

Special Bulletin

For professional and facility providers

August 21, 2023

HEDIS Measure: Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis

Overprescribing antibiotics is a major health concern in the United States. Antibiotic resistance has become one of the greatest health threats today. Antibiotic-resistant infections can be more difficult to treat and pose a threat to patient safety, which can lead to life-threatening illness as well as potential death.¹

Healthcare Effectiveness Data and Information Set (HEDIS®) Measure

Complying with the HEDIS quality measure **Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (AAB)** occurs when patients three months and older — with a diagnosis of acute bronchitis (J20X) or bronchiolitis (J21X) — are **not** dispensed an antibiotic on the day of visit or within three days after. Noncompliance occurs when antibiotics are prescribed unnecessarily.

Exclusions

There are some competing and co-morbid diagnoses that will **exclude** the member from the AAB measure, including: acute pharyngitis, tonsillitis, suppurative otitis media, sinusitis, pneumonia, disease upper respiratory tract, acute lymphangitis, urinary tract infection (UTI), cancer, chronic obstructive pulmonary disease (COPD), HIV, respiratory failure, tuberculosis (TB), among others.

After examination, if a patient medically requires an antibiotic prescription due to a competing or co-morbid diagnosis, document the additional ICD-10 code on the claim.

Below are strategies to consider that might help improve physician performance related to the AAB HEDIS measure:

- Avoid prescribing antibiotics for certain illnesses such as acute bronchitis, without pneumonia, when there is no comorbidity of COPD, pulmonary fibrosis, or other chronic lung disease.
- Inform patients of the potential side effects and adverse events related to antibiotic use, even when such antibiotics are necessary and appropriate.

Antibiotic prescribing is a complex issue, but simple changes can potentially create a significant impact. For additional education on antibiotic stewardship, click [here](#) for free courses and webinars from the Centers for Disease Control and Prevention (CDC).

References

¹Sanchez GV, Fleming-Dutra KE, Roberts RM, Hicks LA. Core Elements of Outpatient Antibiotic Stewardship. MMWR Recomm Rep 2016;65(No. RR-6):1–12. DOI: <http://dx.doi.org/10.15585/mmwr.rr6506a1>

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