December 6, 2018

National Quality Forum
1030 15th Street, NW, Suite 800
Washington, DC 20005

RE: List of Measures under Consideration

Dear Members of the Measure Applications Partnership,

On behalf of the National Association of County and City Health Officials (NACCHO), I write to provide comments on the Centers for Medicare and Medicaid Services’ (CMS) List of Measures under Consideration (MUC) for December 1, 2018.

NACCHO commends CMS for its consideration of adult immunization in two of the thirty-nine measures for use in Medicare programs:

- **MUC18-57 Annual Wellness Assessment: Preventive Care** -- Percentage of patients 65 years of age and older with an Annual Wellness Visit who received age and sex-appropriate preventive services. This measure is a composite of seven component composite measures that are based on recommendations for preventive care by the US Preventive Services Task Force, Advisory Committee on Immunization Practices, and the American Geriatrics Society. Specifically, the measure is under consideration for use in the Merit-Based Incentive Payment System – Quality (MIPS-Quality).

- **MUC18-62 Adult Immunization Status** -- Percentage of members 19 years of age and older who are up-to-date on recommended routine vaccines for influenza; tetanus and diphtheria (Td) or tetanus, diphtheria and acellular pertussis (Tdap); zoster; and pneumococcal. This measure is under consideration for use in the Medicare Shared Savings Program and the Merit-Based Incentive Payment System – Quality (MIPS-Quality).

NACCHO is the voice for nearly 3,000 local health departments across the country. These city, county, metropolitan, district, and tribal departments work daily to ensure that communities have access to vital public health programs and services such as adult immunizations. Notably, adult immunizations are the clinical service most often provided by local health departments (90%)\(^1\), and it is estimated that 63% of the nation’s local health departments conduct targeted immunization and outreach efforts for adults\(^2\). Given that local health departments are significant providers of adult immunization services and counseling, NACCHO appreciates the opportunity to provide the local health department perspective regarding measures that will improve the access and utilization of adult immunizations.

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Immunization has been one of the most successful and safest public health measures available to populations worldwide, with an unparalleled record of disease reduction and prevention. Despite the establishment and implementation of immunization recommendations by the Advisory Committee on Immunization Practices, Centers for Disease Control and Prevention, and many other professional organizations, adult immunization coverage rates are less than optimal for routinely recommended vaccines, and many rates remain below the Healthy People 2020 targets. Recognizing the need for improved quality measures that will facilitate the identification, implementation, and monitoring of adult vaccine improvement opportunities, NACCHO strongly supports CMS’ proposed measures as a means to increase adult immunization coverage rates.

The inclusion of MUC 18-57 Annual Wellness Assessment: Preventive Care and MUC 18-62 Adult Immunization Status would address many of the Meaningful Measures Framework objectives and fulfill the cross-cutting measure criteria. Though MUC 18-62 is under consideration for use in the Medicare Shared Savings Program and the Merit-Based Incentive Payment System – Quality (MIPS-Quality), NACCHO encourages CMS to also evaluate including the revised measure under several other quality and payment programs on the MUC list. The proposal would make MUC 18-62 applicable to home health, inpatient rehabilitation, long-term care hospital, skilled nursing facility, ambulatory surgical center, hospital inpatient and outpatient, inpatient psychiatric facility, and PPS-exempt cancer hospital reporting programs. However, broader inclusion of MUC 18-62 in other quality reporting and payment programs would further facilitate consistent monitoring and reporting of adult immunization status for Medicare beneficiaries. Widespread use of this new composite measure is particularly timely and important in settings where patients are especially susceptible and vulnerable to the negative health outcomes of a vaccine-preventable disease such as the flu or pneumonia. Inclusion of the composite measure under these additional programs would also update, streamline, and align the varied adult immunization measures presently being used to monitor influenza, pneumococcal, and zoster vaccination. Additionally, implementation of MUC 18-62 across quality programs would substantially contribute to increasing adult immunization coverage rates.

Local health departments across the nation play a vital role in providing immunizations, investigating cases of vaccine-preventable disease, and maintaining high immunization coverage rates. Local health departments are uniquely positioned to improve the capacity of the healthcare system for delivering immunizations and strengthening the coordination between public, professional, and private sector stakeholders. Given this, NACCHO champions efforts that can be instrumental in helping to achieve optimal immunization rates, and we look forward to further action to refine and implement the proposed measures under consideration. Should you have any questions, please contact Michelle Cantu, NACCHO’s Director for Infectious Disease and Immunization, at mcantu@naccho.org.

Sincerely,

Lori Tremmel Freeman, MBA
Chief Executive Officer

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