

TIMELY INITIATION AND ADHERENCE TO THE CHILDHOOD IMMUNIZATION SCHEDULE FROM AGE 2 TO 8 MONTHS ARE ESSENTIAL IN ORDER TO MEET CIS-3 REQUIREMENTS.

Action items:

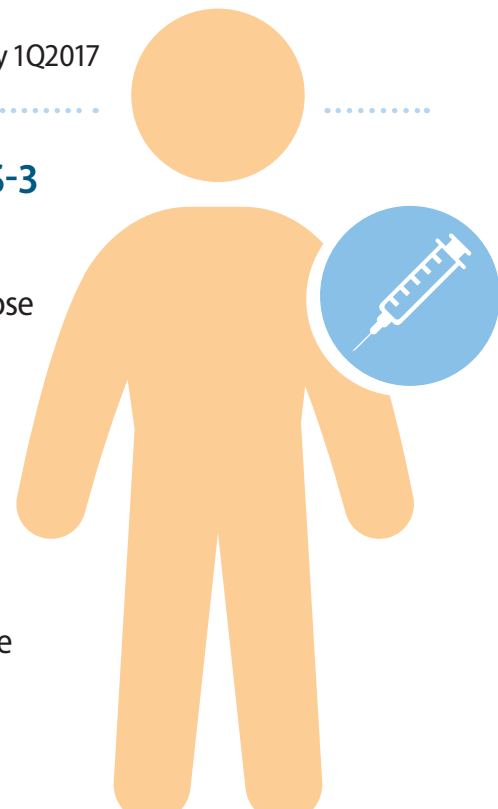
- ▶ Get newborns in as soon as possible after 6 weeks of age to help prevent them from falling behind
- ▶ Facilitate scheduling follow-up appointments for the next doses
- ▶ Prioritize appointment availability for 1-2 month dosing intervals
- ▶ Encourage top maternity facilities to help mothers with the MC330 form to add the baby onto her Medi-Cal coverage
- ▶ In addition to submitting encounters, use CAIR to review past immunizations and record administered vaccines
 - CAIR is more effective than the Provider Opportunity Report for patient outreach to address CIS care gaps
 - Prepare for CAIR 2: training is anticipated for current users in L.A. County 1Q2017

DTAP AND PCV ARE THE PRIMARY BARRIERS TO MEETING CIS-3

- ▶ For DTaP, a missing 4th dose appears to be a key barrier
- ▶ Timeframe for PCV is particularly vulnerable for missing 4th PCV dose
 - According to ACIP catch-up schedule*, if the 2nd PCV dose is given between 7-11 months, recommendation is to wait until 12 months and give 3rd dose as final dose
 - Will not meet CIS-3 without 4th dose PCV
 - Full coverage of PCV also protects children from systemic pneumococcal infections during first year of life, when they are most vulnerable

Action items:

- ▶ Aim to administer 2nd dose of PCV by 7 months to minimize the risk of missed 4th dose
- ▶ Prioritize at-risk members to get caught up (CAIR can be used)



*<http://www.cdc.gov/vaccines/schedules/hcp/child-adolescent.html>