

Empiric Antibiotic

Coding Specifications

Codes required to document patient has pneumonia and a visit occurred:

A line item ICD-9-CM diagnosis code for pneumonia and a CPT code are required to identify patients to be included in this measure. A place-of-service indicator for emergency department is required if using the critical care CPT code to identify the patient for the measure.

All measure-specific coding should be reported ON THE SAME CLAIM.

Pneumonia line item ICD-9-CM diagnosis codes

- 481, 482.0, 482.1, 482.2, 482.30, 482.31, 482.32, 482.39, 482.40, 482.41, 482.42, 482.49, 482.81, 482.82, 482.83, 482.84, 482.89, 482.9 (bacterial pneumonia)
- 483.0, 483.1, 483.8 (pneumonia due to other specified organism)
- 485 (bronchopneumonia organism unspecified)
- 486 (pneumonia organism unspecified)
- 487.0 (influenza with pneumonia)

AND

CPT codes

- 99201, 99202, 99203, 99204, 99205
- 99212, 99213, 99214, 99215
- 99281, 99282, 99283, 99284, 99285
- 99291

AND

- Place-of-service indicator: 23 (emergency department) if reporting 99291
- 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337
- 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350

Quality codes for this measure:

CPT II Code descriptors

(Data collection sheet should be used to determine appropriate code.)

- **CPT II 4045F:** Appropriate empiric antibiotic prescribed
- **CPT II 4045F-1P:** Documentation of medical reason(s) for not prescribing appropriate empiric antibiotic
- **CPT II 4045F-2P:** Documentation of patient reason(s) for not prescribing appropriate empiric antibiotic
- **CPT II 4045F-3P:** Documentation of system reason(s) for not prescribing appropriate empiric antibiotic
- **CPT II 4045F-8P:** Appropriate empiric antibiotic not prescribed, reason not otherwise specified

Physician Performance Measures (Measures) and related data specifications, developed by the American Medical Association (AMA) in collaboration with the Physician Consortium for Performance Improvement (the Consortium) and the National Committee for Quality Assurance (NCQA) pursuant to government sponsorship under subcontract 6205-05-054 with Mathematica Policy Research, Inc. under contract 500-00-0033 with Centers for Medicare & Medicaid Services.

These performance Measures are not clinical guidelines and do not establish a standard of medical care, and have not been tested for all potential applications.

The Measures, while copyrighted, can be reproduced and distributed, without modification, for noncommercial purposes, e.g., use by health care providers in connection with their practices. Commercial use is defined as the sale, license, or distribution of the Measures for commercial gain, or incorporation of the Measures into a product or service that is sold, licensed or distributed for commercial gain. Commercial uses of the Measures require a license agreement between the user and the AMA, (on behalf of the Consortium) or NCQA. Neither the AMA, NCQA, Consortium nor its members shall be responsible for any use of the Measures.

THE MEASURES AND SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND.

© 2004–6 American Medical Association and National Committee for Quality Assurance. All Rights Reserved.

Limited proprietary coding is contained in the Measure specifications for convenience. Users of the proprietary code sets should obtain all necessary licenses from the owners of these code sets. The AMA, NCQA, the Consortium and its members disclaim all liability for use or accuracy of any Current Procedural Terminology (CPT®) or other coding contained in the specifications.

CPT® contained in the Measures specifications is copyright 2007 American Medical Association.

G codes and associated descriptions included in these Measure specifications are in the public domain.

PQRI 2010 Measure 59, Effective Date 01/01/2010

© 2004–6 American Medical Association and National Committee for Quality Assurance. All Rights Reserved.

CPT® copyright 2009 American Medical Association