

# **The Specialist's Role in Immunization: Driving Immunization for High-Risk Patients with Chronic Illness**

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# CDC Standards for Adult Immunization Practice (SAIP)

## Immunizing Adult Patients: Standards for Practice

Your patients trust you to give them the best advice on how to protect their health. Vaccine-preventable diseases can result in serious illness, hospitalization, and even death. Make adult vaccination a standard of care in your practice.

### Your patients have probably not received all the vaccines they need.

Even though most insurance plans cover the cost of recommended vaccines, adult vaccination rates in the U.S. are extremely low. Each year, tens of thousands of adults needlessly suffer, are hospitalized, and even die as a result of diseases that could be prevented by vaccines.

### Your patients may not even realize that they need vaccines.

Many adults don't know which vaccines are recommended for them throughout their lives. Many also report not receiving vaccine recommendations from their healthcare professional.

### You can make a difference.

Clinicians are the most valued and trusted source of health information for adults. Research shows that most adults believe vaccines are important and that a recommendation from their healthcare professional is a key predictor of patients getting needed vaccines.

### Make Immunization a Standard of Patient Care In Your Practice:

#### 1. **ASSESS** the immunization status of all your patients at every clinical encounter.

- Stay informed about the latest CDC recommendations for immunization of adults.
- Implement protocols in your office to ensure that patients' vaccine needs are routinely reviewed and patients get reminders about vaccines they need.

#### 2. Strongly **RECOMMEND** vaccines that your patients need.

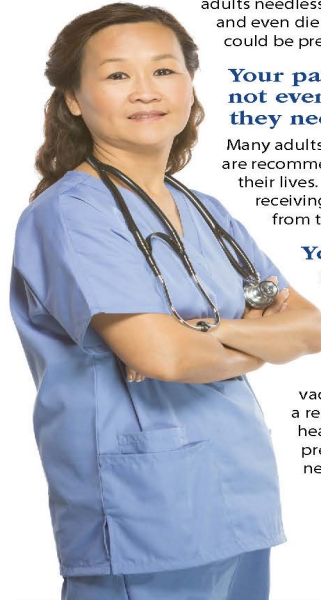
- Address patient questions and concerns in clear and understandable language.
- Highlight your positive experiences with vaccination (personal or in your practice).

#### 3. **ADMINISTER** needed vaccines or **REFER** your patients to a vaccination provider.

- For vaccines that you stock, make vaccination services as convenient as possible for your patients.
- For vaccines that you don't stock, refer patients to providers in the area that offer vaccination services.

#### 4. **DOCUMENT** vaccines received by your patients.

- Participate in your state's immunization registry to help your office, your patients, and your patients' other providers know which vaccines your patients have had.
- Follow up to confirm that patients received recommended vaccines that you referred them to get from other immunization providers.



Standards for Adult Immunization Practice emphasize the role of ALL healthcare professionals—whether they provide immunization services or not—in ensuring that adult patients are fully immunized. These standards are published by the National Vaccine Advisory Committee and supported by the Centers for Disease Control and Prevention as well as a number of national medical associations.

**DON'T WAIT.  
VACCINATE!**



U.S. Department of  
Health and Human Services  
Centers for Disease  
Control and Prevention

# Specialty Societies Advancing Immunization (SSAI) Project Overview

- Five-year cooperative agreement between CDC and CMSS to promote adult immunization for high-risk patients in specialty settings
- Seven specialty society partners are focused on patients with COPD, asthma, diabetes, heart disease, cancer, and chronic kidney disease, as well as older adults, and occupational health settings.



# SSAAI Advances Adult Immunization Practice in Specialty Settings by:

- Engaging health systems to test interventions in specialty settings to improve practices related to vaccine assessment, recommendation, administration, referral and documentation.
- Aligning participating specialty society educational offerings, policies and guidelines to CDC's SAIP.



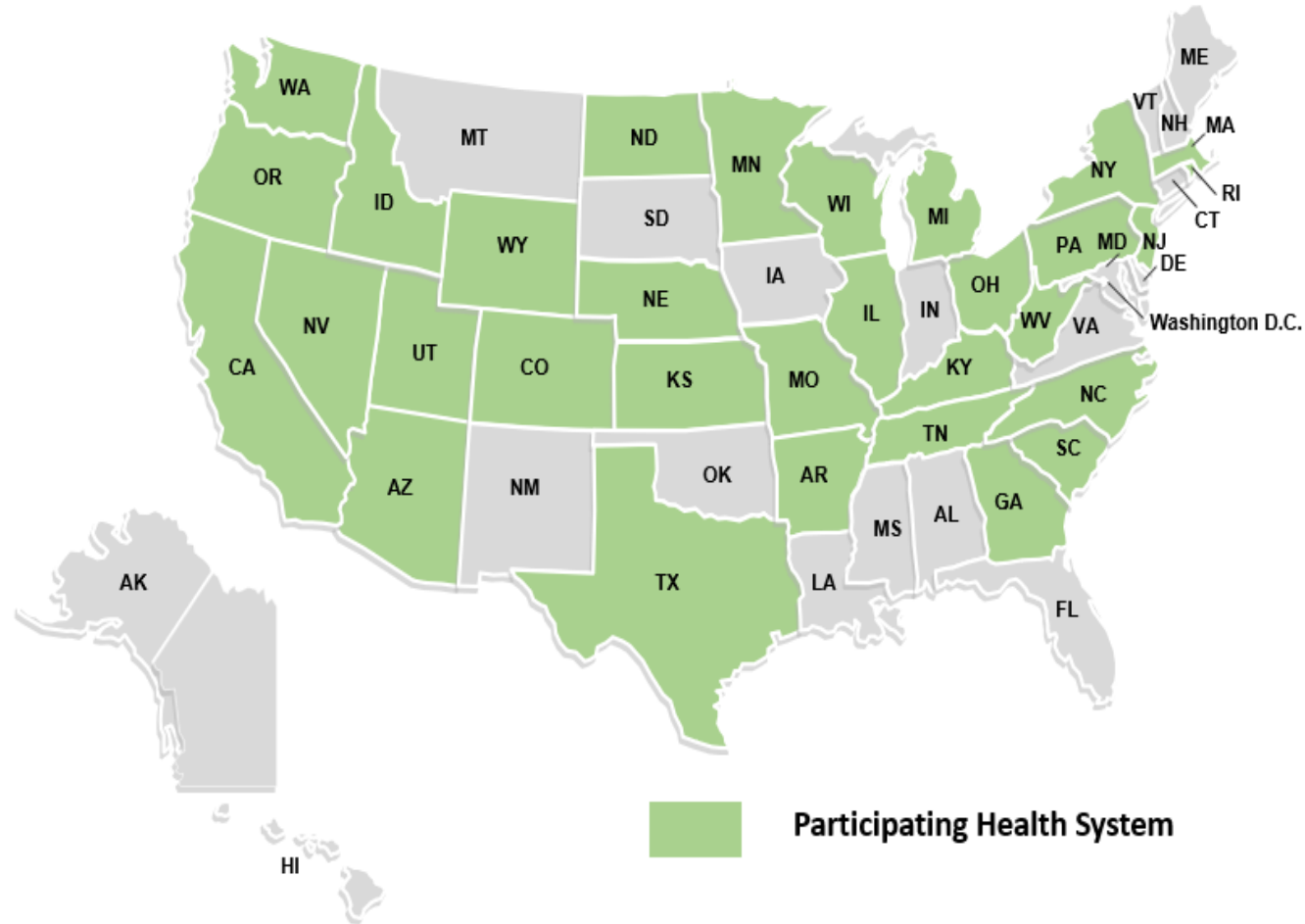
# 45 participating health systems

- 7 specialty society partners recruited 45 health systems to participate in the program.
- Criteria for health system recruitment included capacity to collect and report data on immunization, focus on high-risk patient populations, diversity in provider mix.
- Health system recruitment ended in September 2023.



# 81 Participating Practice Sites

## Geographic Distribution of Participating Health Systems



# Participating Health Systems: Testing What Works

- Health systems are implementing quality improvement (QI) interventions to test strategies to improve adoption of SAIP in practice.
- Interventions are currently focused on Covid-19 and Influenza. Will expand to other vaccines in 2024.
- Interventions tend to fall into one of 10 categories.
- Most health systems are currently in 1st or 2nd QI Cycle.
- Health systems will report process and outcomes data into central Data Platform.

## Categories of QI Interventions

- ❑ Clinical workflow
- ❑ Vaccine assessment
- ❑ Patient education
- ❑ Administrative staff education
- ❑ Clinician education
- ❑ Vaccine hesitancy
- ❑ IIS data exchange
- ❑ Patient referrals
- ❑ Vaccine recommendations
- ❑ EHR modifications



# SSAI Data Platform Aggregates Health System Process and Outcomes Data

## COVID-19 and Influenza Measures

- ❑ Vaccine eligibility assessed
- ❑ Vaccine recommendation
- ❑ Vaccination referrals
- ❑ Vaccination administered onsite/offsite
- ❑ Vaccination refusal
- ❑ Vaccination documentation
- ❑ COVID-19 vaccine counts
- ❑ COVID-19 up-to-date
- ❑ Influenza vaccination during current flu season
- ❑ High-dose influenza vaccination during current flu season

## Additional Measures in 2024

- ❑ Pneumococcal vaccination up-to-date
- ❑ RSV vaccination up-to-date
- ❑ Shingles vaccination up-to-date
- ❑ Shingles partial vaccination
- ❑ Tetanus vaccination up-to-date
- ❑ Hepatitis-B vaccination up-to-date



# Health System QI Interventions Will Generate On-the-Ground Learning about How to Adopt SAIP in Specialty Settings



# Examples of Current QI Interventions



Validating vaccine data in EHR and cross-walking with state IIS.

Identifying barriers to documenting vaccine status accurately in EHR.

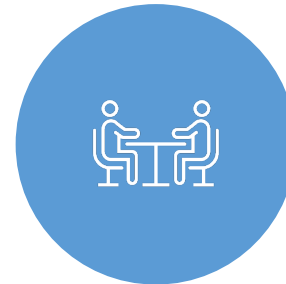


Training clinicians on techniques to respectfully engage with patients with vaccine hesitancy.

Developing patient educational tools that address vaccine hesitancy.



Adding immunization assessment and documentation to standard rooming protocols.



Collaborating with State Medicaid agency in identifying patients with lower vaccination rates and measuring impact of interventions.

# Insights from Specialty Practices' Experience

## Specialists' Role in Adult Immunization

- Understand value of vaccination for their patient populations
- Generally view vaccination as part of specialists' role
- Some variation on whether perceive role as limited to education/referral or includes administration of vaccines

## Barriers to Addressing Adult Immunization in Specialty Settings

- Time constraints
- Vaccine hesitancy
- Lack of standardized processes and protocols
- Reimbursement
- Logistics related to administering vaccine (e.g., storing vaccines)

# QI Interventions Informing Society Educational Offerings

- Participating societies have developed new and updated resources to align to the SAIP.
- Educational materials reflect what we are learning from participating practices' experience in terms of key challenges.
- Educational resources are available in array of formats for clinicians and patients.





# CMSS Developing Resources to Support All Members in Advancing Adult Immunization

- CMSS is developing resources that are relevant across specialties to support physicians and their health care teams in implementing the SAIP.
- CMSS is focused on resources that address reported barriers to adopting the SAIP.
- CMSS and society resources will be available to all CMSS members through The CMSS Learning Center, a new Learning Management System that was launched in December 2023.

# Featured Resource:

## Vaccine Coding Toolkit

- At-a-glance resource for physicians and their health care team members about coding for vaccine counseling and vaccine administration.
- Covers coding for vaccination-related services for adult patients with chronic conditions during (a) a visit to address conditions; (b) as the purpose of the visit; and (c) as part of principal care management.
- Includes tips for coding success and case studies.
- Adapted from a resource developed by the American Association of Clinical Endocrinology.
- Release in February 2024.

### CODING FOR VACCINATIONS: A SPECIALIST'S TIP SHEET

#### CODING FOR VACCINE COUNSELING

When the physician, physician assistant (PA), or nurse practitioner (NP) discusses the need for a recommended vaccine(s) with the patient during an office visit, the time spent in counseling may be included in the *total time spent by the physician/NP/PA* on the date of service. Code selection may be based on the higher of total time or medical decision-making. ICD-10 code **Z71.85** is appropriate for an encounter for immunization safety counseling in addition to codes for diabetes and other problems addressed at the visit.

Office E/M Total Physician/PA/NP Time on the Date of Encounter with <b>New Patient</b>			
E&M Code	# of total min	MDM	ICD-10
99202	15-29	Straightforward	Codes for problems addressed and Z71.85
99203	30-44	Low	
99204	45-59	Moderate	
99205	60-74	High	

Office E/M Total Physician/PA/NP Time on the Date of Encounter with <b>Established Patient</b>			
E&M Code	# of total min	MDM	ICD-10
99212	10-19	Straightforward	Codes for problems addressed and Z71.85
99213	20-29	Low	
99214	30-39	Moderate	
99215	40-54	High	

- Consider code selection based on **total time** when vaccine counseling **increases** the total time of an office visit or consultation. Include only time spent by the physician, physician assistant, or nurse practitioner.
- **Always** document points of discussion, recommendation, referral, *and total time on the date of the visit*.
- Codes for other types of visits (e.g., **Preventive Medicine Counseling and Principal Care Management**) may be available to some practices.

#### VACCINE AND ADMINISTRATION CODES

Vaccine Codes	Administration Codes	Diagnosis Codes
<b>Bivalent COVID-19:</b> + 91312 + 91313	91312 - 1st dose 0121A, <b>Add</b> dose 0124A; 91313: 0134A	Link Z23 (encounter for immunization) to each vaccine product and administration code.
<b>Influenza:</b> 90662, 90674, 90682, 90686, 90688, 90756	All others - 90471 - 1st injection 90472 - each <b>add</b> injection	
<b>Hepatitis B:</b> 90746, 90759		
<b>Pneumococcal:</b> 90671, 90732, 90677		
<b>RZV (Zoster):</b> 90736, 90750		
<b>Tdap:</b> 90715		

Append **modifier 25** (significant, separately identifiable E/M service) to E/M code for service on the same date. Repeat diagnosis code **Z23** (encounter for immunization) for each service.

This resource is provided by the grant Specialty Societies Advancing Adult Immunizations (SSAAI), funded by the CDC and coordinated through the Council on Medical Specialty Societies. This document is an adaptation of an original work developed by the American Association of Clinical Endocrinology (AACE) under the SSAAI Grant.

This coding guidance has been provided for informational purposes only, is based on the information available as of June 2023 and is provided without warranty as to accuracy or completeness. When using this guidance one should make independent judgments and consult with their own coding staff or consultants to ensure they are following the applicable coding rules. Codes and guidelines change and users may not adhere to all guidelines. Please verify information in your current coding references for CPT and ICD-10 and check for payer-specific policies that may impact coding and billing. Coding examples are provided solely for illustration and do not constitute legal or medical practice advice.

# Featured Resource: Conversational Receptiveness e-Learning Modules

- New resource to support clinicians in talking with patients who have vaccine hesitancy (but applicable to any difficult conversations).
- In development by Dr. Julia Minson, Harvard University based on years of research on conversational receptiveness and the psychology of disagreement.
- Series of 10-15 minute learning modules, featuring case studies and knowledge checks.
- Targeted release in March-April 2024.



# Featured Resource:

## EHR Navigation Tools

- Product of a CMSS-led Data Mapping Workgroup of 11 participating health systems that is developing solutions for leveraging EHRs for assessment and documentation of immunization status.
- Workgroup includes health systems using multiple EHR vendors; exploring vendor-specific solutions
- Workgroup output will include:
  - Practical insights - clinician user experience and organizational approach
  - Technical insights - data source identification, detailed data queries

### Participating Health System - EHR Vendors

- ☐ AllScripts
- ☐ Athena Health
- ☐ Cerner
- ☐ Darwin
- ☐ eClinical Works
- ☐ Epic
- ☐ Gaia
- ☐ Medgate
- ☐ Practice Fusion
- ☐ Systoc
- ☐ Visonex



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**BETTER TOGETHER**



# Comments/Questions

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