Adult Immunization Measures Update: Developing, Incorporating, and Tying Measures

18 May 2018
National Adult and Influenza Immunization Summit Annual Meeting

On behalf of the Quality Performance Measures (QPM) Working Group

Angela K. Shen, ScD, MPH
US Department of Health and Human Services
angela.shen@hhs.gov
202.503.6325

QPM WG: Represented Organizations

Federal Agencies
- Centers for Disease Control & Prevention (CDC)
- Centers for Medicare and Medicaid Services (CMS)
- Department of Defense (DoD)
- Department of Veterans Affairs (VA)
- Health Resources and Services Administration (HRSA)
- Indian Health Service (IHS)*
- National Vaccine Program Office (NVPO)*

Professional Associations/Networks
- Adult Vaccine Access Coalition (AVAC)
- Alliant Quality
- American Academy of Family Physicians (AAFP)
- American Association of Nurse Practitioners (AANP)
- American College of Nurse Midwives (ACNM)
- American College of Obstetricians and Gynecologists (ACOG)*
- American College of Physicians (ACP)
- American Immunization Registry Association (AIRA)
- Avalere Health | An Inovalon Company
- Delmarva Foundation
- Gerontological Society of America (GSA)
- HealthInsight Oregon
- Heartland Kidney Network
- HQI Solutions
- Immunization Action Coalition (IAC)
- Infectious Diseases Society of America (IDSA)
- The Joint Commission*
- Kidney Care Quality Alliance (KCQA)
- March of Dimes
- Pharmacy Quality Alliance (PQA)*
- Quality Innovation Network Quality Improvement Organization (QIN-QIO) and Quality Innovation Network National Coordinating Center (QIN-NCC)
- Renal Physicians Association
- Telligen, the Quality Improvement Organization for Illinois
- United Healthcare
- Johns Hopkins Bloomberg School of Public Health (JHSPH)
- University of Arkansas for Medical Science (UAMS)
- University of California, San Diego (UCSD)
- University of Kansas Medical Center (UKMC)
- University of Notre Dame

Local/State Health Departments
- California Department of Public Health
- District of Columbia Department of Health
- Louisiana Department of Health
- Michigan Department of Health and Human Services
- Minnesota Department of Health
- New York City Department of Health and Mental Hygiene
- New York State Department of Health
- Northwest Portland Area Indian Health Board
- Virginia Department of Health

Corporations
- GlaxoSmithKline
- Merck & co
- Pfizer
- Publix
- Rite Aid
- Sanofi Pasteur
- Seqirus

*Co-Chairs
**Goal:** High value health care

Measurement, transparency & accountability move health care toward greater value

- Healthy/low risk
- At risk
- High risk
- Early symptoms
- Active disease

20% OF PEOPLE generate 80% OF COSTS

Health Care Spending

---

The Volume-to-Value Shift Is Creating Opportunities to Incentivize Vaccination

<table>
<thead>
<tr>
<th>Volume</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>A key component of defining the value of health products and services</td>
<td></td>
</tr>
<tr>
<td>Reducing costs is well understood, but the role of quality continues to evolve</td>
<td></td>
</tr>
</tbody>
</table>

This shift is driving an increased focus on preventive services, such as vaccines, which have been shown to improve health outcomes and reduce healthcare spending and utilization over the long-term

Slide: Courtesy of Avalere
QPM WG Strategy

• **Action 1: Identifying Gaps in Adult Immunization Performance Measurement**

• **Action 2: Pilot Testing in a Federal Health Care System: The Indian Health Service Experience**

• **Action 3: Invest in the Testing and Development of Composite Immunization Measures for Adults**

• **Action 4: Incentivize Vaccination through Adoption of Evidence-Based Measures**
### NQF Priorities for Measure Development

1. HPV catch-up for ages 19-26
2. TDaP/Pertussis vaccine for ages 19-59
3. Zoster vaccine for ages 60-64
4. Zoster vaccine for ages 65+
5. Composite with other preventative services
6. Composite—TDaP and flu for pregnant women
7. Composite—Influenza, pneumococcal, Hepatitis B in diabetes
8. Composite—Influenza, pneumococcal, Hepatitis B in ESRD
9. Composite—Hep A and B in chronic liver disease
10. Composite of all ACIP vaccines for healthcare workers


---

### QPM WG Strategy

- **Action 1:** Identifying Gaps in Adult Immunization Performance Measurement
- **Action 2:** Pilot Testing in a Federal Health Care System: The Indian Health Service Experience
- **Action 3:** Invest in the Testing and Development of Composite Immunization Measures for Adults
- **Action 4:** Incentivize Vaccination through Adoption of Evidence-Based Measures
Figure 2: Framework for Driving Quality Improvement in Health Systems to Improve Implementation of Adult Vaccination Recommendations

IHS Vaccine Coverage for Annual Influenza Vaccination and For Receipt of a 23-Valent Polysaccharide Pneumococcal Vaccination (PPSV23) Among Adults 65 Years and Older, 2003–2015
QPM WG Strategy

• **Action 1**: Identifying Gaps in Adult Immunization Performance Measurement
• **Action 2**: Pilot Testing in a Federal Health Care System: The Indian Health Service Experience
• **Action 3**: Invest in the Testing and Development of Composite Immunization Measures for Adults
• **Action 4**: Incentivize Vaccination through Adoption of Evidence-Based Measures

*Immunization and Quality Stakeholders Can Use Quality as a Mechanism to Drive Immunization Uptake*

**Improving Public Health Through Quality**

Quality measurement, particularly when tied to reporting and payment, serves as a mechanism that can be leveraged to incentivize plans, providers, health systems, and other stakeholders to improve immunization rates.

Slide: Courtesy of Avalere
## Major Quality Activities

<table>
<thead>
<tr>
<th>Evidence Development</th>
<th>Guideline Development</th>
<th>Measure Development*</th>
<th>Measure Endorsement</th>
<th>Measure Implementation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop evidence base for effective treatment</td>
<td>Develop guidelines for practitioners based on evidence</td>
<td>Develop performance measures based on guidelines</td>
<td>Ensure measures are evidence-based, scientifically sound, feasible</td>
<td>Use measures to improve quality</td>
</tr>
</tbody>
</table>

**Example orgs:**

- Researchers
- Advisory Committee on Immunization Practices & others
- National Committee for Quality Assurance, Specialty societies
- National Quality Forum
- Centers for Medicare & Medicaid Services, Clinical Registries, states & others

* Quality measures can be effective tools to compare and monitor health plan performance
* Need to balance desirable attributes of importance, scientific acceptability & feasibility
* Leveraging health information technology is key

---

## About NCQA

**It all starts with HEDIS®**

Health care’s most-used tool for improving performance

Asks how often insurers provide evidence-based care to support more than 70 aspects of health

Slide: Courtesy of NCQA
Status Update:
Developing Effective Quality Measures - 1

<table>
<thead>
<tr>
<th>Measure Subgroup</th>
<th>Vaccines included</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prenatal Immunization*</td>
<td>Tdap and influenza</td>
</tr>
<tr>
<td>Adult Immunization*</td>
<td>Tdap, pneumococcal, influenza, and zoster</td>
</tr>
<tr>
<td>End-Stage Renal Disease</td>
<td>Influenza, pneumococcal, and Hepatitis B</td>
</tr>
</tbody>
</table>

*National Committee for Quality Assurance (NCQA) tested, developed and assessed these measures for the 2019 Healthcare Effectiveness Data and Information Set (HEDIS) using the Electronic Clinical Data Systems (ECDS) domain
  - HEDIS is used to assess the quality of health plans
  - ECDS is a new reporting method that leverages the use of electronic clinical data
  - Electronic clinical data includes administrative claims, electronic medical records, case management systems and registries


Status Update:
Developing Effective Quality Measures - 2

- End-Stage Renal Disease Subgroup: Vaccines of interest - influenza, pneumococcal, and Hepatitis B in Medicare ESRD Program – last Subgroup meeting in Sept 2017
- NAIIS Letter of Recommendations sent to CMS (April 2018)
- Recommendations:
  1) Composite Measures
  2) Measure Harmonization
  3) Interoperability & Data Source
  4) Data Reporting

NAIIS letter transmitted to CMS April 19, 2018 - 20 signatories
https://www.izsummitpartners.org/naiis-workgroups/quality-and-performance-measures/ (copies on your table)
QPM WG Strategy

- **Action 1:** Identifying Gaps in Adult Immunization Performance Measurement
- **Action 2:** Pilot Testing in a Federal Health Care System: The Indian Health Service Experience
- **Action 3:** Invest in the Testing and Development of Composite Immunization Measures for Adults
- **Action 4:** Incentivize Vaccination through Adoption of Evidence-Based Measures

Quality Measures Are Foundational to Improving Healthcare Quality

**The Quality Measure Landscape is Evolving**

Measure development has rapidly expanded in the increasingly quality-driven and value-based environment. The growing number of quality reporting and payment programs is further driving measure development, refinement, and improvement activities.

- **7000+** Unique Quality Measures in Existence\(^1\)
- **1000+** Measures in Use Across CMS Programs\(^2\)*
- **569** NQF-Endorsed Measures\(^3\)

---

CMS: Centers for Medicare & Medicaid Services; NQF: National Quality Forum

*This number includes both currently implemented measures and measures that have been finalized for future implementation via rulemaking. Measures appearing in multiple programs are counted separately each time they appear in a program.

Slide: Courtesy of Avalere
Adult Immunization Quality Measure Use Remains Inconsistent Across Programs

<table>
<thead>
<tr>
<th>Program or Measure Set</th>
<th>Flu</th>
<th>Pneumo</th>
<th>Zoster</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019 NCQA HEDIS Measure Set*</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>FY 2019 Hospital Inpatient Quality Reporting Program (Medicare)*</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>FY 2019 Hospital Value-Based Purchasing Program (Medicare)*</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY 2019 Long-Term Care Hospital Quality Reporting Programs (Medicare)*</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY 2019 Hospital-Acquired Condition Reduction Program (Medicare)*</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY 2019 Hospital Readmissions Reduction Program (Medicare)*</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY 2019 Skilled Nursing Facility Quality Reporting Program (Medicare)*</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY 2019 Inpatient Rehabilitation Facility Quality Reporting Program (Medicare)*</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY 2019 Star Ratings Program (Medicare Advantage)</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY 2018 Hospital Outpatient Quality Reporting Program (Medicare)</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY 2018 Ambulatory Surgical Center Quality Reporting Program (Medicare)</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY 2018 End-Stage Renal Disease Quality Incentive Program (Medicare)</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>FY 2018 Home Health Value-Based Purchasing Program (Medicare)</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>FY 2018 Home Health Quality Reporting Program (Medicare)</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>FY 2018 Quality Payment Program – MIPS Measure Set (Medicare)</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>FY 2018 Medicare Shared Savings Program / QPP AAPM (Medicare)</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>2017 Adult Core Measure Sets (Medicaid)</td>
<td>✓</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Proposed
† Only influenza measure for healthcare personnel; no measure for patients
‡ Proposed through an adult immunization composite measure

Stakeholder Efforts Will Continue to Transform the Adult Immunization Quality Landscape

**Challenge:** How can immunization and quality stakeholders engage?

- **Developing Effective Quality Measures**
  - Fill immunization measure gaps
  - Refine and improve existing immunization measures

- **Incorporating Quality Measures into Programs**
  - Monitor changes to new and existing programs and payment models
  - Advocate for inclusion of immunization measures in programs where needed

- **Tying Quality Measurement to Payment**
  - Educate immunization stakeholders on the impact of new value-based payment structures
  - Leverage existing payment mechanisms for immunizations, where applicable

Slide: Courtesy of Avalere
Incorporating Quality Measures

- Identified potential programs for measure adoption and implementation
- Submission as candidate measures for the following programs’ considerations:
  - Medicare: health plan, clinician, facility levels
    - E.g., Merit-Based Incentive Payment System (MIPS), Medicare Shared Savings Program, and Medicare Advantage (MA) – Star Ratings
  - Medicaid: adult core set, child core set
  - NQF: Endorsement

Discussion Questions

- Adoption – other Medicare programs?
- Role of partners?
- What happens after these measures land into the Medicaid core sets?
- What are the tasks or the direction and future of this working group?
Many thanks to many partners

Casey Pauly, IAC
Alice Tsai, NVPO
La Dora Woods, CDC

Amy Groom, IHS
Lauren Lemieux, ACOG
Sharon Sprenger, Joint Commission
Sam Stolpe, PQA

Carolyn Bridges, CDC
Diane Leach, IHS
LJ Tan, IAC
Deborah Wexler, IAC
Tom Weiser, IHS

2018 NIC session presenters on quality measures:
Avalere, NCQA, Indian Health Service
AETNA, Council of Medical Specialty Societies, Discern