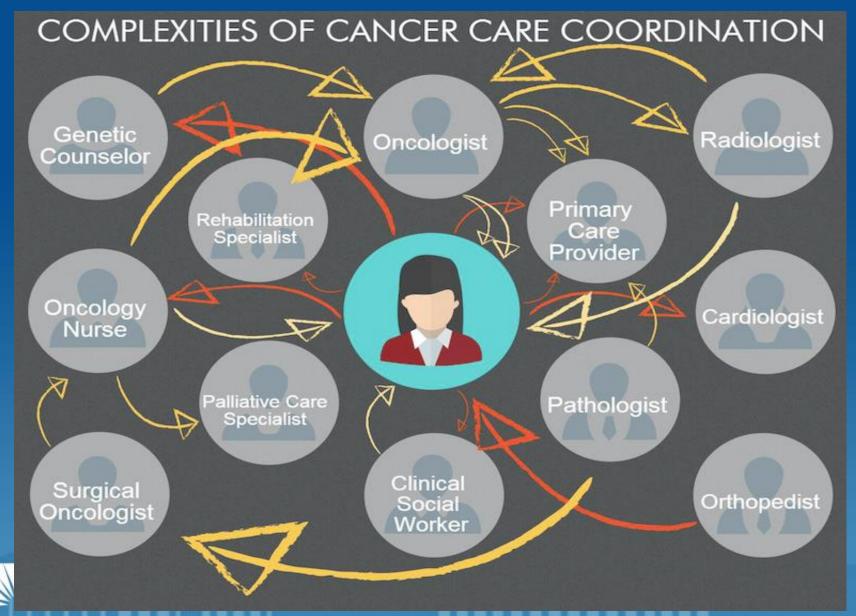
### **NCCS Policy Priority**

... to ensure that every cancer patient has access to cancer care planning and coordination services







# Patients Want a Plan to Guide Their Care

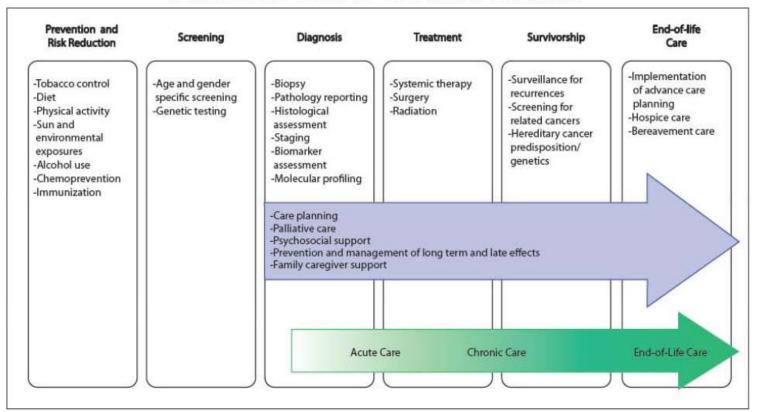
"It was a very frightening time for me. I knew nothing about the process after a lumpectomy and removal of my lymph nodes. I was sent home with no instructions other than to visit my doctor to get results about the lymph nodes. I was in pain and miserable. I so desperately needed a plan for recovery as well as what to expect from my treatment."



- Two-Time Breast Cancer Survivor



#### **Cancer Care Continuum**



**SOURCE** IOM (Institute of Medicine). 2013. Delivering high-quality cancer care: Charting a pelivering new course for a system in crisis. Washington, DC: The National Academies Press.





### The Fundamental Elements of Cancer Care Planning, From Patient Perspective

More patient time with the cancer care team

 More time (and money) for the cancer care team to plan and coordinate care



# Establishing the "Face Validity" of Cancer Care Planning

- Endorsement by Institute of Medicine's National Cancer Policy Forum
- Cancer care planning as a quality measure for ASCO
  - Quality Oncology Practice Initiative
  - Plan templates
- Survivorship care planning as Commission on Cancer accreditation standard



#### DELIVERING HIGH-QUALITY CANCER CARE

Charting a New Course for a System in Crisis



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#### **Recommendation 1**

- The cancer care team should:
  - Communicate and personalize this information for their patients at key decision points along the continuum of cancer care, using decision aids when available
  - Collaborate with their patients to develop a care plan that reflects their patients' needs, values, and preferences, and considers palliative care needs and psychosocial support across the cancer care continuum.
- CMS and other payers should design, implement, and evaluate innovative payment models that incentivize the cancer care team to discuss this information with their patients and document their discussions in each patient's care plan.



### Cancer Care Planning in the Context of the Movement from Quantity to Quality

- Emphasis on payment and delivery reforms to reward quality
  - Center for Medicare & Medicaid Innovation
  - Other Medicare reform efforts
- Specific planning and coordination efforts
  - Transitional cancer management service
  - Complex chronic disease management
- Oncology Care Model



### Cancer Care Planning and the Oncology Care Model

- Oncology Care Model
  - Voluntary payment and delivery reform model; oncologists choose to participate
  - Fee-for-service payments accompanied by a per patient, per episode payment
  - In future year, "downside" payment risk to practices
- Practice Improvement Requirements
  - Cancer care planning
  - Electronic health records utilization
  - 24/7 access



# Cancer Care Planning and the Oncology Care Model

- Evaluations/Responses to Date
  - "Cancer care planning is changing the way I practice"
  - "The cancer care planning requirement is too onerous; I cannot easily meet the requirement"

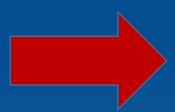


## Why is Cancer Care Planning Not Universally Undertaken?

- Skepticism from some oncologists about benefits
- Resistance to specificity of cancer care planning as outlined by IOM
- Payment system (outside Oncology Care Model) does not support cancer care planning



## Adoption of Cancer Care Planning: Delivery & Payment Reforms



#### **Patient**

- Prepare patients to be engaged partner
- "Take Charge of Your Cancer Care" tools

#### **Payment**

- Legislation establish a Medicare benefit
- Regulation (CMS)
- Alternative payment models (CMMI's OCM)
- Private Payers

#### **Our Goal**

- Engaged patients, shared decision-making
- Cancer care planning, at diagnosis and at major transition points during treatment and survivorship

#### **Providers**

- Standards & Guidelines
- Journey Forward
  Survivorship Planning
  Tools



### Delivery & Payment Reforms Are Essential to Quality Improvement

- NCCS considers changing the conversation between doctor and patient as the essential foundation of delivery reform
- Payment reforms must be aligned to improve communication, treatment decision-making, symptom management, and coordination of care







### Cancer Care Planning and Communications (CCPC) Act, HR 5160

- Creates a Medicare service for cancer care planning and coordination
- Encourages doctor-patient discussions and shared decision-making
- Available to patients at diagnosis and at major transition points in care
- Written plan that explains diagnosis, treatment, and expected symptoms
- Survivorship care plan at completion of active treatment



### **Adoption of Cancer Care Planning**

#### **Patient**

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- "Take Charge of Your Cancer Care" tools

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