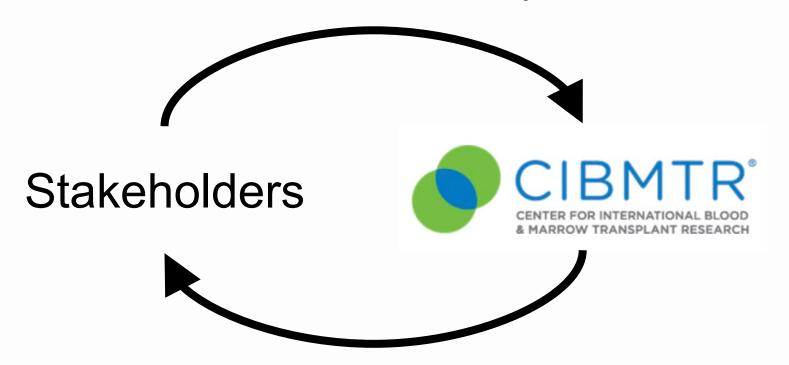
# Center Outcomes Forum: Work Group 1

- Christopher Dandoy (ASTCT CQO)
- Amir Steinberg (FACT COIC)
- Dianne Howard (Quality, Center perspective)
- Mark Juckett (Quality, Center perspective)
- Alberto Santos (Aetna) (Payer perspective)
- Rob Soiffer (Center perspective)
- Michael Rabin (ASTCT payor relations)



**Question 1:** What revisions should CIBMTR consider making to current processes to collect recommendations about data (especially disease-specific) to be used in risk adjustment for the center specific survival analysis? This is essential to maintain up-to-date and relevant risk adjustment.



**Question 2:** What additional approaches to communication should be made by CIBMTR to inform relevant stakeholders about the center specific survival analysis and ongoing changes to risk adjustment?

# Background: Center-Specific Survival Analysis

- We can only adjust using data we collect TED level.
- Need to stay up-to-date with rapidly evolving field.
- Data must be discrete, unambiguous, readily obtained (fair), universally used in clinical care, and not gameable
- Carefully weigh burden vs benefit
- Attention to completeness AND quality



# Background: Current processes for recommendations about data revisions/risk adjustment

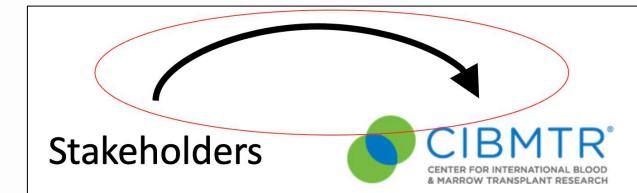
- Data collection revision process
- Working Committee suggestions
- CIBMTR internal review of CSA analysis and report
- Center Outcomes Forum
- ASTCT Committee on Quality Outcomes
- Suggestions from centers



**Question 1:** How does CIBMTR efficiently acquire the necessary variables for calculating risk-adjustment in a timely manner for the Center-Specific Survival Analysis?

- A. Engagement of Transplant Center Directors (content experts)
- B. Committees and Working Groups
- C. Open Forum to Solicit Feedback In Person Session
- D. Open Forum to Solicit Feedback CIBMTR Website



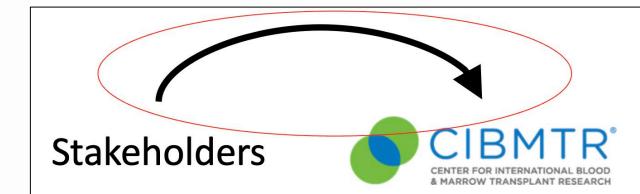


# A. Engagement of Transplant Center Directors (and other content experts)

Establish a feedback mechanism through which Division Directors and other content experts can submit recommendations.

- How would this be accomplished?
- How do we keep this manageable and constructive?
- Passive versus proactive solicitation?



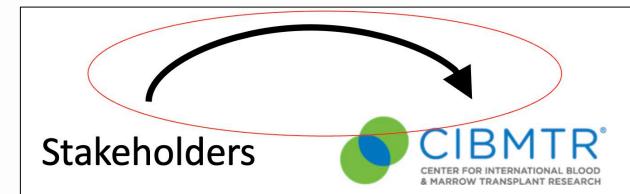


#### B. Committees - Working Groups

Engage with key stakeholders on a regular basis to gather feedback and recommendations for data collection.

- Establish a formal mechanism, such as advisory committees or working groups, to facilitate this engagement.
- Working groups could perform periodic literature reviews to identify new disease-specific variables or risk factors that should be incorporated into risk adjustment models.
- Utilize existing committees?





#### C. Open Forum to Solicit Feedback – In Person Session

Establish an active mechanism to elicit feedback directly in person at Tandem.

- During the Administrative Directors Meeting?
- Is Administrative directors the right audience, should this be more focused on the medical/divisional director's meeting.
- Formal session through CQO session?



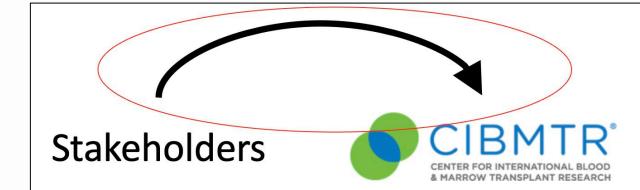


#### D. Open Forum to Solicit Feedback – CIBMTR Website

Create an active mechanism to elicit feedback on the website.

 Any suggestions would need to be addressed and responded to for this to be viable.





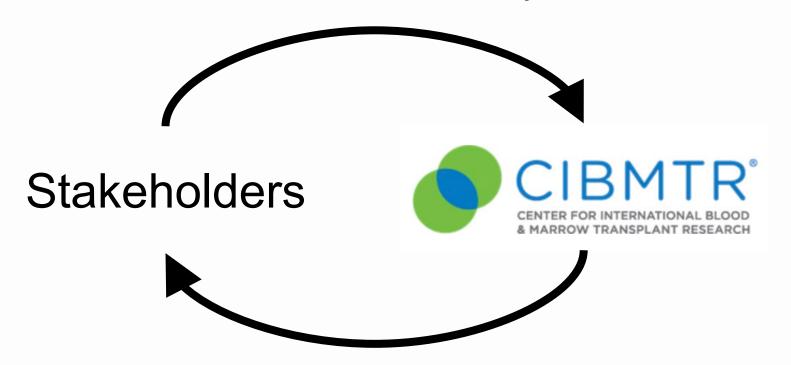
**Question 1:** How does CIBMTR efficiently acquire the necessary variables for calculating risk-adjustment in a timely manner for the Center-Specific Survival Analysis?

- A. Engagement of Transplant Center Directors (content experts)
- B. Committees and Working Groups
- C. Open Forum to Solicit Feedback In Person Session
- D. Open Forum to Solicit Feedback –CIBMTR Website





**Question 1:** What revisions should CIBMTR consider making to current processes to collect recommendations about data (especially disease-specific) to be used in risk adjustment for the center specific survival analysis? This is essential to maintain up-to-date and relevant risk adjustment.



**Question 2:** What additional approaches to communication should be made by CIBMTR to inform relevant stakeholders about the center specific survival analysis and ongoing changes to risk adjustment?

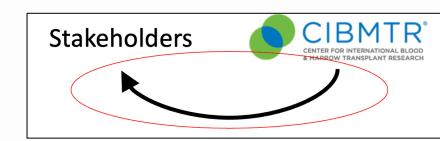
**Question 2:** What additional approaches to communication should be made by CIBMTR to inform relevant stakeholders about the center specific survival analysis and ongoing changes to risk adjustment?

- A. Simplified communication
- B. Regular Newsletters
- C. Webinars, Workshops, and Sessions at Tandem
- D. Email Updates

#### **Other Suggestions:**

- E. Communication with Payers
- F. Timely Notifications
- G. Building Confidence: Feedback Mechanisms





# Background: Venues for communication

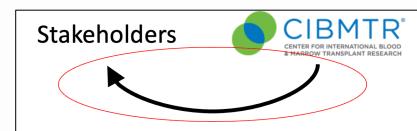
- Center specific survival report
- Center specific survival methodology posting
- Center outcomes forum summaries
- Presentations at Tandem
  - Special interest sessions
  - Center Administrators
  - Data professionals



# A. Simplified Communication

- Implement a simplified overview of updates to center-specific survival analysis.
  - -"Key Highlights" page, featuring 3-4 bullet points outlining recent changes that will directly affect each clinical practice.
  - -Include info on where they can find more information.
  - Include variables that are being tested/investigated to be included in the portal.
- Improve usability and awareness of current online resources

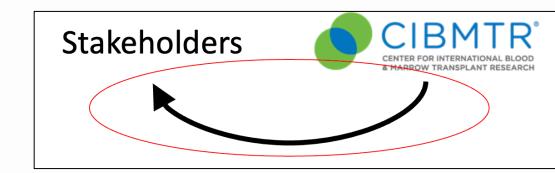




## B. Regular Newsletters

Publish regular newsletters or bulletins summarizing key findings from center-specific survival analysis, highlighting changes to risk adjustment models, and sharing important updates.

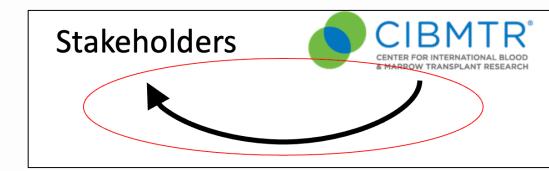




## C. Webinars, Workshops, and Sessions at Tandem

CIBMTR could sponsor additional webinars, workshops, virtual town hall meetings, or sessions at Tandem to discuss the results of survival analysis and changes to risk adjustment in a more interactive manner.





## D. Email Updates

- Send regular email updates to registered stakeholders, summarizing important findings, changes to risk models, and upcoming events.
- Provide links to more detailed information on the CIBMTR website.

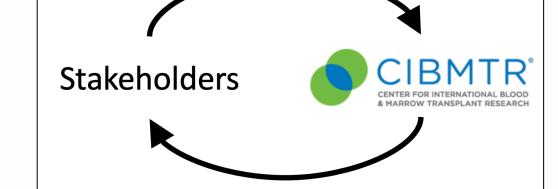




## E. Communication with Payers

Communication with payers relevant to the report which may influence their policies

- Would include payers, health plans, etc.
- This could include list-serves.
- Bilateral communication (Question 1)





# F. Timely Notifications

Send timely notifications for significant changes to risk adjustment models or updates that may have an immediate impact.





# G. Feedback Mechanisms (building confidence)

Conduct periodic surveys to gather feedback from stakeholders about their communication preferences and the effectiveness of current communication strategies.

Use this feedback to make continuous improvements.





**Question 2:** What (if any) additional approaches to communication should be made by CIBMTR to inform relevant stakeholders about the center specific survival analysis and ongoing changes to risk adjustment?

- A. Simplified communication
- B. Regular Newsletters
- C. Webinars, Workshops, and Sessions at Tandem
- D. Email Updates

#### **Other Suggestions:**

- E. Communication with Payers
- F. Timely Notifications
- G. Building Confidence: Feedback Mechanisms





# Thank you

