



Your guide to vaccination coverage at clinics and retail locations

	Doctor's Office	Network Convenience Care Clinics	UnitedHealthcare Worksite Wellness Adult Flu Clinic ¹	Albertsons, Safeway, United Supermarkets Pharmacy	Costco Pharmacy	H-E-B	Hy-Vee	The Kroger Co., Harris Teeter	Meijer Pharmacy	Rite Aid Pharmacy	Walgreens Pharmacy	Walmart Stores Inc. & Sam's Club
Seasonal Influenza												
Influenza – Intramuscular, High Dose (Fluad [®] , Fluzone [®] High Dose)	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y
Influenza – Intranasal (FluMist [®])	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y
Influenza – Trivalent Intramuscular (Afluria [®] , Flublok [®] , Fluzone [®] , Fluvirin [®] , Fluarix [®] , Flucelvax [®] , Flulaval [®])	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y
Influenza – Quadrivalent Intradermal (Fluzone [®] Intradermal)	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y
Influenza – Quadrivalent Intramuscular (Afluria [®] , Flublok [®] , Fluzone [®] , Fluarix [®] , Flucelvax [®] , Flulaval [®])	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Hepatitis (A and B)												
Hepatitis A (Havrix [®] , Vaqta [®])	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y
Hepatitis B (Recombivax HB [®] , Engerix-B [®])	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y
Hepatitis A & B (Twinrix [®])	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	N	Y
HPV												
HPV – Human Papillomavirus (Gardasil 4 [®] , Gardasil 9 [®])	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	N
Measles, Mumps, Rubella and Varicella												
MMR (M-M-R [®] II)	Y	Y	N	Y	Y	Y	Y	N	Y	Y	N	Y
MMR-V (ProQuad [®])	Y	Y	N	Y	Y	Y	Y	N	Y	Y	N	Y
Varicella ² (Varivax [®])	Y	Y	N	Y	Y	Y	Y	N	Y	Y	N	Y
Meningitis												
Meningitis (MeNmune [®] , Menveo [®] , Menactra [®])	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y
Meningitis B (Trumenba [®] , Bexsero [®])	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y
Pneumonia												
Pneumococcal – PCV13 (Pneumovax 13 [®])	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y
Pneumococcal – Pnevna 20	N	N	N	N	N	N	N	N	N	N	N	N
Pneumococcal – PPSV23 (Pneumovax [®] 23)	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y
Shingles												
Shingrix [®]	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y
Whooping Cough												
Tdap (Adacel [®] , Boostrix [®])	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y

Y = The vaccine is in network at that location and covered at 100% with no additional cost.
 N = The vaccine is not available or considered out-of-network at that location, and incremental out-of-pocket costs may be incurred.



¹ Employer-sponsored on-site adult flu shot clinics.

² Requires coordination because of drug storage requirements.

Note: If you have a California HMO Plan, please contact your primary care physician to arrange services. If you have a CA PPO/POS Plan, you may obtain services as identified on reverse side.

Certain preventive care items and services, including immunizations, are provided as specified by applicable law, including the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services may be based on your age and other health factors. Other routine services may be covered under your plan, and some plans may require copayments, coinsurance or deductibles for these benefits. Always review your benefit plan documents to determine your specific coverage details.

Certain vaccines have coverage age limitations. Always review your benefit plan documents to determine your specific coverage details. Current immunization schedules are available from the Centers for Disease Control and Prevention at <https://www.cdc.gov/vaccines/schedules/index.html>.

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