

spotlight

Highlands Oncology Group Fayetteville, Arkansas



Although smoking rates have steadily decreased nationwide in recent years, Arkansas remains home to a disproportionately high number of smokers. Though smoking among U.S. adults has fallen to 14 percent, it stands at more than 22 percent in Arkansas, which ranks 47th in adult smoking prevalence among U.S. states.¹ That trend has taken its toll; in 2017, nearly 34 percent of deaths in Arkansas were attributable to smoking.²

Waging a Proactive Fight Against Cancer

“The high percentage of adults who smoke in this region has added significantly to the prevalence of lung cancer in the population we serve,” says Jeff Hunnicutt, CEO of Highlands Oncology Group, a large multisite private practice with four locations in northwest Arkansas. As a participant in the Centers for Medicare and Medicaid Services Oncology Care Model, Highlands has implemented enhanced services for its patients to improve care coordination, promote patient navigation, and uphold national treatment guidelines.

As part of those efforts, Highland’s leadership has committed to proactively addressing the consequences of Arkansas’ high smoking rate with its Center for Chest Care. Established in 1999, the center was the first community-based, multidisciplinary chest cancer clinic in the United States. The clinic employs a staff of seven—including a team of oncologists and radiologists—who work with the community to identify, diagnose, and treat those at high risk of cancers of the lungs and chest.

The center launched a patient screening initiative in 2013 to detect early-stage lung cancer in the community. The program—based on the screening criteria created by the U.S. Preventive Services Task Force in 2014—offers no-cost, low-dose computed tomography scans to community members who have risk factors for lung cancer related to their smoking status and age.

“Our lung cancer screening program is a very unique offering to our patient population,” says Hunnicutt. “There are few programs in community oncology or the hospital academic setting that employ this model with a dedicated program such as ours.” Hunnicutt says that the goal of Highlands’ Center for Chest Care is to detect lung cancer at stage I or stage II, before patients exhibit any symptoms. Nationwide, only 16 percent of lung cancers are diagnosed while the tumor is still in its earliest stages of growth.³

Within the last three years, Highlands Oncology Group has detected lung cancer in 137 individuals through its free screening, of which 94 percent were at stage I or stage II—dramatically increasing the chances of survival for those individuals. “No other program that I know of is as successful in the number of patients screened annually,” says Hunnicutt, “or with the number of oncology diagnoses that are made from screening.”

Identifying and Meeting Patient Needs

Highlands Oncology Group’s four clinical sites employ 400 staff members who collectively see nearly 6,000 patients each year. Among the staff are 11 medical

oncologists, three radiation oncologists, two supportive care physicians, two surgeons, four social workers, two physical therapists, two massage therapists, 52 registered nurses, and one genetic counselor—all directly employed by Highlands. Four oncology pharmacists work in two specialty pharmacies, and a third pharmacy is opening in 2020.

Hunnicutt says that the two largest sites—a 50,000-foot facility in Rogers, Arkansas, and a 20,000-foot facility in Fayetteville, Arkansas—offer multidisciplinary services for all major cancer types. Highlands also has a separate facility for surgical oncology—gynecological and colorectal—in addition to a building for the lung cancer screening program and the Center for Chest Care. Highlands’ oncologists work in offices that are arranged in a “hub model” that keeps them in close proximity, encouraging collaborative patient care. Oncologists also attend regular tumor boards to consult on treatment options for complex cases.

Highland’s two patient assistance representatives (or financial advocates) may also play a prominent role on a patient’s cancer care team. “When patients first come to us, we give them a survey to assess their needs outside of clinical care, including financial or spiritual concerns,” says Hunnicutt. “This gives us an opportunity to learn about any socioeconomic concerns they may have. If patients demonstrate a need for financial assistance, we refer them to our patient assistance representatives.” Those representatives work with individual patients to explore options that can help lessen their financial burden, including

co-pay assistance and drug replacement programs. Patient assistance representatives also work closely with local and regional nonprofits to help patients finance their nonclinical needs.

On-staff oncology social workers may provide supplemental assistance to patients struggling with medical expenses. Social workers are available to meet with patients before, during, or after treatment to address their emotional or financial needs. They can connect patients with resources that can help them better cope with their diagnoses and the circumstances that accompany them. If needed, social workers can also help patients with transportation, language interpretation, and tobacco cessation.


A Standout in Research and Community Activism

Highlands' robust clinical trials program further distinguishes it from similar practices. Hunnicutt says that the practice has maintained its research program for more than 20 years. Currently, the 22 employees of Highlands' clinical trials program are working with 120 patients enrolled in more than 80 trials that cover a variety of cancer diagnoses. Highlands is the only community phase I oncology clinical site in the state of Arkansas.

Finally, Highlands prides itself on the community outreach that has made it well known in the region. "The people in northwest Arkansas are very familiar with us," says Hunnicutt. "We participate in many of the community's cancer awareness and fundraising events. If there is a breast cancer fun run, we're there. If there is a prostate cancer awareness rally, we participate. Each time our community wants to educate people about cancer detection and care, we do our best to take part in it."

The Highlands Center for Chest Care takes an especially proactive approach in educating the community and referring providers to its free lung cancer screening services. "We take advantage of being invited to community events like those sponsored by Rotary Clubs, Kiwanis, and others," says Hunnicutt.

He adds that although the breadth of Highland's clinical services distinguishes it from other cancer practices, it is the depth of its commitment to its patients that is its

crowning achievement. "There are many unique pieces of Highlands Oncology that I feel separate us from other providers," says Hunnicutt, "but the biggest thing that stands out to me is the length our providers, managers, and staff go to in order to put the needs of the patient first in everything we do. You never have to look far to find a positive patient testimony about the level of care patients have received from our practice, and that makes my job as administrator so much more enjoyable." 

References

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