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Cary A. Present

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The Benefits of Oncology Network Participation

by Cary A. Present, M.D., F.A.C.P.

The oncology team is faced with a constantly changing environment within which to practice medicine. Tools and professional skills require continuous improvement and updating, while today's competitive realities demand greater efficiencies from medical practices. Networks are helping their members to meet these challenges as well as to create appropriate strategic and operational plans. Knowledge gained from network participation is allowing members to apply solutions to their own objectives based on others' experiences.

Network participation may offer a variety of benefits. Networks have allowed the oncology team to:

- Streamline and integrate delivery of clinical services with administrative business functions
- Better access clinical trials
- Enhance problem-solving and access to critical data for decision making
- Offer group purchasing contracts that acquire pharmaceuticals or supplies at reduced prices
- Enhance marketing.

In addition, practice management consultation is common within some networks, although it may be nonexistent in others. Many networks have developed practice guidelines that have helped in the management of patients. Within

Cary A. Present, M.D., F.A.C.P., is president of California Cancer Medical Center in West Covina, Calif., and chairman of the Los Angeles Oncologic Institute, Los Angeles, Calif.

many networks, ownership transition has been facilitated by membership in the network.

NETWORK STATUS AND LOCATION

Networks exist on multiple levels. Nationally, some organizations such as US Oncology have begun to acquire oncology practices and/or their management, while other organizations such as the International Oncology Network (ION) have attempted to form associations between oncology practices to enhance practice opportunities without actual acquisition of practice assets. On a state and regional basis, networks consist of state oncology societies (an example in my area is the Medical Oncology Association of Southern California, also known as MOASC). Local networks have been developed as well.

Individual cancer centers have formed their own networks, such as the University of Pennsylvania cancer center network and the Mayo Clinic cancer center network. Comprehensive cancer centers have developed networks, for example, the University of California, Los Angeles (UCLA) network in southern California. In addition, non-comprehensive centers have formed networks, such as the Southern California Oncology Research Program of the Los Angeles Oncologic Institute (SCORP/LAOI), which is centered at St. Vincent's Medical Center in Los Angeles.

Finally, a host of other national networks are available and growing, including cancer cooperative groups, the newly formed Coalition of National Cancer Cooperative Groups (CNCCG), associations of institutions (such as the National Comprehensive

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Cancer Center Network, or NCCN), and even the Association of Community Cancer Centers.

IS NETWORK MEMBERSHIP RIGHT FOR ME?

In deciding whether to join a network, a number of questions must be asked. First and foremost, rather than asking which network is best, ask *which network is best for an individual problem.* Since each network may have its own particular strengths and focus, multiple network memberships are quite common. Look at what you will have to give up in order to participate in a given network. Ask if joining a network precludes you from participating in some other organization. Finally, find out if joining means giving up control of your own practice in any way.

In my clinical practice, the California Cancer Medical Center, we belong to multiple networks. As a private practice, we are one of the first non-institutional members of the CNCCG. Our center is a member of ION. On a regional level, we are active in MOASC. And on a local level, we are a member of the SCORP/LAOI. In addition, we are members of ACCC (through our local hospital) and the Southwest Oncology Group (SWOG). Therefore, participation in multiple networks has afforded us advice from many organizations. At the same time, participation has given us the benefits of broader experience *before we make decisions on our own.* ■