

COVID-19 Overview and Frequently Asked Questions

On November 5, 2020, the Centers for Medicare & Medicaid Services (CMS) released a set of toolkits for providers, states and issuers to help the healthcare system prepare to swiftly administer the COVID-19 vaccine.

Section 3713 of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) specifies that a COVID-19 vaccine and its administration will be covered under Medicare Part B and, therefore, would be excluded from Part D coverage. For calendar years (CY) 2020 and 2021, Medicare payment for the COVID-19 vaccine and its administration for beneficiaries enrolled in Medicare Advantage plans will be made through the original fee-for-service Medicare program.

Section 3203 of the CARES Act generally requires issuers offering non-grandfathered group or individual health insurance coverage to cover any qualifying coronavirus preventive service, including a COVID-19 vaccine, without imposing any cost-sharing requirements, such as copays, coinsurance or deductibles.

- A qualifying coronavirus preventive service means an item, service or immunization that is intended to prevent or mitigate COVID-19 and that is, with respect to the individual involved, (1) an evidence-based item or service that has in effect a rating of “A” or “B” in the current recommendations of the United States Preventive Services Task Force (USPSTF) or (2) an immunization that has in effect a recommendation from the Advisory Committee on Immunization Practices (ACIP), regardless of whether the immunization is recommended for routine use.
- This coverage under section 3203 of the CARES Act must be provided no later than 15 business days after the date that ACIP or the USPSTF makes an applicable recommendation relating to the qualifying coronavirus preventive service. To ensure maximum rapid public take-up of the vaccine, we encourage all issuers to prepare to cover administration of the COVID-19 vaccine immediately upon ACIP’s recommendation. Coverage does not depend on the type of FDA approval (EUA vs BLA) or authorization.
- These coverage requirements do not apply to a plan or coverage that is not required to provide coverage of preventive services without cost sharing under section 2713 of the Public Health Service Act, such as grandfathered health plans, excepted benefits or short-term limited duration insurance, though we encourage all such plans to provide this coverage to all enrollees without cost sharing.

In December 2020, the U.S. Food and Drug Administration (FDA) issued emergency use authorizations (EUAs) allowing the Pfizer-BioNTech COVID-19 vaccine and the Moderna COVID-19 vaccine to be distributed in the U.S. In late February 2021, the FDA issued an EUA for the Johnson & Johnson COVID-19 vaccine, developed by the Janssen Pharmaceutical Companies of Johnson & Johnson.

In August 2021, the FDA formally approved the Pfizer-BioNTech COVID-19 vaccine. It will now be marketed as Comirnaty for the prevention of COVID-19 disease in individuals 16 years of age and older. The vaccine also continues to be available under EUA.

In January 2022, Moderna’s COVID-19 vaccine received FDA approval and will now be marketed as Spikevax, for the prevention of COVID-19 in individuals 18 years of age and older. Moderna’s COVID-19 vaccine also continues to be available under EUA.

See the table at the end of this document for more information about approvals and authorizations.

In addition, oral antiviral medications are now available to treat COVID-19. See the oral antiviral medications chart for more details about these treatments.

The vaccine and the antiviral medications will be paid for through funding authorized by the CARES Act, but administration of the vaccine and/or dispensing of the antiviral by a pharmacy is paid for by the payer.

The federal government is now requiring insurance companies and group health plans to cover the cost of over-the-counter, at-home COVID-19 tests, so people with private health coverage can get them for free starting January 15, 2022.

Pharmacy Network Communication

1. Pharmacies received an [initial email communication](#) from Elixir on December 11 and another email communication on December 17 with information on how to become vaccinators and how to submit claims.
 - Elixir included links to the National Council for Prescription Drug Programs (NCPDP) Emergency Preparedness Guidance and the CMS provider toolkit for pharmacies to ensure awareness of their reporting requirements and how to become vaccinators for the COVID-19 vaccine.
2. Administration fees are configured for the COVID-19 vaccine at CMS standard payment rates. CMS updated the standard payment rates on March 15, 2021.

For COVID-19 vaccine administration services furnished before March 15, 2021, the Medicare payment rate for a single-dose vaccine or for the final dose in a series is \$28.39. For a COVID-19 vaccine requiring a series of two or more doses, the payment rate is \$16.94 for the initial dose(s) in the series and \$28.39 for the final dose in the series.

For administration services furnished on or after March 15, 2021, the Medicare payment rate for each dose of a COVID-19 vaccine is \$40. Standard dispensing fees for antiviral prescriptions will be applied.

3. Elixir has updated the Pharmacy Provider Manual with this information.
4. Elixir Customer Care Center staff is receiving training to be able to respond to pharmacy and member calls and answer questions on the policies and guidelines.

Claim System Configuration

1. Claims system configuration is currently available to accept in-network and out-of-network pharmacy submissions for vaccine administration for non-Medicare plan sponsors.
2. For Medicare plans, claims for the vaccine will reject A5 (Not Covered Under Part D Law) with additional messaging, "Bill to Medicare B FFS."
3. Claims for oral antivirals will be covered for all lines of business.
4. Members will NOT be charged any cost share for the vaccine, the antiviral treatment or their administration and dispensing.
5. The vaccine will be covered for all non-Medicare plans. Plans that are not required to provide coverage of preventive services without cost sharing under section 2713 of the Public Health Service Act, such as grandfathered health plans, excepted benefits or short-term limited duration insurance, must notify your Elixir account manager if an exception is requested to this configuration and wish to exclude the vaccine or the antiviral medication. Exceptions are not recommended.

Over-the-Counter (OTC) COVID-19 Test Kits

The federal government is now requiring insurance companies and group health plans to cover the cost of over-the-counter, at-home COVID-19 tests, so people with private health coverage can get them for free starting January 15, 2022. Here are some answers to questions you may have.

FAQs

Q1: Are plans required to provide these kits at no charge at the point of sale?

A: As part of its guidance, the federal government is encouraging plans to set up a network to process test kits at no up-front cost to your members. If your plan has not set up a network of preferred stores, pharmacies (i.e. your Elixir prescription benefit) and online retailers at which members can obtain a test with no out-of-pocket expense, you will be required to reimburse the member for the full amount of the cost of the test.

Q2: When and how can members get free at-home OTC test kits to test for COVID-19?

A: Starting on January 15, 2022, members may get at-home test kits without prescription, and the federal government is requiring that commercial plans cover them at no cost share to members.

Q3: Will there be additional cost to the plan to participate in this program?

A: If claims are processed at the pharmacy point of sale, you will be charged the contracted amount of the kit plus your contracted administrative fee, if applicable. For paper receipts submitted for reimbursement, Elixir will charge \$10 per submission. In order to reduce processing costs, encourage your members to batch multiple receipts at one time and allow for 30 days processing time. If you have opted out of processing paper claims, Elixir will reject and return the submissions to the member without reimbursement.

Q4: How will Elixir ensure that members can obtain at-home COVID-19 OTC test kits at a participating pharmacy at no up-front cost if our plan chooses to offer point-of-sale (POS) coverage?

A: Unless your plan decides to reimburse members under the medical benefit, Elixir will allow point-of-sale submission of these test kits at the pharmacy counter at participating pharmacies in the plan's network at no cost to members.

Currently, only a few major pharmacy chains, such as Rite Aid (including Bartell's), Walmart (including Sam's Club) and Safeway, are processing no-cost COVID-19 test kits at the pharmacy counter. (This list is subject to change as more pharmacies develop the capability to process these purchases at no cost to your members.) In addition, your members can now access tests via mail order from Elixir Pharmacy at a cost of \$11 per test. Minimum order of eight tests will be required.

If your members are near these retail pharmacy locations, your members may purchase the test kits, pending test kit availability, with no out-of-pocket cost. Members may find Rite Aid locations and other in-network pharmacies by logging in to their Member Portal accounts in the mobile app or at www.elixirsolutions.com and select the FIND PHARMACIES option.

If a member uses a non-participating pharmacy or does not provide their prescription drug benefits card at participating pharmacies, members must submit their receipts to Elixir for reimbursement.

Q5: Is there a specific test kit that members must select?

A: Only FDA-authorized, at-home OTC COVID-19 test kits will be covered under this mandate.

PLEASE NOTE: The Office of the Inspector General (OIG) has issued a warning about scams involving fake and unauthorized at-home COVID-19 test kits. Please encourage members to be sure to purchase FDA-approved COVID-19 test

kits from legitimate providers. More information about COVID-19 scams is available on the OIG website at <https://oig.hhs.gov/fraud/consumer-alerts/fraud-alert-covid-19-scams/>.

Q6: How many free at-home test kits can members get?

A: The federal government is requiring that individual and group health plans cover up to eight at-home tests per individual per month without a prescription, regardless of whether the tests are bought all at once or at separate times throughout the month.

Q7: What if members are unable to find network pharmacies that have at-home COVID-19 test kits in stock?

A: Members can purchase tests at out-of-network pharmacies or online retailers and submit their receipts to Elixir for reimbursement. Members can also access free testing in their communities, or tests can be administered by healthcare providers, such as nurses, doctors and pharmacists, without cost-sharing. If the plan chooses to use the Elixir network for at-home OTC COVID-19 up-front payment and a member purchases kits at a non-participating pharmacy or retailer or online, the member must submit their receipts to Elixir for reimbursement, and the plan will be responsible for reimbursing members at a rate of up to \$12 per test (or the cost of the test, if less than \$12).

Q8: How do I opt out of having these test kits process under the pharmacy benefit at point of sale?

A: If you do not want a solution implemented for your plan to allow for direct coverage of OTC at-home COVID-19 test kits at the point of sale, please let your account manager know immediately by sending a signed Benefit Change Form indicating you intend to opt out. Be advised that removing pharmacy point-of-sale processing after January 15, 2022, will require two business days. Pharmacy direct member reimbursements will not be processed by Elixir if the point-of-sale network is not implemented.

Q9: Are Medicare beneficiaries eligible for this up-front coverage at the point of sale at the pharmacy?

A: Under a new initiative that is expected to launch in early spring 2022, Medicare beneficiaries will be able to access up to eight over-the-counter COVID-19 tests per month for free. Tests will be available through eligible pharmacies and other participating entities. [More details are available from the Centers for Medicare & Medicaid Services \(CMS\)](#).

Vaccine and Antiviral Medication

FAQs

Q: Will members be able to get the COVID-19 vaccine or the antiviral medication at network pharmacies?

A: Yes. Claims for the administration of the vaccine for non-Medicare members will process through Elixir at \$0 member copay. Vaccine claims submitted for Medicare members will reject with special messaging to the pharmacy to bill Medicare B FFS. Claims for the antiviral medication will be covered for all members.

Elixir will allow in-network and out-of-network vaccinator pharmacies to process the administration fee for all non-Medicare plans.

Q: What is the guidance from the CDC for distribution of the vaccine?

A: The CDC's COVID-19 Vaccination Program Operational Guidance can be found [here](#).

Q: Will the vaccine or the antiviral medication be restricted to certain pharmacies?

A: Yes. To receive free supplies, pharmacies, retail clinics, providers and any other site of care receiving and administering COVID-19 vaccines and/or COVID-19 antiviral medication must sign an agreement with the U.S. government. They must also administer the vaccine in accordance with CDC and ACIP requirements and must meet storage and recordkeeping requirements, including recording the administration of the vaccine to patients in their own systems within 24 hours and reporting to public health data systems as soon as practical, and within 72 hours.

Pharmacies that are not contracted with Elixir or who have been removed from the network for OIG sanctions, FWA or other concerns will be handled on a case-by-case basis.

Q: Will members have to pay for the COVID-19 vaccination or the antiviral medication?

A: No. The cost is covered through funding authorized by the CARES Act, but administration of the vaccine by a provider will be paid for by the payer (for example, the private insurance company, Medicare in the case of a Medicare Advantage plan or the Provider Relief Fund).

Pharmacies, retail clinics, providers and any other site of care receiving and administering COVID-19 vaccines must sign an agreement with the U.S. government. Under the agreement, all providers must vaccinate individuals regardless of whether they have health insurance coverage or what type of coverage they have and are prohibited from balance billing or otherwise charging vaccine recipients. The federal government has purchased the initial supply of vaccines and antiviral medication.

- **Medicare Advantage Coverage and Reimbursement for COVID-19 Vaccines:** For beneficiaries enrolled in Medicare Advantage plans during calendar years (CY) 2020 and 2021, Medicare payment for the COVID-19 vaccine and its administration will be made through the original fee-for-service Medicare program.
- **Non-Medicare plans** will be responsible for paying vaccine administration fees.

Q: How will the price differ for out-of-network (OON) pharmacies?

A: The administration fees will be the same for all pharmacies that are enrolled to be vaccinators.

Q: What will the vaccination process be?

A: The dosing of primary series varies dependent on COVID-19 vaccine selected and age group. Please refer to the table below: "Vaccines that Protect Against COVID-19". On August 13, 2021, the CDC officially recommended an additional dose of either mRNA COVID-19 vaccine for people with moderately to severely compromised immune systems after the initial two-dose vaccine series. This includes a range of conditions, a full list of which can be found on the [CDC's website here](#).

In June 2022 the CDC updated guidance for those age 6 months through 5 years. EUAs now exist for COVID-19 vaccines for those ages 6 months and older. Currently, everyone 5 years of age and older may now get a booster shot after their initial series but may be dependent on which COVID-19 vaccination they first received if under 18 years of age. For some, a second booster is available. See the chart below for details.

GUIDE TO COVID-19 BOOSTERS

PRIMARY SERIES COVID-19 VACCINE	WHO?	WHEN?	WHICH?
Pfizer-BioNTech	<p>Should get one booster?</p> <p>Everyone 5 years of age and older</p>	At least 5 months after completing the primary COVID-19 vaccination series	<p>Adults 18 years and older should get an mRNA COVID-19 vaccine (Pfizer-BioNTech or Moderna) for the first booster in most* situations.</p> <p>Those 5 to 17 years old may only get a Pfizer-BioNTech COVID-19 vaccine booster.</p>
	<p>May get a second booster?</p> <p>Anyone 12 years of age and older with certain immunocompromise</p> <p>Adults 50 years and older</p>	If eligible for a second booster, at least 4 months after the first booster	
Moderna	<p>Should get one booster?</p> <p>Adults 18 years of age and older</p>	At least 5 months after completing the primary COVID-19 vaccination series	<p>For the first booster, an mRNA COVID-19 vaccine (Pfizer-BioNTech or Moderna) is preferred in most* situations.</p>
	<p>May get a second booster?</p> <p>Anyone 18 years of age and older with certain immunocompromise</p> <p>Adults 50 years and older</p>	If eligible for a second booster, at least 4 months after the first booster	
Johnson & Johnson/Janssen*	<p>Should get one booster?</p> <p>Adults 18 years of age and older</p>	At least 5 months after completing the primary COVID-19 vaccination series	<p>For the first booster, an mRNA COVID-19 vaccine (Pfizer-BioNTech or Moderna) is preferred in most* situations.</p>
	<p>May get a second booster?</p> <p>Anyone who received a J&J/Janssen COVID-19 vaccine for both their primary dose and booster</p> <p>Adults 50 years and older who first received a J&J/Janssen COVID-19 vaccine, regardless of what type of booster they received</p>	If eligible for a second booster, at least 4 months after the first booster	

** Although mRNA vaccines are preferred, J&J/Janssen COVID-19 vaccine may be considered in some situations. The CDC notes that J&J/Janssen COVID-19 vaccines should **not** be used as a 2nd booster. The CDC does not currently recommend boosters for any children or teens (those under 18 years of age) that have completed the Moderna COVID-19 primary series.*

Q: For those vaccines that require more than one dose, will pharmacies bill separately for the additional dosages?

A: Yes. Each dose will be billed separately. Elixir will evaluate and comply with ongoing NCPDP recommendations and other regulatory guidance updates.

Q: Will COVID-19 vaccines and antiviral medication be covered by Medicare?

A: Yes. For beneficiaries enrolled in Medicare Advantage plans during CY 2020 and 2021, payment for the COVID-19 vaccine and its administration will be made through the original fee-for-service Medicare program. Medicare Advantage plans should inform their contracted providers about this coverage policy and direct them to submit claims for administering the COVID-19 vaccine to the CMS Medicare Administrative Contractor (MAC) using product-specific codes for each vaccine approved. More information on vaccine coverage is available in the [CMS Toolkit on COVID-19 Vaccine](#). Elixir provided this information to the pharmacy network.

According to [guidance from the National Council for Prescription Drug Programs](#), the reject messaging for Medicare Part D BIN/PCN (PDP or MAPD) will be A5 (not covered under Part D law) with additional messaging to bill Medicare Part B FFS.

Payment for antiviral medications will be covered under Medicare Part D.

Q: Will members be able to submit a DMR if they are required to pay the pharmacy for the administration fee?

A: Since members will receive the vaccine at no copay/cost share or deductible, there is no need for a DMR.

Q: Will Elixir charge separate, per-claim transaction processing fees for COVID-19 vaccines or antiviral treatments?

A: Elixir will charge the fee to administer the vaccine and dispense the antiviral medication in addition to any per-claim administrative fee as provided for in the PBM contract. Members will NOT be charged any cost share for the vaccine, the antiviral treatment or their administration and dispensing.

Q: Can a pharmacy obtain the vaccine or the antiviral treatment and submit a claim if they have not been granted approval by the government?

A: Pharmacies must receive approval from the government to receive and administer the vaccine. Elixir does not monitor the approval pathway for pharmacies to obtain the vaccine or the antiviral medication and will allow claims to process if submitted, assuming the pharmacy has the vaccine and/or antiviral medication in hand.

Q: How will COVID-19 vaccines work?

A: COVID-19 vaccines will work like other vaccines, which expose recipients to antigens. These antigens help those who are vaccinated to develop an immune response that will be able to block or kill the virus if a person becomes infected. We still have limited information to evaluate the duration of protection from the COVID-19 vaccine, especially as COVID-19 variants

emerge. Scientists will continue to collect long-term immunity data to determine if changes to the COVID-19 vaccine are needed and to determine long-term dosing requirements.

Q: When should the oral antiviral medications be prescribed, and what are some of the clinical considerations?

A: Two oral antiviral medications are now available under EUA for the treatment of mild-to-moderate COVID-19 in individuals who have tested positive within five days of symptom onset. These medications are only available by prescription. See the oral antiviral medications chart on the following page for additional details.

ORAL ANTIVIRAL MEDICATIONS FOR THE TREATMENT OF COVID-19			
Medication	Population	Common Side Effects	Dosing
Lagevrio (molnupiravir)	Authorized for those aged 18 years and older who are at high risk for progression to severe COVID-19. ¹	Possible side effects include diarrhea, nausea and dizziness. Molnupiravir is not recommended for use during pregnancy because studies showed that molnupiravir may cause fetal harm when administered to pregnant individuals. ²	Dosed orally twice daily (four capsules) every 12 hours for five days.
Paxlovid (nirmatrelvir and ritonavir)	Authorized for those aged 12 years and older weighing at least 40 kg and who are at high risk for progression to severe COVID-19.	Possible side effects include dysgeusia (altered or impaired sense of taste), diarrhea, increased blood pressure and myalgia (muscle aches). Nirmatrelvir and ritonavir, which comprise Paxlovid, also interact with other medicines, which may lead to serious or life-threatening adverse reactions.	Dosed orally twice daily as three tablets (two tablets of nirmatrelvir and one tablet of ritonavir) for five days. A dose reduction is required for those with moderate renal impairment.

1. Molnupiravir is not authorized for use in patients younger than 18 years of age because it may affect bone and cartilage growth.

2. Additional warnings and precautions for those of childbearing age are available in [these FAQs](#) from the FDA.

Q. Will the COVID-19 vaccine be like the flu vaccine and require annual dosing?

A: More data is required to determine if COVID-19 vaccines will be needed every year. See earlier question, “What will the vaccination process be?” for current information and updates on vaccine recommendations.

Q: Most vaccines take years to develop. How were we able to speed up development for a COVID-19 vaccine and has that affected its safety?

A: It’s correct that vaccine development typically takes years. However, in this case, developers were able to speed up the process, in part because of efforts that had been underway on previously known coronaviruses (SARS-CoV-1 and MERS CoV). In addition, the U.S. government aided the process by invoking emergency authority to enable manufacturing to start while the clinical trials were ongoing. Data collected from thousands of participants in clinical trials help the FDA determine the safety of the vaccine. Currently available vaccines have been proved by the FDA to be safe and effective. The safety and efficacy of available vaccines is the top priority for the federal government, and all adverse events reported following COVID-19 vaccine administration are taken very seriously by the FDA.

Q: What is emergency use authorization?

A: An EUA is a way to facilitate the availability and use of medical countermeasures, including vaccines, during public health emergencies. Under an EUA, the FDA may allow unapproved medical products, or unapproved uses of approved medical products, in an emergency to diagnose, treat or prevent serious or life-threatening diseases or conditions.

Q: What are some of the clinical considerations or uncertainties concerning these vaccines?

A: Two of the currently offered vaccines are messenger RNA vaccines, or mRNA vaccines. These utilize a new approach to protecting against infectious diseases and will be the first of their kind to be licensed in the United States. The third vaccine is manufactured using adenovirus type 26 (Ad26) to deliver a piece of the DNA, or genetic material, that is used to make the distinctive “spike” protein of the SARS-CoV-2 virus.

VACCINES TO PROTECT AGAINST COVID-19			
Vaccine	Population	Common Side Effects	Initial/Primary Series ^{2, 3, 4, 5, 6, 7}
Pfizer-BioNTech	Authorized for use in those 6 months of age and older and contraindicated for individuals with a known history of a severe allergic reaction (e.g., anaphylaxis) to any vaccine component; FDA-approved for the prevention of COVID-19 disease in individuals 16 years of age and older.	Side effects of the vaccine typically resolve within 1-2 days and commonly include things like injection site reactions, fatigue, headache, muscle pain, chills, joint pain, nausea, feeling unwell, swollen lymph nodes and fever.	Series of two doses for those 5 years and older. Certain immunocompromised patients may receive another dose in primary vaccination series. For those 6 months through 4 years of age, a three-dose series is required.
Moderna	Authorized for use in those 6 months of age and older and contraindicated for individuals with a known history of a severe allergic reaction (e.g., anaphylaxis) to any vaccine component. FDA-approved for the prevention of COVID-19 in individuals 18 years of age and older.	Side effects of the vaccine typically resolve within 1-2 days and commonly include things like injection site reactions, fatigue, headache, muscle pain, chills, joint pain, nausea and vomiting and fever.	Series of two doses. Certain immunocompromised patients may receive another dose in primary vaccination series. .
Johnson & Johnson/Janssen⁸	Authorized for use in those aged 18 and older and contraindicated for individuals with a known history of a severe allergic reaction (e.g., anaphylaxis) to any vaccine component.	Side effects of the vaccine typically resolve within 1-2 days and commonly include things like injection site reactions, fatigue, headache, muscle pain, and nausea.	Single dose

1. According to interim CDC clinical considerations, doses administered within a grace period of ≤4 days from the recommended date for the second dose are considered valid; however, doses administered earlier do not need to be repeated. The second dose should be administered as close to the recommended interval as possible. However, there is no maximum interval between the first and second dose of either vaccine.

2. The CDC does not recommend mixing the primary vaccine series. However, if two doses of different mRNA COVID-19 vaccine products are inadvertently administered, no additional doses of either product are recommended at this time.
3. For the immunocompromised, a third-dose of mRNA vaccine should be administered at least 28 days after the second dose.
4. **Pfizer BioNTech vaccine:** Booster shots are now available for everyone aged 5 and older, to be administered at least five months after the completion of their Pfizer BioNTech vaccine series. A second booster is an option for some individuals.
5. **Moderna vaccine:** Booster shots are now available for everyone aged 18 and older, to be administered at least five months after the completion of either mRNA vaccine series. A second booster is an option for some individuals.
6. **Johnson & Johnson vaccine:** The CDC is recommending a booster shot, to be administered at least two months after the vaccine.
7. A second booster of Pfizer-BioNTech or Moderna COVID-19 in certain populations can be administered at least 4 months after the 1st booster.
8. The CDC recommends that in most situations **Pfizer-BioNTech** or **Moderna** COVID-19 vaccines are preferred over **Johnson & Johnson** COVID-19 vaccine.

The CDC advises that vaccine providers observe patients with a history of allergic reactions (due to any cause) for 30 minutes after vaccination. All other persons should be observed for 15 minutes after vaccination to monitor for the occurrence of immediate adverse reactions. The CDC also states that appropriate medical treatment must be immediately available to treat a patient who experiences a severe allergic reaction to the vaccine.

Healthcare providers administering the Johnson & Johnson vaccine and vaccine recipients or caregivers should review the [Janssen COVID-19 Vaccine Fact Sheet for Healthcare Providers Administering Vaccine \(Vaccination Providers\)](#) and the [Fact Sheet for Recipients and Caregivers](#), which have been revised to include information about the risks that have occurred in a very small number of people who have received the Johnson & Johnson COVID-19 vaccine. Health care providers are asked to report adverse events to the [Vaccine Adverse Event Reporting System](#).

Q: Are COVID-19 vaccines available at Rite Aid locations?

A: Yes. For updated information on vaccine eligibility in your area and for scheduling appointments at Rite Aid, visit Rite Aid's [COVID-19 page](#). Vaccine doses are limited, and availability is updated daily. Store and pharmacy associates are not able to schedule appointments.

Q: Which vaccines is Rite Aid administering?

A: Rite Aid is administering all three vaccines across its various locations. [Visit Rite Aid's website to learn more.](#)

Q: Will Elixir/Rite Aid support on-site or workplace vaccination events?

A: COVID-19 vaccination clinics are available dependent upon vaccine supply, number of employees, location and cost to administer. If interested, the benefits administrator for your plan should contact a member of their Elixir account team. On-site clinics and/or in-store vouchers for other vaccines, such as flu, pneumonia, shingles, tetanus and hepatitis A or B are available. Benefits administrators can get more information on Rite Aid's [workplace immunization site](#).