

# Coding Reference Guide Measurement Year 2024

## Childhood Immunization Status (CIS)



### Measure Description

Children who turned two years of age during 2024 who had each of the vaccinations noted below within the appropriate timeframe:

Vaccine Description	No. of Doses
Diphtheria, Tetanus, Acellular Pertussis (DTaP)	Four
Inactivated Polio (IPV)	Three
Measles, Mumps, Rubella (MMR)	One
Haemophilus Influenza Type B (HiB)	Three
Hepatitis B (HepB)	Three

Vaccine Description (cont.)	No. of Doses
Varicella Zoster (VZV)	One
Pneumococcal Conjugate (PCV)	Four
Hepatitis A (HepA)	One
Rotavirus (RV)	Two or Three
Influenza (Flu)	Two

**DTaP**  
Any of the following on or before the second birthday meet the criteria:

<b>Four DTaP Vaccinations On Different Dates of Service</b>	<b>DTaP Immunizations</b> <b>CVX:</b> 20, 50, 106, 107, 110, 120, 146
	<b>DTaP Vaccine Procedure</b> <b>CPT:</b> 90697, 90698, 90700, 90723
	<b>SNOMED:</b> 310306005, 310307001, 310308006, 312870000, 313383003, 390846000, 390865008, 399014008, 412755006, 412756007, 412757003, 412762002, 412763007, 412764001, 414001002, 414259000, 414620004, 415507003, 415712004, 770608009, 770616000, 770617009, 770618004, 787436003, 866158005, 866159002, 866226006, 868273007, 868274001, 868276004, 868277008, 1162640003, 428251000124104, 571571000119105, 572561000119108, 16290681000119103
<b>Anaphylaxis Due to the DTaP Vaccine</b>	<b>SNOMED:</b> 428281000124107, 428291000124105
<b>Encephalitis Due to the DTaP Vaccine</b>	<b>SNOMED:</b> 192710009, 192711008, 192712001

IPV	
Either of the following on or before the second birthday meet the criteria:	
<b>Three IPV Vaccinations On Different Dates of Service</b>	<b>IPV Immunization</b> <b>CVX:</b> 10, 89, 110, 120, 146
	<b>IPV Vaccine Procedure</b> <b>CPT:</b> 90697, 90698, 90713, 90723
	<b>SNOMED:</b> 310306005, 310307001, 310308006, 312869001, 312870000, 313383003, 390865008, 396456003, 412762002, 412763007, 412764001, 414001002, 414259000, 414619005, 414620004, 415507003, 415712004, 416144004, 416591003, 417211006, 417384007, 417615007, 866186002, 866227002, 868266002, 868267006, 868268001, 868273007, 868274001, 868276004, 868277008, 870670004, 572561000119108, 16290681000119103
<b>Anaphylaxis Due to the IPV Vaccine</b>	<b>SNOMED:</b> 471321000124106
MMR	
Any of the following meet the criteria:	
<b>One MMR Vaccination On or Between the First and Second Birthday</b>	<b>MMR Immunization</b> <b>CVX:</b> 03, 94
	<b>MMR Vaccine Procedure</b> <b>CPT:</b> 90707, 90710
	<b>SNOMED:</b> 38598009, 170431005, 170432003, 170433008, 432636005, 433733003, 871909005, 571591000119106, 572511000119105

<p><b>All the Following Anytime On or Before the Second Birthday</b></p> <ul style="list-style-type: none"> <li>• History of Measles Illness</li> <li>• History of Mumps Illness</li> <li>• History of Rubella Illness</li> </ul> <p>Do not include laboratory claims with POS code 81</p>	<p><b>History of Measles Illness</b>  <b>ICD10:</b>  B05.0, B05.1, B05.2, B05.3, B05.4, B05.81, B05.89, B05.9</p> <hr/> <p><b>SNOMED:</b>  14189004, 28463004, 38921001, 60013002, 74918002, 111873003, 161419000, 186561002, 186562009, 195900001, 240483006, 240484000, 359686005, 371111005, 406592004, 417145006, 424306000, 105841000119101</p> <hr/> <p><b>History of Mumps Illness</b>  <b>ICD10:</b>  B26.0, B26.1, B26.2, B26.3, B26.81, B26.82, B26.83, B26.84, B26.85, B26.89, B26.9</p> <hr/> <p><b>SNOMED:</b>  10665004, 17121006, 31524007, 31646008, 36989005, 40099009, 44201003, 63462008, 72071001, 74717002, 75548002, 78580004, 89231008, 89764009, 111870000, 161420006, 235123001, 236771002, 237443002, 240526004, 240527008, 240529006, 371112003, 1163539003, 105821000119107</p> <hr/> <p><b>History of Rubella Illness</b>  <b>ICD10:</b>  B06.00, B06.01, B06.02, B06.09, B06.81, B06.82, B06.89, B06.9</p> <p><b>SNOMED:</b>  10082001, 13225007, 19431000, 36653000, 51490003, 64190005, 79303006, 128191000, 161421005, 165792000, 186567003, 186570004, 192689006, 231985001, 232312000, 240485004, 253227001, 406112006, 406113001, 1092361000119109, 10759761000119100</p>
<p><b>Anaphylaxis Due to the MMR Vaccine On or Before the Second Birthday</b></p>	<p><b>SNOMED:</b>  471331000124109</p>

<b>HiB</b> Either of the following on or before the second birthday meet the criteria:	
<b>Three HiB Vaccinations On Different Dates of Service</b>	<b>HiB Immunization</b> <b>CVX:</b> 17, 46, 47, 48, 49, 50, 51, 120, 146, 148
	<b>HiB Vaccine Procedure</b> <b>CPT:</b> 90644, 90647, 90648, 90697, 90698, 90748
	<b>SNOMED:</b> 127787002, 170343007, 170344001, 170345000, 170346004, 310306005, 310307001, 310308006, 312869001, 312870000, 313383003, 414001002, 414259000, 415507003, 415712004, 428975001, 712833000, 712834006, 770608009, 770616000, 770617009, 770618004, 786846001, 787436003, 1119364007, 116264003, 16292241000119109
<b>Anaphylaxis Due to the HiB Vaccine</b>	<b>SNOMED:</b> 433621000124101
<b>HepB</b> Any of the following on or before the second birthday meet the criteria:	
<b>Three HepB Vaccinations On Different Dates of Service</b>  (One of the three vaccinations can be a newborn HepB vaccine administered during the first eight days of life—on the date of birth through seven days after birth)	<b>HepB Immunization</b> <b>CVX:</b> 08, 44, 45, 51, 110, 146
	<b>HepB Procedure</b> <b>CPT:</b> 90697, 90723, 90740, 90744, 90747, 90748
	<b>HCPCS:</b> G0010
	<b>SNOMED:</b> 16584000, 170370000, 170371001, 170372008, 170373003, 170374009, 170375005, 170434002, 170435001, 170436000, 170437009, 312868009, 396456003, 416923003, 770608009, 770616000, 770617009, 770618004, 786846001, 1162640003, 572561000119108
	<b>Newborn Hepatitis B Vaccine Administered</b> <b>ICD10:</b> 3E0234Z, 99.55

<p><b>History of Hepatitis B Illness</b></p> <p>Do not include laboratory claims with POS code 81</p>	<p><b>ICD10:</b> B16.0, B16.1, B16.2, B16.9, B17.0, B18.0, B18.1, B19.10, B19.11</p> <p><b>SNOMED:</b> 1116000, 13265006, 26206000, 38662009, 50167007, 53425008, 60498001, 61977001, 66071002, 76795007, 111891008, 165806002, 186624004, 186626002, 186639003, 235864009, 235865005, 235869004, 235871004, 271511000, 313234004, 406117000, 424099008, 424340000, 442134007, 442374005, 446698005, 838380002, 1230342001, 153091000119109, 551621000124109</p>
<p><b>Anaphylaxis Due to the HepB Vaccine</b></p>	<p><b>SNOMED:</b> 428321000124101</p>
<p><b>VZV</b> Any of the following meet the criteria:</p>	
<p><b>One VZV vaccination On or Between the First and Second Birthday</b></p>	<p><b>VZV Immunization</b> <b>CVX:</b> 21, 94</p> <p><b>VZV Vaccine Procedure</b> <b>CPT:</b> 90710, 90716</p> <p><b>SNOMED:</b> 425897001, 428502009, 432636005, 433733003, 737081007, 871898007, 871899004, 871909005, 572511000119105</p>
<p><b>History of VZV (Chicken Pox) Anytime On or Before the Second Birthday</b></p> <p>Do not include laboratory claims with POS code 81</p>	<p><b>ICD10:</b> B01.0, B01.11, B01.12, B01.2, B01.81, B01.89, B01.9, B02.0, B02.1, B02.21, B02.22, B02.23, B02.24, B02.29, B02.30, B02.31, B02.32, B02.33, B02.34, B02.39, B02.7, B02.8, B02.9</p> <p><b>SNOMED:</b> 4740000, 10698009, 21954000, 23737006, 24059009, 36292003, 38907003, 42448002, 49183009, 55560002, 87513003, 111859007, 111861003, 161423008, 186524006, 195911009, 230176008, 230198004, 230262004, 230536009, 232400003, 235059009, 240468001, 240470005, 240471009, 240472002, 240473007, 240474001, 309465005, 371113008, 397573005, 400020001, 402897003, 402898008, 402899000, 410500004, 410509003, 421029004, 422127002, 422446008, 422471006, 422666006, 423333008, 423628002, 424353002, 424435009, 424801004, 424941009, 425356002, 426570007, 428633000, 713250002, 713733003, 713964006, 715223009, 723109003, 838357005, 1163465001, 1163483009, 1179456002, 12551000132107, 12561000132105, 12571000132104, 98541000119101, 331071000119101, 681221000119108, 1087131000119102, 15678761000119105, 15678801000119102,</p>

<p><b>History of VZV (Chicken Pox) Anytime On or Before the Second Birthday (cont.)</b></p>	<p>15678841000119100, 15680201000119106, 15680241000119108, 15680281000119103, 15681321000119100, 15681401000119101, 15685081000119102, 15685121000119100, 15685201000119100, 15685281000119108, 15936581000119108, 15936621000119108, 15989271000119107, 15989311000119107, 15989351000119108, 15991711000119108, 15991751000119109, 15991791000119104, 15992351000119104, 16000751000119105, 16000791000119100, 16000831000119106</p>
<p><b>Anaphylaxis Due to the VZV Vaccine</b></p>	<p><b>SNOMED:</b> 471341000124104</p>
<p><b>PCV</b> Either of the following on or before the second birthday meet the criteria:</p>	
<p><b>Four PCV Vaccinations On Different Dates of Service</b></p>	<p><b>PCV Immunization</b> <b>CVX:</b> 109, 133, 152, 215</p> <hr/> <p><b>Pneumococcal Vaccine Procedure</b> <b>CPT:</b> 90670, 90671</p> <hr/> <p><b>HCPCS:</b> G0009</p> <hr/> <p><b>SNOMED:</b> 1119368005, 434751000124102</p>
<p><b>Anaphylaxis Due to the PCV Vaccine</b></p>	<p><b>SNOMED:</b> 471141000124102</p>
<p><b>HepA</b> Any of the following meet the criteria:</p>	
<p><b>One HepA Vaccination On or Between the First and Second Birthday</b></p>	<p><b>HepA Immunization</b> <b>CVX:</b> 31, 83, 85</p> <hr/> <p><b>HepA Vaccine Procedure</b> <b>CPT:</b> 90633</p>

<b>One HepA Vaccination On or Between the First and Second Birthday (cont.)</b>	<b>SNOMED:</b> 170378007, 170379004, 170380001, 170381002, 170434002, 170435001, 170436000, 170437009, 243789007, 312868009, 314177003, 314178008, 314179000, 394691002, 871752004, 871753009, 871754003, 571511000119102
<b>History of HepA Illness On or Between the First and Second Birthday</b> Do not include laboratory claims with POS code 81	<b>ICD10:</b> B15.0, B15.9 <b>SNOMED:</b> 16060001, 18917003, 25102003, 40468003, 43634002, 79031007, 111879004, 165997004, 206373002, 278971009, 310875001, 424758008, 428030001, 105801000119103
<b>Anaphylaxis Due to the HepA Vaccine On or Between the First and Second Birthday</b>	<b>SNOMED:</b> 471311000124103
<b>RV</b> Any of the following on or before the second birthday meet the criteria:	
<b>Two of the 2-Dose RV Vaccine On Different Dates of Service</b>	<b>2-Dose RV Immunization</b> <b>CVX:</b> 119 <b>2-Dose RV Procedure</b> <b>CPT:</b> 90681 <b>SNOMED:</b> 434741000124104
<b>Three Vaccinations of the 3-Dose RV Vaccine On Different Dates of Service</b>	<b>3-Dose RV Immunization</b> <b>CVX:</b> 116, 122 <b>3-Dose RV Vaccine Procedure</b> <b>CPT:</b> 90680 <b>SNOMED:</b> 434731000124109

<b>Anaphylaxis Due to the RV Vaccine</b>	<b>SNOMED:</b> 428331000124103
Combining vaccines: If immunizations were given using a combination of the 2-dose and 3-dose vaccine, three doses are required (one 2-dose and two 3-dose).	
<b>Influenza</b> Either of the following on or before the second birthday meet the criteria:	
<b>Two Flu Vaccinations with Different Dates of Service</b>  One of the two vaccinations can be a live attenuated influenza vaccine (LAIV) only if administered on the second birthday.	<b>Influenza Immunization</b> <b>CVX:</b> 88, 140, 141, 150, 153, 155, 158, 161, 171, 186
	<b>Influenza Vaccine Procedure</b> <b>CPT:</b> 90655, 90657, 90661, 90673, 90674, 90685, 90686, 90687, 90688, 90689, 90756
	<b>HCPCS:</b> G0008
	<b>SNOMED:</b> 86198006
	<b>Influenza LAIV Immunization</b> <b>CVX:</b> 111, 149
	<b>Influenza LAIV Vaccine Procedure</b> <b>CPT:</b> 90660, 90672
<b>SNOMED:</b> 787016008	
<b>Anaphylaxis Due to the Flu Vaccine</b>	<b>SNOMED:</b> 471361000124100
<b>The following will exclude Members from this measure:</b>	
<b>Hospice Encounter During 2024</b>	<b>HCPCS:</b> G9473, G9474, G9475, G9476, G9477, G9478, G9479, Q5003, Q5004, Q5005, Q5006, Q5007, Q5008, Q5010, S9126, T2042, T2043, T2044, T2045, T2046
	<b>SNOMED:</b> 183919006, 183920000, 183921001, 305336008, 305911006, 385765002



<b>Hospice Encounter During 2024 (cont.)</b>	<b>UBREV:</b> 0115, 0125, 0135, 0145, 0155, 0235, 0650, 0651, 0652, 0655, 0656, 0657, 0658, 0659
<b>Hospice Intervention During 2024</b>	<b>CPT:</b> 99377, 99378
	<b>HCPCS:</b> G0182
	<b>SNOMED:</b> 170935008, 170936009, 385763009
<b>Patients who died any time during 2024</b>	
<b>Members who had a Contraindication to a childhood Vaccine on or before their second birthday</b>	
Do not include laboratory claims with POS 81	

## Tips and Best Practices to Help Improve Performance

- Assess immunization needs at each clinical encounter such as sick visits, follow-up visits, well child visits, annual/sports physicals, weight checks, etc.
- Childhood immunizations can be completed by the child's 15 month birthday
  - Check immunization status at 12 months of age to allow time to catch up by their second birthday

## Tips and Best Practices to Help Improve Performance (cont.)

- Provide immunization tracking booklets to parents/guardians to help reinforce and promote active participation in their child's immunization schedule
- Ensure that immunization records include all vaccine doses that were administered at other locations such as hospitals or county health departments
  - Also include the names of all former providers, contraindications or allergies and date, and immune status such as history of disease and titers
  - Document all parent/guardian vaccine refusals and date in the immunization record Continue to educate and discuss the importance of adolescent immunizations at every encounter
- Establish office procedures to help eliminate missed opportunities to vaccinate:
  - Enter vaccinations in your regional Immunization Information System (NYSIIS)

- Track missed vaccines and review your practice immunization rates
- Send appointment confirmations to parents/guardians using postcards, phone calls, texts, emails, or patient portal
- Consider extending office hours or adding weekend hours to conduct vaccine clinics
- Reschedule appointments for those who did not show up for a vaccine visit
- Schedule the child's next appointment at the end of every office visit
- Utilize the monthly Gaps in Care (GIC) report for a list of MVP members who need preventive care services
- Consider utilizing alerts and flags within the electronic health record (EHR)
- Discuss the importance of early detection and encourage preventive care
- Document preventive care in the medical record with specific date and results
- Document medical and surgical history in the medical record and include dates
- Submit results to your local Regional Health Information Organization (RHIO)
- Use correct diagnosis and procedure codes and submit claims and encounter data in a timely manner
- Stock patient areas and exam rooms with educational materials such as those found here:
  - [Vaccines and Immunizations | CDC](#)
  - [Pregnancy and Family - MVP Health Care](#)