

**SEER\*DMS Change Control Board (CCB) Users Group**  
**Teleconference Summary**  
**April 13, 2017**  
**3:00 p.m. to 4:00 EST**

Representatives from NCI, IMS and 13 SEER registries participated in the SEER\*DMS CCB Users Group conference call on April 13, 2017. Participants included:

**Registries:**

Cherokee Nation  
Connecticut  
Detroit  
Georgia  
Hawaii  
Iowa  
Kentucky  
Louisiana  
New Jersey  
New Mexico  
New York  
Seattle  
Utah

**NCI:** Peggy Adamo, Steve Friedman, Carol Kosary, Marina Matatova

**IMS:** Dave Anette, Linda Coyle, Chuck May, Nicki Schussler

**SCG:** Kathy Brown-Huamani, rapporteur

**Action Items**

Participants agreed to the following action items:

- Marina Matatova agreed to send the New York registry the draft agenda for the July SEER\*DMS meeting.
- Participants should send proposed meeting agenda items to Marina.
- Marina agreed to set up a WebEx connection for the July SEER\*DMS meeting.
- Kevin Ward agreed to set a date for the first Claims Work Group meeting.
- Linda agreed to send a notice to the registries participating in the Auto-Linking Work Group about redeployment of the new auto-linking workflow.
- Linda agreed to set up a meeting of the Auto-linking Work Group in May.
- Registries interested in joining the Auto-Consolidation Work Group should update the appropriate Squish issue.
- Members of the Tiger team on productivity reports should update Squish issue 5241.
- Registries should respond to Squish issue 5111 about a geocoding task to convert census block group codes to census blocks.
- Registries should submit ideas for CCB discussion topics to IMS via Squish or an email.

**MU2 Work Group**

Brent Mumhrey leads the MU2 Work Group. The Work Group currently is testing the data sample provided by the Louisiana registry. The data have been imported into the pre\_record table and the match against the Patient Set has been completed. The Work Group currently is working on the tumor level matching. Members also are considering data items to track.

Mr. Mumphrey expects to have statistics to share at the next Work Group meeting on April 27. Coding system conversions also will be discussed at this meeting.

The Work Group should develop recommendations for the registries when evaluating data. IMS will develop queries to identify new cases and patients in MU2 that are not Patient Sets. Registries will review the data in SEER\*DMS after IMS completes the changes required to load MU2 data.

### **Claims Work Group**

Kevin Ward will lead the new Claims Work Group, which will begin work in the next few weeks. One option for receiving new types of data is for a stream of data to come into registries through a transfer island that can accept a dedicated feed. IMS implemented this type of Transfer Island with the Unlimited System. The five registries participating in the Claims Work Group are testing this mechanism. One participant, the Georgia registry, is receiving claims directly. IMS is receiving claims on the dedicated transfer island and is able to import claims on the servers of the other participating registries, beginning with their hosted DEV servers.

Claims data will be loaded into the pre\_record table, so they will not enter the registry's standard workflow. Multiple data sources in different formats can be stored in this table. Data will be standardized at this point, primarily by setting ICD codes for tumor matching. Data then will be matched against Patient Sets, and within the Patients Sets, they will be matched against CTCs.

### **Auto Linking Work Group**

The Auto-Linking Work Group is being organized and needs a lead. Work Group members will review data determine the type of automation that is needed in a new claims workflow. IMS will redeploy the new workflow of the DEV servers of participating registries.

### **Discussion**

Participants noted that claims would be received before Patient Sets are established and asked how matching would occur. Claims will be continuously matched so that, when a Patient Set is created or modified, it is matched against claims.

### **Auto-Consolidation Work Group**

Linda posted a Squish issue about an Auto-Consolidation Work Group. Detroit, Iowa, Louisiana, Utah, New Jersey, and Kentucky registries expressed interest in joining this work group. Bobbi, Matt, and Frances Ross will be the co-leaders of this group. The first meeting of this work group is scheduled for May 9. Bobbi, Frances, and Marina are working on a strategy for work group processes.

### **Productivity Reports**

The Tiger team meeting was held on March 30, 2017. Seattle and Georgia registries shared their report templates during this meeting. Other registries should present their report templates at the next meeting on April 20.

IMS implemented a new productivity report (RPT-153), which registry managers reviewed. Changes were made to that report based on input during the March meeting. The report will be further revised as more input is received.

## **SEER\*DMS In-Person Meeting in July**

The SEER in-person meeting is scheduled for July 12-14, 2017 (last day will be a half-day meeting). The agenda for the meeting is being finalized. Marina plans to distribute the agenda with hotel recommendations in the near future.

### **Discussion**

Participants asked about remote access to the meeting. NCI can set up a WebEx meeting. Connecticut, Utah, Cherokee Nation, and Georgia registries expressed interest in WebEx access to the meeting.

### **Physician Addresses**

In 2015, CCB members discussed the possibility of changing the physician contact list to permit storage of multiple addresses for a physician. At that time, registries were asked to attempt using facility tables to store the different practice locations for physicians and then point from the contact list to the physician.

Some registries indicated that this solution is not working. IMS needs to know which registries want changes to the physician address system and the types of changes needed. For example, IMS would like to know how registries use these addresses, how they select from an address when a physician has multiple addresses, the fields they are using, and whether they look at the facility coded in the record or the CTC. Linda created Squish issue 5262 for registries to provide input. Discussion of this topic can be continued at future CCB meetings or a Tiger team or work group can be created on this topic.

### **Discussion**

Some registries code everything using the National Physician Index (NPI). Chuck is writing a management task to set NPI based on an API. Once the NPIs are coded, the API could be used to automatically update information on physicians and facilities. Chuck would like to know if a physician mailing and office address is sufficient. In the future, registries might receive claims with an NPI that is not in the registry database. The API could be used to complete this missing information.

Many registries have found the NPI information to be inaccurate and out of date and do not use NPI addresses. Iowa has its own physician directory service, which is more accurate than NPI. Registries also do not want to contact physicians that have moved out of state.

### **Census Block**

IMS developed a geocoding task that can convert the census block group codes used in older cases to census block codes. This task was tested at two registries and appeared to work well. IMS created a Squish issue 5111 asking other registries about their interest in this task. Implementation of this optional task is not labor intensive or time consuming. The task also can be implemented on the test server so that registries can evaluate the changes.

### **CCB Meeting Topics**

IMS has received requests for the following CCB meeting discussion topics:

- SEER\*DMS configurations for displaying site-specific factors (SSFs) for different years of diagnosis. A new SSF configuration was developed for registries that did not continue to perform Collaborative

Stage in 2016 and 2017 and that need this option. IMS sent a message to all of these registries and is awaiting their response.

- Processing of data before loading into SEER\*DMS. Some registries have separate systems for initial processing of data and for local reporting, which are used before the data are loaded into SEER\*DMS. It would be useful to know what kinds of data pre-processing are performed by registries prior to loading into SEER\*DMS. Some of these processes could be incorporated into SEER\*DMS, which might include:
  - Developing a mechanism to track cases and allow them to be uploaded in a seamless way.
  - Develop a mechanism that would allow users to view what was submitted and generate customizable, preliminary reports for submission to reporting facilities.

Most registries appear to have pre-processing procedures to confirm receipt and processing of records. Many registries send edits back to facilities after consolidation. One registry manually imports files under the facility then runs reports for the specific facilities in SEER\*DMS. At another registry, each software has its own edits so that facilities can run the edits prior to submission to the central registry. Other registries have a separate internal “gatekeeper” system that runs edits on incoming raw data. Facilities receive feedback on cases that fail an edit or have missing required fields. These cases are rejected for uploading into SEER\*DMS. Registries would like to eventually incorporate the tasks performed by these gatekeeper systems into SEER\*DMS, but it would be difficult to include every task performed by these systems. Some additional tasks performed by gatekeeper systems include generation of management reports, tracking when rejected cases are resubmitted, and tracking physician reports for laboratory follow back.

Participants suggested creating a work group on the creation of an integrated case upload manager. Registries that have implemented similar in-house systems should inform this work group, particularly with regard to defining workflows and business requirements. Georgia, Iowa, Connecticut, and Utah, New York, and New Jersey expressed interest in this work group. The New York and Georgia registry staff could discuss features of their systems and Georgia could demonstrate their system.

### **Announcements**

The next SEER\*DMS called is scheduled for Thursday, May 11, 2017, at 3:00 p.m. EST.