

VFC* Vaccine (regardless of state of residence)		
Vaccine	Ages Covered	Eligibility Criteria
DT	6 weeks – 6 years	<ul style="list-style-type: none"> Only to be administered when DTaP is medically contraindicated. Call for approval prior to ordering.
DTaP	6 weeks – 6 years	Both Daptacel [®] and Infanrix [®] are available.
DTaP/HepB/IPV (Pediatrix [®])	6 weeks – 6 years	Approved only for the primary series (i.e., 2, 4, and 6 months).
DTaP-IPV/Hib (Pentacel [®])	6 weeks – 4 years	Approved for use at 2, 4, 6, and 12 – 18 months of age.
DTaP-IPV (Kinrix [®])	4 years – 6 years	Approved for use as the fifth dose of DTaP and fourth dose of IPV at 4 – 6 years of age.
Hepatitis A	1 – 18 years	<ul style="list-style-type: none"> Should be routinely administered to children 12 – 23 months of age. Both Havrix[®] and Vaqta[®] are available.
Hepatitis B	Birth – 18 years	<ul style="list-style-type: none"> Hepatitis B birth dose at birthing hospitals. Both Engerix-B[®] and Recombivax[®] are available.
Hib	6 weeks – 59 months	<ul style="list-style-type: none"> PedvaxHIB[®] is a three-dose series at 2, 4, and 12 – 15 months of age. (preferred for American Indian children) ActHib[®] is a four-dose series at 2, 4, 6, and 12 – 15 months. Hiberix[®] is a four-dose series at 2, 4, 6, and 12 – 15 months.
Hib-MenCY-TT (MENHIBRIX [®])	6 weeks – 18 months	Approved for use in high-risk infants at 2, 4, 6, and 12 – 15 months of age.
Hepatitis B – Hib (Comvax [®])	6 weeks – 4 years	<ul style="list-style-type: none"> Approved for use at 2, 4, and 12 – 15 months of age. Cannot be used for the birth dose of hepatitis B vaccine.
HPV2 and HPV9	9 years – 18 years	<ul style="list-style-type: none"> Gardasil[®] (HPV9) is available for both males and females ages 9 and older. Cervarix[®] is available for only females ages 9 and older.
Influenza	6 months – 18 years	<ul style="list-style-type: none"> Flumist[®] or live attenuated influenza vaccine (LAIV4) is not recommended for use during the 2016 – 2017 influenza vaccine season. Inactivated influenza vaccine (IIV) should be used instead. Influenza vaccine is recommended for everyone 6 months and older.
IPV	6 weeks – 18 years	
Meningococcal Conjugate (MCV4)	2 months – 18 years	<ul style="list-style-type: none"> Should be routinely administered to children 11– 12 years of age, with a booster dose at 16 years of age. Minimum age for Menactra[®] is 9 months. Minimum age for Menveo[®] is 2 months.
Meningococcal B	10 years – 18 years	<ul style="list-style-type: none"> Permissive recommendation for administration to patients 16 – 18 years of age.

		<ul style="list-style-type: none"> Recommended for those at high risk of infection 10 – 18 years of age. Bexsero[®] (GlaxoSmithKline): two doses at least one month apart Trumenba[®] (Pfizer): three doses at 0, 2 and 6 months (licensed by FDA for two dose series, pending ACIP recommendation)
MMR	12 months – 18 years	
MMRV	12 months – 12 years	<ul style="list-style-type: none"> For the first dose of MMR and varicella vaccines at ages 12 – 47 months, either MMR and varicella vaccines administered separately or MMRV vaccine may be used. For the second dose of MMR and varicella vaccines at any age (15 months--12 years) and for the first dose at age ≥ 48 months, use of MMRV vaccine generally is preferred over separate injections.
Pneumococcal Conjugate (PCV13, Prevnar13 [®])	6 weeks – 59 months	<ul style="list-style-type: none"> The ACIP recommends PCV13 for all children ages two through 59 months and for children ages 60 through 71 months who have underlying medical conditions that increase their risk of pneumococcal disease or complications. Children 6 – 18 years of age with immunocompromising conditions should also receive a dose of PCV13.
Pneumococcal Polysaccharide (PPSV23)	2 – 18 years	<ul style="list-style-type: none"> Available for high-risk children with one or more of the following conditions: <ul style="list-style-type: none"> Chronic illnesses such as cardiovascular disease, chronic pulmonary disease, diabetes mellitus, alcoholism, chronic liver disease or CSF leaks. Functional or anatomic asplenia (splenectomy) Conditions associated with immunosuppression, including HIV infection, leukemia, lymphoma, Hodgkin’s disease, multiple myeloma, generalized malignancy, chronic renal failure, nephritic syndrome, or other conditions associated with immunosuppression (organ or bone marrow transplantation); and people receiving immunosuppressive chemotherapy, including long-term high-dose corticosteroids. Cochlear implants
Rotavirus	6 weeks – 8 months, 0 days	Both Rotateq [®] (three dose rotavirus vaccine to be administered at 2, 4, and 6 months of age) and Rotarix [®] (two dose rotavirus vaccine to be administered at 2 and 4 months of age) are available.
Td	7 – 18 years	<ul style="list-style-type: none"> Tdap is recommended instead of Td for adolescents and adults. Td is only necessary for children and adolescents who have not completed the primary series of DTaP.
Tdap	7 – 18 years	<ul style="list-style-type: none"> Tdap is recommended instead of Td for adolescents and adults. Boostrix[®] and Adacel[®] are available for order.

Varicella (Chickenpox)	12 months – 18 years	
317 Vaccine (regardless of state of residence)		
Vaccine	Ages Covered	Eligibility Criteria
Any childhood vaccine listed in VFC section.	Birth – 18 years	<ul style="list-style-type: none"> Underinsured children seen at private provider offices (not including RHCs, FQHCs or local public health units).
HPV2 and HPV9	19 – 26 years	<p>Available for uninsured and underinsured males and females.</p> <ul style="list-style-type: none"> Adults ages 19 – 21 years who are enrolled in Medicaid must be vaccinated with private vaccine and Medicaid should be billed (considered insured). Adults ages 22 – 26 years who are enrolled in Medicaid may be given state-supplied vaccine (considered underinsured). Insured individuals must be vaccinated with private vaccine and insurance should be billed.
Meningococcal Conjugate (MCV-4)	19 years – 55 years	Available for uninsured and underinsured adults.
MMR	19 years and older	Available for uninsured and underinsured adults.
Td/Tdap	19 years and older	<ul style="list-style-type: none"> Available for uninsured and underinsured adults. A single dose is recommended for all adults, including those 65 years and older. Medicare Part D does cover Tdap, so therefore the adults who have Medicare Part D are considered insured and state-supplied vaccines cannot be used. Medicare Part B covers influenza and pneumococcal vaccines. If a patient does NOT have Medicare Part D and only has Medicare Part B (very rare), they would be considered underinsured and would qualify for state-supplied Tdap.
State Vaccine (regardless of state of residence)		
Influenza	6 months – 18 years	<ul style="list-style-type: none"> Insured children. Only available at universal local public health units.

*VFC-eligible children are those who are 18 and younger and meet one of the following criteria:

- No health insurance
- Medicaid eligible
- American Indian or Alaskan Native
- Underinsured – have health insurance, but it does not cover a particular vaccine (**VFC vaccine can only be used for underinsured children at Rural Health Clinics, Federally Qualified Health Centers, and local public health units**)

NDIIS or Electronic Medical Record VFC Eligibility Data Entry:

- Children 18 and younger:
 - Medicaid
 - American Indian
 - Uninsured
 - Underinsured

- Other State Eligible – insured children receiving hepatitis B birth dose or insured children receiving influenza vaccine at universal local public health units during the 2016 – 2017 influenza season
- Not Eligible – all other insured children
- Adults
 - Other State Eligible – uninsured/underinsured adults receiving state-supplied HPV, Td/Tdap, MMR and MCV4.
 - Not Eligible – all other adults