Eligibility Criteria for Vaccines Supplied by the GA Immunization Program for Children, Adolescents, and Adults seen in GA Public Health Clinics

The Georgia Immunization Program (GIP) manages vaccines funded by:

- Federal Vaccines for Children (VFC) program
- Federal Section 317 immunization grant
- State CHIP (PeachCare for Kids®) program

The following tables indicate which vaccines:

- are available for VFC, 317, & CHIP 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, federally funded Section 317, or CHIP purchased vaccines.**

For specific vaccine guidelines refer to Section 2, Recommended Schedules and Guidelines, of the Georgia Immunization Program Manual. 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 non-Medicaid VFC and Section 317 funded vaccine. No client should be refused vaccination with VFC, Section 317, or CHIP 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[1] • Age 0 through 18 years and • No insurance or • Medicaid Recipient or • American Indian or Alaska native **317/CHIP eligible children** • Underinsured • PeachCare Enrolled	Yes: eligible children: **DTaP**--Children less than 7 years of age **Tdap** – One dose for children 7 to 10 years with an incomplete DTaP primary series **Tdap-**One dose for unvaccinated adolescent males and non-pregnant females **Tdap**- For pregnant adolescents for each pregnancy irrespective of past history of Tdap receipt **Td---** Children 7 years through 18 years of age **Pediatric DT---(VFC does not supply)**	Yes: eligible children: • 6 weeks through 4 years of age	Yes: eligible children: • 6 months through 18 years of age	Yes: eligible children: **MCV4** • Children with reduced immune response 2 months through 18 years should receive 2 dose primary series (8 weeks apart) • Adolescents aged 11 through 18 years should receive one primary dose • Booster dose for children with reduced immune response[7]every 5 years through 18 • One booster dose for eligible adolescents through 18 years
Federal funded Section 317 immunizations for other groups seen in GA public health clinics[1]	Yes, for uninsured and underinsured adults 19 years or older **Tdap-** One dose for unvaccinated males and non-pregnant females **Tdap**- For pregnant women for each pregnancy irrespective of past history of Tdap receipt **Td** - for boosters or to complete primary series	Yes • For unvaccinated individuals who are uninsured, or underinsured and older than 59 months of age with a high-risk condition[3]	No	Yes, for uninsured or underinsured college students 19 through 21 years • One MCV4 primary dose if unvaccinated • One MCV4 booster dose if previous dose given at age younger than 16 years Yes, primary and booster dose every 5 yrs for uninsured or underinsured adults 19 yrs and older who continue to be at highest risk for meningococcal infection[7]
Groups in Georgia NOT covered by VFC, Federal Section 317, nor CHIP immunization funds[2]	• Insured clients with immunization coverage • Refugees[1] ≥ 19 years of age	• Insured clients with immunization coverage		• Insured clients with immunization coverage • Refugees[1] ≥ 19 years of age

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Eligibility	Hepatitis B vaccine[4]	Hepatitis A vaccine[4]	Measles, Mumps, and Rubella vaccine	Inactivated Polio vaccine
Supplied for : **VFC- eligible children** VFC eligibility criteria[1] • Age 0 through 18 years and • No insurance or • Medicaid Recipient or • American Indian or Alaska native **317/CHIP eligible children** • Underinsured • PeachCare Enrolled	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[1]	Yes,(pediatric formulations for persons <20 yrs and adult formulations for persons ≥ 20 yrs) for uninsured, or underinsured individuals • Men having sex with men • Illegal drug users • Persons seeking STD/HIV clinic services, including HIV testing and counseling and HIV care services • Individuals with multiple partners (more than 1 partner in 6 months) • Persons recently diagnosed with an STD • Homeless adults • Persons seeking Family Planning clinic services • 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) • Hemodialysis/transplant patients • Diabetics (Type I or Type II) • Persons who began the series using VFC or 317 funded vaccine and still need to complete the series • Any unvaccinated adult who wants to be protected against hepatitis B virus	Yes, for uninsured, or underinsured individuals • Men having sex with men • Illegal drug users • Female partners of MSM • Persons who engage in sexual practices that could facilitate fecal-oral transmission of hepatitis A • Person with chronic liver disease, including hepatitis C • HIV-infected persons seeking HIV care services • American Indians and Alaska natives • Persons who began the series using VFC or 317 funded vaccine and still need to complete the series • 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 [5] • Any unvaccinated adult who wants to be protected against hepatitis A virus	Yes, for uninsured, or underinsured individuals meeting one of the following criteria: • Persons born during or after 1957 and who specifically request it • One dose for persons born before 1957 without evidence of immunity and who specifically request it • College students of any age • HIV-infected persons[3] • Persons seeking Family Planning clinic services • Women who could become pregnant regardless of age • Persons 19 years of age and older with negative serology results for measles, mumps, or rubella immunity	No
Groups in Georgia NOT covered by VFC, Federal Section 317, nor CHIP immunization funds[2]	• Insured clients with immunization coverage • Refugees[1] ≥ 19 years of age	• Insured clients with immunization coverage • Refugees[1] ≥ 19 years of age	• Insured clients with immunization coverage • Refugees[1] ≥ 19 years of age	

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Eligibility	Pneumococcal vaccines	Varicella vaccine	Rotavirus Vaccine	IG
Supplied for : **VFC- eligible children** VFC eligibility criteria[1] • Age 0 through 18 years and • No insurance or • Medicaid Recipient or • American Indian or Alaska native **317/CHIP eligible children** • Underinsured • PeachCare Enrolled	Yes: VFC eligible children • PCV13 for children 6 weeks through 59 months of age • One PCV13 dose for children 6 yrs through 18 yrs with high risk conditions[6] • One or Two doses of PPSV23 for high-risk children 2 years through 18 years[6]	Yes: VFC eligible children • 12 months through 18 years of age are eligible for 2 doses of vaccine	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[1]	Yes, PCV13 and PPSV23 for uninsured, or underinsured individuals • 19 years of age and older with high-risk criteria. (See "Pneumococcal Vaccine Guidelines" in the GIP Manual)	Yes, for uninsured, or underinsured individuals • 19 years of age and older without evidence of varicella immunity	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, Federal Section 317, nor CHIP immunization funds[2]	• Insured clients with immunization coverage • Individuals wanting more than 3 documented doses of PPSV23 • Refugees[1] ≥ 19 years of age	• Insured clients with immunization coverage • Refugees[1] ≥ 19 years of age		• International travelers • Pre-exposure vaccination for persons with occupational exposure

Eligibility Criteria for Vaccines Supplied by the GA Immunization Program for Children, Adolescents, and Adults seen in GA Public Health Clinics

Eligibility	HBIG	HPV	Zoster vaccine	
Supplied for : **VFC- eligible children** VFC eligibility criteria[1] • Age 0 through 18 years and • No insurance or • Medicaid Recipient or • American Indian or Alaska native **317/CHIP eligible children** • Underinsured • PeachCare Enrolled	No	Yes: Routine vaccination for VFC eligible males and females • HPV4 or HPV9 for females and males 9 through 18 years of age	No	
Federal funded Section 317 immunizations for other groups seen in GA public health clinics[1]	Yes for: • 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 • Unvaccinated infants whose primary caregiver has **acute** hepatitis B • 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 • Household contacts of any age in direct contact with the blood of an **acutely** infected person within 7 days of exposure To obtain HBIG, contact the Hepatitis Program Director at (404) 657-3171.	Yes, for uninsured, or underinsured • HPV4 of HPV9 for females and males 19 through 26 years who began the series using VFC or state-supplied vaccine and still need to complete the 3 dose series. • HPV4 or HPV9 for unvaccinated females and males 19 through 26 years	Yes, for uninsured, or underinsured individuals • 60 yrs and older	
Groups in Georgia NOT covered by VFC, Federal Section 317, nor CHIP immunization funds[2]	• International travelers • Persons exposed to needle sticks • Persons with occupational exposure	• Insured clients with immunization coverage • Refugees[1] ≥ 19 years of age		

[1] Children aged 0 through 18 years of age who are in "refugee" status **and** meet VFC eligibility criteria are considered VFC eligible. Medicaid should be billed for the administration fee and for vaccines given to refugees in the 19-20 year old age group. Reimbursement for vaccine administration and county purchased vaccine for refugees aged ≥ 21 years of age should be billed to and paid by the Refugee Health Program (initial dose only). *(Note: US citizenship is not required to receive any federal funded vaccine.)*
[2] Persons in these groups are not eligible to receive VFC or Federal 317 funded vaccine as described above.
[3] For guidance re: specific conditions, refer to "General Recommendations on Immunization," MMWR, January 28, 2011, Vol. 60, RR-2.
[4] 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.
[5] Such persons would be eligible for both doses of the hepatitis A vaccine series.
[6] For further guidance see MMWR 2010:59(No. RR-11), available at www.cdc.gov/mmwr/pdf/rr/rr5911.pdf
[7] 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