

Performance Measures for Adult Immunization

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NQF-endorsed[®] consensus standards for adult immunizations

Influenza immunization

- 0431 Influenza vaccination among healthcare personnel (CDC)
- 1659 Influenza immunization (hospital) (CMS/OFMQ)*
- 0522 Influenza immunization (home health) (CMS)
- 0041 Influenza immunization (outpatient) (PCPI)
- 0226 Influenza immunization in the ESRD population (KCQA)
- 0039 Flu shots for ages 50 and over (NCQA)
- 0680: Percent of residents who were assessed and appropriately given the seasonal influenza vaccine during the flu season (short stay) (CMS)
- 0681: Percent of residents who were assessed and appropriately given the seasonal influenza vaccine (long stay) (CMS)

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Pneumococcal immunization

- 0043 Pneumonia vaccination status for older adults (NCQA)
- 0617 High-Risk for Pneumococcal disease- Pneumococcal Vaccination (Active Health)
- 1653 Pneumococcal Immunization (PPV 23) (CMS)*
- 0525 Pneumococcal Polysaccharide Vaccine (PPV) Ever Received (CMS)

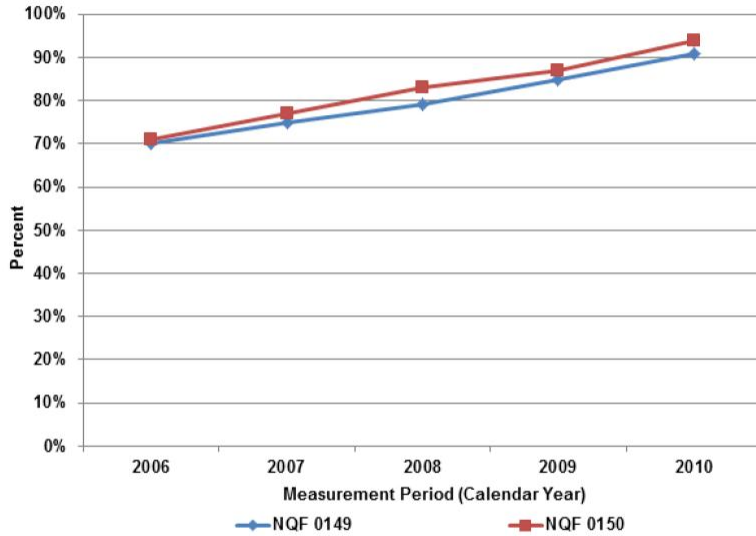
*New measure under review

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Hepatitis immunization

- 0399 Hepatitis C: Hepatitis A vaccination (AMA PCPI)
- 0400 Hepatitis C: Hepatitis B vaccination (AMA PCPI)
- 0412 HIV/AIDS: Hepatitis B vaccination (AMA PCPI)

Figure 2-10: Process Measures (Immunizations) for Pneumonia Patients, 2006 –2010
Hospitals



Measure	2006	2007	2008	2009	2010
NQF 0149 – Influenza Vaccination	70%	75%	79%	85%	91%

Figure 5-2: Vaccination Rates for Chronic-Care Residents - Nursing Homes

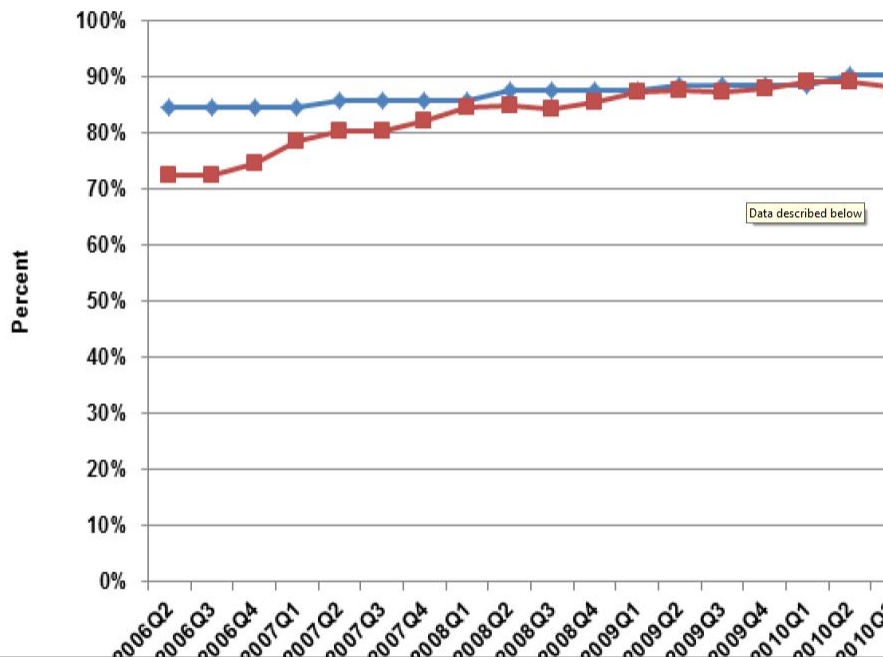
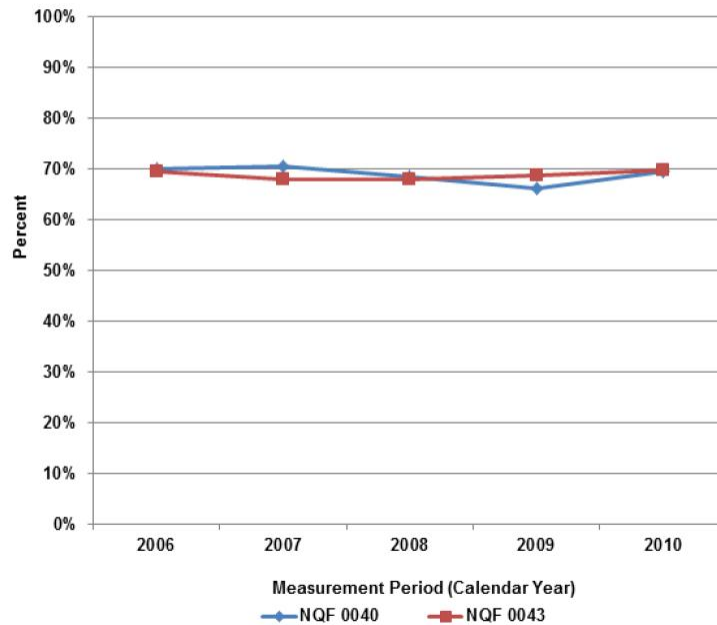


Figure 8-3: Influenza and Pneumonia Vaccination Rates, 2006–2010 - Part C



NQF's prior work on adult immunizations - 2008

- 2008 Immunization project
 - 16 measures for influenza immunization
 - 11 measures for pneumococcal immunization
- Goal: a single global measure that applies to all settings and providers and settings of care
- Various approaches to measurement:
 - Assessment, refusals and vaccination combined in the numerator
 - Vaccination, refusal and contraindications as numerator categories
 - Refusals and contraindications as denominator exclusions
- Harmonization – essential

Comparison of different approaches

	Provider 1 100 patients	Provider 2 100 patients
1. Score includes assessed but not given due to decline or contraindication	82%	82%
2. Numerator categories	Received vaccine – 50% Declined - 27% Contraindications -5%	Received vaccine – 70% Declined – 10% Contraindications – 2%
3. Score using denominator exclusions for decline and contraindications	$50/100-32 = 73.5\%$	$70/100-12 = 79.5\%$

Harmonization and alignment addressed by selecting a single approach for all measures

- Based on current ACIP guidelines and evidence
- A comprehensive measure to include all recommended populations to the extent they are measurable (denominator)
- Numerator categories:
 - Patients who received vaccine
 - Patients offered but declined vaccine
 - Patients with medical contraindications
- Standard time window

NQF Measure Evaluation Criteria

- Importance to measure and report
 - Impact
 - Opportunity for improvement
 - Evidence (relationship to patient outcomes)
- Scientific acceptability of the measure properties
 - Precise specifications, definitions, code lists
 - Testing for reliability and validity
 - Exclusions, risk adjustment, meaningful differences in results
- Usability
 - In use for public reporting and accountability purposes
 - Harmonization
- Feasibility
- Related and competing measures

Issues in immunization measurement

- Adding up setting-based measures does not provide an overall immunization rate
- Patient generated data may be better for population-level measurement (plans, systems, ACOs, geographic)
- Patient reports accepted to meet measure
- Multiple encounters (visits, hospitalization, home health care)
- Level of analysis
- Data sources
- Stratification for disparities

NQF “Call for Measures” for adult immunizations closes July 2, 2012

Infectious Disease Endorsement Maintenance 2012

- Call for new measures for adult immunization (except influenza and pneumococcal)
- Call for Implementation comments
- http://www.qualityforum.org/Projects/im/Infectious_Disease_Endorsement_Maintenance_2012/Infectious_Disease_Consensus_Standards_Endorsement_Maintenance_2012.aspx