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# Influenza, Pneumococcal and COVID-19 Immunization Toolkit





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# Influenza, Pneumococcal, and COVID-19 Immunization Toolkit

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# Introduction

Influenza vaccination is recommended for all people six months of age and older and the pneumococcal vaccination is [recommended](#) for all those under the age of two and all those 65 years and older. Those between the ages of 2–64 years with certain medical conditions should also receive a pneumococcal vaccine. Up-to-date COVID-19 vaccine series is recommended for all people six months of age and older.

This guide serves as a resource in assisting health care organizations with routine vaccination assessment in effort to vaccinate more adults according to the recommendations.

**VACCINES AREN'T JUST FOR CHILDREN  
ADULTS CAN BE PROTECTED  
FROM DEADLY DISEASES**

**WHAT ARE THE RISKS?**

- Up to a month of missed work or school days
- Millions of hospitalizations and hundreds of thousands of deaths
- Tens of thousands of chronic illnesses and permanent disabilities
- Spreading diseases to the most vulnerable – children and older adults

Diseases listed around the circle: Hepatitis A, Shingles, COVID-19, Hepatitis B, Whooping Cough, Mumps, Tetanus, Pneumococcal Disease, Influenza (Flu), Measles, Meningococcal Disease, Chickenpox, Rubella, HPV, Diphtheria.

.....  
Talk to your healthcare provider about which vaccines are right for you  
For more information, visit [nfid.org](http://nfid.org)

National Foundation for Infectious Diseases  
**KEEP UP THE RATES**

Image Source:  
[National Foundation for Infectious Diseases](http://National Foundation for Infectious Diseases)

## FACT:

During the 2019-2020 influenza season, influenza vaccination prevented an estimated 7.5 million illnesses, 105,000 hospitalizations, and 6,300 deaths associated with influenza.<sup>1</sup>

— *Centers for Disease Control and Prevention (CDC)*

## FACT:

Pneumococcal pneumonia kills about 1 in 20 older adults who get it. Pneumococcal bloodstream infection kills about 1 in 6 older adults who get it.<sup>2</sup>

—*CDC*

## FACT:

COVID-19 has resulted in 89.5 million confirmed cases and over 1 million deaths and was the 3rd leading cause of death in 2021.<sup>3</sup>

—*CDC*

• • •

**Healthy People 2030 Goal:**  
**70% immunization rate**  
**for persons aged six months**  
**and over for Influenza.<sup>4</sup>**

# Influenza

Influenza: also known as the “flu” is a respiratory illness that infects the nose, throat and sometimes lungs. Influenza may lead to hospitalization or death. The best way to prevent influenza is to receive an annual influenza vaccination.

## Facts

- CDC estimates that 70% –85% of seasonal influenza deaths and between 50–70% of seasonal influenza-related hospitalizations are attributed to those 65+.<sup>5</sup>
- A serious complication of influenza is pneumonia.
- Seasonal incidence: Occurs from early fall through late spring, peaking during winter.
- Symptoms: fever, sore throat, body aches, cough, headache and fatigue.
- Patients who have received an influenza vaccine were found to have 24% lower odds of testing positive for Coronavirus Disease 2019 (COVID-19).<sup>6</sup>

## Prevention Control

- Frequent handwashing prevents the spread of infection.
- Use [Respiratory Hygiene/Cough Etiquette](#) which includes covering your cough, proper disposal of tissue and performing hand hygiene.
- Disinfect surfaces that are touched frequently.
- Document vaccination in your electronic health record (EHR) and State Immunization Registry to maximize patient health care.
- Encourage people to keep vaccination card on them at all times especially during transitions of care.

## Vaccination Side Effects

- Soreness, redness or swelling at the vaccination site.
- Headache, fever, muscle aches, nausea.
- Occasionally more serious allergic reactions such as hives, difficulty breathing and swelling of the face occur; seek immediate medical attention if this occurs.

# Pneumonia

Pneumonia: is an infection of the lungs that can be caused by bacteria, viruses or fungi. Older adults and those with chronic conditions are at an increased risk of developing complications from pneumonia.

## Facts

- A common cause of pneumonia are viruses such as influenza and COVID-19.
- Approximately 1 million individuals 65+ are hospitalized each year with pneumonia.<sup>7</sup>
- Infection occurs year-round; peaks in winter.
- Common symptoms include cough, shortness of breath, chest pain and fever.

## Prevention Control

- Frequent handwashing prevents the spread of infection.
- Use [Respiratory Hygiene/Cough Etiquette](#) which includes covering your cough, proper disposal of tissue and performing hand hygiene.
- Disinfect surfaces that are touched frequently.
- Avoid or reduce smoking.
- Document vaccination in your EHR and State Immunization Registry to maximize patient health care.
- Encourage people to keep vaccination card on them at all times especially during transitions of care.

## Vaccination Side Effects

- Soreness, redness or swelling at the vaccination site.
- Chills, muscles aches, headache, fever.
- Occasionally more serious allergic reactions such as hives, difficulty breathing and swelling of the face occur; seek immediate medical attention if this occurs.

# COVID-19

COVID-19 is a disease caused by the virus SARS-CoV-2. It is highly contagious and can cause respiratory symptoms that can feel much like a cold, the flu, or pneumonia. COVID-19 disease can also affect other parts of the body.

The best way to avoid serious COVID-19 complications is to receive the COVID-19 vaccine series.

## Facts

- 89.5 million confirmed cases and 1.02 million deaths in the United States to date.
- COVID-19 was the third leading cause of death in the United States in 2021.
- Older adults and people with certain underlying medical conditions are more likely to get severely ill.
- Symptoms: fever, cough, shortness of breath, fatigue, body aches, new loss of taste or smell, headache.
- Some people who have been infected with the virus that causes COVID-19 can experience long-term effects from their infection. Post-COVID conditions include a wide range of health problems that may be experienced four or more weeks after first contracting COVID-19.

## Prevention Control

- Frequent handwashing prevents the spread of infection.
- Use [Respiratory Hygiene/Cough Etiquette](#) which includes covering your cough, proper disposal of tissue and performing hand hygiene.
- Disinfect surfaces that are touched frequently.
- Avoid crowds and poorly ventilated spaces.
- Wear a mask indoors when COVID-19 Community Level is high.
- Test to prevent spread to others.
- Follow recommendations for quarantine and isolation.
- Document vaccination in your electronic health record (EHR) and State Immunization Registry to maximize patient/resident health care.
- Encourage people to keep vaccination card on them at all times, especially during transitions of care.

## Vaccination Side Effects

- Pain, redness or swelling at the vaccination site.
- Fatigue, headache, fever, chills, muscle aches, and nausea.
- Occasionally, more serious allergic reactions such as hives, difficulty breathing and swelling of the face occur; seek immediate medical attention if this occurs.

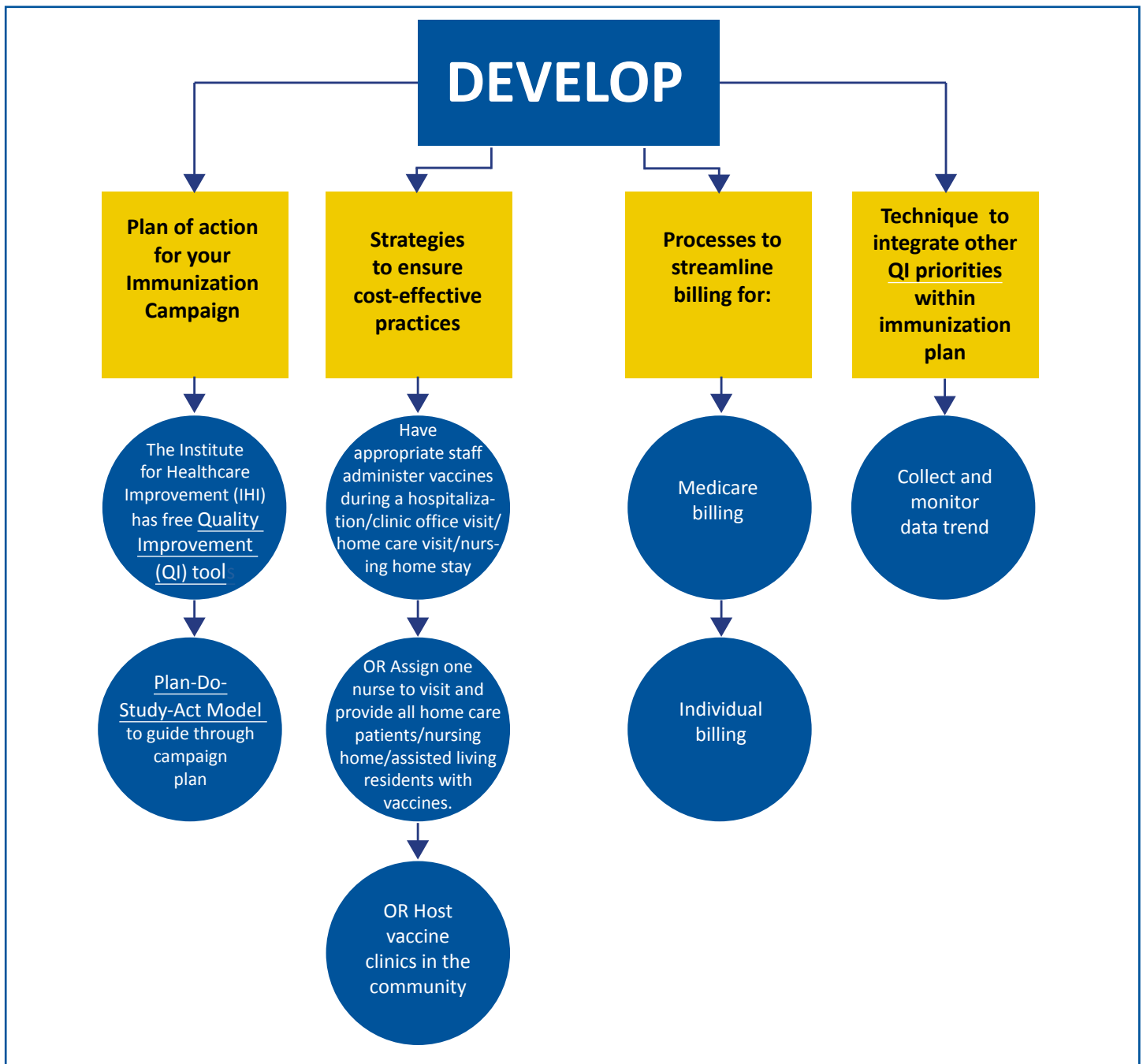
For more information, visit the U.S. Centers for Disease Control's [COVID Data Tracker \(https://covid.cdc.gov/covid-data-tracker/#datatracker-home\)](https://covid.cdc.gov/covid-data-tracker/#datatracker-home).

# Preparing an Immunization Campaign

## Immunization Campaign Strategy

Preparing a campaign strategy allows you to define an immunization goal and organize your goal into manageable steps to increase vaccination rates for your facility or organization. If needed, modify the steps below to best fit the needs of your facility/organization and patient population.

### Step 1: Develop

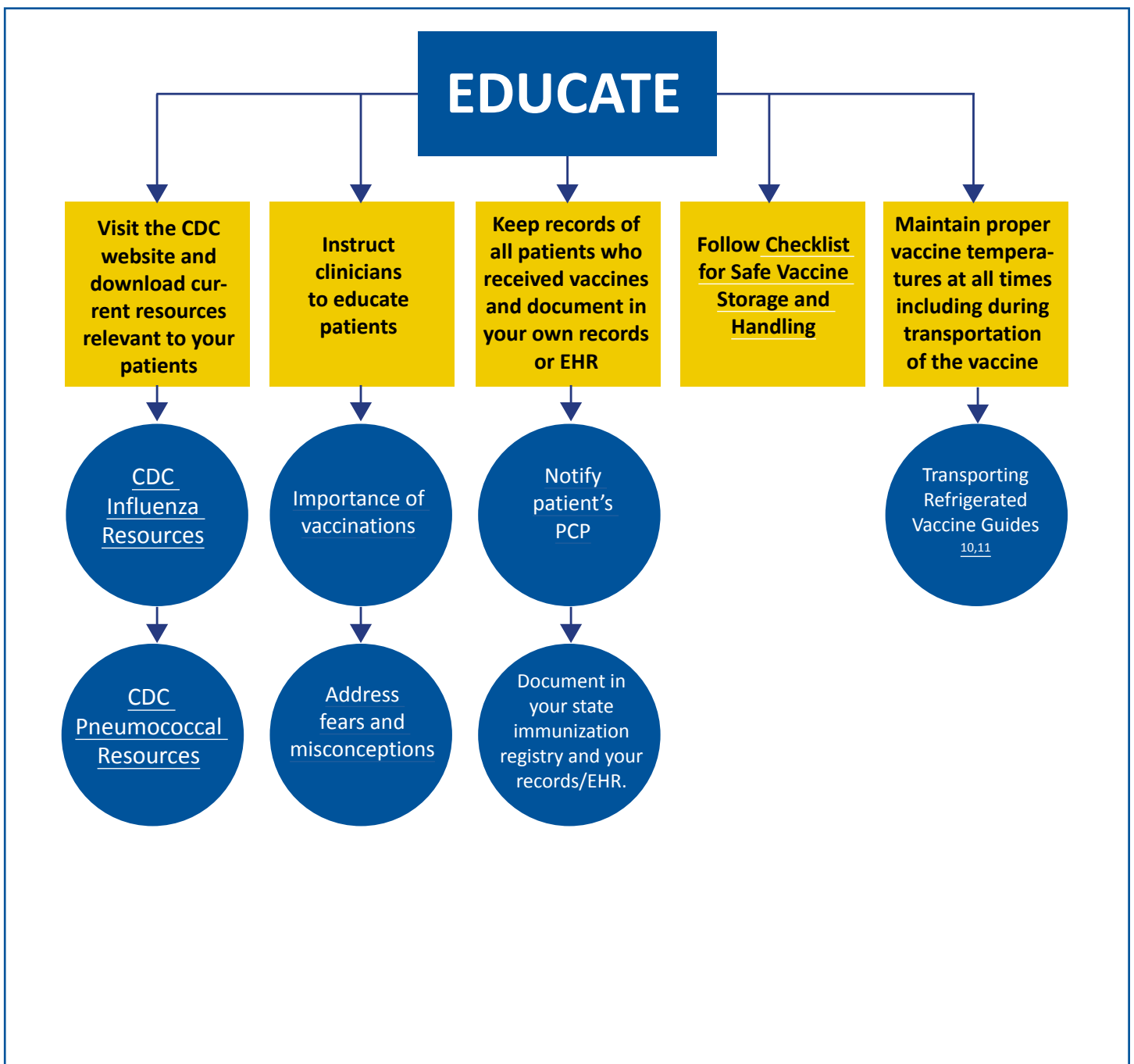






# Preparing an Immunization Campaign (continued)

## Step 3: Educate





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## Make a Strong Recommendation

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Increasing awareness of program goals amongst staff, providers and caregivers not only helps to ensure a successful campaign but ultimately improves patient care. One way to do this is by communicating project goals to those directly involved in treatment as outlined in the sample letters found on pages 15, 16, and 17.

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[Sample Physician Letter](#)

[Sample Staff Letter](#)

[Sample Patient—Patient Representative—Family Letter](#)

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## Make a Strong Vaccine Recommendation

As health care professionals, it is important to provide patients with a strong recommendation for vaccination.

### Share

The CDC recommends the [SHARE](#) method.

- S: SHARE the reasons** why the influenza/pneumococcal vaccine is right for the patient given his or her age, health status, lifestyle, occupation, or other risk factors.
- H: HIGHLIGHT positive experiences** with influenza/pneumococcal vaccines (personal or in your practice), as appropriate, to reinforce the benefits and strengthen confidence in vaccination.
- A: ADDRESS patient questions and any concerns** about the influenza/pneumococcal vaccine, including side effects, safety, and vaccine effectiveness in plain and understandable language.
- R: REMIND patients** that influenza/pneumococcal vaccines protect them and their loved ones from serious illness and other complications.
- E: EXPLAIN the potential costs** of getting influenza/pneumonia, including serious health effects, time lost (such as missing work or family obligations), and financial costs.

# Motivational Interviewing

Motivational Interviewing (MI) strategies can also be beneficial when initiating conversations to boost vaccine acceptance. The following information was gathered from the Supplemental Material document for *Using Best Practices to Address COVID-19 Vaccine Hesitancy: The Case for the Motivational Interviewing Approach* by Amanda Gabarda, EdD, MPH, CHES and Susan W. Butterworth, PhD, MS.

## Incorporate the “Spirit of MI” in your conversations about vaccine acceptance.

- Partnership:** Building trust and rapport and being together on equal ground.  
*Example:* “Together we will find a solution that you are comfortable with.”
- Acceptance:** Prizing the inherent worth and potential of every patient, acknowledging their strengths, and supporting autonomy.  
*Example:* “The choice is yours and you are the expert on what will work for you and your family.”
- Compassion:** Actively promoting another’s welfare and giving priority to their needs.  
*Example:* “Your well-being is our top priority.”
- Evocation:** Drawing out the patient’s strengths, resources, ideas, feelings and motivations.  
*Example:* “What are some possible benefits you might get from being vaccinated?”

## OARS

Another strategy is using **Open-ended questions, Affirming, Reflective listening, and Summarizing (OARS):**

- Open Questions:** “Tell me more about your thoughts on the influenza vaccine?”  
“What are your concerns about the pneumococcal vaccine?”
- Affirmation:** “You’ve already done quite a bit of research and are well-informed.”  
“You value your family and want to make sure they are safe.”
- Reflection:** “You’re feeling pressured and you need more time to determine if this is the best decision for you.”  
“You are eager to get the vaccine because it will provide a sense of security for you and your family.”
- Summary:** “We’ve discussed both the pros and the cons, and you seem to be leaning in favor of getting vaccinated. You are reassured that the benefits outweigh the risks now that you’ve learned more about the clinical trial process. Would it be okay to talk about next steps for you and your family?”

## Coordination of Care

It is important to update the patient's primary care provider whenever a vaccine is administered. An up-to-date vaccination record can help to improve health outcomes as well as streamline provider interventions.

If possible, see if you are able to communicate via EHR.

With COVID-19 vaccinations under way it is also important to know that coadministration of vaccines has been approved, if a patient is interested in getting the influenza or pneumococcal vaccine but has not yet gotten a COVID-19 vaccine, encourage them to do so.

Information on coadministration is available at [Interim Clinical Considerations for Use of COVID-19 Vaccines | CDC](#).

Below is a sample letter to use to coordinate care.

- [Coordination of Care – Sample Notification of Vaccination Letter](#)

**Standing orders  
allow nurses  
and pharmacists  
to administer  
vaccinations per a  
physician or agency,  
approved protocol.**

### Standing Orders

With standing orders, there is increased access to vaccination for community members. These programs can be instituted in inpatient and outpatient organizations, long-term care facilities, managed-care assisted living, correctional facilities, pharmacies and workplaces. The Immunization Action Coalition (IAC) provides [sample standing orders](#) for influenza, pneumococcal and COVID-19.

### State Resources/Registries

Please refer to your state's immunization program for additional information, resources and links to your [State Immunization Registry](#).

### Screening Questionnaire for Adult Immunization

Use the [Screening Checklist for Contraindications to Vaccines for Adults](#), put together by the IAC and adapted by the CDC, as a way to assess adults to determine contraindications, if any, to vaccines. The CDC also provides a [Pre-vaccination Checklist for COVID-19 Vaccines](#).

### Treatment of Adverse Reactions

The [Medical Management of Vaccine Reactions in Adults in a Community Setting](#) created by the IAC indicates what to do in the event of adverse reactions.

### Adverse Event Reporting Guidelines

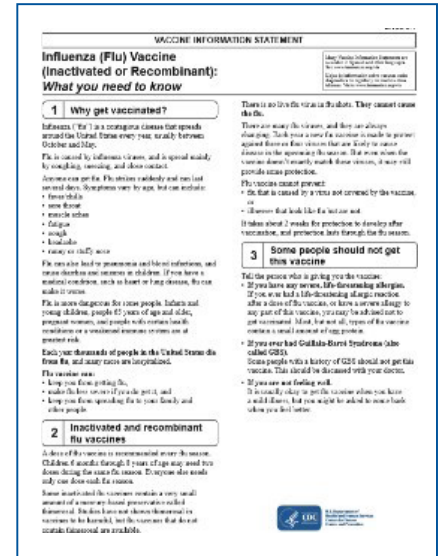
Report all vaccination adverse events through the U.S. Food and Drug Administration (FDA) Vaccines Adverse Events Reporting System (VAERS). Instructions for reporting adverse reactions your patients experience can be found on the [VAERS website](#). [V-safe After COVID-19 Vaccination](#) is a smartphone app that reports side effects to the CDC and provides reminders if you need a second dose.

# Patient Education and Self-Management

## Vaccine Information Statements

Vaccine information statements (VIS) documents are information sheets the CDC puts out to in-form vaccine recipients about the benefits and risks of vaccines. VIS documents must be given out prior to vaccine administration and it is considered a best practice to do so.

- [COVID-19](#)
- [Influenza](#)
- [Pneumonia PCV13](#)
- [Pneumonia PCV15](#)
- [Pneumonia PPSV20](#)
- [Pneumonia PPSV23](#)



## Vaccine Resources

[Immunize.org](#) has a variety of resources for healthcare providers and provides information to patients and families about the composition of vaccines and the way in which they work..

## Vaccinations for Adults

The CDC's [Adult Immunization Schedule](#) outlines all the available and recommended vaccines for adults 19 and older. Pay special attention to the 65 years and older column for Medicare beneficiaries.

Recommended Adult Immunization Schedule for ages 19 years or older			UNITED STATES 2022																																																															
<p><b>How to use the adult immunization schedule</b></p> <ol style="list-style-type: none"> <li>Determine recommended vaccinations by age (Table 1)</li> <li>Assess need for additional recommended vaccinations by medical condition or other indication (Table 2)</li> <li>Review vaccine types, frequency, intervals, and contraindications for special situations (Notes)</li> <li>Review contraindications and precautions and vaccine types (Appendix)</li> </ol>																																																																		
<p><b>Vaccines in the Adult Immunization Schedule*</b></p> <table border="1"> <thead> <tr> <th>Vaccine</th> <th>Abbreviation(s)</th> <th>Trade name(s)</th> </tr> </thead> <tbody> <tr> <td>Human influenza type A vaccine</td> <td>Flu</td> <td>Flucelvax<sup>®</sup></td> </tr> <tr> <td>Hepatitis A vaccine</td> <td>HepA</td> <td>Havrix<sup>®</sup></td> </tr> <tr> <td>Hepatitis A and hepatitis B vaccine</td> <td>HepA-HepB</td> <td>Twineq<sup>®</sup></td> </tr> <tr> <td>Hepatitis B vaccine</td> <td>HepB</td> <td>Engerix-B<sup>®</sup></td> </tr> <tr> <td>Human papillomavirus vaccine</td> <td>HPV</td> <td>Gardasil<sup>®</sup></td> </tr> <tr> <td>Influenza vaccine (inactivated)</td> <td>IV4</td> <td>Mylan brands</td> </tr> <tr> <td>Influenza vaccine (live, attenuated)</td> <td>LAIV4</td> <td>FluMist<sup>®</sup> Quadrivalent</td> </tr> <tr> <td>Influenza vaccine (recombinant)</td> <td>IRIV4</td> <td>FluMist<sup>®</sup> Quadrivalent</td> </tr> <tr> <td>Meningococcal conjugate A, C, W, Y vaccine</td> <td>MenACWY-D</td> <td>MenQuadfi<sup>®</sup></td> </tr> <tr> <td>Meningococcal conjugate A, C, W, Y vaccine</td> <td>MenACWY-TT</td> <td>MenQuadfi<sup>®</sup></td> </tr> <tr> <td>Meningococcal serogroup B vaccine</td> <td>MenB-4C</td> <td>Bexsero<sup>®</sup></td> </tr> <tr> <td>Meningococcal serogroup B vaccine</td> <td>MenB-FrOp</td> <td>Trumenb<sup>®</sup></td> </tr> <tr> <td>Pneumococcal 15-valent conjugate vaccine</td> <td>PCV15</td> <td>Vaxneuvance<sup>™</sup></td> </tr> <tr> <td>Pneumococcal 20-valent conjugate vaccine</td> <td>PCV20</td> <td>Prevnar 20<sup>™</sup></td> </tr> <tr> <td>Pneumococcal 23-valent polysaccharide vaccine</td> <td>PPSV23</td> <td>Pneumovax 23<sup>®</sup></td> </tr> <tr> <td>Tetanus and diphtheria toxoids</td> <td>Td</td> <td>Twineq<sup>®</sup></td> </tr> <tr> <td>Tetanus and diphtheria toxoids and acellular pertussis vaccine</td> <td>Tdap</td> <td>Adacel<sup>®</sup></td> </tr> <tr> <td>Tetanus and diphtheria toxoids and acellular pertussis vaccine</td> <td>Tdap</td> <td>Boostrix<sup>®</sup></td> </tr> <tr> <td>Typhoid vaccine</td> <td>VIAK</td> <td>Vivactin<sup>®</sup></td> </tr> <tr> <td>Zoster vaccine, recombinant</td> <td>RZV</td> <td>Shingrix</td> </tr> </tbody> </table>				Vaccine	Abbreviation(s)	Trade name(s)	Human influenza type A vaccine	Flu	Flucelvax <sup>®</sup>	Hepatitis A vaccine	HepA	Havrix <sup>®</sup>	Hepatitis A and hepatitis B vaccine	HepA-HepB	Twineq <sup>®</sup>	Hepatitis B vaccine	HepB	Engerix-B <sup>®</sup>	Human papillomavirus vaccine	HPV	Gardasil <sup>®</sup>	Influenza vaccine (inactivated)	IV4	Mylan brands	Influenza vaccine (live, attenuated)	LAIV4	FluMist <sup>®</sup> Quadrivalent	Influenza vaccine (recombinant)	IRIV4	FluMist <sup>®</sup> Quadrivalent	Meningococcal conjugate A, C, W, Y vaccine	MenACWY-D	MenQuadfi <sup>®</sup>	Meningococcal conjugate A, C, W, Y vaccine	MenACWY-TT	MenQuadfi <sup>®</sup>	Meningococcal serogroup B vaccine	MenB-4C	Bexsero <sup>®</sup>	Meningococcal serogroup B vaccine	MenB-FrOp	Trumenb <sup>®</sup>	Pneumococcal 15-valent conjugate vaccine	PCV15	Vaxneuvance <sup>™</sup>	Pneumococcal 20-valent conjugate vaccine	PCV20	Prevnar 20 <sup>™</sup>	Pneumococcal 23-valent polysaccharide vaccine	PPSV23	Pneumovax 23 <sup>®</sup>	Tetanus and diphtheria toxoids	Td	Twineq <sup>®</sup>	Tetanus and diphtheria toxoids and acellular pertussis vaccine	Tdap	Adacel <sup>®</sup>	Tetanus and diphtheria toxoids and acellular pertussis vaccine	Tdap	Boostrix <sup>®</sup>	Typhoid vaccine	VIAK	Vivactin <sup>®</sup>	Zoster vaccine, recombinant	RZV	Shingrix
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<p><b>Report</b></p> <p>Reported cases of vaccine-preventable diseases or outbreaks to the local or state health department</p> <p>Clinically significant postvaccination reactions to the Vaccine Adverse Event Reporting System at <a href="http://www.cdc.gov/vaers">www.cdc.gov/vaers</a> or 800-822-7267</p> <p><b>Injury claims</b></p> <p>All vaccines included in the adult immunization schedule except pneumococcal 23-valent polysaccharide (PPSV23) and zoster (RZV) vaccines are covered by the Vaccine Injury Compensation Program. Information on how to file a vaccine injury claim is available at <a href="http://www.hrsa.gov/vaccinecompensation">www.hrsa.gov/vaccinecompensation</a>.</p> <p><b>Questions or comments</b></p> <p>Contact <a href="http://www.cdc.gov/cdc/info">www.cdc.gov/cdc/info</a> or 800-CDC-INFO (800-232-4636), in English or Spanish, 8 a.m. to 4 p.m. ET, Monday through Friday, excluding holidays.</p> <p><b>Download the CDC Vaccine Schedules app for providers at <a href="http://www.cdc.gov/vaccines/schedules/hcp/schedule-app.html">www.cdc.gov/vaccines/schedules/hcp/schedule-app.html</a>.</b></p> <p><b>Helpful information</b></p> <ul style="list-style-type: none"> <li>Complete Advisory Committee on Immunization Practices (ACIP) recommendations: <a href="http://www.cdc.gov/vaccines/hcp/acip-rec/index.html">www.cdc.gov/vaccines/hcp/acip-rec/index.html</a></li> <li>General Best Practice Guidelines for Immunization (including contraindications and precautions): <a href="http://www.cdc.gov/ncidod/diseases/iiv/gbpi/">www.cdc.gov/ncidod/diseases/iiv/gbpi/</a></li> <li>Vaccine information statements: <a href="http://www.cdc.gov/vaccines/hcp/vi/index.html">www.cdc.gov/vaccines/hcp/vi/index.html</a></li> <li>Manual for the Surveillance of Vaccine-Preventable Diseases (including case identification and outbreak response): <a href="http://www.cdc.gov/vaccines/pubs/surv-manual/">www.cdc.gov/vaccines/pubs/surv-manual/</a></li> <li>Travel vaccine recommendations (including contraindications and precautions): <a href="http://www.cdc.gov/vaccines/schedules/hcp/travel/">www.cdc.gov/vaccines/schedules/hcp/travel/</a></li> <li>Recommended Child and Adolescent Immunization Schedule, United States, 2022: <a href="http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent/">www.cdc.gov/vaccines/schedules/hcp/child-adolescent/</a></li> <li>ACIP Shared Clinical Decision-Making Recommendations: <a href="http://www.cdc.gov/vaccines/acip/acip-scdm-faq.html">www.cdc.gov/vaccines/acip/acip-scdm-faq.html</a></li> </ul>																																																																		

## Trusted Sources for Patients

Adapted from Superior Health Quality Alliance this [document](#) offers trusted online sources for credible immunization information for patients and families to explore outside of the doctor's office.

# Systems Management Billing

## Resources for Medicare Billing and Immunizations Education

Medicare Part B covers the influenza and pneumococcal vaccine. In 2012, to coincide with the CDC recommendations to begin vaccination efforts as soon as the influenza vaccine becomes available, the payment limit effective date was altered from September 1 to August 1. Updated information on payment allowances for influenza vaccines can be found in the [CMS annual update](#).

Influenza and pneumococcal vaccines are covered by Medicare Part B. Since the switch to ICD 10, coding changes are summarized in the [Roster Billing Guide for Influenza and Pneumonia Immunizations To Medicare Part B](#) (updated July 2020) from Palmetto GBA, a Medicare contractor.

The Medicare Learning Network (MLN) Medicare Preventative Services tool provides information and resources for various preventative services, including information on [influenza virus vaccine](#) and administration and [pneumococcal vaccine](#) and administration.

## Additional Resources

[CMS Resources for Providers](#) contains many of the resources listed above, along with other CMS and government websites.

The CDC's [Seasonal Influenza Vaccination Resources for Health Professionals](#) includes great resources including toolkits, videos and flyers that can be used within your organization.

In order to improve immunization rates among Medicare beneficiaries, the Centers for Medicare & Medicaid Services (CMS) and the Center for Clinical Standards and Quality (CCSQ) are working to promote healthcare quality improvement services, which involves collaboration between Quality Innovation Network Quality Improvement Organizations (QIN-QIOs) and home health agencies (HHAs).

[Friends and Family Vaccine Clinic Toolkit](#) provides tools and resources for planning your vaccine clinic.

[Post-acute and Long-term Care Facility Toolkit: Influenza Vaccination among Healthcare Personnel](#) includes resources for improving influenza vaccination coverage among healthcare workers.

## IPRO QIN-QIO Contacts

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# Sample Physician Letter

Dear [doctor],

As you are most likely aware, each year nearly 80,000 people die from vaccine preventable influenza and pneumonia in the U.S., despite the availability of effective vaccines. Some 50–80 percent of these deaths — most of which occur in persons over 65 years of age — could be prevented with timely and widespread vaccination. In addition, COVID-19 has killed over one million people in the United States. Vaccines significantly reduce the severity of disease

In an effort to better protect our patients, our agency has set an immunization goal of \_\_\_\_ percent or higher for both influenza and pneumonia. Enclosed is our guideline for immunization at

\_\_\_\_\_.

We seek your support and ask that you continue to encourage patients and their family members/caregivers to be immunized.

In addition, for patients under 65 years of age, it is important to assess for other vaccinations that they may need based on their health conditions, age, occupation and/or participation in risky behaviors.

Thank you, as always, for making a difference.

Sincerely,

[Name]

# Sample Staff Letter

Dear [employee],

Each year, nearly 80,000 people die from vaccine-preventable influenza and pneumonia in the U.S., despite the availability of effective vaccines. Some 50-80 percent of these deaths could be prevented with timely and widespread vaccination. In addition, COVID-19 has killed over one million people in the United States. Vaccines significantly reduce the severity of disease.

You can protect yourself and prevent passing these serious illnesses and their complications to our patients by being immunized. Getting immunized is one way you can demonstrate your professional and ethical commitment to providing exemplary healthcare to our patients.

Our goal is to increase influenza immunization rates to \_\_\_\_\_ percent or higher this year. If you have any questions please contact

Thank you, as always, for making a difference.

Sincerely,

[Name]



# Sample Patient - Patient Representative - Family Letter

Dear [patient name] and family,

Each year, nearly 80,000 people die from vaccine-preventable flu and pneumonia in the U.S., despite the availability of effective vaccines. Some 50–80 percent of these deaths — most of which occur in persons over 65 years of age — could be prevented with timely and widespread vaccination. In addition, COVID-19 has killed over one million people in the United States. Vaccines significantly reduce the severity of disease.

We strongly encourage you to get immunized unless there is a medical reason that prevents you from being able to. With your approval, we will make arrangements to provide these immunizations.

You can protect yourself and prevent passing these serious illnesses and their complications to our patients by making sure that you are immunized each year. An influenza vaccination will protect you from getting the flu and from passing this serious illness to our most vulnerable patients. Getting immunized against the flu demonstrates your commitment to preserving the health of your loved ones. Additionally, vaccines are recommended for all ages based on each individual's health conditions and age — talk to your doctor to make sure that you are also up-to-date on all your other immunizations.

Ask your employer, health plan, family doctor or pharmacist about getting a flu shot. It's the right thing to do!

Sincerely, [Name]

# Coordination of Care Sample Notification of Vaccination Letter

Dear doctor or nurse at [primary care site],

We provided vaccination services today to the patient named below. You were identified as the primary care provider for this patient. An immunization record card was filled out and given to the patient. Please update your patient's clinic chart to include the vaccination information listed below.

Patient's name: \_\_\_\_\_

Patient's birth date \_\_\_\_\_

Vaccine	Date(s) Administered	Dose #/Lot # (if known)	Brand/Manufacturer
Influenza			
Pneumococcal polysaccharide (PPSV23 and/or PCV13, PCV 15, PCV 20)			
COVID-19			

Sincerely,

[Staff member's name, organization name]

## Sources

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13. CMS. [\*Immunization Resources | CMS\*](#)
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The material presented within this guide were adapted from a previous version of this toolkit, as well as various toolkits from the Nursing Home Immunization Workgroup, the Centers for Disease Control and Prevention (CDC), Superior Health Quality Alliance, and other resources.



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