

# Implementing PQRI

## *A Practice Administrator's Perspective*

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# Presentation Topics

- Radiation Oncology Measures
- Role of the Practice Administrator
- Useful on-line resources

# Radiation Oncology Measures for 2010

- **Measure 71**
  - Breast Cancer: Hormonal Therapy for Stage IC-IIIC Estrogen Receptor/ Progesterone Receptor (ER/PR) Positive Breast Cancer
- **Measure 156**
  - Oncology: Radiation Dose Limits to Normal Tissues
- **Measure 194**
  - Cancer Stage Documented
- **Measure 102**
  - Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-risk Prostate Cancer Patient
- **Measure 104**
  - Prostate Cancer: Adjuvant Hormonal Therapy for High-risk Prostate Cancer Patients
- **Measure 105**
  - Prostate Cancer: Three Dimensional (3-D) Radiotherapy
- **Registry only measures**
  - Measure 143 – Oncology: Medical and Radiation – Pain Intensity Quantified
  - Measure 144 – Oncology – Medical and radiation – Plan of Care for Pain

# Measure #102 – Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients

*This measure is reported once per episode of treatment*

- **STEP 1 - Is the patient eligible for this measure?**

- Measure Criteria

- Diagnosis Code

- 185

- CPT Code

- 55810, 55812, 55815, 55840, 55842, 55845, 55866, 55873, 77427, 77776, 77777, 77778, 77787

# Measure #102 – Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients

*This measure is reported once per episode of treatment*

- **STEP 2 – Patient record includes documentation: (choose one)**
  - **Reporting Option 1 – Bone Scan NOT Performed**
    - Bone scan not performed prior to the initiation of treatment nor at any time since diagnosis of prostate cancer - **3270F**
    - AND**
    - Low risk of recurrence, prostate cancer - **3271F**

# Measure #102 – Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients

*This measure is reported once per episode of treatment*

- **STEP 2 – Patient record includes documentation: (choose one)**

## **– Reporting Option 2 – Bone Scan Performed**

- Bone scan performed prior to initiation of treatment or at any time since diagnosis of prostate cancer - **3269F**

**AND**

- Low risk of recurrence, prostate cancer - **3271F**

# Measure #102 – Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients

*This measure is reported once per episode of treatment*

- STEP 2 – Patient record includes documentation: (choose one)
- **Reporting Option 3 – Bone Scan Performed for Medical or System Reasons**

- **Choose One**

- Documentation of medical reason(s) for performing a bone scan – **3269F-1P**
- Documentation of system reason(s) for performing a bone scan – **3269F-3P**

**AND**

- Low risk of recurrence, prostate cancer - **3271F<sub>8</sub>**

# Measure #102 – Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low-Risk Prostate Cancer Patients

*This measure is reported once per episode of treatment*

- STEP 2 – Patient record includes documentation: (choose one)
- Reporting Option 4 – Patient NOT Eligible for Measure Because the Risk of Recurrence is Intermediate, High or Not Determined
  - Choose One
    - Intermediate risk of recurrence, prostate cancer – **3272F**
    - High risk of recurrence, prostate cancer – **3273F**
    - Prostate cancer risk of recurrence not determined or neither low, intermediate nor high – **3274F**

## TRO Physician to Complete.

Form to be faxed back to Harvest Square Billing Office

### Prostate PQRI Questionnaire

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

Diagnosis: PROSTATE CANCER, ICD-9: 185

TNM Stage: \_\_\_\_\_ PSA \_\_\_\_\_ Gleason Score \_\_\_\_\_ + \_\_\_\_\_ = \_\_\_\_\_

#### Measure 102 Inappropriate Use of Bone Scan for Staging Low-Risk Prostate Cancer Patients

(PSA  $\leq$  10 & Gleason  $\leq$  6 & T stage  $\leq$  to T2a)

- |            |           |   |
|------------|-----------|---|
| <b>Yes</b> | <b>No</b> | Bone scan was performed.  |
| <b>Yes</b> | <b>No</b> | If bone scan was performed, was it ordered by someone else?   |
| <b>Yes</b> | <b>No</b> | Was it ordered for medical reasons? (i.e., pain, salvage therapy, other medical reasons or unknown) |
- If yes, physician must document medical reason here.**

#### Measure 105 Three-dimensional & IMRT Radiotherapy for Patients with Prostate Cancer

- |            |           |  |
|------------|-----------|--|
| <b>Yes</b> | <b>No</b> | Is the patient receiving external beam radiation therapy as primary therapy to prostate (with or without nodal irradiation)? |
| <b>Yes</b> | <b>No</b> | If patient is receiving radiation to the prostate only, was the patient treated with 3-D conformal radiation or IMRT?        |
| <b>Yes</b> | <b>No</b> | Treatment is adjuvant or salvage therapy for prostate cancer patient.  |

Physician: \_\_\_\_\_ Date: \_\_\_\_\_

Prostate PQRI Questionnaire 2010/tgh

# Role of the Practice Administrator

- Experience with PQRI
  - Radiation Oncology Practice
  - 9 Treatment Sites
    - \* Freestanding
    - \* OP Hospital
    - \* Academic Center
  - 16 Physicians
  - 5 Billing Staff
  - 3 Compliance Auditors

# TRO PQRI REPORTING HISTORY

2007

- Reported on 2 Measures
- Initiative Feedback Report
- No Bonus

2008

- Reported on 6\* Measures
- Initiative Feedback Report
- Bonus

2009

- Reported on 4 Measures
- Initiative Feedback Report (available late summer/fall 2010)

2010

- Reporting on 5 Measures

# Role of the Practice Administrator

- Reality Check – What is the Investment?
  - Staff time (non-physician)
  - Physician time
  - System upgrades (hardware/software)
  - Implementing administrative changes
  - Full integration

# Role of the Practice Administrator

- What Needs to Be Done Before the Reporting Period Begins
  - Process Evaluation
  - Decision Making
  - Implementation Path
  - Communication

# Role of the Practice Administrator

- What Needs to Be Done During the Reporting Period/Program Maintenance
  - Continual Review of Input Process
  - Periodic Review of Software Process
  - Communication
  - Tracking

# Role of the Practice Administrator

- What Needs to Be Done After the Reporting Period Ends
  - Evaluation
  - Bonus
  - Continuing Education
  - Prepare for Following Reporting Period

# Role of the Practice Administrator

- Lessons Learned

- Physicians
- Staff
- Teamwork & Communication
- Networking
- Educational Tools
- PATIENCE

*(a) the will or ability to wait or endure without complaint (b) steadiness, endurance, or perseverance in the performance of a task*

# Useful On-Line Resources

- ASTRO website – PQRI Data Collection Sheets
  - <http://www.astro.org/PublicPolicy/PQRInformation/index.aspx>

- CMS

- <http://questions.cms.hhs.gov/app/answers/list/kw/PQRI>

## AMA

- [www.ama-assn.org](http://www.ama-assn.org)

# PQRI Support at ASTRO

- For further information or assistance on the radiation oncology PQRI measures:
  - Visit the ASTRO PQRI On-Line Toolbox
    - <http://www.astro.org/PublicPolicy/PQRInformation/index.aspx>
  - ASTRO PQRI Staff Contact
    - Sheila Madhani, Assistant Director of Health Policy
    - [sheilam@astro.org](mailto:sheilam@astro.org)/703-839-7372