



2014

Clinical quality corner

One of a series of tip sheets that look at key Healthcare Effectiveness Data and Information Set measures

Avoidance of antibiotic treatment in adults with acute bronchitis

This measure looks at the percentage of adults ages 18 to 64 years old with a diagnosis of uncomplicated acute bronchitis (ICD 9 code: 466.0) who weren't given an antibiotic prescription within three days of the visit date.

Proper coding is key

In order to measure clinical quality performance, it's important for health care providers to use the correct diagnosis and procedure codes on claims. See below for guidance on the correct diagnosis codes to use for certain conditions.

Improving HEDIS scores

Many studies have shown that antibiotics shouldn't be prescribed in cases of acute bronchitis **unless** there's evidence of:

a bacterial infection, such as

- Acute sinusitis (461)
- Pharyngitis (034.0, 462, 463)

or a co-morbid diagnosis, such as

- Chronic bronchitis (491.x)
- Chronic obstructive asthma (493.2x) or emphysema (492)
- Cystic fibrosis (277.0x)
- Immune deficiencies or disorders (279.xx)
- HIV (042, v08)

Tip: If you're using antibiotics to treat a bacterial infection or co-morbid condition in a patient with acute bronchitis, **be sure to include the diagnosis code** for the bacterial infection or co-morbidity.

Did you know?

More than 90 percent of acute bronchitis cases are viral.

Antibiotics are dispensed in 60 to 90 percent of cases — and broad spectrum antibiotic use has increased over the past 10 years.

Each year, approximately 2 million Americans contract infections with drug-resistant bacteria.

But what if my patient wants antibiotics?

Recommend treatments for their symptoms instead of antibiotics.

Advise them of the risks of using antibiotics for a viral illness.

Ask them to follow up with you if their symptoms worsen.

Visit cdc.gov/getsmart to download materials you can share with your patients.