MOQC·NEWS

MICHIGAN ONCOLOGY QUALITY CONSORTIUM

SPRING 2022



Dr. Jennifer Griggs Program Director

From the Program Director

While we missed seeing you in person, the January Biannual Meeting was exceptionally well-attended, and we were so gratified by your presence and engagement. For those of you who could not attend, please take some time to watch the morning and afternoon sessions (links are on the www.moqc. org website). Dr. Paul Hesketh's presentation on management of nausea and vomiting in people

receiving chemotherapy updated all of us on the best way to prevent and manage this common side effect. Dr. Bindu Potugari shared her work with an interdisciplinary team at IHA that markedly improved prescribing of olanzapine in patients on high emetic risk chemotherapy. The leadership exhibited by POQC as they address financial toxicity raised the salience of this critically important topic to MOQC members.

We are delighted that Christopher Friese, PhD, RN has agreed to serve as the Director of Patient-Reported Outcomes (PROs). Please read more about Dr. Friese and the PRO Task Force in the newsletter. We are beginning a statewide initiative to collect patient-reported outcomes to improve symptom management, the care experience, and, as shown in clinical trials, the clinical outcomes of our patients.

It's hard to believe that we are already preparing for our regional meetings, and we all look forward to seeing you again. You'll have a chance to meet our growing team and to get to know your regional project managers. In addition to reviewing our most recent performance data, we'll collaborate on improving tobacco cessation counseling and will share details of the new tobacco measures that qualify for an additional fee schedule increase.

We're pleased with our transition to Arbor Research as our data vendor partner. We expect to begin entering data into the new database at the end of this year with the transition complete by January 2023. Please let us know if you have any questions.

On a personal note, I am deeply grateful for all the work you do to take the best care of your patients during these challenging times. We hear you and appreciate you.

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PRO Task Force

CALL FOR MEMBERS TO JOIN MOQC TASK FORCE ON PATIENT-REPORTED OUTCOMES

As part of MOQC's 2022 strategic plan, we are excited to launch an effort to collect patient-reported outcomes (PROs) in practices. We are in the process of forming a PRO task force and we are asking for your help in populating that task force. We know that many practices have experience with collecting patientreported outcomes as part of your participation in OCTET, the study for which Dr. Friese was the principal investigator, and in PROMOnc, our CMS-funded work.

The patient-reported outcomes task force will help MOQC develop a plan to engage practices across Michigan in collecting, analyzing, and acting upon information shared directly from patients. It will be essential to do this work in a way that is perceived as valuable to practices and patients in our goal to support interdisciplinary teams in providing the best cancer care to all of our patients.

We hope to meet at least monthly through June. Immediate activities will include:

1) Planning a panel presentation for the June Biannual meeting on the importance of collecting PROs

2) Establishing key principles for a MOQC effort in collecting/reporting/acting upon PROs. What should we collect? How often? From whom? And in what formats?

We are interested in having clinicians (physicians, advanced practice providers, pharmacists, and nurses) and practice leaders join us. POQC and other patient and caregiver representatives will also join the task force. If you would be interested in joining us, please contact Shayna Weiner at sweiner@moqc.org. We will work to schedule task force meetings at times that work for your schedule.

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Practice Spotlight

KARMANOS CANCER INSTITUTE AT MCLAREN NORTHERN MICHIGAN



The team at KCI at McLaren Northern Michigan takes pride in how they care for their patients. Petoskey is a small and caring community where Elena Coppola, DO and her colleagues proudly provide service and education to the community. Dr. Coppola has been a hematologist/ oncologist at KCI at McLaren Northern

Michigan Oncology Practice for 8 years. Dr. Coppola received her medical degree from the Michigan State Osteopathic College and completed both her residency and fellowship in Hematology Oncology at Sparrow Hospital in Lansing.

Dr. Coppola has worked on several MOQC quality improvement initiatives. Work on the oral chemotherapy initiative has improved the way oral chemotherapy follow-up and adherence are managed by introducing follow-up phone calls and standardized forms. Dr. Coppola has also been involved in MOQC's hospice initiative and finds that starting the hospice conversation early does indeed benefit the patient and her relationship with them.

Recently, as a result of MOQC's chemotherapy-induced nausea and vomiting measures, olanzapine was added to their chemotherapy care plan. Thanks to these interventions, practice members are becoming more comfortable prescribing olanzapine.

For those oncologists at the beginning of their career, Dr. **Coppola's words** of wisdom are: "The work is hard. but if you put the work in,



you will benefit from it. Be patient with yourself because there is a lot to learn. The responsibility is huge but is also respected. Respect yourself and others and treat everyone how you want to be treated, like family. Always know you have support like tumor boards where you can talk to other doctors to help you get insight on how to manage your patients."

Dr. Coppola is a devoted parent to a 4-year-old daughter and a 22-month-old son. She is an avid runner and has completed half marathons with friends.

POQC Update

In addition to providing the voice of the Patient and Caregiver and acting as the heart of MOQC's direction, the Patient and Caregiver Quality Council (POQC) has four active workgroups:

FINANCIAL RESOURCES

The Financial Resources Workgroup, in partnership with Dr. Minal Patel, developed a session for the January MOQC Biannual Meeting centered around financial toxicity, financial navigation for patients and their loved ones, and the role of checklists in addressing simple, complicated, and complex problems. Addressing these concerns can improve not only the psychological health of people with cancer but also their clinical outcomes. Excitement around the impact this could have has led to potential opportunities for development of a statewide financial navigation program.

PATIENT AND CAREGIVER RESOURCES

POQC's Patient and Caregiver Resources workgroup is developing a search engine to help patients and their caregivers navigate to resources easily and quickly. At the June MOQC Biannual Meeting, POQC members will introduce the search engine and offer an interactive session that will explore the impact and importance of caregiving on cancer patients.

BVOGUE: BLACK VOICES ON GYNECOLOGIC CANCER: UNDERSTANDING EXPERIENCES

The purpose of BVOGUE is to identify and address the racial disparities that exist for Black patients with gynecologic cancer. We value the voices of Black gynecologic cancer patients and would like to learn directly from them through the use of focus groups. They are the only ones who are experts on their own experiences with cancer and can talk about factors that might

have influenced their care. The BVOGUE team hopes to use what is learned in this study to further research and work to implement potential solutions to the biggest problems that are identified. This will be done to improve the experience and overall health outcomes for Black patients in the future.

RECRUITMENT

One of the primary goals of POQC for 2022 is expanding POQC's membership base by an addition of a minimum of 10 members. POQC is seeking more diverse representation in a

variety of ways, including geographic diversity, cancer type diversity, and medically underserved populations. POQC is happy to present at groups about membership, including compensation and community, in any appropriate forum.

Please email Vanessa Aron at varon@mogc.org with any questions about POQC.



Patient Story, In Their Own Words

TRACEY CARGILL-SMITH, SURVIVOR, POQC MEMBER

I never thought two days before my birthday on January 13, 2020, I would be diagnosed with breast cancer. Normally, a 50th birthday is a milestone to celebrate; but instead, I spent it trying to understand why and how I got breast cancer. I always ate healthy and walked one or two miles a day. No one else in my family had breast cancer. Breast cancer never crossed my mind. After I processed the fact I had cancer,



I leaned into a mindset of doing whatever it might take to beat this disease. Beating it was my goal. Whatever it took — chemo. radiation, surgeries — I had to do whatever it took to make sure I reached my end result, which was being a Survivor.

After feeling a lump in my armpit, I scheduled an appointment with my OB/GYN. The OB/GYN doctor sent me in for a 3D mammogram that was inconclusive, which prompted a referral to a cancer surgeon. A week later the surgeon scheduled me for an ultrasound, and two weeks after that, a biopsy. On Monday, January 13, 2020, I received a call from the surgeon telling me to come in to discuss my biopsy results. I knew exactly what the surgeon was going to say.

I was diagnosed with Invasive Ductal Carcinoma. It was – IS a long journey, between diagnosis and survivorship. I underwent AC and Taxol chemotherapy rounds, mastectomy with lymph nodes removed, and six weeks of radiation treatments. Admittingly, I was thinking I would have my mastectomy, my chemo/radiation treatments and reconstruction within a year. Due to COVID-19, my original plan was disrupted. The order of treatments (surgery, chemotherapy, radiation, reconstruction) was changed. The delays in the schedules were inevitable. I was told my treatment plan could realistically take as long as two years due to healing time in-between treatments and surgeries. In total, I have had five surgeries, including my mastectomy, extensions, and reconstruction. It wasn't an easy process for me, but my cancer care team and doctors explained and answered all my questions thoroughly and treated me with the utmost respect.

A few of the biggest hurdles I am facing with breast cancer post-treatment are fatigue, neuropathy, and chemo brain. I am currently still recovering and will have to learn how to adjust to a life of a breast cancer Survivor. I am grateful for every good day, always appreciating life. My whole process, my journey, was not easy. But along the way, I appreciate the care I received. I like my physicians and cancer care team having given me every treatment option possible. They didn't try to introduce facts one by one, little by little. They provided the entirety of what to expect by answering my questions thoroughly. Cancer is an overall horrible thing that everyone wishes to fight, destroy, and win the battle. Being involved in MOQC's Patient and Caregiver Council (POQC), I believe it will make an impact helping communities focus on the challenges Cancer Patients and Survivors face. In my opinion, POQC is a true advocate for the Cancer community. Together with POQC, I will continue contributing to achieving better quality of life for Cancer Patients.

Thank you to Heather Spotts, MSW

MOQC wants to extend a sincere thank you to Heather Spotts. In addition to her stellar abstraction efforts, membership on the Steering Committee, and participation in MOQC initiatives, Heather went above and beyond and collaborated with us over the past few years to ensure that we are able to provide social work continuing education units for MOQC meetings. We are so grateful for her commitment and her growth mindset, which continue to make MOQC better today than we were yesterday. We celebrate you, Heather!

Website Scavenger Hunt

Before the January Biannual Meeting, an online scavenger hunt was included as part of the registration email. Thank you to those who participated while also learning more about the resources we offer. Keep an eye out for a small gift coming your way.

Jamie George Cinamon Branigan Patrice Tims Sherry Sciarrino Amy Hawkins Taylor Saaranen Christin Molnar

Olanzapine Document



tinyurl.com/2b6h39cm



MOOC

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New MOQC Team Members Spotlight

ASHLEY BOWEN, SENIOR PROJECT MANAGER

Ashley Bowen joined MOQC in December 2021 as a Senior Project Manager. She completed her undergraduate degree in Dietetics and Health Promotion at Michigan State University, her Master of Science degree in Nutrition at Case Western Reserve University, and her dietetic internship through University Hospitals Case Medical Center in Cleveland, Ohio. Ashley started her career as a Registered Dietitian at Johns Hopkins Children's Center, working with patients in oncology, surgery, and intensive care services. Ashley continued her work in clinical nutrition, research and quality improvement with the Ann & Robert H. Lurie Children's Hospital of Chicago and Northwestern University Cystic Fibrosis Center, where she also received training and certification as a Health Coach. After nearly five years in that role, she moved into a leadership position working as a Clinical Nutrition Manager for the Lurie Children's Department of Clinical Nutrition. In 2018, Ashley and her family relocated to Ann Arbor where she became a Clinical Nutrition Services Manager at Michigan Medicine. Ashley is excited to work with the MOQC team and its practices to advance quality initiatives that will make a positive impact on patientand family-centered care.

CHRIS FRIESE, DIRECTOR OF PATIENT-REPORTED OUTCOMES

Dr. Friese joined MOQC in January 2022 as the Director of Patient-Reported Outcomes. He received his undergraduate, masters, and PhD in nursing from the University of Pennsylvania. He completed a postdoctoral fellowship in Cancer Outcomes Research at the Dana-Farber Cancer Institute/Harvard University. In July 2008, he joined the faculty at the University of Michigan School of Nursing, with an adjacent clinical practice in inpatient hematology/oncology at the University of Michigan Rogel Cancer Center.



Dr. Friese's research interests focus on measuring and improving the quality of cancer care through patient and clinician surveys, intervention, and practical implementation approaches. He is an elected member of the National Academy of Medicine and in 2021 was appointed by the President of the United States to a six-year term on the National Cancer Advisory Board.

HEATHER ROMBACH, CLINICAL DATA ABSTRACTOR

Heather Rombach joined MOQC in February 2022 as a Clinical Data Abstractor. She has 15 years of experience in the Medical Records Department at Genesee Health System. While working fulltime, Heather went back to college. She graduated from Baker College in 2012 with an Associate Degree in the Health Information Technician program. Heather then went on to join the Cancer Registry Department at Ascension St. Mary's in 2017. She obtained her Certified Tumor Registrar Certification in 2019. She joined Michigan Medicine in 2021 in the Cancer Registry Department. Heather is excited to join the MOQC team. She is looking forward to continuing abstracting quality data that will make a difference in patients' and families' lives. In her spare time, Heather enjoys spending time with family, camping, boating, traveling, reading, and watching sporting events.

MARIEM RUIZ MARTÍNEZ, SENIOR PROJECT MANAGER

Mariem Ruiz Martínez joined MOQC in February 2022 as a Senior Project Manager. She earned her Bachelor of Business Administration in Finance from Andrews University in Berrien Springs, MI and then obtained her MBA with an emphasis in Project Management at Saint Leo University in Florida.

Throughout her career, Mariem has gained a strong background in leadership development. Most recently, she served as a finance manager and before that a supply chain manager for AdventHealth Kansas City where she also served as a representative for the organization in the Kansas City Hispanic Chamber of Commerce. She is passionate about healthcare and the positive impact her work can have in improving people's lives.







NATALIA SIMON, SENIOR PROJECT MANAGER

Natalia Simon joined MOQC in January 2022 as a Senior Project Manager. She came to MOQC from C. S. Mott Children's Hospital where she served as a Program Manager for Partners for Children, a community-based pediatric palliative care program for children with chronic complex conditions. In addition to running the program, she participated in the design and implementation of the NICU-based initiative for babies born with medical complexities, Little Victors League. Natalia also has experience as a Research Process Coordinator, a Grant Administrator, and a Senior Projects Administrator. Throughout her career, she has managed numerous programs, grants, and contracts with a focus on healthcare research, international development, higher education, and social enterprises. Natalia has a Master of Arts – Education in English/French Linguistics from YaroslavI State Pedagogical University in YaroslavI, Russia, and an MBA from Cleary University in Ann Arbor.

Natalia has always been drawn to initiatives that yield high positive impact on people's lives, especially during their most trying and vulnerable times. She is excited about bringing a patient-centered mindset, creativity, strong communication, and a focus on collaboration to MOQC. In her spare time, Natalia enjoys spending time with her family, traveling the world, cooking, reading, and learning by experiencing new things.

DEBORAH TURNER-SMITH, CLINICAL DATA ABSTRACTOR

Deborah Turner-Smith joined MOQC in February 2022 as a Clinical Data Abstractor. She graduated from Central State University in Wilberforce, Ohio with a degree in Marketing. For the last 15 years, she has worked in quality improvement as a data abstractor for the Michigan Bariatric Surgery Collaborative (MBSC). She is proud of the contributions that she made in the improvement of patient outcomes for bariatric surgery patients. Deborah is excited to join the MOQC team and provide her experience in data abstraction.

She and her husband, Don, of 23 years are proud parents to Donovan & Sydni who are both attending colleges out of state. Their furry son, Jojo, keeps them busy at home. Deborah loves reading, fishing, traveling, and enjoying time with family and friends. She is a member of Alpha Kappa Alpha Sorority, Inc.

SHAWN WINSTED, CLINICAL DATA ABSTRACTOR

Shawn Winsted joined MOQC in January 2022 as a Clinical Data Abstractor. She is a registered radiography and mammography technician with 20 years' experience in the clinical setting. She has spent the last 15 years at Bon Secours Mercy Health in Toledo, OH, focusing on women's imaging and breast biopsies. Throughout her career, Shawn has developed a special interest in the care of cancer patients and is looking forward to bringing her knowledge and experience to the MOQC team. Shawn is excited to be joining MOQC so she can continue to have a positive impact on the lives of patients by improving healthcare outcomes.

In her spare time, Shawn enjoys spending time with family at their lake cottage, watching sporting events, reading, and spending as much time outdoors as possible.

"MOQC is a gift to all in the state. Appreciate the novel ideas and ability to implement them across diverse practices. The data management is accurate and helps us all move to better quality; we did this with antiemetics." "The trended, on-going data collection and reporting on relevant oncology measures is a great "motivator" to continue to look at practice and work to improve the care provided to our oncology patients." "MOQC has been instrumental in providing guidance for me as I continue to integrate in my clinic as a POEM pharmacist — It's useful having comparative data to see where our program could improve."







Value-Based Reimbursement

The Value Partnerships program at Blue Cross Blue Shield develops and maintains quality programs to align practitioner reimbursement with quality-of-care standards, improve health outcomes, and control health care costs. Practitioner reimbursement earned through these quality programs is called value-based reimbursement (VBR). The VBR Fee Schedule sets fees at greater than 100% of the standard fee schedule. Please note that the MOQC VBR is in addition to the subspecialty VBR. MOQC VBR opportunities are available to practitioners enrolled in PGIP.

Each year the MOQC Coordinating Center's Measures Committee proposes a set of measures to be eligible for VBR the following calendar year. The measures are then reviewed and approved by BCBSM. There are often 3-4 VBR measures per year and each measure has a specific target that must be met.

MOQC would like to highlight for 2022 (VBR eligibility 2023), there are additional fee schedule increases for meeting measures for eligibility up to 7%.

Please visit the MOQC website for more details on VBR.

VBR PERFORMANCE MEASURES FOR 2022 (for VBR eligibility 2023)

LEVEL	VBR MEASURE AND TARGET	CQI VBR	
	Tobacco cessation counseling administered or patient referred in the past year - 75%		
Collaborative Meet 2 of 3	Proportion of patients with smoking status recorded – 90%	Additional 2%	
	Proportion of patients with smoking treatment recorded – 30%		
	NK1-RA or olanzapine overuse – 10% (or lower)		
Region	NK1-RA and olanzapine underuse – 25%	201	
Meet 3 of 4 (Med Onc)	Hospice enrollment – 50%	3%	
	Hospice enrollment within 7 days of death – 30% (or lower)		
Region Meet Both	Decrease outpatient prescribing of opioids for cancer patients after laparoscopic or open hysterectomy using a patient-specific calculator based on risk factors - 9 pills or fewer	3%	
(Gyn Onc)	Days from debulking surgery to chemotherapy start - 28 days or less		
Practice	Meet all 4 of the above 4 VBR measures		
Meet Both (Med Onc)	Race and ethnicity data documented in the oncology record - 90%	Additional 2%	
Practice	Meet both gyn/onc measures		
Meet Both (Gyn Onc)	Race and ethnicity data documented in the oncology record - 90%	Additional 2%	

ADDITIONAL CRITERIA FOR RECEIVING VBR:

ADDITIONAL CRITERIA FOR RECEIVING VBR:

MEDICAL ONCO	LOGT FRACTICLS	GINECOLOGIC	ONCOLOGI FRACTICLS
LEVEL	CRITERIA	LEVEL	CRITERIA
Practice Level	At least one physician and one practice manager from the practice must attend both MOQC regional meetings and at least one Biannual meeting during that year	Practice Level	At least one physician and one practice manager from the practice must attend both MOQC gynecologic oncology meetings during that year
Physician Level	Provider must have been enrolled in PGIP for at least one year	Physician Level	Provider must have been enrolled in PGIP for at least one year

MOQC Practice Awards

TRUST & INTEGRITY

MOQC is pleased to present awards to practices and practice members who exemplify our core values:

COLLABORATION We make our best decisions as a group.

COMPASSION

build trust.

Our deep respect and appreciation for others creates an environment for all to flourish.

Our reliability, transparency and openess



GROWTH MINDSET

We are flexible – growing, innovating, and embracing new ideas.

The names listed here are individuals and practices about whom MOQC team members have shared stories celebrating those values.

Thank you for making a difference and for exemplifying what shows MOQC at our best.

8	Cancer & Hematology Centers of Western Michigan
6	Covenant, Marcia Rau
8	Great Lakes Cancer Management Specialists, Dr. Jerome Seid
(Henry Ford Allegiance, Amy Hawkins
6	MHP Oakland Medical Group, Stacy Lattin
0	Michigan Medicine Rogel Cancer Center, Dr. Bryan Schneider
68	Munson Healthcare, Laura Johnson
8	Newland Medical Associates
8	Oncology Hematology Associates of Saginaw Valley, Jennifer Metevia
8	Spectrum Health
(University of Michigan Health - West, Dr. Kevin Brader
8	University of Michigan Health - West

MOQC Measures Update

MEASURES	VBR MEASURE
Chemotherapy intent (curative vs. non-curative) documented before or within 2 weeks after administration	
NK1 receptor antagonist for low or moderate emetic risk cycle 1 chemotherapy (lower score – better)	х
NK1 receptor antagonist for low or moderate emetic risk cycle 1 chemotherapy (lower score – better)	х
Complete family history documented for patients with invasive cancer	
GCSF administered to patients who received chemotherapy for non-curative intent (lower score – better)	
Hospice enrollment	х
Hospice enrollment & enrollment within 7 days of death (lower score – better)	х
Chemotherapy administered within the last 2 weeks of life (lower score – better)	
Completeness of race and ethnicity data	х
Tobacco cessation counseling administered or patient referred in past year	х
Smoking status recorded in medical record	х
Smoking treatment recorded in medical record	Х
2022 GYNECOLOGIC ONCOLOGY MEASURES	VBR MEASURE
Days from debulking surgery to chemotherapy start	х
Outpatient prescribing of opioids for cancer patients after laparoscopic or open	x

1. Staff Shortages

hysterectomy

Poll ended | 1 question | 77 of 109 (70%) participated

1. How much have staffing shortages impacted your practice's ability to provide the kind of care you want to provide? (Single Choice) $\stackrel{\scriptstyle \bullet}{}$

///// (100%) answered	
Not at all	(0/77) 0%
Slightly	(11/77) 14%
Moderately	(27/77) 35%
A lot	(29/77) 38%
Extremely	(10/77) 13%

2. What factors are contributing to staffing shortages

Poll ended | 1 question | 54 of 110 (49%) participated

 What factors are contributing to staffing shortages? Please select all that apply. (Multiple Choice) * 54/54 (100%) answered

Lack of qualified candidates	(35/54) 65%
vaccine hesitancy on the part of staff members or pot	(15/54) 28%
Illness	(39/54) 72%
Budget constraints	(15/54) 28%
Staff members retiring	(14/54) 26%
Family reasons (child care. illness in the family)	(35/54) 65%
Other	(9/54) 17%
We aren't experiencing staffing shortages	(0/54) 0%

Survey Results from Biannual Meeting

During our January Biannual meeting, we asked you to share some of your present-day struggles. We asked you if you were working with staff shortages, the contributing factors to those shortages, and whether you are working with fewer clinicians than you need. As your responses show, this is a challenging time, and that was certainly reflected by the responses. Despite these challenges, you continue to provide the best care for your patients. Here's what you told us. In addition to what we asked, we heard that you are suffering from moral injury as you strive to work under conditions of increased regulation, barriers to providing the best care, and the restrictions placed on you by COVID-19.

3. Shortage	of	onc	ology:	providers
Poll ended 1 question	1 75	of 109	(68%) parti	cipated

1. Are you experiencing a shortage of oncology providers (physicians, advanced practice)? (Single Choice) * 75/75 (10090) approach

No	(23/75) 31%
Not applicable	(15/75) 20%

MOQC Team

Jennifer Griggs, MD, MPH, FACP, FASCO Program Director

Chris Friese, PhD, RN Director, Patient-Reported Outcomes

Emily Mackler, PharmD, BCOP Director, POEM

Shitanshu Uppal, MD Director, Gyn-Oncology Initiatives

Keli DeVries, MSW Program Manager

Vanessa Aron, BA Senior Project Manager

Heather Behring, BSN Clinical Data Abstractor

Dave Bolen Administrative Specialist

Ashley Bowen, MS, RD Senior Project Manager

Arielle Davidson Pharmacy Intern

Shea Howe Program Associate – ASCO

Kleanthe Kolizeras, BS Clinical Data Abstractor

Manlan Liu, MA Data Manager

Cindy Michalek, BBA Clinical Information Analyst

Ermili Potka, BS, RT(T) Clinical Data Abstractor

Beth Rizzo, MPH Clinical Research Project Manager

Heather Rombach, RHIT, CTR Clinical Data Abstractor

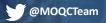
Mariem Ruiz Martínez, MBA Senior Project Manager

Natalia Simon, MA, MBA Senior Project Manager

Deborah Turner-Smith, BS Clinical Data Abstractor

Shayna Weiner, MPH Project Manager

Shawn Winsted, RT(R)(M) Clinical Data Abstractor





Cancer care. Patients first. The best care. Everywhere.

MOQC MEETINGS 2022 SCHEDULE

MED-ONC BIANNUAL MEETING Jun 17: 10:00 am – 4:00 pm IN-PERSON Radisson Hotel Lansing at the Capitol 111 N. Grand Ave. Lansing, MI 48933

GYN-ONC BIANNUAL MEETING Apr 23: 9:00 am – 1:00 pm IN-PERSON Kellogg Hotel & Conference Center 219 S Harrison Rd, East Lansing, MI 48824

Oct 1: 9:00 am – 1:00 pm IN-PERSON Location TBD • Ann Arbor, Mi

MED-ONC REGIONAL MEETINGS

Metro East (ME) Mar 30: 6:00 – 8:00 pm VIRTUAL Oct 26: 6:00 – 8:00 pm IN-PERSON Detroit Marriott Troy 200 W. Big Beaver Rd. Troy, MI 48084

Lake Michigan Oncology (LMOR) Apr 4: 6:00 – 8:00 pm VIRTUAL Nov 2: 6:00 – 8:00 pm IN-PERSON Radisson Hotel Lansing at the Capitol 111 N. Grand Ave. Lansing, MI 48933

West of Woodward (WOW) Apr 13: 6:00 – 8:00 pm VIRTUAL Nov 9: 6:00 – 8:00 pm IN-PERSON Eagle Crest Conference Center 1275 S. Huron, Ypsilanti, MI 48197

Central Michigan (CMG) Apr 18: 6:00 – 8:00 pm VIRTUAL Nov 14: 6:00 – 8:00 pm IN-PERSON Horizons Conference Center 6200 State Street, Saginaw, MI 48603

Superior – West Apr 27: 6:00 – 8:00 pm VIRTUAL Oct 12: 6:00 – 8:00 pm IN-PERSON Hampton Inn Marquette Waterfront 461 S Lakeshore Blvd, Marquette 49855

Superior – East April 27:6:00 – 8:00 pm VIRTUAL Oct 13: 6:00 – 8:00 pm IN-PERSON Bay Harbor 4000 Main Street, Bay Harbor, MI 49770

Med Onc Locations

Gyn Onc Locations





PARTICIPATING SITES: PALLIATIVE RADIATION THERAPY PROJECT

MOQC MEMBERS

Hospice Locations

Palliative Radiation Locations

VIEW & REGISTER FOR ALL MEETINGS AT: www.moqc.org/events

Due to the evolving COVID-19 pandemic, meetings may be virtual or may be rescheduled. The MOQC Coordinating Center will keep you posted.





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