

Measure Description:

- The percentage of children who turn 2 years of age during the measurement year who had four diphtheria, tetanus, and acellular pertussis (DTaP); three polio (IPV); one measles, mumps, and rubella (MMR); three Haemophilus influenzae type B (HiB); three hepatitis B (HepB); one varicella (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday.
- The measure reports rates for each individual vaccine and three combination rates (Combo 3, Combo 7, Combo 10); payment under ACC Phase III will be associated with the Combo 10 rate, as it includes all recommended vaccines for early childhood immunization.
- This measure is identical to the CMS Child Core Set (CIS-CH) specification and the 2025 DOI Primary Care APM measure, using administrative or hybrid data collection methods.
- Vaccines must be documented in CIIS, EHR, or claims; historical vaccines from birth count if verified, with specific timing requirements (e.g., MMR after first birthday to avoid maternal antibody interference).
- Reportable via the Colorado Immunization Information System (CIIS) for accurate tracking and to reduce data gaps in administrative reporting.

Numerator:

- Children in the denominator who received the full Combo 10 series by their second birthday: 4 DTaP, 3 IPV, 1 MMR, 3 HiB, 3 HepB, 1 VZV, 4 PCV, 1 HepA, 2-3 RV (depending on brand), and 2 flu vaccines.
- Vaccines must meet minimum age and spacing requirements (e.g., DTaP doses at least 4 weeks apart, MMR/VZV on or after first birthday).
- Combo 10 rate (used for payment): Members compliant with all 10 vaccines, ensuring comprehensive protection against preventable diseases in early childhood.

Denominator:

- All children who turn 2 years of age during the measurement year (CY2026), with at least 12 months of continuous enrollment prior to their second birthday to allow for complete vaccine series.
- Members must be enrolled in Medicaid on their second birthday to be included in the denominator.
- Excludes members with documented contraindications or exclusions (see Exclusions section), such as anaphylaxis to any vaccine component.

Services to Support Immunization Compliance:

- Well-child visits or preventive care appointments at 2, 4, 6, 12, 15, and 18 months, where vaccines can be administered as part of routine checks per Bright Futures guidelines.
- Community health centers or home visiting programs (e.g., Nurse-Family Partnership) for outreach vaccinations in underserved or homebound families.
- School-based or daycare health services for catch-up immunizations, especially for children in group settings.
- Pharmacy services for vaccine administration (e.g., authorized retail pharmacies providing flu and HepA shots under Colorado protocols).

- Telehealth consultations for vaccine education and scheduling, followed by in-person administration or referral to CIIS-partnered sites.

Best Practices:

- Schedule vaccines at the recommended well-child visits (2, 4, 6, 12, 15, 18 months) per American Academy of Pediatrics (AAP) and Bright Futures guidelines to align with Combo 10 requirements and minimize misses.
- Use the Colorado Immunization Information System (CIIS) to verify vaccine history before administration, avoiding unnecessary duplicates and ensuring accurate numerator capture for all 10 vaccines.
- Educate parents on vaccine safety and disease prevention using the "Teach Back Method" to confirm understanding, such as asking them to repeat back the importance of MMR for measles protection.
- Track series completion with electronic health record (EHR) reminders or alerts; DTaP and PCV are often missed due to 4-dose requirements, so set automated follow-up notifications for incomplete series.
- Partner with home community programs for home vaccinations or reminders, targeting high-risk groups like underinsured families or those with delayed visits.
- Conduct outreach to patients who miss doses via phone, text, or portal messages, and offer flexible scheduling or mobile clinics to meet the second birthday deadline.
- Common miss: Incomplete series due to spacing errors (e.g., RV must be 2-3 doses by 8 months) — always use CPT II 3040F in EHR to document completion and flag gaps.
- Submit claims promptly with CPT codes to ensure vaccines are captured in CIIS and administrative data sets, reducing reliance on hybrid chart chases.
- Monitor practice performance using CIIS reports or EHR dashboards to identify gaps in Combo 10 rates and target interventions for specific vaccines (e.g., higher misses on flu due to seasonal timing).
- Collaborate with RAE quality teams for resources like free vaccine stock, training on CIIS integration, or incentives to improve equity in immunization access for young children.

CY 2026 Payment Thresholds

Level	Required Rate	Payout %	Description
Basecamp	≥27%	33%	Entry-level target for basic compliance; focus on core vaccines like DTaP and IPV to build from here.
Tree Line	≥28%	67%	Mid-level target; ensure full series including RV and flu to reach this.
Summit	≥29%	100%	High-performance target; use EHR tools and outreach to maximize rates.

For the full list of codes, please see Appendix A on the following page.

Childhood Immunization Status



Appendix A

Codes to Identify Vaccines		
Vaccine	CPT Codes	CVX Codes
DTaP	90698, 90700, 90723	20, 50, 106, 107, 110, 120, 146
IPV	90713, 90723	10, 120, 130, 134
MMR	90707, 90710	3, 94
HiB	90647, 90648, 90748	17, 46, 47, 48, 49, 51, 120, 148
HepB	90740, 90743, 90744, 90747	8, 45, 51, 110
VZV	90710, 90716	21, 94
PCV	90670	133, 215
HepA	90633	83, 85
RV	90681 (2-dose), 90680 (3-dose)	119, 116
Flu	90660, 90661, 90662, 90673, 90674, 90682, 90686, 90687, 90688, 90694, 90756	88, 135, 140, 141, 150, 151, 155, 158, 161, 171, 186

Codes for Exclusions (Anaphylaxis)	
Vaccine/Component	SNOMED CT Code
DTaP vaccine	428351000124105
IPV vaccine	428361000124100
MMR vaccine	428371000124108
HiB vaccine	428381000124106
HepB vaccine	428391000124101
VZV vaccine	428401000124100
PCV vaccine	428411000124102
HepA vaccine	428421000124107
RV vaccine	428431000124104
Flu vaccine	428441000124109

Codes for Hospice Exclusions (UBREV)	
Code	Description
0651	Hospice routine home care (per diem)
0652	Hospice continuous home care (per hour)
0655	Hospice inpatient respite care (per diem)
0656	Hospice general inpatient care (non-respite) (per diem)
0657	Hospice physician services
0658	Hospice room and board nursing facility (per diem)
0659	Hospice other (per diem)