

# Queensland Meningococcal B (MenB) Vaccination Program

## Provider information sheet

Beginning in early 2024, the Queensland MenB Vaccination Program will provide free meningococcal B (menB) vaccines to eligible Queensland infants, children and adolescents.

Aboriginal and Torres Strait Islander children (less than 2 years of age) and people with specific medical risk factors for invasive meningococcal disease are currently eligible and will continue to be eligible for free menB vaccine through the National Immunisation Program (NIP).

The Queensland MenB Vaccination Program will make Bexsero® menB vaccine available for eligible infants, children and adolescents in addition to NIP eligible groups.

Currently, menB vaccines are available for purchase on the private market for those who are not eligible under the NIP.

### Eligibility for free vaccine through the Queensland MenB Vaccination Program

#### Infant and Childhood Program

**Infants aged 6 weeks to 12 months of age** (eligible for vaccination through the Queensland MenB Vaccination Program):

- 3 doses of Bexsero® menB vaccine (2 dose primary course and one booster dose). These will be administered with other National Immunisation Program (NIP) vaccines at 6 weeks, 4 months and 12 months of age.

**Children aged between 12 months and less than 2 years of age** (eligible for vaccination through the Queensland MenB Vaccination Program):

- 2 doses of Bexsero® menB vaccine for children who have not yet been vaccinated against menB (8 week interval between doses).

**Aboriginal and Torres Strait Islander children less than 2 years of age** (eligible for vaccination through the National Immunisation Program):

- 3 doses of Bexsero® menB vaccine for infants commencing vaccination before 12 months of age (2 dose primary course and one booster dose). These will be administered with other National Immunisation Program (NIP) vaccines at 6 weeks, 4 months and 12 months of age.

- Aboriginal and Torres Strait Islander infants and children with specified medical risk conditions are recommended to receive an additional dose of MenB vaccine at 6 months of age.

- 2 doses of Bexsero® menB vaccine for children commencing vaccination between 12 months and less than two years of age (a minimum 8-week interval between doses).

## Adolescent Program

**Adolescents aged 15 to 19 years inclusive (15-<20 years)** (eligible for vaccination through the Queensland MenB Vaccination Program):

- 2 doses Bexsero® vaccine with a minimal interval of 8 weeks between doses. Students in year 10 will be offered vaccination through the Queensland School Immunisation Program

**People with specific medical conditions** (eligible for vaccination through the National Immunisation Program):

- People with the following conditions are considered to have an increased risk of invasive meningococcal disease:
  - o defects in, or deficiency of, complement components, including factor H, factor D or properdin deficiency
  - o people with acquired complement deficiency due to receipt of complement inhibitor therapy (including but not limited to eculizumab or ravulizumab)
  - o functional or anatomical asplenia, including sickle cell disease or other haemoglobinopathies, and congenital or acquired asplenia
  - o HIV, regardless of disease stage or CD4+ cell count
  - o haematopoietic stem cell transplant
- People with the above conditions are recommended to receive a primary course and booster of menB vaccine (no preference for vaccine brand). The number of doses needed depends on the vaccine brand used and the person's age when they start the vaccine course.

## What vaccine will be used and what is the dosage interval?

Bexsero® recombinant multicomponent meningococcal serogroup B vaccine will be used for the Queensland MenB Vaccination Program.

Two primary doses should be given, with an interval not less than 8 weeks between doses. Booster doses of Bexsero® are recommended for [infants](#) and for individuals with certain [medical conditions](#).

Bexsero® and Trumenba® are not interchangeable. The same vaccine should be used for all primary vaccine doses as well as any booster.

Refer to the [Australian Immunisation Handbook](#) for more information.

## If a child/adolescent has already had one dose of Bexsero® many years ago, do they need to start the course again?

If a child/adolescent has received a valid dose of Bexsero®, and this can be confirmed on the Australian Immunisation Register or with the provision of written vaccination records, they will not need to start the course again. A catch-up schedule should be built off previous documented doses the person has received.

## Co-administration with other vaccines

Bexsero® can be safely given with other routine vaccines.

Children <2 years of age have an increased risk of fever if Bexsero® is co-administered with other routine vaccines, compared with when these vaccines are given separately ([see Adverse events](#)). However, this is not a [contraindication](#) to co-administration of Bexsero with other vaccines.

If administering two vaccines at the same site, separate by 2.5cms.

Never mix separate vaccines together. Vaccines must only be reconstituted with the diluent supplied.

Refer to the [Australian Immunisation Handbook](#) for more information.

## Administration sites

The two anatomical sites recommended as routine injection sites are:

- anterolateral thigh for all infants under 12 months (see [Figure. Anatomical markers used to identify the vastus lateralis injection site on the anterolateral thigh](#) and [Figure. Vastus lateralis injection site on the anterolateral thigh](#) in [Identifying the injection site](#))
- deltoid muscle for all people over 12 months is the preferred site (see [Figure. Anatomical markers used to identify the deltoid injection site](#) in [Identifying the injection site](#))

## Use of Paracetamol

Children <2 years of age have an increased risk of fever if Bexsero® is co-administered with other routine vaccines. However, this is not a [contraindication](#) to co-administration of Bexsero® with other vaccines.

Children <2 years of age are recommended to receive prophylactic paracetamol if they are receiving Bexsero® at the same time as other routinely scheduled vaccines (See [Contraindications and precautions](#)).

Children <2 years of age can receive Bexsero® separately from other routine infant vaccines, with a minimum interval of 3 days, to minimise the risk of fever. In this case, give routinely recommended vaccines first.

Refer to the [Australian Immunisation Handbook](#) for more information.

## Can the menB vaccine be given in pregnancy?

Bexsero® vaccine is not routinely recommended during pregnancy or breastfeeding. Bexsero® can be given where clinically indicated, such as those at particular risk of serogroup B meningococcal disease. Assessing for pregnancy should be a routine question during pre-assessment screening.

## Ordering menB vaccine for the Queensland MenB Vaccination Program?

Bexsero® vaccine will be available to order from the Queensland Health Immunisation Program (QHIP) as part of your regular monthly orders. QHIP will advise all vaccine service providers (VSPs) when the vaccine is available.

## Are people already vaccinated against menB eligible for vaccination via the Queensland MenB Vaccination Program?

If a child has already received a valid and complete meningococcal B vaccination course, there is no recommendation to repeat the course however they remain eligible to receive a funded menB vaccination course when aged between 15 and 19 years (inclusive). Providers may wish to consider the time since last menB vaccination course when making a recommendation for vaccination.

## Is menB vaccine included in the requirements under the Commonwealth Government's 'No Jab No Pay' or the Queensland Government's 'No Jab no Play' policies?

Funded menB vaccine is **not** assessed as part of the eligibility requirements for family assistance payments under the Commonwealth Government's 'No Jab No Pay' policy, or the Queensland Government's vaccination legislation for early childhood education and care services.

## How will the Queensland MenB Vaccination Program be delivered?

The infant, early childhood and adolescent programs will be delivered through a network of more than 2,000 Queensland Health registered vaccine service providers, including GPs, community vaccination clinics, and Aboriginal and Torres Strait Islander Health Services.

MenB vaccination will also be delivered in Year 10 through Queensland Health's School Immunisation Program.

## What will be funded/free?

MenB vaccine will be provided for free to those eligible. As is the case currently, a consultation/administration fee may be charged to people at the vaccination service provider's discretion.

## Can people who are not eligible for Medicare be provided with Queensland funded menB vaccines?

No. Eligibility for the Queensland MenB Vaccination Program is linked to the eligibility for Medicare benefits.

Note, refugees and humanitarian entrants settled in Queensland are Medicare eligible and are therefore eligible to be vaccinated under this program.

## Can visitors to Queensland be provided with Queensland funded menB vaccines?

No. The Queensland MenB Vaccination Program is for residents of Queensland who are Medicare eligible.

## Is reimbursement available for those who have already paid for a menB vaccination?

No. Reimbursement is not available to those who accessed menB vaccination prior to the commencement the program.

## Why is the Queensland Government funding a Queensland MenB Vaccination Program?

Meningococcal disease is a serious infection that can cause significant illness, disability and death. Around one-third of children and adolescents who survive meningococcal disease develop permanent complications. With improved control of other strains of meningococcal disease through vaccination, the menB strain is emerging as the most common cause of illness and death from meningococcal disease in Queensland.

The Australian Technical Advisory Group on Immunisation (ATAGI) recommends menB vaccination for several at risk groups, in addition to those currently included under the NIP schedule. The implementation of a Queensland funded menB vaccination program for children and adolescents is in accordance with ATAGI's recommendations. The Queensland MenB Vaccination Program aims to remove financial barriers to vaccination, improve vaccine uptake, and improve the protection that menB vaccination provides against meningococcal disease.

## Do I have to report administered doses of MenB to the AIR?

It is mandatory to report all vaccinations to the AIR.