Quality ID #93 (NQF 0654): Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use
– National Quality Strategy Domain: Efficiency and Cost Reduction
– Meaningful Measure Area: Appropriate Use of Healthcare

2019 COLLECTION TYPE:
MIPS CLINICAL QUALITY MEASURES (CQMS)

MEASURE TYPE:
Process – High Priority

DESCRIPTION:
Percentage of patients aged 2 years and older with a diagnosis of AOE who were not prescribed systemic antimicrobial therapy

INSTRUCTIONS:
This measure may be submitted based on the actions of the submitting Merit-based Incentive Payment System (MIPS) eligible clinician who performs the quality action, described in the measure, based on services provided within measure-specific denominator coding. This measure is to be submitted once for each occurrence of AOE during the performance period. For the purpose of submitting this measure, only unique occurrences with an onset of AOE diagnosing within the current performance period will be submitted. A unique occurrence of AOE is defined as the period of time that begins with the onset of AOE diagnosing and ends 30 days after the onset of diagnosing.

Merit-based Incentive Payment System (MIPS) eligible clinicians who submitted this measure may also find Quality ID #91: Acute Otitis Externa: Topical Therapy to be clinically relevant. The measure developer intended for Quality ID #91: Acute Otitis Externa: Topical Therapy and Quality ID #93: Acute Otitis Externa: Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use to be paired measures, as they can both be implemented to measure care provided to patients diagnosed with diffuse, uncomplicated AOE.

Measure Submission Type:
Measure data may be submitted by individual MIPS eligible clinicians, groups, or third party intermediaries. The listed denominator criteria are used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions as allowed by the measure. The quality-data codes listed do not need to be submitted by MIPS eligible clinicians, groups, or third party intermediaries that utilize this modality for submissions; however, these codes may be submitted for those third party intermediaries that utilize Medicare Part B claims data. For more information regarding Application Programming Interface (API), please refer to the Quality Payment Program (QPP) website.

DENOMINATOR:
All patients aged 2 years and older with a diagnosis of AOE

DENOMINATOR NOTE: A new diagnosis code indicates a new occurrence of AOE. If a patient presents with right ear AOE then returns with new onset of left ear AOE symptoms, then the left ear AOE would be considered a new unique occurrence, separate from the right ear AOE.

Denominator Criteria (Eligible Cases):
Patients aged ≥ 2 years on date of encounter AND
Diagnosis for AOE (ICD-10-CM):
H60.311, H60.312, H60.313, H60.319, H60.321, H60.322, H60.323, H60.329, H60.331, H60.332, H60.333, H60.339, H60.391, H60.392, H60.393, H60.399, H60.501, H60.502, H60.503, H60.509, H60.511, H60.512, H60.513, H60.519, H60.521, H60.522, H60.523, H60.529, H60.531, H60.532, H60.533, H60.539, H60.541, H60.542, H60.543, H60.549, H60.551,
H60.552, H60.553, H60.559, H60.591, H60.592, H60.593, H60.599, H62.40, H62.41, H62.42, H62.43

AND

Patient encounter during the performance period (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99281, 99282, 99283, 99284, 99285, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350

WITHOUT

Telehealth Modifier: GQ, GT, 95, POS 02

NUMERATOR:

Patients who were not prescribed systemic antimicrobial therapy

Numerator Instructions:

For performance, the measure will be calculated as the number of patients for whom systemic antimicrobial therapy was not prescribed over the number of patients in the denominator (patients aged 2 years and older with acute otitis externa). A higher score indicates appropriate treatment of patients with AOE (e.g., the proportion for whom systemic antimicrobials were not prescribed).

Numerator NOTE: Denominator Exception is determined on the date of the denominator eligible episode.

Numerator Options: Systemic antimicrobial therapy not prescribed (4132F)

OR

Denominator Exception: Documentation of medical reason(s) for prescribing systemic antimicrobial therapy (4131F with 1P)

OR

Performance Not Met: Systemic antimicrobial therapy prescribed (4131F)

RATIONALE:

Despite their limited utility, about 20-40 percent of patients with AOE receive oral antibiotics, often in addition to topical therapy. "There are no data on the efficacy of systemic therapy using appropriate antibacterials and stratified by severity of the infection. Moreover, orally administered antibiotics have significant adverse effects that include rashes, vomiting, diarrhea, allergic reactions, altered nasopharyngeal flora, and development of bacterial resistance." The use of systemic antimicrobial therapy to treat AOE should be limited only to those clinical situations in which it is indicated.


CLINICAL RECOMMENDATION STATEMENTS:

Clinicians should not prescribe systemic antimicrobials as initial therapy for diffuse, uncomplicated AOE unless there is extension outside the ear canal or the presence of specific host factors that would indicate a need for systemic therapy.

Strong recommendation based on randomized controlled trials with minor limitations and a preponderance of benefit over harm. [Aggregate evidence quality – Grade B] (AAO-HNSF, 2014)

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2019 Clinical Quality Measure Flow for Quality ID #93 NQF # 0654: Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use

![Flowchart Diagram]

**SAMPLE CALCULATIONS:**

Data Completeness:
- Performance Met (≥ 40 episodes) + Denominator Exception (≥ 10 episodes) + Performance Not Met (≥ 20 episodes) = 70 episodes - 87.50%
- Eligible Population/Denominator (d≥60 episodes) = 80 episodes

Performance Rate:
- Data Completeness Numerator (70 episodes) - Denominator Exception (≥ 10 episodes) = 60 episodes

*See the posted Measure Specification for specific coding and instructions to submit this measure.

NOTE: Submission Frequency: Episode

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The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone as a substitution for the measure specifications.
2019 Clinical Quality Measure Flow Narrative for Quality ID #93 NQF # 0654: Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy – Avoidance of Inappropriate Use

Please refer to the specific section of the specification to identify the denominator and numerator information for use in submitting this Individual Specification.

1. Start with Denominator

2. Check Patient Age:
   a. If Patient Age at Date of Service is greater than or equal to 2 Years equals No, do not include in Eligible Population. Stop Processing.
   b. If Patient Age at Date of Service is greater than or equal to 2 Years equals Yes, proceed to check Patient Diagnosis.

3. Check Patient Diagnosis:
   a. If Diagnosis for AOE as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
   b. If Diagnosis for AOE as Listed in the Denominator equals Yes, proceed to check Encounter Performed.

4. Check Encounter Performed:
   a. If Encounter as Listed in the Denominator equals No, do not include in Eligible Population. Stop Processing.
   b. If Encounter as Listed in the Denominator equals Yes, proceed to check Telehealth Modifier

5. Check Telehealth Modifier:
   a. If Telehealth Modifier equals Yes, do not include in Eligible Population. Stop Processing.
   b. If Telehealth Modifier equals No, include in Eligible Population.

6. Denominator Population
   a. Denominator Population is all Eligible Episodes in the Denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 80 episodes in the Sample Calculation.

7. Start Numerator

8. Check Systemic Antimicrobial Therapy Not Prescribed:
   a. If Systemic Antimicrobial Therapy Not Prescribed equals Yes, include in Data Completeness Met and Performance Met.
   b. Data Completeness Met and Performance Met letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 40 episodes in the Sample Calculation.
   c. If Systemic Antimicrobial Therapy Not Prescribed equals No, proceed to check Systemic Antimicrobial Therapy Prescribed for Medical Reason.
9. Check Documentation of Medical Reason(s) for Prescribing Systemic Antimicrobial Therapy
   a. If Documentation of Medical Reason(s) for Prescribing Systemic Antimicrobial Therapy equals Yes, include in Data Completeness Met and Denominator Exception.
   b. Data Completeness Met and Denominator Exception letter is represented in the Data Completeness and Performance Rate in the Sample Calculation listed at the end of this document. Letter b equals 10 episodes in the Sample Calculation.
   c. If Documentation of Medical Reason(s) for Prescribing Systemic Antimicrobial Therapy equals No, proceed to check Systemic Antimicrobial Therapy Prescribed.

10. Check Systemic Antimicrobial Therapy Prescribed:
   a. If Systemic Antimicrobial Therapy Prescribed equals Yes, include in the Data Completeness Met and Performance Not Met.
   b. Data Completeness Met and Performance Not Met letter is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 20 episodes in the Sample Calculation.
   c. If Systemic Antimicrobial Therapy Prescribed equals No, proceed to check Data Completeness Not Met.

11. Check Data Completeness Not Met:
   a. If Data Completeness Not Met, the Quality Data Code or equivalent was not submitted. 10 episodes have been subtracted from the Data Completeness Numerator in the Sample Calculation.

SAMPLE CALCULATIONS:

<table>
<thead>
<tr>
<th>Data Completeness</th>
<th>Performance Met (a=40 episodes) + Denominator Exception (b=10 episodes) + Performance Not Met (c=20 episodes) = 70 episodes = 87.50%</th>
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</thead>
<tbody>
<tr>
<td>Performance Rate</td>
<td>Eligible Population / Denominator (d=80 episodes) = 80 episodes</td>
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<tr>
<td></td>
<td>Performance Met (a=40 episodes) = 40 episodes = 66.67%</td>
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<tr>
<td></td>
<td>Data Completeness Numerator (70 episodes) – Denominator Exception (b=10 episodes) = 60 episodes</td>
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