<u>2017 OPTIONS FOR INDIVIDUAL MEASURES:</u>
CLAIMS ONLY

<u>MEASURE TYPE:</u>
Process

<u>DESCRIPTION:</u>
Percentage of patients 65 years of age and older who have ever received a pneumococcal vaccine

<u>INSTRUCTIONS:</u>
This measure is to be reported a minimum of <u>**once per performance period**</u> for patients seen during the performance period. There is no diagnosis associated with this measure. Performance for this measure is not limited to the performance period. This measure may be reported by eligible clinicians who perform the quality actions described in the measure based on services provided and the measure-specific denominator coding.

Measure Reporting:
The listed denominator criteria is used to identify the intended patient population. The numerator quality-data codes included in this specification are used to submit the quality actions allowed by the measure. All measure-specific coding should be reported on the claim(s) representing the eligible encounter.

<u>DENOMINATOR:</u>
Patients 65 years of age and older with a visit during the measurement period

> *DENOMINATOR NOTE: This measure assesses whether patients 65 years of age or older have received one or more pneumococcal vaccinations.*

> <u>Denominator Criteria (Eligible Cases):</u>
> Patients aged ≥ 65 years on date of encounter
> <u>AND</u>
> **Patient encounter during the performance period (CPT or HCPCS):** 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350, G0402, G0438, G0439

<u>NUMERATOR:</u>
Patients who have <u>**ever**</u> received a pneumococcal vaccination

> *NUMERATOR NOTE: While the measure provides credit for adults 65 years of age and older who have ever received either the PCV13 or PPSV23 vaccine (or both), according to ACIP recommendations, patients should receive both vaccines. The order and timing of the vaccinations depends on certain patient characteristics, and are described in more detail in the ACIP recommendations.*

> <u>Numerator Quality-Data Coding Options:</u>
> **Patient receiving Hospice Services, Patient Not Eligible:**
> *Denominator Exclusion:* G9707:                    Patient received hospice services any time during the measurement period

<u>OR</u>

> **Pneumococcal Vaccination Administered or Previously Received**
> *Performance Met:* CPT II 4040F:                    Pneumococcal vaccine administered or previously received

<u>OR</u>
**Pneumococcal Vaccination not Administered or Previously Received, Reason not Otherwise Specified**
*Append a reporting modifier (8P) to CPT Category II code 4040F to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.*
*Performance Not Met:* 4040F *with* 8P:          Pneumococcal vaccine was not administered or previously received, reason not otherwise specified

<u>RATIONALE:</u>
Pneumonia is a common cause of illness and death in the elderly and persons with certain underlying conditions such as heart failure, diabetes, cystic fibrosis, asthma, sickle cell anemia, or chronic obstructive pulmonary disease (NHLBI, 2011). In 1998, an estimated 3,400 adults aged > 65 years died as a result of invasive pneumococcal disease (IPD) (CDC, 2003).

Among the 91.5 million US adults aged > 50 years, 29,500 cases of IPD, 502,600 cases of nonbacteremic pneumococcal pneumonia and 25,400 pneumococcal-related deaths are estimated to occur yearly; annual direct and indirect costs are estimated to total $3.7 billion and $1.8 billion, respectively. Pneumococcal disease remains a substantial burden among older US adults, despite increased coverage with 23-valent pneumococcal polysaccharide vaccine, (PPV23) and indirect benefits afforded by PCV7 vaccination of young children (Weycker, et al., 2011).

Vaccination has been found to be effective against bacteremic cases (OR: 0.34; 95% CI: 0.27–0.66) as well as nonbacteremic cases (OR: 0.58; 95% CI: 0.39–0.86). Vaccine effectiveness was highest against bacteremic infections caused by vaccine types (OR: 0.24; 95% CI: 0.09–0.66) (Vila-Corcoles, et al., 2009).

<u>CLINICAL RECOMMENDATION STATEMENTS:</u>
In 2014, the Advisory Committee on Immunization Practices (ACIP) began recommending a dose of 13-valent pneumococcal conjugate vaccine (PCV13) be followed by a dose of 23-valent pneumococcal polysaccharide vaccine (PPSV23) 6-12 months later in adults aged 65 and older who have not previously received a pneumococcal vaccination, and in persons over the age of two years who are considered to be at higher risk for pneumococcal disease due to an underlying condition. The two vaccines should not be coadministered and intervals for administration of the two vaccines vary slightly depending on the age, risk group, and history of vaccination (Kobayashi, 2015).

In 2015, ACIP updated its recommendation and changed the interval between PCV13 and PPSV23, from 6-12 months to at least one year for immunocompetent adults aged >=65 years who have not previously received pneumococcal vaccine. For immunocompromised vaccine-naïve adults, the minimum acceptable interval between PCV13 and PPSV23 is 8 weeks. Both immunocompetent and immunocompromised adults aged >=65 years who have previously received a dose of PPSV23 when over the age of 65 should receive a dose of PCV13 at least one year after PPSV23 (>=1 year). Immunocompetent and immunocompromised adults aged >=65 who have previously received a dose of PPSV23 when under the age of 65, should also receive a dose of PCV13 at least one year after PPSV23 (>=1 year) and then another dose of PPSV23 at least one year after PCV13. It is recommended that for those that have this alternative three-dose schedule (2 PPSV23 and 1 PCV13), the three doses should be spread over a time period of five or more years (Kobayashi, 2015).
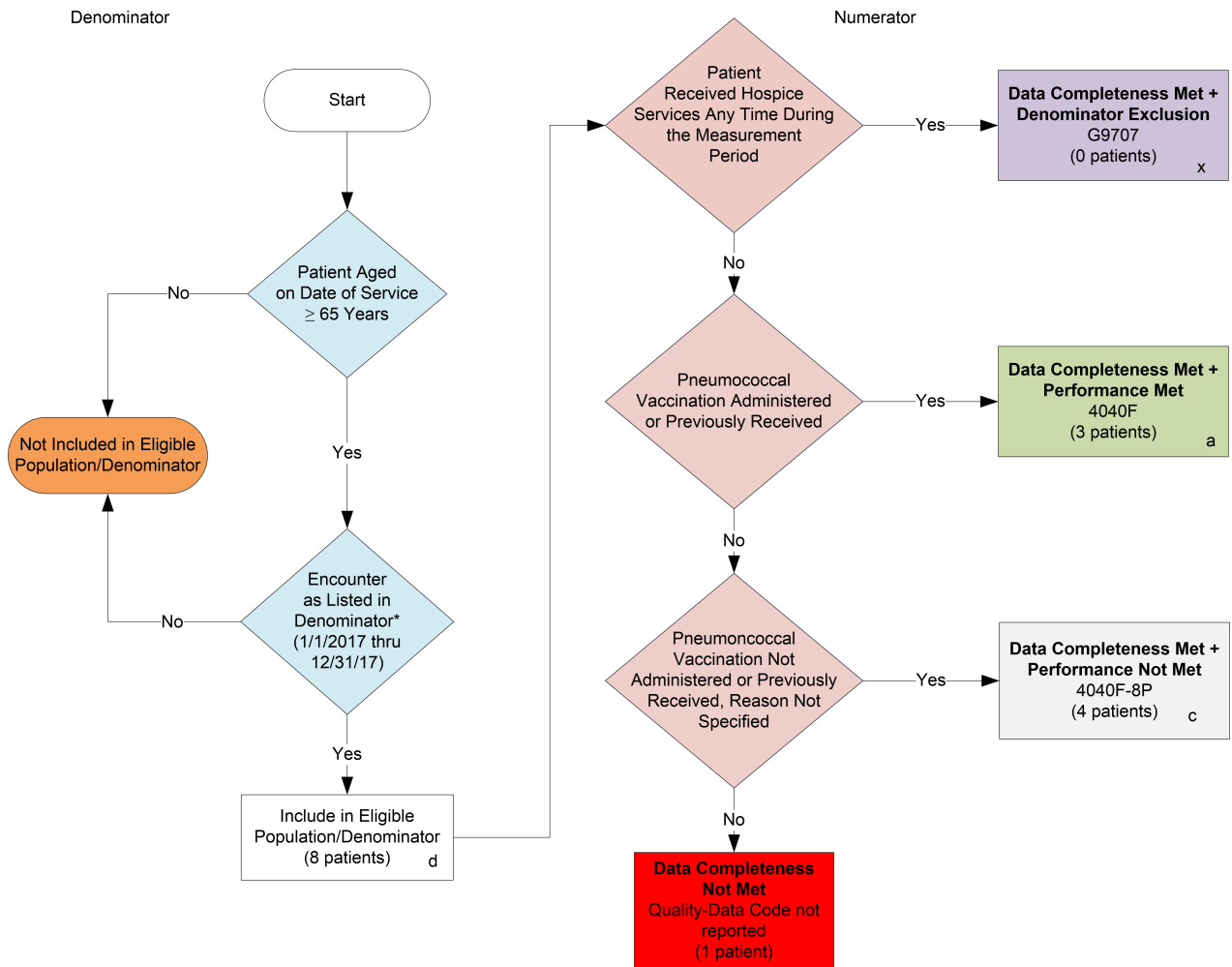
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# 2017 Claims Individual Measure Flow
# #111 NQF #0043: Pneumococcal Vaccination Status for Older Adults

Denominator

Numerator

**Start**

**Patient Aged on Date of Service ≥ 65 Years**

No →

Yes ↓

**Not Included in Eligible Population/Denominator**

**Encounter as Listed in Denominator\* (1/1/2017 thru 12/31/17)**

No →

Yes ↓

**Include in Eligible Population/Denominator (8 patients)    d**

**Patient Received Hospice Services Any Time During the Measurement Period**

Yes → **Data Completeness Met + Denominator Exclusion G9707 (0 patients)    x**

No ↓

**Pneumococcal Vaccination Administered or Previously Received**

Yes → **Data Completeness Met + Performance Met 4040F (3 patients)    a**

No ↓

**Pneumoncoccal Vaccination Not Administered or Previously Received, Reason Not Specified**

Yes → **Data Completeness Met + Performance Not Met 4040F-8P (4 patients)    c**

No ↓

**Data Completeness Not Met Quality-Data Code not reported (1 patient)**

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## SAMPLE CALCULATIONS:

**Data Completeness=**

Denominator Exclusion (x=0 patients) + Performance Met (a=3 patients) + Performance Not Met (c=4 patients)  =  7 patients  =  **87.50%**

Eligible Population / Denominator (d=8 patients)  =  8 patients

**Performance Rate=**

Performance Met (a=3 patients)  =  3 patients =  **42.86%**

Data Completeness Numerator (7 patients) -Denominator Exclusion (x=0 patients)  =  7 patients

\* See the posted Measure Specification for specific coding and instructions to report this measure.

NOTE:  Reporting Frequency:  Patient-process

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure.

1.  Start with Denominator

2.  Check Patient Age:

    a.  If the Age is greater than or equal to 65 years of age on Date of Service and equals No during the measurement period, do not include in Eligible Patient Population. Stop Processing.

    b.  If the Age is greater than or equal to 65 years of age on Date of Service and equals Yes during the measurement period, proceed to Check Encounter Performed.

3.  Check Encounter Performed:

    a.  If Encounter as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.

    b.  If Encounter as Listed in the Denominator equals Yes, include in the Eligible population.

4.  Denominator Population:

    a.  Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 8 patients in the sample calculation.

5.  Start Numerator

6.  Check Patient Received Hospice Services Any Time During the Measurement Period:

    a.  If Patient Received Hospice Services Any Time During the Measurement Period equals Yes, include in Data Completeness Met and Denominator Exclusion.

    b.  Data Completeness Met and Denominator Exclusion letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter x equals 0 patients in Sample Calculation.

    c.  If Patient Received Hospice Services Any Time During the Measurement Period equals No, proceed to Pneumonia Vaccination Administered or Previously Received.

7.  Check Pneumonia Vaccination Administered or Previously Received:

    a.  If Pneumonia Vaccination Administered or Previously Received equals Yes, include in Data Completeness Met and Performance Met.

    b.  Data Completeness Met and Performance Met letter is represented as Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 3 patients in Sample Calculation.

    c.  If Pneumonia Vaccination Administered or Previously Received equals No, proceed to Pneumonia Vaccination Not Administered or Previously Received, Reason Not Specified.

8.  Check Pneumonia Vaccination Not Administered or Previously Received, Reason Not Specified:

a. If Pneumonia Vaccination Not Administered or Previously Received, Reason Not Specified equals Yes, include in Data Completeness Met and Performance Not Met.

b. Data Completeness Met and Performance Not Met letter is represented as Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 4 patients in the Sample Calculation.

c. If Pneumonia Vaccination Not Administered or Previously Received, Reason Not Otherwise Specified equals No, proceed to Data Completeness Not Met.

9. Check Data Completeness Not Met:

a. If Data Completeness Not Met equals No, Quality Data Code not reported. 1 patient has been subtracted from the Data Completeness numerator in the sample calculation.

**SAMPLE CALCULATIONS:**

**Data Completeness=**

$$\frac{\text{Denominator Exclusion (x=0 patients) + Performance Met (a=3 patients) + Performance Not Met (c=4 patients)}}{\text{Eligible Population / Denominator (d=8 patients)}} = \frac{7 \text{ patients}}{8 \text{ patients}} = 87.50\%$$

**Performance Rate=**

$$\frac{\text{Performance Met (a=3 patients)}}{\text{Data Completeness Numerator (7 patients) -Denominator Exclusion (x=0 patients)}} = \frac{3 \text{ patients}}{7 \text{ patients}} = 42.86\%$$