

Quality ID #508: Adult COVID-19 Vaccination Status

2025 COLLECTION TYPE:

MIPS CLINICAL QUALITY MEASURES (COMS)

MEASURE TYPE:

Process

DESCRIPTION:

Percentage of patients aged 18 years and older seen for a visit during the performance period that are up-to-date on their COVID-19 vaccinations as defined by Centers for Disease Control and Prevention (CDC) recommendations on current vaccination.

INSTRUCTIONS:

This measure is to be submitted a minimum of **once per performance period** for patients aged 18 years and older seen during the performance period. There is no diagnosis associated with this measure. This measure may be submitted by Merit-based Incentive Payment System (MIPS) eligible clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

***NOTE:** Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, POS 02, or POS 10 modifiers) are allowable. Please note that effective January 1, 2025, while a measure may be denoted as telehealth eligible, specific denominator codes within the encounter may no longer be eligible due to changes outlined in the CY 2024 PFS Final Rule List of Medicare Telehealth Services.*

Measure Submission Type:

Measure data may be submitted by individual MIPS eligible clinicians, groups, or third-party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third-party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third-party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

DENOMINATOR:

All patients aged 18 years and older seen for a visit during the performance period

***DENOMINATOR NOTE:** *Signifies that this CPT Category I code is a non-covered service under the Medicare Part B Physician Fee Schedule (PFS). These non-covered services should be counted in the denominator population for MIPS COMs.*

Denominator Criteria (Eligible Cases):

Patients aged 18 years and older on date of encounter

AND

Patient encounter during the performance period (CPT or HCPCS): 59400, 59510, 59610, 59618, 78012, 78070, 78075, 78102, 78140, 78185, 78195, 78202, 78215, 78261, 78290, 78300, 78305, 78315, 78320, 78414, 78428, 78456, 78458, 78579, 78580, 78582, 78597, 78601, 78630, 78647, 78699, 78708, 78725, 78740, 78801, 78803, 78806, 78999, 90791, 90792, 90832, 90834, 90837, 90839, 90845, 90945, 90947, 90951, 90952, 90953, 90954, 90955, 90956, 90957, 90958, 90959, 90960, 90961, 90962, 90963, 90964, 90965, 90966, 90967, 90968, 90969, 90970, 92002, 92004, 92012, 92014, 92507, 92508, 92521, 92522, 92523, 92524, 92526, 92537, 92538, 92540, 92541, 92542, 92544, 92545, 92548, 92550, 92557, 92567, 92568, 92570, 92588, 92625, 92626, 96116, 96156, 96158, 96159, 97129, 97161, 97162, 97163, 97164, 97165, 97166, 97167, 97168, 97802, 97803, 97804, 98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007, 98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015, 98016, 98960, 98961, 98962, 98966, 98967, 98968, 98970, 98971, 98972, 99024, 99202, 99203, 99204, 99205, 99211, 99212, 99213, 99214, 99215, 99221, 99222, 99223, 99231, 99232, 99233, 99236, 99242*, 99243*, 99244*,

99245*, 99281, 99282, 99283, 99284, 99285, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99315, 99316, 99341, 99342, 99344, 99345, 99347, 99348, 99349, 99350, 99381*, 99382*, 99383*, 99384*, 99385*, 99386*, 99387*, 99391*, 99392*, 99393*, 99394*, 99395*, 99396*, 99397*, 99401*, 99402*, 99403*, 99404*, 99411*, 99412*, 99421, 99422, 99423, 99424, 99429*, 99491, 99495, 99496, 99512*, G0101, G0108, G0270, G0271, G0402, G0438, G0439, G0447, G0473, G9054

AND NOT

DENOMINATOR EXCLUSION:

Patient received hospice services any time during the performance period: M1416

NUMERATOR:

Patients that are up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination as of the date of the encounter

Definition:

Up to Date – The CDC definition of up to date can be found at <https://www.cdc.gov/covid/vaccines/stay-up-to-date.html>

Numerator Instruction:

In addition to the CDC webpage included in the up to date definition, a document that catalogs the CDC definition of up to date by date is maintained at <https://qpp-cm-prod-content.s3.amazonaws.com/uploads/3087/CDC-COVID-19-Vaccination-Recommendations.zip>

***NUMERATOR NOTE:** The definition of up to date vaccination status may change over time. Therefore, MIPS eligible clinicians should refer to the definition of up to date per the CDC at the time of the visit to which the measure is applied.*

Denominator Exception(s) are determined at the time of the denominator eligible encounter.

Numerator Options:

<i>Performance Met:</i>	Patients who are up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination (M1417)
<u>OR</u>	
<i>Denominator Exception:</i>	Patients who are not up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination because of a medical contraindication documented by clinician (M1418)
<u>OR</u>	
<i>Performance Not Met:</i>	Patients who are not up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination (M1419)

RATIONALE:

In March 2022, a report found that receiving 2 or 3 doses of an mRNA COVID-19 vaccine was associated with a 90% reduction in risk for COVID-19 invasive mechanical ventilation or death [1]. As of October 28, 2023, the CDC reported 6,593,929 hospitalizations from COVID-19 and 1,161,602 deaths [2]. In 2022, COVID-19 was the fourth leading cause of death in the United States [3]. However, only 18.3% of adults reported having received an updated 2023-24 COVID-19 vaccine since September 14, 2023 [4]. Widespread vaccination to prevent severe COVID-19 infection will be critically important to stemming the morbidity and mortality caused by this disease.

References

1. Centers for Disease Control & Prevention. (2022, March 25). Effectiveness of mRNA Vaccination in Preventing COVID-19-Associated Invasive Mechanical Ventilation and Death – United States, March 2021 – January 2022.

- Morbidity and Mortality Weekly Report*, 71(12), 459-465. <https://www.cdc.gov/mmwr/volumes/71/wr/mm7112e1.htm>
- Centers for Disease Control & Prevention. (2024). *COVID Data Tracker*. <https://covid.cdc.gov/covid-data-tracker/#datatracker-home>
 - Centers for Disease Control & Prevention. (2023, May 5). Provisional Mortality Data – United States, 2022. *Morbidity and Mortality Weekly Report*, 72(18), 488-492. https://www.cdc.gov/mmwr/volumes/72/wr/mm7218a3.htm?s_cid=mm7218a3_w%20%5bcd.gov%5d
 - Centers for Disease Control & Prevention. (2024). *Weekly COVID-19 Vaccination Dashboard*. <https://www.cdc.gov/vaccines/imz-managers/coverage/covidvaxview/interactive/vaccination-dashboard.html>

CLINICAL RECOMMENDATION STATEMENTS:

Since December 2020, there have been 19 Advisory Committee on Immunization Practices (ACIP) recommendations relating to COVID-19 vaccination. On September 12, 2023 the ACIP recommended vaccination with updated COVID-19 vaccines for all persons aged 6 months and older [1]. Updated COVID-19 vaccines are considered the 2023-2024 formula and include Moderna, Pfizer-BioNTech and Novavax. Because this measure uses the CDC's definition of up to date, please refer to the CDC's website [2] to confirm the current definition of up to date.

References

- Centers for Disease Control & Prevention. (2023, October 20). Use of Updated COVID-19 Vaccines 2023-2024 Formula for Persons Aged >= 6 Months: Recommendations of the Advisory Committee on Immunization Practices – United States, September 2023. *Morbidity and Mortality Weekly Report*, 72(42), 1140-1146. <https://www.cdc.gov/mmwr/volumes/72/wr/mm7242e1.htm>
- Centers for Disease Control & Prevention. (2024). *COVID-19: Stay Up to Date with COVID-19 Vaccines*. <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html>

COPYRIGHT:

This Physician Performance Measure (Measure) and related data specifications are owned and stewarded by the Centers for Medicare & Medicaid Services (CMS). This measure was developed under CMS Contract No. 75FCMC18D0032. Task Order 75FCMC19F0004. Mathematica, Inc. and the National Committee for Quality Assurance (NCQA) supported development of this electronic measure. NCQA is not responsible for any use of the Measure. NCQA makes no representations, warranties, or endorsement about the quality of any organization or physician that uses or reports performance measures and NCQA has no liability to anyone who relies on such measures or specifications.

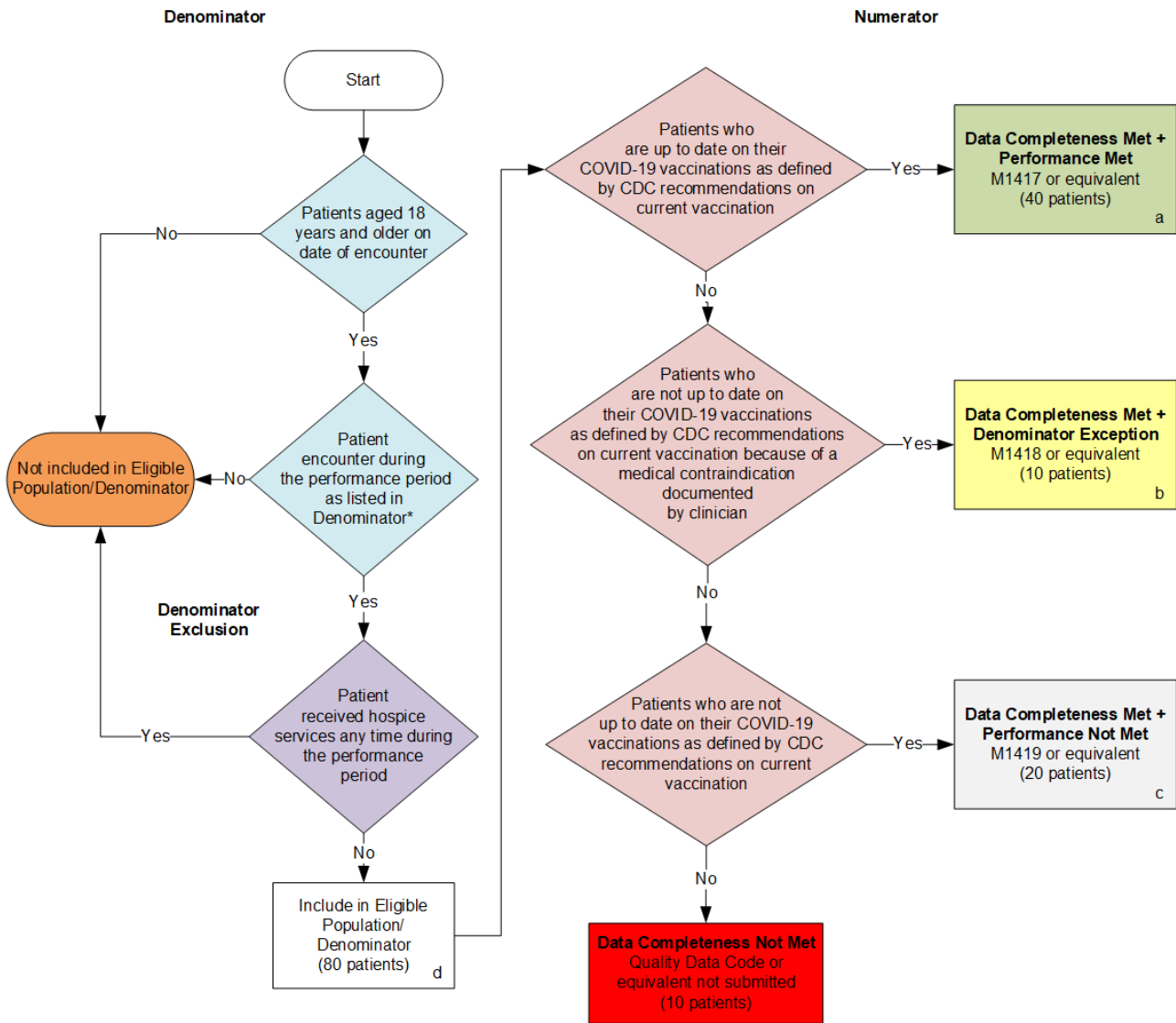
Limited proprietary coding is contained in the Measure specifications for user convenience. Users of proprietary code sets should obtain all necessary licenses from the owners of the code sets. NCQA disclaims all liability for use or accuracy of any third-party codes contained in the specifications.

CPT(R) codes, descriptions and other data are copyright 2024. American Medical Association (AMA). All rights reserved. CPT is a trademark of the American Medical Association. Fee schedules, relative value units, conversion factors and/or related components are not assigned by the AMA, are not part of CPT, and the AMA is not recommending their use. The AMA does not directly or indirectly practice medicine or dispense medical services. The AMA assumes no liability for data contained or not contained herein. Applicable FARS/DFARS restrictions apply to government use.

The American Dental Association ("ADA") holds a copyright to the Current Dental Terminology ("CDT") codes contained in certain measure specifications. The CDT codes in the measure specifications are included with the permission of the ADA. All uses of the CDT codes require a license from the ADA. No alteration, amendments, or modifications of the CDT or any portion thereof is allowed. Resale, transmission, or distribution of copies of the CDT or other portions of the CDT is also not allowed. To inquire about licensing, contact CDT-SNODENT@ada.org.

2025 Clinical Quality Measure Flow for Quality ID #508: Adult COVID-19 Vaccination Status

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.



SAMPLE CALCULATIONS

Data Completeness=

$$\frac{\text{Performance Met (a=40 patients) + Denominator Exception (b=10 patients) + Performance Not Met (c=20 patients)}}{\text{Eligible Population / Denominator (d=80 patients)}} = \frac{70 \text{ patients}}{80 \text{ patients}} = 87.50\%$$

Performance Rate=

$$\frac{\text{Performance Met (a=40 patients)}}{\text{Data Completeness Numerator (70 patients) - Denominator Exception (b=10 patients)}} = \frac{40 \text{ patients}}{60 \text{ patients}} = 66.67\%$$

*See the posted measure specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Patient-Process

CPT only copyright 2024 American Medical Association. All rights reserved. The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification. v9

2025 Clinical Quality Measure Flow Narrative for Quality ID #508:
Adult COVID-19 Vaccination Status

Disclaimer: Refer to the measure specification for specific coding and instructions to submit this measure.

1. Start with Denominator.
2. Check *Patients aged 18 years and older on date of encounter*:
 - a. If *Patients aged 18 years and older on date of encounter* equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Patients aged 18 years and older on date of encounter* equals Yes, proceed to check *Patient encounter during the performance period as listed in Denominator**.
3. Check *Patient encounter during the performance period as listed in Denominator**:
 - a. If *Patient encounter during the performance period as listed in Denominator** equals No, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Patient encounter during the performance period as listed in Denominator** equals Yes, proceed to check *Patient received hospice services any time during the performance period*.
4. Check *Patient received hospice services any time during the performance period*:
 - a. If *Patient received hospice services any time during the performance period* equals Yes, do not include in *Eligible Population/Denominator*. Stop processing.
 - b. If *Patient received hospice services any time during the performance period* equals No, include in *Eligible Population/Denominator*.
5. Denominator Population:
 - Denominator Population is all Eligible Patients in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 80 patients in the Sample Calculation.
6. Start Numerator
7. Check *Patients who are up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination*:
 - a. If *Patients who are up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination* equals Yes, include in *Data Completeness Met and Performance Met*.
 - *Data Completeness Met and Performance Met* letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 40 patients in the Sample Calculation.
 - b. If *Patients who are up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination* equals No, proceed to check *Patients who are not up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination because of a medical contraindication documented by clinician*.
8. Check *Patients who are not up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination because of a medical contraindication documented by clinician*:

- a. If *Patients who are not up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination because of a medical contraindication documented by clinician* equals Yes, include in *Data Completeness Met and Denominator Exception*.
 - *Data Completeness Met and Denominator Exception* letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 10 patients in the Sample Calculation.
 - b. If *Patients who are not up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination because of a medical contraindication documented by clinician* equals No, proceed to check *Patients who are not up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination*.
9. Check *Patients who are not up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination*:
- a. If *Patients who are not up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination* equals Yes, include in *Data Completeness Met and Performance Not Met*.
 - *Data Completeness Met and Performance Not Met* letter is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 20 patients in the Sample Calculation.
 - b. If *Patients who are not up to date on their COVID-19 vaccinations as defined by CDC recommendations on current vaccination* equals No, proceed to check *Data Completeness Not Met*.
10. Check *Data Completeness Not Met*:
- If *Data Completeness Not Met*, the Quality Data Code or equivalent was not submitted. 10 patients have been subtracted from the Data Completeness Numerator in the Sample Calculation.

Sample Calculations

Data Completeness equals Performance Met (a equals 40 patients) plus Denominator Exception (b equals 10 patients) plus Performance Not Met (c equals 20 patients) divided by Eligible Population/Denominator (d equals 80 patients). All equals 70 patients divided by 80 patients. All equals 87.50 percent.

Performance Rate equals Performance Met (a equals 40 patients) divided by Data Completeness Numerator (70 patients) minus Denominator Exception (b equals 10 patients). All equals 40 patients divided by 60 patients. All equals 66.67 percent.

*See the posted measure specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Patient-Process

The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.