



Quality Measure Tip Sheet: Pneumonia Vaccine—Long Stay

This measure was previously approved or given time limited endorsement by the National Quality Forum (NQF) but has been withdrawn from NQF submission.

Quality Measure Overview

- This measure reports the percentage of long-stay residents whose pneumococcal vaccine status is up to date during the 12-month reporting period.
- Residents meeting any of the following criteria on the selected target assessment qualify if they:
 - Have an up-to-date pneumococcal vaccine status, or
 - Were offered and declined the vaccine, or
 - Were ineligible due to medical contraindications (e.g., anaphylactic hypersensitivity to components of the vaccine, bone marrow transplant within the past 12 months, or in receipt of a course of chemotherapy within the past two weeks).

Exclusions: Resident’s age on target date if selected target assessment is less than 5 years (i.e., resident has not yet reached 5th birthday on target date)

MDS Coding Requirements

In the Minimum Data Set (MDS), refer to section O:

- Indicate if the resident’s pneumococcal vaccination is current.
- State the reason, if applicable, that the vaccine was not received:
 - Not eligible (i.e., medically contraindicated)
 - Offered and declined
 - Not offered

Should the Resident Receive the Vaccine?

- All adults 65 years of age or older should receive the vaccine.
- Certain individuals should be vaccinated before the age of 65:
 - Immunocompromised persons 2 years of age and older who are at increased risk of pneumonia due to Hodgkin’s disease, leukemia, lymphoma, multiple myeloma, nephrotic syndrome, cochlear implant, organ transplants, chemotherapy treatments, high-dose corticosteroids for 14 days or longer, and asymptomatic or symptomatic HIV.
- Individuals living in environments or social settings that could increase exposure risk should be vaccinated.
- If vaccination status is unknown, the individual should be vaccinated.
- Pneumonia vaccine is given once in a lifetime. Revaccination is given in certain situations:
 - Persons 2 years of age and older who are at increased risk of pneumonia due to asplenia, sickle cell disease, HIV or AIDS, cancer, leukemia, lymphoma, Hodgkin’s disease, multiple myeloma, generalized malignancy, chronic renal failure, nephrotic syndrome, chemotherapy treatments, high-dose corticosteroids, and asymptomatic or symptomatic HIV.
- Persons 65 years or older should be administered a second dose of the vaccine if they received the first dose of the vaccine more than five days earlier and were younger than 65 years old at the time of the first dose.
- If the resident has had a severe allergic reaction to vaccine components or following a prior dose of the vaccine, he or she should not be vaccinated.
- If the resident has a moderate to severe illness, he or she should not be vaccinated until the condition improves or stabilizes. However, individuals with a minor illness, such as a cold, may receive the vaccine.

Consider These Questions ...

- Was the MDS coded as per the Resident Assessment Instrument requirements?
- Does a process exist for obtaining the required completed documentation (i.e., for consent, decline, and/or contraindicated to administer) prior to submitting the MDS?
- Does the facility have an internal tracking process to ensure that documentation is completed and available for review?
- Is the required documentation accessible to MDS prior to coding?
- Does evidence exist that the resident is educated on the importance of receiving the vaccine?
- Does evidence exist of administration of the vaccine?

For guidance on quality measures, reach out to Health Services Advisory Group (HSAG).

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