



Quality Measure Tip Sheet: Influenza Vaccine – Long Stay

Quality Measure Overview

Numerator:

- This measure reports the percentage of long-stay residents who are appropriately given the influenza vaccine during the most recent influenza season.
- Residents meeting any of the following criteria on the selected influenza vaccination assessment qualify if the:
 - resident received the influenza vaccine during the most recent influenza season either in or outside the facility, **or**
 - resident was offered and declined the influenza vaccine, **or**
 - resident was ineligible due to contraindications (e.g., anaphylactic hypersensitivity to eggs or other components of the vaccine, history of Guillain-Barre Syndrome within six weeks after a previous influenza vaccination, bone marrow transplant within the past six months).

Denominator:

- All long-stay residents with a selected target assessment, except those with exclusions

Exclusion:

- Resident's age on target date of selected influenza vaccination assessment is 179 days or less.

Resource: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/MDS-30-QM-Users-Manual-V11-Final.pdf>

Ask These Questions:

- Was the MDS coded per *Resident Assessment Instrument (RAI)* requirements?
- Are facility staff members aware of the current influenza season? (Current season information is available at cdc.gov.)
- Does a process exist for obtaining the required, completed documentation (e.g., for consent, decline and/or contraindicated to administer) prior to submitting the MDS?

MDS Coding Requirements

In the Minimum Data Set (MDS):

- Code the reason the resident did not receive the vaccine as follows:
 - Resident was not in the facility during this year's influenza season
 - Resident received influenza vaccine outside the facility
 - Not eligible – medical contraindication
 - Offered and declined
 - Not offered
 - Inability to obtain vaccine due to declared shortage
 - None of the above, if none of the listed reasons apply or answer is unknown

Resource: <https://downloads.cms.gov/files/2-MDS-30-RAI-Manual-v1-16-and-Change-Tables-October-1-2018.zip>

Notes:

- This measure is only calculated (updated) once a year using a target period from Oct. 1 of the prior year to March 31 of the current year.
- If you code "Not Offered," "Inability to obtain vaccine due to declared shortage" or "None of the above," this will trigger as a missed opportunity on your quality measures.



- Does the facility have an internal tracking process to ensure documentation is completed and available for review?
- Is the required documentation accessible to the MDS coordinator prior to coding?
- Does evidence exist that the resident has been educated on the importance of receiving the vaccine?
- Does evidence exist of administration of the vaccine?