The National Adult and Influenza Immunization Summit (NAIIS)

L.J Tan Chief Strategy Officer, IAC Co-Chair, NAIIS

The origins....

- The NAIIS had its roots in the National Influenza Vaccine Summit, co-founded in the year 2000 by CDC and the AMA.
 - Co-founders: Walter Orenstein and LJ Tan
 - Two meetings of the Summit in 2000
- Spurred by severe influenza vaccine shortages and uncertainty regarding supply.
 - Even then, communications were an important aspect of consideration



The United States National Influenza Vaccine Summit developed into...

- A partnership of more than 130 organizational stakeholders, both private and public, in influenza vaccine research, production, distribution, administration, and advocacy
- A partnership committed to achieving the Healthy People 2010 goals for influenza vaccination, and then HP 2020.
 - As part of that, the Summit was always working to communicate ACIP recommendations to the providers and public at the ground level
 - The Summit also worked hard at communicating information back to the ACIP from the ground.
- Goal: bring together wide range of stakeholders to identify and solve issues regarding influenza vaccine ordering, distribution, communications, and other issues



- Was 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 National Adult and Influenza Immunization Summit (NAIIS)
 - -MOU established NAIIS Organizing Committee
 - AAP, AAFP, AAPA, AANP, ACP, ACOG, AMGA, ANA, APhA, GSA, IDSA, NFID
 - AIM, NACCHO, AIRA, ASTHO, BIO also participate as SOC liaisons
- Work done throughout 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 working groups
- SOC members works to further the goals of raising awareness about ACIP recommended adult immunizations and influenza vaccine and raising coverage for ACIP recommended vaccines
- Provide input to the agenda, meeting planning, and priorities for the work of the NAIIS and participate in one or more working groups



Partners of the Summit include...

- Vaccine Manufacturers
- Vaccine Distributors
- Federal Agencies
- Professional Medical Organizations
 - Specialty
 - State
- Nursing Organizations
- Public Health
- Hospitals



Partners of the Summit include...

- Pharmacists
- Community Immunization Providers
- Occupational Health Providers
- Business/Employers
- Private Health Insurance and Managed Care
- Long-term Care
- Quality Improvement Organizations
- Consumers
- Advocacy Groups



MOU: Goals of NAIIS

- Convene adult and influenza immunization stakeholders,
- Facilitate identification of specific actions to be taken by NAIIS members that will lead to improvements in uptake of ACIP recommended vaccines, and
- Develop and sustain working groups within the NAIIS that meet throughout the year whose goals are implementation of specific actions that will lead to improvements in awareness and uptake of ACIP-recommended vaccines for adults and influenza vaccine for persons of all ages.

Summit Promotes Unified Adult and Influenza Vaccination Goals

- The remarkable breadth of participants in the Summit provides a 360-degree view of all the moving parts associated with adult and influenza immunization
- Summit provides continual opportunity for all partners to "get on the same page" with respect to adult and influenza immunization in the United States.



The Summit Trust Relationship...

- Through the development of understanding, trust and transparency in the adult immunization enterprise, the Summit
 - –Provides partners with a safe environment to raise issues/problems and discuss potential solutions honestly.
 - –Provides opportunities to share, learn and understand each others' perspectives and ideas
 - Provides opportunities to leverage all partners to respond to national questions about adult vaccination



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Strategies for Improving Adult Immunizations Through NAIIS Partner Engagement

- Communication (identify issues of concern and possible solutions)
- Community and commitment (increase adult immunization awareness and foster partner ownership of issues)
- Coordination (identify shared key principles and goals)
- Competition (friendly competition/motivation among stakeholder organizations through showcasing/recognition best practices and survey results)



How Summit Helps Identify, Define, and Address Issues

- Often anecdotal issues/barriers brought up by one or more partners
- NAIIS work group discussions help break down issues into component parts
- Identify
 - Gaps in data to define scope and burden of issue
 - Components that can be addressed, how, and by what group/NAIIS organization?
- Example: "claims denials"
 - What are causes? What causes contribute the most? Can education of providers or other solutions reduce coding or billing errors that contributed to specific causes of claims denials? E.g. OBGYNs can bill for vaccines outside of "bundled payment" for pregnancy. Many providers don't know which vaccines can be billed to Medicare B vs D.
 - <u>Result:</u> Summit Billing and Coding Guide (<u>https://www.izsummitpartners.org/naiis-workgroups/access-provider-workgroup/coding-and-billing/</u>)





Search: Google Custom Search

Coding and Billing for Adult Vaccinations

A common problem that has been expressed by providers of adult vaccinations has been the intricacies and complexities associated with coding and billing for those services. Much discussion at meetings of the National Adult and Influenza Immunization Summit ("Summit") has focused on opportunities to provide information to providers to reduce the errors and confusion associated with coding and billing for adult vaccines. The Summit's Access and Provider Workgroup has developed this website in response to this identified need.

At this one web location, you will find the **top questions** identified with coding and/or billing for adult vaccinations, **scenarios** that detail how to go about coding and billing for adult vaccines, and collected **resources** from the Summit's medical association, public health, and vaccine manufacturing partners.

Information Sections

Top Questions on Coding and Billing for Vaccinations: Avoiding Common Errors

The Summit Provider and Access Workgroup surveyed partners and compiled the top questions associated with coding and billing for adult vaccines. Guidance was developed for each of these questions.

Scenarios: Straightforward Guidance for Dealing with Common Problems Encountered When Billing for Adult Vaccines

Coding and Billing Subgroup Members

- Carolyn Bridges, CDC
- Laura Lee Hall, Sustainable Healthy Communities
- David Kim, CDC
- Don Nicholson, TX Dept of Health
- > Jill Powelson, AMGA
- Angela Shen, NVPO
- L.J Tan, IAC
- Laurel Wood, IAC

The Summit In-Person Meeting, May 17-18 2018

- Theme "Overcoming Implementation Challenges in Adult and Influenza Immunization"
- Shortened meeting format due to coordination with the National Immunization Conference
 - Planning in collaboration with NIC placed Summit relevant content on Thursday of the NIC; Summit plenary, awards, and WGs meetings on Friday.
- Builds upon current extensive effort to engage healthcare systems in adult and influenza immunizations
 - Includes presentations by APhA and AMGA on how their members are implementing the Standards for Adult Immunization Practice



Working with healthcare systems

White Paper:

http://go.beckershospitalreview.com /lowering-the-burden-of-adultdisease-one-shot-at-a-time

Webinar:

https://www.youtube.com/watch?v= BuhQmCVJ9Vs

Becker's Healthcare: Hospital Review ASC Review Spine Review Infection Co

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HOSPITAL REVIEW

BECKER'S -**HOSPITAL REVIEW**



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National Adult and Influenza Immunization Summit

Making Prevention the Priority – How to Boost Adult Immunization Rates

espite providers' and health agencies' efforts to advocate for the importance of vaccinating adults - especially those most vulnerable to infection - rates of adult immunization remain low, creating a substantial burden on the American health system.

Adult immunization is an uphill battle due to a number of reasons, including cultural misperception and socioeconomic barriers. However, healthcare organizations that make adult vaccination a strategic care priority can realize significant improvements in population health.

In 2015, the overwhelming cause of the economic burden of disease was attributable to poor vaccine adherence by U.S. adults, according to a 2016 study published in the journal Health Affairs. For the study, researchers analyzed health data compiled in various national databases

"We kind of get pediatric immunizations, it's almost ingrained in the culture, but that's not necessarily the case with the adults," says John Bulger, DO, CMO for population health at Danville, Pa.-based Geisinger Health System and CMO of the system's 500,000-member health plan. "I think one of the challenges is that even though there is a large burden of diseases we have vaccines for, most patients will still not get that disease [whether they're vaccinated or not], so they'll forgo a vaccine."

The substantial benefits and protections offered by adult immunization are often undercut by vaccines' varying rates of effectiveness. Pediatric immunizations like the polio vaccine and the mumps, measles and rubella vaccine offer protection from illness at rates approaching 100 percent. Adult vaccinations, like the flu vaccine, have much lower efficacy rates. The 2014 flu vaccine only reduced an individual's

well care," says Jerry Penso, MD, CMO and quality officer for American Medical Group Association and the president of AMGA Foundation, "In the adult world that hasn't been as much a routine for most adult patients as far as well care. Most adults only enter the health system when something is wrong. And we (providers) simply react to whatever the problem is."

Though engaging the older U.S. population in preventive care can be challenging, the current trajectory of America's healthcare system as driven by value-based models of care offer providers a unique moment in history to boost adult immunization rates to all-time highs.

Value-based care and adult immunizations

Under outcome-based care models, preventive care and timely medical interventions have an outsized effect on patient

Executive Briefing:

https://www.izsummitpartners.or g/content/uploads/2017/06/maki ng-preventative-priority-beckerhospital-review-2017.pdf.



National Adult and Influenza Immunization Summit

Channels Print Issue **E-Weeklies** Conferences Webinars Whitepapers Multimedia Lists About Us Physicians Leadership Executive Moves Transaction & Valuation Human Capital and Risk Patient Flow Facilities Management Telehealth Supply Chain Patient Engagement ACOs Population Health Legal & Regulatory Compensation Payer Issues Opioids Rankings and Ratings

The importance of preventive care strategies in a changing healthcare environment

Written by Alia Paavola | September 19, 2017 | Print | Email

The industry shift to value-based reimbursement models has underscored the importance of immunizations as a cost-effective preventive care strategy that can improve health outcomes for vulnerable patients.

G+ Although vaccinations are integral to promoting patient wellness, hospitals face several obstacles when implementing adult immunization initiatives. Challenges include shifting away from the historic fee-for-service model, changing physician attitudes toward recommending vaccines and overcoming a lack of education about the importance of prevention medicine in adults.

In an Aug. 31 webinar sponsored by the Immunization Action Coalition and the National Adult and Influenza Immunization Summit and hosted by Becker's Hospital Review, John Bulger, DO, CMO for population health at Danville, Pa,-based Geisinger and CMO of Geisinger Health Plan; Scott Nygaard, MD, CMO and chief clinical integration officer of Fort Myer, Fla.-based Lee Health; and Jeffrey Silvers, MD, medical director of quality, infection Top 40 Articles from the Past 6 Months

100 great hospitals in America | 2016 CMS will cancel major bundled

Summit Working Groups (and Co-Leads)

- Thank you to all these wonderful volunteer leaders!
- Access and Provider
 - Co-Leads: Amy Parker Fiebelkorn, CDC; Debra Hawks, ACOG; Kim Martin, ASTHO; Mitch Rothholz, APhA; L.J Tan, IAC; and Salem Wubu, ACP.
- Quality Measures
 - Co-Leads: Amy Groom (IHS); Angela Shen (NVPO); and Sharon Sprenger (Joint Commission).
- Influenza
 - Co-Leads: Amy Behrman (U Penn), Kelly McKenna (EverThrive Illinois), Amy Parker Fiebelkorn (CDC)



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Accomplishments of the NAIIS – Influenza

- Created, published, piloted, and disseminated checklist for best immunization practices for vaccination clinics held at satellite, temporary, and offsite locations
 - Created and published pledge and honor roll for organizations using checklist
 - Published FAQ's to facilitate use of checklist and pledge
 - Created and published one page summary of principles underlying checklist
 - Conducted webinar on the checklist and its need for the NAICP
- Conducted CDC Immunization Netconference webinar 5/2/17
- Initiated collaboration with CMS and GSA to improve LTCF healthcare worker education and immunization
 - Fall meeting planned bringing in leadership of LTCF



Accomplishments of the NAIIS – Quality Measures

- Developed prenatal and adult immunization composite measure drafts
 - Prenatal and adult composite measures completed testing
 - NCQA has approved the measures for public comment
 - Submission for consideration into Medicare programs, Medicaid Adult & Child Core Sets, and NQF Endorsement
- Developed letter to CMS with recommendations for implementing vaccination of ESRD patients, including development of quality measures
 - Letter undergoing sign on process with Summit partners
- NVPO conducting analyses of vaccine coverage through a CMS-NVPO collaboration on Medicare claims analysis



Accomplishments of the NAIIS – Access and Provider

- Developed and published on-line billing and coding resources for adult vaccination to reduce errors
- One-pager on immunizations activities and MIPS points
- Updated disparities fact sheet adds disparities in Tdap vaccination of pregnant women on Medicaid
- Maintenance of Standards slide sets
- Planning two meetings to address and develop implementation tools on:
 - Adult immunizations roadmap for healthcare systems, building upon previous work (Executive briefing, webinar, white paper)
 - Adult immunizations business case clinicians and systems
- Updating IIS "benefits for patients and providers" brochure
 - Refined messages to 4 target audience: clinicians, pharmacists, healthcare systems, and occupational health providers



Accomplishments of the NAIIS



8 December 2017

Kate Goodrich, MD Director and CMS Chief Medical Officer Center for Clinical Standards and Quality U.S. Centers for Medicare & Medicaid Services 7500 Security Blvd, Baltimore, MD 21244

Advancing Immunization Measures for End-Stage Renal Disease Patients: Recommendations of the National Adult and Immunization Summit (NAIIS)

The undersigned participants of the National Adult and Influenza Immunization Summit (NAIIS) appreciate the opportunity to provide the following recommendations. The NAIIS comprises more than 130 public and private organizations from the healthcare industry: public health and private medical sectors, vaccine manufacturers and distributors, consumers, and others interested in preventing illness,

(NAIIS) is soliciting candidates for the Annual Summit awards recognize individuals and wards improving vaccination rates Annual Summit Summit Archive emplify the meaning of the 2017 NAIIS and communication among 2016 NAIIS lization needs of the patient and 2015 NAIIS 2014 NAIIS and where appropriate, an 2013 NAUS with their awards at the NAIIS 2012 NAIS wards ceremony will be May 18). 2012 NIVS 2011 NIVS 2010 NIVS 2009 NIVS Critical guist 3. check "NO" in ONE

for Disease Control and Prevention (CDC) guidelines and handling, preparation, administration, and documentation. site should complete, sign, and date this checklist EACH ility and quality assurance standards, all signed checklists clinic staffing.

Adult and Influenza

clinic should be designated as the clinic coordinator/supervisor. ing the steps below and will be referred to as "you" in these

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ccine effectiveness are identified by the stop sign icon: 🕮. If you s that contain a 😳 , DO NOT move forward with the clinic. Follow

Summit