Minutes

Research and OCC Meeting

February 5th, 2021/12:00pm EST

Agenda

| # | Topic | Lead Speaker |
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| 1 | Welcome   * Dr. Sandrow introduced Dr. Jianji Yang who is new to the OCC Team. Has a background in clinical informatics as well as some familiarty with OCC data as well as Cerner. * Overview of OCC Research Group. Goal of providing a connection bwteen OCC Staff and HSR&D teams | Kristin Cunningham  Dr. Campbell  Dr. Sandrow  Dr. Yang |
| 2 | HSR&D Needs Assessment Results     * Dr. Mattocks presented HSR&D Needs Assessment Results. * Many respondents were investigators in the process of working with OCC * A little less than half of researchers were having issues with various parts of OCC data (Iding variables, linking data sets, etc.) * Topics of interests for researchers included HPP, Quality in CC * Kristin Cunningham Questions   + When was this conducted (Earlyish November-Before Thanksgiving)   + What special sessions would be good? We can definitely work on scheduling those     - Kirstin Mattocks requested an update on RCI would be good       * It’s in partnership with OVAC, OCC will work on scheduling | Kristin Mattocks |
| 3 | PIT Data – There has been a large amount of missingness for taxonomy (provider specialty). Is there a reason why this variable isn’t frequently populated? Is taxonomy a low-demand area/issue for OCC?   * Matt Czegan (OCC) responded that taxonomy has been a low demand issue. Can use the extract of the NPI registry table so that join from NPI to taxonomy could be doable. Unfortunately, there is not a more straightforward way * Alex Hickock suggested taking a look at source entity and source system. They found that vast majority that claims missing taxonomy were CHAMPVA-claims. Once those were eliminated, missingness dropped significantly. | Megan Vanneman  Erin Beilstein-Wedel |
| 4 | OPES and PIT Data Update   * The OCC team is continuing to work with OPES, there aren’t really any significant updates, more code has been transferred (about eCAMS). They’re continuing to work through code | Matt Czegan |
| 5 | Dialysis Data   * Denise Hines wanted to touch base about dialysis claims (There is a call scheduled about this). * Matt Czegan – contracted dialysis claims can be pulled from SFC and a vast majority of claims should be contracted * Kristin Cunningham – Dialysis has always been separate contracts (18-20 regional contracts now). Now included in CCN, but unsure how much has been moved to CCN since many authorizations begin at the start of the FY and go for a year. | Denise Hines  Matt Czegan |
| 6 | Community Care Utilization: Rehabilitation Services     * Dr. Mattocks made a presentation to Rehabilitation Services. The slide is a quick grab/snapshot of the work being done. Noted there are a surprising number of physical therapy referrals. * Kristin Cunningham noted that it could be because people get it frequently and close to home (using best medical interest as approval reason) * Kristin Mattocks asked if dip in the costs in April and May was COVID-19 related.   + Kristin Cunningham confirmed that the area of care to increase during that time was inpatient. A dip was also noted in December possibly because of COVID and lower utilization. | Kristin Mattocks |
| 7 | Wrap Up | Kristin Cunningham |

Action/Follow-up Items

| # | Action Item | Date Assigned | Person | Due Date | Status |
| --- | --- | --- | --- | --- | --- |
| 1 | HPP – availability on outward-facing site | 1/8/2021 | Dr. Greenstone/CI |  | Pending |
| 2 | RCI Overview (with OVAC) | 2/5/2021 | Sarah Leder/Kristin Cunningham |  | Pending |