

MUC2024-081 Adult Immunization Status (AIS-E)

American Academy of Family Physicians (AAFP) comments

Recommendation: Do not support

The American Academy of Family Physicians (AAFP) is a champion of safe and effective vaccines. Vaccination is a vital component of comprehensive primary care, and we support recommendations from the Advisory Committee on Immunization Practices (ACIP). However, the AAFP has repeatedly expressed concerns about the use of this composite measure, particularly as a performance measure where physicians can be held accountable for factors beyond their control. We do not support the addition of this measure for use in the CMS Medicare Advantage Star Rating Program.

We would like to reiterate comments we have previously shared about the use of the Adult Immunization Status composite measure in MIPS and other payment programs:

- **Measure concept** – We support the larger goal of improving vaccination rates, and we appreciate NCQA’s desire to hold health plans accountable for proving vaccination status. However, we believe it is premature to implement this composite measure given numerous challenges (touched upon below).
- **Reporting feasibility** – Current immunization registries and health data information sharing systems must first be optimized to more effectively aggregate patient information, including immunization records, to evaluate the quality of the care reliably and accurately. This is particularly true for the influenza vaccine which is frequently received by patients in the community at grocery stores, pharmacies, workplaces, etc. Inadequate data aggregation and information sharing increases the burden of reporting, as physicians and their staff must manually track down and enter information for immunizations received outside of their clinic. Despite their best efforts, there will undoubtedly be data gaps that will inappropriately be identified as care deficiencies under this measure.
- **Administrative burden** – Given the reporting feasibility challenges highlighted above, health plans may request data from clinicians’ EHR systems, which could create significant administrative burden on physicians and their clinic teams.
 - While this effort is grounded in good intentions, the reality is that the burden will fall on primary care physicians and their care teams to track down decades-old pediatric immunizations.
- **Increasing vaccine hesitancy among the American population** - Holding a clinician accountable for vaccination rates is troubling given the well-documented vaccine hesitancy throughout the United States.
- **Quality improvement vs. performance measurement** - At the provider/clinic-level, this measure can serve as an important internal quality improvement measure, but **we do not think that health plans should use it as an accountability measure tied to financial incentives or penalties in value-based contracts with physicians.**