

O0250. Influenza Vaccine

Note: In the FY 2019 IPPS/LTCH PPS final rule (83 FR 41632 through 41633), the patient influenza measure was finalized for removal from the LTCH QRP, effective with patients admitted or discharged on or after October 1, 2018. Please see: <https://www.gpo.gov/fdsys/pkg/FR-2018-08-17/pdf/2018-16766.pdf>. However, items O0250A, O0250B, and O0250C will remain on the LTCH CARE Data Set until the next version is released, and LTCHs should enter a dash or any valid code for these items beginning October 1, 2018 until the next LTCH CARE Data Set is released. Use of a dash for these items, for patients admitted or discharged after October 1, 2018, will not result in a 2 percent reduction in the LTCH's APU.

O0250. Influenza Vaccine - Refer to current version of LTCH Quality Reporting Program Manual for current influenza season and reporting period.	
Enter Code <input type="text"/>	<p>A. Did the patient receive the influenza vaccine in this facility for this year's influenza vaccination season?</p> <p>0. No → Skip to O0250C, If influenza vaccine not received, state reason</p> <p>1. Yes → Continue to O0250B, Date influenza vaccine received</p>
	<p>B. Date influenza vaccine received → Complete date and skip to Z0400, Signature of Persons Completing the Assessment</p> <p><input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Month Day Year</p>
Enter Code <input type="text"/>	<p>C. If influenza vaccine not received, state reason:</p> <p>1. Patient not in this facility during this year's influenza vaccination season</p> <p>2. Received outside of this facility</p> <p>3. Not eligible - medical contraindication</p> <p>4. Offered and declined</p> <p>5. Not offered</p> <p>6. Inability to obtain influenza vaccine due to a declared shortage</p> <p>9. None of the above</p>

Item Rationale

- When infected with influenza, older adults and persons with underlying health problems are at increased risk for complications and are more likely than the general population to require hospitalization.
- An institutional Influenza A outbreak can result in up to 60% of the population becoming ill, with 25% of those affected developing complications severe enough to result in hospitalization or death.
- Influenza-associated mortality results not only from pneumonia, but also from subsequent events arising from cardiovascular, cerebrovascular, and other chronic or immunocompromising diseases that can be exacerbated by influenza.

DEFINITION

INFLUENZA VACCINATION SEASON¹

The influenza vaccination season is defined as beginning October 1 of the current year, or when the influenza vaccine becomes available (whichever comes first), through March 31 of the following year.

¹ Please refer to FY 2015 IPPS/LTCH PPS Final Rule at <http://www.gpo.gov/fdsys/pkg/FR-2014-08-22/pdf/2014-18545.pdf>, pages 50289-50290.

- The Centers for Disease Control and Prevention's (CDC's) Advisory Committee on Immunization Practices (ACIP) continues to recommend annual influenza vaccinations for all persons aged 6 months and older in the United States.²

Steps for Assessment

1. Review the patient's medical record to determine whether an influenza vaccine was received in the LTCH for this year's influenza vaccination season. If the patient's vaccination status is known, proceed to coding O0250A.
2. If the patient did not receive the influenza vaccine in the LTCH, ask the patient if he or she received an influenza vaccine outside of the facility for this year's influenza vaccination season. Please also review (when available) the patient's medical record from previous setting(s) (e.g., short-stay acute care hospital medical records). If the patient's influenza vaccination status is still unknown, proceed to the next step.
3. If the patient is unable to answer, then ask the same question of the responsible party, legal guardian, or primary care physician. If vaccination status is still unknown, proceed to the next step.
4. If influenza vaccination status cannot be determined, please refer to the standards of clinical practice to determine whether to administer the vaccine to the patient and proceed to coding O0250A.


Coding Instructions for O0250A, Did the patient receive the influenza vaccine in this facility for this year's influenza vaccination season?

Complete only if A0250 = 01 Admission; A0250 = 10 Planned Discharge; A0250 = 11 Unplanned Discharge; or A0250 = 12 Expired.

- **Code 0, No**, if the patient did not receive the influenza vaccine in this facility (LTCH) for this year's influenza vaccination season. Proceed to O0250C. If influenza vaccine was not received, state reason.
- **Code 1, Yes**, if the patient received the influenza vaccine in this facility (LTCH) for this year's influenza vaccination season. Continue to O0250B, Date influenza vaccine received.

Coding Instructions for O0250B, Date influenza vaccine received

- Enter the date that the vaccine was received by the patient in your LTCH. Do not leave any boxes blank.
- If the month contains only a single digit, fill in the first box of the month with "0." If the day contains only a single digit, fill in the first box of the day with "0."
 - For example, January 7, 2018, should be entered as 01-07-2018.

² Kim, D.K., Riley, L.E., Harriman, K.H., Hunter, P., Bridges, C.B.: Advisory Committee on Immunization Practices Recommended Immunization Schedule for Adults Aged 19 Years or Older — United States, 2017. *MMWR Morb Mortal Wkly Rep.* 66:136–138, 2017. DOI: <http://dx.doi.org/10.15585/mmwr.mm6605e2> 

- October 6, 2018, should be entered as 10-06-2018.
- A full 8-character date is required. If the date is unknown or the information is not available, a single dash (–) needs to be entered in the first box.

Coding Instructions for O0250C, If influenza vaccine not received, state reason

If the patient has not received the influenza vaccine for this year's influenza vaccination season (i.e., O0250A = 0), code the reason from the following list:

- **Code 1, Patient not in facility during this year's influenza vaccination season,** if the patient was not in the facility during this year's influenza vaccination season.
- **Code 2, Received outside of this facility,** if the patient received an influenza vaccination in another setting (e.g., physician office, health fair, grocery store/pharmacy, hospital, fire station, etc.) during this year's influenza vaccination season.
- **Code 3, Not eligible—medical contraindication,** if the influenza vaccination was not received because of medical contraindications or precautions, including, but not limited to, severe allergic reaction to egg protein or other vaccine component(s), previous adverse reaction to influenza vaccine, a physician order not to immunize, moderate to severe illness with or without fever, and/or history of Guillain-Barré Syndrome within 6 weeks of previous influenza vaccination. However, the patient should be vaccinated if contraindications or precautions end.
- **Code 4, Offered and declined,** if the patient or responsible party or legal guardian has been informed of what is being offered and chooses not to accept the influenza vaccine.
- **Code 5, Not offered,** if the patient or responsible party or legal guardian was not offered the influenza vaccine.
- **Code 6, Inability to obtain vaccine due to a declared shortage,** if the influenza vaccine was unavailable at the facility due to declared vaccine shortage. However, the patient should be vaccinated once the facility receives the vaccine. The annual supply of inactivated influenza vaccine and the timing of its distribution cannot be guaranteed in any year.
- **Code 9, None of the above,** if none of the listed reasons describe why the influenza vaccine was not administered. This code is also used if the answer is unknown.

Coding Tips and Special Populations

- If the influenza vaccination was administered to a patient for the current influenza season at the time of or prior to admission, then that information should be reflected on the patient's discharge assessment.
- Influenza can occur at any time, but most influenza occurs from October through May. However, patients should be immunized as soon as the vaccine becomes available and continue until influenza is no longer circulating in your geographic area.

- Information about the current influenza season can be obtained by accessing the CDC Seasonal Influenza (Flu) Web site. This Web site provides information on influenza activity and has an interactive map that shows geographic spread of influenza:
<http://www.cdc.gov/flu/weekly/fluactivitysurv.htm>
<http://www.cdc.gov/flu/weekly/usmap.htm>.
- Facilities can also contact their local health department Web site for local influenza surveillance information.
- The annual supply of inactivated influenza vaccine and the timing of its distribution cannot be guaranteed in any year. Therefore, if a declared influenza vaccine shortage occurs in your geographical area, patients should still be vaccinated once the facility receives the influenza vaccine.
 - Information regarding vaccine shortages can be obtained from the CDC:
<http://www.cdc.gov/vaccines/vac-gen/shortages/>.
- Facilities should follow current ACIP recommendations to inform standards of practice and applicable patients.
- Annual influenza vaccination of all persons aged 6 months or older continues to be recommended.
- If the patient was in the facility one or more days during the influenza vaccination season and was assessed, and where appropriate, received the influenza vaccination for the current influenza season, report that information on the LTCH CARE Data Set, regardless of whether the patient was admitted or discharged during or outside the influenza vaccination season.
- For item O0250A, code 1, Yes, for vaccines given to patients in the facility one or more days during the influenza vaccination season.
- For item O0250A, Did the patient receive the influenza vaccine in this facility for this year's influenza vaccination season? code 0, No, if the patient did not receive the vaccine in the LTCH.

Examples

1. Mrs. J received the influenza vaccine in this LTCH during this year's influenza vaccination season, on October 2, 2017.

Coding: O0250A would be coded 1, Yes; O0250B would be coded 10-02-2017; and O0250C would be skipped.
Rationale: Mrs. J received the vaccine in the facility on October 2, 2017, during this year's influenza vaccination season.
2. Ms. A received the influenza vaccine in the LTCH on February 5, 2018, during this year's influenza season. This patient transferred to an acute care facility on February 10 because of a medical emergency. The patient was then readmitted to the same LTCH on February 20. The patient did not receive the influenza vaccination during the second LTCH stay because she had already received it during the previous LTCH stay. The patient is discharged home on March 1, 2018.

Coding: February 5 to February 10 stay: O0250A would be coded 1, Yes; O0250B would be coded 02-05-2018; and O0250C would be skipped. February 20 to March 1 stay: O0250A would be coded 1, Yes; O0250B would be coded 02-05-2018; and O0250C would be skipped.

Rationale: Ms. A received the vaccine in the facility on February 5, 2018, during this year's influenza vaccination season. This date is reported on both assessments.

3. Mrs. B was admitted on March 31, 2018, was vaccinated in the LTCH on April 5, 2018, and was discharged April 15, 2018.

Coding: O0250A would be coded 1, Yes; O0250B would be coded 04-05-2018; and O0250C would be skipped.

Rationale: Mrs. B was vaccinated for the current (2017–2018) influenza vaccination season. The vaccination items should be completed for Mrs. B even though she was discharged after the influenza vaccination season. Mrs. B was in the facility for one or more days during the influenza vaccination season.

4. Mr. R did not receive the influenza vaccine in the LTCH during this year's influenza vaccination season because of his known allergy to egg protein.

Coding: O0250A would be coded 0, No; O0250B would be skipped; and O0250C would be coded 3, Not eligible-medical contraindication.

Rationale: Allergy to egg protein is a medical contraindication to receiving the influenza vaccine; therefore, Mr. R did not receive the vaccine.

5. Mrs. T was hospitalized during the influenza vaccination season. She had previously received the influenza vaccine at her doctor's office during this year's influenza vaccination season. Her doctor provided documentation of Mrs. T's receipt of the vaccine to the LTCH to place the documentation in Mrs. T's medical record. He also provided documentation that Mrs. T was explained the benefits and risks for the vaccine prior to administration.

Coding: O0250A would be coded 0, No; O0250B would be skipped; and O0250C would be coded 2, Received outside of this facility.

Rationale: Mrs. T received the influenza vaccine at her doctor's office during this year's influenza vaccination season.

6. Ms. M was hospitalized at the LTCH after a severe traumatic brain injury in May 2018 and discharged in August 2018. She did not receive the influenza vaccine during this hospitalization.

Coding: O0250A would be coded 0, No; O0250B would be skipped; and O0250C would be coded 1, Patient not in facility during this year's influenza vaccination season.

Rationale: Ms. M did not receive the influenza vaccine as she was not in the facility during the influenza vaccination season.

7. Mr. N was offered the influenza vaccine during his LTCH hospitalization beginning in February 2018. Mr. N refused the influenza vaccine asserting that whenever he has received it in the past it always gave him the flu. Despite the staff providing education that the influenza vaccine does not cause the flu, Mr. N still refused to take it.

Coding: O0250A would be coded 0, No; O0250B is skipped; and O0250C would be coded 4, Offered and declined.

Rationale: Mr. N did not receive the influenza vaccine. He was offered the vaccine, but refused to take it.

8. Mr. L was admitted to the LTCH comatose after an intracerebral bleed. His family requests that he receive an influenza vaccine during his hospitalization. The nurse explains that there is currently a declared shortage of influenza vaccine and that Mr. L will receive a dose when the facility obtains more vaccine. Mr. L is discharged prior to the LTCH receiving additional doses of the influenza vaccine. He is encouraged to ask his primary care physician about receiving the vaccine following discharge from the LTCH.

Coding: O0250A would be coded 0, No; O0250B would be skipped; and O0250C would be coded 6, Inability to obtain vaccine due to a declared shortage.

Rationale: Mr. L did not receive the influenza vaccine because there was no influenza vaccine available due to a declared shortage.

9. Mrs. T was admitted on Friday evening to the LTCH during this year's influenza vaccination season. Mrs. T's acute care medical records were checked and there was no record of her having received the influenza vaccine. The patient and her family decided that Mrs. T was to be discharged and transferred to another LTCH facility on the following Tuesday. The patient was never offered an influenza vaccination.

Coding: O0250A would be coded 0, No; O0250B would be skipped; and O0250C would be coded 5, Not Offered.

Rationale: Mrs. T did not receive the influenza vaccine because she was never offered the influenza vaccine during her LTCH stay.

10. Mr. F was admitted to the LTCH on April 1, 2018. It is the LTCH's policy to vaccinate patients through the end of May. The patient is vaccinated in the LTCH on April 14, 2018, and was discharged April 15, 2018.

Coding: O0250A would be coded 1, Yes; O0250B would be coded 04-14-2018; and O0250C would be skipped.

Rationale: Mr. F was vaccinated for the current (2017–2018) influenza season. The vaccination items should be completed for Mr. F even though he was not in the LTCH for one or more days during the influenza vaccination season. Patients should be offered the vaccine after the influenza vaccination season if consistent with facilities' policies. Mr. F would not be included in the quality measure as his stay was outside the influenza vaccination season.

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