

Meaningful Use Stage 3: Potential impact on central cancer registries (CCRs)



Presentation for NAACCR
18 June 2015



Jeanette Jackson-Thompson, MSPH, PhD
Missouri Cancer Registry and Research Center (MCR-ARC)
University of Missouri School of Medicine,
Dept. of Health Management & Informatics

Acknowledgments

- MCR data collection activities are supported in part by a cooperative agreement between the Centers for Disease Control and Prevention (CDC) and the Missouri Department of Health and Senior Services (DHSS) (# U58/DP003924-03) and a Surveillance Contract between DHSS and the University of Missouri (MU).
- Meaningful Use Stage 2 – Cancer Reporting activities were funded as part of American Recovery and Reinvestment Act (ARRA) Comparative Effectiveness Research activities through the CDC via a contract between ICF Macro and MU (12/10 – 9/13)

Purpose

- Assess how Meaningful Use (MU) Stage 3 could impact MU Stage 2 – Cancer Reporting
- Explore factors that may influence or determine whether a clinic/physician office (C/PO) will continue with MU – Cancer Reporting past Stage 2

Background

- Many rural clinics and physician offices (C/POs) under-report or do not report their cancer cases.
- The MU incentive program opened the door to increase cancer reporting from these locations.
- MCR-ARC received funding to implement EHR from C/POs into the central cancer registry (CCR).

Background (cont'd)

- The expectation was that MU Stage 2 would lead to greatly increased reporting by C/Pos.
- But:
 - Some vendors were slow to develop a cancer reporting module
 - Other vendors decided not to develop a cancer reporting module

Background (cont'd)

- In addition:
 - Delays were experienced in onboarding C/POs wanting to attest to MU.
 - Changes in public health reporting were proposed for MU Stage 3.
- We were left with a question: How would these factors impact cancer reporting?

Methods

- We participated in a variety of national work groups, task forces
 - Stage 2 and Stage 3
 - NAACCR and non-NAACCR
- We anticipated working w/ certified MU Stage 2 EHR vendors to analyze changes to cancer reporting coming from Stage 3 requirements
 - Not exactly!

Methods (cont'd)

- We:
 - Assessed impact on the CCR of additional data storage needed for Stage 2 and Stage 3 EHR data.
 - Estimated staffing needs and storage costs.
 - Explored other options and alternatives.

Results

- Participation in workgroups (WG), task forces (TF) & advisory groups (AG) - NAACCR
 - EHR Reporting & NAACCR Vol. II Harmonization TF
 - Physician Reporting WG
 - Health IT Advisory Board
 - Edits Impact WG
 - Discharge Data Best Practices TF
 - Research Application Review TF
 - Uniform Data Standards WG

Results (cont'd)

- Participation in workgroups (WG), task forces (TF) & advisory groups (AG) - Other
 - Sprint to Stage 3 WG
 - National Quality Registry Network (NQRN)
 - Health Information Management & Systems Society (HIMSS)
 - National meetings/newsletters
 - Gateway Chapter HIE Forum

Results (cont'd)

- Work w/ vendors; MCR-ARC is contractor to MO DHSS
 - Designated agent –mandated reporters submit data directly to us
 - DHSS decision:
 - C/POs participating in pilot can submit data from EHRs directly
 - C/POs not attesting to MU can also
 - C/POs attesting to MU Stage 2 cannot
 - All Stage 2 ready except cancer

Results (cont'd)

- Assessment of impact of additional data:
 - Strategic planning needed
 - Staff
 - Work flow: what will be processed & when
 - Storage costs will increase
 - Currently have 3 virtual & 1 physical server
 - will need more

Results (cont'd)

- Assessment of impact (cont'd)
 - Staffing needs will increase
 - IT – For SP # 3, created Software Support Analyst (SSA) position
 - Position became vacant
 - Planned to fill at lower level
 - Filled as SSA
 - QA
 - Will need 1 or more CTRs
 - Senior Statistician
 - Statistics GRA needed

Results (cont'd)

- Explore other options
 - Additional linkages
 - Hospital discharge data
 - Medicaid
 - Medicare
 - All-payer claims database (MO doesn't have yet)
 - Survey progress of
 - Other CCRs
 - Other states' HIEs

Conclusions/Discussion

- Grateful to have received funding for Special Project # 3
 - Hoped to capture unreported cases, comorbidities
 - Learned so much, led to more involvement w/ CDC, NAACCR, other organizations
- MU Stage 2 unlikely to bring “big data” to CCR

Conclusions/Discussion (cont'd)

- Too early to evaluate impact of MU Stage 3
 - Public comment ended, final rules yet to be published
 - Might bring in more specialty physicians
 - Concerns
- Other solutions
 - XML
 - Additional linkages

Questions?

Contact info:

Jeannette Jackson-Thompson, MSPH, PhD
Chair, MU Informatics Committee

Director, Missouri Cancer Registry and Research
Center

Research Associate Professor, Health Management
& Informatics, MU School of Medicine

Core Faculty, MU Informatics Institute

JacksonThompsonJ@health.Missouri.edu

401 Clark Hall, Columbia, MO 65211

573-882-7775

<http://mcr.umh.edu>