

Select Health Quality Provider Program

PEDIATRIC IMMUNIZATIONS: CHILDHOOD, CHILDHOOD INFLUENZA, AND ADOLESCENCE

2026 Quality Measure Reference Guide



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Related Quick Links

- [Adult/Pediatric Measures Quick Guide](#)
- [Report Hub Instructions: Basic User](#)
- [Formatting a Gaps List in Excel](#)
- [Demographic Allowable Corrections](#)
- [Quality Data Correction \(QDC\) Tool: Submitting Corrections](#)



**Select
Health**

This measure is included in the Primary Care Quality Provider Program.

Measure Description — Immunizations: Childhood

<p>Description</p>	<p>The percentage of members who have completed the following by their 2nd birthday:</p> <ul style="list-style-type: none"> • Diphtheria, tetanus, and acellular pertussis (DTaP): 4 doses • Polio (IPV): 3 doses • Measles, mumps, and rubella (MMR): 1 dose • Haemophilus influenza type B (HiB): 3 doses • Hepatitis B (HepB): 3 doses • Chicken pox (VZV): 1 dose • Pneumococcal conjugate (PCV): 4 doses • Hepatitis A (HepA): 1 dose • Rotavirus (RV) vaccinations*: 2 or 3 doses
<p>Denominator</p>	<p>Children who turn 2 years of age during the measurement year</p>
<p>Numerator</p>	<p>Children in the denominator who have completed the vaccinations listed in the “Description” above on or prior to their 2nd birthday</p>
<p>Intake and Measurement Periods</p>	<p>January 1 through December 31 of the measurement year</p>
<p>Data Source</p>	<p>Data for this measure comes from Select Health claims, Utah and Nevada state immunization information systems (i.e., USIIS, WebIZ), and corrections made in the QDC tool.</p>
<p>Exclusions</p>	<p>NOTE: Vaccine refusal will not exclude member from measure.</p>
<p>Preferred Correction Process</p>	<p>Enter the immunization into the relevant state immunization information system using valid vaccine codes and avoiding unspecified codes when possible as follows:</p> <ul style="list-style-type: none"> • (Utah) Intermountain Medical Group clinics enter into Epic; affiliate clinics enter into USIIS. For corrections documentation, use the Immunization History Report from USIIS, which shows vaccination date. • (Nevada) Enter missing immunizations into WebIZ, which shows vaccination date, and use it for documenting corrections. • (Idaho, Colorado) Because Select Health does not receive data feeds from the state immunization records, use the QDC tool for data correction submissions including the Vaccine History Report. <p>For the Quality Provider Program correction, include 1 of the following required forms of documentation from the medical record:</p> <ul style="list-style-type: none"> • A vaccine history report indicating the name of the specific antigen and the date of service • A certificate of immunization prepared by an authorized healthcare provider or agency that includes the specific dates and types of immunization administered

* Depending on the brand used

Measure Description — Immunizations: Childhood Influenza

Description	The percentage of members who have had 2 influenza vaccinations by their 2nd birthday
Denominator	Children who turn 2 years of age during the measurement year
Numerator	Children in the denominator who have 2 doses of influenza vaccine, with different dates of service, on or prior to their 2nd birthday*
Intake and Measurement Periods	January 1 through December 31 of the measurement year
Data Source	Data for this measure comes from Select Health claims, Utah and Nevada state immunization information systems (i.e., USIIS, WebIZ), and corrections made in the QDC tool.
Exclusions	NOTE: Vaccine refusal will not exclude member from measure.
Preferred Correction Process	<p>Enter the immunization into the relevant state immunization information system using valid vaccine codes and avoiding unspecified codes when possible as follows:</p> <ul style="list-style-type: none"> ● (Utah) Intermountain Medical Group clinics enter into Epic; affiliate clinics enter into USIIS. For corrections documentation, use the Immunization History Report from USIIS, which shows vaccination date. ● (Nevada) Enter missing immunizations into WebIZ, which shows vaccination date, and use it for documenting corrections. ● (Idaho, Colorado) Because Select Health does not receive data feeds from the state immunization records, use the QDC tool for data correction submissions including the Vaccine History Report. <p>For the Quality Provider Program correction, include 1 of the following required forms of documentation from the medical record:</p> <ul style="list-style-type: none"> ● A vaccine history report indicating the name of the specific antigen and the date of service ● A certificate of immunization prepared by an authorized healthcare provider or agency that includes the specific dates and types of immunization administered

* Vaccinations administered prior to 6 months (180 days) of age do not count.

Measure Description — Immunizations: Adolescence

<p>Description</p>	<p>The percentage of members 13 years of age who have completed the following vaccines by their 13th birthday:</p> <ul style="list-style-type: none"> • Meningococcal conjugate: 1 dose (age range 10–13) • Human papillomavirus (HPV): Either the 2-dose or 3-dose series (age range 9–13)* • Tetanus, diphtheria toxoids, and acellular pertussis (Tdap): 1 dose (age range 10–13)
<p>Denominator</p>	<p>Adolescents who turn 13 years of age during the measurement year</p>
<p>Numerator</p>	<p>Adolescents in the denominator who have completed the vaccinations listed in the “Description” above by their 13th birthday</p>
<p>Intake and Measurement Periods</p>	<p>January 1 through December 31 of the measurement year</p>
<p>Data Source</p>	<p>Data for this measure comes from Select Health claims, Utah and Nevada state immunization information systems (i.e., USIIS, WebIZ), and corrections made in the QDC tool.</p>
<p>Exclusions</p>	<p>NOTE: Vaccine refusal will not exclude member from measure.</p>
<p>Preferred Correction Process</p>	<p>Enter the immunization into the relevant state immunization information system using valid vaccine codes and avoiding unspecified codes when possible as follows:</p> <ul style="list-style-type: none"> • (Utah) Intermountain Medical Group clinics enter into Epic; affiliate clinics enter into USIIS. For corrections documentation, use the Immunization History Report from USIIS, which shows vaccination date. • (Nevada) Enter missing immunizations into WebIZ, which shows vaccination date, and use it for documenting corrections. • (Idaho, Colorado) Because Select Health does not receive data feeds from the state immunization records, use the QDC tool for data correction submissions including the Vaccine History Report. <p>For the Quality Provider Program correction, include 1 of the following required forms of documentation from the medical record:</p> <ul style="list-style-type: none"> • A vaccine history report indicating the name of the specific antigen and the date of service • A certificate of immunization prepared by an authorized healthcare provider or agency that includes the specific dates and types of immunization administered

* To meet the requirement for compliance, the 2-dose series of HPV vaccine must be administered at a minimum of 146 days apart and prior to the member's 13th birthday.

Allowable Corrections

General Guidance

- Include a copy of EHR note, progress note, or screen print signed by MA/RN/MD including member name, DOB, and provider.
- Submit corrections using [this online tool](#).
- Wait 6 weeks from the date of service to enter corrections to allow for claim lag.
- Don't attach multiple patient records to a single correction.
- **Additional documentation required includes:**
 - **For Utah:** Intermountain Medical Group clinics enter into Epic. Affiliate clinics enter into USIIS. For corrections documentation, use the Immunization History Report from USIIS, which shows vaccination date.
 - **For Nevada:** Enter missing immunizations into WebIZ, which shows vaccination date, and use it for documenting corrections.
 - **For Idaho and Colorado:** Use the QDC tool for data correction submissions because Select Health does not receive data feeds from the state immunization records.

Allowable Corrections					
Allowable Correction	Submission Correction Process				Notes for Entering Corrections
	Category	Measure	Component	Correction Type(s)	
Immunization: Childhood and Childhood Influenza					
Unaccounted for vaccination: DTaP, IPV, MMR, HiB, HepB, VZV, Pneumococcal conjugate, Hep A, Rotavirus, Flu	Immunization	Childhood Immunization	CIS Numerator (1- to 4-dose entry)*	<ul style="list-style-type: none"> • DTaP • IPV • MMR • HiB • Hepatitis B • VZV • Pneumococcal conjugate • Hepatitis A • Rotavirus (2-Dose Schedule) • Rotavirus (3-Dose Schedule) • Influenza 	<ul style="list-style-type: none"> • All doses for childhood immunizations must have occurred on or before the 2nd birthday. • Flumist (LAIV) is only acceptable if given on the 2nd birthday. • Rotavirus: <ul style="list-style-type: none"> — RotaTeq: 3-dose series. — Rotarix: 2-dose series. — If note says "NOS" or unspecified, they must have a total of 3 doses of rotavirus. • NOTE: A child may be considered complete in a vaccine forecast but not compliant for the measure if they fall behind on the vaccine schedule and only receive: <ul style="list-style-type: none"> — 3 pneumococcal conjugate (PCV) doses by the 2nd birthday — 2 RotaTeq doses before age 8 months
Immunization: Adolescence					
Unaccounted for vaccination: Meningococcal conjugate, HPV, Tdap (tetanus, diphtheria toxoids, and acellular pertussis)	Immunization	Adolescent Immunization	IMA Numerator (1- to 4-dose entry)*	<ul style="list-style-type: none"> • Meningococcal • Tdap • HPV 	<ul style="list-style-type: none"> • Meningococcal: Between 10th and 13th birthday • Tdap: Between 10th and 13th birthday • HPV: Between 9th and 13th birthday (2-dose minimum 146 days apart)

* For immunization combo/series: 4 immunization corrections can be submitted at one time. Submit additional corrections if more than 4 corrections are needed.

[Access guidance for general corrections to demographics.](#)

Frequently Asked Questions

Q: Why do these measures matter?

A: On-time vaccination throughout childhood and adolescence is essential because it helps provide immunity before they are exposed to potentially life-threatening diseases.

Q: What is Select Health doing to help?

A: Select Health Quality Provider Program provides an up-to-date registry of Select Health patients included in this measure with their compliance status. Filter patient lists to identify those who will need to be immunized soon. In addition, we:

- Use automated immunization reminder calls to our Medicaid Select Health members with an opt-in for text or email.
- Maintain a pediatric preventative care page on our Select Health website highlighting immunizations.

Q: What are best practices for these measures?

A: Best practices include:

- Using the Select Health Quality Provider Program gaps report or clinic electronic medical record gaps to identify patients who need immunizations
- Submitting undocumented immunizations in the applicable state's tool before using Select Health's Quality Data Corrections (QDC) Tool
- Including all recommended vaccinations at every visit and:
 - Asking open-ended questions if you encounter hesitancy. Questions such as, "What concerns do you have?" allow for better dialogue between patient and provider.
 - Coordinating vaccine timing with well-child visits, where appropriate.

- Offering walk-in appointments for vaccinations.
- Educating parent(s) if vaccine refusal occurs. Stress the associated risk, and continue the conversation at the next most-appropriate time.
- Making the next dose follow-up appointment prior to patient leaving the office.

- Using human papillomavirus (HPV) best practices, including:
 - Offering initial dose at 9- or 10-year well-child check or in conjunction with Tdap at age 10–12 years.
 - Emphasizing HPV for cancer prevention.
- Enhancing practice workflow by:
 - Designate a vaccine champion to lead immunization efforts, track clinic performance, and support team education.
 - Educating all staff (from front desk to providers) to consistently encourage vaccination and appropriate timing requirements.
 - Providing standing orders for immunization, and creating provider prompts in electronic health records for when immunizations are due.
 - Implementing a reminder system to inform patients about upcoming recommended immunizations as well as encouraging those who are overdue for immunizations to return to the office.
- Monitoring progress toward goals, adjusting the process when needed by:
 - Establishing a baseline immunization rate and setting an ambitious goal.
 - Discussing how your clinic process is working during staff meetings.
 - Making process adjustments when needed to ensure your clinic's success.

Resources:

American Academy of Pediatrics. *2026 AAP Immunization Schedule*. **AAP.org**. [Last updated] August 20, 2025. <https://www.aap.org/en/patient-care/immunizations/>. Accessed February 4, 2026.

American Academy of Pediatrics. *Why Immunize Your Child*. **AAP.org**. March 29, 2022. <https://www.healthychildren.org/English/safety-prevention/immunizations/Pages/Why-Immunize-Your-Child.aspx>. Accessed February 4, 2026.

American Cancer Society. *HPV Vaccines*. **Cancer.org**. [Last Revised] April 30, 2024. <https://www.cancer.org/cancer/risk-prevention/hpv/hpv-vaccines.html>. Accessed February 4, 2026.

Select Health. *What is a Well-child Visit, and Why does it Matter?*. **selecthealth.org**. 2026. <https://selecthealth.org/wellness/preventive-care/well-child>. Accessed February 4, 2026.

Working Your Open Gaps List

Immunizations: Childhood (CIS_CB7) and Childhood Influenza (CIS_FLU)

STEP 1
<p>Create a current gaps-in-care list:</p> <ol style="list-style-type: none"> 1. Open your Gaps-in-Care-for-Download report: QPP Report Hub 2. Apply these filters: <ul style="list-style-type: none"> — Super clinic: Choose your clinic. — Measure: Click on “Immunizations: Childhood (CIS_CB7)” & “Immunizations: Childhood Flu (CIS_FLU).” — Immunization Measure: For Combo Measures (i.e., CIS_CB7 & IMA_CB2): <ul style="list-style-type: none"> > “Bundles Only” will show compliant/achievable/missed with status detail indicating recorded dates and missing information. > “Bundle & components” will break down each immunization in the bundle with associated claim dates in status detail. — Status: Unclick the “Compliant” box. This will filter for only the achievable and/or missed members. 3. In the drop-down menu on the top right side of the page, change the view from “Member” to “Download.” 4. Follow the instructions on the screen to export the data to Excel. <p>Refer to Report Hub Instructions: Basic User.</p>
STEP 2
<p>Format your Excel export. (Refer to Formatting a Gaps List in Excel.)</p>
STEP 3
<p>Review tips for working your gaps-in-care list (page 8).</p>

Measure Information

The American Academy of Pediatrics (AAP) strongly recommends immunizations as the safest way of preventing disease, disability, and death.¹

Different vaccines work in different ways, but all help the body’s immune system develop natural defenses to combat serious diseases, especially for infants whose immune systems are not fully developed.

With this measure, timely administration of combo 7 and childhood flu vaccinations will count as compliant if given before or on the child’s second birthday.

For this measure:

- The child’s date of birth is the **measurement start date**.
- The day the child turns 2 is the **measurement end date**. Any immunizations completed after the 2nd birthday will **NOT** count as compliance for this measure.

NOTE: Examples used in this document are for instructional purposes only; the dates that appear are only representative of what a user might see.

Corrections Pro Tip

Please wait 6 weeks from the date of service before determining if a correction is needed. This allows time for claims to be processed, ultimately ensuring that only needed corrections are submitted.

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Working Your Open Gaps List, Continued

Tips for Working your Gaps-in-Care List — Immunizations: Childhood, Childhood Influenza

1. Follow recommended guidance for these childhood immunizations:*

- **Rotavirus (RV):** RotaTeq® vaccine is a 3-dose series given at 2, 4, and 6 months of age. Rotarix® vaccine is a 2-dose series given at 2 and 4 months of age. Vaccination with either rotavirus vaccine should not be started for infants 15 weeks of age or older. All doses should be completed by 8 months of age.
- **Hepatitis B series:** The hepatitis B vaccine is a 3-dose series. If hepatitis B vaccine is not given at birth, the first dose can be given at 2 months of age. The 2nd dose should be given at 4 months of age. The 3rd dose should be given at ≥24 weeks of age.
- **Hib series:** The number of doses depends on the type of vaccine used. This 6-month dose of Hib vaccine can be skipped if using certain combination vaccines (e.g., PedVax®).
- **IPV:** If Pentacel® (DTaP, IPV, Hib) vaccine is used, a 4th dose of IPV at 12–15 months of age may be given. For school entry, 1 dose of IPV should be given ≥4 years of age.
- **Hib & PCV:** The final dose of Hib and pneumococcal (PCV) vaccines should be given at ≥12 months of age.

- **DTaP:** The 4th dose of DTaP may be given as early as 12 months of age, provided at least 6 months have passed since the 3rd dose. For school entry, 1 dose of DTaP should be given at ≥4 years of age.

Figure 1 (below) lists the immunizations needed to close the care gap for these measures based on the current recommendations by the American Academy of Pediatrics.²

2. **Sort by date of birth or by the achievable date, oldest to newest**, so that the patients who will be turning 2 sooner will have a chance to come in and complete their immunization bundles before they age out of the measure.

3. Once downloaded, notice the following within the Gap Report:

- The “Birth Date” and the “Achievable Date” are 2 years apart.
- If the achievable date is still in the future, the Status column will read “Achievable.”
- If it reads “Compliant,” it means that all the vaccines required have been administered within the time range (only visible if “Compliant” was not previously removed when downloaded or sorted).
- If it says “missed,” at least 1 vaccine was not administered in the recommended time frame.

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Figure 1. Required Immunizations by Child’s 2nd Birthday²

Vaccine*	Total Doses Needed
Diphtheria, tetanus, and acellular pertussis (DTaP)	4
Polio (IPV)	3
Measles, mumps, and rubella (MMR)	1
Haemophilus influenza type B (HiB)	3
Hepatitis B (HepB)	3
Chicken pox (VZV)	1
Pneumococcal conjugate (PCV)	4
Hepatitis A (HepA)	1
Rotavirus (RV)	2–3**
Influenza	2

* Patients should ask their primary care clinicians if they have questions about what vaccinations their children should receive.

** Depending on brand used

Working Your Open Gaps List, Continued

Tips for Working your Gaps-in-Care List—Immunizations: Childhood, Childhood Influenza

- Review the Status Detail column for immunizations** as indicated in the example shown in **Figure 2** below.
NOTE: “Missing at least 1 Dose” will always appear, but the information beneath that is what matters.
- Review the Status Detail column for flu** as indicated in the example shown in **Figure 3** below. Once the entire bundle of vaccinations has been administered, the Status column will show “Compliant.”
- Update patient’s immunization information by state.** Use the Immunization History Report from your respective Immunization Registry, USIIS, IRIS, WebIZ, or CIIS (see **Figure 4** below), for corrections
- documentation that shows immunization antigen information and vaccination date.
- Enter corrections using the guidance below and as indicated in Figures 5a and 5b** (below):
 - Access the **Quality Data Corrections (QDC) Tool** (reference the QDC Tool guide for **“Submitting Corrections”**). Use the link(s) in the QDC Correction URL column (last column) in the downloaded gaps-in-care Excel file to enter missing immunization information.
 - This link opens a screen (**Figure 5a** below) with pre-populated member and measure information (i.e., EMPI, Member ID, and Provider Name). **Select how many immunizations to correct.**

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Figure 2. Example: Reviewing the Status Detail for Immunizations

For example, **DTaP 2 of 4 immunizations on Date(s) (source):** The dates following (04/04/YY and 01/06/YY) indicate the dates Select Health has on file for when the vaccine was administered. Because DTaP requires 4 total doses, it will show 2 of 4, with 4 dates of service waiting for 2 more to be “Complete.”

Status	Status Detail	Achievable Date
	Missing at least 1 Dose: DTaP 2 of 4 immunizations on Date(s) (source): (04/04/YY(P); 01/06/YY(P)) HEPB 1 of 3 immunizations on Date(s) (source): (04/04/YY(P)) HIB 2 of 3 immunizations on Date(s) (source): (07/01/YY(P); 10/01/YY(P)) IPV 1 of 3 immunizations on Date(s) (source): (04/04/YY(P)) PCV 2 of 4 immunizations on Date(s) (source): (04/04/YY(P); 10/01/YY(P)) ROTA2 3 0 of 2 3 immunizations	
	Complete: HEPA 1 of 1 immunizations on Date(s) (source): (10/01/YY(P)) MMR 1 of 1 immunizations on Date (source): 10/01/YY(P)	
Achievable	VZV 1 of 1 immunizations on Date (source): 10/01/YY(P)	9/26/YYYY

Once a vaccine has been completed, it will show under “Complete” in the Status Detail column (for example, VZV 1 of 1 with the respective date of service). Once the entire bundle of vaccinations has been administered, the Status Detail column will indicate “Compliant.”

Figure 3. Example: Reviewing the Status Detail for Flu

In this example, the first patient has not completed any of the 2 vaccines and must have completed both by 05/30/YYYY to be compliant.

The second patient has until 06/02/YYYY to complete the series but has already completed 1 of the 2 vaccines. The first dose was given 03/07/YYYY.

Birth Date	Measure Name	Qualified Date	Status	Status Detail	Achievable Date
5/30/YYYY	Immunizations: Childhood Flu (CIS_FLU)	5/30/YYYY	Achievable	FLU 0 of 2 immunizations	5/30/YYYY
6/2/YYYY	Immunizations: Childhood Flu (CIS_FLU)	6/2/YYYY	Achievable	FLU 1 of 2 immunizations on Date(s) (source): 03/07/YY(P)	6/2/YYYY

When there is a date in “Status Detail,” it means Select Health has acknowledged vaccine delivery and that no correction is needed.

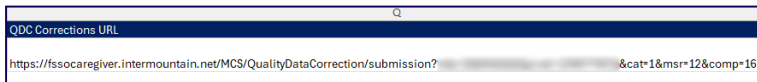
Figure 4. Preferred Method for Updating Immunization Info by State

State	Recommendation
Utah	Intermountain Medical Groups: Enter missing immunization data into Epic.
	Affiliate Groups: Enter missing immunization data into USIIS.
Idaho	Enter missing immunization data from IRIS into the QDC tool.
Nevada	Enter missing immunization data into WebIZ.
Colorado	Enter missing immunization data from CIIS into the QDC tool.

Working Your Open Gaps List, Continued

Tips for Working your Gaps-in-Care List — Immunizations: Childhood, Childhood Influenza

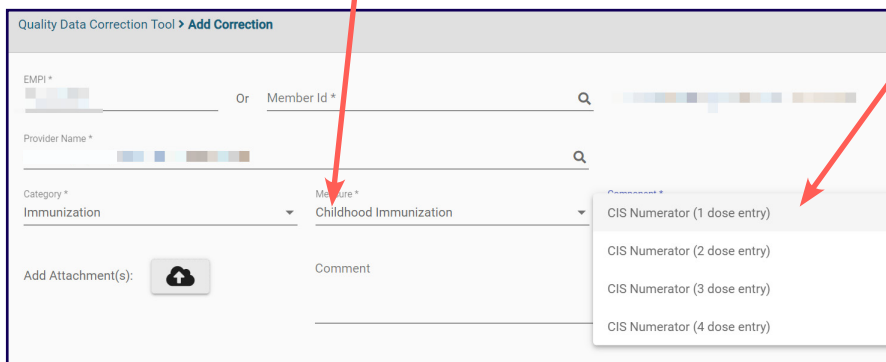
- Enter the corrections in the order indicated in **Figure 5b** (below).
 - Attach the document from your respective state's registry or appropriate records from the electronic health record (see **Figure 4** on [page 9](#)).
For the CIS numerator type, individual or combo vaccines may be entered (see **Figure 5c** on [page 11](#)).
 - Click "Submit."
 - After a correction is submitted, the HEDIS team will either accept (marked "Approved" in the tool) or reject the correction and include a notation as to why. Please read these comments because sometimes there may be an opportunity to fix an error and resubmit the correction.
- NOTE:** You will **NOT** be notified if your correction was accepted or rejected; you will need to look in the QDC tool.



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Figure 5a. Entering Corrections: Selecting Immunizations to Enter

Under "Measure," select "Childhood Immunization."

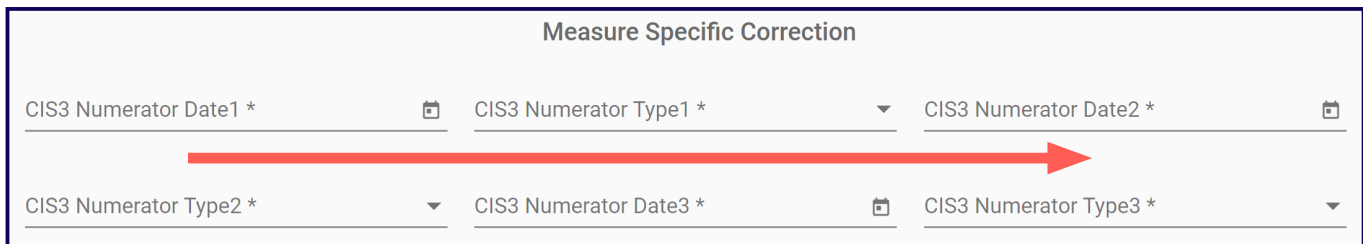


Click on "Component," and a drop-down menu will appear. Select how many immunizations you will be entering:

- One immunization = CIS Numerator (1-dose entry)
- Two immunizations = CIS Numerator (2-dose entry)
- Three immunizations = CIS Numerator (3-dose entry)
- Four immunizations = CIS Numerator (4-dose entry)

Figure 5b. Entering Corrections: Following the Correct Order

Example: 3 vaccinations need to be entered; in this case, select CIS Numerator (3-dose entry).



Make sure to go horizontally when entering "Date 1" and then "Type 1"; do the same for "Date 2" and "Type 2" as well as for "Date 3" and "Type 3." Be careful to not enter "Date 1" for "Type 2."

By selecting "3-dose entry," you will need to enter exactly 3 doses. If you enter only 2 doses, the entry will not be accepted, and if you need to enter 4 doses, you'll need to restart and select "4-dose entry."

Working Your Open Gaps List, Continued

Tips for Working your Gaps-in-Care List — Immunizations: Childhood, Childhood Influenza

Figure 5c. Entering Corrections: CIS Numerator Type

The drop-down menu consists of individual vaccines or the different combination vaccines that can be entered. Using the corresponding combination vaccine when applicable can save time on entering corrections.

The screenshot shows a form with several fields. On the left, there is a field for 'CIS1 Numerator Date1 *' with a calendar icon. Below it is an 'Add Attachment(s)*' field with a cloud upload icon. To the right is a 'Comment' text area. On the far right, a 'CIS1 Numerator Type1 *' drop-down menu is open, showing a list of vaccine options: Rotavirus (2 Dose Schedule), Rotavirus (3 Dose Schedule), DTaP HepB IPV, DTaP HiB IPV, DTaP IPV HEPB HiB, and MMR VZV (ProQuad/MMRV). A red arrow points from the text above to the menu.

Learn More

For more information on how to enter corrections, please refer to the **Allowable Corrections** section on [page 5](#).

References

1. American Academy of Pediatrics. *Vaccination Recommendations by the AAP*. **AAP.org**. [Last updated] July 29, 2025. <https://www.aap.org/en/patient-care/immunizations/vaccination-recommendations-by-the-aap/>. Accessed February 4, 2026.
2. American Academy of Pediatrics. *All About the AAP Recommended Immunization Schedule*. **Healthychildren.org**. [Last updated] January 26, 2026. <https://www.healthychildren.org/English/safety-prevention/immunizations/Pages/Recommended-Immunization-Schedules.aspx>. Accessed February 4, 2026.

Working Your Open Gaps List

Immunizations: Adolescence (IMA_CB2)

STEP 1
<p>Create a current gaps-in-care list:</p> <ol style="list-style-type: none"> 1. Open your Gaps-in-Care-for-Download report: QPP Report Hub 2. Apply these filters: <ul style="list-style-type: none"> — Super clinic: Choose your clinic. — Measure: Click on Immunization Measure: For Combo Measures (i.e., CIS_CB7 & IMA_CB2): <ul style="list-style-type: none"> > “Bundles Only” will show compliant/achievable/missed with status detail indicating recorded dates and missing info. > “Bundle & components” will break down each immunization in the bundle with associated claim dates in status detail. — Status: Unclick the “Compliant” box. This will filter for only the achievable and/or missed members. 3. In the drop-down menu on the top right side of the page, change the view from “Member” to “Download.” 4. Follow the instructions on the screen to export the data to Excel. <p>Refer to Report Hub Instructions: Basic User.</p>
STEP 2
Format your Excel export. (Refer to Formatting a Gaps List in Excel .)
STEP 3
Review tips for working your gaps-in-care list (page 13).

Measure Information

The American Academy of Pediatrics (AAP) strongly recommends immunizations as the safest way to prevent disease, disability, and death. Some vaccines such as the HPV vaccine also help prevent specific cancers.¹

With this measure, timely administration of meningococcal conjugate, human papillomavirus (HPV), and Tdap vaccinations will count as compliant if given before or on the patient’s 13th birthday.*

For this measure:

- The member’s 9th birthday is the **measurement start date**. The gaps-in-care list has the measurement start date located in the Qualified Date column of the spreadsheet.
- **The end date**, which appears in the Achievable Date and the Measure Instruction columns, is the day the member turns 13. Any immunizations completed after the 13th birthday will **NOT** count as compliance for this measure.

NOTE: Examples used in this document are for instructional purposes only; the dates that appear are only representative of what a user might see.

Corrections Pro Tip

Please wait 6 weeks from the date of service before determining if a correction is needed. This allows time for claims to be processed, ultimately ensuring that only needed corrections are submitted.

* These vaccinations can be started before the patient falls into the measurement year but will not show up in the gaps report until the year before the patient turns 13.

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Working Your Open Gaps List, Continued

Tips for Working Your Gaps-in-Care List — Immunizations: Adolescence

- Follow recommended guidance for these adolescent immunizations.¹ Figure 1** (below) provides an overview of administration timing for these immunizations.
- Sort by date of birth or by the achievable date, oldest to newest**, so that the patients who will be turning 13 sooner will have a chance to come in and complete their immunization bundles before they age out of the measure.*
- Once the Excel file downloads, note that:**
 - The information in the **Birth Date** and **Achievable Date** columns are 13 years apart (see **Figure 2** below).
 - If the achievable date is in the future, the Status will read “Achievable.”
- If it reads “Compliant,” it means that all the vaccines required have been administered within the time range (only visible if “Compliant” was not previously removed when downloaded or sorted).
- If it says “Missed,” at least 1 vaccine was not administered in the recommended time frame.
- Review the “Status Detail” for immunizations** as indicated in the example shown in **Figure 3** (on [page 14](#)).
- Update patient’s immunization information by state.** Use the Immunization History Report from your respective Immunization Registry: USIIS, IRIS, WebIZ or CIIS (see **Figure 4** on [page 14](#)), for corrections documentation that shows immunization antigen information and vaccination date.

* These vaccinations can be started before the patient falls into the measurement year but will not show up in the gaps report until the year the patient turns 13.

Continued on page 14...

Figure 1. Required Immunizations by the Adolescent’s 13th Birthday

Vaccinations	Recommended Schedule
Meningococcal conjugate (MCV)	1 dose at 10–12 years of age
Human papillomavirus (HPV)	Start administering at age 9; 2 doses to be given 5 months (146 days) apart
Tdap (tetanus, diphtheria, pertussis)	1 dose at 10–12 years of age

Figure 2. Example: Achievable Status Overview

For example, This patient can still achieve compliance with 1 dose of HPV by 5/5/YYYY (the member’s 13th birthday). When those vaccines are given before the achievable date, the Status column will change to read, “Compliant.”

Birth Date	Measure Name	Qualified Date	Status	Status Detail	Achievable Date	Measure Instructions
5/5/YYYY	Immunizations: Adolescent (IMA_CB2)	5/5/YYYY	Achievable	Missing at least 1 Dose: HPV 1 of 2 or 3 immunizations on Date(s) (source): (08/13/YY(P)) Complete: MCV 1 of 1 immunizations on Date (source): 08/13/YY(P) TDAP 1 of 1 immunizations on Date (source): 08/13/YY(P)	5/5/YYYY	Member needs to have complete vaccine series by 5/5/YYYY.
8/7/YYYY	Immunizations: Adolescent (IMA_CB2)	8/7/YYYY	Achievable	Missing at least 1 Dose: HPV 1 of 2 or 3 immunizations on Date(s) (source): (11/08/YY(P)) Complete: MCV 1 of 1 immunizations on Date (source): 11/08/YY(P) TDAP 1 of 1 immunizations on Date (source): 08/30/YY(P)	8/7/YYYY	Member needs to have completed vaccine series by 8/7/YYYY.

NOTE: “Missing at least 1 Dose” will always appear, it’s the information below that message that matters.

Working Your Open Gaps List, Continued

Tips for Working Your Gaps-in-Care List — Immunizations: Adolescence

Figure 3. Example: Reviewing the Status Detail for Immunizations

For example, HPV 2 of 2 or 3: (Typically patients receive 2 doses if given before the age of 14 and 3 doses if vaccination series is initiated starting age 15.) This patient received HPV vaccines on 10/21/YYYY and 5/16/YYYY but still needs an MCV and TDAP vaccine before the achievable date of 9/25/YYYY.

Once those vaccines are given before the achievable date, the Status column will change to read, "Compliant."

Birth Date	Measure	Qualified Date	Status	Status Detail	Achievable Date	Measure Instructions
6/16/YYYY	Immunizations: Adolescent (IMA_CB2)	6/16/YYYY	Achievable	Missing at least 1 Dose: HPV 1 of 2 or 3 immunizations on Date(s) (source): (10/18/YY(P)) Complete: MCV 1 of 1 immunizations on Date (source): 10/18/YY(P) TDAP 1 of 1 immunizations on Date (source): 10/18/YY(P)	6/16/YYYY	Member needs to have completed vaccine series by 6/16/YYYY
9/25/YYYY	Immunizations: Adolescent (IMA_CB2)	9/25/YYYY	Achievable	Missing at least 1 Dose: MCV 0 of 1 TDAP 0 of 1 Complete: HPV 2 of 2 or 3 immunizations on Date(s) (source): (10/21/YY(P); 5/16/YY(P))	9/25/YYYY	Member needs to have completed vaccine series by 9/25/YYYY
10/2/YYYY	Immunizations: Adolescent (IMA_CB2)	10/2/YYYY	Achievable	Missing at least 1 Dose: HPV 0 of 2/3 MCV 0 of 1 TDAP 0 of 1 Complete:	10/2/YYYY	Member needs to have completed vaccine series by 10/2/YYYY

Figure 4. Preferred Method for Updating Immunization Info by State

State	Recommendation
Utah	Intermountain Medical Groups: Enter missing immunization data into Epic.
	Affiliate Groups: Enter missing immunization data into USIIS.
Idaho	Enter missing immunization data from IRIS into the QDC tool.
Nevada	Enter missing immunization data into WebIZ.
Colorado	Enter missing immunization data from CIIS into the QDC tool.

NOTE: You will NOT be notified if your correction was accepted or rejected; you will need to look in the QDC tool.

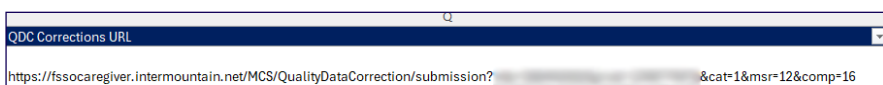
Working Your Open Gaps List, Continued

Tips for Working Your Gaps-in-Care List — Immunizations: Adolescence

6. Enter corrections using the guidance below and as indicated in Figures 5a and 5b (below):

- Access the [Quality Data Corrections \(QDC\) Tool](#) (reference the QDC Tool guide for [“Submitting Corrections”](#)).
- Use the “QDC Correction URL” link(s) provided in the downloaded gaps-in-care Excel file (last column) to enter missing immunization information.
- From the Gaps in Care Report, find the link to enter the patient’s missing immunization information. This link can be found in the **last column**.

- This link will open a screen (see **Figure 5a** below) with pre-populated member and measure information (i.e., EMPI, Member ID, and Provider Name). **Select how many immunizations to correct.**
- Enter the corrections, making sure to follow the order in which you enter them as indicated in **Figure 5b** (below).
- After a correction is submitted, the HEDIS team will either accept (marked “Approved” in the tool) or reject the correction and include a notation as to why. Please read these comments because sometimes there may be an opportunity to fix an error and resubmit the correction.

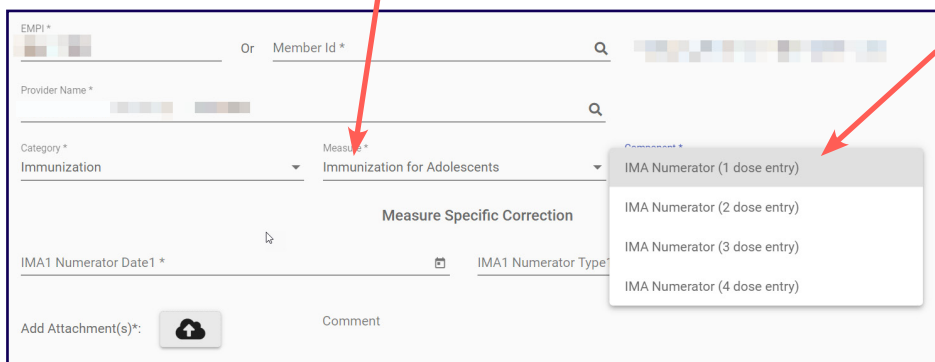


Reference

1. American Academy of Pediatrics. *All About the AAP Recommended Immunization Schedule*. [Healthychildren.org](https://www.healthychildren.org/English/safety-prevention/immunizations/Pages/Recommended-Immunization-Schedules.aspx). [Last updated] January 26, 2026. <https://www.healthychildren.org/English/safety-prevention/immunizations/Pages/Recommended-Immunization-Schedules.aspx>. Accessed February 4, 2026.

Figure 5a. Entering Corrections: Selecting Immunizations to Enter

Under “Measure,” select “Immunization for Adolescents.”



Click on “Component,” and a dropdown menu will appear. Select how many immunizations you will be entering:

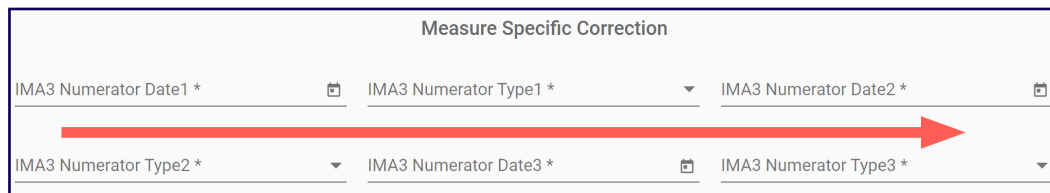
- One immunization = IMA Numerator (1-dose entry)
- Two immunizations = IMA Numerator (2-dose entry)
- Three immunizations = IMA Numerator (3-dose entry)
- Four immunizations = IMA Numerator (4-dose entry)

Figure 5b. Entering Corrections: Following the Correct Order

For example, let’s say 3 vaccinations need to be entered. In this case, select IMA Numerator (3-dose entry).

Make sure to go horizontally when entering “Date 1” and then “Type 1”;

do the same for “Date 2” and “Type 2” as well as for “Date 3” and “Type 3.” Be careful to not enter “Date 1” for “Type 2.” By selecting “3-dose entry,” you will need to enter exactly 3 doses. If you enter only 2 doses, the entry will not be accepted, and if you need to enter 4 doses, you’ll need to restart and select “4-dose entry.”



Best Practices: Closing Gaps in Care

To help close immunization gaps in care:

- Assess each member’s immunization status at every visit. You can catch up on vaccines at ADHD (attention deficit hyperactivity disorder) or other behavioral health visits. Immunize at every opportunity!
- Implement standing orders to enable assessment and vaccination of the patient without needing to wait until after the clinical exam.
- Enter vaccine doses into applicable state system/tool, including historical information. This creates the most complete vaccination history for proper immunization practices and reduced over immunization.
- Make it easier to get immunizations by:
 - Using reminder and recall systems (calls, letters, postcards, email, or text messages).
 - Providing ease-of-access, vaccine-only quick visits (walk-ins, whole family, immunization clinic) with flexible or extended hours in the evenings or weekends.
- Help parents with vaccine decisions by:
 - Making a strong recommendation. Clinician recommendation is the number one reason parents decide to vaccinate.
 - Listening. A hesitant parent does not equal vaccine refusal. Be a source of correct information and a trusted partner as parents try to make decisions about their children’s care.
- For the human papillomavirus (HPV) vaccine, focus conversations on cancer prevention, not on sexually transmitted disease. Start the HPV vaccine at age 9; don’t just wait for the “junior high visit.”

Questions about the Quality Provider Program?
Contact us at QualityProvider@selecthealth.org.