

Immunizations for Adolescents (NQF 1407)

Measure Basic Information

Name and date of specifications used: OHA follows HEDIS® MY2023 Technical Specifications for Health Plans (Volume 2).

URL of Specifications: This measure is selected in the CMS CHIP and Medicaid Child Core Set; the detail manual and Value Set Dictionary can be found on the CMS resource page:

<https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/childrens-health-care-quality-measures/index.html>

Measure Type:

HEDIS PQI Survey Other Specify:

Measure Utility:

CCO Incentive (Combo 2) State Quality (Combo 1 and 2) CMS Adult Core Set CMS Child Core Set Other Specify:

Data Source:

MMIS/DSSURS and Public Health Division Immunization Program Registry (ALERT IIS)

See the ALERT IIS Data Use Cases document posted online for additional information about immunization data.

<https://www.oregon.gov/oha/HPA/ANALYTICS/Pages/CCO-Metrics.aspx>

Measurement Period: January 1, 2023 – December 31, 2023

Benchmark for OHA measurement year	2021	2022	2023 [^]
IMA Combo 2	29.0%	36.9%	36.9%
Source:	MY2018 national Medicaid 25 th percentile	MY2019 national Medicaid median	MY2019 national Medicaid median

[^]This measure is selected for the 2023 Challenge Pool.

2023 Improvement Targets: Minnesota method with 1 percentage point floor.

Note on telehealth: This measure is not telehealth eligible.

Changes in specifications from MY2022 to MY2023:

- HEDIS added a required exclusion for members who died during the measurement year.
- HEDIS added instructions to report rates stratified by race and ethnicity.
- OHA added instructions that CCOs may submit EHR records with qualifying SNOMED-CT codes indicating anaphylaxis to a vaccine.

Member type: CCO A

CCO B

CCO G

Measure Details

Data elements required denominator:

Adolescents who turn 13 years of age during the measurement year.

Required exclusions for denominator:

- Members in hospice or using hospice services any time during the measurement year. Refer to *General Guideline 15: Members in Hospice*. These members are identified using HEDIS MY2023 Hospice Encounter Value Set and Hospice Intervention Value Set, with claims within the measurement year.
- Members who died any time during the measurement year. Refer to *HEDIS MY2023 General Guideline 16: Deceased Members*.

Deviations from cited specifications for denominator: None. Note OHA no longer deviates from HEDIS by excluding deceased individuals.

Continuous enrollment criteria: 12 months prior to the adolescent's 13th birthday.

Allowable gaps in enrollment: No more than one gap in enrollment of up to 45 days during the 12 months prior to the adolescent's 13th birthday.

Anchor Date (if applicable): Enrolled on the adolescent's 13th birthday.

Data elements required numerator:

Meningococcal serogroups A, C, W, Y Either of the following meets criteria:

- At least one meningococcal serogroups A, C, W, Y vaccine (Meningococcal Immunization Value Set; Meningococcal Vaccine Procedure Value Set), with a date of service on or between the member's 11th and 13th birthdays.
- Anaphylaxis due to the meningococcal vaccine (SNOMED CT code 428301000124106) any time on or before the member's 13th birthday.

Tdap Any of the following meet criteria:

- At least one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine (Tdap Immunization Value Set; Tdap Vaccine Procedure Value Set), with a date of service on or between the member's 10th and 13th birthdays.
- Anaphylaxis due to the tetanus, diphtheria or pertussis vaccine (Anaphylaxis Due to Diphtheria, Tetanus or Pertussis Vaccine Value Set) any time on or before the member's 13th birthday.
- Encephalitis due to the tetanus, diphtheria or pertussis vaccine (Encephalitis Due to Diphtheria, Tetanus or Pertussis Vaccine Value Set) any time on or before the member's 13th birthday.

HPV Any of the following meet criteria:

- At least two HPV vaccines (HPV Immunization Value Set; HPV Vaccine Procedure Value Set), on or between the member's 9th and 13th birthdays and with dates of service at least 146 days apart. For example, if the service date for the first vaccine was March 1, then the service date for the second vaccine must be on or after July 25.
- At least three HPV vaccines (HPV Immunization Value Set; HPV Vaccine Procedure Value Set), with different dates of service on or between the member's 9th and 13th birthdays.
- Anaphylaxis due to the HPV vaccine (SNOMED CT code 428241000124101) any time on or before the member's 13th birthday.

Combination 1 (Meningococcal, Tdap) Adolescents who are numerator compliant for both the meningococcal and Tdap indicators.

Combination 2 (Meningococcal, Tdap, HPV) Adolescents who are numerator compliant for all three indicators (meningococcal, Tdap, HPV).

(See HEDIS MY2023 specifications or CMS Medicaid Child Core Set manual for detail codes in the Value Set.)

Required exclusions for numerator: None.

Deviations from cited specifications for numerator: None.

Note for Anaphylaxis information submission:

The measure recognizes anaphylaxis reactions for numerator hits. However, the records can only be verified by SNOMED CT codes available in EHR, which is not available for OHA's regular calculation using administrative claims and immunization registry (ALERT IIS) data.

OHA accepts CCOs' submission of EHR records with qualifying SNOMED-CT codes indicating anaphylaxis to a vaccine, but the submission is only allowed during the measurement year final validation period in the month of May, and ONLY for those CCOs that do not pass the metric in OHA's preliminary result published in April, but could pass the metric with the supplemental anaphylaxis information incorporated.

The anaphylaxis data submission template (used for both the Childhood and the Adolescent immunization measures) is available on the CCO Metrics website, and includes a code reference table along with more detailed instructions: <https://www.oregon.gov/oha/HPA/ANALYTICS/Pages/CCO-Metrics.aspx>

A CCOs must first alert OHA of their intent to submit the anaphylaxis information by emailing metrics.questions@odhsoha.oregon.gov. OHA staff will then initiate a secure email for the CCO to attach the template and the verification documents.

The supplemental anaphylaxis information submission is effective starting with MY2022 final validation (in May of 2023).

The date for which the data source (EHR) documented the anaphylactic reactions should be reported; OHA will examine the date to determine whether it is within the required time window to qualify for a numerator hit. For example, an anaphylactic reaction for HPV must be documented in the EHR on or before the member's 13th birthday.



In addition to filling out the template, the CCO must also provide evidence for each case. The following documents are permitted as the primary sources of verification:

- A screenshot of the EHR record showing the SNOMED-CT code and documentation date, or
- A copy of the clinical report or clinical summary from the visit for service.