



Association of Community Cancer Centers

2016/2017

# Annual Report



ASSOCIATION OF COMMUNITY  
CANCER CENTERS

# Board of Trustees 2016-2017

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Association of Community Cancer Centers

The Association of Community Cancer Centers (ACCC) is the leading advocacy and education organization for the multidisciplinary cancer care team. Approximately 23,000 cancer care professionals from 2,000 hospitals and practices nationwide are affiliated with ACCC. Providing a national forum for addressing issues that affect community cancer programs, ACCC is recognized as the premier provider of resources for the entire oncology care team. Our members include medical and radiation oncologists, surgeons, cancer program administrators and medical directors, senior hospital executives, practice managers, pharmacists, oncology nurses, radiation therapists, social workers, and cancer program data managers.

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# President's Message

Together We Are Stronger

by Jennie R. Crews,  
MD, MMM, FACP

One of the most impressive features of ACCC is the diversity of our membership. Not only do ACCC members come from multiple disciplines in oncology care, but our members work in diverse care delivery settings: private practices; small, hospital-based cancer centers; large healthcare systems; and academic and university-affiliated programs. While each care setting has distinct and unique features, they also share significant synergy.

During my years as an ACCC member, I have had the opportunity to work in each of these care settings. I recently made the shift from a community hospital-based cancer program to an academic program with a community-based network. Our academic center and community affiliates share the same goals of providing optimal outcomes and enhancing the patient experience; we also share the same challenges of defining value and learning to optimally provide care in a value-based environment.

This synergy between practice settings is a common theme throughout ACCC—from its education programs to its advocacy efforts on Capitol Hill.

Take, for example, the ACCC Metastatic Breast Cancer education project and the Institute for Clinical Immuno-Oncology (ICLIO), where academic experts and community providers—many of them experts as well—have partnered successfully to enhance delivery of care to patients. And no matter where we practice, all oncology providers are facing similar frustrations and challenges related to optimizing data capture and analysis through electronic health records (EHRs), issues that ACCC hopes to help members address through an Optimizing Electronic Health Records education project.

Another instance of this synergy is the 2016 ACCC Institute for the Future of Oncology forum which brought together oncology thought-leaders from across the spectrum of practice settings to envision the future of patient-centered care in oncology. The dynamic discussion touched on key issues relevant to my ACCC president's theme: Empowering Patients, Engaging Providers.

ACCC advocacy efforts over the past year also embody this synergy—from fighting for oral parity legislation to providing thoughtful, well-argued comments to ill-conceived, mandatory federal programs, such as the proposed Part B Demonstration project. (In December the Centers for Medicare & Medicaid Services withdrew its Part B proposal, and advocacy efforts by ACCC members helped achieve this win.) But perhaps the most timely example of positive synergy created by ACCC and its membership is evident in ACCC support of the Oncology Care Model (OCM)—the first oncology-specific alternative payment model developed by the Center for Medicare and Medicaid Innovation (CMMI). Through its OCM Collaborative, ACCC brings together progressive leaders to share experiences and knowledge with their colleagues across all practice settings.

The core mission of ACCC is to be the leading education and advocacy organization for the multidisciplinary team. We are stronger together as we strive to realize this goal and benefit from the synergy of working to advance patient-centered care for all patients in every setting of care.



# Who We Are

## New Members 2016-2017

As of February 17, 2017

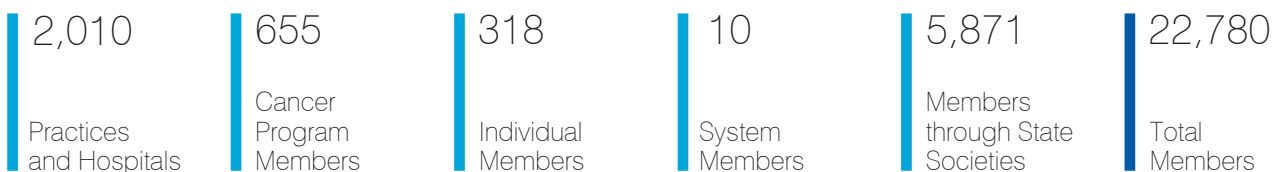
AtlantiCare Cancer Care Institute  
 Aurora BayCare Medical Center, Aurora Cancer Care  
 Aurora Sheboygan Memorial Medical Center, Aurora Cancer Care  
 Banner University Medical Center, University of Arizona Cancer Center  
 Bayshore Community Hospital, Cancer Care  
 Cape Cod Regional Cancer Network  
 Cayuga Medical Center, Cayuga Cancer Center  
 Florida Cancer Specialists & Research Institute  
 Georgetown Cancer Center  
 Hardin Memorial Health  
 Hillcrest Medical Center  
 Lourdes Cancer Center  
 Lovelace Cancer Care  
 Mercy Health Anderson  
 Mercy Health Cincinnati

Mercy Health Clermont  
 Mercy Health Fairfield  
 Mercy Health West  
 Meridian Health System  
 Oncology San Antonio  
 Riverview Medical Center, Meridian Cancer Care  
 Salish Cancer Center  
 Siteman Cancer Center  
 Southern Ocean Medical Center, Meridian Cancer Care  
 Trinity Cancer Care  
 UnityPoint Health  
 UnityPoint Health-Waterloo Community Cancer Center  
 Vanderbilt Ingram Cancer Center  
 WellSpan Good Samaritan Sechler Family Cancer Center

### New Chapter Members:

Nebraska Oncology Society

## ACCC is...



- 39 % Physicians
- 16 % Administrators/Managers
- 11 % Nurses
- 5 % Billers & Coders/Data Managers
- 4 % Pharmacists
- 3 % Social Workers
- 3 % Patient Navigators
- 3 % Pharmaceutical Reps
- 2 % Financial Advocates
- 2 % Radiation Therapists
- 12 % Other Multidisciplinary Cancer Team Members



# Informing and Engaging

## ACCC in the News

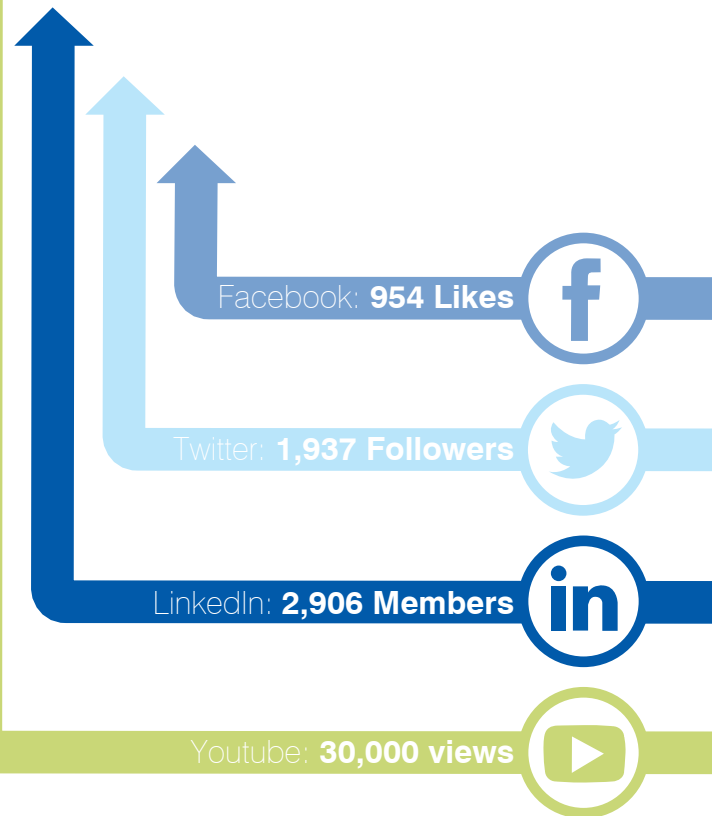
From social media promotion of member programs, to discussions with individual members on ACCCExchange, to timely press releases with an audience reach of more than 88.7 million each, ACCC uses a variety of communication platforms to engage with members and the broader oncology care community.

Recent media coverage of ACCC:

- *American Journal of Managed Care*: “Patient Navigation in Immuno-Oncology” cited the ICLIO whitepaper.
- *Clinical Oncology News*: “Value-Based Care: Making the Cancer Dollar Go Farther” included an interview with ACCC President Dr. Jennie Crews.
- *Immuno-Oncology News*: “Initiative Advances Immuno-Oncology Access in Cancer Care Community” included an interview with Dr. Crews.
- *Managed Health Care Executive* and *Medscape.com*: published stories on the “Top Challenges in Cancer Care” with highlights from the ACCC 2016 Trends in Cancer Programs Survey.
- *OncLive*: “ACA May Be a Tough Act to Follow” with comments from Dr. Crews.
- *OncLive*: “Cost of Treatments Tops Survey of Oncologists’ Concerns” had comments from Dr. Crews and highlighted the ACCC 2016 Trends in Cancer Programs Survey.
- *OncLive*: “Immuno-Oncology Will Require Extensive Staff Training” highlighted the ICLIO white paper.
- *OncLive*: “Soaring Drug Prices Bring New Challenges” covered a session from the National Oncology Conference.
- *Oncology Nursing*: quoted ACCC Director of Health Policy, Leah Ralph in “The March to Obamacare Repeal: The Oncology Community Speaks.”
- *Verywell.com*: highlighted the ACCC Metastatic Breast Cancer Project.

**Social media: 5,797 total followers**

894 more  
than last year, an 18% growth



## ACCCExchange / The most popular ACCCExchange posts since July 2016:

- Who Coordinates Compliance and Data Collection for Your CoC Standards
- Lung Cancer Dx to Tx Timeline Benchmarks
- Excellent Article on Infusion Center Scheduling
- Distress Screening
- Cancer Rehab
- Scheduling Infusion Chairs for Chemotherapy
- Chemotherapy Education
- Chemotherapy Scheduling

ACCCExchange online community currently has 23,214 members. From July 1, 2016, to date, there have been 422 unique posts with 1,002 public replies and 329 private replies.

# Advocating for Providers and Patients

ACCC provides members with the information and resources needed to effectively advocate on the critical issues in an era of healthcare transformation. This past year, ACCC:

- Helped our members to influence real legislative change on Capitol Hill by meeting with 91 policymakers from more than 22 states on issues including passing a federal oral parity bill, advocating for Medicare reimbursement for supportive care services, and the importance of preserving Part B reimbursement rates.
- Voiced strong opposition to CMS' proposed Part B Drug Payment Demo. Ultimately, ACCC successfully lobbied both CMS and Congress to not move forward with the demonstration and led efforts to model the impact of the proposed program on ACCC cancer programs.
- Submitted comments to CMS on the Medicare Access and CHIP Reauthorization Act (MACRA) requesting flexibility for providers, who may need additional time and resources to comply with new reporting requirements; a streamlined reporting process so that all Oncology Care Model (OCM) measures are included in the Merit-based Incentive Payment System (MIPS) quality measures; and to make the advanced Alternative Payment Models (APMs) track more achievable.
- Closely monitored value assessment conversations including from the Institute for Clinical and Economic Review (ICER). ACCC submitted comments and urged ICER to develop a process to meaningfully solicit and incorporate stakeholder input, better account for patient preferences and individualization in its assessments, and provide more information about how assessments will evolve and not stifle innovation.
- Continued to support the OCM practices through ACCC's Oncology Care Model Collaborative, a virtual community for OCM practices to share tools and resources, and troubleshoot implementation challenges. The Collaborative has captured 85% of OCM practices, and continues to be a leading resource to practices on the cutting-edge of oncology payment reform through webinars, workshops, and online discussion forums.
- Testified in front of the Advisory Panel on Hospital Outpatient Payment (HOP) voicing concerns about the movement toward greater packaging in the Hospital Outpatient Prospective Payment System (OPPS), and the lack of engagement with stakeholders as rate setting calculations become increasingly complex. ACCC also submitted comments to the proposed 2017 Physician Fee Schedule (PFS) rule asking CMS not to finalize proposals that would reduce reimbursement for radiation treatment services.

- Strongly supported the 21st Century Cures Act (H.R. 34), a sweeping FDA reform package signed into law in December 2016 that aims to spur the development of new drugs and devices, fund medical research, and includes dedicated funding for the Cancer Moonshot Initiative.



# Advancing Cancer Care in the Community

Announced in then-President Obama's final State of the Union Address, the Cancer Moonshot's audacious mission: to double the rate of progress in our understanding, prevention, diagnosis, treatment, and care of cancer. Simply put: to make a decade's worth of progress in five years.

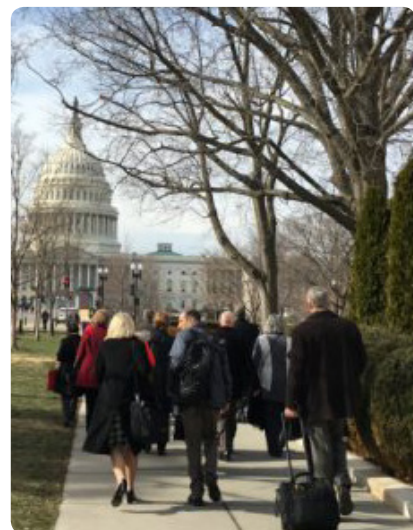
ACCC actively engaged and participated in the Cancer Moonshot Initiative; assisting in coordinating numerous opportunities between our members and the Moonshot Task Force including site visits to members' cancer programs to provide helpful feedback on topics to be used in the Blue Ribbon Panel (BRP) recommendations. This feedback included access to clinical trials, survivorship programs, oncology workforce, big data, and precision medicine.

In June, ACCC President Jennie R. Crews, MD, MMM, FACP, joined with hundreds of thought leaders in the cancer community for the Cancer Moonshot Summit in Washington, D.C. "It's vital to ensure that the voice of those on the frontlines of cancer care delivery be included in this transformative conversation," said Dr. Crews.

When the Cancer Moonshot Task Force Report was released in October, ACCC was there. During the White House event highlighting the Moonshot recommendations, Dr. Crews represented community oncology in a live-streamed panel discussion. That same month, the ACCC 33<sup>rd</sup> National Oncology Conference featured a video message from Vice President Biden and a session on Bringing the Cancer Moonshot Down to Earth—connecting the initiative to community providers and the patients they serve.

Rounding out ACCC contributions to the Cancer Moonshot effort, in January 2017, an ACCC delegation joined with leading cancer organizations at the White House to participate in an event focused on Making Health Care Better: Community Oncology. The live-streamed event explored critical aspects of community oncology including cancer disparities, survivorship and support services, advancing clinical trials, and innovative models of care delivery in the community setting. ACCC members participated in dialogue with panelists, as well as serving on several of the event panels.

Post-Obama Administration, Dr. Crews has been invited to provide input and help shape the new Biden Cancer Initiative (BCI) that will live in the private sector.



# Developing Resources with Solutions

## Oncology Issues

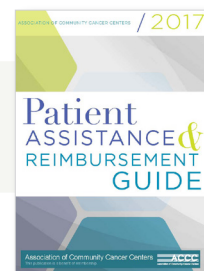
*Oncology Issues*, the official journal of ACCC, features practical “how-to” strategies from cancer programs and practices on topics such as community outreach, new technologies, patient and staff workflows, clinical program implementation, and more. The most popular articles of 2016:

- Prehab Improves Outcomes for Oncology Patients
- Delivering Pharmacogenetic Testing in the Community Setting
- The Oncology Nursing Fellowship Program: A Pipeline for the Future
- Oncology’s Value-Oriented Framework
- Building a Navigation and Psychosocial Support Program from the Ground Up
- Building a Palliative Care Program from the Inside Out
- Bridging the Gap from Inpatient to Outpatient Care
- Strategic Planning for Oncology
- Building Bridges, Breaking Down Barriers
- The Embedded Nurse Navigator Model



## ACCC Patient Assistance & Reimbursement Guide

This annual publication provides tools and resources providers need to help their patients pay for their cancer treatment. [acc-cancer.org/publications/PatientAssistanceGuide.asp](http://acc-cancer.org/publications/PatientAssistanceGuide.asp).



## 2016 Trends in Cancer Programs

Now in its seventh year, this survey identifies top challenges and concerns and shares how cancer programs are improving quality of care and reducing costs. [acc-cancer.org/surveys/CancerProgramTrends-2016-Overview.asp](http://acc-cancer.org/surveys/CancerProgramTrends-2016-Overview.asp).



## Empowering Patients, Engaging Providers: The Future of Patient-Centered Care in Oncology

This white paper focuses on discussion highlights from the ACCC 2016 Institute for the Future of Oncology. Participants identified seven key elements required to provide true patient-centered care: patient stories, navigation and coordination, interdisciplinary teams, appropriate reimbursement for services rendered, greater education, information technology connectivity and transparency, and decision support tools. [acc-cancer.org/institute/](http://acc-cancer.org/institute/)



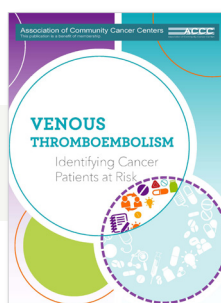


# Addressing Educational Needs in the Community

**ACCC Provider Resources** serve the dual purpose of identifying challenges to delivering quality oncology care and offering solutions and tools to meet these challenges head on. ACCC member programs often serve as models for practical implementation strategies to either expand existing services or create new processes to improve patient care.

## Projects Launched in 2016-2017:

- Steps to Success: Implementing Oral Oncolytics
- 2016 Trends in Cancer Programs Survey
- Optimizing Electronic Health Records (EHRs)
- Testing and Treating ALK+ Non-Small Cell Lung Cancer (NSCLC)
- Virtual Molecular Tumor Boards
- Precision Medicine: Strategies for Improving Multidisciplinary Team Communication
- Metastatic Breast Cancer: Resources & Tools for the Multidisciplinary Team
- A.C.T. (Access, Change, Test) on Molecular Testing



## Financial Advocacy Network (FAN)

In 2016 the FAN initiative developed critical resources to expand the skills and knowledge base of providers who deal directly with patients on complex financial issues surrounding their cancer diagnosis and treatment. FAN tools and resources include skills-based educational materials for program staff currently providing financial counseling and for those who are new to financial advocacy, as well as networking opportunities.

2016-2017 accomplishments include:

- 4 Learning Labs for Process Improvement
- 3 Case-Based Workshops
- Blog series on ACCCBuzz
- Launch of ACCC Financial Advocacy Boot Camp eLearning Program

## Advancing Care Coordination for Lung Cancer Patients

In 2016 ACCC launched a three-year initiative to develop an Optimal Care Coordination Model (OCCM) to serve lung cancer patients on Medicaid. Phase I of the project began with an environmental scan providing the foundation for the project, identifying the ongoing issues faced by this vulnerable patient population. Through a competitive application process ACCC recruited Cancer Program Members to serve as project Development Sites, providing real-life experiences illustrating successes and challenges to delivering cancer care to these patients. During visits to the Development Sites between August-October 2016, ACCC staff met with a multitude of physicians, staff, patients, and referring providers to obtain their unique

### OPTIMAL CARE COORDINATION MODEL

For Lung Cancer Patients on Medicaid

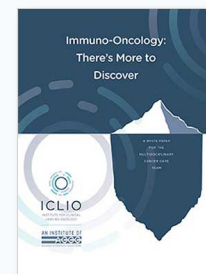


perspectives on care delivery across the continuum from initial access through end of life. This research phase of the project yielded comprehensive reports from each of the five Development Sites.

2016 accomplishments include:

- Environmental scan
- 5 Development Sites selected and visited
- Advisory Committee and Technical Expert Panel selected
- Draft Oncology Care Coordination Model created
- Comprehensive site reports and RFAs for Phase II Testing Sites available on project website

# Institute for Clinical Immuno-Oncology (ICLIO)



ICLIO remains the only initiative to prepare multidisciplinary cancer care providers for the complex implementation of immuno-oncology in the community setting. In 2016 ICLIO continued to empower multidisciplinary teams to operationalize, implement, and optimize immuno-oncology in their communities. ICLIO offers education and resources that expand beyond clinical knowledge and encompass a full spectrum of information addressing real-life issues facing cancer care teams integrating immuno-oncology into practice.

2016 accomplishments include:

- 12-part webinar series
- 12-issue eNewsletter series tailored to clinicians, supportive care staff, and fellows-in-training

- 3 Tumor-Specific Subcommittees and Resource Toolkits
- Role-specific eLearning Modules designed for physicians, nurses, and pharmacists
- Comprehensive ICLIO Scholar eLearning Modules
- The second ICLIO National Conference and first ICLIO Stakeholder Summit in fall 2016
- ICLIO Innovator Award selected and highlighted at the ICLIO National Conference and the ACCC National Oncology Conference
- ICLIO 2016 white paper, "Immuno-Oncology: There's More to Discover"

# Participating in Face-to-Face Learning

60

Meetings

4,351

Participants

36

Cities

308

Sessions

366

Hours

## Oncology Pharmacy Education Network

### (OPEN) Regional Meetings:

- Costa Mesa, CA
- Austin, TX

### OPEN Pre-Conference

- St. Louis, MO

### Oncology Reimbursement Meetings

- Baltimore, MD
- Costa Mesa, CA
- Denver, CO
- Flushing, NY
- Greenville, SC
- Madison, WI

### Financial Advocacy Network (FAN) Case-Based Workshops

- Cleveland, OH
- Dallas, TX
- Philadelphia, PA

## Institute for Clinical Immuno-Oncology (ICLIO) Conference

- Philadelphia, PA

## Fundamentals of the Business of Oncology

- St. Louis, MO

## Metastatic Breast Cancer Symposium

- St. Louis, MO

## ACCC 33rd National Oncology Conference

- St. Louis, MO

## ACCC 43rd Annual Meeting, CANCERSCAPE

- Washington, D.C.

## 43 Oncology State Society Network Conferences

[acc-cancer.org/meetings](http://acc-cancer.org/meetings)

Throughout the year, ACCC held meetings across the country, bringing a variety of learning and networking opportunities to our members in their home regions.

Nearly 600 attendees came together for the ACCC 33rd National Oncology Conference, October 19-21, St. Louis, MO. Across sessions the focus was on practical, proven “how to’s” for bettering the delivery of patient-centered care in today’s challenging healthcare environment.

The ACCC 43rd Annual Meeting, CANCERSCAPE, held March 29-31, 2017, in Washington, D.C., brought together policy insiders, experts, and decision makers to discuss the evolving healthcare policy landscape, alternative payment models, value-based frameworks, data collection and quality measures, 340B drug pricing, and more.



# Recognizing Excellence

## 2016 ACCC Innovator Award Winners



The ACCC Innovator Awards honor member programs that have exhibited forward-thinking strategic planning and developed pioneering programs and creative solutions that advanced the goals of improving access, quality, and/or cost-effectiveness of cancer care. Congratulations to our 2016 winners!

### **Baton Rouge General Medical Center, Pennington Cancer Center**

*Tele-Health Technology Connects Patients with Nutrition Services*

### **Cone Health System, Cone Health Cancer Center**

*The Study of High Cost Oncology Patients to Improve Care and Curb Costs*

### **Fox Chase Cancer Center**

*Enhancing Survivorship through Improved Provider Communication, Care Coordination, and Professional Education*

### **Mary Bird Perkins Cancer Center**

*Early Detection of Cancer for the Medically Underserved*

### **Park Nicollet HealthPartners, Frauenshuh Cancer Center**

*Establishing Personal Pain Goals in Oncology Patients to Improve Patient Care and Decrease Costs*

### **Sanford USD Medical Center, Sanford Cancer Center**

*Expanding Access to Immunotherapy in the Community Setting*

### **The Outer Banks Hospital, The Outer Banks Hospital Cancer Services**

*HPV Vaccination: Engaging Community Partners for Success*

### **University of Maryland Upper Chesapeake Health, Kaufman Cancer Center**

*Building a Palliative Care Program from the Inside Out*

## 2016 ACCC Individual Awards



### **Annual Achievement Award**

**Cancer Support Community**  
Washington, D.C.



### **David King Community Clinical Scientist Award**

**Cary A. Presant, MD, FACP, FASCO**  
*City of Hope Medical Group*  
San Marino, CA

### **Clinical Research Award**

**Michael O'Connell, MD**  
*Chairman, National Surgical Adjuvant  
Breast and Bowel Project*  
Rochester, MN



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Thomas Whittaker, MD, FACP  
Cecilia Zapata, MS, MHA

# Treasurer's Report

**Thomas A. Gallo, MS, Treasurer**

The Statement of Financial Position shows an increase in net assets from \$6,790,742 to \$11,277,659 for fiscal year 2015-2016. The increase is largely due to funding for new education programming. The Statement of Activities and Change in Net Assets shows total unrestricted net assets at year end of \$1,057,134, up from \$984,666 at the beginning of the year. The cash reserve account increased from \$578,134 to \$590,964. Financial statements for the fiscal year ended June 30, 2016, are provided.

Amendments to the budget for the purpose of conducting special projects in conjunction with the Corporate Development Committee have been approved for fiscal year 2017. The Finance Committee approved budget amendments for up to \$10,320,000 of revenue with associated direct project costs of \$9,804,000. Funding commitments as of December 31, 2016, for the 2017 fiscal year, are approximately \$6,600,000, with associated project costs estimated at \$6,270,000.

## Statement of Financial Position as of June 30, 2016

### ASSETS

#### CURRENT ASSETS

Cash	\$	6,387,716
Investments		1,557,022
Accounts Receivable		304,968
Sponsorship Receivable		2,474,994
Prepaid Expenses		67,179
Total Current Assets		10,791,879

#### OTHER ASSETS

Sponsorship Receivable, Net of Current Portion		1,825,332
Total Assets	\$	12,617,211

### LIABILITIES AND NET ASSETS

#### CURRENT LIABILITIES

Accounts Payable & Accrued Liabilities	\$	807,565
Deferred Revenue		
Membership Dues		380,175
Other		151,812
Total Current Liabilities		1,339,552

#### NET ASSETS

Unrestricted	\$	1,057,134
Temporarily Restricted		10,220,525
Total Net Assets		11,277,659

Total Liabilities and Net Assets \$12,617,211

# Statement of Activities and Change in Net Assets for the Year Ended June 30, 2016

REVENUE	UNRESTRICTED	TEMPORARILY RESTRICTED	TOTAL
Membership Dues	\$ 851,457	-	851,457
Conferences and Meetings	516,706	514,250	1,030,956
Journal	279,587	163,500	443,087
Interest	6,264	-	6,264
Other	55,870	60,500	116,370
Provider Access and Education Projects	8,000	12,342,156	12,350,156
Net Assets Released from Donor Restrictions	8,665,957	(8,665,957)	-
<b>Total Revenue</b>	<b>\$ 10,383,841</b>	<b>4,414,449</b>	<b>14,798,290</b>
<b>EXPENSES</b>			
<b>Program Services</b>			
Conferences and Meetings	\$ 1,135,896	-	1,135,896
Journal	423,832	-	423,832
Membership	380,372	-	380,372
Other	35,886	-	35,886
Provider Access and Education Projects	7,537,554	-	7,537,554
<b>Total Program Services</b>	<b>\$ 9,513,540</b>		<b>9,513,540</b>
<b>Supporting Services</b>			
General	\$ 797,833		797,833
<b>Total Expenses</b>	<b>\$ 10,311,373</b>	<b>-</b>	<b>10,311,373</b>
<b>Change in Net Assets</b>	<b>\$ 72,468</b>	<b>4,414,449</b>	<b>4,486,917</b>
<b>Net Assets, Beginning of Year</b>	<b>\$ 984,666</b>	<b>5,806,076</b>	<b>6,790,742</b>
<b>Net Assets, End of Year</b>	<b>\$ 1,057,134</b>	<b>10,220,525</b>	<b>11,277,659</b>

# Thank You to Our Supporters

## Industry Advisory Council



## Emerging Companies Council



## Technical Advisory Council

