



Meeting the Challenges of Managed Care: Highlights of ACCC's Presidents' Retreat

To cite this article: (1996) Meeting the Challenges of Managed Care: Highlights of ACCC's Presidents' Retreat, *Oncology Issues*, 11:2, 28-28, DOI: [10.1080/10463356.1996.11904604](https://doi.org/10.1080/10463356.1996.11904604)

To link to this article: <https://doi.org/10.1080/10463356.1996.11904604>



Published online: 18 Oct 2017.



Submit your article to this journal [↗](#)



Article views: 1



View related articles [↗](#)

Meeting The Challenges of Managed Care: Highlights of ACCC's Presidents' Retreat

Oncology leaders from across the nation gathered at the fourth annual Oncology Presidents' Retreat, held in McLean, Va., February 2-3, 1996. The meeting was hosted by the Association of Community Cancer Centers and cosponsored by Ortho Biotech, Inc., and Glaxo Wellcome Oncology. In attendance were presidents from more than 35 state oncology societies; government, industry, and pharmaceutical representatives; and leaders from numerous national oncology organizations, including the American Cancer Society, the Oncology Nursing Society, the American Society of Clinical Oncology, the Assembly of Oncology/Hematology Administrators, the Council of Affiliated Regional Radiation Oncology Societies, the American Society for Therapeutic Radiology and Oncology, the Association of Oncology Social Work, the American Society of Hematology, the American College of Radiology, and the National Coalition for Cancer Survivorship (NCCS). Their goal was to discuss ways to address the challenges that providers and people with cancer are facing in obtaining access to care, services, specialists, and research trials in the new era of competitive health care. The program included sessions on how managed care will impact patient advocacy, public policy, oncology professionals, and oncology care guidelines.

"We must recognize the reality of the driving force in market-driven health care: the desire to control costs," said Ellen Stovall, NCCS Executive Director. "When determining whether to adopt the use of new medical treatment, managed care organizations...should also consider improvements in quality of life as well as improved survival. Too much emphasis is being placed

on short-term cost savings, including often arbitrary refusal by insurers to reimburse for patient care costs of clinical trials."

A number of participants, including Robert Wittes, M.D., of the National Cancer Institute, voiced concerns about current threats to the clinical trials' effort. "The presumption that clinical trials are expensive, and the presumption on the part of insurers and payers in general that although our research is important, someone else should pay for it, may threaten the generation of new information. It is a looming disaster, and to avoid it is a major project. A series of battles needs to be fought on a very broad front," said Wittes, who is director of NCI's Division of Cancer Treatment, Diagnosis, and Centers.

To win that battle, NCI has intensified its dialogue with HMOs and large insurance companies, including CHAMPUS, which insures members of the military and Department of Defense employees and their dependents. Recently NCI concluded an agreement with the Department of Defense that will make it possible for patients developing cancer within the DOD system to be evaluated outside the system—in a university hospital or community cancer center—for participation in phase II and III trials. "Up to 12,000 people who develop cancer each year are CHAMPUS eligible," noted Wittes. "With the right publicity, actual increases in



Robert Wittes, M.D., of the National Cancer Institute, (left) talks with ACCC Secretary James L. Wade, III, M.D., (center) and David K. King, M.D., F.A.C.P., chair of ACCC's Reimbursement Committee, at the Oncology Presidents' Retreat.

NCI accruals should be substantial."

MANAGED CARE IS HERE TO STAY

Attendees concurred that there is an enormous flow of population into managed care organizations. In 1995, 59 million Americans were in HMOs, and the numbers will continue to grow, especially as more and more senior beneficiaries move into HMOs.

To meet the challenges imposed by the spread of managed care, many participants expressed the need to channel provider and patient dissatisfaction with managed care plans directly to state and national legislators. Attendees also stressed the need for the oncology community to coordinate efforts among all disciplines in establishing standards of oncology care that highlight appropriate and timely referral patterns. "We must speak with a common voice," said Matthew Loscalzo, L.C.S.W.-C., president of the Association of Oncology Social Work. "We need to get our parallel orbits intersecting." ■