

Effectiveness of Care Measure

# Childhood Immunization Status



Learn how to improve your HEDIS® rates by using this tip sheet about the Childhood Immunization Status measure and best practices.

## Measure

Children turning age 2 during the measurement year who had all the required immunizations administered on or before the child's 2nd birthday:<sup>1</sup>

Combination	The following vaccines are required	
<b>10 vaccines</b>	<b>4 DTaP</b> (diphtheria, tetanus, acellular pertussis) <sup>1</sup>	<b>1 MMR</b> (measles, mumps, rubella) <sup>2, 4</sup>
	<b>4 PCV</b> (pneumococcal conjugate) <sup>1</sup>	<b>1 VZV</b> (varicella zoster vaccine) <sup>2, 4</sup>
	<b>3 HiB</b> (haemophilus influenza type B) <sup>1</sup>	<b>1 Hep A</b> (hepatitis A) <sup>2, 4</sup>
	<b>3 IPV</b> (polio) <sup>1</sup>	<b>2 Influenza</b> (flu) <sup>3</sup>
	<b>3 Hep B</b> (hepatitis B) <sup>2</sup>	<b>2-3 Rotavirus</b> <sup>1</sup> – two-dose vaccine, three-dose vaccine, or one dose of the two-dose and two of the three-dose vaccine
<sup>1</sup> Do not count a vaccination administered prior to 42 days after birth. <sup>2</sup> Count seropositive test results or history of illness. <sup>3</sup> Do not count a vaccination administered prior to 180 days after birth. One of the two flu vaccines can be a live, attenuated influenza vaccine (LAIV) administered to the child at the age of 2. <sup>4</sup> Vaccine must be administered on or between the child's 1st and 2nd birthday.		



CPT, HCPCS and ICD-10 codes	Vaccine		Code	
	Vaccine	Code	Vaccine	Code
Codes billed for vaccines supplied by the state must include an SL modifier.	<b>DTaP</b>	90700	<b>Measles</b>	90705, B05.0–B05.4, B05.81, B05.89, B05.9
	<b>PCV</b>	90670, G0009	<b>Mumps</b>	90704, B26.0–B26.3, B26.81–B26.85, B26.89, B26.9
	<b>HiB</b>	90644, 90647, 90648	<b>Rubella</b>	90706, B06.00–B06.02, B06.09, B06.81, B06.82, B06.89, B06.9
	<b>IPV</b>	90713	<b>Hep A</b>	90633, B15.0, B15.9
	<b>Hep B</b>	90740, 90744, 90747, B16.0, B16.1, B16.2, B16.9, B17.0, B18.0, B18.1, B19.10, B19.11, G0010 Newborn: 3E0234Z	<b>Influenza</b>	90655, 90657, 90660, 90661, 90672, 90685–90689, G0008
	<b>VZV</b>	90716, B01.0, B01.11, B01.12, B01.2, B01.81, B01.89, B01.9–B02.1, B02.21–B02.24, B02.29–B02.34, B02.39, B02.7–B02.9	<b>Rotavirus</b>	90681 (two-dose schedule) 90680 (three-dose schedule)
	<b>Combination Vaccines</b>	<b>Code</b>	<b>Combination Vaccines</b>	<b>Code</b>
<b>DTaP-IPV-HiB</b>	90698	<b>Measles-Rubella</b>	90708	
<b>DTaP-HepB-IPV</b>	90723	<b>Measles-Mumps-Rubella</b>	90707	
<b>HiB-HepB</b>	90748	<b>Measles-Mumps-Rubella-VZV</b>	90710	

PROVIDER COMMUNICATIONS

<sup>1</sup>NCQA. HEDIS MY 2020 and 2021 Technical Specifications for Health Plans, Volume 2, Washington, D.C., 2020.

Coverage for every stage of life™

## Childhood Immunization Status Coverage HEDIS® Tip Sheet (continued)

Exclusions and codes to report	Exclusion	Code
	<b>Anaphylactic reaction due to vaccine</b>	T80.52XA (initial), T80.52XD (subsequent), T80.52XS (sequel)
	<b>DTaP: Encephalopathy due to vaccine</b> (with a vaccine causing adverse effect code)	G04.32
	<b>Vaccine causing adverse effect</b>	T50.A15A, T50.A15D, T50.A15S
	<b>MMR, VZV or Flu: Disorders of the immune system</b>	D80.0–D81.2, D81.4, D81.6, D81.7, D81.89, D81.9–D82.4, D82.8–D83.2, D83.8–D84.1, D84.8, D84.9, D89.3, D89.810–D89.813, D89.82, D89.89, D89.9
	<b>MMR, VZV or Flu: HIV</b>	B20, Z21, B97.35
	<b>Rotavirus: History of intussusception</b>	K56.1
	<b>MMR, VZV and Flu: Lymphoreticular cancer, multiple myeloma or leukemia</b>	C81.00–C81.49, C81.70–C81.79, C81.90–C82.69, C82.80–C83.19, C83.30–C83.39, C83.50–C83.59, C83.70–C84.19, C84.40–C84.49, C84.60–C84.79, C84.90–C84.99, C84.A0–C84.A9, C84.Z0–C84.Z9, C85.10–C85.29, C85.80–C85.99, C86.0–C86.6, C88.2–C88.9, C90.00–C90.02, C90.10–C90.12, C90.20–C90.22, C90.30–C90.32, C91.00–C91.02, C91.10–C91.12, C91.30–C91.32, C91.40–C91.42, C91.50–C91.52, C91.60–C91.62, C91.90–C91.92, C91.A0–C91.A2, C91.Z0–C91.Z2, C92.00–C92.02, C92.10–C92.12, C92.20–C92.22, C92.30–C92.32, C92.40–C92.42, C92.50–C92.52, C92.60–C92.62, C92.90–C92.92, C92.A0–C92.A2, C92.Z0–C92.Z2, C93.00–C93.02, C93.10–C93.12, C93.30–C93.32, C93.90–C93.92, C93.Z0–C93.Z2, C94.00–C94.02, C94.20–C94.22, C94.30–C94.32, C94.80–C94.82, C95.00–C95.02, C95.10–C95.12, C95.90–C95.92, C96.0, C96.2, C96.20–C96.22, C96.29, C96.4, C96.9, C96.A, C96.Z
	<b>MMR, VZV and Flu: Anaphylactic reaction to neomycin</b>	No applicable codes
	<b>IPV: Anaphylactic reaction streptomycin, polymyxin B or neomycin</b>	No applicable codes
	<b>Hepatitis B: Anaphylactic reaction due to common baker's yeast</b>	No applicable codes
	<b>Rotavirus: Severe combined immunodeficiency</b>	D81.0–D81.2, D81.9

(continued)

## Childhood Immunization Status Coverage HEDIS® Tip Sheet (continued)

Medical chart tips	Notes in medical record must include	Chart deficiencies to avoid
	<ul style="list-style-type: none"> <li>• Patient's name</li> <li>• Patient's date of birth</li> <li>• Vaccine name</li> <li>• Date vaccine given (not date ordered)</li> <li>• Use of correct service coding (administrative data) with any of the CPT codes listed above is required as evidence of vaccine administration</li> </ul>	<ul style="list-style-type: none"> <li>• Vaccines received after the 2nd birthday</li> <li>• Missing vaccines (primarily Flu, DTaP and PCV)</li> <li>• Vaccine records given in the hospital at birth not obtained</li> <li>• No notes about allergies, contraindications or illness</li> <li>• No notes about parental refusal</li> </ul>
<b>Best practices</b>	<ul style="list-style-type: none"> <li>• Schedule newborns for vaccines as soon as possible to prevent them from falling behind, and place them on a schedule.</li> <li>• Educate staff to schedule vaccination/well-child visits PRIOR to 2nd birthday.</li> <li>• Use combination vaccines (DTaP-HepB-IPV; DTaP-IPV/HiB; DTaP IPV).</li> <li>• Review vaccination records before all appointments and give missing vaccines according to CDC's periodicity schedule at <a href="http://www.cdc.gov">www.cdc.gov</a>.</li> <li>• Create alerts within your electronic health record (EHR) to indicate when the vaccines are due.</li> <li>• Contact parents of members under age 2 to schedule well-child and vaccine visits.</li> <li>• Consider offering drop-in hours or after-hours appointments for member convenience.</li> <li>• Ensure doses are given on schedule, especially the needed doses during the first year of life. Missing the fourth doses of DTaP and PCV vaccines are primary barriers for having a compliant vaccine record.</li> <li>• Give flu vaccine and outreach for all members ages 6 months and older during flu season.</li> <li>• Use ALL visits (sick and well visits) to educate parents and give vaccines.</li> <li>• Educate parents on the importance of vaccinations to prevent certain diseases. Provide the member/parent support and education by providing fact-based educational materials that would decrease concerns about vaccines.</li> <li>• Reduce over-vaccination and ensure timely data submission by providing all completed vaccinations to the immunization registries (CAIR2, RIDE, PHIMS, SDIR, etc.).</li> <li>• If participating in Vaccines for Children (VFC), be sure to bill the immunization codes with an SL modifier.</li> <li>• Document all vaccines given with the date of service.</li> <li>• Implement standing orders.</li> <li>• Bill exclusionary diagnosis codes and dates given when applicable.</li> </ul>	