

As a data receiver, we've received several reports on outcome mismatches for Opioid CMS506v4 when there are multiple episodes of care.

We came across this ticket during research and understood the updated logics had been in CMS506v5.

<https://oncprojectracking.healthit.gov/support/browse/CQM-5846>

We have further question –

Looking at the exclusion logic below, assuming there are two episodes A and B, only B has Dx code in “Primary and Secondary Cancer” that is expected in the Exclusion.

When evaluating the top statement (“Inpatient Encounters with an Opioid or Benzodiazepine at Discharge”) on line 1, episode A and B will be pulled to be evaluated on the “exists” statements for exclusion.

Then the “or exists” statement on line 3 is calling for “Inpatient Encounters with an Opioid or Benzodiazepine at Discharge” again, which both episode A and B will be checked for “All Primary and Secondary Cancer”. Since there is one episode (B) qualifies, the evaluation of “or exists” in line 5 would always be true regardless the episode A or B in line 1 being evaluated.

As the result, if one episode qualifies the “All Primary and Secondary Cancer” exclusion, all episodes from the multiple episodes of care patient will receive Exclusion as the outcome. We'd like to get the clarification if this is what measure intended?

Denominator Exclusions

line no.	Logics
1	“Inpatient Encounters with an Opioid or Benzodiazepine at Discharge” InpatientEncounter where
2	exists ([“Diagnosis”: “All Primary and Secondary Cancer”] Cancer where Cancer.prevalencePeriod overlaps InpatientEncounter.relevantPeriod)
3	or exists (“Inpatient Encounters with an Opioid or Benzodiazepine at Discharge” InpatientEncounter where exists InpatientEncounter.diagnoses Diagnosis where Diagnosis.code in “All Primary and Secondary Cancer”)
4	or exists (“Intervention Palliative or Hospice Care” PalliativeOrHospiceCare where Coalesce(start of Global.“NormalizeInterval”(PalliativeOrHospiceCare.relevantDatetime, PalliativeOrHospiceCare.relevantPeriod), PalliativeOrHospiceCare.authorDatetime) during Global.“HospitalizationWithObservation” (InpatientEncounter))
5	or exists (“Inpatient Encounters with an Opioid or Benzodiazepine at Discharge” InpatientEncounter where InpatientEncounter.dischargeDisposition in “Discharge To Acute Care Facility” or InpatientEncounter.dischargeDisposition in “Hospice Care Referral or Admission” or InpatientEncounter.dischargeDisposition in “Patient Expired”)

Or, if the intention is to only include episode B in the exclusion, would the logic interpretation below, which is closer to CMS506v3, be better meeting the measure’s intention?

Denominator Exclusions

line no.	Logics
1	“Inpatient Encounters with an Opioid or Benzodiazepine at Discharge” InpatientEncounter where

- 2 **exists** (["Diagnosis": "All Primary and Secondary Cancer"] Cancer
where Cancer.prevalencePeriod overlaps InpatientEncounter.relevantPeriod)
- 3 **or exists** (~~"Inpatient Encounters with an Opioid or Benzodiazepine at Discharge"~~ InpatientEncounter
~~where exists~~ InpatientEncounter.diagnoses Diagnosis
where Diagnosis.code in "All Primary and Secondary Cancer")
- 4 **or exists** ("Intervention Palliative or Hospice Care" PalliativeOrHospiceCare

where Coalesce(start of Global."NormalizeInterval"(PalliativeOrHospiceCare.relevantDatetime,
PalliativeOrHospiceCare.relevantPeriod), PalliativeOrHospiceCare.authorDatetime)during
Global."HospitalizationWithObservation" (InpatientEncounter))
- 5 **or exists** (~~"Inpatient Encounters with an Opioid or Benzodiazepine at Discharge"~~ InpatientEncounter
~~where~~ InpatientEncounter.dischargeDisposition in "Discharge To Acute Care Facility"
or InpatientEncounter.dischargeDisposition in "Hospice Care Referral or Admission"
or InpatientEncounter.dischargeDisposition in "Patient Expired")