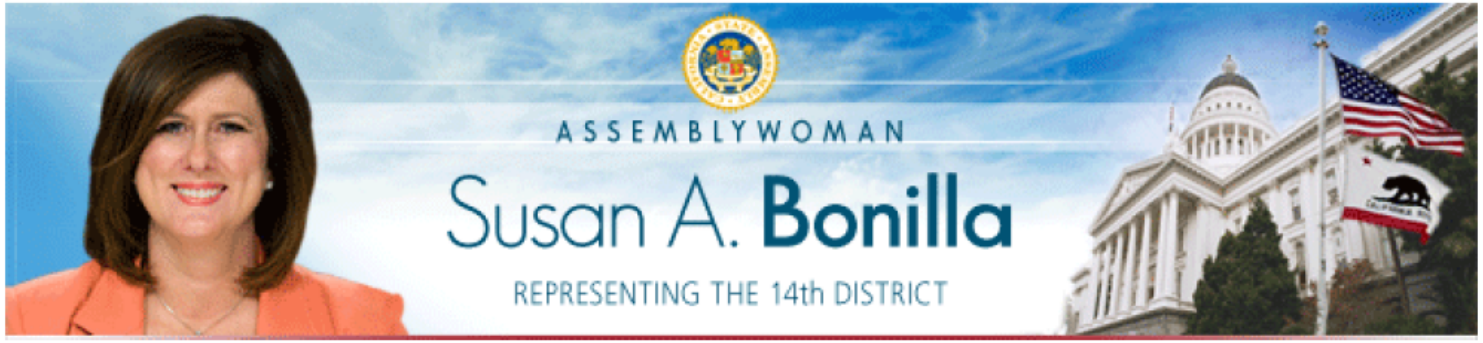
California's Mandated Epath Reporting

Dennis Deapen & Andrea Sipin

SEER*DMS Face-To-Face Meeting
September 26-28, 2018
Rockville, MD



AB 2325: Revolutionizing Cancer Research

This bill:

Specifically, this bill:

- Requires Pathologists to report cancer diagnosis information to the California Cancer Registry in an electronic format.
  - The Department of Public Health (CDPH) will determine the specific format of the electronic report.

Unanimous Legislative Approval

2016 Session	Passed	Assembly	Senate
AB 2325	8/23/2016	78-0	39-0

- AB 2325 will require all pathologists to electronically submit cancer pathology reports to the CCR starting with 1/1/19 cases
- Many hospitals and labs in CA already have E-Path submission feeds
  - 70 AIM feeds
  - 20-30 CDC NPCR AERRO National Lab Groups (1 feed via PHINMS)
  - 10-20 Point to point feeds
- An unknown number of additional pathologists/labs are not reporting

CCR Electronic Pathology Reporting

California Assembly Bill 2325 At-A-Glance

Searching for Causes & Cures

CCR

KEN MADDY

CALIFORNIA CANCER REGISTRY

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

Timeline AB2325

- **September 14, 2016: AB2325 signed by Governor Jerry Brown.**
- **July 1, 2017: Release of CCR Implementation Guide.**
- **August 2017: Reporting registration open.**
- **January 1, 2019: Data submission to the CCR must be established by pathologists and pathology labs.**

California State Assembly Bill (AB) 2325

Per AB 2325, signed by Governor Jerry Brown on **September 14, 2016**, pathologists diagnosing cancer are to report cancer diagnosis to the California Cancer Registry (CCR) electronically by **January 1, 2019**. Defined reporting requirements and a standardized format for reporting pathology cancer diagnosis will be outlined by the CCR within an Implementation Guide due for release on **July 1, 2017**. Pathologists and pathology software providers will need to review the Implementation Guide and register with the CCR to meet California reporting requirements. A pathologist or pathology lab will be able to satisfy reporting compliance by adhering to the reporting requirements and standardized format regardless of the technical platform used to capture, store and submit data. Please go to the CCR website (www.ccrcal.org/AB2325.shtml) for more information on AB2325, to view a list of frequently asked questions or to submit a question.

California Cancer Registry (CCR)

CCR is a program of the California Department of Public Health. It is a statewide

California Cancer Registry Pathology Reporting Portal

California State Assembly Bill (AB) 2325

Per AB 2325, signed by Governor Jerry Brown on September 14, 2016, pathologists diagnosing cancer are to report cancer diagnosis to the California Cancer Registry (CCR) electronically by January 1, 2019. Defined reporting requirements and a standardized format for reporting pathology cancer diagnosis is outlined in the CCR Electronic Pathology Reporting Standards Implementation Guide. Pathologists and pathology software providers will need to review the Implementation Guide and register with the CCR to meet California reporting requirements. A pathologist or pathology lab will be able to satisfy reporting compliance by adhering to the reporting requirements and standardized format regardless of the technical platform used to capture, store and submit data.

To Download a Copy of the Implementation Guide Click on the Link Below:

- California Cancer Registry Electronic Pathology Reporting Standards Implementation Guide

California Electronic Pathology Reporting - Associated Links

- Registration Portal - ***Now Open!***
- Self-Testing Portal -***Now Open!***
- Direct Data Entry Web Portal -***Now Open!***

To Download Please Click on the Links Below:

- California Cancer Registry NAACCR Volume 5 Version 4.0 HL7 2.5.1 Constraints
- California Electronic Pathology Cancer Reporting ICD-10 Reportable List
- NAACCR Volume 5 Version 4.0

To view the full AB 2325 Bill click here

California Cancer Registry Pathology Reporting Portal

Welcome to The California Cancer Registry Pathology Reporting Portal

The California Cancer Registry (CCR) is a population-based, statewide cancer registry that was established in 1988. CCR collects information about most cancers diagnosed in California. All hospitals, facilities, and physicians diagnosing and/or providing treatment to cancer patients are required by law to report cases of cancer to CCR, which includes demographic, diagnostic, and treatment data.

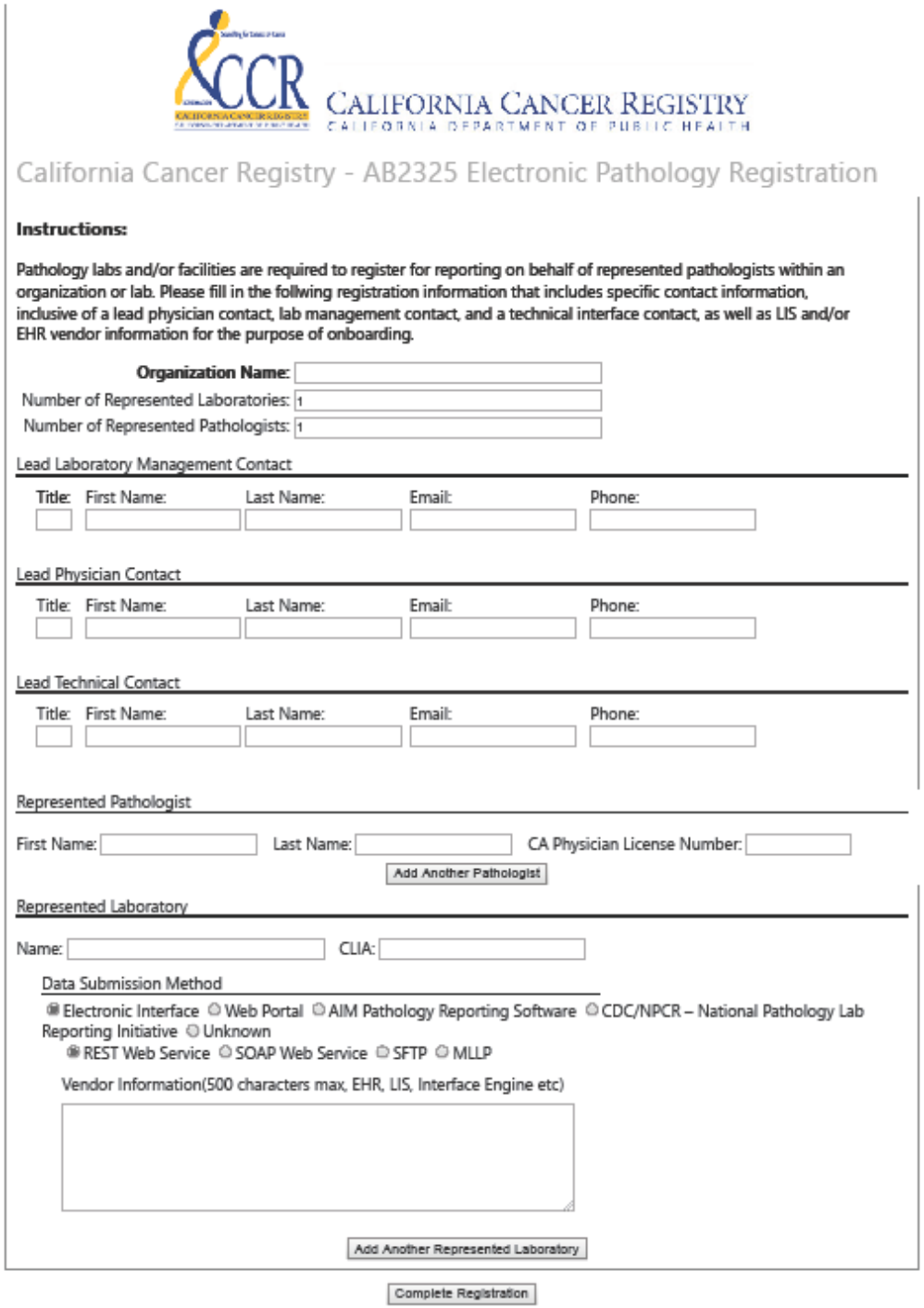
With the passage of AB2325 (September, 2016), pathologists diagnosing cancer are to report cancer diagnoses electronically to the CCR by January 1, 2019.

CCR is a program of the California Department of Public Health. CCR monitors the number of cancer cases and cancer deaths in California, examines treatment choices and other predictors of survival, conducts research to find the causes and cures of cancer, and responds to public concerns about cancer.

If you are a pathologist who diagnoses cancer patients, and would like more information on pathologist reporting of cancer, please review the pathologist reporting requirements here. (http://www.ccrcal.org/AB2325.shtml)

- If you already have a login account on this portal, please click here (Account/Login.aspx) proceed to the sign in page.
- If you are a pathologist and would like to register to electronically report pathology reports, please click here (Account/Register.aspx)to request an account. Upon receipt of your registration, you will be contacted by CCR staff to complete the setup of your account.

California Cancer Registry Pathology Reporting Registration Portal



CALIFORNIA CANCER REGISTRY
CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

California Cancer Registry - AB2325 Electronic Pathology Registration

Instructions:

Pathology labs and/or facilities are required to register for reporting on behalf of represented pathologists within an organization or lab. Please fill in the follwing registration information that includes specific contact information, inclusive of a lead physician contact, lab management contact, and a technical interface contact, as well as LIS and/or EHR vendor information for the purpose of onboarding.

Organization Name:
Number of Represented Laboratories: 1
Number of Represented Pathologists: 1

Lead Laboratory Management Contact

Title: First Name: Last Name: Email: Phone:

Lead Physician Contact

Title: First Name: Last Name: Email: Phone:

Lead Technical Contact

Title: First Name: Last Name: Email: Phone:

Represented Pathologist

First Name: Last Name: CA Physician License Number:

Add Another Pathologist

Represented Laboratory

Name: CLIA:

Data Submission Method

Electronic Interface Web Portal AIM Pathology Reporting Software CDC/NPCR – National Pathology Lab Reporting Initiative Unknown

REST Web Service SOAP Web Service SFTP MLLP

Vendor Information(500 characters max, EHR, LIS, Interface Engine etc)

Add Another Represented Laboratory

Complete Registration

Searching for Causes & Cures

KEIN MADDY

CCR

CALIFORNIA CANCER REGISTRY

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH

Data Submission Method

(•) Electronic Interface ( ) Web Portal ( ) AIM Pathology Reporting Software ( ) CDC/NPCR – National Pathology Lab Reporting Initiative ( ) Unknown

(•) REST Web Service ( ) SOAP Web Service ( ) SFTP ( ) MLLP

Vendor Information(500 characters max, EHR, LIS, Interface Engine etc)

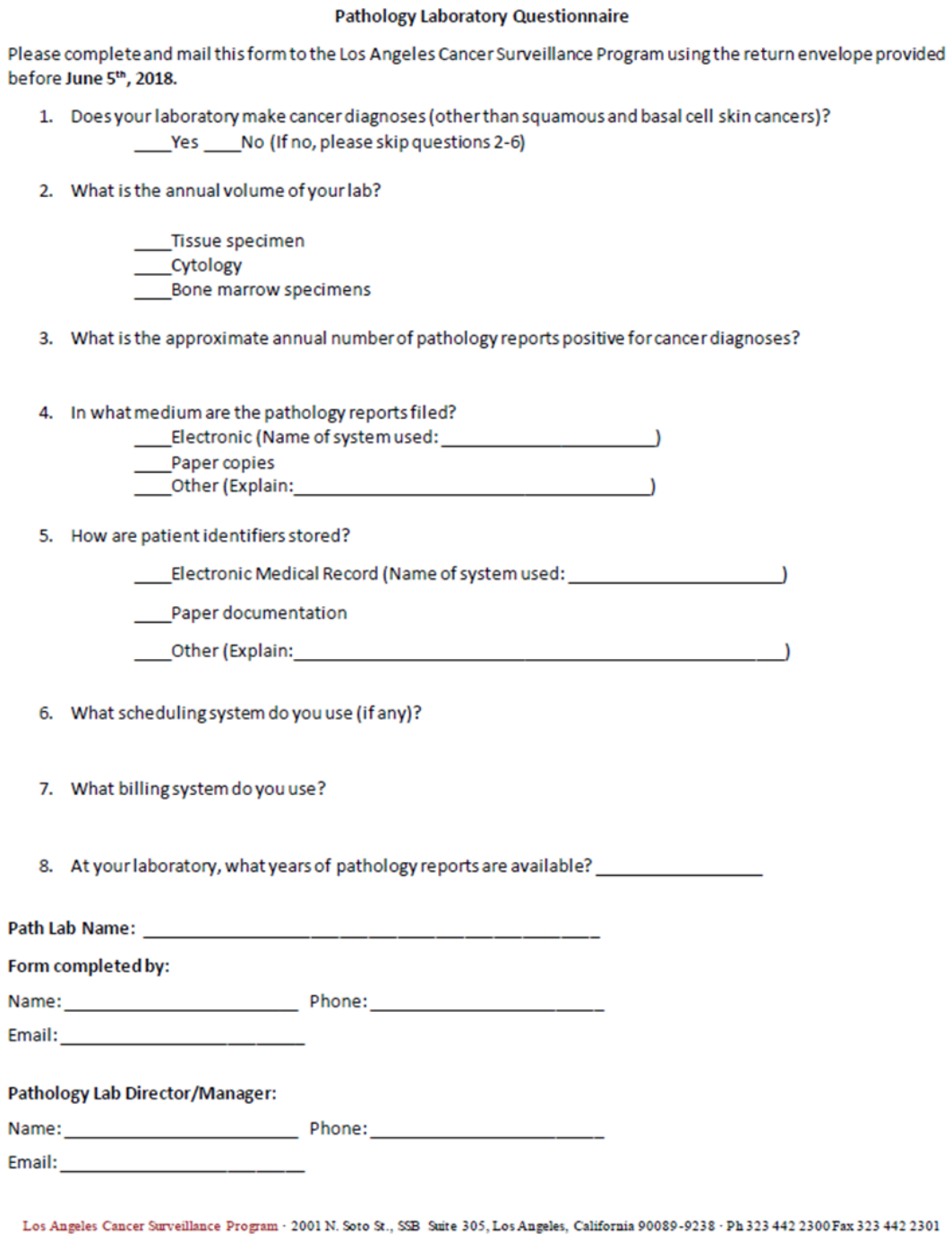
Los Angeles Path Lab Outreach

For LA, CCR sent us a list of 413 candidate labs

Intro letter and survey were sent to all

- 77 responded
- 16 undeliverable
- 336 no response

Follow-up phone calls were made to encourage registration on the CCR site



Pathology Laboratory Questionnaire

Please complete and mail this form to the Los Angeles Cancer Surveillance Program using the return envelope provided before **June 5th, 2018.**

1. Does your laboratory make cancer diagnoses (other than squamous and basal cell skin cancers)?
   ____Yes ____No (If no, please skip questions 2-6)
2. What is the annual volume of your lab?
   ____Tissue specimen
   ____Cytology
   ____Bone marrow specimens
3. What is the approximate annual number of pathology reports positive for cancer diagnoses?
4. In what medium are the pathology reports filed?
   ____Electronic (Name of system used: _____)
   ____Paper copies
   ____Other (Explain: _____)
5. How are patient identifiers stored?
   ____Electronic Medical Record (Name of system used: _____)
   ____Paper documentation
   ____Other (Explain: _____)
6. What scheduling system do you use (if any)?
7. What billing system do you use?
8. At your laboratory, what years of pathology reports are available? _____

Path Lab Name: _____

Form completed by:

Name: _____ Phone: _____

Email: _____

Pathology Lab Director/Manager:

Name: _____ Phone: _____

Email: _____

Los Angeles Cancer Surveillance Program · 2001 N. Soto St., SSB Suite 305, Los Angeles, California 90089-9238 · Ph 323 442 2300 Fax 323 442 2301

Lab Characteristics

- Based on 77 completed questionnaires:
  - Approximate no. of paths + for cancer: 2-50,000 annually
  - 35 different EMR systems used
  - Most common: *Meditech*

Path Reporting Medium	No. of Facilities
Electronic	56
Paper	12
No Response	9

EMR Systems	No. of Facilities
AP Easy	3
AS400/Pathway	1
Cerner	3
Cerner Millennium Pathnet	3
Cerner + Paper	1
Clinical Information Systems	2
CoPath Plus	1
CSPI/Evident	1
Cyberpath	1
Ema	1
EPIC	1
EZ Derm Software	1
Homegrown Reporting System	1
Ligo Lab	1
LIMS	1
Meditech	**7**
Meditech + EPIC	1
Meditech + Cerner	1
Modernizing Medicine	2
OPA, Laserfiche on Cloud (Custom program)	1
Orchard	1
PowerPath	2
Powersoft MD	1
Schuyler House	2
Soft Lab	1
Sohilab	1
Neo Genomics	1
Tiger (LIS)	1
TPS In House System	1
Urochart	1
Vital Axis	1
Windowpath LIS + Ell Kay	1
Windowpath (Psyche)	1
Winsurge	1
Xifin	1

We Believe Many Potential Vendors Exist

- To provide new approaches to multi-site data aggregation that can benefit cancer registries
- Agnostic, simple data capture
- Centralized information extraction into national standardized metrics
  - Cloud computing
  - HIPAA compliant

REDOX^

- Met at Sirius Computing Services at the LA Healthcare Information and Management Systems Society (HIMSS) conference in March
- Sirius requested a call for further information, followed by on-site visit
- Brought in Redox for conference calls
  - Made clear that CSP is not funding this project and CSP is not committing anyone for funding → Facilitating discussions only

REDOX^

What is

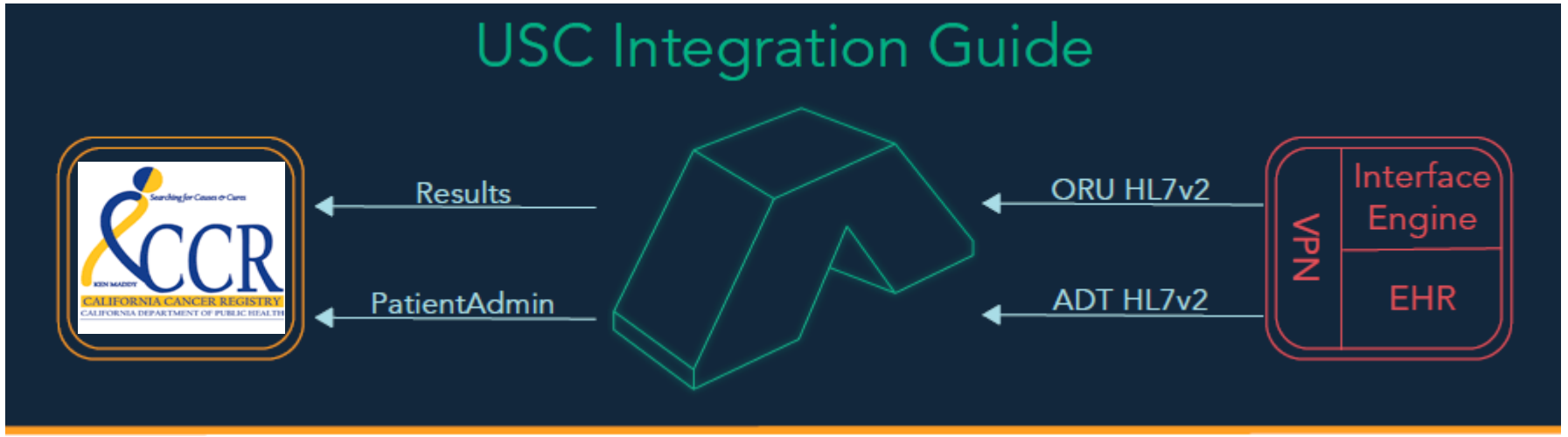
Redox is a full-service integration platform for technology-enabled healthcare organizations. Our engine supports secure, bidirectional data exchange using any standard or protocol, from HL7 to FHIR to vendor-specific APIs--and everything in between.

Who uses Redox?

Over 500 digital health solutions are already integrated with the Redox platform, and 250 health systems trust Redox to build and manage interfaces across more than 30 different EHR vendors.

At its core, Redox is a network of reusable nodes designed to help healthcare organizations adopt digital health solutions faster. Instead of building hundreds of custom connections, we'll help you connect to Redox once, and transform that single connection into a suite of APIs to power applications across the care continuum.

REDOX^



Note: Redox engine does not have a reportability screening tool

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- Created E-Path with Region 9 starting in 1999.
- Have worked with many of the reported LIS systems (Cerner, Co-Path, Meditech, Soft lab etc.) It should not be a problem to receive pathology output from these systems.
- To make it easy for the small labs, we could provide a secure web portal on the E-Path cloud system so they can upload pathology reports to the E-Path service in their native format. This would require no software at the lab. We would provide training on how to upload the reports.
- The E-Path Cloud Service could be shared by the labs.
- The E-Path Cloud Service would:
  - Convert each lab's native format Pathology report to NAACCR standard HL7 message
  - Keep each lab's reports in a separate folder structure
  - Distinguish between reportable and non-reportable documents (i.e. perform casefinding)
  - Include the Cancer Data Forwarding module
  - Include duplicate checking
  - Forward reportable documents to the registry
  - Allow each lab to download its positives from the service
  - Automatically purge negative reports on a scheduled basis
  - Maintain a count of reportable documents for each lab
  - Provide a disclosure report for each lab for HIPAA compliance

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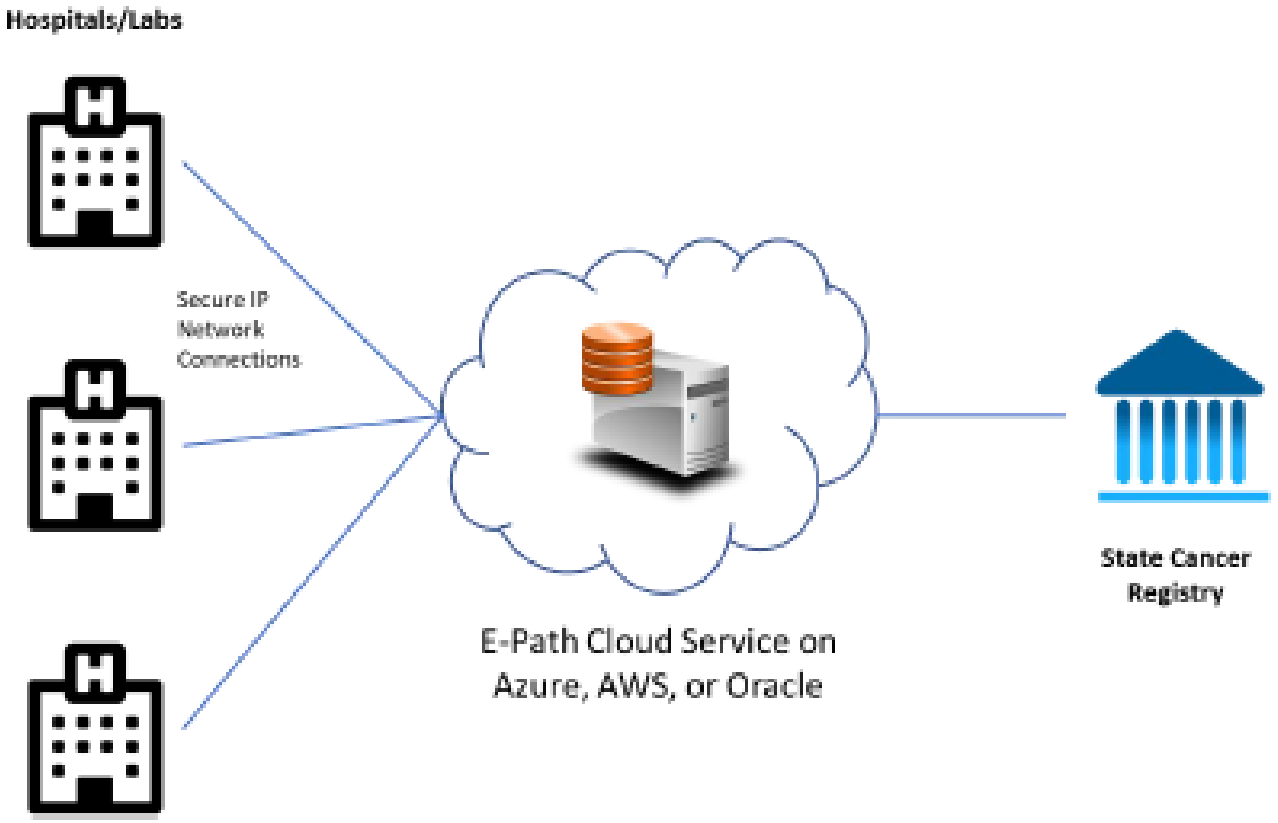
E-Path Cloud Services



Questions & Issues

1. Is cloud an option?
   - There are federally approved HIPAA-compliant cloud applications
   - https://www.hhs.gov/hipaa/for-professionals/special-topics/cloud-computing/index.html

2. Major concern: lack of adequate casefinding skills at hundreds to thousands of free-standing pathology labs anticipated to produce large-scale underreporting

3. Incoming path reports machine-classified as:
   - Not reportable
   - Possibly reportable
   - Reportable

4. Is upload of all path reports okay?
   - Assure no viewing of PHI on those not deemed reportable
   - Resolves concern of complete reporting
     - Most cost-effective model of assuring completeness of reporting
   - Assure deletion with accounting of disclosure for those deemed non-reportable upon visual review

Main Concepts for Discussion

- Reportability/Completeness
- Scalability
- Convert each lab's native format pathology report to standardized format (i.e. NAACCR standard HL7 message)
- Adaptability over time
- Integration with SEER*DMS
- HIPAA Compliance
- Security and Protection of Confidentiality
- VERY preliminary small volume cost estimate for LA
  - $100,000/year platform fee
  - $3,200/year/lab connection fee n=70) (cost per lab declines with volume)

Possible Next Steps

- Collect additional information from labs in IT capacity
  - Additional questions for path lab outreach from Redox:
    - Does your in-house IT team support your EHRs/PM Systems or is it outsourced to your vendor?
    - Are those systems capable of sending and/or receiving HL7 or do they have web services, SFTP (or other) available for integration needs?
    - Do you have a list of existing HL7/web services that you have enabled that you wouldn't mind sharing?
    - If you do not have HL7 feeds or web services enabled today, do you know what the engagement process looks like with the vendor?
- Offer to introduce to labs/collect additional info
- Have potential vendors propose solutions
  - LA would review for feasibility
  - LA would offer to assess preliminary data, i.e. review for accurate determination of reportability

Possible Next Steps

- Assess overall interest in this capacity among SEER program
- Conduct additional “street-level” dialogue with local cooperative labs to explore current status/best practices for registry success
- Consider funding mechanisms
  - Let the market compete?
  - Demonstration project?
  - Other?

Ensuring Success

- Acquisition of additional reporting facilities in 2019 under AB 2325
  - Critical time for relationship-building
  - Establishing new procedures
  - Opportunity for improved reporting:
    - Need to understand challenges faced by the hospitals, pathology laboratories, and treatment centers affected by the law
    - Help identify potential solutions to ensure central registry success as acceptors of the incoming pathology reports
      - Ensure database allows for efficient processing
  - Identify opportunities for automation while recognizing areas that require manual review to maintain data quality

Los Angeles County
Cancer Surveillance Program

Thank You

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