



PROVIDER Bulletin



August 14, 2026

This Provider Bulletin applies to the lines of business and provider types checked below:

- ☒ PHP (Medicare) ☒ Primary Care Physicians ☐ Specialists
☒ PHC (Medicaid) ☐ Hospitals ☐ Ancillary ☐ AHF Grants
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Purpose of This Bulletin

The California Department of Health Care Services (DHCS) issued All Plan Letter (APL) 26-015 to clarify immunization requirements for Medi-Cal Managed Care Plans (MCPs) and their contracted providers. The APL incorporates federal requirements under the Inflation Reduction Act (IRA), existing Medi-Cal preventive service requirements, and provider responsibilities related to vaccine administration, access, documentation, reimbursement, and reporting. APL 26-015 supersedes APL 24-008.

Background

The Inflation Reduction Act requires state Medicaid and Children's Health Insurance Program (CHIP) programs to cover all FDA-approved adult vaccines recommended by the Advisory Committee on Immunization Practices (ACIP) and vaccine administration without member cost-sharing beginning October 1, 2023. Coverage extends to all categories of ACIP recommendations, including recommendations based on age, risk factors, occupation, travel, and shared clinical decision-making.

Medi-Cal Managed Care Plans are contractually required to provide preventive services that include immunizations recommended by:

- Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP)
 - American Academy of Family Physicians (AAFP)
 - American College of Obstetricians and Gynecologists (ACOG)
 - California Department of Public Health (CDPH)
 - United States Preventive Services Task Force (USPSTF)
 - Health Resources and Services Administration (HRSA) Bright Futures Program
 - National Academy of Medicine preventive services recommendations for women
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Provider Responsibilities

Timely Access to Immunizations

Participating providers are responsible for ensuring members receive timely access to all recommended immunizations in accordance with the most current recommendations and schedules issued by CDPH and AAP, including Bright Futures recommendations for children and adolescents.

Providers should not delay immunizations when adequate vaccine supply exists.

Immunization Assessment at Every Appropriate Visit

Providers must assess and document immunization status during routine and preventive encounters. Immunization needs should be reviewed during:

- Adult preventive visits
- Initial Health Assessments (IHA)
- Illness and follow-up visits
- Care management appointments
- Prenatal visits
- Postpartum visits
- School, sports, or physical employment
- Travel consultations
- Pharmacy encounters
- Local Health Department visits

Providers should take every opportunity to identify and close immunization gaps.

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Adult Immunization Requirements

Adult members must have access to all FDA-approved vaccines recommended by ACIP and CDPH. Coverage includes immunizations recommended due to:

- Age
- Chronic medical conditions
- Pregnancy
- Occupational exposure
- Travel-related risk
- Shared clinical decision-making recommendations

Members may not be charged cost-sharing amounts for covered vaccines or vaccine administration.

Prior Authorization Requirements

AAP Bright Futures and CDPH-recommended immunizations are considered preventive services and:

- ✓ Must be covered
- ✓ Must be readily available
- ✓ Must not require prior authorization
- ✓ Must not be subject to administrative barriers that delay care

Where Medi-Cal Provider Manual requirements are less restrictive than other clinical guidelines, the less restrictive criteria apply.

Medically Necessary and Off-Label Vaccine Use

Medi-Cal Managed Care Plans must cover vaccines and vaccine administration when determined medically necessary by the treating provider, including certain off-label uses.

Examples include:

- Immunization needs related to underlying medical conditions
- Specialized immunocompromised populations

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- Pregnancy-related indications
 - Other medically appropriate uses supported by professional clinical recommendations

Health plans are expected to have utilization management processes that facilitate timely approval and access while minimizing barriers to care. Vaccines supported by CDPH, AAP, CDC, or recognized professional society recommendations should not require off-label utilization review.

Medi-Cal Rx Vaccine Coverage

Vaccines may be billed through Medi-Cal Rx as a pharmacy benefit. DHCS reimburses enrolled pharmacy providers for vaccine claims submitted through Medi-Cal Rx.

Key billing reminders:

- Vaccine administration fees may be billed through applicable reimbursement pathways.
- Pharmacist consultation and vaccine assessment services are billed as pharmacist services through the member's managed care plan.
- Pharmacy providers must comply with Medi-Cal Rx billing requirements and National Council for Prescription Drug Program (NCPDP) standards.

The Health Plan must reimburse Medi-Cal enrolled pharmacy providers, not individual pharmacists, for rendering pharmacist services.

Immunization Registry Reporting Requirements

California law requires healthcare providers who administer vaccines to report immunization information to designated immunization registries.

Reporting Requirements

Providers must:

- Submit vaccine administration records to the California Immunization Registry (CAIR) or applicable regional registry.
- Submit data as soon as possible and no later than 14 calendar days following vaccine administration.

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- Ensure data is complete and accurate.
 - Maintain records supporting submitted information.

Important Reminder

Reporting requirements apply to:

- Physicians
- Nurse practitioners
- Physician assistants
- Pharmacies
- Pharmacists
- Clinics
- Hospitals
- Other vaccine administrators

Timely registry reporting supports continuity of care, population health management, public health surveillance, and assessment of immunization disparities.

COVID-19 Vaccine Coverage

COVID-19 vaccine administration continues to be carved out of Medi-Cal Managed Care and remains covered through Medi-Cal Fee-for-Service (FFS) for both medical and pharmacy claims. Providers should follow current DHCS and CDPH guidance for COVID-19 vaccine administration and billing.

The Health Plan must reimburse local health departments for the administration fees, excluding immunizations for which the enrollee is already up to date.

Provider Compliance Checklist

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Participating providers should immediately review and ensure compliance with the following requirements:

- ☐ Assess immunization needs at every appropriate encounter
- ☐ Follow current ACIP, AAP, and CDPH immunization schedules
- ☐ Provide recommended preventive vaccines without prior authorization
- ☐ Maintain adequate vaccine inventory
- ☐ Participate in the Vaccines for Children Program when applicable
- ☐ Report administered vaccines to CAIR within 14 days
- ☐ Ensure pharmacists meet ORP enrollment requirements
- ☐ Maintain documentation supporting medical necessity when applicable
- ☐ Educate members regarding recommended immunizations
- ☐ Monitor internal workflows to promote timely access to vaccines

Resources

- DHCS All Plan Letter 26-015: Immunization Requirements
- California Department of Public Health Immunization Branch
- CDC Advisory Committee on Immunization Practices (ACIP)
- California Immunization Registry (CAIR)
- Medi-Cal Provider Manual

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