

Adult Immunization Status (AIS-E)*

*Developed with support from the Department of Health and Human Services (DHHS), Office of the Assistant Secretary for Health (OASH), National Vaccine Program Office (NVPO) and The Hepatitis Education Project.

SUMMARY OF CHANGES TO HEDIS MY 2025

- Added a hepatitis B immunization indicator.
- Updated clinical recommendation statement and citations.
- Updated the denominator age range for the pneumococcal immunization indicator.
- Removed the herpes zoster live vaccine from the herpes zoster immunization indicator.
- *Technical Update:* Revised the numerator criteria of the herpes zoster vaccine to on or after October 20, 2017, through the end of the measurement period.
- Updated age stratifications for the influenza, Td/Tdap and zoster immunization indicators.
- Removed data criteria (element level).
- Removed programming guidance.
- Removed the data source reporting requirement from the race and ethnicity stratification.

Description	The 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, pneumococcal and hepatitis B.
Measurement period	January 1–December 31.
Clinical recommendation statement	The Advisory Committee on Immunization Practices recommends annual influenza vaccination; and tetanus, diphtheria and acellular pertussis (Tdap) and/or tetanus and diphtheria (Td) vaccine; herpes zoster, pneumococcal and hepatitis B vaccination for adults at various ages.
Citations	Murthy, N. A.P. Wodi, A.P., V.V. McNally, M.F. Daley, S. Cineas. 2024. "Advisory Committee on Immunization Practices Recommended Immunization Schedule for Adults Aged 19 Years or Older—United States, 2024." <i>MMWR Morb Mortal Wkly Rep</i> 73:11–15. DOI: http://dx.doi.org/10.15585/mmwr.mm7301a3
Characteristics	
Scoring	Proportion.
Type	Process.
Stratification	<ul style="list-style-type: none"> • Influenza. <ul style="list-style-type: none"> – Product line: <ul style="list-style-type: none"> ▪ Commercial. ▪ Medicaid. ▪ Medicare.

	<ul style="list-style-type: none"> – Age (as of the start of the measurement period, for each product line): <ul style="list-style-type: none"> ▪ 19–64 years. ▪ 65 years and older. – Race (for each product line): <ul style="list-style-type: none"> ▪ Race—American Indian or Alaska Native. ▪ Race—Asian. ▪ Race—Black or African American. ▪ Race—Native Hawaiian or Other Pacific Islander. ▪ Race—White. ▪ Race—Some Other Race. ▪ Race—Two or More Races. ▪ Race—Asked But No Answer. ▪ Race—Unknown. – Ethnicity (for each product line): <ul style="list-style-type: none"> ▪ Ethnicity—Hispanic or Latino. ▪ Ethnicity—Not Hispanic or Latino. ▪ Ethnicity—Asked But No Answer. ▪ Ethnicity—Unknown. • Td/Tdap. <ul style="list-style-type: none"> – Product line: <ul style="list-style-type: none"> ▪ Commercial. ▪ Medicaid. ▪ Medicare. – Age (as of the start of the measurement period, for each product line): <ul style="list-style-type: none"> ▪ 19–64 years. ▪ 65 years and older. – Race (for each product line): <ul style="list-style-type: none"> ▪ Race—American Indian or Alaska Native. ▪ Race—Asian. ▪ Race—Black or African American. ▪ Race—Native Hawaiian or Other Pacific Islander. ▪ Race—White. ▪ Race—Some Other Race. ▪ Race—Two or More Races. ▪ Race—Asked But No Answer. ▪ Race—Unknown. – Ethnicity (for each product line): <ul style="list-style-type: none"> ▪ Ethnicity—Hispanic or Latino. ▪ Ethnicity—Not Hispanic or Latino. ▪ Ethnicity—Asked but No Answer. ▪ Ethnicity—Unknown. • Zoster. <ul style="list-style-type: none"> – Product line: <ul style="list-style-type: none"> ▪ Commercial.
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	<ul style="list-style-type: none"> ▪ Medicaid. ▪ Medicare. – Age (as of the start of the measurement period, for each product line): <ul style="list-style-type: none"> ▪ 50–64 years. ▪ 65 years and older. – Race (for each product line): <ul style="list-style-type: none"> ▪ Race—American Indian or Alaska Native. ▪ Race—Asian. ▪ Race—Black or African American. ▪ Race—Native Hawaiian or Other Pacific Islander. ▪ Race—White. ▪ Race—Some Other Race. ▪ Race—Two or More Races. ▪ Race—Asked But No Answer. ▪ Race—Unknown. – Ethnicity (for each product line): <ul style="list-style-type: none"> ▪ Ethnicity—Hispanic or Latino. ▪ Ethnicity—Not Hispanic or Latino. ▪ Ethnicity—Asked But No Answer. ▪ Ethnicity—Unknown. • Pneumococcal. <ul style="list-style-type: none"> – Product line: <ul style="list-style-type: none"> ▪ Commercial. ▪ Medicaid. ▪ Medicare. – Age (as of the start of the measurement period, for each product line): <ul style="list-style-type: none"> ▪ 65 years and older. – Race (for each product line): <ul style="list-style-type: none"> ▪ Race—American Indian or Alaska Native. ▪ Race—Asian. ▪ Race—Black or African American. ▪ Race—Native Hawaiian or Other Pacific Islander. ▪ Race—White. ▪ Race—Some Other Race. ▪ Race—Two or More Races. ▪ Race—Asked But No Answer. ▪ Race—Unknown. – Ethnicity (for each product line): <ul style="list-style-type: none"> ▪ Ethnicity—Hispanic or Latino. ▪ Ethnicity—Not Hispanic or Latino. ▪ Ethnicity—Asked But No Answer. ▪ Ethnicity—Unknown.
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	<ul style="list-style-type: none"> • Hepatitis B. <ul style="list-style-type: none"> – Product line: <ul style="list-style-type: none"> ▪ Commercial. ▪ Medicaid. ▪ Medicare. – Age (as of the start of the measurement period, for each product line): <ul style="list-style-type: none"> ▪ 19–30 years. ▪ 31–59 years. – Race (for each product line): <ul style="list-style-type: none"> ▪ Race—American Indian or Alaska Native. ▪ Race—Asian. ▪ Race—Black or African American. ▪ Race—Native Hawaiian or Other Pacific Islander. ▪ Race—White. ▪ Race—Some Other Race. ▪ Race—Two or More Races. ▪ Race—Asked But No Answer. ▪ Race—Unknown. – Ethnicity (for each product line): <ul style="list-style-type: none"> ▪ Ethnicity—Hispanic or Latino. ▪ Ethnicity—Not Hispanic or Latino. ▪ Ethnicity—Asked but No Answer. ▪ Ethnicity—Unknown.
Risk adjustment	None.
Improvement notation	A higher rate indicates better performance.
Guidance	<p>General Rules: All measure rates are specified based on clinical guideline recommendations for the age group included in the rate.</p> <p>Allocation: The member was enrolled with a medical benefit throughout the measurement period.</p> <p>No more than one gap in enrollment of up to 45 days during the measurement period.</p> <p>The member must be enrolled on the last day of the measurement period.</p> <p>Reporting: For all plans, the race and ethnicity stratifications are mutually exclusive, and the sum of all categories in each stratification is the total population.</p>

Definitions	
Participation	The identifiers and descriptors for each organization's coverage used to define members' eligibility for measure reporting. Allocation for reporting is based on eligibility during the participation period.
Participation period	The measurement period.
Initial population	<p>Initial population 1 Members 19 years and older at the start of the measurement period who also meet the criteria for participation.</p> <p>Initial population 2 Same as the initial population 1.</p> <p>Initial population 3 Members 50 years and older at the start of the measurement period who also meet the criteria for participation.</p> <p>Initial population 4 Members 65 years and older at the start of the measurement period who also meet the criteria for participation.</p> <p>Initial population 5 Members 19-59 years at the start of the measurement period who also meet the criteria for participation.</p>
Exclusions	<p>Exclusions 1</p> <ul style="list-style-type: none"> Members who use hospice services (<u>Hospice Encounter Value Set</u>; <u>Hospice Intervention Value Set</u>) or elect to use a hospice benefit any time during the measurement period. Organizations that use the Monthly Membership Detail Data File to identify these members must use only the run date of the file to determine if the member elected to use a hospice benefit during the measurement period. Members who die any time during the measurement period. <p>Exclusions 2 Same as exclusions 1.</p> <p>Exclusions 3 Same as exclusions 1.</p> <p>Exclusions 4 Same as exclusions 1.</p> <p>Exclusions 5 Same as exclusions 1.</p>

Denominator	<p>Denominator 1 The initial population 1, minus exclusions.</p> <p>Denominator 2 Same as denominator 1.</p> <p>Denominator 3 The initial population 3, minus exclusions.</p> <p>Denominator 4 The initial population 4, minus exclusions.</p> <p>Denominator 5 The initial population 5, minus exclusions.</p>
Numerator	<p>Numerator 1—Immunization Status: Influenza</p> <ul style="list-style-type: none"> Members who received an influenza vaccine (<u>Adult Influenza Immunization Value Set</u>; <u>Adult Influenza Vaccine Procedure Value Set</u>; <u>Influenza Virus LAIV Immunization Value Set</u>; <u>Influenza Virus LAIV Vaccine Procedure Value Set</u>) on or between July 1 of the year prior to the measurement period and June 30 of the measurement period, or Members with anaphylaxis due to the influenza vaccine (SNOMEDCT code 471361000124100) any time before or during the measurement period. <p>Numerator 2—Immunization Status: Td/Tdap</p> <ul style="list-style-type: none"> Members who received at least one Td vaccine (<u>Td Immunization Value Set</u>; <u>Td Vaccine Procedure Value Set</u>) or one Tdap vaccine (CVX code 115; <u>Tdap Vaccine Procedure Value Set</u>) between 9 years prior to the start of the measurement period and the end of the measurement period, or Members with a history of at least one of the following contraindications any time before or during the measurement period: <ul style="list-style-type: none"> Anaphylaxis due to the diphtheria, tetanus or pertussis vaccine on (<u>Anaphylaxis Due to Diphtheria, Tetanus or Pertussis Vaccine Value Set</u>). Encephalitis due to the diphtheria, tetanus or pertussis vaccine (<u>Encephalitis Due to Diphtheria, Tetanus or Pertussis Vaccine Value Set</u>). <p>Numerator 3—Immunization Status: Zoster</p> <ul style="list-style-type: none"> Members who received two doses of the herpes zoster recombinant vaccine (CVX code 187; <u>Herpes Zoster Recombinant Vaccine Procedure Value Set</u>) at least 28 days apart, on October 20, 2017, through the end of the measurement period, or Members with anaphylaxis due to the herpes zoster vaccine (<u>Anaphylaxis Due to Herpes Zoster Vaccine Value Set</u>) any time before or during the measurement period. <p>Numerator 4—Immunization Status: Pneumococcal</p> <ul style="list-style-type: none"> Members who received at least one dose of an adult pneumococcal vaccine (<u>Adult Pneumococcal Immunization Value Set</u>; <u>Adult Pneumococcal Vaccine Procedure Value Set</u>) on or after their 19th birthday, before or during the measurement period, or

	<ul style="list-style-type: none"> Members with anaphylaxis due to the pneumococcal vaccine (SNOMEDCT code 471141000124102) any time before or during the measurement period. <p>Numerator 5—Immunization Status: Hepatitis B</p> <ul style="list-style-type: none"> Members who received at least three doses of the childhood hepatitis B vaccine (<u>Hepatitis B Immunization Value Set</u>; <u>Hepatitis B Vaccine Procedure Value Set</u>) with different dates of service on or before their 19th birthday. <ul style="list-style-type: none"> One of the three vaccinations can be a newborn hepatitis B vaccination (ICD-10-PCS code 3E0234Z) during the 8-day period that begins on the date of birth and ends 7 days after the date of birth. For example, if the member's date of birth is December 1, the newborn hepatitis B vaccination must be on or between December 1 and December 8. Members who received a hepatitis B vaccine series on or after their 19th birthday, before or during the measurement period, including either of the following: <ul style="list-style-type: none"> At least two doses of the recommended two-dose adult hepatitis B vaccine (CVX code 189; <u>Adult Hepatitis B Vaccine Procedure (2 dose) Value Set</u>) administered at least 28 days apart; or At least three doses of any other recommended adult hepatitis B vaccine (<u>Adult Hepatitis B Immunization (3 dose) Value Set</u>; <u>Adult Hepatitis B Vaccine Procedure (3 dose) Value Set</u>) administered on different days of service. Members who had a hepatitis B surface antigen, hepatitis B surface antibody or total antibody to hepatitis B core antigen test, with a positive result any time before or during the measurement period. Any of the following meet criteria: <ul style="list-style-type: none"> A test (<u>Hepatitis B Tests With Threshold of 10 Value Set</u>) with a result greater than 10 mIU/mL. A test (<u>Hepatitis B Prevacination Tests Value Set</u>) with a finding of immunity (<u>Hepatitis B Immunity Finding Value Set</u>). Members with a history of hepatitis B illness (<u>Hepatitis B Value set</u>) any time before or during the measurement period. Do not include laboratory claims (claims with POS code 81). Members with anaphylaxis due to the hepatitis B vaccine (SNOMED CT code 428321000124101) any time before or during the measurement period.
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Data Elements for Reporting

Organizations that submit data to NCQA must provide the following data elements in a specified file.

Table AIS-E-A-1/2/3 Data Elements for Adult Immunization Status

Metric	Age	Data Element	Reporting Instructions
Influenza	19-64	InitialPopulation	For each Metric and Stratification
TdTdap	65+	ExclusionsByEHR	For each Metric and Stratification
	Total	ExclusionsByCaseManagement	For each Metric and Stratification
		ExclusionsByHIERegistry	For each Metric and Stratification
Zoster	50-64	ExclusionsByAdmin	For each Metric and Stratification
	65+	Exclusions	(Sum over SSoRs)
	Total	Denominator	For each Metric and Stratification
		NumeratorByEHR	For each Metric and Stratification
Pneumococcal	65+	NumeratorByCaseManagement	For each Metric and Stratification
		NumeratorByHIERegistry	For each Metric and Stratification
HepatitisB	19-30	NumeratorByAdmin	For each Metric and Stratification
	31-59	Numerator	(Sum over SSoRs)
	Total	Rate	(Percent)

Table AIS-E-B-1/2/3: Data Elements for Adult Immunization Status: Stratifications by Race

Metric	Race	Data Element	Reporting Instructions
Influenza	AmericanIndianOrAlaskaNative	InitialPopulation	For each Metric and Stratification
TdTdap	Asian	Exclusions	For each Metric and Stratification
Zoster	BlackOrAfricanAmerican	Denominator	For each Metric and Stratification
Pneumococcal	NativeHawaiianOrOtherPacificIslander	Numerator	For each Metric and Stratification
HepatitisB	White	Rate	(Percent)
	SomeOtherRace		
	TwoOrMoreRaces		
	AskedButNoAnswer		
	Unknown		

Table AIS-E-C-1/2/3: Data Elements for Adult Immunization Status: Stratifications by Ethnicity

Metric	Ethnicity	Data Element	Reporting Instructions
Influenza	HispanicOrLatino	InitialPopulation	For each Metric and Stratification
TdTdap	NotHispanicOrLatino	Exclusions	For each Metric and Stratification
Zoster	AskedButNoAnswer	Denominator	For each Metric and Stratification
Pneumococcal	Unknown	Numerator	For each Metric and Stratification
HepatitisB		Rate	(Percent)

Rules for Allowable Adjustments of HEDIS

The “Rules for Allowable Adjustments of HEDIS” (the “Rules”) describe how NCQA’s HEDIS measure specifications can be adjusted for other populations, if applicable. The Rules, reviewed and approved by NCQA measure experts, provide for expanded use of HEDIS measures without changing their clinical intent.

Adjusted HEDIS measures may not be used for HEDIS health plan reporting.

Rules for Allowable Adjustments of Adult Immunizations Status

NONCLINICAL COMPONENTS		
Eligible Population	Adjustments Allowed (Yes/No)	Notes
Product lines	Yes	Organizations are not required to use product line criteria; product lines may be combined and all (or no) product line criteria may be used.
Ages	Yes, with limits	The age determination dates may be changed (e.g., select, “age as of June 30”). Changing the denominator age range is allowed; however, organizations must consult ACIP guidelines when considering whether to expand the age range outside of the current thresholds.
Allocation	Yes	Organizations are not required to use enrollment criteria; adjustments are allowed.
Benefits	Yes	Using a benefit is not required; adjustments are allowed.
Other	Yes	Organizations may use additional eligible population criteria to focus on an area of interest defined by gender, race, ethnicity, socioeconomic or sociodemographic characteristics, geographic region or another characteristic.
CLINICAL COMPONENTS		
Initial Population	Adjustments Allowed (Yes/No)	Notes
Event/diagnosis	NA	There is no event/diagnosis for this measure.
Exclusions	Adjustments Allowed (Yes/No)	Notes
Exclusions: Hospice and deceased member	Yes	These exclusions are not required. Refer to <i>Exclusions</i> in the <i>Guidelines for the Rules for Allowable Adjustments</i> .
Denominator	Adjustments Allowed (Yes/No)	Notes
Denominators	No	The logic may not be changed.
Numerator Criteria	Adjustments Allowed (Yes/No)	Notes
<ul style="list-style-type: none"> • Influenza • Td/Tdap • Zoster • Pneumococcal • Hepatitis B 	No	Value sets, direct reference codes and logic may not be changed.