

Pharyngitis Treatment for Children

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MEASURE DESCRIPTION:

Pharyngitis Treatment for Children indicates whether a child, aged 2 to 18 years, who was seen with a diagnosis of pharyngitis and had an antibiotic prescribed, received a group A streptococcus test within 3 days of their pharyngitis visit. This excludes children who had an antibiotic prescription within the previous 30 days.

This measure is based on the HEDIS measure *Appropriate Testing for Children with Pharyngitis* (CWP).

PROPRIETARY STATUS:

This measure is owned by NCQA [NQF-Endorsed TM].

CRITERIA REVISION:

This measure is based on the HEDIS® 2013 Technical Specifications for Physician Measurement criteria. The NDC drug codes are from the NCQA files released November 2012.

REVIEW DATE: 03/29/2013

MEASURE TYPE:

MEASURE PACKAGE: Advantage Nationally Endorsed

MINIMUM DATA REQUIREMENTS (months): 21

MEASURE DETAILS:

DENOMINATOR:

Identifies the unique count of children who had an outpatient or emergency room visit with a single diagnosis of pharyngitis, aged 2 to 18 years during the intake period. The intake period starts 6 months before the beginning of the measurement year and ends 6 months before the end of the measurement year. If multiple pharyngitis visits meet the denominator criteria, the first one is used. This excludes children who had an antibiotic prescription within the previous 30 days.

At least one outpatient visit with a pharyngitis diagnosis only (from 6 months prior to the beginning of the measurement year to 6 months prior to the end of the measurement year)	ICD-9 Diagnosis Code Principal = 034.0, 462, 463 And (CPT Procedure Code = 99201-99205, 99211-99215, 99217-99220, 99241-99245, 99382-99385, 99392-99395, 99401-99404, 99411, 99412, 99420, 99429 Or Revenue Code UB = 051*, 0520-0523, 0526-0529, 0982, 0983)
OR	
At least one emergency room visit with a pharyngitis diagnosis only, not resulting in a hospital admission (from 6 months prior to the beginning of the measurement year to 6 months prior to the end of the	ICD-9 Diagnosis Code Principal = 034.0, 462, 463 And

measurement year)	Place of Service Code Medstat <> 21, 25, 51, 55 And (CPT Procedure Code = 99281-99285 Or Revenue Code UB = 045*, 0981) And Room and Board Flag Code <> 1
AND	
An antibiotic medication prescribed on or up to 3 days following the pharyngitis visit	NDC Codes as defined by NCQA (www.ncqa.org)

EXCLUSIONS:

Excludes from the eligible population those who had an antibiotic prescription within the previous 30 days.

No antibiotic medication prescribed or refilled within 30 days prior to the pharyngitis visit or still active on the date of the visit (claims are checked up to 90 days prior to the visit date) Note: This criterion is looking for the absence of the drug rather than its presence.	NDC Codes as define by NCQA (www.ncqa.org) A prescription is still active if the prescription was filled more than 30 days prior to the pharyngitis visit date and the Days Supply is >= the number of date between the prescription fill date and the pharyngitis visit date.
AND	
Age (at least 2 years of age at the beginning of the intake period, no greater than 18 years of age at the end of the intake period)	Age in Years = 2-18

NUMERATOR:

Identifies patients who had an outpatient visit with a single diagnosis of pharyngitis, aged 2 to 18 years, and were prescribed an antibiotic within 3 days of their pharyngitis visit, and also received a group A streptococcus test within 3 days before or after that visit.

At least one group A streptococcus test (from 3 days prior to the first eligible pharyngitis encounter to 3 days following that encounter)	CPT Procedure Code = 87070, 87071, 87081, 87430, 87650-87652, 87880
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CONTINUOUS ENROLLMENT:

Continuously enrolled with medical and drug coverage from 30 days prior to the date of the eligible pharyngitis encounter through 3 days after the encounter, which equates to 34 days out of 34 days.

MEASURE BACKGROUND:

Acute pharyngitis is a common condition encountered in medical office practice. Pharyngitis is defined as an infection or irritation of the pharynx and/or tonsils. The cause is usually infectious with most cases being viral in origin. However, as many as 35 to 40 percent of cases in children are caused by group A streptococcus (GAS). GAS is the most common pathogen that causes pharyngitis and would require antibiotic treatment. The main symptoms of GAS include a sore throat with evidence of erythema and/or exudates on exam, fever, and/or swollen lymph nodes in the neck. Symptoms of an upper respiratory viral infection are usually absent. It most commonly occurs in late fall to early spring and typically affects children ages 5 to 15 years. Diagnostic tests for GAS include throat culture and rapid streptococcal antigen test (RSAT). Multiple treatment strategies have been proposed, including empiric therapy based on clinical criteria. However, treatment following confirmatory tests showing GAS is recommended to minimize the unnecessary use of antibiotics in children and adolescents who have viral infections, and to help prevent the development of antibiotic resistance.

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