

# Iowa Vaccine Programs and Eligibility Guidelines

	Vaccines for Children Program (VFC)	Vaccines for Adults Program (VFA)
<b>Funding</b>	Federal entitlement program for eligible children. Funds are used to pay for vaccines recommended by ACIP and approved for the VFC program. Combination of federal and state funds.	Limited federal funds (section 317) and state funds used to pay for adult vaccines recommended by ACIP and included in the Iowa VFA Program.
<b>Age and Eligibility</b>	<p>Children Birth – 18 years:</p> <ul style="list-style-type: none"> <li>• <b>Medicaid</b></li> <li>• <b>Uninsured</b> (no health insurance)</li> <li>• <b>American Indian or Alaskan Native</b></li> <li>• <b>Underinsured</b><sup>1</sup>: health insurance does not cover vaccines or has fixed dollar limit/cap on amount of coverage<sup>2</sup>, or does not provide first-dollar coverage for vaccines<sup>4</sup></li> <li>• Birthing Hospitals (Birth dose Hep B regardless of insurance status)</li> </ul>	<p>Adults 19 years of age and older:</p> <ul style="list-style-type: none"> <li>• <b>Uninsured</b> – No coverage through private health insurance, Medicare, Medicaid, a government health plan, or military health plan.</li> <li>• <b>Underinsured</b> – Vaccines are not covered by insurance, cover only selected<sup>3</sup>, or does not provide first-dollar coverage for vaccines<sup>4</sup></li> <li>• Has only Medicare Part B <i>not</i> Part D<sup>3,5</sup></li> </ul>
<b>Available Vaccine Components or Vaccine Groups</b>	<ul style="list-style-type: none"> <li>• COVID-19</li> <li>• DTaP</li> <li>• Hepatitis A, Hepatitis B</li> <li>• Hib</li> <li>• HPV</li> <li>• Influenza</li> <li>• Meningococcal</li> <li>• MMR</li> <li>• Mpox</li> <li>• Pneumococcal</li> <li>• Polio</li> <li>• Rotavirus</li> <li>• RSV</li> <li>• Td, Tdap</li> <li>• Varicella</li> </ul>	<ul style="list-style-type: none"> <li>• COVID-19</li> <li>• Hepatitis A, Hepatitis B</li> <li>• HPV</li> <li>• Influenza</li> <li>• Meningococcal</li> <li>• MMR</li> <li>• Mpox</li> <li>• Pneumococcal</li> <li>• Polio</li> <li>• RSV</li> <li>• Tdap</li> <li>• Varicella</li> </ul>

<sup>1</sup> Must be seen at a Federally Qualified Health Center, Rural Health Center, or Local Public Health Agency

<sup>2</sup> Considered insured until the fixed dollar limit is met

<sup>3</sup> Eligible only for those vaccines not covered by insurance

<sup>4</sup> First-dollar coverage: Any co-pay, co-insurance or other cost that must be paid by the patient prior to their health insurance plan covering the remainder of the vaccine cost. *This applies only to the cost of the vaccine, not to an administration or office visit fee.*

<sup>5</sup> The VFA Program addresses part B coverage only. Part D covers all ACIP recommended adult vaccines. For additional Medicare coverage information, please refer to the [Medicare website](#)