

Understanding Community Cancer Care

Importance of the Care & Advocating for the Care

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Understanding Community Cancer Care

- ▶ Community Oncology delivers greater access, higher quality and lower costs to patients than other sites of care
- ▶ Our primary focus is providing excellent patient care.
 - ▶ Utilizing diagnostic imaging, hematologic testing, personalized medicine, as well as psycho-social services
- ▶ We follow patients long term, take care of the side effects, provide social and emotional support—The whole spectrum of what cancer patients need

Americans demand and deserve state-of-the-art care, with new advances made available as soon as they are developed

The Current State of Community Oncology

- ▶ There are over 7,000 community oncologists practicing in this country, with more than 25,000 affiliated healthcare providers
 - ▶ Including oncology nurses, nurse practitioners, physician assistants, oncology pharmacists, and oncology social workers
- ▶ Over 70% of cancer patients in the U.S. are cared for in a community oncology center setting.
- ▶ More than 60% of patients who are on clinical trials now come from a community oncology setting, a rapidly growing percentage.

What it Means to be a Community Cancer Care Center

- ▶ As clinicians it is our responsibility to provide accessible and affordable comprehensive cancer care
- ▶ Eliminating the need to travel into large cities for treatment
- ▶ Allowing for around-the-clock exposure both in an office setting and in the hospitals
 - ▶ Holding office hours 7 days a week
 - ▶ Hospital rotations and On-Call availability 24 hours a day

What it Means to be a Community Cancer Care Center

- ▶ Providing medical services that compliment patient's treatment further than the typical standard of care
 - ▶ In-house pharmacies
 - ▶ On-Staff Nutritionists
 - ▶ On-site psychology and social work services
 - ▶ Benefit Counseling to aid in high treatment costs
- ▶ Advanced Clinical Research Center and Laboratories
 - ▶ Implementing the latest trials of different phases and varieties at a quicker rate
- ▶ Expanding outpatient infusion centers to multiple locations

The Advantages of Outpatient Chemotherapy

-  **SAFE, EASY DRUG ADMINISTRATION**
-  **RESPECTS PATIENT'S WISH TO AVOID HOSPITALIZATION**
-  **FAMILIAR FACILITY ENHANCES PATIENT'S PHYSICAL COMFORT AND PSYCHOLOGICAL WELL-BEING**
-  **ONCOLOGIST HAS DIRECT AND IMMEDIATE CONTROL OF ADMINISTRATION OF CHEMOTHERAPY**
-  **OVERNIGHT STAY AND EXPENSE AVOIDED**
-  **FACILITATES TRACKING AND CONTROL OF TREATMENT COSTS**
-  **TREATMENT ADMINISTERED AT PATIENT'S CONVENIENCE**

*Source: Publication of AmerisourceBergen; "The Value of Community Oncology; Site of Care Cost Analysis" (Dollinger M. Guidelines for hospitalization for chemotherapy. *Oncologist*. 1996;1(1,2):107-111.)

Different Sites of Care Means Different Types of Care

Community Oncology Centers

1. Our mission is to have all resources lead back to quality patient care
2. Ability to tailor patient's treatment and provide more flexible options
3. Multiple satellite offices in various locations to provide care to more patients
4. Readily available resources to assist patients with financial burdens of care

Academic Oncology Centers

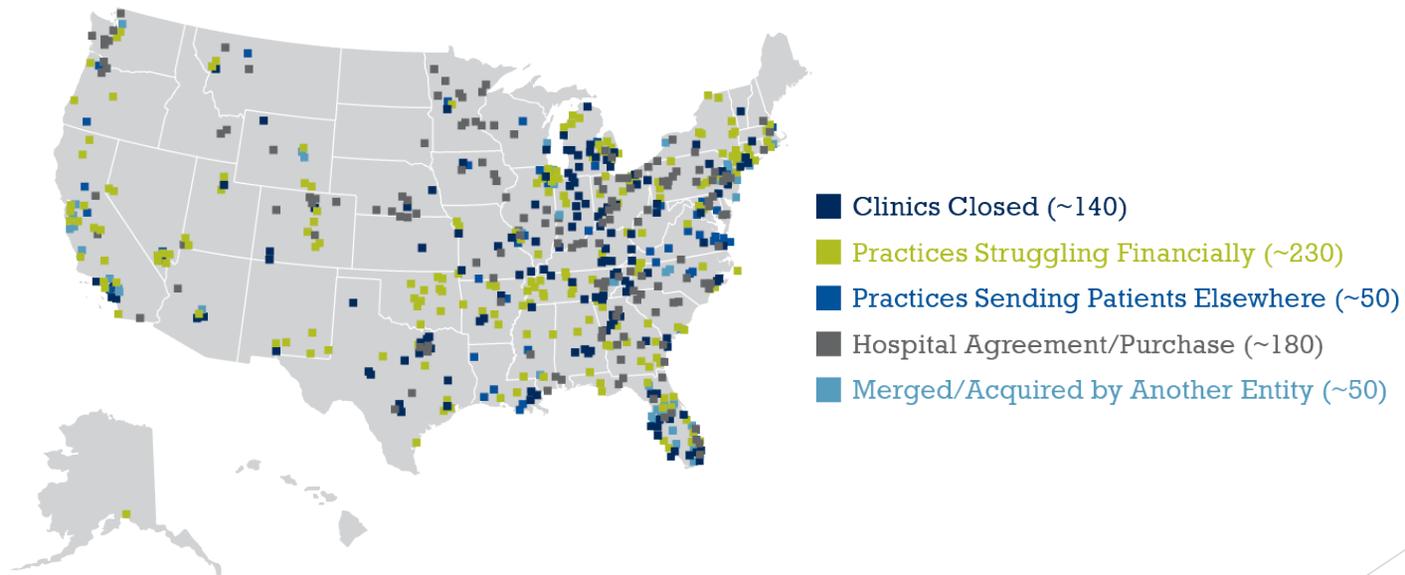
1. More focus on education and research; often affiliated with medical education system
2. Strict treatment regimens due to administrative guidelines
3. Often a hospital-based in-patient facility (*on or off grounds of a hospital*)
4. Physicians often only see patients 1-3 days a week

Community Oncology Consolidation

- ▶ Challenges due to the Centers for Medicare & Medicaid Services (CMS) implementing significant cuts in reimbursement to private community centers.
 - ▶ Reimbursement is currently at just over 56% of costs related to infusion services and numerous other services see no reimbursement at all; including counseling, supportive care and financial counseling
 - ▶ This could force practices to cut back skilled nursing care and similar key oncology administrative services
- ▶ The community oncology landscape is shifting; private practices are closing or entering into joint ventures or ownership models with hospitals.
 - ▶ Numerous studies have demonstrated that hospital- based cancer care is 153% more expensive than the community setting
 - ▶ Patients who live in more remote settings will have to travel large distances to academic centers (*often found to be too costly or impossible due to health status*)

Consolidation in the Landscape of Cancer Care is Continual

Changing Business Structure of 1,254 Oncology Clinics/Practices From 2008-2012¹



1. Practice Impact Report. Community Oncology Alliance. April 4, 2012
<http://www.communityoncology.org/pdfs/community-oncology-practice-impact-report.pdf> Accessed August 23, 2012

The Government's Experiment on Cancer Care

www.cancerexperiment.com

- ▶ The government wants to enact a mandatory experiment with how America's doctors treat cancer
 - ▶ They are seeking to save money through the CMS; while possibly risking lives, especially seniors with Medicare
- ▶ Each of our patients require a personalized treatment plan with access to all of the available life saving drugs and therapies
 - ▶ The Gov't plans to decide which cancer drugs they deem to have the highest "value"
- ▶ There is absolutely no evidence that oncologists prescribe cancer treatments based on anything but the individual needs of their patients.
 - ▶ This experiment only making patients fearful of treatment and diminishes trust in the patient-doctor relationship

The government's experiment will only exacerbate the closure of community oncology practices - *where the majority of American's with cancer are treated* - consolidating cancer care into the more expensive hospital setting.

Patient Advocacy and CPAN

- ▶ Patients have increasingly become more vocal and involved in their health care decisions
 - ▶ Demanding the best care with as many options as they can receive from the best doctors in Oncology
- ▶ Community Patient Advocacy Network (CPAN) has created a platform for patients to fight for the care they deserve
 - ▶ The CPAN Chapter at NSHOA Cancer Center has participated in meeting at capitol hill, letters to the editor and city officials, and personal meetings with congressmen that have signed onto bills presented to congress.
- ▶ Along with Physicians, Patient Advocates educate other patients in becoming an advocate for their own health
- ▶ Patients have become one of the strongest forces in fighting in the current health care reforms we are facing



A Call to Action for Medical Oncology

A clinician's responsibility to their patient extends well beyond the bedside

- ▶ Continued Community Oncology consolidation will increase costs and create treatment access problems for cancer patients, especially those in rural areas
- ▶ Health Care Advocacy from both the physician and the patient
- ▶ Initiate the conversation with your community leaders and media sources

