

Pediatric Vaccine Eligibility Table

VACCINES FOR CHILDREN

WYOMING VACCINATES IMPORTANT PEOPLE (WyVIP)

Participation in the WyVIP Program is limited to Public Health Nursing Offices, Rural Health Clinics (RHCs), and Federally Qualified Health Centers (FQHCs)

Eligibility Criteria:

- 0-18 years and;
 - Medicaid/EqualityCare/Title XIX, or
 - Uninsured, or
 - American Indian/Alaska Native, or
 - Underinsured at FQHC/RHC or at a deputized provider

Administration Fee: Not to exceed \$21.72 per shot

Eligibility Criteria:

- 0-18 years and;
 - Wyoming resident and;
 - Not VFC-eligible
- **Example:** Insured Wyoming resident

Administration Fee: Not to exceed \$21.72 per antigen

Vaccine	Brand	Manufacturer	Eligibility
COVID-19	Varies	Varies	VFC ONLY
DTaP	Daptacel®	Sanofi Pasteur	VFC and WyVIP
	Infanrix®	GlaxoSmithKline	VFC and WyVIP
DTaP-Hep B-IPV	Pediarix®	GlaxoSmithKline	VFC and WyVIP
DTaP-IPV-HIB	Pentacel®	Sanofi Pasteur	VFC and WyVIP
DTaP-IPV	Kinrix®	GlaxoSmithKline	VFC and WyVIP
	Quadracel™	Sanofi Pasteur	VFC and WyVIP
DTaP-IPV-HIB-HEPB	Vaxelis™	Merck / Sanofi Pasteur	VFC and WyVIP
IPV	IPOL®	Sanofi Pasteur	VFC and WyVIP
Hepatitis A Peds	Vaqta®	Merck	VFC ONLY
	Havrix®	GlaxoSmithKline	VFC ONLY
Hepatitis B Ped/Adol	Engerix B®	GlaxoSmithKline	VFC and WyVIP
	Recombivax HB®	Merck	VFC and WyVIP
HIB	PedvaxHIB®	Merck	VFC and WyVIP
	ActHIB®	Sanofi Pasteur	VFC and WyVIP
	Hiberix®	GlaxoSmithKline	VFC and WyVIP
HPV	Gardasil®9	Merck	VFC ONLY
Influenza	Varies	Varies	VFC ONLY
Meningococcal Conjugate (Groups A, C, W and Y)	MenQuadfi™	Sanofi Pasteur	VFC ONLY
Meningococcal Conjugate (Groups A, C, Y and W-135)	Menveo®	GlaxoSmithKline	VFC ONLY
MENB-Meningococcal Group B	Trumenba®	Pfizer	VFC ONLY
	Bexsero®	GlaxoSmithKline	VFC ONLY
MMR	MMR®II	Merck	VFC and WyVIP
	Priorix	GlaxoSmithKline	VFC and WyVIP
MMR/Varicella	ProQuad®	Merck	VFC and WyVIP
PCV-15	Vaxneuvance™	Merck	VFC and WyVIP
PCV-20	Prevnar 20™	Pfizer	VFC and WyVIP
PPSV23	Pneumovax®23	Merck	VFC and WyVIP
Respiratory Syncytial Virus (RSV)	Beyfortus™	Sanofi Pasteur	VFC ONLY
	Abrysvo™	Pfizer	VFC ONLY
Rotavirus	RotaTeq®	Merck	VFC and WyVIP
	Rotarix®	GlaxoSmithKline	VFC and WyVIP
Td	Tenivac®	Sanofi Pasteur	VFC and WyVIP
	TDVAX™	Grifols	VFC and WyVIP
Tdap	Boostrix®	GlaxoSmithKline	VFC and WyVIP
	Adacel®	Sanofi Pasteur	VFC and WyVIP
Varicella	Varivax®	Merck	VFC and WyVIP

*Vaccines marked in red as "VFC Only" cannot be administered to patients that do not meet the VFC Eligibility Criteria at the top of the page.