



New York State Cancer Screening Registry of the CHCANYS Center for Primary Care Informatics: A Demonstration Project

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Background: With funding from the CDC, the NYSDOH, in collaboration with the Community Health Care Association of New York State (CHCANYS), the state’s Primary Care Association, and IPRO, the NYS Quality Improvement Organization, is implementing a five-year demonstration project to develop and use a cancer screening registry within the CHCANYS Center for Primary Care Informatics (CPCI). The CPCI (Figure 1):

- Extracts information from federally qualified health center (FQHC) electronic health records (EHRs);
- Calculates performance measures using uniform National Quality Forum (NQF) specifications and features a dashboard with expanded functionality where FQHCs can compare performance at multiple levels internally and to other FQHCs; and
- Provides clinical workflow tools such as patient visit planning reports.

Goals/Objectives:

- Interface at least 75% of NYS FQHCs to the CPCI;
- Complete all projects phases with at least 36 FQHCs and their practice sites; and
- Increase cancer screening rates across FQHCs by a minimum of 5-10% over baseline by June 2017.

Methods: The project phases are outlined in Figure 2.

Results/Conclusions: As of January 2015, 35 FQHCs and their affiliated sites representing every region of the state, and 7 EHR products, are interfaced with the CPCI. Thirty six FQHCs will complete all project phases by June 2017. The first cohort of twelve FQHCs completed all project phases by December 2014. In 12 months, aggregate cervical, breast and colorectal (Figure 3) cancer screening rates across the cohort rose by 3.8, 4.0 and 15.5 percentage points, respectively, over baseline. Preliminary data from an ongoing evaluation demonstrate the promise that the establishment of a planned approach to cancer screening across FQHCs can be supported by an EHR-based registry that includes data quality as a focus as well as QI coaching that focuses on improved clinical workflow.

Figure 1

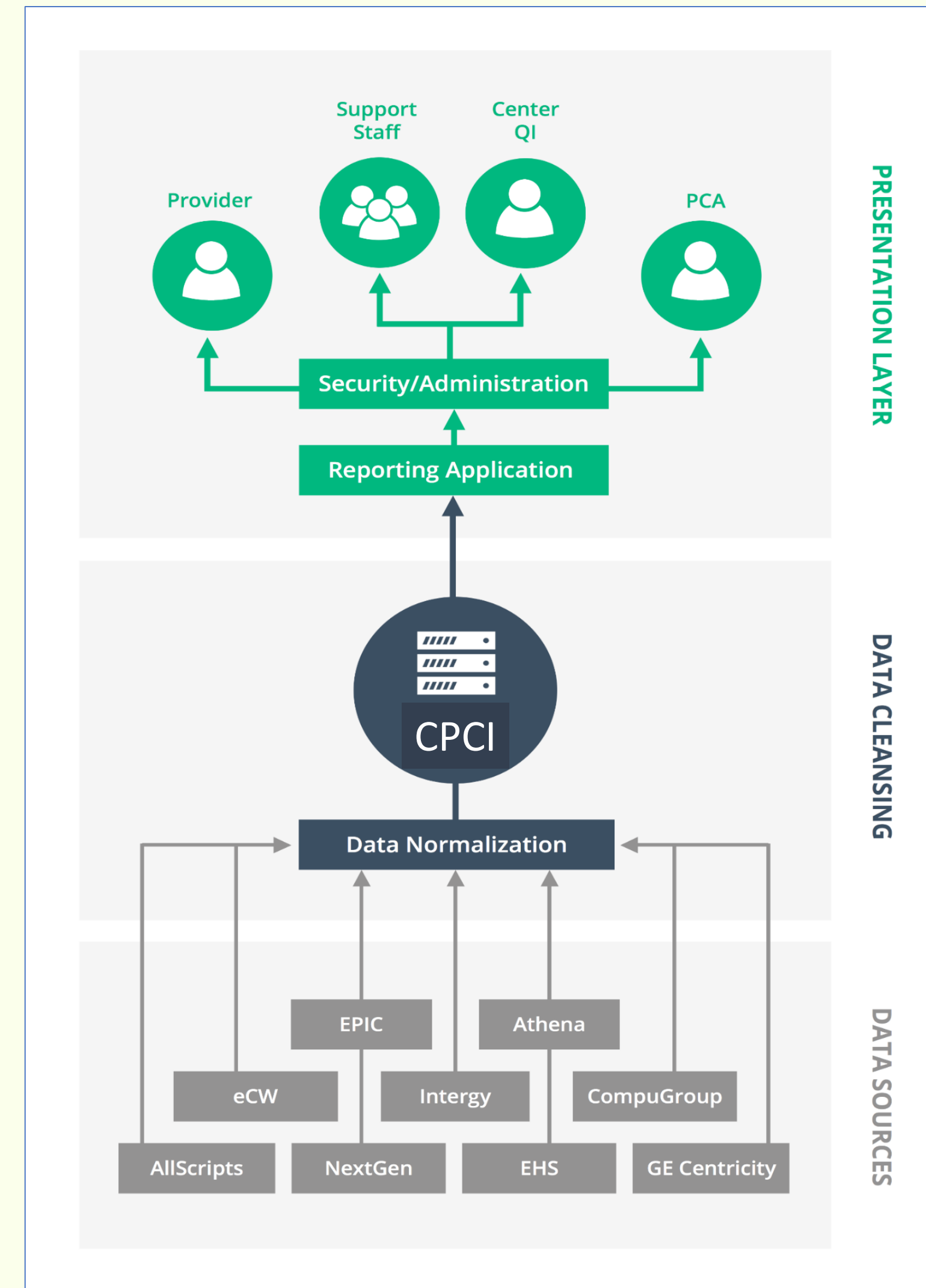


Figure 2a

Data Validation → Quality					
Data Validation Results (Cohort 1)	Records Reviewed	Screening Rate- Abstracted	Screening Rate- CPCI	False Positives	False Negatives
Breast Cancer Metric (NQF 0031)	1,904	48.2%	37.0%	7.5%	22.2%
Colorectal Cancer Metric (NQF 0034)	1,904	26.0%	22.6%	34.7%	14.5%
Cervical Cancer Metric (NQF 0032)	1,855	52.6%	34.5%	4.8%	30.2%
Issues identified: <ul style="list-style-type: none">○ Included inappropriate physicians in metric○ Mapping from EHR to CPCI missed or included inaccurate procedure codes○ Related issues in practice clinical decision support (CDS) or workflow for data capture (e.g., not entering data in EHR structured fields)					

Figure 2

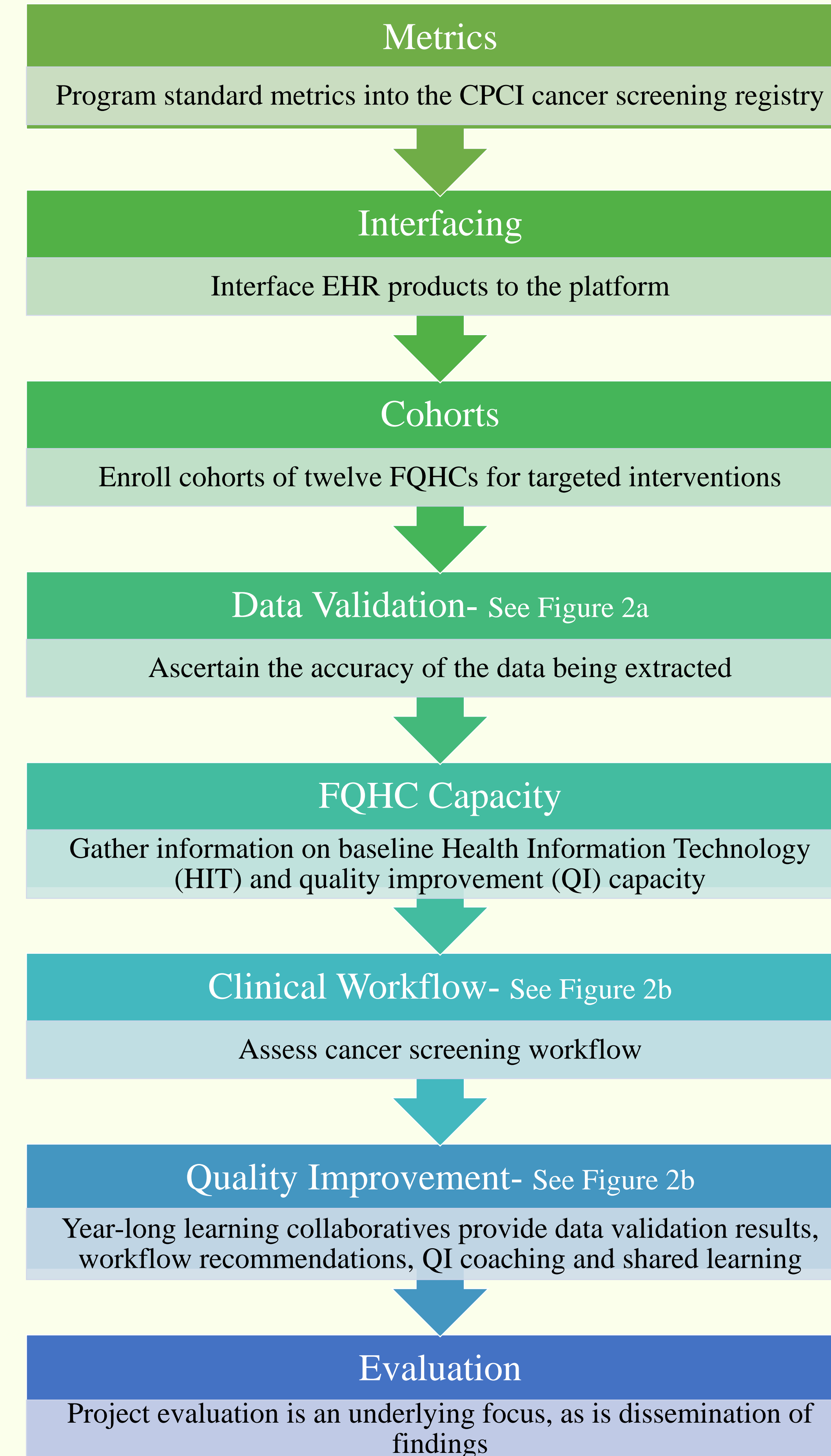


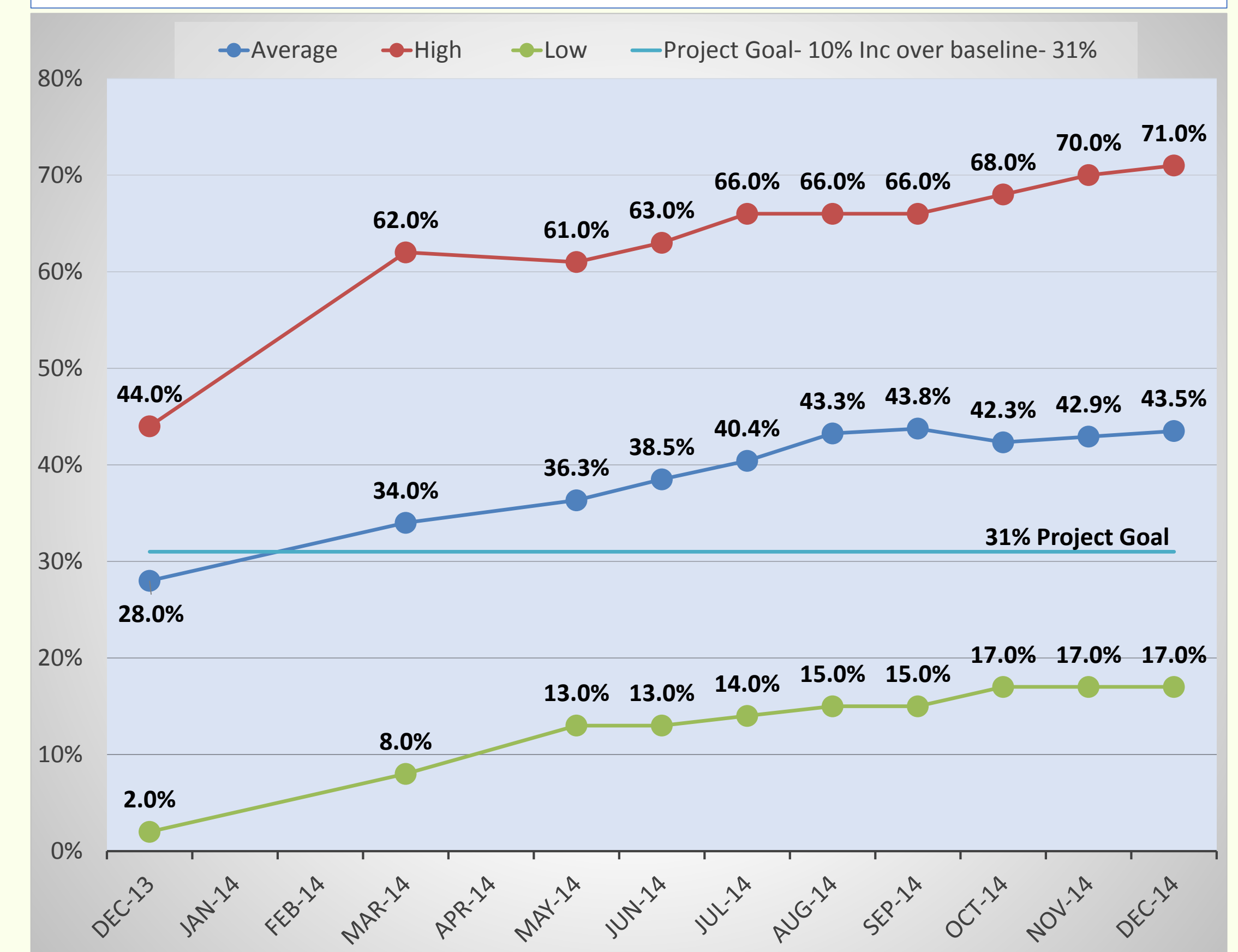
Figure 2b

Quality Improvement Change Package Concepts

1. Policy/Protocol for Cancer Screening
2. Provider-Patient Communications
3. Practice Reminder Systems
4. Tracking and Monitoring

Figure 3

Cohort 1 Colorectal Cancer Screening Trends- December 2013 – December 2014



Cohort 1 Colorectal Cancer Screening Results

December 2013	28.0%
December 2014	43.5%
<ul style="list-style-type: none">❖ Absolute increase of 15.5%❖ Relative increase of 55.4%	