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Improving HPV Immunization by Age 13 in Over 20 Kansas City Pediatric Practices

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Introduction

Current Centers for Disease Control and Prevention (CDC) and Advisory Committee on Immunization Practices (ACIP) clinical guidelines recommend HPV immunization by age 13 because this produces the highest amount of protective antibodies before exposure to HPV. Unfortunately, HPV immunization rates by age 13 in Missouri and Kansas are among the 7 worst performing states in the United States.¹

The Children's Health Network (CHN), a network consisting of Children's Mercy and 188 primary care providers across 23 pediatric practices in the Kansas City area, set a goal to improve HPV vaccination performance from below the national HEDIS 50th percentile (14.13%; baseline rate of 8%) to above the national HEDIS 75th or 90th percentile (18.00%; 22.63%) over a two year period.²

Methods

Several quality improvement interventions were implemented between June 2016 and March 2018 [Figure 1].

1. Infectious disease presentation & YouTube video on clinical importance of receiving HPV vaccinations prior to age 13.
2. Development of web-based HPV Provider & Parent Education Resources. (<https://www.cmics.org/chn/Resources.aspx>)
3. Transparent practice-level HPV immunization performance reports presented & reviewed every 2-3 months.
4. Developed recommended HPV immunization quality improvement tactics and added to quality improvement tool kit [Figure 2].

Methods

5. Distribution of recommended HPV immunization quality improvement tactics to all primary care providers.
6. Deployed technology to enable practices to identify and outreach to 12-13 year old patients in need of HPV vaccinations.

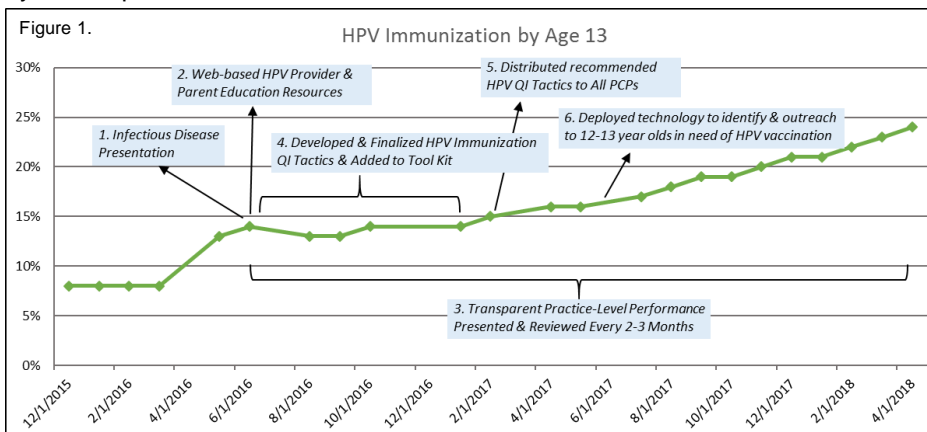


Figure 2.

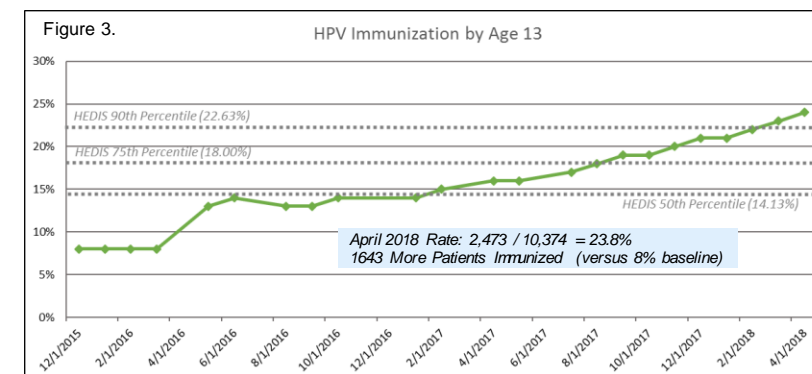
CHN Quality Improvement TOOL KIT			
	Quality Improvement Strategies	CMICS Measure Specific Resources	Payer Incentive Measure
HPV Vaccination / Adolescent Immunizations	<ul style="list-style-type: none"> Pre-Teen Bundle (i.e. Bundle HPV with Tdap/MCV) Provider Education and Provider-to-Patient Communication Patient/Family Education 	<ul style="list-style-type: none"> HPV Measure Definition & Quality Improvement Resources Overview (Slide Deck) HPV Provider and Parent Education Resources Vision Worklists to Target Overdue Patients 12-12.75 years Old (see Vision, Patient Outreach Training Guide) 	<ul style="list-style-type: none"> Aetna Blue KC (Core)
		<ul style="list-style-type: none"> Improvement takes significant amount of time (Why: 2 HPV immunizations needed over 6 months; patients only included after turning 13 years old) 	

References

1. CDC. 2014. National, state, and local area vaccination coverage among adolescents aged 13-17 years—U.S. 2013.
2. National Committee for Quality Assurance (NCQA) Quality Compass 2017 HEDIS National Performance Percentiles (All Lines of Business).

Results

The network HPV immunization rate by age 13 increased from 8% to 24% (above the national HEDIS 90th percentile of 22.63%) [Figure 3] with individual practices improving between 6 to 26 percentage points. Improvement resulted in an additional 1,643 children receiving HPV vaccination before age 13.



Conclusion

In less than two years, CHN achieved a 200% increase in HPV immunization rate from 8% to 24% (above the HEDIS 90th percentile) by developing a shared set of resources, effectively communicating these resources, and transparently reporting performance. The network plans to use a similar quality improvement approach to drive improvement with other pediatric measures.