

QOPI® Fellowship Program Participation

Objectives

- Why Participate?
- ACGME and QOPI®
- Before the Round
- Chart Selection Criteria
- After the Round
- Contact Information

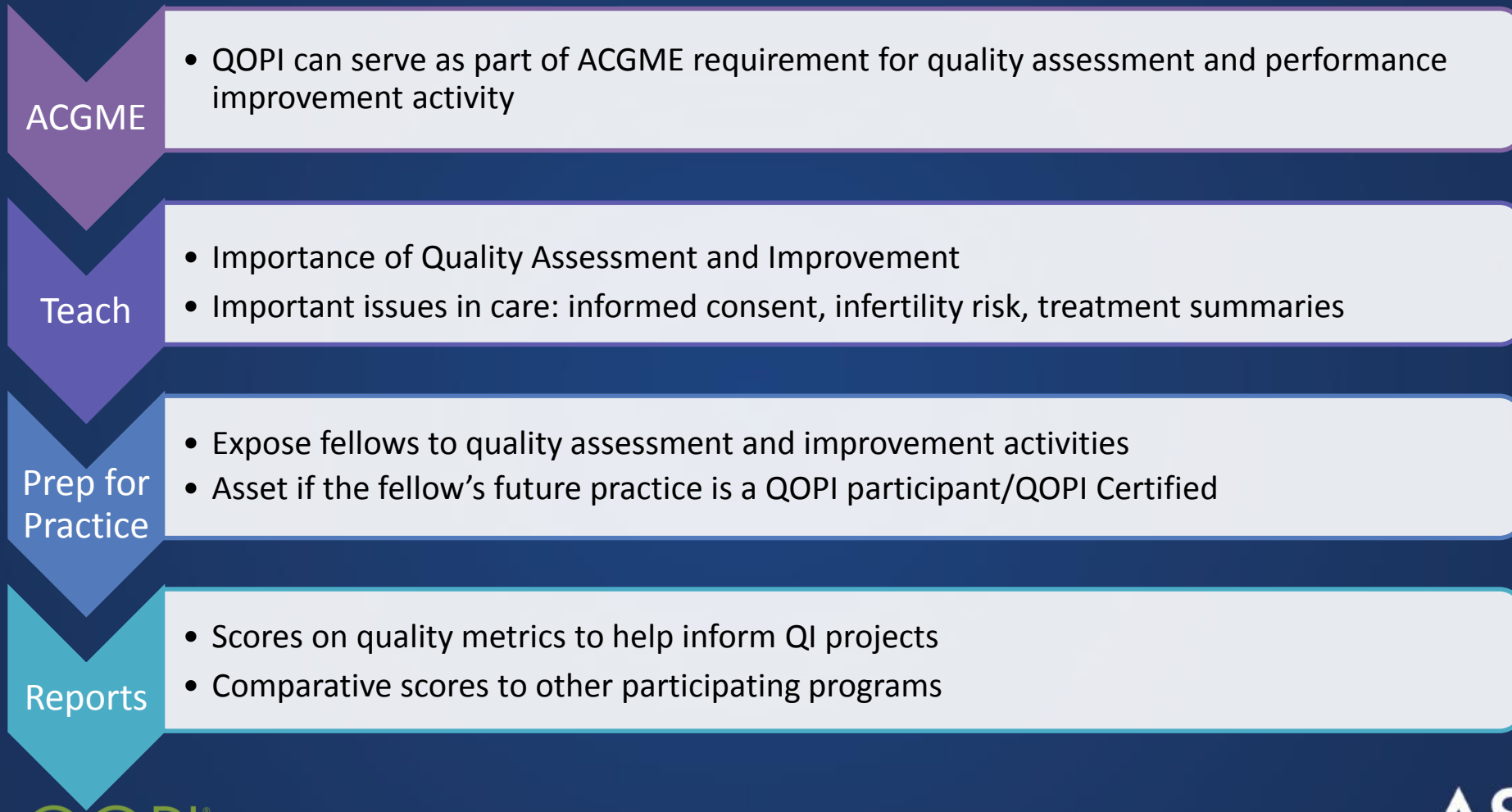
What is QOPI®?

‘To measure is to know...’

Quality assessment and reporting program for outpatient hematology-oncology practices – to create a culture of self-examination and improvement and help members meet quality reporting requirements

‘If you cannot measure it, you cannot improve it’

Why Participate?



ACGME and QOPI

Participation in QOPI helps fulfill the following ACGME requirements:

Review and improve patient care through application of quality indicators

Apply current medical knowledge to patient care through selection, discussion and updating quality indicators

Use interpersonal and communication skills in peer review discussion

Assess and demonstrate professional ethical behavior, through peer review and concern for patients

awareness of systems-based practice manifested by knowledge/development of quality indicators and application of standards

Demonstrate practice-based improvement through initial chart review, review of QOPI data, improvement of challenging areas, and follow-up on QOPI data

Before the Round

- Designate a Lead Fellow to be responsible for participation and coordinate the efforts for the group.
- QOPI practice administrator (PRA) - can be the Lead Fellow, a program director, or other program staff - should register the Fellowship program to participate and select modules
- Ensure all Fellows who will enter chart data have a username and password. (The practice administrator (PRA) and/or program director (PHC) can add new users in the “administration” tab under “user management”)
- Decide if Fellows will enter data together in one day, or over the course of the round.
- Recommended number of charts per Fellow is 10 however some programs find having fellows abstract fewer charts is more feasible and does not compromise the value of their participation

Before the Round

Time

- Decide how much time the trainees can contribute and plan it on the calendar
- Excuse the fellows from other activities

Pick Modules

- Ideally, pick a module that could be done at least two years in a row to follow trends in care
- If participating for the first time, consider EOL module. All programs also do Core measures.

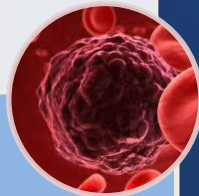
Pre-Screen Charts

- Practice administrator can prescreen selected charts or teach a Fellow to do so
- Use QOPI Chart selection methodology
- Provide list of prescreened charts to Fellows for abstraction

MODULES

- Breast Cancer*
- Colorectal Cancer*
- Non-Small Cell Lung Cancer (NSCLC)*
- Small Cell Lung Cancer
- Non-Hodgkin's Lymphoma (NHL)
- Gynecologic oncology (GYNONC) – Ovarian, fallopian tube, and primary peritoneal cancer
- Prostate Cancer

Disease



- Care at End of Life (EOL)*
- Symptom/Toxicity Management*
- Palliative Care

Domain



- Core Measures*
 - *REQUIRED WITH OTHER MODULES FOR QOPI® PARTICIPATION*

Core



QOPI® SPRING 2017 Chart Selection Criteria

Module	Sampling Criteria	Diagnosis and Visit Window
Breast	<ul style="list-style-type: none"> • ICD-9 <u>diagnosis</u> codes: 174.xx (Female) • ICD-10 <u>diagnosis</u> codes: C50.x (Female) • 18 and older at diagnosis 	<p>Diagnosed 3/1/2016 - 2/28/2017</p> <p>2 office visits (practitioner) 9/1/2016 – 4/30/2017</p> <p>Chemotherapy events can be abstracted to the office visit window end date</p>
Colorectal	<ul style="list-style-type: none"> • ICD-9 diagnosis codes: 153.x, 154.0, 154.1 • ICD-10 <u>diagnosis</u> codes: C18.x, C19.x, C20.x • 18 and older at diagnosis • Curative resection* 	
Non-Hodgkin's Lymphoma	<ul style="list-style-type: none"> • ICD-9 <u>diagnosis</u> codes: 200.x or 202.x • ICD-10 <u>diagnosis</u> codes: C82.x – C86.6, C88.4, C96.x • 18 and older at diagnosis • Indolent NHL may be included • Patient received chemotherapy in or overseen by the practice for this diagnosis 	
Non-Small Cell Lung	<ul style="list-style-type: none"> • ICD-9 <u>diagnosis</u> codes: 162.x (excluding 162.0) • ICD-10 <u>diagnosis</u> codes: C34.x • 18 and older at diagnosis • Non-small cell only • Curative resection* 	
Gyn Onc (Ovarian, Fallopian Tube, Primary Peritoneal Cancer)	<ul style="list-style-type: none"> • ICD-9 diagnosis codes: 158.0, 158.8, 158.9, 183.0, 183.2 • ICD-10 <u>diagnosis</u> codes: C48.x, C56.x, C57.x • Women, 18 and older at diagnosis • Primary, secondary or interval <u>cytoreduction</u> to remove the ovary and/or fallopian tube, and/or adnexa • (CPT codes: 58925, 58940, 58943, 58950, 58951, 58952, 58953, 58954, 58956, 58957, 58958, 58960, 58661, 58662, 49321, 49322, 38571, 38572, 58150, 58180, 58200, 58210, 58240, 58542, 58544, 58548, 58552, 58554, 58571, 58573, 58900, 58920, 58700, 58720, 49203, 49204, 49205, 49180) 	

Example of Chart Selection Criteria

Please consult the QOPI Dashboard for the most up to date criteria.

Before the Round

Organization Information

- Respond to questions for fellowship program
- Gather any information needed from Administration
- Returning practices update users (fellows) and practice/site information

Get Trained

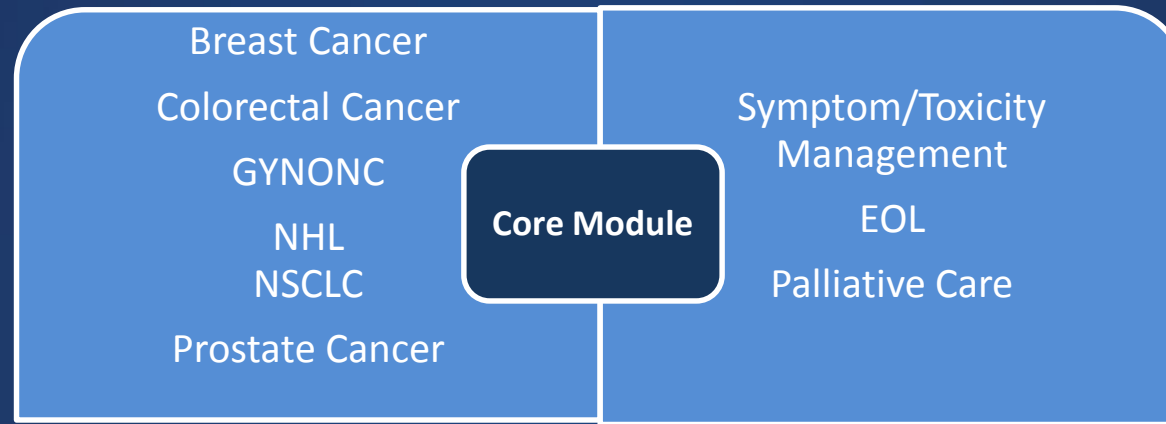
- Review charts for modules selected
- FELLOWS: Review the chart submission training video in the 'Getting Started' tab
- LEAD FELLOW/Program Director: review the admin portal training video in the 'Getting Started' tab

Train Fellows

- Build in 20 - 30 minutes in fellowship programs didactic/ teaching sessions to review QOPI with the fellows before reviewing charts
- Allows everyone to be on the same page, make sure the data abstraction date is on their calendars.

Participation Options

Fellowship Programs abstract 10 charts/per fellow and select one module in addition to the Core module OR participate in the QOPI Certification Pathway



OR

QOPI Certification
Reporting Pathway

Feedback from Previous Fellow Participants

Fellows

- Determine abstraction process
- Have laptops and food ready
- Bring username and password
- Make sure each case has QOPI Chart ID number
- Email QOPI with questions regarding the data requested
- **Don't wait until the last day and ask for an extension**
- Focus on quality of care and opportunities for improvement

After the Round

REVIEW

- Review results with the fellows and faculty
- Schedule a designated time for the review

DISCUSS

- There should be plenty of time for interactive discussion of the results
- Observe patterns: “Yes, we do give chemo too often to patients near death”, “We need better processes for informed consent”

PRESENT

- Engage fellows in generating process improvement solutions
- Present fellow work at the ASCO Annual Meeting, Quality of Care Symposium, or other professional meetings.

Correspondence Reminder



- Please do not send PHI via email
 - NO DATES
 - NO PT NAMES
 - ETC

Thank you!
Contact the [QOPI[®] help desk](#) with questions.

Available by 9:00-5:00 ET, Monday – Friday
571-483-1660 or qopi@asco.org