Get Smart: Know When Antibiotics Work in New York State

Identification and Intervention in Outpatient Settings

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Identification

Identify outpatient settings with high rates of potentially-avoidable antibiotic use among patients with upper respiratory infections for intervention.

- Antibiotic prescribing data
  - 2013 NYS Medicaid outpatient visit and pharmacy claims data
  - Upper respiratory infections (URI) that don’t usually require antibiotics
  - Adults (18 to 64 yrs)
  - Established county-level rates for antibiotics filled within four days of outpatient URI visit
- Provider zip codes for mapping

Messaging

Notify healthcare providers of the concerning antibiotic use in their county

- Outpatient providers most likely to prescribe antibiotics for URI
  - Internal medicine
  - Family practice
  - Emergency care
- Letter & map “ice breaker”
- Follow-up educational materials
- Inform of the issue
- Seek Peer Champions

Outreach

- Targeted the counties with the highest rates
  - Direct message
  - All identifiable healthcare providers in the selected counties
  - Mailings sent to >2,900 providers
Thank you!

Questions?

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References


• CDC Get Smart Programs Website: http://www.cdc.gov/getsmart/index.html

Methods – more info

Setting: outpatient: ED, Institutional Outpatient, Professional Outpatient
Population: Non-dual Medicaid enrollee with at least 60 days (2 months) or eligibility prior to visit and 7 days post visit.
Age groups: Children 3 months to 17 years, Adults 18 to 64
Diagnosis: primary diagnosis of URI (cold 460, acute URI 461, or acute bronchitis 466) and no secondary diagnoses that might require antibiotics (i.e. otitis media 382), nonsuppurative otitis media (381.3-381.4), chronic sinusitis (473), sinusitis (461), acute pharyngitis (462), acute tonsillitis (463), acute laryngitis (464), pneumonia (481-486), strep throat (394.2), URI (559, 591, 597, 599), bacterial infections (991), emphysema (493), and chronic bronchitis (491). Excluded patients diagnosed with COPD (491.20-491.21, 492.0-492.8, 494, 495.0-495.9, 496) or asthma (493) within 1 year prior and 7 days following the index date.
Index Episode: Earliest URI visit in 2013 for a patient that has negative medication history for 30 days prior to episode and no competing diagnosis.