CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES
Michelle Baass | Director

DATE: July 14, 2026

ALL PLAN LETTER 26-015

SUPERSEDES ALL PLAN LETTER 24-008

TO: ALL MEDI-CAL MANAGED CARE PLANS

SUBJECT: IMMUNIZATION REQUIREMENTS

PURPOSE:

The purpose of this All Plan Letter (APL) is to clarify requirements related to the provision of immunization services.

BACKGROUND:

The Centers for Medicare & Medicaid Services (CMS) issued guidance in State Health Official (SHO) Letter 23-003[1] on section 11405 of the Inflation Reduction Act (IRA) (Pub. L. 117-169) which mandates Medicaid and Children's Health Insurance Program (CHIP) to cover all Federal Food and Drug Administration (FDA)-approved adult vaccines recommended by the Advisory Committee on Immunization Practices (ACIP) and their administration, without cost sharing, beginning October 1, 2023.[2] Pursuant to the Early and Periodic Screening, Diagnostic, and Treatment benefit (EPSDT), children under age 21 will continue to be eligible for any vaccine that is on the Centers for Disease Control (CDC)/ACIP pediatric immunization schedule or is recommended by a Provider.

Medi-Cal managed care plans (MCPs) are contractually required to cover a wide range of preventive services and screenings including, at a minimum:

[1] SHO Letter 23-003 is available at: https://www.medicaid.gov/sites/default/files/2023-06/sho23003.pdf.

[2] The IRA notes that there are multiple categories of ACIP recommendations for adult vaccines, including recommendations described on the federal CDC/ACIP adult immunization schedule (as determined by age and risk and recommendations for shared clinical decision-making), and recommendations based on risk due to health condition, occupation, and travel. CMS interprets the reference to ACIP recommendations in section 1905(a)(13)(B) of the Social Security Act (SSA) [42 U.S.C. section 1396d(a)(13)(B)], to include "any category of ACIP recommendations" and "[t]he IRA coverage requirement is therefore not limited to vaccines that ACIP includes on the immunization schedules or recommends for routine use."

- Immunizations in accordance with a recommendation from the CDC/ACIP, AAP, the American College of Obstetricians and Gynecologists, the American Academy of Family Physicians, or any modification or supplement to that recommendation adopted by the California Department of Public Health (CDPH).[3]
- A and B grade services recommended by the United States Preventive Services Task Force;
- Preventive Care and screening for children/adolescents recommended by the Health Resources and Services Administration's (HRSA's) Bright Futures Program (lead by the American Academy of Pediatrics (AAP), which are set forth in the Bright Futures/AAP Periodicity Schedule); and
- Additional preventive services for women as recommended by the National Academy of Medicine (formerly the "Institute of Medicine").

COVID-19 vaccinations and vaccine administration are carved out for MCPs and covered through Medi-Cal Fee-For-Service (FFS) for medical and pharmacy claims. In addition, the MCP Contract states that Prior Authorization requirements are not to be applied to certain services, including preventive services.[4] This is consistent with Medi-Cal FFS requirements.[5]

MCPs are required to timely provide recommended immunizations for all Members.[6] MCPs must provide:

1) childhood/adolescent immunizations to Members under age 21 in accordance with the most recent childhood/adolescent immunization schedule and recommendations published by AAP (which are set forth in the Bright Futures/AAP Periodicity Schedule), as modified or supplemented by CDPH, and in accordance with EPSDT; and

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[3] See W&I section 14132.995 and H&S section 120164. State law is searchable at: https://leginfo.legislature.ca.gov/faces/home.xhtml.
[4] MCP Contract, Exhibit A, Attachment III, Subsection 2.3.1 (Prior Authorizations and Review Procedures). The Medi-Cal managed care boilerplate Contract is available at: https://www.dhcs.ca.gov/provgovpart/Pages/MMCDBoilerplateContracts.aspx.
[5] Medicaid State Plan, Limitations on Attachment 3.1-A, page 18a, item 13(c), which can be found at: https://www.dhcs.ca.gov/SPA/Documents/Limits-to-Attach-3-1-A.pdf.
[6] MCP Contract, Exhibit A, Attachment III, Subsections 5.3.4.C (Services for Members Less Than 21 Years of Age) and 5.3.5.C (Services for Adults).

2) adult immunizations in accordance with the most recent adult immunization schedule and recommendations published by CDPH.[7]

Please note that for Members under age 21, other vaccines and vaccine administration are covered under EPSDT if the service is determined to be Medically Necessary for the Member based on an individualized assessment. The MCPs' coverage obligation to provide immunizations is based on the AAP/Bright Futures-recommended immunizations, and as modified or supplemented by CDPH, included in the Preventive Services[8], ESPDT[9], Immunizations[10], and Vaccines for Children (VFC)[11] sections of the Medi-Cal Provider Manual. These are provided as a medical benefit.

POLICY:

Given an adequate vaccine supply in the state, MCPs must ensure timely access to all FDA-approved immunizations for their Members, in accordance with the most recent schedules and recommendations published by CDPH and AAP (as part of the AAP/Bright Futures periodicity schedule, as well as compliance with EPSDT, for children/adolescents), as applicable and as modified or supplemented by CDPH, based upon Medical Necessity, and regardless of a Member's age, sex, or medical condition, including pregnancy. MCPs are required to cover vaccines and their administration, including those used for indications other than those approved by the FDA (i.e., "off-label use"), when such use is determined by the Member's Provider to be Medically Necessary. MCPs are expected to have Utilization Management policies and processes in place to evaluate, authorize, and make available Medically Necessary vaccines for off-label uses in a timely manner to reduce barriers and avoid delays. This expectation does

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[7] CDPH-recommended Immunization Schedules can be found on CDPH's website at: https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/publichealth4all/vaccines.aspx.
[8] The Preventive Services section of the Medi-Cal Provider Manual can be found at: https://mcweb.apps.prd.cammis.medi-cal.ca.gov/assets/DDBB7BD0-9D06-4B3C-9597-7FAFF5471E6F/prev.pdf?access_token=6UyVkRRfByXTZEWIh8j8QaYylPyP5ULO.
[9] The EPSDT section of the Medi-Cal Provider Manual can be found at: https://mcweb.apps.prd.cammis.medi-cal.ca.gov/assets/032769EA-D044-4B1D-A973-C617165FE3BE/epsdt.pdf?access_token=6UyVkRRfByXTZEWIh8j8QaYylPyP5ULO.
[10] The Immunizations section of the Medi-Cal Provider Manual can be found at: https://mcweb.apps.prd.cammis.medi-cal.ca.gov/assets/49FB210E-E257-445C-84FA-1C39C388291C/immun.pdf?access_token=6UyVkRRfByXTZEWIh8j8QaYylPyP5ULO.
[11] The VFC section of the Medi-Cal Provider Manual can be found at: https://mcweb.apps.prd.cammis.medi-cal.ca.gov/assets/C08C7E98-AA63-4BC8-BA3C-BE8E06ED9A31/vaccine.pdf?access_token=6UyVkRRfByXTZEWIh8j8QaYylPyP5ULO.

not apply to any vaccine given in accordance with California Department of Public Health (CDPH), AAP, US Centers for Disease Control and Prevention, or relevant professional society recommendations, and such use should not be subject to Utilization Management review for off-label determinations.

Overview

MCPs must require their Network Providers to document each Member's need for Medically Necessary immunizations as part of all regular health visits, including, but not limited to, the following types of Encounters:

- Illness, care management, or follow-up appointments
- Initial Health Appointments
- Pharmacy services
- Prenatal and postpartum care
- Pre-travel visits
- Sports, school, or work physicals
- Visits to a Local Health Department (LHD)
- Well patient checkups

As AAP/Bright Futures- and CDPH-recommended immunizations are viewed as preventive services, these services must not be subject to Prior Authorization. In instances where the Medi-Cal Provider Manual outlines immunization criteria that is less restrictive than AAP/Bright Futures or CDPH criteria, MCPs must provide the immunization in accordance with the less restrictive Medi-Cal Provider Manual criteria.

Pharmacist Administered Vaccines

Business and Professions Code (B&P) section 4052(a)(3) authorizes pharmacists to administer drugs and biological products that have been ordered by a prescriber. A pharmacist may also independently initiate and administer vaccines with a recommendation from ACIP as of January 1, 2025, or as modified or supplemented by the CDPH for persons three years of age and older.[12] MCPs must reimburse pharmacy Providers for rendering the pharmacist-administered vaccine services in accordance with the requirements of B&P and CCR.

Pharmacist Services

[12] B&P section 4052(a)(15) and 4052.05. Also see 16 CCR section 1746.4. The CCR is searchable at: https://govt.westlaw.com/calregs/Search/Index.

Medi-Cal covers and reimburses enrolled Medi-Cal pharmacy Providers for pharmacist services[13], which includes initiating and administering immunizations, as authorized in B&P sections 4052(a)(15) and 4052.05. MCPs must cover pharmacist services, as outlined in Medi-Cal policy, when rendered to a Member in an outpatient pharmacy setting by a pharmacist who is trained and is providing the service in accordance with the Board of Pharmacy protocols. The rendering pharmacist must be enrolled as an ordering, referring, and prescribing (ORP) Medi-Cal Provider.[14] Medi-Cal does not reimburse individual pharmacists directly but reimburses the Medi-Cal enrolled pharmacy Provider where the claim is submitted. Pharmacist services may be billed to MCPs on a medical claim for Members. MCPs must reimburse Medi-Cal enrolled pharmacy Providers (not individual pharmacists) for rendering the specified pharmacist services in accordance with the requirements of the B&P and the CCR. Please refer to the Medi-Cal Provider Manual for pharmacist services coverage and reimbursement policy.[15]

VFC Program

Vaccines are available to Medi-Cal members younger than 19 years of age free of charge through the federal VFC Program. Medi-Cal Providers, including medical and pharmacy Providers who are enrolled as VFC Providers, may administer VFC-funded vaccines to VFC-eligible Medi-Cal members. VFC vaccines must be administered in accordance with CDC/ACIP recommendations. The ordering pharmacists must be enrolled in Medi-Cal as an ORP Provider for claim reimbursement. MCPs must reimburse for the initiation and administration fees but do not reimburse for the cost of vaccine (vaccine is provided for free by the VFC Program).

Medi-Cal Rx

Vaccines may be billed as a pharmacy benefit to Medi-Cal Rx, and the Department of Health Care Services (DHCS) will reimburse pharmacy Providers for vaccines billed on pharmacy claims. Reimbursement for pharmacy administration of VFC-funded vaccines will be paid to the Medi-Cal enrolled pharmacy Provider for Members under Medi-Cal

[13] The Pharmacist Services section of the Medi-Cal Provider Manual can be found at: https://mcweb.apps.prd.cammis.medi-cal.ca.gov/assets/A7121167-6D74-4E71-A62C-FF248C861B5A/pharmserv.pdf?access_token=6UyVkRRfByXTZEWIh8j8QaYylPyP5ULO.
[14] See APL 22-013 for more information regarding Provider enrollment. APLs are searchable at: https://www.dhcs.ca.gov/formsandpubs/Pages/AllPlanLetters.aspx.
[15] See the Medi-Cal Provider Manual for Pharmacist Services, at: https://mcweb.apps.prd.cammis.medi-cal.ca.gov/assets/A7121167-6D74-4E71-A62C-FF248C861B5A/pharmserv.pdf?access_token=6UyVkRRfByXTZEWIh8j8QaYylPyP5ULO.

Rx if the pharmacy identifies that it administered the vaccine by entering the applicable values following National Council for Prescription Drug Program standards.[16] Pharmacies also have the option of submitting a medical claim to the Member's MCP to be reimbursed for the administration fee in lieu of submitting a pharmacy claim to Medi-Cal Rx. However, the Member's initiation fee (consultation and assessment of need for vaccination) must be billed under pharmacist services as a medical benefit to the MCP and not to Medi-Cal Rx.

LHDs

The MCP Contract also includes requirements that allow all Members to access LHDs for immunizations and for MCPs to reimburse LHDs for the administration fee for immunizations administered to Members, excluding immunizations for which the Member is already up to date.[17]

Patient Vaccination Records and Reporting

H&S section 120440 requires that all California health care Providers submit patient vaccination records to LHDs operating countywide, or regional immunization information and reminder systems and the CDPH, as soon as possible. Title 16 CCR section 1746.4(e) requires pharmacists to report the administration of any vaccine, within 14 days, to the appropriate immunization registry designated by the immunization branch of CDPH, which is represented by the California Immunization Registry (CAIR). H&S section 120440 requires all California healthcare Providers who administer vaccines to enter immunization information for each patient in the immunization registry and allows the information to be used to support assessment of health disparities in immunization coverage. The MCP Contract requires that MCPs ensure that Member-specific immunization information is reported to immunization registries established in an MCP's Service Area(s) as part of the Statewide Immunization Information System.[18] Reports must be made within 14 calendar days and in accordance with state and federal laws. Although health care Providers are obligated under the state

[16] See the Medi-Cal Rx Provider Manual, section 4.6.18, at: https://medi-calrx.dhcs.ca.gov/cms/medicalrx/static-assets/documents/provider/forms-and-information/manuals/Medi-Cal_Rx_Provider_Manual.pdf.
[17] MCP Contract, Exhibit A, Attachment III, Subsection 3.1.12 (Immunizations) and 5.2.8.E (Specific Requirements for Access to Programs and Covered Services).
[18] MCP Contract, Exhibit A, Attachment III, Subsections 5.3.4.C (Services for Members Less than 21 Years of Age) and Subsections 5.3.5.C (Services for Adults).

law to report the immunization data to the registry, since MCPs have oversight of their Network Providers, it is the responsibility of the MCPs to ensure compliance. MCPs are not responsible for oversight of out-of-Network Providers vaccination reporting.

MCP Responsibilities for Policies and Procedures (P&Ps), Subcontractors, Downstream Subcontractors, Network Providers, Network Providers, and Enforcement Actions

Updates in this APL necessitate a change in MCP's contractually required P&Ps. MCPs must submit updated P&Ps to the Managed Care Operations Division (MCOD)-MCP Submission Portal[19] within 90 calendar days of the release of this APL.

MCPs are responsible for ensuring that their Subcontractors, Downstream Subcontractors, and Network Providers comply with all applicable federal and state laws and regulations, MCP Contract requirements, and other DHCS guidance, including APLs and Policy Letters. These requirements must be communicated by each MCP to all Subcontractors, Downstream Subcontractors, and Network Providers. DHCS may impose enforcement actions, including Corrective Action plans, as well as administrative and/or monetary sanctions for non-compliance. MCPs should review their Subcontractor, Downstream Subcontractor, and Network Provider Agreements to ensure compliance with this APL. For additional information regarding enforcement actions, see APL 25-007. Any failure to meet the requirements of this APL may result in enforcement actions.

If you have any questions regarding this APL, please contact your MCOD Contract Manager.

Sincerely,

Original Signed by Dennis Hsieh

Dennis Hsieh, M.D., J.D.

Division Chief, Managed Care Quality and Monitoring Division

[19] The MCOD-MCP Submission Portal can be found at: https://cadhcs.sharepoint.com/sites/MCOD-MCPSubmissionPortal/SitePages/Home.aspx.