Meaningful Use Cancer Reporting in Maryland: What Do You Mean?

NAACCR 2016 Annual Conference, St. Louis, MO

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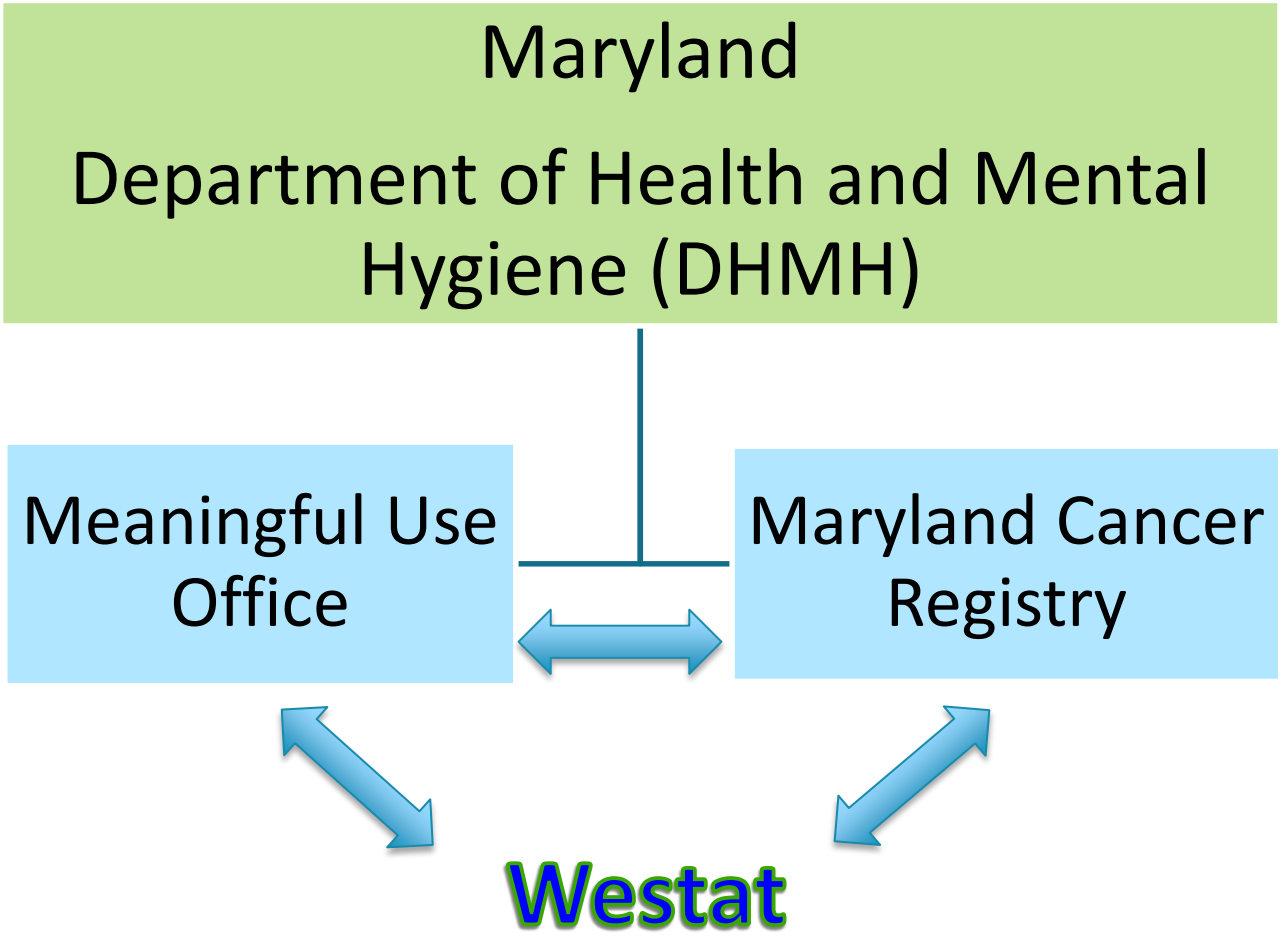
Objectives

- Describe operational aspects of validation testing files
- Discuss development and implementation of tools
- Provide status of testing
- Discuss challenges, next steps

MU Cancer Reporting



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Westat's Role in MU

- Perform validation testing
- Develop procedures, tools
- Communicate with providers, vendors, partners
- Set up transport option
- Participate in conference calls and discussions

Tools Developed

- Procedures, guidelines
  - Registry operations
  - Guidance to providers
  - Common testing issues
- Database to efficiently track MU providers and related events
  - Moved from Excel spreadsheet to Access

Steps Related to Validation Testing

Registration and set up

- EP registers with DHMH; DHMH sends list of active EPs to Westat
- Westat imports data related to new EPs into Access database
- Westat IT manager creates account for file uploads and sends information to EP to begin testing

Testing with fake data

- Westat asks the EP to send a test file within 15 days
- If the file does not "pass," give EP another 15 days to send a corrected file
- If the EP does not send a file within 15 days, send a follow-up email; if an EP that does not send a file or does not respond in 30 days or more, notify DHMH that the EP is non-responsive

Testing with real data

- Once an EP "passes" with fake data, ask to send a test file with real patient data
- Similar follow-up to testing with fake data occurs

Production

- If an EP "passes" with real patient data, the EP is ready for production
- Ask EPs that provide oncology services to submit bi-monthly and EPs that do not provide oncology services to submit quarterly
- Files are routinely reviewed for quality assurance

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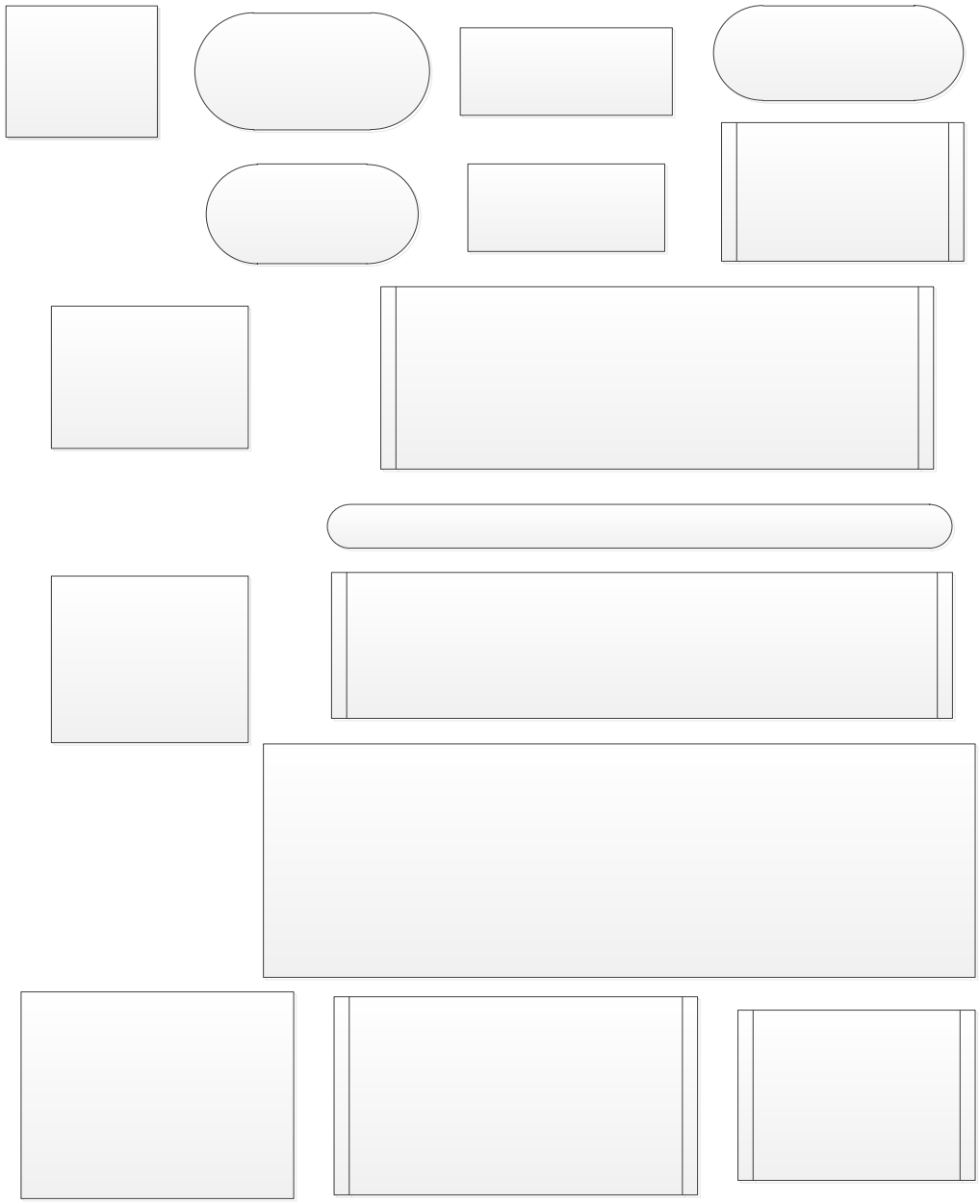
Procedures for Testing



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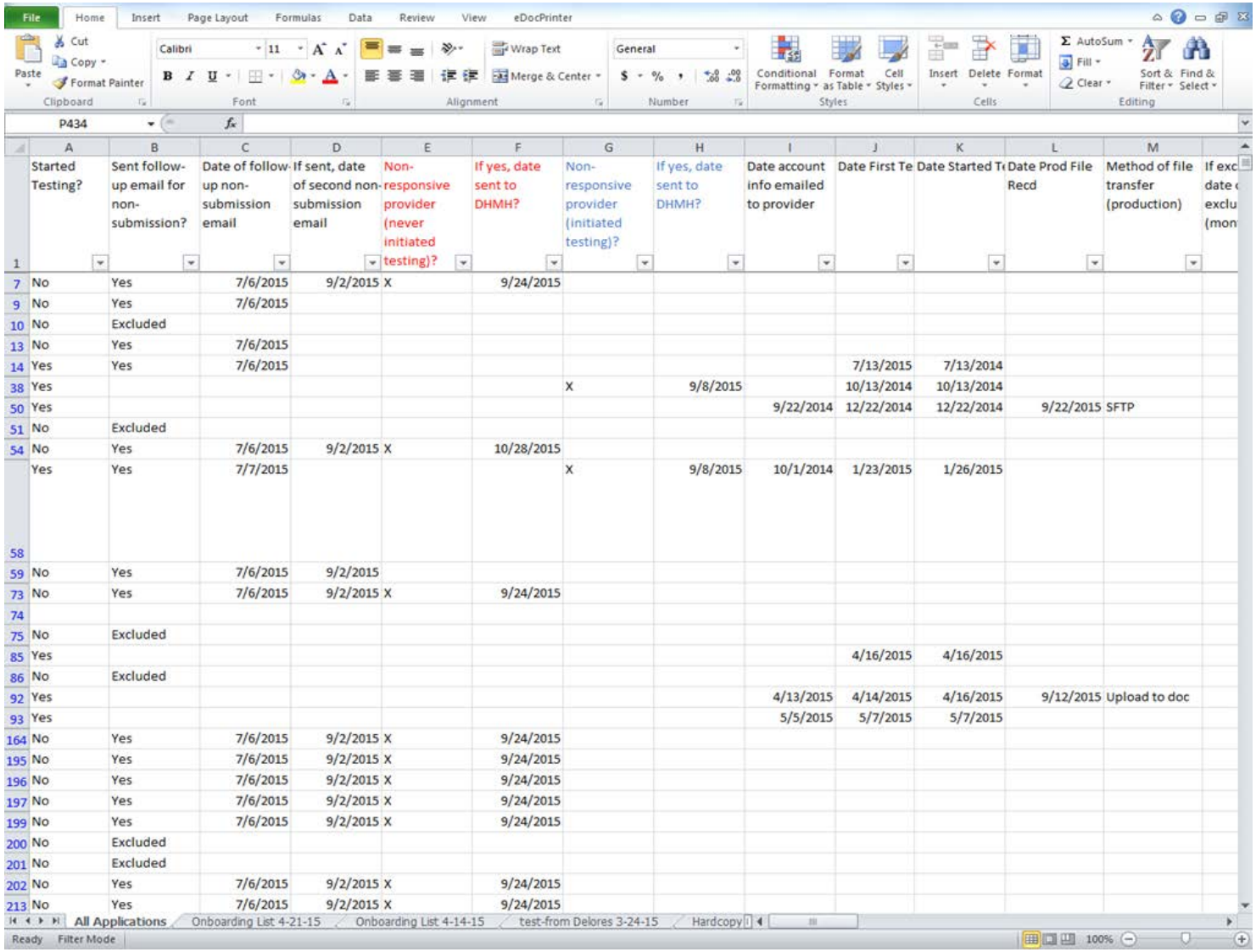
Tracking before MU Database

- Excel spreadsheet
  - 4,983 rows, 45 columns
    - Rows: individual providers for each registration
    - Columns: variables (e.g., date started testing, status, facility info)

Excel Data File



	A	B	C	D	E	F	G	H	I	J	K	L	M
1	Started Testing?	Sent follow-up email for non-submission?	Date of follow-up non-submission email	If sent, date of second non-submission email	Non-responsive provider (never initiated testing)?	If yes, date sent to DHMH?	Non-responsive provider (initiated testing)?	If yes, date sent to DHMH?	Date account info emailed to provider	Date First Te	Date Started T	Date Prod File Recd	Method of file transfer (production)
7	No	Yes	7/6/2015	9/2/2015	X	9/24/2015							
9	No	Yes	7/6/2015										
10	No	Excluded											
13	No	Yes	7/6/2015										
14	Yes	Yes	7/6/2015							7/13/2015	7/13/2014		
38	Yes						X	9/8/2015		10/13/2014	10/13/2014		
50	Yes								9/22/2014	12/22/2014	12/22/2014	9/22/2015	SFTP
51	No	Excluded											
54	No	Yes	7/6/2015	9/2/2015	X	10/28/2015							
58	Yes	Yes	7/7/2015				X	9/8/2015	10/1/2014	1/23/2015	1/26/2015		
59	No	Yes	7/6/2015	9/2/2015									
73	No	Yes	7/6/2015	9/2/2015	X	9/24/2015							
74													
75	No	Excluded											
85	Yes									4/16/2015	4/16/2015		
86	No	Excluded											
92	Yes								4/13/2015	4/14/2015	4/16/2015	9/12/2015	Upload to doc
93	Yes								5/5/2015	5/7/2015	5/7/2015		
164	No	Yes	7/6/2015	9/2/2015	X	9/24/2015							
195	No	Yes	7/6/2015	9/2/2015	X	9/24/2015							
196	No	Yes	7/6/2015	9/2/2015	X	9/24/2015							
197	No	Yes	7/6/2015	9/2/2015	X	9/24/2015							
199	No	Yes	7/6/2015	9/2/2015	X	9/24/2015							
200	No	Excluded											
201	No	Excluded											
202	No	Yes	7/6/2015	9/2/2015	X	9/24/2015							
213	No	Yes	7/6/2015	9/2/2015	X	9/24/2015							

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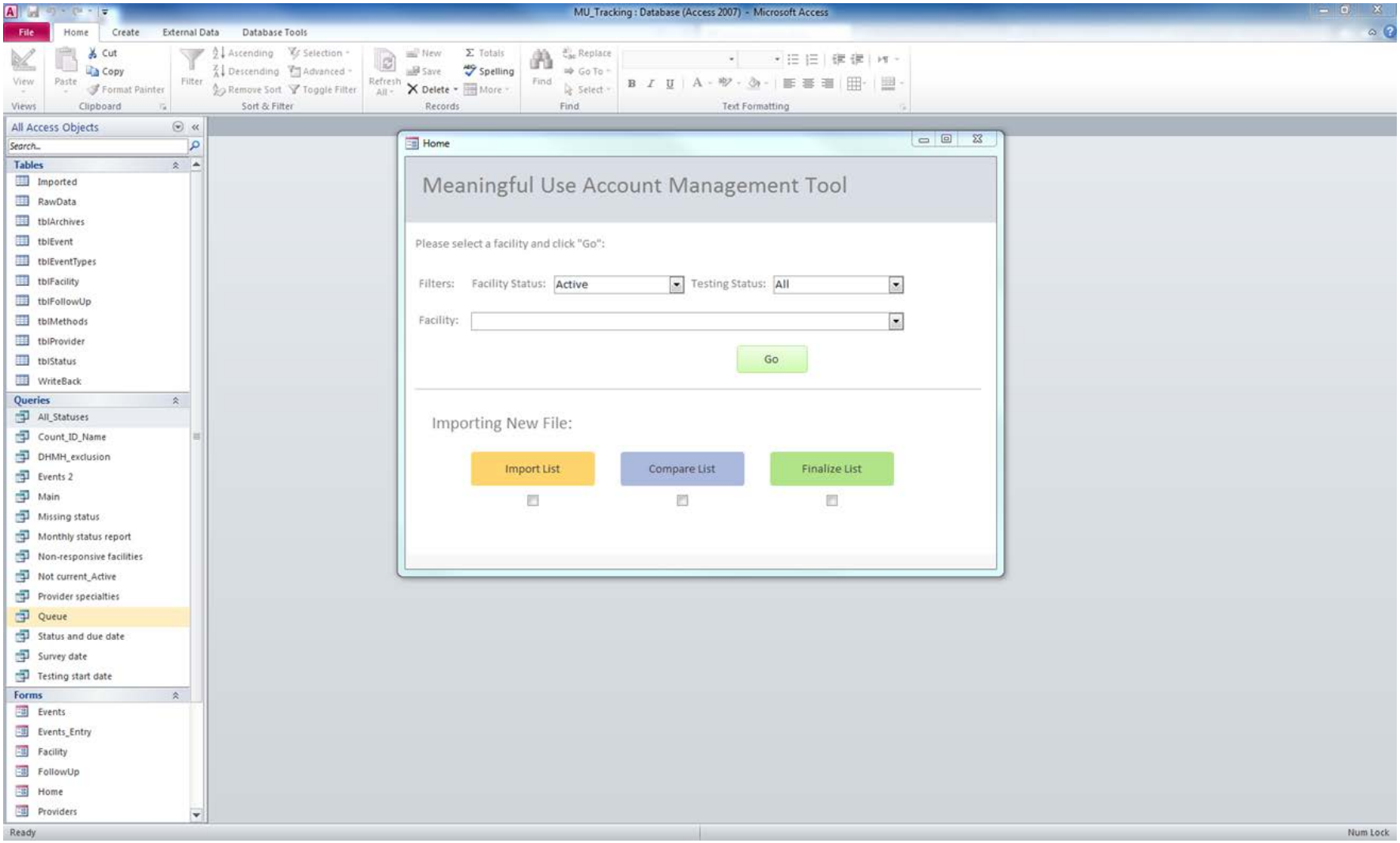
MU Tracking Database



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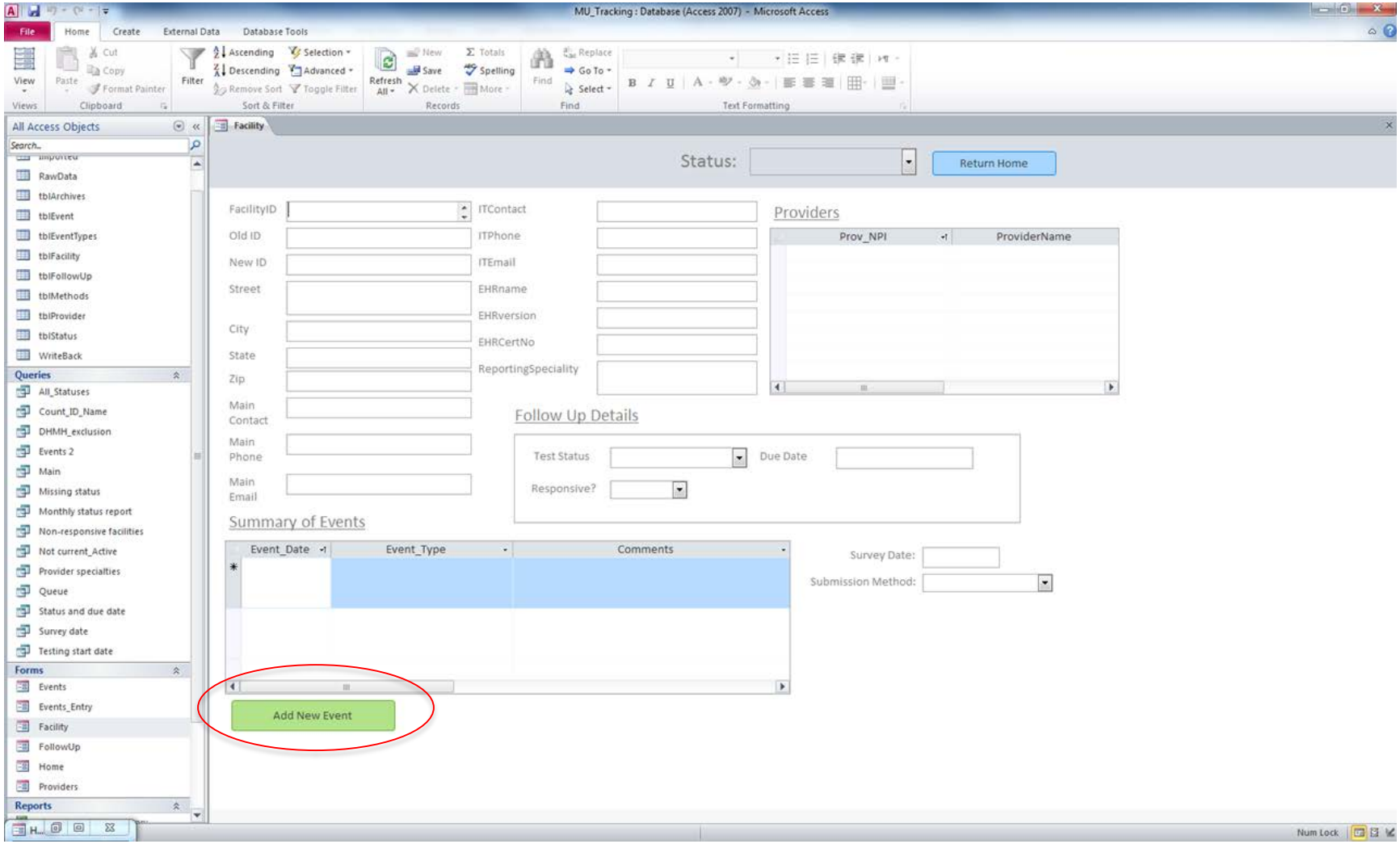

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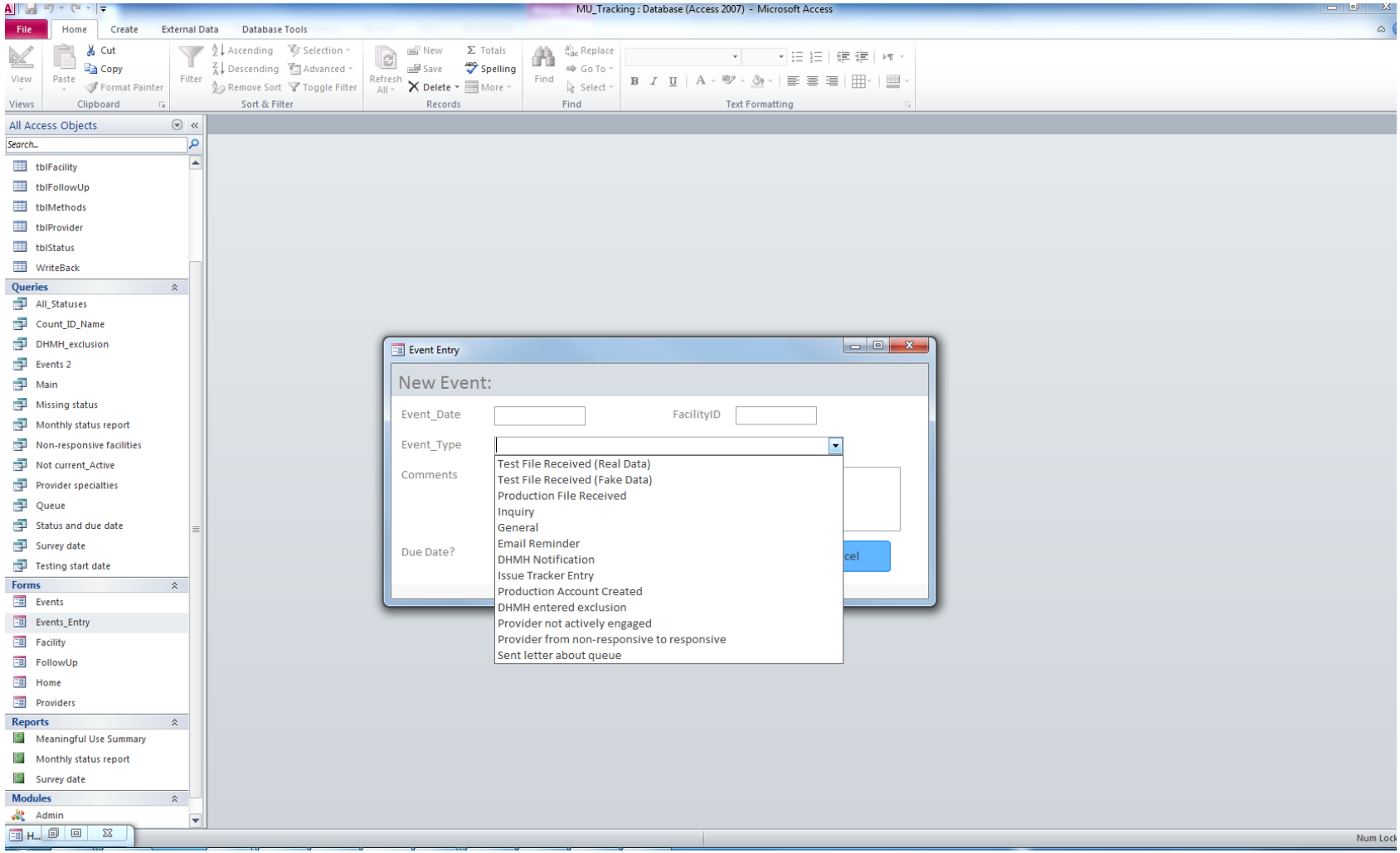

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MU Tracking Database

- Improvements with process of identifying new EPs
- Improved time management
- Better tracking of communication and “events”
- Ability to easily run queries and generate reports

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Status of Testing

Meaningful Use Summary

Facility Status		Test Status	
Active	124		
		Not Started	*78*
		Passed	*7*
		Production	*3*
		Started	*36*
Excluded	122		
		Not Started	*103*
		Started	*19*
Inactivated	8		
		Not started	*6*
		Started	*2*
Total	**254**		

Tuesday, May 17, 2016 Page 1 of 1

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Status of Testing, May 2016

- 124 Active
  - 78 not started testing
  - 36 in testing
  - 7 passed testing
  - 3 in production
- 122 Excluded
- 8 Inactivated

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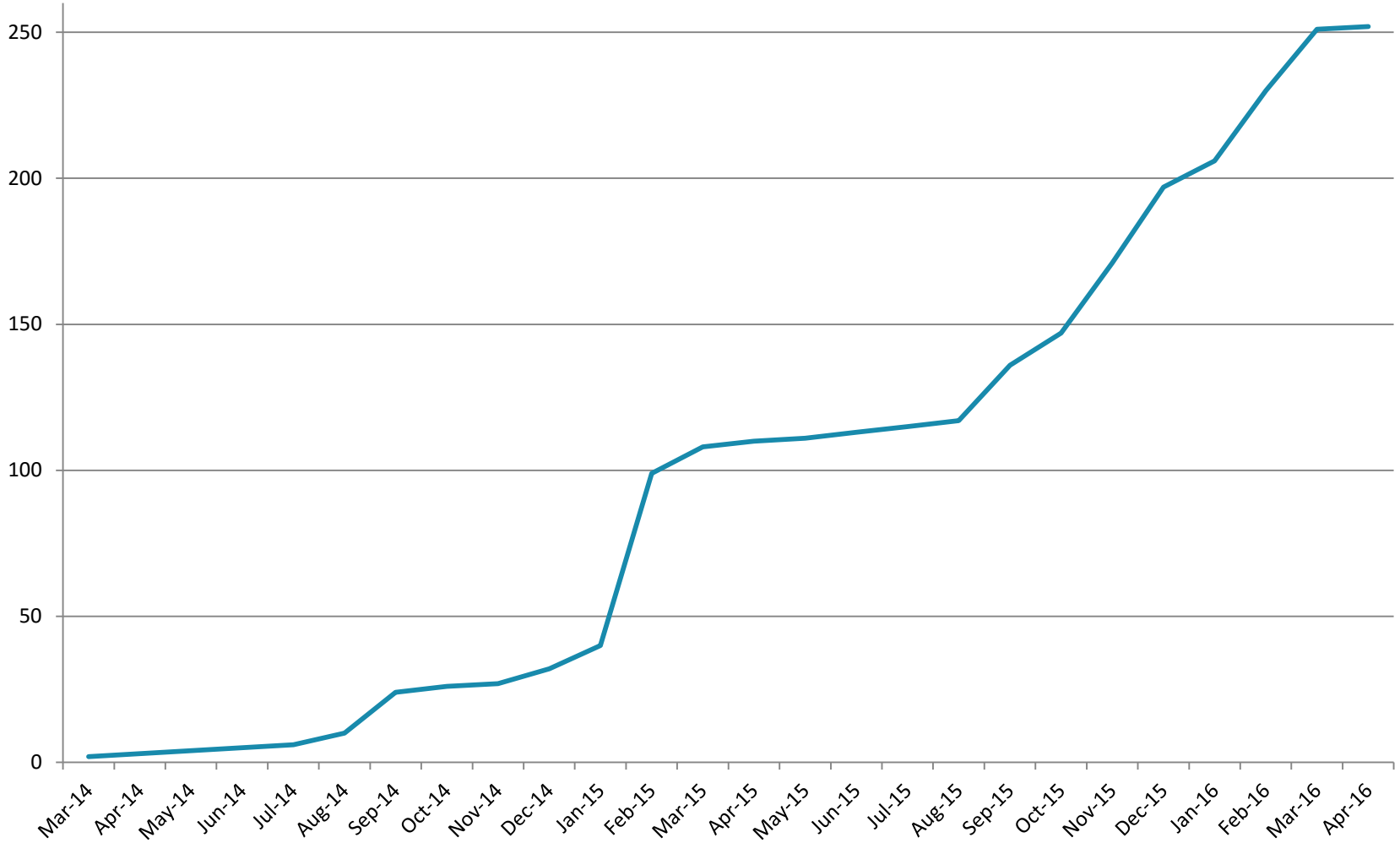
Total EPs Registered for MU Cancer by Month, Mar 2014-May 2016



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Challenges

- Technology-driven
- Interpretation of testing results
- Missing data
- Vendor workflow
- Inquiries from providers, vendors

Next Steps

- Perform quality assurance testing on production files
- Develop procedures for exporting files out of eMaRC
- Assess impact of MU on reporting
  - Attempt matches of MU files to the registry database on a patient level
  - Conduct analysis to see if MU files contain useful information, with a specific interest in staging and treatment data

Summary and Conclusion

- Multi-faceted program
  - Technology-oriented
  - Automation
  - Cancer registration/EHR focus
- Innovative approach to increase reporting and improve data quality
- Role of registrars important
  - Monitor data
  - Quality assurance

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Acknowledgements

- *Westat (Diane Ng, Serban Negoita, Dylan Holt, Erika Wilson, Krishna Hari)*
- *Maryland Cancer Registry, DHMH (Kimberly Stern, Delores Rich)*
- *Meaningful Use office, DHMH (Patricia Schwartz, Naima Garrett)*
- *CDC (Wendy Blumenthal, Lindsay Ryan)*

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Thank you!

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