Measure Name:

Immunization Status: Pneumonia Vaccination for Older Adults

Measure Description:

Percentage of patients aged 65 or older who have ever received a pneumococcal vaccine.

Who:

This measure applies to every adult age 65 or older.

How often:

Report this measure once per reporting period for patients seen during that time.

Why:

It’s good medicine. 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. This means vaccination is particularly important for people with psoriasis and other chronic diseases, and those on immunosuppressants.

What do I need to do:

Document in the patient record (EHR or paper) the patient response when asked if he/she has ever had a pneumonia vaccine shot. For example, you can add a question about receipt of vaccine to the medical history form that the patient fills in at check in. If patient has not received pneumonia shot, document that you advised patient to get one (refer to primary care doctor, pharmacy). If patient declines the recommendation – document reasons such as: patient allergy or other medical reasons; patient declined or other patient reasons, vaccine not available at time of visit or other system reasons.
Measure #111 (NQF 0043): Pneumonia Vaccination Status for Older Adults – National Quality Strategy Domain: Community/Population Health

2016 PQRS OPTIONS FOR INDIVIDUAL MEASURES:
CLAIMS, REGISTRY

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

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

Measure Reporting via Claims:
CPT or HCPCS codes and patient demographics are used to identify patients who are included in the measure’s denominator. CPT Category II codes are used to report the numerator of the measure.

When reporting the measure via claims, submit the listed CPT or HCPCS codes, and the appropriate CPT Category II code OR the CPT Category II code with the modifier. The modifier allowed for this measure is: 8P- reason not otherwise specified. There are no allowable performance exclusions for this measure. All measure-specific coding should be reported on the claim(s) representing the eligible encounter.

Measure Reporting via Registry:
CPT or HCPCS codes and patient demographics are used to identify patients who are included in the measure’s denominator. The listed numerator options are used to report the numerator of the measure.

The quality-data codes listed do not need to be submitted for registry-based submissions; however, these codes may be submitted for those registries that utilize claims data. There are no allowable performance exclusions for this measure.

DENOMINATOR:
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.

Denominator Criteria (Eligible Cases):
Patients aged ≥ 65 years on date of encounter
AND
Patient encounter during the reporting 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

NUMERATOR:
Patients who have ever 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.
Numerator Quality-Data Coding Options for Reporting Satisfactorily:
Pneumococcal Vaccination Administered or Previously Received

**Performance Met:**
CPT II 4040F: Pneumococcal vaccine administered or previously received

**OR**

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

**RATIONALE:**
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).

**CLINICAL RECOMMENDATION STATEMENTS:**
The Advisory Committee on Immunization Practices’ (ACIP) released recommendations in September, 2014, describing the use of 13-valent pneumococcal conjugate vaccine (PCV13) and 23-valent pneumococcal polysaccharide vaccine (PPSV23) among adults aged ≥65 Years. According to the ACIP, both the PCV13 and PPSV23 should be administered routinely in series to all adults aged ≥65 years. Adults aged ≥65 years with no previous history or an unknown history of pneumococcal vaccination should receive PCV13 before PPSV23. Adults aged ≥65 years with a history of PPSV23 should receive PCV13, after which a second dose of PPSV23 may be administered for those adults with an indication for two doses of PPSV23.

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2016 Claims/Registry Individual Measure Flow
PQRS #111 NQF #0043: Pneumonia Vaccination Status for Older Adults

Denominator

Start

Patient Aged on Date of Service ≥ 65 Years

No

Not Included in Eligible Population/Denominator

Yes

Encounter as Listed in Denominator* (1/1/2016 thru 12/31/16)

No

Yes

Include in Eligible Population/Denominator (9 patients)

Numerator

Pneumonia Vaccination Administered or Previously Received

No

Reporting Met + Performance Met 4040F or equivalent (3 patients) a

Yes

Pneumonia Vaccination Not Administered or Previously Received, Reason Not Otherwise Specified

No

Yes

Reporting Met + Performance Not Met 4040F-8P or equivalent (4 patients) c

Reporting Not Met Quality-Data Code or equivalent not reported (1 patient)

SAMPLE CALCULATIONS:

Reporting Rate=
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%
Reporting Numerator (7 patients) = 7 patients

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

NOTE: Reporting Frequency: Patient-process

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The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.
2016 Claims/Registry Individual Measure Flow
PQRS #111 NQF #0043: Pneumonia Vaccination Status for Older Adults

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 Pneumonia Vaccination Administered or Previously Received:
   a. If Pneumonia Vaccination Administered or Previously Received equals Yes, include in Reporting Met and Performance Met.
   b. Reporting Met and Performance Met letter is represented in the Reporting Rate 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 Otherwise Specified.

7. Check Pneumonia Vaccination Not Administered or Previously Received, Reason Not Otherwise Specified:
   a. If Pneumonia Vaccination Not Administered or Previously Received, Reason Not Otherwise Specified equals Yes, include in Reporting Met and Performance Not Met.
   b. Reporting Met and Performance Not Met letter is represented in the Reporting Rate and Performance Rate 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 Reporting Not Met.

8. Check Reporting Not Met:
a. If Reporting Not Met equals No, Quality Data Code or equivalent not reported. 1 patient has been subtracted from the reporting numerator in the sample calculation.

<table>
<thead>
<tr>
<th>Sample Calculations:</th>
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<tbody>
<tr>
<td>Reporting Rate=</td>
</tr>
<tr>
<td>Performance Met (a=3 patients) + Performance Not Met (c=4 patients) / Eligible Population / Denominator (d=8 patients) = 7 patients / 8 patients = 87.50%</td>
</tr>
<tr>
<td>Performance Rate=</td>
</tr>
<tr>
<td>Performance Met (a=3 patients) / Reporting Numerator (7 patients) = 3 patients / 7 patients = 42.86%</td>
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