Systems Perspectives: The Community Based Oncology Practice

Michael Goldstein, MD
Chair, ASCO Workforce Advisory Group

National Cancer Policy Forum Workshop
Ensuring Quality Cancer Care through the Oncology Workforce:
Sustaining Research and Care in the 21st Century
October 20-21, 2008
Goal of Community Practice

To ensure state-of-the-art cancer care in the community setting in a manner which is beneficial to the patient and rewarding to cancer care professionals.
Baseline Projections Reveal Significant Shortages in 2020

- **Demand**: 48% Increase
- **Supply**: 14% Increase

![Graph showing the projected increase in total annual visits from 2005 to 2020. The demand line increases significantly, indicating a gap between demand and supply.](chart.png)
## Where are the Fellows Going?

Initial Practice Settings of Recent Graduates Based on Survey of Fellowship Program Directors

<table>
<thead>
<tr>
<th></th>
<th>2005</th>
<th>2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic</td>
<td>38%</td>
<td>39%</td>
</tr>
<tr>
<td>Private Practice</td>
<td>57%</td>
<td>56%</td>
</tr>
<tr>
<td>Government</td>
<td>3%</td>
<td>3%</td>
</tr>
<tr>
<td>Industry</td>
<td>2%</td>
<td>1%</td>
</tr>
</tbody>
</table>
More than Half of all Oncologists Practice in Private Practice Settings

Data from 2005 Practicing Oncologist Survey

- Private practice: 57%
- Academic setting: 32%
- Government: 3%
- Industry: 2%
- Other: 6%
Where are Patients Receiving Chemotherapy?

Distribution of Medicare Patients Receiving Chemotherapy By Site of Service, 2006

- Physician Office Only: 76%
- Hospital Only - Inpatient: 3%
- Hospital Only - Outpatient: 15%
- Hospital Only - Inpatient and Outpatient: 2%
- Office and Hospital - Office and Inpatient: 1%
- Office and Hospital - Office and Outpatient: 5%
- Office and Hospital - Office, Inpatient and Outpatient: 19%
Definition of “Office”

• Does not appear to be one clear and concise definition used by the health care industry

• ASCO’s interpretation of office-based chemotherapy, which is based on Medicare manuals, would have the following criteria:
  • Office space represents a direct cost to the physician (paid, leased or rented) and not typically in a hospital outpatient department area;
  • Nurses administering care are employed by physicians; and
  • Supplies and equipment represent a direct cost to the physician.
Private practice oncologists spend 90% of time on patient care in contrast to 51% for academics.
COMMUNITY-BASED PRACTICE CHALLENGES

How to deliver state-of-the-art cancer care in an era of increased demand and diminishing resources?
Over Half of the Currently Practicing Oncologists are Aged 50 or Older

<table>
<thead>
<tr>
<th>Age</th>
<th>Count</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;35</td>
<td>344</td>
<td>3%</td>
</tr>
<tr>
<td>35-39</td>
<td>1227</td>
<td>11%</td>
</tr>
<tr>
<td>40-44</td>
<td>1643</td>
<td>14%</td>
</tr>
<tr>
<td>45-49</td>
<td>1881</td>
<td>16%</td>
</tr>
<tr>
<td>50-54</td>
<td>2075</td>
<td>18%</td>
</tr>
<tr>
<td>55-59</td>
<td>1899</td>
<td>16%</td>
</tr>
<tr>
<td>60-64</td>
<td>1246</td>
<td>11%</td>
</tr>
<tr>
<td>65-69</td>
<td>651</td>
<td>6%</td>
</tr>
<tr>
<td>70-74</td>
<td>329</td>
<td>3%</td>
</tr>
<tr>
<td>75+</td>
<td>238</td>
<td>2%</td>
</tr>
</tbody>
</table>

By 2020:
- 2,075 will be 65-69
- 4,363 will be 70+
GME trends: Percent Women in the Oncology Continue to Increase

Source: JAMA Med Ed, 1997-2006 (excludes Gynecologic Oncology)
### Visits per oncologist (weekly)

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Academic</th>
<th>Private Practice</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean Visits per Week</td>
<td>Mean Visits per Week</td>
<td>Mean Visits per Week</td>
</tr>
<tr>
<td>Male Oncs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>45 - 64 years</td>
<td>63.9</td>
<td>103.1</td>
<td>81.2</td>
</tr>
<tr>
<td>Not 45-64</td>
<td>44.5</td>
<td>83.9</td>
<td>72.9</td>
</tr>
<tr>
<td>Female Oncs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>45 - 64 years</td>
<td>55.5</td>
<td>90.6</td>
<td>76.5</td>
</tr>
<tr>
<td>Not 45 - 64</td>
<td>39.4</td>
<td>70.5</td>
<td>57.5</td>
</tr>
</tbody>
</table>
New Oncologists

• Productivity (as measured in visits per week) is lower for physicians under 45 than it is for those aged 45-64
  • ASCO Survey of Practicing Oncologists (Spring 2006)

• 60% of respondents rated balancing home and personal life as extremely important
  • ASCO Survey of Graduating Fellows (Fall 2005)
Retention

• How to keep qualified people in the workforce longer:
  – Those near retirement
  – Young parents

• Growing demand for work-life balance

• Solutions may include:
  – Innovative practice arrangements:
    • Job sharing
    • Part-time practice
    • Extended practice hours
Recruitment:

- Minority of PA’s are in internal medicine subspecialties
- Only 1% of NP’s specialize in oncology

Data from ASCO Study NPs & PAs

Physician’s Assistants

Nurse Practitioners


Source: The Nurse Practitioner Journal, Vols. # 26-30
Use of Non-Physician Practitioners
(Nurse Practitioners & Physician Assistants)

Challenges include:
- Availability
- Providing competitive salaries
- Oncology-specific education & training
- Effectively collaborating

Solutions may include:
- Outreach to non-physician practitioner training programs
- On-the-job training modules
- Document and share collaborative practice models
Survivorship Care

By 2020, 81% increase in cancer survivorship

Oncologists Survey:
• 68% of oncologist visits are for patients 1 or more years post-diagnosis
Survivorship Care

Challenges include:

- Adapting survivorship model to different types of community settings
- Availability of primary care physicians in the community and their ability and willingness to managed survivorship care for patients (new or returning)
  - Internal Medicine also facing physician shortages
- Developing evidence-based treatment guidelines

Solutions may include:

- Treatment plan and summary
- Increased coordination & communication
- Partnership to increase interest in internal medicine
- Survivorship care clinics
Oncology Treatment Plan and Summary

- ASCO is developing a series of customizable, disease-specific chemotherapy treatment plans and summaries.
- Treatment plan captures:
  - Planned chemotherapy regimen, dose, cycles and duration
  - Major side effects of chemotherapy regimen
- Treatment summary describes:
  - Details of chemotherapy care delivered, major toxicities experienced, follow-up plan of care
- Colon Adjuvant Chemotherapy, Breast Adjuvant Chemotherapy, and general Cancer Treatment Plan and Summary templates available: www.asco.org/treatmentsummary
Office Structure

How do you structure a practice to provide full array of oncology care?

- Psychosocial support
- Nutrition care
- Palliative care
- End-of-Life care (coordination with hospice)

Solutions may include:

- Partnering with other local medical offices/hospitals/cancer centers
EHRs/EMRs

- Lack of oncology-specific
- Cost of purchasing
- Time associated with integration
- Good for legibility & documentation

How can we support practices to ensure that use increases productivity?
EHR Field Guide includes:

- Core functions of an oncology-specific EHR
- Planning, selection, purchasing and implementation phases
- Financial and operations considerations
- Post-implementation and patient safety

No ASCO “seal of approval”

EHR Symposium:
September 2009

Target Audience: Clinical and administrative decision-makers in office-based oncology practices and hospital/academic-based cancer centers
How to Meet the Challenges Ahead
Workforce Strategic Plan

• ASCO Board approved a 5-year strategic plan
• Goals and Objectives related to:
  1. Oncology Care Delivery
  2. Training Pipeline for New Oncologists
  3. ASCO Structure – Ongoing Advisory Group and Data Collection and Report
• Public release of plan and implementation details in a November *Journal of Oncology Practice* article
Pilot Program to Study Collaborative Practice
Collaboration with NPs & PAs

Practicing Oncologists Survey Findings

- 56% Oncologists currently work with NP/PA
- Use of NPs and PAs yields higher visit rates
- 2/3s who work with NP/PA believe it benefits the practice (improved patient care and efficiency, physicians spend more time on complex cases, physician satisfaction)

How Oncologists Report Working with NPs/PAs

- Advanced Activities:
  - New patient consults
  - Ordering routine chemo
  - Invasive procedures

- No: 44%
- Traditional: 30%
- Advanced: 26%
ASCO RFP to Study Collaborative Practice Models

• With support from Susan G. Komen for the Cure, ASCO is seeking proposals for exploring new oncology practice models and their impact on practice efficiency, productivity, and satisfaction.

• Objectives:
  – Inventorying and describing model practices involving oncologist collaboration with NPs and PAs.
  – Documenting impact of model arrangements on practice productivity and efficiency.
  – Documenting impact of model arrangements on patient, oncologist, and NP/PA satisfaction.
  – Understanding impact of model arrangements across practice settings.
  – Disseminating information on effective strategies for optimizing practice efficiency, quality of care, and professional satisfaction.
For more information, visit www.asco.org/workforce or contact: workforce@asco.org