

NM VFC – Provider Change of Contact Information Form Instructions

The contact information (staff names, email addresses, mailing address, and phone numbers) you provided on the Provider Agreement is used by the State VFC Program to communicate alerts, updates, announcements, and reminders. You are strongly encouraged to check your email frequently for updates from the VFC Program.

When your contact information at your site changes you are required to do the following:

1. Complete the Change of Contact Information Form by printing legibly and provide the **VFC PIN#, Facility Name, any contact information changes, and the effective date of the change.**
2. **Fax OR Scan and Email** the form to your **Regional Immunization Coordinator.**
3. **Fax OR Scan and Email** the form to the **NM VFC Program: (505) 827-1064, lynne.padilla-truji@state.nm.us**

Your first point of contact for any issues related to managing VFC vaccines is your NM VFC Program Regional Immunization Coordinator who is located at the Regional Public Health Office. Your Coordinator's name and contact information can be found on the Temperature Log form.

Northwest and Metro	North	Southeast (a)/Southeast (b)	Southwest
NW: Cibola, McKinley, San Juan Metro: Bernalillo, Sandoval, Valencia, Torrance	Colfax, Guadalupe, Los Alamos, Mora, Rio Arriba, San Miguel, Santa Fe, Taos, Union, Harding	(a) Chavez, Curry, De Baca, Quay, Lincoln (b) Eddy Lea, Roosevelt, Lincoln	Catron, Doña Ana, Grant, Hidalgo, Luna, Otero, Sierra, Socorro
Immunization Coordinators: NORTHWEST Julie Linnens (505) 566-0502 (505) Fax METRO Erica Flores, RN (505) 383-0154 Erica.flores@state.nm.us Crystal Trujillo, RN (505) 383-0153 Crystal.trujillo@state.nm.us Immunization Health Educator: Melissa Padilla (505) 841-5890 Melissa.padilla@state.nm.us FAX: Bernalillo 505-383-0155 Other counties 505-383-0161	Immunization Nurse: Vacant Immunization Health Educator: Scarlett Swanson (505) 476-2643 Scarlettc.swanson@state.nm.us Immunization Clerk: Stephanie Salazar (505) 476-2631 Stephaniea.salazar@state.nm.us FAX: (505) 476-2694	Immunization Coordinator for SE (a): Kelly Bassett, RN (575) 746-9819, ext. 6818 Kelly.bassett@state.nm.us FAX: (575) 748-9755 Immunization Coordinator for SE (b): Helen Hall, RN (575) 397-2463, ext. 6516 Helen.hall@state.nm.us Immunization Clerk: Theresa Rubio (575) 624-6050 Ext. 6160 FAX: (575) 624-6170 FAX: (575) 393-1330 Theresa.rubio@state.nm.us	Immunization Coordinators: Ceci Sanchez, RN (575) 528-5186 Cecilia.sanchez@state.nm.us Laurie Garcia, RN (575) 528-5150 Laura.garcia2@state.nm.us FAX# (575) 528-5144

For questions about annual recertification/enrollment, vaccine orders and shipments contact your Region Coordinator.

For questions about Vaccine Management (storage and handling, returns, transfers, etc.) contact the VFC Health Educator, Sarah Meto – sarah.meto@state.nm.us



NM VFC Provider Change of Contact Information Form

Per your NM VFC Provider Agreement, you are required by the NM VFC Program to promptly submit this form to give the program notification of any changes in your Primary Vaccine Coordinator, Back-Up Vaccine Coordinator, Provider Contact Information, E-mail Addresses, Vaccine Shipping or Mailing Addresses, or your site's Telephone Numbers.

Instructions: 1. Scan and email OR Fax this completed form to your Regional Immunization Coordinator 2. Scan and Email OR Fax NM VFC Program Manager, Lynne Padilla: lynne.padilla-truji@state.nm.us , FAX#: (505) 827-1064

Contact Information	
VFC PIN#:	Site Name:
Contact Regional Coordinator before move- Mailing Address:	
Contact Regional Coordinator before move- Vaccine Shipping Address, City, State, Zip:	
Telephone #:	Fax #:
Primary <u>Vaccine Coordinator</u> Name:	
Primary <u>Vaccine Coordinator</u> Email Address:	
Change Effective Date:	

Add Personnel		Remove Personnel	
Back Up Full Name:		Full Name:	
Back Up Email Address:		Email Address:	
Full Name:		Full Name:	
Email Address:		Email Address:	
Full Name:		Full Name:	
Email Address:		Email Address:	

Name of Person submitting this form: (PRINT)	Email Address:
Signature:	Date: