2_{HEDIS} Measure Tips



One in a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures, commonly referred to as HEDIS[®] measures.

Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (AAB)

Effectiveness of Care HEDIS® Measure*

HEDIS measure description

The percentage of episodes for members with a diagnosis of acute bronchitis/ bronchiolitis that did **not** result in an antibiotic dispensing event.

Measure population (denominator)

Members age 3 months and older with a diagnosis of acute bronchitis/bronchiolitis from July 1 of the year prior to June 30 of the measurement year. Here are the appropriate ICD-10 codes: bronchitis (J20.3-J20.9) and/or bronchiolitis (J21.0, J21.1, J21.8, J21.9).

Note: A member may have more than one episode during the measurement year.

Measure compliance (numerator)

Members dispensed a prescription for an antibiotic medication on or within three days after the acute bronchitis/bronchiolitis diagnosis.

Note: The measure is reported as an inverted rate. A higher rate indicates appropriate acute bronchitis/bronchiolitis treatment (i.e., the proportion of episodes that **did not** result in an antibiotic dispensing event).

Exclusions

- Members in hospice or using hospice services anytime during the measurement year
- Members deceased during measurement year
- Competing diagnosis on or 3 days after (see tables below)
- Comorbid condition during the 12 months prior (see tables below)

This measure applies to both commercial and Medicare members.

Helpful HEDIS hints

What if my patient wants antibiotics?

- Recommend symptomatic treatments instead of antibiotics.
- Discuss risks of unnecessary antibiotics.
- Ask patients to follow up with you if their symptoms worsen.
- Visit cdc.gov/antibiotic-use/print-materials.html for materials you can share with patients.
- Prescribing antibiotics for acute bronchitis is not consistent with evidence-based medicine unless there is either:
 - Evidence of a co-existing bacterial infection, called a "competing diagnosis."
 - A patient with a comorbid condition that compromises the lungs or immune status.

Tips for coding

- Proper coding is key. HEDIS[®] measurement data is captured through claims and therefore relies on proper coding.
- If prescribing antibiotics to treat a bacterial infection or comorbid condition in a patient with acute bronchitis or bronchiolitis, be sure to include the diagnosis code for the bacterial infection or comorbidity.

Common Competing Diagnoses (must be on or within three days after episode date)

Description	ICD-10-CM diagnosis code
Pharyngitis/Tonsillitis	J02.0, J02.8, J02.9, J03.00, J03.01, J03.80, J03.81, J03.90, J03.91, J35.01, J35.03
Otitis Media	H66.001 – H66.007, H66.009 H66.011 – H66.017, H66.019, H66.10 – H66.13, H66.20 – H66.23, H66.3X1 – H66.3X3, H66.3X9, H66.40 – H66.43, H66.90 – H66.93, H67.1 – H67.3, H67.9
Pneumonia	J13, J14, J15.0, J15.1, J15.20, J15.211, J15.212, J15.29, J15.3, J15.4, J15.5, J15.6, J15.7, J15.8, J15.9, J16.0, J16.8, J17, J18.0, J18.1, J18.8, J18.9
Acute Sinusitis	J01.00, J01.01, J01.10, J01.11, J01.20, J01.21, J01.30, J01.31, J01.40, J01.41, J01.80, J01.81, J01.90, J01.91
Chronic Sinusitis	J32.0, J32.1, J32.2, J32.3, J32.4, J32.8, J32.9
Cellulitis	L03.011, L03.012, L03.019, L03.031, L03.032, L03.039, L03.111 – L03.116, L03.119, L03.211, L03.213, L03.221, L03.213, L03.311 – L03.317, L03.319, L03.811, L03.818, L03.90, L98.3, N73.0, N73.1, N73.2
Acute Cystitis/UTI	N30.00, N30.01, N30.10, N30.11, N30.20, N30.21, N30.40, N30.41, N30.80, N30.81, N30.90, N30.91, N39.0, N41.3
Bacterial Infection NOS	A49.9
Gastroenteritis/GI bacterial infection- unspecified	A04.9, A09 Note: Many additional codes related to specific causes of bacterial GI infections are also competing diagnoses.
Impetigo	L01.00, L01.01, L01.02, L01.03, L01.09, L01.1

Common Comorbid diagnoses (must be on or within 12 months prior to episode date)

Description	ICD-10-CM diagnosis code
Chronic Bronchitis	J41.0, J41.1, J41.8, J42
COPD/Emphysema	J44.0, J44.1, J44.9, J43.0, J43.1, J43.2, J43.8, J43.9
Cystic Fibrosis	E84.0, E84.11, E84.19, E84.8, E84.9
Bronchiectasis	J47.0, J47.1, J47.9
HIV/HIV Type 2	B20, Z21, B97.35
Malignant Neoplasm	Many ICD-10 codes beginning with C are considered comorbid
Sickle Cell Disease	D57.01, D57.211, D57.411, D57.811
Pulmonary Fibrosis	J84.10, J84.112
Interstitial Lung Disease	J84.848, J84.89, J84.9

Note: The tables above do not represent an exhaustive list; they provide examples of common comorbid and competing diagnoses.

Resources

1. Centers for Disease Control and Prevention. 2021. "About Antibiotic Use." www.cdc.gov/antibiotic-use/community/about/index.html

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