

## Measure specifications: Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis (AAB)

### Metric information

**Metric description:** The percentage of episodes for members ages 3 months and older with a diagnosis of acute bronchitis/ bronchiolitis that did not result in an antibiotic dispensing event.

**Metric specification version:** HEDIS® Measurement Year 2024 Technical Specifications for Health Plans, NCQA.

**Data collection method:** Administrative only.

**Data source:** ProviderOne Medicaid claims/encounter and enrollment data.

**Claim status:** Include only final paid claims or accepted encounters in metric calculation.

**Identification window:** Intake period.

**Direction of quality improvement:** The measure is reported as an inverted rate  $[1 - (\text{numerator} / \text{eligible population})]$ . A higher rate indicates appropriate acute bronchitis/bronchiolitis treatment (i.e., the proportion for episodes that did not result in an antibiotic dispensing event).

**URL of specifications:** [NCQA HEDIS measures](#)

### Metric Details

#### Eligible population

Measure	Description
Age	3 months and older as of the episode date
Gender	N/A
Minimum Medicaid enrollment	30 days prior to episode date through 3 days after the episode date. Enrollment must be continuous.
Allowable gap in Medicaid enrollment	No gaps.
Medicaid enrollment anchor date	None.
Medicaid benefit and eligibility	Includes Medicaid beneficiaries with comprehensive medical benefits. Excludes beneficiaries that are eligible for both Medicare and Medicaid and beneficiaries with primary insurance other than Medicaid.

## Denominator

Data elements required for denominator: Medicaid beneficiaries with a diagnosis of acute bronchitis/bronchiolitis condition who meet the above criteria.

Required exclusions for denominator.

- Eligible population exclusions are listed in the eligible population table above.
- Metric specific exclusions:
  - o Beneficiaries in hospice care.
  - o Beneficiaries who die during the measurement year.

Deviations from cited specifications for denominator.

- None

## Numerator

Beneficiaries must qualify for inclusion in the denominator to be eligible for inclusion in the numerator.

Data elements required for numerator: Identify episodes that resulted in a prescription for antibiotics on or up to three days after the episode date.

Required exclusions for numerator.

- None

Deviations from cited specifications for numerator.

- None

## Version control

**April 2025 update:** This is the first release of this measure.