 Vaccination Provider Agreements through a state/local jurisdiction.

COVID-19 vaccines can be transferred in one of two ways. The first method, called the “**Allocation Transfer of COVID-19 Vaccine**,” will transfer vaccine allocation from one jurisdiction to another jurisdiction before the vaccine is ordered and delivered. This can occur between two separate jurisdictions, such as a state and IHS, where dose allocations are adjusted to account for reallocation between two jurisdictions. The second method is the “**Redistribution of COVID-19 Vaccine**,” where vaccine ordered and received by a facility in one jurisdiction is transferred to a facility in another jurisdiction. This can occur between facilities that source vaccine through a state/local jurisdiction and facilities that source vaccine through IHS.

Method 1. Allocation Transfer of COVID-19 Vaccine

With the Allocation Transfer of COVID-19 Vaccine, vaccine allocation transfers from one jurisdiction to another jurisdiction before the vaccine is ordered and delivered.

The Allocation Exchange and Transfer Application in Tiberius allows the coordination and transfer of vaccine allocations from:

- the state jurisdiction to the IHS jurisdiction for transfer to I/T/Us, and
- the IHS jurisdiction to a state jurisdiction.

A jurisdiction can create a transfer request anytime there is available allocation. (See the [Tiberius Allocation Exchange and Transfer Application Guidance](#) for process.)

A “CDC COVID-19 Vaccine Redistribution Agreement” is *not* required under this option. However, ongoing coordination between the state jurisdiction and IHS is necessary to ensure the right amount of supply is available at sites.

Guidance for the state jurisdiction transferring allocation:

1. State POC communicates with the facility to determine allocation need.
2. State POC determines the number of doses to be provided.
3. State POC communicates the allocation quantity to the facility and copies the IHS Area Vaccine Point of Contact ([AVPOC](#)).
4. State POC communicates allocation quantity and facility name to the IHS Vaccine Task Force POC at IHSCOV19Vaccine-Distribution@ihs.gov.
5. State POC creates allocation transfer request in Tiberius. (See the Tiberius Allocation Exchange and Transfer Application Guidance.)

- a. Clearly notes the facility name and address that will receive the doses in the notes section of the transfer request; and
- b. Sends confirmation email to the facility POC, the IHS [AVPOC](#), and the IHS Vaccine Task Force POC at IHSCOVIDVaccine-Distribution@ihs.gov.

A state jurisdiction cannot place COVID-19 vaccine directly in VTrckS for an I/T/U facility participating in the CDC COVID-19 Vaccination Program coordinated through IHS. While this option may seem feasible for facilities that serve as Vaccines for Children (VFC) providers in the state/local jurisdiction, this method creates data reporting complications. As outlined in this guidance, facilities are required to report doses administered according to their “CDC COVID-19 Vaccination Program Provider Agreements.”

Guidance for the IHS jurisdiction receiving transferred allocation:

1. Confirms receipt of allocation transfer request by responding to the transferring jurisdiction’s email.
2. Accepts allocation transfer request in Tiberius. (The system also allows for modifying and cancelling the request.)
3. Orders vaccines for the facility as instructed in the notes.
4. Clearly communicates back to the state jurisdiction the doses and instructions that were given to the facility coordinating through IHS and the IHS [AVPOC](#), and differentiates those doses from a facility's regular allocation. The supplement received from the state should not reduce the amount of vaccine allocation from IHS.

Method 2. Redistribution of COVID-19 Vaccine

Redistribution of COVID-19 Vaccine is the process of moving vaccine from a facility in one jurisdiction to a facility in another jurisdiction after it has been ordered and delivered to the initial facility. Vaccine can be transferred between a facility enrolled with a state/local jurisdiction and a facility coordinating with IHS.

To physically move vaccine, both facilities must sign and agree to conditions in the “CDC COVID-19 Vaccine Redistribution Agreement” and maintain cold chain requirements throughout the transport. This applies whether both facilities are in the same state or in two different states. Any doses redistributed are reported in accordance with the receiving facility’s reporting terms in their “CDC COVID-19 Vaccination Program Provider Agreement.” For example, I/T/Us participating in the CDC COVID-19 Vaccination Program coordinated through IHS will report redistributed doses through IHS.