iowa total care™

ia health link

Hawki

Rotavirus and Influenza Childhood Immunization Review

Why we're in business

OUR PURPOSE

Transforming the health of the community, one person at a time

What we do

OUR MISSION

Better health outcomes at lower costs

What we represent

OUR PILLARS


Focus on the Individual

+


Whole Health

+


Active Local Involvement

What drives our activity

OUR BELIEFS

We believe healthier individuals create more vibrant families and communities.

We believe treating people with kindness, respect and dignity empowers healthy decisions.

We believe we have a responsibility to remove barriers and make it simple to get well, stay well, and be well.

We believe in treating the whole person, not just the physical body.

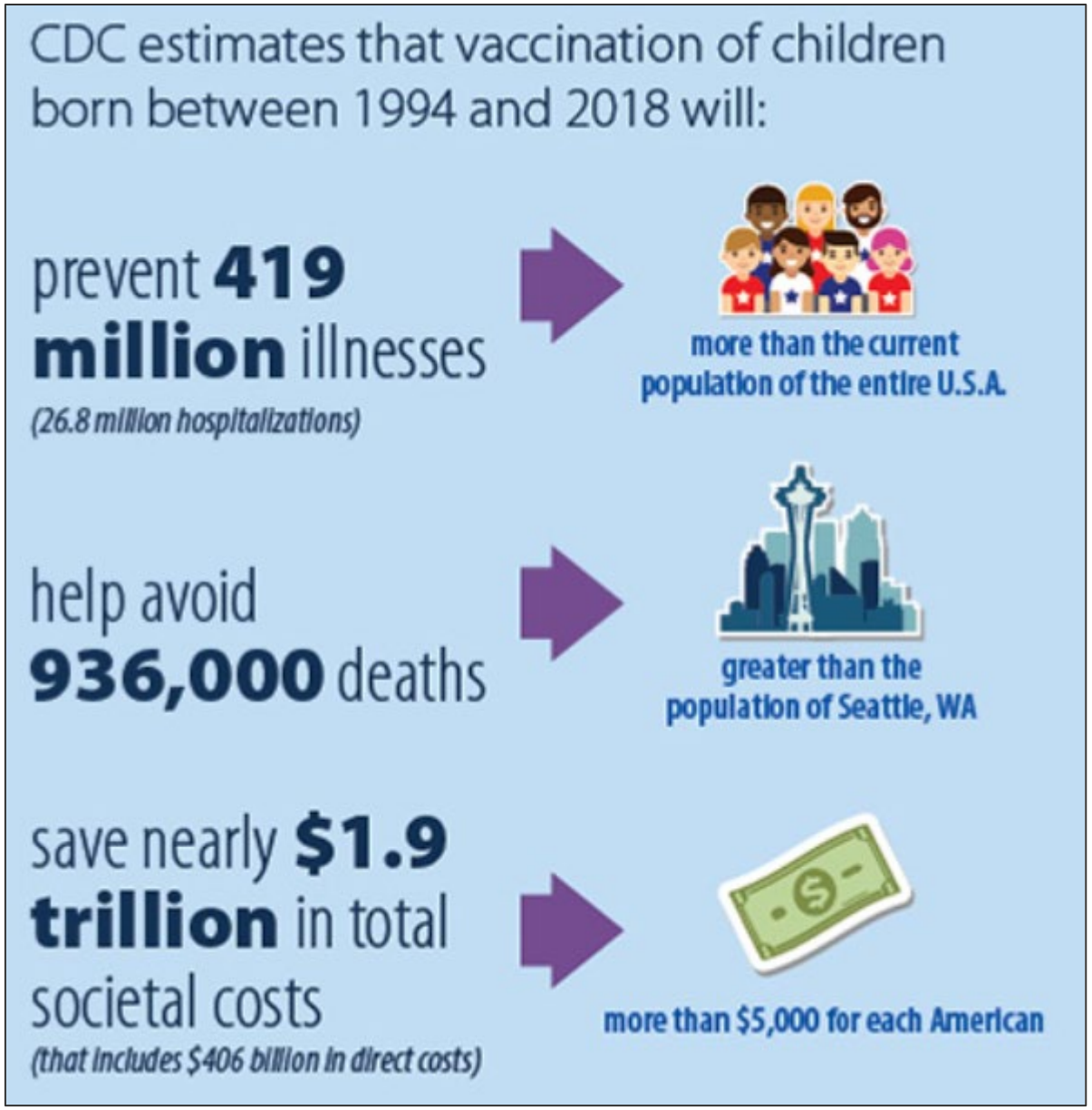
We believe local partnerships enable meaningful, accessible healthcare.

Introduction

Childhood vaccines protect children from a number of serious and potentially life-threatening diseases such as diphtheria, measles, meningitis, polio, tetanus and whooping cough, at a time in their lives when they are most vulnerable to disease.

Approximately 300 children in the United States die each year from vaccine preventable diseases.

Immunizations are essential for disease prevention and are a critical aspect of preventable care for children.



Childhood Immunization Status (CIS)

HEDIS Measure: Childhood Immunization Status (CIS)

Description: The percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV); one measles, mumps and rubella (MMR); three haemophilus influenza type B (HiB); three hepatitis B (HepB), one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday. The measure calculates a rate for each vaccine and 3 separate combination rates (combo 3, 7 and 10); and 2 separate combination rates for QRS (combo 3 and Combo 10).

▪ DTap (4) ▪ IPV (3) ▪ MMR (1) ▪ HIB (3) ▪ Hep B (3) ▪ VZV (1) ▪ PCV (4) ▪ Hep A (1) ▪ RV (two- or three-dose series) ▪ Flu (2) ▪

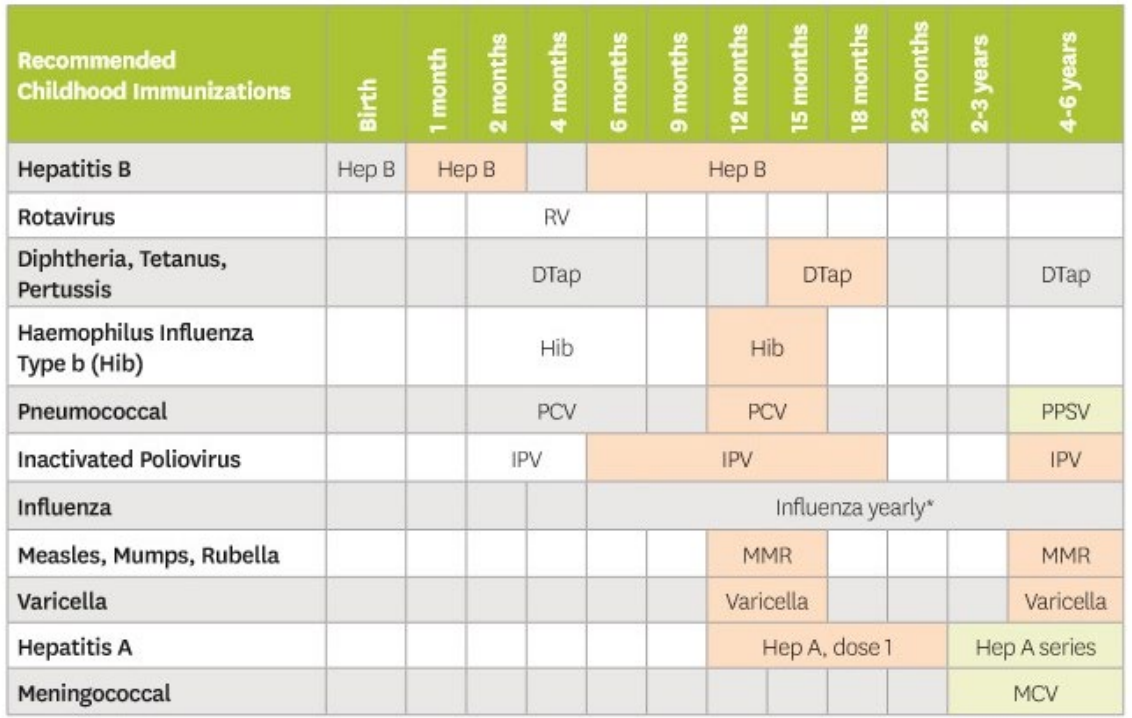
To Improve HEDIS Measure:

- Check compliance with immunizations and lead screening at 18-month well-child visit (not 2 years old).
- Schedule a visit to “catch up” on immunizations and lead screenings.
- Encourage and offer flu shots during the months of September through April.
- Complete overdue immunizations at sick visits as medically appropriate.
- If history of anaphylaxis to an immunization/immunizations, submit appropriate codes.

Iowa Total Care Immunization Rates

Childhood Immunization < 2	2022 (Current as of May 31)	2021
Rotavirus	69.59	63.99
Influenza	57.42	55.96
DTap	75.43	75.18
IPV	88.81	89.05
MMR	85.89	87.10
HiB	84.43	83.70
Hepatitis B	90.75	93.19
VZV	85.40	87.10
Pneumococcal	75.67	76.16
Hepatitis A	80.54	83.45
CIS 10	44.04	41.36

Immunizations by Age



Range of recommended ages for all children except certain high-risk groups

Range of recommended ages for certain high-risk groups

*One of the two vaccinations can be an LAIV vaccination, but it must be *administered on the child's second birthday to meet criteria.*

Rotavirus

Rotavirus

What is rotavirus?

- First identified as a cause of diarrhea in 1973
- Leading cause of severe gastroenteritis among U.S. children before introduction of vaccine in 2006

Before the vaccine:

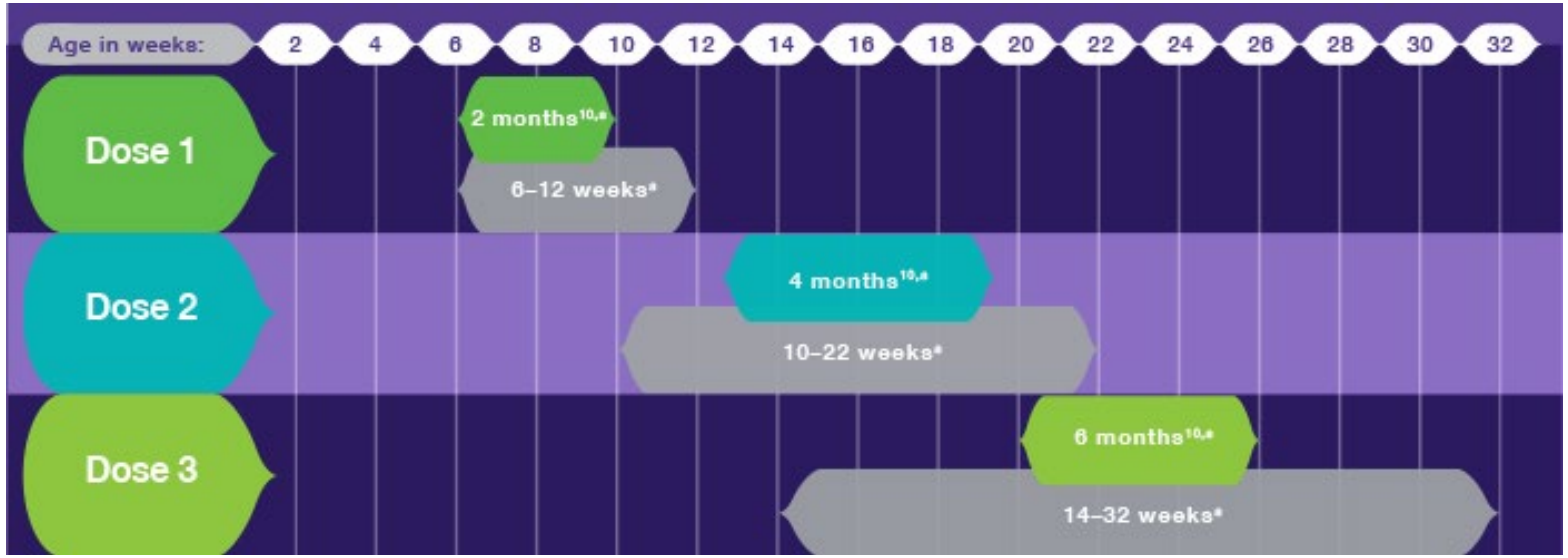
- Responsible for up to 500,000 doctor visits
- 55,000 to 70,000 hospitalizations
- 20 to 60 deaths

Rotavirus Vaccines

Vaccine Product	Age Indications
Single-component vaccines	
RotaTeq (RV5)	Six weeks to 32 weeks of age
Rotarix (RV1)	Six weeks to 24 weeks of age

RotaTeq

- The dosing schedule for RotaTeq three-dose vaccine series aligns with routine well-baby visits (2 months, 4 months, and 6 months).
- Four- to 10-week interval between each dose can provide flexibility to complete the three-dose series.
- The three-dose series can be completed as early as 14 weeks of age (e.g., doses given at 6, 10, and 14 weeks of age).



Source: https://www.merckvaccines.com/rotateq/dosage-and-administration/

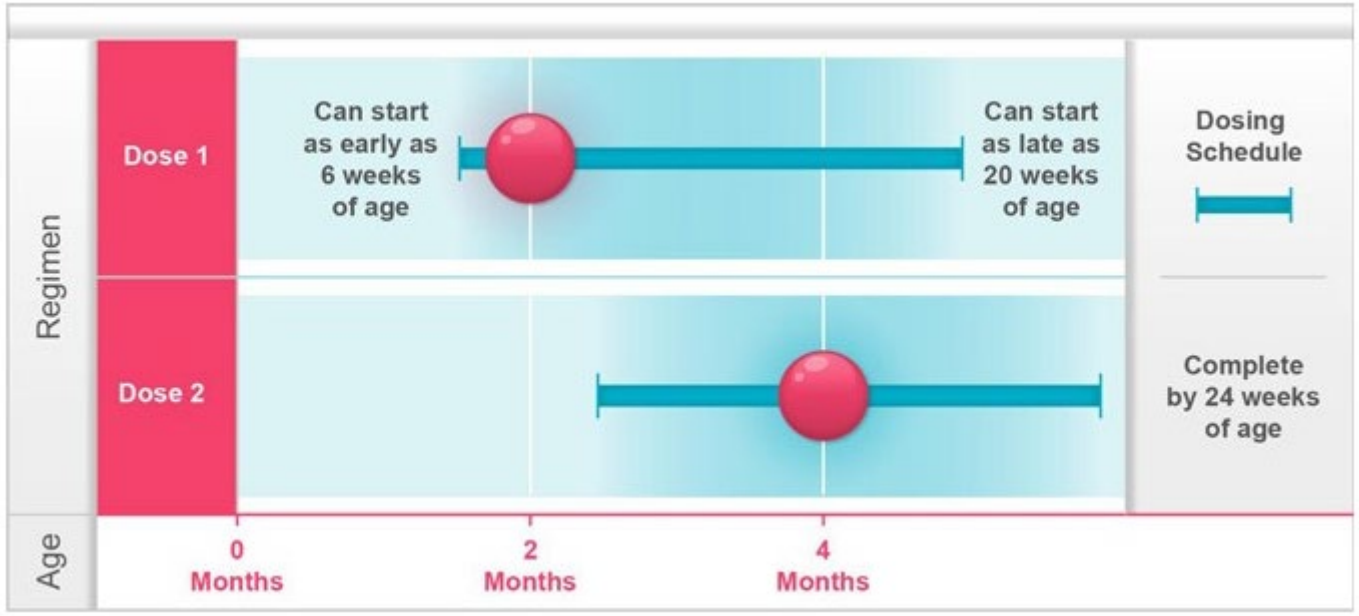
Rotarix

Rotarix is a two-dose series. It provides flexibility & dose range from 6 to 24 weeks of age.

After reconstitution, Rotarix can be used up to 24 hours later.

Administer first dose to infants beginning at 6 weeks of age. The second dose series should be completed by 24 weeks of age.

There should be an interval of at least four weeks between the first and second dose.



Source: https://gskpro.com/en-us/therapy-areas/vaccines/coding/gsk-vaccines/rotarix/

Rotavirus

Description: This measure demonstrates the percentage of children two years of age who completed all recommended immunizations on or before child's second birthday.

- Two or three rotavirus (RV).
- At least two doses of the two-dose rotavirus vaccine on different dates of service.
- At least one dose of the two-dose rotavirus vaccine and at least two doses of the three-dose rotavirus vaccine all on different dates of service.

Documentation in the medical record must include:

- Name of the specific antigen and date of the immunization.
- A certificate of immunization prepared by an authorized healthcare provider or agency, including the specific dates and types of immunizations administered.

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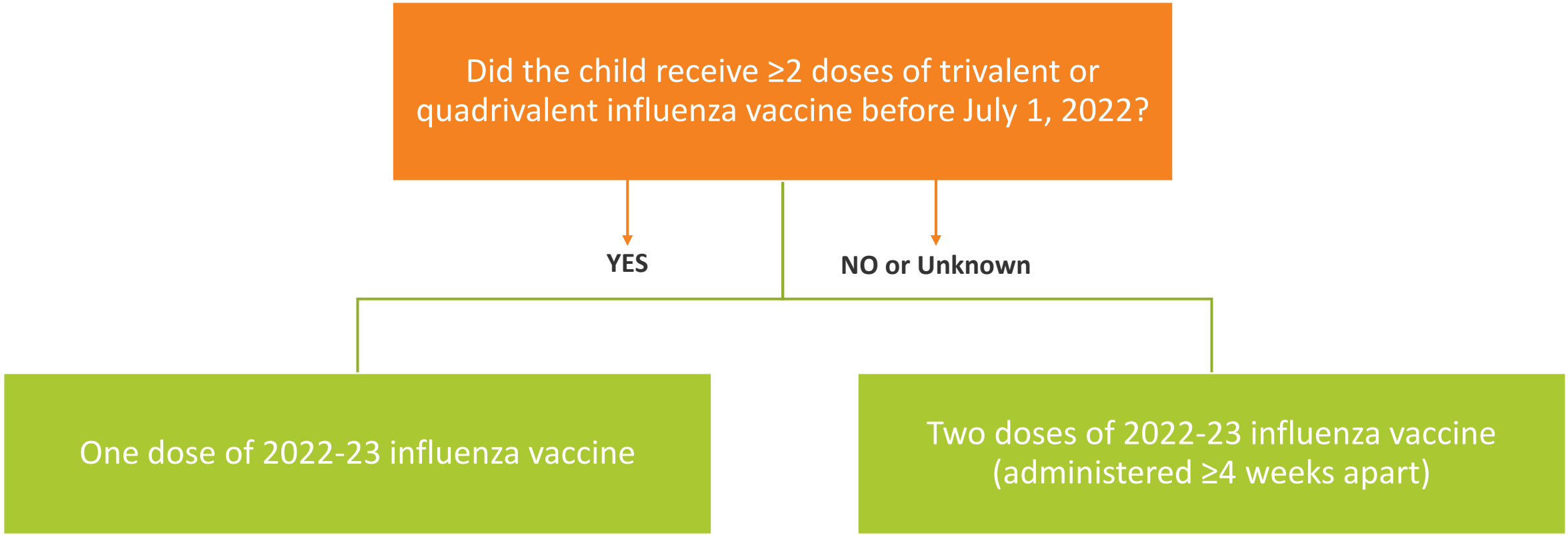
Influenza

Influenza Vaccines

- CDC recommends everyone 6 months and older get vaccinated every flu season.
- Children 6 months through 2 years of age may need two doses during a single flu season.
- Inactivated influenza vaccines are effective in protecting about 30% to 60% among the overall population when most circulating strains are well-matched to the flu vaccine.
- The vaccine should be offered by the end of October:
  - Children 6 months through 2 years who require two doses should receive their first dose as soon as the vaccine becomes available to allow time to get the second dose by the end of October.
- Vaccination should continue to be offered as long as influenza viruses are circulating, and unexpired vaccine is available.
- To avoid missed opportunities, providers should offer vaccination during routine healthcare visits and hospitalizations.

Influenza Vaccine Brand	Abbreviation	Age	Dose
Afluria Quadrivalent	IIV4	6 months of age & older	≥6 months to 35 months = 0.23 mL ≥36 months (≥3 years) = 0.5 mL
Fluarix Quadrivalent	IIV4	6 months of age & older	≥6 months = 0.5 mL
FluLaval Quadrivalent	IIV4	6 months of age & older	≥6 months = 0.5 mL
Fluzone Quadrivalent	IIV4	6 months of age & older	≥6 months to 35 months = either 0.25 mL or 0.5 mL ≥36 months (≥3 years) = 0.5 mL
Flumist	LAIV4	2 years of age through 49 years of age	≥24 months (≥2 years) = 0.2 mL intranasally (0.1 mL in each nostril)

Algorithm for Vaccination of Children Aged 6 Months–2 Years for 2022-23 Influenza Season



Influenza Administration

- Use any influenza vaccine appropriate for age and health status annually.
- Two doses, separated by at least four weeks, for children aged 6 months to 2 years who have received fewer than two influenza vaccine doses before July 1, 2022, or whose influenza vaccination history is unknown.
- One dose for children aged 6 months to 2 years who have received at least 2 influenza vaccine doses before July 1, 2022.
- One dose for all persons aged 2 years or older.

Example DOS: 09/10/2022

- Johnny is an 18-month-old who received one influenza vaccine on January 18, 2022. Johnny is here for his second influenza vaccine.
- Johnny would need to receive his 1st influenza vaccine at this visit and come back in four weeks to receive his second dose. His first influenza vaccine in January does not count for the new 2022-2023 influenza season. This example would be non-compliant.

Example DOS: 10/18/2022

- Abbie is a 22-month-old who is in the office to receive her second influenza vaccine. She received her first influenza vaccine on 8/24/2022.
- Abbie's first dose in August 2022 would count as her first influenza vaccine and this would count as her second dose. The influenza vaccine season starts July 1, 2022, it has been more than four weeks, and she has not turned 2 years of age yet. This would meet compliancy.

Influenza

Description: This measure demonstrates the percentage of children 2 years of age who completed all recommended immunizations on or before child's second birthday.

- Two influenza (flu) vaccines by their second birthday
  - At least two influenza vaccinations with different dates of service on or before the child's second birthday. A vaccination administered prior to 6 months (180 days) after birth will not count towards gap closure.
  - One of the two vaccinations can be an LAIV (Live Attenuated Influenza Vaccine) vaccination administered on the child's second birthday. An LAIV vaccination administered before the child's second birthday will not count towards gap closure.

Documentation in the medical record must include:

- Name of the specific antigen and date of the immunization.
- A certificate of immunization prepared by an authorized healthcare provider or agency, including the specific dates and types of immunizations administered.

Note:

- If the child is 2 years and 1 day old, services will not count towards HEDIS compliance scores.
- Parental refusal is not a valid exclusion.
- If the member has history of anaphylactic reaction due to vaccination, the appropriate codes should be used to account for this.

Improve Gap Closure

Ways to Improve Gap Closure

- Encourage/educate and offer flu shots during the months of September through April.
- When documenting the rotavirus vaccine, always include “Rotarix” or “two-dose”, or “RotaTeq” or “three-dose” with the date of administration.
- If medical record documentation does not indicate whether the two-dose schedule or three-dose schedule was used, it is assumed that the three-dose regimen was used.
- For parents hesitant to give all vaccines on schedule, remind them that the schedule is timed when it works best with a child’s immune system.
- Educate office staff to schedule appointments PRIOR to second birthday. Follow up with families to schedule appointments for those who are behind.
- Check at each visit for any missing immunizations.
- Report all immunizations through your state immunization registry.
- Documentation that a member is “up-to-date” with all immunizations but doesn’t include a list of the immunizations and date they were administered, will NOT meet compliance.
- Parental refusal of vaccinations will not remove an eligible member from the denominator, but still document parent refusals.
- If history of anaphylaxis to an immunization(s), submit appropriate codes.

Documentation

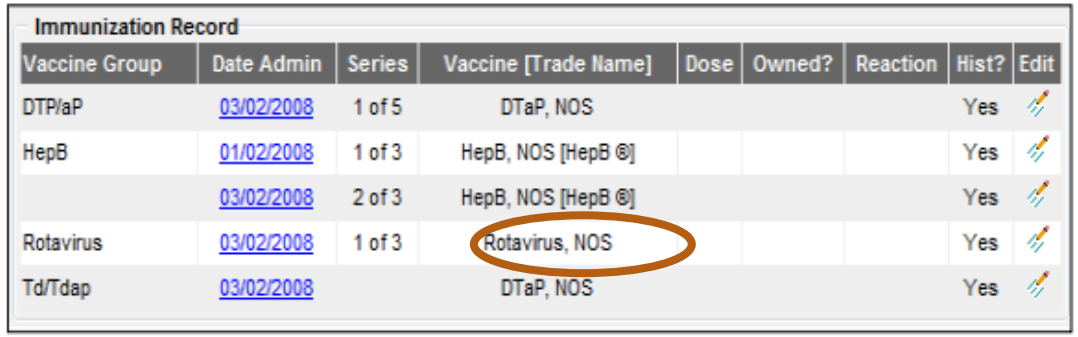
Document each patient's vaccine administration information and follow-up in the following places:

- **Medical record:** Record the date the vaccine was administered, the manufacturer and lot number, the vaccination site and route, and the name and address and, if appropriate, the title of the person administering the vaccine. You must also document, in the patient's medical record or office log, the publication date of the VIS (vaccine information statement) and the date it was given to the patient.
  - If vaccine was not administered, record the reason(s) for non-receipt of the vaccine (e.g., medical contraindication, patient refusal). Discuss the need for vaccine with the patient (or, in the case of a minor, their parent or legal representative) at the next visit.
- **Personal immunization record card:** Record the date of vaccination and the name/location of the administering clinic.
- **Immunization Information System (IIS) or "registry":** Report the vaccination to the appropriate state or local IIS. If available, include manufacturer and lot number, vaccination site and route with date administered. It is very important to document the correct vaccine that was administered.
  - Example: two-dose or three-dose rotavirus

Resources

Adding Immunizations to Patient Record(s) in IRIS (Immunization Registry Information System)

Incorrect Documentation

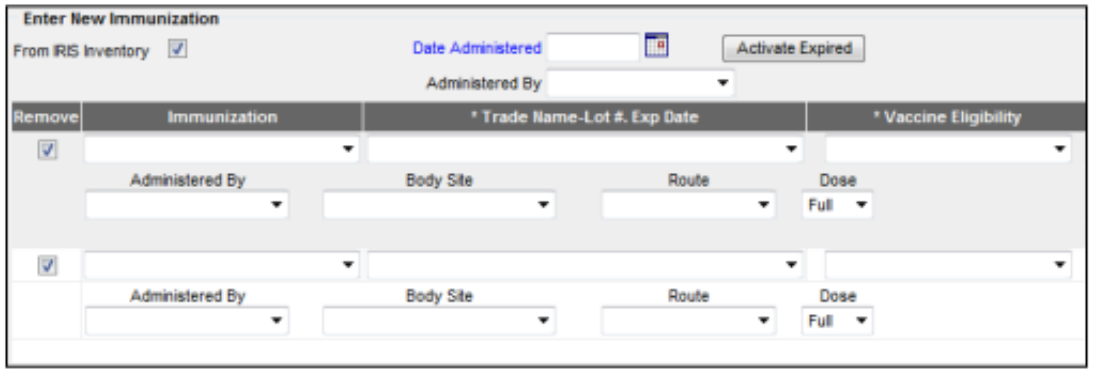


Immunization Record

Vaccine Group	Date Admin	Series	Vaccine [Trade Name]	Dose	Owned?	Reaction	Hist?	Edit
DTP/aP	03/02/2008	1 of 5	DTaP, NOS				Yes	
HepB	01/02/2008	1 of 3	HepB, NOS [HepB ®]				Yes	
	03/02/2008	2 of 3	HepB, NOS [HepB ®]				Yes	
Rotavirus	03/02/2008	1 of 3	Rotavirus, NOS				Yes	
Td/Tdap	03/02/2008		DTaP, NOS				Yes	

- This table lists all the immunizations the patient has received to date that have been entered into IRIS.
- Immunizations are listed alphabetically by vaccine group and ordered by date administered.
- If a vaccine trade name is not chosen when entered, it will show as “Rotavirus, NOS” etc.
- Automatically assumes it is the three-dose series even if the two-dose series was given.
- This makes the members gap not closed if three doses are not given.

Correct Documentation



- Date administered
- Administered by (at the top)
- Enter in vaccine administered
- Trade name- do not use NOS; pick the actual vaccine given
- Lot #
- Vaccine eligibility
- Administered by
- Body site
- Route
- Dose

Claims Coding

Rotavirus Claims Coding:

- Two-Dose (Rotarix) CPT Code: 90681
- Two-Dose (Rotarix) CVX Code: 119
- Three-Dose (RotaTeq) CPT Code: 90680
- Three-Dose (RotaTeq) CVX Code: 116, 122

Influenza Claims Coding:

- CPT Code: 90655, 90657, 90660, 90661, 90672, 90673, 90674, 90685, 90686, 90687, 90688, 90689, 90756
- CVX Code: 88, 140, 141, 150, 153, 155, 158, 161
- HCPCS Code: G0008

**Codes subject to change.*

Iowa Total Care Resources

Get the tools you need at iowatotalcare.com. From the Provider tab on our website, you can access:

- Your **Clinical Quality Consultant's** contact information.
- Training on programs and gap closure support to fit your practice needs.
- **Manuals, forms and HEDIS® tip sheets** to assist with caring for your patient.

From the Secure Provider Portal:

- Click on ***Patient*** and select member's name to access patient's medical records.
- Click on the ***PCP Analytics*** link to be directed to your Quality dashboard and P4P Scorecard.
- Click on ***Authorization*** to create or view status of a submitted prior authorization.
- Click on ***Claims*** to review status of submitted claims.

Patient Education Resources

- **Krames** Health Library
- **Value-Added Services**
  - My Health Pays® **Rewards**
  - The influenza vaccine is included as part of the Iowa Total Care My Health Pays® incentive program.

Questions?