



Measuring the impact of a Physician-led collaborative on the quality of prostate cancer care: 7 years of making MUSIC

Mahin Mirza*; Susan Linsell¹; Ji Qi¹; Richard Sarle²; Arvin George¹; Khurshid Ghani¹; James Montie¹, and David Miller¹
¹Ann Arbor; ²Lansing

Sources of Funding: Blue Cross and Blue Shield of Michigan

Abstract no. 20-5593

BACKGROUND

- The Michigan Urological Surgery Improvement Collaborative (MUSIC) was established in 2012 with the aim to improve the quality of urologic care for patients in Michigan with an initial focus on prostate cancer (PCa).

OBJECTIVE

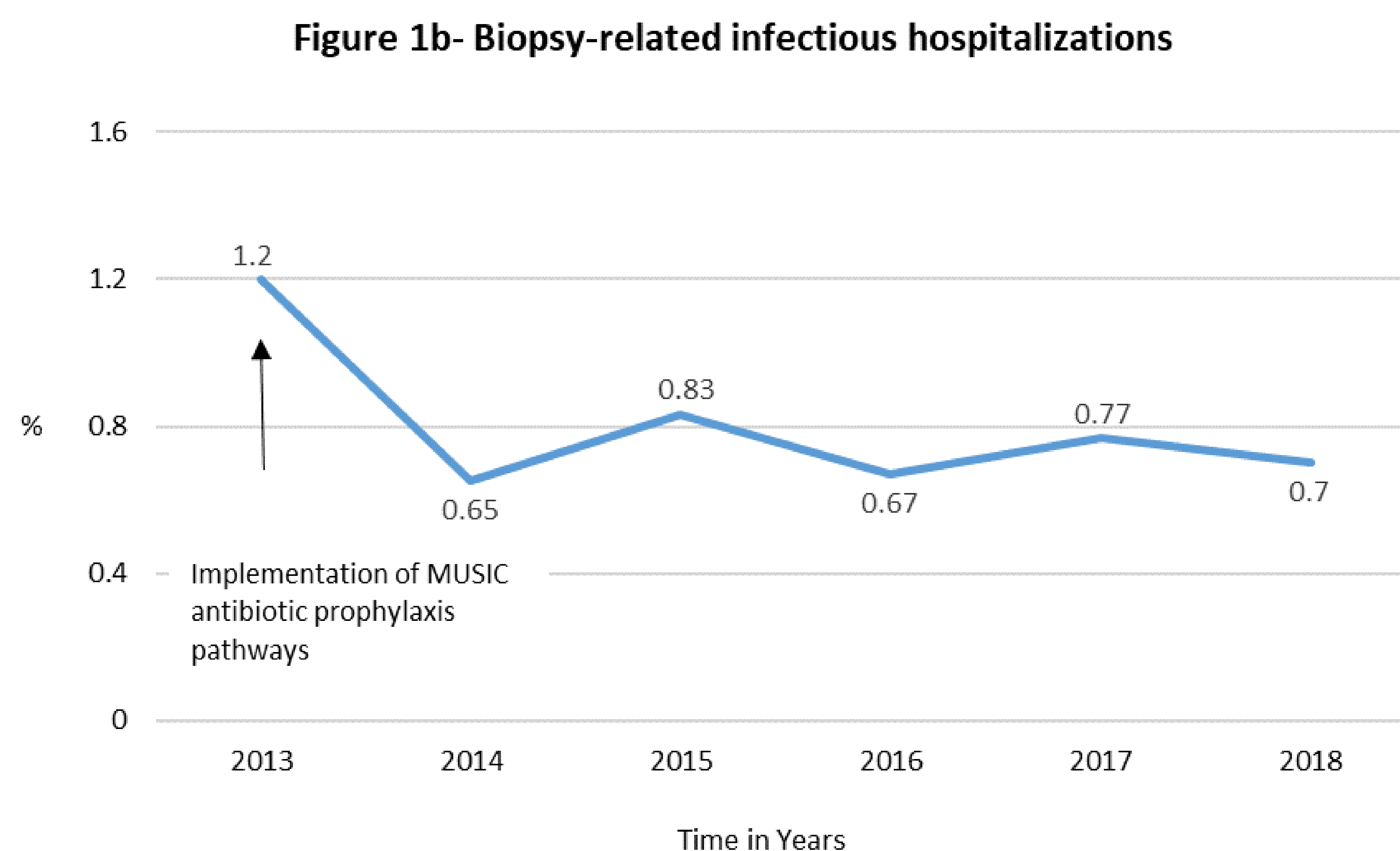
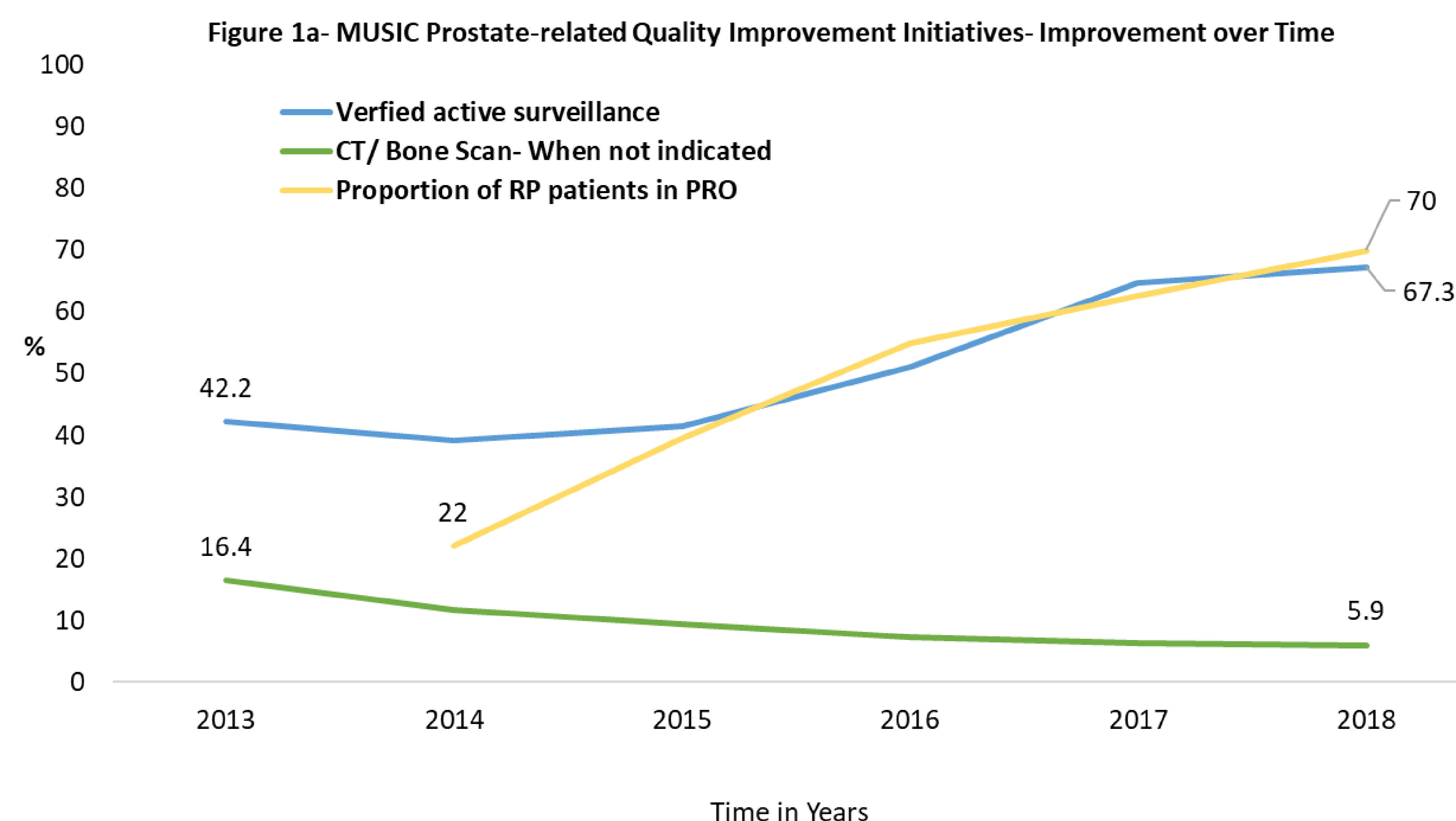
- We sought to evaluate the impact of MUSIC's prostate-related QI initiatives.

METHODS

- MUSIC is comprised of > 250 urologists representing 90% of the urologists in Michigan.
- Prospective data collection began in 2012 with more than 70,000 patients with, or at risk for, PCa in the registry to date.
- Efforts to improve PCa care including optimizing the utilization of radiographic staging for men with newly diagnosed PCa, enhancing treatment appropriateness for favorable risk PCa, establishing the MUSIC patient reported outcomes (PRO) program, an electronic infrastructure for measuring and improving functional outcomes after radical prostatectomy (RP) and reducing prostate biopsy-related infectious hospitalizations.

RESULTS

- The use of radiographic staging (i.e., CT scan and/or bone scan) for non-indicated patients (i.e., PSA \leq 20 or Gleason < 8 or Clinical T stage < cT3) decreased from 16.4% to 5.9% ($p < 0.001$). [Figure 1a]
- For favorable-risk PCa patients, verified active surveillance increased from 42.2% to 67.3% ($p < 0.001$), equivalent to 1600 patients avoiding initial definitive treatment where its benefits are less apparent. [Figure 1a]
- The proportion of RP patients enrolled in PRO from 2014-2018 increased from 22.0% to 70.0% ($p < 0.001$). [Figure 1a]
- Since initiation of MUSIC's quality improvement efforts, the overall rate of prostate biopsy-related infectious hospitalizations decreased from 1.2% pre-intervention to 0.7% post-intervention ($p < 0.001$). [Figure 1b]



CONCLUSIONS

- By collecting credible data, sharing best practices and implementing system-level changes and modifications in clinical behavior, MUSIC is enhancing the quality, value, and outcomes of care for PCa patients in Michigan.

ACKNOWLEDGEMENTS

- We would like to acknowledge the significant contribution of the MUSIC urologists, administrators and data abstractors in each participating practice. In addition, we would like to acknowledge the support provided by the Value Partnerships program at Blue Cross Blue Shield of Michigan.