

azara2025

USER CONFERENCE APR 29–MAY 1 | BOSTON, MA



ISCCE
IMPLEMENTATION SCIENCE CENTER
FOR CANCER CONTROL EQUITY

Screen, Track, Act | Optimizing Cancer Screening and Follow-Up Practices

*Findings from the “Tools to Close Cancer Screening Gaps Pilot,”
Sustainment Activities & Future Directions*

Lynn N. Ibekwe-Agunanna, PhD, MPH
Stacey Coleman, MPH
Emma Knapp, MPH, PCMH-CCE



Speakers



Lynn N. Ibekwe-Agunanna PhD, MPH
Assistant Professor,
UT Southwestern Medical Center



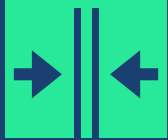
Stacey Coleman, MPH
Director of Quality Management,
Coastal Family Health Center

Today's Agenda



Project Background

Disparity Paradox



Tools To Close Screening Gaps Pilot

Overview & Findings



CHC Partner Perspective

Coastal Family Health Center



Next Steps

Looking Ahead & Future Planning

Project Background





Cancer screening **reduces** cancer morbidity and mortality.

Yet, ***disparities persist...***



The Disparity Paradox in Cancer Outcomes

*The more preventable and
treatable a cancer is...
the greater the disparities
become in survival.*

(Tehranifar et al. 2009; 2016)

The Role of Implementation Science

*Closing the gap between **what we know works**—evidence-based interventions, practices, clinical guidelines—and **what is used in practice**.*



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Tools To Close Screening Gaps Pilot



Tools to Close Cancer Screening Gaps



Goal: Develop & pilot test **new tools in Azara DRVS** that may help CHCs more easily track and address care caps for patients in need of **diagnostic follow-up of an abnormal cancer screening**.

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Tools to Close Cancer Screening Gaps



Goal: Develop & pilot test **new tools in Azara DRVS** that may help CHCs more easily track and address care caps for patients in need of **diagnostic follow-up of an abnormal cancer screening**.

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New DRVS Tools

Abnormal follow-up measures

Abnormal follow-up point-of-care alerts

Open lab orders measure

Screening and abnormal follow-up gap closure dashboard

Abnormal Follow-Up Measures* & Open Lab Orders Measure

Abnormal FIT Follow-Up*

Patients aged 45-75 who have had a positive FIT/FOBT test in the last 12 months and have received Colonoscopy referral or completed Colonoscopy within 6 months of the test.

Cervical Cytology Abnormal Follow- Up*

Patients who have received cervical cancer screening where the result was interpreted and indicated possible malignancy who have received the appropriate follow-up according to the results.

Abnormal Breast Cancer Screening Follow-Up*

Female patients aged 40-75 who have had a breast cancer screening in the last 12 months with a result indicating possible malignancy and have received the appropriate follow-up according to the results.

Open Lab Orders (Completed Lab Volume)

Labs that were completed in the measurement period. Track completed labs by lab type. Used to monitor fluctuations in lab data coming into DRVS. Includes FIT/FOBT, Pap, and HPV labs.

*** Requires additional mapping**
Contact your Client Success Manager for cost & information

Abnormal Cancer Screening Scorecard

- Monitor Performance
- Click Gap to identify patients who need outreach
- Set up automatic email subscription

Breast and Colorectal Cancer Screening and Abnormal Follow Up [?]

REPORT

PERIOD: TY March 2023 RENDERING PROVIDERS: All Rendering Provid...

REPORT CARE GAPS

GROUPING: No Grouping TARGETS: Primary Secondary Not Met REPORT FORMAT: Scorecard

MEASURE	RESULT	TARGET	NUMERATOR	DENOMINATOR	EXCLUSIONS	GAP	
① Breast Cancer Screening Ages 50-74 (CMS 125v10)	38.8%	63.0%	576	1,483	4	907	⬇
① Abnormal Breast Cancer Screening Follow-Up	56.3%	90.0%	18	32	1	14	⬇
① Colorectal Cancer Screening (CMS 130v10)	35.7%	66.0%	1,042	2,918	26	1,876	⬇
① Abnormal FIT Follow-up Initiated	43.5%	100.0%	20	46	0	26	⬇

Demo data

Patient Visit Planning (PVP) Report



- **User:** Care Team Members
- **Run Frequency:** Daily
- **Use Case:** Supports morning huddles to prepare for the day's patients

2:40 PM Monday, June 13, 2022

Visit Reason: Hospital f/u from TCN for bleeding esophageal varices. Admitted 6/7/22 and discharging 6/8/22. Apt made with nurse from TC

MOUSE, MICKEY

MRN:

DOB:

Sex at Birth: M

GI: MALE

SO: Straight

Phone:

Lang: English

Risk: Low (6)

Portal Access: N

PCP:

Payer: WORK COMP

CM: Unassigned

DIAGNOSES (3)

Cirrhosis Depression SUD No Depend

RISK FACTORS (4)

ASCVD Intermediate (17.67) BMI SMI
TOB

SDOH (0)

RAF GAPS DIAGNOSIS CATEGORIES (2)

Substance abuse Gastro

ALERT

Abnormal FIT Follow-Up

HIV

MESSAGE

Overdue

Missing

DATE

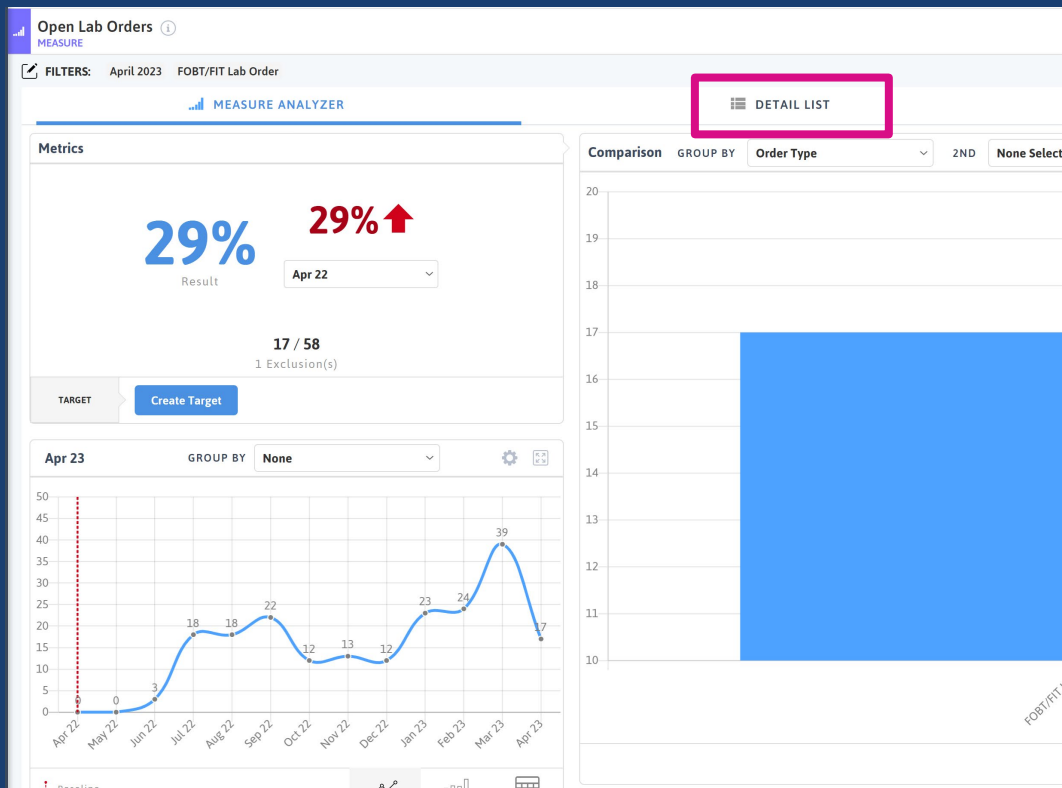
6/7/2022

RESULT

Fecal Occult Blood Test: Positive

Demo data

Open Lab Orders



Filter to FIT and FOBT Labs

- Use **Detail List** to outreach patients who have an open order & has not completed test

Pilot Gap Closure Dashboard



Data Check In Report - Colorectal Cancer

DASHBOARD

PERIOD

March 2024

RENDERING PROVIDERS

All Rendering Provid...

FILTER

+

Add Filter

Y

Update

Colorectal Cancer Screening and Abnormal Follow-Up

March 2024

MEASURE	RESULT	NUM	DENOM	EXCL	GAP
Colorectal Cancer Screening (CMS 130v12)	52.9%	200	378	6	178
Abnormal FIT Follow-up	42.9%	3	7	0	4

Open FIT Reminder APO Results

Q1 2024

MEASURE	RESULT	NUM	DENOM	EXCL	GAP
APO Successfully Reached Enrollees	70.8%	17	24	0	7
APO Enrollees Who Made an Appointment	35.3%	6	17	0	11
APO Enrollees Who Had an Encounter	5.9%	1	17	0	16
APO Care Gap Closure	41.2%	7	17	0	10

Colorectal Cancer Screening Reminder APO Results

Q1 2024

MEASURE	RESULT	NUM	DENOM	EXCL	GAP
APO Successfully Reached Enrollees	74.3%	411	553	0	142
APO Enrollees Who Made an Appointment	40.1%	165	411	0	246
APO Enrollees Who Had an Encounter	17.0%	70	411	0	341
APO Care Gap Closure	5.0%	33	660	0	627

Abnormal FIT Follow-Up by Ethnicity

March 2024

ETHNICITIES	RESULT	NUMERATOR	DENOMINATOR	GAP
Another Hispanic, Latino/a, or Spanish Origin	50%	1	2	1
Mexican, Mexican American, Chicano/a	0%	0	2	2
Not Hispanic, Latino/a, or Spanish Origin	67%	2	3	1

CRC Screening by Ethnicity

March 2024

ETHNICITIES	RESULT	NUMERATOR	DENOMINATOR	GAP
Another Hispanic, Latino/a, or Spanish Origin	44.9%	44	98	54
Cuban	66.7%	2	3	1
Mexican, Mexican American, Chicano/a	60.5%	52	86	34
Not Hispanic, Latino/a, or Spanish Origin	52.2%	95	182	87
Unreported/Choose Not to Disclose Ethnicity	77.8%	7	9	2

Abnormal FIT Follow -Up by Race (Not Hispanic/Latino)

March 2024

RACES AND ETHNICITIES	RESULT	NUMERATOR	DENOMINATOR	GAP
White/Not Hispanic, Latino/a, or Spanish Origin	67%	2	3	1

CRC Screening by Race (Not Hispanic/Latino)

March 2024

RACES AND ETHNICITIES	RESULT	NUMERATOR	DENOMINATOR	GAP
American Indian/Alaska Native/Not Hispanic, Latino/a, or Spanish Origin	0.0%	0	2	2
Black/African American/Not Hispanic, Latino/a, or Spanish Origin	35.7%	5	14	9
More than One Race/Not Hispanic, Latino/a, or Spanish Origin	0.0%	0	2	2
Other Asian/Not Hispanic, Latino/a, or Spanish Origin	54.5%	6	11	5
Unreported/Choose Not to Disclose Race/Not Hispanic, Latino/a, or Spanish Origin	0.0%	0	2	2
White/Not Hispanic, Latino/a, or Spanish Origin	55.6%	84	151	67

Demo data

A Closer Look at the Pilot Dashboard...



Colorectal Cancer Screening and Abnormal Follow Up					
March 2023					
MEASURE	RESULT	NUM	DENOM	EXCL	GAP
Colorectal Cancer Screening	39.5%	174	441	4	267
Abnormal FIT Follow-up	100.0%	2	2	0	0
Demo data					

A Closer Look at the Pilot Dashboard...

Colorectal Cancer Screening Reminder APO Results

Q1 2023

MEASURE	RESULT	NUM	DENOM	EXCL	GAP
APO Successfully Reached Enrollees	61.3%	511	834	0	323
APO Enrollees Who Made an Appointment	46.2%	236	511	0	275
APO Enrollees Who Had an Encounter	12.9%	66	511	0	445
APO Care Gap Closure	2.2%	13	599	0	586

Open FIT Reminder APO Results

Q1 2023

MEASURE	RESULT	NUM	DENOM	EXCL	GAP
APO Successfully Reached Enrollees	53.1%	76	143	0	67
APO Enrollees Who Made an Appointment	77.6%	59	76	0	17
APO Enrollees Who Had an Encounter	17.1%	13	76	0	63
APO Care Gap Closure	20.4%	11	54	0	43

Demo data

A Closer Look at the Pilot Dashboard...



Abnormal FIT Follow-Up by Race/Ethnicity

March 2023

RACES AND ETHNICITIES	RESULT	NUM	DENOM	GAP
White/Hispanic/Latino	100%	1	1	0
White/Non-Hispanic/Latino	100%	1	1	0

Abnormal FIT Follow-Up by Financial Class

March 2023

UDS FINANCIAL CLASSES	RESULT	NUM	DENOM	GAP
Medicaid	100%	1	1	0
Private Insurance	100%	1	1	0

Abnormal FIT Follow-Up by Language

March 2023

LANGUAGES	RESULT	NUM	DENOM	GAP
English	100%	2	2	0

CRC Screening by Race/Ethnicity

March 2023

RACES AND ETHNICITIES	RESULT	NUM	DENOM	GAP
American Indian/Alaska Native/Hispanic/Latino	0.0%	0	1	1
American Indian/Alaska Native/Non-Hispanic/Latino	100.0%	2	2	0
Asian/Non-Hispanic/Latino	44.4%	4	9	5
Black/African American/Non-Hispanic/Latino	37.5%	3	8	5
More than One Race/Hispanic/Latino	62.5%	15	24	9
More than One Race/Non-Hispanic/Latino	20.0%	1	5	4
Native Hawaiian/Non-Hispanic/Latino	100.0%	1	1	0
Unmapped/Hispanic/Latino	0.0%	0	6	6
Unmapped/Non-Hispanic/Latino	0.0%	0	18	18
Unreported/Refused to Report Race/Hispanic/Latino	60.0%	18	30	12
Unreported/Refused to Report Race/Non-Hispanic/Latino	66.7%	2	3	1
Unreported/Refused to Report Race/Unreported/Refused to Report Ethnicity	33.3%	1	3	2

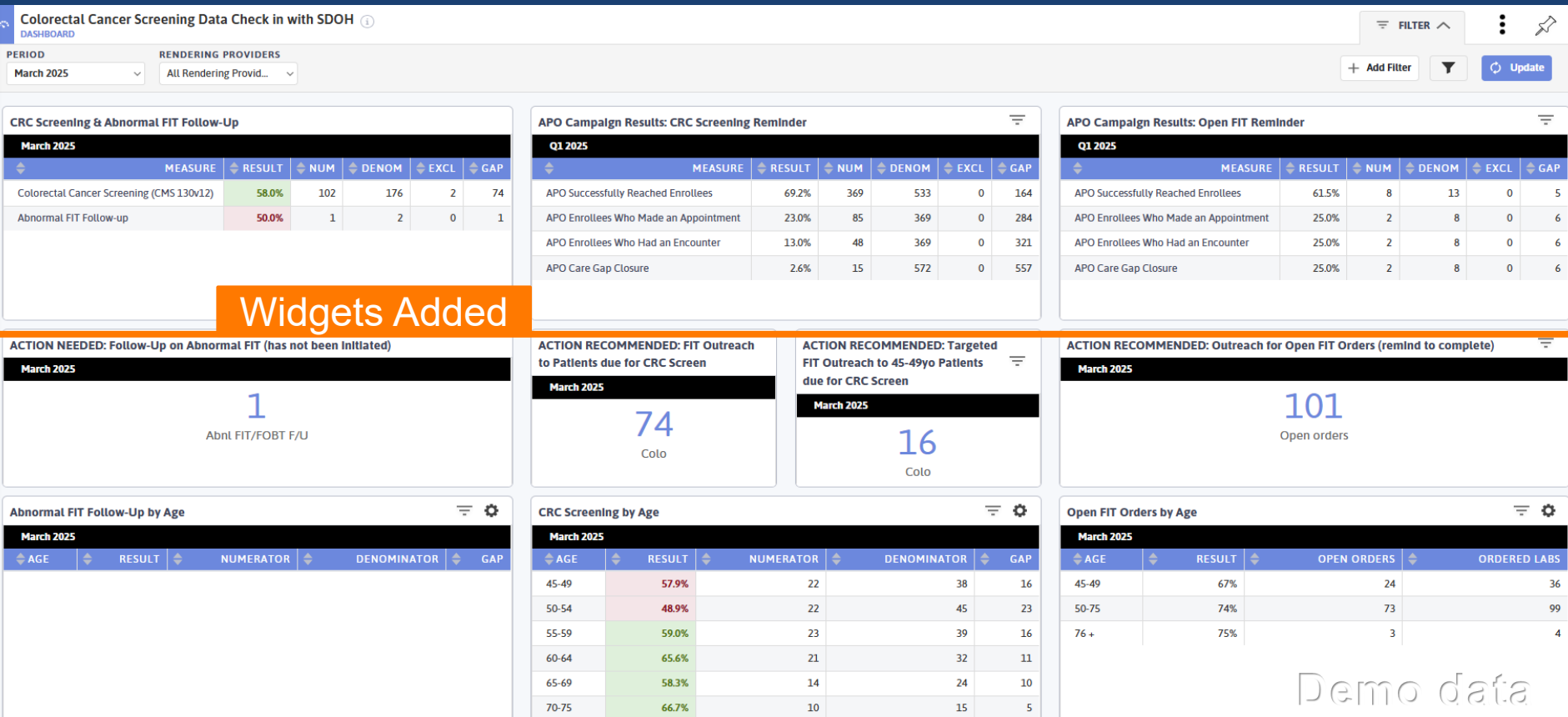
Open FIT/FOBT Orders by Race

March 2023

RACES	RESULT	NUM	DENOM
American Indian/Alaska Native	100%	2	2
Asian	92%	11	12
Black/African American	83%	10	12
More than One Race	81%	13	16
Unreported/Refused to Report Race	71%	12	17
White	77%	13	17

Demo data

Updated Dashboard + SDOH



Widgets Modified



Abnormal FIT Follow-Up by Ethnicity

March 2025				
ETHNICITIES	RESULT	NUMERATOR	DENOMINATOR	GAP
Another Hispanic, Latino/a, or Spanish Origin	100%	1	1	0
Cuban	0%	0	1	1

CRC Screening by Ethnicity

March 2025				
ETHNICITIES	RESULT	NUMERATOR	DENOMINATOR	GAP
Another Hispanic, Latino/a, or Spanish Origin	55.2%	32	58	26
Cuban	75.0%	3	4	1
Mexican, Mexican American, Chicano/a	56.8%	21	37	16
Not Hispanic, Latino/a, or Spanish Origin	62.9%	56	89	33

Open FIT Orders by Ethnicity

March 2025			
ETHNICITIES	RESULT	OPEN ORDERS	ORDERED LABS
Another Hispanic, Latino/a, or Spanish Origin	71%	20	28
Cuban	100%	2	2
Mexican, Mexican American, Chicano/a	54%	7	13
Not Hispanic, Latino/a, or Spanish Origin	74%	72	97

Abnormal FIT Follow-Up by Race (Not Hispanic/Latino)

March 2025				
RACES AND ETHNICITIES	RESULT	NUMERATOR	DENOMINATOR	GAP

CRC Screening by Race (Not Hispanic/Latino)

March 2025				
RACES AND ETHNICITIES	RESULT	NUMERATOR	DENOMINATOR	GAP
American Indian/Alaska Native/Not Hispanic, Latino/a, or Spanish Origin	100.0%	2	2	0
Black/African American/Not Hispanic, Latino/a, or Spanish Origin	45.5%	5	11	6
Other Asian/Not Hispanic, Latino/a, or Spanish Origin	50.0%	1	2	1
Unreported/Choose Not to Disclose Race/Not Hispanic, Latino/a, or Spanish Origin	100.0%	2	2	0
White/Not Hispanic, Latino/a, or Spanish Origin	63.9%	46	72	26

Open FIT Orders by Race (Not Hispanic/Latino)

March 2025			
RACES AND ETHNICITIES	RESULT	OPEN ORDERS	ORDERED LABS
Black/African American/Not Hispanic, Latino/a, or Spanish Origin	100%	3	3
Other Asian/Not Hispanic, Latino/a, or Spanish Origin	100%	4	4
White/Not Hispanic, Latino/a, or Spanish Origin	72%	65	90

Abnormal FIT Follow-Up by Financial Class

March 2025				
UDS FINANCIAL CLASSES	RESULT	NUMERATOR	DENOMINATOR	GAP
Dual Eligible Medicare and Medicaid	0%	0	1	1
Medicaid	100%	1	1	0
Medicare	0%	0	1	1

CRC Screening by Financial Class

March 2025				
UDS FINANCIAL CLASSES	RESULT	NUMERATOR	DENOMINATOR	GAP
Dual Eligible Medicare and Medicaid	76.2%	16	21	5
Medicaid	54.0%	27	50	23
Medicare	76.9%	30	39	9

Open FIT Orders by Financial Class

March 2025			
UDS FINANCIAL CLASSES	RESULT	OPEN ORDERS	ORDERED LABS
Dual Eligible Medicare and Medicaid	50%	1	2
Medicaid	100%	4	4
Medicare	76.9%	1	2

Demo data



Abnormal FIT Follow-Up by Language



March 2025				
LANGUAGES	RESULT	NUMERATOR	DENOMINATOR	GAP
Spanish	50%	1	2	1

CRC Screening by Language



March 2025				
LANGUAGES	RESULT	NUMERATOR	DENOMINATOR	GAP
Dari	0.0%	0	1	1
English	62.8%	59	94	35
French/Creole	0.0%	0	1	1
Kinyarwanda	0.0%	0	1	1
Spanish	54.3%	51	94	43
Vietnamese	100.0%	1	1	0
Yoruba	100.0%	1	1	0

Open FIT Orders by Language



March 2025			
LANGUAGES	RESULT	OPEN ORDERS	ORDERED LABS
English	74%	75	102
French/Creole	100%	1	1
Mandarin	100%	1	1
Spanish	67%	24	36

Widgets Added

Abnormal FIT Follow-Up by SDOH (with at least 1 SDOH)



March 2025				
SDOH	RESULT	NUMERATOR	DENOMINATOR	GAP
FPL<200	100%	1	1	0
HISP/LAT	50%	1	2	1
LANGUAGE	50%	1	2	1
RACE	0%	0	1	1

CRC Screening by SDOH (with at least 1 SDOH)



March 2025				
SDOH	RESULT	NUMERATOR	DENOMINATOR	GAP
FPL<200	58.2%	82	141	59
HISP/LAT	56.0%	56	100	44
HOMELESS	44.4%	4	9	5
INSURANCE	30.0%	9	30	21
ISOLATION	20.0%	1	5	4
LANGUAGE	53.5%	53	99	46
RACE	50.0%	20	40	20

Open FIT Orders by SDOH (with at least 1 SDOH)



March 2025			
SDOH	RESULT	OPEN ORDERS	ORDERED LABS
FPL<200	62%	24	39
HISP/LAT	65%	24	37
INSURANCE	57%	8	14
ISOLATION	100%	1	1
LANGUAGE	67%	24	36
RACE	71%	5	7

Demo data

Tools to Close Cancer Screening Gaps



Goal: Develop & pilot test **new tools in DRVS** that may help CHCs more easily track and address care caps for patients in need of **diagnostic follow-up of an abnormal cancer screening**.

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New DRVS Tools

Abnormal follow-up measures

Abnormal follow-up point-of-care alerts

Open lab orders measure

Screening and abnormal follow-up gap closure dashboard

Community Health Center Partners

(Local Implementation Teams)



Biloxi,
Mississippi



Appleton,
Wisconsin



Hartsville, South
Carolina



Tools to Close Cancer Screening Gaps



Goal: Develop & pilot test **new tools in DRVS** that may help CHCs more easily track and address care gaps for patients in need of **diagnostic follow-up of an abnormal cancer screening**.

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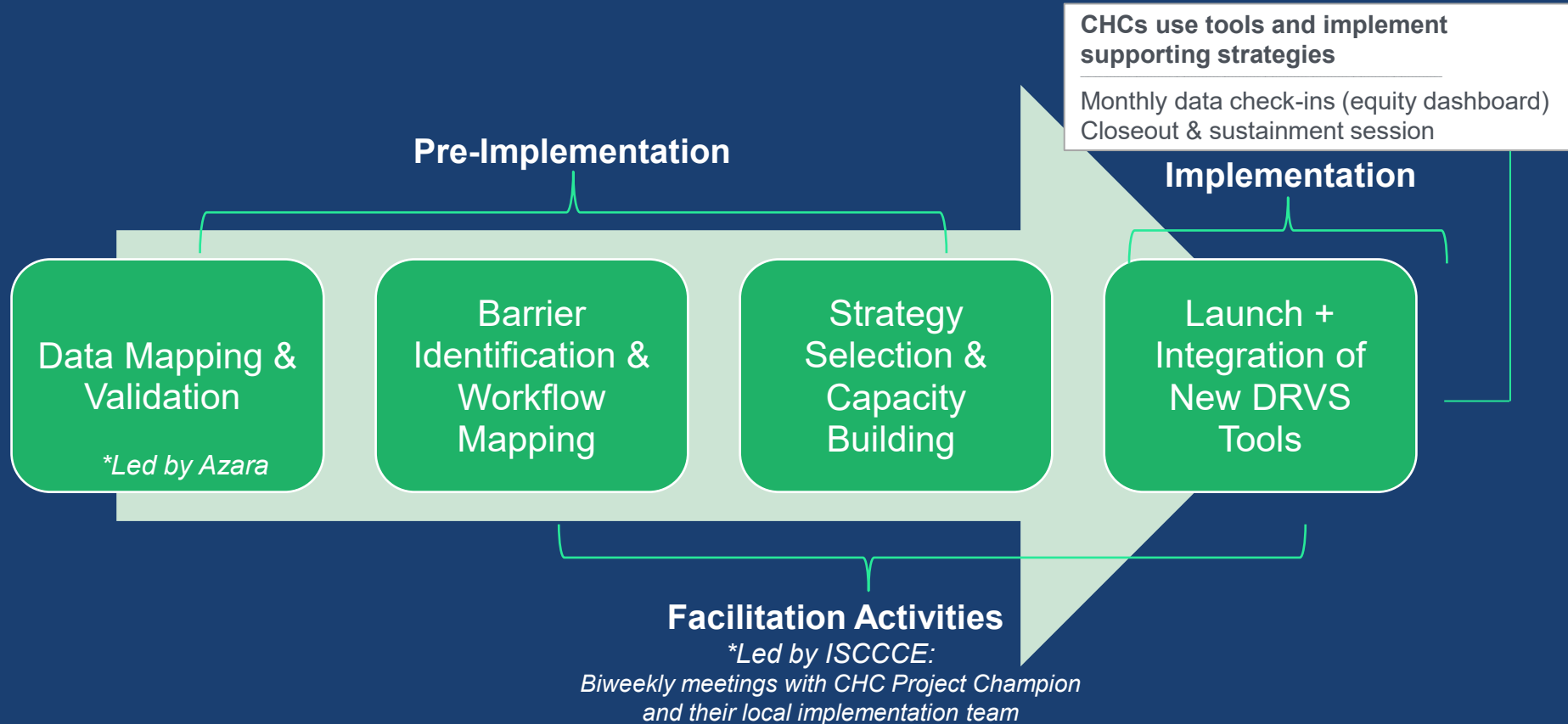
Screening and abnormal follow-up gap closure dashboard



External Practice Facilitation

(coaching and support)

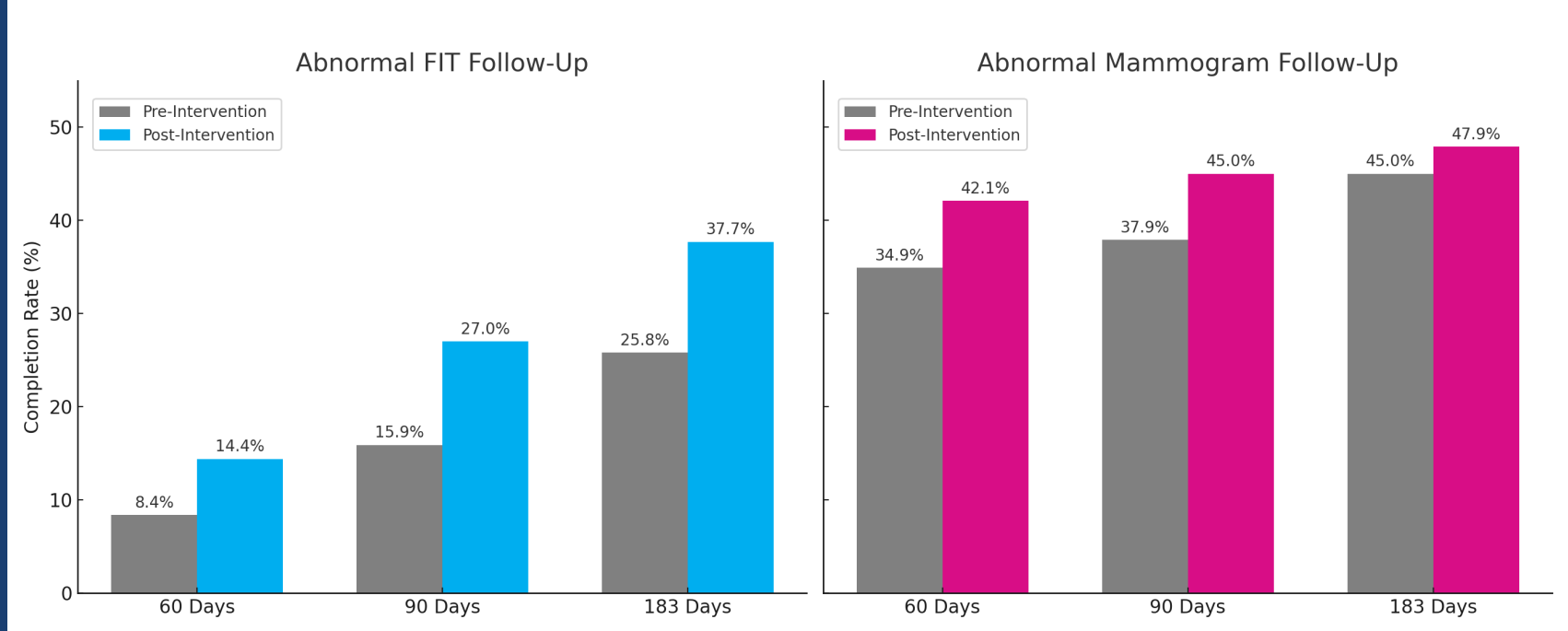
The Implementation Journey



Findings | Clinical Outcomes

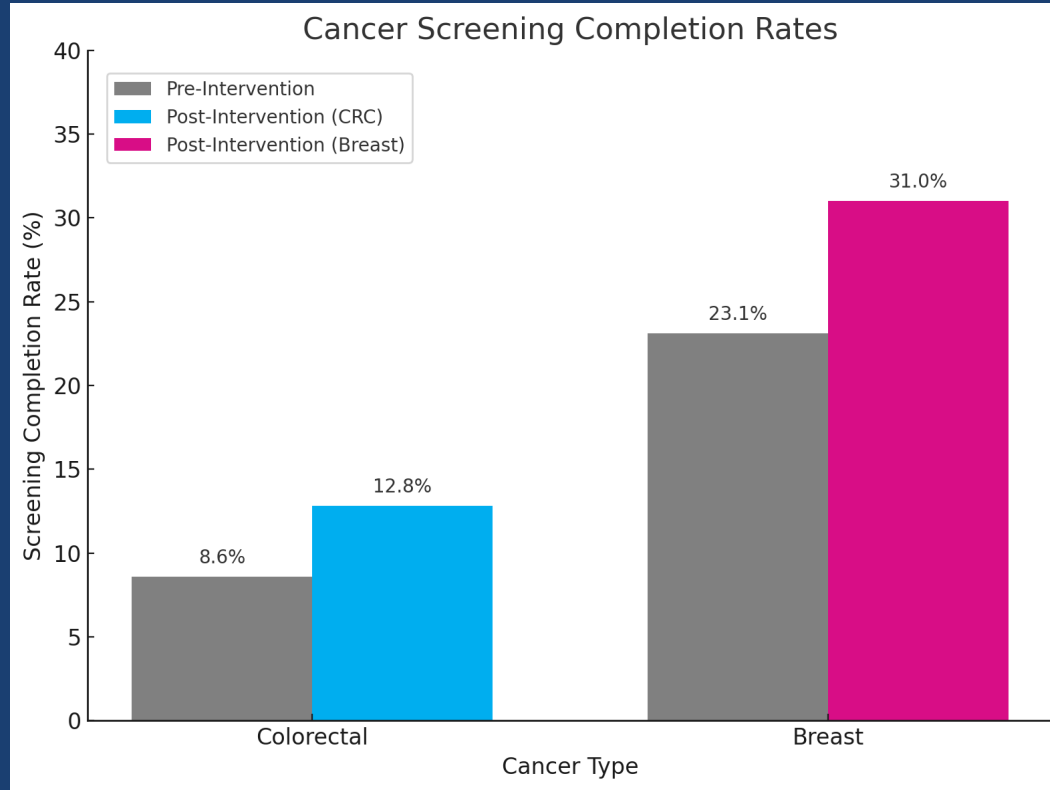


Diagnostic Follow-Up Completion by Screening Type and Timepoint



Diagnostic follow-up for both screening types **improved significantly** at all three timepoints.

Findings | Clinical Outcomes



Screening completion for both cancer sites **improved significantly.**

Findings | Implementation Outcomes



Online Survey

Tools and facilitation: Highly acceptable, appropriate, and feasible.

Qualitative Interviews



- **Tools:** Well-designed, easy to use, and an advantage over existing tools/previous practices.
 - *Gap closure dashboard highlighted as an important value-add*
- **Facilitation:** Well-thought-out, structured, and designed; not complicated; and supported tool integration.

CHC Partnership



CHC Partner Perspective

Experiences

Sustainment

Next Steps



Coastal Family Health Center (CFHC)



FQHC in South Mississippi

- **13 stand-alone clinics**, 1 mobile unit, 5 pharmacies, & 23 schools
- **36,000+ patients** served annually; over **110,000 visits**

Size



Family and internal medicine, pediatrics, psychiatry/behavioral health, lab, radiology (including 3D mammography), & social services

Specialties



Ryan White and Healthcare for the Homeless Programs

Special Populations



Patient-Centered Medical Home & Joint Commission Accredited for Ambulatory & Behavioral Health

CFHC | Overcoming Challenges in Cancer Screening & Follow-Up



CFHC & Clinical Quality Measure

- Responsible for breast, colorectal and cervical cancer screening.

Challenges in Cancer Screening & Follow-Up

- Struggled to improve cancer screening and abnormal follow-up rates.

DRVS Implementation (2019)

- Initial improvement in screening rates, but still not maximized for significant outcomes.

Measure	Goal	2020 Outcome
Colorectal Cancer Screening	30%	21.31%
Breast Cancer Screening	50%	26.57%

Partnership with ISCCCE & Azara



Tools to Close Screening Gaps Pilot

- Collaboration with ISCCCE & Azara provided knowledge & resources.
- Helped optimize Azara for colorectal & breast cancer screening and follow-up.



Key Project Support

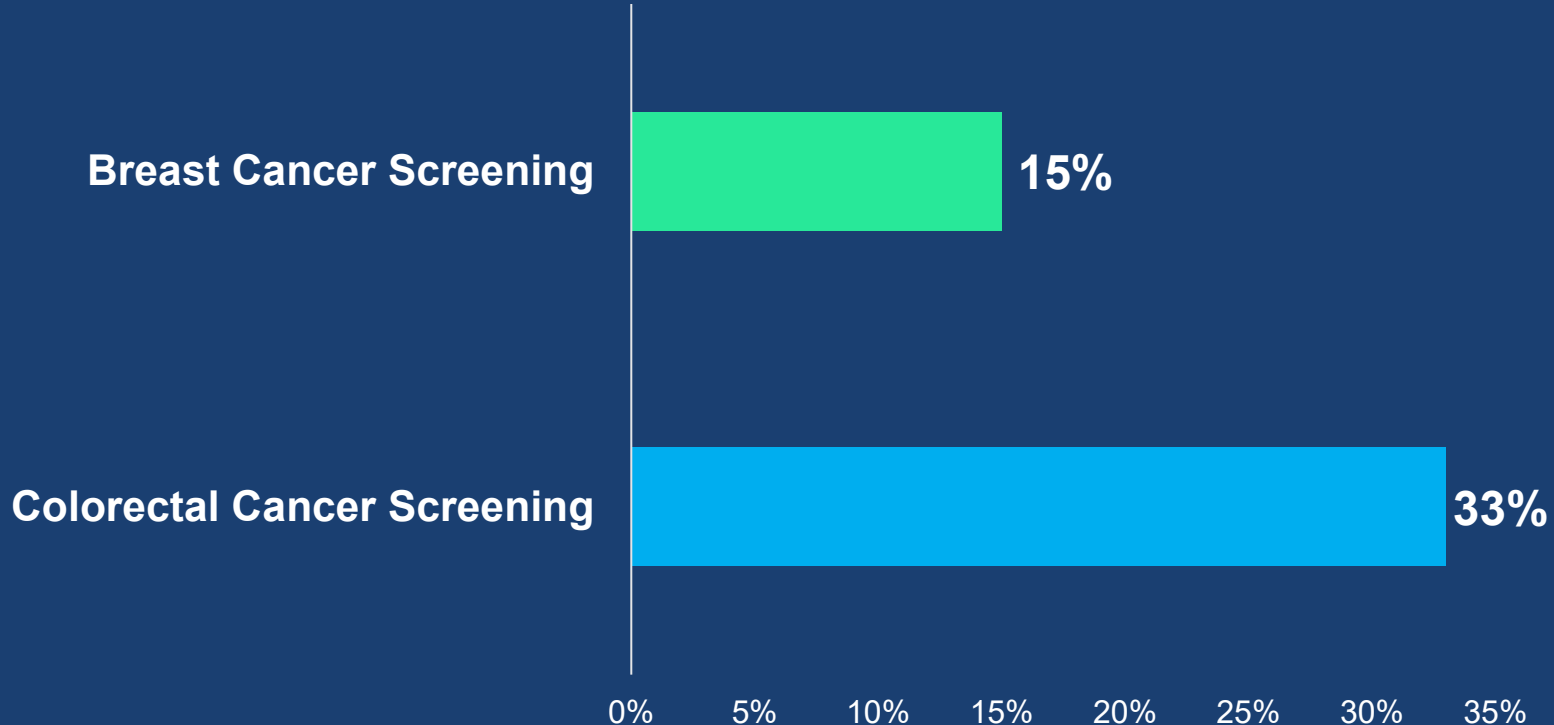
- Developed dashboards, scorecards & alerts for tracking.
- Mapped workflows for real-world clinical integration.
- Engaged provider/nurse teams to enhance patient care.
- Leveraged APO for outreach & FIT FOBT follow-ups.
- Designed PDSA for FIT FOBT mail-back process with CHWs.



CFHC | Project Successes



Percentage Increase



Next Steps



Next Steps for CFHC



Enhancing Colorectal Cancer Screening

- Integrated Cologuard into NextGen for improved screening rates.

Strengthening Data Accuracy

- Implemented ongoing data hygiene program.
- Leveraging Azara's data validation tools with HCCN/PCA support.

Measure	Goal	2020 Outcome	2024 Outcome
Colorectal Cancer Screening	30%	21.31%	27.1%
Breast Cancer Screening	50%	26.57%	47.7%

Next Steps for ISCCCE



SCALE UP

Abnormal Follow-up Suite of Tools
Available as Add-On



ONGOING RESEARCH & COLLABORATION

Active:

Optimized Cancer Screening & Follow-up Tools
+
New Tobacco Cessation Tools
+
Community Engagement Strategies

Pending:

CRC Screening & Follow-up Tools
+
Patient Outreach Strategies (Optimized APO)

Thank You for Your Attention!

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For questions about Azara & DRVS please contact:

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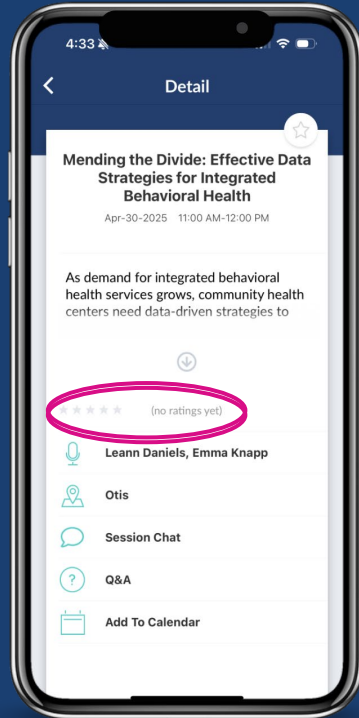
Questions?



We want to hear from you!

Click on the session from your agenda in the conference app.

Click the stars in the center of your screen to rate and provide feedback.



Quick and Easy



Rate the session
and the
speaker(s)



Provide brief
feedback or ideas



Help us continue
to improve

Achieve, Celebrate, Engage!



ACE'd it? Share your DRVS success story and become an Azara ACE!

Show your organization has used DRVS to **A**chieve measurable results, **C**elebrate improvement in patient health outcomes, and effectively **E**ngage care teams and/or patients. Stories should showcase how DRVS helped your organization overcome a challenge, the tools and solutions used to drive improvement and details of the successes that resulted from your initiatives. ACEs should be able to provide examples that quantify quality improvement, cost savings, operational efficiency or patient health improvement.

Benefits:

- Azara will help tell your story and provide a client-branded version for your use
- Potential to create a 2-4 minute video or hour-long Azara-hosted webinar
- Potential to be featured at next year's Azara User Conference
- Win Azara swag!

Submit your success story by completing the form [at this link](#).

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ACE Program



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USER CONFERENCE

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Thanks for attending!

