

# Childhood Immunization Status (CIS)

Learn how to improve your Healthcare Effectiveness Data and Information Set (HEDIS®) rates by using this tip sheet about the Childhood Immunization Status (CIS) measure, best practices and more resources.

The percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DTaP); three polio (IPV); one measles, mumps and rubella (MMR); three haemophilus influenza type B (HiB); three hepatitis B (HepB), one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday.

**LOB**  
Commercial  
Medicaid  
Marketplace

**CMS Weight**  
N/A

**HEDIS**  
2023

Combination	DTaP	IPV	MMR	HiB	HepB	VZV	PCV	HepA	RV	Influenza
Combination 3	✓	✓	✓	✓	✓	✓	✓			
Combination 10	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

## Medical Record Evidence

For immunization evidence obtained from the medical record, count members where there is evidence that the antigen was rendered from one of the following:

- A note indicating the name of the specific antigen and the date of the immunization.
- A certificate of immunization prepared by an authorized health care provider or agency including the specific dates and types of immunizations administered.

For documented history of illness or anaphylaxis, there must be a note indicating the date of the event, which must have occurred by the member’s second birthday.

## Exclusions

- Members in hospice or using hospice services any time during the measurement year.
- Members who died any time during the measurement year.
- Members who had any of the following on or before their second birthday: Severe combined immunodeficiency, Immunodeficiency, HIV, Lymphoreticular cancer (multiple myeloma leukemia) or Intussusception

Learn more about EPIC workflow by following:

<https://uhcommunity.uhhospitals.org/UHAccountableCareOrganization/EPIC%20%20Quick%20Tips/Forms/AllItems.aspx>

**Best Practices**

- Administer all vaccines during well-child visits.
- Schedule newborns for infant well-care visits as soon as possible to get on an appropriate schedule for well-care visits and vaccines.
- Educate staff to schedule vaccination/well-child visits PRIOR to 2nd birthday.
- Use combination vaccines (DTaP-HepB-IPV, DTaP-HiB-IPV, DTaP-IPV -HiB-HepB), when possible.
- Consider offering drop-in hours, after-hours, or weekend appointments for member convenience.
- Give the flu vaccine to all members ages 6 months and older during flu season.
- Educate parents on the importance of vaccinations to prevent certain diseases.
- Address vaccine hesitancy in parents by answering their questions with fact-based educational materials.

**Reminder**

The CIS measure is hybrid. Any care not received via claims will be captured through medical record documentation.

**Notes in medical record must include:**

1. Patient's name
2. Patient's date of birth
3. Vaccine name
4. Date vaccine given (not ordered)
5. Use of correct service coding



**Tips on How to Code using ICD-10 Codes**

When vaccines are provided as part of a well-child encounter, the ICD-10 guidelines instruct:

- Z00.129 Encounter for routine child health examination without abnormal findings
- Z00.121 Encounter for routine child health examination with abnormal findings includes immunizations appropriate to the patient's age

Code Z23 Encounter for immunization may be used as a secondary code if the vaccine is given as part of a preventive health care service, such as a well-child visit

ICD-10 requires only one code (Z23) per vaccination, regardless if single or combination. Report Z23 for all vaccination diagnoses

**For additional best practices**

<https://www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html>

<https://www.aap.org/en/patient-care/immunizations/>

Kroger A, Bahta L, Long S, Sanchez P. General Best Practice Guidelines for Immunization. Best Practices Guidance of the Advisory Committee on Immunization Practices (ACIP)