# Michigan Oncology Quality Consortium (MOQC)

**Orientation for all Practices** 

Round 2 QOPI® Data Abstraction, 2018

August 29, 2018 September 5, 2018





## Before We Start

- Not teaching you to become an abstractor
- You will need to:
  - Review documents on:
    - QOPI landing page
    - MOQC website (use your log on)
  - View webinars
    - QOPI Landing page
    - This webinar
- To receive reimbursement for this webinar, you must email me that you attended if I did not acknowledge you at the beginning of the call

# Today's Webinar

- Organized into two parts
  - Part one Administrators
  - Part two Abstractors
- Steps for each role using your QOPI account from registration - post abstraction
- All lines to be muted since webinar is videotaped
- Questions will be addressed at the end of the webinar



### Key Points

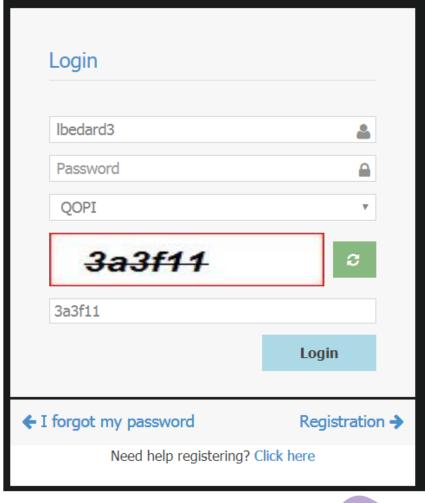
- 1. No <u>changes</u> from Round 1 to Round 2 except dates
- 2. Round 2 is open
- 3. Round 2 will close Tuesday December 4, 2018
- 4. There are two registrations for each round:
  - Register/update your practice information (signed legal agreements with ASCO-QOPI®)
  - Register for Round
- 5. Select MOQC Track to abstract (with some exceptions)
- 6. MOQC/BCBSM will reimburse practice for abstraction\*

\*will outline later in webinar; dependent on practice's abstraction model



### Step 1 – Log in

- Your QOPI account
- https://myqopi.asco.org/

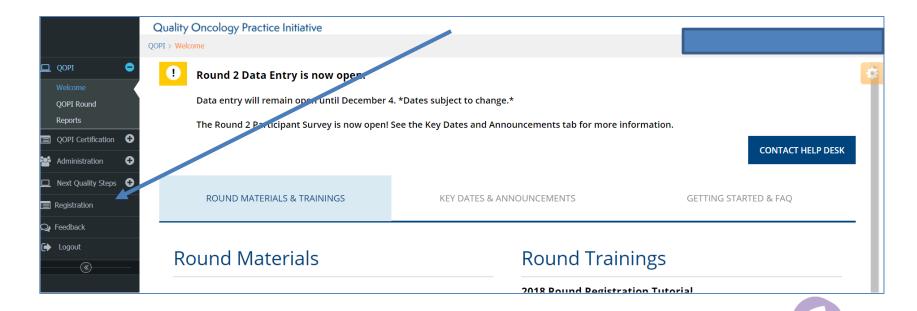






### Step 2 – QOPI Landing page

Click on "Registration" on Menu





Step 3 – Yep, you have to log in again

Login	
UserName	<b>.</b>
Password	<u> </u>
<del>f1411f</del>	8
Enter text you see	
	Login
← I forgot my password	New Registration 🔷

Need help registering? Click here



### Step 4 – You must check all your practice info

- You are on the QOPI "tile" page
- Start / Click on Practice bar on left hand side of page



### Step 5 – An important Tip!

Demographics – Choose MOQC Practice

	✓ Treatment for breast cancer
	▼ Treatment for colorectal cancer
	☐ Treatment for non-hodgkin's lymphoma
	▼ Treatment for non-small cell lung
Type of Care :* (1)	☐ Treatment for pancreatic cancer
Type of Care ."	☐ Treatment for prostate cancer
	☐ Treatment for ovarian,fallopian tube,primary peritoneal cancer
	■ Administer or oversee administration of chemotherapy
	✓ Care for patients with late stage or terminal cancer (Hospice referral,etc)
	☐ Treatment for Small Cell Lung cancer
	■ MOQC Practice (If you select MOQC practice then all required type of care's will be auto applied.)
MOQC Participant:	● Yes ○ No ①



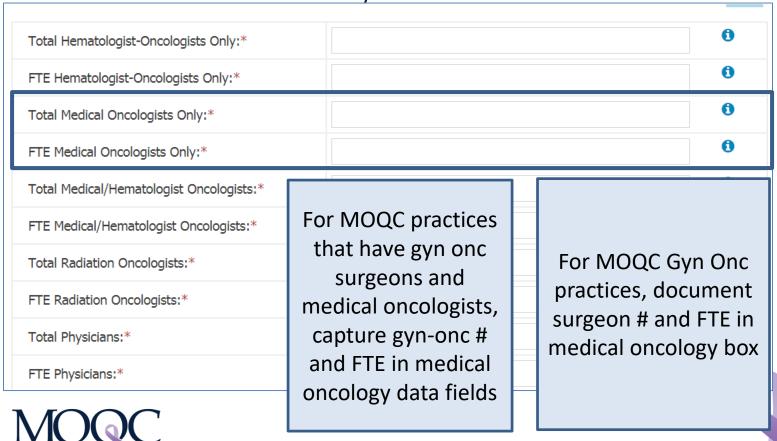
### Step 6 – Another tip!

MICHIGAN ONCOLOGY

QUALITY CONSORTIUM

Use medical oncology data fields unless you have subspecialties

Number and FTE of Physicians



### Step 7 – Count and FTE

- Count = Headcount or number of bodies
- FTE = Full time equivalent
  - Clinical time/time patient facing for physician
  - Do NOT include research or administrative time
  - Do not count/include NP/PA in calculation
  - Use this table as a guide for <u>one</u> physician, <u>average</u> week

	M	Т	W	Th	F	Total
AM	0.1	0.1	0.1	0.1	0.1	0.5
PM	0.1	0.1	0.1	0.1	0.1	0.5
Total	0.2	0.2	0.2	0.2	0.2	1.0



### Step 7 - Example

Doctor	# of 4 hour block of clinic time	FTE (calculation= # blocks / 10)
Dr. Smith	8	0.8 FTE
Dr. Jones	5	0.5 FTE
Total	13 blocks	1.3 FTE

- FTE Count = 1.3 FTE
- Head Count of Number = 2



### Step 8 – because of Step 7

- There are <u>NO MINIMUM</u> number of charts to abstract for MOQC Track\*
- Abstract <u>all eligible charts</u>

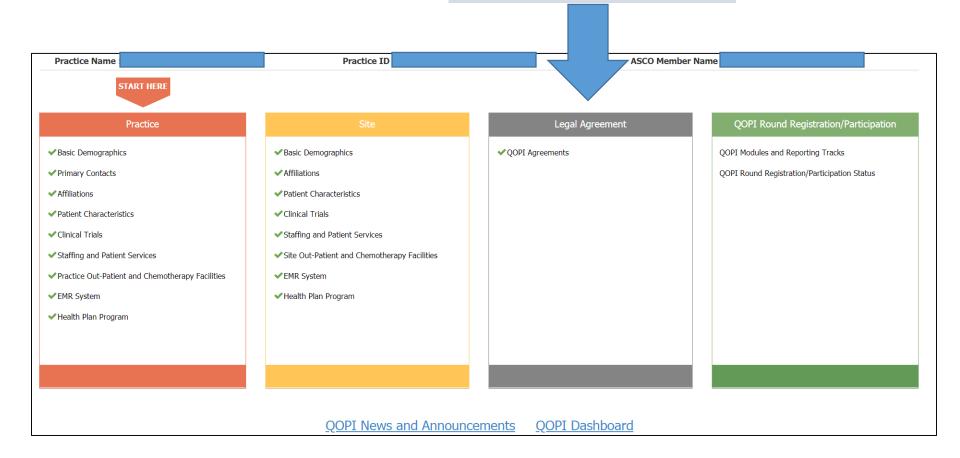
Medical/Hematologist Oncologist Clinical FTEs	1	2-3	4-6	7+
Target Number of Charts per Module	24	32	34	40
Target Total Number of Charts for QOPI®  Certification (six modules: Core, Breast, Colorectal, NSCLC, EOL, and Symptom/Toxicity)	72-120	96-160	102-170	120-200
Minimum Unique Chart Requirement  The fewest number of charts accepted for QOPI® Certification or Recertification, once all eligible charts for each module have been exhausted.  Minimum Unique Chart Requirement does not apply to general QOPI® participation or maintenance of QOPI® Certification.	48	64	68	80

<sup>\*</sup>Exceptions in MOQC (largest practices)

<sup>-</sup> HFHS, Michigan Medicine, Karmanos Cancer Institute (Downtown ONLY)

Step 9 – Legal stuff

### Must be signed



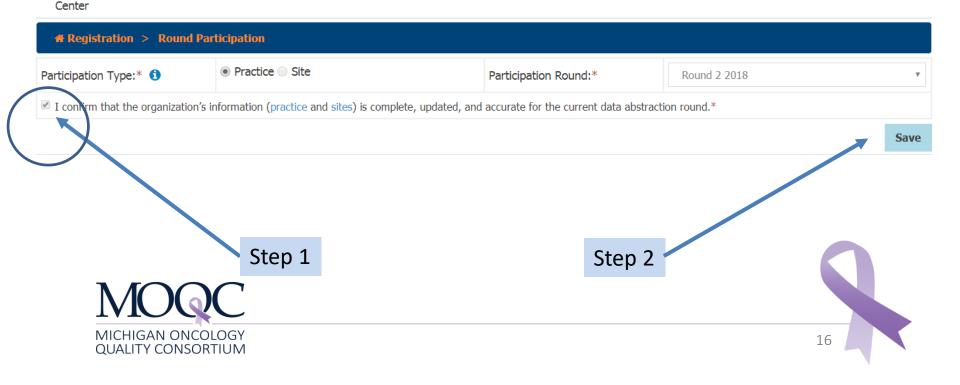
Step 10 – This is important – a big stop sign!

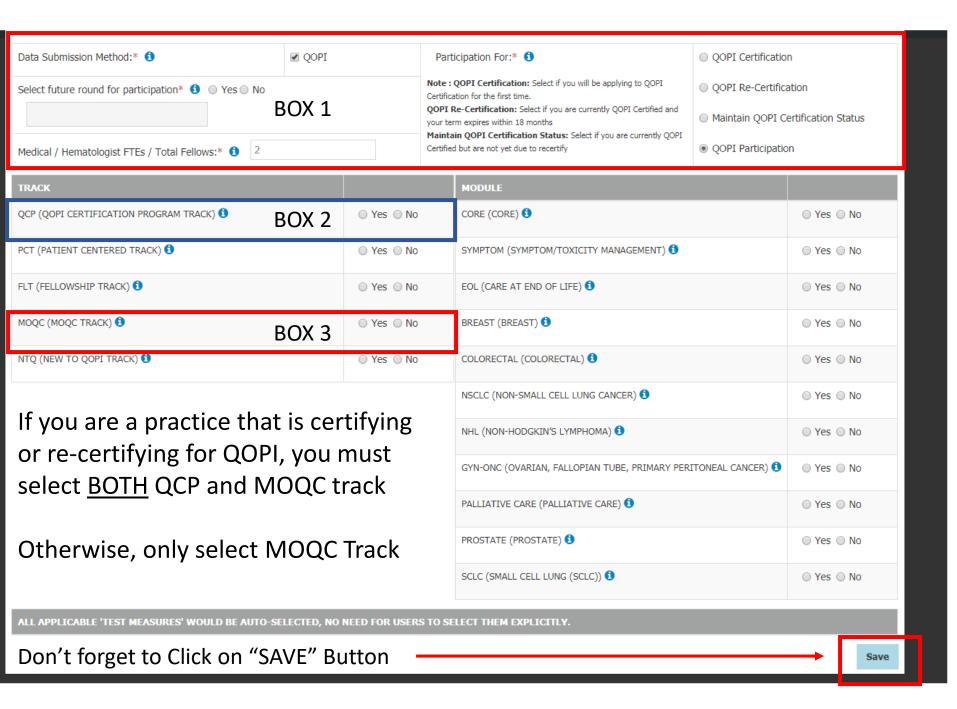
- Legal agreement screen must be "green" or you will need to have your agreements signed
  - QOP Participation Agreement
  - BAA
- Cannot pass this screen unless legal agreements current

AGREEMENT \$	SIGNING OPTION	EMAIL ADDRESS \$	STATUS \$	CREATED ON	SIGNED ON \$	IS VOID \$	DOWNLOAD
QOPI Participation Agreement	Sign through portal		Signed	08-13-2018	08-13-2018	No	<b>±</b>
BAA	Sign through portal		Signed	08-13-2018	08-13-2018	No	<u></u>
B	0		0 0 5 11	04.00.0046			

### Step 11 – A little box is very important

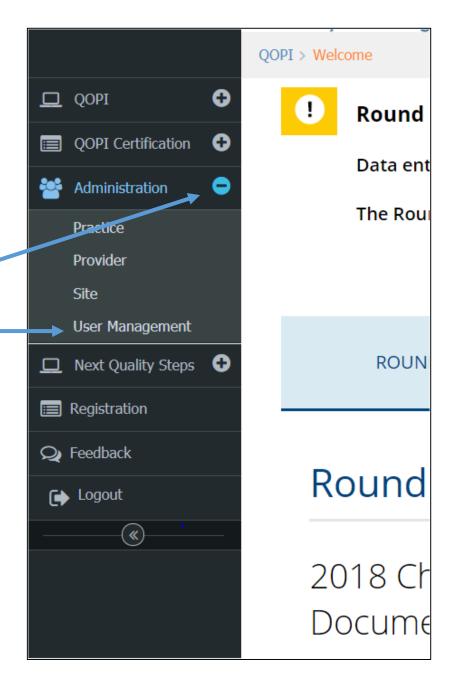
- "Click" on small box (step 1) to attest that your practice's information is complete, updated and accurate
- "Click" on SAVE button (step 2)





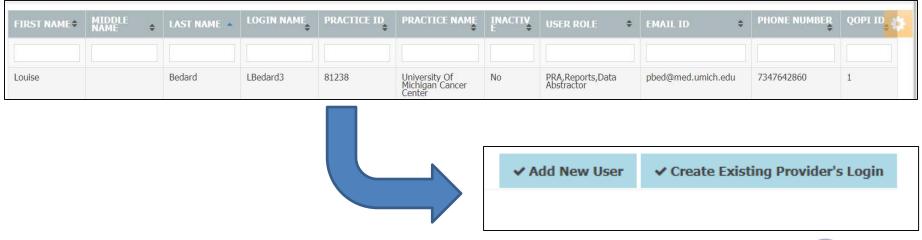
Step 13 – Back to the beginning

- QOPI Landing page
- Expand
   "Administration" to
   expose "User
   Management"
- As PRA, perform two steps for each round:
  - Add abstractors and/or
  - Reset passwords of current abstractors



Step 14 - Table of all users of your QOPI account

- "Click" on each abstractor's name to re-set password or
- Go to the bottom of the table to add a new abstractor

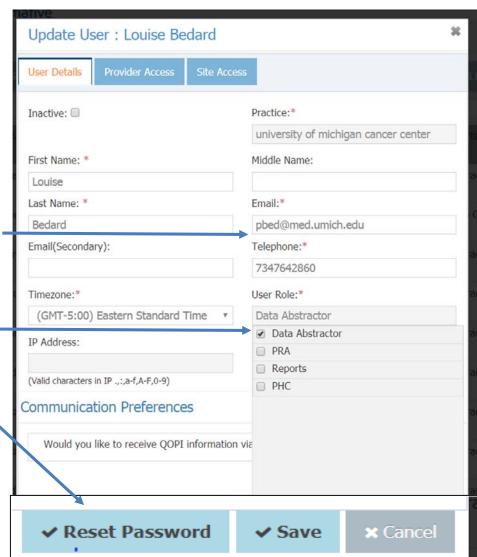




# Step 15 – three actions on this screen

- 1. Complete all \* fields Ensure accurate email
- 2. Select data abstractor under "user role"
  - 3. Click on "reset password" for current abstractors email from QOPI will be sent to abstractor





# Part Two

For Abstractors





### Step 1 – Starting points

- Know your QOPI account number
- Know your QOPI practice administrator (PRA)
- Work with your QOPI practice administrator to <u>update</u> all the abstractor information - generates an email abstractors to update their password
- Ensure your practice is registered for the <u>correct</u> module – once one chart is entered, no corrections can be made



### Step 2 – Log into your QOPI account

https://myqopi.asco.org/

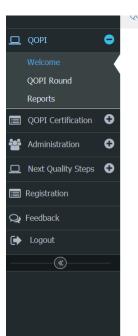
Login	
UserName	<u> </u>
Password	
QOPI	Y
a28811	ε
Enter text you see	
	Login
← I forgot my password	Registration >
Need help registering?	Click here





### Step 3 – Landing page

https://myqopi.asco.org/



#### 2018 Chart Selection & Abstraction **Documents**

#### Round 2 Chart Selection Criteria (updated 8/7/18)

This document provides an easy to read table of chart selection criteria by module including diagnosis and visit date windows. Please note the Chart Selection Criteria and Chart Selection Criteria Quick Guide have been combined into one document for 2018.

VIEW CHART SELECTION CRITERIA

#### Measures Specifications (updated 6/18/18)

This document provides details on the complete list of measure specifications including numerator, denominator, denominator exceptions, and reference materials.

Note: QOPI® Measure Specifications are copyrighted and confidential and no part of this document may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopy,

#### Find Eligible Charts for Round 2

#### **⊉**018 Round Registration Tutorial

This video tutorial provides a step-by-step guide to registering for the 2018 rounds (posted 8/21/17)

VIEW ROUND REGISTRATION TUTORIAL

#### **QOPI® Participant Training Webinar**

This webinar recording provides an overview of the QOPI program, how to access the QOPI dashboard and how to register for the Fall 2017 Round.

Participant Training Webinar Recording

**Participant Training Slides** 

#### **QOPI® Abstractor Training Webinar**

This webinar provides an overview of the QOPI Round 2 changes that impact chart abstraction, chart selection criteria, and a review of the data dictionary and chart forms.

Webinar Recording

Webinar Slides

View Webinar for Round 2



### Step 4a - Finding charts - med oncology practices

Need two lists for abstraction

	Patients in Initial Therapy/Treatment	Patients who have Died (End of Life (EOL)
ICD-10 criteria	<ul> <li>Use all disease &amp; SMT modules except:</li> <li><u>Do not use</u> Palliative Care module</li> <li><u>Do not use</u> Gyn Onc module</li> </ul>	EOL Module <u>ONLY</u>
Dx dates	07/01/2017- 10/31/2018 July 1, 2017 – October 31, 2018	Dx with invasive Cancer on or before 10/31/2018
First office visit	07/01/2017 – 10/31/2018 July 1, 2017 – October 31, 2018	07/01/2017 – 10/31/2018 July 1, 2017 – October 31, 2018
Two office visits	05/01/2018 – 12/01/2018 May 1, 2018 – December 1, 2018	2 office visits 9 months preceding death with date of death on or before 12/01/2018



Step 4b - Finding charts - gyn oncology practices

Need two lists for abstraction

	Patients in Initial Therapy/Treatment	Patients who have Died (End of Life (EOL)
ICD-10 criteria	Only gyn onc & SMT modules	EOL Module <u>ONLY</u>
Dx dates	07/01/2017- 10/31/2018 July 1, 2017 – October 31, 2018	Dx with invasive Cancer on or before 10/31/2018
First office visit	07/01/2017 – 10/31/2018 July 1, 2017 – October 31, 2018	07/01/2017 - 10/31/2018 July 1, 2017 - October 31, 2018
Two office visits	05/01/2018 – 12/01/2018 May 1, 2018 – December 1, 2018	2 office visits 9 months preceding death with date of death on or before 12/01/2018



Step 5 - Finding charts - gyn oncology practices

- A <u>retrospective</u> patient list is insufficient & will not capture all eligible charts
- Develop a concurrent or 2<sup>nd</sup> process of identifying patients for the expanded timeframes.
- Consider receiving a continuing list of patients from:
  - Person who assigns initial ICD-10 code for new patients
  - Person responsible for new patient oral or IV chemotherapy scheduling
- You can abstract a chart <u>while</u> the patient is receiving



Step 6 – What to abstract

- <u>All</u> MOQC practices abstract MOQC track
- If certifying or re-certifying, select <u>both</u>:
  - QCP track and
  - MOQC track

If you are not sure when to abstract for QOPI certification or re-certification, email <a href="mailto:qopicertification@asco.org">qopicertification@asco.org</a>.



### Step 7 – How many charts to abstract?

- NO MINIMUM number of charts to abstract\*
- Abstract <u>all eligible charts</u>

Medical/Hematologist Oncologist Clinical FTEs	1	2-3	4-6	7+
Target Number of Charts per Module	24	32	34	40
Target Total Number of Charts for QOPI® Certification (six modules: Core, Breast, Colorectal, NSCLC, EOL, and Symptom/Toxicity)	72-120	96-160	102-170	120-200
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<sup>\*</sup>Exceptions in MOQC (largest practices)

<sup>-</sup>HFHS, Michigan Medicine, Karmanos Cancer Institute (Downtown ONLY)





### Step 8 – During abstraction, use resources

- Always refer to QOPI documents do not guess
- Email QOPI@asco.org



	<b>QOPI® 2018 Data Elements</b>	
	CORE + Breast Modules	
DATA ELEMENT/HELP TEXT	ADDITIONAL NOTES	RESPONSE OPTIONS
	Chart ID	
Site		
Managing/Treating Physician (optional)		
Primary Site Anatomic site of the cancer diagnosis  - 4-digit or 5-digit ICD-10-CM code for the patient's most recent or primary diagnosis (principal neoplastic disease code)	<ul> <li>Do not enter ICD-10 codes related to symptoms or toxicities.</li> <li>ICD-10 codes are only accepted if within the invasive malignancy range provided.</li> <li>Use the most relevant code for the purpose of the abstraction. For example, use the code for the patient's specific type of cancier, even if the most recent recorded visit denotes some other condition.</li> <li>The ICD-10 code selected will determine which pre-selected modules are applicable to the chart. For example, if your site selected the breast cancer module and all applicable questions will open for that chart. If the breast cancer module and all applicable questions will open for that chart. If the breast cancer module wasn't selected, the chart will be tagged for the core data elements and any domain modules selected.</li> <li>For charts of patients diagnosed in the 1-year period, exclude patients with simultaneous bilateral breast cancer or 2 distinct cancers in one breast.</li> <li>Exclude cases with ductal or lobular carcinoma in situ (DCIS) only. Cases with invasive malignancy and DCIS may be included and abstraction should focus on the invasive malignancy only.</li> <li>Male breast cancer is CSO.92x. Charts of male patients with invasive breast cancer module.</li> <li>Breast: CSOx (Female breast cancer).</li> <li>Colorectal: invasive adenocarinoma of the colon: C18.x (C18.1 cancer of the appendix will be excluded from several colorectal measures), C19 or rectum: C20x, C21x.</li> <li>NSCIC: Non-small cell only: C34x.</li> <li>NHL: C82x, C83, C84, C85, C86. Indolent NHL may be included.</li> <li>GYNONC: Primary peritoneal: C81.1, C48.2, C48.8, Ovarian: C56x, Fallopian tube: C57, C57.01, C57.02.</li> <li>Prostate: C61, C610 only: C34x.</li> <li>Other: Other invasive malignancy for chart selected for domain specific modules (C00.xv-C7A.1, D46x, D46.22, odomains ceptic modules (C00.xv-C7A.1, D46x, D46.22.</li> </ul>	





Step 9 – Use Tips!

- Available on QOPI landing page or moqc.org
- <u>Discard</u> previous tables from other rounds and from other oncology organizations (e.g. ONS)

#### **ASCO** QOPI

Quality Oncology Practice Initiative

#### **QOPI® 2018 ROUND 2 CHART ABSTRACTION TIPS**

#### Abstraction Overview

When responding to data elements in the QOPI® system, only include information that is accessible within your practice as part of normal work flow.

 Sources of documented information may include an outpatient paper chart, an outpatient EMR, your institutional EMR (for information such as, smoking status and pain assessments).

#### QOPI® Abstraction for Moderate or High Emetic risk Chemotherapy

Indicate whether any moderate or high emetic risk chemotherapy drugs were administered to the patient at any time during his/her therapy. Include drugs administered offsite if the treatment was overseen by the reporting practice.

Check the chemotherapy flow sheet (or elsewhere in the chart if a chemotherapy flow sheet is not present) to determine if any of the moderate emetic risk chemotherapy drugs specified in Table 1 were administered to this patient in or overseen by the practice. If a threshold dose is provided in Table 1 answer 'Yes, moderate emetic risk' only if the dose administered meets the specified threshold. Repeat for table 2 for high emetic risk drugs.

Table 1 Moderately Emetogenic Agents						
Drug Generic Name	Drug Trade Name	Alternate Name	Threshold Dose			
Alemtuzumab	Campath		N/A			
Azacitidine	Vidaza		N/A			
Bendamustine	Ribomustin and Treanda		N/A			
Carboplatin	Carboplatinum	Paraplatin	N/A			
Clofarabine	Clolar		N/A			
Cyclophosphamide	Cytoxan	Neosar	Less than 1500 mg/m²			



Step 10 – Create a Cross Walk

- Keep a list of QOPI-assigned number with MRN
- Template on MOQC.org
- MOQC will audit this round (data from Fall, 2017)



### Step 10 – How to Get Paid for Data Collection

	Abstraction Model	Payment to Abstractors	Mechanism for Hours
A	Practice has asked MOQC to abstract	MOQC pays its staff to abstract	• NA
В	Practice has asked MOQC to "hire" its staff and supervises abstraction	MOQC pays staff via check	• Reports time in T Sheets
C	Practice abstracts independent of MOQC staff	Practice reimbursed through PO	<ul> <li>Practice keeps track of hours; reports to MOQC at end of Round</li> <li>MOQC calculates a "collaborative average" &amp; reports to BCBSM</li> </ul>



### Step 11 – When to Expect Payment for Round 2

	Abstraction Model	Payment to Abstractors	MOQC will Process Payment
A	Practice has asked MOQC to abstract	MOQC pays its staff to abstract	• Monthly
В	Practice has asked MOQC to "hire" its staff and supervises abstraction	MOQC pays staff via check	<ul> <li>1<sup>st</sup> week of October</li> <li>1<sup>st</sup> week of November</li> <li>2<sup>nd</sup> week of December (after Round 2 closes)*</li> </ul>
С	Practice abstracts independent of MOQC staff	Practice reimbursed through PO	<ul> <li>Hours to be reported to BCBSM before 12/21/2018;</li> <li>BCBSM payment to PO is 04/2019</li> </ul>



\*At this time, MOQC (will attempt) but cannot promise that abstractor <a href="December/final">December/final</a> pay will be processed and received before 12/25/2018

# Invitation from MOQC.ORG

### All Administrators and Abstractors

- You must log into moqc.org to find abstraction documents for Round 2, including this webinar
- You received a message from our website in the past two weeks if you did not have a log on and password
- If <u>MOQC</u> set you up, your <u>email address</u> is your log on



# MOQC.ORG

Log In first.....



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### About MOQC Initiatives News Events Resources Q





# Log In Screen

### Complete this screen

ssword	
I'm not a robot	reCAPTCHA
	Privacy - Terms

Forgot your password?



# Under Initiatives . . .

Find QOPI Data Abstraction

About MOQC Initiatives News Events Resources







ASCO's Quality Oncology Practice Initiative (QOPI®) is an oncologist-led, practice-based quality assessment program designed to promote excellence in cancer care by helping practices create a culture of self-examination and improvement. Participating in QOPI is a MOQC participation requirement.







## Under Initiatives...

### Find this list of documents for your use . . .

Instructions to log on to a QOPI Practice/ Set up a user for QOPI

Instructions to access QOPI reports

#### TRAINING DOCUMENTS

These are available on the QOPI landing page if you log into your practice account. They are located under *round* materials and training.

- QOPI Fall 2017 Participant Training
- QOPI Round 2 Abstractor Training
- 2018 Complete Reports Guide

#### ABSTRACTOR REFERENCE DOCUMENTS

- QOPI 2018 Round 2 Chart Abstraction Data Elements for Core Module
- QOPI 2018 Round 2 Chart Abstraction Data Elements for Core and Breast Modules
- QOPI 2018 Round 2 Chart Abstraction Data Elements for Core and Colorectal Modules
- QOPI 2018 Round 2 Chart Abstraction Data Elements for Core and Symptom/Toxicity Modules
- QOPI Round 2 2018 Chart Abstraction Data Elements for Core and Gyn Onc Modules

#### MEASURES DOCUMENTS

- QOPI 2018 Round 2 Measure Summary
- QOPI 2018 Round 2 Measure Specifications
- QOPI 2018 Round 2 Measure Changes



All ASCO-QOPI® documents must be behind a log on

All ASCO-QOPI® documents are registered and are only available to ASCO practices



# Next Steps

### Reminders

- Anything can be fixed in your account by either MOQC or ASCO-QOPI <u>before</u> you have entered a chart
- MOQC will check any aspect of registration
- MOQC must be added to your as a user to your account; instructions on the MOQC website
- Register your practice for Round 2 ASAP



# Help

- All materials including this webinar are available on moqc.org <u>behind</u> member resources
- All abstractors have been given access to our website
- Call or email with questions
- <u>lbedard@mocq.org</u>
- cstraight@moqc.org
- kkolizeras@moqc.org
- 1.866.get.moqc or 734.764.2860 or 734.358.3434



### Final Note

Do <u>not</u> wait for Columbus Day to Begin Abstraction



MONDAY
October 8 2018
is 8 weeks to Round 2
closure – Yikes!!!







