

Childhood Immunization Status (Combo 2)

Measure Basic Information

Name and date of specifications used: OHA follows most parts of the measure from HEDIS® 2020 Technical Specifications for Health Plans (Volume 2), although deviates substantially on the numerator requirement therefore it is not an HEDIS measure per HEDIS new allowable adjustment rules.

URL of Specifications: n/a

Measure Type:

HEDIS PQI Survey Other Specify: HEIDS-like

Measure Utility:

CCO Incentive State Quality CMS Adult Core Set CMS Child Core Set Other
Specify:

Data Source:

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

See the ALERT IIS Data Use Cases document posted online for additional information about immunization data. <http://www.oregon.gov/oha/analytics/Pages/CCO-Baseline-Data.aspx>

Measurement Period: January 1, 2020 – December 31, 2020

Benchmark for OHA measurement year	2013	2014	2015	2016	2017	2018	2019	2020
CIS Combo 2	82.0%	82.0%	82.0%	82.0%	78.6%	79.1%	81.9%	TBD
Source:	Prior year national Medicaid 75th percentile						Prior year national Medicaid 90th percentile	

2020 Improvement Targets: Minnesota method with 2 percentage point floor

Incentive Measure changes in specifications from 2019 to 2020:

- HEDIS 2020 modified value sets to make them compatible with digital measure formatting and added live attenuated influenza vaccine (LAIV) as numerator compliant for the influenza rate. These two updates do not affect OHA's calculation for Combo 2 rates using ALERT IIS data.
- HEDIS 2020 reformatted/reorganized the MMR numerator without changing the requirements. This update does not affect OHA's calculation using ALERT IIS with ANY MMR-related CVX codes.
- HEDIS 2020 updated hospice exclusion rule in General Guideline 17 which replaced Hospice Value Set with two new value sets: Hospice Encounter Value Set and Hospice Intervention Value Set. UBTOB codes are no longer in use for identifying hospice exclusion.

- OHA adds CVX code 146 to DTaP, IPV, Hib, Hepatitis B; CVX 193 to Hepatitis B; CVX 195 to DTaP and IPV.

HEDIS specifications are written for multiple lines of business and include a broad set of codes that could be used for measurement. 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 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.

OHA is following HEDIS guidelines for Effectiveness of Care, Access/Availability of Care, Experience of Care, and Utilization measures to determine which services count. OHA is not using all codes listed in the HEDIS specifications.

Member type: CCO A

CCO B

CCO G

Measure Details

Data elements required denominator:

Children who turn 2 years of age during the measurement year.

Required exclusions denominator:

Members in hospice are excluded from this measure. These members are identified using HEDIS 2020 Hospice Encounter Value Set and Hospice Intervention Value Set, with claims within the measurement year. (See HEDIS 2020 General Guideline 17 for detail.)

OHA does not apply any optional exclusions to this measure.

Deviations from cited specifications denominator: OHA excludes members who are known to be deceased at the time of metric reporting.

Note this is a clarification of ongoing practice for OHA's immunization metrics production, given the ALERT IIS does not provide immunization records for deceased individuals.

Data elements required numerator:

OHA is using HEDIS® 2020 Combination 2 for the CCO incentive and State Quality measure: The number of children who turned 2 years of age in the measurement year and had all the following specified vaccinations.

- DTaP – at least four DTaP vaccinations (DTaP Vaccine Value Set), with different dates of service on or before the child's second birthday.
- IPV – at least three IPV vaccinations (Inactivated Polio Vaccine (IPV) Immunization Value Set), with different dates of service on or before the child's second birthday.
- MMR – Any of the following on or between the child's first and second birthdays:

- At least one MMR vaccination ([Measles, Mumps and Rubella \(MMR\) Immunization Value Set](#)), OR
- One measles and rubella vaccination ([Measles Rubella Immunization Value Set](#)), OR
- One measles vaccination ([Measles Vaccine Value Set](#)), OR
- One mumps vaccination ([Mumps Immunization Value Set](#)), OR
- One rubella vaccination (Rubella Vaccine Administered Value Set).

Note: General Guideline 36 (i.e., the 14-day rule) does not apply to MMR.

OHA omits the HEDIS requirement for the combination of subcategories in the following bullet points, which compensates the effect that ALERT IIS data is unable to provide reliable disease histories.

- HiB – At least three HiB vaccinations ([Haemophilus Influenzae Type B \(HiB\) Immunization Value Set](#)), with different dates of service on or before the child's second birthday.
- Hepatitis B – At least three hepatitis B vaccinations ([Hepatitis B Immunization Value Set](#)), with different dates of service on or before the child's second birthday.
 - One of the three vaccinations can be a newborn hepatitis B vaccination ([Newborn Hepatitis B Vaccine Administered Value Set](#)) during the eight-day period that begins on the date of birth and ends seven days after the date of birth. For example, if the member's date of birth is December 1, the newborn hepatitis B vaccination must be on or between December 1 and December 8.
- VZV – At least one VZV vaccination ([Varicella Zoster \(VZV\) Immunization Value Set](#)), with a date of service on or between the child's first and second birthdays.

NOTE OHA relies on the Public Health Division Immunization Program Registry (ALERT IIS) data which provides records with CVX codes. In 2017, HEDIS incorporated CVX codes into the Value Set Directory Workbook; OHA is adopting the HEDIS numerator CVX codes, with additional inactive and formula unspecified codes that are still in use but verified by ALERT IIS. See table below.

In addition, ALERT IIS data currently does not reliably capture disease history, therefore OHA deviates from HEDIS and does not check the disease histories. Further improvement for ALERT IIS to indicate disease histories might be made in 2019, and OHA will revisit the deviation.

While the ALERT IIS does include MMIS claims/encounter data as one of the registry data sources¹, OHA does not directly calculate the measure from the MMIS/DSSURS claim/encounter data and the CPT/ICD codes in the table below are provided for reference only.

For more information: <http://www.oregon.gov/oha/Analytics/Pages/CCO-Baseline-Data.aspx>

¹ For reference, ALERT IIS follows the CPT to CVX mapping from CMS:
<http://www2.cdc.gov/vaccines/iis/iisstandards/vaccines.asp?rpt=cpt>

Value Set Name	HEDIS 2020 CVX	OHA additional CVX	From HEDIS 2020 Value Set (reference-only)		
			CPT/HCPCS	ICD9CM-Diagnosis	ICD10 CM Diagnosis
DTaP Immunization	20, 50, 106, 107, 110, 120	01, 09, 11, 12, 22, 28, 102, 113, 115, 130, 132, 146, 195	90698, 90700, 90721, 90723		
Inactivated Polio Vaccine (IPV) Immunization	10, 89, 110, 120	2, 130, 132, 146, 195	90698, 90713, 90723		
Measles, Mumps and Rubella (MMR) Immunization	Members received any of these CVX codes are counted as compliant in the MMR category	03, 94		90707, 90710	
Measles Rubella Immunization		04		90708	
Measles Immunization		05		90705	
Mumps Immunization		07	38	90704	
Rubella Immunization		06	38	90706	
Measles				055.0, 055.1, 055.2, 055.71, 055.79, 055.8, 055.9	B05.0, B05.1, B05.2, B05.3, B05.4, B05.81, B05.89, B05.9
Mumps				072.0-072.3, 072.71, 072.72, 072.79, 072.8, 072.9	B26.0, B26.1, B26.2, B26.3, B26.81, B26.82, B26.83, B26.84, B26.85, B26.89, B26.9
Rubella				056.00, 056.01, 056.09, 056.71, 056.79, 056.8, 056.9	B06.00, B06.01, B06.02, B06.09, B06.81, B06.82, B06.89, B06.9
Haemophilus Influenzae Type B (HiB) Immunization	17, 46 – 51, 120, 148	22, 45, 102, 132, 146	90644-90648, 90698, 90721, 90748		
Hepatitis B Immunization	08, 44, 45, 51, 110	42, 43, 102, 104, 132, 146, 193	90723, 90740, 90744, 90747, 90748, G0010		
Newborn Hepatitis B Vaccine Administered				ICD9-PCS: 99.55	ICD10-PCS: 3E0234Z

Value Set Name	HEDIS 2020 CVX	OHA additional CVX	From HEDIS 2020 Value Set (reference-only)		
			CPT/HCPCS	ICD9CM-Diagnosis	ICD10 CM Diagnosis
Hepatitis B				070.20-070.23, 070.30-070.33, V02.61	B16.0, B16.1, B16.2, B16.9, B17.0, B18.0, B18.1, B19.10, B19.11, Z22.51
Varicella Zoster (VZV) Vaccine Administered	21, 94	36, 117	90710, 90716		
Varicella Zoster				052.x, 053.0, 053.1x, 053.20- 053.22, 053.29, 053.71, 053.79, 053.8, 053.9	B01.0, B01.11, B01.12, B01.2, B01.81, B01.89, B01.9, B02.0, B02.1, B02.21, B02.22, B02.23, B02.24, B02.29, B02.30, B02.31, B02.32, B02.33, B02.34, B02.49, B02.7, B02.8, B02.9

Required exclusions for numerator: None.

Deviations from cited specifications for numerator:

See Data elements required numerator section above, which include:

1. OHA uses CVX codes in ALERT IIS data. In addition to CVX codes in the HEDIS Value Sets, OHA keeps additional inactive and formula unspecified CVX codes that are still in use but verified by ALERT IIS.
2. Omits the rule not to count vaccinations administered prior to 42 days after birth, due to negligible inconsistencies and occasional issues with the date of birth in eligibility data. As a result, all vaccinations through the child's 2nd birthday are used.
3. OHA counts members given any of the codes in the following value Sets compliant in the MMR category, without requiring a combination of subcategories:
 - a. Measles, Mumps and Rubella (MMR) Vaccine Administered,
 - b. Measles/Rubella Vaccine Administered
 - c. Measles Vaccine Administered
 - d. Mumps Vaccine Administered
 - e. Rubella Vaccine Administered
4. OHA is not including disease histories for the numerator.

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.

NOTE: These standard continuous enrollment, allowable gap and anchor date criteria may be modified in 2020 to accommodate CCO membership service areas transitions.

For More Information: <https://www.oregon.gov/oha/HPA/ANALYTICS/Pages/CCO-Metrics.aspx>