

# 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.<sup>i</sup>

Prescriptions include:

Description/ Drug Class	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	
Ketolides	Telithromycin	
Lincomycin derivatives	Clindamycin	Lincomycin
Macrolides	Azithromycin Clarithromycin Erythromycin	Erythromycin ethylsuccinate Erythromycin lactobionate Erythromycin stearate
Miscellaneous antibiotics	Aztreonam Chloramphenicol Dalfopristin-quinupristin Daptomycin	Linezolid Metronidazole Vancomycin
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 Cefditoren Cefixime Cefpodoxime	Cefotaxime Ceftazidime Ceftibuten Ceftriaxone
Urinary anti-infectives	Fosfomycin Nitrofurantoin Nitrofurantoin-macrocrystals	Nitrofurantoin-macrocrystals-monohydrate 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 <sup>ii</sup>	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:
  - 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.
  - 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.

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

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