

## Outcome Measure #1: Reduce excessive daytime sleepiness

Measure Description	
<b>Description</b>	Number of patients diagnosed with narcolepsy who received an evidence-based pharmacologic treatment that showed improvement in their subjective sleepiness

Measure Components	
<b>Denominator Statement</b>	<p>All patients diagnosed with narcolepsy who received an evidence-based pharmacologic treatment and completed a validated sleepiness instrument at baseline and subsequent visits</p> <p><b>Definition:</b> For the purposes of this measure, validated sleepiness instruments include, but are not limited to: Epworth Sleepiness Scale, Epworth Sleepiness Scale modified, Stanford Sleepiness Scale, Karolinska Sleepiness Scale, Cleveland Adolescent Sleepiness Questionnaire, Pediatric Daytime Sleepiness Scale, or a Visual Analog Scale</p>
<b>Exceptions</b>	<p><b>Medical reasons:</b> Patients on escalating sedating medication regimen administered for comorbid conditions (e.g., opioids for pain, barbiturates for seizures); patients with documented contraindications to recommended evidence-based pharmacologic treatment</p> <p><b>Patient reasons:</b> Patient and/or caregiver declines or is unable to complete sleepiness instrument; Patient and/or caregiver declines prescribed treatment</p> <p><b>System reasons:</b> None</p>
<b>Numerator Statement</b>	Number of patients who showed improvement in their subjective sleepiness (assessed with a validated sleepiness instrument)

## **Technical Specifications: Administrative/Claims Data**

Administrative claims data collection requires users to identify the eligible population (denominator) and numerator using codes recorded on claims or billing forms (electronic or paper). Users report a rate based on all patients in a given practice for whom data are available and who meet the eligible population/denominator criteria.

<p><b>Denominator (Eligible Population)</b></p>	<p>One of the following diagnosis codes indicating narcolepsy:  G47.411 (Narcolepsy Type 1 (Narcolepsy with cataplexy))  G47.419 (Narcolepsy Type 2 (Narcolepsy without cataplexy))  G47.421 (Narcolepsy in conditions classified elsewhere with cataplexy)  G47.429 (Narcolepsy in conditions classified elsewhere without cataplexy)</p> <p><b>Accompanied by</b>  One of the following patient encounter codes:  90832, 90792, 99202, 99203, 99204, 99205 (office/other outpatient services – new patient)  99211, 99212, 99213, 99214, 99215 (office/other outpatient services – established patient)  99241, 99242, 99243, 99244, 99245 (office consultations, non-Medicare only)</p> <p>Documentation that the patient was started on an evidence-based pharmacologic treatment <u>AND</u> that the patient completed a validated sleepiness instrument at baseline and subsequent visits</p> <p>Definition: For the purposes of this measure, evidence-based pharmacologic treatments may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• Modafinil</li> <li>• Pitolisant</li> <li>• Sodium Oxybate</li> <li>• Solriamfetol</li> <li>• Armodafinil</li> <li>• Dextroamphetamine</li> <li>• Methylphenidate</li> </ul> <p>Note: For the purposes of this measure, evidence-based pharmacologic treatment may also include medications that have been FDA approved for the treatment of narcolepsy since the most recent AASM clinical practice guideline publication.</p> <p>Definition: For the purposes of this measure, validated sleepiness instruments may include, but are not limited to: Epworth Sleepiness Scale, Epworth Sleepiness Scale modified, Stanford Sleepiness Scale, Karolinska Sleepiness Scale, Cleveland Adolescent Sleepiness Questionnaire, Pediatric Daytime Sleepiness Scale, or a Visual Analog Scale</p> <p><i><b>NOTE:</b> Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, 95, or POS 02 modifiers) are allowable</i></p>
---	---

<p><b>Exceptions</b></p>	<p><b>At least one of the following is documented in the patient chart:</b></p> <ul style="list-style-type: none"> <li>• Patient is on escalating sedating medication regimen administered for comorbid conditions (e.g., opioids for pain, barbiturates for seizures)</li> <li>• Patient with documented contraindications to the recommended evidence-based pharmacologic treatment</li> <li>• Patient and/or caregiver declines or is unable to complete sleepiness instrument</li> <li>• Patient and/or caregiver declines prescribed treatment</li> </ul>
<p><b>Numerator</b></p>	<p><b>Chart review indicates:</b></p> <ul style="list-style-type: none"> <li>• Patient's subjective sleepiness has improved as compared to baseline measurement</li> </ul>

## Process Measure #1: Assessment of sleepiness

Measure Description	
Description	Number of patients diagnosed with narcolepsy whose sleepiness was assessed with a validated sleepiness instrument at every visit

Measure Components	
Denominator Statement	All patients diagnosed with narcolepsy
Exceptions	<p><b>Medical Reasons:</b> None</p> <p><b>Patient Reasons:</b> Patient and/or caregiver declines or is unable to complete sleepiness instrument</p> <p><b>System Reasons:</b> None</p>
Numerator Statement	<p>Number of patients whose sleepiness was assessed with a validated sleepiness instrument at every visit.</p> <p>Definition: For the purposes of this measure, validated sleepiness instruments may include, but are not limited to: Epworth Sleepiness Scale, Epworth Sleepiness Scale modified, Stanford Sleepiness Scale, Karolinska Sleepiness Scale, Cleveland Adolescent Sleepiness Questionnaire, Pediatric Daytime Sleepiness Scale, or a Visual Analog Scale</p>

<b>Technical Specifications: Administrative/Claims Data</b>
---

Administrative claims data collection requires users to identify the eligible population (denominator) and numerator using codes recorded on claims or billing forms (electronic or paper). Users report a rate based on all patients in a given practice for whom data are available and who meet the eligible population/denominator criteria.

<p><b>Denominator (Eligible Population)</b></p>	<p>One of the following diagnosis codes indicating narcolepsy:  G47.411 (Narcolepsy Type 1 (Narcolepsy with cataplexy))  G47.419 (Narcolepsy Type 2 (Narcolepsy without cataplexy))  G47.421 (Narcolepsy in conditions classified elsewhere with cataplexy)  G47.429 (Narcolepsy in conditions classified elsewhere without cataplexy)</p> <p><b>Accompanied by</b>  One of the following patient encounter codes:  99202, 99203, 99204, 99205 (office/other outpatient services – new patient)  99211, 99212, 99213, 99214, 99215 (office/other outpatient services – established patient)</p> <p><i><b>NOTE:</b> Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, 95, or POS 02 modifiers) are allowable</i></p>
<p><b>Exceptions</b></p>	<p><b>At least one of the following is documented in the patient chart:</b></p> <ul style="list-style-type: none"> <li>• Patient and/or caregiver declines or is unable to complete sleepiness instrument</li> </ul>
<p><b>Numerator</b></p>	<p><b>Chart review indicates:</b></p> <ul style="list-style-type: none"> <li>• Patient’s sleepiness was measured using a validated sleepiness instrument. Measurement of sleepiness took place during every visit</li> <li>• Definition: For the purposes of this measure, validated sleepiness instruments may include, but are not limited to: Epworth Sleepiness Scale, Epworth Sleepiness Scale modified, Stanford Sleepiness Scale, Karolinska Sleepiness Scale, Cleveland Adolescent Sleepiness Questionnaire, Pediatric Daytime Sleepiness Scale, or a Visual Analog Scale</li> </ul>

## Process Measure #2: Recommendation of an Evidence-Based Pharmacologic Treatment Plan following initial diagnosis

Measure Description	
<b>Description</b>	Number of patients with a new diagnosis of narcolepsy who were recommended an evidence-based pharmacologic treatment plan for symptoms within 1 month of new narcolepsy diagnosis.

Measure Components	
<b>Denominator Statement</b>	All patients newly diagnosed with narcolepsy
<b>Exceptions</b>	<p><b>Medical reasons:</b> Patient is pregnant and/or breastfeeding; medical or psychiatric condition that precludes safe use of pharmacologic narcolepsy treatment</p> <p><b>Patient reasons:</b> None</p> <p><b>System reasons:</b> None</p>

<b>Numerator Statement</b>	<p>Number of patients who were recommended an evidence-based pharmacologic treatment plan within 1 month of new narcolepsy diagnosis.</p> <p>Definition: For the purposes of this measure, evidence-based pharmacologic treatments may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• Modafinil</li> <li>• Pitolisant</li> <li>• Sodium Oxybate</li> <li>• Solriamfetol</li> <li>• Armodafinil</li> <li>• Dextroamphetamine</li> <li>• Methylphenidate</li> </ul> <p>Note: Evidence-based pharmacologic treatment may also include medications that have been FDA approved for the treatment of narcolepsy since the most recent AASM clinical practice guideline publication.</p>
----------------------------	---

<b>Technical Specifications: Administrative/Claims Data</b>	
Administrative claims data collection requires users to identify the eligible population (denominator) and numerator using codes recorded on claims or billing forms (electronic or paper). Users report a rate based on all patients in a given practice for whom data are available and who meet the eligible population/denominator criteria.	
<b>Denominator (Eligible Population)</b>	<p>One of the following diagnosis codes indicating narcolepsy, assigned to the patient for the first time (new diagnosis):</p> <p>G47.411 (Narcolepsy Type 1 (Narcolepsy with cataplexy))  G47.419 (Narcolepsy Type 2 (Narcolepsy without cataplexy))  G47.421 (Narcolepsy in conditions classified elsewhere with cataplexy)  G47.429 (Narcolepsy in conditions classified elsewhere without cataplexy)</p> <p><b>Accompanied by</b>  One of the following patient encounter codes:  99202, 99203, 99204, 99205 (office/other outpatient services – new patient)</p>



	<p>99211, 99212, 99213, 99214, 99215 (office/other outpatient services – established patient)</p> <p><i><b>NOTE:</b> Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, 95, or POS 02 modifiers) are allowable</i></p>
<p><b>Exceptions</b></p>	<p><b>At least one of the following is documented in the patient chart:</b></p> <ul style="list-style-type: none"> <li>• Patient is pregnant and/or breastfeeding</li> <li>• Medical or psychiatric condition that precludes safe use of pharmacologic narcolepsy treatment</li> </ul>
<p><b>Numerator</b></p>	<p><b>Chart review indicates:</b> Documentation of prescription for at least one evidence-based pharmacologic treatment which may include, but are not limited to the following:</p> <ul style="list-style-type: none"> <li>• Modafinil</li> <li>• Pitolisant</li> <li>• Sodium Oxybate</li> <li>• Solriamfetol</li> <li>• Armodafinil</li> <li>• Dextroamphetamine</li> <li>• Methylphenidate</li> </ul> <p>Note: Evidence-based pharmacologic treatment may also include medications that have been FDA approved for the treatment of narcolepsy since the most recent AASM clinical practice guideline publication.</p> <p>Evidence-based pharmacologic treatment plan was recommended within one month of the patient receiving a new diagnosis of narcolepsy</p>

### Process Measure #3: Comprehensive sleep history and physical exam

Measure Description	
<b>Description</b>	Number of patients diagnosed with narcolepsy with documentation that a comprehensive sleep history and physical examination was completed at or before the time of diagnosis.

Measure Components	
<b>Denominator Statement</b>	All patients diagnosed with narcolepsy
<b>Exceptions</b>	<p><b>Medical Reasons:</b> None</p> <p><b>Patient Reasons:</b> None</p> <p><b>System Reasons:</b> None</p>
<b>Numerator Statement</b>	<p>Number of patients with documentation that a comprehensive sleep history and physical examination was completed at the time of the diagnosis.</p> <p>Definition: For the purposes of this measure, a sleep history includes at minimum documentation of a thorough general physical and neurological examination, sleep-wake patterns, cataplexy, signs and symptoms suggestive of sleep disordered breathing, current medications, and other potential co-morbidities which may contribute to excessive daytime sleepiness (e.g., history of traumatic brain injury or history of psychiatric conditions).</p> <p><i>Note:</i> If documentation is not available from the initial diagnosis or if the original sleep history is insufficient/incomplete, a comprehensive history and exam would be required when transferring care to another physician.</p>

## Technical Specifications: Administrative/Claims Data

Administrative claims data collection requires users to identify the eligible population (denominator) and numerator using codes recorded on claims or billing forms (electronic or paper). Users report a rate based on all patients in a given practice for whom data are available and who meet the eligible population/denominator criteria.

<p><b>Denominator (Eligible Population)</b></p>	<p><b>One of the following diagnosis codes indicating narcolepsy:</b>  G47.411 (Narcolepsy Type 1 (Narcolepsy with cataplexy))  G47.419 (Narcolepsy Type 2 (Narcolepsy without cataplexy))  G47.421 (Narcolepsy in conditions classified elsewhere with cataplexy)  G47.429 (Narcolepsy in conditions classified elsewhere without cataplexy)</p> <p><b>Accompanied by</b>  One of the following patient encounter codes:  99202, 99203, 99204, 99205 (office/other outpatient services – new patient)  99211, 99212, 99213, 99214, 99215 (office/other outpatient services – established patient)</p>
<p><b>Exceptions</b></p>	<p>None</p>
<p><b>Numerator</b></p>	<p><b>Chart review indicates:</b></p> <ul style="list-style-type: none"> <li>• Patient received a comprehensive sleep history and physical examination at or before time of diagnosis (first time diagnosis code was assigned).</li> </ul> <p>Definition: For the purposes of this measure, a sleep history includes at minimum documentation of a thorough general physical and neurological examination, sleep-wake patterns, cataplexy, signs and symptoms suggestive of sleep disordered breathing, current medications, and other potential co-morbidities which may contribute to excessive daytime sleepiness (e.g., history of traumatic brain injury or history of psychiatric conditions).</p> <p><b>Note:</b> If documentation is not available from the initial diagnosis or if the original sleep history is insufficient/incomplete, a comprehensive history and exam would be required when transferring care to another physician.</p>

## Process Measure #4: Objective sleep assessment

Measure Description	
<b>Description</b>	Number of patients newly diagnosed with narcolepsy who have undergone objective sleep testing at the time of initial diagnosis.

Measure Components	
<b>Denominator Statement</b>	All patients newly diagnosed with narcolepsy
<b>Exceptions</b>	<p><b>Medical Reasons:</b> None</p> <p><b>Patient Reasons:</b> None</p> <p><b>System Reasons:</b> None</p>
<b>Numerator Statement</b>	<p>Number of patients who have undergone objective sleep testing at the time of the initial diagnosis.</p> <p>Definition: For the purposes of this measure, sleep testing for Narcolepsy is defined as the performance of a polysomnogram (PSG) with multiple sleep latency test (MSLT) or CSF hypocretin, in accordance with the most recent ICSD recommendations.</p>

Technical Specifications: Administrative/Claims Data
Administrative claims data collection requires users to identify the eligible population (denominator) and numerator using codes recorded on claims or billing forms (electronic or paper). Users report a rate based on all patients in a given practice for whom data are available and who meet the eligible population/denominator criteria.

<b>Denominator (Eligible Population)</b>	<p>One of the following diagnosis codes indicating narcolepsy:  G47.411 (Narcolepsy Type 1 (Narcolepsy with cataplexy))  G47.419 (Narcolepsy Type 2 (Narcolepsy without cataplexy))  G47.421 (Narcolepsy in conditions classified elsewhere with cataplexy)  G47.429 (Narcolepsy in conditions classified elsewhere without cataplexy)</p> <p><b>Accompanied by</b>  One of the following patient encounter codes:  99202, 99203, 99204, 99205 (office/other outpatient services – new patient)  99211, 99212, 99213, 99214, 99215 (office/other outpatient services – established patient)</p> <p><b>NOTE:</b> Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, 95, or POS 02 modifiers) are allowable</p>
<b>Exceptions</b>	<p>None</p>
<b>Numerator</b>	<p><b>Chart review indicates the following testing was completed in order to diagnose the patient:</b></p> <ul style="list-style-type: none"> <li>• Polysomnography coded as 95782 (&lt; 6 years of age) or 95810 (≥ 6 years of age)</li> <li>• Multiple sleep latency testing coded as 95805</li> <li>• CSF hypocretin-1 measurement coded as 83519 or evidence that CSF hypocretin-1 has been measured (e.g., office visit notes or lab results)</li> </ul>

## Process Measure #5: Treatment Follow-up

Measure Description	
<b>Description</b>	Number of patients newly diagnosed with narcolepsy and started on evidence-based pharmacologic treatment that received reassessment of symptoms and functionality within 4 months after treatment initiation and at least annually thereafter

Measure Components	
<b>Denominator Statement</b>	<p>All patients newly diagnosed with narcolepsy who were started on an evidence-based pharmacologic treatment</p> <p>Definition: For the purposes of this measure, evidence-based pharmacologic treatments may include, but are not limited to:</p> <ul style="list-style-type: none"><li>• Modafinil</li><li>• Pitolisant</li><li>• Sodium Oxybate</li><li>• Solriamfetol</li><li>• Armodafinil</li><li>• Dextroamphetamine</li><li>• Methylphenidate</li></ul> <p>Note: For the purposes of this measure, evidence-based pharmacologic treatment may also include medications that have been FDA approved for the treatment of narcolepsy since the most recent AASM clinical practice guideline publication.</p>

<p><b>Exceptions</b></p>	<p><b>Medical Reasons:</b> Patient is pregnant and/or breastfeeding; medical or psychiatric condition that precludes safe use of pharmacologic narcolepsy treatment</p> <p><b>Patient Reasons:</b> Patient and/or caregiver declines treatment; patient does not return for follow-up and/or transitioned to a different provider; prohibitive cost affecting adherence</p> <p><b>System Reasons:</b> Payer does not cover evidence-based treatment</p>
<p><b>Numerator Statement</b></p>	<p>Number of patients for whom reassessment* of symptoms and functionality is performed within 4 months after treatment initiation and at least annually thereafter.</p> <p>*Reassessment of symptoms can be done by direct interview with patient in the office, by phone, or by other HIPAA compliant electronic means. Reassessment <b>may</b> include, but is not limited to, evaluating the following suggested dimensions during follow-up:</p> <p><i>Core/common symptoms of narcolepsy:</i></p> <ul style="list-style-type: none"> <li>• Daytime sleepiness</li> <li>• Cataplexy</li> <li>• Sleep paralysis</li> <li>• Sleep disordered breathing</li> <li>• Hypnagogic/hypnopompic hallucinations</li> <li>• Disturbed sleep through the night</li> <li>• Nightmares</li> <li>• Automatic behaviors</li> <li>• Cognitive concerns (memory loss, low motivation, difficulties with concentration/attention)</li> </ul> <p><i>Co-morbid Conditions with Narcolepsy</i></p> <ul style="list-style-type: none"> <li>• Obesity</li> <li>• Depression/Anxiety</li> <li>• Obstructive Sleep Apnea</li> <li>• Periodic Limb Movements of Sleep</li> <li>• REM Behavior Disorder</li> <li>• Precocious Puberty</li> <li>• Cardiovascular conditions</li> </ul> <p><i>Conditions that require change in management</i></p> <ul style="list-style-type: none"> <li>• Pregnancy</li> <li>• Breastfeeding</li> <li>• New medical diagnosis or medications that may cause drug-drug interactions</li> <li>• Side effects</li> <li>• Adherence issues</li> </ul> <p><i>Functional Status</i></p>

- Injuries associated with narcolepsy and/or cataplexy
- Driving Safety
- Academic and work productivity
- Social functioning/social relationships
- General activity level

Definition: For the purposes of this measure, validated sleepiness instruments may include, but are not limited to: Epworth Sleepiness Scale, Epworth Sleepiness Scale modified, Stanford Sleepiness Scale, Karolinska Sleepiness Scale, Cleveland Adolescent Sleepiness Questionnaire, Pediatric Daytime Sleepiness Scale, or a Visual Analog Scale

### **Technical Specifications: Administrative/Claims Data**

Administrative claims data collection requires users to identify the eligible population (denominator) and numerator using codes recorded on claims or billing forms (electronic or paper). Users report a rate based on all patients in a given practice for whom data are available and who meet the eligible population/denominator criteria.



<p><b>Denominator (Eligible Population)</b></p>	<p>One of the following diagnosis codes indicating narcolepsy:  G47.411 (Narcolepsy Type 1 (Narcolepsy with cataplexy))  G47.419 (Narcolepsy Type 2 (Narcolepsy without cataplexy))  G47.421 (Narcolepsy in conditions classified elsewhere with cataplexy)  G47.429 (Narcolepsy in conditions classified elsewhere without cataplexy)</p> <p><b>Accompanied by</b>  One of the following patient encounter codes:  99202, 99203, 99204, 99205 (office/other outpatient services – new patient)  99211, 99212, 99213, 99214, 99215 (office/other outpatient services – established patient)</p> <p>Documentation that the patient was started on an evidence-based pharmacologic treatment</p> <p>Definition: For the purposes of this measure, evidence-based pharmacologic treatments may include, but are not limited to:</p> <ul style="list-style-type: none"> <li>• Modafinil</li> <li>• Pitolisant</li> <li>• Sodium Oxybate</li> <li>• Solriamfetol</li> <li>• Armodafinil</li> <li>• Dextroamphetamine</li> <li>• Methylphenidate</li> </ul> <p>Note: For the purposes of this measure, evidence-based pharmacologic treatment may also include medications that have been FDA approved for the treatment of narcolepsy since the most recent AASM clinical practice guideline publication.</p> <p><i><b>NOTE:</b> Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, 95, or POS 02 modifiers) are allowable</i></p>
---	--

<p><b>Exceptions</b></p>	<p><b>At least one of the following is documented in the patient chart:</b></p> <ul style="list-style-type: none"> <li>• Patient is pregnant and/or breastfeeding</li> <li>• Medical or psychiatric condition that precludes safe use of pharmacologic narcolepsy treatment</li> <li>• Patient and/or caregiver declines treatment</li> <li>• Patient does not return for follow-up and/or transitioned to a different provider</li> <li>• Prohibitive cost affecting adherence</li> <li>• Payer does not cover evidence-based treatment</li> </ul>
<p><b>Numerator</b></p>	<p><b>Chart review indicates:</b></p> <ul style="list-style-type: none"> <li>• Patient has a follow-up evaluation one of the following ways: <ul style="list-style-type: none"> <li>○ Patient has follow-up visit with the treating physician (visit coded as 99211, 99212, 99213, 99214 or 99215)</li> <li>○ Patient has non-face-to-face follow-up visit via telephone with the treating physician documented in the patient record or visit coded as 99441, 99442, or 99443.</li> <li>○ Reassessment of symptoms by other HIPAA compliant electronic means.</li> </ul> </li> <li>• Follow-up visit for reassessment of symptoms and functionality is performed within 4 months after treatment initiation and at least annually thereafter.</li> </ul>

## Process Measure #6: Documented medication counseling

Measure Description	
<b>Description</b>	Number of patients diagnosed with narcolepsy in whom a new narcolepsy medication is prescribed with documentation that counseling was received regarding side effects of medications or interactions with other medications before or at the time of a newly prescribed narcolepsy medication.

Measure Components	
<b>Denominator Statement</b>	All patients diagnosed with narcolepsy in whom a new narcolepsy medication is prescribed.
<b>Exceptions</b>	<p><b>Medical Reasons:</b> None</p> <p><b>Patient Reasons:</b> None</p> <p><b>System Reasons:</b> None</p>
<b>Numerator Statement</b>	Number of patients with documentation that counseling was received regarding side effects of narcolepsy medications or interactions with other medications before or at the time of a newly prescribed narcolepsy medication.

Technical Specifications: Administrative/Claims Data
Administrative claims data collection requires users to identify the eligible population (denominator) and numerator using codes recorded on claims or billing forms (electronic or paper). Users report a rate based on all patients in a given practice for whom data are available and who meet the eligible population/denominator criteria.

<b>Denominator (Eligible Population)</b>	<p>One of the following diagnosis codes indicating narcolepsy:  G47.411 (Narcolepsy Type 1 (Narcolepsy with cataplexy))  G47.419 (Narcolepsy Type 2 (Narcolepsy without cataplexy))  G47.421 (Narcolepsy in conditions classified elsewhere with cataplexy)  G47.429 (Narcolepsy in conditions classified elsewhere without cataplexy)</p> <p><b>Accompanied by</b>  One of the following patient encounter codes:  99202, 99203, 99204, 99205 (office/other outpatient services – new patient)  99211, 99212, 99213, 99214, 99215 (office/other outpatient services – established patient)</p> <p><b>Accompanied by</b>  Prescription for medication(s) for the treatment of narcolepsy</p> <p><i><b>NOTE:</b> Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, 95, or POS 02 modifiers) are allowable</i></p>
<b>Exceptions</b>	None
<b>Numerator</b>	<p><b>Chart review indicates:</b></p> <ul style="list-style-type: none"> <li>• Patient has received counseling regarding side effects of medication(s) and potential medication interactions</li> <li>• Counseling occurs either before or at the time of a newly prescribed narcolepsy medication.</li> </ul>

## Process Measure #7: Documented safety measure counseling

Measure Description	
<b>Description</b>	Number of patients diagnosed with narcolepsy who received documented age-appropriate safety measure counseling before or at the time of diagnosis, and at subsequent narcolepsy related visits.

Measure Components	
<b>Denominator Statement</b>	All patients diagnosed with narcolepsy
<b>Exceptions</b>	<p><b>Medical Reasons:</b> None</p> <p><b>Patient Reasons:</b> None</p> <p><b>System Reasons:</b> None</p>
<b>Numerator Statement</b>	<p>Number of patients who received documented age-appropriate safety measure counseling before or at the time of diagnosis, and at subsequent narcolepsy related visits</p> <p>Note: Potential dangers of sleepiness and/or cataplexy may occur at any time and may place individuals or others at risk of injury (e.g. while driving, biking, cooking)</p> <p>Note: Education may be provided to parent and/or caregiver when appropriate</p>

Technical Specifications: Administrative/Claims Data
Administrative claims data collection requires users to identify the eligible population (denominator) and numerator using codes recorded on claims or billing forms (electronic or paper). Users report a rate based on all patients in a given practice for whom data are available and who meet the eligible population/denominator criteria.

<p><b>Denominator (Eligible Population)</b></p>	<p>One of the following diagnosis codes indicating narcolepsy:  G47.411 (Narcolepsy Type 1 (Narcolepsy with cataplexy))  G47.419 (Narcolepsy Type 2 (Narcolepsy without cataplexy))  G47.421 (Narcolepsy in conditions classified elsewhere with cataplexy)  G47.429 (Narcolepsy in conditions classified elsewhere without cataplexy)</p> <p><b>Accompanied by</b>  One of the following patient encounter codes:  99202, 99203, 99204, 99205 (office/other outpatient services – new patient)  99211, 99212, 99213, 99214, 99215 (office/other outpatient services – established patient)</p> <p><i>NOTE: Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, 95, or POS 02 modifiers) are allowable</i></p>
<p><b>Exceptions</b></p>	<p>None</p>
<p><b>Numerator</b></p>	<p><b>Chart review indicates:</b></p> <ul style="list-style-type: none"> <li>• Patient has received age-appropriate safety measure counseling regarding potential dangers of sleepiness and/or cataplexy</li> <li>• Counseling is provided before or at the time the diagnosis of narcolepsy, and subsequent visits (coded as G47.411, G47.419, G47.421 or G47.429) is assigned.</li> </ul>