MOQC Biannual Meeting | January 17, 2020

Culture, Faith, and Difficult Conversations: Patient- and Family-Centered Care

Culture, Faith, and Important Conversation in the Cancer Journey
Panel Discussion

Oncology providers often face gaps in their knowledge and skill in approaching the cultural and faith beliefs of their patients. These beliefs play a critical role in the decisions, conversations, and experiences of patients with cancer at the time of diagnosis, at key points in the disease trajectory, and in decisions regarding survivorship issues, such as fertility preservation. In addition, the centuries-long history of oppression in our country by some groups of people can complicate issues such as trust and the ease with which patients and clinicians talk with one another although this need not be the case. Other marginalized or “invisible” groups of people, such as immigrants, religious minorities, and those who do not have a professed faith, may face barriers to patient-centered care when difficult and important conversations arise. The purpose of the Panel is to provide the audience a variety of perspectives with respect to these important, and often fraught conversations around decision-making in cancer care, including discussions of goals of care, and end-of-life decision making. The ultimate goal is to deepen the knowledge and skills of our audience with patient- and family-centered care.

Panel members, who will include a diverse group of faith leaders from multiple faith traditions, will lend their expertise, and even more important, their experience to a discussion of patient cases provided by practices that participate in the Michigan Oncology Quality Consortium.

We will also have an afternoon Breakout Session for those interested. Tools for taking a spiritual history and resources from the literature will be provided to those who attend this session.
Lessons from the Field
Patient-Reported Outcomes & Measurement in Oncology (PROM-Onc)
Kathy LaRaia, MS
Cindy Michelin, CHCM
Cyndi Muszynski, OTRL, CMC, CMOM
Theresa Zatkira, MPH

Munson Healthcare and Henry Ford Macomb will share how they approached the introduction of patient-reported outcomes (PROs) within their clinics. They will address what outcomes they selected to collect, what instruments were used to collect the information from patients, and how they engaged their staff and physicians in the project. They will share the tools they developed to support their staff and patients in this project, and what feedback they have received. The challenges and benefits of PROs will be presented, and the steps each practice is now taking to use PROs in their day-to-day workflow.

Clinical Pearls for Medication Use in End-of-Life Care: Part II
Not Quite the Kitchen Sink: Pain Management
Michael Smith, PharmD, BCPS

What are the options when the traditional pain management approaches aren’t enough? Discussion surrounding nonconventional approaches to pain management when the “Kitchen Sink” doesn’t work. Current cancer pain guidelines will be reviewed, followed by a focus on medications such as buprenorphine, methadone, ketamine and lidocaine. Dr. Smith will present a patient case, evaluating the safety and efficacy for each medication, while taking into consideration limitations and monitoring parameters.

2020 Participation in the Quality Payment Program
Are you ready for this year’s MIPS changes?
Bruce Maki, MA

Since the Quality Payment Program (QPP) was launched in 2017, The Centers for Medicare and Medicaid Services (CMS) has made annual updates to both participation tracks, the Merit-based Incentive Payment System (MIPS) and Advanced Alternative Payment Models (A-APMs), responding to feedback, reducing reporting burden and improving outcomes. Staying on top of changes to ensure you’re performing optimally is vital during the remainder of the program’s “transition years”. Soon, what is today considered “exceptional performance” will instead be the minimum performance required to avoid a Medicare payment penalty. The penalties are steep, and the financial rewards are significantly increasing. Now is the time to ensure your QPP performance is at its best! Join Bruce Maki, Altarum Regulatory and Incentive Program Analyst, as he details 2020 program changes, shows you how to get free CMS-funded assistance, and shares valuable insights you can use to maximize performance, ensuring you’re not only protecting, but also increasing, your Medicare reimbursement rates now and in the future.