Flu Shot Information



State System UPMC HMO Plan Members - No Cost Flu Shot

- UPMC HMO members of the State System plan, age 3 and older, can obtain a no-cost flu shot.
 This free, preventive vaccine is available at many independent and participating retail pharmacies including Rite Aid, Giant Eagle, Giant Food Stores and Martin's Food Markets. ¹ The flu shot is also available at participating UPMC Health Plan Drive -thru flu clinic locations ²
- If the campus does an on-site flu shot program with Rite Aid, the UPMC HMO member can obtain a no-cost flu shot at that event by presenting their UPMC member ID card This needs to be coordinated in advance with Rite Aid and UPMC.
- UPMC HMO members can obtain a flu shot at their doctor's office (an office visit co-pay may apply).
- UPMC HMO members can also obtain a flu shot at an out of network pharmacy or clinic. The member will need to pay the provider and then submit a claim form with a receipt to UPMC for reimbursement. . The claim form is attached.

^{1 –} Find a participating pharmacy at https://upmc.widen.net/s/22hb2hzrph

^{2 –} Check this site for upcoming flu clinic information https://www.upmcmyhealthmatters.com/flu-member-guide/

Flu Shot Reimbursement Form

Fill out this form if you paid for a flu shot for yourself or for others on your plan. Complete one form per individual. You **MUST** include a receipt.

Plan member information:		
Name:		
Address:		
City:	State:	ZIP:
Fill in the information below forms if needed.	r each person who received a flu sl	not, including yourself. Attach additional
Member ID#		
Name:		
Date of birth:		
Cost of flu shot:		
Date received:		
Facility or pharmacy where red	ceived:	
Member signature:		
I have paid for my flu shot(s)	out-of-pocket, and I am requestin	g reimbursement for that cost.

Mail this form and a copy of your flu shot receipt(s) to:

Attention: Special Processing
UPMC Health Plan
PO Box 2966
Pittsburgh, PA 15230

Phone: **1-844-201-4674** Fax: **1-844-201-4655** TTY: **711**

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