

# 2016 AACI/CCAF Annual Meeting

## AACI Cancer Center Network Care Initiative

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Meeting

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Disclosure Information  
2016 AACI/CCAF Annual Meeting  
Dr. Stanton Gerson

**I have no financial relationships to disclose.**

**- and -**

**I will not discuss off label use and/or investigational use  
in our presentation.**

# Linking Value for Patients, Health System and the Academic Cancer Centers Across Networks

## Academic Cancer Center

Provide national leadership on care guidelines	Develop and lead investigational therapeutic trials		Train next generation of physicians and scientists		Develop new best practices	
	<b>Health System</b>					
Increase efficiency of care	Access to novel agents	Experienced nursing, staff & navigators		Multidisciplinary care & carepaths		Sub-specialty experts
		<b>Patients</b>				
		Trust & Transparency		Care coordination		
	Technology Biobank	Survival		Improved outcomes		Equitable care & navigation
		Quality of life				
		Limited financial risk		Mitigating disparities		
Address issues of equitable care delivery	Care close to home		Toxicity management		Create health-care innovation	
	Genetic assessment & risk prediction		Rehabilitation & palliative care			
	Care for patients with advanced stage/refractory cancers		Provide care services not available in the community setting			

# Alignment of AACI Initiatives

## Network Care Initiative Objectives

- Provide carepaths
- Improve quality reporting
- Increase accrual to clinical trials
- Extend novel treatments to community cancer centers

## Value Care for Patients

## Physician Clinical Leadership Initiative Develops Best Practices

- Provide quality oversight & standardized approaches to care
- Maximize clinical efficiencies using resources & technology
- Integrate clinical research into clinical care & increase trial accruals
- Improve relationships with cancer networks & affiliate practices

# Next Steps

- Form AACI focus group consisting of appropriate cancer center staff to develop survey
- Administer network survey to AACI members based on focus group response
- Form Cancer Network Practice Committee (CNPC) under the auspices of the Physician Clinical Leadership Initiative (PCLI) to review approaches and develop assessments of impact of various models, solutions, and hurdles
- Issue final report

# Are these the Right Questions?

- Analytical case load - main campus/network sites
- Number of network sites - geography served – diameter in miles
- Services provided at main/network – either or both
- Care coordination or distribution across network (referrals, COE)
- Quality reporting – QOPI, COC, NCCN
- MDs and number of staff working at both main and network sites
- Employment model: faculty vs network, employed vs private; joint ventures
- Care coordination – use of carepaths, referral network, clinical trials, tumor boards
- Carepath system – NCCN, custom, ViaOncology, commercial insurance, McKesson-iKnowMed, Cardinal Health Pathways, and others
- Data collected - diseases, referrals, trial accrual, carepath alignment, COC

# Who is the Target Audience for the Survey?

- Chief medical officer
- Physician practice administrator
- Service line director
- Others