Vaccines and Quality – What's the Connection?

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Today's Meeting Objectives

- Understand what your facility's flu and pneumonia vaccination rates reveal about the strength of your quality program

- Learn what your flu and pneumonia vaccination rates reveal about your admission practices

- Recognize how MDS coding plays a part in your quality measure rates

- Learn how to use EHR, CASPER and Provider Preview reports in your quality program

- Learn how to increase your vaccination quality measure rates

Creating Urgency for the Flu and Pneumonia Vaccine
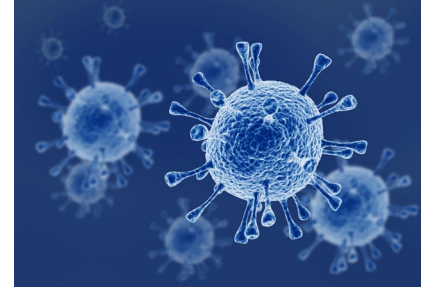
- 54%-70% of seasonal flu-related hospitalizations occur in people ≥65 years
- The risk is greater for people ≥85 years
  - 16 times more likely to be hospitalized than persons 65-84 years
- 70%-85% of seasonal flu-related deaths occur in people ≥65 years
- Fatalities in long-term care facilities from influenza complications as high as 55%
- Number of visits to emergency departments with pneumonia as the primary diagnosis: 1.5 million
- Number of deaths from Pneumonia in 2019: 43,881

https://www.cdc.gov/flu/about/disease/65over.htm
https://www.cdc.gov/nchs/fastats/pneumonia.htm

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Vaccine Effectiveness – Spread the Message

- In 2019-2020, the flu vaccine prevented:
  - An estimated 7.5 million influenza illnesses
  - 3.7 million influenza-associated medical visits
  - 105,000 influenza-associated hospitalizations
  - 6,300 influenza-associated deaths

- A 2017 study found that during 2009-2016, flu vaccines reduced the risk of flu-associated hospitalization among older adults by about 40%.

- A 2018 study showed that from 2012 to 2015, flu vaccination among adults reduced the risk of being admitted to ICU with flu by 82%.

https://www.cdc.gov/flu/prevent/keyfacts.htm

Vaccine Effectiveness – Spread the Message

- Researchers concluded the clinical benefit of PCV13:
  - 46% efficacy against pneumococcal pneumonia
  - 45% efficacy against non-bacteremic pneumococcal pneumonia
  - 75% efficacy against invasive pneumococcal disease

- Studies show that getting 1 shot of PPSV23 protects:
  - Between 10 to 17 out of 20 healthy adults against invasive pneumococcal disease
  - 3 in 4 adults ages 65 years or older against invasive pneumococcal disease
  - 9 in 20 adults ages 65 years or older against pneumococcal pneumonia

https://www.cdc.gov/vaccines/vpd/pneumo/hcp/about-vaccine.html
https://www.cdc.gov/vaccines/vpd/pneumo/public/index.html

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Vaccination Rates – What Does it Reveal About My Quality Program?

- Admission Practices

- Coding Practices

- Reporting Practices

- Putting all the Pieces Together

Admissions is not a person.

Admissions is not a department.

Admissions is a PROCESS.

Admission Practices for QAPI

- Establish an admissions review team
- Capture as much data as possible on admission
  – Interview the family
  – Where did the resident come from?
  – Referring facility–did they send you all the information?
- Accurately document this information in the EHR
- Always remember that information in the chart is used for:
  – Care planning
  – MDS Coding
  – Quality Improvement

Be Kind to Your MDS Coding Staff

- Ensure information well-documented

- Ensure the EHR is well-charted with complete information

- Don't make them dig for information or have an incomplete EHR

Remember: The way you answer the questions on the MDS determines your quality measure rate on Nursing Home Compare

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Coding Practices – MDS Accuracy

- Code accurately per *Resident Assessment Instrument* requirements

- The Influenza Vaccination measure is calculated once per the 12-month influenza season, which begins on July 1 of a given year and ends on June 30 of the subsequent year, and reports data for residents who were in the facility for at least one day during the target period of October 1 through March 31.
  - See MDS 3.0 RAI Manual section O0250 Influenza Vaccine for coding examples

- Ensure you have a process for EHR documentation for vaccination consent, decline, or contraindicated to administer

Coding Practices – MDS Accuracy

- Have an internal tracking process and oversight to ensure all vaccine opportunities are taken advantage of and documentation is complete and charted
  - Don't make your MDS coding staff dig for information
  - Include this process for QAPI oversight and review

- Document that the resident has been educated on the importance of receiving the flu, pneumonia and COVID vaccines

- Ensure the EHR accurately documents the administration of vaccines in your facility or history of receiving vaccines out of the facility

Tips for Success – Short Stay and Long Stay Vaccination Quality Measures

- Have your documentation ready for the first MDS submission
- There is a small window of time to get this right
- Capture the essentials on admission before the first MDS is due
  - Offered and declined
  - Medically contra-indicated
    - Physician documentation in the chart
    - Resident is too weak or recovering from illness, running a fever, etc.
    - Document in the chart that you will reassess after seven days
- Have your vaccination process include a reassessment in seven days—include team member(s) to oversee

Ensure the QAPI Team is Aware of the Vaccination Quality Measure Descriptions

The Label on CMS Care Compare   **VS**   The Label for the MDS Quality Measure

Flu and pneumonia prevention measures - Long-stay residents		
Percentage of long-stay residents who needed and got a flu shot for the current flu season. *Higher* percentages are better.	100.0%	97.6%
Percentage of long-stay residents who needed and got a vaccine to prevent pneumonia. *Higher* percentages are better.	97.2%	97.6%

- Percent of Residents Assessed and Appropriately Given the Pneumococcal Vaccine
- Percent of Residents Assessed and Appropriately Given the Seasonal Influenza Vaccine

Quality Measure User's Manual

How you answer questions on the MDS 3.0 Resident Assessment Instrument defines your quality measures

MDS 3.0 Quality Measures

USER'S MANUAL

The CMS Care Compare Influenza Quality Measure

Table 2-12
MDS 3.0 Measure: Percent of Residents Assessed and Appropriately
Given the Seasonal Influenza Vaccine (Long Stay)
(NQF #0681) (CMS ID: N016.02)

Measure Description

The measure reports the percent of long-stay residents who are assessed and/or given, appropriately, the influenza vaccination during the most recent influenza season.

Measure Specifications

Numerator

Residents meeting **any** of the following criteria on the selected influenza vaccination assessment:

1. Resident received the influenza vaccine during the most recent influenza season, either in the facility (O0250A= [1]) *or* outside the facility (O0250C = [2]); *or*
2. Resident was offered and declined the influenza vaccine (O0250C = [4]); *or*
3. Resident was ineligible due to medical contraindication(s) (O0250C = [3]) (e.g., anaphylactic hypersensitivity to eggs or other components of the vaccine, history of Guillian-Barré Syndrome within 6 weeks after a previous influenza vaccination, bone marrow transplant within the past 6 months).

Denominator

All long-stay residents with a selected influenza vaccination assessment. This includes all residents who have an entry date (A1600) on or before March 31 of the most recently completed influenza season and have an assessment with a target date on or after October 1 of the most recently completed influenza season (i.e., the target date must fall on or between October 1 and June 30), except those with exclusions.

Exclusions

Resident's age on target date of selected influenza vaccination assessment is 179 days or less.

Notes

This measure is only calculated once per 12-month influenza season which begins on July 1 of a given year and ends on June 30 of the subsequent year and reports data for residents who were in the facility for at least one day during the target period of October 1 through March 31.

Covariates

Not applicable.

The way you answer these questions on the MDS determines your quality measure rate on Nursing Home Compare

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The CMS Care Compare Pneumococcal Quality Measure

MDS 3.0 Measure: Percent of Residents Assessed and Appropriately Given the Pneumococcal Vaccine (Long Stay)
(NQF #0683) (CMS: N020.02)

Measure Description
This measure reports the percent of long-stay residents whose pneumococcal vaccine status is up to date.

Measure Specifications

Numerator
Residents meeting any of the following criteria on the selected target assessment:

1. Have an up to date pneumococcal vaccine status (O0300A = [1]); *or*
2. Were offered and declined the vaccine (O0300B = [2]); *or*
3. Were ineligible due to medical contraindication(s) (e.g., anaphylactic hypersensitivity to components of the vaccine; bone marrow transplant within the past 12 months; *or* receiving a course of chemotherapy within the past two weeks) (O0300B = [1]).

Denominator
All long-stay residents with a selected target assessment.

Covariates
Not applicable.

The way you answer these questions on the MDS determines your quality measure rate on Nursing Home Compare

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Quality and Reporting Practices: The Pulse of your Quality Program

How often do you review:
- Facility Quality Indicator Reports
- Resident Roster Mix
- Provider Preview Reports
- Care Compare data
  - https://data.cms.gov/provider-data/
- Check the Folder section of your inbox for important information
  - CMS utilizes the CASPER Shared folders to communicate important information regarding findings of noncompliance with the requirement to report COVID-19 data to the Centers for Disease Control and Prevention (CDC) through the National Healthcare Safety Network (NHSN)
  - This includes the CMS 2567 and Enforcement Notices

https://www.cms.gov/files/document/qso-21-19-nh.pdf
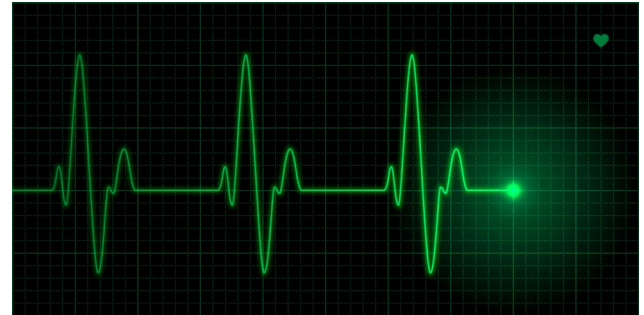
Know Where to Find Your Vaccination Data

Quality Measure Label	Long Stay	CASPER QM Module	NH Care Compare	Five Star	Provider Preview
Percent of Residents Assessed and Appropriately Given the Pneumococcal Vaccine	Long	No	Yes	No	Yes
Percent of Residents Assessed and Appropriately Given the Seasonal Influenza Vaccine	Long	No	Yes	No	Yes
Residents Who Received the Seasonal Influenza Vaccine	Long	No	No	No	Yes
Residents Who Were Offered and Declined the Seasonal Influenza Vaccine	Long	No	No	No	Yes
Residents Who Did Not Receive, Due to Medial Contraindication, the Seasonal Influenza Vaccine	Long	No	No	No	Yes
Residents Who Received the Pneumococcal Vaccine	Long	No	No	No	Yes
Residents Who Were Offered and Declined the Pneumococcal Vaccine	Long	No	No	No	Yes
Residents Who Did Not Receive, Due to Medial Contraindication, the Pneumococcal Vaccine	Long	No	No	No	Yes

Accessing Your Provider Preview Reports
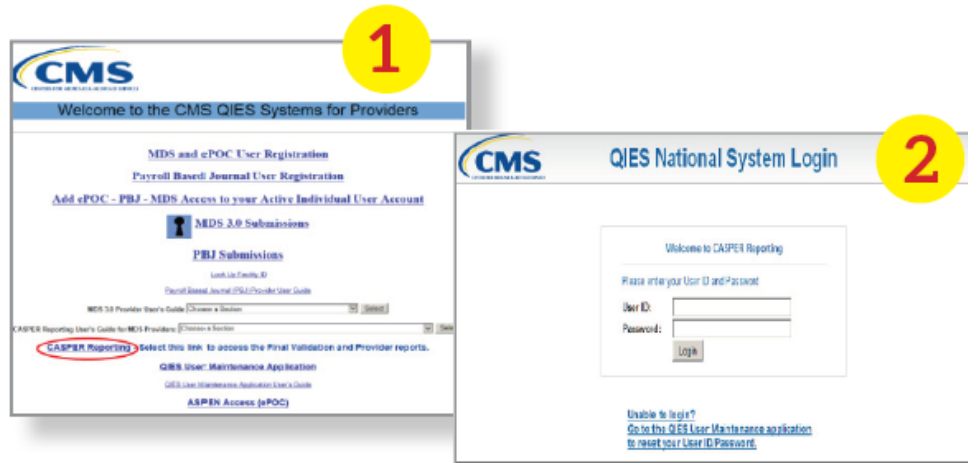
STEP 1 | QIES System for Providers
Access the Centers for Medicare & Medicaid Services (CMS) Quality Improvement and Evaluation System (QIES) for providers and click CASPER Reporting on the left.

STEP 2 | Login
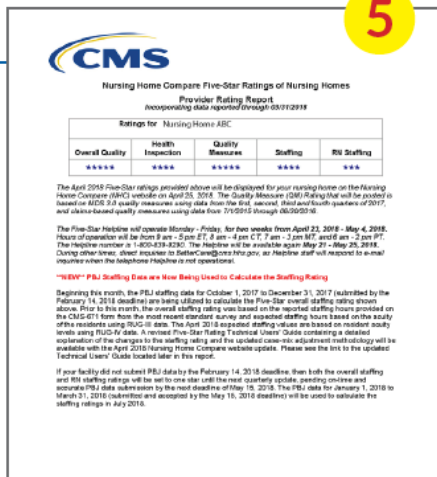Use your User ID and Password to access the CASPER site.

https://www.telligenqinqio.com/resource/our-work/nursing-home-care/nursing-home-care-resources/how-to-access-the-nursing-home-compare-five-star-rating-preview-report/

STEP 3 | Folders

Click **Folders** at the top of your screen.

STEP 4 | Five-Star Report

Click the first **Five-Star Report** PDF at the top of your screen.

STEP 5 | View SNF Five-Star Report

Review the **SNF (skilled nursing facility) Five-Star Report**.

https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Skilled-Nursing-Facility-Quality-Reporting-Program/SNF-Quality-Reporting-Program-Public-Reporting

CASPER MDS 3.0 NH QM Reports

- Utilize these QM reports in your QAPI process

- Analyze your data for outliers, patterns and missing information

Figure 11-1.   CASPER Reports Page – MDS 3.0 QM Reports Category
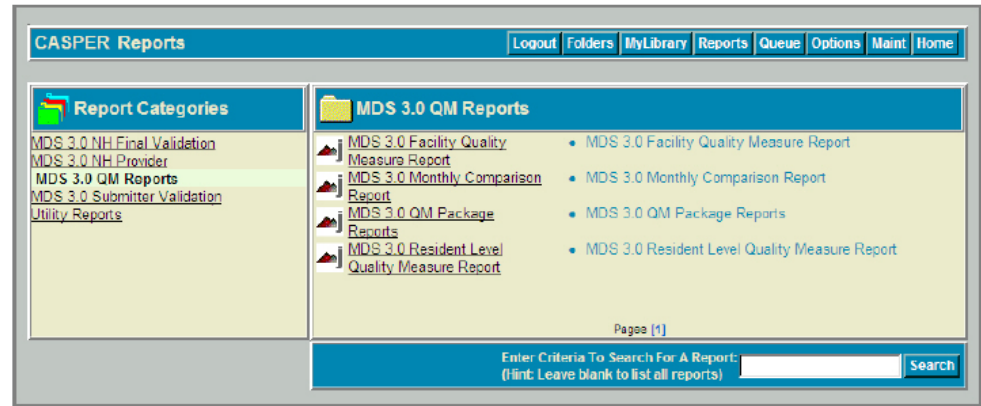
https://qtso.cms.gov/system/files/qtso/cspr_sec6_mds_prvdr_0.pdf

Putting the Pieces Together – QAPI Opportunities

Learn what your data is telling you

- Admission practices – are we capturing all the information?
- Coding Practices – are we giving the MDS coders what they need?
- QAPI Team for oversight
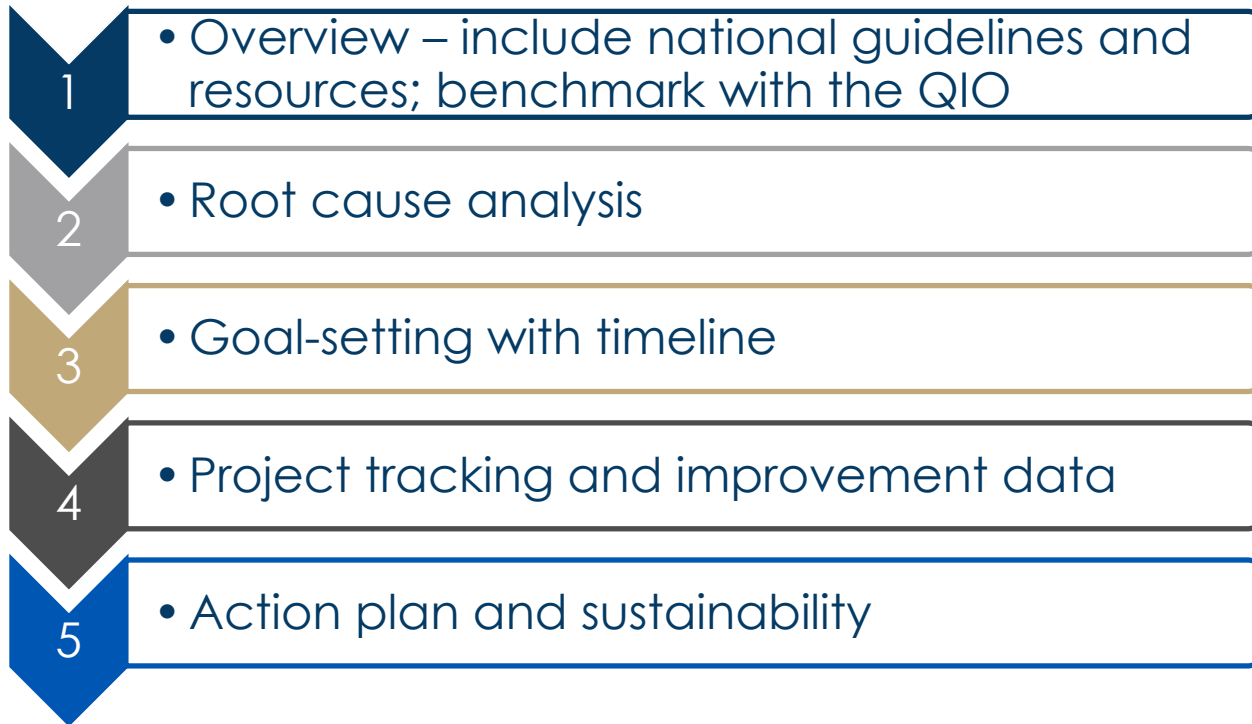- Initiate a Performance Improvement Project

Vaccination quality measures can reach 100%

- Goal 1: 100% of our residents will be assessed/offered the influenza vaccination annually
- Goal 2: 100% of our residents will be assessed/offered if appropriate the pneumococcal vaccination upon admission

If not getting 100%, why?

- Information was missed on admission or incomplete information in the EHR
- Lack of understanding of how the quality measures work
- Lack or incomplete vaccination screening/tracking systems for residents
- Perform chart audits to determine the root cause(s) of why goals were not reached
- Lack of documentation in chart from medical provider regarding immunization decisions

QAPI Project: Reaching Vaccination Goals

1 • Overview – include national guidelines and resources; benchmark with the QIO

2 • Root cause analysis

3 • Goal-setting with timeline

4 • Project tracking and improvement data

5 • Action plan and sustainability
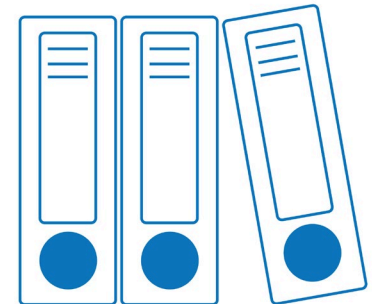
Suggested Interventions to Try

Initiate a Vaccination Performance Improvement Project—include MDS coders for your multi-disciplinary team and process design

Analyze and utilize all data reports in your quality meetings—the more team members, the better

Create a vaccination tracking sheet and monitor for patterns

Celebrate success once your reach your vaccination goals and share with staff

Resources for Improvement

QAPI

- **CMS QAPI at a Glance** https://www.cms.gov/medicare/provider-enrollment-and-certification/qapi/downloads/qapiataglance.pdf
- **Process Tool Framework** https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/Downloads/ProcessToolFramework.pdf

CDC

- **CDC Vaccines:** https://www.cdc.gov/vaccines/index.html
- **CDC for Healthcare Providers:** https://www.cdc.gov/vaccines/hcp/index.html
- **CDC Long-term Care Flu Vaccine Toolkit**: https://www.cdc.gov/flu/toolkit/long-term-care/index.htm

Quality Measures

- **Quality Measure User's Guide** https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/NHQIQualityMeasures
- **Claims Based Quality Measure User's Guide** https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandComplianc/Downloads/Nursing-Home-Compare-Claims-based-Measures-Technical-Specifications-April-2019.pdf
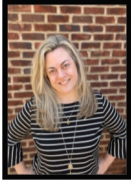- **Care Compare** https://www.medicare.gov/care-compare/?providerType=NursingHome&redirect=true

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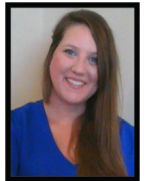
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