PNEUMONIA VACCINATION QUALITY MEASURE (QM) MDS CODING TIPS

The Vaccination Quality Measures are the easiest to impact when a facility is looking to improve their Quality of Resident Care Measures (QMs). You have the control to assure that 100% of your residents meet the QM as being "assessed and appropriately given" the vaccination!

Percentage of long-stay residents who needed and got a vaccine to prevent pneumonia

Nursing facility licensure regulations require long term care facilities to assess the pneumococcal vaccination status of each resident, provide education regarding pneumococcal vaccination, and administer the vaccination when indicated, unless refused by the resident or responsible party. Facilities must document the resident was assessed, educated, offered and received the vaccine, or declined due to refusal or contraindication. These requirements are found under F883 (Section 483.80(d)(2)of the State Operations Manual.) The facility should administer the appropriate pneumococcal vaccination consistent with current ACIP and CDC guidance.

In October 2002, U.S. Department of Health and Human Services Tommy G. Thompson approved the use of standing orders policies in nursing homes for influenza and pneumococcal vaccinations. The use of physician-approved facility policy is explicitly allowed under F711 (Section 483.30(b)(3)of the State Operations Manual.) The Federal Register Notice may be found here. (Guidance from The Society for Post-Acute and Long Term Care Medicine website, accessed June 13, 2018.) Some states may have more stringent regulations that do not allow for standing orders, and this would override the federal mandate, as it is the stricter of the requirements that are to be followed.

PLEASE STOP if you are about to code:

O0300. F	neumococcal Vaccine
Enter Code	A. Is the resident's Pneumococcal vaccination up to date?
	 No → Continue to O0300B, If Pneumococcal vaccine not received, state reason Yes → Skip to O0400, Therapies
AND Enter Code	B. If Pneumococcal vaccine not received, state reason: 1. Not eligible - medical contraindication
	3. Not offered PLEASE STOP

Note the following items will **not trigger** on for the pneumococcal quality measure. (From MDS 3.0 QM User's Manual, v11.0):

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

- 1.Pneumococcal vaccine status is up to date (O0300A = [1]); or
- 2. Were offered and declined the vaccine (O0300B = [2]); or
- 3. Were ineligible due to medical contraindication(s) (00300B = [1]) (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).

Before you enter the code below, STOP!

Not offered (O0300B = [3]) - STOP and request assistance from another MDS coordinator, admission nursing staff or your DON. Further investigation should be undertaken to assure that this resident has been fully assessed and appropriately given the pneumococcal vaccination he/she is eligible for to protect him-/herself and your nursing home community.

Consider the following when preparing to document about Pneumococcal vaccination on the MDS:

 Resident is less than 65 years old – Individuals living in environments or social settings (e.g. nursing homes and other long-term care facilities) with an identified risk of invasive pneumococcal disease

- or its complications should be considered for vaccination populations. (MDS RAI 3.0 Manual v1.15R, p. O-11)
- Resident's chart does not reflect whether he/she has received pneumococcal vaccination STOP and thoroughly explore whether the individual received the pneumococcal vaccination anywhere. Ask the resident, talk to family/responsible party, contact the resident's home area local public health and check your state's Immunization Information System (IIS) database, if available in your state. Links to each state's system can be found through the Centers for Disease Control (CDC) website (https://www.cdc.gov/vaccines/programs/iis/contacts-locate-records.html). It is in the best interest of the individual resident and the health of your nursing home community, that everyone for whom the pneumococcal vaccination is not contraindicated receives the appropriate immunization.
- You are unable to determine whether the resident has had any pneumococcal vaccination Assess the pneumococcal vaccination status of the resident, assess for contraindications, educate the resident regarding the pneumococcal vaccination, and the administer the appropriate vaccination to the resident, per physician-approved facility policy, according to the standards of clinical practices, unless refused by the resident or responsible party. (See algorithm in MDS RAI 3.0 Manual v115R, p. O-12).
- Resident has received only one pneumococcal vaccination Even though it is recommended that an individual receive the Prevnar 13 first, there are incidents when the Pneumovax 23 was administered first. If a resident has received either the Prevnar 13 or the Pneumovax 23, and it has been less than a year, code the vaccination status as up-to-date. If the resident has received either the Prevnar 13 or the Pneumovax23 and a year or more has passed, administer the Pneumovax23 to resident per standing orders, if allowed in your state. The vaccination status is then up-to-date. Source: https://downloads.cms.gov/files/1-MDS-30-RAI-Manual-v115R-October-1-2017-R.pdf, p.O-13, and Centers for Disease Control and Prevention: Prevention of pneumococcal disease: Recommendations of the Advisory Committee on Immunization Practices (ACIP). Recommended Adult Immunization Schedule United States. MMWR Recomm. Rep. 57(53); Q1-Q-4, Jan. 9, 2009.

To know the current CMS mature data reflecting your facility's "Percentage of long-stay residents who needed and got a vaccine to prevent pneumonia," contact your state's, Quality Improvement Organization and request to speak to the Nursing Home Quality Improvement Advisor: http://www.qualitynet.org/dcs/ContentServer?cid=1228774346757&pagename=QnetPublic%2FPage%2FQnetTier4&c=Page

A worksheet is also available to assist accurate coding of your facility's "Percentage of long-stay residents who needed and got a vaccine to prevent influenza," at https://greatplainsgin.org/initiatives/hac-nh/

Content and links up to date as of August 18, 2018.





This material was prepared by the Great Plains Quality Innovation Network, the Medicare Quality Improvement Organization for Kansas, Nebraska, North Dakota and South Dakota, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. 11SOW-GPQIN-KS-F1-15/1018