HEDIS Provider Guide:
Childhood Immunizations (CIS-E)

Applicable to Blue Shield of California Commercial and Medi-Cal plans

Measure Description

Children 2 years of age who had the vaccines listed below **on or before their second birthday**

- 4 DTaP (diphtheria, tetanus, and acellular pertussis)
- 3 IPV (polio)
- 1 MMR (measles, mumps, rubella)
- 3 HiB (H influenza type B)
- 3 HepB (hepatitis B)
- 1 VZV (chicken pox)
- 4 PCV (pneumococcal conjugate)
- 1 HepA (hepatitis A)
- 2 or 3 RV (rotavirus)
  - 2 Rotarix®
  - 3 Rotateq®
  - 3 Rotavirus (NOS)
  - 1 Rotarix & 2 Rotateq
  - 1 Rotarix & 2 Rotavirus (NOS)
- 2 Flu (influenza)

Exclusions

- Members who have had an organ and bone marrow transplant
- Members who had a contraindication to a childhood vaccine
- Members in hospice

Using Correct Billing Codes to Identify Childhood Immunizations

Description		Codes	
DTaP	Vaccine Procedure	**CPT:** 90697, 90698, 90700, 90723	**CVX:** 20, 50, 106, 107, 110, 120, 146, 198
	Anaphylaxis	**SNOMED:** 428281000124107, 428291000124105	
	Encephalitis	**SNOMED:** 192710009, 192711008, 192712001	
IPV	Vaccine Procedure	**CPT:** 90697, 90698, 90713, 90723	**CVX:** 10, 89, 110, 120, 146
	Anaphylaxis	**SNOMED:** 471321000124106	
MMR (Measles, Mumps and Rubella)	Vaccine Procedure	**CPT:** 90707, 90710	**CVX:** 03, 94
	History of Measles	**ICD10CM:** B05.0-B05.4, B05.81, B05.89, B05.9	
	History of Mumps	**ICD10CM:** B26.0-B26.3, B26.81-B26.85, B26.89, B26.9	
	History of Rubella	**ICD10CM:** B06.00-B06.02, B06.09, B06.81, B06.82, B06.89, B06.9	
	Anaphylaxis	**SNOMED:** 471331000124109	
HiB	Vaccine Procedure	**CPT:** 90644, 90647, 90648, 90697, 90698, 90748	**CVX:** 17, 46, 47, 48, 49, 50, 51, 120, 146, 148, 198
	Anaphylaxis	**SNOMED:** 433621000124101	
Hepatitis A	Vaccine Procedure	**CPT:** 90633	**CVX:** 31, 83, 85
	History of Hepatitis A	**ICD10CM:** B15.0, B15.9	
	Anaphylaxis	**SNOMED:** 471311000124103	

Description		Codes			
Hepatitis B	Vaccine Procedure	**CPT:** 90697, 90723, 90740, 90744, 90747, 90748	**HCPCS:** G0010	**CVX:** 08, 44, 45, 51, 110, 146, 198	**ICD-10PCS:** 3E0234Z (newborn Hepatitis B vaccine)
	History of Hepatitis B	**ICD10CM:** B16.0-B16.2, B16.9, B18.0, B18.1, B19.10, B19.11			
	Anaphylaxis	**SNOMED:** 428321000124101			
VZV	Vaccine Procedure	**CPT:** 90710, 90716		**CVX:** 21, 94	
	History of Varicella Zoster	**ICD10CM:** B01.0, B01.11, B01.12, B01.2, B01.81, B01.89, B01.9, B02.0, B02.1, B02.21-B02.24, B02.29-B02.34, B02.39, B02.7-B02.9			
	Anaphylaxis	**SNOMED:** 471341000124104			
Pneumococcal Conjugate	Vaccine Procedure	**CPT:** 90670, 90671, 90677	**HCPCS:** G0009	**CVX:** 109, 133, 152, 215, 216	
	Anaphylaxis	**SNOMED:** 471141000124102			
Rotavirus	Vaccine Procedure	**ROTARIX 2 dose schedule CPT:** 90681	**2 dose schedule CPT:** 119	**RotaTeq 3 dose schedule CPT:** 90680	**3 dose schedule CPT:** 116, 122
	Anaphylaxis	**SNOMED:** 428331000124103			
Influenza (Flu)	Vaccine Procedure	**CPT:** 90655, 90656, 90657, 90658, 90660, 90661, 90672, 90674, 90685-90689, 90756		**CVX:** 88, 111, 140, 141, 149, 150, 153, 158, 161, 171, 186, 320, 333	
	Anaphylaxis	**SNOMED:** 471361000124100			

How to Improve HEDIS® Scores

- Use the California State Immunization Registry (CAIR) to register immunizations: https://cair.cdph.ca.gov.
- Review a child's immunization record before every visit and administer needed vaccines.
- Recommend immunizations to parents. Parents are more likely to agree with vaccinations when they are supported by the provider. Address common misconceptions about vaccinations.
- Have a system in place for patient reminders.
- The lowest vaccination rates are seen for rotavirus and influenza.
    - Ensure that the rotavirus vaccination series is completed by age 8 months.
    - Based on the American Academy of Pediatrics (AAP), children 6 months to 8 years of age who have never received the influenza vaccine should receive two (2) flu doses at least four (4) weeks apart the first time they are vaccinated.
- Some vaccines may have been given before the patients were Blue Shield Promise members. Transcribe these vaccinations into CAIR even if your office did not provide the vaccine.
- Request from your Blue Shield Promise Quality Program Manager a list of members who need to complete their childhood immunizations series.