

Appropriate Testing for Pharyngitis (CWP)

This quick reference guide applies to our Medicaid, Ambetter (Marketplace) and Allwell (Medicare) products.



MEASURE DESCRIPTION

Assesses members age 3 and older who were diagnosed with pharyngitis, dispensed an antibiotic, and received a group A streptococcus test for the episode. A higher rate represents better performance (i.e., appropriate testing). The measurement year begins July 1 and ends June 30.



UPDATES FOR 2020

- Expanded age range to include ages 3 and older and includes all Sunshine Health lines of business: Medicaid, Medicare (Allwell) and Marketplace (Ambetter).
- Measure calculation is based on episodes of care, not members.
- Each episode of care for CWP will be captured if it is >31 days apart.
- If more than one episode of care occurs within 31 days, only one per 31-day period will be counted.



WHY IT MATTERS

Pharyngitis, or sore throat, is a leading cause of pediatric ambulatory care visits. Pharyngitis can be caused by a virus or by bacteria. Viral pharyngitis does not require antibiotic treatment; however, antibiotics continue to be inappropriately prescribed. Proper testing and treatment of pharyngitis would prevent the spread of sickness. It would also reduce the unnecessary use of antibiotics. Inappropriate treatments with antibiotics can lead to antibiotic resistance, which makes it essential that members with pharyngitis have appropriate testing, diagnosis and treatment.

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SUGGESTIONS TO IMPROVE HEDIS SCORES

- Offer same-day appointments for complaint of sore throat to avoid use of emergency department
- Do in-office testing for immediate results
- Provide education to patient regarding overuse of antibiotics for viral infections
- Provide instructions for care of viral illnesses as indicated
- If antibiotics are indicated, encourage proper use for course of treatment
- Follow-up as indicated to assure appropriate treatment was initiated
- If patient has frequent episodes of pharyngitis and they still have tonsils, consider ENT consult
- Use proper CPT codes to close the measure with the claim

Document and code for all services provided for each encounter. Telehealth visits are appropriate to capture the episode and diagnosis criteria for this measure. Use NCQA specified codes to close the care gap:

Pharyngitis	ICD-10CM: J02.0, J02.8, J02.9, J03.00, J03.01, J03.80, J03.81, J03.90, J03.91
Group A Strep Tests	CPT: 87070, 87071, 87081, 87430, 87650-87652, 87880

A prescription for an antibiotic on the following list dispensed on or up to 3 days after the service date with a pharyngitis diagnosis and with a Group A streptococcus test completed will demonstrate compliance for this measure.

Description	Prescription
Aminopenicillins	Amoxicillin, Ampicillin
Beta-lactamase inhibitors	Amoxicillin-clavulanate
First generation cephalosporins	Cefadroxil, Cefazolin, Cephalexin
Folate antagonist	Trimethoprim
Lincomycin derivatives	Clindamycin
Macrolides	Azithromycin, Clarithromycin, Erythromycin, Erythromycin ethylsuccinate, Erythromycin lactobionate, Erythromycin stearate
Natural penicillins	Penicillin G potassium, Penicillin G sodium, Penicillin V potassium, Penicillin G benzathine
Penicillinase-resistant penicillins	Dicloxacillin
Quinolones	Ciprofloxacin, Levofloxacin, Moxifloxacin, Ofloxacin
Second generation cephalosporins	Cefaclor, Cefprozil, Cefuroxime
Sulfonamides	Sulfamethoxazole-trimethoprim
Tetracyclines	Doxycycline, Minocycline, Tetracycline
Third-generation cephalosporins	Cefdinir, Cefixime, Cefpodoxime, Ceftibuten, Cefditoren, Ceftriaxone

Reflects NCQA HEDIS® 2020 Technical Specifications