Questions for your health plan:	Questions for your health plan:
Does my insurance cover immunizations? ☐ No ☐ Yes	Does my insurance cover immunizations? ☐ No ☐ Yes
Are there any restrictions on coverage? □ No □ Yes What	Are there any restrictions on coverage? ☐ No ☐ Yes What
Will I be responsible for any immunizations fees? i.e. Co-pay or Co-insurance □ No □ Yes Amount	Will I be responsible for any immunizations fees? i.e. Co-pay or Co-insurance □ No □ Yes Amount
Deductibles that may apply to immunizations? ☐ No ☐ Yes Amount	Deductibles that may apply to immunizations? ☐ No ☐ Yes Amount
Incremental cost if an out of network provider is used? □ No □ Yes Amount	Incremental cost if an out of network provider is used? ☐ No ☐ Yes Amount
Is there an annual maximum on wellness or preventive services that might affect my coverage	Is there an annual maximum on wellness or preventive services that might affect my coverage
for immunizations? □ No □ Yes Max	for immunizations? ☐ No ☐ Yes Max
If yes please speak with your healthcare provider. Remember to check the status of your immunization coverage prior to each visit.	If yes please speak with your healthcare provider. Remember to check the status of your immunization coverage prior to each visit.
Idaho Immunization Program Idaho department of HEALTH & WELFARE	Idaho Immunization Program Idaho Department of HEALTH & WELFARE
Questions for your health plan:	Questions for your health plan:
Does my insurance cover immunizations? ☐ No ☐ Yes	Does my insurance cover immunizations? ☐ No ☐ Yes
Are there any restrictions on coverage? ☐ No ☐ Yes What	Are there any restrictions on coverage? ☐ No ☐ Yes What
Will I be responsible for any immunizations fees? i.e. Co-pay or Co-insurance □ No □ Yes Amount	Will I be responsible for any immunizations fees? i.e. Co-pay or Co-insurance □ No □ Yes Amount
Deductibles that may apply to immunizations? ☐ No ☐ Yes Amount	Deductibles that may apply to immunizations? ☐ No ☐ Yes Amount
Incremental cost if an out of network provider is used?	Incremental cost if an out of network provider is used?
□ No □ Yes Amount	☐ No ☐ Yes Amount
Is there an annual maximum on wellness or preventive services that might affect my coverage	Is there an annual maximum on wellness or preventive services that might affect my coverage
for immunizations? ☐ No ☐ Yes Max	for immunizations?
	□ No □ Yes Max



visit.



check the status of your immunization coverage prior to each



visit.



check the status of your immunization coverage prior to each