2018 OPTIONS FOR INDIVIDUAL MEASURES: 
REGISTRY ONLY

MEASURE TYPE: 
Process

DESCRIPTION: 
Percentage of patients aged 2 months through 12 years with a diagnosis of OME who were not prescribed systemic antimicrobials

INSTRUCTIONS: 
This measure is to be submitted once for each occurrence of otitis media with effusion (OME) in children seen during the performance period. Each unique occurrence is defined as a 90-day period from onset of OME. If multiple occurrences are documented within a 90-day period, eligible clinicians should submit one instance.

Measure Submission: 
The listed denominator criteria is used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions allowed by 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 months through 12 years with a diagnosis of OME

Denominator Criteria (Eligible Cases): 
Patients aged 2 months through 12 years on the date of the encounter
AND
Diagnosis for OME (ICD-10-CM): 
AND
Patient encounter during the performance period (CPT): 
99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245, 99381, 99382, 99383, 99384, 99391, 99392, 99393, 99394
WITHOUT
Telehealth Modifier: GQ, GT, 95, POS 02

NUMERATOR: 
Patients who were not prescribed systemic antimicrobials

Numerator Instructions: For performance, the measure will be calculated as the number of patients for whom systemic antimicrobials were neither prescribed nor recommended over the number of patients in the denominator (patients aged 2 months through 12 years with a diagnosis of OME). A higher score indicates appropriate treatment of patients with OME (e.g., the proportion for whom systemic antimicrobials were not prescribed).

Numerator Options: 
Performance Met: Systemic antimicrobials not prescribed (G9959)
Denominator Exception: Documentation of medical reason(s) for prescribing systemic antimicrobials (G9960)

Performance Not Met: Systemic antimicrobials prescribed (G9961)

RATIONALE:
OME usually resolves spontaneously with indications for therapy only if the condition is persistent and clinically significant benefits can be achieved. Systemic antimicrobials have no proven long-term effectiveness and have potential adverse effects. The purpose of the corresponding guideline statement is to reduce ineffective and potentially harmful medical interventions in OME when there is no long-term benefit to be gained in the vast majority of cases. Medications have long been used to treat OME, with the dual goals of improving QOL and avoiding more invasive surgical interventions. Both the 1994 guidelines and the 2004 guidelines determined that the weight of evidence did not support the routine use of steroids (either oral or intranasal), antimicrobials, antihistamines, or decongestants as therapy for OME.

CLINICAL RECOMMENDATION STATEMENTS:

Data detailing the prescription of systemic antimicrobials for otitis media with effusion in children is limited. However, in a small 2008 study by Patel et al, 7% of physicians in an otolaryngology practice prescribed systemic antimicrobials for pediatric patients presenting with OME[1]. In a 2014 study involving 5 focus groups of parents, most parents believed that antibiotics were needed to treat otitis media and expressed frustration with a “watchful waiting” approach [2]. In a 2013 study by Forrest et al evaluating clinical decision support for management of OME, 78%-93% of physicians employed a “watchful waiting” strategy to manage OME.

References:

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2018 Registry Flow for Quality ID #464 (NQF 0657):
Otitis Media with Effusion (OME): Systemic Antimicrobials - Avoidance of Inappropriate Use

Data Completeness=
Performance Met (a=40 episodes) + Denominator Exception (b=10 episodes) + Performance Not Met (c=20 episodes) = 70 episodes = 87.50% Eligible Population / Denominator (d=80 episodes)
= 80 episodes

Performance Rate=
Performance Met (a=40 episodes) = 40 episodes = 66.67%
Data Completeness Numerator (70 episodes) – Denominator Exception (b=10 episodes) = 60 episodes

*See the posted Measure Specification for specific coding and instructions to submit this measure.
NOTE: Submission Frequency: Episode
2018 Registry Flow For Quality ID
#464: Otitis Media with Effusion: Systemic Antimicrobials - Avoidance of Inappropriate Use

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in submitting this Individual Measure. This flow is for registry data submission.

1. Start with Denominator

2. Check Patient Age:
   a. If the Age is greater than or equal to 2 months of age, but less than 13 years old on the Date of Service and equals No during the performance period, do not include in Eligible Patient Population. Stop Processing.
   b. If the Age is greater than or equal to 2 months of age, but less than 13 on the Date of Service and equals Yes during the performance period, proceed to check Patient Diagnosis.

3. Check Patient Diagnosis:
   a. If Diagnosis of OME as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
   b. If Diagnosis of OME 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 Patient 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 Patient Population. Stop Processing.
   b. If Telehealth Modifier equals No, include in the Eligible population.

6. Denominator Population
   a. Denominator population is all Eligible Patients 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 Sample Calculation.
c. If Systemic Antimicrobial Therapy Not Prescribed equals No, proceed to Systemic Antimicrobial Therapy Prescribed for Medical Reason.

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

11. Check Data Completeness Not Met:
    If Data Completeness Not Met equals No, Quality Data Code or equivalent not submitted. 10 episodes have been subtracted from the data completeness numerator in the sample calculation.

### SAMPLE CALCULATIONS:

Data Completeness=

\[
\text{Performance Met} (a=40 \text{ episodes}) + \text{Denominator Exception} (b=10 \text{ episodes}) + \text{Performance Not Met} (c=20 \text{ episodes}) = 70 \text{ episodes} = 87.50\%
\]

\[
\text{Eligible Population / Denominator} (d=80 \text{ episodes}) = 80 \text{ episodes}
\]

Performance Rate=

\[
\text{Performance Met} (a=40 \text{ episodes}) = 40 \text{ episodes} = 66.67\%
\]

\[
\text{Data Completeness Numerator} (70 \text{ episodes}) - \text{Denominator Exception} (b=10 \text{ episodes}) = 60 \text{ episodes}
\]