CDC National Program of Cancer Registries Modeling Electronic Reporting Project (MERP):

The Central Registry Perspective

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The MERP Collaborators

CDC-NPCR

Facilitate & Guide Model Development

Virginia
Commonwealth University
Health System (VCUHS)
Implement & Test Model

Virginia Cancer Registry (VCR)

Monitor Model Development/ Pilot Central Registry Automation









MERP Objectives

- Model the electronic capture of cancer surveillance data from EHR
- Enhance efficiency, accuracy, and completeness of case reporting:
 - Employ standard methods, codes and data elements
 - Apply across hospital and state cancer registries
- Test the model in a large hospital setting
- Test PHIN compliant reporting from a hospital registry to a central registry

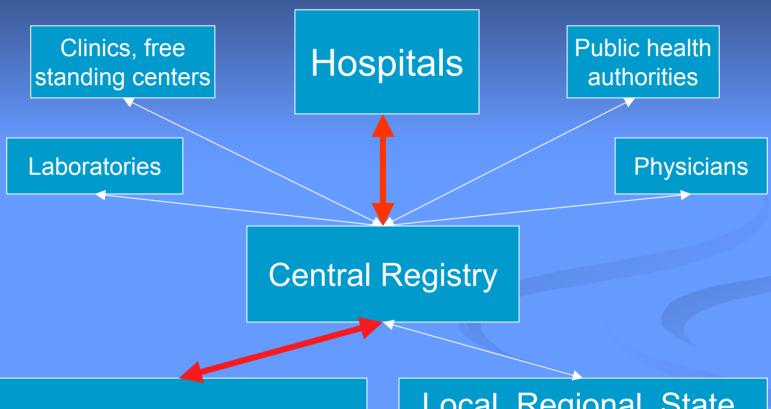








VCR Surveillance Partners



Fed. Surveillance Pgm. (CDC NPCR)

Local, Regional, State, & National Partners (PH, NAACCR, ACS)









VCR Role in MERP

- Phase One
 - Collaborate on model development
 - Plan for central registry needs
 - Participate in developing data transmission models
 & procedures
- Phase Two
 - Implement data messaging
 - o Train staff (CTRs, epidemiologists, administrators)
 - Develop policies and procedures (internal and external) that accommodate new standards









VCR Surveillance Objectives (I)

- Ascertainment
 - More complete automated case finding
- Timeliness
 - Transmit more frequently (real time may be possible)
 - Registrars analyze and post to central database more quickly
- Accuracy Minimize transcription errors
- Security Secure or encrypted messages









VCR Surveillance Objectives (II)

- Data handling -
 - Increased automation
 - Cases sent individually or in batches
 - Real time reporting may be possible
- Quality control -
 - Registrars concentrate on analyzing, not paperwork
 - Computer edits more automated & better integrated
 - Validation directly from EHR





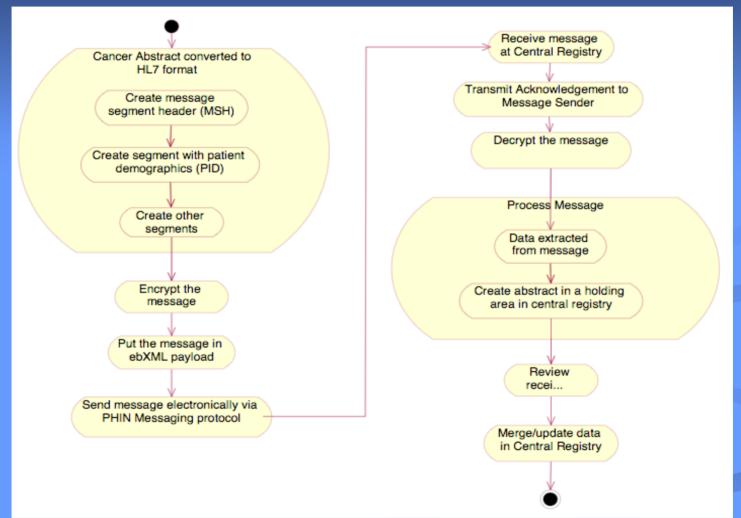




Data Transmission Schematic

Hospital Cancer Registry

Central Cancer Registry











PHIN Message Transport Compliance Guideline



A message transport system that is generic, standards-based, platform-independent, and coupled with systems that produce and receive secure public health messages over the internet using ebXML









Implementation Issues (I)

IT more integrated with ongoing work

- Conforming to data transmission standards
 - PHIN protocols
 - Standard content codes (SNOMED, LOINC, CAP)
- Ensuring data integrity, confidentiality, and veracity
- IT support & training
- Accommodating legal & program requirements:
 - State reporting laws
 - Federal (NPCR) program standards
 - NAACCR data standards









Implementation Issues (II)

Analysis, reporting & data use

- Analysts & epidemiologists
 - Work with CTRs & IT to understand data structures, codes and standards
 - Establish rapid case ascertainment
- Public health issues
 - Improve state cancer epidemiology (description and analysis)
 - Collaborate with education, prevention and control efforts
 - Perform special studies that exploit advantages of automated data transmission









VCR Operational Goals

- Access and enter more complete, timely and accurate case reports
- Increase registrar efficiency: enhance analytic functions (without increasing workload)
- Integrate data transmission with public health networks/protocols (PHIN, NEDSS)
- Automate case reporting for review
- Implement and adhere to established coding and transmission standards









VCR Public Health Goals

- Enhance input and response to cancer prevention and control policies
- Strengthen cancer epidemiology: More complete knowledge of the burden
- Develop & implement transportable, extensible, standards-based methods to benefit the cancer surveillance community









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