

August 10, 2020

Child and Adult Core Set Annual Review Stakeholder Workgroup Members c/o Margo Rosenbach, Project Director, Mathematica

Comments to be submitted to: <u>MACCoreSetReview@mathematica-mpr.com</u>

RE: 2021 Core Set Review Public Comment

Dear Members of the Child and Adult Core Set Annual Review Workgroup:

On behalf of the American Immunization Registry Association (AIRA), we thank you for the opportunity to submit comments on the immunization measures included as part of the Recommendations for Improving the Core Sets of Health Care Quality Measures for Medicaid and CHIP draft report.

The American Immunization Registry Association (AIRA) is a national membership organization that promotes the development and implementation of immunization information systems (IIS) as an important tool in preventing and controlling vaccine-preventable diseases. These comments are a compilation of the input of our members, representing a community of almost 700 members and 80 public health organizations.

Immunization information systems (IIS), previously known as immunization registries, are confidential, population-based, computerized databases that record all immunization doses administered by participating providers to persons residing within a given geopolitical area. At the point of clinical care, an IIS can provide consolidated immunization records and a forecast for immunizations due for use by a vaccination provider in determining appropriate client vaccinations. At the population level, an IIS provides aggregate data on vaccinations for use in surveillance, quality improvement and program operations, and in guiding public health action with the goals of improving vaccination rates and reducing vaccine-preventable disease.

Diseases that are vaccine-preventable and are backed by vaccination recommendations from the Advisory Committee for Immunization Practices (ACIP) (e.g. influenza, pneumococcal, Tdap, and zoster) continue to cause preventable and unnecessary morbidity and mortality among adults. Disparities in coverage for individuals on Medicaid compared to those on private insurance continue to demonstrate the need for improvements in vaccination among those with public insurance. COVID-19 has also heighted the awareness of vaccination and the need for assessing vaccination coverage for all ages, particularly adults.









AIRA would like to emphasize the importance of using the IIS to contribute to more complete, quality vaccination data among adults to inform efforts to improve vaccine uptake, access and delivery. Composite measures put in place for childhood immunization status have helped to make great strides in vaccination coverage, and we expect a similar pattern for adults.

Along with partners such as the Association of Immunization Managers and the Adult Vaccine Access Coalition, AIRA strongly supports the April 28, 2020 Workgroup decision to add the Prenatal Immunization Status measure (PRS) to the 2021 Core Set.

Additionally, while the Adult Immunization Status (AIS) was not recommended at this time, AIRA strongly encourages the continued discussion and consideration of the AIS. The vote was very close, some states have already adopted the measure, and workgroup discussion also reflected briefly in the draft report demonstrated a commitment to further exploring states' readiness and advancing progress to support the AIS in the future. AIRA supports the decision to NOT remove the Flu Vaccinations for Adults measure (FVA-AD) for reasons discussed at the Workgroup meeting and reflected in the Mathematica report, including that this would leave a gap in measuring adult vaccination until the AIS is potentially added to the Core Set in the future.

Support for the Prenatal and Adult Immunization measures and the importance of using IIS to contribute to measurement

According to the 2019 Association of Immunization Managers (AIM) Annual Survey and additional state outreach, at least 37 states (74%) indicated they share data between the IIS and their state Medicaid agency and/or the state Medicaid agency uses IIS data for Medicaid reporting. Some states are calculating coverage rates for pregnant women and adults on Medicaid demonstrating the feasibility of utilizing available data to report on the measures.

Opportunities to capture adult vaccination data are increasing with broader adoption of interoperable electronic health record systems, and significant progress has been made related to the numbers of adults represented in IIS. In 2018, 56% of adults were represented in an IIS², compared to only 25 percent or less in 2010. At least 18 states and

 $^{^{2}}$ 2019 and 2020 data should reflect an increase in this percent when the data is made available by CDC







 $https://cdn.ymaws.com/www.immunizationmanagers.org/resource/resmgr/publications/Using_IIS_to_Assess_IZ_in_Me.pdf$



jurisdictions capture between 75% and 95% of adults further demonstrating progress. The percent participation among children improved from 82% in 2010 to 95% in 2018. As states prepare for the rollout of an anticipated COVID-19 vaccination campaign, they are placing greater emphasis on efforts to improve the adult participation in their IIS which should improve its use for all vaccines for adults.

Thanks to recent legislative changes in two states, all IIS are now able to capture lifespan vaccination data. It takes time to capture comprehensive longitudinal data for a full population and taking steps today will help ensure we achieve the progress we've made for children and continue to build upon important immunization infrastructure.

The old adage, "what gets measured gets done", is extremely applicable in efforts to help to reduce the burden of vaccine-preventable diseases among adults. AIRA greatly appreciates your efforts to formalize more accurate measurement of immunization status for adults. Please contact Liz Abbott, AIRA's Adult Program Manager with any questions at labbott@immregistries.org.

Sincerely,

Rebecca Coyle, MSEd, Executive Director

American Immunization Registry Association



