<table>
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<tr>
<th>Vaccine</th>
<th>Ages Covered</th>
<th>Eligibility Criteria</th>
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</table>
| **DT**  | 6 weeks – 6 years | • Only to be administered when DTaP is medically contraindicated.  
• Call for approval prior to ordering. |
| DTaP    | 6 weeks – 6 years |
| DTaP/HepB/IPV (Pediarix®) | 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 | 4 years – 6 years | • Kinrix ®: Approved for use as the fifth dose of DTaP and fourth dose of IPV at 4 – 6 years of age.  
• Quadracel™: Approved for use as the fifth dose of DTaP and fourth or fifth dose of IPV at 4 – 6 years of age. |
| Hepatitis A | 1 – 18 years | • Should be routinely administered to children 12 – 23 months of age. |
| Hepatitis B | Birth – 18 years | • Hepatitis B birth dose at birthing hospitals.  
• Approved for use at birth, 2, and 6 months of age. |
| Hib | 6 weeks – 59 months | • 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. |
| HPV9 | 9 years – 18 years | • Gardasil® (HPV9) is available for both males and females ages 9 and older. |
| Influenza | 6 months – 18 years | • Flumist® or live attenuated influenza vaccine (LAIV4) is not recommended for use during the 2017 - 2018 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 | • 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.  
• Recommended for those at high risk of infection 2 months – 10 years of age. |
| Meningococcal B | 10 years – 18 years | • Permissive recommendation for administration to patients 16 – 18 years of age.  
• Recommended for those at high risk of infection 10 – 18 years of age.  
• Bexsero® (GlaxoSmithKline): two doses at least one month apart. |
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<th>Vaccine</th>
<th>Age Range</th>
<th>Details</th>
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</thead>
<tbody>
<tr>
<td>Trumenba® (Pfizer)</td>
<td>12 months – 6 months</td>
<td>- Providers should have doses(s) on hand for high-risk VFC eligible patients or VFC patients who wish to be vaccinated.</td>
</tr>
</tbody>
</table>
| MMR                                          | 12 months – 18 years       | - 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 is generally preferred over separate injections. |
| MMRV                                         | 12 months – 12 years       | - 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 such as HIV-infection, anatomic or functional asplenia, sickle cell disease, cochlear implant or cerebrospinal (CSF) leaks should also receive a dose of PCV13. |
| Pneumococcal Conjugate (PCV13, Prevnar13®)   | 6 weeks – 59 months        | - Available for high-risk children with one or more of the following conditions:  
  o Chronic illnesses such as cardiovascular disease, chronic pulmonary disease, diabetes mellitus, alcoholism, chronic liver disease or CSF leaks.  
  o Functional or anatomic asplenia (splenectomy)  
  o 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.  
  o Cochlear implants.  
- Providers should have on hand for high-risk VFC eligible patients. |
| Pneumococcal Polysaccharide (PPSV23)         | 2 – 18 years               | - Rotateq® (Merck): three doses at 2, 4, and 6 months of age.  
- Rotarix® (GSK): two doses at 2 and 4 months of age. |
| Rotavirus                                     | 6 weeks – 8 months, 0 days | - 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. |
<p>| Td                                           | 7 – 18 years               | - Tdap is recommended instead of Td for adolescents and adults. |
| Tdap                                         | 7 – 18 years               | - Tdap is recommended instead of Td for adolescents and adults. |</p>
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<td>Varicella (Chickenpox)</td>
<td>12 months – 18 years</td>
<td>Underinsured children seen at private provider offices (not including RHCs, FQHCs or local public health units).</td>
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<tr>
<td>317 Vaccine (regardless of state of residence)</td>
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<tr>
<td>Any childhood vaccine listed in VFC section.</td>
<td>Birth – 18 years</td>
<td>Underinsured children seen at private provider offices (not including RHCs, FQHCs or local public health units).</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>Birth – 18 years</td>
<td>Hepatitis B birth dose available to insured infants at North Dakota birthing hospitals.</td>
</tr>
</tbody>
</table>
| Adult Hepatitis A           | 19 years and older | Available for uninsured and underinsured adults who are being screened for Hepatitis C at a HIV testing and counseling site and meet one of the following high risk conditions:  
  o Currently inject drugs or have shared needles, syringes, straws and other equipment  
  o Injected drugs in the past, even if it was once or many years ago  
  o Have had tattoos or body piercings in unsterile environments  
  o Have received blood clotting factors before 1987  
  o Have HIV or AIDS  
  o Have had sex with an HIV-infected individual  
  o Have undiagnosed liver problems  
  o Have received donated blood or organs before 1992  
  o Are on long term hemodialysis  
  o Have had sex with men who have sex with men (MSM) |
| Adult Hepatitis B           | 19 years and older | Available for uninsured and underinsured adults who are being screened for Hepatitis C at a HIV testing and counseling site and meet one of the following high risk conditions:  
  o Currently inject drugs or have shared needles, syringes, straws and other equipment  
  o Injected drugs in the past, even if it was once or many years ago  
  o Have had tattoos or body piercings in unsterile environments  
  o Have received blood clotting factors before 1987  
  o Have HIV or AIDS  
  o Have had sex with an HIV-infected individual  
  o Have undiagnosed liver problems  
  o Have received donated blood or organs before 1992  
  o Are on long term hemodialysis  
  o Have had sex with men who have sex with men (MSM) |
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<th>Age Range</th>
<th>Available for Uninsured and Underinsured Adults</th>
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| Adult Hep B/ Hep A (Twinrix®) | 19 years and older | • Available for uninsured and underinsured adults who are being screened for Hepatitis C at a HIV testing and counseling site and meet one of the following high risk conditions:  
  ○ Currently inject drugs or have shared needles, syringes, straws and other equipment  
  ○ Injected drugs in the past, even if it was once or many years ago  
  ○ Have had tattoos or body piercings in unsterile environments  
  ○ Have received blood clotting factors before 1987  
  ○ Have HIV or AIDS  
  ○ Have had sex with an HIV-infected individual  
  ○ Have undiagnosed liver problems  
  ○ Have received donated blood or organs before 1992  
  ○ Are on long term hemodialysis  
  ○ Have had sex with men who have sex with men (MSM) |
| HPV9                          | 19 – 26 years      | • Available for uninsured and underinsured males and females.  
  ○ 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. |
| PCV13                         | 19 – 64 years      | • Available for high risk uninsured and underinsured adults and meet one of the following criteria:  
  ○ Immunocompromising conditions (e.g., congenital or acquired immunodeficiency, HIV, chronic renal failure, nephrotic syndrome, leukemia, lymphoma, Hodgkin disease, generalized malignancy, immunosuppression by corticosteroids or chemotherapy, solid organ transplant, and multiple myeloma)  
  ○ Functional or anatomic asplenia (e.g., sickle cell disease and other hemoglobinopathies and congenital and acquired asplenia)  
  ○ Cerebrospinal fluid (CSF) leak  
  ○ Cochlear implant |
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<th>Age Group</th>
<th>Criteria</th>
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| PPSV23£ | 19 – 64 years | - Available for high risk uninsured and underinsured adults and meet one of the following criteria:  
  - cigarette smokers age 19 years and older  
  - chronic cardiovascular disease (e.g., congestive heart failure, cardiomyopathies; excluding hypertension)  
  - chronic pulmonary disease (including COPD and emphysema, and for adults ages 19 years and older, asthma)  
  - diabetes mellitus  
  - alcoholism  
  - chronic liver disease, cirrhosis  
  - candidate for or recipient of cochlear implant  
  - CSF leak  
  - functional or anatomic asplenia (e.g., sickle cell disease, splenectomy)  
  - immunocompromising conditions (e.g., HIV infection, leukemia, congenital immunodeficiency, Hodgkin's disease, lymphoma, multiple myeloma, generalized malignancy) or on immunosuppressive therapy  
  - solid organ transplantation; for bone marrow transplantation  
  - chronic renal failure or nephrotic syndrome |
| Td/Tdap£ | 19 years and older | - 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. |

All brands and presentations of vaccines listed on the vaccine coverage table are offered with regards to vaccine supply and availability according to the CDC and its distributors.

*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
  - Not Eligible – all other insured children

- Adults
  - Other State Eligible – uninsured/underinsured adults receiving state-supplied HPV, Td/Tdap, MMR, MCV4, PCV13 and PPSV23.
  - Not Eligible – all other adults

PPSV23, Bexsero® (Men B Vaccine), Td and DT vaccines are all available for order in one dose increments.