

Effectiveness of Care Measure

Immunization for Adolescents (IMA)



Learn how to improve your Healthcare Effectiveness Data and Information Set (HEDIS®) rates by using this tip sheet about the Immunization for Adolescents – Combination 2 (IMA-2) measure, its codes and best practices.

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| Measure | The percentage of children age 13, as of December 31 of the measurement year, who have completed the required IMA-2 vaccines on or before their 13th birthday. | |
| Vaccines required for combination-2 series | CPT code | Requirements |
| | At least one meningococcal serogroups A, C, W, Y vaccine | |
| | 90734 | Give vaccine on or between the member's 11th and 13th birthdays. |
| | At least one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine | |
| 90715 | Give vaccine on or between the member's 10th and 13th birthdays. | |
| At least two human papillomavirus (HPV) vaccines, with at least 146 days apart between the two vaccines, or at least three HPV vaccines | | |
| 90649–90651 | Give each dose on different dates of service on or between the member's 9th and 13th birthdays. | |
| Exclusions | Exclusion | Code |
| | Anaphylactic reaction due to vaccine | T80.52XA (initial), T80.52XD (subsequent), T80.52XS (sequel) |
| | Encephalopathy due to vaccine | G04.32 |
| | Vaccine causing adverse effect | T50.A15A, T50.A15D, T50.A15S |
| Medical chart tips | Include these chart notes | Avoid these chart deficiencies |
| | <ul style="list-style-type: none"> • Patient's name • Patient's date of birth • Dates of service • Names of vaccines • The dates given (not dates ordered) | <ul style="list-style-type: none"> • Vaccines received after the 13th birthday • Missing HPV vaccines • No notes about allergies, contraindications or illness • No notes about parental refusal |



(continued)

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Best practices

- Document and submit claims in a timely manner and with the correct code.
- Missing HPV vaccines are the primary reason for noncompliance:
 - Enhanced and consistent provider/clinic recommendation of HPV vaccine.
 - Ensure administration of the HPV vaccine when Tdap and meningococcal are given and during subsequent well and sick visits.
 - HPV rates are now reported for both females and males.
 - Schedule second HPV appointment before/when giving the first HPV vaccine.
- Consider offering drop-in hours or after-hours appointments for member convenience.
- Create alerts within your electronic health record (EHR) to indicate when the vaccines are due.
- Educate families on the importance of these vaccines (use of motivational interviewing).
- Educate staff to schedule vaccines and well-child visits prior to 13th birthday.
- Give call reminders for series vaccines.
- Reduce over-vaccination and ensure timely data submission by providing all completed vaccinations to the immunization registries (CAIR2, RIDE, PHIMS, SDIR, etc.).
- Implement standing orders.
- Meningococcal recombinant (serogroup B) vaccines do not count. Be sure your vaccination claims and records are clear about which meningococcal vaccine was given.