National Adult and Influenza Immunization Summit Factsheet:

How can providers utilize immunization activities to obtain points for the MIPS/MACRA Quality Payment Program?

Helping patients stay up-to-date on recommended vaccines is an important part of what providers do to keep their patients healthy and avoid serious illness, disability, and deaths. Providers can put their efforts on immunizations to work for them by using immunization-related activities to earn points toward the Quality Payment Program (www.QPP.CMS.GOV) targets.

SUBHEADING: What is the CMS Quality Payment Program and Points System?

The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) ended the Sustainable Growth Rate formula and created two tracks for providers of patients on Medicare:

- Advanced Alternative Payment Models (APMs)
- Merit-based Incentive Payment System (MIPS)

These tracks are known as the Quality Payment Program. Providers are eligible to participate in MIPS if they bill Medicare more than $30,000 a year and provide care for more than 100 Medicare patients a year. Providers in the MIPS track will receive a performance-based payment adjustment to their Medicare payment by earning points in four different categories – quality, improvement activities, advancing care information, and cost. For three of the categories, immunization activities can be reported for points towards MIPS.

- Immunization quality measures that are eligible for MIPS points include:
  - Influenza vaccine, all ages - percentage of patients aged 6 months and older seen for a visit between October 1 and March 31 who received an influenza immunization OR who reported previous receipt of an influenza immunization
  - Pediatric vaccine series - percentage of children 2 years of age who had completed the recommended immunizations by their second birthday
  - Adolescent vaccine series - percentage of adolescents 13 years of age who had the recommended immunizations by their 13th birthday
  - Pneumococcal vaccine, adults - percentage of patients 65 years of age and older who have ever received a pneumococcal vaccine.

- Improvement activities
  - Participation in Maintenance of Certification (MOC) part 4 activities for improving professional practice, including participation in a local, regional or national outcomes registry or quality assessment programs, can count towards MIPS improvement activities requirements.
  - Vaccine-related MOC activities are available from some professional societies including:
    - MedConcert™ and American College of Physicians
      - Platform for patient safety, quality, and performance improvement. MOC credit available
    - ACP’s Quality Connect Adult Immunization and Quality Improvement for Residents training program teaches residents about the science of adult immunizations and provides evidence-based strategies for increasing vaccination rates.
      - Residency programs can use the program in ambulatory and inpatient settings to meet ACGME requirements for quality improvement.
- The 4 Pillars™ Immunization Toolkit and University of Pittsburgh
  - Program helps providers implement systems to improve vaccination including standing orders
  - American Board of Family Medicine approved for MOC
- PROTECT™ and University of Nebraska
  - Includes outcomes measurement platforms and strategies to increase immunization rates. CE credit is available
- American Board of Obstetrics and Gynecology
  - Obstetrics and gynecology immunization MOC part 4 modules are available at www.abog.org.

- Advancing care information
  - Clinicians participating in MIPS can earn up to 10% of their advancing care information bonus score through optional immunization registry (aka immunization information systems = IIS) reporting.
  - The Advancing Care Information (ACI) score is the combined total of the following three scores: Required base score (50%), Performance score (90%), and Bonus score (15%). In the ACI score (weighted at 25% of the total score), MIPS eligible clinicians may earn a maximum score of up to 155%, but any score above 100% will be capped at 100%; this structure was created to allow clinicians to focus on measures that are the most relevant to them and their practices.\(^1\)
  - MIPS eligible clinicians must attest “yes” to being in active engagement with a public health agency to submit immunization data and receive immunization forecasts and histories from the IIS to add a 10% bonus to their overall performance score. Active engagement means that the clinician is in the process of moving towards sending “production data” to a public health agency, or is sending production data to a public health agency.
    - Note that the immunization measure for registry reporting is yes/no, as opposed to numerator/denominator, so a “yes” = 10%, while a “no” = 0% for this measure.

More information on the MACRA Quality Payment Program, MIPS, and Advanced APMs can be found at www.qpp.cms.gov. Additional resources for providers eligible for MIPS and Advanced APMs may be provided by professional physician, nurse, and physician assistant associations.

\(^1\) [https://qpp.cms.gov/docs/QPP_ACI_Fact_Sheet.pdf](https://qpp.cms.gov/docs/QPP_ACI_Fact_Sheet.pdf)