

# Multi-Cancer Early Detection ACCC Survey Results



## What is Multi-Cancer Early Detection?

Multi-cancer early detection tests are designed to identify

the presence of cancer for multiple cancer types with a single, blood-based test so that the disease can be diagnosed in early, more treatable stages. In combination with existing standard of care recommendations, these tests hold the potential to revolutionize cancer screening, in part by detecting cancers for which no routine screening exists, such as liver, ovarian and pancreatic cancers, as well as detecting cancers earlier in the disease trajectory. Multi-cancer early detection tests are not yet widely available but could be in the next few years. The Association of Community Cancer Centers (ACCC) conducted a survey among its members between June 2022 and August 2022 to explore current attitudes, beliefs, and concerns related to this testing and the capacity multi-cancer early detection testing into cancer programs or practices.

## Current Screening Services

**96%** of survey respondents reported that their cancer program or practice offered one or more of the following services:



- **92%** offered screening and surveillance of cancer survivors who have completed treatment



- **91%** offered diagnostic services to confirm cancer, such as laboratory tests (e.g., CBC or urine) and/or imaging tests (e.g., PET, MRI, CT, ultrasound, X-ray, or tissue biopsy)



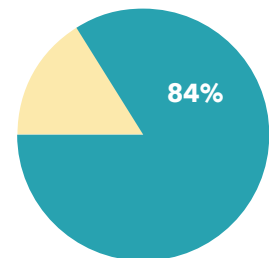
- **87%** offered screening for new primary cancers (e.g., mammography, colonoscopy, pap test, LDCT)
- **87%** offered genetic counseling and testing for hereditary cancers.

*“Our team provides some health promotion services and free cancer screening. Also, we’re trying to increase access to quality care, increase awareness about the importance of timely detection, and improve palliative care.”*

MEDICAL ONCOLOGIST

## Confidence Factor

**84%** of survey respondents indicated that they are confident in their ability to educate patients about routine cancer screening.



*“We offer multi-cancer early detection testing to all patients over the age of 50 and will follow up positive screens in our Cancer Prevention Clinic, with the involvement of an oncologist and genetic counselors.”*

CANCER PROGRAM ADMINISTRATOR



### Snapshot of MCED Testing Activities

- **19%** of survey respondents have participated in educational activities related to multi-cancer early detection, including academic and industry presentations and webinars
- **6** respondents indicated that their cancer program or practice directly offers, or partners to offer this testing
- **3** respondents are currently involved in multi-cancer early detection clinical trials



"I see a great need for education of cancer patients about the potential costs associated with their care and any testing they may need to undertake. I have a lot of patients who feel they are sent for testing without the knowledge of the financial impact it will have in their lives."

ONCOLOGY FINANCIAL SPECIALIST

### Awareness, Confidence & Beliefs

Since multi-cancer early detection testing is an emerging screening tool, nearly **1/3** of respondents indicated that they were unsure or did not have enough information to answer questions about their awareness, confidence, attitudes, and beliefs related to this testing. This finding underscores the clear need for education and building awareness around multi-cancer early detection.

Of those that were able to respond:



**63%** agreed or strongly agreed that multi-cancer early detection testing will improve outcomes for patients diagnosed with cancer



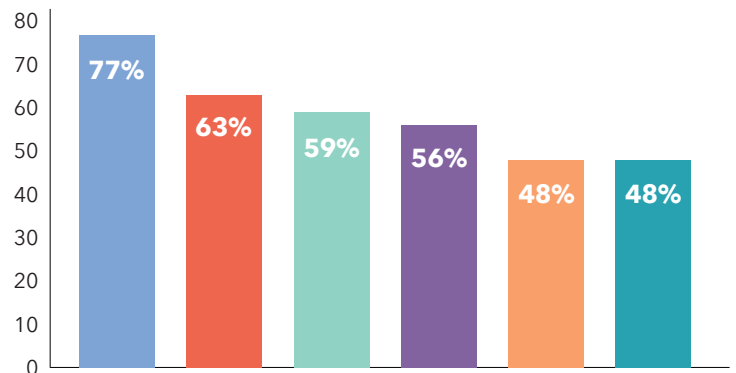
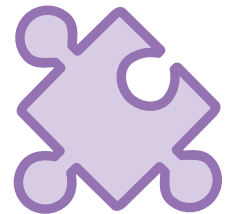
**51%** agreed or strongly agreed that this testing will improve existing disparities in cancer screening



**65%** were concerned about access to follow-up diagnostics and treatment after this testing

### Implementation of MCED Testing

**57%** of survey respondents agreed or strongly agreed that multi-cancer early detection testing will fit within existing processes their current program uses to care for patients.

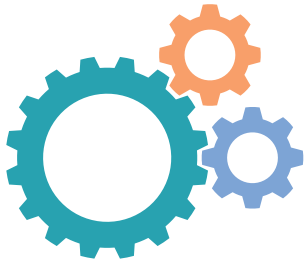


However, respondents shared potential concerns regarding implementation, including:

- Patient financial barriers (e.g., insurance coverage, out-of-pocket costs)
- Concerns about managing false positive results
- Coordination of care related to testing
- Staff time
- Reimbursement to practice
- Overdiagnosis of indolent cancers

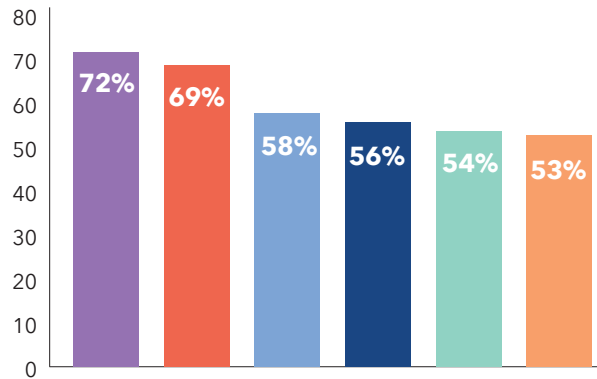
"It is important to understand the entire workflow from [the] perspective of patients, communities, providers, health systems, and payers and identify areas that could result in bottlenecks, understaffing, or under-resourcing."

MEDICAL ONCOLOGIST



### Existing Processes & Resources

When asked what processes and resources they have in place that could support the implementation of multi-cancer early detection testing, survey respondents most commonly reported these services.



- Patient navigation
- Multidisciplinary care conferences and/or tumor boards
- Telehealth services
- Strong referral networks
- Psychosocial support services
- Patient financial assistance and supportive services

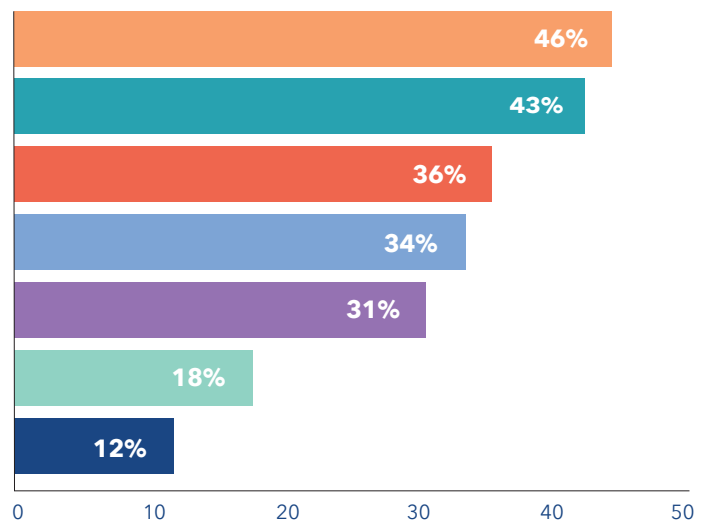
"Effective communications training and education materials to support provider-patient decision-making related to multi-cancer early detection testing are needed."

CANCER PROGRAM ADMINISTRATOR



Respondents were less likely to say the following process and resources were in place to support the implementation of multi-cancer early detection testing. These findings may indicate that cancer programs and practices need additional support with adapting existing processes to prepare for this testing.

- Administrative and clinical capacity to implement and order clinically indicated testing
- Patient education
- EMR/EHR integration with other institutions
- Foundation or grant-supported programs to increase access to cancer screening
- Referral systems to academic medical centers
- Community health workers
- Mobile testing and/or screening program





## Moving Forward

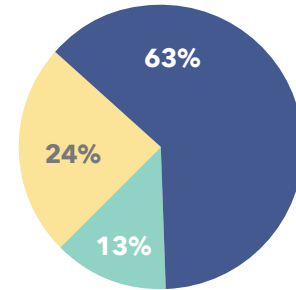
The field of multi-cancer early detection is rapidly evolving. The results of this survey indicate that additional education is needed regarding this type of testing. While providers are eager for a coordinated and comprehensive rollout, clear guidelines, and wraparound supports for patients across the cancer continuum is needed to realize the potential benefits of multi-cancer early detection testing.

## Who Took the ACCC Survey?



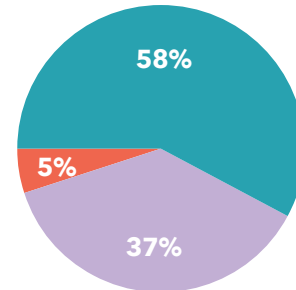
### Workplace Setting

- Urban
- Suburban
- Rural

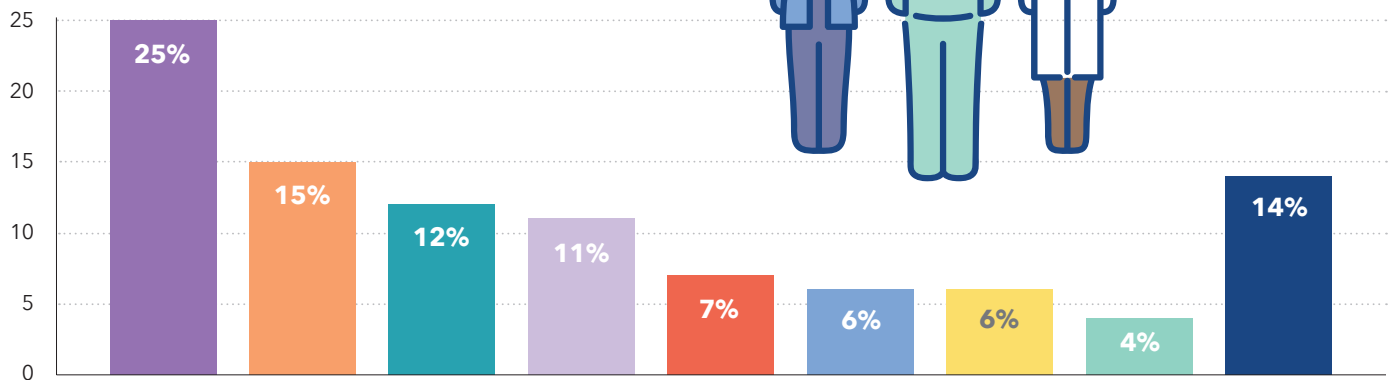


### Program Type

- Community Cancer Programs
- Private Practices
- Academic/NCI Cancer Programs

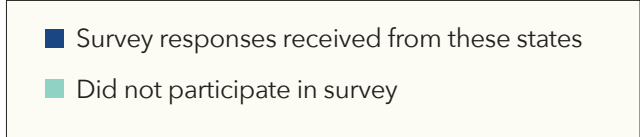
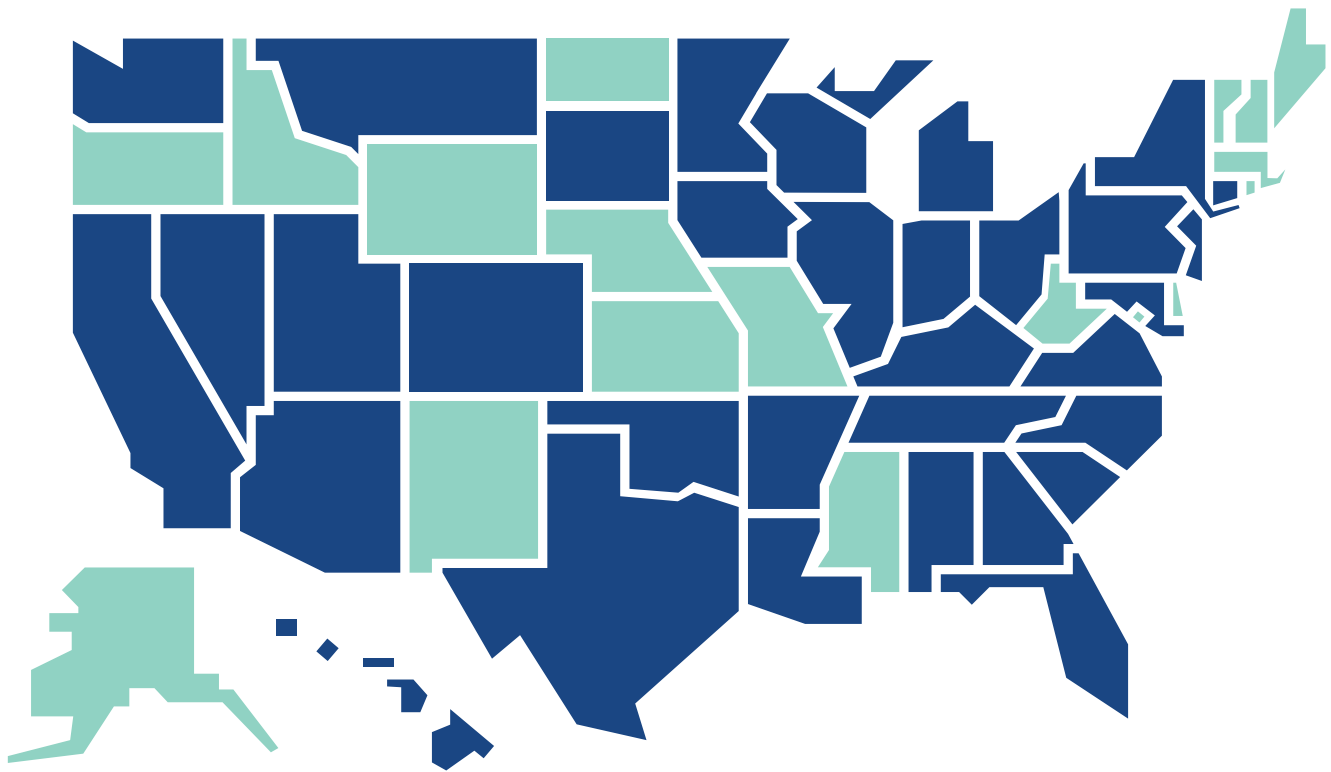


## Multidisciplinary Representation



- Cancer program administrator, practice manager, or practice administrator
- Medical oncologist
- Clinical researcher
- Advanced practice provider (e.g., NP, PA)
- Oncology nurse
- Genetic counselor
- Radiation oncologist
- Surgeon or surgical oncologist
- Other, including oncology pharmacist, financial counselor/non-nurse navigator/advocate, psychologist, social worker, pathologist, and exercise rehab specialist

## Who Took Our Survey?



This is a publication from the ACCC education program, "Multi-Cancer Early Detection." Learn more at [acc-cancer.org/mced](https://acc-cancer.org/mced).

The Association of Community Cancer Centers (ACCC) is the leading education and advocacy organization for the cancer care community. Founded in 1974, ACCC is a powerful network of 30,000 multidisciplinary practitioners from 1,700 hospitals and practices nationwide. As advances in cancer screening and diagnosis, treatment options, and care delivery models continue to evolve—so has ACCC—adapting its resources to meet the changing needs of the entire oncology care team. For more information, visit [acc-cancer.org](https://acc-cancer.org). Follow us on social media; read our blog, ACCCBuzz; tune in to our CANCER BUZZ podcast; and view our CANCER BUZZ TV channel.

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