Introduction to the adolescent immunization CCO incentive metric

Sara Kleinschmit, Health Policy & Analytics Rex Larsen, Immunization Program Anona Gund, Transformation Center

February 25, 2020



HEALTH POLICY & ANALYTICS
Transformation Center

CCO Incentive Measure Program: Adolescent Immunizations

Sara Kleinschmit, MSc Policy Advisor OHA Office of Health Analytics



S CCO Incentive Measures



Annual assessment of CCO performance on selected measures



CCO performance tied to bonus payments (withhold of capitation payment)



Historically 17-18 measures; Metrics & Scoring Committee reduced number for 2020 to 13



2018 payment (most recent) \$188 million



2020 CCO Incentive Measures

- 1. Assessments within 60 days for children in DHS custody
- Childhood immunization status
- 3. Cigarette smoking prevalence
- 4. Depression screening and follow-up plan
- Diabetes: HbA1c Poor Control
- 6. Disparity measure: ED utilization among members with mental illness
- 7. Drug and alcohol screening (EHR-based SBIRT)
- 8. Oral evaluation for adults with diabetes
- Timeliness of postpartum care
- 10. Well-child visits for 3-6-year-olds (kindergarten readiness) *NEW*
- 11. Preventive dental visits, ages 1-5 (kindergarten readiness) and 6-14 *NEW*
- 12. Immunizations for adolescents, combo 2 *NEW*
- 13. Initiation and engagement in drug and alcohol treatment *NEW*

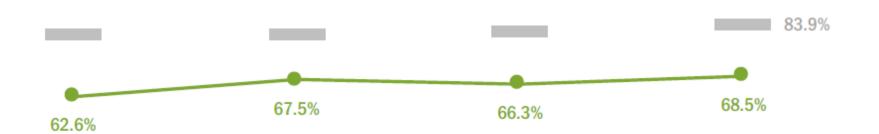
Immunization for Adolescents, Combo 2

- Overview: Percentage of adolescents who received recommended vaccines (meningococcal, Tdap, and HPV) before their 13th birthday
- Data Source: Oregon's Statewide Immunization Registry (ALERT IIS) + MMIS/DSSURS
- Benchmark/Target: 40.4% (2019 National Medicaid 75th percentile)
- Note: In 2018, credit was added for a two-dose HPV vaccination series; previously only having three doses of HPV vaccination would qualify.

Data Trends

IMMUNIZATIONS FOR ADOLESCENTS—Combo 1

Statewide



2015

2016

2017

Poregon 1th

Data Trends

IMMUNIZATIONS FOR ADOLESCENTS—Combo 2

Statewide



2017 2018



Resources

- OHA metrics team: <u>metrics.questions@dhsoha.state.or.us</u>
- CCO incentive program webpage: <u>https://www.oregon.gov/oha/HPA/ANALYTICS/Pages</u> <u>/CCO-Metrics.aspx</u>
- Adolescent immunizations measure specifications:
 https://www.oregon.gov/oha/HPA/ANALYTICS/CCOM
 etrics/2020-Immunizations-for-Adolescents specifications-final.pdf



Improving adolescent immunization rates

Rex Larsen
Quality Improvement Program Manager
OHA Immunization Program



What am I going to talk about today?

- What do adolescent vaccination rates look like in Oregon?
- What impacts vaccination rates?
- How can we improve rates?



What do adolescent vaccination rates look like in Oregon?



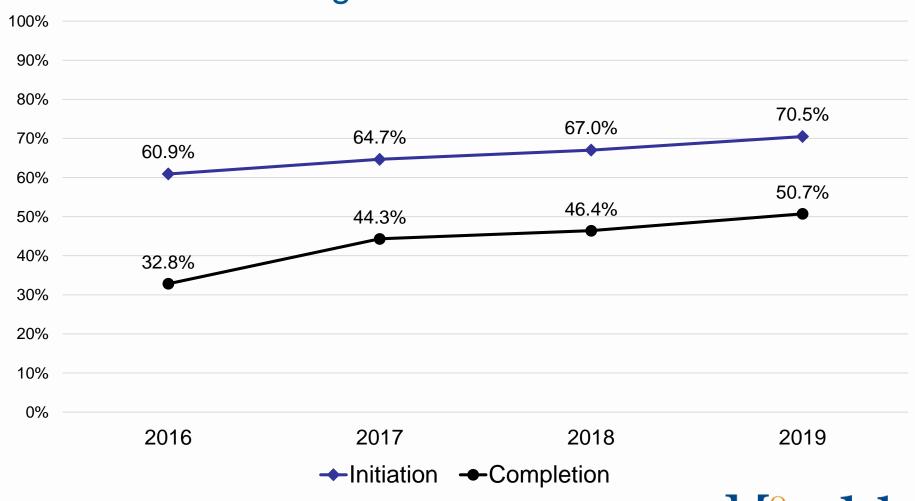
Oregon Immunization Rates

Oregon miniam zation nates								
	2015	2016	2017	2018	2019			
Thirteen- to Seventeen-Year-Old Vaccination Rates b								
1 dose Tdap ^c	92%	92%	93%	93%	93%			
1 dose Meningococcal	70%	74%	75%	77%	80%			
1 dose Flu (in most recent season)	24%	24%	25%	28%	30%			
HPV ^d initiation (1+ dose)	56%	61%	65%	67%	70%			
HPV ^d completion (2-3 doses) ^e	28%	33%	44%	46%	51%			
Hispanic ^f	n/a	n/a	56%	56%	60%			
White ^f	n/a	n/a	46%	49%	53%			
Black/African American ^f	n/a	n/a	53%	54%	57%			
Asian ^f	n/a	n/a	53%	56%	59%			
American Indian and Alaskan Native f	n/a	n/a	56%	59%	64%			
Native Hawaiian/Pacific Islander f	n/a	n/a	52%	53%	57%			
Thirteen-Year-Old ^g Vaccination Rates ^b								
HPV ^d initiation (1 dose)	n/a	n/a	52%	56%	65%			
HPV ^d completion (2 doses)	28%	30%	33%	32%	33%			
Tdap ^c	n/a	n/a	80%	82%	84%			
Meningococcal	n/a	n/a	66%	67%	71%			
Teen series ^h	n/a	n/a	30%	30%	31%			

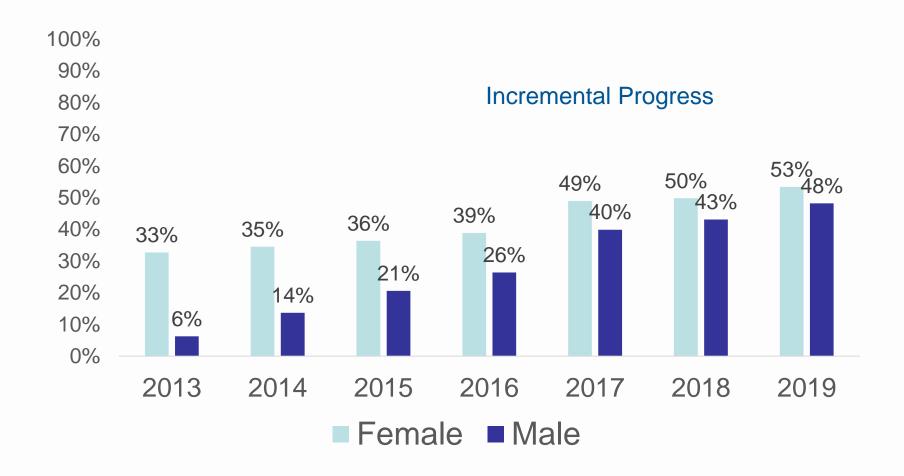
Oregon Immunization Rates

2015	2016	2017	2018	2019	
92%	92%	93%	93%	93%	
70%	74%	75%	77%	80%	
24%	24%	25%	28%	30%	
56%	61%	65%	67%	70%	
28%	33%	44%	46%	51%	
n/a	n/a	56%	56%	60%	
n/a	n/a	46%	49%	53%	
n/a	n/a	53%	54%	57%	
n/a	n/a	53%	56%	59%	
n/a	n/a	56%	59%	64%	
n/a	n/a	52%	53%	57%	
n/a	n/a	52%	56%	65%	
28%	30%	33%	32%	33%	
n/a	n/a	80%	82%	84%	
n/a	n/a	66%	67%	71%	
n/a	n/a	30%	30%	31%	
	92% 70% 24% 56% 28% n/a n/a n/a n/a n/a n/a n/a n/a n/a n/	92% 92% 70% 74% 24% 24% 56% 61% 28% 33% n/a	92% 92% 93% 70% 74% 75% 24% 24% 25% 56% 61% 65% 28% 33% 44% n/a n/a 56% n/a n/a 53% n/a n/a 53% n/a n/a 56% n/a n/a 52% 28% 30% 33% n/a n/a 52% 28% 30% 33% n/a n/a 66%	92% 92% 93% 93% 70% 74% 75% 77% 24% 24% 25% 28% 56% 61% 65% 67% 28% 33% 44% 46% n/a n/a 56% 56% n/a n/a 53% 54% n/a n/a 53% 56% n/a n/a 53% 56% n/a n/a 55% 55% n/a n/a 52% 55% n/a n/a 52% 56% n/a n/a 66% 67%	

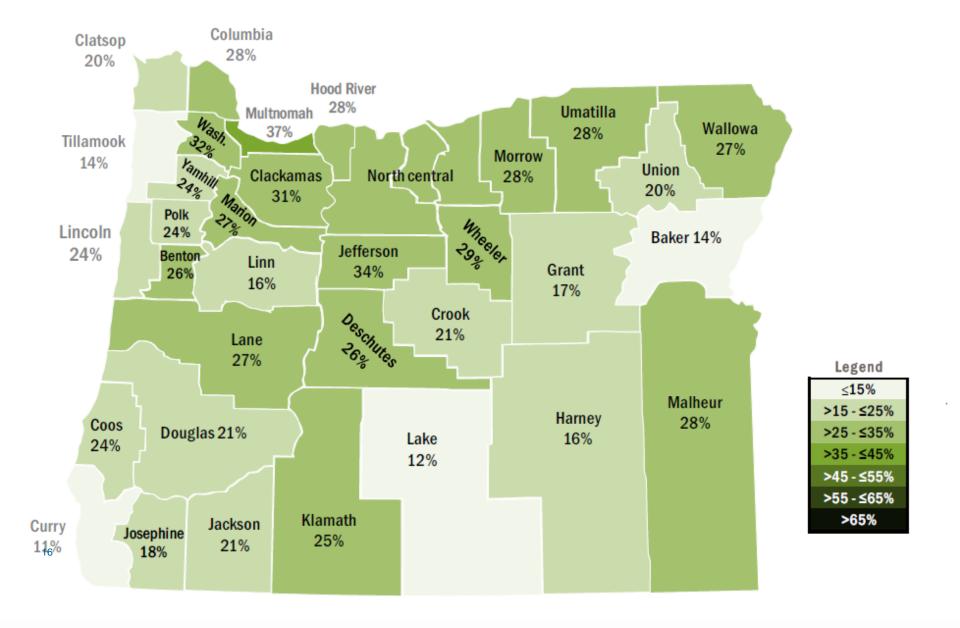
Oregon HPV Vaccination Rates, Ages 13-17

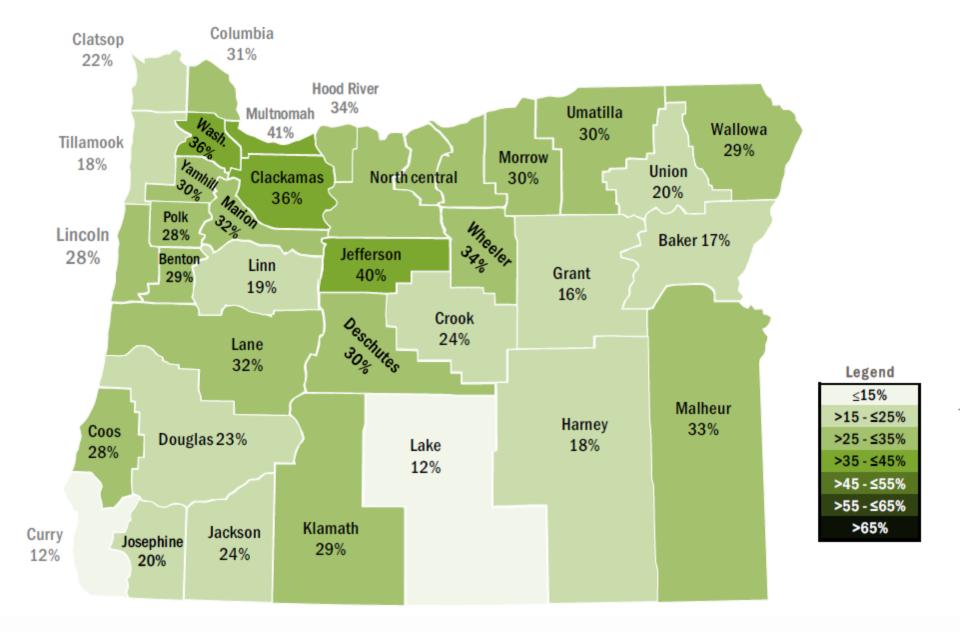


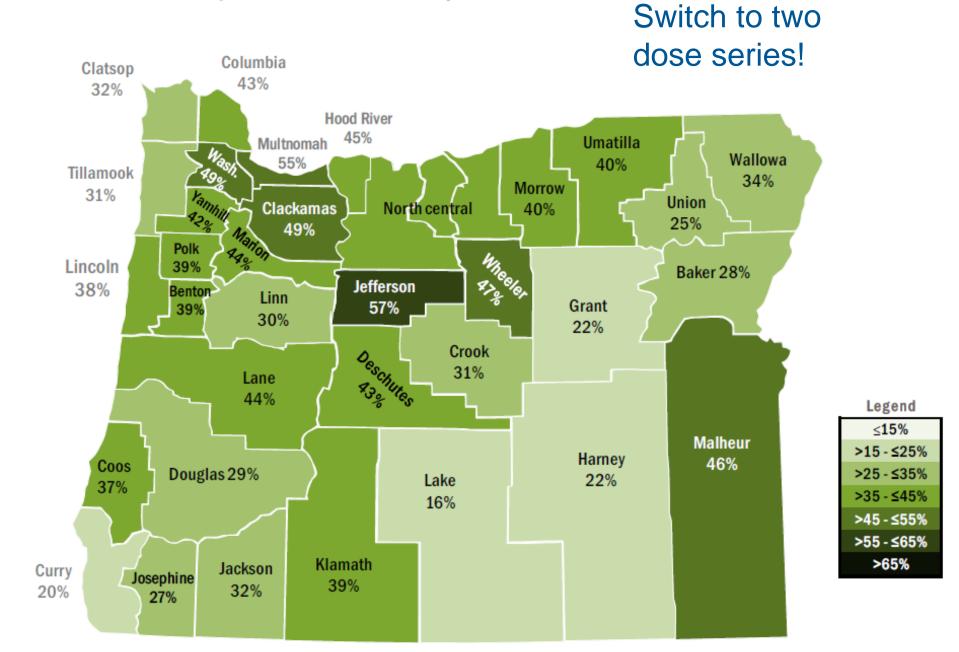
Up-to-date HPV vaccination by gender 13-17

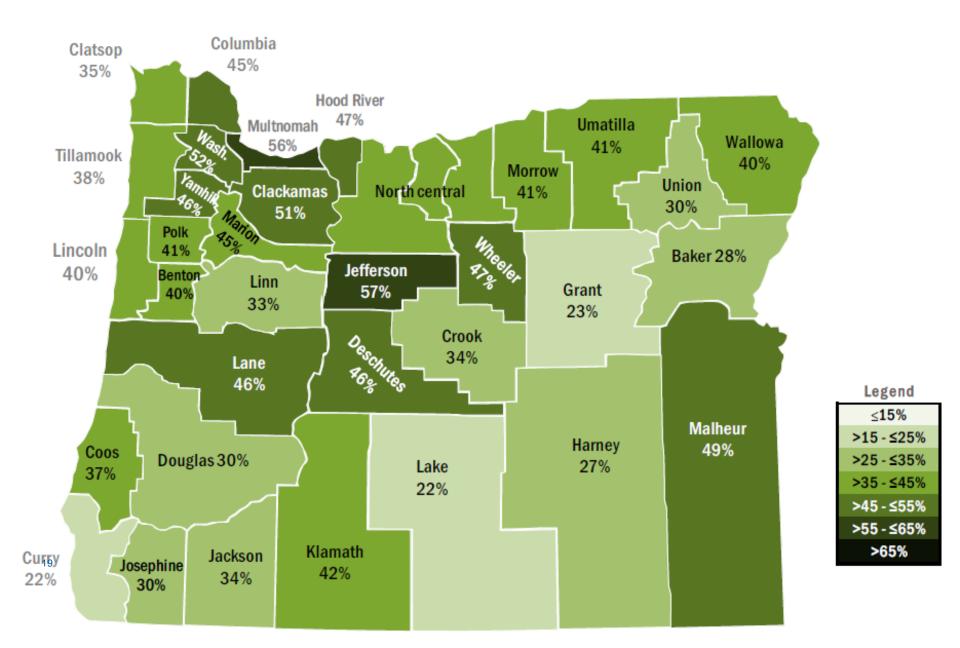


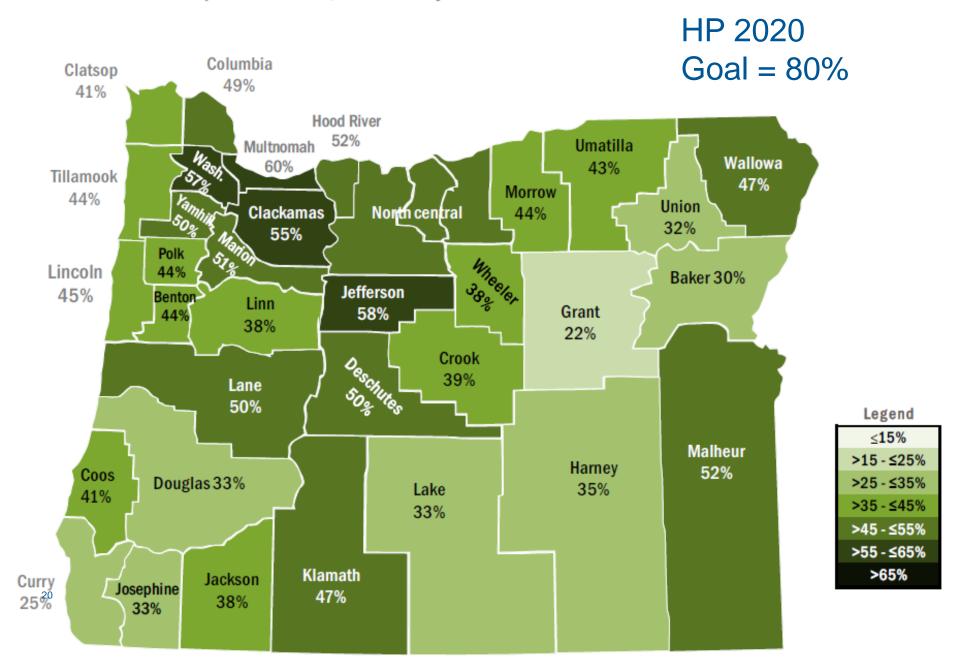


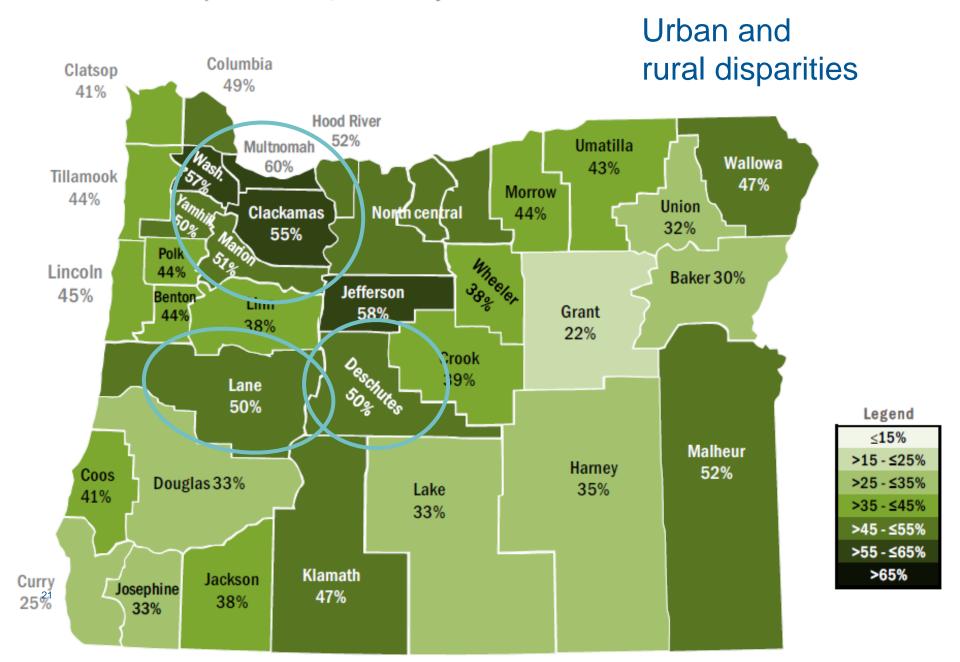


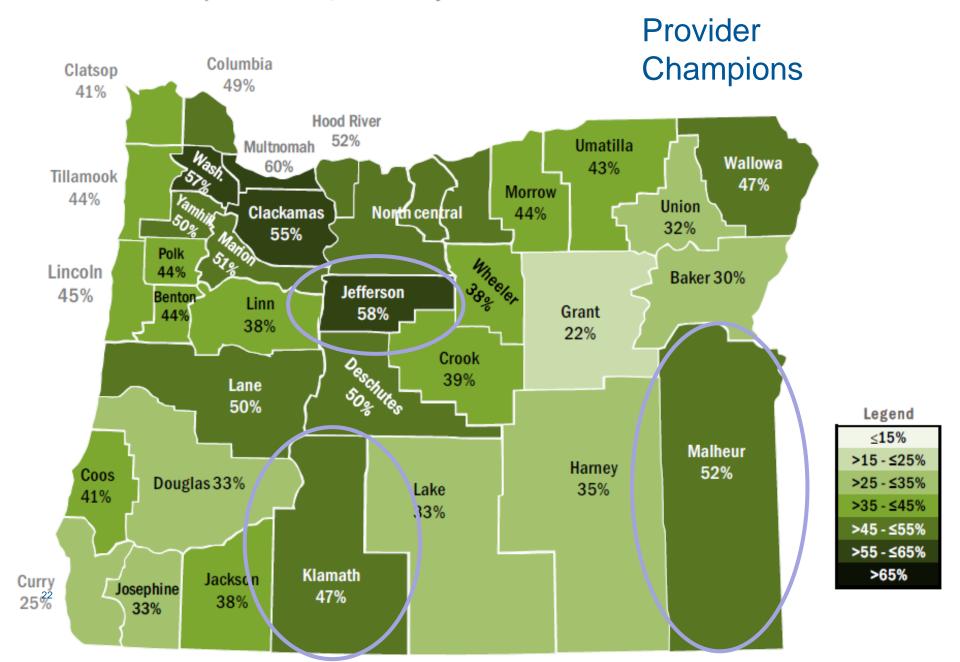




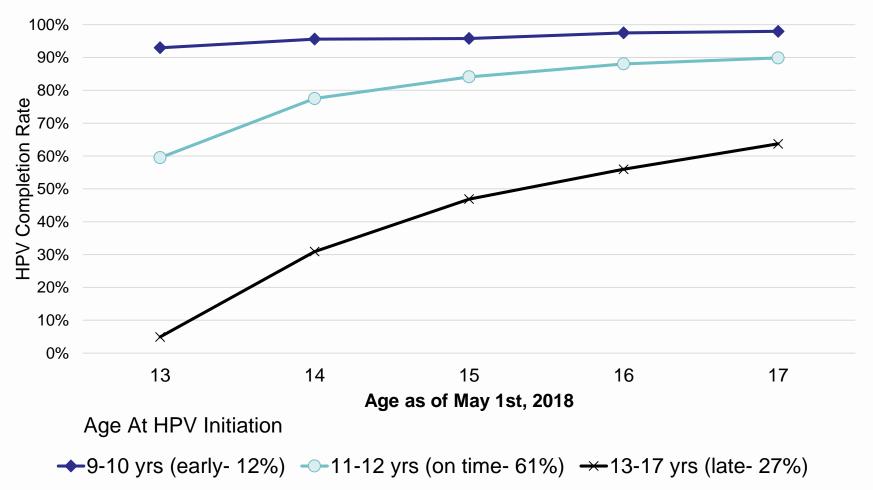






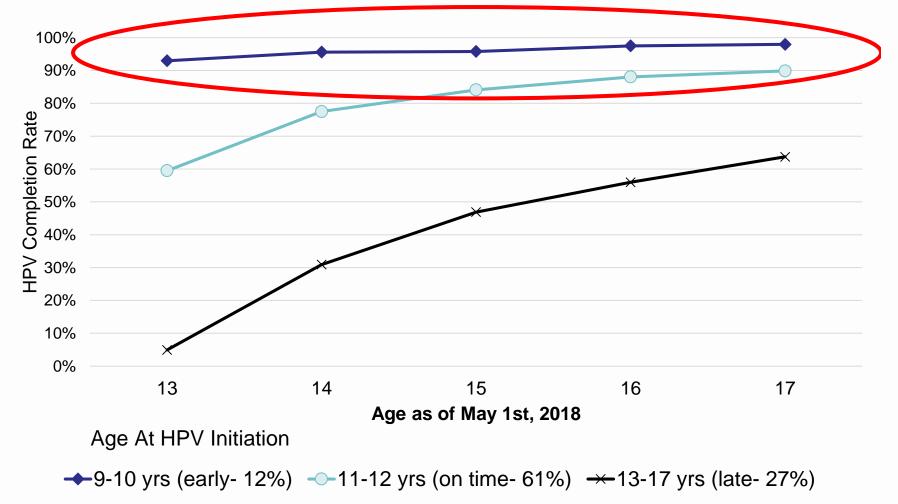


2018 HPV Completion Rates by Age of Initiation, Girls ages 13-17





2018 HPV Completion Rates by Age of Initiation, Girls ages 13-17





What can we see in the data that may indicate why teens aren't getting vaccinated?

- Putting off immunizations
- Getting only school-required immunizations (Tdap)
- Prioritizing other immunizations such as Meningococcal over HPV

76% of teens who didn't finish had the opportunity to complete the series, but received only school required vaccinations or prioritized Meningococcal over HPV



What other factors influence HPV vaccination rates?

- Parental hesitancy
- Provider recommendations
- Lack of immunization opportunities
- Competing priorities at adolescent well care visits
- Lack of demand for the vaccine among adolescents and parents



How can we improve rates?



1. Use data to identify reasons for low immunization rates

- Monitor and share CCO rates, and clinic level rates
- Coordinate with providers and LPHAs to identify root causes and address them
- Work with clinics to monitor data quality issues such as missing data or patients paneled to out of state providers



2. Identify and eliminate access barriers

- Identify areas of need and providers not enrolled in VFC that serve CCO members
- Encourage clinics to use standing orders
- Work with clinics to offer expanded clinic hours and adolescent vaccination events



3. Reduce missed opportunities and recall patients that are behind

- Encourage clinics to vaccinate at acute care visits.
- Work with clinics to engage members in care immediately after enrollment
- Follow-up with patients who haven't initiated HPV on time
- Encourage providers to initiate HPV at age 9



Recommend HPV vaccine at age 9

- Early initiation of HPV vaccination is linked to series completion
- Can simplify discussions related to sexual activity
- Supported by organizations such as CDC and AAP



4. Increase knowledge and awareness of HPV vaccination in clinics and communities

- Partner with organizations to train clinic staff on making a strong recommendation for HPV vaccination
- Provide consistent reminders about adolescent vaccination starting before age 11
- Identify clinic and community needs and make resources available to address them



Make a strong recommendation

- Sandwich HPV between other adolescent vaccines
- Use a presumptive approach
- Make a personal recommendation
- Direct the conversation to cancer prevention
- Emphasize the value of starting early
- Be prepared to answer questions



How can you help train providers?

- Encourage providers to discuss vaccination recommendation at clinical meetings
- Encourage peer coaching
- Vaccine communication courses:
 - https://www.cdc.gov/vaccines/ed/vaccinecommunication/index.html
 - https://www.cdc.gov/vaccines/howirecommend/adol escent-vacc-videos.html#question



5. Increase demand for immunizations

- Identify and convene clinics, LPHAs, and other partners to understand and address barriers, make trainings available at a regional level, and encourage QI participation
- Partner with organizations that serve adolescents to increase access and knowledge



Encourage QI participation





- CDC's national provider-level QI program
- IQIP promotes and supports implementation of provider-level strategies designed to help increase on-time vaccination of children and adolescents.



IQIP key strategies

- Schedule the next immunization visit before the patient leaves the office
- Leverage ALERT IIS and EHR functionality to improve immunization practice
- Give a strong vaccine recommendation
- Initiate HPV at age 9



How can you partner with the IQIP program?

- Encourage clinics to participate
- Assist with recruitment
- Form a local IQIP group
- Contact the VFC Helpdesk at 971-673-4832 or VFC.HELP@DHSOHA.STATE.OR.US



Anona Gund
Transformation Analyst
OHA Transformation Center



Needs assessment calls with CCOs and clinics: Barriers

- Parental hesitancy
- Parents only want school required immunizations
- Weak provider recommendation
- Inconsistent messaging across care team
- Messaging as sexually transmitted infection prevention instead of cancer prevention
- Lack of standardized workflows within and/or across care teams
- Inconsistently using ALERT or EHR for reminder/recall, forecasting shots due, gap lists
- Concerns about data quality



Needs assessment calls with CCOs and clinics: Identified resources

- American Cancer Society resources: <u>www.cancer.org/healthy/hpv-vaccine.html</u>
- Boost Oregon provider guide for counseling on vaccine hesitancy and parent immunization guide: www.boostoregon.org/shop
- Oregon HPV Alliance to increase HPV immunization rates. Contact Heather Hertzel with OHA at heather.hertzel@dhsoha.state.or.us.
- Same Way, Same Day video and app for providers to improve care team messaging on adolescent immunizations
 - Video: www.youtube.com/watch?v=lk-eqEbaXN8
 - App: https://apps.apple.com/us/app/hpv-vaccine-same-way-same-day/id1356847181
- You are the Key provider training for making a strong HPV recommendation along with other recommended immunizations
 - CDC recorded webinar with CMEs: www.cdc.gov/vaccines/ed/vaccine-communication/you-are-key-2018.htm
 - OHA recorded webinar (starts at 14.5 min mark): https://youtu.be/Rv8236gl_Tk (slides here: www.oregon.gov/oha/PH/HEALTHYPEOPLEFAMILIES/REPRODUCTIVESEXUALHEALTH/RES OURCES/Documents/PE-46/Webinars/11.22.19-HPV.pdf)

TRANSFORMATION CENTER Health Policy & Analytics Division



Tentative technical assistance:

- Introduction to the metric webinar (happening right now)
- Updated CCO Guide on Immunization Strategies and Resources
 - Child immunization specific version: <u>www.oregon.gov/oha/HPA/ANALYTICS/CCOMetrics/Childhood-Immunizations-Resource-Guide.pdf</u>
- Patient-centered counseling trainings (fall 2020)
- CCO guidance on supporting local public health to implement IQIP



Technical assistance email list

Sign up to hear about Transformation Center events, resources and learning opportunities: https://www.surveymonkey.com/r/OHATransformation on Center TA



Questions?

