

HEDIS® Measure Description

Appropriate Treatment for Upper Respiratory Infections (URI)

Members 3 months of age and older with a diagnosis of upper respiratory infection (URI) that did not result in an antibiotic dispensing event. This measure is reported as an inverted rate. A higher rate indicates appropriate URI treatment (i.e., the proportion for episodes that did not result in an antibiotic-dispensing event).

- ▶ Note: This measure is based on episodes, not on members. (A member may have multiple episodes.)
- ▶ If a member has more than one eligible episode in a 31-day period, only the first eligible episode is included.
- ▶ Visits are identified chronologically, including only one per 31-day period.

Coding & Documentation

| URI Codes | |
|-------------|-------------------|
| Description | ICD-10 |
| URI | J00, J06.0, J06.9 |

| Visit Type Codes for URI Diagnosis Visits that result in an inpatient stay will not be included. | | |
|--|--|--------------------------------------|
| Description | CPT® | HCPCS |
| Outpatient Visits | 99205, 99211-99215, 99241-99245, 99341-99345, 99347-99350, 99381-99387, 99391-99397, 99401-99404, 99411, 99412, 99429, 99455, 99456, 99483 | G0402, G0438, G0439, G0463, T1015 |
| ED Visits | 99281-99285 | |
| Telephone Visits | 98966-98968, 99441-99443 | |
| E-visit or Virtual Check-in (Online Assessments) | 98970-98972, 98980, 98981, 99421-99423, 99458 | G2012 |



AAB Antibiotic Medications List

Visits that result in an inpatient stay will **not** be included.

| Description | Prescription | | | |
|--|---|---|---|---------------------------|
| Aminoglycosides | Amikacin | Gentamicin | Streptomycin | Tobramycin |
| Aminopenicillins | Amoxicillin | Ampicillin | | |
| Beta-lactamase inhibitors | Amoxicillin-clavulanate | Ampicillin-subactam | Piperacillin- tazobactam | |
| First generation cephalosporins | Cefadroxil | Cephalexin | Cefazolin | |
| Fourth-generation cephalosporins | Cefepime | | | |
| Lincomycin derivatives | Clindamycin | Lincomycin | | |
| Macrolides | Azithromycin | Clarithromycin | Erythromycin | |
| Miscellaneous antibiotics | Aztreonam Chloramphenicol | Dalfopristin-quinupristin Daptomycin | Linezolid Metronidazole | Vancomycin |
| Natural penicillins | Penicillin G benzathine Penicillin G benzathine-procaine | Penicillin G potassium Penicillin G procaine | Penicillin G sodium | Penicillin V potassium |
| Penicillinase-resistant penicillins | Dicloxacillin | Nafcillin | Oxacillin | |
| Quinolones | Ciprofloxacin Gemifloxacin | Levofloxacin | Moxifloxacin | Ofloxacin |
| Rifamycin derivatives | Rifampin | | | |
| Second generation cephalosporins | Cefaclor Cefoxitin Cefotetan | Cefprozil | Cefuroxime | |
| Sulfonamides | Sulfamethoxazole-trimethoprim | Sulfadiazine | | |
| Tetracyclines | Doxycycline | Minocycline | Tetracycline | |
| Urinary anti-infectives | Fosfomycin | Nitrofurantoin | Nitrofurantoin macrocrystals- monohydrate | Trimethoprim |
| Third-generation cephalosporins | Cefdinir Cefixime | Cefpodoxime | Cefotaxime Ceftazidime | Ceftriaxone |



Exclusion Codes

Exclude any member who had a diagnosis for a comorbid condition or a competing diagnosis.

| Description | Exclusion | | |
|---------------------|--|--|--|
| Pharyngitis | Pharyngitis on or three days after the Episode Date ICD-10: J02.0, J02.8, J02.9, J03.00, J03.01, J03.80, J03.81, J03.90, J03.91 | | |
| Competing Diagnosis | Competing Diagnosis on or three days after the Episode Date use ICD-10 codes | | |
| Malignant Neoplasms | Any Malignant Neoplasm diagnosis listed below use ICD-10 codes • Malignant Neoplasms • Other Malignant Neoplasm of Skin | Malignant Neoplasm or Other Malignant Neoplasm of the Skin during the 12 months prior to or on the Episode Date. | |
| Emphysema | Emphysema during the 12 months prior to or on the Episode Date | | |
| COPD | COPD during the 12 months prior to or on the Episode Date ICD-10: J41.0, J41.1, J41.8, J42, J43.0–J43.2, J43.8–J44.1 J44.9, J41.0, J41.1, J41.8, J42, J43.0–J43.2, J43.8 | | |
| HIV | HIV during the 12 months prior to or on the Episode Date ICD-10: B20, Z21 | | |
| Comorbid Conditions | Comorbid Conditions during the 12 months prior to or on the Episode Date | | |

HEDIS Measure Tips

| Discuss Facts | A majority of upper respiratory infections are caused by viral infections. According to the CDC, an antibiotic will not help the patient get better. Taking antibiotics when not indicated could cause more harm than good. Taking antibiotics will not make you feel better. |
|------------------|---|
| Make it Routine | Obtain a comprehensive medical history. Perform a thorough physical exam. Document all findings in the medical record. Telehealth visits are allowed for this measure. These include telephone visits, e-visits, and virtual-check-ins. Observation and ED visits are also allowed. |
| Give Information | Set the expectations by educating on the recovery time for symptoms and comfort measures. Educate on comfort measures to ease symptoms. For patients insisting on an antibiotic, prescribe medication to relieve symptoms as applies. Encourage follow-up after three days if symptoms persist or get worse. |



| When to Prescribe Antibiotics (Exclusions) | Comorbid Condition History: Emphysema, COPD, Chronic Bronchitis. |
|---|--|
| | Competing Diagnosis that requires an antibiotic: Acute Pharyngitis, Acute Sinusitis, Otitis Media are examples. |
| | Best practice: Do not prescribe/dispense prescription for an antibiotic medication until at least three or more days after the visit of the diagnosis. |
| | Don't prescribe antibiotics when treating URI, unless there are co-morbid conditions or competing diagnoses that require antibiotic therapy. |
| Code and Submit Claims | If prescribing antibiotics, list all competing or comorbid diagnosis codes on the claim when submitted. |
| | Submit a claim with each and every service rendered, inclusive of CPT-II codes in a timely and accurate manner. |
| | Make sure chart documentation reflects all services billed. |