



Annual Percentage of Asthma Patients with One or More Asthma-Related Emergency Room Visits

Measurement Year 2021 Performance Measures

This performance measure assesses the percentage of children and adolescents, two years of age through 19 years of age, with an asthma diagnosis who have ≥ 1 emergency department (ED) visit during 2021.

Eligible Population

CHIP enrollees two years of age as of January 1, 2021 and no older than 19 years of age as of December 31, 2021 (date of birth between January 1, 2002 and January 1, 2019)

- Medicaid does not report on the Annual Percentage of Asthma Patients with One or More Asthma-Related Emergency Room Visits PAPM

How is Care Captured for this Measure?

ED visits with an accompanying diagnosis code will count towards the measure rate.

- Only include ED visits once child is 2 years old.
- If a child becomes 2 years old during reporting period, only include ED visits after the child's second birthday.

Numerator Codes

There is a large list of approved NCQA codes used to identify the services included in the performance measures in this document.

The following are just a few of the approved codes. For a complete list please reach out to your dedicated Quality Practice Liaison (QPL) or the Quality Management Department at AetnaBetterHealthPAQM@Aetna.com.

Code Class	Codes	Description
CPT	99281-99285	ED visit
ICD-10-CM	J4521	Mild intermittent asthma with (acute) exacerbation
ICD-10-CM	J4541	Moderate persistent asthma with (acute) exacerbation
ICD-10-CM	J4551	Severe persistent asthma with (acute) exacerbation

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Strategies to Manage Asthma and Decrease Exacerbations

- Outreach members to schedule follow-up visits as need for condition maintenance and exacerbation.
- Talk to the patient about the importance of medication adherence and scheduling follow-up visits, even if they feel better.
- Educate the patient on reducing triggers in their home, school, work, and environment that could exacerbate their condition.
- Include as part of the health care team patient advocates or family members to support the patients' health goals and advise practices. This extra support could decrease exacerbations that could place the member in the ED.
- Develop asthma action plans with patients and education on reduction of asthma triggers
- Ask the patient about their health goals and preferences.
 - Collaborate with the patient and customize the treatment to meet these goals.
 - Providing simple and clear instructions as low health literacy can impact a patient's health
 - Simplify treatment regimen • Involve family in treatment planning if patient needs additional support.
- Advise patients to incorporate inhalers into daily routine – i.e. keep inhalers in the bathroom and utilize medication during morning routine.
 - Help with utilizing inhalers when first prescribed.