

CRStar Insights

Making Cancer Registry Data Meaningful & Marketable to Grow Your Oncology Program

“Cancer Registrars: Putting the Pieces Together”!

The theme for the 2017 National Cancer Registrars Week was all about making the data meaningful. But let’s also make it marketable!

What do we mean by that? We all know the value of registry data for approved programs by the state registries and the National Cancer Database. We also know how vital this data is for daily, clinical operation.



But let’s take it one step further, as the savvy oncology facilities are today, and leverage this same data for administrative, marketing, and financial planning. Not to mention community outreach and education planning.

As registrars, you hold the keys to powerful registry data that can better your oncology program for patients, providers, and the community.

Tips to Market Your Data to Program Decision-Makers

The following tips are categorized by audience and represent a small subset of the power within your registry data.

Administrative, Financial and Program Planning

- Show the top cancer sites: Knowing this can help allocate financial resources for future planning, i.e. new equipment, screening programs, etc.
- Analyze sites and their financial status: For example, compare site and stage by insurance coverage. If a patient is uninsured, they typically wait longer to go the doctor and may be diagnosed with a later stage. This information can help target a need for free screenings for these patients.
- Analyze class of case: Look at class 00’s. These are cases diagnosed at your facilities but go elsewhere for treatment. This could lead to the need for new treatment equipment or the need for new cancer services.
- Demonstrate market shares by zip code, county, or state.

- Examine data on hospital referred to: This can be done by site and will show the patients going elsewhere for treatment.
- Analyze data by race, ethnicity, and sex by site for screening programs and marketing.
- Collect and report on billing amount information, length of stay by site, and admit class.
- Provide information about cancer patients to administration for marketing or screenings by providing address, and phone information.
- Target certain demographics for screening based on incidence reports run by race, ethnicity, and sex.
- Analyze treatment information to see what treatment modalities were performed at outside facilities by site.
- Collect Diagnostic guidelines. Today this is not a part of the required data set, but it may soon be required. Assess if your facility is meeting national guidelines and performing all recommended diagnostic testing for quality care. Insurance reimbursement may be based on these guidelines in the future.

ODSs, Hospital Administrators, and Physicians

The following tips focus on mining data for Clinical Use and Outcomes Measures, essential to the planning of services and making quality improvements.

- Incidence reports can be run by site, sex, race, stage, and treatment.
- Compare treatment modalities by site and by physician.
- Compare the treatment distribution of a select treatment modality. For example, compare the specific surgeries performed on any given site or radiation, chemotherapy, etc.
- Analyze treatment by site for a particular stage at diagnosis.
- Analyze Survival by Stage and compare to the NCDDB benchmarks for the entire country as well as the state.
- Survival by treatment can provide information on whether the treatment and care compares and measures up to what is being done nationally.
- Look at the co-morbidity of the patients that did not receive the recommended treatment.
- Examine where tumor markers and prognostic factors are being done on the top sites: For example, PSA for prostate, ER, PR and HER2 for breast, etc.
- Data can be supplied on recurrence: by site, stage, race, etc., as well as subsequent treatment for that recurrence.
- Present all reports by individual physician.
- Take advantage of any User Defined fields in the abstract, if available. Capture pertinent information needed at your facility that is not part of the cancer registry data set.
- Collect and report on Clinical Trials: participation, type of trial, completion status, etc.
- Utilize registry data fields and/or User Defined fields to help maintain COC compliance with certain standards.

With these data tips, you hold the key to help empower your registry and cancer program. And CRStar by Health Catalyst is here to help you!

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