

Reminder Recall for HEDIS Combo 10 Series

Reminder/Recall in the IIS is a helpful tool that can ensure patients stay up-to-date on their immunizations. This document provides guidance on utilizing Reminder/Recall to monitor childhood immunization status for the **HEDIS Combination 10** series. Running the Reminder/Recall Report for patients **8 months through 11 months** will include patients who are due for any of the routine vaccines typically given in the first 6 months of life. When the report is run for **16 months through 35 months**, patients who are due or overdue for any shots that are typically given in the first 15 months of life will be included. Running the Reminder Recall report with the instructions and parameters in this reference guide should be completed every 2 months for both age groups (8months-11months **and** 16months-35months).

The guidance in this document supports selecting the **H 10 (no flu)** series which will include the following vaccines:

Series Description ✕

Series Name: H 10 (no flu)

Selected Vaccines	Number of Shots
DTaP/DT/Td	4
HIB	3
POLIO	3
HEP-B 3 DOSE	3
MMR	1
VARICELLA	1
HEP-A	1
PNEUMO (PCV)	4
ROTAVIRUS	2

NOTE: Selecting the **HEDIS COMBINATION 10 as gold/silver** series will include flu.

The [Immunization Quality Improvement for Providers \(IQIP\)](#) program supports providers with increasing immunization rates for their clinics. Providers can utilize the [IQIP Immunize WA Timeline](#) for quality improvement activities. The [Immunize WA Annual Award](#) recognizes clinics who achieve 70% or higher coverage for childhood/adolescent immunizations.



Reminder Recall for HEDIS Combo 10 Series

Prior to running the Reminder Recall report as instructed below, you can download and edit a copy of the [Multi-language Reminder Recall Letter](#) to include contact information for your clinic. Print one copy of the letter for each patient recalled as outlined in [Step 7](#).

DELETE AND ADD YOUR CLINIC LOGO

<111 OLYMPIA ST., OLYMPIA
(111) 111-1111
OLYCLINIC@OLYCLINIC.COM

To the parents/guardians of:

AVERY 5160 LABEL HERE

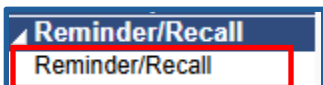
<p style="text-align: right; font-weight: bold; font-size: small;">ENGLISH</p> <p>Hello! Our records show your child may be due for a wellness visit or vaccinations. This visit is important for keeping your child healthy! Please call our office to schedule your child's appointment.</p> <p>We look forward to seeing you soon.</p>	<p style="text-align: right; font-weight: bold; font-size: small;">SPANISH</p> <p>Hola. Según nuestros registros, su hijo necesita una cita para un examen físico o para vacunarse. Este es un paso importante para cuidar su salud. Llame a nuestra clínica para programar una cita.</p> <p>Esperamos verlo pronto.</p>
<p style="text-align: right; font-weight: bold; font-size: small;">ARABIC</p> <p>صحتك ورفاهيتك مهماننا. نودى ان نرى طفلك لاجل فحص طبي او تطعيمات. من فضلك اتصل باميرنا لاجل تحديد موعد لطفلك.</p> <p>نحن ننتظر رؤيتك قريباً.</p>	<p style="text-align: right; font-weight: bold; font-size: small;">AMHARIC</p> <p>ሰላም! ግንኙን ልጅዎ የጤና ክትትል ወይም ክትትል ለያስፈልገው እንደሚችል ያሳያል። ይህ ክትትል የልጅዎን ጤና ለመጠበቅ እስፈላጊ ነው። እንከዎ የልጅዎን ቀጠር ለማሰናኘት ወደ ቤቷችን ይደውሉ።</p> <p>ቡርርኩ እርሱን ለማየት ቡንቱን እንጠባብቃለን።</p>
<p style="text-align: right; font-weight: bold; font-size: small;">KOREAN</p> <p>안녕하십니까! 저희 기록에 따르면 귀하의 자녀는 건강검진 또는 예방접종을 해야 하는 시기에 해당하는 대상 아동일 수 있습니다. 이 방문은 자녀의 건강을 지키는데 중요합니다! 자녀의 방문을 예약하시려면 저희 사무소에 전화해 주십시오. 그릴 곧 뵙겠습니다.</p>	<p style="text-align: right; font-weight: bold; font-size: small;">MARSHALLESE</p> <p>Iakwe! Rekoot ko ad rej kwalök ke ajiri eo nejum emaroñ aikuj in loelak takto ako bök wä. Ien loelak in aurok äinwot ke ej köjbarok ejmour an ajiri! Jouj kurlok opij eo ad fian jikeduul ien loelak an ajiri eo nejum.</p> <p>Jej remaanlakj wöt fian ad loe eok.</p>
<p style="text-align: right; font-weight: bold; font-size: small;">RUSSIAN</p> <p>Здравствуйте! Согласно имеющейся у нас информации, ваш ребенок, вероятно, нуждается в оздоровительном визите или прививке. Визит необходим для поддержания здоровья ребенка. Позвоните в наш офис, чтобы запланировать его.</p> <p>Ждем встречи с вами.</p>	<p style="text-align: right; font-weight: bold; font-size: small;">SOMALI</p> <p>Waan ku salaanaay! Diiwaanadeena waxay muujinayaan in canugaaga la joogo waqtigii uu imaan lahaa booqasho caafimaad ama tallaal. Booqashadaan waxay muhiim u tahay ilaalinta caafimaadka canugaaga! Fadlan wac xafiskeena si aad u qabsato ballanta canugaaga.</p> <p>Waxaan rajeynaynaa inaan mardhow ku aragho.</p>
<p style="text-align: right; font-weight: bold; font-size: small;">UKRAINIAN</p> <p>Вітаємо! Відповідно до наявної в нас інформації, вашій дитині, імовірно, слід зробити оздоровчий візит або щеплення. Візит необхідний для підтримки здоров'я дитини. Зателефонуйте в наш офіс, щоб запланувати його.</p> <p>Чекаємо на вас.</p>	<p style="text-align: right; font-weight: bold; font-size: small;">VIETNAMESE</p> <p>Kính chào quý vị! Hồ sơ của chúng tôi cho thấy con của quý vị đã đến thời hạn đi khám sức khỏe hoặc tiêm chủng. Lần thăm khám này đóng vai trò quan trọng trong sự phát triển khỏe mạnh của đứa trẻ! Vui lòng gọi đến văn phòng của chúng tôi để sắp xếp lịch hẹn. Chúng tôi mong sớm được gặp quý vị.</p> <p>Chúng tôi rất mong được gặp quý vị.</p>
<p style="text-align: right; font-weight: bold; font-size: small;">SIMPLIFIED CHINESE</p> <p>您好！根据我们的记录，您的孩子应该接受定期的健康检查或疫苗接种。本次检查对于保持您孩子的健康非常重要！请致电我们的办公室，为您的孩子安排预约。</p> <p>我们非常期待能很快见到您！</p>	

OLY CLINIC (111) 111-1111

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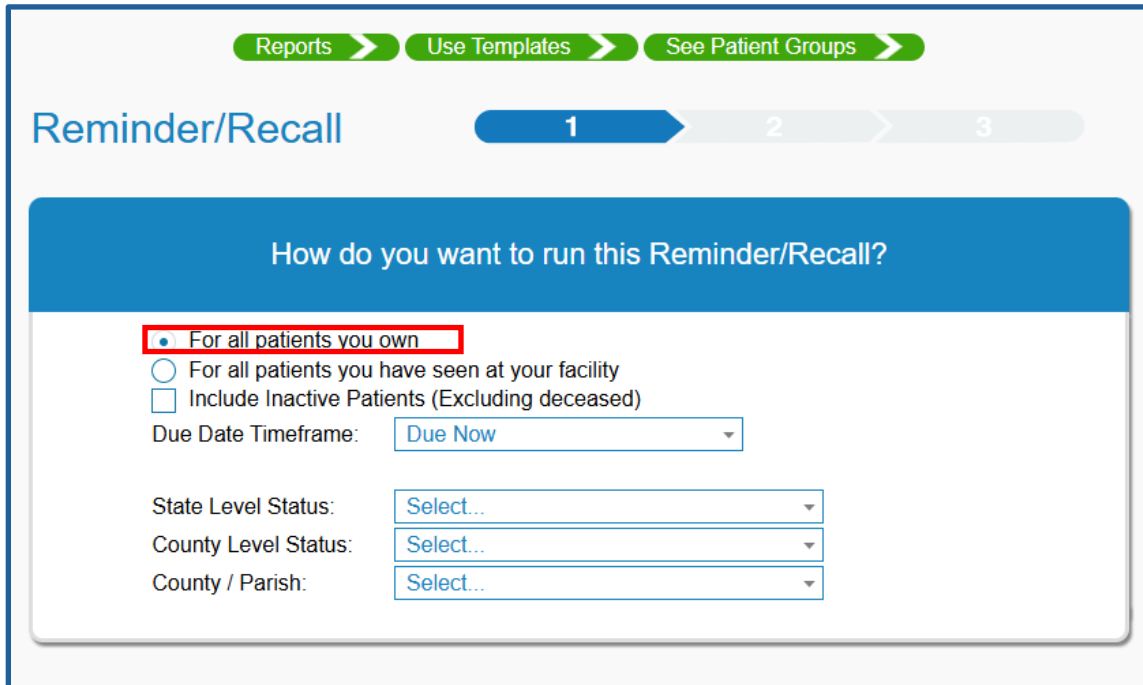
IIS users with **Run Reminder Recall** permission can access the reminder/recall function by selecting Reminder/Recall in the left navigation menu. **Manage Reminder Recall** permission enables users to access all options for Reminder/Recall including the option to create and run templates using the same report parameters in the future. Contact your organization's IIS System Administrator or WAIISHelpDesk@doh.wa.gov for changes to user permissions.



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Reminder Recall for HEDIS Combo 10 Series

1. Run the report **For all patients you own**. This will include all active patients owned by your clinic or organization. For additional information see: [Managing Patient Ownership and Status](#).



Reports > Use Templates > See Patient Groups >

Reminder/Recall 1 2 3

How do you want to run this Reminder/Recall?

For all patients you own

For all patients you have seen at your facility

Include Inactive Patients (Excluding deceased)

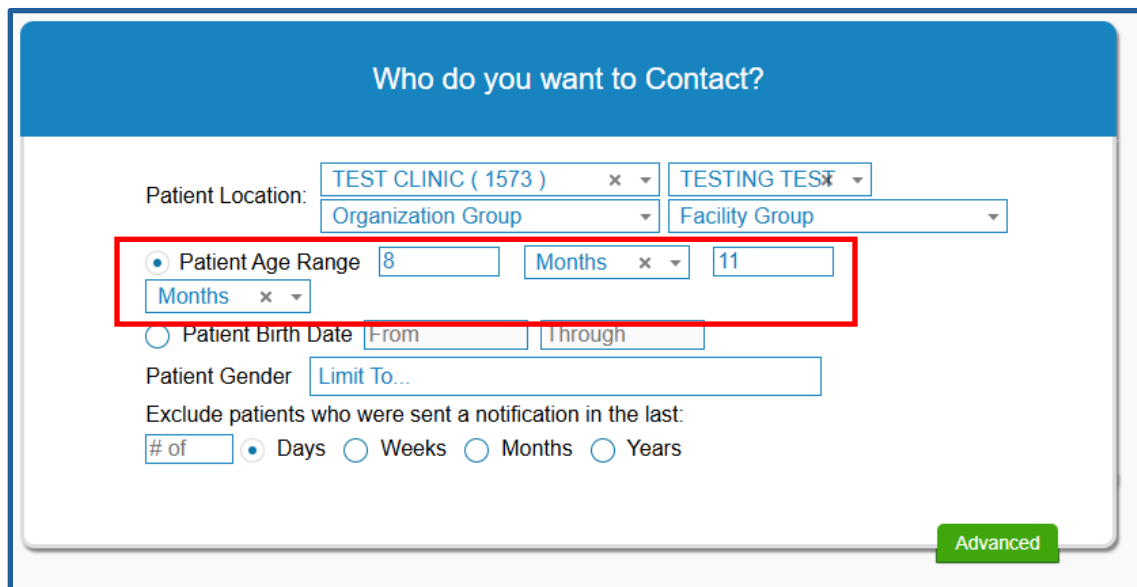
Due Date Timeframe: Due Now

State Level Status: Select...

County Level Status: Select...

County / Parish: Select...

2. Enter **Patient Age Range**. It is recommended to run Reminder/Recall *separately* for the following age ranges:
 - a. 8 months to 11 months
 - b. 16 months to 35 months



Who do you want to Contact?

Patient Location: TEST CLINIC (1573) TESTING TEST

Organization Group Facility Group

Patient Age Range 8 Months 11

Months

Patient Birth Date From Through

Patient Gender Limit To...

Exclude patients who were sent a notification in the last:

of Days Weeks Months Years

Advanced

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3. Select **H 10 (NO FLU)** from the drop-down menu to run the report for the HEDIS COMBO 10 series *without* flu. Then select **Generate Patient List**.

Which vaccines would you like to include?

H 10 (NO FLU) x ?

Vaccine Group	H 10 (no flu) Number of doses in this series
DTaP/DT/Td	4
HIB	3
POLIO	3
HEP-B 3 DOSE	3
MMR	1
VARICELLA	1
HEP-A	1
PNEUMO (PCV)	4
ROTA VIRUS	2

I only want to see my patients who are:

Due for all selected vaccines
 One dose away
 One visit to complete the series

Clear
Schedule
➔ Generate Patient List

4. The recall group will be shown in the patient list. Inactivate patients that have left your practice from this screen. For additional information see: [Managing Patient Ownership and Status](#). Select **Submit**.

What patients do you want to add to your recall group?

Remove Patients who don't have an available
 Name Phone Address Email

Remove Patients who have received more than Select notifications.

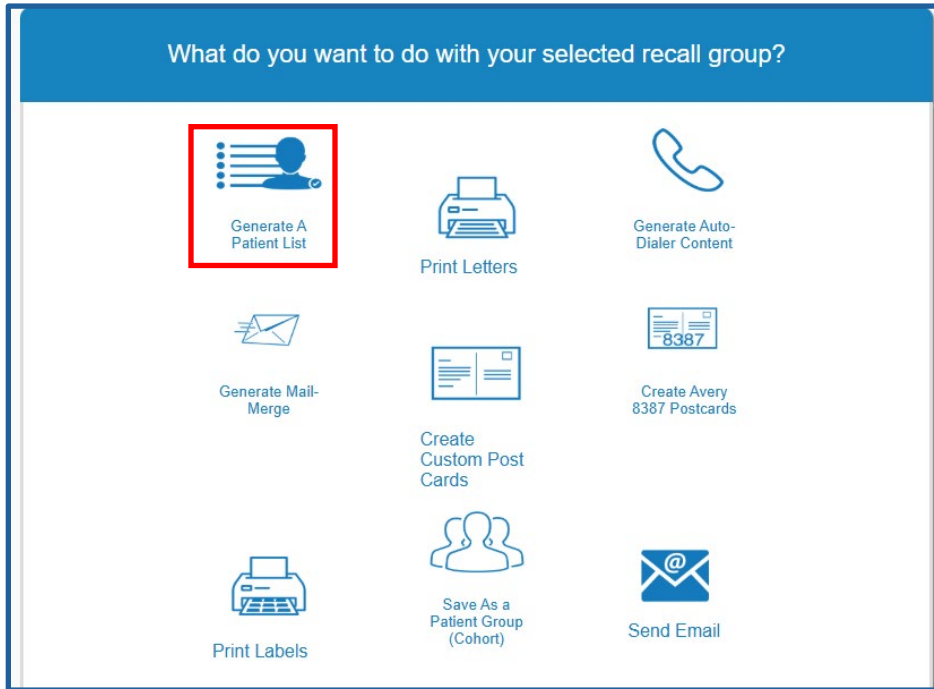
Last	First	Age	Vaccines Due	Available Contact Methods	R/R Attempts	Reason for Inactivation
<input checked="" type="checkbox"/>	BERRY	B	<1	4	0	Select

Showing 1 to 1 of 1 entries PreviousNext

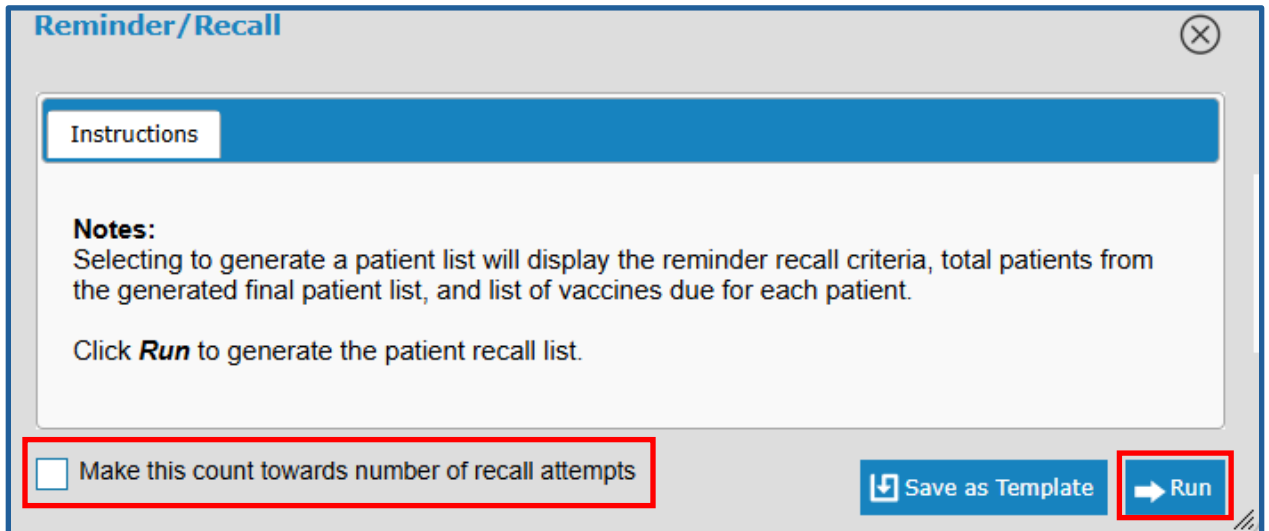
Export Patient List
✔ Submit

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5. Select **Generate A Patient List**.



6. Marking the box next to 'Make this count towards number of recall attempts' will count how many times the patient has been recalled. Select **Run** to view a list of patients and vaccines due for each patient.



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7. Review the patient list to find the number of patients to be contacted. Print 1 copy of the Reminder/Recall Letter for each patient recalled. Click [here](#) for instructions.

Patient Recall Group Listing by Ownership

Report Criteria


<p>Organization: EVOSS TEST ORG Recall Date: 01/01/1900 through 02/05/2025 Birth Date Range: 03/06/2024 through 06/05/2024 Include Inactive Patients: No State: All High Risk Category: All Deferred Vaccinations Only: No Vacc. Groups: DTaP/Tdap/Td, Hib, Polio, HepB, MMR, Varicella, HepA, Pneumococcal, Rotavirus</p>	<p>Facility: VOSSTESTFAC1 Health Plan: All Physician: All Program: All County/Parish: All Zip Code: All District/Region Number: All</p>
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Total Patients Selected: 1


Patient ID	First Name	Middle Name	Last Name	Birthday	Guardian F.N.
11989374	B		BERRY	04/03/2024	MOTHER
Vaccine Group Name			Dose Number	Recommended Date	
HepB			1	04/03/2024	
Hib			1	06/03/2024	
Polio			1	06/03/2024	
Pneumococcal			1	06/03/2024	

8. Select **Print Labels**


What do you want to do with your selected recall group?




Generate A Patient List




Print Letters




Generate Auto-Dialer Content




Generate Mail-Merge




Create Custom Post Cards




Create Avery 8387 Postcards



Print Labels



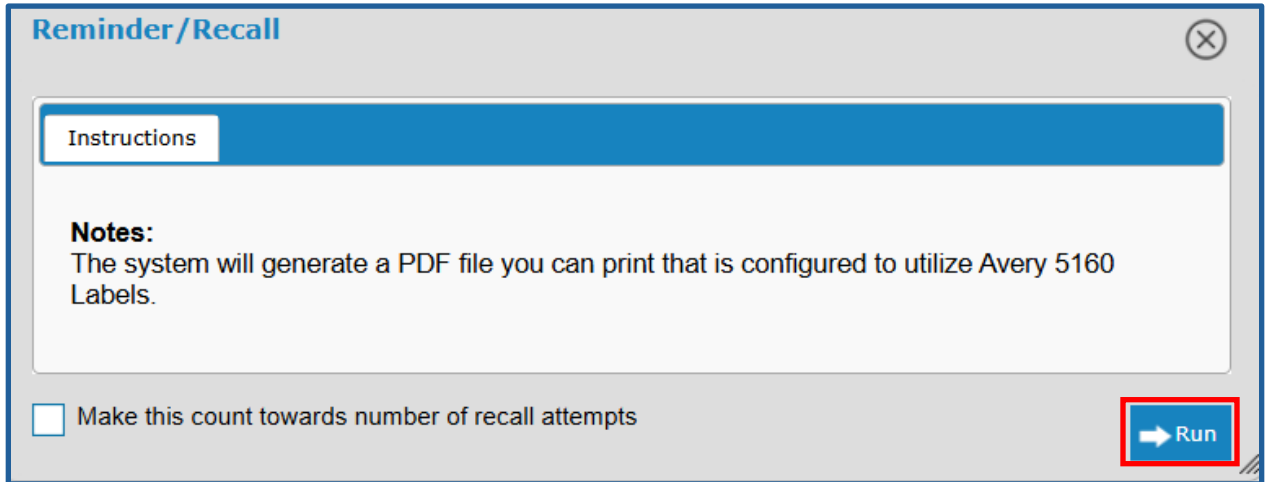
Save As a Patient Group (Cohort)



Send Email

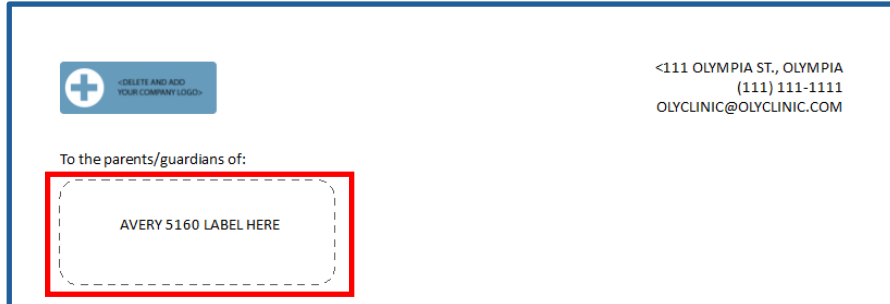
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9. Select **Run** to generate a PDF file you can print on Avery 5160 labels.



10. Load your printer with Avery 5160 Labels and **print 2 copies** of the labels. One will be used on the printed letter and the other will be used for the mailing envelope.

11. Fix one label in the selected area on the letter.



12. Fix the other label on the mailing envelope.



If you have questions regarding the instructions above or need further assistance, please contact ImmunizeWA@doh.wa.gov.



Questions? Contact the IIS Help Desk at 1-800-325-5599 or WAIISHelpDesk@doh.wa.gov

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