

Vaccines listed below are covered:

- Only for ages 19+ with no insurance or vaccine coverage; and,
- If clinically indicated, unless noted in eligibility details.

317 ELIGIBLE VACCINES	ELIGIBILITY DETAILS
Hepatitis A, & A/B combo	<p>Persons at increased risk:</p> <ul style="list-style-type: none"> • Men who have sex with men • Persons who use illegal drugs • Persons in group settings for persons with developmental disabilities • Persons working with HAV in a laboratory • Persons experiencing homelessness • Persons who are HIV+ • Persons with Hep. C infection • Adults in carceral settings
Hepatitis B, & A/B combo	<p>Persons at increased risk:</p> <ul style="list-style-type: none"> • Sexual partners and household contacts of Hep. B+ persons • People seeking evaluation or treatment for a STI • Men who have sex with men • Persons who use illegal drugs • Persons who are HIV+ • Persons in group settings for persons with developmental disabilities • Healthcare and public-safety personnel with reasonably anticipated risk for exposure to blood or blood-contaminated body fluids • Persons with Hep. C infection • Chronic liver disease • Persons <60 years with diabetes • Adults in carceral settings
Hib series	<p>Persons at increased risk:</p> <ul style="list-style-type: none"> • Asplenic persons or patients ≥18 years undergoing splenectomy • Persons with a cochlear implant.
MMR	<p>MMR vaccine is covered for adults only as needed for college or allied health programs.</p>

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Effective: 09/24/2025

Meningococcal Conjugate / Meningococcal B Vaccine	Persons at increased risk due to underlying condition: <ul style="list-style-type: none"> • Asplenia • HIV infection (Men. A,C,Y,W only) • complement component deficiency or who are taking complement inhibitor medications
Pneumococcal Conjugate (PCV15, PCV20, PCV21)	Persons at increased risk due to underlying condition: <ul style="list-style-type: none"> • Heart, liver, or kidney disease • Chronic lung disease • CSF leak • Cochlear implant • Sickle cell disease • Asplenia • HIV infection • Immunodeficiency from any cause • Lymphoma, leukemia, or Hodgkin Disease • Generalized malignancy • Multiple myeloma • Solid organ transplant
Pneumococcal Polysaccharide (V23)	Covered in sequence with PCV15
Td / Tdap	<ul style="list-style-type: none"> • Every 10 years, or as needed for wound management • Tdap during the 3rd trimester of pregnancy
Other vaccines	With OIP permission, during outbreaks or exercises only

ADDITIONAL ELIGIBILITY GUIDANCE

- **Vaccines Required for School Attendance:** Any vaccines are available for uninsured high school students ages 19+ if the vaccine is required by Oregon law for school attendance. This includes vaccines not listed in the table above. Use the “O” vaccine eligibility code.
- **Vaccines for Hematopoietic Stem Cell Transplant Recipients:** Any vaccines required for transplant recipients are ok to use as 317-funded, as indicated in chapter 2 of the [Pink Book](#). This includes vaccines not listed in the table above. Use the “O” vaccine eligibility code.
- **Oregon Health Plan and Medicare:** Persons with OHP or Medicare coverage are considered insured and are not eligible for any 317 vaccines.

For questions, please contact the Oregon Immunization Program Help Desk at [800-980-9431](tel:800-980-9431)

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- . **Vaccines for Leisure Travel:** Leisure travelers – including religious missionaries or civic volunteers – are not eligible for any 317-funded vaccines.
- . **Vaccines for Immigration:** Except for refugees, clinically unnecessary vaccines needed only for immigration status are not covered.