

Childhood immunization status (Combo 3)

OHA technical specifications¹

Who: Children who turn two years of age in 2023.

Why: Childhood vaccines protect children from a number of serious and potentially life-threatening diseases such as diphtheria, measles, meningitis, polio, tetanus and whooping cough, at a time in their lives when they are most vulnerable to disease. Approximately 300 children in the Unites States die each year from vaccine preventable diseases. Immunizations are essential for disease prevention and are a critical aspect of preventable care for children. Vaccination coverage must be maintained to prevent a resurgence of vaccine-preventable diseases.

What: This measure reports the percentage of children who turn two-years-old in 2022 and receive all the following immunizations before their second birth date:

 4 DTaP (Diphtheria, Tetanus, and Pertussis) 	• 2 or 3 Rotavirus (2 doses RV1 or 3 doses)
 4 PCV (Pneumococcal conjugate) 	• 2 Influenza – NEW
 3 IPV (Inactivated Polio Vaccine) 	• 1 MMR* (Measles, Mumps, Rubella)
• 3 HiB (Hemophilus Influenzae Type B)	• 1 VZV* (Varicella Zoster Vaccine)
• 3 Hepatitis B	• 1 Hepatitis A - NEW

Please note that multiple vaccines within the same type must have different dates of service to count toward requirement (i.e., to meet the four required DTaP vaccines there must be at least four dates of service on which a DTaP was provided).

*1 MMR,1 VZV, & Hep-A must have a date of service on or between the child's first and second birthdays.

How: Some ideas to improve Childhood Immunization Status rate:

- Utilizing member gap lists to identify members who are most in need. You can create your own gap lists using FIDO Metrics Dashboard and actionable member list.
- Ensure that immunization records in ALERT IIS are up to date and that all patient information is correct (e.g., name spelled correctly, correct date of birth, etc.). Chart review of hospital records to find any missing immunizations (like the first dose of hepatitis B) from the patient's immunization records in ALERT IIS.
- Schedule immunizations visits months before their second birthday. This is especially vital for members who have their second birth within January or February. This measure continues to be an incentive metric; therefore, continuous planning and engagement can lead to better outcomes. Start thinking about those turning one in preparation for the next reporting year.
- Ensure that patient decision-aid tools and catch-up schedules are available for all parents when deciding to vaccinate their children (see resources for more information).
- Schedule subsequent vaccine visits before parents leave the office.
- Implement patient recall workflows.



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- Reach out to your clinic's assigned Quality Improvement Analyst or Innovation Specialist for more support.
- Ways to improve vaccine uptake:
 - Engage cultural, religious, and community-based organizations who may influence social circles
 - Reduce 'hassle factors' (location, hours, incorporating cultural norms, etc.)
 - Involve children early and often, children can act as behavior change agents regarding health-related issues
 - Utilize your extended care team (BHC, THW, pharmacist) to talk, explore beliefs and concerns
 - Provider recommendation: collaborative discussions where concerns are addressed, and science is shared

Exclusions: Members who have had severe immunodeficiency, severe combined immunodeficiency, HIV, various blood cancers, intussusception, died during the measurement year, or is in hospiceExclusions

Members who are in hospice, using hospice services, or died at any time during the year are excluded from this measure. These exclusions are not included in the final rate calculations, but still must be reported to CareOregon.

Coding

Diagnosis codes do not have to be primary.

- CPT: 99381-99385, 99391-99395,
- HCPCS: G0438, G0439, S0302, S0610, S0612, S0613
- ICD-10: Z00.00, Z00.01, Z00.110, Z00.111, Z00.121, Z00.129, Z00.2, Z00.3, Z01.411, Z01.419, Z02.5, Z76.1, Z76.2



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Frequently asked questions

Q: What immunization combination does this metric follow?

A: HEDIS® MY20223 Combination 3.

Q: How do I know which members are due for vaccinations?

A: A child's immunization history in ALERT should be checked before each visit. Additionally, CareOregon prepares and distributes member gap lists using ALERT data provided by OHA on a quarterly basis.

Q: Who is included in the denominator for this measure?

A: Members whose second birthday is within 2023 and have had physical health coverage with the CCO continuously for the 12 months prior to their second birthday are included in the denominator.

Q: If parents decided to not have their child vaccinated, are they excluded from the metric?

A: No. If the child does not receive immunizations, they will remain in the denominator but not the numerator.

Performance Measure Set:

Quality Measurement Type:

□ Structure 🗷 Process □ Outcome □ Patient Experience

Data Type:

□ Claims □ Chart Documentation □ eCQM □ Survey 🗷 Other: ALERT IIS Registry

State Benchmark:

67.9% (2020 National Medicaid Median 50th Percentile)

¹https://www.oregon.gov/oha/HPA/ANALYTICS/CCOMetrics/Final-2023-ODHS-Custody-Specifications.pdf