



Thank you for joining

The presentation will
begin shortly



Rise to Immunize® Monthly Webinar

Year 4 Data and RIZE Awards

Stephen Shields, MPH, AMGA, and representatives from award-winning groups

November 20th, 2025

Today's Webinar

- **Campaign Updates**

- Campaign Spotlight: Sanofi Vaccine Hesitancy Toolkit
- Resource of the Month: Pfizer Underlying Medical Conditions Handout



- **Year 4 Data**

- Stephen Shields, MPH (AMGA)

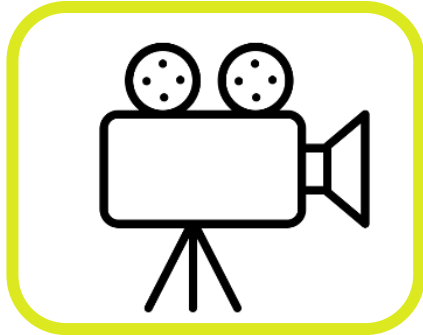
- **RIZE Awards**

- Robert Citronberg, MD (Advocate Health)
- David Boyd, PhD (Mills-Peninsula Medical Group)
- Keith Duncan, MD (Mills-Peninsula Medical Group)
- Nkem Akinsoto, MSc (UW Medicine Primary Care and Population Health)

- **Q&A Session**



Webinar Reminders



Today's webinar recording will be available the **week of 11/24**

- Will be sent via email
- Will be available on website

(RiseToImmunize.org → "Resources" → "Webinars")



Ask questions during the webinar using the **Q&A feature**

- Questions will be answered at the end of the presentation



**Please take a moment to
answer a one-question
pulse survey.**

We appreciate your feedback!

Campaign Spotlight: Sanofi Vaccine Hesitancy Toolkit



sanofi

Resource of the Month: Pfizer Underlying Medical Conditions Handout



Today's Speakers: Year 4 Data



Stephen Shields, MPH, Senior
Population Health Research Analyst,
AMGA Research and Analytics



Congratulations to our 2025 “RIZE to the Challenge” Award Winners!



UW Medicine

Today's Speakers



**Robert Citronberg, MD, FACP,
FIDSA, FSHEA**, Executive Medical
Director, Infectious Disease and
Prevention, *Advocate Health Care*



Adult Immunizations

Tdap and Zoster

Katie Passaretti, MD FIDSA

Chief Infection Prevention Officer
Clinical Professor, Section on Infectious Diseases
Wake Forest University School of Medicine

Rob Citronberg, MD FACP FIDSA FSHEA

Executive Medical Director
Infectious Disease and Prevention
Advocate Health Care / Aurora Health Care

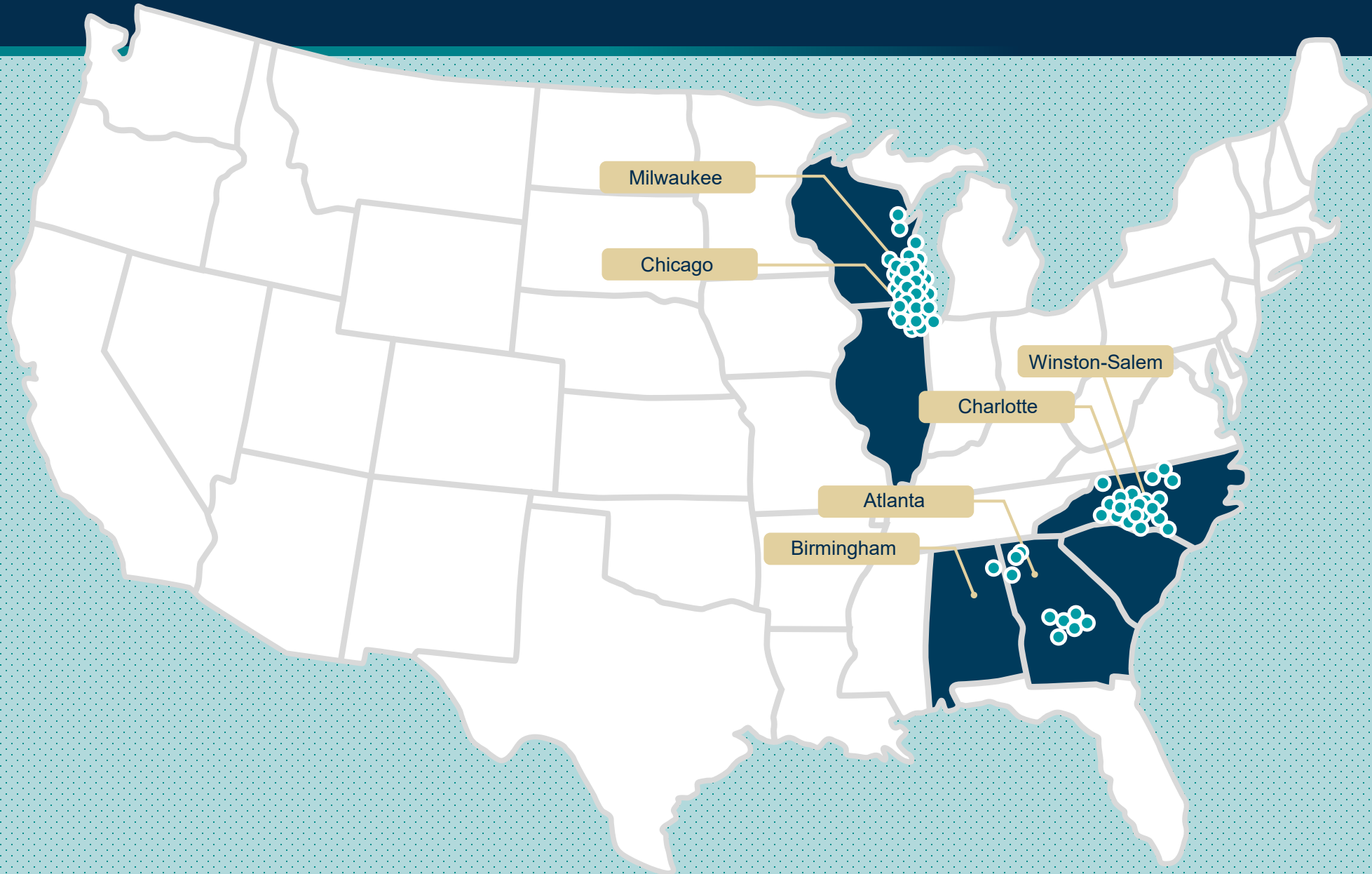
ADVOCATE HEALTH

**A Combination of Four Institutions
Who Joined Forces to Redefine Health Care**

Established December 2, 2022



Serving Patients Across Six States



Now part of  **ADVOCATEHEALTH**



40 Hospitals



610+ Sites of Care



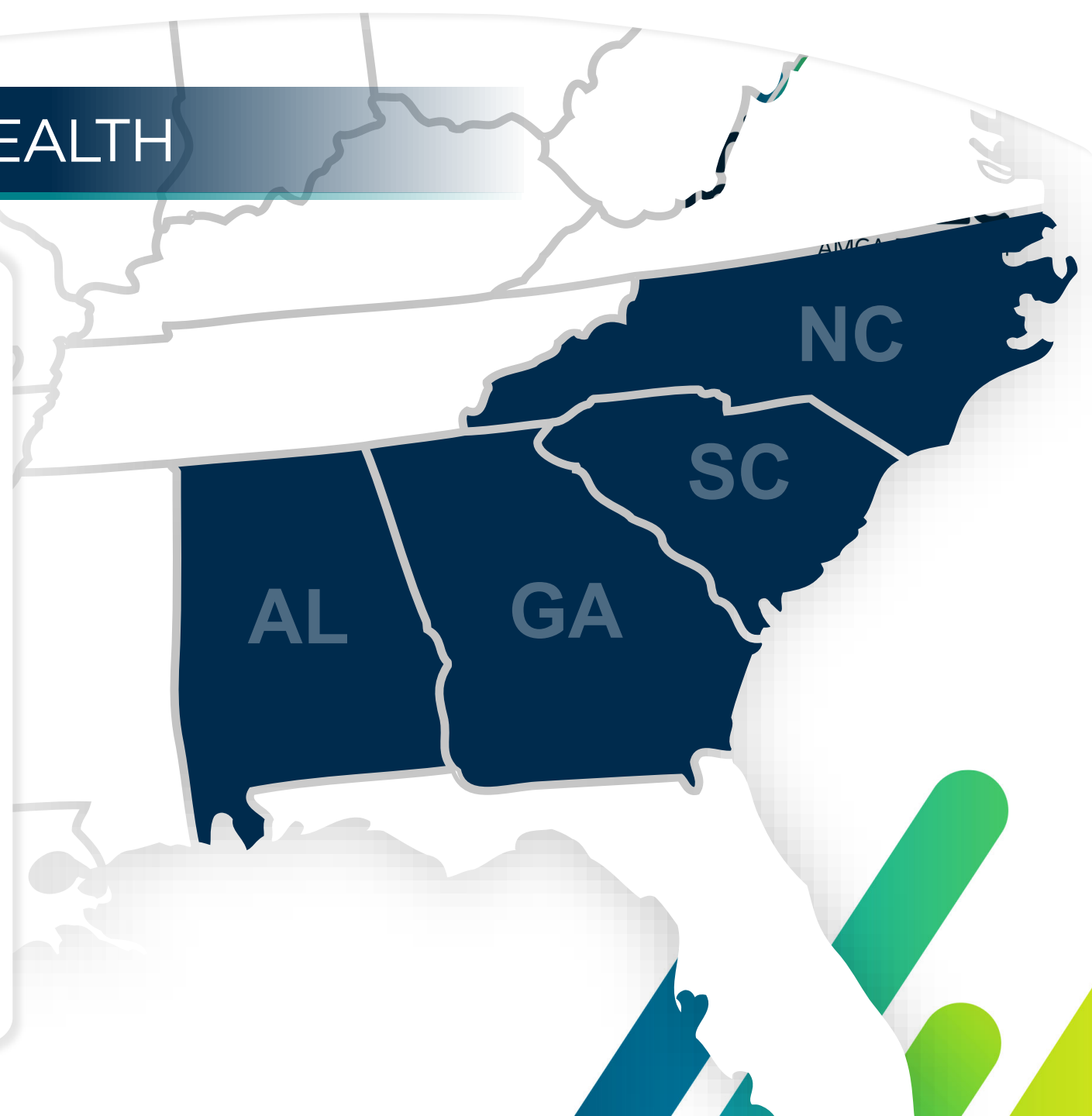
7.5K Employed Physicians



21K Nurses



2.8M Patients



Advocate Health Enterprise Vaccine Committee

Driving alignment & implementation across Advocate Health

- Co-chaired by Infectious Disease Infection Prevention physicians
- Representatives from primary care, pediatrics, women's health, population health, pharmacy, nursing, information technology, etc

Enterprise Vaccine Committee

Strategic impacts:

- **Vaccine formulary harmonization**
 - Streamlined vaccine formulary across all settings
 - Collaboration with Pharmacy and Therapeutics for clinical effectiveness and Pharmacy Supply Chain for operational efficiency
 - Structured with flexibility to ensure every opportunity to vaccinate is not missed





ADVOCATEHEALTH

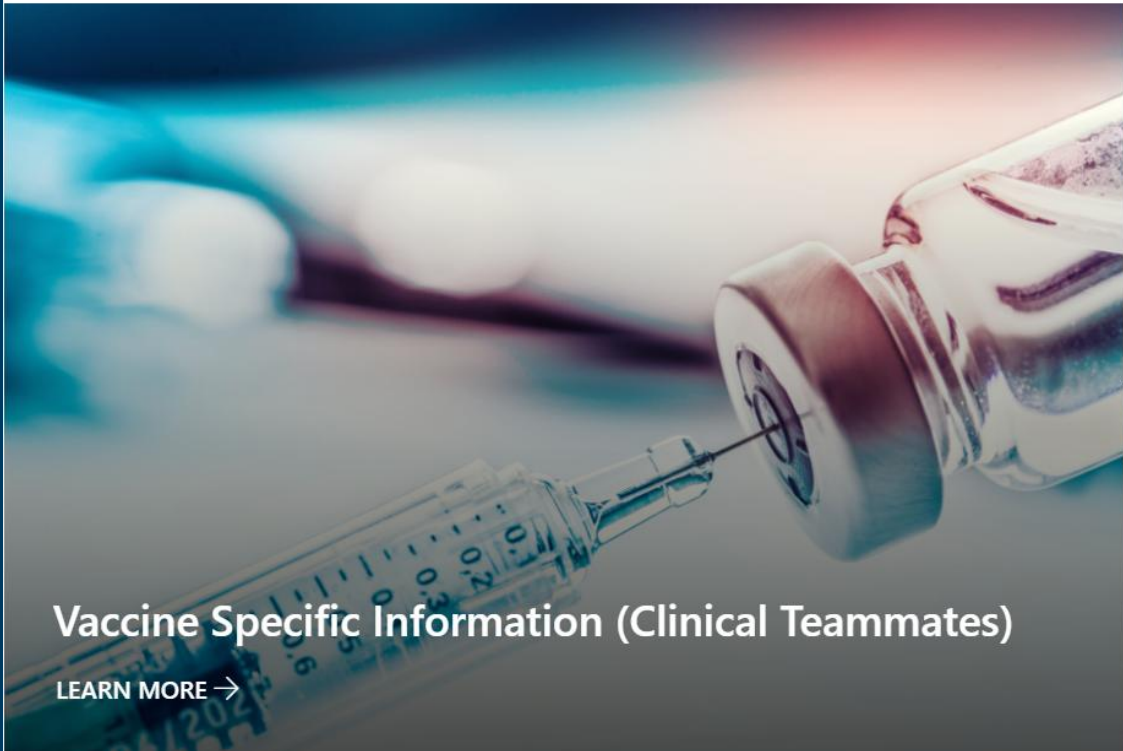
Vaccine SharePoint Site

One-stop shop for clinical and operational guidance

 Advocate Health - Vaccine Management

[Home](#) [Vaccine Specific Information](#) [Patient Education](#) [...](#) [Edit](#) [★ Following](#) [Site access](#)

[+ New](#) [Page details](#) [Preview](#) [Analytics](#) Published 11/3/2025 [Share](#) [Edit](#) [↗](#)

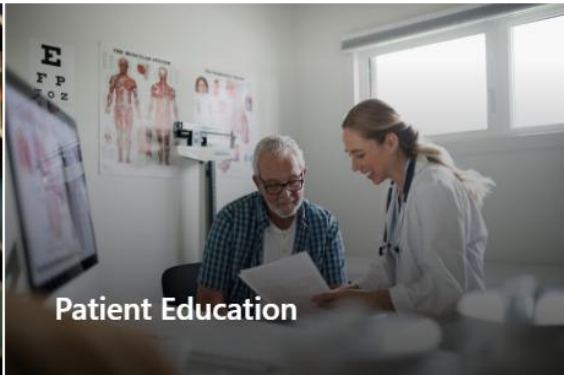


Vaccine Specific Information (Clinical Teammates)

LEARN MORE →



FDA, CDC, and other official resources (Vaccine Coordinators)



Patient Education



Vaccine Data (Operational Leaders and above)



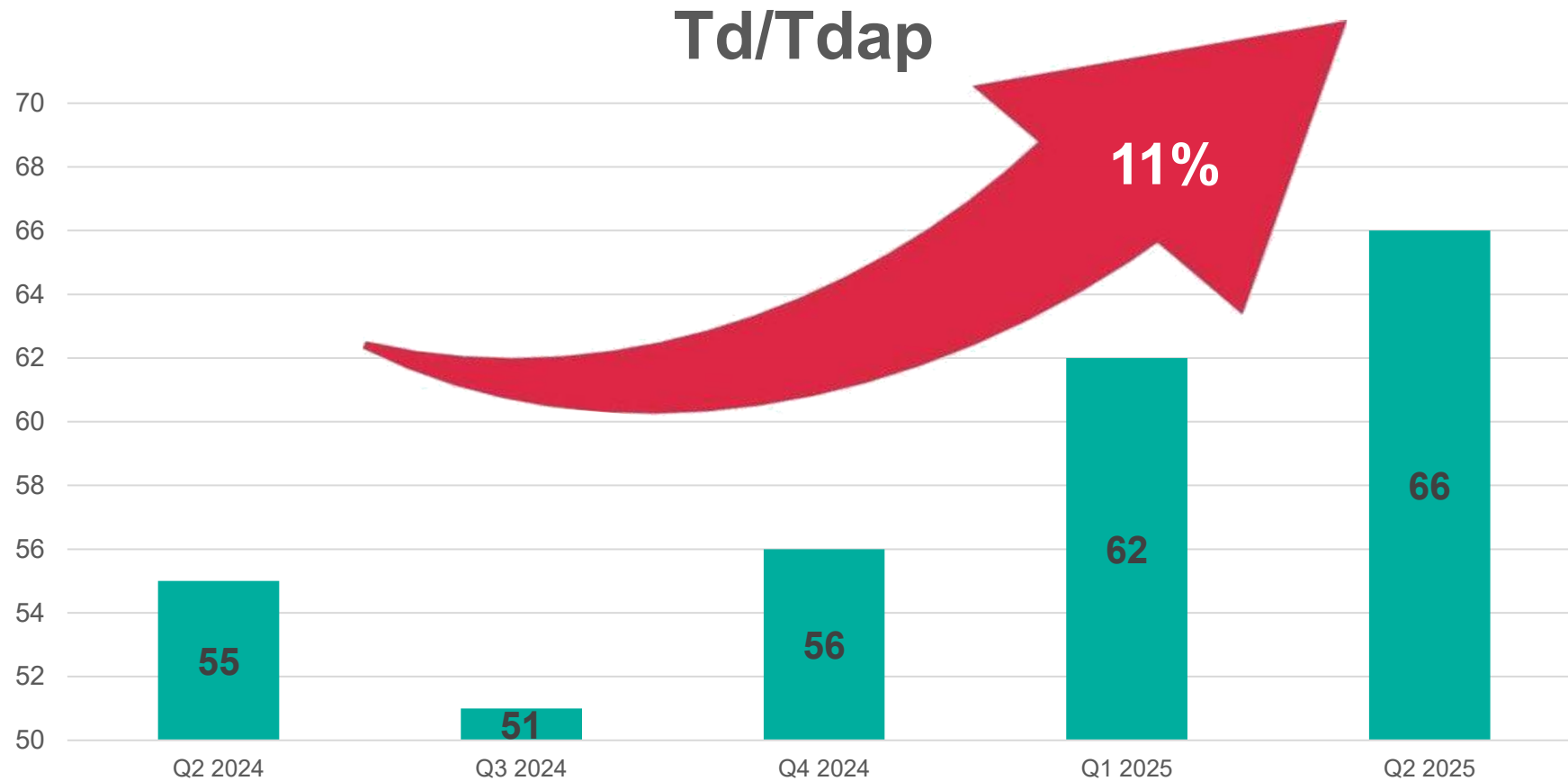
Enterprise Flu Playbook

Primary Care

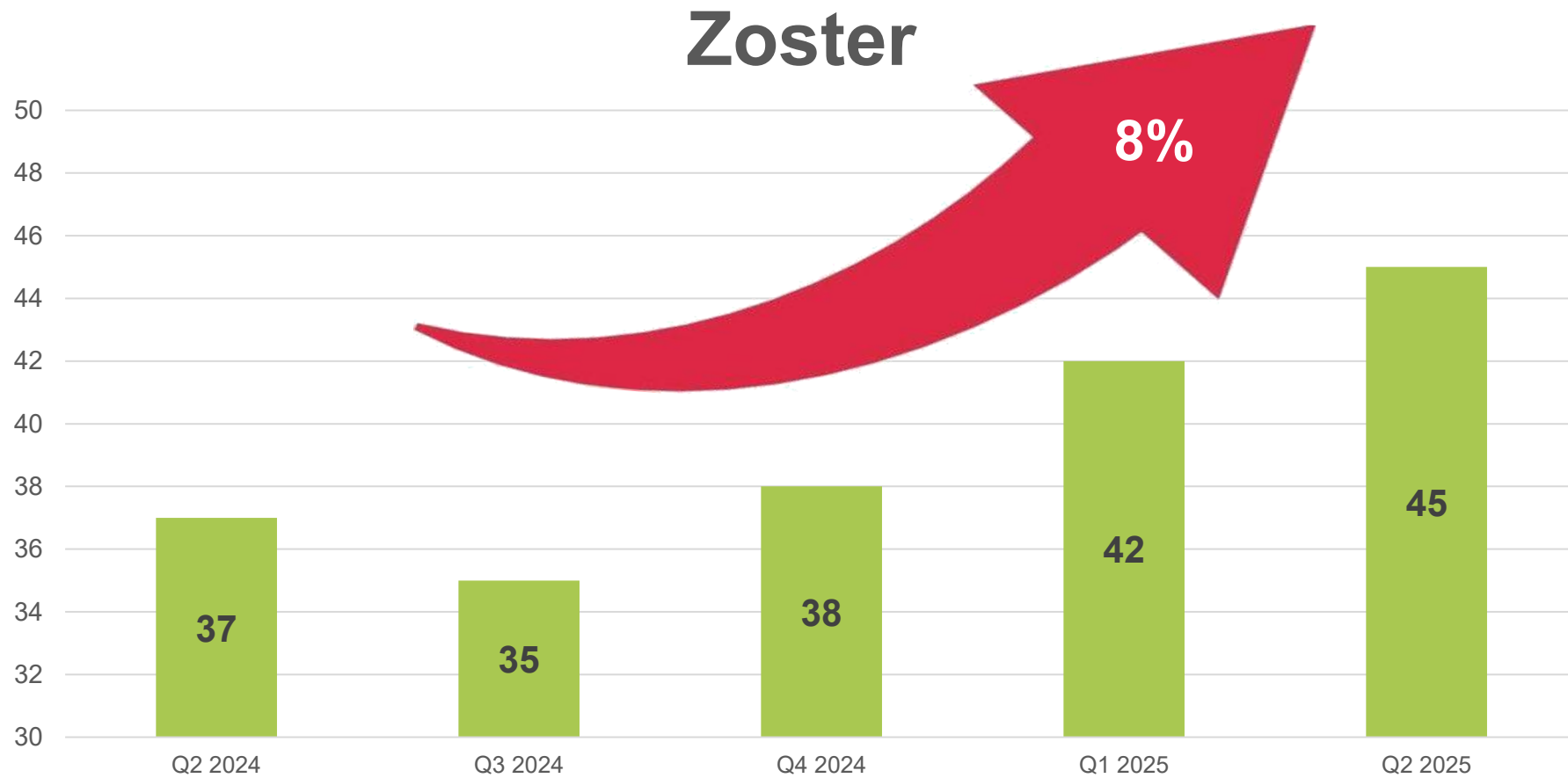
Emphasis on new provider and teammate training

- **Educate on the quality measures**
- **Reinforce closing the care gap at each visit**

Td/Tdap



Zoster



Questions?

Contact Meg Kim <Margarette.Kim@aah.org>

Today's Speakers



David Boyd, PhD, Director of Quality,
Mills-Peninsula Medical Group



Keith Duncan, MD, President, *Mills-Peninsula Medical Group*



AMGA Rize to Immunize Webinar Mills-Peninsula Medical Group 20 November, 2025

Keith Duncan, M.D., PhD
CEO

David Boyd, PhD, CPHQ
Director of Quality



**Mills Peninsula
Medical Group**

Rise to Immunize® Data Dashboard

Reporting Quarter:

Q2 2025

Blinded Code:

GB4

Group Size:

All

Overall

Influenza

Pneumococcal

Td/Tdap

Zoster

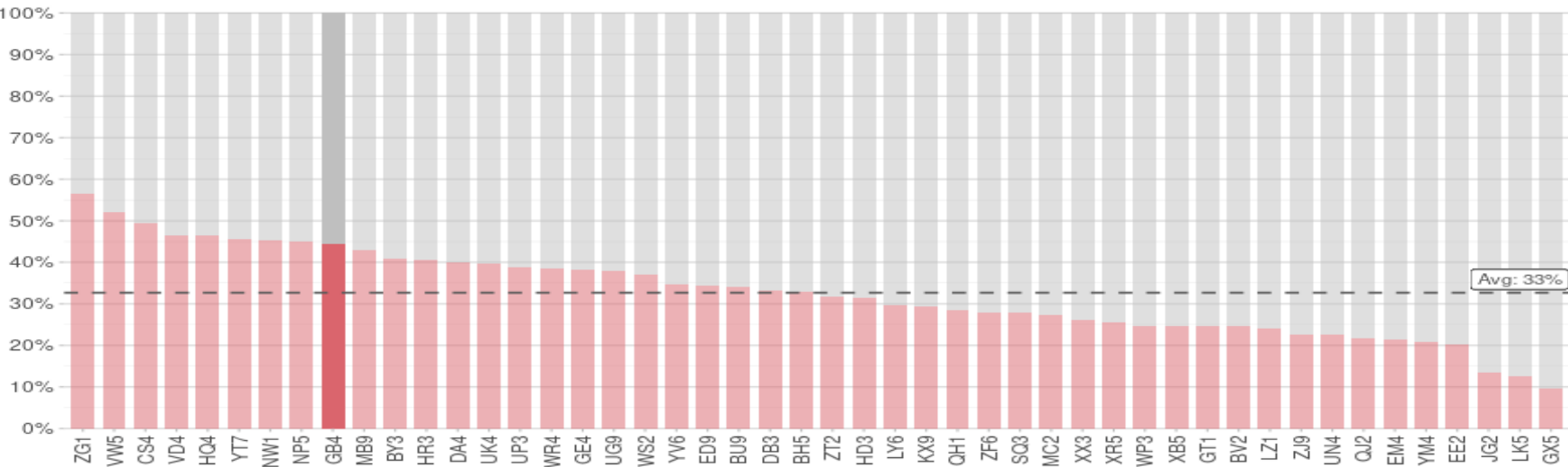
Bundle

RSV

COVID-19

Hep B

Performance Summary



Top 5 Orgs with the highest vaccination rates in Q2 2025

Org	Rank	Rate
ZG1	1	56.5%
VW5	2	52.2%
VD4	3	46.6%
HQ4	4	46.5%
YT7	5	45.7%

Top 5 Most Improved Orgs by Rank

of spots moved from Q2 2024 to Q2 2025

Org	Increase in Rank
ED9	16
QH1	10
WP3	8
EE2	7
JG2	7

Top 5 Orgs with Largest Increase (or Smallest Decrease) in Rate

Change from Q2 2024 to Q2 2025

Org	Change in Rate
ED9	7.6%
VW5	5.3%
GB4	3.2%
QH1	2.2%
GE4	1.3%



MPMG

MPMG increased percentage of patients immunized from 41% to 44%

Rise to Immunize® Data Dashboard

Reporting Quarter:

Q2 2025

Blinded Code:

GB4

Group Size:

All

Overall

Influenza

Pneumococcal

Td/Tdap

Zoster

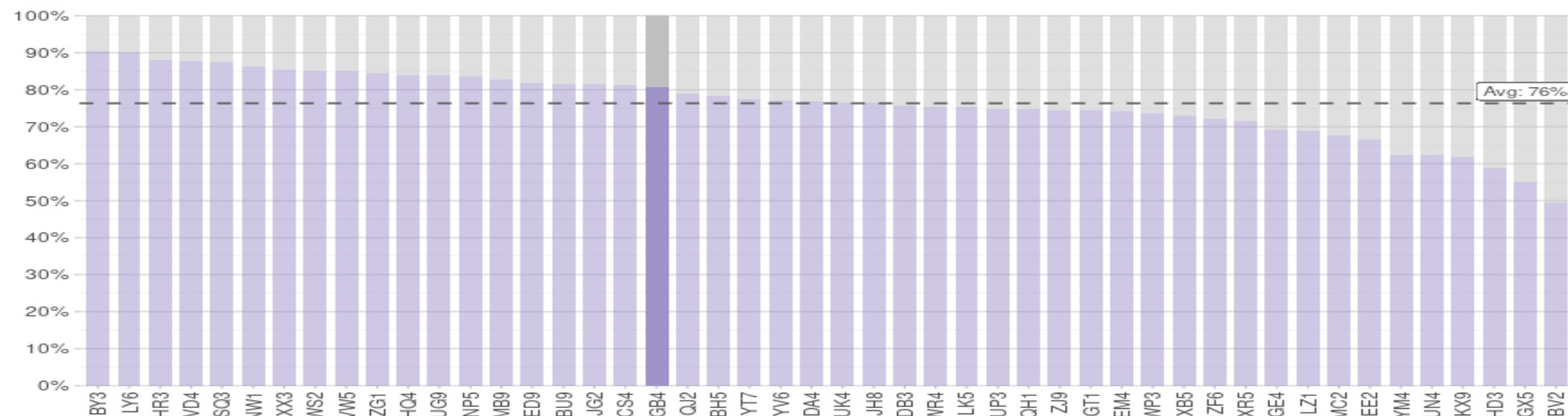
Bundle

RSV

COVID-19

Hep B

Performance Summary



Top 5 Orgs with the highest vaccination rates in Q2 2025

Org	Rank	Rate
BY3	1	90.5%
LY6	2	90.2%
HR3	3	88.1%
VD4	4	87.8%
NW1	5	86.2%

Top 5 Most Improved Orgs by Rank

of spots moved from Q2 2024 to Q2 2025

Org	Increase in Rank
JG2	16
GB4	12
XB5	11
YT7	10
UK4	9

Top 5 Orgs with Largest Increase (or Smallest Decrease) in Rate

Change from Q2 2024 to Q2 2025

Org	Change in Rate
JG2	8.6%
GB4	6.6%
XB5	4.5%
MB9	3.7%
YT7	3.6%



MPMG

MPMG Increased percentage of patients immunized with Pneumovax by 7 percentage points from 74% to 81%

Background

- Independent Practice Association (IPA) serving patients in San Mateo County – south of San Francisco
- Incorporated in 1997, currently has 60 primary care physicians and 200 specialists serving approximately 20,000 managed care lives
- Strong culture of delivering high quality patient care built over past 20 years
 - Consistently strong physician leadership and monthly Quality Improvement Committee meetings
 - Consistently ranked among the top performing medical groups in CA among 200 groups that participate in the state-wide Align, Measure Perform Program sponsored by the Integrated healthcare Association

Background

- Physicians actively participate in initiatives to improve the delivery of preventive and chronic disease management services
 - Biannual all-PCP forums present updates on clinical subjects that impact their patient panels
 - Managing hypertension, statin use, immunizations
 - Quarterly newsletters highlight clinical quality and patient experience tips
- Physicians use shared EMR
 - Reviewing Health Maintenance Section during all patient visits is shared responsibility among physicians of all specialties.
 - Physicians and MAs are encouraged to address Health Topics, including immunizations, that show patient is OVERDUE

Interventions to Support Adult Immunization

- During flu season, physicians recommend vaccinations
 - Flu clinics' locations and hours widely publicized at practice sites and MPMG's hospital partner, Mills-Peninsula Medical Center
 - Relatively small denominator
- When Prevnar 20 released, multiple communications sent to physicians advising of new schedule for adult pneumococcal vaccination
 - During respiratory season, patients reminded to receive relevant vaccines



Thanks to the AMGA
for this recognition!

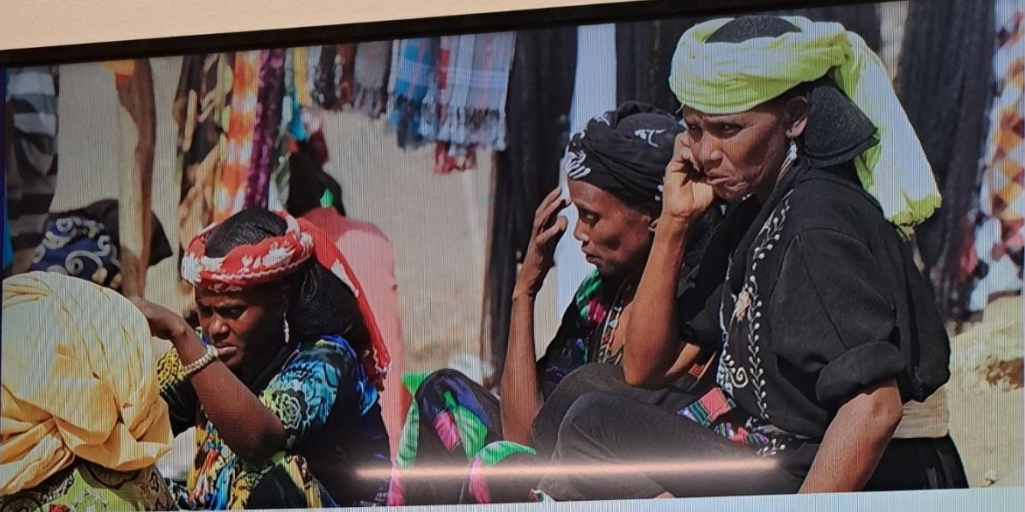
- **MPMG appreciates this award for our efforts to improve vaccination rates!**

Today's Speakers



Nkem Akinsoto, MSc, Assistant
Director, Population Health, *UW
Medicine Primary Care and Population
Health*





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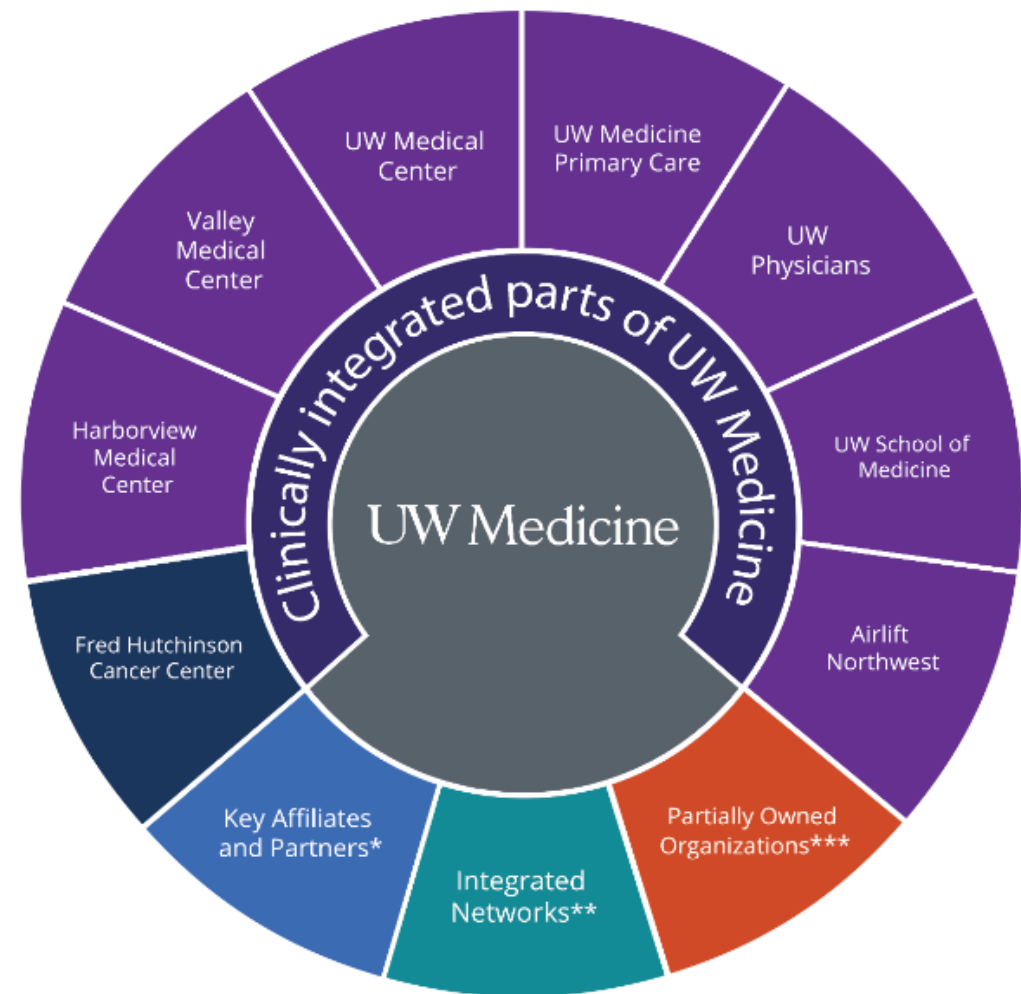
Discussion Highlights

- About UW Medicine
- UW Medicine Primary Care and Population Health
- FOCUS ON RSV
 - 2024 CDC Recommendation
 - Clinic Patient Communication
 - EMR Process Updates
 - Implementation
 - Staff action
 - Outcomes
 - AMGA RIZE Measures

UW Medicine is a family of organizations (some public and some private nonprofit) that are operated or managed as part of an integrated health system. Nearly 29,000 healthcare professionals, researchers, and educators work together at UW Medicine with a single mission: to improve the health of the public.

Based in Seattle, Washington, UW Medicine is affiliated with the University of Washington and serves as a vital resource for both the local community and the broader region.

UW Medicine is a comprehensive healthcare organization that includes multiple hospitals, clinics, and research facilities dedicated to providing high-quality patient care, advancing medical education, and conducting cutting-edge research.



June 2024 – New CDC RSV Recommendation

- CDC updated its recommendation for the use of Respiratory Syncytial Virus (RSV) vaccines in people ages 60 and older. Starting from the 2024 respiratory virus season, CDC recommended:
 - Everyone ages 75 and older receive the RSV vaccine.
 - People ages 60–74 who are at increased risk of severe RSV, meaning they have certain chronic medical conditions, such as lung or heart disease, or they live in nursing homes, receive the RSV vaccine.
- **August 2024: UWM PCPH Request for RSV Health maintenance topic**
- **October 2024: HM Topic went into production**

In Clinic Patient Communications

- **July 2025: We developed Adult Immunization patient communication**
 - Includes priority vaccines by age and populations.
 - Brochure handouts and wall poster sizes for exam rooms

VACCINES	AGES			
	Ages 19-26	Ages 27-49	Ages 50-64	Age 65+
HepB	2-4 doses depending on vaccine or condition through age 59			
HPV	2-3 doses, through age 26	27-45 years		
IPV	Complete 3-dose series if incompletely vaccinated			
MMR	1-2 doses if born after 1957 or later. Talk to your provider.			
Pneumococcal			1-2 doses, age 50 and older	
RZV			2 doses after age 50	
Tdap	Td/Tdap every 10 years and every pregnancy			
VAR	2 doses (if born in 1980 or later)			

VACCINE NAMES

HepB: Hepatitis B
HPV: Human Papillomavirus
IPV: Inactivated poliovirus
MMR: Measles, Mumps, Rubella
Pneumococcal: Pneumonia
RZV: Zoster recombinant (Shingles)
Tdap: Tetanus, diphtheria, and acellular pertussis
VAR: Varicella

Protection Against Seasonal Respiratory Viruses

- ❑ **COVID-19 Vaccine:** Recommended annually for patients 19-64 years of age who are not pregnant. The American College of Obstetricians and Gynecologist continues to recommend annual COVID-19 vaccines.
- ❑ **Influenza (Flu) Vaccine:** 1 dose recommended each Fall or winter
- ❑ **Respiratory Syncytial Virus (RSV) Vaccine:** Recommended during first pregnancy for ages 19-49. For subsequent pregnancies, recommended for the infant to receive the RSV Monoclonal Antibody immediately after birth. Recommended for patients 60-74 if they have another health risk. Recommended one-time for patients 75 years of age and older.

Color Key

- Recommended for people in the age range and don't have records of their vaccines or proof they are protected.
- Recommended for patients who have another health risk or reason to get the vaccine. Talk to your primary care provider.
- Recommended after the patient and their provider talk and decide together.
- No recommendation

Questions?

Talk to your primary care provider to stay up to date on your vaccinations.

uwmedicine.org/primarycare

EMR Process Updates

- RSV Vaccine as Health maintenance (HM) care gap – Adult-only, and with patient facing prompts. Examples:

- 60 year old high risk, yet to receive RSV

RSV Vaccine (1 - Risk 60-74 years 1-dose series)  Never done [Risk](#)

- 74 year old due for RSV vaccine this year

RSV Vaccine (1 - 1-dose 75+ series)  Due soon on 12/4/2025 Standard 75+

- 42 year old and 33 weeks pregnant

RSV Vaccine (No Doses Required) Completed [Risk](#)

- 30 year old and 12 weeks pregnant

RSV Vaccine (1 - Risk pregnant 1-dose series)  Never done [Risk](#)

- 78 years old – vaccine completed

RSV Vaccine Completed Standard 75+  9/18/2023

Staff Action: Medical Assistants

- Medical Assistants remind patients when they are due for an RSV vaccine based on Health Maintenance prompts and the recommendation:
 - Pregnant patients have a standing order and can receive the vaccine in clinic
 - Patients 60+ are recommended to get the vaccine at an outpatient pharmacy.
- **Current ordering**: manually putting in the vaccine order for the outstanding item.
- **FUTURE ACTION**: Training for MA Leads on how to use the “CARE GAPS” Smartset feature so that the EHR automatically prompts on the due topic and presents the relevant ordering.

Implementation: 60+ and 75+

- Our Health system includes UW Pharmacy; the consensus was to not carry the RSV vaccine because of variable insurance coverage for the vaccine
- Medicare Part D patients need to go an outpatient pharmacy to have the vaccine covered.
- The coverage for private insurance is spotty at best.

Implementation: Pregnant Patients

- Adult OB patient's get the RSV vaccine for their first pregnancy to help the baby acquire passive immunity if they are in season. It is an encoded process for the OB provider and nurse to discuss this with patients.
- Season: October to March

Barriers and Workarounds

- Variable coverage and process: Clinical Staff (Providers, RN, LPNs and MAs) may not always recommend or order the RSV vaccine due to the different workflow.
- It cannot be administered in clinic or patients will have out-of-pocket costs up to \$300.
- **Workaround**: A BPA will fire for Medicare patients when the RSV order is placed in clinic.

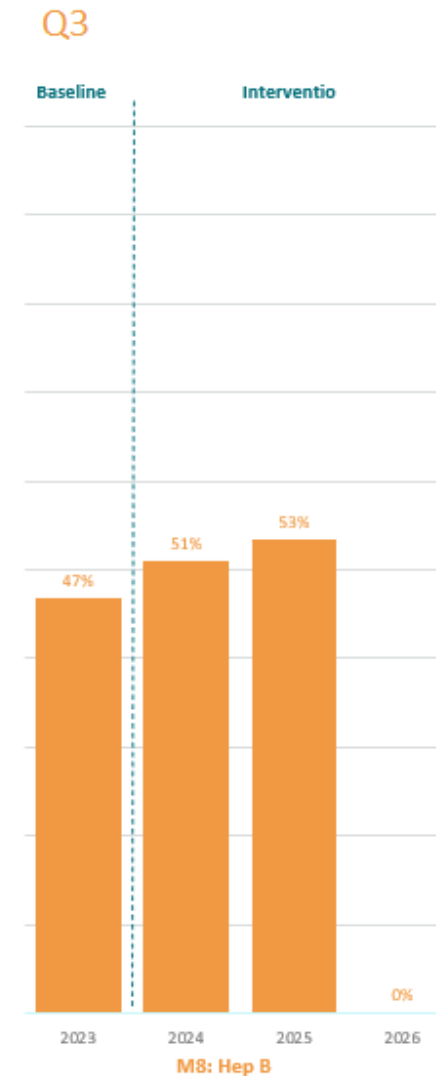
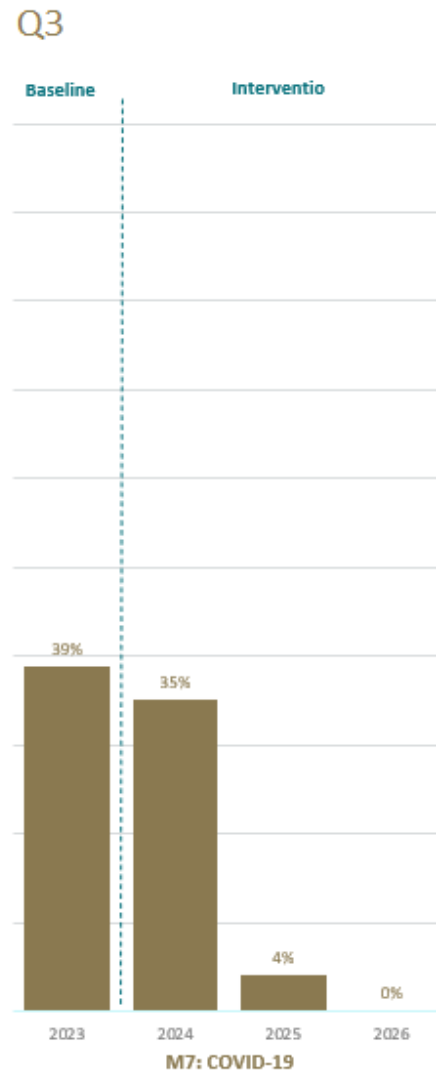
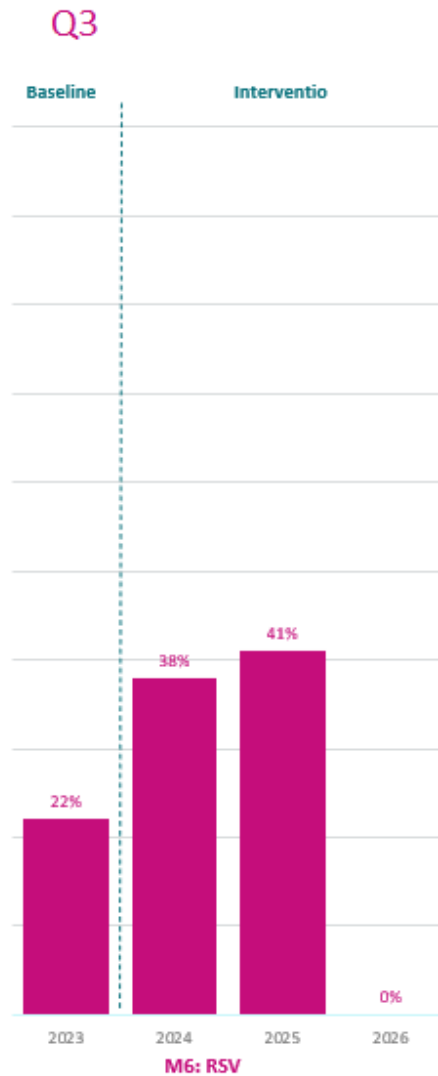
The screenshot shows a 'BestPractice Advisories (1)' window. The main text states: 'For this patient, RSV vaccine is not covered by Medicare when administered in clinic. Arexvy administered at a retail pharmacy is the appropriate RSV vaccine formulation for this patient and will be covered by Medicare Part D.' Below this, it instructs: 'Remove the current order, select the Arexvy Rx to Pharmacy order below and instruct patient to obtain vaccine from the retail pharmacy this order is sent to.'

Under the heading 'Remove the following orders?', there is a table with two columns: 'Remove' and 'Keep'. The 'Remove' button is highlighted in red. The 'Keep' button is greyed out. The text to the right of the buttons reads: 'respiratory syncytial virus vaccine (Arexvy) injection 120 mcg 120 mcg, Intramuscular, Once, today at 1618, For 1 dose Refrigerate. Each dose requires 2 vials. Must reconstitute antigen powder vial with adjuvant suspension vial. Barcode scan antigen powder vial.'

Under the heading 'Apply the following?', there is a table with two columns: 'Order' and 'Do Not Order'. The 'Order' button is highlighted in red. The 'Do Not Order' button is greyed out. The text to the right of the buttons reads: 'respiratory syncytial virus vaccine (Arexvy) injection (Rx to pharmacy)'.

At the bottom right of the window are two buttons: 'Accept' (with a green checkmark icon) and 'Dismiss'.

Outcomes – Additional Vaccines by Year





Happy holidays!

Join us **January 15, 2026,**
2-3pm ET for the next
RIZE campaign webinar!

Questions?



Submit your
questions using the
Q&A feature at the
bottom of the screen