

## Michigan Radiation Oncology Quality Consortium (MROQC)

### 2019 Performance Index (P4P) Scorecard

#### Measure Description

For the purposes of this document, any reference to Q1, Q2, or Q3 will correspond to the following dates:

Q1=1/1/19-3/31/19

Q2=4/1/19-6/30/19

Q3=7/1/19-9/30/19

#### **Measure #1:** High Quality Clinical and Physics Data Submission and Completeness

This measure deals with data quality and completeness as defined by the metrics below:

<b>A. Highly accurate data:</b>
· Overall data accuracy as determined by breast and lung audit is $\geq 97\%$ . Audit cases: Patients with an RT end date within the 2018 calendar year (1/1/18-12/31/18)
<b>B. Sufficient audit preparation and follow-up:</b>
· Audit materials are available for review at the time of audit
· Appropriate staff member (CDA for clinical data audit and physicist or dosimetrist for physics data audit) is in attendance at the audit
· Corrections identified during clinical or physics data audit are made within 2 weeks of the audit date
<b>C. Completeness of submitted forms:</b>
· 90% or more of submitted CDA, physician, and physics forms for 2019 patients* have no missing data elements as of 12/31/19.
<b>D. Active use of data quality reports:</b>
· Fewer than 5% of 2019 patients* have a data checker error in the data checker problems report as of 12/31/19.

*\*2019 patients are defined as patients with an RT end date 10/1/18-9/30/19*

#### **Scoring:**

- Four Data Quality Metrics Met 10 points
- Three Data Quality Metrics Met 8 points
- Two Data Quality Metrics Met 4 points
- One Data Quality Metric Met 2 points
- None of the Data Quality Metrics Met 0 points

**Michigan Radiation Oncology Quality Consortium (MROQC)**

2019 Performance Index (P4P) Scorecard

Measure Description

**Measure #2:** Submission of Technical Data (Dose Volume Histogram, DICOM-RT, and Physics Radiotherapy Technical Details Survey)

All breast, lung, and bone mets cases with a treatment completion (RT end date) during Q1-Q3 2019 will be used for this measure.

**Scoring:**

- >85% of technical data submitted within six weeks of treatment completion 5 points
- >85% of technical data submitted within eight weeks 4 points
- >85% of technical data submitted within twelve weeks 3 points
- >85% of technical data submitted after twelve weeks 2 points
- <85% of technical data submitted after twelve weeks 0 points

**Michigan Radiation Oncology Quality Consortium (MROQC)**

2019 Performance Index (P4P) Scorecard

Measure Description

**Measure #3:** Collaborative-wide Measure (Task Group-263) Evaluate compliance for the specified structures (heart, lungs, and individual lungs) for the initial DICOM entry for all breast and lung cancer patients

	<b>Required Structures</b>	
Breast Patients	Heart	Ipsilateral lung (Lung_L or Lung_R)
Lung Patients	Heart	Normal lung (Lungs-GTV, Lungs-IGTV, Lungs-ITV or Lungs-ICTV)

Sites will use DICOM-RT data for cases with a radiotherapy (RT) start date of 01/01/2019 through an RT end date of 09/30/2019 to work on this QI measure, as we launched full DICOM collection on all prospective breast and lung cases in 4<sup>th</sup> Quarter 2018.

The score reported will be the site’s performance for cases with RT end dates in Q1-Q3 2019. This will allow sites time to ramp up/integrate the provided TG-263 tools into their treatment planning system, time for measurement/improvement, and also allow for time to finalize data collection, determination of final rate, and scoring before scores are due to BCBSM in early 2020.

**Scoring:**

- >50% compliance for the specified structures 14 points for every MROQC site
- <50% compliance for the specified structures 0 points for every MROQC site

**Michigan Radiation Oncology Quality Consortium (MROQC)**

2019 Performance Index (P4P) Scorecard

Measure Description

**Measure #4:** Mean heart dose achieved in breast patients not receiving radiotherapy to regional nodes

2019 Cardiac Dose Thresholds:

	Mean heart dose limit	
	Left-sided breast cancer	Right-sided breast cancer
Conventional fractionation	≤1.7 Gy	≤1 Gy
Accelerated fractionation	≤1.2 Gy	≤0.7 Gy

Sites will use the breast physics survey and DICOM-RT data for cases with an RT end date of 10/1/2018 through an RT end date of 9/30/2019 to work on this QI measure. The physics survey will be used to determine laterality, nodal treatment, and fractionation. DICOM-RT data will be used to determine mean dose to the heart.

The score reported will be the site’s performance as of the end of Q3 2019 (using Q1-Q3 2019 overall rate). This will allow a full year for measurement/improvement, and also allow for time to finalize data collection, determination of final rate, and scoring before scores are due to BCBSM in early 2020.

**Scoring:**

- 75% or more of patients meet the appropriate threshold 14 points
- 50-74% of patients meet the appropriate threshold 7 points
- <50% of patients meet the appropriate threshold 0 points

**Michigan Radiation Oncology Quality Consortium (MROQC)**

2019 Performance Index (P4P) Scorecard

Measure Description

**Measure #5:** Use of Accelerated Whole Breast Irradiation (AWBI) on appropriate patients per 2018 ASTRO Guidelines

<b>Factor</b>	<b>2018 Guideline</b>
Age	Any age
Stage	Any stage provided intent is to treat the whole breast without an additional field to cover the regional lymph nodes
Chemotherapy	Any chemotherapy
Dose homogeneity	Volume of breast tissue receiving >105% of the prescription dose should be minimized regardless of dose-fractionation

\* Of note, these guidelines are intended as a tool to promote appropriately individualized, shared decision-making between physicians and patients. None should be construed as strict or superseding the appropriately informed and considered judgments of individual physicians and patients. Therefore, the task force recommends against any quality benchmarks requiring 100% utilization of HF-WBI, even in patients where recommendations for HF-WBI are strong, as the distribution of reasonable patient values and preferences would be expected to yield a patient-centered choice for CF-WBI in a certain proportion of individual patients.

*Candidates:* all breast patients who do not receive treatment to regional nodal fields are eligible.

Sites will use breast physics survey data for cases with an RT end date of 10/1/2018 through an RT end date of 9/30/2019 to work on this QI measure. The physics survey will be used to determine nodal treatment and fractionation. The score reported will be the site's performance as of the end of Q3 2019 (using Q1-Q3 2019 overall rate). This will allow a full year for measurement/improvement, and also allow for time to finalize data collection, determination of final rate, and scoring before scores are due to BCBSM in early 2020.

**Scoring:**

- 80% or more appropriate patients receive AWBI 14 points
- 65-79% or more appropriate patients receive AWBI 7 points
- <65% or more appropriate patients receive AWBI 0 points

**Michigan Radiation Oncology Quality Consortium (MROQC)**

2019 Performance Index (P4P) Scorecard

Measure Description

**Measure #6:** For lung cancer patients,  $\geq 95\%$  of the Planning Target Volume (PTV) receives  $\geq 100\%$  of the prescription dose AND the heart mean dose is  $\leq 20$  Gray (Gy)

Sites will use lung physics survey data and DICOM-RT data for cases with an RT end date of 10/1/2018 through an RT end date of 9/30/2019 to work on this QI measure. The physics survey will be used to determine prescription. DICOM-RT data will be used to determine dose covering the PTV and mean dose to the heart.

The score reported will be the site's performance as of the end of Q3 2019 (using Q1-Q3 2019 overall rate). This will allow a full year for measurement/improvement, and also allow for time to finalize data collection, determination of final rate, and scoring before scores are due to BCBSM in early 2020.

**Scoring:**

- $\geq 65\%$  of patients meet target coverage and heart sparing goals 14 points
- 50-64% of patients meet target coverage and heart sparing goals 7 points
- $< 50\%$  of patients meet target coverage and heart sparing goals 0 points

**Michigan Radiation Oncology Quality Consortium (MROQC)**

2019 Performance Index (P4P) Scorecard

Measure Description

**Measure #7:** 80% of patients do not receive >10 fractions for treatment of bone metastasis in accordance with the ASTRO Choosing Wisely guidelines

Sites will use bone mets physics survey data for cases with an RT end date of 10/1/2018 through an RT end date of 9/30/2019 to work on this QI measure. The physics survey will be used to determine the number of fractions delivered.

The score reported will be the site's performance as of the end of Q3 2019 (using Q1-Q3 2019 overall rate). This will allow a full year for measurement/improvement, and also allow for time to finalize data collection, determination of final rate, and scoring before scores are due to BCBSM in early 2020.

**Scoring:**

- 80% of patients do not receive >10 fractions 14 points
- 60-79% of patients do not receive >10 fractions 7 points
- <60% of patients do not receive >10 fractions 0 points

## Michigan Radiation Oncology Quality Consortium (MROQC)

### 2019 Performance Index (P4P) Scorecard

#### Measure Description

#### **Measure #8:** Collaborative Meeting Participation – Clinical Champion (*per MROQC CC Attendance Policy*)

All Clinical Champions are expected to attend the three (3) Collaborative Meetings held each year. Full Pay for Performance (P4P) points are awarded for attendance at the 3 meetings. When the Clinical Champion cannot attend a substitute may be allowed to represent the hospital.

A substitute is allowed once a year; the Clinical Champion must attend at least two of the meetings and can send a substitute for the third, and still receive full P4P points. If two substitutes attend in a calendar year, only partial points will be given.

Ideally, the substitute is another Radiation Oncologist from that hospital that treats MROQC patients. Other Radiation Oncologists are acceptable.

- In certain cases (example: a small site with only 1-2 Radiation Oncologists), another physician is acceptable such as the Chief Medical Officer (CMO), the Chief of Quality, or a physician involved in Radiation Oncology cases.
- Residents, Physician Assistants (PA), Nurse Practitioners or non-physicians are not acceptable substitutes.

#### **Scoring:**

- |                               |          |
|-------------------------------|----------|
| • Attends 3 out of 3 meetings | 5 points |
| • Attends 2 out of 3 meeting  | 3 points |
| • Attends 1 out of 3 meetings | 2 points |
| • Attends no meetings         | 0 points |

#### **2019 Meeting Dates:**

1. Friday, February 22, 2019 at the Eagle Crest Resort; Ypsilanti, MI
2. Friday, June 14, 2019 at the Crossroads Conference Center; Grand Rapids, MI
3. Friday, October 11, 2019 at the Schoolcraft VistaTech Center; Livonia, MI



**Michigan Radiation Oncology Quality Consortium (MROQC)**

2019 Performance Index (P4P) Scorecard

Measure Description

**Measure #9:** Collaborative Meeting Participation – Physics Lead (or designee)

The site’s Physics Lead (or designee-i.e. another physicist or a dosimetrist who works on MROQC) is expected to attend all of the MROQC Collaborative Meetings for 2019.

**Scoring:**

- Attends 3 out of 3 meetings 5 points
- Attends 2 out of 3 meeting 3 points
- Attends 1 out of 3 meetings 2 points
- Attends no meetings 0 points

**2019 Meeting Dates:**

1. Friday, February 22, 2019 at the Eagle Crest Resort; Ypsilanti, MI
2. Friday, June 14, 2019 at the Crossroads Conference Center; Grand Rapids, MI
3. Friday, October 11, 2019 at the Schoolcraft VistaTech Center; Livonia, MI

**Michigan Radiation Oncology Quality Consortium (MROQC)**

2019 Performance Index (P4P) Scorecard

Measure Description

**Measure #10:** Collaborative Meeting Participation – Clinical Data Abstractor (*CDA or designee*)

MROQC CDAs (or designee-i.e. another CDA or someone who works on MROQC not covering another role at a meeting) are expected to attend all of the MROQC Collaborative Meetings for 2019.

**Scoring:**

- Attends 3 out of 3 meetings 5 points
- Attends 2 out of 3 meeting 3 points
- Attends 1 out of 3 meetings 2 points
- Attends no meetings 0 points

**2019 Meeting Dates:**

1. Friday, February 22, 2019 at the Eagle Crest Resort; Ypsilanti, MI
2. Friday, June 14, 2019 at the Crossroads Conference Center; Grand Rapids, MI
3. Friday, October 11, 2019 at the Schoolcraft VistaTech Center; Livonia, MI