



## Prioritizing Measure Gaps: Adult Immunizations Public Web Meeting June 30, 2014

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The National Quality Forum (NQF) convened a public web meeting to discuss the Prioritizing Measure Gaps Adult Immunizations draft report meeting on June 30, 2014. The online recording can be found by accessing the following link: [June 30, 2014](#).

### Introductions and Meeting Objectives

Committee co-chair Dr. Ernest Moy, AHRQ, welcomed the public audience, and reviewed the meeting objectives. The objectives were to:

- Build a shared understanding of the results of the committee deliberations
- Review highlights and themes from the draft reports to inform public commenters
- Answer participant questions related to the project

### Project Overview

Juliet Feldman, Project Manager, NQF, provided a general overview of the ***Priority Setting for Health Care Performance Measurement: Getting to Measures that Matter*** project and objectives of the Adult Immunizations sub-task. Additionally, she presented the public with a roster of the full committee and “key informants” interviewed by NQF. The key informants represented subject matter experts in various fields related adult immunization performance measurement.

### Conceptual Framework & Environmental Scan

Dr. Moy presented the conceptual measurement framework used by the committee in its analysis and prioritization of measurement needs. The framework illustrates measure gaps in specific age groups and subpopulations including young adults, adults, the elderly and special population such as pregnant women, people with chronic disease, and healthcare workers. The framework is organized around the [adult immunization schedule](#) issued by the Advisory Committee on Immunization Practices (ACIP) and Centers for Disease Control and Prevention (CDC).

Dr. Moy also addressed the purpose and results of the project’s environmental scan. NQF surveyed a number of key measure sources and identified 225 existing adult immunization measures, as well as concepts, that could be further developed into performance measures. The scan facilitated a broader understanding of the existing adult immunization performance measurement landscape.

### Measurement Priorities and Recommendations

Committee co-chair Dr. Amir Qaseem, American College of Physicians, provided an overview of the committee’s measurement priorities discussions and subsequent recommendations. He described each of the ten priorities and rationale for the recommendation in detail:

- HPV vaccination catch-up for females ages 19-26 years and males ages 19-21 years
- Tdap/pertussis-containing vaccine for ages 19-59
- Zoster vaccination for ages 60-64 years
- Zoster vaccination for ages 65+ years (with caveats)

- Composite including immunization with other preventive services
- Composite of Tdap and influenza vaccination for pregnant women
- Composite including influenza, pneumococcal and hepatitis B vaccination measures with diabetes care processes or outcomes for individuals with diabetes
- Composite including influenza, pneumococcal and hepatitis B vaccinations measures with renal care measures for individuals with kidney failure/end stage renal disease (ESRD)
- Composite including Hepatitis A and B vaccinations for individuals with chronic liver disease
- Composite of all ACIP/CDC recommended vaccinations for healthcare personnel

Dr. Qaseem described the additional prioritization conducted by the committee to identify the top two short-term and long-term priorities which were:

- Short Term (1-2 years)
  - Pregnancy composite of Tdap and influenza vaccination
  - Diabetes composite including influenza, pneumococcal and Hepatitis B vaccinations with other diabetes care processes or outcomes
- Long Term (2-4 years)
  - Composite measure that includes immunization with other preventive services
  - Healthcare personnel composite of all ACIP recommended vaccinations

Dr. Qaseem also provided an overview of the committee's overarching recommendations for measurement in the areas of measure accuracy, efficiency, and focusing on what will be most meaningful. Dr. Qaseem emphasized the recommendations made for harmonization and alignment of population and provider measures; focusing on disparities and special populations; including non-traditional providers (pharmacies, public/community health clinics, etc.) in measurement; and promoting development eMeasures and use of EHRs, and Immunization Information Systems. All recommendations can be found in the [draft report](#), which is available for public comment until July 14, 2014.

Member of the public were given the opportunity to comment on the report and ask questions. Dr. Moy and Dr. Qaseem responded to questions about costs to employers and employer input in the recommendations; how the committee planned to address new vaccines in the coming years such as the newly approved Meningococcal Serogroup B vaccine, and the need for incorporating the newest and most up-to-date ACIP recommendations for measures used in Medicare quality programs.

### Next Steps

The meeting concluded with a discussion of next steps regarding public comment on the draft report. The comment period is currently open until July 14, 2014. The final report is due to HHS on August 15, 2014.