

State and territory nirsevimab (Beyfortus) infant program summary 2025

On 3 February 2025, the National RSV Mother and Infant Protection Program (RSV-MIPP) commenced with the roll-out of the National Immunisation Program-funded RSV vaccine for pregnant women (Abrysvo). This comprehensive program provides multiple opportunities for infants and young children to be protected from severe RSV disease.

The other component of the RSV-MIPP is the state and territory-funded nirsevimab for infants program.

The following table outlines program dates, eligibility criteria – for both the overall nirsevimab program and catch-up programs – and administration locations.



State/territory	Year-round/seasonal; program commencement/eligibility date	Eligibility criteria for infants born from commencement of program	Catch-up for infants born before the program commences	Administration locations [†]
Australian Capital Territory	Year-round From 17 March 2025	Criteria align with Australian Immunisation Handbook	Infants up to 6 months of age born from 1 October 2024 to 16 March 2025 who: • are not protected through maternal RSV vaccination; and • did not receive nirsevimab at birth; and • meet one of the following eligibility criteria: - premature infants born less than 37 weeks gestation - Aboriginal and Torres Strait Islander infants - infants with risk conditions* for severe RSV disease	 Hospitals with birthing services Hospitals with paediatric services General practice Aboriginal medical services
New South Wales: • For the general public • For health professionals	Year-round From 1 January 2025	- (AIH); see <u>Additional</u> notes	NSW RSV Vulnerable Babies Program: catch-up for infants born from 1 October 2024 to 31 December 2024 who:	 Hospitals with birthing services Hospitals with paediatric services General practice Aboriginal medical services Community health services



State/territory	Year-round/seasonal; program commencement/eligibility date	Eligibility criteria for infants born from commencement of program	Catch-up for infants born before the program commences	Administration locations [†]
<u>Tasmania</u>	Seasonal1 April 2025–30 September 2025		Infants born from 1 October 2024 up to the commencement of the program who are not protected by maternal vaccination and did not receive nirsevimab at birth are eligible to receive nirsevimab up to 8 months of age	 Hospitals with birthing services General practice
<u>Victoria</u>	Seasonal 1 April–30 September 2025	Criteria align with AIH, in addition to Aboriginal and Torres Strait Islander infants aged 8 months to less than 24 months entering their second RSV season; see		Hospitals with birthing services Hospitals with paediatric services General practice Outpatient departments Aboriginal medical services Community health services (rural) Local council
Western Australia	Seasonal1 April 2025–30 September 2025	Additional notes		Newborn cohort:



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Western Australia (cont.)	Note: Year-round (northern regions)			General practice Catch-up immunisation and Aboriginal and Torres Strait Islander children and those with select medical conditions: General practice Aboriginal medical services Community health services
South Australia	Seasonal1 April 2025–30 September 2025	Criteria align with AIH; see Additional notes	Infants born from 1 August 2024 up to the commencement of the program who are not protected by maternal vaccination and did not receive nirsevimab at birth are eligible to receive nirsevimab up to 8 months of age	 Hospitals with birthing services Hospitals with paediatric services General practice



State/territory	Year-round/seasonal; program commencement/eligibility date	Eligibility criteria for infants born from commencement of program	Catch-up for infants born before the program commences	Administration locations [†]
Queensland	Year-round Commenced 15 April 2024	Criteria align with AIH, in addition to infants and young children aged <24 months: • who are receiving active chemotherapy • who have a condition associated with increased risk of severe RSV disease, after discussion with a paediatric infectious diseases specialist See Additional notes	N/A; widespread program established in 2024	 Hospitals with birthing services General practice Community clinics Aboriginal medical services



State/territory	Year-round/seasonal; program commencement date	Eligibility criteria for infants born from commencement of program	Catch-up for infants born before the program commences	Administration locations [†]
Northern Territory	Year-round From February 2025	 Criteria align with AIH; see Additional notes 	No catch-up program	 Hospitals with birthing services Hospitals with paediatric services

[†] Nirsevimab is not administered at pharmacies

* Risk conditions associated with increased risk of severe RSV disease in infants and young children (based on the AIH)

- Preterm birth (<32 weeks gestational age)
- Haemodynamically significant congenital heart disease
- Significant immunosuppression such as from malignancy, solid organ transplant, haematopoietic stem cell transplant or primary immune deficiencies such as severe combined immunodeficiency
- Chronic lung disease requiring ongoing oxygen or respiratory support
- Neurological conditions that impair respiratory function
- Cystic fibrosis with severe lung disease or weight for length <10th percentile
- Trisomy 21 or another genetic condition that increases the risk of severe RSV disease



Additional notes

- Where it is stated that eligibility criteria align with <u>Australian Immunisation Handbook recommendations</u>, they are as follows:
 - Infants entering their first RSV season who:
 - were born to women who did not receive RSV vaccine during pregnancy (every effort should be made to establish maternal vaccination status)
 - were born within 2 weeks of the mother receiving RSV vaccine during pregnancy
 - have risk conditions for severe RSV disease (see above) regardless of maternal vaccination
 - were born to mothers with severe immunosuppression, where the immune response to RSV vaccine was impaired
 - were born to mothers who have received RSV vaccine in pregnancy but have subsequently undergone a treatment such as cardiopulmonary bypass or extracorporeal membrane oxygenation, that has led to loss of maternal antibodies.
 - Infants/young children aged 8–24 months entering their second RSV season who:
 - have a risk condition for severe RSV disease (see above) regardless of maternal vaccination or receipt of nirsevimab or palivizumab in their first RSV season.
- Eligibility for state and territory-funded nirsevimab does not require a Medicare number.
- Lodgement of the infant's dose on the Australian Immunisation Register can be completed without a Medicare number.