


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

New for 2024

Added

- Supplemental data now accepted for required exclusions only



Yes!
Supplemental Data Accepted for required exclusions only.

Definition

Percentage of episodes for members ages 3 months and older with a diagnosis of acute bronchitis/bronchiolitis between July 1 of the year prior to the measurement year through June 30 of the measurement year who were **not** dispensed an antibiotic medication on or 3 days after the episode. A higher rate indicates appropriate treatment (not prescribed an antibiotic).

Plan(s) Affected	Quality Program(s) Affected	Collection and Reporting Method
<ul style="list-style-type: none"> • Commercial • Exchange/Marketplace • Medicaid • Medicare 	<ul style="list-style-type: none"> • CMS Quality Rating System • NCQA Accreditation • NCQA Health Plan Ratings 	<p>Administrative</p> <ul style="list-style-type: none"> • Claim/Encounter Data • Pharmacy Data

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Medications

To comply with this measure, the following antibiotics should **not** be dispensed upon diagnosis of acute bronchitis:

Drug Category	Medications
Aminoglycosides	<ul style="list-style-type: none"> Amikacin Gentamicin Streptomycin Tobramycin
Aminopenicillins	<ul style="list-style-type: none"> Amoxicillin Ampicillin
Beta-lactamase inhibitors	<ul style="list-style-type: none"> Amoxicillin-clavulanate Ampicillin-sulbactam Piperacillin-tazobactam
First-generation cephalosporins	<ul style="list-style-type: none"> Cefadroxil Cefazolin Cephalexin
Fourth-generation cephalosporins	<ul style="list-style-type: none"> Cefepime
Lincomycin derivatives	<ul style="list-style-type: none"> Clindamycin Lincomycin
Macrolides	<ul style="list-style-type: none"> Azithromycin Clarithromycin Erythromycin
Miscellaneous antibiotics	<ul style="list-style-type: none"> Aztreonam Chloramphenicol Dalfopristin-quinupristin Daptomycin Linezolid Metronidazole Vancomycin
Natural penicillins	<ul style="list-style-type: none"> Penicillin G benzathine-procaine Penicillin G potassium Penicillin G procaine Penicillin G sodium Penicillin V potassium Penicillin G benzathine
Penicillinase resistant penicillins	<ul style="list-style-type: none"> Dicloxacillin Nafcillin Oxacillin
Quinolones	<ul style="list-style-type: none"> Ciprofloxacin Gemifloxacin Levofloxacin Moxifloxacin Ofloxacin
Rifamycin derivatives	<ul style="list-style-type: none"> Rifampin

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Medications (continued)

To comply with this measure, the following antibiotics should not be dispensed upon diagnosis of acute bronchitis:

Drug Category	Medications
Second-generation cephalosporin	<ul style="list-style-type: none"> Cefaclor Cefotetan Cefoxitin Cefprozil Cefuroxime
Sulfonamides	<ul style="list-style-type: none"> Sulfadiazine Sulfamethoxazole-trimethoprim
Tetracyclines	<ul style="list-style-type: none"> Doxycycline Minocycline Tetracycline
Third-generation cephalosporins	<ul style="list-style-type: none"> Cefdinir Cefixime Cefotaxime Cefpodoxime Ceftazidime Ceftriaxone
Urinary anti-infectives	<ul style="list-style-type: none"> Fosfomycin Nitrofurantoin Nitrofurantoin macrocrystals-monohydrate Trimethoprim

Required Exclusion(s)

Exclusion	Timeframe
<ul style="list-style-type: none"> Members in hospice or using hospice services Members who died 	Any time during the measurement year

Tips and Best Practices to Help Close This Care Opportunity

- Please check your Patient Care Opportunity Report (PCOR) or Practice Assist often to see members with open care opportunities. If you have questions, your UnitedHealthcare representative can help.
- An episode for bronchitis/bronchiolitis will **not** count toward the measure denominator if the member was diagnosed with one of these conditions within 12 months of the event:
 - Chronic obstructive pulmonary disease (COPD)
 - Disorders of the immune system
 - Emphysema
 - HIV
 - Malignant neoplasms
 - Other malignant neoplasms of the skin
- An episode for bronchitis/bronchiolitis will **not** count toward the measure denominator if the member was diagnosed with either pharyngitis or a competing diagnosis On or 3 days after the episode date
- Sharing member demographic data is critical to understanding the cultural, linguistic and social needs of those we serve and decreasing health inequities across the care continuum. This data can include, but is not limited to, race, ethnicity, language, sexual orientation, gender identity, pronouns, sex assigned at birth and disability status.
 - As part of UnitedHealthcare's clinical you to include this demographic data with any structured data file or CCD. Your information is confidential. UnitedHealthcare will keep personally identifiable information confidential and consent.
- Supplemental data may be used for required exclusions.