

Restless Legs Syndrome 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 charts for patients from the previous reporting year who have the diagnosis of **Restless Legs Syndrome**. 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 Outcome Measure, they not only have to have a diagnosis of RLS, but they also have been prescribed a new medication for RLS
- 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 Restless Legs Syndrome quality measures? If yes, which measures?

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

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Process Measure #1:	Proportion of patients with RLS who were diagnosed according to accepted diagnostic criteria at the time of their initial evaluation
Denominator	<p>All patients with a diagnosis of RLS</p> <p>Accompanied by The following diagnosis code indicating RLS: G25.81 Restless legs syndrome</p> <p>Accompanied by One of the following patient encounter codes: <ul style="list-style-type: none"> • 99202, 99203, 99204, 99205 (office/other outpatient services – new patient) • 99211, 99212, 99213, 99214, 99215 (office/other outpatient services – established patient) • 99242, 99243, 99244, 99245 (office consultations, non-Medicare only) </p>
Exceptions	None
Numerator	<p>Chart review indicates: Patient was assigned a diagnosis of RLS at the time of their initial evaluation based on one of the following sets of diagnostic criteria (using version current at the time of diagnosis):</p> <ul style="list-style-type: none"> • The International Classification of Sleep Disorders (ICSD); • International RLS Study Group (IRLSSG); or • The Diagnostic and Statistical Manual of Mental Disorders (DSM) <p>Or</p> <p>Chart documents a complaint of an urge to move legs and one or more of the following:</p> <ul style="list-style-type: none"> • The urge to move is worsened by rest or inactivity; • The urge to move is improved by movement; • The urge to move is worse in the evening or night

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? (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 #2:	Proportion of patients with clinically significant RLS who had measurement of iron stores, during initial RLS evaluation
Denominator	<p>All patients with a diagnosis of clinically significant RLS</p> <p>Accompanied by The following diagnosis code indicating RLS: G25.81 Restless legs syndrome</p> <p>Accompanied by One of the following patient encounter codes:</p> <ul style="list-style-type: none"> • 99202, 99203, 99204, 99205 (office/other outpatient services – new patient) • 99211, 99212, 99213, 99214, 99215 (office/other outpatient services – established patient) • 99242, 99243, 99244, 99245 (office consultations, non-Medicare only)

Exceptions	At least one of the following is documented in the patient chart: <ul style="list-style-type: none"> • Payer does not cover iron stores testing for RLS • Patient and/or caregiver declines testing/blood draw • Patient has documented iron stores measurement on record within the past year • Patient has documented disorder of iron overload (e.g., hemochromatosis)
Numerator	Chart review indicates: <ul style="list-style-type: none"> • CPT code for an iron store evaluation was documented at the time of the initial patient evaluation, OR • Chart review indicates that testing for iron stores was ordered at the time of initial patient evaluation

- 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? (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)
- D)

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

Measure
E) Threshold

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

Outcome Measure:	Proportion of patients diagnosed with RLS who showed a decrease in symptom severity within 12 months of receiving a new or changed RLS evidence-based treatment plan
Denominator	<p>All patients with a diagnosis of RLS who received a new or changed RLS evidence-based treatment plan</p> <p>Accompanied by The following diagnosis code indicating RLS: G25.81 Restless legs syndrome</p> <p>Accompanied by One of the following patient encounter codes: <ul style="list-style-type: none"> • 99202, 99203, 99204, 99205 (office/other outpatient services – new patient) • 99211, 99212, 99213, 99214, 99215 (office/other outpatient services – established patient) • 99242, 99243, 99244, 99245 (office consultations, non-Medicare only) </p> <p>Accompanied by Documentation in the medical record that a new or changed RLS evidence-based treatment plan has been initiated to treat RLS, and that it is the first time this medication is being used to treat RLS in this patient.</p>
Exceptions	<p>At least one of the following is documented in the patient chart:</p> <ul style="list-style-type: none"> • Patients who are not compliant with treatment • Patients who do not return for follow up • Patients whose symptoms are refractory to, or who did not tolerate, at least 2 medications for RLS • Patient is pregnant

Numerator	<p>Chart review indicates:</p> <p>Patient shows a decrease in RLS symptom severity within the first 12 months after a new or changed RLS evidence-based treatment plan is initiated for RLS</p> <p>Decrease in severity may be demonstrated using any one or more of the following:</p> <ul style="list-style-type: none"> • Decrease in symptom severity reported by the patient • Decrease in IRLS score • Decrease in other RLS severity validated instrument score • Documentation in chart or via validated instrument that any of the following RLS-related domains are improved: <ul style="list-style-type: none"> o Sleep quantity and/or quality o Daytime sleepiness or tiredness o Daytime function o Mood
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- 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? (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 #3:	Proportion of patients diagnosed with RLS whose symptom severity was assessed at every RLS-related visit
Denominator	<p>All patients with a diagnosis of RLS</p> <p>Accompanied by The following diagnosis code indicating RLS: G25.81 Restless legs syndrome</p> <p>Accompanied by One of the following patient encounter codes: <ul style="list-style-type: none"> • 99202, 99203, 99204, 99205 (office/other outpatient services – new patient) • 99211, 99212, 99213, 99214, 99215 (office/other outpatient services – established patient) • 99242, 99243, 99244, 99245 (office consultations, non-Medicare only) </p>
Exceptions	None
Numerator	<p>Chart review indicates:</p> <ul style="list-style-type: none"> • IRLS (or other validated instrument) was completed <p>OR</p> <ul style="list-style-type: none"> • An evaluation of RLS symptom severity and the impact was assessed by clinical history assessing overall symptom severity and at least one of the following: sleep quantity and/or quality, daytime tiredness or sleepiness, daytime function, and mood.

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**

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<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 #4:	Proportion of patients diagnosed with clinically significant RLS who were recommended an evidence-based treatment plan at the initial visit and reviewed at subsequent RLS-related visits
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Denominator	<p>All patients with a diagnosis of clinically significant RLS who were recommended an evidence-based treatment plan at initial visit</p> <p>Accompanied by The following diagnosis code indicating RLS: G25.81 Restless legs syndrome</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) 99242, 99243, 99244, 99245 (office consultations, non-Medicare only)</p> <p>Accompanied by Documentation in the medical record that the patient was recommended an evidence-based treatment plan at initial visit</p>
Exceptions	None
Numerator	<p>Chart review indicates: Evidence-based treatment plan was reviewed at subsequent RLS-related visits</p>

- 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? (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 diagnosed with RLS who received counseling regarding treatment side effects at the time of a new or changed RLS evidence-based treatment plan
Denominator	<p>All patients with a diagnosis of RLS who were recommended an evidence-based treatment plan</p> <p>Accompanied by The following diagnosis code indicating RLS: G25.81 Restless legs syndrome</p> <p>Accompanied by One of the following patient encounter codes: <ul style="list-style-type: none"> • 99202, 99203, 99204, 99205 (office/other outpatient services – new patient) • 99211, 99212, 99213, 99214, 99215 (office/other outpatient services – established patient) • 99242, 99243, 99244, 99245 (office consultations, non-Medicare only) </p> <p>Accompanied by Documentation in the medical record that the patient was recommended an evidence-based treatment plan</p>
Exceptions	None
Numerator	<p>Chart review indicates:</p> <ul style="list-style-type: none"> • Patient received counseling regarding side effects of RLS treatment plan • Counseling occurs at the time of a new or changed RLS treatment 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?

- 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%	

- 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 diagnosed with and receiving treatment for RLS who were assessed for treatment side effects at every RLS visit
Denominator	<p>All patients with a diagnosis of RLS who received an evidence-based treatment plan</p> <p>Accompanied by The following diagnosis code indicating RLS: G25.81 Restless legs syndrome</p> <p>Accompanied by One of the following patient encounter codes: <ul style="list-style-type: none"> • 99202, 99203, 99204, 99205 (office/other outpatient services – new patient) • 99211, 99212, 99213, 99214, 99215 (office/other outpatient services – established patient) • 99242, 99243, 99244, 99245 (office consultations, non-Medicare only) </p> <p>Accompanied by Documentation in the medical record that the patient has received an evidence-based treatment plan</p>
Exceptions	None
Numerator	<p>Chart review indicates:</p> <ul style="list-style-type: none"> • Patient is assessed for treatment side effects • Evaluation for treatment side effects occurs at every RLS visit

- 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? (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)