## **Acting Our Way Into New Thinking**

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alue-based payment reform is fast becoming a reality for cancer programs and oncology practices. Whether by participating in the Centers for Medicare

& Medicaid Services' Oncology Care Model or through implementation of MACRA (Medicare Access and CHIP Reauthorization Act of 2015) and its Merit-Based Incentive Payment System (MIPS), ACCC members are in the midst of defining value in cancer care and transforming practice patterns to improve care delivery, meet quality metrics, and contain costs. These efforts can seem daunting. One of the greatest challenges is effecting cultural change to transition to value-based care.

The cultural shift in value-based care requires us to think differently—not only about how care is given, but also about who delivers that care. It may mean flexible staff scheduling to accommodate extended hours. It may require the expanded use of advanced practice clinicians or novel partnerships with primary care providers (PCPs). It may require new technologies, algorithms, and decisionmaking tools. It may mean that work traditionally performed by physicians be shared with other members of the healthcare team.

In his article "Changing the Way We Change," Richard Pascale notes, "The problem is that the whole burden of change typically rests on so few people." Pascale makes the case that we must engage all stakeholders to address challenges, maintain involvement in change processes, and sustain new behaviors in order to "act our way into a new way of thinking rather than think our way into a new way of acting." In other words, the actions of the team can change the thinking (culture) of the team.

And cancer care teams can do this! Oncology has a strong tradition of collaboration among the many disciplines that provide cancer care. Moreover, ACCC has a strong tradition of sharing best practices, providing education, and promoting dialogue between all members of the multidisciplinary team. The Association's online forum ACCCExchange, the Financial Advocacy Network (FAN), the Institute for Clinical Immuno-Oncology (ICLIO), and National Oncology Conference are just a few examples of the robust foundational resources ACCC offers its members for peer-to-peer learning.

The recently launched ACCC OCM Collaborative (accc-cancer.org/OCM) will do the same for practices participating in the CMS Oncology Care Model. Learn more about this new initiative on page 6.

Another new ACCC education project—Achieving Excellence in Patient-Centered Care—dovetails nicely with my President's Theme: "Empowering Patients, Engaging Providers" and looks to help cancer programs and oncology practices focus on patients' perspectives of value.

With these resources, ACCC is actively supporting the oncology community as we "act our way into the new thinking" of value-based care.

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