Update on The National Adult and Influenza Immunization Summit (NAIIS) Activities

Carolyn B Bridges, MD
Medical Consultant to IAC
Co-chair NAIIS Access and Provider Work Group
Former NAIIS Co-Chair

Presenting on behalf of NAIIS
The National Adult and Influenza Immunization Summit (NAIIS)

• Formed in 2012 to build upon the strategies and successes of the National Influenza Vaccine Summit
  – IAC, CDC and NVPO, as lead organizations, developed a MOU for NAIIS
  – MOU establishes NAIIS Organizing Committee
    • AAP, AAFP, AAPA, AANP, ACP, ACOG, AMA, AMGA, ANA, APhA, GSA, IDSA, NFID
    • AIM, NACCHO, AIRA, ASTHO, BIO also participate as SOC liaisons

• Work done throughout the year by working groups

• Over 800 participants representing about 140 public and private entities
The Summit Organizing Committee (SOC)

• SOC members included based on their intellectual contributions to meeting agenda planning, and leading and participating in working groups

• SOC members works to further the goals of raising awareness about ACIP recommended adult immunizations and influenza vaccine and raising coverage
Summit Working Groups and Co-Leads

• Access and Provider
  – Co-Leads: Carolyn Bridges and L.J Tan, IAC; Debra Hawks, ACOG; Kim Martin, ASTHO; Mitch Rothholz, APhA; Salem Wubu, ACP; and Pam Carter, AAFP.

• Influenza
  – Co-Leads: Amy Behrman, U Penn; Kelly McKenna (EverThrive Illinois); and Amy Parker Fiebelkorn, CDC.

• Quality Measures
  – Co-Leads: Ilka Chavez, NVPO and Megan Lindley, CDC.

• Thank you to all these wonderful volunteer leaders!
NAIIS In-Person Meeting May 14-16, 2019, Atlanta, GA

• Theme: Improving access to adult vaccinations
• 317 attendees
• Pre-meeting sessions on new HEDIS measures, update on IIS for adults, vaccine storage and handling, and operationalizing adult vaccination payment
• Keynote by RADM Sylvia Trent-Adams, Principal Deputy Assistant Secretary for Health
• Sessions focused on:
  – Reducing disparities and increasing access for vulnerable populations
  – Best practices for adult vaccination implementation in
    • Healthcare systems
    • State immunization programs
  – New vaccines in pipeline
NAIII In-Person Meeting May 14-16, 2019, Atlanta, GA

• Influenza
  – Updates on surveillance, vaccine coverage and effectiveness
  – Hot topics in influenza panel discussion
  – Communications update and challenges
  – Vaccine manufacture updates regarding supply

• Perspectives from adult and pediatric providers, AMA and NMA, APhA, AMGA, Families Fighting Flu, NIH, and CDC

• Working group breakout discussions re: future activities

• Awards luncheon celebrating immunization champions and innovation in influenza and adult vaccines implementation
Accomplishments of the NAIIS – Access and Provider Work Group

• Maintain on-line billing and coding resources for adult vaccination to reduce errors
• Conducted in-person meeting in collaboration with AMGA Planning regarding implementation of adult immunizations in healthcare systems
  – Meeting summary highlighting best practices drafted
• Adult immunizations business case drafted
  – Strengthened by recent CDC and NVPO-funded studies on costs of providing vaccination services (RTI) and claims rejections (U Michigan)
• Updated IIS “benefits for patients and providers” brochure
  – Brochure for pharmacists in development
• NACHC funded to Identify Policy Barriers and Potential Solutions to Improving Vaccine Access in FQHCs
Proposed Future Activities Under Consideration – Access and Provider Work Group

• Revisit provider organization support for CPT Code for adult vaccination counseling when vaccines not administered
  – Need supported by RTI/CDC/NVPO study findings
  – Revise and resubmit to AMA

• Monitor impact of new HEDIS measures, changes in other adult vaccine quality measures, and reduction in Healthy People 2030 vaccinations measures

• White paper on findings from NACHC funded project to identify policy barriers and potential solutions to improving vaccine access in FQHCs

• Identify ways that NAIIS can contribute to improving use of IIS for adult and influenza vaccinations
Accomplishments of the NAIIS – Influenza Work Group

• Developed and published “Guidance for Leaders/Administrators in Post-Acute and Long-Term Care Facilities Who Plan to Improve Staff Influenza Vaccination Compliance through Vaccination Requirement Policies”
  – Conducted stakeholder meeting October 2018
  – Guidance published August 2019 in conjunction with AMDA's updated policy on requiring flu vaccination for HCP in post-acute and LTCFs.
  – Developed complimentary checklist and FAQs
  – Honor roll specifically for LTC/assisted living facilities that have influenza vaccination requirements for HCP

Accomplishments of the NAIIS – Influenza Work Group, cont.

• Updated checklist for best immunization practices for vaccination clinics held at satellite, temporary, and offsite locations
  – Honor roll and pledge available on NAIIS website
• Developed slide sets for speakers
• Working on partnerships to promote influenza vaccination, e.g. ALA MyShot campaign and Million Hearts

Possible Future Activities of the NAIIS Influenza Work Group

• Continue improving and promoting our existing resources for temporary vaccination clinics and post-acute/LTCFs

• Expand partnerships with non-healthcare workplaces to increase influenza vaccination coverage in these settings

Accomplishments and Activities of the NAIIIS – Quality Measures Work Group

• Two new HEDIS measures included in Healthcare Effectiveness Data and Information Set (HEDIS®) 2019 as first-year measures for voluntary health plan reporting
  – Adult composite: Percentage of members 19 and older who are up-to-date on recommended routine vaccines for influenza, tetanus and diphtheria (Td) or tetanus, diphtheria and acellular pertussis (Tdap), zoster and pneumococcal
  – Prenatal immunization measure: Percentage of deliveries in which women had received influenza and tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccinations

• Future activities under discussion, but will include providing regular updated to WG regarding these and other adult and influenza vaccine QM
NAIIS Information and Resources

• The agenda and presentations from 2019 and past in-person NAIIS meetings and award winners can be found at: https://www.izsummitpartners.org.

• Resources developed by NAIIS working groups can be found on working group pages at: https://www.izsummitpartners.org/naiis-workgroups/.

• Influenza Vaccine Availability Tracking System (IVATS) will be utilized during 2019-20 influenza season to help providers find vaccine for purchase, if needed, at: https://www.izsummitpartners.org/ivats/.
HEDIS® Immunization Quality Measures

Sepheen Byron
Assistant Vice President, Performance Measurement

Presentation to the National Vaccine Advisory Committee
June 5, 2019
Overview

ABOUT HEDIS
HEDIS DATA REPORTING METHODS
NEW HEDIS IMMUNIZATION MEASURES
MEASURE IMPLEMENTATION
Q&A
About NCQA
It all starts with HEDIS®

Health care’s most-used tool for improving performance

Allows for comparison of health plans across important dimensions of care and service
Desirable Attributes for Measures

Measures must balance several criteria

**Relevant**
- Meaningful to stakeholders
- Important to enhanced health
- Financial importance
- Potential for improvement
- Substantial variation

**Scientifically Sound**
- Evidence-based
- Valid
- Reliable

**Feasible**
- Precisely specified
- Data available
- Reasonable collection effort
- Can be audited
HEDIS Measures Life Cycle

- First Year
- Public Comment
- Development
- Selection
- Public Reporting
- Evaluation
- Ongoing Use
- Retirement
NCQA’s Vision for Quality Measurement

Better data, better measures

- New data sources, improved content and flow
- Measures move beyond concepts limited by claims
- Programs use better measures
- Better accountability at all levels

- Meaningful, patient-centric measures
- Measure harmonization across programs
- Standardized, machine readable logic
- Standardized electronic data
HEDIS Data Sources and Reporting Methods

Harnessing an evolving data landscape

Administrative Method: Transaction Data
- Enrollment, Claims, Encounters

Hybrid Method: Administrative + Sample
- Medical Records

Survey Method
- CAHPS®, Medicare Health Outcomes Survey

Electronic Clinical Data Systems Method
- EHRs, Registries,
  Case Management, Administrative/Enrollment

Supplemental Data
- Laboratory, Registries, MRR
Electronic Clinical Data Systems (ECDS)

A structured method to collect and report electronic clinical data for HEDIS quality measurement and for quality improvement.

What are Electronic Clinical Data Systems?

- Network of data containing a plan member’s health information and records of experiences within health care system
- Data are structured and allow for automated queries
- Can support other care-related activities

Data must use standard layouts, meet the technical specifications and be accessible by the care team upon request.

More information on ECDS:
http://www.ncqa.org/ecds
Facilitators for Collecting and Sharing Electronic Data

Key Facilitators

- Strong provider collaboration
- Integrated care systems
- External reporting requirements
- Incentives for data sharing
- Data sharing systems in place
- Connections with IIS
<table>
<thead>
<tr>
<th>Measure Title</th>
<th>Data Source</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Childhood Immunization Services</strong></td>
<td>Hybrid</td>
<td>Vaccinations for children by age 2</td>
</tr>
<tr>
<td><em>Immunizations for Adolescents</em></td>
<td>Hybrid</td>
<td>Vaccinations for adolescents by age 13</td>
</tr>
<tr>
<td><strong>Flu Vaccinations for Adults Ages 18–64</strong></td>
<td>CAHPS</td>
<td>Flu vaccines for Medicaid members, age 18 to 64</td>
</tr>
<tr>
<td><em>Flu Vaccinations for Adults Ages 65 and Older</em></td>
<td>CAHPS</td>
<td>Flu vaccines for Medicare members, age 65 and older</td>
</tr>
<tr>
<td><strong>Pneumococcal Vaccination Status for Older Adults</strong></td>
<td>CAHPS</td>
<td>Pneumococcal vaccines for Medicare members, age 65 and older</td>
</tr>
<tr>
<td><strong>New in HEDIS for 2018</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Adult Immunization Status</em></td>
<td>ECDS</td>
<td>Vaccinations for adults, age 19 and older</td>
</tr>
<tr>
<td><em>Prenatal Immunization Status</em></td>
<td>ECDS</td>
<td>Vaccinations for pregnant women</td>
</tr>
</tbody>
</table>
New HEDIS Immunization Measures

Adult Immunization Status and Prenatal Immunization Status

**Guidelines** recommend the following vaccines

*Adults* - influenza; Td/Tdap; herpes zoster; pneumococcal

*Pregnant Women* - influenza and Tdap

**Gaps in care** have been found for both adults and pregnant women

**Opportunity for measures** to assess health plan performance on administration of these vaccines
Adult Immunization Status

Measure Description

% of Adults 19 years of age and older who are up-to-date on recommended routine vaccines:

- Influenza
- Td or Tdap
- Herpes zoster
- Pneumococcal

Commercial, Medicaid, Medicare
## Adult Immunization Status

### Detailed specifications

<table>
<thead>
<tr>
<th></th>
<th>Commercial &amp; Medicaid</th>
<th>Medicare</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Influenza Rate</strong></td>
<td>Influenza vaccine received between July 1 of year prior to June 30 of measurement period</td>
<td>19-65</td>
</tr>
<tr>
<td><strong>Td/Tdap Rate</strong></td>
<td>Td or Tdap vaccine within the past 10 years</td>
<td>66+</td>
</tr>
<tr>
<td><strong>Zoster Rate</strong></td>
<td>1 dose of live herpes zoster vaccine or 2 doses of recombinant herpes zoster vaccine on or after 50th birthday</td>
<td>50-65</td>
</tr>
<tr>
<td><strong>Pneumococcal Rate</strong></td>
<td>Polysaccharide AND conjugate vaccine ≥ 12 months apart on or after age 60</td>
<td>- -</td>
</tr>
<tr>
<td><strong>Total Rate</strong></td>
<td>Percent of vaccines received out of all recommended vaccines</td>
<td></td>
</tr>
</tbody>
</table>

*Excludes adults with history of immunocompromising conditions or chemotherapy, bone marrow transplant or in hospice*
Prenatal Immunization Status

Measure Description

% deliveries in which the woman received the following vaccines:
  ▶ Influenza
  ▶ Tdap

Commercial, Medicaid
## Prenatal Immunization Status

*Detailed specifications*

<table>
<thead>
<tr>
<th>Measure Rate</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influenza</td>
<td>Influenza vaccine between July 1 of the year prior to the measurement period and the delivery date</td>
</tr>
<tr>
<td>Tdap Rate</td>
<td>At least one Tdap vaccine during the pregnancy</td>
</tr>
<tr>
<td><strong>Total Rate</strong></td>
<td>Deliveries for which patients received both vaccines</td>
</tr>
</tbody>
</table>

*Excludes deliveries with a gestational age of less than 37 weeks and patients who are in hospice or using hospice services*
HEDIS Measures Life Cycle

- First Year
- Public Comment
- Development
- Selection
- Public Reporting
- Evaluation
- Ongoing Use
- Retirement
HEDIS First-Year Analysis Process Overview

All new HEDIS measures are collected but not publicly reported for at least one reporting cycle

When assessing for public reporting NCQA considers

- Feasibility
- Opportunity for improvement

NCQA’s multi-stakeholder approval panel votes to approve measures for public reporting and readiness for use in programs
Measuring quality. Improving health care.
Accomplishments and Promising Approaches in IIS

Rebecca Coyle, Executive Director
American Immunization Registry Association
IIS are available in all but one state and are increasingly well-populated.
Goals

1. Provide IIS with actionable information to fully align with IIS Functional Standards and improve interoperability

2. Identify how well IIS are aligning with standards and best practices
Content Area

Transport
Submission / Acknowledgement
Query / Response
CDS
Data Quality
Measurement & Improvement Process

Validation
- IIS receives a certificate of recognition for each content area that is validated

Meets Measures
- Ready for Validation

Doesn’t Meet Measures
- IIS review results and makes changes
- IIS contacts AIRA for technical assistance as needed

IIS reaches out to AIRA and registers to access the AART Tool

AIRA connects the IIS pre-production or test system to AART

IIS automatically progresses to assessment for each content area
Most Importantly…

**TRANSPORT**
- Baseline: 17
- Q1 2019: 37

**HL7 SUBMISSION**
- Baseline: 16
- Q1 2019: 36

**HL7 QUERY|RESPONSE**
- Baseline: 10
- Q1 2019: 28
Validation Reports

TRANSPORT VALIDATION
Basic Level
2018 - Quarter 4 Update

The American Immunization Registry Association (AIRA) launched its community-driven immunization information system (IIS) measurement and improvement initiative in mid-2015, with the dual goals of providing IIS with information to more fully align with HS Functional Standards, while also developing a summary of where IIS are in an overall network in meeting standards and best practices. This report shares the results of IIS that have participated in Validation as the third stage of the voluntary, phased measurement and improvement process.

SUBMISSION/ACKNOWLEDGEMENT VALIDATION
Basic Level
2018 - September

The American Immunization Registry Association (AIRA) launched its community-driven immunization information system (IIS) measurement and improvement initiative in mid-2015, with the dual goals of providing IIS with information to more fully align with HS Functional Standards, while also developing a summary of where IIS are in an overall network in meeting standards and best practices. This report shares the results of IIS that have participated in Validation as the third stage of the voluntary, phased measurement and improvement process.

QUERY/RESPONSE VALIDATION
Basic Level
2018 - September

The American Immunization Registry Association (AIRA) launched its community-driven immunization information system (IIS) measurement and improvement initiative in mid-2015, with the dual goals of providing IIS with information to more fully align with HS Functional Standards, while also developing a summary of where IIS are in an overall network in meeting standards and best practices. This report shares the results of IIS that have participated in Validation as the third stage of the voluntary, phased measurement and improvement process.
Query & Response
EHR-IIS Query: Access at the Point of Care

- The vast majority of IIS have query/response capabilities
- Query/response brings huge value, lowers burden for providers

IIS Capable of Query/Response

IIS Annual Report Data, 2017
EHR Perspective – Vaccination Query Interface Statistics

- 236 Live Interfaces
- 35 State Registries
- 1 City Registry
- >200 million queries sent a year
Onboarding
Onboarding Consensus-Based Recommendations intended to help improve and standardize onboarding
Developed for a wide variety of audiences including:
• Onboarding teams (technical and programmatic staff)
• Program administrators
• EHR vendors,
Providers, and others may also find this document informative
The Process

STEP 1: DISCOVERY & PLANNING
STEP 2: DEVELOPMENT AND TESTING
STEP 3: PRODUCT APPROVAL
STEP 4: ONGOING MONITORING
SPECIAL: QUERY / RESPONSE
Outbreaks
Using IIS for Outbreak Response
Examples

• Hepatitis A Outbreaks
  • Help to monitor transient individuals
  • Department of corrections

• MN Measles outbreak 2017
  • 8,500 exposures in child care and school settings
  • Utilized MIIC to review immunization status
  • Quantify the resource savings of MIIC to determine immunity status in a child care center setting
<table>
<thead>
<tr>
<th>Comparison</th>
<th>Time Saved (Hours)</th>
<th>Cost Saved (USD): MDH Epidemiologist</th>
</tr>
</thead>
<tbody>
<tr>
<td>IIS vs. No IIS</td>
<td>1,147</td>
<td>$30,021.92</td>
</tr>
<tr>
<td>90% IIS vs. No IIS</td>
<td>1,032</td>
<td>$27,019.72</td>
</tr>
</tbody>
</table>

- IIS results in 92% fewer resources used than No IIS
- 90% IIS results in 82% fewer resources used than No IIS
Communication & Resources
What are the AIRA One-Sheets?

• Concise documents that communicate the role and value of immunization information systems (IIS)
• Intended for a large range of audiences
• For your use!
Current One-Sheets

- EHR and IIS (Infographic)
- How IIS Support a Patient's Journey (Infographic)
- Value of IIS (Infographic)
- IIS 101
- 4 Ways AIRA Supports the IIS Community
Thank you

Questions