

Breaking Barriers: MOSAIQ Data Reporting

Presented by:

Brenda Fisser,
COC,CPC,CPCO,CPPM,ROCC
Clinical Operations Manager
Yale School Of Medicine

Disclosures



NO FINANCIAL DISCLOSURES



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Creating process for identifying patients



Pulled together key stakeholders for the project

Chief therapists

Regional Manager

Nurse Manager

Clinical Operations Manager



Reviewed current process for documenting cancellation reason

Inconsistent process across sites

- Use of secondary appointment status
- Comments added
- Combination of both

Identified areas of improvement

- Created a cancellation reason list to compliment MOSAIQ cancellation status

Can also create secondary status in MOSAIQ

Cancelation Reason List

- Transportation barriers
 - PT CX-TRANSPORT
- Patient sick (not due to treatment)
 - PT CX-ILL
- Patient toxicity (attributed to treatment)
 - PT CX-SIDE EFFECTS
 - MD Break (B primary status) SIDE EFFECTS
- Patient is hospitalized
 - PT CX-IN PT
- Housing Concern/barriers
 - PT CX-HOUSING
- Financial concerns/barriers
 - PT CX- (AUTH) FINANCES
- Psychosocial concerns (feelings of anxiety or depression) about treatment
 - PT CX-PSYCHSOCIAL
- Childcare cancelled or closed
 - PT CX-CHILDCARE (other family member?)
- Conflict in appointment with another provider/appointment
 - PT CX-APPT CONFLICT

- Patient employment
 - PT CX-WORK
- Patient did not want to wait for treatment after arrival (wait time)
 - PT CX-LEFT B4 TXT
- Decided to seek treatment elsewhere
 - PT CX-OTHER INSTITUTION
- Does not wish to continue treatment
 - PT CX-DISCONTINUE TX
- Does not wish to answer reason for no show
 - PT CX-NO REASON GIVEN
- Outreach attempted; unable to reach patient
 - PT CX-UNABLE TO CONTACT

Additional reasons on CoC List

- Patient Unavailable
 - PT CX-PATIENT GOING AWAY
- Machine Down-PT unable to wait or return (M primary status)
- Weather – (W-secondary status)

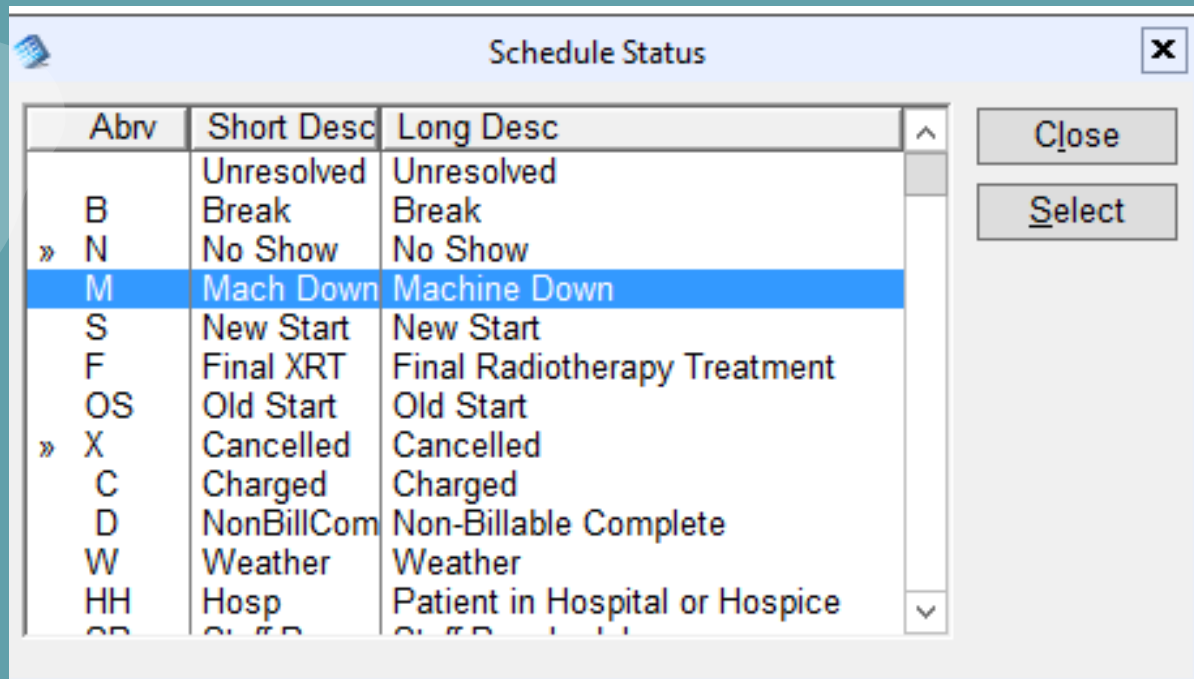
Identifying Cancelled Treatment Appointments

The screenshot shows a 'Schedule Status' dialog box with the following settings:

- Report Filters
 - Department: Hamden
 - Schedule Date: From: 6/2/2023 To: 6/2/2023
 - Schedule Status: All Tagged
 - Staff: All Tagged
 - Location: All Tagged
 - Primary Diagnosis: All Tagged
 - Activity: All Tagged
 - Show Skipped Co-Pays Only: No Yes
- Suppress Details
- Print Additional Detail
 - Activity (Hosp Code) / Duration
 - Diagnosis Category
 - Primary Diagnosis
 - Clinical / Adm Sts 2nd ID: None
 - Patient Phone Numbers
 - Comments Suppress Comment if Blank
 - Notes Suppress Note if Blank
 - Display Secondary Staff
 - Display all schedule status if not fit under STS
 - Show History
- Time Format
 - 12 Hour (am/pm)
 - 24 Hour

- Pulling information from MOSAIQ
 - From Reports
 - Scheduling Status report
 - Tag the following
 - Schedule Status
 - Primary Diagnosis
 - Activity
 - Click the following detail
 - Primary diagnosis
 - Comments

Scheduling Status



| Abrv | Short Desc | Long Desc |
|------|------------|--------------------------------|
| | Unresolved | Unresolved |
| B | Break | Break |
| » N | No Show | No Show |
| M | Mach Down | Machine Down |
| S | New Start | New Start |
| F | Final XRT | Final Radiotherapy Treatment |
| OS | Old Start | Old Start |
| » X | Cancelled | Cancelled |
| C | Charged | Charged |
| D | NonBillCom | Non-Billable Complete |
| W | Weather | Weather |
| HH | Hosp | Patient in Hospital or Hospice |
| CP | CP | CP |

- Tag appropriate cancelation statuses
 - “B”=Break
 - “M”= Machine Down
 - “N”= No Show
 - “X” = Cancelled

Primary Diagnosis

| Diagnosis | C | U | Use | Group | Description |
|-----------|---|---|-----|----------------------------------|-------------------------------|
| » D05 | | | | D05 - Breast in situ | Carcinoma in situ of breast |
| » D05.00 | | | | D05 - Breast in situ | Lobular carcinoma in situ of |
| » D05.01 | | | | D05 - Breast in situ | Lobular carcinoma in situ of |
| » D05.02 | | | | D05 - Breast in situ | Lobular carcinoma in situ of |
| » D05.10 | | | | D05 - Breast in situ | Intraductal carcinoma in situ |
| » D05.11 | | | | D05 - Breast in situ | Intraductal carcinoma in situ |
| » D05.12 | | | | D05 - Breast in situ | Intraductal carcinoma in situ |
| » D05.80 | | | | D05 - Breast in situ | Other specified type of carc |
| » D05.81 | | | | D05 - Breast in situ | Other specified type of carc |
| » D05.82 | | | | D05 - Breast in situ | Other specified type of carc |
| » D05.90 | | | | D05 - Breast in situ | Unspecified type of carcinor |
| » D05.91 | | | | D05 - Breast in situ | Unspecified type of carcinor |
| » D05.92 | | | | D05 - Breast in situ | Unspecified type of carcinor |
| D06 | | | | D06 - Cervix in situ | Carcinoma in situ of cervix u |
| D06.0 | | | | D06 - Cervix in situ | Carcinoma in situ of endoce |
| D06.1 | | | | D06 - Cervix in situ | Carcinoma in situ of exocer |
| D06.7 | | | | D06 - Cervix in situ | Carcinoma in situ of other p |
| D06.9 | | | | D06 - Cervix in situ | Carcinoma in situ of cervix, |
| D07 | | | | D07 - Genital Organs in situ NOS | Carcinoma in situ of other a |
| D07.0 | | | | D07 - Genital Organs in situ NOS | Carcinoma in situ of endom |
| D07.1 | | | | D07 - Genital Organs in situ NOS | Carcinoma in situ of vulva |
| D07.2 | | | | D07 - Genital Organs in situ NOS | Carcinoma in situ of vagina |
| D07.3 | | | | D07 - Genital Organs in situ NOS | Carcinoma in situ of other a |

- Tag all appropriate diagnoses
 - Recommend running one Category at a time
 - Breast
 - Lung
 - Prostate (easy only 1 dx code)
 - H&N
 - Rectum
 - Utilize Find: to add dx
 - Breast
 - C50 – tag all dx codes
 - D05 – tag all in situ for breast

Treatment procedures

Procedures/Medications/Supplies

View: Procedures - Code Sets Find

| Grp | Hosp Code | CPT Code | Abv | Description | C |
|-----|------------|------------|-------|--|---|
| CTM | CDSimIMRTC | CDSimIMRTC | CDIMR | CONEDOWN VERIFICATION SIMULATION+IMRT COMPLEX | C |
| CTM | CDSimIMRTS | CDSimIMRTS | CDIMR | CONEDOWN VERIFICATION SIMULATION + IMRT SIMPLE | C |
| CTM | CDVSim | CDVSim | CDVSM | Conedown Verification simulation | C |
| CTM | CDVSim+Tx | CDVSim+Tx | CDVTX | CONEDOWN VERIFICATION SIMULATION+ COMPLEX TREATMENT | C |
| CTM | CDVSimCx | CDVSimCx | CDVXC | Complex Conedown Clinical Simulation-Breast Boost + Tx Orig Flds Complex | C |
| CTM | FSTTxC&SI | FSTTxC&SI | FSTXC | FAST Complex Treatment + Surface Imaging | C |
| CTM | GKI-Multi | GKI-Multi | GKMUL | GKI ICON MULTIPLE FXS | C |
| CTM | GKI-Single | GKI-Single | GKI S | GK ICON SINGLE TX | C |
| CTM | HPIMRTCCB | HPIMRTCCB | HPIMC | HP IMRT COMPLEX+CBCT | C |
| CTM | HPIMRTCEX | HPIMRTCEX | HPIMC | HP IMRT Complex + EXACT TRAC | C |
| CTM | HPIMRTCKV | HPIMRTCKV | HPIMK | HP IMRT Complex+KVKV | C |
| CTM | HPIMRTSCB | HPIMRTSCB | HPIMS | HP IMRTSimple+CBCT(XVI) | C |
| CTM | HPIMRTSCL | HPIMRTSCL | HPIMS | HP IMRT Simple + CALYPSO | C |
| CTM | HPIMRTSKV | HPIMRTSKV | HPIMR | HP IMRT Simple + KVKV | C |
| CTM | HPTXC&Surf | HPTXC&Surf | HPTXC | HP Complex Treatment + Surface Imaging | C |
| CTM | HPTXCCB | HPTXCCB | HPTXC | HP Complex Treatment + CBCT(XVI) | C |
| CTM | HPTXCEX | HPTXCEX | HPTXC | HP Complex Treatment + EXACT TRAC | C |
| CTM | HPTXCKV | HPTXCKV | HPTXC | HP Complex Treatment +KVKV | C |
| CTM | IMRT_CkV | IMRT_CkV | IMRTC | IMRT COMPLEX TREATMENT WITH KVKV (IM387) | C |
| CTM | IMRT_SkV | IMRT_SkV | IMRTS | IMRT SIMPLE TREATMENT WITH KVKV (IM387) | C |
| CTM | IMRT_C | IMRT_C | IMRTC | IMRT COMPLEX TREATMENT WITH CBCT / (XVI) | C |
| CTM | IMRT_CExac | IMRT_CExac | IMRTC | IMRT COMPLEX TREATMENT WITH EXACTRAC (IM387) | C |
| CTM | IMRT_S | IMRT_S | IMRTS | IMRT SIMPLE TREATMENT WITH CBCT (XVI) | C |
| CTM | IMRTC_CBSI | IMRTC_CBSI | IMRTC | IMRT COMPLEX TREATMENT WITH CBCT / (XVI) and Surface Imaging | C |
| CTM | IMRTC_KVSI | IMRTC_KVSI | IMRTC | IMRT COMPLEX TREATMENT WITH KVKV (IM387) and Surfacing Imaging | C |
| CTM | IMRTCCalyp | IMRTCCalyp | IMCCa | IMRT COMPLEX TREATMENT WITH CALYPSO (CL387) | C |
| CTM | IMRTSCalyp | IMRTSCalyp | IMSCa | IMRT SIMPLE TREATMENT WITH CALYPSO (CL387) | C |
| CTM | TBI+Portfl | TBI+Portfl | TBI+P | TBI Treatment + Portflms | C |
| CTM | Tx_C&CBCT | Tx_C&CBCT | TXCCB | COMPLEX TREATMENT PLUS CBCT (77387) | C |
| CTM | Tx_C&Exac | Tx_C&Exac | TXCEX | COMPLEX TREATMENT WITH EXACTRAC | C |
| CTM | Tx_C&SurfM | Tx_C&SurfM | TXCSI | Tx Delivery Complex + Surface Imaging | C |
| CTM | Tx_I&kvkv | Tx_I&kvkv | TXkV | INTERMEDIATE TREATMENT PLUS KVKV (77387) | C |
| CTM | Tx_C&kvkv | Tx_C&kvkv | TXckV | COMPLEX TREATMENT PLUS KVKV (77387) | C |
| CTM | Tx_S&kvkv | Tx_S&kvkv | TXSkV | SIMPLE TREATMENT PLUS KVKV (77387) | C |
| CTM | VSCx+CBCT | VSCx+CBCT | VSCCT | Verification Simulation + Complex treatment + Conebeam CT | C |
| CTM | VSFSTXC&SI | VSFSTXC&SI | VSFSC | Verification simulation FAST TX Complex Treatment + Surface Imaging | C |
| CTM | VSHPMIRTC | VSHPMIRTC | VSHPC | VERIFICATION SIMULATION+ HP IMRT COMPLEX | C |
| CTM | VSHPMIRTS | VSHPMIRTS | VHPIM | VERIFICATION SIMULATION +HP IMRT SIMPLE | C |
| CTM | VSHPTXCCB | VSHPTXCCB | VHTCC | Verification simulation HP Complex Treatment + CBCT (XVI) | C |
| CTM | VSHPTXCKV | VSHPTXCKV | VHTCK | Verification simulation HP Complex Treatment + KVKV | C |
| CTM | VSHPTXC&SI | VSHPTXC&SI | VHTCS | Verification simulation HP Complex Treatment + Surface Imaging | C |
| CTM | VSim only | VSim only | VSim | Verification Simulation | C |
| CTM | VSim+CTx | VSim+CTx | VMCTX | VSim + COMPLEX TREATMENT | C |

Close
Select

Filter By
 Active
 Expired
 All

Sort by
 Grp
 Hosp Code
 CPT Code
 Description

- Tag all treatment delivery activities
- Exclude the following appts:
 - Simulation
 - Verification simulation only appts
 - Treatment appts that you know are <14 fractions:
 - SBRT/SRS

Sample report

| Hamden | | Run by: BF | | 6/2/2023 6:54:01PM | | | | |
|--|---------|---|------|--------------------------|-------|---------------|----|-------|
| Schedule Status: No Show, Cancelled | | | | *- ICD-9 Diagnosis | | | | |
| Schedule for Department: WRO | | | | | | | | |
| Schedule Date: 5/1/2023 To 6/2/2023 | | | | | | | | |
| Primary Diagnosis: C61 | | | | | | | | |
| Activity: 33300018, 33300004, TX:C&kVkv, TX:S&kVkv, VSim+STx, VSim+CTx, VSIM+IMRTS, VSIM+IMRTC, CDVSim+Tx, CDVSimCx, CDSimIMRTC, CDSimIMRTS, VSimCtxSI, Tx:C&Exac, VSHPIIMRTC, VSHPIIMRTS, TX:I&kVkv, VSimCtxkv, VSimltxkv, VSimStxkv +more. | | | | | | | | |
| Date | Time | Patient Name | Epic | Description | P Stf | Loc | MD | Sts |
| 5/12/2023 | 6:15 pm | [REDACTED] | | IMRT Simple CBCT | | TRI | AP | X,IL+ |
| | | Primary Diagnosis: C61 Malignant neoplasm of prostate | | | | | | |
| | | Comments: PT NOT FEELING WELL | | | | | | |
| 5/30/2023 | 8:45 am | [REDACTED] | | IMRT Simple CBCT | | TRI | AP | X,IP |
| | | Primary Diagnosis: C61 Malignant neoplasm of prostate | | | | | | |
| | | Comments: I.P. ON BREAK | | | | | | |
| 5/31/2023 | 6:00 pm | [REDACTED] | | IMRT Simple CBCT | | TRI | AP | X,IP |
| | | Primary Diagnosis: C61 Malignant neoplasm of prostate | | | | | | |
| | | Comments: IP 5.4 **ON TELEMETRY; CANT BE TRANSPORTED | | | | | | |
| 6/1/2023 | 5:45 pm | [REDACTED] | | IMRT Simple CBCT | | TRI | AP | X,IP |
| | | Primary Diagnosis: C61 Malignant neoplasm of prostate | | | | | | |
| | | Comments: IP 5.4 ?? STATUS **CXL PER RADIOLOGY | | | | | | |
| Summary Information : | | | | | | | | |
| | | New Starts (S/SC/SD): | 0 | Charged New Starts (SC): | 0 | | | |
| | | Old Starts (O/OC/OD): | 0 | Charged Old Starts (OC): | 0 | | | |
| | | Final Trts(F/FC/FD): | 0 | Charged Final Trts (FC): | 0 | | | |
| | | Other: | 4 | Charged Other (C): | 0 | Total Charged | 0 | |
| | | | | On Break (B): | 0 | | | |
| | | | | No Shows (N): | 0 | | | |

- Reports shows all cancelled appts for Prostate Ca
 - See comments
 - See secondary status “IL”
- Report can be exported to Excel and sorted it needed

Pulling the data together: Manual Process

- Identify patients with 3 or more cancelations
 - Determine if curative case
 - For some dx it may be easier than others
 - Can identify in D&I section of Mosaic or Physician Clinical Treatment plan note
 - Course greater >14 fractions
 - Know your practice and pull-out activity codes that are short course
- Chief RTT Key stakeholder
 - Assists if reason unclear
 - Reviews and can identify patients
 - Fractions
 - Intent

Final Tips

Pull in

Pull in the right people as stakeholders on project

Determine

Determine best way to pull data, either with the steps I shared or other tools available from MOSAIQ

Don't run

Don't run reports weekly

- Run the day after the range date for reporting period

QUESTIONS

