

Preventive Care Bonus Cervical Cancer Screening

OntarioMD i4C Dashboard Indicator

For more information regarding OntarioMD Indicators or the EMR i4C Dashboard Specification, please refer to:

<https://www.ontariomd.ca/emr-certification/emr-specification/ontariomd-indicator-library>

1. VERSION HISTORY

INDICATOR VERSION	PUBLICATION DATE	REMARKS
1.0	2019-02-18	<ul style="list-style-type: none"> Initial release
2.0	2019-07-09	<ul style="list-style-type: none"> Added Indicator ID, Indicator Segment ID and Display Indicator Segment properties Changed format and content of Indicator User Help Changed format of Source property Indicator Segment IDs re-sequenced to provide consistency across indicators Indicator Segment Query Criteria clarifies that query result from a segment should produce a count of patients
2.1	2020-06-15	<ul style="list-style-type: none"> Clarified use of “roster” terminology to identify a patient status of either enrolled or active. Care Bonus category renamed as Reporting Indicator Segment Query Notes updated to provide clarification in distinguishing between codes /text used to identify procedures and codes/text to identify diagnoses within screening exclusions criteria. Layout of definition file changed to improve readability of indicator segment properties Description and User Help content now contained in separate document. Description and User Help attributes in definition now contain wording to confirm content is kept separately

2. INDICATOR DEFINITION

2.1 Indicator Properties

PROPERTY	VALUE
Indicator ID	RPT-BNS-002
Indicator Name	Preventive Care Bonus Cervical Cancer Screening
Indicator Version	2.1
Date Published	2020-06-15
Description	Indicator description is part of the User Help content, now maintained in a separate document within the i4C Dashboard Indicator Library.
Source	MOHLTC
Source Description	Cumulative Preventive Care Enhancement Codes
Status	Active
Category	Reporting
Subcategory	Care Bonus
Indicator Order	2
Indicator Graphic Type	Pie or Bar Chart
Indicator Graphic Notes	
Indicator User Help	User Help content is now maintained in a separate document within the i4C Dashboard Indicator Library.

PROPERTY	VALUE
Indicator Segment Query Notes	<p>Active Patients are patients identified as 'Active' in the <i>Patient Status data</i> element (DE01.016) within <i>Patient Demographics</i>.</p> <p>Enrolled Patients are patients identified as 'Enrolled' in the <i>Enrollment Status data</i> element (DE01.019) within <i>Patient Demographics</i>.</p> <p>Female Patients are patients identified as 'F' or "Female" in the <i>Gender</i> data element (DE01.006) within <i>Patient Demographics</i>.</p> <p>Patient Age can be calculated based on the difference between March 31 of the <i>current fiscal year</i> and the patient's date of birth captured in the <i>Date of Birth</i> data element (DE01.007) within <i>Patient Demographics</i></p> <p>Current Fiscal Year:</p> <p>IF current date <= March 31, THEN the fiscal year starts April 1 of the previous calendar year and ends March 31 of the current calendar year</p> <p>ELSE fiscal year starts April 1 of the current calendar year and ends March 31 of the next calendar year</p> <p>Pap Exclusion is any of the following documented in the EMR:</p> <ul style="list-style-type: none"> • A Q140A Service Code that has been billed for the patient; • A coded ICD-9 diagnosis of V45.77 (Acquired absence of organ, genital organs) captured in Diagnosis/Problem within <i>Ongoing Health</i> (DE06.004) or <i>Past Medical & Surgical</i> (DE07.004); • A text entry of 'Cervical Ca' captured in Diagnosis/Problem within <i>Ongoing Health</i> (DE06.004) or <i>Past Medical & Surgical</i> (DE07.004); • A coded ICD-9 procedure of 68.3 (Subtotal Abdominal Hysterectomy), 68.4 (Total Abdominal Hysterectomy), 68.5 (Vaginal Hysterectomy), 68.6 (Radical Abdominal Hysterectomy), 68.7 (Radical Vaginal Hysterectomy), 68.8 (Pelvic evisceration), or 68.9 (Other and unspecified hysterectomy) captured in procedure (DE07.006) within <i>Past Medical & Surgical</i>; • A text entry of 'hysterectomy', 'hysterosal', 'TVH', 'TABH', or 'TAH' captured in procedure (DE07.006) within <i>Past Medical & Surgical</i>; • Any additional documentation method representing best practice workflow(s) identified and supported across practices within a specific EMR. <p>ICD-9 and ICD-10 are hierarchical coding systems built on general categories and (optional) specific subcategories. A dot separator is used to separate category from subcategory in representing a code. Some EMR offerings omit the dot separator in representing codes in data capture and EMR data searches. For these EMRs, vendors will omit the dot separator in searches and queries.</p> <p>Pap Test is any of the following documented in the EMR:</p> <ul style="list-style-type: none"> • A Q011A Tracking Code that has been billed for the patient;

PROPERTY	VALUE
	<ul style="list-style-type: none"> • A report received from a sending facility identifying a Pap test has been completed either by report name, report categorization or report content; • A pap test captured in the Procedure data element (DE07.006) within <i>Past Medical & Surgical</i>; • Any additional documentation method representing best practice workflow(s) identified and supported across practices within a specific EMR.
Patient List Notes	<p>Patient Name is a combination of First Name (DE01.003) and Last Name (DE01.002) data items from <i>Patient Demographics</i>. Names may be displayed either as separate columns or concatenated into one column.</p> <p>Unique Patient Identifier is any data item from <i>Patient Demographics</i> that can be used by a physician or clinic to uniquely identify a patient when displayed. Examples include Health Card Number (DE01.008) or Chart Number (DE01.012).</p> <p>Patient Date of Birth is captured into <i>Patient Demographics</i> as <i>Date of Birth</i> (DE01.007).</p> <p>Patient Age as of March 31 is a calculated data item representing the difference between March 31 of the current fiscal year and <i>Date of Birth</i> (DE01.007) from <i>Patient Demographics</i>. Age should be displayed in years.</p> <p>Patient Phone Number is the preferred phone number for contacting a patient and may include Residence Phone (DE02.007), Cell Phone (DE02.008) or Work Phone (DE02.009) from <i>Patient Address</i>.</p> <p>Latest Pap Test represents the result and/or date from the latest documented pap test. This may also include a column displaying how the test was documented (e.g., tracking code, screening report, past medical history procedure, etc.).</p>

2.2 Indicator Segment Properties

Indicator Segment ID	Indicator Segment Label	Display Indicator Segment	Indicator Segment Query Criteria	Patient List Criteria
1	Screening up to date	Yes	<p>COUNT OF:</p> <p>Active, enrolled patients, female, age 21-69 inclusive as of March 31 of the current fiscal year</p> <p>AND WITHOUT a documented pap exclusion</p> <p>AND WITH a documented pap test in the last 42 months inclusive prior to March 31 of the current fiscal year</p>	<p>Mandatory</p> <p>Patient Name</p> <p>Unique Patient Identifier</p> <p>Patient Date of Birth</p> <p>Optional</p> <p>Patient Age (as of March 31)</p> <p>Patient Phone Number</p> <p>Latest Pap Test</p>
2	Screening Overdue	Yes	<p>COUNT OF:</p> <p>Active, enrolled patients, female, age 21-69 inclusive as of March 31 of the current fiscal year</p> <p>AND WITHOUT a documented pap exclusion</p> <p>AND WITHOUT a documented pap test in the last 42 months inclusive prior to March 31 of the current fiscal year</p>	<p>Mandatory</p> <p>Patient Name</p> <p>Unique Patient Identifier</p> <p>Patient Date of Birth</p> <p>Optional</p> <p>Patient Age (as of March 31)</p> <p>Patient Phone Number</p> <p>Latest Pap Test</p>