Preventive Vaccines (Immunizations)

Policy Number: 2026D0031U
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➲ Instructions for Use

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Related Commercial/Individual Exchange Policy

- Preventive Care Services

Related List

- Professional Medical Society Preventive Vaccine Recommendations: Vaccine Codes

Application

UnitedHealthcare Commercial

This Medical Drug Policy applies to UnitedHealthcare Commercial benefit plans.

UnitedHealthcare Individual Exchange

This Medical Drug Policy applies to Individual Exchange benefit plans.

Coverage Rationale

Coverage Conditions

A vaccine (immunization) is considered covered as a preventive care service benefit after **all** of the following conditions are satisfied:

- The U.S. Food and Drug Administration (FDA) has approved the vaccine (immunization); **and**
- The vaccine (immunization) is not otherwise excluded by the plan as explained in the member specific benefit plan document; **and**
- **One** of the following:
  - The vaccine (immunization) meets the requirements for coverage as a preventive service as set forth in the Medical Policy titled Preventive Care Services and is therefore listed in the *Preventive Care Services: Vaccine Codes* policy appendix; **or**
  - The vaccine (immunization) is subject to explicit recommendations (e.g., should, shall, is), and not permissive ("may") recommendations by one of the following organizations:
    - American Academy of Family Physicians
    - American Academy of Pediatrics
    - American College of Obstetricians and Gynecologists

Coverage Clarifications

- **Preventive**: In the case of a public health emergency (as defined by the Centers for Disease Control or state or local public health departments), UnitedHealthcare may choose to apply preventive benefits to a new vaccine if the vaccine has FDA approval, even when the above criteria have not been met.
- **Therapeutic**: Certain vaccines are used as a medical treatment. For example, therapeutic treatment of an animal bite using the rabies vaccine. These vaccines are under the plan's treatment benefits, not under preventive care benefits. These vaccines are not subject to the coverage criteria in this section.
- **Excluded**: Vaccines that fall under one of the exclusions in the member specific benefit plan document. For example, most plans exclude travel-specific vaccines.

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Applicable Codes

Vaccine Codes List
Professional Medical Society Preventive Vaccine Recommendations: Vaccine Codes

U.S. Food and Drug Administration (FDA)

This section is to be used for informational purposes only. FDA approval alone is not a basis for coverage.

Refer to the FDA approved product package inserts regarding precautions associated with each vaccine.

References

1. ACIP Vaccine Recommendations and Guidelines: https://www.cdc.gov/acip-recs/hcp/vaccine-specific/index.html?CDC_AAref_Val=https://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/index.html . Accessed September 17, 2025.
2. Kroger A, Bahta L, Hunter P. General Best Practice Guidelines for Immunization. Best Practices Guidance of the Advisory Committee on Immunization Practices (ACIP). www.cdc.gov/vaccines/hcp/acip-recs/general-recs/downloads/general-recs.pdf. Accessed September 17, 2025.
3. U.S. Food and Drug Administration (FDA), Complete List of Vaccines Licensed for Immunization and Distribution in the US: http://www.fda.gov/BiologicsBloodVaccines/Vaccines/ApprovedProducts/UCM093833. Accessed September 17, 2025.
4. Vaccines and Immunizations resource page. Centers for Disease Control and Prevention Web site. https://www.cdc.gov/vaccines/index.html . Accessed September 17, 2025.
5. AAP Immunization Schedule. American Academy of Pediatrics Web site. https://publications.aap.org/redbook/resources/15585 . Accessed September 17, 2025.
6. Immunization Schedules. American Academy of Family Physicians (AAFP) Web site. https://www.aafp.org/family-physician/patient-care/prevention-wellness/immunizations-vaccines/immunization-schedules.html. Accessed September 17, 2025.
7. American College of Obstetricians and Gynecologists. https://www.acog.org/clinical . Accessed September 17, 2025.

Policy History/Revision Information

Date	Summary of Changes
11/01/2026	**Applicable Codes** • Added reference link to the applicable codes list titled Professional Medical Society Preventive Vaccine Recommendations: Vaccine Codes (CPT codes 90616, 90657, and 90658) **Supporting Information** • Archived previous policy version 2025D0031T

Instructions for Use

This Medical Benefit Drug Policy provides assistance in interpreting UnitedHealthcare standard benefit plans. When deciding coverage, the member specific benefit plan document must be referenced as the terms of the member specific benefit plan may differ from the standard plan. In the event of a conflict, the member specific benefit plan document governs. Before using this policy, check the member specific benefit plan document and any applicable federal or state mandates. UnitedHealthcare reserves the right to modify its policies and guidelines as necessary. This Medical Benefit Drug Policy is provided for informational purposes. It does not constitute medical advice.

This Medical Benefit Drug Policy may also be applied to Medicare Advantage plans in certain instances. In the absence of a Medicare National Coverage Determination (NCD), Local Coverage Determination (LCD), or other Medicare coverage guidance, CMS allows a Medicare Advantage Organization (MAO) to create its own coverage determinations, using objective evidence-based rationale relying on authoritative evidence (Medicare IOM Pub. No. 100-16, Ch. 4, §90.5).

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UnitedHealthcare may also use tools developed by third parties, such as the InterQual® criteria, to assist us in administering health benefits. UnitedHealthcare Medical Benefit Drug Policies are intended to be used in connection with the independent professional medical judgment of a qualified health care provider and do not constitute the practice of medicine or medical advice.

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