



# Important Flu, Pneumonia, and Shingles Vaccination Information for: **AULTCARE PPO**

The Centers for Disease Control and Prevention recommends the following adult immunization schedule:

- **Flu:** One dose every year
- **Pneumonia:** There are 2 types of pneumococcal vaccines. You should get 1 dose of PCV13 and at least 1 dose of PPSV23 depending on your age and health condition.
- **Shingles:** Two doses of Shingrix 2-6 months apart for adults age 50 or older, regardless of past shingles episode or Zostavax vaccine

*Always check with your doctor before receiving any vaccination. Also, consider taking advantage of any free vaccine offerings in your community.*

## ***What do I need to know if I go to my doctor's office?***

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- Show your AultCare ID card.
- The flu, pneumonia, and shingles vaccines, and their administration are covered at 100% when using a network provider; otherwise, you may be responsible for part of the bill.
- If the doctor's office asks you for payment, you are responsible for paying the bill and requesting reimbursement from your medical plan. Ask for an itemized bill and proof of payment. Contact AultCare for a reimbursement form.
- Your doctor's office will need to provide you a prescription only if they ask you to pick up the shingles vaccine at a pharmacy before your appointment. The doctor's office may call in your prescription to the pharmacy. Show your AultCare ID card at the pharmacy when purchasing the vaccine.
- You may be responsible for an office visit co-pay if the doctor provides any other services during your appointment.

## ***What if I go to a pharmacy?***

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- Show your AultCare ID card.
- The vaccines and their administration are covered at 100%, at any network pharmacy.
- You do not need a prescription to receive a flu, pneumonia, or shingles vaccine in Ohio.
- If the pharmacy asks you for payment, you are responsible for paying the bill and requesting reimbursement from your medical plan. Ask for an itemized bill and proof of payment. Contact AultCare for a reimbursement form.

## ***What if I use a vaccine clinic?***

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- Show your AultCare ID card.
- **If the clinic does not accept your health care coverage:**  
You are responsible for paying the bill and requesting reimbursement from your medical plan. Ask for an itemized bill and proof of payment. Contact AultCare for a reimbursement form.

**Contact information for your plan is found on the back of your ID card.**