Vaccines for Children/ Wyoming Vaccinates Important People (WyVIP) Vaccine Eligibility Table Effective July 1, 2011

Vaccine Type (Brand offered by Immunization Section)	 VFC-Eligible Medicaid/ EqualityCare/ Title XIX American Indian/Alaska Native Uninsured Underinsured (at FQHC/RHC or with a provider who has received a Delegation of Authority from an FQHC/RHC) 	 WyVIP/Non-VFC-eligible Underinsured at non-FQHC/non-RHC or at an office who has not received a Delegation of Authority Other insured
DT (no brand)	Yes	Yes
DTaP (Daptacel®, Infanrix®)	Yes	Yes
DTap-IPV (Kinrix®)	Yes	Yes
DTaP-Hep B-IPV (Pediarix®)	Yes	Yes
DTap-IP-HI (Pentacel®)	Yes	Yes
e-IPV (IPOL®)	Yes	Yes
Hepatitis A Pediatric (Havrix®, Vaqta®)	Yes	No
Hepatitis B Pediatric/Adolescent (Engerix B®, Recombivax HB®)	Yes	Yes
Hib (PedvaxHIB®, ActHIB®, Hiberix®)	Yes	Yes
HPV – Quadrivalent Human Papillomavirus Types 6, 11, 16, and 18 Recombinant (Gardasil®)	Yes	No
HPV – Bivalent Human Papillomavirus Types 16 and 18 (Cervarix®)	Yes	No
Influenza (various brands and presentations)	Yes	No
Meningococcal Conjugate, Groups A, C, Y, and W-135 (Menactra®, Menveo®)	Yes	No
Measles, Mumps and Rubella (MMRII®)	Yes	Yes
Pneumococcal 13-valent Pediatric (Prevnar 13 TM)	Yes	Yes
Rotavirus, Live, Oral, Pentavalent (RotaTeq®)	Yes	Yes
Rotavirus, Live, Oral, Oral (Rotarix®)	Yes	Yes
Tetanus & Diphtheria Toxoids (Decavac®)	Yes	Yes
Tetanus Toxoid, Reduced Diphtheria Toxoid and Acellular Pertussis (Boostrix®, Adacel®)	Yes	Yes
Varicella (Varivax®)	Yes	Yes

Note: Providers may not administer vaccines distributed by the Immunization Section flagged as red in the table above to non-VFC eligible children effective July 1, 2011.