Avoidance of antibiotic treatment for acute bronchitis/bronchiolitis

Category: Other Program: Adult

Measure Requirements

Members who were identified as having a diagnosis of acute bronchitis through claims for outpatient or ED visits between July 1 of the year prior to the measurement year (2022) through June 30 of the measurement year (2023) and who were *not* dispensed an antibiotic.



Member Requirements

Members who were with a practice for 11 consecutive months within the measurement year (2023) and who were 3 months of age and older, who were identified through outpatient and ED visit claims as having a diagnosis of acute bronchitis, who were continuously with a practice for one year prior to the diagnosis date through seven days after the diagnosis date, and who met **all** of the following criteria:

- no active antibiotic prescription or any new antibiotic dispensed within 30 days prior to the diagnosis date
- outpatient visit, telephone visit, online assessment, observation visit, or ED visit that resulted in the diagnosis of acute bronchitis/bronchiolitis
- no other upper respiratory or other infectious disease that required antibiotics within the 30 days prior to the diagnosis date through seven days after the diagnosis date
- none of the following co-morbid conditions in the 12 months prior to the diagnosis date:
 - bronchiectasis
 - chronic bronchitis
 - COPD
 - cystic fibrosis
 - emphysema
 - extrinsic allergic alveolitis
 - HIV disease

- HIV, asymptomatic
- immunity disorders
- malignant neoplasms
- other respiratory system diseases
- pneumoconiosis and other lung disease due to external agent
- tuberculosis



	QPM Targets*	
Band 1	70% – 100%	See
Band 2	63% – 69.99%	payment details in
Band 3	60% – 62.99%	<u>section 5</u> of guide.
Band 4	54% – 59.99%	guide.
Band 5	<54%	

*These targets include the performance of more than one measure. This represents the combined performance for all the measures in this category.

Options to close Care Gaps

• **Option 1:** Claim/encounter submission with appropriate coding and absence of antibiotic dispense on or three days after diagnosis.

AAB Antibiotic Medication Chart

Description	Prescription		
Aminoglycosides	Amikacin Gentamicin	IStreptomycin Tobramycin	
Aminopenicillins	Amoxicillin	Ampicillin	
Beta-lactamase inhibitors	Amoxicillin-clavulanate Ampicillin-sulbactam	Piperacillin-tazobactam	
First-generation cephalosporins	Cefadroxil Cefazolin	Cephalexin	
Fourth-generation cephalosporins	Cefepime		
Ketolides	Telithromycin		
Lincomycin derivatives	Clindamycin	Lincomycin	
Macrolides	Azithromycin Clarithromycin Erythromycin Erythromycin ethylsuccinate	Erythromycin lactobionate Erythromycin stearate	
Miscellaneous antibiotics	Aztreonam Chloramphenicol Dalfopristin-quinupristin Daptomycin	Linezolid Metronidazole Vancomycin	
Natural penicillins	Penicillin G benzathine-procaine Penicillin G potassium Penicillin G procaine	Penicillin G sodium Penicillin V potassium Penicillin G benzathine	
Penicillinase resistant penicillins	Dicloxacillin Nafcillin	Oxacillin	
Quinolones	Ciprofloxacin Gemifloxacin Levofloxacin	Moxifloxacin Ofloxacin	
Rifamycin derivatives	Rifampin		

Description	Prescription	
Second-generation cephalosporin	Cefaclor Cefotetan Cefoxitin	Cefprozil Cefuroxime
Sulfonamides Sulfadiazine		Sulfamethoxazole-trimethoprim
Tetracyclines	Doxycycline Minocycline	Tetracycline
Third-generation cephalosporins	Cefdinir Cefditoren Cefixime	Cefpodoxime Ceftazidime Ceftibuten
	Cefotaxime	Ceftriaxone
Urinary anti-infectives	Fosfomycin Nitrofurantoin Nitrofurantoin macrocrystals Nitrofurantoin macrocrystals-monohydrate Trimethoprim	



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