

We are called to make a healthy difference in people's lives.

# Rural Oncology Care: Making it Work and Establishing Clinical Trials Networks

Daniel A. Nikcevich, MD/PhD  
Essentia Health Cancer Center  
Duluth, MN

October 27, 2023



**Essentia Health**

# Disclosures

I have no disclosures.





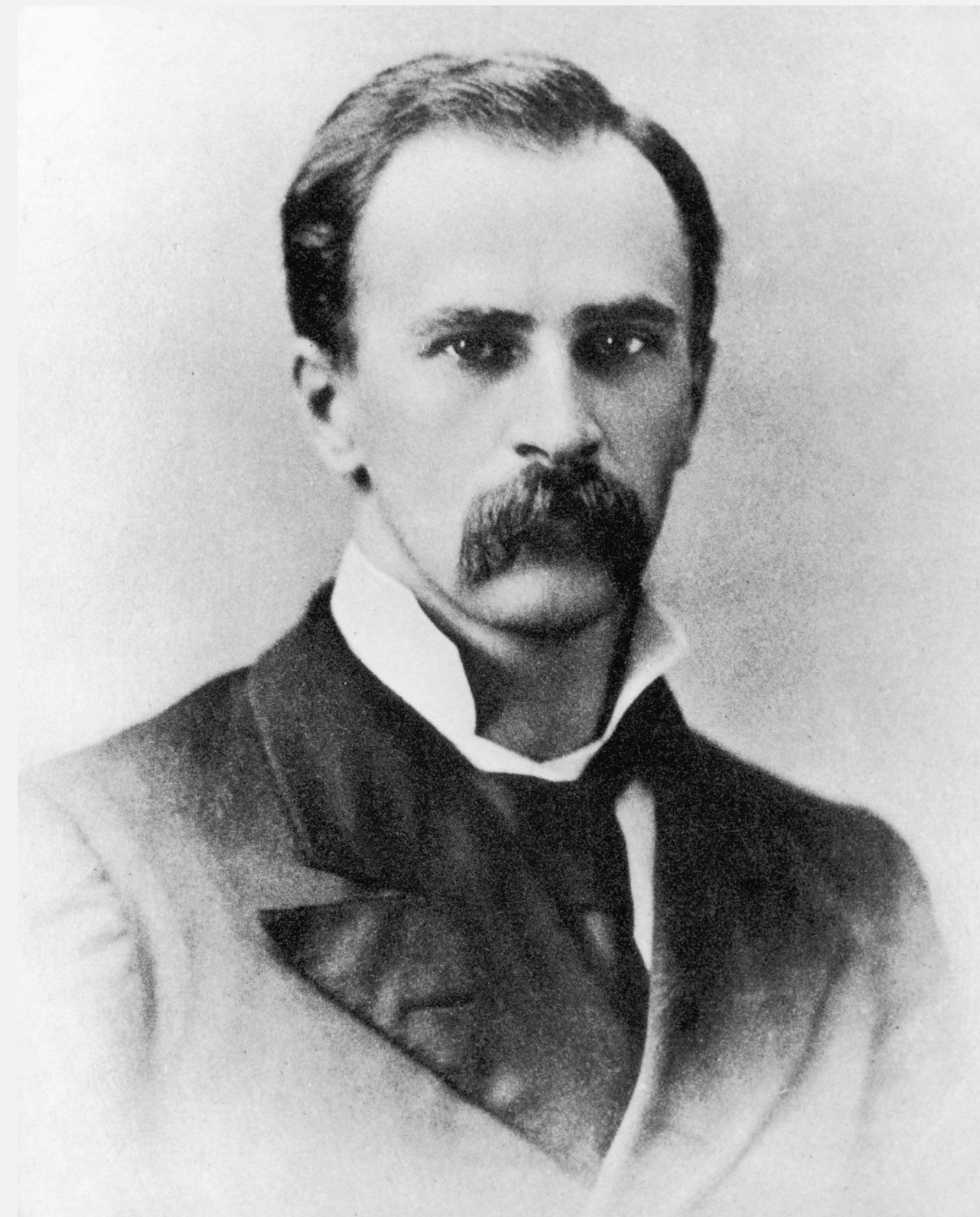
# My stance

- A patient never inconveniences a doctor.
  - Sir William Osler, MD (1849-1919)
- “. . . for the secret of the care of the patient is in caring for the patient.”
  - Francis Peabody, MD (1881-1927)
    - JAMA (1927) 88:877-882





Francis Peabody, MD



Sir William Osler, MD



We are called to make a healthy difference in people's lives.

# Essentia Health Overview



Essentia Health



# Our Mission

We are called to make a healthy difference in people's lives.



# Our Values

- Quality
- Hospitality
- Respect
- Joy
- Justice
- Stewardship
- Teamwork



# Benedictine heritage



Mother Scholastica Kerst and Sister Alexia Kerst founded St. Mary's Hospital in Duluth in 1888

We are a secular organization with several faith-based entities



St. Mary's Hospital, Oct. 1925



# Essentia's history

## Many organizations joined as one



St. Mary's Hospital



MEDICAL ASSOCIATES NORTH  
A Medical Service Corporation



smh  
superior memorial hospital



WHITE COMMUNITY HOSPITAL

5211 HIGHWAY 110 AURORA, MN 55705  
Phone: 218-229-2211





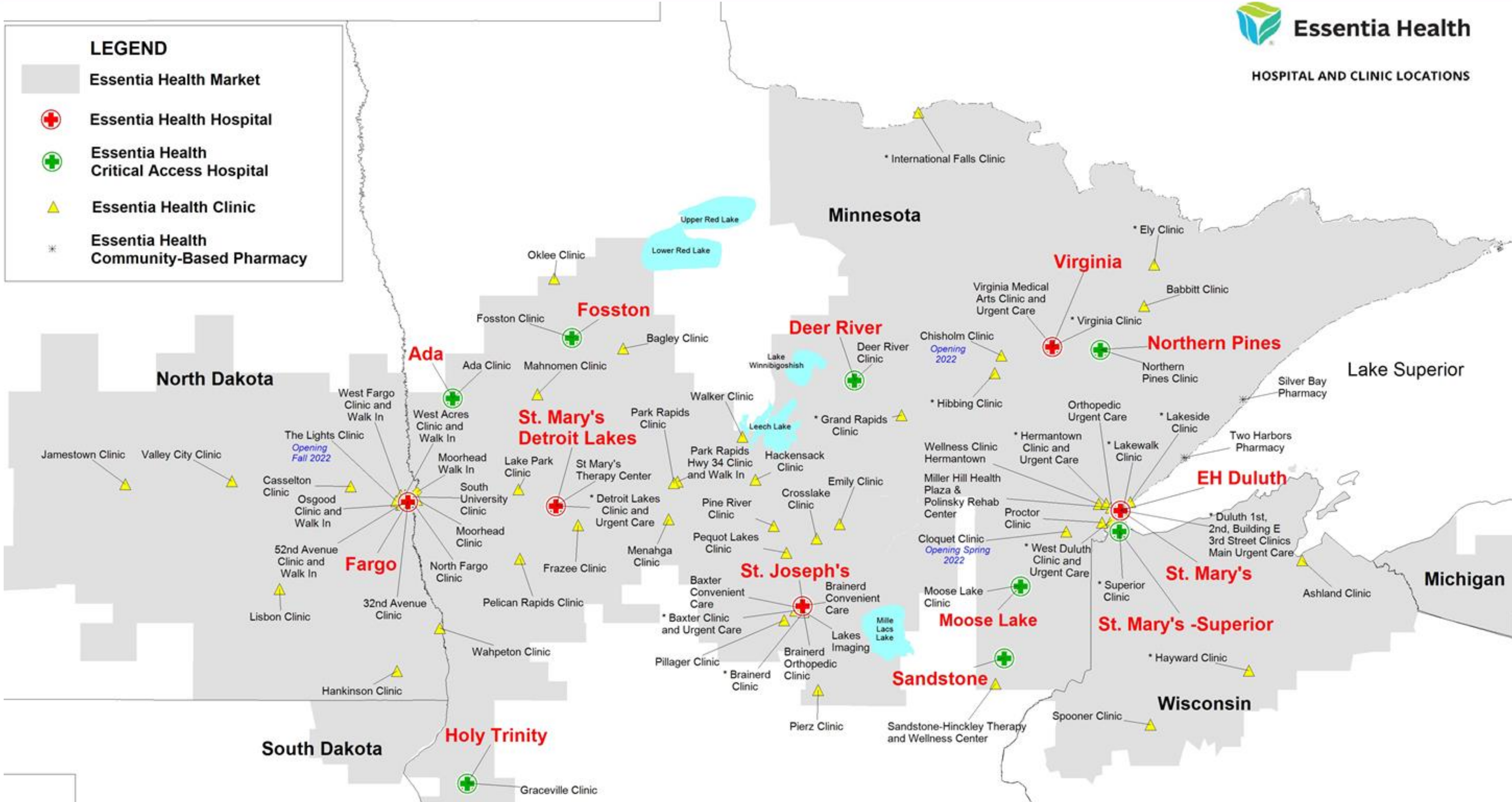
# Essentia Health



HOSPITAL AND CLINIC LOCATIONS

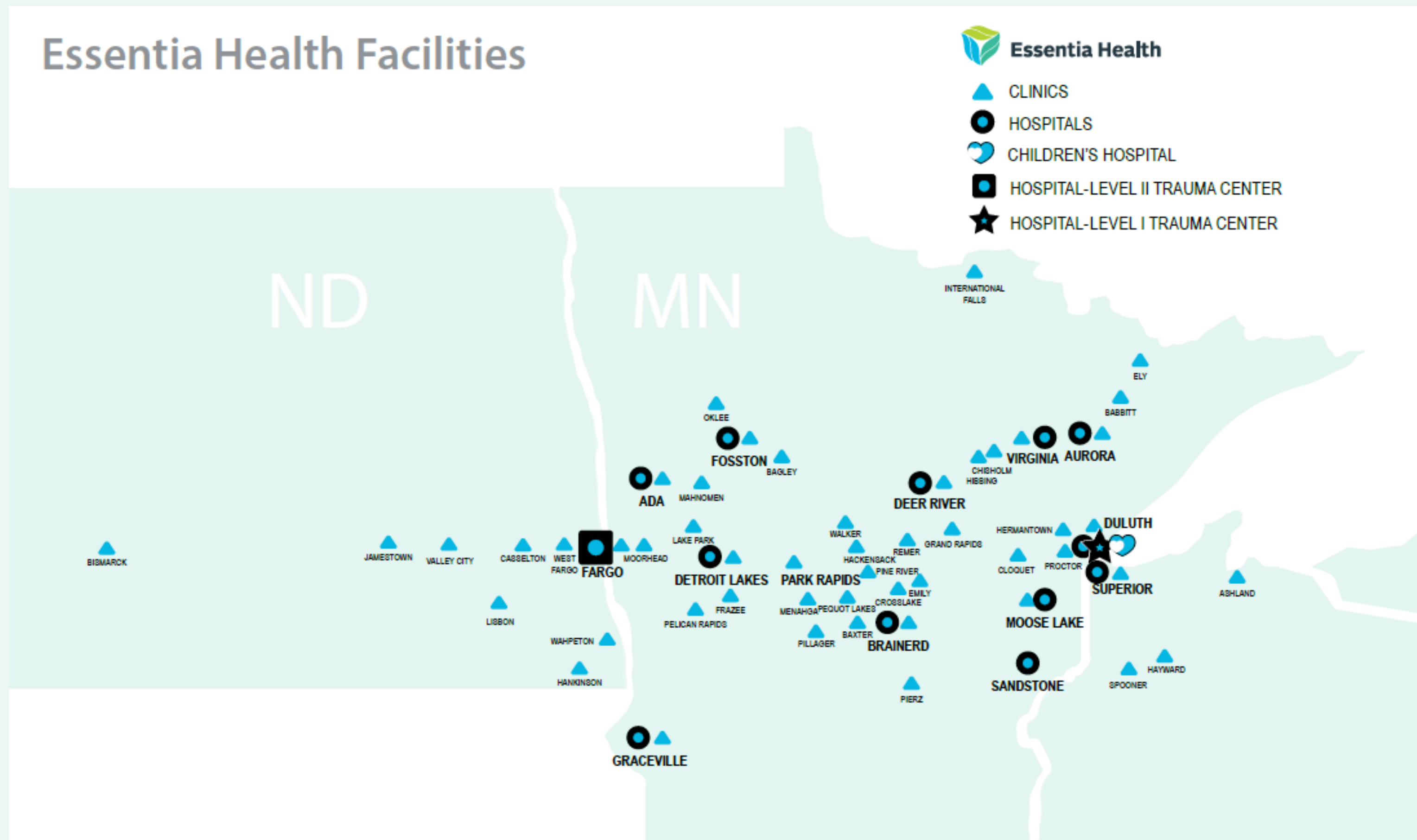
**LEGEND**

- Essentia Health Market
- Essentia Health Hospital
- Essentia Health Critical Access Hospital
- Essentia Health Clinic
- Essentia Health Community-Based Pharmacy





# Essentia Health at a glance



- **15,000** colleagues
- **14** hospitals
- **78** clinics
- **6** long-term care facilities
- **6** assisted living & independent care facilities
- **7** ambulance services
- **1** research institute



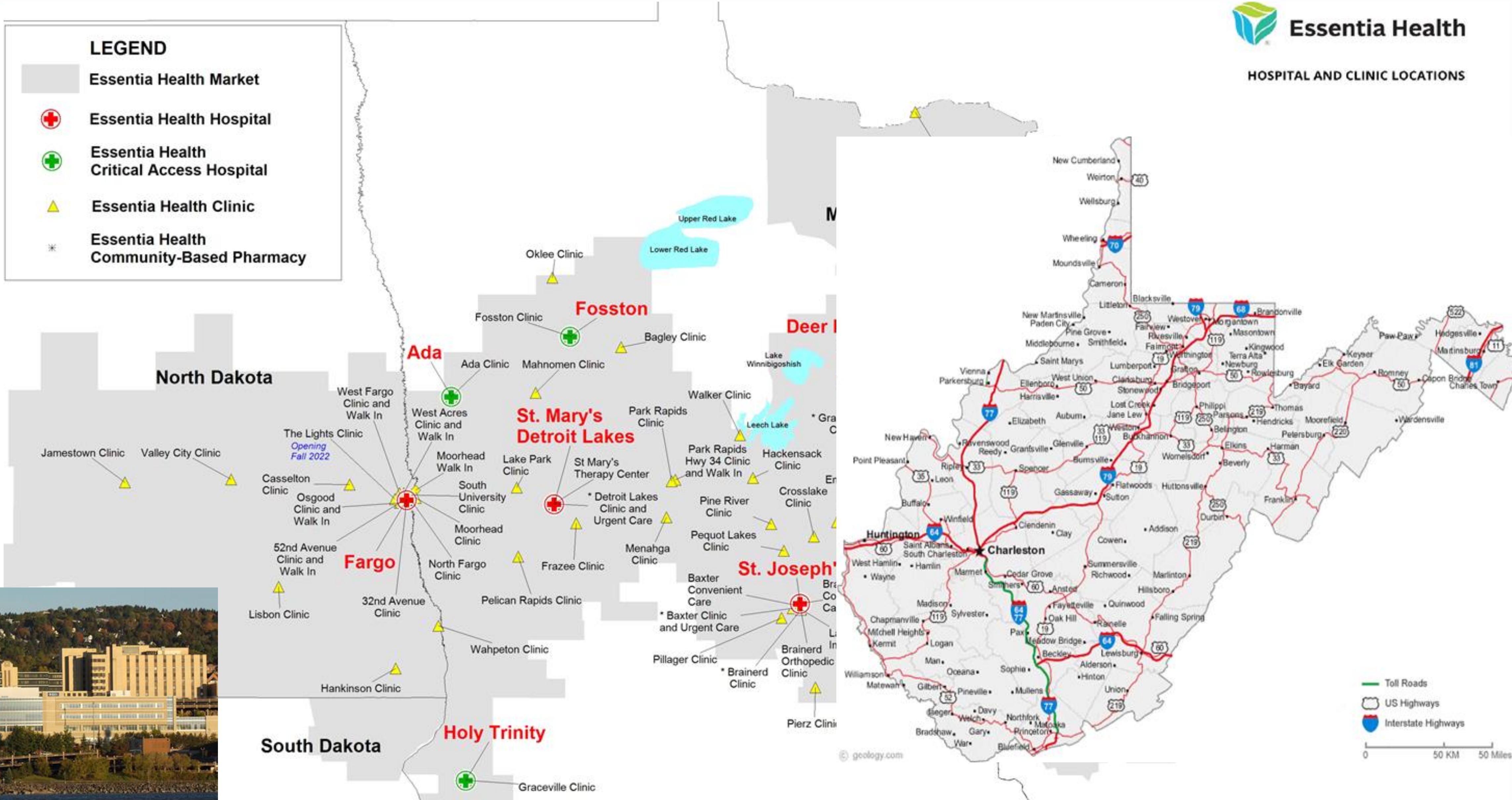
# Essentia Health



HOSPITAL AND CLINIC LOCATIONS

**LEGEND**

- Essentia Health Market
- Essentia Health Hospital
- Essentia Health Critical Access Hospital
- Essentia Health Clinic
- Essentia Health Community-Based Pharmacy





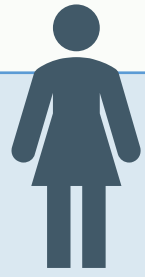




# Geography Fun Facts

- Estimated Square Mile Coverage
- East Market            31,258
  - Without Brainerd 25,000
- West Market            23,915
- Total Sq Miles           55,173
- West Virginia           24,034



# Essentia by the numbers

**FY22**  
(year ended  
6/30/2022)

	Unique Patients	603,938
	Total encounters	1,759,385
	Patient days	201,107
	Surgeries	43,114
	ED visits	159,920





# Quality recognition



2022 CMS Hospital Quality ratings:

St. Mary's Medical Center (Duluth) – **5 STARS**

Essentia Health-Duluth – **5 STARS**

Essentia Health-Fargo – **5 STARS**

St. Joseph's Medical Center (Brainerd) – **4 STARS**

St. Mary's Hospital (Detroit Lakes) – **4 STARS**



**St. Mary's Medical Center**

*Voted "Best Medical Facility" in Duluth News Tribune*



**Essentia Health-Fargo** voted "Best Medical Facility" in Fargo Forum



**St. Joseph's Medical Center** named Top 100 Rural & Community Hospital



# Demographics

## Eastern North Dakota/Northwestern Minnesota

- Median age: **38.4**
- Median household income: **\$58,404**
- Education
  - No high school diploma: 7%
  - High school graduates (or GED): 28%
  - Some college, no degree: 23%
  - Associate degree: 13%
  - Bachelor degree and above: 29%

## Northeastern Minnesota/Northwestern Wisconsin

- Median age: **43.6**
- Median household income: **\$48,919**
- Education
  - No high school diploma: 7%
  - High school graduates (or GED): 33%
  - Some college, no degree: 24%
  - Associate degree: 12%
  - Bachelor degree and above: 24%

## Central Minnesota/Brainerd Lakes Area

- Median age: **44.9**
- Median household income: **\$51,617**
- Education
  - No high school diploma: 8%
  - High school graduates (or GED): 34%
  - Some college, no degree: 25%
  - Associate degree: 12%
  - Bachelor degree and above: 21%

From 2018 presentation



# Integrated care, close to home



- Rural and mid-urban integrated care system
- Deep commitment to safety, quality and patient experience
- Support coordinated acute care, chronic disease management and preventive medicine
- Create healthier communities for those we are privileged to serve



# Essentia Health Cancer Center

- Oncology/Hematology
  - 12 physicians
  - 9 APCs
- Pediatric hem/onc
  - 3 physicians
- Rad onc
  - 6 physicians
- Surgical subspecialties
  - Breast and melanoma surgery
  - Colorectal surgery
  - Hepaticobiliary/pancreas and foregut surgery
  - Thoracic surgery
  - Genitourinary surgery
  - Gynecologic surgery
  - Head and Neck surgery
  - Neurosurgery cranio-spinal
  - Orthopedic oncology surgery
  - Interventional Radiology
- Cardio-oncology
- Palliative care and hospice
- Dedicated inpatient 32-bed service
- Basically, everything but transplant and cellular therapies.





# Essentia Health Cancer Center Volumes

- Approximately 3500 new analytic cancer cases annually
- Approximately 45,000 cancer center clinical encounters annually
- Approximately 44,000 infusion center visits annually

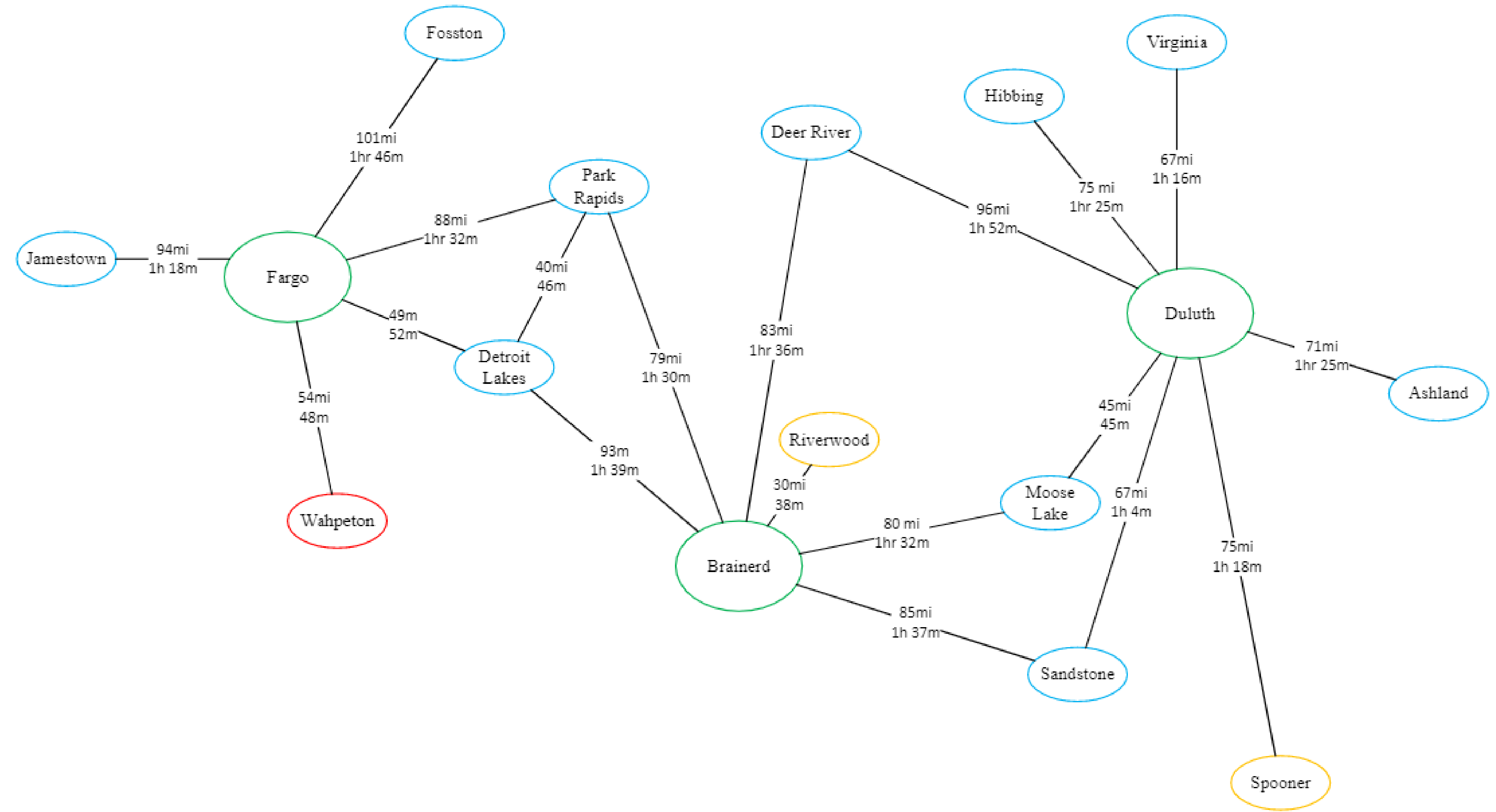


# Oncology Service Line Footprint





# Oncology Service Line Footprint





# History of Cancer Research at Essentia Health

1977 – Founding member of NCCTG - Duluth Clinic

1983 – NCI support awarded – CCOP

2006 – Pediatric clinical trials initiated – COG partnership with U of M

2010 – Essentia Central (Brainerd) initiates program

2011 – Essentia West (Fargo) initiates program

2014 – NCI support awarded – NCORP

2017 – EHCCRP – Duluth, Hibbing, Virginia, Ashland, Brainerd, Fargo, Fergus Falls, Aitken

2017 – MNCCTN Expands access to multiple small clinics

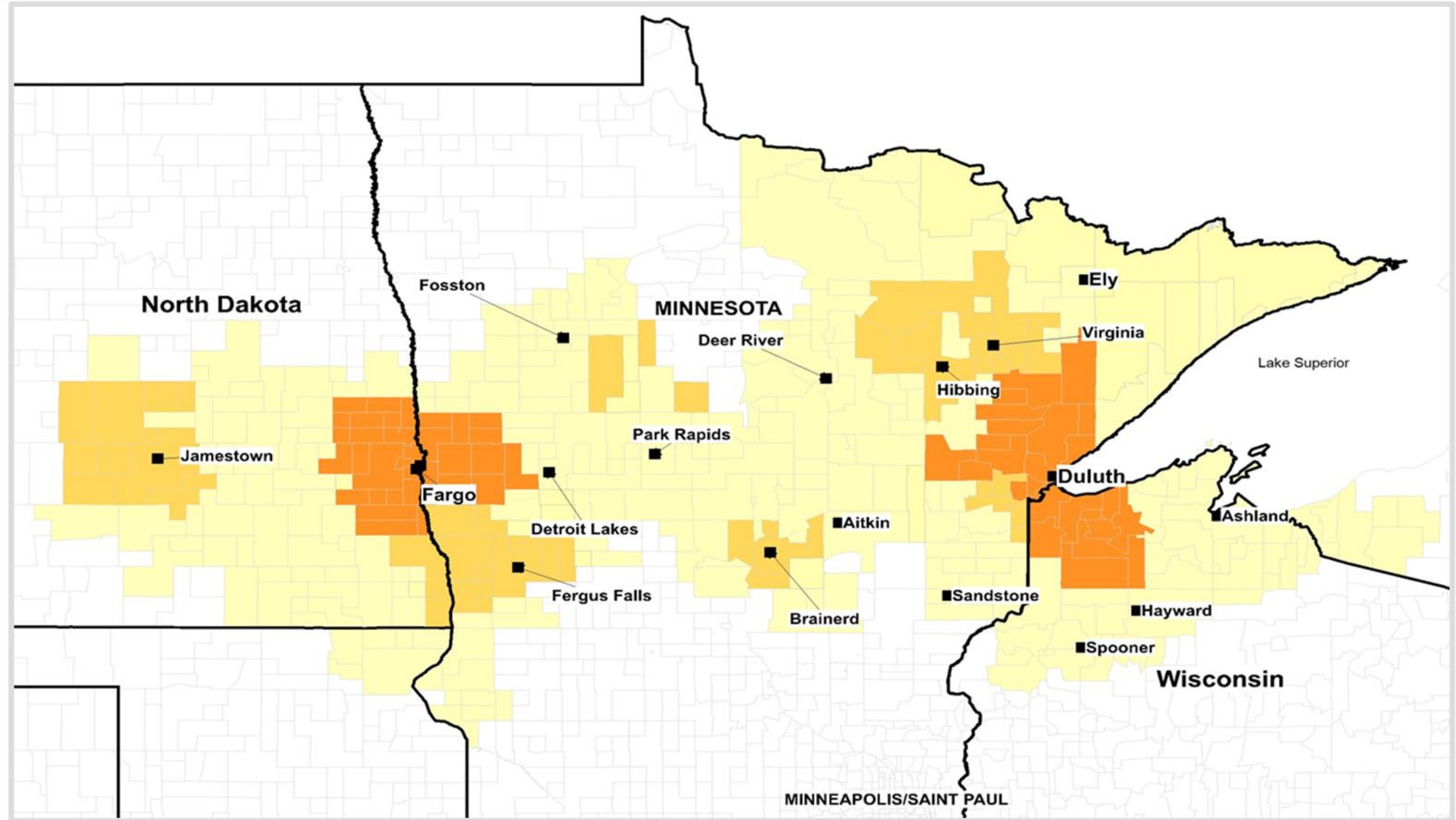
2019 – NCORP renewed



# Essentia Health Community Cancer Research Program

## Rural-Urban Commuting Area (RUCA)

- 1-3 Urban
- 4-6 Rural
- 7-10 Rural





We are called to make a healthy difference in people's lives.

# Essentia Health Community Cancer Research Program

## Approximately 60-80 ongoing clinical trials!

- **NCORP/NCTN**
- **COG**
- **MNCCTN**
- **Industry**
- **Investigator initiated**
- **Foundation**

### EHCCRP Trial Enrollments

2020: 838

2019: 630

2018: 501



A program of the National Cancer Institute  
of the National Institutes of Health



## Essentia Health







Masonic Cancer Center

## Minnesota Cancer Clinical Trials Network

About

Clinical Trials

**Partners and Locations**

For Patients

For Researchers

News

Media &

[Minnesota Cancer Clinical Trials Network](#)

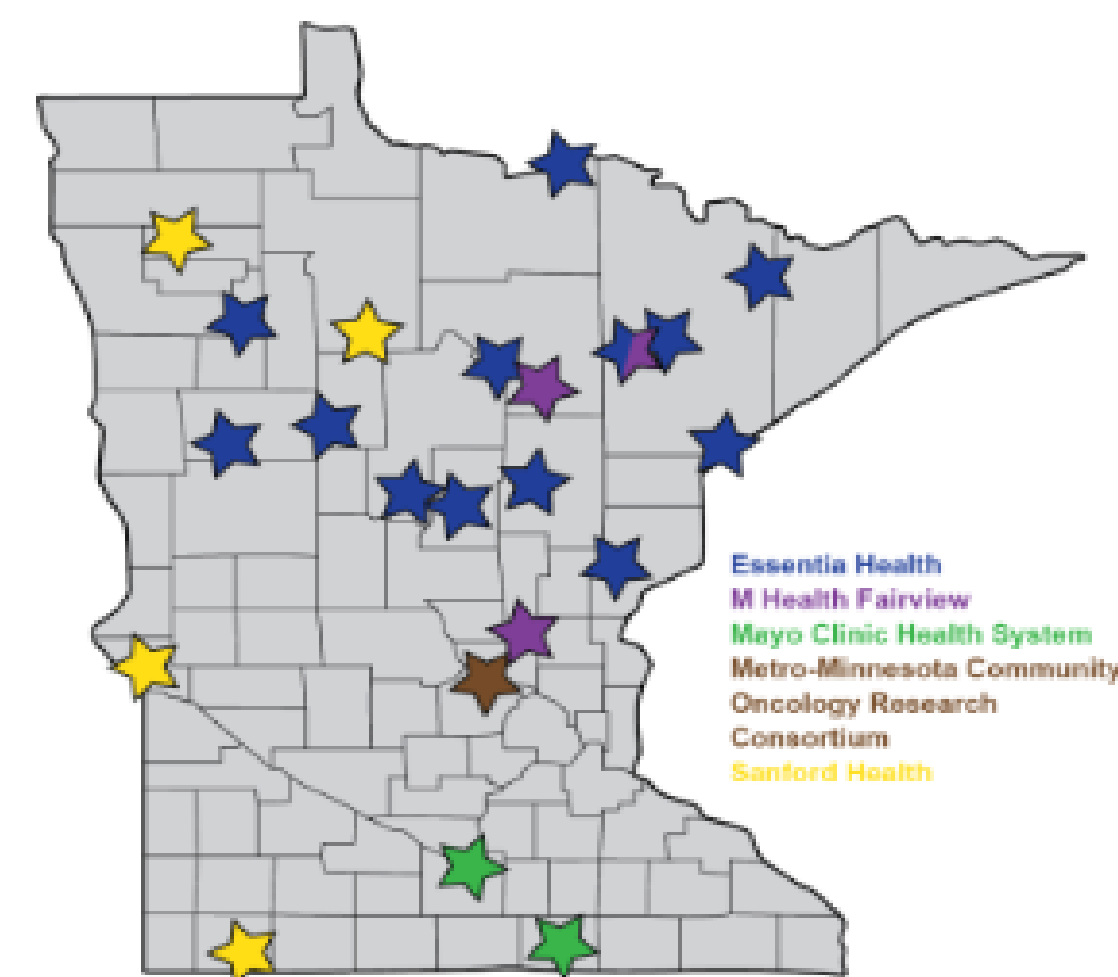
# Partners and Locations

## Providing Access Across Minnesota

MNCCTN is led by the Masonic Cancer Center, University of Minnesota and brings together healthcare organizations across the state. Together, we aim to improve cancer outcomes for all Minnesotans.

As of 2023, 23 site locations offer cancer clinical trials, with additional sites across the state to be added in the coming years.

Clinical trials originate from Minnesota's two NCI-Designated Comprehensive Cancer Centers, the Masonic Cancer Center and Mayo Clinic Cancer Center, along with the Hormel Institute in Austin.







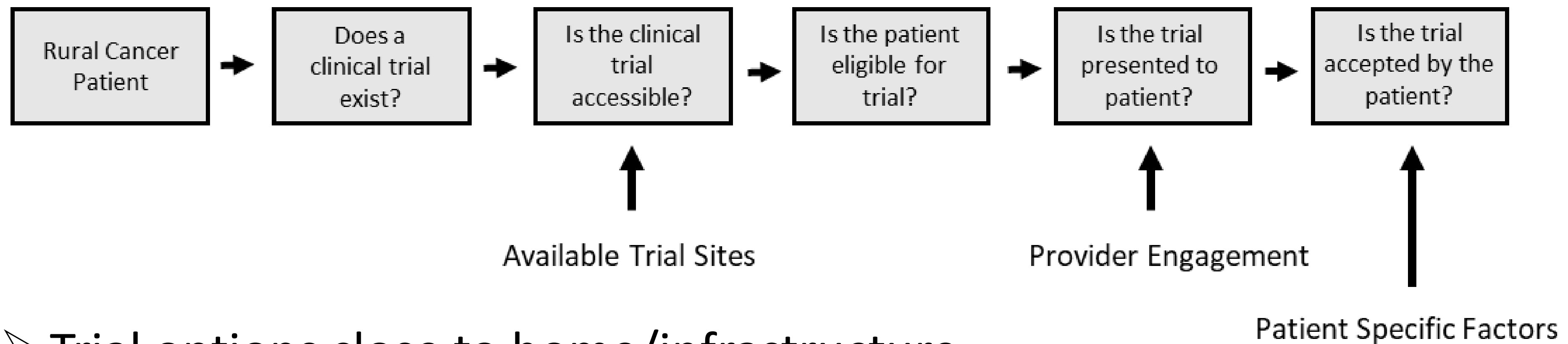
# How do we decide which studies to open?

- What is the science?
  - We emphasize NCTN trials via the Alliance and pharma studies via the AFT
- Do we see these patients?
- What are the infrastructure needs?
  - Patient travel
  - Pathology
  - Radiology
  - Radiation oncology
- What are the numbers?
  - Desire at least break-even



We are called to make a healthy difference in people's lives.

## EHCCRP - Maximizing Trial Accessibility



- Trial options close to home/infrastructure
- Rural friendly study procedures
- Involve local care teams
- Minimize disparities

Adapted from: Freyer and Seibel. Curr Ped Rep. 2015; 3:137-145.



**Essentia Health**







We are called to make a healthy difference in people's lives.

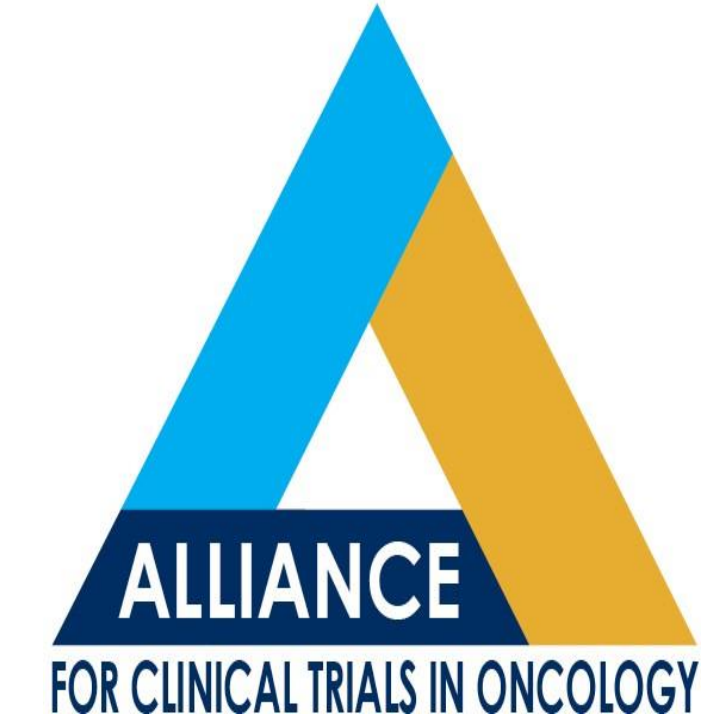
# Clinical trials in rural areas



**Essentia Health**



# Rural Health Subcommittee of Community Oncology



Daniel A. Nikcevich, MD, PhD  
Essential Health Cancer Center  
Duluth, MN

Nicole L. Stout, DPT, CLT-LANA  
West Virginia University Cancer Institute  
Morgantown, WV



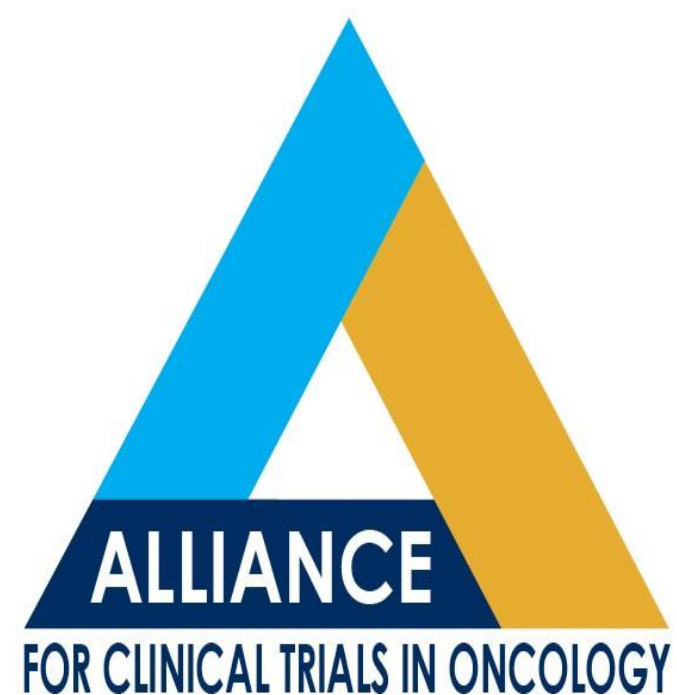
We are called to make a healthy difference in people's lives.

## Goals of the Rural Health Care Working Group

Support operations that increase patient and hospital access to cancer clinical trials.

Identified barriers to oncology clinical trial enrollment:

1. Institutional commitment.  
Infrastructure and resources not available to open clinical trials.
2. Practice commitment.
3. Tank of gas.
4. If top three addressed, then my main barrier is access to early phase studies or novel therapeutics.



**Essentia Health**

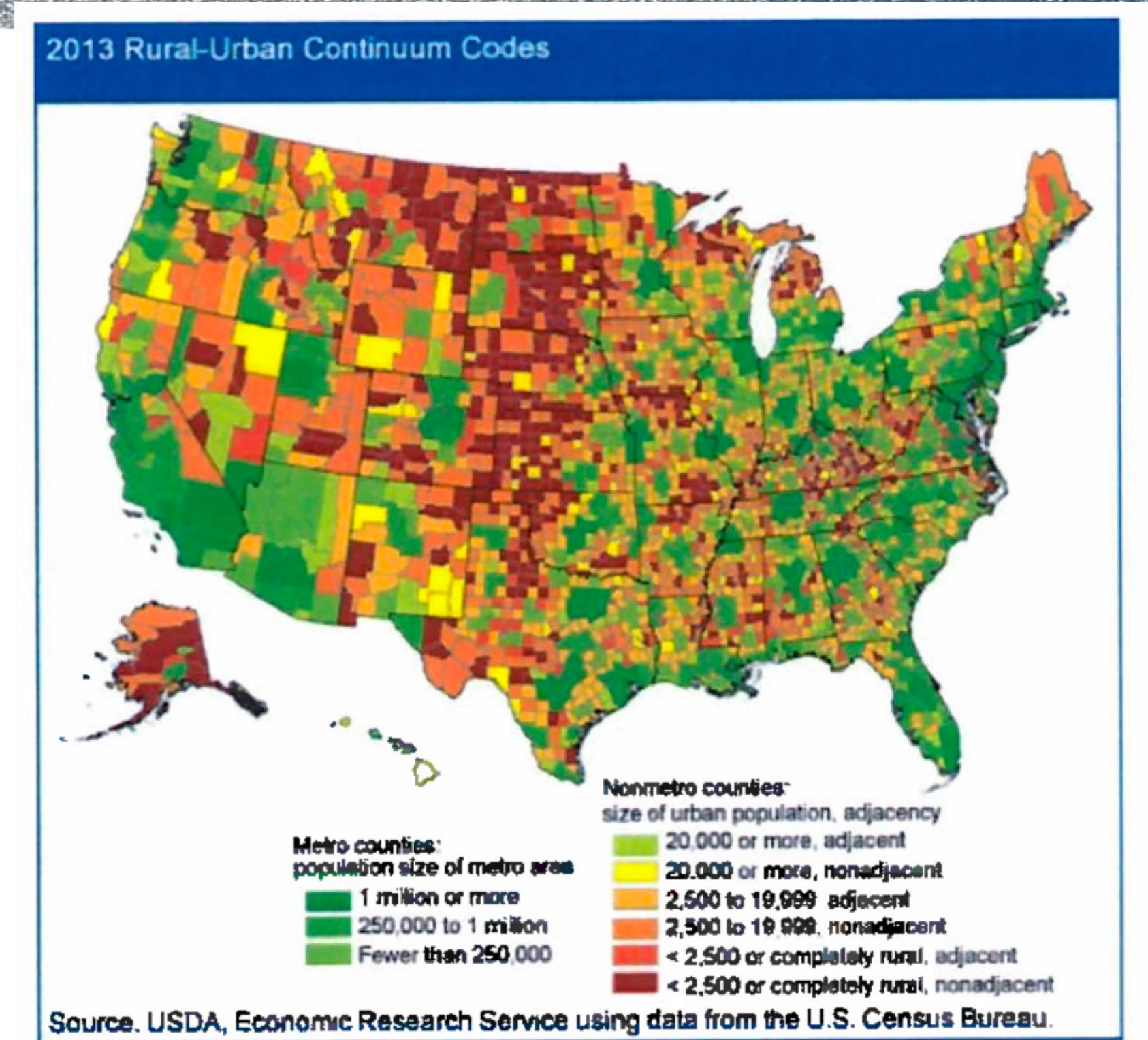




We are called to make a healthy difference in people's lives.

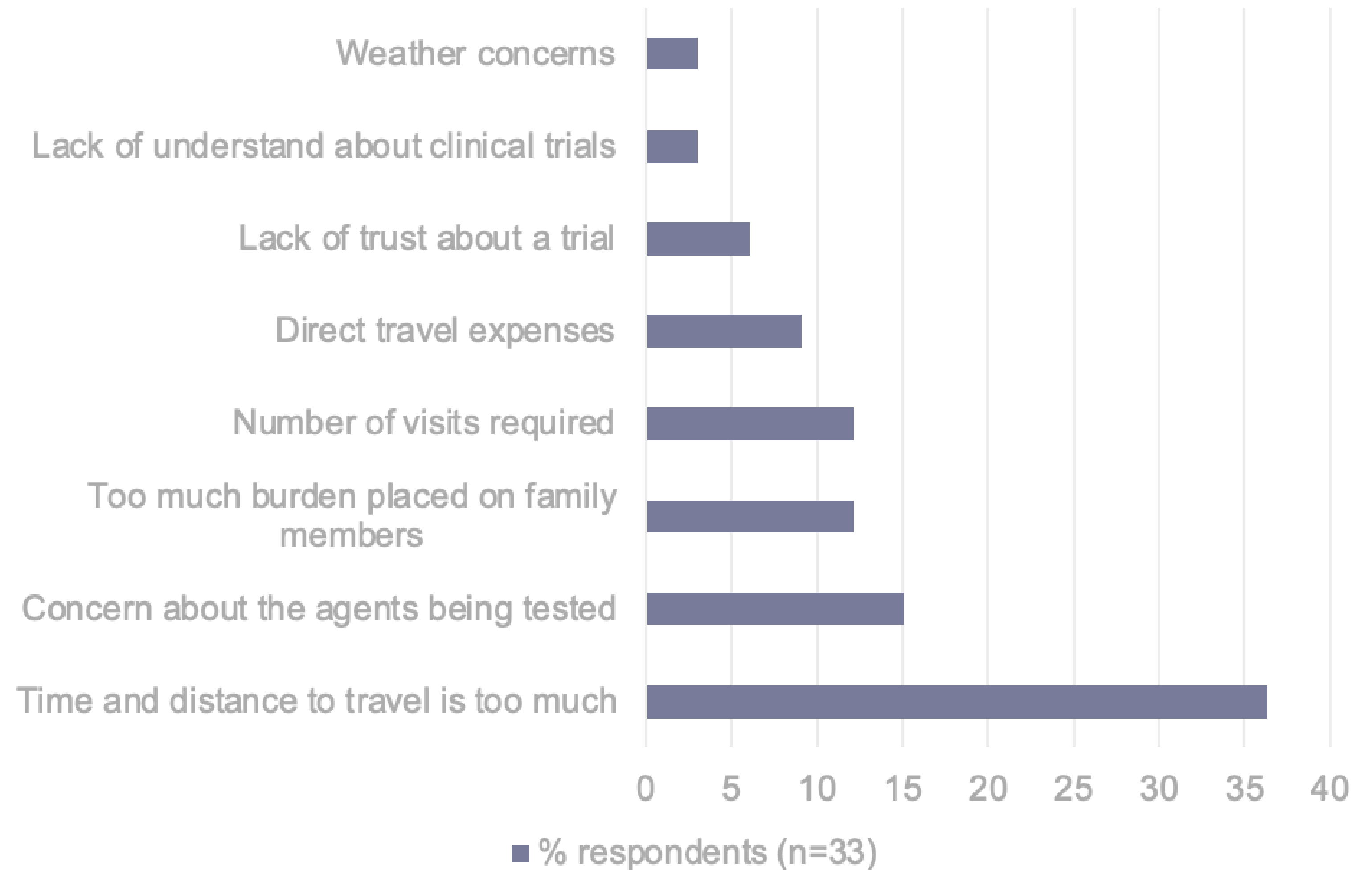
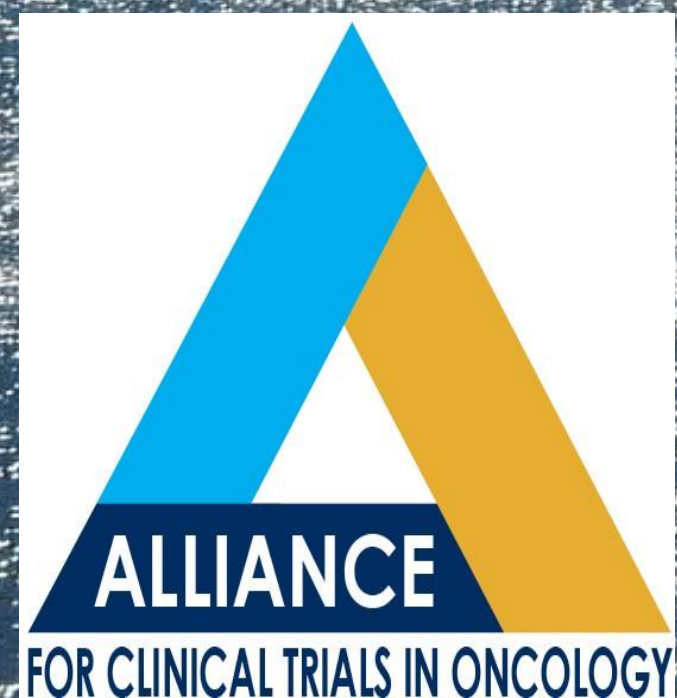
# RHWG Survey of Alliance Membership

- Survey developed to describe rural participation in clinical trials and sent in April 2021
  - Better understand impact of COVID-19 pandemic on participation
- Definition rural: US Department of Agriculture based on county of the clinical site
- Responses n=36



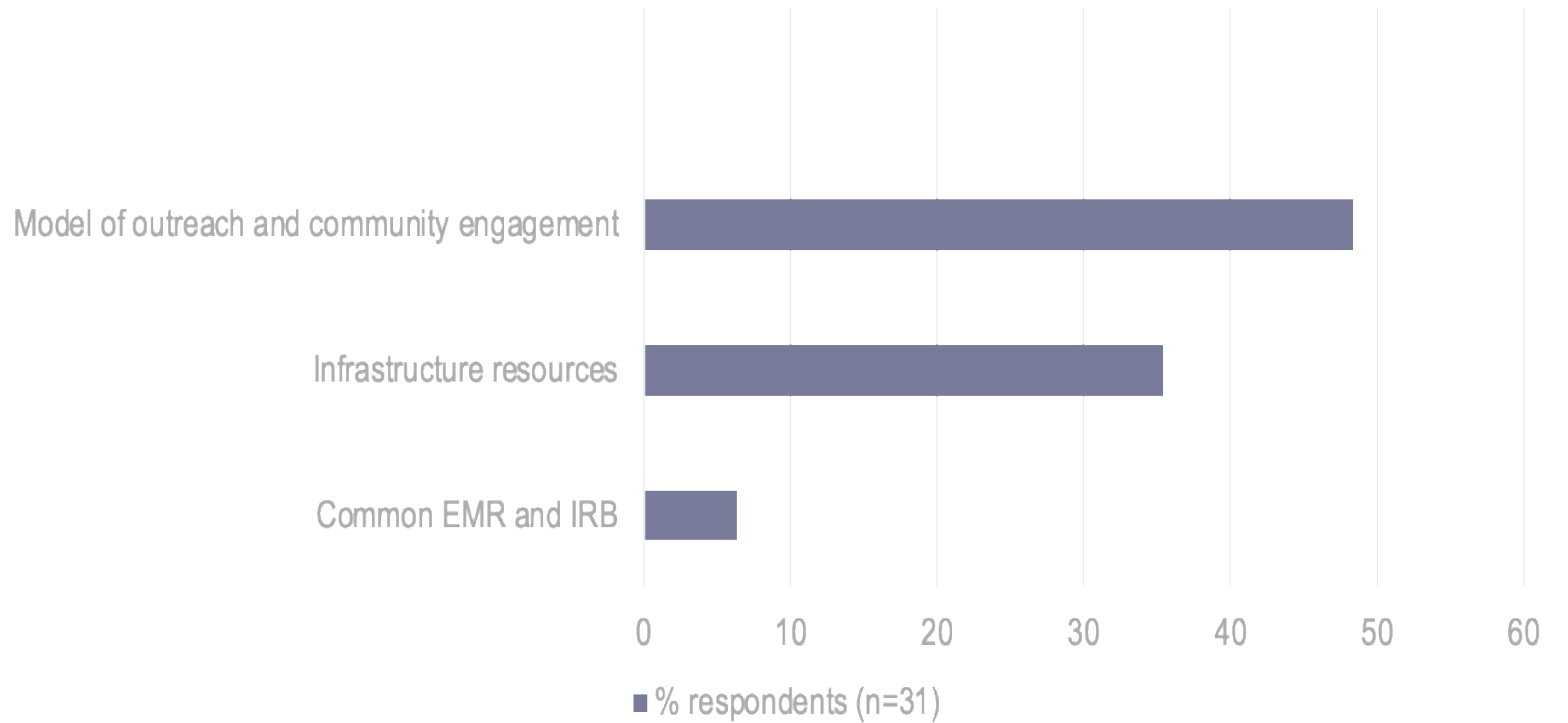
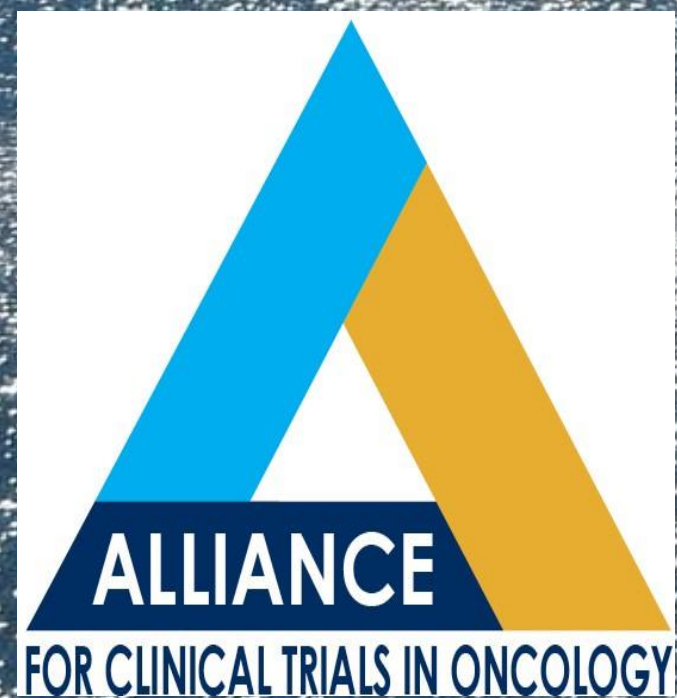


# Commonly Cited reasons rural patients decline participation





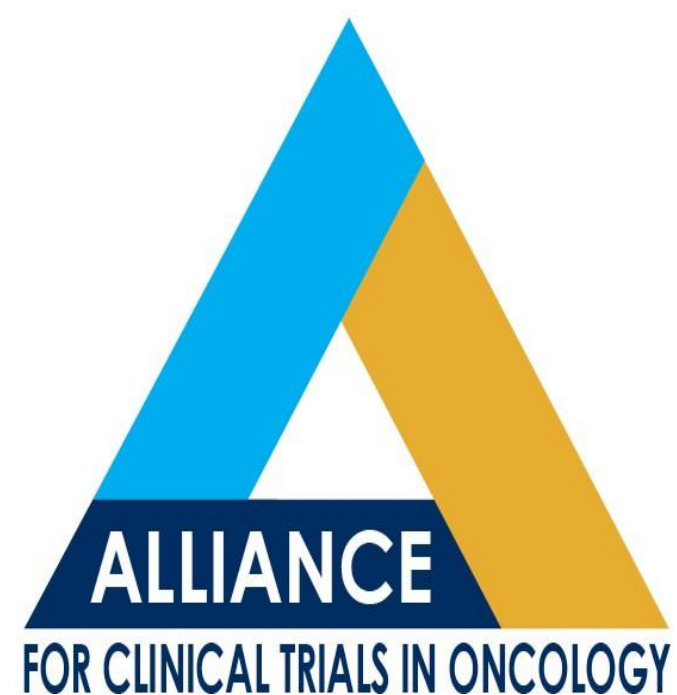
# Key drivers to rural clinical trial participation in your practice





We are called to make a healthy difference in people's lives.

# Rural Friendly Clinical Trial Design



**Essentia Health**

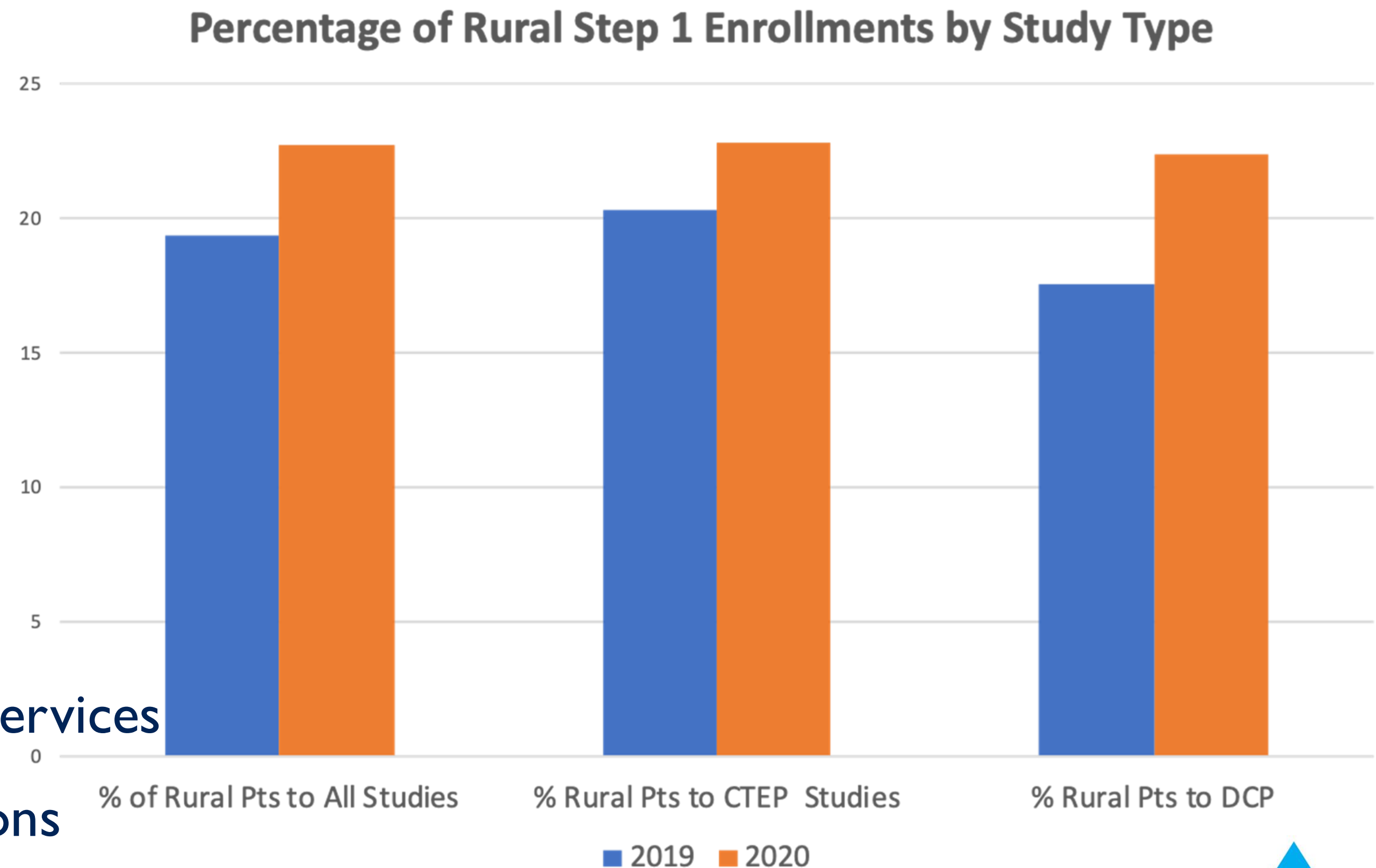




# Facilitators to Trial Availability

## Decentralized/Hybrid Study Procedures and Design

- Central IRB
- Remote consenting
- Telemedicine
- Central imaging review
- Remote trial site monitoring
- Local administration-standard therapy
- Budget for travel support- gas cards, transport services
- Audit committee: no increased protocol deviations



D. Nikcevich and N. Stout, Co-Chairs, Alliance Rural Health Sub-Committee





We are called to make a healthy difference in people's lives.

# Success stories: Deer River experience



**Essentia Health**





- Deer River, population 909
- Essentia Health CAH, clinic, and nursing home

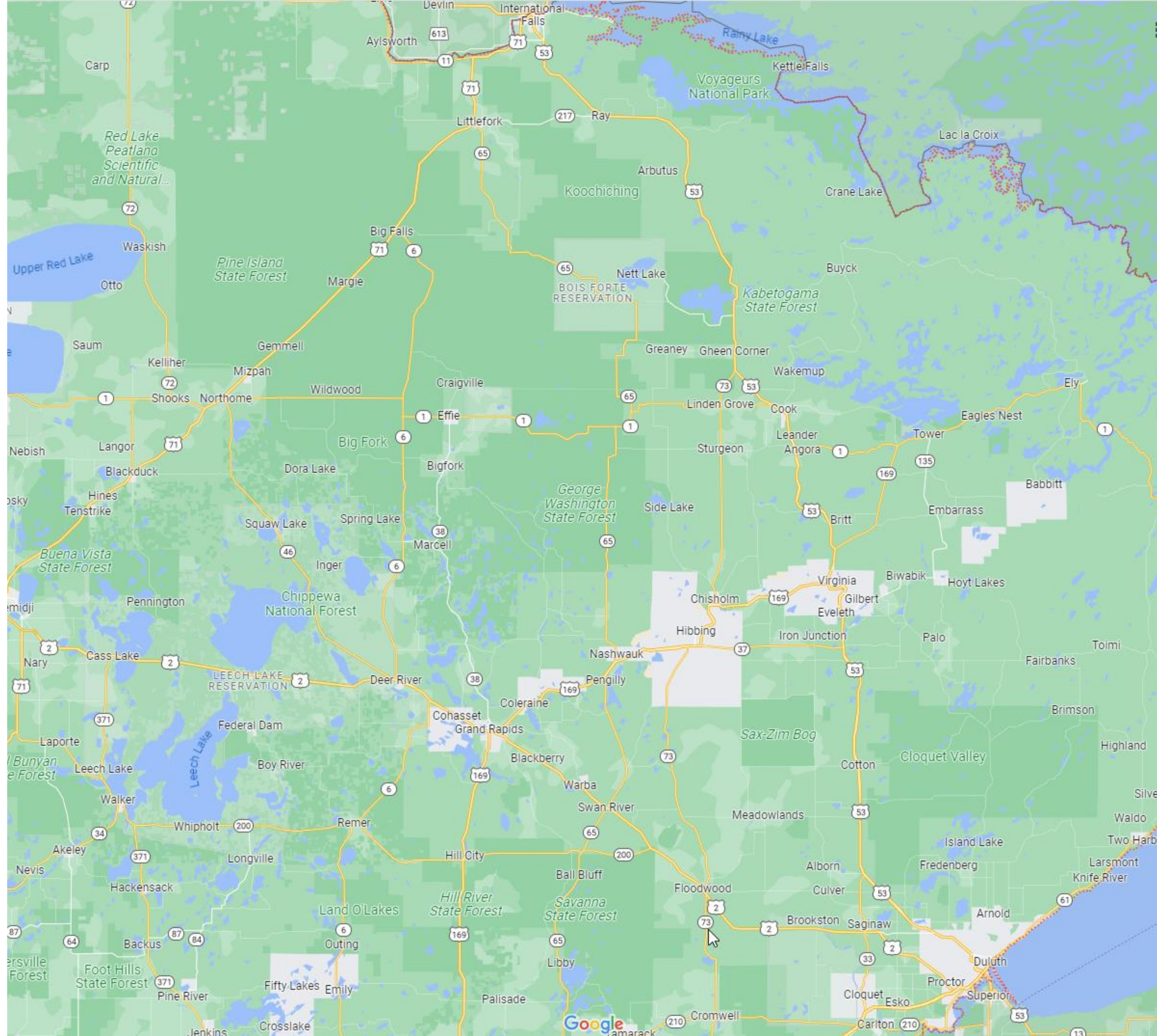




# Patient story

- 66 yo female from Effie, MN (Pop 123)









# Patient story

- 66 yo female from Effie, MN (Pop 123)
- Symptomatic with bulky lymphadenopathy
  - Excisional lymph node biopsy reveals mantle cell lymphoma
- Receives care in Deer River, MN (Pop 909)
- NCORP site
- Enrolled to EA4181

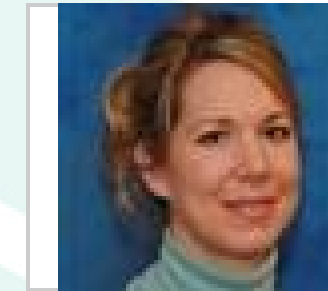


## Care Team:

- Dr. Nikcevich, MD/PhD hematology/oncology
- Jessica Lahti, PA hematology/oncology-  
(transitioned to new position)
- Mary Wilch, RN - infusion / regional oncology  
supervisor
- Angela Williams, RN - infusion
- Valerie White, RN - infusion
- Dakota Flohaug, RN – infusion
- Shirley Mattfield – huc – hematology/oncology
- Lori Reigel, LPN - hematology/oncology



Nikcevich, Daniel A.



Williams, Angela K.



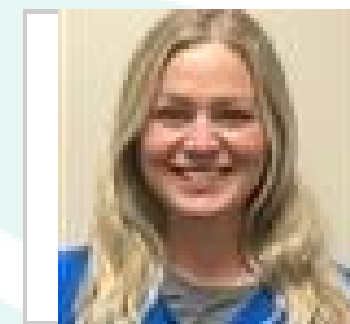
Lahti, Jessica M



White, Valerie



Mattfield, Shirley



Flohaug, Dakota



Reigel, Lori



Wilch, Mary



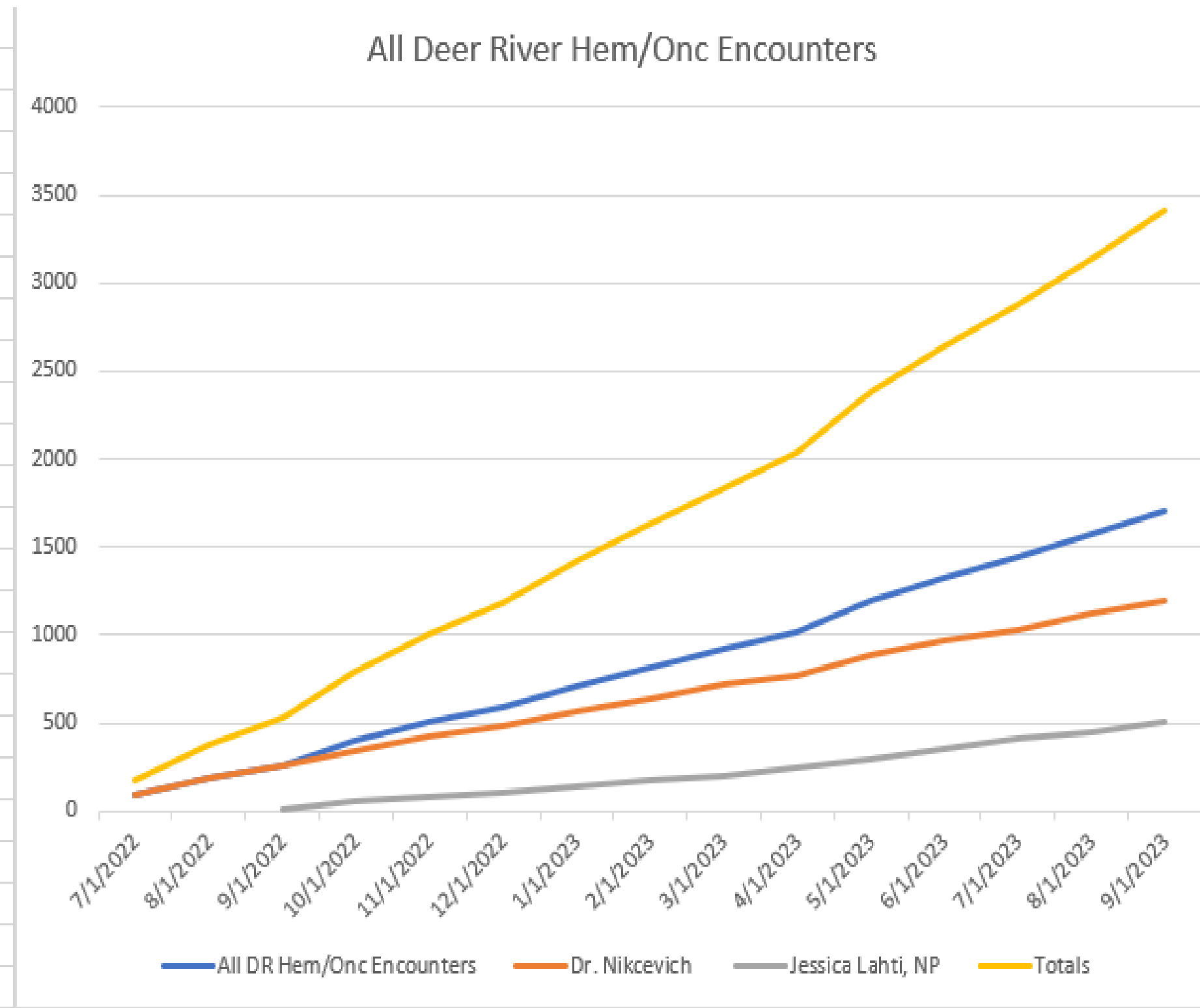
### Scope of Services:

- Deer River
  - Infusion Therapy
  - Clinical Trials
  - Lung Cancer Screening
  - Mammography
  - Imaging Services
    - CT, MRI, U/S
  - Surgery (limited biopsies and IV access)



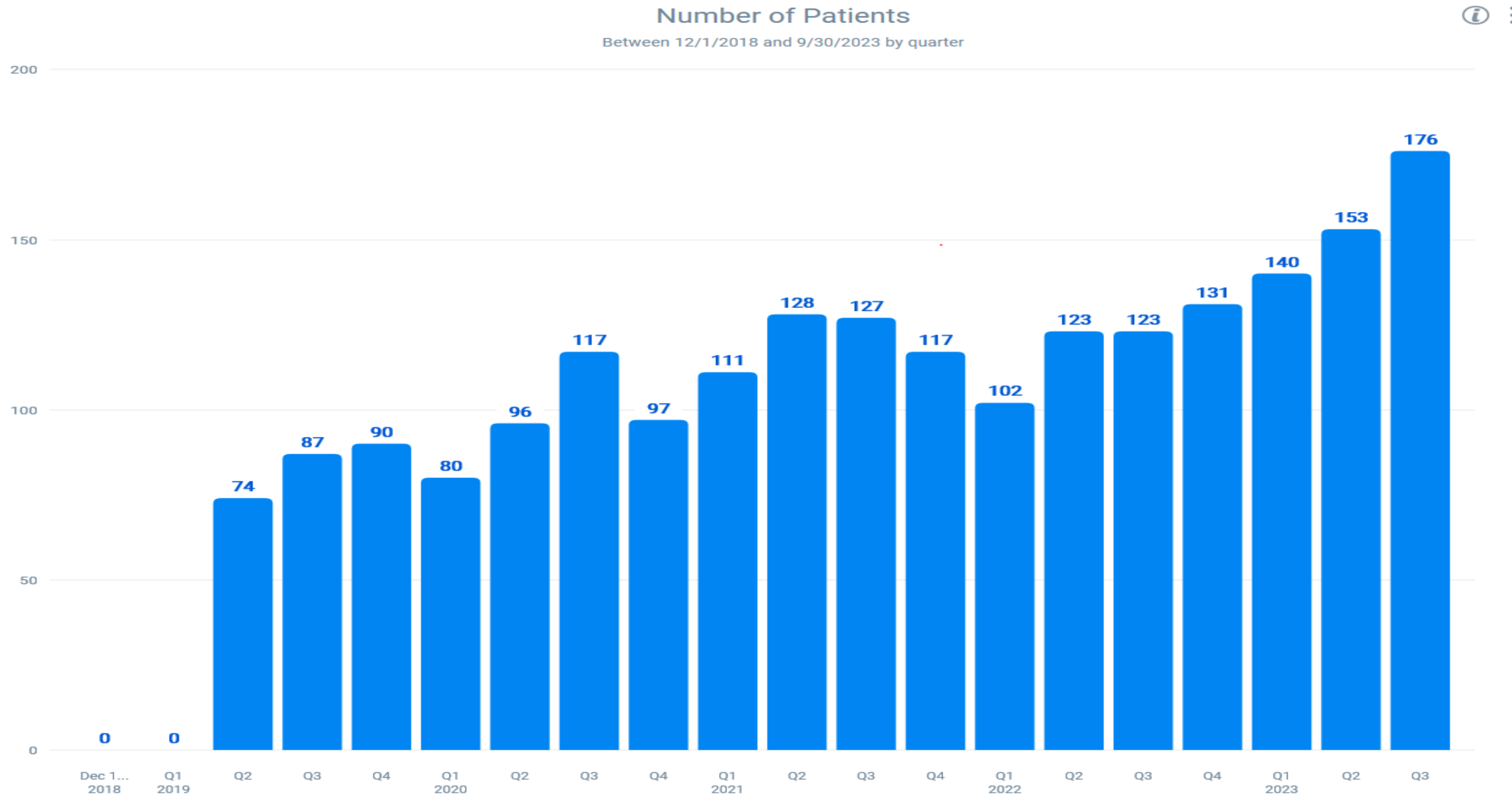
# Total Encounters Deer River 7/2022 – 9/2023

	All DR Hem/Onc Encounters	Dr. Nikcevich	Jessica Lahti	Totals
7/1/2022	86	86		172
8/1/2022	191	191		382
9/1/2022	263	252	11	526
10/1/2022	397	344	53	794
11/1/2022	502	419	83	1004
12/1/2022	589	482	107	1178
1/1/2023	712	568	144	1424
2/1/2023	816	639	177	1632
3/1/2023	919	715	204	1838
4/1/2023	1017	770	247	2034
5/1/2023	1189	892	297	2378
6/1/2023	1321	973	348	2642
7/1/2023	1439	1031	408	2878
8/1/2023	1572	1120	452	3144
9/1/2023	1707	1197	510	3414





# Deer River Infusion Center Unique Patients From Start of Program Dec 2018 – Sept 2023

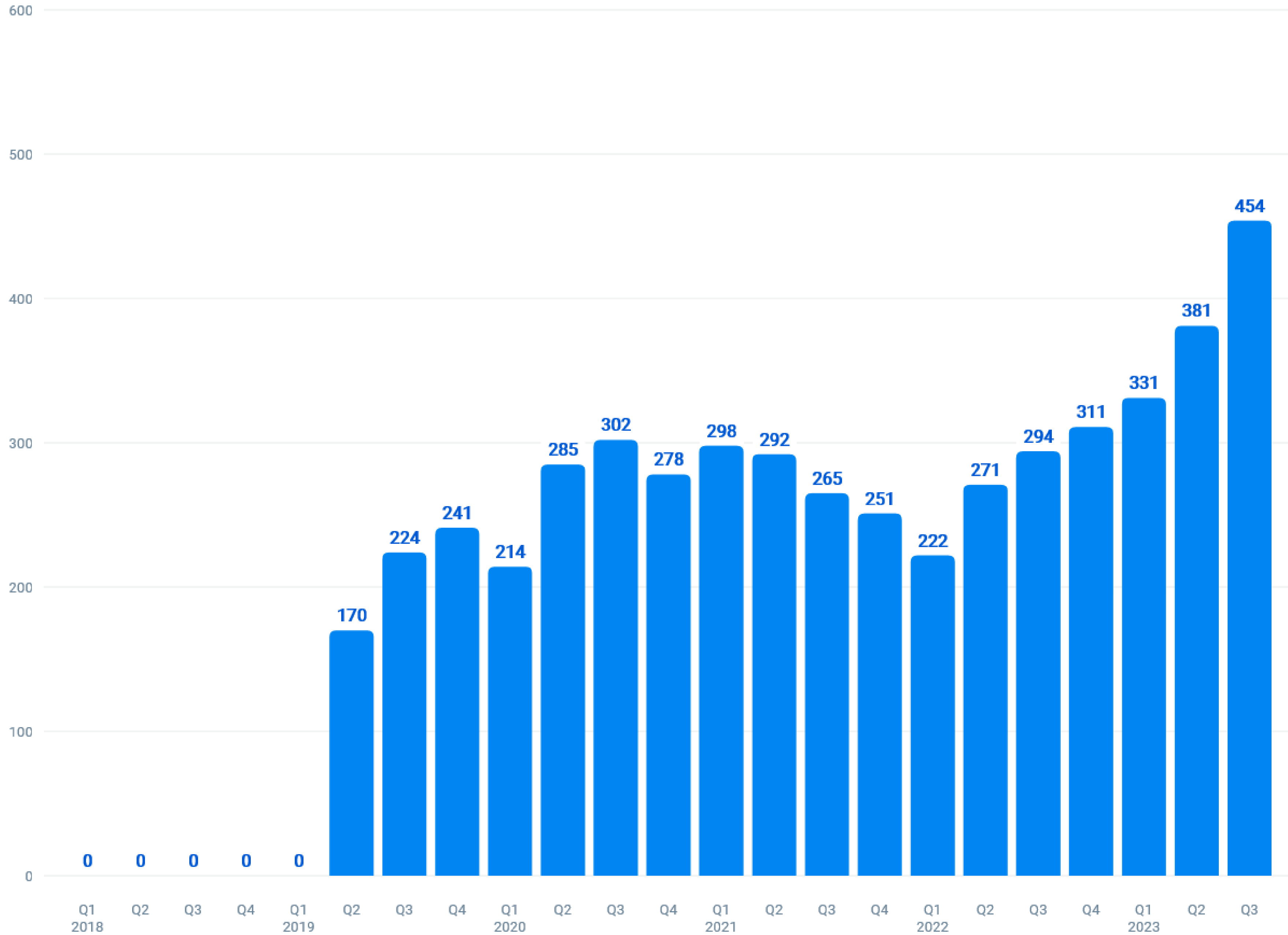




# Deer River Number of Infusion Visits



Between 1/1/2018 and 9/30/2023 by quarter





We are called to make a healthy difference in people's lives.

# Deer River Oncology Clinical Trials

DR opened: 6/29/2018

1st patient enrolled 6/26/2019

DR is 3rd for enrollment (DLH #1 and Virginia #2) out of 22 sites/affiliates

We have accrued 30 patients to clinical trials.

Clinical trial accrual in breast cancer, lung cancer, colon cancer, lymphoma, and symptom control studies

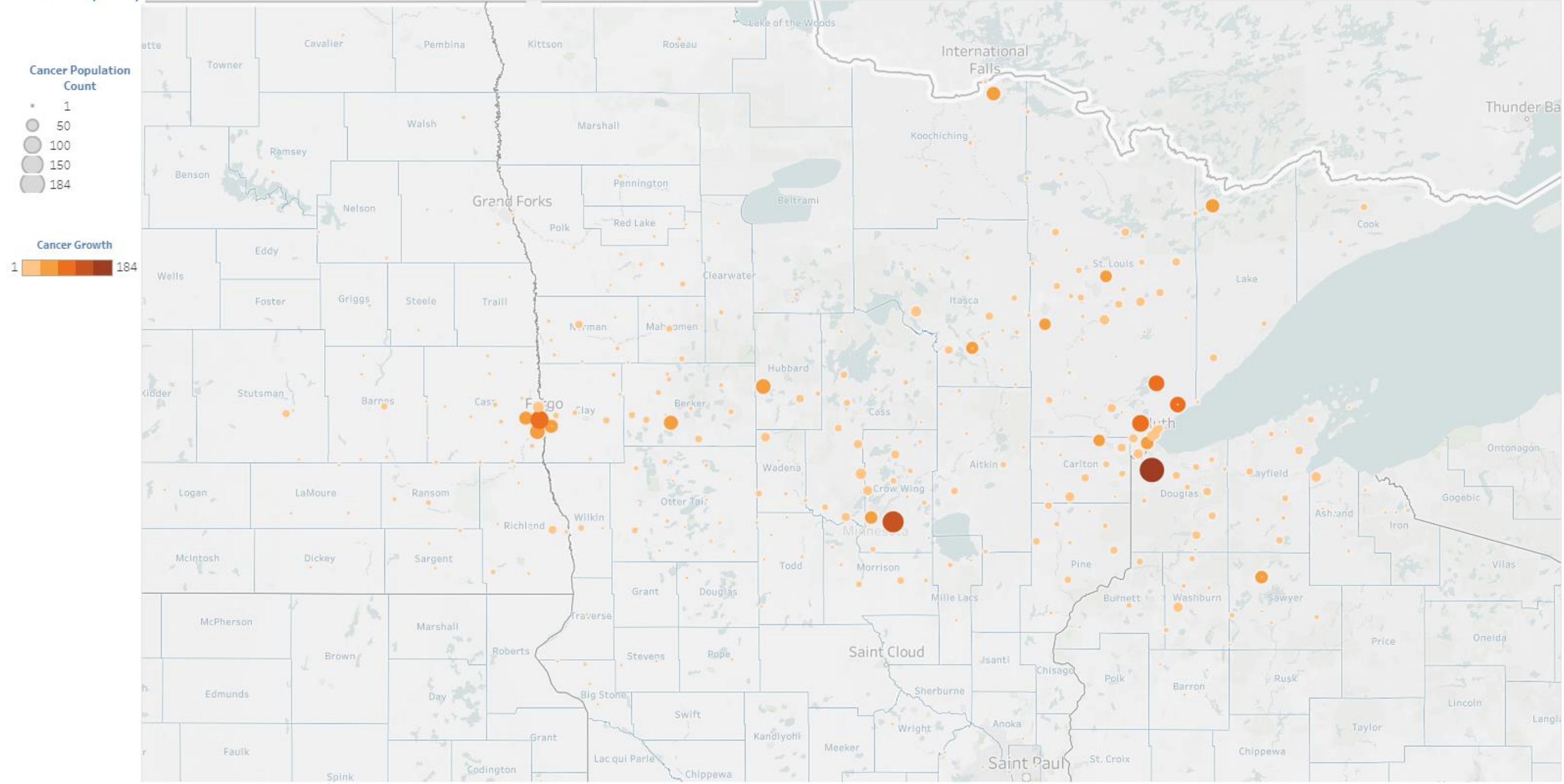


**Essentia Health**





# Cancer Registry Map







# Deer River successes

- Virtually 100% organic growth
- Key driver to financial viability of local medical campus
- \$Multi-million annual margin



We are called to make a healthy difference in people's lives.



# What are the key elements of success?



**Essentia Health**





# Key Elements to success

- Cancer center culture of curiosity
- Recognition of clinical trials as a standard of care
- Practice model that supports a rural presence
- Essentia Health Cancer Center practice is hub-and-spoke
  - Everyone does outreach
  - Local presence
  - Virtual visits helpful, but do not replace the bedside



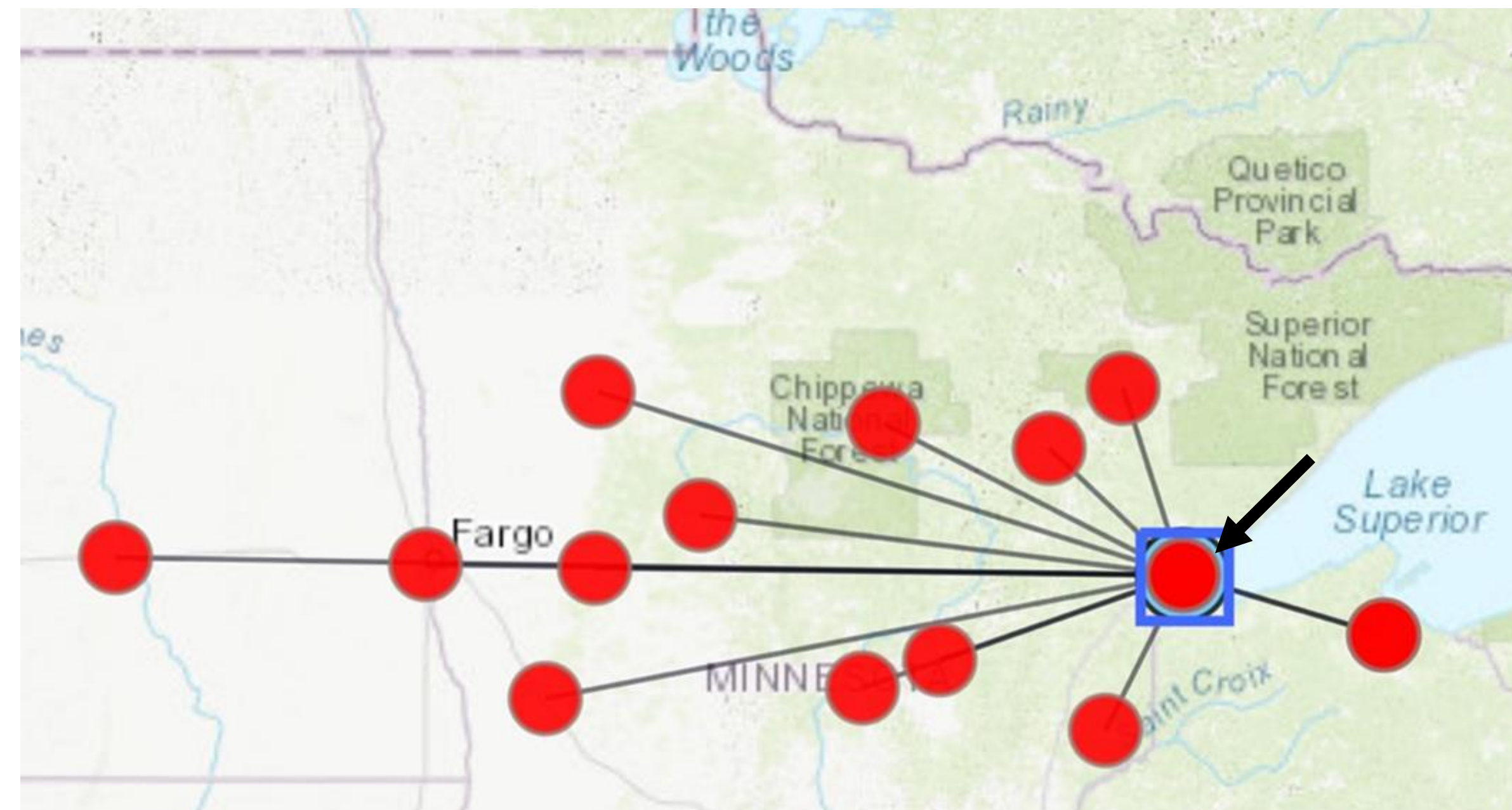
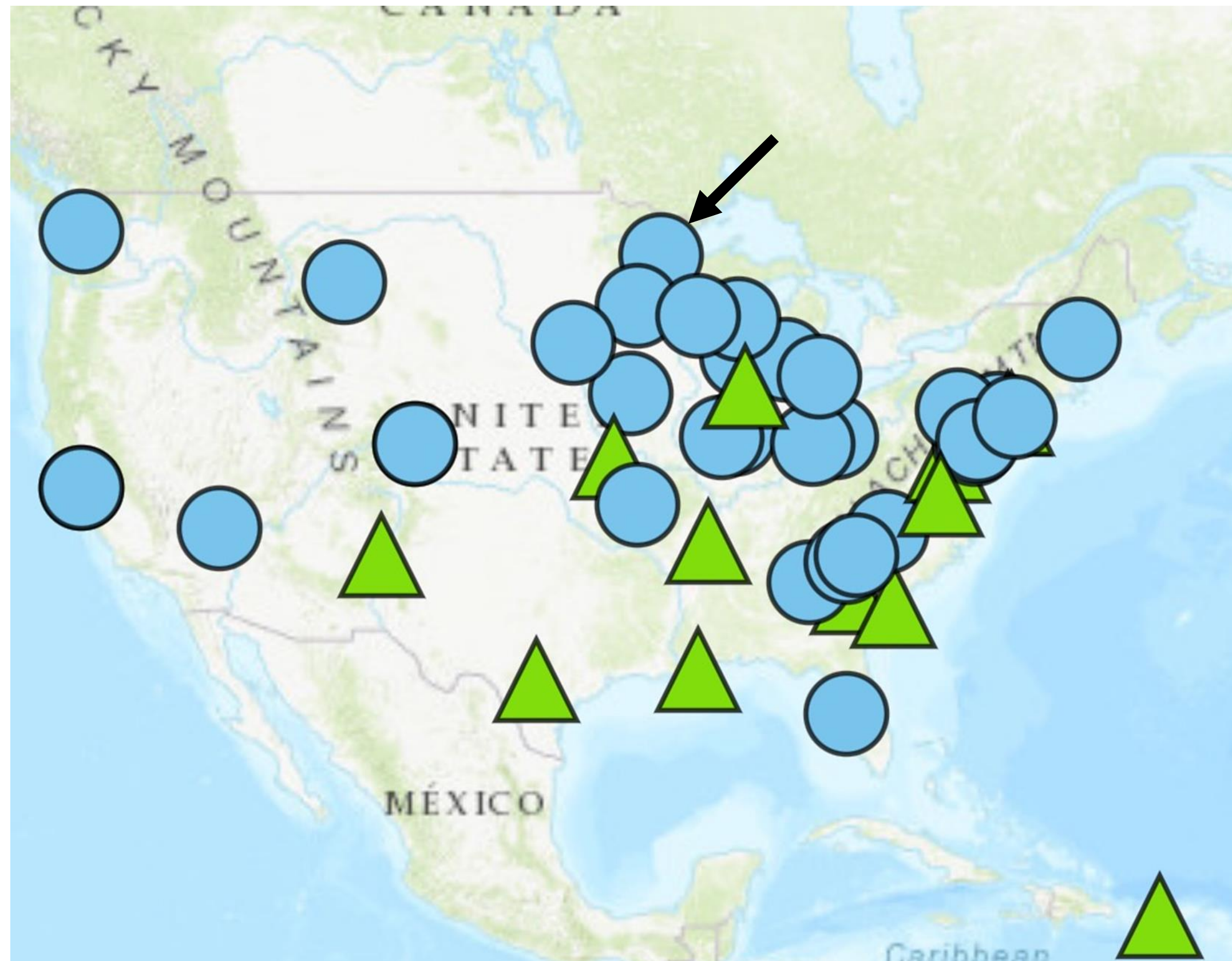
# Facilitators to Trial Availability

## Community clinical trial networks - NCI NCORP



**NATIONAL CANCER INSTITUTE**  
Community Oncology  
Research Program (NCORP)

- Community Sites (32)
- ▲ Minority Community Sites (14)
- Affiliates / Sub-affiliates Sites (1012)







# Key Elements to success

- An integrated clinical environment
  - Either owned or affiliated.
- Common EMR
- Local IRB supports the CIRB
- Administrative and executive leadership support
- Scientific support
- Essentia Institute of Rural Health



We are called to make a healthy difference in people's lives.

## Critical Importance of Community Clinical Trial Enrollment

- Equity
- Ensure diverse study populations – Rural/Native American/Elderly
- Maximize enrollment
- “NCCN believes that the best management of any patient with cancer is in a clinical trial.”



**Essentia Health**







# Challenges to rural oncology care and clinical trials

- Physician engagement
- Physician/APC/nurse recruitment
  - Challenges to recruit to rural sites
  - Challenges to recruit to hub-and-spoke





# Challenges to rural oncology care and clinical trials

- Administrative and leadership support
- Local medical and administrative culture does not value research and clinical investigation
- Financials
- Stability of local clinical practice
- Community engagement and trust



We are called to make a healthy difference in people's lives.

# Physician engagement



**Essentia Health**

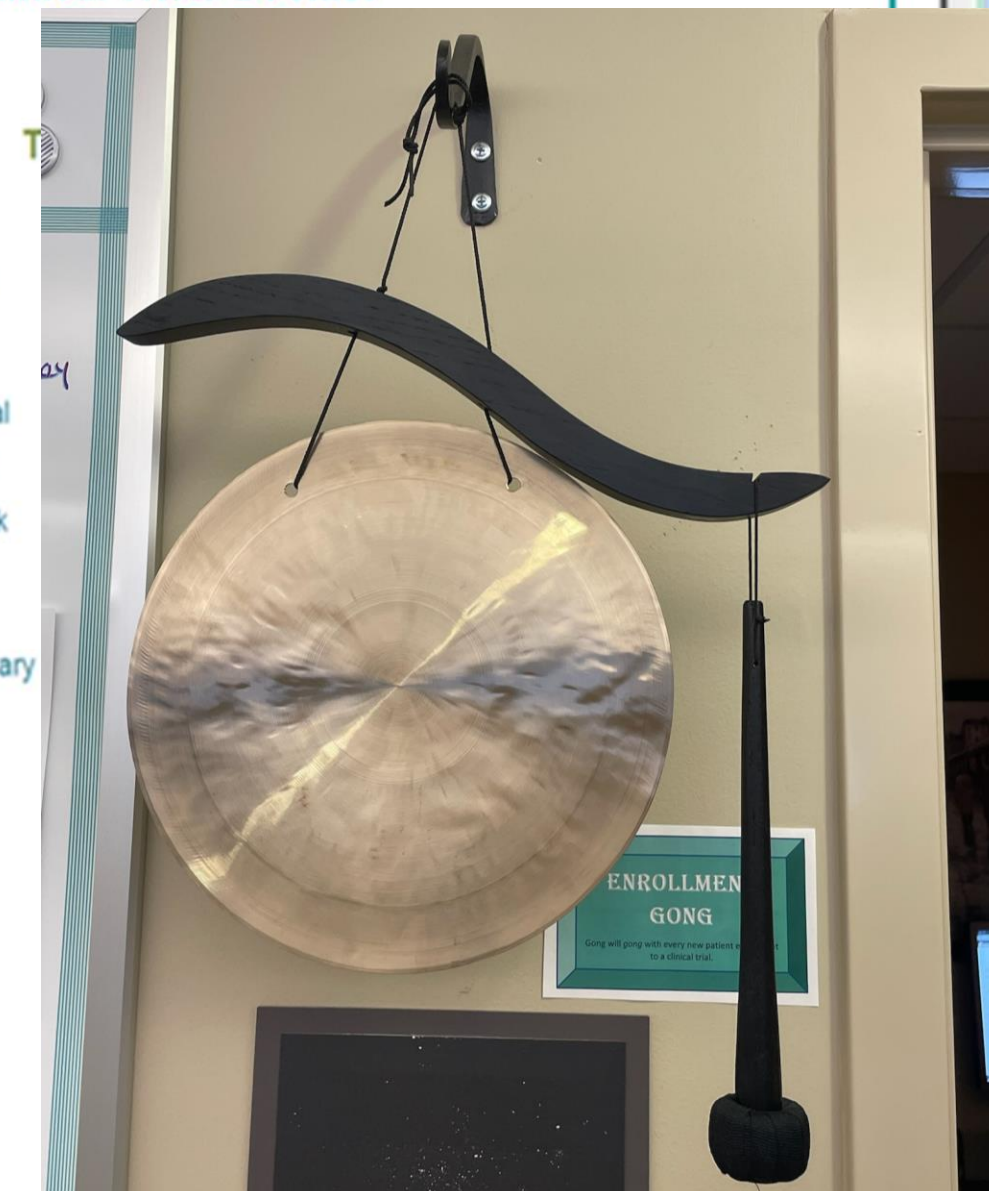


# Rural Provider Engagement – Maximizing Local Enrollment

- NBTS Survey – Physician importance<sup>1</sup>
- Organizational and Physician factors associated with engagement<sup>2</sup>
  - 1) Adequate research staff/infrastructure
  - 2) Provider Education
  - 3) Direct research involvement- NCORP
- Research navigation – local, NBTS, ABTA



Month	AUG	SEPT	OCT
Boyle			
Dornfeld			
Friday	19	27	
Friedell			
Kebbekus	2	4	
Ketchum	1		
Krobrossy			
Kurass			
Macholestt			
Nikewich	14	15	
Perko			
Philip			
Sawyer			
Thakakara		4	
Vera		4	
Watson			





# Window

Production ECP ecprd11\_app1 - DANIEL N. - FIRST HEMATOLOGY ONC

**Epic** | Remind Me | In Basket | Chart | Orders Only | Telephone Call | Refill Medication | Notes Encounter | My Reports | MicroMedex | UpToDate | PubMed

Onco... | Login | Personalize | Print | Upgrade Education | Service Desk | Log Out

Oncology Clinical Trials Booklet

DANIEL N. | Beacon

### Schedule

Open Slots | Chart | Order Review | Order Entry | Sign Encounter | Print AVS | Pt Declined AVS | Appts | Change Prov | Answer Pt-Qnr (Captive) | Given Externally

Nov 13, 2020 | Today | NIKCEVICH, DANIEL A | Filter by Status | Total: 11

Preview | All | Filter





# Essentia Health Community Cancer Research Program Clinical Trials Booklet

## Table of Contents

<u>Disease Site</u>	<u>Page</u>
Brain	3
Breast	8
Gastrointestinal	17
Genitourinary	27
Gynecologic	32
Head and Neck	34
Hematology	38
Lung	54
Rare Tumor	61
Sarcoma	63
Skin	64
Pediatric	69



<https://thesource.essentiahealth.org/Documents/OCT%20Booklet.pdf>

## Breast Protocols

[Back to Table of Contents](#)

### Adjuvant

**NSABP BR003:** A Randomized Phase III Trial of Adjuvant Therapy Comparing Doxorubicin Plus Cyclophosphamide Followed by Weekly Paclitaxel with or without Carboplatin for Node-Positive or High-Risk Node-Negative Triple Negative Breast Cancer (TNBC)

**SWOG S1418** Phase III trial to evaluate efficacy and safety of MK-3475 (Pembrolizumab) as adjuvant therapy for TNBC with  $\geq 1$  cm residual invasive cancer or positive lymph nodes after neo-adjuvant chemo

**Alliance A011502** A Randomized Phase III Double Blinded Placebo Controlled Trial of Aspirin as Adjuvant Therapy for HER2 Negative Breast Cancer: The ABC Trial

### Advanced/Metastatic

**NRG BR004** A Randomized, Double-Blind, Phase III Trial of Paclitaxel/Trastuzumab/ Pertuzumab with Atezolizumab or Placebo in First-Line HER2-Positive Metastatic Breast Cancer

**ECOG EAY131:** Molecular Analysis for Therapy Choice (MATCH) All Solid Tumors

### Cancer Control

**Alliance A221505**-PHASE III RANDOMIZED TRIAL OF HYPOFRACTIONATED POST MASTECTOMY RADIATION WITH BREAST RECONSTRUCTION

**Alliance A011401:** "BWEL" Randomized Phase III Trial Evaluating the Role of Weight Loss in Adjuvant Treatment Of Overweight and Obese Women with Early Breast Cancer

**iCARE2:** Integrated Cancer Repository for Cancer Research



Protocol	Treatment	Eligibility	Special Notations	Site Availability
----------	-----------	-------------	-------------------	-------------------

<p><b>Breast</b> <span style="float: right;"><a href="#">Back to Top</a></span></p>				
<p>Adjuvant</p>				
<p><b>Alliance A011502</b>                      A Randomized Phase III Double Blinded Placebo Controlled Trial of Aspirin as Adjuvant Therapy for HER2 Negative Breast Cancer: The ABC Trial</p> <p><b>Companion Study: Alliance A211601</b>                      Evaluation of mammographic breast density effect of Aspirin</p>	<p><b>Randomization:</b>                      ASA/placebo one 300 mg tablet daily x 5 years</p> <p><b>Registration:</b>                      Collect baseline mammogram taken prior to therapy on A011502</p> <p>Collect mammogram from time closest to 1 year and then 2 years on therapy on A011502</p>	<p><b>Inclusion:</b></p> <ul style="list-style-type: none"> <li>• Women / men &gt;18 and &lt;70 years of age</li> <li>• ECOG 0-2</li> <li>• If ER and PR negative, tumor must be node positive or &gt;2 cm and node negative. Patients must be registered within 18 months of diagnosis. pN1mic is eligible.</li> <li>• If ER and/or PR positive, tumor must be node positive and within 10 years of diagnosis. pN1mic is eligible.</li> <li>• Last dose of chemotherapy or radiation therapy must be at least 30 days prior to study registration</li> </ul> <p><b>Exclusion</b></p> <ul style="list-style-type: none"> <li>• Hx of stroke</li> <li>• Hx atrial fib and MI</li> <li>• Regular NSAID/aspirin use</li> </ul> <p><b>Eligibility for companion study:</b></p> <ul style="list-style-type: none"> <li>• Currently enrolled in A011502</li> <li>• Hormone receptor negative</li> <li>• Baseline breast density measurement (1 of the following: <math>\geq 25\%</math> density, scattered areas of fibroglandular density or breast composition category b, c, or d per BI-RADS</li> <li>• Baseline digital screening mammogram</li> <li>• Contralateral unaffected breast in place. Prior biopsy on the unaffected breast are eligible.</li> </ul>	<p><b>Open: 3-2017</b></p> <p>Co-Enroll A011401 (BWEL)</p> <p>Aspirin/Placebo provided by study</p> <p><b>Research Team</b>                      Paige Bosshardt                      Karin Bohline</p>	<p><b>Open:</b></p> <ul style="list-style-type: none"> <li>• Duluth</li> <li>• Brainerd</li> <li>• Fargo</li> <li>• Fergus Falls</li> </ul> <p><b>Outreach Sites-</b>                      Please contact study team.</p> <p><b><u><a href="#">Go to Staff Contact List</a></u></b></p>



We are called to make a healthy difference in people's lives.

# Local community engagement and trust



**Essentia Health**





# Local community engagement and trust

- Talks with medical staff and nursing staff
- Talks with local groups
  - Schools
  - Civic groups
  - Support groups
- Annual meeting with local hospital board





# Community engagement and trust

- Gas cards
  - Travel. Travel. Travel.
- Local fundraisers
  - Deer River Foundation gas cards
  - International Falls gas cards
- Lodging, meals, wigs



# 11<sup>th</sup> Annual Falls International Speed Run Against Cancer

Sat, February 16, 2019

Thunderbird Lodge

Rainy Lake, Int'l Falls

12:00 - 3:00 pm

Registration begins at 11:00



**WARM UP YOUR SLEDS FOR  
SIDE BY SIDE  
SNOWMOBILE RACING!**



*The International Voyageurs Snowmobile Club is teaming up with Thunderbird Lodge to clock your snowmobiles.*

*The radar machine will be set up on the lake in front of Thunderbird and the Thunderbird crew will be set up inside with some fantastic specials!*

*Prizes will be awarded for Fastest Runs in:  
600cc & under • 700cc • 800cc • 1000cc • Open*



*This is a fund raiser to help local community members with cancer treatment transportation costs.*

*3 runs for \$10<sup>00</sup>. Additional donations accepted.*



For information, contact:  
Thunderbird Lodge, 218-286-3151  
Joe Meehan at 218-283-9290  
info@woborder.com



## FULL RESULTS

### Open 2 Stroke

Melody Wald - New Market, MN

Arctic Cat Thunder Cat 130mph

### Open 4 Stroke

Tyce Jackson - Int'l Falls, MN

Arctic Cat XF 119mph

### 1000 2 Stroke

Melody Wald - New Market, MN

Arctic Cat ZRT 109mph

### 1000 4 Stroke

Lane Jackson - Int'l Falls, MN

Arctic Cat High Country 114mph

### 800cc

Melody Wald - New Market, M

Ski Doo Mach Z 106mph

### 700cc

Mark Lofgren - Fargo, ND

Arctic Cat Crossfire 91mph

### 600cc

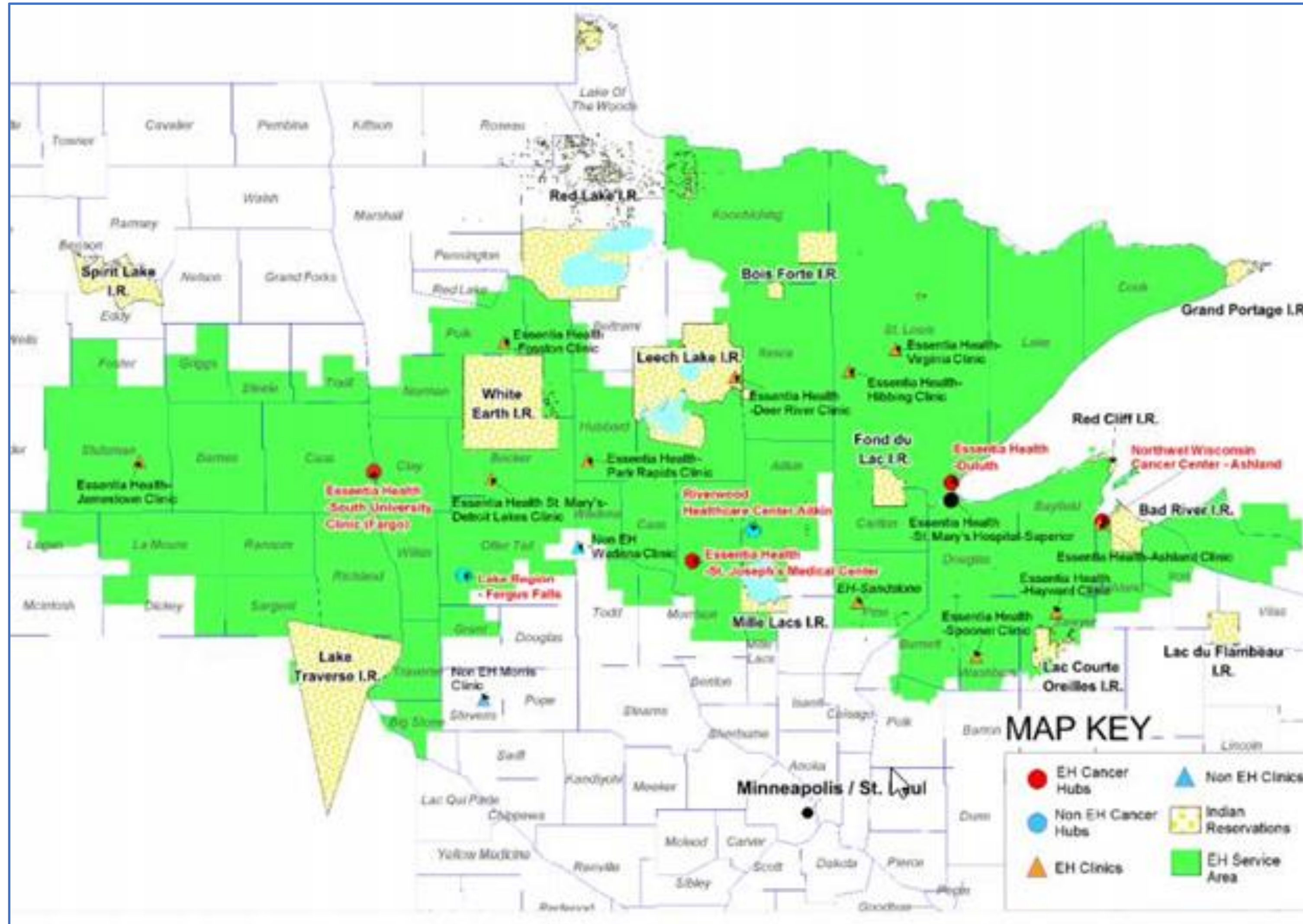
Gabe Krebs - Fairbault, MN

Polaris XCR 86mph



We are called to make a healthy difference in people's lives.

# Enhancing Native American Trial Enrollment





We are called to make a healthy difference in people's lives.

# AICAF/EHCCRP Collaboration

## Goals:

1. To develop a sustainable transparent working relationship between the Essentia Health Community Cancer Research Program and American Indian Communities that includes knowledge and effort from both entities.
2. To provide applicable community based clinical cancer research, which is used to improve over all American Indian Community health and longevity.
3. To create a safe and caring environment where participants feel safe to partake in clinical cancer research. This clinical research engagement would provide opportunities in cancer screening, prevention, treatments, registry, and education.
4. To implement a holistic approach to clinical cancer research that includes prevention, screening, treatment, and education from both American Indian traditional practices and Essentia Health practices.



**Essentia Health**



We are called to make a healthy difference in people's lives.

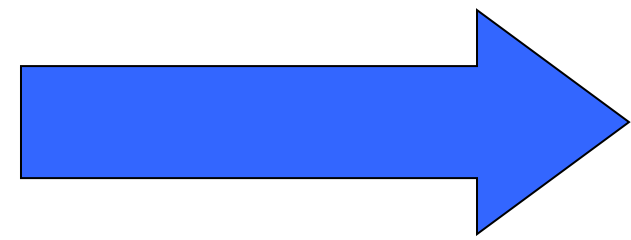
**Why should we do this work?  
What is the clinical rationale?  
What is the business case?**



**Essentia Health**

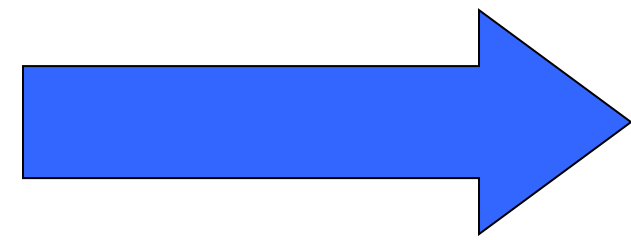


# Essentia Health Affiliation Models



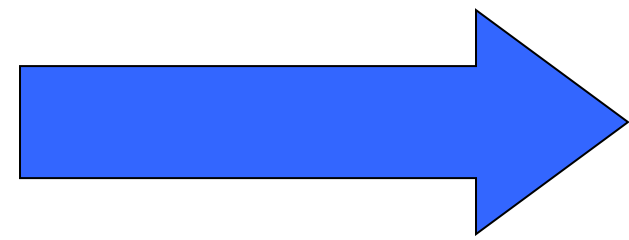
Good Friends  
and Colleagues

- Clinical & Referral Relationships



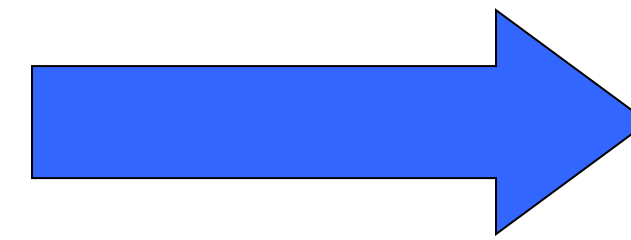
Contractual  
Relationship

- Clinical & Referral Relationships
- Contract for EPIC IT Services
- Contractual Relationship to Essentia's ACO



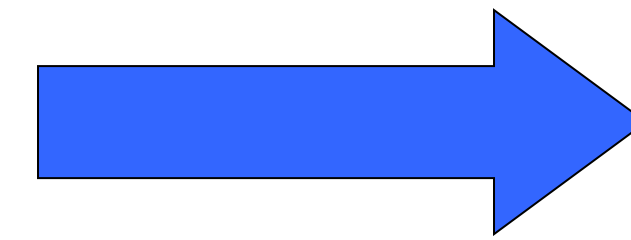
Management  
Relationship

- Clinical & Referral Relationships
- Contract for EPIC IT Services
- Contractual Relationship to Essentia's ACO
- Contract with Essentia for Management



Lease Relationship

- Clinical & Referral Relationships
- EPIC IT Services Provided
- Full Participation in Essentia's ACO
- Inclusion in all Essentia Payor Contracts
- Facility leased to Essentia, Essentia Operating System Fully Deployed



100% Ownership

- Clinical & Referral Relationships
- EPIC IT Services Provided
- Full Participation in Essentia's ACO
- Inclusion in all Essentia Payor Contracts
- Facility Ownership transferred to Essentia. Essentia Operating System Fully Deployed
- Access to Capital via Essentia's A Rating



# Clinical Enterprise Viability

		Mission	
		+	-
<b>Margin/ROI</b>	+	Viable	Possibly viable
	-	Possibly viable	Non-viable





# Other business considerations

- Payer mix
- CAH reimbursement
- Sole community provider reimbursement
- PPS reimbursement
- 340b chemotherapy reimbursement
- Strategic and market share growth





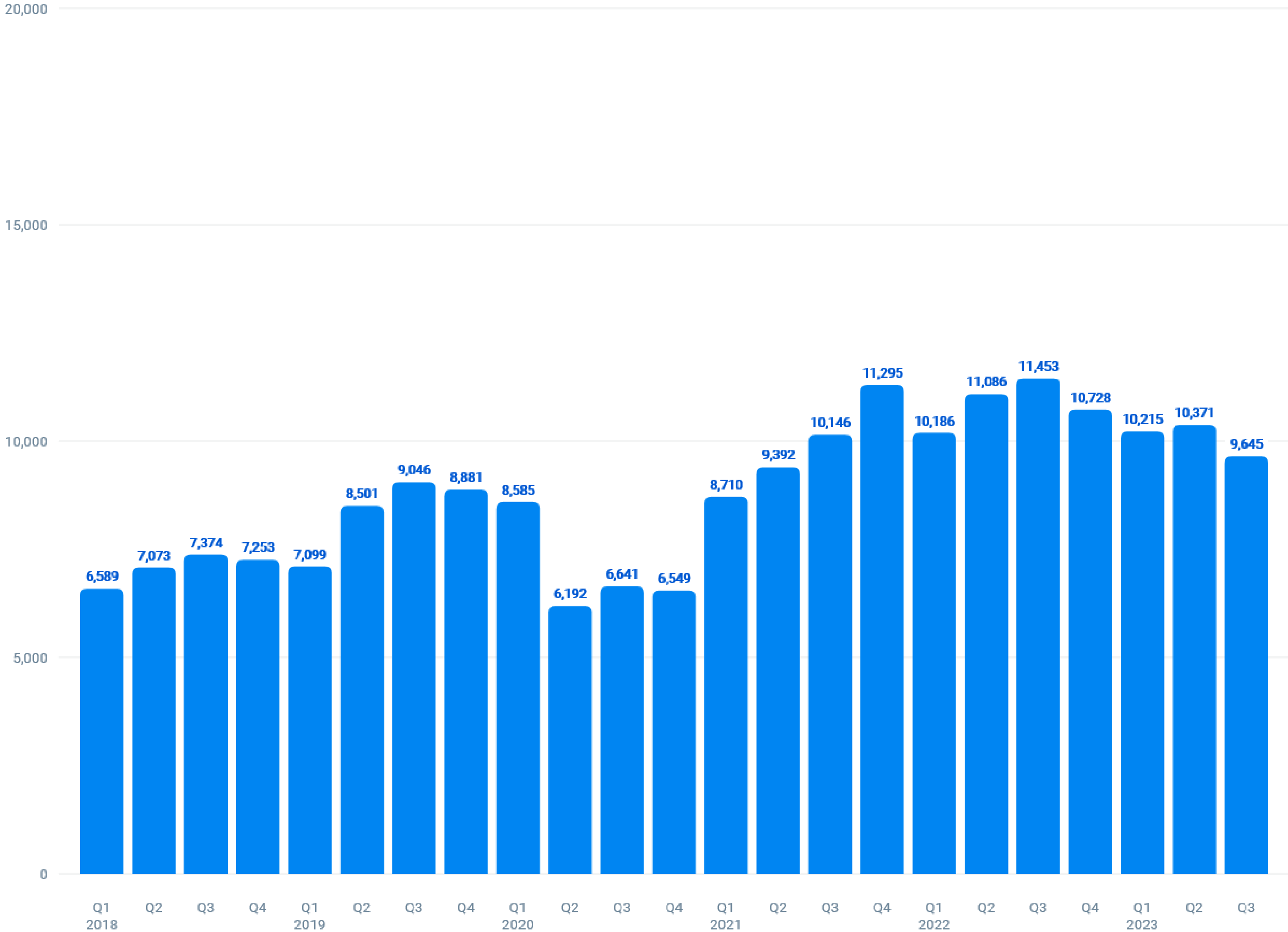
# Other business considerations




- Downstream
  - Surgery
  - Pathology/laboratory
  - Radiology
  - Radiation oncology





# EHOSL Number of Infusion Visits


Between 1/1/2018 and 9/30/2023 by quarter





Department   


FIRST AMBULATORY INFUSION 


DLC INFUSION 


JMC INFUSION CENTER 


SSH INFUSION CENTER 


WHC INFUSION CENTER 


PARC INFUSION CENTER 


SJMC INFUSION CENTER 


FIRST AMB INFUS PHARM 


SUCL INFUSION THERAPY 

HBC AMBULATORY INFUSION 

MHS AMB INFUSION CENTER 

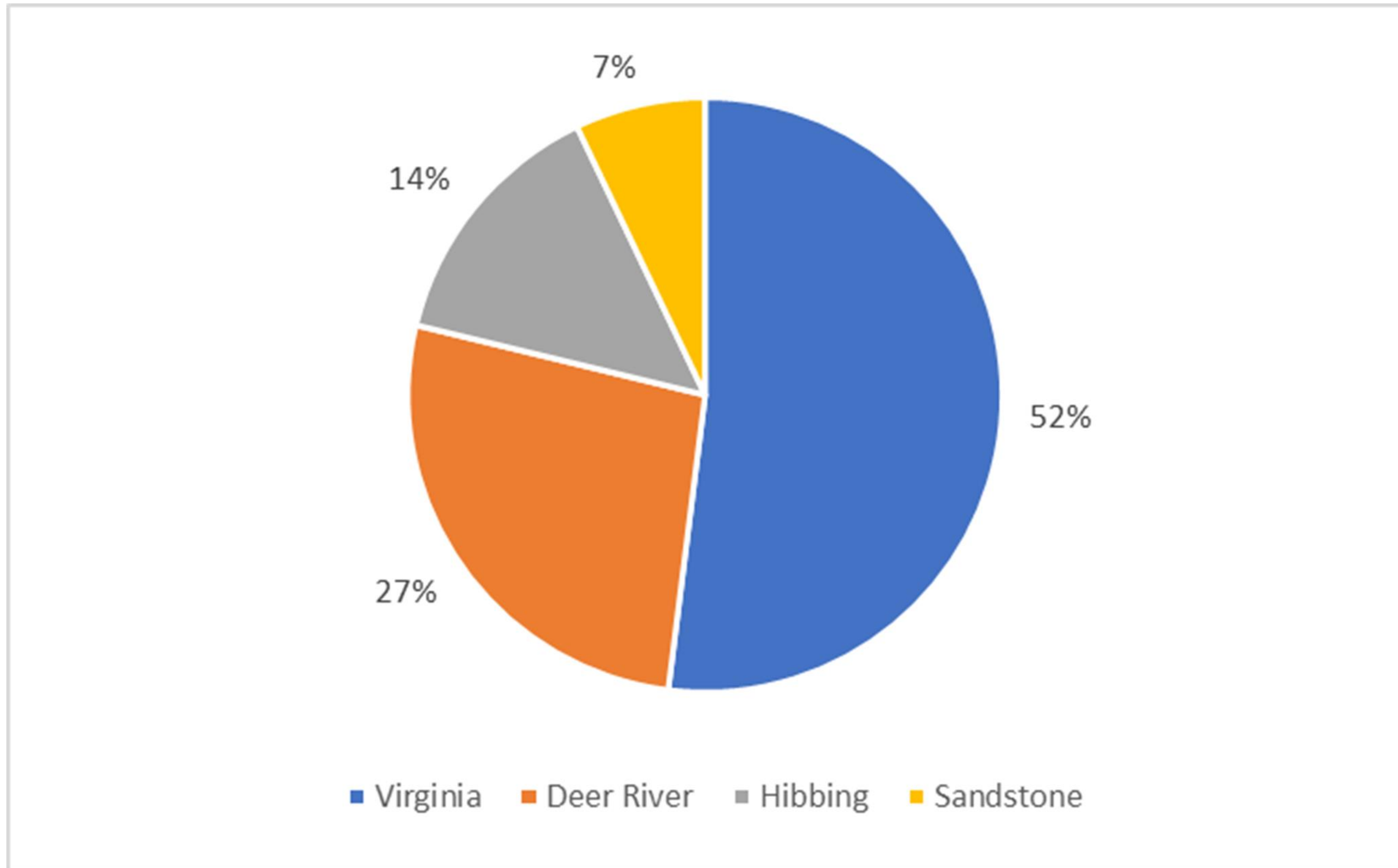
SUP AMBULATORY INFUSION 

VIR AMBULATORY INFUSION 

DEER AMBULATORY INFUSION 



# Distribution of Essentia Health Cancer Center MN outreach sites operating margin







# How does this relate to West Virginia?



# WVU Cancer Institute 2022 Annual Report by WVU Medicine Marketing &am... - Flipsnack







## Back to the patient story...

- 66 yo female from Effie, MN (Pop 123)
- Symptomatic with bulky lymphadenopathy
  - Excisional lymph node biopsy reveals mantle cell lymphoma
- Receives care in Deer River, MN (Pop 909)
- NCORP site
- Enrolled to EA4181
- ***Obtained CR***
- ***Living her retirement dream in Effie.***



# Conclusions

- On-site regular presence is key to grow the practice in rural oncology care
  - Practice model and culture
  - Physician and executive leadership support
- Rural clinical trial enrollment is critical – An extremely important **Standard of Care**
- Foster local trial availability – NCORP and MNCCTN
- Support rural oncology patients, their local healthcare facilities, and their communities
- The business case exists for rural oncology care, and has equal importance to the clinical science













We are called to make a healthy difference in people's lives.

# Thank you!

Daniel.Nikcevich@essentiahealth.org

Cell 218-591-2949



**Essentia Health**