

# NOVEL CONCEPTS & INNOVATIONS IN CANCER CARE DELIVERY

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## **OVERVIEW OF THE CENTER**

- Private community practice
- 8 locations throughout DFW, 4 of these are rural
- 21 physicians and 11 Advanced
  Practitioners



## **SCOPE OF SERVICES**

- Medical Oncology
- Radiation Oncology
- IMRT
- HDR
- Cyberknife
- Gyn Onc Surgery
- Breast Surgery

- Imaging
- PET/CT
- CT/MRI
- Ultrasound
- Nuclear Imaging
- Genetic Counseling
- Medically Integrated Pharmacy (Retail Pharmacy)

## **COMPLEX MANAGED CARE MARKET**

- More than 30 direct managed care contracts... many more general payer arrangements
- 6 ACOs
- Value Based Arrangements with major payers
  - Medicare OCM
  - Aetna
  - United (Next phase pending)
  - Humana
  - Medicare Advantage
  - Blue Cross (in development)

## SERVICES ADDED TO SUPPORT VBC

#### IT TAKES A VILLAGE

- Social Services
- Nurse Navigation
- Centralized Triage
- Internal Case Management
- Dietitians
- Psychotherapy
- Massage

- Acupuncture
- Integrative Medicine Clinic
- Chaplaincy
- Prehab/Rehab
- Nurse Navigation
- Palliative Care Clinic

# TECHNOLOGY IN A VBC ENVIRONMENT

- Operational:
  - VIA Pathways
  - Navigating Care
  - JVION AI Risk Stratification
  - Member Match

- Analytical/Actuarial
  - Archway
  - Tuple
  - InfoDive
  - PracticeNet– OCM
  - Aetna Analytics
  - United Data (forthcoming)
  - ACO Data (slowly developing)
  - Medicare Blue Button

# **BREAKING GROUND ON NEW INITIATIVES**

- Coordination of Care
- Al Risk Stratification
- Hospitalist Education
- SNF/Rehab Contracting
- Social/Financial Toxicity Screening
- Survey Dialogue
  - Emotional Wellbeing
  - Changes in Energy Level
  - Maintaining Your Health
  - Next Steps in Treatment

- Member Match Coordinating with JVION and EMR
- Long term follow up AI patients in the High-Risk Group
- Artificial Intelligence at the Point of Care
- Remotely Connecting to the Patient
  - Medication Tracker
- Evaluating other PRO Systems

## FINDING WAYS TO CONNECT TO OUR PATIENTS....

- We are All Connected!!
  - More than 95% of adults have cellphones
  - 75% of those are Smartphones
  - 55% of Adults have tablets
- No one wants to actually speak to another person
- Too many VBC patients and too many requirements to contact every patient personally
- Rural Medicine creates more challenges with patient communication
- We must get creative on how we connect to patients

## **OVERVIEW OF ROCKY MOUNTAIN CANCER CENTERS**

- Independent Community Oncology Practice, Physician Led and Owned
- 88% Pathway Adherence to Value-Pathways, Evidence-Based Patient Care
- 94% of Revenues tied to Value Base Care
- In 2017, RMCC Enrolled more than 6% of our Patients in a Clinical Research Trials, Double the National Average
- 55 physicians strong in 19 locations across the state
- Member of The US Oncology Network





## **SCOPE OF SERVICES**

- Medical Oncology
- Radiation Oncology -IMRT/SRS/HDR
- Gynecologic Oncology Surgery
- Breast Surgery
- Neuroendocrine Tumor Surgery
- Peptide Receptor Radionuclide Therapy (PRRT)

- Imaging PET/CT
- Nuclear Imaging Gallium & Auxim
- Genetic Counseling
- Medically Integrated Pharmacy (In Office Dispensing)



## VALUE BASED PRINCIPLES

- Treatment Plan Shared Decision Making
- Proactive versus Reactive Care Management
- Patient Engagement to avoid unnecessary care (i.e. Hospitalization)
- Advanced Care Planning
- Delegation of Palliative Care and Hospice Conversations to other providers
- Take A Pause Between Lines of Treatment



## SERVICES TO SUPPORT VALUE

### **MULTI-DISCIPLINARY CARE TEAM**

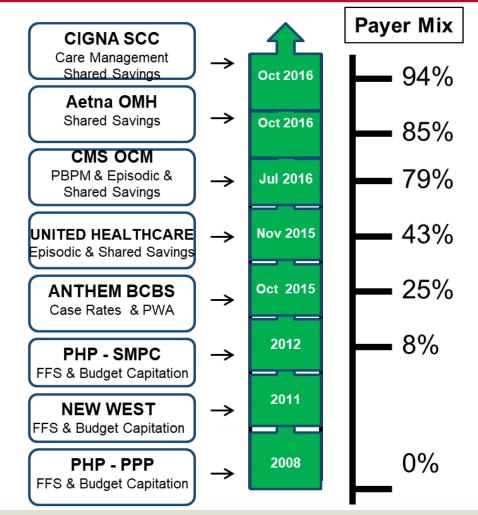
- Social Work Services
- Advance Practice Providers
- Genetic Counselors
- Nurse Navigation
- Clinical Pharmacist
- Data Driven Triage Management
- Palliative Care Clinic Partnerships

#### CARE MANAGEMENT PROCESSES

- Clinical Guidelines NCCN Value Based Pathways
- Clear Value Plus at point of chemo ordering
- Care Team Huddles OCM and other High-Risk Patients
- Consistent Assessments
  - Pain Management, Depression Screening

## SPECTRUM OF VBC INITIATIVES

- Outcome based reimbursement and payments related to RMCC capabilities to:
  - Be Cost-effective
  - Drive Quality improvement
  - Deliver Population health management
- Participation in models Contracting Models with:
  - Drug Budget Capitation
  - Case Rates
  - Episode of Care Management
  - Shared Savings
  - Total Cost of Care





## **FUTURE OPPORTUNITIES**

- OCM Like Principles applied to all patients
- Improved communications with patients via Portal or other protected email like tools between patient and care team
- Telemedicine for remote and home bound patients

- Electronic tools that allow patient status checking, education, and assessment that are simple for patient and provider alike
- Continuous journey to improve teambased care model



# **QUESTIONS?**