

Pediatric OSA Measure Reporting Workbook

Identifying eligible patients and extracting quality measure-related information in order to report on each measure should be done by each individual Workgroup member. You may discuss strategies with your staff, but at least 2-3 of the 10 charts for each measure should be pulled and reviewed by yourself in order to be able to provide the most informative feedback.

- 1) Pull some pediatric patient charts from the previous reporting year who have the diagnosis of **obstructive sleep apnea (OSA)**. In order to determine eligibility, go onto Question #2 for each chart.
- 2) Does the patient meet the rest of the denominator criteria (if any)?*
 - If yes, go to Question #3.
 - If no, this patient is ineligible, pull another patient chart. (Keep track of why patients were ineligible)

*i.e. for Process Measure #2, they not only have to be <18 years old with complex medical conditions known to be at high risk for OSA, but they also have to have signs and symptoms of OSA
- 3) Does the patient meet any of the exception criteria (if any)?
 - If yes, this patient is ineligible, pull another patient chart. (Keep track of why patients were ineligible)
 - If no, this is an ELIGIBLE chart, go to Question #4.
- 4) Collect the **FIRST** 10 eligible patient charts using the process outlined in #1-3 above.**

** The same group of patient charts may be used to report multiple measures if the measures have the same denominator and exceptions.
- 5) Answer the questions below and fill out the highlighted yellow cells in the following tabs for each measure.

Have you ever reported pediatric OSA quality measures? If yes, which measures?

Please describe your clinical setting (academic, small/large health system, clinic, etc...)

Process Measure #1:	Proportion of patients aged < 18 years diagnosed with OSA that showed an improvement in OSA signs and symptoms within 12 months after initiation of a management plan
Denominator	<p>All patients aged < 18 years diagnosed with OSA who initiated a management plan</p> <p>Patient is younger than 18 years of age</p> <p>Accompanied by One of the following diagnosis codes indicating obstructive sleep apnea: G47.33 Obstructive sleep apnea (adult) (pediatric) G47.30 Unspecified sleep apnea</p> <p>Accompanied by 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) 99241, 99242, 99243, 99244, 99245 (consult)</p> <p>NOTE: Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, 95, or POS 02 modifiers) are allowable</p>
Exceptions	<p>At least one of the following is documented in the patient chart:</p> <ul style="list-style-type: none"> • Patient does not return for follow-up • Patient or caregiver declines treatment • Patient cannot afford treatment or patient's insurance (payer) does not provide coverage
Numerator	<p>Chart review indicates:</p> <ul style="list-style-type: none"> • Patient has documented improvement in at least one of the OSA signs and symptoms

A) How many charts did you have to review before finding the first 10 patients that were eligible? _____

B) Were there any reasons that came up several times which caused patients to be ineligible? _____

C) **Note: This is only a sample of patients. If you would like to review a larger sample, please reach out to the AASM at quality@aasm.org**

<u>Eligible Chart #</u>	<u>Was the numerator criteria met?</u> (0=not met, 1=met)	<u>Was the reason the numerator was NOT met, captured by an exception (or other reason)?</u>
Chart #1		
Chart #2		
Chart #3		
Chart #4		

Chart #5		
Chart #6		
Chart #7		
Chart #8		
Chart #9		
Chart #10		
Total # charts that met the numerator criteria:	0	
Performance Rate %	0%	
Exception Rate %	0%	

D) Did you extract information from an EHR or by chart review for the following? (pick from drop-down menu)

	<u>Data Source (EHR or Chart Review?)</u>
Denominator	
Exceptions	
Numerator	

E) Measure Threshold

F) Was your Measure Threshold met? (0=not met, 1=met)

Process Measure #2:	Proportion of patients aged < 18 years with snoring that had documentation of an assessment of at least one additional sign or symptom or risk factor of obstructive sleep apnea from the patient's history or physical examination at baseline visit
Denominator	<p>All patients aged < 18 years with snoring</p> <p>Patient is younger than 18 years of age.</p> <p>Accompanied by Documentation that patient snores or has noisy breathing (self-reported or caregiver reported)</p> <p>OR</p> <p>One of the following diagnosis codes: G47.30 Sleep apnea, unspecified G47.33 Obstructive sleep apnea (adult) (pediatric) R06.83 Snoring</p> <p>Accompanied by 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) 99241, 99242, 99243, 99244, 99245 (consult)</p> <p>NOTE: Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, 95, or POS 02 modifiers) are allowable</p>
Exceptions	None
Numerator	<p>Chart review indicates:</p> <ul style="list-style-type: none"> • Patient with snoring who is being assessed for obstructive sleep apnea and has at least one additional sign or symptom or risk factor of obstructive sleep apnea from the patient's history or physical examination documented at baseline visit

- How many charts did you have to review before finding the first 10 patients that were
- A) eligible? _____
- B) Were there any reasons that came up several times which caused patients to be ineligible? _____

- C) **Note: This is only a sample of patients. If you would like to review a larger sample, please reach out to the AASM at quality@aasm.org**

<u>Eligible Chart #</u>	<u>Was the numerator criteria met? (0=not met, 1=met)</u>	<u>Was the reason the numerator was NOT met, captured by an exception (or other reason)?</u>
Chart #1		
Chart #2		

Chart #3		
Chart #4		
Chart #5		
Chart #6		
Chart #7		
Chart #8		
Chart #9		
Chart #10		
Total # charts that met the numerator criteria:	0	
Performance Rate %	0%	
Exception Rate %	0%	

Did you extract information from an EHR or by chart review for the following? (pick from drop-down menu)

	<u>Data Source (EHR or Chart Review?)</u>
Denominator	
Exceptions	
Numerator	

E) Measure Threshold

F) Was your Measure Threshold met? (0=not met, 1=met)

Process Measure #3:	Proportion of patients aged < 18 years with snoring and at least one sign, symptom, or risk of OSA that are offered an evidence-based action plan within 12 months of the visit in which the signs and symptoms of OSA were first discussed
Denominator	<p>All patients aged < 18 years with snoring and at least one sign, symptom, or risk of OSA</p> <p>Patient is younger than 18 years of age.</p> <p>Accompanied by Documentation of signs or symptoms of OSA</p> <p>OR</p> <p>One of the following diagnosis codes indicating OSA signs and symptoms: G47.10 Hypersomnia, unspecified G47.30 Unspecified sleep apnea R06.83 Snoring R06.89 Other abnormalities of breathing G47.33 Obstructive sleep apnea (adult) (pediatric)</p> <p>Accompanied by 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) 99241, 99242, 99243, 99244, 99245 (consult)</p> <p>NOTE: Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, 95, or POS 02 modifiers) are allowable</p>
Exceptions	None
Numerator	<p>Chart review indicates:</p> <ul style="list-style-type: none"> • Patient is offered one of the following interventions: <ul style="list-style-type: none"> o Polysomnography: 95782 Polysomnography < 6 years of age; 95783 Polysomnography w/PAP < 6 years of age; 95810 Polysomnography ≥ 6 years of age; 95811 Polysomnography w/PAP ≥ 6 years of age o Referral to a sleep specialist, otolaryngologist, dental, or other specialist experienced in evaluation and management of sleep disordered breathing in children o Watchful waiting/medical management or surgical management • One of the above interventions was offered within 12 months of the visit in which the symptoms of OSA were first discussed

- A) How many charts did you have to review before finding the first 10 patients that were eligible? _____
- B) Were there any reasons that came up several times which caused patients to be ineligible? _____

Note: This is only a sample of patients. If you would like to review a larger sample, please reach out to the AASM at quality@aasm.org

C)

<u>Eligible Chart #</u>	<u>Was the numerator criteria met?</u> <u>(0=not met, 1=met)</u>	<u>Was the reason the numerator</u> <u>was NOT met, captured by an</u> <u>exception (or other reason)?</u>
Chart #1		
Chart #2		
Chart #3		
Chart #4		
Chart #5		
Chart #6		
Chart #7		
Chart #8		
Chart #9		
Chart #10		
Total # charts that met the numerator criteria:	0	
Performance Rate %	0%	
Exception Rate %	0%	

D) Did you extract information from an EHR or by chart review for the following? (pick from drop-down menu)

	<u>Data Source (EHR or Chart Review?)</u>
Denominator	
Exceptions	
Numerator	

E) Measure Threshold

F) Was your Measure Threshold met? (0=not met, 1=met)

Process Measure #4:	Proportion of patients aged < 18 years with complex medical conditions known to be at high risk for OSA and with signs or symptoms of OSA who received an order for an objective assessment which would include both a PSG AND evaluation by a sleep specialist, otolaryngologist, or other specialist experienced in evaluation and management of OSA in children
Denominator	<p>All patients aged < 18 years with complex medical conditions known to be at high risk for OSA and with signs or symptoms of OSA</p> <p>Patient is younger than 18 years of age.</p> <p>Accompanied by Documentation of signs or symptoms of OSA</p> <p>OR</p> <p>One of the following diagnosis codes indicating OSA signs and symptoms: G47.10 Hypersomnia, unspecified G47.30 Unspecified sleep apnea R06.83 Other respiratory abnormalities (e.g., snoring, labored breathing)</p> <p>Accompanied by 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) 99241, 99242, 99243, 99244, 99245 (consult)</p> <p>Accompanied by Diagnosis of a complex medical conditions</p> <p>NOTE: Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, 95, or POS 02 modifiers) are allowable</p>
Exceptions	<p>At least one of the following is documented in the patient chart:</p> <ul style="list-style-type: none"> • Patient has unstable cardiopulmonary, neurological, psychiatric, or other medical conditions that may impact the validity of the sleep study • Unstable mental status • Patient has allergy to sensors • Patient or caregiver declines assessment • Patient cannot tolerate testing (testing is terminated) • Patient’s insurance (payer) does not provide coverage
Numerator	<p>Chart review indicates:</p> <ul style="list-style-type: none"> • Patient received an order for and objective assessment by both: <ol style="list-style-type: none"> 1) PSG ordered directly or by specialty physician (sleep, ENT, other) <ul style="list-style-type: none"> o 95782 Polysomnography < 6 years of age o 95783 Polysomnography w/PAP < 6 years of age o 95810 Polysomnography ≥ 6 years of age o 95811 Polysomnography w/PAP ≥ 6 years of age 2) Evaluation by a sleep medicine, otolaryngologist, dental, or other specialist experienced in evaluation and management of OSA in children

- A) How many charts did you have to review before finding the first 10 patients that were eligible? _
- B) Were there any reasons that came up several times which caused patients to be ineligible? _

Note: This is only a sample of patients. If you would like to review a larger sample, please reach out to the AASM at quality@aasm.org

C)

<u>Eligible Chart #</u>	<u>Was the numerator criteria met? (0=not met, 1=met)</u>	<u>Was the reason the numerator was NOT met, captured by an exception (or other reason)?</u>
Chart #1		
Chart #2		
Chart #3		
Chart #4		
Chart #5		
Chart #6		
Chart #7		
Chart #8		
Chart #9		
Chart #10		
Total # charts that met the numerator criteria:	0	
Performance Rate %	0%	
Exception Rate %	0%	

- D) Did you extract information from an EHR or by chart review for the following? (pick from drop-down menu)

	<u>Data Source (EHR or Chart Review?)</u>
Denominator	
Exceptions	
Numerator	

- E) Measure Threshold _

- F) Was your Measure Threshold met? (0=not met, 1=met) _

Process Measure #5:	Proportion of patients aged < 18 years diagnosed with OSA whose signs and symptoms attributable to OSA were reassessed within 6 months and at least annually after initiating a management plan
Denominator	<p>All patients aged < 18 years diagnosed with OSA who initiated a management plan</p> <p>Patient is younger than 18 years of age</p> <p>Accompanied by Diagnosis code indicating obstructive sleep apnea: G47.33 Obstructive sleep apnea (adult) (pediatric)</p> <p>Accompanied by 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) 99241, 99242, 99243, 99244, 99245 (consult)</p> <p>Accompanied by Documentation that a management plan was initiated</p> <p>Definition: For the purposes of this measure, a management plan may include watchful waiting/medical management, surgical management, referral for PSG testing, or referral to a sleep specialist, otolaryngologist, dental or other specialist experienced in evaluation and management of sleep disordered breathing in children</p> <p>NOTE: Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, 95, or POS 02 modifiers) are allowable</p>
Exceptions	<p>At least one of the following is documented in the patient chart:</p> <ul style="list-style-type: none"> • Patient does not return for follow-up visit • Patient or caregiver refuses treatment • Patient cannot afford treatment • Patient’s insurance (payer) does not cover reassessment
Numerator	<p>Chart review indicates:</p> <ul style="list-style-type: none"> • Patient’s signs and symptoms were reassessed <p>Reassessment could include one or more of the following:</p> <ul style="list-style-type: none"> o Documentation that the provider asked about the signs and symptoms attributable to OSA and included notation of stability, improvement, or decline compared to baseline assessment o Documentation of a validated subjective or objective assessment of a particular sign or symptoms of OSA (e.g., Epworth Sleepiness Scale or follow-up PSG) and included notation of stability, improvement, or decline compared to baseline assessment <ul style="list-style-type: none"> • Reassessment of signs and symptoms occurs within 6 months and at least annually after initiating the management plan

- A) How many charts did you have to review before finding the first 10 patients that were eligible?
- B) Were there any reasons that came up several times which caused patients to be ineligible?

Note: This is only a sample of patients. If you would like to review a larger sample, please reach out to the AASM at quality@aasm.org

C)

<u>Eligible Chart #</u>	<u>Was the numerator criteria met? (0=not met, 1=met)</u>	<u>Was the reason the numerator was NOT met, captured by an exception (or other reason)?</u>
Chart #1		
Chart #2		
Chart #3		
Chart #4		
Chart #5		
Chart #6		
Chart #7		
Chart #8		
Chart #9		
Chart #10		
Total # charts that met the numerator criteria:	0	
Performance Rate %	0%	
Exception Rate %	0%	

- D) Did you extract information from an EHR or by chart review for the following? (pick from drop-down menu)

	<u>Data Source (EHR or Chart Review?)</u>
Denominator	
Exceptions	
Numerator	

- E) Measure Threshold

- F) Was your Measure Threshold met? (0=not met, 1=met)

Process Measure #6:	Proportion of patients aged < 18 years diagnosed with OSA that were prescribed positive airway pressure therapy and had documentation of objectively measured adherence to positive airway pressure therapy within 3 months of starting therapy and at least annually
Denominator	<p>All patients aged < 18 years diagnosed with OSA who were prescribed positive airway pressure therapy</p> <p>Patient is younger than 18 years of age</p> <p>Accompanied by Diagnosis code indicating obstructive sleep apnea: G47.33 Obstructive sleep apnea (adult) (pediatric)</p> <p>Accompanied by 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) 99241, 99242, 99243, 99244, 99245 (consult)</p> <p>Accompanied by Documentation that the patient was prescribed positive airway pressure therapy.</p> <p>NOTE: Patient encounters for this measure conducted via telehealth (e.g., encounters coded with GQ, GT, 95, or POS 02 modifiers) are allowable</p>
Exceptions	<p>At least one of the following is documented in the patient chart:</p> <ul style="list-style-type: none"> • Objective adherence mechanism is not available • Modem or memory device is non-functional and cannot transmit adherence data • Patient or caregiver does not provide an electronic data card or wireless transmitter with the adherence data • Patient does not return for follow-up • Patient or caregiver declines to use PAP therapy • Patient did not receive equipment as prescribed • Ongoing PAP denied by insurance • PAP device recalled and not replaced by manufacturer
Numerator	<p>Chart review indicates:</p> <ul style="list-style-type: none"> • Patient's adherence to PAP therapy is objectively measured. • Objective measurement of adherence occurs within 3 months of equipment set-up and at least annually

A) How many charts did you have to review before finding the first 10 patients that were eligible?

B) Were there any reasons that came up several times which caused patients to be ineligible?

Note: This is only a sample of patients. If you would like to review a larger sample, please reach out to the AASM at quality@aasm.org

C)

<u>Eligible Chart #</u>	<u>Was the numerator criteria met?</u> (0=not met, 1=met)	<u>Was the reason the numerator was NOT met, captured by an exception (or other reason)?</u>
Chart #1		
Chart #2		
Chart #3		
Chart #4		
Chart #5		
Chart #6		
Chart #7		
Chart #8		
Chart #9		
Chart #10		
Total # charts that met the numerator criteria:	0	
Performance Rate %	0%	
Exception Rate %	0%	

D) Did you extract information from an EHR or by chart review for the following? (pick from drop-down menu)

	<u>Data Source (EHR or Chart Review?)</u>
Denominator	
Exceptions	
Numerator	

E) Measure Threshold

F) Was your Measure Threshold met? (0=not met, 1=met)