The Georgia Immunization Office (GIO) manages vaccines funded by:

- Federal Vaccines for Children (VFC) program
- Federal Section 317 immunization grant
- The following tables indicate which vaccines:
- are available for VFC eligible children
- are available for other clients seen in Georgia public health clinics.

The intent of these tables:

- IS NOT to determine which children, adolescents and/or adults should be immunized, but
- IS to define which groups can be immunized with federally funded VFC or federally funded Section 317 purchased vaccines.

For specific vaccine guidelines refer to Section 2, Recommended Schedules and Guidelines, of the Georgia Immunization Office Manual (GIO). The vaccine must be provided at no cost to the patient. Vaccine administration fees for self-pay clients are capped at \$21.93 per injection for both VFC and Section 317 funded vaccine. No client should be refused vaccination with VFC or Section 317 vaccine due to inability to pay the administration fee. If a client meets at least one eligibility criterion for each component of a combination vaccine (e.g., Pediarix, Comvax, MMRV, Twinrix), they are eligible to receive that combination vaccine if the state supplies it.

Eligibility	Diphtheria, Tetanus, Pertussis vaccines	Hib vaccine	Influenza vaccine	Meningococcal vaccines
Supplied for VFC eligible children: VFC eligibility criteria <sup>1</sup> Age 0 through 18 years and No insurance or Underinsured or Eligible for Medicaid or PeachCare or American Indian or Alaska native	Yes: VFC eligible children: <b>DTaP</b> Children less than 7 years of age <b>Tdap</b> – One dose for children 7 to 10 years with an incomplete DTaP primary series <b>Tdap</b> -One dose for unvaccinated adolescent males and non-pregnant females <b>Tdap</b> - For pregnant adolescents for each pregnancy irrespective of past history of Tdap receipt <b>Td</b> Children 7 years through 18 years of age <b>Pediatric DT(VFC does not</b> <b>supply)</b>	<ul> <li>Yes: VFC eligible children:</li> <li>6 weeks through 4 years of age</li> </ul>	Yes: VFC eligible children: • 6 months through 18 years of age	<ul> <li>Yes: VFC eligible children: MCV4</li> <li>Children with reduced immune response <sup>8</sup> 9 months through 18 years should receive 2 dose primary series (8 weeks apart)</li> <li>Adolescents aged 11 through 18 years should receive one dose</li> <li>Booster dose for children with reduced immune response <sup>7</sup>every 5 years through 18</li> <li>One booster dose for eligible adolescents through 18 years</li> </ul>
Federal funded Section 317 immunizations for other groups seen in GA public health clinics <sup>1</sup>	Yes, for uninsured and underinsured adults 19 years or older <b>Tdap-</b> One dose for unvaccinated males and non- pregnant females <b>Tdap-</b> For pregnant women for each pregnancy irrespective of past history of Tdap receipt <b>Td</b> - for boosters or to complete primary series • Refugees <sup>1</sup> ≥ 19 years of age	Yes • For unvaccinated individuals who are uninsured, or underinsured and older than 59 months of age with a high-risk condition <sup>3</sup>	No	<ul> <li>Yes, for uninsured or underinsured college students 19 through 21 years</li> <li>One MCV4 primary dose if unvaccinated</li> <li>One MCV4 booster dose if previous dose given at age younger than 16 years</li> <li>Yes, booster dose every 5 yrs for uninsured or underinsured adults 19 yrs and older who continue to be at highest risk for meningococcal infection<sup>7</sup></li> </ul>
Groups in Georgia NOT covered by VFC nor Federal Section 317 immunization funds <sup>2</sup>	<ul> <li>Insured clients with immunization coverage</li> <li>International travelers</li> <li>Health care workers</li> <li>Inmates</li> </ul>	<ul> <li>Insured clients with immunization coverage</li> </ul>		<ul> <li>Insured clients with immunization coverage</li> <li>International travelers</li> <li>Refugees ≥ 19 years of age</li> </ul>

01/16/2013 Eligibility Criteria for State Supplied Vaccines

To access most current version, go to http://www.health.state.ga.us/programs/immunization/publications.asp

Eligibility	Hepatitis B vaccine <sup>4</sup>	Hepatitis A vaccine <sup>4</sup>	Measles, Mumps, and Rubella vaccine	Inactivated Polio vaccine
Supplied for VFC eligible children: <sup>1</sup> VFC eligibility criteria • Age 0 through 18 years and • No insurance or • Underinsured or • Eligible for Medicaid or PeachCare for Kids or • American Indian or Alaska native	Yes: VFC eligible children birth through 18 years of age	Yes: VFC eligible children 12 months through 18 years of age	Yes: VFC eligible children 12 months through 18 years of age	Yes: VFC eligible children 6 weeks through 18 years of age
Federal funded Section 317 immunizations for other groups seen in GA public health clinics <sup>1</sup>	<ul> <li>Yes,(pediatric formulations for persons &lt;20 yrs and adult formulations for persons ≥ 20 yrs) for uninsured, or underinsured individuals meeting one of the high risk criteria:</li> <li>Men having sex with men</li> <li>Illegal drug users</li> <li>Persons seeking STD/HIV clinic services, including HIV testing and counseling and HIV care services</li> <li>Individuals with multiple partners (more than 1 partner in 6 months)</li> <li>Persons recently diagnosed with an STD</li> <li>Homeless adults</li> <li>Persons seeking Family Planning clinic services</li> <li>Sexual partners of persons with acute or chronic hepatitis B virus infection and household contacts of persons with acute and chronic HBV infection (includes contacts to perinatal hepatitis B case investigations)</li> <li>Hemodialysis/transplant patients</li> <li>Diabetics (Type I or Type II)</li> <li>Persons who began the series using VFC or state-supplied vaccine and still need to complete the series</li> <li>Refugees<sup>1</sup> ≥ 19 years of age</li> </ul>	<ul> <li>Yes, for uninsured, or underinsured individuals meeting one of the high risk criteria:</li> <li>Men having sex with men</li> <li>Illegal drug users</li> <li>Female partners of MSM</li> <li>Persons who engage in sexual practices that could facilitate fecal-oral transmission of hepatitis A</li> <li>Person with chronic liver disease, including hepatitis C</li> <li>HIV-infected persons seeking HIV care services</li> <li>American Indians and Alaska natives</li> <li>Persons who began the series using VFC or state- supplied vaccine and still need to complete the series</li> <li>Persons 19 through 40 years of age (and persons over aged 40 years, if IG cannot be obtained) designated by district or state epidemiology personnel as eligible contacts to a documented case of hepatitis A disease <sup>5</sup></li> <li>Refugees<sup>1</sup> ≥ 19 years of age</li> </ul>	<ul> <li>Yes, for uninsured, or underinsured individuals meeting one of the following criteria:</li> <li>Persons born during or after 1957 and who specifically request it</li> <li>College students of any age</li> <li>HIV-infected persons seeking HIV care services <sup>3</sup></li> <li>Persons seeking Family Planning clinic services</li> <li>Women who could become pregnant regardless of age</li> <li>Persons 19 years of age and older with negative serology results for measles, mumps, or rubella immunity</li> <li>Refugees<sup>1</sup> ≥ 19 years of age (Refugee Health Program funds the cost of vaccine)</li> </ul>	No
Groups in Georgia NOT covered by VFC nor Federal Section 317 immunization funds <sup>2</sup>	<ul> <li>Insured clients with immunization coverage</li> <li>International travelers</li> <li>Public safety workers</li> <li>Health care workers</li> </ul>	<ul> <li>Insured clients with immunization coverage</li> <li>International travelers</li> <li>Public safety workers</li> <li>Health care workers</li> <li>Food handlers</li> </ul>	<ul> <li>Insured clients with immunization coverage</li> <li>International travelers</li> <li>Health care workers</li> </ul>	

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Eligibility	Pneumococcal vaccines	Varicella vaccine	Rotavirus Vaccine	IG
Supplied for VFC eligible children: <sup>1</sup> VFC eligibility criteria: • Age 0 through 18 years and • No insurance or • Underinsured or • Eligible for Medicaid or PeachCare or • American Indian or Alaska native	<ul> <li>Yes: VFC eligible children</li> <li>PCV13 for children 6 weeks through 59 months of age</li> <li>One PCV13 dose for children 6 yrs through 18 yrs with high risk conditions<sup>6</sup></li> <li>One or Two doses of PPSV23 for high-risk children 2 years through 18 years<sup>6</sup></li> </ul>	<ul> <li>Yes: VFC eligible children</li> <li>12 months through 18 years of age are eligible for 2 doses of vaccine</li> </ul>	Yes: VFC eligible children • 6 weeks through 32 weeks of age	No
Federal funded Section 317 immunizations for other groups seen in GA public health clinics <sup>1</sup>	<ul> <li>Yes, PPSV23 for uninsured, or underinsured individuals</li> <li>19 years of age and older with high-risk criteria. (See "Pneumococcal Vaccine Guidelines" in the GIO Manual)</li> <li>Refugees<sup>1</sup> ≥ 19 years of age ((Refugee Health Program funds the cost of vaccine)</li> <li>State will only supply 2 doses of PPSV23 during a person's lifetime.</li> </ul>	<ul> <li>Yes, for uninsured, or underinsured individuals</li> <li>Who began the series using VFC or state supplied vaccine</li> <li>Refugees<sup>1</sup> ≥ 19 years of age (Refugee Health Program funds the cost of vaccine)</li> </ul>	No	Yes for: • Hepatitis A contacts who fall within specific guidelines. See "Vaccines to Prevent Hepatitis A" guidelines in the GIP Manual To obtain IG, contact the Hepatitis Program Director at (404) 657- 3171.
Groups in Georgia NOT covered by VFC nor Federal Section 317 immunization funds <sup>2</sup>	<ul> <li>Insured clients with immunization coverage</li> <li>Individuals wanting more than 2 documented doses of PPSV23</li> <li>Prevnar13 for adults</li> </ul>	<ul> <li>Insured clients with immunization coverage</li> <li>International travelers</li> <li>Healthcare workers</li> </ul>		<ul> <li>International travelers</li> <li>Pre-exposure vaccination for persons with occupational exposure</li> </ul>

Eligibility	HBIG	HPV	Zoster vaccine	
Supplied for VFC eligible children: <sup>1</sup> VFC eligibility criteria: • Age 0 through 18 years and • No insurance or • Underinsured or • Eligible for Medicaid or PeachCare or • American Indian or Alaska native	No	<ul> <li>Yes: Routine vaccination for VFC eligible males and females</li> <li>Either HPV4 or HPV2 for females 9 through 18 years of age</li> <li>HPV4 for males 9 through 18 years of age</li> </ul>	No	
Federal funded Section 317 immunizations for other groups seen in GA public health clinics <sup>1</sup>	<ul> <li>Yes for:</li> <li>Infants of HBsAg positive mothers, if HBIG was not received at birth in the hospital, and if it can be administered within 7 days of birth</li> <li>Unvaccinated infants whose primary caregiver has acute hepatitis B</li> <li>Persons not previously immunized with hepatitis B vaccine who have had recent sexual exposure (in the past 14 days) to a person who is acutely infected with the hepatitis B virus</li> <li>Household contacts of any age in direct contact with the blood of an acutely infected person within 7 days of exposure</li> <li>To obtain HBIG, contact the Hepatitis Program Director at (404) 657-3171.</li> </ul>	<ul> <li>Yes for uninsured, or underinsured</li> <li>Females and Males 19 through 26 years who began the series using VFC or state-supplied vaccine and still need to complete the series</li> <li>Unvaccinated Females and Males 19 through 26 years</li> </ul>	No	
Groups in Georgia NOT covered by VFC nor Federal Section 317 immunization funds <sup>2</sup>	<ul> <li>International travelers</li> <li>Persons exposed to needle sticks</li> <li>Persons with occupational exposure</li> </ul>	<ul> <li>Insured clients with immunization coverage</li> <li>Refugees ≥ 19 years of age</li> </ul>		

<sup>1</sup> Children aged 0 through 18 years of age who are in "refugee" status <u>and</u> meet VFC eligibility criteria are considered VFC eligible. Vaccine for adult refugee populations may be administered out of 317/State supplied stock using above guidelines. Medicaid should be billed for the administration fee only for vaccines given to refugees in the 19-20 year old age group. Reimbursement for vaccine administration for refugees aged  $\geq$  21 years of age will continue to be billed to and paid by the Refugee Health Program. (*Note: US citizenship is not required to receive any federal or state-supplied vaccine.*) <sup>2</sup>Persons in these groups are not eligible to receive VFC or Federal 317 funded vaccine as described above.

<sup>3</sup> For guidance re: specific conditions, refer to "General Recommendations on Immunization," MMWR, January 28, 2011, Vol. 60, RR-2.
 <sup>4</sup> A person under 19 years of age who may have insurance but because of the circumstances for seeking services does not have access to that insurance coverage is uninsured for the purposes of the VFC program.

<sup>5</sup> Such persons would be eligible for both doses of the hepatitis A vaccine series.

<sup>6</sup> For further guidance see MMWR 2010:59(No. RR-11), available at www.cdc.gov/mmwr/pdf/rr/rr5911.pdf

<sup>7</sup>For guidance re: specific conditions refer to "Updated Recommendation for Use of Meningococcal Conjugate Vaccines- ACIP 2010," MMWR, January 28, 2011 Vol. 60, No.3, pg 72-76