CRStar Insights CoC Quality of Care Measures

The CoC Quality of Care Measures were revised and published by the CoC on 8/06/2019. New and updated measures have been incorporated in CRStar. This CRStar Insight will provide information on the new and updated measures and provide reference to the measure specifications as well as changes and release notes on the COC website.

https://www.facs.org/quality-programs/cancer/ncdb/qualitymeasures



1. Go to Reporting, CPM Reports, then Quality Measures.

- 2. Enter a hospital number.
- 3. Enter begin and end dates of the diagnosis period desired.
- 4. Select Quality Measure to run.
- 5. Click Select.

Note 1: Measures showing (v.18) are measures that have been updated to reflect 2018 changes but are applicable to all diagnosis years.

Note 2: The Bladder Chemo, Bladder Cystectomy and Kidney-Lymph Nodes - Pediatric and new measure is in the software but has not yet been updated by CoC with 2018 standards.

Note 3: This report auto selects the criteria for each measure and gives the user the number of records selected of cases that meet the criteria.

Note 4: The population auto selected can be found in the Select a Population and utilized in reports.

Below are a few examples of the auto selected populations found in Select a Population. It is important for the user to use these population labels in reports without reselecting. If reselected, the population count will revert to 0 and the label will be unusable. If this occurs, the Quality Measure report can simply be re-run.

Search:	Search All			
Hospital Code	Population Label	Request Date 🔻	Requested By	Nbr Cases
01	01 01-01-2015-12-31-2018 Colon - Chemo	09/23/2019	Monica Guistwite	23 🖆
01	01 01-01-2015-12-31-2018 Bladder - Chemo	09/23/2019	Monica Guistwite	0
01	01 01-01-2010-12-31-2018 Bladder - Chemo	09/23/2019	Monica Guistwite	3
01	01 01-01-2015-12-31-2018 Bladder - Cystectomy	09/23/2019	Monica Guistwite	2
01	01 01-01-2015-12-31-2018 Breast - Chemo	09/23/2019	Monica Guistwite	12
01	01 01-01-2015-12-31-2018 Breast - Hormone	09/23/2019	Monica Guistwite	72
01	01 01-01-2015-12-31-2018 Breast - Radiation with Conservation	09/23/2019	Monica Guistwite	69
01	01 01-01-2015-12-31-2018 Breast - Radiation with Mastectomy	09/23/2019	Monica Guistwite	3
01	01 01-01-2015-12-31-2018 Kidney - Lymph Nodes (Pediatric)	09/23/2019	Monica Guistwite	0
01	01 01-01-2010-12-31-2018 Kidney - Lymph Nodes (Pediatric)	09/23/2019	Monica Guistwite	0

The CoC Quality of Care Measures can be found on the CoC website using the following link. Each measure is listed by primary site, measure type, 2019 standard and expected EPR, a description of each measure and the initial release dates.

https://www.facs.org/quality-programs/cancer/ncdb/qualitymeasures

Below each measure and the specifications of each by site can be downloaded as a Word document. The document contains the measure item list, which is the criteria for each measure. These criteria can also be helpful in setting up reports in CRStar to further analyze the data.

Measure Specification Modifications are also available in a Word document that outlines updates to each measure.

Example of BL2RLN-Bladder Measure: At least 2 lymph nodes are removed in patients under 80 undergoing partial or radical cystectomy.

Primary Site	Measure Type	2019Standard and Expected EPR	Measure Description	Initial Release
Bladder				
BL2RLN	Surveillance		At least 2 lymph nodes are removed in patients under 80 undergoing partial or radical cystectomy	Spring 2016

		Numerato	or Criteria				
Diagram Reference	Assessment	FORDS Item	FORDS Codes				
12	At least 2 regional lymph nodes are removed and pathologically examined	Regional Lymph Nodes Examined	Regional Lymph Nodes Examined 02 - 90 AND Regional Lymph Nodes Examined				
		Regional Lymph Nodes Positive	Regional Lymph Nodes Positive				

Measure Item List									
FORDS Data Item	NAACCR #	Description							
Primary Site	400	Organ of origin of the cancer							
Date of Initial Diagnosis	390	Date of Initial Diagnosis							
Sex	220	Sex of patient							
Age at Diagnosis	230	Age of patient at diagnosis							
Sequence Number	560	Sequence of malignant and nonmalignant neoplasms over the lifetime							
Histology	522	Microscopic or cellular anatomy of the cancer							
Behavior Code	523	Neoplastic behavior of the cancer							
Class of Case	610	Indicates the reporting facility's role in managing the cancer							
Comorbidities and Complications (1- 10)	3110, 3120, 3130, 3140, 3150, 3160, 3161, 3162, 3163,	Patient's preexisting medical conditions, factors, complications. Up to 10 ICD-9 Secondary Diagnoses.							
Secondary Diagnosis (1-10)	3780, 3782, 3784, 3786, 3788, 3790, 3792, 3794, 3796,	Patient's preexisting medical conditions, factors, complications. Up to 10 ICD-10 Secondary Diagnoses.							
<u>Charlson-Devo</u> Score (not a Fords Item)	N/A	The highest system derived weighted score based on Comorbidities and Complications (1-10) or based on ICD-10 Secondary Diagnosis (1-10)							
Clinical T	940	AJCC Clinical T							
Clinical N	950	AJCC Clinical N							
Clinical M	960	AJCC Clinical M							
Surgical Procedure of the Primary Site at this facility	670	Surgical procedure of the primary site performed at this facility							
Regional Lymph Nodes Examined	830	Total number of regional lymph nodes that were removed and examined							
Regional Lymph Nodes Positive	820	Total number of regional lymph nodes examined and found to contain metastases							



Below is an example of using the auto selected population generated by the Quality Measure report and setting up an Ad hoc List for a Population to analyze the data using the measure item list. This is an example. The actual data items to use are up to the needs of individual facilities.

	List I	Рор	Graph P	op)			Rpt File		Xtab	
REPORTING	List for a Population Population Label:	01 01-0	01-2010-12-31-2019 Bladder - Lymph N	odes		•		Requested On:	09/23/2019		
Select a Population	Report Label:	Bladder	r Lymph Node Quality Measure			•		Created By:	Melanie Roga	n	
Canned Reports	Choose the Items	for Your I Nbr	Report Item Description	tem Description R/6/I C/D			D. Dicelay Longth Limiting Values			201	
CPM Reports	1 :	L32 Acc	ession Nbr •	L		с.	• 20	10	0		
Adhoc Reports	2 :	133 Тор	ography Code	L	•	D .	• 20	0			
	3 :	L50 Dat	e of Diagnosis	L	•	c •	• 20	10			
Miscellaneous Reports	4	14 Age	e at Diagnosis		•	с •	• 20	20			
Data Exports	5	L18 Seq	i of Primary		-	с •	• 20 • 20	10			
Reporting Utilities	7	147 Clas	ss of Case		•	D •	• 20	0			
roporting outnoo	8	368 Clin	ical T of Tnm Stage	ī	•	- c •	• 20	10			
	9	369 Clin	nical N of Tnm Stage	L	•	c •	• 20	10			
	10 :	370 Clin	ilcal M of Trim Stage 🚽	L	-	с -	- 20	10		•	
	11	827 Can	ncer Directed Surgery Code	L	٠	c •	• 20	0			
	12	156 Noc	des Examined	L	٠	c •	• 20	0			
	13	155 Noc	des Positive 🔹	L	•	c •	• 20	0			
	14		•		٠	•	•			Ŧ	
	Heading:						ď	Include Column Repo Headers O E	rting Device		
	File Name:							○ F ○ F ● S	le Delimited le Fixed-Width creen		
	Start Time:		End Time:								
	🛃 Run)● N	iew 🗙 Delete 🖉 Sav	/e	Ι		Exit				

- 1. Go to Reporting, Ad hoc Reports, then List for a Population.
- 2. Click the drop down to select the auto population previously selected.
- 3. Type in a name for the Report Label.
- 4. List all item numbers to be displayed on the report.
- 5. Choose report device.
- 6. Select.

Note: For more detailed information, refer to the CRStar User Manual or the video tutorials located on the CRStar Resource Page.

The Quality Measure Dashboard reports have been updated to reflect the 2018 changes made by the CoC. The measures that were updated are indicated with (v.18) beside the measure. The remaining measures have not been updated with 2018 standards by the CoC. Currently they have not posted information as to when these measures will be updated.

Note 1: Three measures that have not been updated by the CoC since June 2017 are currently not on the Dashboard report display but are available to run in the reporting module. These measures are Bladder



(BLCT), Bladder (BLCTRI) and Kidney (PD1RLN). Our development team is currently working to redesign the screen so that all measures can be displayed and to make room for future measures.

Note 2: The denominator can be obtained by running the Quality Measure report as shown on page 1. The cases selected are the cases that meet the measure criteria (denominator).

Note 3: The Numerator criteria is found in the measure specifications as shown on page 2. When running the Ad hoc report as suggested on page 3, the user should include the numerator criteria. In the example of the Bladder (BL2RN) measure, the numerators are regional lymph nodes positive and examined. The report can be exported to Excel where the numerator criteria can be sorted or filtered to easily determine the cases that met the measure.

	В	С	D	E	F	G	Н	1	J	K	L	M
1	Topograp 🔻	Date of Diagnos 🔻	Age at Diagno 💌	Seq of Prima 💌	Histolo 💌	Class of Cas 🔻	Clinical T 💌	Clinical N 🔻	Clinical M 🝷	Cancer Directed Surge	Nodes Examine 🔻	Nodes Positiv 🔻
2	C675	04/26/2016	73	02	81203	14	c2	c0	c0	61	00	00
3	C672	10/15/2015	75	02	81203	21	c2B	c0	c0	61	01	00
4	C679	06/30/2015	54	01	81203	21	c2A	c0	c0	71	03	00
5	C679	01/15/2015	66	01	81303	21	c2A	c0	c0	61	04	00
6	C679	05/03/2016	58	00	81303	21	c2	c0	c0	61	06	00
7	C678	01/07/2015	75	02	81303	21	c3	c0	c0	72	07	00
8	C671	12/21/2015	63	00	81303	21	c2	c0	c0	30	07	00
9	C678	09/09/2016	75	01	81203	21	c2	c0	c0	61	07	02
10	C673	07/27/2016	66	00	81303	21	c2	c0	c0	60	09	00
11	C679	12/18/2015	76	02	81203	22	c3	c0	c0	50	09	00
12	C678	09/22/2015	77	02	81203	21	c4A	c0	c0	71	10	00
13	C679	01/13/2015	71	02	81203	21	c2	c0	c0	71	10	00
14	C679	11/25/2015	75	01	81303	22	c2	c0	c0	70	10	00
15	C671	06/04/2015	61	01	81303	21	c2	c0	c0	61	10	00
16	C678	08/06/2015	56	00	81203	21	c2	c0	c0	71	11	00
17	C670	06/14/2016	75	02	81203	21	c2	c0	c0	61	11	00
18	C679	08/31/2015	48	01	81203	22	c2A	c0	c0	64	11	00
19	C671	08/18/2016	72	00	81303	21	c2	c0	c0	71	12	00
20	C678	05/27/2015	61	00	81203	21	c2	c0	c0	71	12	00
21	C674	09/22/2015	61	01	81303	21	c2	c0	c0	61	12	00
22	C679	01/08/2015	57	01	81303	22	c2	c0	c0	71	12	00
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