

QIPS 2025: Pediatric program

Childhood Immunization Status

Vaccination



Measure Requirements

Children who were identified as having each of the following:

- Four DTap on or before the 2nd birthday
- Three Inactivated Polio Vaccine (IPV) on or before the 2nd birthday
- Three H influenza type B (HiB) on or before the 2nd birthday
- Measles, Mumps, and Rubella (MMR)
 - One MMR vaccination on or between the child's 1st and 2nd birthday; **AND**
 - At least one measles and rubella vaccination on or between the child's 1st and 2nd birthday **AND** one of the following:
 - At least one measles vaccination administered between the child's 1st and 2nd birthdays or history of measles illness on or before the child's 2nd birthday; **OR** at least one mumps vaccination administered between the child's 1st and 2nd birthdays; **OR** history of mumps illness on or before the child's 2nd birthday; **OR** at least one rubella vaccination administered between the child's 1st and 2nd birthdays or history of rubella illness on or before the child's 2nd birthday
 - Any combination that indicates evidence of all three antigens (on the same or different date of service)
- One varicella (VZV) on or between the child's 1st and 2nd birthdays; or a history of varicella zoster illness on or before the child's 2nd birthday
- Four pneumococcal conjugate (PCV) on or before the 2nd birthday
- At least two influenza vaccinations on or before the 2nd birthday but not prior to age six months (180 days after birth):

One of the two vaccinations can be a LAIV vaccination administered on the child's second birthday
- Two or three rotavirus, depending on the vaccine type, on or before the 2nd birthday;
 - Two doses of Rotarix®; **OR**
 - One dose of Rotarix® and two doses of RotaTeq®; **OR**
 - Three doses of RotaTeq®.

Note: For DTap, IPV, HiB, VZV, and PCV, a vaccination administered from birth to age 42 days cannot be counted.

Independence Blue Cross offers products through its subsidiaries Independence Assurance Company, Independence Hospital Indemnity Plan, Keystone Health Plan East, and QCC Insurance Company — independent licensees of the Blue Cross and Blue Shield Association.



QPM Targets*

Band 1	74% – 100%
Band 2	63% – 73.99%
Band 3	49% – 62.99%
Band 4	36% – 48.99%
Band 5	<36%

* These targets include the performance of more than one measure. This represents the combined performance for all the measures in this category.

See payment details in section 9 of the QIPS guide.



Member Requirements

Members who were with a practice for 11 consecutive months within the measurement year (2025) and who turned 2 years old during the measurement year (2025).

Please note: Members ages 0 through 2 who are not with Independence Blue Cross for the full two years are removed from the measure.

Options to close Care Gaps

- Option 1:** Administration of vaccine and claim/encounter submission with appropriate coding of vaccines within the designated timeframe.

Vaccine	CPT® code					
DTaP Vaccine Procedure	90697	90698	90700	90723		
Inactivated Polio Vaccine (IPV) Procedure	90697	90698	90713	90723		
Measles, Mumps, and Rubella (MMR) Vaccine Procedure	90707	90710				
Haemophilus Influenzae Type B (HiB) Vaccine Procedure	90644	90647	90648	90698	90697	90748
Varicella Zoster (VZV) Vaccine Procedure	90710	90716				
Pneumococcal Conjugate Vaccine Procedure	90670	90671	90677			
Rotavirus Vaccine Procedure (2 Dose Schedule)	90681					
Rotavirus Vaccine Procedure (3 Dose Schedule)	90680					
Influenza Vaccine Procedure	90655	90657	90661	90673	90674	90685
	90686	90687	90688	90689	90756	

- Option 2:** Administration of vaccine and claim/encounter submission with appropriate coding of vaccines within the designated timeframe.

Exclusion reason	ICD-10CM codes			
HIV	B20	Z21		
HIV Type 2	B97.35			
Severe Combined Immunodeficiency	D81.0	D81.1	D81.2	D81.9