



SDPS MEMORANDUM

MEMO NBR: 11-308-HD

DATE: October 28, 2011

SUBJECT: Clarification for Version 4.0b of the Hospital Inpatient Quality Reporting Program Specifications Manual- IMM

TO: SDPS HRI Point of Contact, SDPS IICP Point of Contact, SDPS ICPC Point of Contact, SDPS MEDPCC Point of Contact

FROM: James Poyer
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Recent updates to the Advisory Committee on Immunization Practices (ACIP) Recommendation for Prevention of Pneumococcal Disease Among Infants and Children- Use of 13 valent pneumococcal conjugate vaccine and 23 valent pneumococcal polysaccharide vaccine (MMWR December 10, 2010)¹, necessitate that CMS and The Joint Commission provide additional instructions for the data element *Pneumococcal Vaccination (PPV 23) Status*. According to the ACIP, children up to 18 years of age with high risk conditions for invasive pneumococcal disease who have not previously received PCV 13 should be administered PCV 13 **before** PPV 23. In addition, ACIP recommends an interval of 8 weeks between administrations of the two vaccines. As currently specified in the Hospital Inpatient Specifications manual version 4.0b for January 1, 2012 hospital discharges, cases could fail the performance measure if the practitioner does not administer PPV 23, because the practitioner appropriately chose to administer PCV 13 to a child 6 to 18 years of age. PCV 13 was licensed by the Food and Drug Administration on February 24, 2010, so children age 6 to 18 years at risk of invasive pneumococcal disease who have not had a dose of pneumococcal vaccine since early 2010 generally should receive a dose of PCV 13.

To mitigate this, CMS and The Joint Commission are instructing abstractors to select Allowable Value “1” for children 6 to 18 years of age that received either PCV 13 or PPV 23 during the current hospitalization. To account for children 6 years of age **or older** who receive the vaccination within the 8 weeks prior to hospitalization, the abstractor should select Allowable

¹ Available at: <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5911a1.htm>.

Value “4”. Currently Allowable Value “4” is restricted to patients who are 6 years of age, but we are expanding this population to children who are 6 to 18 years of age.

In addition, we are providing additional abstraction guidance regarding selection of Allowable Value “2” (“The patient received pneumococcal vaccine anytime in the past.”). If parents report and it is documented in the chart that a child 6 to 18 years of age is “up to date” on their childhood vaccines, you may select Allowable Value “2”. Note that documentation of the acronym “UTD” alone is not sufficient to select Allowable Value “2”.

This guidance applies to abstraction of records for patients discharged January 1, 2012 through June 30, 2012.

CMS and Joint Commission plan no changes to the current Hospital Inpatient Quality Reporting Program Specifications Manual, Version 4.0 effective for January 2012 discharges, but this memo serves as guidance for abstraction.

We believe these instructions will answer questions surrounding pneumococcal vaccine administration. Your feedback is appreciated and we strive to remain responsive to your concerns. Again, if you have additional questions or comments about these instructions, please send them to QUEST:

<https://www.qualitynet.org/dcs/ContentServer?pagename=Quest/Content/Search>.