

Cancer Care Ontario

Subject: Systemic Treatment Quality Based Procedure: Procedures and Services

Update May 26, 2016: Disease site expert feedback is that Albumin Infusion is not appropriate – it is being removed as an ST-QBP Procedure/Service. Additionally removal of Hickman and Skin Biopsy are likely also to be removed.

Background

On April 1st, 2014, Cancer Care Ontario (CCO) implemented the new patient-based Systemic Treatment Funding Model (STFM). In this model, funding for systemic therapy is provided on a bundled services methodology.

As you are likely aware, part of the Systemic Treatment QBP work-plan for 2015/16 was to model procedures and services for the 2016/17 model. Analysis and work with the regions has identified that the ALR procedures and services data is not yet an accurate reflection of activity at facilities. The plan is now to model procedures and services for the 2017/18 model. CCO will continue to work with the regions on the ALR procedures data over the year with the expectation that data reported as of April 2016 is an accurate reflection of activity which can be used for modelling purposes.

Additional Guidelines around Reporting and Scope of Procedures and Services

Please refer to the following definition and additional guidance.

Definition ambulatory service/procedure:

A procedure/service on an ambulatory systemic therapy patient is a procedure/service performed by a systemic therapist (medical oncologist, hematological oncologist, gynecological oncologist) or a Health Care Provider under the direction of the systemic therapist. The procedure/service is performed on an ambulatory basis.

Procedures and Services

Please refer to the attached appendix for a list of procedures and services that are in-scope for the data collection strategy. The list of in-scope procedures and services may evolve as the model continues to be refined and developed over the coming years.

Programs & Providers

In determining what program code should be reported for patients in a shared-care model (e.g. under the care of a medical oncologist and radiation oncologist), or patients under the care of another program (e.g. surgery), receiving a procedure/service in the oncology clinic or chemotherapy suite:

• The program reported in the ALR Procedure File should be based on the program of the most responsible provider ordering the procedure/service.



<u>Locations</u>

In determining procedures and services completed in locations in the hospital other than the oncology clinic (MIS FC 7135066) and chemotherapy suite (MIS FC 7134066):

- In order to better understand the various models of care across the province, (i.e. where these procedures and services are being completed), and what will be funded via the STFM in the future, please report the MIS Functional Centre associated with the location of the procedure/service. As per the definition, only ambulatory patients will be funded via the STFM.
- Please note that procedures and services completed in the Emergency Department are out of scope for the STFM. Emergency care is modeled and funded via Health Based Allocation Model (HBAM).
 - Please note we are continuing to work with Level 4 Regional Partner Sites to better understand the model of care.

Next Steps

We appreciate the amount of time and effort required to undertake this initiative. We ask that you share this briefing note with others in your facility and in your region that are responsible for the implementation of the STFM. For additional information related to this work, please feel free to contact CCO.

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Appendix

STFM Procedures			
Procedure	CCI Code Group	CCI Code Description	
Bone Marrow	2.WY.71.HA	Biopsy, bone marrow using percutaneous (needle) approach	
Lumbar Puncture	2.AX.13.HA	Diagnostic Interventions on the Spinal Canal and Meninges using percutaneous (needle) approach	
Thoracentesis	1.GV.52.HA	Drainage, pleura using percutaneous (needle) approach	
Paracentesis	1.OT.52.HA	Drainage, abdominal cavity using percutaneous (needle) approach	
Skin Biopsy	2YA - 2YZ	Diagnostic Interventions on the Skin	

Removal Of	1.IS.55.^^	Removal of device, vena cava (superior and inferior) of
Hickman/PICC Line		venous access device using percutaneous transluminal
		approach

	STFM Services			
Service	CCI Code Group	CCI Code Description		
Transfusion of Red	1.LZ.19.HH-U1-J	Transfusion of red cell concentrates using homologous		
Blood Cells		transfusion		
Transfusion of	1.LZ.19.HH-U4-J	Transfusion of platelets using homologous transfusion		
Platelets				
IVIG &	1.ZZ.35.HA-M7	Pharmacotherapy, total body, percutaneous approach		
Subcutaneous IG		[intramuscular, intravenous, subcutaneous, intradermal], using immunostimulant		
	8.ZZ.70.GR-BW	Immunization (to prevent) immune disorder NEC by intravenous [IV] injection of immune globulin [IGIV]		
Infusion for Hydration	1.LZ.35.HH-C7	Pharmacotherapy (local), circulatory system NEC of		
		electrolyte balance agents percutaneous infusion		
		approach		
Albumin Infusion	<mark>1.LZ.35.HH-C5</mark>	Pharmacotherapy (local), circulatory system NEC		
		percutaneous infusion approach of blood and related		
Disease site expert		products		
feedback is that				
Albumin Infusion is				
not Appropriate – it is				
being removed as ST-				
QBP Drocoduro (Sorvico				
Procedure/Service Antibiotic Infusion	1.ZZ.35.HA-K0 to	Pharmacotherapy, total body, percutaneous approach		
Antibiotic infusion	1.ZZ.35.HA-K0 to	[intramuscular, intravenous, subcutaneous, intradermal],		
	And	using general antiinfective agents		
	1.ZZ.35.HA-L1 to	using general antimective agents		
	1.ZZ.35.HA-L1 to			
IV Iron Infusion	1.ZZ.35.HA-C3	Pharmacotherapy, total body using antianemic agent		
		percutaneous approach [intramuscular, intravenous,		
		subcutaneous, intradermal]		
Therapeutic	1.LZ.52.HA	Drainage, circulatory system NEC using percutaneous		
Phlebotomy		(needle) drainage by gravity		