

### Measure Description

Members ages 3 months and older diagnosed with acute bronchitis/bronchiolitis should not be dispensed an antibiotic within 3 days of the visit.

Note: Prescribing antibiotics for acute bronchitis is not indicated unless there is a comorbid diagnosis or a bacterial infection (see examples listed on the right).

Only about 10% of cases for acute bronchitis are due to a bacterial infection, so in most cases antibiotics will not help.

### Using Correct Billing Codes

#### Codes to Identify Acute Bronchitis

Description	ICD-10 Code*
Acute Bronchitis	J20.0-J20.9, J40

#### Codes to Identify Comorbid Conditions

Description	ICD-10 Code*
Chronic Bronchitis	J41.0, J41.1, J41.8, J42
Emphysema	J43.0 – J43.2, J43.8, J43.9, J98.2, J98.3
COPD	J44.0, J44.1, J44.9

#### Codes to Identify Competing Diagnoses

Description	ICD-10 Code*
Acute Sinusitis	J01.00, J01.01, J01.10, J01.11, J01.20, J01.21, J01.30, J01.31, J01.40, J01.41, J01.80, J01.81, J01.90, J01.91
Otitis Media	H66, H67
Pharyngitis	J02.0, J02.8, J02.9
Streptococcal Tonsillitis	J03.00, J03.01, J03.80
Acute Tonsillitis	J03.81, J03.90, J03.91

### How to Improve HEDIS® Scores

- Educate patients on comfort measures without antibiotics (e.g., extra fluids and rest).
- Discuss realistic expectations for recovery time (e.g., cough can last for 4 weeks without being “abnormal”).
- For patients insisting on an antibiotic:
  - Give a brief explanation
  - Educate regarding symptom relief instead of an antibiotic.
  - Encourage follow-up in 3 days if symptoms do not get better.
- Submit comorbid diagnosis codes if present on claim/encounter (see codes above).
- Submit competing diagnosis codes for bacterial infection if present on claim/encounter (see codes above).