Preventive Care Bonus Colorectal 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 | Initial release |
| 2.0 | 2019-07-09 | Indicator Segment Query Criteria changed to reflect new colorectal cancer screening guidelines as of June 2019 (transition from FOBT to FIT as a primary screening test) 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 | 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-003 | | |
| Indicator Name | Preventive Care Bonus Colorectal 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 Indictor Library. | | |
| Source | MOHLTC | | |
| Source Description | Cumulative Preventive Care Enhancement Codes | | |
| Status | Active | | |
| Category | Reporting | | |
| Subcategory | Care Bonus | | |
| Indicator Order | 3 | | |
| 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 | Active Patients are patients identified as 'Active' in the Patient Status data element (DE01.016) within Patient Demographics. | | | |
| | Enrolled Patients are patients identified as 'Enrolled' in the Enrollment Status data element (DE01.019) within Patient Demographics. | | | |
| | Female Patients are patients identified as 'F' or "Female' in the Gender data element (DE01.006) within Patient Demographics. | | | |
| | 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 (<i>DE01.007</i>) within <i>Patient Demographics</i> . | | | |
| | Current Fiscal Year: | | | |
| | 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 | | | |
| | ELSE fiscal year starts April 1 of the current calendar year and ends March 31 of the next calendar year | | | |
| | Colorectal Cancer Screening Exclusion is any of the following documented in the EMR: | | | |
| | A Q142A Service Code that has been billed for the patient; A colonoscopy documented within 10 years prior fiscal year-end; A coded ICD-9 diagnosis of 153* (Malignant neoplasm of colon), 154* (Malignant neoplasm of rectum rectosigmoid junction and anus), 555* (Regional enteritis), 556* (Ulcerative enterocolitis), or V10.05 (Personal history of malignant neoplasm of large intestine) captured in Diagnosis/Problem (<i>DE06.004</i>) within <i>Ongoing Health (DE06.004</i>) or <i>Past Medical & Surgical (DE07.004</i>); A text entry of 'Colon ca', 'colorectal ca', 'bowel ca', 'Crohn', 'Colitis', 'Inflammatory Bowel Disease', or 'IBD' captured in Diagnosis/Problem within <i>Ongoing Health (DE06.004</i>) or <i>Past Medical & Surgical (DE07.004</i>); A text entry of 'Colectomy' captured in Procedure (<i>DE07.006</i>) within <i>Past Medical & Surgical</i>; Any additional documentation method representing best practice workflow(s) identified and supported across practices within a specific EMR. | | | |
| | 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. | | | |
| | A category code followed by an asterisk (e.g., 154*) means that the search should include the high-level category (154) along with all subcategories within the hierarchy (e.g., 154.0, 154.1, etc.) | | | |
| | FOBT/FIT is any of the following documented in the EMR: | | | |
| | A Q133A Tracking Code that has been billed for the patient | | | |



| PROPERTY | VALUE | | | | |
|--------------------|---|--|--|--|--|
| | A result captured within Laboratory Test Results (DE10) for an FOBT or FIT. Test names may be identified using EMR's proprietary test names, laboratory proprietary test codes or test names, or LOINC codes which cross-reference test names across different EMR and laboratory test names. A report received from a sending facility identifying an FOBT or FIT has been completed either by report name, report categorization or report content An FOBT or FIT captured in Procedure (<i>DE07.006</i>) within <i>Past Medical & Surgical</i>. Any additional documentation method representing best practice workflow(s) identified and supported across practices within a specific EMR. Colonoscopy is any of the following documented in the EMR: | | | | |
| | A report received from a sending facility identifying a colonoscopy has been completed either by report name, report categorization or report content; A colonoscopy captured in Procedure (<i>DE07.006</i>) 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 | Patient Name is a combination of First Name (DE01.003) and Last Name (DE01.002) data items from Patient Demographics. Names may be displayed either as separate columns or concatenated into one column. | | | | |
| | 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 (<i>DE01.008</i>) or Chart Number (<i>DE01.012</i>). | | | | |
| | Patient Date of Birth is captured into Patient Demographics as Date of Birth (DE01.007). | | | | |
| | 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 (DE01.007)</i> from <i>Patient Demographics</i> . Age should be displayed in years. | | | | |
| | Patient Phone Number is the preferred phone number for contacting a patient and may include Residence Phone (<i>DE02.007</i>), Cell Phone (<i>DE02.008</i>) or Work Phone (<i>DE02.009</i>) from <i>Patient Address</i> . | | | | |
| | Latest FOBT or FIT represents the result and/or date from the latest documented FOBT or FIT. This may also include a column displaying how the test was documented (e.g., tracking code, screening report, lab result, past medical history procedure, etc.). | | | | |



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 | COUNT OF: Active, enrolled patients, age 50-74 inclusive as of March 31 of the current fiscal year AND WITHOUT a documented Colorectal Cancer Screening Exclusion AND WITH a documented FOBT or FIT in the last 30 months inclusive prior to March 31 of the current fiscal year. | Mandatory Patient Name Unique Patient Identifier Patient Date of Birth Optional Patient Age (as of March 31) Patient Phone Number Latest FOBT or FIT |
| 2 | Screening Overdue | Yes | COUNT OF: Active, enrolled patients, age 50-74 inclusive as of March 31 of the current fiscal year AND WITHOUT a documented Colorectal Cancer Screening Exclusion AND WITHOUT a documented FOBT or FIT in the last 30 months inclusive prior to March 31 of the current fiscal year. | Mandatory Patient Name Unique Patient Identifier Patient Date of Birth Optional Patient Age (as of March 31) Patient Phone Number Latest FOBT or FIT |