Your guide to adult vaccination coverage at convenience care clinics and retail pharmacies.

	Doctor's Office	Network Convenience Care Clinics	UnitedHealthcare Worksite Wellness Adult Flu Clinic¹	CVS Pharmacy	Albertsons, New Albertsons, Safeway, United Supermarkets Pharmacy	H-E-B	Kmart Pharmacy	The Kroger Co., Harris Teeter	Meijer Pharmacy	Publix Pharmacy	Rite Aid Pharmacy	Walgreens Pharmacy	Walmart Stores Inc. & Sam's Club	Hy-Vee
Seasonal Influenza														
Influenza - Trivalent Intramuscular (Afluria®, Flublok®, Fluzone®, Fluvirin®, Fluarix®, Flucelvax®, Flulaval®)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Influenza - Quadrivalent Intramuscular (Afluria®, Flublok®, Fluzone®, Fluarix®, Flucelvax®, Flulaval®)	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Influenza - Quadrivalent Intradermal (Fluzone® Intradermal)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Influenza - Intranasal (FluMist®)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Influenza - Trivalent Intramuscular, High Dose (Fluad®, Fluzone® High Dose)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Pneumonia														
Pneumococcal - PPSV23 (Pneumovax®23)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Pneumococcal - PCV13 (Prevnar 13®)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Shingles														
Shingrix®	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Zostavax ^{®2}	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Hepatitis (A and B)														
Hepatitis A (Havrix®, Vaqta®)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes
Hepatitis B (Recombivax HB®, Engerix-B®)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Hepatitis A & B (Twinrix®)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes
Meningitis														
Meningitis (Menomune®, Menveo®, Menactra®)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Meningitis B (Trumenba®, Bexsero®)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Measles, Mumps, Rubella and Varicella														
MMR (M-M-R* II)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes
MMR-V (ProQuad®)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes
Varicella ³ (Varivax®)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes
Whooping Cough														
Tdap (Adacel®, Boostrix®)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
HPV														
HPV—Human Papillomavirus (Gardasil 4®, Gardasil 9®)	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

Yes = The vaccine is in network at that location and covered at 100% with no additional cost.

No = 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 Check with providers for availability of vaccines.
- ³ 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 above.

Certain preventive care services, including immunizations, are provided as specified by the Patient Protection and Affordable Care Act (PPACA), with no cost-sharing to you. Some plans may require copayments, deductibles and/or coinsurance for these benefits. Always review your plan documents to determine your specific coverage.

Certain vaccines have coverage age limitations.

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The health care reform law requires the coverage of certain preventive services, based on your age and other health factors, with no cost-sharing. The preventive care services covered are those preventive services specified in the health care reform law. United Health care also covers other services, which may require a copayment, coinsurance or deductible. Members should refer to their plan documents for specific coverage details.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc. or their affiliates. Health Plan coverage provided by or through a UnitedHealthcare company.

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