CMS 506: Safe use of Opioids – Concurrent Prescribing
Today’s Moderator

Kristen Beatson, RN
Director of Electronic Measures
Medisolv
What is CMS 506?

The purpose of the measure is to identify patients prescribed, or continued on, two or more opioids or an opioid and a benzodiazepine concurrently at discharge.

- Based on measure implemented by the VHA’s Opioid Safety Initiative
- Associated with a 20% decrease in concurrent prescribing
• Concurrent use of benzodiazepines with opioids was prevalent in 31%-51% of fatal overdoses

• Rates of fatal overdose are ten times higher in patients who are co-dispensed opioid analgesics and benzodiazepines

• More than half of patients who received an opioid prescription had filled another opioid prescription within the previous 30 days
Studies have shown that eliminating concurrent use potentially reduces:

- Risk of opioid overdose-related hospital visits
- Preventable mortality
- Costs associated with adverse events related to opioid use
Regulatory Requirements
Future of eCQMs

2015: MU Attestation & Electronic Submission (optional)
2016: IQR eCQMs Electronic Submission to CMS (required) & TJC (optional)
2017-2019: IQR eCQMs Electronic Submission to CMS & TJC both required

2011-2014: Start of eCQMs

2014-2019: eCQM growth
Meaningful Use Attestation
Electronic (QRDA 1) Submission Pilot
Electronic Submission (optional)

2020
Required to submit 4 eCQMs from any one quarter.

2021

2022
Required to submit 4 eCQMs (one of which must be CMS 506) from any one quarter.

2023
Required to submit 4 eCQMs (one of which must be CMS 506) from any one quarter.

The Hybrid measure will be mandatory and published on hospital compare.
2021:
- 1 self-selected quarter
- 4 self-selected eCQMs
- Addition of CMS 506: Safe Use of Opioids – Concurrent Prescribing

<table>
<thead>
<tr>
<th>VTE-1  (371)</th>
<th>VTE-2  (372)</th>
<th>STK-6  (439)</th>
</tr>
</thead>
<tbody>
<tr>
<td>STK-5  (438)</td>
<td>PC-05  (480)</td>
<td>STK-3  (436)</td>
</tr>
<tr>
<td>ED-2  (497)</td>
<td>STK-2  (435)</td>
<td>CMS506 (3316e)</td>
</tr>
</tbody>
</table>
2022:
- 1 self-selected quarter
- 1 required eCQM: Safe Use of Opioids – Concurrent Prescribing
- 3 self-selected eCQMs

<table>
<thead>
<tr>
<th>VTE-1 (371)</th>
<th>VTE-2 (372)</th>
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<tr>
<td>ED-2 (497)</td>
<td>STK-2 (435)</td>
<td><strong>CMS506 (3316e)</strong></td>
</tr>
</tbody>
</table>
FY 2021 IPPS/LTCH PPS Proposed Rule

1. Increase the numbers of quarters of eCQM data reported, from one self-selected quarter to four quarters over a 3-year period
   • 2 quarters for CY 2021
   • 3 quarters for CY 2022
   • 4 quarters for CY 2023 and for subsequent years

Hospitals may report three self-selected eCQMs, **and the Safe Use of Opioids eCQM**

1. **Begin public display of eCQM data beginning** with data reported by hospitals for the CY 2021 and for subsequent years.
Start early and participate in voluntary reporting

TO DO LIST

- eCQMs
Annual Process
Annual Process

Phase 1 - EDUCATION
- CMS Reporting Requirements
- Annual Specification Updates
- Measure & Value Set Review

Phase 2 - DISCOVERY & BUILD
- EHR Functionality
- Data Sources
- Current State Assessment
- eCQM Workflow vs Hospital Workflow
- System Build, Mapping & Testing

Phase 3 - EVALUATION
- Data Validation
- Monitoring/Analysis/Education/Improvement
Education
Population Criteria

Initial Population

/* Captures encounters of patients with an opioid(s), benzodiazepine, or a combination of these medications at discharge */
"Inpatient Encounter with Age Greater than or Equal to 18" InpatientEncounter
with ( ["Medication, Discharge": "Schedule II and III Opioid Medications"]
union ["Medication, Discharge": "Schedule IV Benzodiazepines"] ) OpioidOrBenzodiazepineDischargeMedication
such that OpioidOrBenzodiazepineDischargeMedication.authorDatetime during InpatientEncounter.relevantPeriod

Denominator

"Initial Population"

Denominator Exclusions

/* Excludes patients with cancer or who are receiving palliative or hospice care at the time of the encounter */
"Inpatient Encounter with Age Greater than or Equal to 18" InpatientEncounter
where exists ( ["Diagnosis": "All Primary and Secondary Cancer"] Cancer
where Cancer.prevalencePeriod overlaps InpatientEncounter.relevantPeriod
)
or exists ( InpatientEncounter.diagnostics Diagnosis
where Diagnosis.code in ["All Primary and Secondary Cancer"]
)
or exists ( ["Intervention, Order": "Palliative or Hospice Care"] PalliativeOrHospiceCareOrder
where PalliativeOrHospiceCareOrder.authorDatetime during InpatientEncounter.relevantPeriod
)
or exists ( ["Intervention, Performed": "Palliative or Hospice Care"] PalliativeOrHospiceCarePerformed
where PalliativeOrHospiceCarePerformed.relevantPeriod overlaps InpatientEncounter.relevantPeriod

Numerator

/* Encounters of patients prescribed two or more opioids or an opioid and benzodiazepine at discharge. */
"Inpatient Encounter with Age Greater than or Equal to 18" InpatientEncounter
where ( Count(["Medication, Discharge": "Schedule II and III Opioid Medications"] Opioids
where Opioids.authorDatetime during InpatientEncounter.relevantPeriod
) >= 2
)
union ( "Inpatient Encounter with Age Greater than or Equal to 18" InpatientEncounter
with ["Medication, Discharge": "Schedule II and III Opioid Medications"] OpioidsDischarge
such that OpioidsDischarge.authorDatetime during InpatientEncounter.relevantPeriod
with ["Medication, Discharge": "Schedule IV Benzodiazepines"] BenzodiazepinesDischarge
such that BenzodiazepinesDischarge.authorDatetime during InpatientEncounter.relevantPeriod
)
Data Criteria (QDM Data Elements)

- "Diagnosis: All Primary and Secondary Cancer" using "All Primary and Secondary Cancer (2.16.840.1.113762.1.4.1111.161)"
- "Encounter, Performed: Encounter Inpatient" using "Encounter Inpatient (2.16.840.1.113883.3.666.5.307)"
- "Intervention, Order: Palliative or Hospice Care" using "Palliative or Hospice Care (2.16.840.1.113883.3.600.1.1579)"
- "Intervention, Performed: Palliative or Hospice Care" using "Palliative or Hospice Care (2.16.840.1.113883.3.600.1.1579)"
- "Medication, Discharge: Schedule II and III Opioid Medications" using "Schedule II and III Opioid Medications (2.16.840.1.113762.1.4.1111.165)"
- "Medication, Discharge: Schedule IV Benzodiazepines" using "Schedule IV Benzodiazepines (2.16.840.1.113762.1.4.1125.1)"
- "Patient Characteristic Birthdate: Birth date" using "Birth date (LOINC Code 21112-8)"
- "Patient Characteristic Ethnicity: Ethnicity" using "Ethnicity (2.16.840.1.114222.4.11.837)"
- "Patient Characteristic Payer: Payer" using "Payer (2.16.840.1.114222.4.11.3591)"
- "Patient Characteristic Race: Race" using "Race (2.16.840.1.114222.4.11.836)"
- "Patient Characteristic Sex: ONC Administrative Sex" using "ONC Administrative Sex (2.16.840.1.113762.1.4.1)"
Discovery & Build
**INVERSE MEASURE**

- **IPP / Denominator**
  - Inpatient Encounter
  - > 18 years of age
  - Length of stay < 120 days
  - Opioid or Benzodiazepine at Discharge

- **Denominator Exclusions**
  - Hospice or Palliative Care
  - Primary or Secondary Cancer Diagnosis

- **Numerator**
  - Two or More Concurrent Opioids at Discharge
  - Concurrent Opioid and Benzodiazepine at Discharge

- **Denominator Exceptions**
  - None
Workflow

Inpatient Encounter

Clinical Documentation

Hospice or Palliative Care

Exclusion: SNOMED

Coding/Problem List

Cancer Diagnosis

Exclusion: ICD/SNOMED

Physician: Discharge Order

Opioid or Benzodiazepine

Denominator: RxNorm

2 or more Opioids or Opioid & Benzodiazepine

Numerator: RxNoms (2+)

Exclusion:

SNOMED

Hospice or Palliative Care

Cancer Diagnosis

Exclusion:

ICD/SNOMED

Physician: Discharge Order

Opioid or Benzodiazepine

Denominator: RxNorm

2 or more Opioids or Opioid & Benzodiazepine

Numerator: RxNoms (2+)
**CMS 506: Safe Use of Opioids – Concurrent Prescribing (2021)**

**Significant Updates/Changes:**
- Combined and updated the Hospice and Palliative Care value sets:
  - “Palliative or Hospice Care” (2.16.840.1.113883.3.600.1.1579)
- Palliative or Hospice Care includes codes that are also found in the Comfort Measures
- New value set for Opioid Medications

**Value Set & Code Changes:**

<table>
<thead>
<tr>
<th>Value Set OID</th>
<th>Value Set Name</th>
<th>Value Set</th>
<th>Codes</th>
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<tbody>
<tr>
<td>2.16.840.1.113762.1.4.1111.161</td>
<td>All Primary and Secondary Cancer</td>
<td>u</td>
<td>u</td>
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<tr>
<td>2.16.840.1.113762.1.4.1111.165</td>
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<td>a</td>
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<tr>
<td>2.16.840.1.113762.1.4.1111.169</td>
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<td>a</td>
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<tr>
<td>2.16.840.1.113762.1.4.1125.1</td>
<td>Schedule IV Benzodiazepines</td>
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<td>u</td>
</tr>
<tr>
<td>2.16.840.1.113762.1.4.1</td>
<td>ONC Administrative Sex</td>
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<td>u</td>
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<tr>
<td>2.16.840.1.113883.3.666.5.307</td>
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<tr>
<td>2.16.840.1.114222.4.11.3591</td>
<td>Payer</td>
<td>u</td>
<td>u</td>
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<tr>
<td>2.16.840.1.114222.4.11.836</td>
<td>Race</td>
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<td>2.16.840.1.113762.1.4.1111.162</td>
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<tr>
<td>2.16.840.1.113762.1.4.1125.2</td>
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<td>Value Set Description</td>
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<td>Measures</td>
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<tr>
<td>Comfort Measures</td>
<td>1.3.6.1.4.1.33895.1.3.0.45</td>
<td>371 (108) 372 (190) 435 (104) 436 (71) 438 (72) 439 (105)</td>
<td>133918004 182964004 385736008 385763009</td>
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<td>Palliative or Hospice Care</td>
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<td>103735009 133918004 182964004 305284002 305381007 305981001 306237005 306288008 385736008 385763009</td>
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Evaluation
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<tr>
<th>CMS Id</th>
<th>TJ Id</th>
<th>Measure Name</th>
<th>eCQM Version</th>
<th>Initial Population</th>
<th>In Denominator Only</th>
<th>Den. Exclusions</th>
<th>Numerator</th>
<th>Denominator</th>
<th>Exceptions</th>
<th>Rate</th>
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<tbody>
<tr>
<td>526</td>
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<td>Safe Use of Opioids – Concurrent Prescribing</td>
<td>2019 EH</td>
<td>34</td>
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<td>3</td>
<td>2</td>
<td>34</td>
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<td>6.45 %</td>
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</table>

**Hospital:** Demo Hospital

**Rate Measure Results**

**Validation**
## Mapping Validation

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<thead>
<tr>
<th>Value Set OID</th>
<th>Value Set Name</th>
<th>Mapped</th>
<th>IPP</th>
<th>Denominator</th>
<th>Exclusion</th>
<th>Numerator</th>
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<tbody>
<tr>
<td>LOINC Code 21112-8</td>
<td>Birth date</td>
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<td>2.16.840.1.113883.3.6665.307</td>
<td>Encounter Inpatient</td>
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<td>X</td>
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<tr>
<td>2.16.840.1.113762.1.4.1111.165</td>
<td>Schedule II and III Opioid Medications</td>
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<td>X</td>
<td>X</td>
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<td>X</td>
<td></td>
</tr>
<tr>
<td>2.16.840.1.113762.1.4.1125.1</td>
<td>Schedule IV Benzodiazepines</td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>2.16.840.1.113762.1.4.1111.161</td>
<td>All Primary and Secondary Cancer</td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.16.840.1.113883.3.600.1.1579</td>
<td>Palliative or Hospice Care</td>
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<td></td>
<td>X</td>
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<tr>
<td>2.16.840.1.113762.1.4.1</td>
<td>ONC Administrative Sex</td>
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<td>X</td>
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<tr>
<td>2.16.840.1.114222.4.11.3591</td>
<td>Payer</td>
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<td>X</td>
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<tr>
<td>2.16.840.1.114222.4.11.836</td>
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</table>
### Hospital Value Set Quality Check

**Version:** 2019 EH

<table>
<thead>
<tr>
<th>Oid Name</th>
<th>Count of Codes in Value Set</th>
<th>Total Patients</th>
<th>Patients With Value Set Code Present</th>
<th>Number of Codes From Value Set Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.641.1.113883.3.3157.1004.20</td>
<td>9</td>
<td>6828</td>
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<tr>
<td>Hospice Care (2.16.840.1.113883.3.3157.1004.20)</td>
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</tr>
</tbody>
</table>

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<th>Total Patients</th>
<th>Patients With Value Set Code Present</th>
<th>Number of Codes From Value Set Present</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Primary and Secondary Cancer (2.16.840.1.113883.1.4.1111.161)</td>
<td>4000</td>
<td>6828</td>
<td>312</td>
<td>204</td>
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</table>
## Logic Validation

<table>
<thead>
<tr>
<th>IPP / Denominator</th>
<th>Patient 1</th>
<th>Patient 2</th>
<th>Patient 3</th>
<th>Patient 4</th>
<th>Patient 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Over 18 at start of visit</td>
<td></td>
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</tr>
<tr>
<td>Inpatient admission with discharge date during the reporting period</td>
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</tr>
<tr>
<td>Discharge medication in Opioid or Benzodiazepine value set</td>
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</tr>
<tr>
<td>Author date/time for medication is DURING the visit</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Exclusion</th>
<th>Patient 1</th>
<th>Patient 2</th>
<th>Patient 3</th>
<th>Patient 4</th>
<th>Patient 5</th>
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<tbody>
<tr>
<td>Primary cancer diagnosis</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Secondary cancer diagnosis</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Palliative or hospice care</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Numerator</th>
<th>Patient 1</th>
<th>Patient 2</th>
<th>Patient 3</th>
<th>Patient 4</th>
<th>Patient 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 or more Opioids at discharge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Opioid and Benzodiazepine at discharge</td>
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</tr>
<tr>
<td>Author date/time for both meds is during the visit</td>
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<tr>
<td>CMS id</td>
<td>TJC Id</td>
<td>Measure Name</td>
<td>eCQM Version</td>
<td>Initial Population</td>
<td>In Denominator Only</td>
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<td>--------</td>
<td>--------</td>
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<tr>
<td>CMS06v2</td>
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<td>Safe Use of Opioids - Concurrent Prescribing</td>
<td>2019 EH</td>
<td>34</td>
<td>29</td>
</tr>
<tr>
<td>Patient Name</td>
<td>Medisolv Identifier</td>
<td>Case Identifier</td>
<td>Result</td>
<td>Admit</td>
<td>Discharge</td>
</tr>
<tr>
<td>--------------</td>
<td>---------------------</td>
<td>-----------------</td>
<td>-----------------</td>
<td>-------------</td>
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</tr>
<tr>
<td>Pomerance, Tess</td>
<td>Se3dd361491c9517a04235a2</td>
<td>AC0000562662</td>
<td>In Numerator</td>
<td>1/15/2020 5:16:00 AM</td>
<td>1/16/2020 1:00:00 PM</td>
</tr>
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<td>Astor, Ayn</td>
<td>Se3dd357491c9517a040ba3e</td>
<td>AC0000574143</td>
<td>In Numerator</td>
<td>1/21/2020 8:00:00 AM</td>
<td>1/22/2020 1:00:00 PM</td>
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### Monitoring & Improvement

#### Patient Details

<table>
<thead>
<tr>
<th>Demographics</th>
<th>Providers</th>
</tr>
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<tbody>
<tr>
<td><strong>Medisolv Identifier</strong></td>
<td><strong>Patient Identifier</strong></td>
</tr>
<tr>
<td><strong>Birth Date</strong></td>
<td><strong>Ethnicity</strong></td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td><strong>Expired Status</strong></td>
</tr>
<tr>
<td><strong>Encor-A Details</strong></td>
<td><strong>Name</strong></td>
</tr>
<tr>
<td><strong>Not in Population</strong></td>
<td><strong>Race</strong></td>
</tr>
</tbody>
</table>

### [2019 EH] – Safe Use of Opioids – Concurrent Prescribing

**Result:** In Numerator

<table>
<thead>
<tr>
<th>Conditions</th>
<th>Encounters</th>
<th>Medications</th>
<th>Procedures</th>
<th>Lab Tests</th>
<th>Allergy/ADR</th>
<th>Medical Devices</th>
<th>Clinical Documentation</th>
<th>View Original Evaluation Tree</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>QRDA Export (Full Record)</strong></td>
<td><strong>BSON Export (DeIdentified Full Record)</strong></td>
<td><strong>Case Identifier:</strong></td>
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#### Medications

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<th>Description</th>
<th>Status</th>
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<th>Route</th>
<th>Start Time</th>
<th>End Time</th>
<th>Negation Code</th>
<th>Documentation</th>
<th>Used</th>
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<tbody>
<tr>
<td>RxNorm:1049683</td>
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<td>Oxycodeine Hydrochloride 10 MG Oral Tablet</td>
<td>discharge</td>
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<td>Lorazepam 1 MG Oral Tablet</td>
<td>discharge</td>
<td></td>
<td></td>
<td>1/3/2020 1:45:00 PM</td>
<td></td>
<td>ATIVAN1 M1, AC, CONT</td>
<td></td>
<td></td>
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</tbody>
</table>
IT

Application(s)
Map
Build

Clinicians

Monitor
Improve
Maintain

Agencies
Measures
Data/Result Review

Quality
1. Meet with team / clinicians
2. Understand numerator qualifiers
3. Plan for addressing gaps
4. Plan for minimize concurrent prescribing
5. Education
6. Suggestions & Feedback
CDC Guideline recommends that clinicians:
• Avoid prescribing concurrently
• Coordinate care with other clinicians
• Check Prescription Drug Monitoring Program

CDC recommends that for patients found to have multiple opioid prescriptions clinicians should discuss:
• Information from the PDMP with the patient
• Safety concerns
• Concerns with other clinicians who are prescribing controlled substances for their patient
Early Implementation: Lessons Learned

Comfort Measures vs Hospice & Palliative Care

Discharge Medication Evaluation –
• Considering 2+ medications for Numerator

Workflow Considerations
• Concurrent orders for same medication (different directions, doses)
• Other prescribing / workflow practices

https://oncprojectracking.healthit.gov/support/browse/CQM-4030
We want to emphasize that hospitals are not expected to score zero on the measure and we understand that there are some circumstances where it may be clinically appropriate to discharge patients with concurrent opioids or concurrent opioid and benzodiazepine prescriptions.
Annual Cycle

Phase 1 - EDUCATION
- CMS Reporting Requirements
- Annual Specification Updates
- Measure & Value Set Review

Phase 2 - DISCOVERY & BUILD
- EHR Functionality
- Data Sources
- Current State Assessment
- eCQM Workflow vs Hospital Workflow
- System Build, Mapping & Testing

Phase 3 - EVALUATION
- Data Validation
- Monitoring/Analysis/Education/Improvement

Phase 4 – SUBMISSION (2021 / 2022)
Questions?

Kristen Beatson
kbeatson@medisolv.com
See a demo of Medisolv’s New AI-Powered Value Maximizer Software for CMS Hospital Programs

Thursday at 1 pm EST

Visit: www.medisolv.com/maximize