

Childhood Immunization Status (Combo 2)

Measure Basic Information

Name and date of specifications used: HEDIS® 2015 Technical Specifications for Health Plans (Volume 2)

URL of Specifications:

n/a

Measure Type:

HEDIS ☒ PQI ☐ Survey ☐ Other ☐ Specify:

Measure Utility:

CCO Incentive ☐ Core Performance ☐ CMS Adult Set ☐ CHIPRA Set ☒ State Performance ☒
Other ☐ Specify:

Data Source:

MMIS/DSSURS and Public Health Division Immunization Program Registry (ALERT)

Measurement Period: January 1 – December 31, 2015

2013 Benchmark: 82%, 2012 National Medicaid 75th percentile (Combo 2)

2014 Benchmark: 82% 2013 National Medicaid 75th percentile (Combo 2)

2015 Benchmark: 82% 2014 National Medicaid 75th percentile (Combo 2)

Measure changes in specifications from 2014 to 2015:

OHA is using HEDIS 2015 specifications for all 2015 measurements.

Changes from HEDIS® 2013 to HEDIS® 2015 include:

- Numerator services are no longer be identified through an inpatient procedure: HEDIS® 2014 Removed ICD9CM procedure codes to identify immunization. (No impact; OHA relies on the ALERT data instead of claims)
- No changes in HEDIS® 2015

For measurements involving NDC lists published by NCQA (<http://www.ncqa.org>), OHA will use the latest available version for the measures; 2016 NDC lists will be used for the final calculations of 2015 measurement year. Before the 2016 NDC lists are available, OHA will use the 2015 lists for any progress reports.

For 2015 measurement, OHA is only including CCO A and CCO B members. For dental related measures (e.g., dental sealants, DHS custody) OHA is only including CCO A members.

HEDIS specifications are written for multiple lines of business and include a broad set of codes that could be used for measurement. OHA is not using all codes listed in the HEDIS specifications. Codes OHA is not using include, but are not limited to, LOINC, CPT, and HCPCS codes that are not open to Medicaid in Oregon. A general rule of thumb is that only CPT/HCPCS codes associated with the prioritized list will be used to calculate the measures; however as some measure specifications include denied claims, a claim

that was denied because it included codes not on the prioritized list might still be counted toward the measure.

Denied claims: Included ☐

Not included ☐

Not applicable ☒

Measure Details

Data elements required denominator:

Children who turn 2 years of age during the measurement year. See HEDIS® 2015 Technical Specification for Health Plans (Volume 2) for details.

Required exclusions for denominator:

See continuous enrollment criteria.

Deviations from cited specifications for denominator: None.

Data elements required numerator:

OHA is using HEDIS® 2015 Combination 2 for the state performance measure: The number of children who turned 2 years of age in the measurement year and had all of the following specified vaccinations. Please note, OHA relies on the Public Health Division Immunization Program Registry (ALERT) data, instead of calculating from the claim/encounter data. HEDIS® Value Set names and codes are listed below only as a reference.

- DTaP – at least four DTaP vaccinations (DTaP Vaccine Administered Value Set), with different dates of service on or before the child's second birthday. Do not count a vaccination administered prior to 42 days after birth.
- IPV – at least three IPV vaccinations (Inactivated Polio Vaccine (IPV) Administered Value Set), with different dates of service on or before the child's second birthday. IPV administered prior to 42 days after birth cannot be counted.
- MMR – Any of the following with a date of service on or before the child's 2nd birthday:
 - At least one MMR vaccination (Measles, Mumps and Rubella (MMR) Vaccine Administered Value Set).
 - At least one measles and rubella vaccination (Measles/Rubella Vaccine Administered Value Set) and at least one mumps vaccination (Mumps Vaccine Administered Value Set) on the same date of service or on different dates of service.
 - At least one measles vaccination (Measles Vaccine Administered Value Set) and at least one mumps vaccination (Mumps Vaccine Administered Value Set) and at least one rubella vaccination (Rubella Vaccine Administered Value Set) on the same date of service or on different dates of service.
 - History of measles (Measles Value Set), mumps (Mumps Value Set), or rubella (Rubella Value Set) illness.

- **HiB** – At least three HiB vaccinations (Haemophilus Influenzae Type B (HiB) Vaccine Administered Value Set), with different dates of service on or before the child’s second birthday. HiB administered prior to 42 days after birth cannot be counted.
- **Hepatitis B** – At least three hepatitis B vaccinations (Hepatitis B Vaccine Administered Value Set), with different dates of service on or before the child’s second birthday; or history of hepatitis illness (Hepatitis B Value Set).
- **VZV** – At least on VZV vaccination (Varicella Zoster (VZV) Vaccine Administered Value Set), with a date of service falling on or before the child’s second birthday; or history of varicella zoster (e.g., chicken pox) illness (Varicella Zoster Value Set).

Value Set Name	CPT/HCPCS	ICD9CM-Diagnosis
DTaP Vaccine Administered	90698, 90700, 90721, 90723	
Inactivated Polio Vaccine (IPV) Administered	90698, 90713, 90723	
Measles, Mumps and Rubella (MMR) Vaccine Administered	90707, 90710	
Measles/Rubella Vaccine Administered	90708	
Measles Vaccine Administered	90705	
Mumps Vaccine Administered	90704	
Rubella Vaccine Administered	90706	
Measles		055.0, 055.1, 055.2, 055.71, 055.79, 055.8, 055.9
Mumps		072.0-072.3, 072.71, 072.72, 072.79, 072.8, 072.9
Rubella		056.00, 056.01, 056.09, 056.71, 056.79, 056.8, 056.9
Haemophilus Influenzae Type B (HiB) Vaccine Administered	90645-90648, 90698, 90721, 90748	
Hepatitis B Vaccine Administered	90723, 90740, 90744, 90747, 90748, G0010	
Hepatitis B		070.20-070.23, 070.30-070.33, V02.61
Varicella Zoster (VZV) Vaccine Administered	90710, 90716	
Varicella Zoster		052.x, 053.0, 053.1, 053.20-053.22, 053.29, 053.71, 053.79, 053.8, 053.9

See HEDIS® 2015 Technical Specifications for Health Plans (Volume 2) for additional details.

Required exclusions for numerator: None.

Deviations from cited specifications for numerator:



None.

What are the continuous enrollment criteria:

12 months prior to the child's 2nd birthday.

What are allowable gaps in enrollment:

No more than one gap in enrollment of up to 45 days during the 12 months prior to the child's 2nd birthday.

Define Anchor Date (if applicable):

Enrolled on the child's 2nd birthday.