

Measure specifications: Antibiotic Utilization for Respiratory Conditions

Metric information

Metric description: The percentage of episodes for members 3 months of age and older with a diagnosis of a respiratory condition that resulted in an antibiotic dispensing event.

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

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: Measurement year.

Direction of quality improvement: Lower is better.

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

Metric Details

Eligible population

Measure	Description
Age	Aged 3 months or older as of the episode date.
Gender	N/A
Minimum Medicaid enrollment	30 days prior to the episode through 3 days after the episode date.
Allowable gap in Medicaid enrollment	No gaps are allowed during the continuous enrollment period.
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 who meet the above eligibility criteria.

Required exclusions for denominator.

- Eligible population exclusions are listed in the eligible population table above.
- Metric specific exclusions:
 - o Beneficiaries in hospice care.

Deviations from cited specifications for denominator.

- HEDIS® specifications require no gap in continuous enrollment from 30 days prior to episode to 3 days after. To determine continuous enrollment for a Medicaid beneficiary for whom enrollment is verified monthly, as is the case for the ProviderOne data source, the Medicaid beneficiary must have been continuously enrolled for the previous month and the current month of the episode or the current month of the episode and the next month depending on when in the month the episode occurred to best align with the continuous enrollment requirement.

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 dispensation of antibiotic medication.

Required exclusions for numerator.

- None

Deviations from cited specifications for numerator.

- None

Version control

July 2018 Release: In February 2018, HEDIS® announced the replacement of the Inpatient Hospital Utilization (IHU) metric by the revised and renamed Acute Hospital Utilization (AHU) metric. The updated specifications are reflected in this technical specification sheet. There are three key changes between IHU and AHU: (1) observations stays are now included in the numerator; (2) clarification of how acute-to-acute direct transfers are handled; (3) removes discharges for Medicaid beneficiaries with three or more inpatient or observation stay discharges in the measurement year.

August 2020 update: Additional information about updates to the AHU metric can be found [here](#).

August 2023 update: The following changes have been made for measurement year 2022. The Acute Hospital Utilization added an exclusion and definition for a planned hospital stay: A principal diagnosis of maintenance chemotherapy (Chemotherapy Encounter Value Set), rehabilitation (Rehabilitation Value Set), organ transplant (Kidney Transplant Value Set, Bone Marrow Transplant Value Set, Organ Transplant Other Than Kidney Value Set, Introduction of Autologous Pancreatic Cells Value Set), or a potentially planned procedure (Potentially Planned Procedures Value Set) without a principal acute diagnosis. The update also clarified that hospice is a required exclusion and that diagnoses must be found on the discharge claim.

November 2024 update: MTP 1.0 DSRIP related criteria have been removed from metric production calculations. The metric aligns with HEDIS specifications.