

Appropriate Treatment for Upper Respiratory Infection (URI)

APPLICABLE LINES OF BUSINESS

- Commercial
- Medicare Advantage

MEASURE DESCRIPTION

Percentage of episodes for patients three months of age and older with a diagnosis of upper respiratory infection (URI) and were not dispensed an antibiotic prescription.

Prescriptions include:

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

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

EXCLUSIONS

Patients are excluded if they:

- Use hospice services or elect to use a hospice benefit any time during the measurement year.
- Had a visit that resulted in an inpatient stay.
- Had a claim/encounter with any diagnosis for a comorbid condition during the 12 months prior to or on the episode date.
- Received a new or refill prescription for an antibiotic medication that was dispensed 30 days prior to the episode date or was active on the episode date.
- Had a claim/encounter with a competing diagnosis or pharyngitis on or three days after the episode date.
- Receive hospice services or elect to use a hospice benefit any time during the measurement year.
- Died during the measurement year.

CODING

Type	Code	Description	
ICD-10 ⁱⁱ	J00	Acute nasopharyngitis [common cold]	
	J06.0	Acute laryngopharyngitis	
	J06.9	Acute upper respiratory infection, unspecified	
	J02.0	Streptococcal pharyngitis	
	J02.8	Acute pharyngitis due to other specified organisms	
	J02.9	Acute pharyngitis, unspecified	
	J03.00	Acute streptococcal tonsillitis, unspecified	
	J03.01	Acute recurrent streptococcal tonsillitis	
	J03.80	Acute tonsillitis due to other specified organisms	
	J03.81	Acute recurrent tonsillitis due to other specified organisms	
	J03.90	Acute tonsillitis, unspecified	
	J03.91	Acute recurrent tonsillitis, unspecified	

TIPS FOR SUCCESS

Patient Care

- Educate your patients and caregivers that most URIs, also known as the common cold, are caused by viruses that require no antibiotic treatment.
- Suggest at-home treatments, such as:
 - o Using over-the-counter cough medicine and anti-inflammatory medicine.
 - Drinking extra fluids and resting.
 - Using a nasal irrigation device or steamy hot shower for nasal and sinus congestion relief.
- If the patient or caregiver insists on an antibiotic:
 - Review the absence of bacterial infection symptoms with the patient and caregiver and educate that antibiotics will not help with viral infections.
 - o Discuss the side effects of taking antibiotics.
 - Arrange for an early follow-up visit, either by phone or re-examination.

Documentation and Coding

- Partner with your health plan payers to submit electronic data from your EMR.
- Document medical and surgical history in the medical record with dates in structured fields so
 your EMR can include these in reporting. This will allow the corresponding code to be included in
 electronic reporting, including claims, to health plans.
- Code for exclusions.

i National Committee for Quality Assurance. HEDIS® Measurement Year 2024 Volume 2 Technical Specifications for Health Plans (2024), 313-317.

ii ICD-10 created by the National Center for Health Statistics (NCHS), under authorization by the World Health Organization (WHO). WHO-copyright holder.