

# Alberta Coding Access Targets for Endoscopy (ACATs-E)



October 4, 2022

# Objectives



1) What is ACATs-E and the Advantages?



2) How is ACATs-E different than ACATS?



3) What is the process



4) C-GRS and ACATs-E



5) Support and Next steps

# Intended audience:

Audience	Action
Endoscopy Providers	<b>Do:</b> Use ACATs-E codes, Decision to Treat, Scheduling Urgency <b>Know:</b> <ul style="list-style-type: none"><li>• Connection to C-GRS</li><li>• Waitlist management system and reporting coming soon</li></ul>
Clerical, Scheduling, MOA staff	<b>Do:</b> Use ACATs-E codes, Decision to Treat, Scheduling Urgency <b>Know:</b> Waitlist management system coming soon (Heatmap)
Operational Leadership Team	<b>Know:</b> <ul style="list-style-type: none"><li>• New ACATs-E codes</li><li>• Connection to C-GRS</li><li>• Waitlist management system and reporting coming soon</li></ul>

# What is ACATs-E?

**ACATs-E** stands for: **A**lberta **C**oding **A**ccess **T**argets for **E**ndoscopy

ACATs-E is:

- A waitlist management system for endoscopy based on high-quality data
- Patient-focused and endoscopy-specific
- Allows endoscopy providers to utilize a variety of reports and tools to aide in decision-making
- Supports the goal of right patient, for the right procedure, at the right time

ACATs-E codes are NOT:

- ICD-10-CA codes
  - Visit diagnoses
  - Billing codes or Service codes
-

# Code Differences:

ACATs-E codes are separate from ICD-10-CA codes and billing/service codes:

Code Type:	ACATs-E Codes	ICD-10-CA Codes	Billing or Service Codes
<b>Purpose</b>	Provide a waitlist management system for endoscopy procedure through standardized diagnosis-based codes	Classify diseases, injuries, and causes of health, as well as external causes of injury and poisoning	Record services provided for billing through Connect Care or to generate a Billing Code report for third-party billing
<b>When and Where is code entered</b>	Within Endoscopy Procedure Orders or Ancillary Orders when entering endoscopy procedure order	Within Visit Diagnoses during an outpatient clinic visit  Within Diagnosis field in Ancillary Orders when entering and scheduling procedure	Within Service Code Navigator at completion of procedure or clinic visit

# Advantages of ACATs-E?

ACATs-E stands for: **A**lberta **C**oding **A**ccess **T**argets for **E**ndoscopy

There are many reasons to welcome and implement ACATs-E:

- Improved patient experience
- Equitable access to endoscopy procedures
- Waitlist management tools for endoscopists
- Standardization of wait time targets
- Accurate data for analyzing endoscopy indications, wait lists and wait times
- To capture endoscopy specific data (separate from surgery)
- Quality Improvement initiatives
- Clarity & accountability around patient wait listing and scheduling processes
- Assist with COVID-19 recovery plan through data capture and analysis

## How is ACATs-E different from ACATS?

- **ACATs-E** is a project that has been branched from **ACATS: Alberta Coding Access Targets for Surgery**. **ACATS** is used in Op Time for surgical procedures.
- **ACATs-E** was developed with a focus on the need for improved access to Endoscopy procedure for Albertans. **ACATs-E** is used within Lumens and is waitlist management system for endoscopy in Alberta.
- **Key coding differences:**
  - Subcategories are clearly defined:
    - Diagnostic
    - Therapeutic
    - Surveillance



### Endoscopy

**ACATs-E**  
(Alberta Coding Access  
Targets for Endoscopy)

Diagnosis Description	Cancer Subcategory	Diagnostic Case Type		Therapeutic Case Type		Surveillance Case Type	
All scopes within 24 or 72 hours get the following generalized codes. We are able to report on patient cohorts within this group using other attributes.							
SCOPE WITHIN 24 HOURS	NONE OR BENIGN	ED01	24 Hours	ET01	24 Hours		
SCOPE WITHIN 72 HOURS	NONE OR BENIGN	ED02	72 Hours	ET02	72 Hours		
ABDOMINAL PAIN (USE ONLY IF NO BETTER FIT WITH OTHER ENDOSCOPY CODES)	NONE OR BENIGN	ED03	12 weeks				
ABNORMAL OR EQUIVOCAL RADIOLOGIC IMAGING	CANCER SUSPECTED	ED04	2 weeks				
ABNORMAL OR EQUIVOCAL RADIOLOGIC IMAGING	NONE OR BENIGN	ED05	8 weeks				
AMPULLARY MASS OR STENOSIS	CANCER SUSPECTED	ED06	2 weeks	ET06	2 weeks		
AMPULLARY POLYP	NONE OR BENIGN			ET07	4 weeks		
ANASTOMOTIC OR LOCAL RECURRENCE ASSESSMENT	NONE OR BENIGN					ES08	26 weeks
BARRETT'S SURVEILLANCE	NONE OR BENIGN					ES09	26 weeks

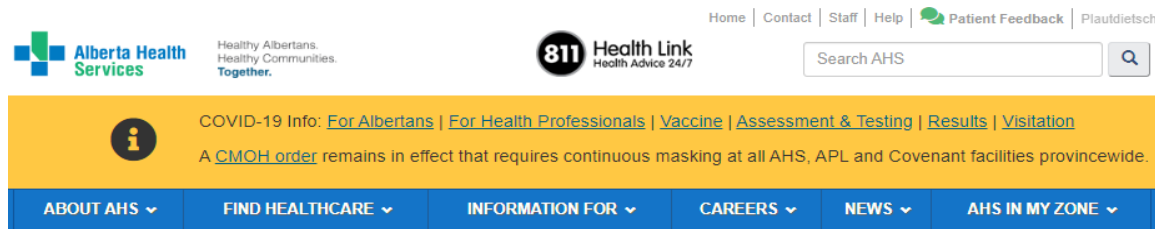
# ACATs-E and ACATS differences:

	ACATs-E	ACATS
<b>Naming</b>	Alberta Coding Access Targets for Endoscopy	Alberta Coding Access Targets for Surgery
<b>Objective</b>	ACATs-E is to improve access to care for Endoscopy Patients, create standardization to booking Endoscopy patients by using a diagnosis-based waitlist management tool created for Endoscopists by Endoscopists	ACATS is an Alberta-developed, standardized coding system to improve decision making process for when patients are to be treated prioritizing the right patient at the right time for the right surgery
<b>Codes</b>	ACATs-E codes with Diagnosis Matrix for Endoscopy ONLY  Apply to endoscopy procedure appointment within Lumens	ACATS Diagnosis Based codes for Surgery  Apply to surgical case requests within Op Time
<b>Reports</b>	(Current) Endoscopist Waitlist Reports, Endoscopist detail summary (Currently ACATS reports) (Future): ACATs-E Heat Map	Surgical Waitlist reports, Surgical Detail Summary, Service Detail Summary, and tableau reporting.
<b>IT</b>	Lumens- Connect Care	Op time- Connect Care



# Access to ACATs-E codes

- ACATs-E Codes can currently be found on the ACATs-E website: [Alberta Coding Access Targets for Endoscopy \(ACATs-E\)](#)



Home > About AHS > Strategic Clinical Networks > Digestive Health SCN > Alberta Coding Access Targets for Endoscopy (ACATs-E)

## Alberta Coding Access Targets for Endoscopy (ACATs-E)

Digestive Health Strategic Clinical Network™

Alberta Coding Access Targets for Endoscopy (ACATs-E) is a wait list management system for endoscopy based on high-quality data. ACATs-E uses a set of provincially standardized, diagnosis-based codes designed by Alberta endoscopists.

The patient-focused and endoscopy-specific foundation of ACATs-E allows endoscopy providers to use a variety of reports and tools to aid decision-making, supporting our common goal of seeing the right patient, for the right procedure, at the right time.

ACATs-E builds on the work of the Alberta Coding and Access Targets for Surgery (ACATS) to ensure specific endoscopy needs are met.

ACATs-E is governed by the Digestive Health Strategic Clinical Network, under the direction of the Provincial Endoscopy Operations Committee (PEOC). ACATs-E aligns with provincial waitlist management policies, AHS policies, and College of Physicians and Surgeons of Alberta waitlist policies.

**Questions or code change requests?**  
Contact the project team at [ACATsEndoscopy@ahs.ca](mailto:ACATsEndoscopy@ahs.ca)

### Quick Reference

- [ACATs-E Codes](#)
- [FAQs](#)

### Learn More

- [ACATs-E: Improving access to endoscopy for Albertans](#) (SCNergy, Summer 2022)

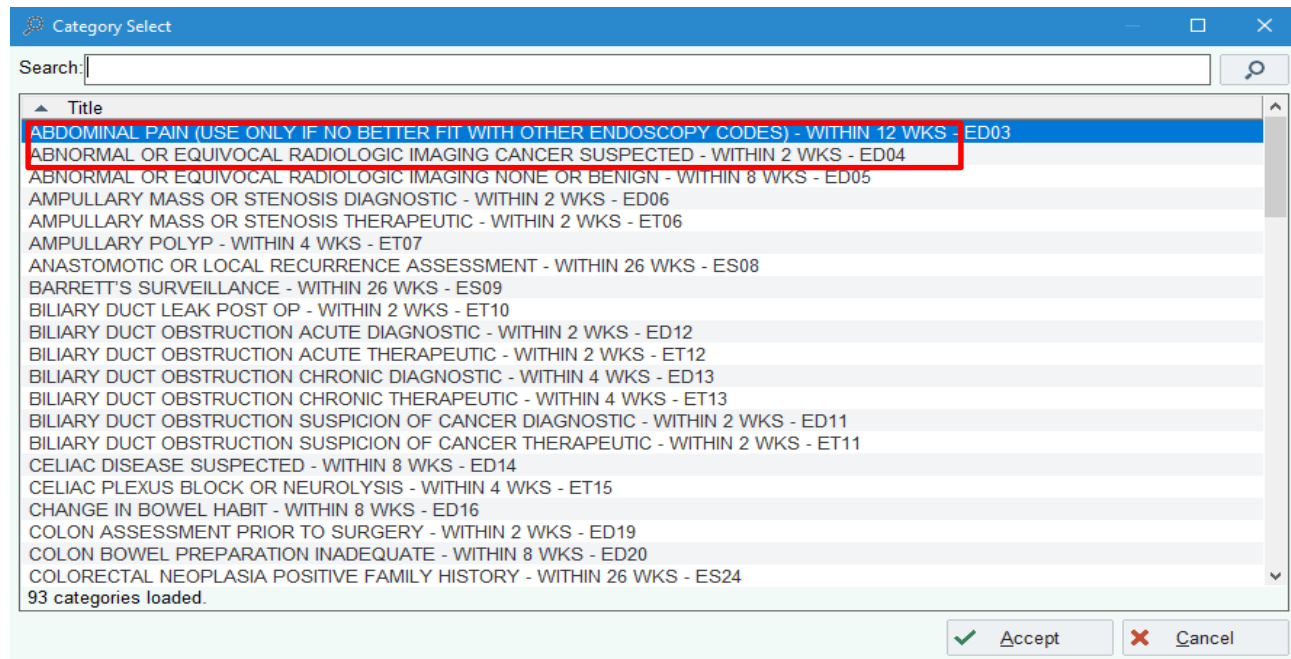
- They can also be found on this pdf document: [ACATs-E Codes Document](#)

# Lumens: What is the process?

- Within Connect Care, endoscopists and/or MOA or clerical staff will enter/document:
  - ACATs-E code\*
  - Decision To Treat (DTT) date
  - Scheduling Urgency to match ACATs-E suggested timeframe

# What is the process?

- Minimal workload impact to sites already entering ACATs-E codes
- ACATs-E code fields are built into Connect Care Endoscopy order entry and Ancillary Orders
- ACATs-E codes have been updated for ease of use within Lumens



# Demo in Connect Care:

\* [Play video](#) to see endoscopy Procedure Order and ACATs-E code placement demo


The screenshot displays the Epic Connect Care interface for a patient named Bethany Achilles. The interface is divided into several sections:

- Header:** Shows the patient's name, 'Chart Review', and 'Prep for Procedure' tabs.
- Left Sidebar:** Contains patient information for Bethany Achilles, including her age (44 y.o.), MRN (1000269744), and various clinical details like pregnancy status and allergies.
- Main Content Area:**
  - Future Cases:** A section for reviewing future cases.
  - Review Orders:** A section for reviewing orders, with a link to 'Click Here to Modify Signed and Held Orders'.
  - Orders:** A section for placing orders, order sets, or pathways. It includes a search bar, a '+ New' button, and a list of order sets and pathways, such as 'Endoscopy Preprocedure Adult (My Version - EGD/Colon Outpatient)'. A large play button is overlaid on this section.
  - Write H&P:** A section for writing history and physicals, with a '+ Create Note' button and a note that 'No notes of this type filed'.
  - Consult Note:** A section for writing consult notes, with a '+ Create Note' button and a note that 'No Consult Notes have been filed for this patient within the last 24 hours'.
  - Consents:** A section for managing consents, with a '+ Add' button and a list of consent types, including 'Consent Surgery/Invasive Procedure', 'Consent Treatment Plan-Procedure', 'Consent Addendum', 'Consent Emergency Healthcare Exception', 'Consent Blood Testing - Blood Borne Viruses', 'Consent Organ/ Tissue Donation', 'Consent Mental Health Act', 'Consent Withdrawal/Refusal', and 'HIM ROI Authorization Consent'.
- Bottom Bar:** Includes buttons for '+ ADD ORDER', '+ ADD DX (0)', 'PRINT AVS', and 'SIGN VISIT'.


# ACATs-E

ACATs-E stands for: Alberta Coding Access Targets for Endoscopy

- Heatmap waitlist management tool on Tableau
- Visual cue of waitlist and % out of window



**Physician Scheduling Tool**  
*Alberta Coding Access Targets for Endoscopy (ACATs-E)©*



Select Scheduling Date (MM/DD/YYYY)  
6/6/2022

Physician Name: Groot × (All)

Select Site Name: (All)

ACATs-E Cancer: (All)

Is the Patient Scheduled?: (All)

**Number of Cancer Patients**  
This section indicates how many 'Cancer' or 'Cancer Suspected' patients are on the endoscopy wait list based on the applied filters.

271

**Number of Out of Province Patients**  
This section indicates how many out-of-province patients are on the endoscopy wait list based on the applied filters.

9

**Colour Totals**  
Click on the colour total to highlight coloured area in the Scheduling Tool below

794

359

257

93

**ACATs-E Heat Map for Endoscopic Scheduling©**  
Click on the cell for option to navigate to patient waitlist.

**Total Patient Count** 1,503

	In Window	0-50%	50-100%	100%	150%	200%	250%	300%	400%	500% or Greater
2 weeks	8	1		2	2	2	2	1	2	4
4 weeks	21	6	3	5	4	2	1	1	1	3
6 weeks	2	2				1		2		3
8 weeks	158	48	41	29	19	23	6	14	7	14
12 weeks	188	92	46	39	50	16	9	17	7	7
26 weeks	373	68	45	27	11	7	3	6		
52 weeks	42	8	2							

**NOTES:**  
 1. White blanks denote no data  
 2. Unless stated "In Window", all patients are the noted percentage Out of Window.  
 3. \* Indicates more than one physician was selected

Data Current as of: June 6, 2022

D  
A  
S  
H  
B  
O  
A  
R  
D  
S

Any questions or concerns regarding this dashboard should be directed to Bryan Atwood (click the icon to the left).


Intellectual property rights of the ACATs-E Dashboard belong to Bryan D Atwood. Industrial design rights of the ACATs-E Heat Map and Dashboard belong to Chantal E Atwood.

# ACATs-E

ACATs-E stands for: Alberta Coding Access Targets for Endoscopy

- Filter as needed, click on specific window to view Patient Waitlist Report:

D  
A  
S  
H  
B  
O  
A  
R  
D  
S



### Physician Scheduling Tool

Alberta Coding Access Targets for Endoscopy (ACATs-E)©

Digestive Health  
SCN™

Select Scheduling Date (MM/DD/YYYY)

7/13/2022

Physician Name

Select Site Name

(All)

ACATs-E Cancer

(All)

Is the Patient Scheduled?

No

**Number of Cancer Patients**

This section indicates how many 'Cancer' or 'Cancer Suspected' patients are on the endoscopy wait list based on the applied filters.

117

**Number of Out of Province Patients**

This section indicates how many out-of-province patients are on the endoscopy wait list based on the applied filters.

4

**Colour Totals**

Click on the colour total to highlight coloured area in the Scheduling Tool below

689

249

162

59

**ACATs-E Heat Map for Endoscopic Scheduling©**

Click on the cell for option to navigate to patient waitlist.

**Total Patient Count**

1,159

	In Window	0-50%	50-100%	100%	150%	200%	250%	300%	400%	500% or Greater
2 weeks	3	2	1				1	1	2	4
4 weeks	1	1		1		1		1	3	2
6 weeks	12		1						1	2
8 weeks	105	20	27	24	18	13		11		
12 weeks	162	51	61	22	16	12	7	1		
26 weeks	400	45	40	18	12	6	2	6		
52 weeks	9									

**NOTES:**

- White blanks denote no data
- Unless stated "In Window", all patients are the noted percentage *Out of Window*.
- \* Indicates more than one physician was selected

Any questions or concerns regarding this dashboard should be directed to Bryan Atwood (click the icon to the left).

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Data Current as of: July 11, 2022  
July 13, 2022

## ACATs-E stands for: Alberta Coding Access Targets for Endoscopy

- Patient Waitlist Report for use when scheduling:

R  
E  
P  
O  
R  
T  
S

**Patient Waitlist**  
*Alberta Coding Access Targets for Endoscopy (ACATs-E)©*

**Digestive Health  
SCN™**

Click icon to return to Surgical Scheduling Heat Map



Reporting Site Name	PHN (Booking Case ID)	Prov Desc Play	Acats Code	Month, Day, Year of Decision To Treat Date	Month, Day, Year of Ready To Treat Date	ACATs-E Cancer	Is the Patient Scheduled?	Or Booked	In Oop Valid	Days to Target	Avg. Percent to Target
Daysland Health Centre	[Redacted]	GROOT	ED33	October 12, 2021	October 12, 2021	Yes	No		AB	209.0	373%
Drumheller Health Centre		Darth Vader	ED33	November 17, 2021	November 17, 2021	Yes	No		AB	173.0	309%
		Darth Vader	ED33	November 18, 2021	November 18, 2021	Yes	No		AB	172.0	307%
		Darth Vader	ED33	November 17, 2021	November 17, 2021	Yes	No		AB	173.0	309%
		Darth Vader	ED33	September 28, 2021	September 28, 2021	Yes	No		AB	223.0	398%
		Darth Vader	ED16	September 30, 2021	September 30, 2021	No	Yes		AB	221.0	395%
		Darth Vader	ED33	November 4, 2021	November 4, 2021	Yes	No		AB	186.0	332%
Fort Saskatchewan Community Hospital	[Redacted]	Skywalker	ED25	October 4, 2021	October 4, 2021	No	Yes		AB	217.0	388%
		Skywalker	ED41	October 16, 2021	October 16, 2021	No	Yes		AB	205.0	366%
		Skywalker	ED25	October 22, 2021	October 22, 2021	No	Yes		AB	199.0	355%
		Skywalker	ED28	September 28, 2021	September 28, 2021	No	Yes		AB	223.0	398%
		Skywalker	ED28	October 9, 2021	October 9, 2021	No	Yes		AB	212.0	379%
Lamont Health Care Centre	[Redacted]	Skywalker	ED33	October 19, 2021	October 19, 2021	Yes	No		AB	202.0	361%
		Skywalker	ED33	October 19, 2021	October 19, 2021	Yes	No		AB	202.0	361%
		Skywalker	ED33	October 26, 2021	October 26, 2021	Yes	No		AB	195.0	348%

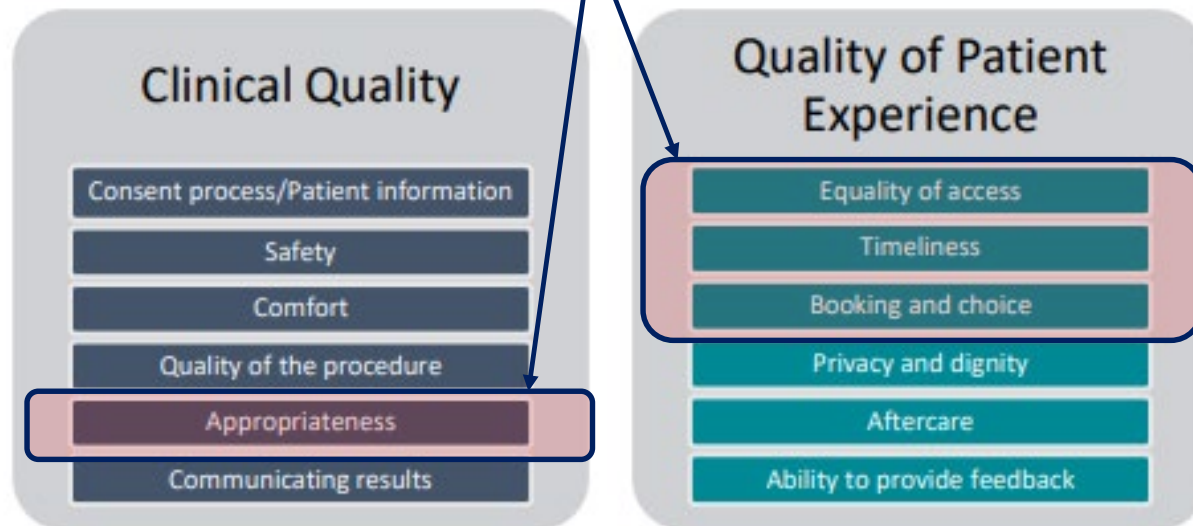
# ACATs-E and C-GRS






# What does it have to do with the C-GRS?

- The Canada-Global Rating Scale (C-GRS) is a patient-centered, quality improvement tool designed for endoscopy
- ACATs-E ties in with C-GRS markers of equality of access, timeliness, and booking and choice




# What does it have to do with the C-GRS?

		<h2>C-GRS</h2>	
<p><b>Dimension: Quality of Patient Experience</b></p> <p><b>Item: 8. Timeliness</b></p>			
		Achieved (Yes/No)	Level
8.1	The facility uses the CAG wait list criteria for classification of endoscopy referrals into urgent, semi-urgent, routine and surveillance categories. These criteria are available in written and/or electronic form.	Y / N	D
8.2	The facility has a system to measure wait times for urgent, semi-urgent, routine and surveillance procedures.	Y / N	D
8.3	The facility records wait times for urgent, semi-urgent and routine procedures and documents adherence to the CAG wait list criteria.	Y / N	C
8.4	Endoscopy wait times are communicated to the endoscopy team monthly and are made available to referring physicians in written and/or electronic form.	Y / N	C
8.5	Waits for urgent procedures are less than six weeks from referral.	Y / N	C
8.6	The facility makes changes to reduce wait times that exceed the CAG wait list criteria.	Y / N	B
8.7	There is some pooling of endoscopy lists.	Y / N	B
8.8	Waits for urgent procedures are less than four weeks from referral.	Y / N	B
8.9	Waits for urgent procedures are less than two weeks from referral.	Y / N	A
8.10	Capacity can be changed to accommodate urgent and semi-urgent procedures.	Y / N	A

More specifically:  
Timeliness

# What does it have to do with the C-GRS?

More specifically:  
Appropriateness



Canadian Association  
of Gastroenterology

## C-GRS

**Dimension: Clinical Quality**

**Item: 5. Appropriateness**

		Achieved (Yes/No)	Level
5.1	Established guidelines for screening and surveillance endoscopy are available in written and/or electronic form.	Y / N	D
5.2	Surveillance and screening endoscopy is booked according to established guidelines.	Y / N	D
5.3	If the facility offers direct-to-procedure endoscopy, there are local guidelines for referring physicians available in written and/or electronic form.	Y / N	C
5.4	The facility performs annual audits of adherence to established screening and surveillance guidelines.	Y / N	C
5.5	Endoscopists are notified of the results of annual appropriateness audits.	Y / N	C
5.6	There is an annual review of the direct-to-procedure guidelines and referral process.	Y / N	C
5.7	The facility responds with action plans within three months if problems are identified by audits of screening and surveillance procedures.	Y / N	B
5.8	The facility makes changes to direct-to-procedure referral process suggested by annual review.	Y / N	B
5.9	The facility reviews the effect of changes made to screening and surveillance procedures, within three months of the survey analysis.	Y / N	A

**General Comments:**

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# What will on-going support from ACATs-E team look like?

- The ACATs-E team is here to help with questions and/or training for new staff
- After initial conversations and training, the ACATs-E team will schedule periodic check-ins with sites
- Reach out by email:  
[ACATsEndoscopy@albertahealthservices.ca](mailto:ACATsEndoscopy@albertahealthservices.ca)
- ACATs-E Website: [ACATs-E Website](#)

# Next Steps:

1. We will complete implementation provincially
2. We will provide Heatmap education in the future (September/October)
3. Schedule periodic check-ins and communicate updates

# Questions from you?



# Contact the ACATs-E Team:

- ACATs-E email:  
[ACATsEndoscopy@albertahealthservices.ca](mailto:ACATsEndoscopy@albertahealthservices.ca)
- [ACATs-E Website](#)
- ACATs-E Team:
  - Christina Wildeman, *ACATs-E Lead*
  - Jessica McLarty, *ACATs-E Lead*
  - Georgia Tabler, *ACATs-E Lead*
  - Bryan Atwood, *Project Co-lead ACATs-E, Digestive Health SCN*
  - Malanie Greenaway, *Manager, Digestive Health Strategic Clinical Network™*