

**Oncology Care**

**Rank: 8 (medium provider adoption)**

**Survey Responses- Hospitals: 6**

**Medical Groups: 12**

**Health Plans: 7**

Adopted March 2016 | 9 months from adoption to survey

Read the Report and Recommendations here: [www.breecollaborative.org/wp-content/uploads/Oncology-Care-Final-Recommendations-2016-03.pdf](http://www.breecollaborative.org/wp-content/uploads/Oncology-Care-Final-Recommendations-2016-03.pdf)

**Implementation Roadmap**

Current State	Transition Activities	Ideal State and Sustainability
<b>Hospitals, Clinics, and Individual Clinicians</b>		
<ul style="list-style-type: none"> <li>• Patients receive unnecessary imaging in monitoring early prostate and breast cancers</li> <li>• Patients are not informed of the harms, benefits, and potential impacts of tests and treatments</li> <li>• Patients who would benefit from palliative care services do not receive needed support</li> <li>• Patients goals of care are not known and not part of the care plan</li> </ul>	<ul style="list-style-type: none"> <li>• Staff are educated on American Society of Clinical Oncology’s (ASCO) position statement of key elements for individualized cancer care and Choosing Wisely recommendations</li> <li>• Choosing Wisely recommendations are used to guide testing and treatment decisions</li> <li>• Hutchinson Institute for Cancer Outcomes Research (HICOR) data is used to understand current use of advanced imaging and chemotherapy or radiation therapy at the end of life</li> </ul>	<ul style="list-style-type: none"> <li>• PET, CT, and radionuclide bone scans are not used in the staging of early breast and prostate cancers that are at low risk of spreading</li> <li>• Patients are apprised of the harms, benefits, evidence, and potential impact of tests and treatments</li> <li>• Palliative care is offered alongside active anti-cancer care, as needed</li> <li>• Oncology care is aligned with a patient’s individual goals and values and follows the American Society of Clinical Oncology’s (ASCO) position statement of key elements for individualized cancer care</li> </ul>
<b>Health Plans</b>		
		<ul style="list-style-type: none"> <li>• Claims data is provided to HICOR to allow measurement of appropriate imaging tests</li> <li>• Financial incentives are considered for use of appropriate imaging tests</li> </ul>

Read the full Roadmap here: [www.breecollaborative.org/wp-content/uploads/Bree-Implementation-Roadmap-17-0427.pdf](http://www.breecollaborative.org/wp-content/uploads/Bree-Implementation-Roadmap-17-0427.pdf)

## Background

Recommendations for Oncology Care are informed by the American Society of Clinical Oncology (ASCO). ASCO recommends that imaging tests, including CT, PET and bone scans, not be used for staging, or determining the extent of early breast and prostate cancers. Recommendations also specify that palliative care be offered alongside active anti-cancer care, as needed. Oncology care should be aligned with a patient's individual goals and values and follow ASCO's position statement of key elements for individualized cancer care. Patients should be apprised of the harms, benefits, evidence, and potential impact of chemotherapy, radiation, molecular therapy, immunotherapy, and surgery at all stages in their illness trajectory.

In 2012, ASCO partnered with the Choosing Wisely program to develop doctor and patient friendly information, education and decision tools. These were in turn recommended by the Bree Collaborative for use by patients and cancer care providers.

## Implementation Survey Results

According to survey results, the majority of providers offer palliative care, and align individual care goals per ASCO defined elements. A barrier for this topic has been data to show overuse or underuse of appropriate oncology tests and treatments.

Bree Collaborative recommendations scoring lowest on the implementation survey for this topic include:

### *Hospitals and Medical Groups:*

- Positron Emission Tomography (PET), Computed Tomography (CT) and radionuclide bone scans are not used in the staging of early prostate cancer at low risk of spreading
- PET, CT, and radionuclide bone scans are not used in the staging of early breast cancer that is at low risk of spreading
- Oncology care is aligned with a patient's individual goals and values and follows the American Society of Clinical Oncology's (ASCO) position statement of key elements for individualized cancer care

### *Health Plans:*

- The health plan securely provides patient enrollment and claims data to the Hutchinson Institute for Cancer Outcomes Research (HICOR) for linkage with the Cancer Surveillance System and comprehensive statewide comparison.

## Next Steps

- **Work with existing, accepted programs.** The Fred Hutchinson Cancer Research Center, through The Hutchinson Institute for Cancer Outcomes Research (HICOR) program works with health plan claims data provided by Premera and Regence from 2007 through 2015 to link patients tracked in the Fred Hutch cancer patient registry over the same period. Results can be calculated at the ordering

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provider level, which shows significant variation among physicians. This work represents significant opportunity for targeting physicians with high use of non-recommended imaging procedures. HICOR's database also reports use of chemotherapy or radiation therapy and hospice use at the end-of-life. Results show significant variability in end-of-life treatments, such as chemotherapy the last 30 days of life. HICOR's results demonstrate the opportunity for reduction of non-recommended care targeted in Choosing Wisely recommendations.

- More information: Hutchinson Institute for Cancer Outcomes Research  
[www.fredhutch.org/en/labs/hicor/hicor-ig.html](http://www.fredhutch.org/en/labs/hicor/hicor-ig.html)
- **Measurement.** Work with HICOR, and individual provider data, to further investigate overused tests for cancer patients, particularly for physicians with undesirable rates. Health plans would benefit from further work on this issue as well, and providing claims data to HICOR for their own cancer patients would make the database and reports even more robust.
- **Financial incentives.** Payment incentives for appropriate testing could be considered.