

eCW Clinical Documentation Guide

Measure Name	Appropriate Testing for Children with Pharyngitis
Relevance	<p>NPO Population Clinical Quality Dashboard [NQF 0002: Pediatric Measure] MIPS Clinical Quality Measure [CMS 146 (EHR): Process Measure]</p>
Measure Definition	<p><i>The percentage of children, 2-18 years old, who, during the Measurement Period, were diagnosed with pharyngitis, dispensed an antibiotic and received a Group A Streptococcus (Strep A) test for the episode. A higher rate represents better performance (i.e., appropriate testing)</i></p>
Measurement Period	<p>The Measurement Period is defined as the current calendar year (January 1 - December 31)</p>
Denominator	<p>The Denominator consists of patients who:</p> <ol style="list-style-type: none"> I. Were ≥ 2 and < 18 years of age at the start of the Measurement Period II. AND, Were seen for an applicable ambulatory or ED encounter during the Measurement Period III. AND, Were assessed an active diagnosis of Acute Pharyngitis just prior to, during, or shortly after (+ 3 days) the applicable encounter IV. AND, Were dispensed an antibiotic medication ≤ 3 days after the diagnosis assessment
Numerator	<p>The Numerator consists of patients, from the Denominator, who :</p> <ol style="list-style-type: none"> I. Were administered a Group A Streptococcus test II. AND, Had the results of the test recorded, in the patient's medical record, within 3 days of (before or after) the applicable encounter
Exclusions and/or Exceptions	<p>Patients are excluded from the Denominator for the following reason:</p> <ol style="list-style-type: none"> I. The Antibiotic medication was dispensed prior to the assessment of the diagnosis for Acute Pharyngitis <p style="text-align: right;"><i>(continued)</i></p>

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Exclusions and/or Exceptions <i>(continued)</i>	<p>II. And, This was the only Antibiotic medication dispensed to the patient \leq 30 days prior to assessment of the diagnosis for Acute Pharyngitis</p>
Measure Documentation	<p style="text-align: center;"><u>To Qualify For This Measure:</u> <i>(Denominator Documentation)</i></p> <p>I. The patient must have been seen for an applicable E&M visit (outpatient or Emergency Room) during the Measurement Period</p> <p style="padding-left: 40px;">A. The following E&M codes identify applicable visit encounters:</p> <ol style="list-style-type: none"> 1. 99201 - 99205, 99212 - 99215, 99217 - 99220, 99241 - 99245, and 99281 - 99285 2. 99341 - 99345, 99347 - 99350, 99381 - 99387 and 99391 - 99397 3. 99401 - 99404, 99411 - 99412, 99420, 99429 and 99455 - 99456 <p style="padding-left: 40px;">B. Record the appropriate E&M code in the Billing section for the visit <i>(Progress Notes → Billing)</i></p> <p>II. An Antibiotic medication must have been prescribed within three days of the above encounter</p> <p style="padding-left: 40px;">A. The following medications are considered applicable Antibiotics:</p> <ol style="list-style-type: none"> 1. Aminopenicillins <i>(e.g., Amoxicillin, Ampicillin)</i> 2. Beta-Lactamase Inhibitors <i>(e.g., Amoxicillin-Clavulanate)</i> 3. First-Generation Cephalosporins <i>(e.g., Cefadroxil, Cefazolin, Cephalexin)</i> 4. Folate Antagonist <i>(e.g., Trimethoprim)</i> 5. Lincomycin Derivatives <i>(e.g., Clindamycin)</i> 6. Macrolides <i>(e.g., Azithromycin, Clarithromycin, Erythromycin, Erythromycin Ethylsuccinate, Erythromycin Lactobionate and Erythromycin Stearate)</i> 7. Miscellaneous Antibiotics <i>(e.g., Erythromycin - Sulfisoxazole)</i> 8. Natural Penicillins <i>(e.g., Penicillin G Potassium, Penicillin G Sodium, Penicillin V Potassium)</i> <p style="text-align: right;"><i>(continued)</i></p>

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<p>Measure Documentation <i>(continued)</i></p>	<ul style="list-style-type: none"> 9. Penicillinase - Resistant Penicillins <i>(e.g., Dicloxacillin)</i> 10. Quinolones <i>(e.g., Ciprofloxin, Levofloxacin, Moxifloxacin, Ofloxacin)</i> 11. Second-Generation Cephalosporins <i>(e.g., Cefaclor, Cefprozil and Cefuroxime)</i> 12. Sulfonamides <i>(e.g., Sulfamethoxazole - Trimethoprim)</i> 13. Tetracyclines <i>(e.g., Doxycycline, Minocycline, Tetracycline)</i> 14. Third-Generation Cephalosporins <i>(e.g., Cefdinir, Cefixime, Cefpodoxime, Ceftibuten)</i> <p>B. A comprehensive list of medications and NDC codes is available at www.ncqa.org</p> <p>C. If an antibiotic is prescribed, record it in the "Current Medications" section of the patient's chart from one of the following locations:</p> <p><i>Progress Notes</i> → <i>Treatment</i> → (Prescribe, Refill, Continue, Start, etc. an Antibiotic medication)</p> <p><i>Progress Notes</i> → <i>Current Medications</i> → (Prescribe, Refill, Continue, Start, etc. an Antibiotic medication)</p> <p><i>Telephone Encounter</i> → <i>Rx tab</i> → (Prescribe, Refill, Continue, Start, etc. an Antibiotic medication)</p> <p><i>Telephone Encounter</i> → <i>Virtual Visit tab</i> → <i>Treatment</i> → (Prescribe, Refill, Continue, Start, etc. an Antibiotic medication)</p> <p><i>Telephone Encounter</i> → <i>Virtual Visit tab</i> → <i>Current Medications</i> → (Prescribe, Refill, Continue, Start, etc. an Antibiotic Medication)</p> <p>D. Record the Antibiotic in the patient's chart within three days of the above applicable encounter</p> <p>III. The patient must have been diagnosed with Acute Pharyngitis during the above applicable encounter</p> <ul style="list-style-type: none"> A. The following ICD-10 codes indicate Acute Pharyngitis: J02.0, J02.8 and J02.9 B. Record the appropriate ICD-10 code as an Assessment in the Progress Note for the visit <i>(Progress Notes</i> → <i>Assessments)</i> <p style="text-align: right;"><i>(continued)</i></p>

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<p style="text-align: center;">Measure Documentation <i>(continued)</i></p>	<p style="text-align: center;"><u>To Satisfy This Measure</u> <i>(Numerator Documentation)</i></p> <p>I. Perform a <i>Group A Streptococcus</i> (Strep A) test on the patient (concurrent with, or within three days before or after, the applicable encounter)</p> <p>II. Document the results of the <i>Group A Streptococcus</i> test in the "Labs" section of the patient's chart in eCW (concurrent with, or within three days before or after, the applicable encounter)</p> <p style="padding-left: 40px;">A. If the HbA1c lab order has been electronically-generated and resulted in your EMR, no further action is necessary</p> <p style="padding-left: 40px;">B. Otherwise, manually generate the lab order and/or enter the lab result, as follows:</p> <ol style="list-style-type: none"> 1. Access the "Labs" section of the patient's chart 2. If necessary, click "New" to create a new Lab order <ol style="list-style-type: none"> a. Click the "SEL" button, adjacent to the "Lab" search field b. Find and select the appropriate <i>Strep A</i> lab from the list of Lab options 3. Complete the following fields: <ol style="list-style-type: none"> a. Order Date <ol style="list-style-type: none"> 1) If necessary, enter the date the lab was ordered 2) Hint: if you do not know the order date, enter the date the test was performed b. Collection Date <ol style="list-style-type: none"> 1) Check the box in the "Collection Date" field 2) Enter the date the sample was collected 3) Hint: If you do not know the collection date, enter the date the test was performed <p>MANDATORY</p> <p style="text-align: center;"><i>(continued)</i></p>

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<p>Measure Documentation <i>(continued)</i></p>	<p style="text-align: center;">c. Results</p> <p>MANDATORY 1) Check the "Received" box in the Results section</p> <p>MANDATORY 2) Enter the date the test was performed</p> <p>MANDATORY 3) Enter the result (Positive or Negative) in the yellow grid</p> <p>MANDATORY d. Reviewed: Check the "Reviewed" box</p>
<p>Exclusion and/or Exception Documentation</p>	<p style="text-align: center;"><u>To Exclude a Patient From This Measure</u> <i>(Exclusion/Exception Documentation)</i></p> <p>Documentation, in the patient's chart, of initiation, or continuation, of an Antibiotic medication, within 30 days prior to the Acute Pharyngitis assessment will render the patient ineligible for this measure</p>
<p>Trouble-Shooting</p>	<p style="text-align: center;"><u>Having Problems? Check Out the Following Trouble-Shooting Tips</u></p> <p>I. Verify that an appropriate LOINC code is linked to the <i>Strep A</i> lab test in your EMR</p> <p>A. The following LOINC codes identify a <i>Strep A</i> lab: 11268-0, 17656 -0, 18481-2, 31971-5, 49610-9, 5026-9, 60489-2, 626-2, 6557-36558-1, 6559-9, 68954-7</p> <p>B. To associate a new, or update an existing, LOINC code with a Lab, do the following:</p> <ol style="list-style-type: none"> 1. From the EMR menu in eCW, click on "Labs, DI & Procedures" 2. Select "Labs" from the drop-down list of options 3. The "Labs" window will open <ol style="list-style-type: none"> a. Find and select the appropriate lab b. Click the "Attribute Codes" button c. A new window specific to the selected lab will open <p style="text-align: right;"><i>(continued)</i></p>

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Trouble-Shooting <i>(continued)</i>	<ol style="list-style-type: none"> 1) Click the "Update LOINC" button 2) The "Associate LOINC" window will open <ol style="list-style-type: none"> a) Find and select the appropriate LOINC code b) Click "OK" to close the LOINC window 3) Click "OK" to exit the Lab-specific window <ol style="list-style-type: none"> d. Click the X (in the top, right-hand corner) to close the "Labs" window
	<p>II. Verify that all mandatory Lab fields have been completed (especially for manually-created Lab orders and/or manually-entered Lab results)</p> <ol style="list-style-type: none"> A. I.e., Verify that the "Collection Date" box has been checked B. I.e., Verify that the (Results) "Received" box has been checked C. I.e., Verify that a "Results" date has been entered D. I.e., Verify that the Result has been entered in the yellow grid E. I.e., Verify that the "Reviewed" box has been checked
	<p>III. Confirm diagnoses assessed by ER and/or other physicians</p> <ol style="list-style-type: none"> A. Add new medications to the Current Medications list in the patient's chart in your EMR B. Keep the Current Medications list accurate by removing medications that are no longer being taken
	<p>IV. Document any adverse reactions (allergy or intolerance) to an Antibiotic medication in the "Allergies" section of the patient's chart, as follows:</p> <ol style="list-style-type: none"> A. Access the "Allergies" section of the patient's chart in one of the following ways: <p style="text-align: right;"><i>(continued)</i></p>

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<p>Trouble-Shooting <i>(continued)</i></p>	<ol style="list-style-type: none"> 1. <i>Progress Note (or Virtual Visit) → Allergies/Intolerances</i> 2. From the Progress Note Dashboard, click the Allergies/Intolerance icon <p>B. Add a new Allergy or Intolerance as follows:</p> <ol style="list-style-type: none"> 1. From the "Allergies/Intolerance" window, click "Add" 2. The "Past Medical History" window will open <ol style="list-style-type: none"> a. "Structured/Non-Structured" Field <ol style="list-style-type: none"> 1) Select "Structured" if documenting a Drug allergy 2) Select "Non-Structured" if documenting a non-Drug allergy b. "Agent/Substance" Field <ol style="list-style-type: none"> 1) For a Structured (Drug) Allergy <ol style="list-style-type: none"> a) Click on the field to open the "Select Rx" window b) Find and select the appropriate medication c) Click "OK" to save the information and exit the window 2) For a Non-Structured A (Non-Drug/Other) Allergy <ol style="list-style-type: none"> a) Click in the empty field to reveal a carat for a drop-down box b) Click the carat to reveal a list of (Non-Drug/Other) Allergy options c) Select an Allergy from the list of options in the drop-down box d) <u>Or</u>, free-type an Allergy into the "Agent/Substance" field c. "Reaction" Field <ol style="list-style-type: none"> 1) For any Allergy, click in the empty "Reaction" field to reveal a carat for a drop-down list of <i>(continued)</i>

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<p>Trouble-Shooting <i>(continued)</i></p>	<p style="text-align: center;">options</p> <ol style="list-style-type: none"> 2) Select the appropriate Reaction from the list of options (i.e., anaphylaxis) 3) Or, free-type a reaction into the empty field <p style="margin-left: 40px;">d. "Type" Field</p> <ol style="list-style-type: none"> 1) For any Allergy, click in the empty "Type" field to reveal a carat for a drop-down list of options 2) Select the appropriate type (i.e., Allergy versus Intolerance) from the list of options <p style="margin-left: 40px;">e. "Status" Field</p> <ol style="list-style-type: none"> 1) For any Allergy, click in the empty "Status" field to reveal a carat for a drop-down list of options 2) Select the current status (i.e., Active versus Inactive) for the Allergy/Intolerance from the list of options <hr/> <p>V. Verify medications prescribed by ER and/or other physicians</p> <ol style="list-style-type: none"> A. Add new medications to the patient's Current Medications list in the patient's chart in your EMR B. Keep the Current Medications list accurate by removing medications that are no longer being taken <hr/> <p>VI. For further assistance, contact Ed Worthington (eworthington@npoinc.org) or Kelly Saxton (ksaxton@npoinc.org) at NPO (231-421-8505)</p>
<p>Fro More Information</p>	<p style="text-align: center;"><u>For More Information</u></p> <ol style="list-style-type: none"> I. 2017 HEDIS for QRS Version: "Appropriate Testing for Children with Pharyngitis (CWP)" II. eClinicalWorks "MIPS - CMS 146 - Appropriate Testing for Children with Pharyngitis"