

ASCO QOPI Certification Program

QOPI® Certification Program Participation Guide

Updated January 2018

QOPI® Certification Participation Guide

Section One: Introduction	3
Section Two: Practice Definition	3
Designation of QOPI® Certification	4
Large, Multi-Site Practices	4
Practices That Do Not Provide Infusion Services.....	4
Section Three: Eligibility for QOPI® Certification	4
International Practices	4
Participation in QOPI® Chart Data Abstraction	4
When to Participate in QOPI®	5
QOPI® Data Collection Round Details	5
QOPI® Measures for QOPI® Certification	5
QOPI® Certification Quality Scoring Threshold	5
Target Chart Requirements.....	5
Section Four: QOPI® Certification Application Process.....	6
Determining Practice FTEs	6
QOPI® Certification Application Fees	6
Required QOPI Certification 101 Webinar	7
Application Process for New and Re-certifying Practices.....	7
Submitting Required Documentation	8
Supporting Standards Documentation.....	8
Section Five: Pending Status.....	8
QOPI® Certification Pending Status	8
QOPI® Re-certification Pending Status.....	9
Section Six: QOPI® Certification On-Site Survey.....	9
Determining Survey Sites and Additional Fees.....	9
Practice Preparation for the On-Site Survey	9
On-Site Survey Agenda	10
Exit Summary of Findings.....	10
Final Review	10
Repeat On-Site Survey	11
Section Seven: On-Site Survey Report and Response Timeline.....	11
Certification Compliance Report Response Timeline	11

Section Eight: QOPI® Certification Award.....11

 QOPI® Certification Term 11

 Marketing QOPI® Certification Status 12

 Maintaining QOPI® Certification Status 12

Section Nine: QOPI® Certification Program Policy Summaries.....12

 Information and Data Released From the QOPI® Certification Program..... 12

 Repeat On-Site Survey Policy 12

 QOPI Certification Appeals Process 13

 Requesting an Appeal 13

 Notification of Appeals Decision 13

 Conflict Of Interest Policy for QOPI® Certification, Appeals, and Revocation 14

 Conflict of Interest Screens 14

 Practice Mergers and Transactions Policy..... 14

 Practice Transactions 14

 QOPI® Certification Program Policy for the Extensions of Practice’s Term Expiration 15

 Requesting an Extension..... 15

 QOPI® Certification Score Waiver Review Policy 16

 Policy for Certification Revocation..... 16

 Appropriate Use Protocol and User Access Protocol 16

Section Ten: Contact Us.....16

 Contact Us..... 16

Section One: Introduction

The QOPI® Certification Program builds upon the success of the American Society of Clinical Oncology's (ASCO) Quality Oncology Practice Initiative (QOPI®). QOPI® Certification is conducted by the QOPI® Certification Program (QCP™), a Virginia limited liability company wholly owned by ASCO. QOPI® Certification demonstrates a commitment to excellence and ongoing quality improvement in the hematology-oncology outpatient practice. To achieve certification, a practice/institution must demonstrate compliance with all of the QOPI® Certification Program Standards. To download a copy of the Certification Standards and the companion Standards Manual which serves as a guide for compliance with each standard, please review our website: <https://practice.asco.org/quality-improvement/quality-programs/qopi-certification-program/about-qopi-certification>

The goals of the QOPI® Certification Program are to:

- Promote the highest quality cancer care as defined by clinician experts
- Provide a trusted solution to satisfy external demand for quality activities
- Reduce multiple assessment and improvement programs or requirements for practices, including health plan programs

This guide provides detailed instructions to practices entering the QOPI® Certification Program. For information regarding QOPI® data abstraction, please visit <https://practice.asco.org/quality-improvement/quality-programs/quality-oncology-practice-initiative>

Section Two: Practice Definition

QCP™ awards QOPI® Certification to practices rather than individual office sites. Practices are expected to come into Certification with all of their office sites. However, QCP™ may grant exceptions to this rule for special circumstances. Practices that would like to participate with less than all of their office sites should contact the [QOPI® Certification Helpdesk](#) for more information. Multi-Site practices wishing to test the certification waters are permitted to participate with a pioneer site. Practices applying for Certification using a pioneer site should plan to certify the practice as a whole in future years. Sites coming into Certification separately should develop a plan with QCP™ staff for merging any existing QOPI® Certified practice sites in the QOPI® database, so the practice can pursue Certification as a whole at a later date.

For Certification purposes, the defining feature of a practice is the use of the same policies and procedures across all office sites. Certification of a practice is only meaningful if standards apply to all sites. Loosely affiliated organizations, with multiple office sites that do not operate under the same policies and procedures at all office sites, will be required to pursue QOPI® Certification separately. To become QOPI® Certified as a practice, an applicant must demonstrate to QCP's satisfaction that all of its office sites are functionally integrated. Staffs that rotate across all sites, identifying a centralized person or entity as responsible for implementing policies/quality across all sites, the use of a common EMR, and operation under a single tax ID number are all indicators of functional integration.

Oncology groups that have unique practice arrangements, but would like to apply for Certification, should contact QCP™ staff to discuss Certification participation. Only practice sites that provide outpatient hematology-oncology or medical oncology care, are eligible to apply for QOPI® Certification.

Designation of QOPI® Certification

Designation of QOPI® Certification applies only to participating practice sites. A site is not permitted to present itself as QOPI® Certified because of its affiliation with other QOPI® certified entities. Only practice sites that are subject to the full QOPI® Certification application and review process may present themselves as being QOPI® Certified.

Large, Multi-Site Practices

A large, multi-site practice may submit a single Certification application, if each site of the practice is located within a geographic distance of 250 road miles from at least one other site of the practice, as measured by the shortest route between such sites.

For practices that have one or more sites located more than 250 road miles from the next closest site, as measured by the shortest route between such sites, QCP™ may divide the practice into regions. Practices in this category should consult QCP™ regarding the appropriate manner of applying for Certification. The QOPI® Certification Program retains the sole discretion to establish geographic regions.

Practices That Do Not Provide Infusion Services

A practice that does not administer chemotherapy on site or refers a majority of their patients to unaffiliated infusion centers, may be eligible for Certification by demonstrating a sufficient relationship with one or more unaffiliated infusion center(s) to which it generally refers its patients. Practices that do not provide infusion services should contact the [QOPI® Certification Helpdesk](#) to determine their eligibility.

Section Three: Eligibility for QOPI® Certification

This section describes eligibility requirements for QOPI® Certification Program applicants.

International Practices

Currently a limited number of countries are eligible to pursue QOPI Certification based on a variety of factors. If your practice is located outside of the United States, please email globalquality@asco.org stating your interest.

Participation in QOPI® Chart Data Abstraction

To be eligible for the QOPI® Certification Program, a practice must abstract the QCP™ Track in a QOPI® data abstraction round and meet or exceed the QOPI® Certification scoring threshold of 75%. Practices pursuing certification must submit data for all measures included within the QCP™ Track, as appropriate to their treatment population. The QCP™ Track contains select measures from the following QOPI® Modules:

- Core
- Symptom/Toxicity Management
- Gynecologic Cancer
- Breast Cancer
- Colorectal Cancer
- Non-Small Cell Lung Cancer

When to Participate in QOPI®

Practices must apply for Certification after participating in the QOPI® chart abstraction. Re-certifying practices should participate in QOPI® chart abstraction at least 9-12 months prior to certification expiration, to minimize the risk of lapsing. Final Certification Reports containing the QOPI® Overall Quality Score are typically released two weeks after each round closes. Practice contacts with report credentials can access the Certification Reports through the QOPI® Dashboard, in the reports tab.

QOPI® Data Collection Round Details

The QOPI® data collection, which includes a retrospective chart review, is currently offered twice each year, in the spring and in the fall. Practice staff identifies cases as specified by the QOPI® methodology, and abstracts data from paper medical records and/or electronic health records (EHR). A detailed QOPI® User Manual is available in the [QOPI® Welcome Page](#) to assist practice staff in appropriately selecting charts for review, and successfully completing the chart abstraction. All data are submitted using a secure, online web-based application.

The QOPI® measures are organized into a required core set, and disease and domain specific modules. Practices seeking certification select “QCP™ Track” and submit chart data applicable to the practice’s patient population.

QOPI® Measures for QOPI® Certification

ASCO members lead the QOPI® Certification Program, including selecting measures for the QCP™ Track and Certification Standards. Other program stakeholders, including patient advocates, non-oncologist clinicians, private-payer representatives, and government agencies, serve as advisors in their development. All QOPI® Certification Measures are pilot-tested and used in previous reporting periods as quality improvement measures.

A complete list of the QOPI® Certification designated measures, including their specifications, scoring thresholds, and the overall scoring methodology, can be found on the [QOPI® Welcome Page](#).

QOPI® Certification Quality Scoring Threshold

The QOPI® Certification Report provides the practice score on the designated QCP™ Track measures and the Overall Quality Score. The Overall Quality Score is an aggregate score based on the QCP™ Track measures, within the required modules designated for QOPI® Certification. The QOPI® Certification Program performance threshold of 75% is based on statistical analyses of performance reports.

Target Chart Requirements

Practices must follow the QOPI® sampling methodology and meet the minimum unique chart requirements based on practice size. Charts from all medical oncologists and hematologist oncologists from all office locations pursuing certification must be included in the pool from which charts are sampled. If a practice is unable to meet their minimum unique chart requirement, they must attest that they have abstracted all eligible charts for the round to be considered for an exemption. QCP™ Leadership will determine if a practice unable to meet the unique chart minimum is in fact eligible to pursue certification.

Table: Unique Chart Requirements				
Medical/Hematologist Oncologist Clinical FTEs	1	2-3	4-6	7+
Minimum Unique Chart Requirement	48	64	68	80

Section Four: QOPI® Certification Application Process

This section describes the processes required to apply for and achieve QOPI® Certification once a practice is eligible.

Determining Practice FTEs

Full Time Equivalent (FTE) is the ratio of the total number of clinical hours during a period (part time, full time, contracted) with the number of working hours in that period; or the proportion of time a medical oncologist or hematologist provides clinical care relative to a full-time schedule. The ratio units are FTE units, or equivalent employees working full-time (one FTE equals one employee working full-time).

For example: A practice has three clinicians working 50 hours, 40 hours, and 10 hours per week for a combined total of 100 hours. Assuming a full-time employee works 40 hours per week; the full time equivalent calculation is 100 hours divided by 40 hours, or 2.5 FTE.

QOPI® Certification Application Fees

QOPI® abstraction is an ASCO member benefit with free participation to all outpatient practices with at least one ASCO member in good standing. For QOPI® Certification, cost is determined by the number of medical oncology and hematologist clinical FTEs at a participating practice, plus a fee based on the number of practice locations that administer chemotherapy. In certain cases, an additional fee covering the On-Site Survey may be applied depending on number of infusion suites, distance between sites, as well as patient volume. Additional fees are assessed for applicants outside of the United States.

Payment should only be sent after staff approval in the QCP Application. Each application fee covers the duration of the 3-year Certification term (if Certification is awarded).

Step 1) FTE Cost Calculation

QOPI Certification Program FTE Price Ranges	
1-3 FTEs	\$3,500
4-6 FTEs	\$6,000
7-9 FTEs	\$8,000

10-15 FTEs	\$10,000
16-20 FTEs	\$12,500
21-25 FTEs	\$14,000
26-30 FTEs	\$16,000
31-40 FTEs	\$18,000
41-50 FTEs	\$20,000

Step 2) Sites Cost Calculation

QOPI Certification Program Site Fees	
1-5 Sites	No additional fee
6-10 Sites	\$1,500
11-15 Sites	\$2,250
16-20 Sites	\$3,275

[Required QOPI Certification 101 Webinar](#)

New and Re-certifying Practices will be required to attend a live educational webinar or listen to a pre-recorded version of the session before completing the online QOPI Certification Application. The webinar will provide an overview of the QOPI Certification process including the Certification Standards and what to expect during the On-Site Survey. Attendance will also provide practices an opportunity to speak directly with QOPI® Certification Staff regarding standard submission and On-Site Survey readiness.

[Application Process for New and Re-certifying Practices](#)

The primary contact person designated during QOPI® registration will receive all important communications regarding the status of their practice’s application.

Practices must complete and submit the online [QOPI® Certification Application](#), which includes the following steps:

Step 1: Eligibility

Step 2: Agreements**Step 3:** QCP™ Questionnaire

- Key Practice Features
- Clinical Information
- QCP Questionnaire
- NPI Listing

Step 4: Payment**Step 5:** Pre-Survey Documents**Step 6:** On-Site Survey Availability**Step 7:** Post-Survey Documents

A comprehensive QCP Online Application Guide is available on the [QOPI Certification Program website](#) for practice reference.

Submitting Required Documentation

This section describes the process and procedures to follow when submitting supporting documentation for QOPI® Certification.

Supporting Standards Documentation

Practices are required to submit supporting documentation for select Certification Standards at the time of application. Applicants must submit supporting documentation for the following Certification Standards:

- Standard 1.1: Clinical Staff Qualifications Policy
- Standard 1.7: Missed Appointment Follow-Up Policy
- Standard 1.8: 24/7 Triage Policy
- Standard 2.1: Patient Consent Policy
- Standard 3.5: Intrathecal Chemotherapy Preparation Policy
- Standard 3.6: Intrathecal Chemotherapy Administration Policy
- Standard 3.11: Extravasation Management
- Standard 4.1: Emergent Treatment Policy
- Standard 4.2: Initial Oral Chemotherapy Adherence Policy
- Standard 4.3: Ongoing Oral Chemotherapy Adherence Policy
- Standard 4.4: Chemotherapy Toxicity Evaluation and Documentation Policy

Section Five: Pending Status

QOPI® Certification Pending Status

Once a practice has submitted the complete Certification Application and required documents, the practice will be awarded QOPI® Certification Pending Status, signifying their readiness for an on-site survey. Practices are granted Pending Status upon receipt of the supporting documentation including verification of Standards listed [above](#). New Practices have one year from the designation of Certification Pending status to meet all requirements for certification.

QOPI® Re-certification Pending Status

Once a practice has submitted the complete Certification Application and required documents, the practice will be awarded QOPI® Re-certification Pending Status, signifying their readiness for an on-site survey. Re-certifying practices have up until the expiration of their current term to achieve QOPI® Re-certification.

Section Six: QOPI® Certification On-Site Survey

New and Re-certifying practices must participate in an On-Site Survey where a qualified oncology professional will travel to the practice to assess compliance with each [Certification Standard](#). On-Site Surveys occur five to ten weeks from Pending Status award date, depending on surveyor availability and practice readiness. Practices will be notified of their on-site surveyor's name within one month of submitting their application, and have the opportunity to confirm that they do not have a conflict of interest with the assigned surveyor. After the surveyor is cleared, they will connect with the practice to confirm their preferred survey date.

Determining Survey Sites and Additional Fees

All new and Re-certifying practices are subjected to participate in an On-Site Survey. QOPI® Certification program staff will randomly select the site(s) to be visited.

Practices that have one or more sites located more than 250 road miles from the next closest site, as measured by the shortest route between such sites, may be divided into regions by QCP™. The practice should consult QCP™ regarding the appropriate manner of applying for QOPI® Certification, but the QOPI® Certification Program retains the sole discretion to establish the geographic regions.

Whether a large, multi-site practice is divided into geographic regions or permitted to apply for Certification under a single application, QCP™ may assess additional fees to cover the cost of the on-site surveys and any travel related costs if sites being surveyed are separated by more than a one-hour driving distance.

Practice Preparation for the On-Site Survey

To ensure a smooth QOPI® On-Site Survey, please follow these steps:

1. Ensure that someone who is familiar with the practice's EHR system (if applicable) will be available to spend approximately 1-4 hours with the On-Site Surveyor on the day of the site visit to review records and identify Certification Standards elements within existing medical records. Surveyors are not permitted to access EHR system without staff present.
2. If chemotherapy is prepared/mixed by an off-site pharmacy or at another location, please let the surveyor know during the scheduling process. The practice will need to arrange for the surveyor to observe chemotherapy being prepared.
3. Ensure the availability of a conference room or quiet area for the day to allow the surveyor to review patient records and other associated documents.
4. Provide the surveyor with access to the practice's policy/procedure manual for each site (if there is only one site, then provide one policy binder). The policies that correspond to the

QOPI® Certification Standards must be readily accessible to the on-site surveyor. Many practices find that creating a binder with policies specific to the QOPI® Certification Standards saves time during the review day. Please inform practice staff they may be selected for observation and that participation is mandatory to continue with the on-site survey process.

Note: The On-Site Surveyor will randomly choose the patients to follow. It is part of the On-Site Survey process to ask the patient's permission first. Practice staff will be asked to confirm and receive approval from the patient for the surveyor to observe the chemotherapy process. If the practice does not provide infusion services on-site, please contact the QOPI® Certification Helpdesk before applying.

Because the potential for bias in such situations is real and significant, practice staff's refusal to participate in the On-Site Survey process is grounds for QOPI® Certification failure.

On-Site Survey Agenda

The surveyor will contact the practice after a survey date is confirmed to discuss day-of logistics and their working agenda. The On-Site Surveyor's objective is to review practice compliance with the QOPI® Certification Standards using a patient tracer method through:

- Review of Medical Record documentation
- Review of policies, procedures, and guidelines
- Observation of Chemotherapy Preparation
- Observation of Chemotherapy Administration
- Interviewing two to three Registered Nurses and an Administrator or Educator

Exit Summary of Findings

The surveyor will provide the practice with a preliminary overview of the findings for each of the QOPI® Certification Standards. The exit summary will take approximately 30-45 minutes and will provide the practice with an opportunity to clarify the QOPI® Certification Standards and the surveyor's observations. During the Exit Summary, practices are provided the opportunity to invite team members who may benefit from the discussion of the findings. Any standard designations the surveyor might give at this point are subject to change, as they must be reviewed by a Committee Member prior to finalization.

Final Review

QOPI Certification Committee Reviewers, including community and academic oncologists and oncology professionals, evaluate the On-Site Survey Report and any responses to determine the QOPI® Certification award decision. Practices may appeal Certification decisions using a structured appeals process. An overview of the QOPI Certification appeals process is available in the [QOPI® Certification Appeals Process](#) section of this Guide. To request a copy of the full appeals process, please contact qopicertification@asco.org.

Repeat On-Site Survey

Following review of a practice's QOPI® Certification Application and On-Site Survey Report, the QOPI® Certification Program may determine that a repeat On-Site Survey is necessary to evaluate the practice's qualification for QOPI® Certification. Please refer to the QCP™ Repeat On-Site Survey Policy outlined [below](#).

Section Seven: On-Site Survey Report and Response Timeline

Upon completion of the On-Site Survey, practices will receive a report assessing compliance with each certification standard and detailing any requirements (if any) which must be addressed before Certification can be awarded. New Practices have up to one year from their Certification Pending date to meet all requirements for Certification. To allow time for internal review, Re-certifying practices have up until one month before their current certification term ends to meet all requirements.

Certification Compliance Report Response Timeline

1. The Certification Compliance Report (CCR) is written by the On-Site Surveyor and submitted to QCP staff for initial review 10 calendar days after the On-Site Survey.
2. The CCR is finalized by QCP staff and sent to the QCP Committee Reviewer for final review within 7 calendar days.
3. The final CCR is sent to the practice with instructions for submitting a Certification Compliance Plan if there are any outstanding requirements. The Certification Compliance Plan is sent by the practice to QCP staff at gopicertification@asco.org within 10 business days from the day the final CCR is received.
4. The Certification Compliance Plan will be reviewed by QCP staff for clarity, accuracy, and acceptable timeline for certification/re-certification.
5. The practice will work on the requirements and submitting any corresponding documentation to demonstrate compliance with all previously unmet standards within 90 days of receiving the final CCR.
6. Once all required documentation has been submitted, it will be summarized for completeness and accuracy, as specified in the CCR, and sent to the original QCP™ committee reviewer for final review and approval within 7 business days.
7. When the QCP Committee reviewer approves the document submission, the practice will be notified of their QOPI Certification award.

Section Eight: QOPI® Certification Award

Certification is awarded when a practice is deemed to have met all requirements for Certification. The award indicates that by achieving QOPI® Certification or Re-certification, a practice has participated in the QOPI® Certification process, has met or exceeded a benchmark score on measures that compared the quality of its care against national standards, and participated in an On-Site Survey and peer review by a select team of oncology professionals.

QOPI® Certification Term

QOPI® Certification has a three-year term, starting at the time when the practice achieves QOPI® Certification status. Re-certifying practices will maintain their original QOPI® Certification date and a

subsequent three-year term will be added to the original expiration date, unless their certification term lapses before re-certification is achieved.

Marketing QOPI® Certification Status

QOPI® Certified Practices receive resources from QCP™ to help recognize and promote their status. When certification is awarded, practices receive a media kit, which includes logo files, a brand guide for how to use the logos and samples of social media posts, press releases, and newsletters. ASCO's marketing and communications teams are available and ready to assist practices as requested. In addition, each certified practice receives one complimentary award plaque to display at their facility. More plaques may be purchased for a fee. QCP™ also displays QOPI® Certified Practices in a [map on the QOPI Certification website](#).

Maintaining QOPI® Certification Status

To maintain QOPI® Certification status, all practices must participate in QOPI® chart abstraction by submitting data for at least the Core module plus one module of the practice's choice once per year of their certification term. Practices should plan to prepare for re-certification in Year 2 by abstracting the QCP™ Track measures, which fulfills the maintenance requirement for that year.

If a practice does not participate in QOPI® chart abstraction once per year, they will receive a warning notice. After one warning notice has been sent, the practice must participate in the next QOPI® chart abstraction round or the practice will lose their Certification status.

There is no scoring requirement for maintenance rounds. While the requirement is only one module plus the Core module, practices are encouraged to abstract modules that enhance their quality initiatives.

Section Nine: QOPI® Certification Program Policy Summaries

This section describes QOPI® Certification Program policies. All QOPI® Certification policies can be requested by writing to qopicertification@asco.org

Information and Data Released From the QOPI® Certification Program

ASCO will not release any information or performance data, without the specific request of the participating practice. Current certified practice names, addresses, and terms will be displayed on the QOPI® Certification Program's website. With practice opt-in, ASCO will transfer a practice's certification status to health plans or other entities selected by that practice.

Repeat On-Site Survey Policy

Following review of a practice's QOPI® Certification Application and completion of the On-Site Survey, the QOPI® Certification Program may determine that an additional On-Site Survey is necessary to evaluate the applicant practice's qualification for QOPI® Certification. In accordance with the procedures set forth in this policy, QCP™ may require a repeat On-Site Survey if the practice is found to be not in compliance with one or more policies and procedures relating to

QCP™ standards based on the Certification Surveyor’s observations during the initial on-site survey; or if QCP™ otherwise determines that further personal observation is needed to assess the practice’s qualifications for Certification.

- QCP™ staff shall notify the applicant practice that a repeated survey is required within eight (8) weeks of completion of the survey report for the prior survey.
- QCP™ will assign a different On-Site Surveyor to perform the re-survey, consistent with the procedures in the Conflict of Interest Policy for QOPI® Certification, Appeals, and Revocation Policies.
- The practice shall bear the financial cost of re-survey.

QOPI Certification Appeals Process

Practices that apply for but do not achieve Certification may appeal the decision to deny Certification in accordance with the terms of the QOPI Certification Appeals Process described herein (“Appeals Process”). The Appeals Process does not apply to revocation of Certification status. The failure of a Practice to meet the Certification scoring requirements is not grounds for an appeal under the Appeals Process. The full version of the appeals process can be requested at gopicertification@asco.org.

Practices that are ineligible to apply for Certification because they do not meet the QOPI Certification scoring requirement can apply for a waiver of specific QOPI measures through a separate Waiver Process (see QOPI Certification Waiver Process). Denial of a request for a waiver and any decision of reviewers under the QOPI Certification Waiver Process are not subject to the Appeals Process.

Requesting an Appeal

Practices that are denied Certification may appeal this decision to the Primary Appeal Panel. To initiate an appeal, a Practice must submit a written Request for Appeal. The Request for Appeal must be received by the QOPI Certification Program via email at gopicertification@asco.org, within ten (10) business days of a Practice’s receipt of notification that Certification was denied.

A Practice’s Request for Appeal to the Primary Appeal Panel must:

- Identify and provide contact information for the Practice representative who will serve as the primary point of contact for correspondence and notifications associated with the Appeals Process; and
- Include any clarifying information the Practice would like the Primary Appeal Panel to consider. Subject to the limitations described in Section D, a Practice may, but need not, submit information to clarify its Certification Application. The Primary Appeal Panel will not consider clarifying information that is not included in the Request for Appeal.

Notification of Appeals Decision

Based on its review, the Primary Appeal Panel may grant Certification or affirm the denial of Certification by majority vote. If the Primary Appeal Panel does not order a re-survey of the practice, the Practice will be notified of the decision of the Primary Appeal Panel within ten (10) business days of the meeting of the Primary Appeal Panel. If the Primary Appeal Panel orders a re-survey of the practice, the QOPI Certification Program will use its best efforts to arrange for the re-survey to occur within six weeks. The Primary Appeal Panel will meet within fifteen (15) business days of receipt of the re-survey

report and the Practice will be notified of the decision of the Primary Appeal Panel within ten (10) business days of the meeting of the Primary Appeal Panel.

The decision of the Primary Appeal Panel will be in writing and will state the basis for the decision in reasonable detail.

Conflict of Interest Policy for QOPI® Certification, Appeals, and Revocation

Consistent with the ASCO Conflict of Interest Policy, this Policy Implementation provides mechanisms for minimizing potential conflicts of interest through each phase of the QOPI® Certification and Appeals Process.

Conflict of Interest Screens

QCP will assign both the On-Site Surveyor and a committee reviewer to review the Certification application and responses to requirements, before awarding QOPI® Certification. Practices will receive an email containing the name(s) of their assigned On-Site Surveyor(s). Practices will be asked to notify the QOPI® Certification Program via email within five business days to confirm whether the practice does or does not consider the assigned On-Site Surveyor to have a disqualifying relationship with their practice. Disqualifying relationship criteria may be defined as:

1. A substantial personal or professional relationship with the practice (e.g., self or immediate family member employed by the practice);
2. An appreciable financial interest in the outcome (e.g., self or immediate family member employed by a direct competitor of the practice) of the review; or
3. Any other relationship with the practice that would cast considerable doubt on his or her ability to provide an objective review, as determined by the Certification Program.

If a disqualifying relationship is identified, an alternate On-Site Surveyor will be assigned by the QOPI® Certification Program. QCP™ reserves the right to determine if the noted conflict of interest meets the program threshold.

Practice Mergers and Transactions Policy

Significant practice transactions, such as mergers and name changes, must be reported to the QCP™ within thirty (30) business days. QCP™ does not automatically transfer Certification to new owners or practices that have merged. QCP™ will assist practices in determining whether the sites that have current QOPI® Certification terms will retain their certified status following the merger, pursuant to QCP's policies. Failure to notify QCP™ of major changes to your organization may result in a loss of certification.

Practice Transactions

The QOPI® Certification Program is for outpatient hematology-oncology or medical oncology adult practices. For purposes of the QOPI® Certification Program, a practice is a group of oncologists that share a common business address and tax identification number or key features, such as unified policies and procedures that are implemented consistently across the practice.

QOPI® Certification is practice-specific and non-transferable. In the event a practice undergoes a re-organization or other significant transaction*, QCP™ will have the discretion to determine whether one or more of the post-transaction entities may continue to be entitled to QOPI® Certification-Pending or QOPI® Certification status.

Practices have the option of bringing the newly acquired site or affiliate into certification by participating in the entire application process, prior to the end of the three-year term for certified sites. Alternatively, practices can opt to have that practice site designated as non-certified and, when applying for re-certification, incorporate that practice site into the data abstraction and application process.

Note: QCP™ requires that sites coming into Certification separately and the existing Certified sites must apply for Certification as a whole at a later date, and that this must occur no later than the second re-certification date for the currently Certified practice after the transaction. A particular site is not permitted to promote itself as QOPI® Certified simply because of its affiliation with a particular practice. That site must be included in the Certification assessment of the applicant practice, including (but not limited to) being subject to potential survey.

**QOPI® Certification Program staff must be notified of any such transaction within 30 days of its being finalized. Please email gopicertification@asco.org for further instructions.*

* Transaction is intended to capture significant corporate changes such as sale of a practice, merger of one or more practices, and/or split of a practice into two or more separate entities. Since certification is awarded on the practice level, changes that solely involve staffing will not affect a practice's certification status.

QOPI® Certification Program Policy for the Extensions of Practice's Term Expiration

QCP™ recognizes and appreciates that achieving Certification is time consuming and requires the commitment of practice resources. For this reason, practices are given a full year from their Certification Pending date to complete the requirements to achieve QOPI® Certification. QCP™ reserves the right to grant extensions to meet the requirements for Certification due to unforeseen circumstances and uncontrollable acts of nature. Staffing and personnel changes are not grounds for an extension. QCP™ strongly recommends that all practices complete the requirements for Certification at their earliest opportunity.

Requesting an Extension

Practices seeking an extension must make a formal request in writing to gopicertification@asco.org. The request must include information regarding the basis for the extension. Extensions will be granted at the sole discretion of QCP™ and will be for a maximum of three months. Practices seeking extensions must demonstrate hardship to QCP's satisfaction. When a practice is granted re-certification, the current certification date will be extended for an additional three years.

QOPI® Certification Score Waiver Review Policy

Practices that did not achieve the QOPI® Certification threshold-scoring requirement of 75% or higher may request that the QOPI® Certification Steering Group review the scoring decision. Reception of a waiver is based on a finding that unique characteristics of a practice unfairly disadvantaged the practice's performance, relative to specific QOPI® measures affecting their overall score. Requests must be received within 10 days of receiving quality scores from final QOPI® Reports.

Policy for Certification Revocation

To continue to ensure that the QOPI® Certification Standards are met; the Certification Program has adopted revocation procedures that allow the Certification Program to investigate complaints concerning a Certified Practice. Each practice investigated under the procedure is provided with due process, including written notice and opportunity for a hearing. The basis for revocation of Certification under these procedures includes the following:

- Final conviction or admission of a crime by a Certified Practice or any member thereof that is related to the delivery of quality oncology care;
- A final finding or admission of gross negligence or willful misconduct by a Certified Practice or any member thereof that is related to the delivery of quality oncology care;
- Fraud or misrepresentation by a Certified Practice or any member thereof in the application or maintenance of QOPI® Certification; and
- Breach by a Certified Practice or any member thereof of the Practice's Participation Agreement, including but not limited to failure to adhere to the QOPI® Certification Participation Guide, QCP's Logo Use Guidelines, QCP's License Terms and Conditions, QOPI® Certification Participation Agreement, and other related policies.

Appropriate Use Protocol and User Access Protocol

In accordance with the Health Information Portability and Accountability Act of 1996 (HIPAA) and the Health Information Technology for Economic and Clinical Health (HITECH) Act, the American Society for Clinical Oncology (ASCO) and the QOPI® Certification Program have adopted Privacy and Security Policies to ensure the security of Protected Health Information (PHI), including but not limited to Electronic Protected Health Information (EPHI) and Paper Protected Health Information (PPHI) acquired from physician practices who participate in the Quality Oncology Practice Initiative (QOPI®), and the QOPI® Certification Program. All members of ASCO's workforce, including staff, are obligated to comply with these Policies.

If a practice has any questions regarding these policies and procedures, or would like to receive a copy of the written procedures, please email qopicertification@asco.org.

Section Ten: Contact Us

Contact Us

For more information regarding QOPI® Certification, Certification Application, On-Site Surveys, etc., contact the QOPI® Certification Helpdesk. The QOPI® Certification Helpdesk is available for participants from 9:00 am – 5:00 pm EST. QCP™ staff can be contacted by emailing qopicertification@asco.org or calling 571-483-1669 and asking for QOPI® Certification.

[QOPI® Helpdesk Contact Information](#)

For any QOPI® questions (examples: account set-up/registration, the QOPI® system, data abstraction, content questions, and/or report questions), contact the QOPI® Helpdesk at gopi@asco.org or 571-483-1660.