Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (ABB)

Description of Measure

The percentage of episodes for members ages 3 months and older with a diagnosis of acute bronchitis/ bronchiolitis that did not result in an antibiotic dispensing event

Numerator Compliance

This measure is the percentage of episodes (each time a patient is seen for an evaluation in the office/facility) for members three months old and older with a diagnosis of acute bronchitis/bronchiolitis that did not result in the member receiving an antibiotic prescription the day of the visit plus three days after the visit

Recognize that antibiotics are needed for some patients with comorbid conditions and differential (competing) diagnosis.

When these ICD-10 codes are submitted on the same claim as acute bronchitis and antibiotics are prescribed, adding these diagnosis codes will remove the patient from the HEDIS measure.

When this occurs, your HEDIS results will not be negatively impacted.

AAB Antibiotic Medications

Description	Prescription	
Aminoglycosides	▪ Amikacin ▪ Gentamicin	▪ Streptomycin ▪ Tobramycin
Aminopenicillins	▪ Amoxicillin	▪ Ampicillin
Beta-lactamase inhibitors	▪ Amoxicillin-clavulanate ▪ Ampicillin-sulbactam	▪ Piperacillin-tazobactam
First-generation cephalosporins	▪ Cefadroxil ▪ Cefazolin	▪ Cephalexin
Fourth-generation cephalosporins	▪ Cefepime	
Lincomycin derivatives	▪ Clindamycin	▪ Lincomycin
Macrolides	▪ Azithromycin ▪ Clarithromycin	▪ Erythromycin
Miscellaneous antibiotics	▪ Aztreonam ▪ Chloramphenicol ▪ Dalfopristin-quinupristin ▪ Daptomycin	▪ Linezolid ▪ Metronidazole ▪ Vancomycin

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

Codes	Descriptions
ICD10: J00, J06.0, J06.9	URI
ICD10: J02.0, J02.8, J02.9, J03.00, J03.01, J03.80, J03.81, J03.90, J03.91	Pharyngitis
CPT: 98000 – 98016, 98966 – 98968, 98970 – 98972, 98980, 98981, 99202 – 99205, 99211 – 99215, 99242 – 99245, 99281 – 99285, 99341, 99342, 99344, 99345, 99347 – 99350, 99381 – 99387, 99391 – 99397, 99401 – 99404, 99411, 99412, 99421 – 99423, 99429, 99441- 99458, 99483 **HCPCS:** G0071, G0402, G0438, G0439, G0463, G2010, G2012, G2250 - G2252, T1015	Outpatient Visit or Telehealth
▪ Acute pharyngitis ▪ Acute or chronic tonsillitis ▪ Pneumonia ▪ Hypertrophy of tonsils ▪ Acute or chronic suppurative otitis media ▪ Acute or chronic sinusitis ▪ Disease upper respiratory tract ▪ UTI ▪ Skin Infections, cellulitis, impetigo ▪ Acute lymphangitis ▪ Acute vaginitis ▪ STI/STD	Common differential (competing) diagnoses

▪ COPD ▪ Emphysema ▪ Malignant neoplasms including skin ▪ HIV ▪ Disorders of the immune system ▪ Sickle cell disease ▪ Cystic fibrosis	Comorbid Conditions

Exclusions

Exclusions	Time limit
▪ Members who use hospice services) or elect to use a hospice benefit ▪ Members who have died ▪ Visits that result in an inpatient stay	Any time during measurement year (MY)

Exclusion Codes

Exclusions	Time limit
CPT: 99377, 99378 **HCPCS:** G0182, G9473 - G9479, Q5003 - Q5008, Q5010, S9126, T2042 - T2046	Hospice Care

Strategies for Success

- If a member tests negative for group A strep but insists on an antibiotic:
  - Refer to the illness as a sore throat due to a cold; members tend to associate the label with a less frequent need for antibiotics.
  - Write a prescription for symptom relief, like over-the-counter medications
- Educate members on the difference between bacterial vs viral infections.
- Avoid treating viral syndromes with antibiotics, even if they are requested
- Discuss with members ways to treat symptoms

Resources

I. National Committee for Quality Assurance, HEDIS® Measurement Year 2026 Volume 2 Technical Specifications for Health Plans