# Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (ABB)

### **Description of Measure**

The percentage of episodes for members ages 3 months and older with a diagnosis of acute bronchitis/ bronchiolitis that did not result in an antibiotic dispensing event

#### **Numerator Compliance**

This measure is the percentage of episodes (each time a patient is seen for an evaluation in the office/facility) for members three months old and older with a diagnosis of acute bronchitis/bronchiolitis that did not result in the member receiving an antibiotic prescription the day of the visit plus three days after the visit

#### **AAB Antibiotic Medications**

Description	Prescription	
Aminoglycosides	<ul><li>Amikacin</li><li>Gentamicin</li></ul>	<ul><li>Streptomycin</li><li>Tobramycin</li></ul>
Aminopenicillins	<ul><li>Amoxicillin</li></ul>	<ul><li>Ampicillin</li></ul>
Beta-lactamase inhibitors	<ul><li>Amoxicillin-clavulanate</li><li>Ampicillin-sulbactam</li></ul>	Piperacillin-tazobactam
First-generation cephalosporins	<ul><li>Cefadroxil</li><li>Cefazolin</li></ul>	<ul><li>Cephalexin</li></ul>
Fourth-generation cephalosporins	<ul><li>Cefepime</li></ul>	
Lincomycin derivatives	<ul><li>Clindamycin</li></ul>	<ul><li>Lincomycin</li></ul>
Macrolides	<ul><li>Azithromycin</li><li>Clarithromycin</li></ul>	<ul><li>Erythromycin</li></ul>
Miscellaneous antibiotics	<ul><li>Aztreonam</li><li>Chloramphenicol</li><li>Dalfopristin-quinupristin</li><li>Daptomycin</li></ul>	<ul><li>Linezolid</li><li>Metronidazole</li><li>Vancomycin</li></ul>
Natural penicillins	<ul><li>Penicillin G benzathine-procaine</li><li>Penicillin G potassium</li><li>Penicillin G procaine</li></ul>	<ul><li>Penicillin G sodium</li><li>Penicillin V potassium</li><li>Penicillin G benzathine</li></ul>
Penicillinase resistant penicillins	<ul><li>Dicloxacillin</li><li>Nafcillin</li></ul>	<ul><li>Oxacillin</li></ul>



Description	Prescription	
Quinolones	<ul><li>Ciprofloxacin</li></ul>	<ul><li>Moxifloxacin</li></ul>
	<ul><li>Gemifloxacin</li></ul>	<ul><li>Ofloxacin</li></ul>
	<ul><li>Levofloxacin</li></ul>	
Rifamycin derivatives	<ul><li>Rifampin</li></ul>	
Second-generation cephalosporin	<ul><li>Cefaclor</li></ul>	<ul><li>Cefprozil</li></ul>
	<ul><li>Cefotetan</li></ul>	<ul><li>Cefuroxime</li></ul>
	<ul><li>Cefoxitin</li></ul>	
Sulfonamides	<ul><li>Sulfadiazine</li></ul>	<ul><li>Sulfamethoxazole-trimethoprim</li></ul>
Tetracyclines	<ul><li>Doxycycline</li></ul>	<ul><li>Tetracycline</li></ul>
	<ul><li>Minocycline</li></ul>	
Third-generation cephalosporins	<ul><li>Cefdinir</li></ul>	<ul> <li>Cefpodoxime Ceftazidime</li> </ul>
	<ul><li>Cefixime</li></ul>	<ul><li>Ceftriaxone</li></ul>
	<ul><li>Cefotaxime</li></ul>	
Urinary anti-infectives	<ul><li>Fosfomycin</li></ul>	<ul><li>Trimethoprim</li></ul>
	<ul><li>Nitrofurantoin</li></ul>	
	<ul> <li>Nitrofurantoin macrocrystals-</li> </ul>	
	monohydrate	

Codes	Descriptions
ICD10: J00, J06.0, J06.9	URI
ICD10: J02.0, J02.8, J02.9, J03.00, J03.01, J03.80, J03.81, J03.90, J03.91	Pharyngitis
<b>CPT</b> : 98000 – 98016, 98966 – 98968, 98970 – 98972, 98980, 98981, 99202 – 99205, 99211 – 99215, 99242 – 99245, 99281 – 99285, 99341, 99342, 99344, 99345, 99347 – 99350, 99381 – 99387, 99391 – 99397, 99401 – 99404, 99411, 99412, 99421 – 99423, 99429, 99441- 99458, 99483	Outpatient Visit or Telehealth
<b>HCPCS</b> : G0071, G0402, G0438, G0439, G0463, G2010, G2012, G2250 - G2252, T1015	

Recognize that antibiotics are needed for some patients with comorbid conditions and differential (competing) diagnosis.

When these ICD-10 codes are submitted on the same claim as acute bronchitis and antibiotics are prescribed, adding these diagnosis codes will remove the patient from the HEDIS measure.

When this occurs, your HEDIS results will not be negatively impacted.



Acute pharyngitis	
<ul> <li>Acute or chronic tonsillitis</li> </ul>	
<ul><li>Pneumonia</li></ul>	
<ul><li>Hypertrophy of tonsils</li></ul>	
<ul> <li>Acute or chronic suppurative otitis media</li> </ul>	
Acute or chronic sinusitis	Common differential
Disease upper respiratory tract	(competing) diagnoses
• UTI	
Skin Infections, cellulitis, impetigo	
<ul> <li>Acute lymphangitis</li> </ul>	
Acute vaginitis	
STI/STD	
<ul><li>COPD</li></ul>	
<ul><li>Emphysema</li></ul>	
Malignant neoplasms including skin	
• HIV	Comorbid Conditions
<ul> <li>Disorders of the immune system</li> </ul>	
Sickle cell disease	
<ul> <li>Cystic fibrosis</li> </ul>	

#### **Exclusions**

Exclusions	Time limit	
<ul> <li>Members who use hospice services) or elect to use a hospice benefit</li> </ul>	Any time during measurement year (MY)	
<ul> <li>Members who have died</li> </ul>		
<ul><li>Visits that result in an inpatient stay</li></ul>	you (iii )	

#### **Exclusion Codes**

Exclusions	Time limit	
<b>CPT</b> : 99377, 99378	Hospice Care	
<b>HCPCS</b> : G0182, G9473 - G9479, Q5003 - Q5008, Q5010, S9126, T2042 - T2046		

## **Strategies for Success**

- If a member tests negative for group A strep but insists on an antibiotic:
  - Refer to the illness as a sore throat due to a cold; members tend to associate the label with a less frequent need for antibiotics.
  - Write a prescription for symptom relief, like over-the-counter medications
- Educate members on the difference between bacterial vs viral infections.
- Avoid treating viral syndromes with antibiotics, even if they are requested
- Discuss with members ways to treat symptoms



#### **Resources**

I. National Committee for Quality Assurance, HEDIS® Measurement Year 2025 Volume 2 Technical Specifications for Health Plans

