

Vaccines (Brand Drugs)	Qualifications	Rx or Medical	Co-Pay
Diphtheria/Tetanus/ Pertussis (ACE) (DTaP)	≥ 1 month and < 7 years	Rx or Medical	\$0
DTaP + Hepatitis B + IPV (Polio)	≥ 1 month and < 7 years	Rx or Medical	\$0
DTaP + Hib + IPV	≥ 1 month and < 7 years	Rx or Medical	\$0
Haemophilus B (Hib)	≥ 1 month	Rx or Medical	\$0
Hepatitis A	≥ 1 year	Rx or Medical	\$0
Hepatitis A, B	≥ 1 year	Rx or Medical	\$0
Hepatitis B	No Restriction	Rx or Medical	\$0
Hib + Hepatitis B	≥ 1 month	Rx or Medical	\$0
Human papilloma virus (HPV) – Cervarix	Female,≥ 9 years and <27 years	Rx or Medical	\$0
HPV-Gardasil 4 & 9	≥ 9 years and <27 years	Rx or Medical	\$0

Vaccines (Brand Drugs)	Qualifications	Rx or Medical	Co-Pay
Influenza (injectable)	≥ 6 months	Rx or Medical	\$0
Influenza (intranasal)	≥ 6 months	Rx or Medical	\$0
Measles, mumps, rubella (MMR)	≥ 6 months	Rx or Medical	\$0
Measles, mumps, rubella, varicella	≥ 1 year	Rx or Medical	\$0
Meningococcal	≥ 2 years	Rx or Medical	\$0
Meningococcal w/ Diphtheria	≥ 2 months	Rx or Medical	\$0
Pneumococcal (pheumovax23)	≥ 2 years	Rx or Medical	\$0
Pneumococcal (Prevnar13)	≥ 1 month	Rx or Medical	\$0
Polio	No Restriction	Rx or Medical	\$0
Shingles (Zostavax)	≥ 50 years (MAPD) ≥ 60 year (Commercial)	Rx or Medical	\$0