

HEDIS® Tips:

Appropriate Treatment for Children with URI (URI)

MEASURE DESCRIPTION

Children 3 months to 18 years of age diagnosed with Upper Respiratory Infection (URI) **should not** be dispensed an antibiotic within 3 days of the diagnosis.

Note: Claims/encounters with more than one diagnosis (e.g., competing diagnoses) are excluded from the measure.

USING CORRECT BILLING CODES

Codes to Identify URI

Description	ICD-10 Codes
Acute nasopharyngitis (common cold)	J00
Acute laryngopharyngitis	J06.0
Acute URI	J06.9

Codes to Identify Common Competing Diagnoses

Description	ICD-10 Codes
Otitis media	H66, H67
Acute sinusitis	J01.80, J01.90
Pharyngitis, streptococcal tonsillitis, or acute tonsillitis	J02.0, J02.8, J02.9, J03.00, J03.01, J03.80, J03.81, J03.90, J03.91
Chronic sinusitis	J32.8, J32.9
Pneumonia	J13-J18, J20
Whooping Cough	A37.00, A37.01, A37.10, A37.11, A37.80, A37.81, A37.90, A37.91

HOW TO IMPROVE HEDIS SCORES

- ☐ Do not prescribe an antibiotic for a URI diagnosis only.
- ☐ Submit any co-morbid/competing diagnosis codes that apply (examples listed in the “Codes to Identify Competing Diagnoses” table above).
- ☐ Code and bill for all diagnoses based on patient assessment.
- ☐ Educate patient on comfort measures (e.g., acetaminophen for fever, rest, extra fluids) and advise patient to call back if symptoms worsen (antibiotic can be prescribed if necessary after 3 days of initial diagnosis).
- ☐ Visit <http://www.cdc.gov/getsmart/index.html> to view patient educational materials on antibiotic resistance and common infections.