

Effectiveness of Care Measure

# Immunization for Adolescents (IMA)



Health Net®

Learn how to improve your Healthcare Effectiveness Data and Information Set (HEDIS®) rates by using this tip sheet about the Immunization for Adolescents – Combination 2 (IMA-2) measure, its codes and best practices.

<b>Measure</b>	The percentage of children age 13, as of December 31 of the measurement year, who have completed the required IMA-2 vaccines on or before their 13th birthday.	
<b>Vaccines required for combination-2 series</b>	<b>CPT code</b>	<b>Requirements</b>
	<b>At least one meningococcal serogroups A, C, W, Y vaccine</b>	
	90734	Give vaccine on or between the member's 11th and 13th birthdays.
	<b>At least one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine</b>	
90715	Give vaccine on or between the member's 10th and 13th birthdays.	
<b>At least two human papillomavirus (HPV) vaccines, with at least 146 days apart between the two vaccines, or at least three HPV vaccines</b>		
90649–90651	Give each dose on different dates of service on or between the member's 9th and 13th birthdays.	
<b>Exclusions</b>	<b>Exclusion</b>	<b>Code</b>
	<b>Anaphylactic reaction due to vaccine</b>	T80.52XA (initial), T80.52XD (subsequent), T80.52XS (sequel)
	<b>Encephalopathy due to vaccine</b>	G04.32
	<b>Vaccine causing adverse effect</b>	T50.A15A, T50.A15D, T50.A15S
<b>Medical chart tips</b>	<b>Include these chart notes</b>	<b>Avoid these chart deficiencies</b>
	<ul style="list-style-type: none"> <li>• Patient's name</li> <li>• Patient's date of birth</li> <li>• Dates of service</li> <li>• Names of vaccines</li> <li>• The dates given (not dates ordered)</li> </ul>	<ul style="list-style-type: none"> <li>• Vaccines received after the 13th birthday</li> <li>• Missing HPV vaccines</li> <li>• No notes about allergies, contraindications or illness</li> <li>• No notes about parental refusal</li> </ul>



(continued)

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## Best practices

- Document and submit claims in a timely manner and with the correct code.
- Missing HPV vaccines are the primary reason for noncompliance:
  - Enhanced and consistent provider/clinic recommendation of HPV vaccine.
  - Ensure administration of the HPV vaccine when Tdap and meningococcal are given and during subsequent well and sick visits.
  - HPV rates are now reported for both females and males.
  - Schedule second HPV appointment before/when giving the first HPV vaccine.
- Consider offering drop-in hours or after-hours appointments for member convenience.
- Create alerts within your electronic health record (EHR) to indicate when the vaccines are due.
- Educate families on the importance of these vaccines (use of motivational interviewing).
- Educate staff to schedule vaccines and well-child visits prior to 13th birthday.
- Give call reminders for series vaccines.
- Reduce over-vaccination and ensure timely data submission by providing all completed vaccinations to the immunization registries (CAIR2, RIDE, PHIMS, SDIR, etc.).
- Implement standing orders.
- Meningococcal recombinant (serogroup B) vaccines do not count. Be sure your vaccination claims and records are clear about which meningococcal vaccine was given.