

NVAC RECOMMENDATIONS ON IIS

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OBJECTIVE

I. Background

- Review of NVAC recommendations associated with IIS

II. Session Outline

- Highlights of progress made in the past decade
 - Current IIS landscape
 - Inter-jurisdictional IIS Data Exchange
 - Current Opportunities and Remaining Challenges

I. BACKGROUND

A DECADE IN REVIEW

2007

- Immunization Information Systems NVAC Progress Report

2008

- Enhancing participation in IIS (Stakeholder Meeting)

2015

- NVAC Statement of Support Regarding Efforts to Better Implement IIS-to-IIS Data Exchange Across Jurisdictions

2017

- Evaluation of the 2010 National Vaccine Plan Mid-course Review: Recommendations from the National Vaccine Advisory Committee (aka. “NVAC Mid-Course Review”)

2007: IIS NVAC PROGRESS REPORT

- 4 Recommendations to ensure:
 - 1) Appropriate protections of privacy and confidentiality for individuals and security for information included in the registry
 - 2) Participation of all immunization providers and recipients
 - 3) Appropriate functioning of registries
 - 4) Sustainable funding for registries
- 29 Action steps*:
 - Call for specific federal and non-federal partners in coordinating and implementing activities supporting these recommendations

2008: ENHANCING PARTICIPATION IN IIS

- Per 2007 recommendations, NVPO & NVAC convened a meeting of representatives from state and local health departments, health insurers, health plans, CMS, health care professional organizations, and others to address the following challenges:
 - 1) Deliberate the pros and cons of provider performance incentives based on the completeness of immunization data available in an IIS
 - 2) Deliberate the pros and cons of legislative and other approaches to increase provider participation in an IIS
 - 3) Develop a statement noting the value of IIS and urging financial support for IIS

*For meeting conclusions and recommendations, see [Enhancing Participation in Immunization Information Systems \(IIS\): Recommendations to the National Vaccine Advisory Committee](#)

2015: NVAC STATEMENT OF SUPPORT REGARDING EFFORTS TO BETTER IMPLEMENT IIS-TO-IIS DATA EXCHANGE ACROSS JURISDICTIONS

- Recommendations to the Assistant Secretary for Health (ASH):
 - 1) Promote the development of tools, standards, quality matrices, and common guidance documents used between states to address the technical and legal barriers in the Exchange
 - 2) Work closely with Regional Health Administrators (RHA) and other federal and nonfederal partners to better quantify the needs for and specific barriers to the Exchange at the regional and state levels
 - 3) Harmonize policies and practices across federal, regional, and state levels that support the Exchange
 - 4) NVPO to update the NVAC on the progress of these efforts associated to the Exchange and identify policy barriers that can be addressed at the federal level

*See [NVAC Statement of Support Regarding Efforts to Better Implement IIS-to-IIS Data Exchange Across Jurisdictions](#)

2017: NVAC MID-COURSE REVIEW

- **Opportunity Area (OA) #1:** strengthen health information and surveillance systems to track, analyze, and visualize disease, immunization coverage, and safety data, both domestically and globally
- Summarized near-term successes & identified challenges
- NVAC proposed existing and potential indicators for future development that may be applicable to track for this OA

2017: NVAC MID-COURSE REVIEW

- Proposed existing indicators that may be applicable to track for this OA:

Box 3. Proposed Indicators for Tracking Success – OA#1

Existing Indicator	Baseline	Target
Percent of office-based physicians electronically sharing patient information with any providers outside their organization (domestic)	ONC 38% (2015)	Increasing trend
Percent of healthcare providers electronically sharing patient information with their state IIS (e.g., a meaningful use requirement) (domestic)	ONC 73% of eligible hospitals in the U.S. reported vaccination to their local IIS (2014)	Increasing trend
Percent of laboratory reports received electronically annually for notifiable conditions (domestic)	CDC 67% (2014)	100%
Number of countries with case-based surveillance for vaccine-preventable diseases (e.g., invasive bacterial disease [IBD] and rotavirus) (global)	GVAP, SAGE 67% Member States IBD; 52% Member States rotavirus (2013)	75% of low and middle-income countries with hospital-based sentinel site surveillance for IBD and rotavirus

*Source: [Evaluation of the 2010 National Vaccine Plan Mid-course Review: Recommendations from the National Vaccine Advisory Committee](#)

II. SESSION OUTLINE

SESSION OUTLINE

1) Current landscape & implementation

- IIS Fundamentals (CDC)
- Perspectives from Minnesota (AIM)

2) Update on efforts toward inter-jurisdictional IIS data exchange

- Community of Practice (AIRA/ASTHO)
- Public Health Immunization Data Exchange (PHIZ) Project (ONC)

3) Opportunities and Challenges

- HITECH 90-10 Program (ONC)
- Panel Discussion (AIM/AIRA/ONC)