

Frequently Asked Questions: Administration of Publicly Funded COVID-19 Vaccines in Ontario Pharmacies

September 30th, 2024

This document accompanies the most recent Executive Officer (EO) Notice on the Administration of Publicly Funded COVID-19 Vaccines in Ontario Pharmacies available on the [ministry website](#).

Participating pharmacies administering publicly funded COVID-19 vaccines must adhere to their COVID-19 Vaccine Agreement with the ministry respecting COVID-19 administration and use of the provincial COVID-19 vaccine solution- COVaxON. This document primarily relates to the public funding of pharmacy administration of COVID-19 vaccines and is not intended to provide information about the requirements in the COVID-19 Vaccine Agreement.

Additional information:

- [COVID-19 Vaccine Program](#)
- [COVID-19 vaccine immunization](#) in Ontario
- Health Network System claims issues, pharmacists and trained pharmacy staff may contact the ministry's Ontario Drug Benefit (ODB) Help Desk and refer to the [Ontario Drug Programs Reference Manual](#)
- Injection training and scope of practice, pharmacists and trained pharmacy staff should contact the [Ontario College of Pharmacists \(OCP\)](#)

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Overview

1. What is the role of pharmacies in the administration of the publicly funded COVID-19 vaccine?

Participating pharmacies play an important role in the administration of publicly funded COVID-19 vaccines. Pharmacists¹ and trained pharmacy staff² may administer publicly funded COVID-19 vaccines in participating pharmacies to eligible individuals, in accordance with the *Pharmacy Act, 1991* and its regulations, and the *Regulated Health Professions Act, 1991*. Participation by pharmacies is voluntary. For more information about the criteria for participating refer to the most recent EO Notice: Administration of Publicly Funded COVID-19 Vaccines in Ontario Pharmacies.

2. Who can get a publicly funded COVID-19 vaccine at a pharmacy?

The COVID-19 Vaccine Program offers COVID-19 vaccines free of charge to all individuals 6 months of age and older who live, work or go to school in Ontario, at no cost, regardless of citizenship or immigration status, even if you do not have an Ontario health card. For all vaccine doses, when eligibility is defined by age, individuals must be the respective age of eligibility on the day of the vaccine administration. For more information refer to the most recent EO Notice: Administration of Publicly Funded COVID-19 Vaccines in Ontario Pharmacies.

3. How will the public know which pharmacies in Ontario are administering publicly funded COVID-19 vaccines?

Individuals may visit the ministry's [online location finder](#) to find participating pharmacies that administer publicly funded COVID-19 vaccines and book an appointment.

4. Which publicly funded COVID-19 vaccines are available in pharmacies?

Refer to the most recent EO Notice: Administration of Publicly Funded COVID-19 Vaccines in Ontario Pharmacies. Inclusion of a product in the EO Notice does not

¹ Any reference in this document to a pharmacist who administers, or who supervises trained pharmacy staff who are administering, the COVID-19 vaccine refers to a Part A pharmacist. Part A pharmacists include registrants of the Ontario College of Pharmacists (OCP) who hold a certificate of registration as a pharmacist (emergency assignment).

² For the purposes of these Qs and As, prior to October 1, 2024, trained pharmacy staff means registered pharmacy students, interns, and pharmacy technicians, subject to the terms, conditions and limitations set out in O. Reg. 202/94 under the *Pharmacy Act, 1991*. In these Qs and As, as of October 1, 2024, trained pharmacy staff means interns and pharmacy technicians (including pharmacy technicians (emergency assignment)), subject to the terms, conditions and limitations set out in O. Reg. 256/24 under the *Pharmacy Act, 1991*, as well as pharmacy students, pharmacy technician students, and intern technicians who are authorized to administer vaccines pursuant to a delegation under section 28 of the *Regulated Health Professions Act, 1991* (RHPA) or in accordance with clause 29(1)(b) of the RHPA, as the case may be. Pharmacy staff should refer to this legislation for more information. The health care providers described in Question and Answer #8 of this document are also considered trained pharmacy staff for the purposes of this document and the accompanying EO Notice.

guarantee continued supply of the product through the participating pharmaceutical distributors.

5. What type of identification do individuals need to provide at the pharmacy to have a COVID-19 vaccine administered?

Individuals should provide a valid Ontario health card number to the pharmacy. Individuals who do not have an Ontario health card number may still receive a publicly funded COVID- 19 vaccine and should provide an alternate identification to the pharmacy that includes the individual's date of birth and contact information.

Alternative forms of identification include:

- Birth Certificate
- Driver's License
- First Nations ID
- Out of Province ID
- MRN (Medical Record Number)
- Passport

Pharmacy Participation

6. Do all Ontario pharmacies provide publicly funded COVID-19 vaccines?

Only participating pharmacies that have been selected by the ministry and who meet the criteria in the EO Notice: Administration of Publicly Funded COVID-19 Vaccines in Ontario Pharmacies are eligible to provide publicly funded COVID-19 vaccines.

Pharmacy criteria include but are not limited to:

- Have a valid HNS Subscription Agreement with the ministry
- Have a valid COVID-19 Vaccine Agreement
- Be enrolled in the current Universal Influenza Immunization Program (UIIP)

Note: A valid COVID-19 Vaccine agreement is in respect of a particular pharmacy operator operating at a specific pharmacy location. Where a pharmacy is sold, or where a pharmacy operator relocates, a new COVID-19 Vaccine Agreement is required to reflect the new pharmacy operator or location. Similarly, enrollment in the UIIP is in respect of a particular pharmacy operator operating at a specific pharmacy location. Where a pharmacy is sold, or where a pharmacy operator relocates, new enrollment in the UIIP is required to reflect the new pharmacy operator or location.

Other considerations for pharmacies include:

- pharmacies should have the capacity and ability to accept and administer vaccine supply quickly and effectively.
- other factors such as high-risk areas, regional population distribution, pharmacy

patient base and performance in the UIIP.

7. Are all Ontario pharmacists able to administer COVID-19 vaccines to eligible individuals?

Only pharmacists and trained pharmacy staff who have completed an approved training program in accordance with OCP guidance can administer publicly funded COVID-19 vaccine in participating pharmacies, in accordance with the *Pharmacy Act, 1991* and its regulations, and the *Regulated Health Professions Act, 1991*. Prior to October 1, 2024, all trained pharmacy staff must register their injection training with the OCP, except the health care providers described in Question and Answer #8 of these Q and As. As of October 1, 2024, trained pharmacy staff who are pharmacy students or pharmacy technician students are no longer registrants of the OCP and cannot register their injection training on the OCP website. However, both students and the health care providers described in Question and Answer #8 are still required to receive the required injection training either through their educational program or by an OCP-approved course.

Reference information:

- [OCP guidelines](#) including appropriate infection control measures
- [OCP website](#) for more information on injection training
- Ontario Pharmacists' Association [Playbook](#) and [FAQs](#)
- Ministry Guidance documents provided to clinicians available [here](#).

8. Can a participating pharmacy employ other health care providers (e.g., registered nurse) to administer COVID-19 vaccines in the pharmacy?

Other health care providers (HCPs) who have the authority to administer COVID-19 vaccine under the *Regulated Health Professions Act, 1991* (RHPA) or a health profession Act (as defined in the RHPA) and who have injection training may also administer publicly funded COVID-19 vaccine in participating pharmacies, including pharmacies operating a Pharmacy Mobile Clinic. Should it be necessary that a pharmacy retain the services of other HCPs to administer COVID-19 vaccine in the pharmacy, the pharmacy must comply with all terms and conditions in the Ministry's Executive Officer Notice and Frequently Asked Questions documents ("Ministry Policies"), and the user agreement for the COVaxON system (the "User Agreement") in relation to the HCP's vaccine-related activities for the pharmacy. For clarity, all terms and conditions in Ministry Policies and the User Agreement respecting the vaccine-related activities of a pharmacist or other OCP member apply equally to the other HCP that has been retained by the pharmacy to administer the vaccine.

A Part A pharmacist must be identified in the prescriber field on the claim through the HNS for vaccines administered by other HCPs, with one exception. The exception is

where the vaccine is administered in a long-term care home to a long-term care home resident, in which case the vaccine must be prescribed by a prescriber and that prescriber must be identified in the prescriber field on the HNS claim. All respective HCPs whether OCP member or other HCP must identify themselves as the vaccinator in the COVaxON system and on the vaccine receipt provided to the individual.

The Designated Manager of a pharmacy should also consider the following non-exhaustive list of requirements that would be needed to comply with Ministry Policies and the User Agreement:

- Satisfaction that the HCP has the competency and regulatory authority to administer COVID-19 vaccine injection such as a proof of registration as such under the respective regulatory body (e.g., College of Nurses) and ensuring a medical order/directive is in place if required.
- List of all vaccination details administered by the other HCP including those that must be entered in the COVaxON system.

Evidence that the other HCP has a clear understanding of [Vaccine Storage and Handling Guidelines](#), the [COVID-19: Vaccine Storage and Handling Guidance](#) document on the ministry's [website](#) and required Ministry guidance and protocols.

9. Does a pharmacy have to administer the COVID-19 vaccine within the walls of the pharmacy?

Participating pharmacies must administer publicly funded COVID-19 vaccine within the pharmacy premises, unless otherwise permitted as follows:

- in a nearby location (e.g., pharmacy parking lot) within their Public Health Unit as long as they adhere to public safety and relevant Ministry policy / direction (including infection prevention and control measures), the COVID-19 Vaccine Agreement, and any OCP standards, policies or guidelines.
- for home-bound patients in their private home.
- as a mobile clinic in other locations (e.g., community centers, apartment complexes, etc.).
- in retirement homes, congregate settings and long-term care homes under the direction and in collaboration with the local Public Health Unit and the home.

Note: Pharmacist and trained pharmacy staff administration of publicly funded COVID-19 vaccine to hospital in- patients is not eligible for payment.

Note: The general rule under clause 7.1(c)(iv) of the HNS Subscription Agreement for Pharmacy Operators is that a pharmacy operator must not submit a claim to the Executive Officer that is in respect of a professional service that was not provided at the pharmacy. Despite this provision in the HNS Subscription Agreement, the ministry is allowing pharmacies to submit claims for administering publicly funded COVID-19

vaccines outside of the pharmacy in the circumstances described above.

10. What is the process for pharmacies when administering doses for residents of retirement homes, living in other congregate settings or residents of Long- Term Care (LTC) homes within these settings?

Pharmacies are required to work with their local Public Health Unit (PHU) and the retirement home, LTC home or congregate setting for administering COVID-19 vaccines to residents of these places. Pharmacies will be contacted by their local PHU or the retirement home, LTC home or congregate setting if their services are required. The list of retirement homes is available for pharmacies through their Office 365 email account for verification purposes only. In addition, before the COVID-19 vaccine can be administered in a LTC home to a resident of the LTC home, the pharmacy must have a prescription directing the administration of the vaccine to the resident.

Note: Pharmacists and trained pharmacy staff may administer and submit claims for COVID-19 vaccine doses to residents in LTC homes, retirement homes and other congregate settings under the direction of PHU. In addition, pharmacists and trained pharmacy staff may administer and submit claims for COVID-19 vaccine doses for staff, support workers, essential caregivers, volunteers, and contractors who are working within congregate settings when the pharmacist and trained pharmacy staff visits the home / congregate setting to administer vaccines to residents. All individuals receiving the vaccine must be eligible for their dose as per the requirements noted in the most recent EO Notice: Administration of Publicly Funded COVID-19 Vaccines in Ontario Pharmacies.

The roles of each entity are outlined below:

Public Health Unit	Retirement Home, Congregate Setting or LTC Home	Pharmacy
<ul style="list-style-type: none"> Identifies retirement homes, congregate settings or LTC home that have residents who are eligible for a COVID-19 vaccine dose that will be administered by a pharmacy If available, provides pharmacy with 'Clinic in 	<ul style="list-style-type: none"> Works with the public health unit to determine best method of vaccine administration Establishes a partnership with a local pharmacy if needed In the case of an LTC home, ensures that residents of the LTC home who require the vaccine obtain a prescription to have the vaccine administered Works with the pharmacy to provide guidance on the 	<ul style="list-style-type: none"> Administers mRNA COVID-19 as per arrangements between PHU and retirement home, congregate setting or LTC home Pharmacy administers COVID-19 vaccine from own supply and transports doses to the retirement home, congregate setting or LTC home as per storage and handling guidelines Pharmacy accesses COVAXON on site using 'Clinic in a Box' for required documentation and

Public Health Unit	Retirement Home, Congregate Setting or LTC Home	Pharmacy
a Box' (IPAD ³ for accessing COVaxON on site at the retirement home, congregate setting or LTC home) if required.	<p>number of doses needed and support for scheduling dose administration / clinic days including which mRNA vaccine to be administered</p> <ul style="list-style-type: none"> For congregate settings, determine number of elderly residents or staff (and others noted above) that require a vaccine dose 	<p>issuing of patient receipts if needed</p> <ul style="list-style-type: none"> Upon return to pharmacy, submits claim through the HNS as soon as possible within one business day Comply with applicable law, including with respect to waste <p>Obtains a copy of the prescription to administer the vaccine in a LTC home to a resident of the LTC home</p>

11. Can a pharmacy offer COVID-19 vaccine administration services to a patient in their private home?

There is an expectation that pharmacies are administering the COVID-19 vaccine within the pharmacy premise where vaccine storage requirements can be maintained.

However, an exception may be allowed for the pharmacist to visit the individual's private home (i.e., one-on-one) to administer the COVID-19 vaccine provided the eligible individual has requested a home visit by the pharmacist, is within the pharmacy's Public Health Unit and provides a reason such as due to the individual being immobile, and this request and rationale is documented by the pharmacy in writing. In addition, trained pharmacy staff may administer COVID-19 vaccine doses in long-term care homes, retirement homes and other congregate settings under the direction of Public Health Units.

The pharmacy must ensure public safety, vaccine handling and storage requirements (e.g., [specific references](#) to COVID-19 Vaccine Storage and Handling Guidance for transferring or transporting vaccines) as well as adhere to relevant Ministry policy / direction, the COVID-19 Vaccine Agreement, and any [OCP](#) standards, policies or guidelines. In addition, the pharmacist documentation must include the geographical location of the vaccine administration if not conducted within the pharmacy.

12. How can my pharmacy participate in delivery of COVID-19 vaccines via mobile clinics? What are the requirements / parameters?

Pharmacies may conduct off-site mobile clinics in collaboration with their local Public Health Unit. All individual eligibility requirements in the most recent version of the EO

³ Participating pharmacies providing COVID-19 vaccines outside the pharmacy in congregate settings or mobile clinics should be prepared to use their own IPADs or tablets to access the COVaxON system.

Notice: Administration of Publicly Funded COVID-19 Vaccines in Ontario Pharmacies apply to the mobile clinic.

The following conditions apply:

- Participating pharmacies must contact their local PHU to notify them of future mobile clinics that they intend to operate. It is recommended that mobile clinics be within the geographic region of the local PHU.
- The mobile clinic must be aligned with Ontario's vaccine distribution plan in cooperation with local PHU planning and may be informed by outreach and engagement possibly coordinated with community partners.
- Pharmacists and trained pharmacy staff from the participating pharmacy must administer COVID-19 vaccine from their own supply and transport doses to the mobile clinic as per storage and handling guidelines
- Pharmacists and trained pharmacy staff from the participating pharmacy would need to ensure infection prevention and control measures are followed and other guidelines/policies if applicable.
- Pharmacists and trained pharmacy staff from the participating pharmacy must access COVaxON on-site at the mobile clinic location for required documentation of vaccine administration and issuing of patient receipts
- Upon return to the location of the participating pharmacy, the pharmacist from the participating pharmacy must submit claims through the HNS for reimbursement as soon as possible and within 7 calendar days⁴.
- Participating pharmacies are responsible for all aspects of running the mobile clinic including staffing, supplies, communication, signage and other logistics.
- Participating pharmacies must comply with applicable law, including with respect to waste management with consideration for any added insurance requirements respecting operations off-site.

The participating pharmacy must ensure public safety, vaccine handling and storage requirements (e.g. [specific references](#) to COVID-19 Vaccine Storage and Handling Guidance for transferring or transporting vaccines) as well as adhere to relevant Ministry policy / direction, the COVID-19 Vaccine Agreement, and any [OCP](#) standards, policies or guidelines. In addition, the pharmacist documentation must include the geographical location of the vaccine administration if not conducted within the pharmacy.

Note: The general rule under clause 7.1(c)(iv) of the HNS Subscription Agreement for Pharmacy Operators is that a pharmacy operator must not submit a claim to the Executive Officer that is in respect of a professional service that was not provided at the pharmacy. Despite this provision in the HNS Subscription Agreement, the ministry is

⁴ Note that the HNS can process online transactions for publicly funded services on any of the most recent seven calendar days, including the current date. This means that a claim for the COVID-19 vaccine could be submitted today for a service date in the past (as long as it is within the past 7 days).

allowing pharmacies to submit claims for administering publicly funded COVID-19 vaccines outside of the pharmacy in the circumstances described above.

Individual pharmacists and trained pharmacy staff with injection training may also participate in administering COVID-19 vaccine in an alternate clinic setting organized and hosted by another authorized organization (e.g., PHU or hospital-led mass immunization clinic), in accordance with the *Pharmacy Act, 1991* and its regulations, and the *Regulated Health Professions Act, 1991*. In these instances, as it falls outside the parameters of the EO Notice, they should refer to the applicable legislation, other agreements, or OCP policy as appropriate.

13. Is personal protective equipment (PPE) available for pharmacies that administer COVID-19 vaccines?

Pharmacies that administer COVID-19 vaccines may order PPE by accessing the Ministry of Public and Business Service Delivery (MPBSD) PPE Supply Portal at <https://www.ppesupply.ontario.ca/>. Access to this portal has been provided by MPBSD to all pharmacies administering COVID-19 vaccines. If your pharmacy is having difficulties or cannot access the portal, please contact sco.supplies@ontario.ca.

Pharmacies that belong to a banner or chain corporation should work through their corporate head office, who may centrally coordinate order and facilitate distribution. Independent pharmacies may order directly from the website.

Note that there is an allocation framework in place depending on the current supply and not all orders for PPE may be filled. The ministry's supply of PPE must ONLY be used to support the activity of pharmacies administering the publicly funded COVID-19 vaccine.

14. What other procedures must be followed to ensure the safe administration of COVID-19 vaccines?

Pharmacists and trained pharmacy staff should continue to follow the guidelines set out by public health officials. Pharmacies have a shared responsibility for informing and educating the public on COVID-19, including promoting infection prevention and control measures. Resources can be found on the [Ontario College of Pharmacists](#) website as well as [COVID-19 Vaccine Program](#).

Vaccine Ordering and Inventory Management

15. How do pharmacies obtain publicly funded COVID-19 vaccines?

Before ordering publicly funded COVID-19 vaccines, pharmacies must meet these requirements to participate in the COVID-19 Vaccine Program:

1. Hold a valid HNS Subscription Agreement
2. Hold a valid COVID-19 Vaccine Agreement*
3. Pass a cold chain inspection conducted by the local PHU
4. Complete COVaxON registration and training

*** When a pharmacy is sold or the pharmacy is relocated, a new COVID-19 Vaccine Agreement is required to reflect the new pharmacy operator or location's new OCP Accreditation number and updated ON# of the pharmacy. An outdated agreement may delay COVID-19 vaccine ordering and delivery for the pharmacy. Pharmacy owners may contact the ministry to obtain an application for updating at C-19VaccinePlanningandImplementation@ontario.ca.**

Pharmacists and trained pharmacy staff must also be registered with the updated ON# as per the updated COVaxON agreement. After these requirements are fulfilled, pharmacies may order publicly funded COVID-19 vaccines at no cost through a designated pharmaceutical distributor. Some vaccines may only be available through the local public health unit (PHU). Vaccine ancillary supplies (e.g., needles, syringes) may also be ordered from vaccine distributors; however, these supplies may not arrive at the same time due to different delivery requirements.

Vaccine Storage and Handling Guidelines ([link](#)):

Pharmacies storing publicly funded vaccines are required to submit temperature records to the local PHU on a regular basis. If a pharmacy fails to submit temperature records to the PHU or if there is a cold chain incident at a pharmacy, the local PHU will inform the vaccine distributor to temporarily suspend vaccine ordering for that pharmacy. Once a pharmacy is suspended by the local PHU, the distributor will cancel any vaccine order for the week in which the suspension is issued by the PHU and the distributor will not deliver vaccines to

that pharmacy until the PHU determines that the pharmacy has met the storage requirements, and the suspension may be lifted. When the suspension is lifted by the local PHU the pharmacy and distributor will be notified to allow vaccine ordering and delivery to resume.

COVaxON Inventory Management:

Pharmacies are required to maintain accurate weekly vaccine inventory and administration records in COVaxON. A pharmacy's COVaxON records are reviewed by the ministry when the pharmacy orders vaccine from the distributor to ensure proper allocation and prevent wastage of available vaccine supply.

To minimize disruptions in vaccine ordering and delivery, it is important for pharmacies to follow the Vaccine Storage and Handling Guidelines, provide the required information to their local PHU in a timely manner, and maintain accurate inventory and administration records in COVaxON.

16. Are pharmacies able to order and administer Nuvaxovid™ (Novavax Inc.) vaccine?

Novavax Nuvaxovid is not currently available in Ontario for the 2024/2025 season. Individuals who are unable to receive an mRNA vaccine, should speak with their health care provider about treatment options.

17. What is the purpose of the COVaxON system?

COVaxON is the database that holds all COVID-19 vaccine inventory and administration information for Ontario. It is separate from the HNS and all pharmacies are required to enter patient vaccine administration details and maintain up to date inventory information in this system. The fee paid to pharmacies for administering the COVID-19 vaccine includes pharmacy services relating to access and use of COVaxON.

The requirements for accessing and using COVaxON can be found in the COVID-19 Vaccine Agreement. Access to and use of the system is conditional on the pharmacy being granted access to COVaxON by the ministry.

Pharmacists and trained pharmacy staff must complete training to use COVaxON. Pharmacies should contact their Pharmacy Trainer (i.e., first-line support) – either a corporate office (for pharmacy chains), or the [Ontario Pharmacists Association \(for independent pharmacies\)](#) for resource information related to COVaxON including support, training, forms and reference materials.

It is important that pharmacies accurately and regularly document vaccine inventory and administration data in COVaxON. Pharmacies should contact their trainer for questions on data entry and resolving inventory discrepancies in COVaxON. Pharmacy trainers are available from your corporate office. The trainer for independent, unaffiliated pharmacies is the Ontario Pharmacists Association (acatapano@opatoday.com or ideschenes@opatoday.com); an OPA membership is not required.

Inventory Data:

- It is important for pharmacies to maintain real-time data entry in COVaxON to avoid vaccine order cancellations/reductions.
- Pharmacies should conduct a weekly inventory reconciliation of physical doses on-hand compared to reported COVaxON doses before placing a vaccine order.
- Pharmacies may access the [Inventory Reconciliation Report](#) in COVaxON and discrepancies must be investigated and resolved (e.g., wastage events, inventory adjustments) in a timely manner in COVaxON. Please contact your pharmacy trainer if required.
- To align with the COVID-19 vaccine ordering process, inventory should be

reconciled and updated in COVaxON one day prior to the weekly pre-book ordering process.

- Here are four common inventory discrepancies in COVaxON:
 - Doses appearing as available from expired lots, or surpassed maximum refrigeration time, should be adjusted as wastage with the appropriate wastage reason.
 - Doses appearing as available from completed lots should be adjusted with the appropriate wastage reason (if known). If the reason for the discrepancy is unknown, complete an inventory adjustment and add the note “record is part of a remediation effort to clear available doses from completed lot”.
 - Doses appearing as available from suspended lots should be adjusted as either a wastage or excursion event and add the note “record is part of a remediation effort to clear available doses from suspended lot”.
 - Doses appearing as available from lots that are not physically present should be investigated and remediated. Where physical inventory is not on-hand for a particular lot number, and the nature of discrepancy is unknown, complete an inventory adjustment and add the note “record is part of a remediation effort to clear available doses from lots not physically present”.

Administration Data:

- While vaccine administration to the individual should occur prior to completing the entry in COVaxON, pharmacists and trained pharmacy staff must be diligent in accessing COVaxON to confirm when the patient received the vaccine dose (if applicable) including verifying which vaccine and the appropriate time interval between doses before administering the vaccine. Incorrect entries in COVaxON must be corrected immediately.
- When entering information in COVaxON, immunizers must identify their individual health professional status (i.e., they must use their own User ID).

Please also ensure that the information in COVaxON is accurate and up-to-date based on the patient’s health card. For example, a patient may choose to change their name after getting married or if they are trans or non-binary.

In the event of system failure, pharmacies must ensure a manual contingency plan is in place for keeping track of COVID-19 vaccine administration and future logging in COVaxON (e.g., at a minimum, pharmacies should ensure there is supply of consent forms, vaccine information forms and daily patient rosters printed.)

18. Can pharmacies transfer COVID-19 vaccines between participating pharmacies?

Effective as of September 1, 2024, participating pharmacies **cannot** transfer out publicly funded vaccine inventory to any other pharmacy, health care provider and/or organization, including any affiliated or commonly-owned pharmacy (with the exception of COVID-19 vaccine transfers related to pharmacy ownership change and/or relocations). Pharmacies are still permitted to transport vaccine when administering off-site, in compliance with Vaccine Storage and Handling Guidelines.

Pharmacies may only accept transfers-in from their local PHU in exceptional circumstances.

19. How do pharmacies dispose of expired or wasted COVID-19 vaccines?

Pharmacies must document wastage, extra doses from vaccine vials and temperature excursions into the COVaxON system for proper inventory management.

After wastage is documented in COVaxON, pharmacies must follow disposal practice protocols including:

- [COVID-19: Vaccine Storage and Handling Guidance.](#)
 - Do NOT return expired or unused COVID-19 vaccines to the local public health unit; and
- Ontario College of Pharmacist (OCP) guidelines, such as [Policy on Medication Procurement and Inventory Management](#)
 - This would include how to properly dispose of expired or wasted vaccine. Pharmacies may wish to contact the OCP for further advice as destruction of vaccine and drug wastage is included as part of the pharmacy's usual disposal practice protocols.

Individual Eligibility

20. Can an individual who does not have an Ontario health card number still receive publicly funded COVID-19 vaccine at a pharmacy?

Yes. Appropriately trained pharmacists and trained pharmacy staff can administer publicly funded COVID-19 vaccine to individuals **without** an Ontario health number provided the patient presents with valid ID for documentation (refer to Question #5) and meet the eligibility criteria. Refer to the most recent EO Notice: Administration of Publicly Funded COVID-19 Vaccines in Ontario Pharmacies for eligibility criteria, and billing process.

Note: For individuals who have a valid Ontario health number, pharmacies need the Ontario health number to submit the claim for payment. This would apply even if the individual forgot to bring the Ontario health number to the appointment.

21. Is an individual who received vaccine outside of Ontario or Canada

considered fully vaccinated and up to date?

Refer to the [COVID-19 Vaccine Program](#) for information on out of province and out-of-country vaccines and staying up to date.

22. How are the terms unvaccinated or previously vaccinated defined?

Individuals' vaccination status may be identified as not previously vaccinated and previously vaccinated.

- **Not previously vaccinated:** refers to individuals 6 months or older who have never received a dose of a COVID-19 vaccine.
- **Previously vaccinated:** refers to individuals who have received one or more dose(s) of a COVID-19 vaccine. Vaccine schedule recommendations differ based on the number of previous COVID-19 vaccine doses the individual has received, their immune status, and product type.

Refer to the [Health Care Provider Fact Sheet: COVID-19 Vaccine](#) for suggested intervals between SARS- CoV-2 Infection and COVID-19 Vaccination. The fact sheet also contains additional details and guidance to aide with clinical decision making.

23. What COVID-19 vaccine is recommended for individuals who are eligible?

NACI recommends that only vaccines containing the latest selected strain should be used in fall 2024. Ontario will have two mRNA COVID-19 vaccines for the 2024/2025 season, Moderna and Pfizer, both targeting the Omicron KP.2 variant. Moderna will be the vaccine available for children 6 months to 11 years of age.

The updated protein subunit COVID-19 vaccine, Novavax is currently **not** available in Ontario for the 2024/2025 season. Individuals who are unable to receive an mRNA vaccine, should speak with their health care provider about treatment options, including the use of Paxlovid, to reduce the duration and severity of illness.

24. For individuals who are immunocompromised, which COVID-19 vaccine is recommended?

Refer to the ministry's most recent [COVID-19 Vaccine Program](#).

25. Can an individual get Novavax (Nuvaxovid) vaccine if they are allergic to the mRNA vaccines?

Novavax Nuvaxovid is currently not available in Ontario for the 2024/2025 season. Individuals who are unable to receive an mRNA vaccine, should speak with their health care provider about treatment options.

See the [COVID-19 Vaccine: Canadian Immunization Guide's](#) section on

Contraindications and Precautions for recommendations for individuals with several conditions including allergies, bleeding disorders, myocarditis and/or pericarditis following vaccination, Guillain-Barré syndrome (GBS), multisystem inflammatory syndrome in children or adults (MIS-C or MIS-A), and Bell's palsy.

For more information, refer to the [COVID-19 Vaccine Program](#).

26. Can pharmacies administer the COVID-19 vaccine at or around the same time as the flu vaccine?

The COVID-19 vaccines may be given at the same time with other vaccines, or at any time before or after other non-COVID-19 vaccines (live or non-live vaccines), including influenza vaccine, respiratory syncytial virus (RSV) vaccine and/or the RSV monoclonal antibody, Beyfortus.

If multiple injections are to be given at the same visit, separate limbs should be used if possible. Alternatively, the injections may be administered into the same muscle separated by at least 2.5 cm (1"). Different immunization equipment (needle and syringe) must be used for each vaccine.

27. What is recommended for individuals who HAVE been previously vaccinated against COVID-19?

COVID-19 vaccination is strongly recommended for previously vaccinated and unvaccinated individuals who are at increased risk of SARS-CoV-2 infection or severe illness due to COVID-19 should be prioritized to receive the COVID-19 vaccine as soon as vaccine becomes available this fall:

- Adults 65 years of age or older
- Individuals 6 months of age or older who are/have:
 - Residents of long-term care homes or other congregate living settings
 - Pregnant
 - From First Nations, Métis and Inuit communities
 - Members of racialized and other equity-deserving communities.
 - [Underlying medical conditions](#) that places them at higher risk of severe COVID-19, including children with complex health needs.

To optimize co-administration with influenza vaccine, health care workers, first responders, individuals with significant exposure to birds and mammals (such as poultry, livestock, slaughterhouse and processing plant workers, wildlife officers/researchers, and veterinarians) should also be prioritized to receive COVID-19 and influenza vaccines as soon as vaccine becomes available this fall.

Starting October 28, 2024, all other previously vaccinated or unvaccinated individuals (6 months of age or older) who are not at increased risk of infection or severe illness from

COVID-19 (i.e., not on the list above), are recommended to receive COVID-19 vaccine. Of note, people who provide essential community services are particularly recommended to receive COVID-19 vaccine.

For more information on product preferences and dosing intervals, refer to the [COVID-19 Vaccine Program](#).

28. What is recommended for individuals who have NOT been previously vaccinated against COVID-19 (for example, children under 5 years requiring primary series or adults with zero doses)?

Individuals who have NOT been previously vaccinated against COVID-19 (for example, children under 5 years requiring primary series or adults with zero doses) continue to be eligible to receive COVID-19 vaccines, please refer to the Appendices in the latest version of the EO Notice for schedule guidelines based on immunization history and immune status or refer to [COVID-19 Vaccine Program](#)

As per NACI guidance, individuals will likely be unaware of their recent infection status as testing is no longer widespread and many individuals, particularly children, may experience mild or no symptoms. Those who do have a known recent SARS-CoV-2 infection who are not previously vaccinated or have not completed a primary series may consider delaying COVID-19 vaccination by 8 weeks if the individual is not moderately to severely immunocompromised, or by 4 to 8 weeks if the individual is moderately to severely immunocompromised. These suggested intervals serve as a guide and are based on immunological principles and expert opinion and may change as evidence emerges.

Clinical discretion is advised for immunizers.

29. How many COVID-19 vaccine doses can an individual receive and how often?

At this time, the seasonality of COVID-19 is not known, and it has not yet been determined whether people will need an additional COVID-19 vaccine dose at a set time period (e.g., every 6 months). The [COVID-19 Vaccine Program](#) outlines current recommendations, based on age and health status. For more information on dosing intervals, refer to the [COVID-19 Vaccine Program](#).

Pharmacy Payment for Vaccine Administration

For Health Network System (HNS) claims issues, pharmacists and trained pharmacy staff may contact the ministry's Ontario Drug Benefit (ODB) Help Desk and refer to the [Ontario Drug Programs Reference Manual](#).

30. How much does the ministry pay a pharmacy to administer COVID-19 vaccines?

The ministry will reimburse the pharmacy \$13.00 when a claim for payment is submitted through the HNS for the costs associated with services related to administering publicly funded COVID-19 vaccine. Refer to the most recent EO Notice: Administration of Publicly Funded COVID-19 Vaccines in Ontario Pharmacies for details on the services that must be provided to eligible individuals.

Date of service for the claim submitted to HNS must reflect the date that the publicly funded COVID-19 vaccine was administered. HNS can process online transactions for the most recent seven calendar days, including the current date. This means that a claim for the COVID-19 vaccine could be submitted today for a service date in the past as long as it is within the past 7 days. A Part A pharmacist must be identified in the prescriber field on the claim through the HNS for vaccines administered by other health care providers, with one exception. **Exception:** in the case of an eligible individual who is a resident in a long-term care home and is receiving the vaccine in the long-term care home, the prescriber field on the claim submitted through HNS must identify the prescriber who directed the administration of the vaccine to the resident.

Pharmacists and trained pharmacy staff who have valid injection training may administer the COVID-19 vaccine, in accordance with the *Pharmacy Act, 1991* and its regulations and the *Regulated Health Professions Act, 1991*; however, the respective injection-trained supervising pharmacist must submit the claim for payment through the HNS using their Pharmacist ID.

This same administrative fee will also apply to the administration of publicly funded injectable COVID-19 vaccine to residents of LTCHs by pharmacies that service LTCHs. To further clarify, the administration of the COVID-19 vaccine by participating pharmacies to residents of LTCH is **outside of** the current capitation payment model used to pay pharmacy service providers for providing professional pharmacy services to LTCH residents.

Note: When entering information in the Provincial COVID-19 Vaccine Solution-COVaxON, immunizers **must** identify their individual health professional status (i.e., they must use their own User ID).

31. How much does the ministry pay a pharmacy if the immunizer is required to inject epinephrine as emergency treatment for patients experiencing a serious adverse drug reaction due to the publicly funded COVID-19 vaccine?

The ministry will reimburse the pharmacy the acquisition cost (no mark-up, dispensing or service fee) of approved epinephrine auto-injection products up to the total amount reimbursed when used in this circumstance.

Refer to the most recent EO Notice: Administration of Publicly Funded COVID-19

Vaccines in Ontario Pharmacies and Section 6.15 of the [Ontario Drug Programs Reference Manual](#) for details on the claim submission process.

Despite section 6.15 of the Reference Manual, in the case of an eligible individual who is a resident in a long-term care home and is receiving the epinephrine in the long-term care home (LTCH), the prescriber field on the claim submitted through HNS must identify the prescriber who directed the administration of the epinephrine auto-injector product to the resident.

In addition to the documentation requirements set out in section 6.15 of the Reference Manual, if an epinephrine auto-injector is administered to an eligible individual who is a resident of a LTCH within the LTCH, pharmacies must keep a copy of the individual's prescription for the epinephrine autoinjector.

32. Can pharmacists submit claims for COVID-19 vaccine administration manually to the ministry, using a paper claim?

The ministry does not accept paper claims for administration of publicly funded COVID-19 vaccine unless 3 intervention codes are required to process the claim. All claims must be submitted electronically using the HNS.

33. If the pharmacist recommends to a physician that an eligible individual should get their COVID-19 vaccine, is the recommendation billable under the Pharmaceutical Opinion Program?

No. All eligible individuals are encouraged to receive the COVID-19 vaccine. In addition, because its administration is within the pharmacist's scope of practice (when administered in accordance with this initiative) and requires no permission from a primary care provider, such a recommendation does not meet the criteria of the Pharmaceutical Opinion Program.

Documentation and Reporting Requirements

34. Are individuals required to provide consent before the COVID-19 vaccine is administered in the pharmacy?

Yes. Informed consent, verbally or in writing, must be obtained prior to vaccine administration and should include a discussion of risks and benefits when applicable.

A [consent form](#) is available for vaccine administrators or individuals, if preferred.

35. What must be documented in the pharmacy when providing COVID-19 vaccines to eligible individuals?

Pharmacies must inform and provide written documentation to eligible individuals for

after-care instructions, any potential adverse effects they may experience following the vaccination and when to contact their health care provider.

In addition, in order to administer the COVID-19 vaccine, or an epinephrine auto-injector if an adverse event occurs after COVID-19 vaccine administration, in a long-term care home to a resident of the long-term care home, the pharmacy must have a prescription directing the administration of the vaccine or epinephrine auto-injector for the resident. The pharmacy must keep a copy of these prescriptions.

For more information on forms and resource materials pharmacies should contact their head office or the [Ontario Pharmacists Association](#). Resources can also be found on the [Ontario College of Pharmacists](#) website as well as [COVID-19 Vaccine Program](#).

For details on the documentation required for post-payment verification, refer to the most recent EO Notice: Administration of Publicly Funded COVID-19 Vaccines in Ontario Pharmacies.

36. How long must I keep the COVID-19 immunization and/or an epinephrine auto-injector administration record on file?

As for any HNS claim, pharmacies must keep a record of the required documentation. All pharmacy documentation records relating to the administration of the COVID-19 vaccine claim (and epinephrine auto-injector, if applicable) are part of the individual's medication record and must be maintained in a readily retrievable format for the appropriate record retention period of at least 10 years from the last recorded professional pharmacy service provided to the individual, or until 10 years after the day on which the individual reached, or would have reached, the age of 18 years, whichever is longer. Such records must also be maintained for the same period of time for the purposes of post-payment verification.

In addition, pharmacists are expected to review and adhere to the Ontario College of Pharmacists [Record Retention, Disclosure and Disposal Guidelines](#).

37. What are the reporting requirements for an adverse event following immunizations?

All adverse events following immunization must be reported to the local Medical Officer of Health within seven business days, per section 38 of the *Health Protection and Promotion Act*.

Written record of any adverse events following immunization (AEFIs) that may or may not result in the administration of epinephrine, and the circumstances relating to the administration of the substance should be reported using the [Ontario Adverse Events Following Immunization Reporting Form](#) and sent to the local public health unit. For additional information, contact your local public health unit and refer to Ministry [COVID-19 Vaccine Program](#). The ministry website has a list of [Ontario public health units](#).

In addition, it is mandatory for pharmacies to document the adverse event due to the

vaccine administration in COVaxON. For complete reporting requirements, refer to the pharmacy's COVID-19 Vaccine Agreement.

Long-term care home licensees also have recordkeeping and reporting requirements in the event of adverse drug reactions, and should refer to Ontario Regulation 246/22 (under the *Fixing Long-Term Care Act, 2021*) for more information.

38. If an individual has an adverse reaction to the COVID-19 vaccine, who is responsible for administering the epinephrine auto-injector?

Should the adverse reaction occur after the administration of the COVID-19 vaccine, the pharmacist (or the other health care provider) who administered the COVID-19 vaccine must administer the epinephrine auto-injector.

Under the *Regulated Health Professions Act, 1991*, the administration of a substance by injection is a controlled act which unauthorized persons are prohibited from performing.

Where the administration of a substance by injection is done for the purposes of rendering first aid or temporary assistance in an emergency, individuals are exempted from the prohibition of performing this activity. However, it is advisable to speak with the Ontario College of Pharmacists if you have any additional questions about your responsibilities and/or accountabilities in this regard.

In addition, in order to administer the epinephrine in a long-term care home to a resident of the long-term care home, the pharmacy must have a prescription directing the administration of the epinephrine to the resident.

39. What course of action should be followed when the pharmacy has administered an incorrect dose or vaccine to an individual?

For guidance on managing COVID-19 vaccine administration errors and deviations, please see the Government of Canada's [Planning guidance for immunization clinics for COVID-19 vaccines: Managing vaccine administration errors or deviations](#). For inadvertent immunization errors and deviations that are not addressed in the document linked above and/or that involve multiple errors or have additional complexity, health care providers are encouraged to contact their local public health unit or Public Health Ontario (at ivpd@oahpp.ca) for further advice.

The local public health unit should be notified, and vaccine administration errors or deviations should be handled and reported in accordance with both the site (if non-public health unit) and public health unit procedures. If an inadvertent vaccine administration error or deviation results in an AEFI, complete [Ontario's AEFI reporting form](#), including details of the error or deviation. See the guidance on reporting AEFI section above for additional information. This response provides basic information only. This response is not intended to take the place of medical advice, diagnosis or treatment, or legal advice.

40. How does a pharmacy make sure a long-term care home (LTCH) resident who is receiving a vaccine or epinephrine injection in the LTCH has the required prescription?

Pharmacies should work with LTCH licensees to ensure prescription requirements are met.

Additional Information:

For pharmacy billing call ODB Pharmacy Help Desk at 1-800-668-6641.

For Support for Provincial COVID-19 Vaccine Solution- COVaxON contact your pharmacy head office or the [Ontario Pharmacists Association](#) or the [Neighbourhood Pharmacy Association of Canada](#).

For COVID-19 vaccine rollout in pharmacy email the ministry at OPDPInfoBox@ontario.ca.

For Ministry COVID-19 vaccine information and planning resources refer to this [website](#).

Other health care providers and the public may call ServiceOntario, Infoline at 1-866-532-3161 TTY 1-800-387-5559. In Toronto, TTY 416-327-4282.