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Improving Appropriate Use of Antibiotics

Appropriate Treatment for Upper Respiratory Infection (URI)

Measure requirements:

- Percentage of members 3 months of age and older who were given a diagnosis of upper respiratory infection and were not dispensed an antibiotic prescription.
- Higher rate indicates appropriate treatment (i.e. the proportion for whom antibiotics were NOT prescribed).

Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis/Bronchiolitis (AAB)

Measure requirements:

- Members 3 months of age and older with a diagnosis of acute bronchitis/bronchiolitis who were not dispensed an antibiotic prescription.
- Higher rate indicates appropriate treatment of adults with Acute Bronchitis (i.e. the proportion for whom antibiotics were NOT prescribed).

Appropriate Testing for Pharyngitis (CWP)

Measure requirements:

- Percentage of members 3 years of age and older who were diagnosed with pharyngitis, dispensed an antibiotic and received a group A streptococcus (strep) test for the episode.

Common reasons for Gaps in Care:

- Receiving a script for an antibiotic for a viral infection, without a concurrent diagnosis that would require an antibiotic.
- CWP - Receiving an antibiotic without a strep test/confirmed strep diagnosis and filling the prescription when not necessary.
- Concurrent diagnosis/diagnoses not coded on a claim that require an antibiotic (i.e. sinusitis, otitis media, etc.).



Best Practices

- Educate members and parents regarding symptomatic treatment and when to contact their Primary Care Physician (PCP).
- Educate regarding bacterial versus viral infections. Educate that an antibiotic is not necessary for viral infections, and if rapid strep test and/or culture is negative.
- Educate and recommend symptomatic/conservative treatments such as over-the-counter (OTC) medicine and comfort measures.
- If there are no transportation issues, consider not giving parent/guardian a prescription and instead have them call your office in three days if child is not feeling better.
- Perform a group A strep test on all individuals treated with an antibiotic for pharyngitis.
- Ensure the appropriate use of antibiotics for individuals with acute bronchitis/bronchiolitis will help them avoid harmful side-effects and possible resistance to antibiotics over time.
- Be sure to code for the strep test when submitting the claim.
- Be sure to code for ALL appropriate diagnoses relevant to the visit.
- Code for concurrent bacterial infections/diagnoses.
- Federally Qualified Health Clinics (FQHC)/Rural Health Clinics (RHC) – When billing a T1015 encounter code, it is essential to also list on the claim the actual CPT/HCPCS procedure codes to identify the services included in the encounter.
- Use appropriate testing/symptom documentation to correlate with antibiotic prescription.
- If there is a competing diagnosis requiring antibiotics, be sure documentation and coding accurately reflect diagnosis/diagnoses.

Patients trust you - Patients consider you their most trusted source of information when it comes to their health. When talking to patients, encourage and allow time for questions.

Thank you for the care you provide to our members

For questions or for more information, please contact Quality Management Department at **ABHKS_QM_Operations@aetna.com**.