

## Health & Human Services

## Vaccine Coverage Table As of December 1, 2022

	VFC* Vaccine (rega	As of December 1, 2022 ardless of state of residence)
Vaccine	Ages Covered	Eligibility Criteria
DTaP	6 weeks – 6 years	
DTaP/HepB/IPV	6 weeks – 6 years	Recommended only for the primary series (i.e., 2, 4,
(Pediarix <sup>®</sup> )		and 6 months).
DTaP-IPV/Hib	6 weeks – 4 years	• Recommended for use at 2, 4, 6, and 12 – 18 months
(Pentacel®)		of age.
DTaP/IPV/Hib/HepB	6 weeks – 4 years	Recommended only for the primary series (i.e., 2, 4,
(Vaxelis <sup>™</sup> )		and 6 months).
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 <sup>TM</sup> : Approved for use as the fifth dose of
		DTaP and fourth or fifth dose of IPV at 4 – 6 years of
Hepatitis A	1 – 18 years	<ul> <li>age.</li> <li>Should be routinely administered to children 12 – 23</li> </ul>
riepatitis A	i – To years	months of age.
		Catch-up vaccination is recommended for all children
		ages 2 – 18 years.
Hepatitis B	Birth – 18 years	Hepatitis B birth dose at birthing hospitals.
	,	Recommended 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 <sup>®</sup> 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
HPV9	9 years – 18 years	<ul> <li>months.</li> <li>Gardasil® (HPV9) is available for both males and</li> </ul>
ПРУЭ	9 years – 10 years	females ages 9 and older.
Influenza	6 months – 18 years	Influenza vaccine is recommended for everyone 6
machza	o months to years	months and older.
IPV	6 weeks – 18 years	
Meningococcal	2 months – 18 years	Should be routinely administered to children 11– 12
Conjugate (MCV4)		years of age, with a booster dose at 16 years of age.
		<ul> <li>Minimum age for MenQuadfi<sup>™</sup> is 2 years.</li> </ul>
		Minimum age for Menveo <sup>®</sup> is 2 months.
		Recommended for those at high risk of infection 2
		months – 10 years of age.
Meningococcal B <sup>£</sup>	10 years – 18 years	Shared clinical decision making recommendation for
		administration to patients 16 – 18 years of age.
		Recommended for those at high risk of infection 10 –

		<ul> <li>18 years of age.</li> <li>Bexsero® (GlaxoSmithKline): two doses at least one</li> </ul>
		month apart.
		Trumenba® (Pfizer): two doses at 0 and 6 months.
		Providers should have doses(s) on hand for high-risk
		VFC eligible patients and VFC patients who wish to be
		vaccinated.
MMR	12 months – 18 years	<ul> <li>MMR®II is approved for ages 12 months and older and can be stored in the refrigerator or freezer.</li> </ul>
		Priorix® is approved for ages 12 months an older and
		can only be stored in the refrigerator.
MMRV	12 months – 12 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
	6 1 50 11	preferred over separate injections.
Pneumococcal	6 weeks – 59 months	• Either PCV13 or PCV15 is recommended as a 4-dose
Conjugate (PCV13, Prevnar13 <sup>®</sup> )		<ul> <li>series at ages 2, 4, 6, and 12–15 months.</li> <li>The ACIP recommends PCV for all children ages two</li> </ul>
Previolity )		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 PCV.
Pneumococcal		• Either PCV13 or PCV15 is <b>recommended as a 4-dose</b>
Conjugate (PCV15,		series at ages 2, 4, 6, and 12–15 months.
Vaxneuvance <sup>®</sup> )		The ACIP recommends PCV for all children ages two through 50 months and for children ages 60 through
		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.
		<ul> <li>Children 6 – 18 years of age with</li> </ul>
		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 PCV.

Pneumococcal Polysaccharide (PPSV23) <sup>£</sup>	2 – 18 years	<ul> <li>Available for high-risk children with one or more of the following conditions:         <ul> <li>Chronic illnesses such as cardiovascular disease, chronic pulmonary disease, diabetes mellitus, alcoholism, chronic liver disease or CSF leaks.</li> <li>Functional or anatomic asplenia (splenectomy)</li> <li>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.</li> <li>Cochlear implants.</li> </ul> </li> <li>Providers should have on hand for high-risk VFC eligible patients.</li> </ul>
Rotavirus	6 weeks – 8 months, 0	Rotateq® (Merck): three doses at 2, 4, and 6 months of
	days	<ul> <li>age.</li> <li>Rotarix<sup>®</sup> (GSK): two doses at 2 and 4 months of age.</li> </ul>
Td <sup>£</sup>	7 – 18 years	<ul> <li>Tdap is recommended instead of Td for adolescents and adults.</li> <li>Tdap can be used in the following situations where Td was previously recommended:         <ul> <li>Decennial booster dose</li> <li>Tetanus prophylaxis for wound management</li> <li>Catch-up immunization</li> </ul> </li> </ul>
Tdap	7 – 18 years	Tdap is recommended instead of Td for adolescents and adults.
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	Underinsured children seen at private provider offices.
Hepatitis B	Birth – 18 years	Hepatitis B birth dose available to insured infants at North Dakota birthing hospitals.

Adult Hepatitis A	19 years and older	<ul> <li>Available for uninsured and underinsured high-risk adults (must have a risk factor listed below).</li> <li>Not available for adults whose sole purpose for vaccination is international travel or employment.</li> <li>Persons at high risk for hepatitis A infection include:         <ul> <li>Any drug user (injection or non-injection)</li> <li>Have had tattoos or body piercings in unsterile environments</li> <li>Have received blood clotting factors before 1987</li> <li>Have HIV or AIDS</li> <li>Have had sex with an HIV-infected individual</li> <li>Have undiagnosed liver problems</li> <li>Have received donated blood or organs before 1992</li> <li>Are on long term hemodialysis</li> <li>Men who have sex with men (MSM)</li> <li>Those experiencing homelessness or unstable housing</li> </ul> </li> </ul>
Adult Hepatitis B	19 years and older	<ul> <li>Available for uninsured and underinsured high-risk adults (must have a risk factor listed below).</li> <li>Not available for adults whose sole purpose for vaccination is international travel or employment.</li> <li>Persons at high risk for Hepatitis B infection include:         <ul> <li>Any drug user (injection or non-injection)</li> <li>Have had tattoos or body piercings in unsterile environments</li> <li>Have received blood clotting factors before 1987</li> <li>Have HIV or AIDS</li> <li>Have had sex with an HIV-infected individual</li> <li>Have undiagnosed liver problems</li> <li>Have received donated blood or organs before 1992</li> <li>Are on long term hemodialysis</li> <li>Men who have sex with men (MSM)</li> </ul> </li> <li>Heplisav-B is a 2 dose series for adults 18 years and older.</li> </ul>
Adult Hep B/ Hep A (Twinrix <sup>®</sup> )	19 years and older	<ul> <li>Available for uninsured and underinsured high-risk adults (must have a risk factor listed below).</li> <li>Not available for adults whose sole purpose for vaccination is international travel or employment.</li> <li>Persons at high risk for Hepatitis B infection include:         <ul> <li>Any drug user (injection or non-injection)</li> <li>Have had tattoos or body piercings in unsterile environments</li> <li>Have received blood clotting factors before 1987</li> <li>Have HIV or AIDS</li> </ul> </li> </ul>

		11
		Have had sex with an HIV-infected individual
		<ul> <li>Have undiagnosed liver problems</li> </ul>
		<ul> <li>Have received donated blood or organs before</li> <li>1992</li> </ul>
		<ul> <li>Are on long term hemodialysis</li> </ul>
		<ul> <li>Men who have sex with men (MSM)</li> </ul>
HPV9	19 – 45 years	Available for uninsured and underinsured adults.
7 H V 3	13 43 years	<ul> <li>Insured, standard Medicaid or Medicaid expansion enrolled adults must be vaccinated with private vaccine and insurance or Medicaid should be billed.</li> </ul>
Indi	10	
Influenza	19 years and older	<ul> <li>Available for uninsured and underinsured adults at participating facilities.</li> </ul>
Meningococcal Conjugate (MCV-4)	19 years – 64 years	Available for uninsured and underinsured adults.
MMR	19 years and older	Available for uninsured and underinsured adults.
PCV15, PCV20 or PPSV23	19 – 64 years	Available for high risk uninsured and underinsured adults and meet one of the following criteria:

		<ul><li>Cochlear implant</li><li>CSF Leak</li></ul>
Td/Tdap <sup>£</sup>	19 years and older	<ul> <li>Available for uninsured and underinsured adults.</li> <li>A single dose is recommended for all adults, including those 65 years and older.</li> <li>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.</li> <li>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.</li> </ul>

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
  - o American Indian
  - Uninsured
  - Underinsured
  - Other State Eligible insured children receiving hepatitis B birth dose
  - Not Eligible all other insured children
- Adults
  - o Other State Eligible uninsured/underinsured adults receiving state-supplied vaccines.
  - Not Eligible all other adults

<sup>£</sup>PPSV23 and Td vaccines are all available for order in one dose increments.