



One in a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures, commonly referred to as HEDIS[®] measures.

Immunizations for Adolescents (IMA)

Effectiveness of Care HEDIS® Measure*

HEDIS measure description

The percentage of adolescents who had one dose of meningococcal vaccine, one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine, and have completed the human papillomavirus (HPV) vaccine series by their 13th birthday.

Measure population (denominator)

Adolescents who turn 13 years of age during the measurement year.

Measure compliance (numerator)

Did you know?

- Cervical cancer was once the leading cause of cancer death for women in the U.S. but is now considered the most preventable of all female cancers.
- The rate of whooping cough (pertussis) is on the rise for preteens and teens. In recent years, the U.S. has experienced the greatest number of cases since 1959.
- People between the ages of 16 and 23 have the highest rates of meningococcal disease in the U.S.

| Vaccine | Age (on or between) | Dose | Anaphylaxis† (on or before) | Encephalitis† (on or before) |
|---------------|-------------------------------|------------------|---------------------------------------|--|
| Meningococcal | 11th and 13th birthdays | 1 | 13th birthday | |
| Tdap | 10th and 13th birthdays | 1 | 13th birthday | 13th birthday |
| HPV | 9th and 13th birthdays | 2 or 3 doses* | 13th birthday | |

Adolescents who had each of the following by their 13th birthday:

† Due to specified vaccine.

*2 dose series must be given at least 146 days apart.

Note: Must have dated evidence of the antigen, vaccine administration, or anaphylaxis in the medical record.

This measure applies to commercial members only.

Exclusions

- Members in hospice or using hospice services anytime during the measurement year
- Members deceased during measurement year

Helpful HEDIS hints

- Educate adolescents and parents on the importance of immunizations.
- **Document** all vaccines. If patients received vaccines elsewhere, such as the health department, make sure you document that. Obtain a record of the vaccines, if possible.
- **Train** your staff. Ask your staff to prepare charts in advance of visits, making a note of any overdue or missing vaccinations. Put a reminder system in place, using mail, email or text messaging.
- **Review** patient records. Take advantage of all visits (e.g., those to obtain birth control medication or a sports physical) to review the patient's immunization record and update vaccines, as necessary.
- Do not count meningococcal recombinant (serogroup B, MenB) vaccines.
- Use Michigan Care Improvement Registry for immunization tracking (MCIR.org).

Tips for coding

Code correctly. Clear and correct procedure coding is essential, with the submission of claims and encounter data in a timely fashion. See the table below for details.

Codes to identify adolescent immunizations

| Vaccine | CPT** codes | ICD-10 |
|-----------------------|---------------------|--------|
| Meningococcal vaccine | 90619, 90733, 90734 | |
| Тдар | 90715 | |
| HPV | 90649, 90650, 90651 | |

Resources

- 1. National Foundation for Infectious Diseases. 2021. "10 Reasons For Teens To Get Vaccinated." nfid.org/immunization/10-reasons-for-teens-to-be-vaccinated/
- Centers for Disease Control and Prevention (CDC). 2022. "2022 Recommended Immunizations for Children 7–18 Years Old."

cdc.gov/vaccines/schedules/downloads/teen/parent-version-schedule-7-18yrs.pdf

^{*} HEDIS[®], which stands for Healthcare Effectiveness Data and Information Set, is a registered trademark of the National Committee for Quality Assurance, or NCQA.

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