Vaccines: What Medicare Pays For

Vaccines play a vital role in preventing illness and maintaining health, but knowing if and when Medicare pays for vaccines can be confusing. This fact sheet clarifies which parts of Medicare cover commonly recommended vaccines.

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Flu shot

Each year in the United States, 9 out of 10 flu-related deaths and 6 out of 10 flu-related hospital stays occur among people aged 65+. An annual flu shot is one of the best preventive measures to help protect against the flu. The shot is available in both a regular strength dose and a high dose that provides extra immunity, which is often recommended for older adults.
Medicare Part B pays for one seasonal¹ flu shot (either dose) with no co-pay as long as the individual visits a provider that accepts assignment. Medicare Advantage members also cannot be charged for the flu shot so long as they receive it from an in-network provider.

To learn more about the flu vaccine visit www.flu.gov.

Each year, the National Council on Aging (NCOA) runs a campaign, Flu + You, to educate seniors about the flu shot. Counselors can download outreach materials at www.ncoa.org/flu.

**Shingles vaccine**

Shingles is a painful skin rash caused by the same virus that causes chickenpox. Adults aged 50+ are at most risk for shingles, which can lead to lifelong pain. The shingles vaccine (Zostavax) is a one-time shot recommended for all adults over age 60 by the Centers for Disease Control and Prevention (CDC).

Medicare Part B does not pay for the shingles vaccine. However, **all Part D plans are required to cover the vaccine and its administration.**

Part D plans have very specific rules about the administration of the shingles vaccine and copayments. For example, a plan may specify that it will only cover the injection if administered in a health provider’s office, and not a pharmacy. Part D plans must pay for administration by a physician, but the patient should contact the plan to determine whether he/she must pay the physician upfront for the vaccine and then seek reimbursement, and whether the physician’s charges exceed the plan’s allowable charge. Plans may also require a set copayment to receive the shot, or payment of a percentage of the vaccine cost (coinsurance).

Medicare beneficiaries should contact their Part D plans to find out the specific coverage rules for the shingles vaccine. Questions they should ask include:

- How much will I be charged (copayment or coinsurance) for the vaccine?
- How will the plan pay for the administration of the shot if I get it in my doctor’s office? Will I need to pay my doctor up front and seek reimbursement from the plan?
- Do I need to get the shot at a specific location in order to for it to be covered? Can I get the shot at a pharmacy or drugstore and get reimbursed by my plan?

Learn more about shingles and the shingles vaccine from the CDC at: http://www.cdc.gov/features/shingles/.

¹ While Medicare pays for the flu shot once per influenza season, additional flu shots may be covered if considered medically necessary. See page 4 of http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/qr_immun_bill.pdf.
**Pneumococcal (pneumonia) shots**

Pneumococcal disease is a bacterial infection that causes many types of illness, from mild ear and sinus infections to life-threatening pneumonia and meningitis.

The CDC recommends that all adults aged 65+, and younger adults with long-term health problems or chronic conditions, receive the pneumococcal shot. One shot is usually all a person will need, and an individual can get the pneumococcal vaccine on the same day as the flu shot (or at any other time).

Medicare Part B pays for one pneumococcal vaccine with no co-pay as long as the individual visits a provider that accepts assignment. Medicare Advantage members also cannot be charged for the shot so long as they receive it from an in-network provider.

Learn more about the pneumococcal vaccine at [http://www.vaccineinformation.org/pneumococcal/](http://www.vaccineinformation.org/pneumococcal/).

**Hepatitis B vaccine**

Hepatitis B is a liver disease that results from infection with the Hepatitis B virus. It can range in severity from a mild illness lasting a few weeks to a serious, lifelong illness that affects the liver. Hepatitis B is usually spread through bodily fluids (sexual contact, injection drug use, or at birth).

A person usually needs three shots to gain complete protection against Hepatitis B.

Medicare Part B covers Hepatitis B shots for people considered at high or medium risk. This includes individuals who have:

- Hemophilia
- End Stage Renal Disease (ESRD)
- Diabetes
- Other chronic conditions that lower resistance to infection

People with Medicare should consult their health care provider about whether they are considered at risk. Individuals with Original Medicare will have no co-pay as long as they visit a provider that accepts assignment. Medicare Advantage members also cannot be charged for the vaccines so long as they receive it from an in-network provider.

General vaccine information

Several trusted sites provide comprehensive information about vaccination schedules and possible risks associated with vaccines.

- Vaccines.gov is run by the U.S. Department of Health and Human Services and has advice for vaccinations for all ages and individuals.
- The CDC has comprehensive information for consumers and providers at: http://www.cdc.gov/vaccines/default.htm.