

# action

## Think Tank Takeaways

Supported by a grant from Genentech, ACCC hosted a series of “Think Tanks” at its 2014 National Oncology Conference. These 45-minute sessions focused on four hot topics in oncology: the Healthcare Marketplace, Lung Cancer Screening, Molecular Tumor Boards, and Personalized Medicine

### **Healthcare Marketplace** • *Growing need for patient navigation.*

Many first-time insurance purchasers need help navigating the process of signing up for healthcare coverage; they remain confused about terms like deductible, co-pay, co-insurance, and out-of-pocket maximum. To meet these needs, ACCC has developed a set of resources around cancer patient navigation and patient assistance programs, as well as the Financial Advocacy Network with resources for both clinicians and administrators.

- *Many new patients remain “functionally” uninsured.* As a result of the Medicaid expansion, approximately 10.5 million new patients will receive health insurance coverage. However, many of these patients will remain “functionally” uninsured because they will lack access to providers who are accepting new Medicaid patients.
- *“Value” in oncology.* The “value” of healthcare can be difficult to measure in oncology. The measurement of subjective clinical endpoints can be challenging when cancer patients are dealing with symptoms such as severe nausea or vomiting, fatigue, or pain.

Cancer programs and oncology clinicians are also noting the growing importance of focusing on patient satisfaction scores, since these metrics directly impact reimbursement.

- *Other key factors that impact the oncology landscape.* These include the 340B Drug Pricing Program, consolidation and acquisition of oncology practices, and creative models for patient-centered care.

### **Lung Cancer Screening**

Lung cancer screening programs are necessary, since lung cancer is the leading cause of cancer-related mortality in the United States. Today, most lung cancer patients are diagnosed with advanced disease, but effective screening would allow these patients to get diagnosed and treated earlier in their disease. Regardless of coverage, cancer programs need to be prepared to offer LDCT and ensure proper follow-up for patients who have non-negative screening results. One model: multidisciplinary lung nodule clinics that provide ongoing follow-up to a large number of patients who have a non-negative screening test. And because some patients who undergo LDCT or who get diagnosed with lung cancer may not want to quit smoking, cancer programs will need to integrate robust smoking cessation interventions into their lung cancer screening programs.

### **Molecular Tumor Boards**

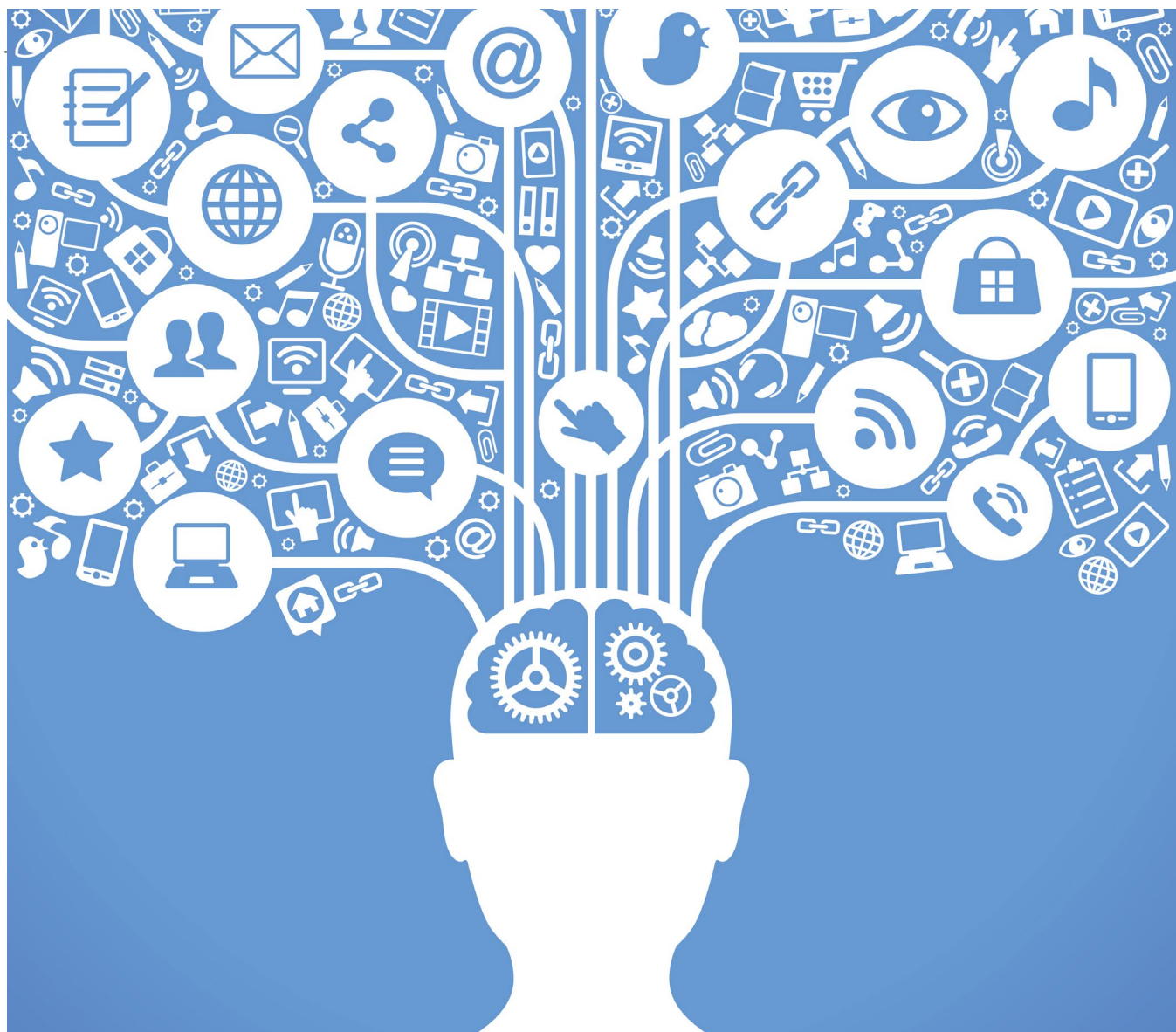
In an era of molecular testing, genomic analysis, and personalized medicine, the “molecular tumor board” is emerging as a

way to get input from additional members of an expanded multidisciplinary team that includes experts in the field of molecular pathology, bioinformatics, tumor genetics, and basic science research. These discussions can help guide oncologists in clinical decision-making as they interpret results from genetic mutation panels. Some cancer programs are reserving comprehensive biomarker testing for patients who have not responded to first- or second-line therapies; others are instituting molecular tumor board discussions about patients even before first-line therapies are selected to see if patients should be referred for clinical trials. Key considerations: the patient’s ability to enroll and access clinical trials, the patient’s level of interest in participating in clinical trials, and the cancer program’s ability to interpret molecular test results and make appropriate treatment recommendations.

### **Personalized Medicine**

Personalized medicine in oncology has been defined as “the use of molecular diagnostics and genome analysis to select targeted therapies designed to treat cancer.” Some refer to this as “precision” medicine; others call this “genomic” personalized medicine.

- *Targeting treatments with precision.* Predictive biomarkers are being used to identify cancer patients who may respond to certain targeted therapies or to identify patients who may be resistant to other therapies. This allows oncologists to focus their treatment strategies by using drugs that have been approved by the FDA based on biomarker test results or companion diagnostic studies.



- **The key role of biopsy.** To perform highly-specialized molecular testing on cancer biopsy samples, pathology labs must have adequate tissue. This continues to be a major challenge in the community setting because many physicians performing diagnostic biopsies are still only obtaining enough tissue to establish a diagnosis and are not getting extra tissue for molecular mutation testing. To further complicate matters, health insurance companies do not always reimburse for certain mutation tests.
- **Academic partnerships.** Community cancer programs are forming collaborations with academic research centers so that they can gain access to experts

trained in tumor genetics, translational science, and bioinformatics. These discussions are providing guidance around molecular test result interpretation, care pathways, clinical trial recruitment, and much more.

- **Big data analytics.** Some academic research centers are even exploring the use of supercomputers like IBM Watson to analyze data and outline a personalized approach to treatment. One example is the Memorial Sloan Kettering-IBM Watson Collaboration where oncologists are working with Watson to go through massive quantities of clinical data and published research to form actionable pathways for certain cancers. The New York Genome Center (NYGC) IBM Watson

collaboration is looking at ways to leverage genomic research as a tool to help oncologists accelerate how they may more effectively deliver personalized care to patients with brain tumors.

As the landscape of oncology practice evolves, ACCC continues to develop innovative ways for its members to openly share ideas and have dialogues about creative ways they are addressing these key topics and ideas for future improvements. Read more on these Think Tanks at: [www.accc-cancer.org/acccbuzz-thinktank](http://www.accc-cancer.org/acccbuzz-thinktank). 