

◆ **Measure #66 (NQF 0002): Appropriate Testing for Children with Pharyngitis**

**2013 PQRS OPTIONS FOR INDIVIDUAL MEASURES:**  
**CLAIMS, REGISTRY**

**DESCRIPTION:**

Percentage of children aged 2 through 18 years with a diagnosis of pharyngitis, who were prescribed an antibiotic and who received a group A streptococcus (strep) test for the episode. A higher rate represents better performance (i.e. appropriate testing).

**INSTRUCTIONS:**

This measure is to be reported once for each occurrence of pharyngitis during the reporting period. Claims data will be analyzed to determine unique occurrences. This measure is intended to reflect the quality of services provided for the primary management of patients with pharyngitis who were dispensed an antibiotic. This measure may be reported by clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

**Measure Reporting via Claims:**

ICD-9-CM diagnosis codes, CPT or HCPCS codes, and patient demographics are used to identify patients who are included in the measure's denominator. CPT Category II codes and/or G-codes are used to report the numerator of the measure.

When reporting the measure via claims, submit the listed ICD-9-CM diagnosis codes, CPT or HCPCS codes, and the appropriate CPT Category II code **AND/OR G-code OR** the CPT Category II code(s) **with** the modifier **AND** G-code. The modifiers allowed for this measure are: 1P- medical reasons, 8P- reason not otherwise specified. All measure-specific coding should be reported on the claim(s) representing the eligible encounter.

**Measure Reporting via Registry:**

ICD-9-CM diagnosis codes, CPT or HCPCS codes, and patient demographics are used to identify patients who are included in the measure's denominator. The numerator options as described in the quality-data codes are used to report the numerator of the measure.

The quality-data codes listed do not need to be submitted for registry-based submissions; however, these codes may be submitted for those registries that utilize claims data.

**DENOMINATOR:**

All patients aged 2 through 18 years with a diagnosis of pharyngitis

**Denominator Criteria (Eligible Cases):**

Patients aged 2 through 18 years on date of encounter

**AND**

Diagnosis for pharyngitis (ICD-9-CM): 034.0, 462, 463

Diagnosis for pharyngitis (ICD-10-CM) [REFERENCE ONLY/Not Reportable]: J02.8, J02.9, J03.80, J03.81, J03.90, J03.91

**AND**

Patient encounter during the reporting period (CPT or HCPCS): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99217, 99218, 99219, 99220, G0402

**NUMERATOR:**

Patients who were dispensed an antibiotic and who received a group A streptococcus (strep) test for the episode

**NUMERATOR NOTE:** *The correct combination of numerator code(s) must be reported on the claim form in order to properly report this measure. The "correct combination" of codes may require the submission of multiple numerator codes.*

**Numerator Quality-Data Coding Options for Reporting Satisfactorily:**

**Group A Streptococcus Test Performed and Antibiotic Prescribed**

*(One CPT II code & G-code [3210F & G8711] are required on the claim form to submit this numerator option)*

CPT II 3210F: Group A Strep Test Performed

**AND**

G8711: Prescribed or dispensed antibiotic

**OR**

**Group A Streptococcus Test not Performed for Medical Reasons**

*(One CPT II code & one G-code [3210F-1P & G8711] are required on the claim form to submit this numerator option)*

Append a modifier (1P) to CPT Category II codes 3210F to report documented circumstances that appropriately exclude patients from the denominator.

3210F **with** 1P: Documentation of medical reason(s) for not Performing Group A Strep Test

**AND**

G8711: Prescribed or dispensed antibiotic

**OR**

**If patient is not eligible for this measure because patient was not prescribed antibiotics, report:**

*(One G-code [G8712] is required on the claim form to submit this numerator option)*

G8712: Antibiotic not prescribed or dispensed

**OR**

**Group A Streptococcus Test not Performed, Reason not Otherwise Specified**

*(One CPT II code & one G-code [3210F-8P & G8711] are required on the claim form to submit this numerator option)*

Append a reporting modifier (8P) to CPT Category II code 3210F to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

3210F **with** 8P: Group A Strep Test **not** Performed, reason not otherwise specified

**AND**

G8711: Prescribed or dispensed antibiotic

**RATIONALE:**

Clinical practice guidelines recommend group A streptococcus pharyngitis be treated with antibiotics (Schwartz et al, 1998)

**CLINICAL RECOMMENDATION STATEMENTS:**

The group A strep test (rapid assay or throat culture) is the definitive test of group A strep pharyngitis. Pharyngitis is the only respiratory tract infection with an objective diagnostic test that can be validated with administrative data, and not medical records. A process measure that requires the performance of a group A strep test for children given antibiotics for pharyngitis is supported by the guidelines. (Ibid)