



December 9, 2019

Dear California Immunization Coalition members:

Re: Using new HEDIS prenatal immunization measure to protect infants and mothers

Now that we have a new HEDIS prenatal immunization measure,<sup>1</sup> let's use it! Please consider taking the steps below to assess maternal Tdap and influenza vaccination levels in your jurisdiction. Then, use the results as your baseline for future interventions aimed at protecting more pregnant women and their infants in your community.

As in the U.S., California has significant disparities, with lower vaccination rates among low-income mothers.<sup>2</sup> Infants born to women with Medi-Cal coverage have more than twice the risk of pertussis than those who are privately-insured.<sup>3</sup> This year in our state, 147 infants so far have fallen ill with pertussis;<sup>4</sup> many required hospitalization, and [one infant died](#).

Steps for **health plans** (commercial and Medi-Cal):

1. Assess your Health Plan's current performance on the HEDIS prenatal immunization measure.
2. Use results to develop focused quality improvement efforts to raise immunization levels.<sup>5</sup>
3. Notify the National Committee on Quality Assurance (NCQA) by Feb 2020 that your Plan intends to submit prenatal immunization results for women giving birth in 2019.<sup>6</sup> NCQA will start public reporting of this measure for women giving birth in 2020 and is also considering this measure for inclusion in its other programs, such as Health Plan accreditation.

Steps for **local immunization coalitions and health departments**:

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<sup>1</sup> See p. 32 of: <https://www.ncqa.org/wp-content/uploads/2018/10/HEDIS-2019-Volume-2-Technical-Update.pdf>

<sup>2</sup> CDC [Vital Signs](#); [MIHA](#)

<sup>3</sup> Winter, K; Harriman K. Risk markers for pertussis among infants <4 months of age: Understanding the Hispanic disparity. *PIDJ*, Feb 2018 Vol 37(2) p126-131

<sup>4</sup> <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/pertussis.aspx>

<sup>5</sup> For examples of quality improvement interventions, see [prenatal Tdap toolkit](#).

See also [the ACOG's immunization website](#). For examples of Plan interventions, see:

<http://www.partnershiphp.org/Providers/Quality/Pages/Perinatal-QIP-2018-19.aspx>

<http://www.immunizeca.org/wp-content/uploads/2018/04/Immunization-in-pregnancy-Robert-Moore-PHC.pdf>

<http://www.acphd.org/media/540904/best-practices-la-clinica-advice.pdf>.

<sup>6</sup> <https://www.ncqa.org/hedis/data-submission/>



4. Ask the Medi-Cal Managed Care Plan(s) (MCPs) in your jurisdiction to take steps 1-3 above, and report back to you.
5. Use results to discuss how you can support MCPs and prenatal care providers in your jurisdiction to raise prenatal immunization rates.
  - a. **Immunizing on site works best.**<sup>7</sup> Ask your MCPs about rewarding their network prenatal care providers with a \$25 incentive payment for each Tdap immunization administered to a pregnant woman. (See [Value Based Payment \(VBP\) program](#))<sup>8</sup>
  - b. **Assist prenatal care providers who don't yet immunize on site.**
    - Local Health Departments can offer free, State Prenatal Tdap starter doses. (For more information, contact [Rebeca.Boyte@cdph.ca.gov](mailto:Rebeca.Boyte@cdph.ca.gov)).
    - Remind providers not stocking Tdap to make a [strong referral](#) to an in-network pharmacy and follow up to ensure vaccination occurred. Note that vaccinations are a pharmacy benefit for adults in MCPs as well as for the Medi-Cal Fee-For-Service program.

#### Steps for **medical groups, healthcare facilities and health systems:**

6. Assess the prenatal vaccination levels of patients seen in your group or health system using the HEDIS measure.
7. Determine how your group or health system can improve your rates; then make quality improvement interventions.<sup>5</sup>
8. Encourage the health plans you work with to take steps 1-3 above.

#### **Everyone:**

9. Advocate for inclusion of the prenatal immunization measure in the 2021 Centers for Medicare and Medicaid (CMS) Child Core Set.<sup>9</sup> This would then pave the way for our state Medicaid agency to require all MCPs to report this measure.
  - a. Draft a position for your professional association in favor of adding the measure to the Medicaid Child Core Set.<sup>10</sup>

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<sup>7</sup> [ACOG statement](#)

<sup>8</sup> Does not apply to federally qualified health centers and certain other clinics. See [https://www.dhcs.ca.gov/provgovpart/Pages/VBP\\_Measures\\_19.aspx](https://www.dhcs.ca.gov/provgovpart/Pages/VBP_Measures_19.aspx).

<sup>9</sup> In 2024, all state Medicaid agencies will be mandated to report on all measures in the CMS Child Core Set. <https://www.medicaid.gov/federal-policy-guidance/downloads/sho18010.pdf>

<sup>10</sup> <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/child-core-set/index.html>



Thank you in advance for your support and keeping us posted on your efforts. If you would like assistance, please email me at [cmartin@immunizeca.org](mailto:cmartin@immunizeca.org).

Sincerely,

*Catherine Martin*

Catherine Flores Martin, Executive Director  
California Immunization Coalition