

To: AmeriHealth Caritas Louisiana Providers

Date: January 2, 2023

Subject: Overutilization of Antibiotics for Upper Respiratory Infection

Disclaimer: The codes and medical record documentation tips listed are informational only, not clinical guidelines or standards of medical care, and do not guarantee reimbursement. State/provider contract(s), Medicaid, member benefits and several other guidelines determine reimbursement for applicable codes.

Summary: Overutilization of antibiotic drugs for upper respiratory infections leads to low-value care (unnecessary care, or care that does not improve patient outcomes and can harm patients).

Overuse of prescription antibiotics for upper respiratory infections (URIs) leads to unnecessary cost and potentially adverse effects. Excessive use of antibiotics also hastens the pace at which antibiotic-resistant bacteria can adapt, creating resistance¹.

Currently, the use of antibiotics to treat URIs is much higher than what guidelines recommend. In 2019, Louisiana was 4th in the nation in “Antibiotic Prescriptions per 1,000 Population by State”². By decreasing the amount of unwarranted antibiotics from being dispensed, health providers can help prevent the rise in antibiotic resistant bacteria.

While all antibiotics have a history of being overprescribed, of particular concern is the use of broad-spectrum antibiotics, due to growing antimicrobial resistance³.

Antibiotic Categories	
Narrow Spectrum	Broad Spectrum
Amoxicillin	Azithromycin
Sulfamethoxazole	Moxifloxacin
Clindamycin	Clarithromycin
Doxycycline	Cefuroxime Axetil
Erythromycin	Ciprofloxacin
Cephalexin	Ofloxacin
Minocycline	Levofloxacin
Penicillin	Cefdinir
	Gatifloxacin
	Cefpodoxime Proxetil

Guidelines for Treating Upper Respiratory Tract Infections (URIs):

According to a study done by Gill et al (2006):

- Antibiotics should not be used to treat nonspecific upper respiratory tract infections, since antibiotics do not improve illness resolution.
- Antibiotic treatment of uncomplicated acute bronchitis is not recommended because most patients have a self-limiting viral illness
- For acute sinusitis, narrow-spectrum antibiotics should be given *only* to patients with persistent purulent nasal discharge and facial pain or tenderness who have not improved after 7 days, or those with severe symptoms.
- For acute pharyngitis, antibiotic use should be limited to patients who are most likely to have group a β -hemolytic streptococcus³.

Questions:

Thank you for your continued support and commitment to the care of our members. If you have questions about this communication, please contact AmeriHealth Caritas Louisiana's Provider Services department at 1-888-922-0007 or your [Provider Network Management Account Executive](#).

Missed an alert?

You can always find a complete listing of provider alerts on the [Newsletters and Updates](#) page of our website.

Need to update your provider information? Send full details to network@amerihealthcaritasla.com

Where can I find more information on COVID-19?

AmeriHealth Caritas Louisiana has updated its website to streamline communications and important notifications about COVID-19. Please visit <http://amerihealthcaritasla.com/covid-19> for update-to-date information for both providers and members, including frequently asked questions, cancellations and postponements, and important provider alerts from AmeriHealth Caritas Louisiana and the Louisiana Department of Health.

References:

1. Centers for Disease Control and Prevention. (n.d.). CDC Grand Rounds: Getting Smart about Antibiotics. *Centers for Disease Control and Prevention*. Retrieved September 13, 2022, from <https://www.cdc.gov/mmwr/preview/mmwrhtml/mm6432a3.htm>
2. Centers for Disease Control and Prevention. (2021, November 1). Antibiotic Use in the United States, 2021 Update: Progress and Opportunities. *Centers for Disease Control and Prevention*. Retrieved September 15, 2022, from <https://www.cdc.gov/antibiotic-use/stewardship-report/current.html>
3. Gill J.M., Fleischut P., Haas S., Pellini B., Crawford A., Nash D.B. Use of Antibiotics for Adult Upper Respiratory Infections in Outpatient Settings: A National Ambulatory Network Study. *Fam Med*. 2006 May;38(5):349-54. PMID: 16673197.