

# CoC Member Organization Representatives Meeting

October 22, 2023

## Upcoming Events

### Today

- **CoC Plenary Session**
  - 3:00 to 5:00 pm/Momentum AB
- **CoC Reception**
  - 5:00 to 6:00 pm/Momentum C

### 2024 ACS Cancer Conference

- February 22-24
- Austin, TX



**American Cancer Society**

Elizabeth Holtsclaw

**American College of Physicians**

Ana Maria Lopez, MD, MPH, FACP

**American College of Sports Medicine**

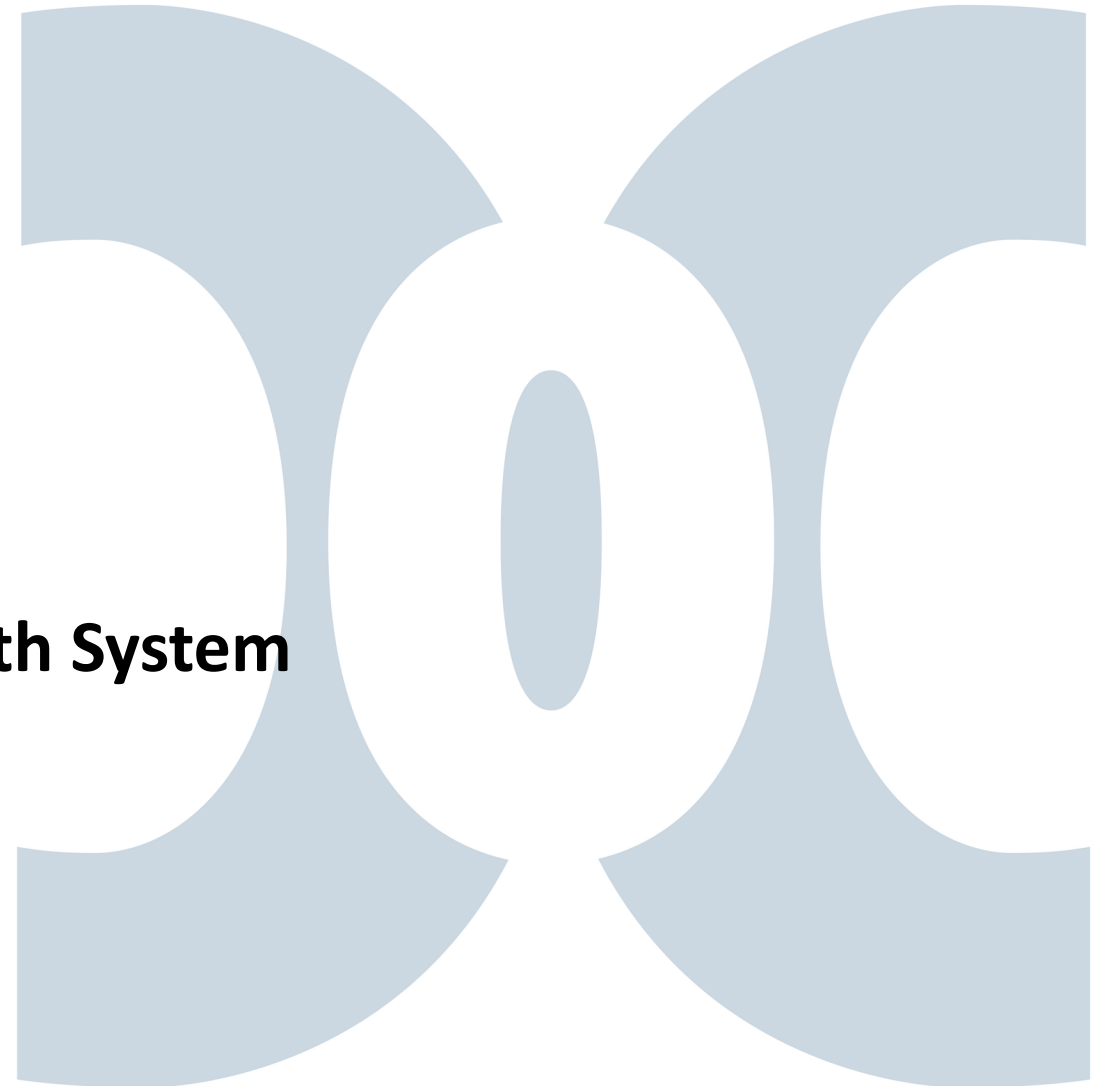
Kathryn H. Schmitz PhD, FACSM, FTOS, FAK

**Department of Defense Military Health System**

Jessica Weiss, MD

**Society for Immunotherapy of Cancer**

Sara I. Pai, MD, PhD, FACS





# Organization Update: Focus on Patient Navigation

Elizabeth Holtsclaw, MA  
Director, Payor and National Partnerships  
[Elizabeth.Holtsclaw@cancer.org](mailto:Elizabeth.Holtsclaw@cancer.org)







Every cancer. Every life.

## Who we are

The American Cancer Society is a leading cancer-fighting organization with a vision to end cancer as we know it, for everyone. We are improving the lives of people with cancer and their families as the only organization combating cancer through advocacy, research, and patient support, to ensure that everyone has an opportunity to prevent, detect, treat, and survive cancer.

## Whom we serve

People living with cancer are at the heart of all we do. We work across many groups to make a difference.



## Our vision

End cancer as we know it, for everyone.

## Our mission

Improve the lives of people with cancer and their families through advocacy, research, and patient support, to ensure everyone has an opportunity to prevent, detect, treat, and survive cancer.

## Our model

More than **80%** of our revenue is invested in delivering our mission.

**1 M+** The only nonprofit with over **one million volunteers** working in local communities across the US and Puerto Rico.

**55 million total lives impacted each year. And counting.**

## Our impact

### 3.8 million fewer cancer deaths

Invested \$3.1 billion in cancer research since 1991, contributing to 3.8 million fewer cancer deaths from 1991 - 2020.

### Access to care for all

Advocating for high-quality, affordable health care for everyone, including closing the Medicaid coverage gap, through our American Cancer Society Cancer Action Network™.

### Prevention and screening

Educating and advocating for healthy lifestyles and environments, including promotion of regular screening, and trusted source of screening recommendations for health care professionals.

### Direct patient support

Providing multiple support programs for people with cancer and their caregivers, including a home away from home at our Hope Lodge® communities when they need to travel for treatment and free access to cancer information via our 24/7 helpline.

### Every cancer

Only nonprofit supporting people with all types of cancer through advocacy, research, and patient support.

### Every life

Ensuring everyone has an opportunity to prevent, detect, treat, and survive cancer.

# Person-centered support across the cancer continuum



Prevention



Early  
Detection



Treatment  
Support



Research  
Support



Palliative care  
& symptom  
management



Survivorship



End-of-life  
care and  
bereavement

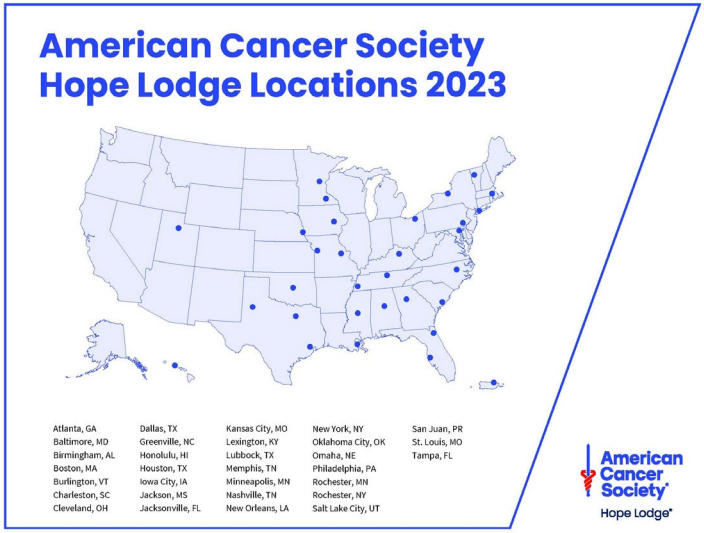


## Cross-continuum work:

- Health equity
- Global health
- Caregivers



# What no other organization could do



**1.48 million**  
Lives touched  
(-cancer.org)

**141,539**  
Recipients of  
patient  
programs/services

**24,000**  
Hope Lodge  
guests

**41,000**  
Rides to  
treatment

**220,000**  
NCIC  
callers/chats

**1.29 million**  
CSN  
participants

**1,471** partner  
organizations  
engaged in  
ACS initiatives

Total lives touched in 2022: **50.8 million**



# Patient Support Teams

## Cancer Prevention

Prevention, screening and vaccination, special populations

## Cancer Support

Navigation, global cancer treatment, patient-centered innovation

## Medical & Health Content

Patient content, professional content, external content

## Partnerships & Capacity Building

National Roundtables and coalitions, community impact, professional collaborations (global capacity, payor/national partnerships, interventions and implementation, Project ECHO, health equity, quality improvement)

## Patient & Caregiver Services

NCIC, Hope Lodge, programs and services, community implementation

## Patient Support Strategy & Operations

Strategy and planning, team and volunteer engagement, data impact reporting, business operations



# A Deeper Dive; ACS Navigation Support Reach



Building Expertise,  
Advocacy, and Capacity  
for Oncology  
Navigation  
(BEACON) Initiative



National Navigation  
Roundtable  
and  
ACS CAN



Health Systems  
Navigation Capacity-  
Building Grants



ACS CARES  
Navigation Support



Global



Community





# Overview of the ACS BEACON Initiative

With a grant from the **MSD Foundation**, the ACS BEACON Initiative supports health systems in LMICs to design, implement, and sustain oncology patient navigation programs, which includes:

- The creation and pilot of a program development and implementation toolkit for health facilities and organizations.
- A peer learning collaborative to enhance use of the toolkit.
- Targeted grant support for Kenyatta National Hospital (KNH) in Kenya and the Uganda Cancer Institute (UCI) in Uganda
- Evaluations of the KNH and UCI patient navigation programs and the toolkit pilot



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BUILDING EXPERTISE, ADVOCACY, AND  
CAPACITY FOR ONCOLOGY NAVIGATION

# National Navigation Roundtable (NNRT)

<https://navigationroundtable.org/>



**Mission:** High quality cancer care for all through evidence-based patient navigation

**Vision:** NNRT is a collaborative advancing patient navigation efforts that eliminate barriers to quality care, reduce disparities in health outcomes and foster ongoing health equity across the cancer continuum.

**5-Year Aim:** To support the creation of a sustainable model for oncology patient navigation to achieve health equity across the continuum of cancer care.



***Patient Navigation is one of the only evidenced-based interventions to eliminate health disparities and improve health equity across the cancer continuum. \*\****

# NNRT Structure



The **Steering Committee** meets monthly to provide leadership to advance the mission, guide strategic planning and implement projects.



**Task Groups** comprised of subject matter experts meet bimonthly to implement action items.

- Evidenced Based Promising Practices
- Policy
- Workforce Development
- Membership Committee

# NNRT's & Partner Impact



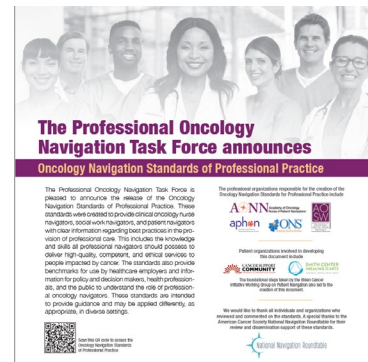
## CANCER Journal June 2022

Adopted by NNRT

### Patient Navigation Sustainability Assessment Tool (PNSAT)

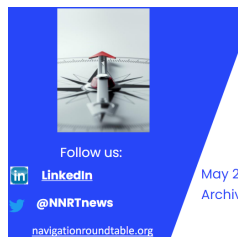


## Metrics Toolkit AONN & NNRT August 2020



## PONT Standards Dissemination

Barriers and Opportunities to Measuring Oncology Patient Navigation Impact: A National Survey	Oncology Navigation Standards of Professional Practice - PONT Standards	Flexibility, Adaptation and Roles of Patient Navigators in Oncology During COVID-19	Policy: Evaluating Sustainability of Patient Navigation Programs in Oncology by Length of Existence, Funding, and Payment Model Participation
October 25, 2022 4:00 - 5:00 PM ET	November 9, 2022 2:00 - 4:00 PM ET	November 15, 2022 2:00 - 4:00 PM ET	January 12, 2023 2:00 - 3:00 PM ET
This session will discuss the obstacles preventing navigation programs from using data to guide their existence and the opportunity to align effectiveness with oncology accreditation, funding, and payment models as a viable path forward.	The Professional Oncology Navigation Task Force released the Oncology Navigation Standards of Professional Practice to guide professional oncology clinical navigators and their organizations. This session will provide an overview of the standards and professional practice. It will also highlight how navigation programs can apply the standards to their programs.	This session highlights the evidence, emerging, and stability of the role of oncology navigation in the early COVID-19 crisis. It will cover expanding roles to address unmet needs, providing ongoing navigation services to cancer patients, especially related to the social determinants of health.	This session identifies factors that may provide the long-term sustainability of patient navigation programs. It will also highlight some factors that may need to be addressed to incorporate navigation into health care payment systems better.



Follow us:  
[LinkedIn](#)  
[@NNRTnews](#)  
[navigationroundtable.org](http://navigationroundtable.org)

May 2, 2023  
 Archived webinar



### Reaching Communities through Patient Navigation: Evidence for Action

ACS NNRT is pleased to facilitate this webinar from national thought leaders from the Community Preventive Services Task Force (CPSTF) and the Professional Oncology Navigation Task Force.

During this webinar, participants will learn about the systematic review evidence used as the basis for this CPSTF recommendation. You will also learn about the Community Guide, a resource that houses CPSTF findings, systematic review evidence, promotional materials, and implementation tools. As you listen to the presentation, you may be inspired to implement patient navigation through the lens of the Oncology Navigation Standards of Professional Practice (ONN Standards), as well as share this information with others.

## Community Guide Webinar, May 2, 2023



# Follow Us On:



@NNRTnews



[linkedin.com/in/nationalnavigation-roundtable](https://www.linkedin.com/in/nationalnavigation-roundtable)

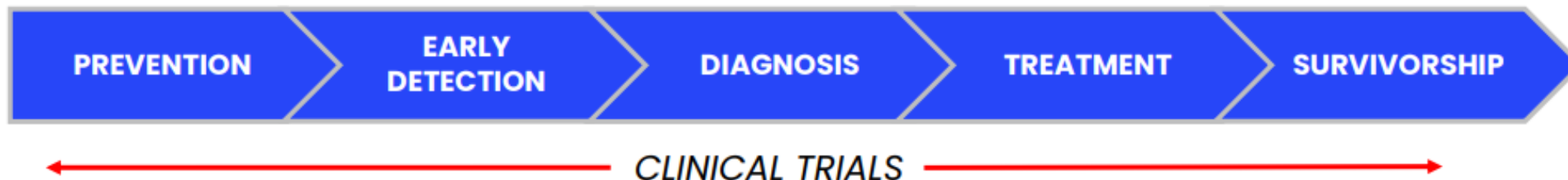


Visit the NNRT website for updates:  
<https://navigationroundtable.org/>



# ACS CAN Patient Navigation Campaign Approach

Ensuring access **across** the cancer care continuum



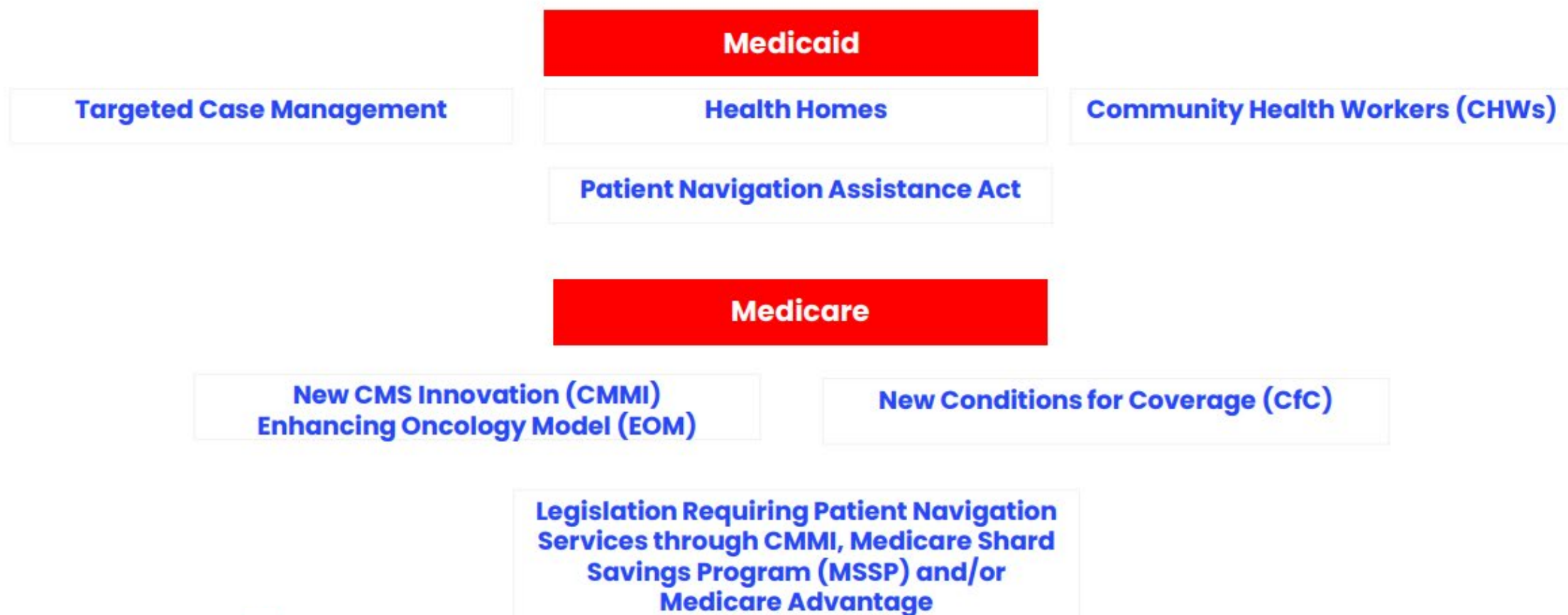
Multi-pronged, layered **advocacy strategy**



Broad **stakeholders** involvement

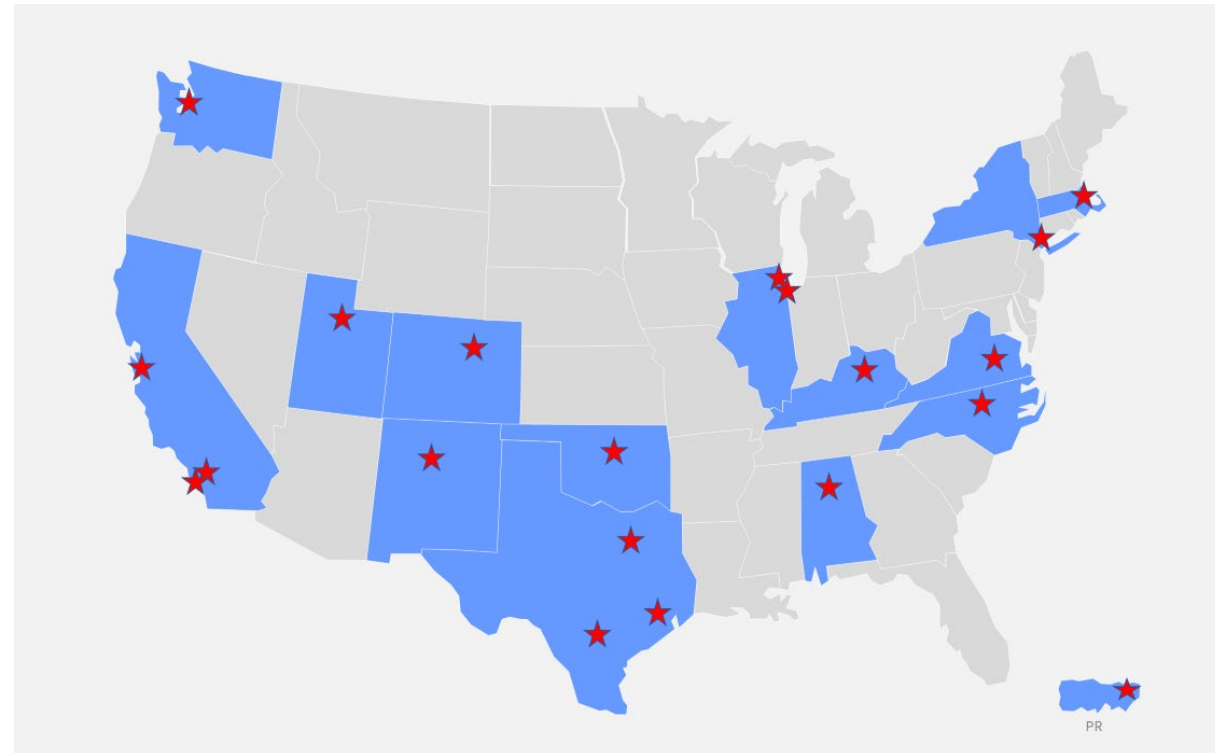


# Reimbursement/Payment Models Options



# Navigation Capacity-Building Initiative Grants

Navigation Capacity-Building Grantee	Location
Boston Medical Center	Boston, MA
City of Hope	Los Angeles, CA
Fred Hutchinson Cancer Center	Seattle, WA
Harris Health System	Houston, TX
Harold C. Simmons Comprehensive Cancer Center, UT Southwestern	Dallas, TX
HIMA San Pablo Oncologico-Caguas	Caguas, PR
Huntsman Cancer Institute at the University of Utah	Salt Lake City, UT
Markey Cancer Center, University of Kentucky	Lexington, KY
Montefiore Einstein Cancer Center	Bronx, NY
Rush University Medical Center	Chicago, IL
Stanford Cancer Institute	Palo Alto, CA
Stephenson Cancer Center, University of Oklahoma	Oklahoma City, OK
University of Alabama at Birmingham	Birmingham, AL
University of Chicago Medicine	Chicago, IL
University of Colorado-Denver	Aurora, CO
University of New Mexico Comprehensive Cancer Center	Albuquerque, NM
University of North Carolina at Chapel Hill	Chapel Hill, NC
University of Southern California	Los Angeles, CA
University of Texas Health	San Antonio, TX
Virginia Commonwealth University Massey Cancer Center	Richmond, VA



# Capacity-Building Initiative: Primary Activities & Objective

**Key Program Components:** Provide capacity building and support to select health systems to advance high-quality cancer care through innovative, sustainable models of oncology patient navigation that address barriers to care for under-resourced populations.

## Financial resources and capacity-building support

3-year grants to enhance institutional navigation, especially those from populations traditionally excluded

build upon, innovate & improve existing navigation programs



## Learning Community

platform for grantees to share best practices, lessons learned, and access training and expertise.

multi-institutional



## Comprehensive evaluation and data sharing

data will be harmonized and analyzed with the intent to:

share with the larger oncology community and support

the development of future programs and policy objectives

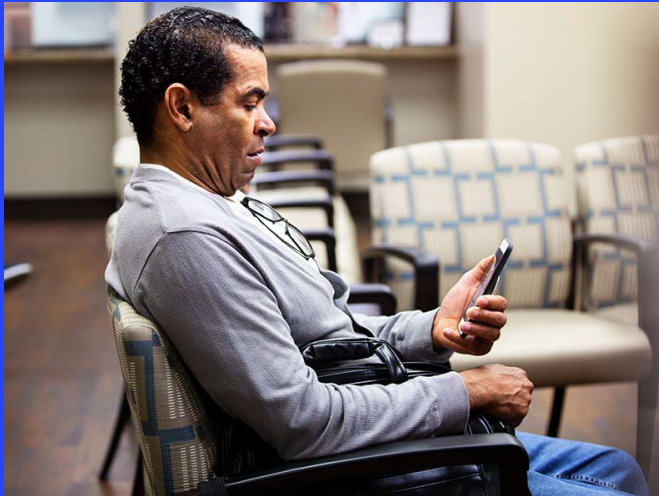
Grantees will be required to convene or leverage an existing patient or community advisory group that represents the community to provide input



Every cancer. Every life.



ACS CARES (Community Access to Resources, Education, and Support) equips those facing cancer with curated content, programs, and services to fit their specific cancer journey



### **Customized Guidance**

Download the app and get personalized information and resources that update as you age, your situation changes or new information becomes available.



### **Access to Information**

24/7 access to receive over-the-phone support from trained American Cancer Society (ACS) staff.



### **Support System**

Virtual support from trained ACS community volunteers and in person support from clinic volunteers.

<https://www.cancer.org/support-programs-and-services/acs-cares.html>



# Resources

## Providing Virtual Services When and Where You Need Them

The American Cancer Society's online programs ensure you can access information and resources anytime, from anywhere. To learn more, scan the QR codes below.

### A Personalized Support System

If you or someone you love has been diagnosed with cancer, deciding what's next can be overwhelming. The American Cancer Society can help through **ACS CARES™** (Community Access to Resources, Education, and Support), a new patient navigation support program that connects people with quality curated information and one-on-one support.



To learn more, download the **ACS CARES™** app from Google Play or the App Store.

### You Don't Have to Face Breast Cancer Alone

Through the **Reach To Recovery®** website and mobile app, people facing breast cancer can be matched with a trained volunteer who has experienced a similar type of breast cancer, stage, and treatment. Connect one-on-one with your volunteer through online chat or a phone call at a time that is convenient for you.



Visit [reach.cancer.org](https://reach.cancer.org) or download the **ACS Reach** app on Google Play or the App Store.

### Stay Connected

**Caring Bridge®**, an American Cancer Society partner, is a free online tool that helps people dealing with illnesses like cancer stay in touch with their friends, family members, and support network by creating their own personal page where they share their journey and health updates.



Visit [caringbridge.org](https://caringbridge.org) to learn more.



### Get Peer Support Online

The **Cancer Survivors Network®** (CSN) is an online community for cancer patients, survivors, and caregivers. CSN is available 24/7 for members who support one another, share their personal experiences, and offer practical tips for dealing with the side effects of cancer and its treatment.



Visit [csn.cancer.org](https://csn.cancer.org) to learn more.

### Love Your Look, Every Day

Everyone's cancer journey is different, but everyone affected by cancer deserves to feel good about the way they look. That's why the **"tlc" Tender Loving Care®** program makes hard-to-find items like wigs, hats, and mastectomy bras easy to order from the comfort of your home.



To learn more and order products, visit [tlcdirect.org](https://tlcdirect.org), or call 1-800-850-9445.

[cancer.org](https://cancer.org) | 1.800.227.2345



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## Quick Guide to American Cancer Society Resources

The **American Cancer Society (ACS)** offers support in your community and online at every step of your cancer journey. Below are just some of the resources we provide. Visit [cancer.org](https://www.cancer.org) or call us at **1-800-227-2345** for more information.

### 24/7 CANCER HELPLINE

The **American Cancer Society helpline** provides 24/7 support by connecting you with trained cancer information specialists who can provide guidance and help find answers through phone, video calls, and online live chat.

- **Cancer information specialists:** Our trained staff are available to provide guidance and help find answers through phone, video calls, and online live chat. Assistance in English, Spanish, and 200 other languages via translation service.
- **Nurse support:** Oncology and pediatric oncology nurses are available to assist you with more medically complex questions.
- **Health Insurance Assistance Service:** Our trained specialists can help with questions about your options and rights relating to health insurance and coverage.



Scan for more information and to access live chat through the ACS cancer helpline.



### CANCER.ORG

Our website is a highly trusted source of accurate, evidence-based cancer information for people facing cancer, their families, and their caregivers.

#### Survivorship: During and After Treatment

Support and treatment topics, survivorship tools, and stories of hope



#### Understanding Your Diagnosis

Tools to help answer questions about cancer and making treatment decisions



#### ACS Programs and Services

Provides information about resources available to patients and caregivers



#### Caregivers and Family

Information to help caregivers care for patients and themselves throughout the cancer journey



#### Road To Recovery – Free Rides to Treatment For Cancer Patients

One of the biggest roadblocks for people needing cancer treatment can be the lack of transportation. That's why the American Cancer Society Road To Recovery® program provides free rides to treatment through volunteer drivers.

- Trained volunteer drivers donate their time to help people with cancer get to the treatments they need.
- Transportation is provided based on volunteer availability and capacity.



### PERSONAL HEALTH MANAGER

It can be hard to keep track of all the information you receive about your diagnosis and treatment, but keeping this information organized can help you feel less stressed and more prepared to talk with your doctor. The ACS Personal Health Manager can help. Your Personal Health Manager content can be printed and kept in a 3-ring binder to take along to your appointments. Using tabbed dividers to separate each section will make it easier for you to find what you need.



### Breast Cancer Support



If you have breast cancer, you may want to connect with someone who knows what you're feeling – someone who has "been there." The American Cancer Society Reach To Recovery® program connects people facing breast cancer with trained volunteers who are breast cancer survivors. Our volunteers provide one-on-one support to help those facing breast cancer cope with diagnosis, treatment, side effects, finding ways to talk with friends and family, and more. The program is available in English and Spanish.



### Cancer Survivors Network



Our Cancer Survivors Network (CSN) is a free online community where survivors and caregivers share their stories, ask questions, and get support from each other. With a chat room and more than 40 discussion boards, CSN allows you to connect with others who have a similar cancer experience. You can send private messages to other members, build your own support network, post blogs, and more.



### Caregiver Support



Our ACS Caregiver Resource Guide provides information for people who are caring for someone with cancer. It can help you better understand what your loved one is going through, develop skills for coping and caring, learn how to care for yourself as a caregiver, and take steps to help protect your health and well-being.



### Hair-loss And Mastectomy Products



Cancer and cancer treatment can have profound effects, including some that can alter a patient's appearance, such as hair loss. The American Cancer Society "Ic" Tender Loving Care® program helps women with appearance-related side effects by offering them a variety of affordable wigs, hats, and scarves as well as a full range of mastectomy products that can be purchased from the privacy of home.



# Speaking of Resources.....

## Stay connected with the “Cancer Programs News”

FROM THE FIELD

### American Cancer Society Update

Browse through upcoming webinars hosted by the American Cancer Society and National Cancer Institute, and more.

Quality Programs / For Medical Professionals For Patients

ACS AMERICAN COLLEGE OF SURGEONS

< Cancer Programs News < Cancer Programs News: Augu... < Launch of New CancerSpeak...

FROM THE FIELD

### Launch of New CancerSpeak podcast from CANCER

August 31, 2023

🕒 1 Min 🖨️ Print ➦ Share

**CancerSpeak** is a new podcast from **CANCER**, an interdisciplinary international journal of the American Cancer Society. The inaugural podcasts feature a special 4-part series highlighting a conversation between members of the National Navigation Roundtable on patient navigation in cancer care.

FROM THE FIELD

### New Toolkit Helps to Increase Food Security Efforts Across the Cancer Continuum

August 3, 2023

🕒 1 Min 🖨️ Print ➦ Share

A new [food security toolkit for Comprehensive Cancer Control coalitions](#) from the American Cancer Society contains resources and recommendations that are aligned with the White House National Strategy for improving food access and affordability and integrating nutrition into disease management. The prevalence of low food security among people with cancer and their caregivers is much higher than the prevalence in the general population.

FROM THE FIELD

### American Cancer Society Update

September 21, 2023

🕒 1 Min 🖨️ Print ➦ Share

- The special supplement [A Decade Later: The State of Patient Navigation in Cancer](#) was published in the *Cancer* journal in June 2022. The supplement is a collection of 13 articles that focus on improving care disparities across the cancer continuum by highlighting the critical role of evidence-based navigation.
- [Register](#) today for the American Cancer Society National Navigation Roundtable Call to Action webinar series:

[www.cancer.org](http://www.cancer.org)

# Thank You

# Enhancing Collaboration between American College of Physicians (ACP) and the Commission on Cancer

**Ana Maria Lopez, MD MPH MACP**

Professor of Medical Oncology, Sidney Kimmel Medical College

Associate Director, Diversity, Equity, and Inclusion, Sidney Kimmel Cancer Center

ACP Representative

October 22<sup>nd</sup>, 2023





# Overview: the American College of Physicians (ACP)

- Established in 1915, ACP is an association of internal medicine physicians, specialists and subspecialists with 161,000 members worldwide.

**Mission:** To enhance the quality and effectiveness of health care by fostering excellence and professionalism in the practice of medicine.

Internal medicine physicians serve as a foundation for clinical care. We are leaders, experts, connectors, and detectors addressing clinical complexities. As IM physicians, we specialize in adult medicine, partnering with other medical professionals, and caring for our patients throughout the entirety of their healthcare journey.



## ACP's Activities Relevant to the CoC

ACP advances physician, student, and patient education and cancer care through:

- Research and publications (*Annals* and other publications)
- Medical Education (MKSAP, IMM, multiple learning hubs)
- Public policy/advocacy
- Clinical guidelines development
- Quality improvement programs



## *Annals of Internal Medicine*

***Annals of Internal Medicine* consistently ranks as one of the most widely cited medical journals in the world.**

- *Annals of Internal Medicine* 2022 Impact Factor is 39.2
- *Annals* ranks 6th overall in the categories of Medicine, General and Internal Medicine (Clarivate Analytics)
- Receives over a million page views each month, along with significant coverage in the general media

**Annals**  
**of Internal Medicine®**



# Annals of Internal Medicine recent engagement on cancer

- Annals regularly publishes articles related to cancer.
- ACP periodically covers cancer related topics as part of Annals' *Beyond the Guidelines* and *In the Clinic* series.

Beyond the Guidelines October 2022

[How Would You Screen This Patient for Colorectal Cancer?: Grand Rounds Discussion From Beth Israel Deaconess Medical Center](#)

Beyond the Guidelines February 2022

[When and How Would You Screen This Patient for Cervical Cancer?: Grand Rounds Discussion From Beth Israel Deaconess Medical Center](#)

ACP Journal Club | September 2023

**In adults with cancer and VTE, DOACs were noninferior to LMWH for recurrent, nonfatal VTE at 6 mo**

Bethany T. Samuelson Bannow, MD, MCR

Letters | September 2023

**Receipt of Clinician Recommendation for Colorectal Cancer Screening Among Underscreened U.S. Adults**

Jordan Baeker Blispo, PhD, MPH, Priti Bandi, PhD, Ahmedin Jemal, DVM, PhD, Farhad Islami, MD, PhD

Original Research | September 2023

**Role of Artificial Intelligence in Colonoscopy Detection of Advanced Neoplasias: A Randomized Trial**

Carolina Mangas-Sanjuan, MD, PhD, Luisa de-Castro, MD, PhD, Joaquín Cubilella, MD, PhD, Pilar Díez-Redondo, MD, PhD, Adolfo Suárez, MD, PhD, María Pellisé, MD, PhD, Nereida Fernández, MD, Sara Zarraquiños, MD, ... et al.

Reviews | September 2023

**Real-Time Computer-Aided Detection of Colorectal Neoplasia During Colonoscopy: A Systematic Review and Meta-analysis**

Cesare Hassan, MD, PhD, Marco Spadacini, MD, Yuichi Mori, MD, PhD, Farid Foroutan, PhD, Antonio Facciorusso, MD, PhD, Paraskevas Gkoifakis, MD, Georgios Tzitzios, MD, Konstantinos Triantafyllou, MD, Giulio Antonelli, MD, ... et al.

Editorials | September 2023

**From Tool to Team Member: A Second Set of Eyes for Polyp Detection**

Dennis L. Shung, MD, MHS, PhD

Original Research | September 2023

**Estimating Breast Cancer Overdiagnosis After Screening Mammography Among Older Women in the United States**

Iliana B. Richman, MD, MHS, Jessica B. Long, MPH, Pamela R. Soulos, MPH, Shi-Yi Wang, MD, PhD, Cary P. Gross, MD



# Medical Education: MKSAP®19

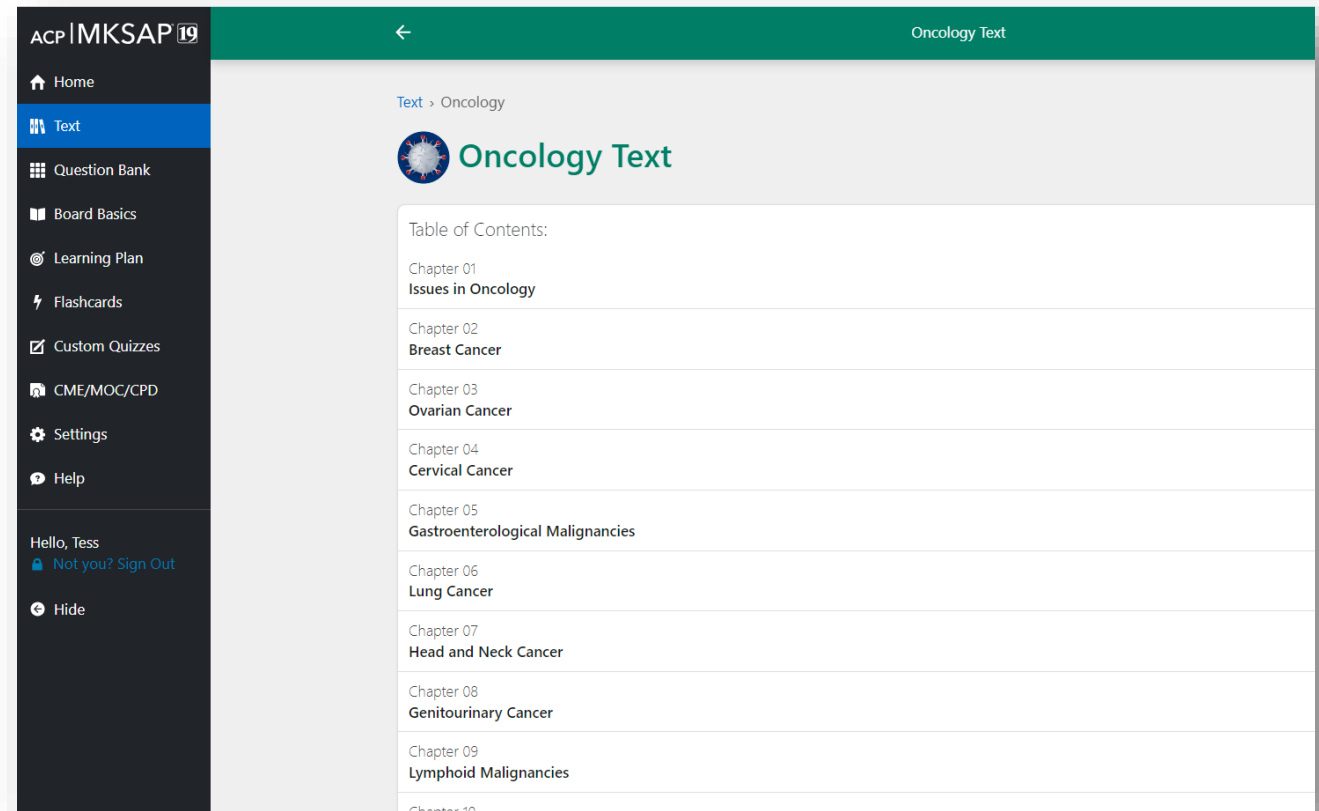
The Medical Knowledge Self-Assessment Program® (MKSAP) is a “go-to” resource for board prep and lifelong learning.

MKSAP 19 continues to offer an all-inclusive, personalized learning system.

The program includes:

- 12 medical content sections
- Over 2,000 self-study questions
- Flash cards
- Multimedia enhancements

**MKSAP 19 includes 13 chapters on Oncology.**



# Internal Medicine Meeting

- The Internal Medicine Meeting (IMM) is ACP's premier scientific meeting, occurring annually in the spring, and welcomes over 8,000 physicians, faculty, and students to participate in a broad array of interactive clinical and practice topics.
- Some cancer-related sessions at Internal Medicine Meeting 2023 included:
  - **Clinical Triad: Advances in Cancer Screening: Breast, Colon, Lung**
  - **Clinical Triad: Prognosis, Cancer Screening, and Deprescribing: When Should We Stop?**
  - **Colon Cancer Screening: Increasing Access With New Guidelines**





# Medical Education: Online Learning Center

- Comprehensive platform for CME and MOC activities.
- Podcast Feature: "**Radiation Oncology Side Effects: 5 Pearls Segment**" by Core IM team - bridging the knowledge gap in radiation therapy and enhancing patient care.
- Annals Consult Guys episode "**Cancer and Deep Venous Thrombosis: A Serious Combination**" - discussing the complexities of this medical challenge with engaging discourse and real-world scenarios

The screenshot shows a podcast player interface. At the top, there are navigation tabs: "5 Pearls", "CME", "Episodes By Topic", and "Home / Onc". The main title is "Radiation Oncology Side Effects: 5 Pearls Segment". Below the title, it says "Posted: May 31, 2023", "By: Dr. Sam Kumarasena, Dr. Matthew Abrams, Dr. Daphna Spiegel and Dr. Shreya P. Trivedi", "Graphic: Dr. Kabao Vang", "Audio: Daksh Bhatia", and "Peer Review: Dr. Julian Hong, Dr. Sarah Stephens". There is a progress bar at 00:00 and a volume icon. Below the player are buttons for "TIME STRAMPS", "CME-MOC", "VIDEO OF RAD ONC PHYSIOLOGY", "SHOW NOTES", "TRANSCRIPT", and "REFERENCES".

The infographic is titled "Radiation Oncology" and "Common Radiation Sites & Side Effects". It features a central human silhouette with internal organs highlighted. To the left, it lists "Radiation effects are location, depth, & timeframe specific" with three sub-points: "Location: What are the nearby structures?", "Depth: Is this radiation shallow or deep?", and "Timeframe: Acute inflammation vs chronic fibrotic changes". To the right, it lists side effects for four sites: "Brain" (Acute & Chronic, Fatigue, Memory loss), "Lung" (Acute: Pneumonitis, Chronic: Pulmonary fibrosis, Esophagitis, Esophageal strictures, Acute pericarditis, Myocardial fibrosis), "Breast" (Acute: Dermatitis, Chronic: Scarring and fibrosis), and "Abdomen/Pelvis" (Acute: Enteritis, Proctitis, Colitis, Cystitis; Chronic: Strictures, Fistulas, Detrusor dysfunction). At the bottom, it states "Key Points: These exist on a spectrum. Many are diagnosis of exclusion."




# Public Policy/Advocacy

- ACP regularly advocates for regulatory and legislative solutions to increase access to quality and equitable cancer prevention, screening, treatment, and long-term care.
- Recently, ACP has signed several cancer-related joint letters to policymakers, including:
  - Joint Letter Regarding Tobacco Provisions in the FY2024 Ag-FDA Appropriations Bill
  - Joint Letter to EPA Regarding Passenger Vehicle Emission Standards
  - Joint Letter Opposing United Healthcare's GI Endoscopy Prior Authorization Program
  - Joint Letter to Senators Supporting FDA Proposals to Ban the Manufacture and Sale of Menthol Cigarettes and Flavored Cigars (2023)



# ACP Clinical Guidelines Development and Dissemination

- ACP guidelines recommend appropriate screenings for all cancers, noting the importance of:
  - inclusion of appropriate reimbursement
  - acknowledgement of screening frequency recommendations
  - the essential need to collaborate to educate diverse communities
  - the benefits of positive messaging to the public
- Most recent ACP Guidelines Advisory regarding cancer was the August 2023 update on colorectal cancer screening.





**Annals of Internal Medicine®** Search Journal

LATEST ISSUES IN THE CLINIC JOURNAL CLUB MULTIMEDIA SPECIALTY COLLECTIONS CME / MOC AUTHORS / SUBM

Clinical Guidelines | August 2023

## Screening for Colorectal Cancer in Asymptomatic Average-Risk Adults: A Guidance Statement From the American College of Physicians (Version 2) FREE

Amir Qaseem, MD, PhD, MHA, , Curtis S. Harrod, PhD, MPH, , ... [View all authors +](#)

[Author, Article, and Disclosure Information](#)

<https://doi.org/10.7326/M23-0779> Eligible for CME Point-of-Care

[Abstract](#) | [PDF](#) | [Tools](#) | [Share](#)

### ABSTRACT

- SCOPE, POPULATION, AND INTENDED AUDIENCE
- METHODS
- AGE TO START SCREENING FOR CRC
- AGE TO STOP SCREENING FOR CRC
- SCREENING TESTS FOR CRC
- COSTS OF SCREENING TESTS

### Abstract

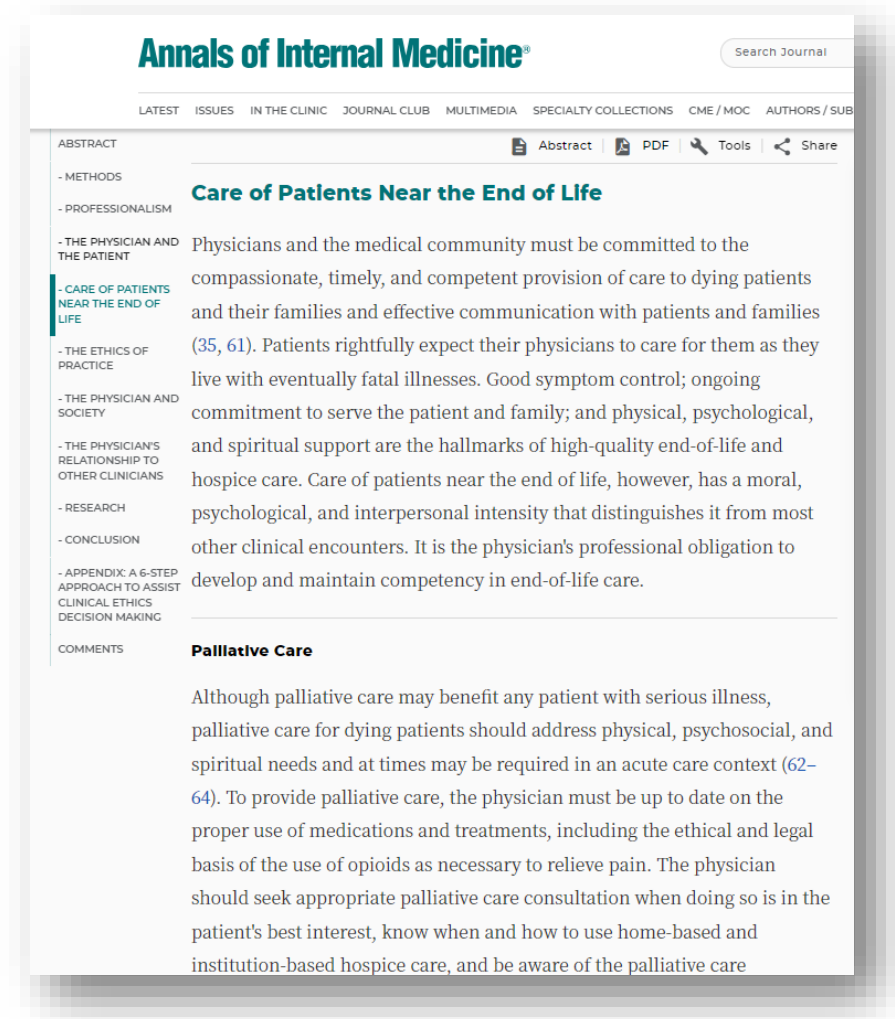
**Description:**

The purpose of this updated guidance statement is to guide clinicians on screening for colorectal cancer (CRC) in asymptomatic average-risk adults. The intended audience is all clinicians. The population is asymptomatic adults at average risk for CRC.



# Policy Development for End of Life/Palliative Care

- Policies by ACP's Ethics Committee in *ACP Ethics Manual Seventh Edition*
  - Care of Patients Near the End of Life
  - Palliative Care
  - Making Decisions Near the End of Life
  - Advance Care Planning
  - Withdrawing or Withholding Treatment
  - Artificial Nutrition and Hydration
  - Do-Not-Resuscitate Orders
  - Futile Treatments
  - Determination of Death
  - Physician-Assisted Suicide and Euthanasia
  - Disorders of Consciousness
  - Solid Organ Transplantation
- Updated education resources by Medical Education
  - Podcast series “Patient Priorities Care” and “The Last Breath”
- Clinical modules included at IMM



The screenshot displays the Annals of Internal Medicine website interface. At the top, the journal title "Annals of Internal Medicine" is prominent, along with a search bar and navigation links for "LATEST", "ISSUES", "IN THE CLINIC", "JOURNAL CLUB", "MULTIMEDIA", "SPECIALTY COLLECTIONS", "CME / MOC", and "AUTHORS / SUB". Below the navigation, there are icons for "Abstract", "PDF", "Tools", and "Share". The main content area features the article title "Care of Patients Near the End of Life" in a teal font. The article text begins with "Physicians and the medical community must be committed to the compassionate, timely, and competent provision of care to dying patients and their families and effective communication with patients and families (35, 61). Patients rightfully expect their physicians to care for them as they live with eventually fatal illnesses. Good symptom control; ongoing commitment to serve the patient and family; and physical, psychological, and spiritual support are the hallmarks of high-quality end-of-life and hospice care. Care of patients near the end of life, however, has a moral, psychological, and interpersonal intensity that distinguishes it from most other clinical encounters. It is the physician's professional obligation to develop and maintain competency in end-of-life care." Below the article text, there is a section titled "Palliative Care" with a sub-heading "Palliative Care". The text in this section states: "Although palliative care may benefit any patient with serious illness, palliative care for dying patients should address physical, psychosocial, and spiritual needs and at times may be required in an acute care context (62-64). To provide palliative care, the physician must be up to date on the proper use of medications and treatments, including the ethical and legal basis of the use of opioids as necessary to relieve pain. The physician should seek appropriate palliative care consultation when doing so is in the patient's best interest, know when and how to use home-based and institution-based hospice care, and be aware of the palliative care".



# Affiliations and Collaborations

- Council of Medical Specialty Societies - Diagnostic Excellence Project, Colorectal Cancer TEP
- National Cancer Institute – Roundtable PCP Cancer Risk Assessment
- American Cancer Society – Guidelines Development Group, Lung Cancer Screening Recommendation Review
- American Cancer Society – National Roundtable on Cervical Cancer
- American College of Obstetricians and Gynecologists – Cancer Evidence Review
- American Society of Clinical Oncology – Head & Neck Cancer Guidelines, Stage IV NSCLC With Driver Alterations Living Guideline Recommendations

CMSS



ACOG

ASCO®





## IM Physicians are Foundational to the Cancer Care Delivery Team

**ACP embraces the role of IM physicians to help eradicate cancer and improve quality care for all:**

- prevention**
- early detection**
- survivorship**
- palliation**



# Thank you!

anamaria.lopez@jefferson.edu



Exercise  
is Medicine®

MOVING  
THROUGH  
CANCER

Kathryn Schmitz, PhD, MPH, FACSM, FTOS, FNAK  
Professor, Hematology and Oncology  
University of Pittsburgh School of Medicine  
Past President, American College of Sports Medicine  
Founder, Moving Through Cancer  
American Cancer Society Clinical Research Professor  
[schmitzk@upmc.edu](mailto:schmitzk@upmc.edu)



# Who are we?



- The **American College of Sports Medicine (ACSM)** is an international membership association comprised of more than 50,000 physicians, scientists, educators and certified health fitness professionals
- Representing 70 occupations and 90 countries around the globe, ACSM is the only organization that offers a 360-degree view of the sports medicine and exercise science profession
- The diversity and expertise of our membership make ACSM the largest, most respected sports medicine organization in the world

# ACSM Mission Statement



**AMERICAN COLLEGE**  
**of SPORTS MEDICINE**<sup>®</sup>  
**LEADING THE WAY**

*The American College of Sports Medicine advances and integrates scientific research to provide educational and practical applications of exercise science and sports medicine.*



# ACSM Annual Meeting is in May: Boston 2024!



**Where Science, Research and Practice Build Healthy, Active Lives**

# Regional and Specialty Conferences

**IDEA & ACSM Health & Fitness Summit**

**Advanced Team Physician Course**

**Sports Medicine Essentials**

**Integrative Physiology of Exercise Conference**

» **Specialty Conferences and Roundtables**

## Regional Chapter Meetings

+ Central States Chapter

+ Greater New York Chapter

+ Mid-Atlantic Chapter

+ Midwest Chapter

+ New England Chapter

+ Northland Chapter

+ Northwest Chapter

+ Rocky Mountain Chapter

+ Southeast Chapter

+ Southwest Chapter

+ Texas Chapter

# 2024 Inaugural Meeting: International Society of Exercise Oncology

- May 28, 2024
- Boston
- Preceding ACSM Annual Meeting



# ACSM Publishes Journals...

## ACSM Journals



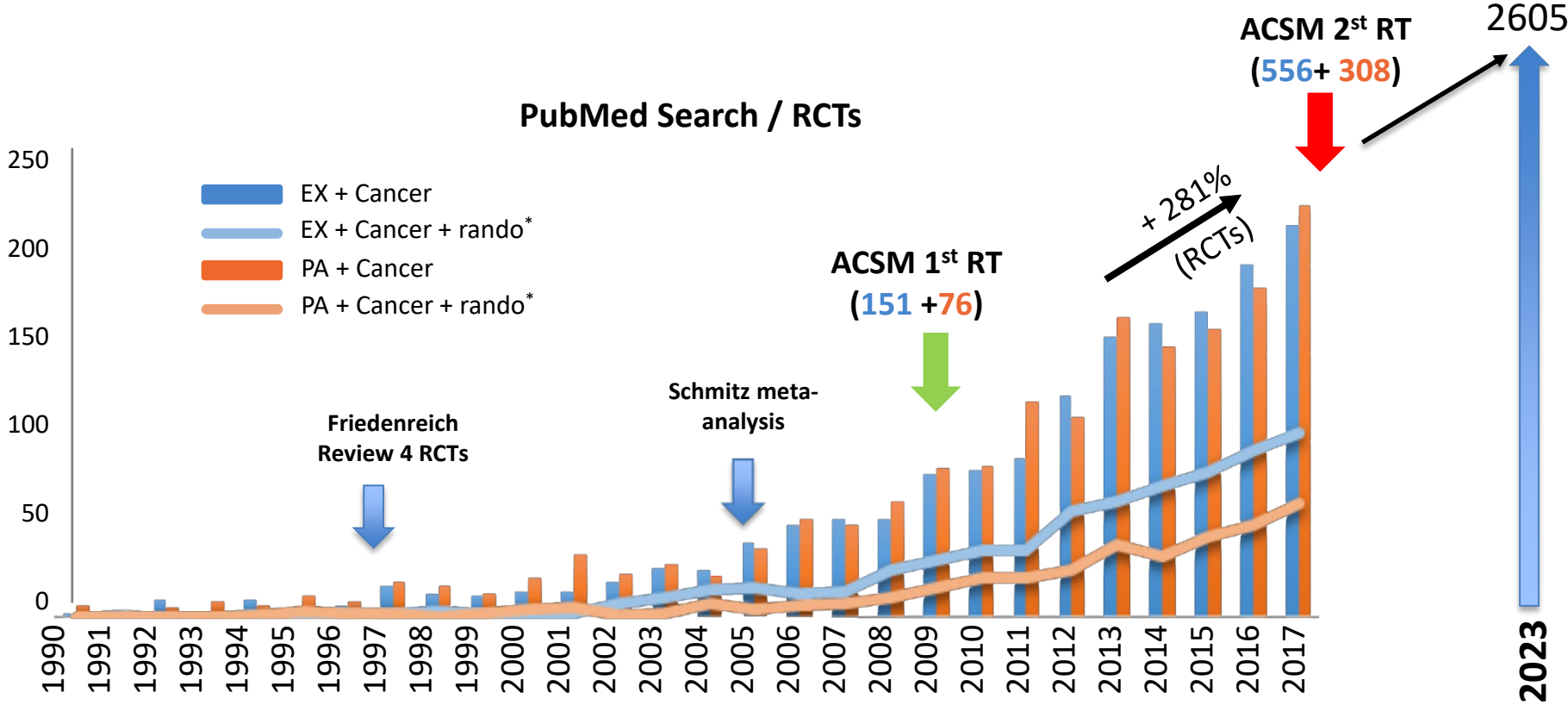
# And Books.... (Wolters Kluwer)

- Forthcoming in 2024
  - Essentials of Exercise Oncology
    - Authors:
      - Kathryn Schmitz
      - Anna Schwartz
      - Anna Campbell





# RCTs in the Field of Exercise Oncology



# Documented Benefits of Exercise during Cancer Tx

- Fatigue
- Sleep
- Quality of life
- Anxiety
- Depression
- Body composition
- Function
- Breast cancer related lymphedema

SPECIAL COMMUNICATIONS

## Exercise Guidelines for Cancer Survivors: Consensus Statement from International Multidisciplinary Roundtable

KRISTIN L. CAMPBELL<sup>1</sup>, KERRI M. WINTERS-STONE<sup>2</sup>, JOACHIM WISKEMANN<sup>3</sup>, ANNE M. MAY<sup>4</sup>, ANNA L. SCHWARTZ<sup>5</sup>, KERRY S. COURNEYA<sup>6</sup>, DAVID S. ZUCKER<sup>7</sup>, CHARLES E. MATTHEWS<sup>8</sup>, JENNIFER A. LIGIBEL<sup>9</sup>, LYNN H. GERBER<sup>10,11</sup>, G. STEPHEN MORRIS<sup>12</sup>, ALPA V. PATEL<sup>13</sup>, TRISHA F. HUE<sup>14</sup>, FRANK M. PERNA<sup>15</sup>, and KATHRYN H. SCHMITZ<sup>16</sup>

Downloaded from www.jco.org

# Guidelines

SPECIAL COMMUNICATIONS

CA CANCER J CLIN 2022;0:1-33

Exerci  
Conse  
Multid

American Cancer Society nutrition and physical activity  
guideline for cancer survivors

KRISTIN L. CAI  
ANNA L. SCHW  
JENNIFER A. L.  
FRANK M. PER

C  
Lawre  
Kin

ASCO ST

## Exercise, Diet, and Weight Management During Cancer Treatment: ASCO Guideline

**ASCO GUIDELINE: Medical oncologists 'SHOULD' refer patients receiving chemotherapy to exercise programming to address common symptoms and side effects.**

PhD, RD<sup>5</sup>;  
D, MS<sup>10</sup>;  
o, PhD<sup>13</sup>

les

# Current State

- 30-47% of cancer patients are adequately active (Blanchard 2008, Webb 2016)
- 15% of patients report being referred to an exercise program by their oncologist (Ligibel 2022)

# MOVING THROUGH CANCER

A stylized human figure in blue, with arms and legs extended, positioned behind the word 'CANCER' in the title.

[www.exerciseismedicine.org/eim-in-action/moving-through-cancer-2/](http://www.exerciseismedicine.org/eim-in-action/moving-through-cancer-2/)






# Moving Through Cancer Retreat



- **GOAL:**
  - What needs to happen for exercise to be standard of care in the setting of oncology by 2029?

Communication

## Moving Through Cancer: Setting the Agenda to Make Exercise Standard in Oncology Practice

Kathryn H. Schmitz, PhD, MPH <sup>1</sup>; Nicole L. Stout, DPT <sup>2</sup>; Melissa Maitin-Shepard, MPP<sup>3</sup>; Anna Campbell, PhD<sup>4</sup>; Anna L. Schwartz, PhD<sup>5</sup>; Chloe Grimmett, PhD <sup>6</sup>; Jeffrey A. Meyerhardt, MD, MPH<sup>7</sup>; and Jonas M. Sokolof, DO<sup>8</sup>

### LAY SUMMARY:

- International evidence-based guidelines support the prescription of exercise for all individuals living with and beyond cancer.
- This article describes the agenda of the newly formed Moving Through Cancer initiative, which has a primary objective of making exercise standard practice in oncology by 2029.



# Policy, Funding, Sustainability

- Advocate for policies that support exercise oncology programming

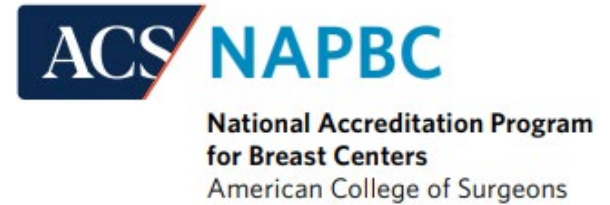


Melissa Maitin-Shephard



# NAPBC Standards Revision

- New standards, recently adopted, will require breast programs to declare a plan for
  - Functional evaluations prior to/after surgery (leading to referrals)
  - **Exercise referrals in medical oncology**
  - Exercise referrals at the point of survivorship
- Effective in 2025



Optimal Resources for  
**Breast Care**

**2024 Standards**

Released February 2023



# NCD Application Written



Centers for Medicare & Medicaid Services

- Focus on BREAST CANCER
- Request for CMS to cover
  - Triage and referral to exercise and rehabilitation
  - Supervised exercise sessions
    - Individual or group
    - In person or telehealth
- **SEEKING BUY-IN FROM**
  - **COC**
  - **NAPBC**
  - + 20 other organizations

**Formal Request for an NCD**  
10/10/2023

## **Background**

Despite the curative impact of anticancer therapies including surgery, radiation, and medical treatments, the adverse physiologic effects frequently lead to long-term consequences such as cardiometabolic disorders and impairments in performance status. Metabolic dysfunction is a highly prevalent risk factor for the occurrence and recurrence of breast cancer and is paradoxically induced or exacerbated by standard cancer therapies including chemotherapy, hormone therapies, and immunotherapy.<sup>1-4</sup> Obesity is a common state of metabolic dysfunction, however other manifestations such as insulin resistance and cardiovascular diseases also develop independent of obesity and are frequent long-term sequelae of breast cancer therapy.<sup>5-7</sup> For example, breast cancer survivors have a 50% increased risk of developing diabetes compared to populations unaffected by breast cancer, and some cancer treatments such as hormone therapy more than double this risk.<sup>8,9</sup> In addition to metabolic disorders, patients exposed to breast cancer treatments typically suffer long-term physical impairments such as diminished cardiopulmonary capacity (i.e. deconditioning, fatigue) and musculoskeletal disorders such as lymphedema.<sup>10,11</sup>

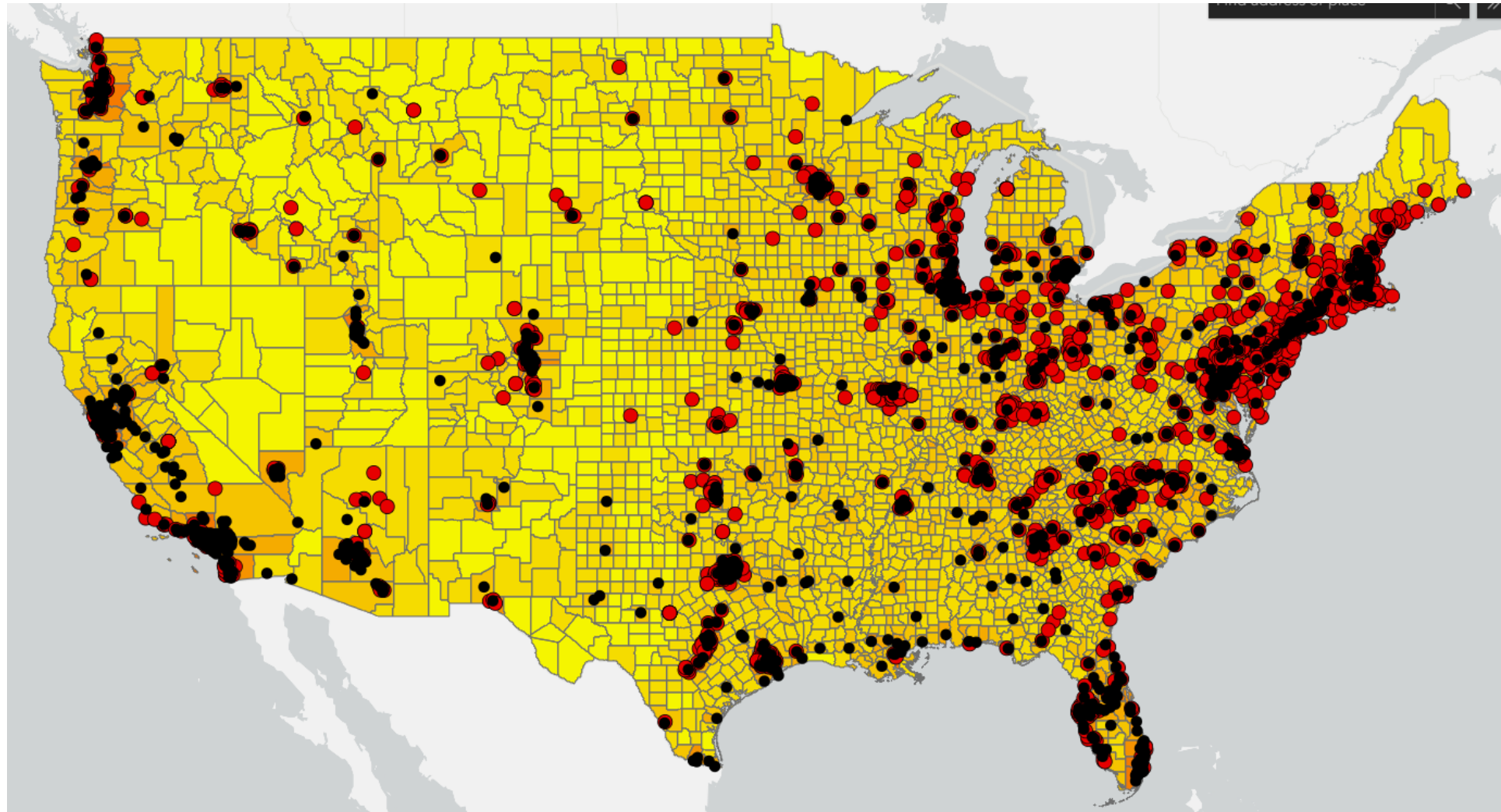
Approximately 12% of women will be diagnosed with breast cancer during their lifetime, and the number of breast cancer survivors in the United States is projected to increase by 25% over the next decade.<sup>12</sup> Accordingly, the cardiometabolic and performance status deficits from breast cancer treatment will increasingly burden individual and public health systems.



# Programming



# US Map of Exercise Oncology Programming



# Disparities in Exercise Oncology Program Availability

- 39% of the U.S. population lives in a census tract > 10 miles from EOP
- Distribution of programming varies ( $p < 0.01$ ) by:
  - Population density (less in rural)
  - Proportion of Non-white residents
  - Neighborhood deprivation index

# National Exercise Oncology Directory

## Survivors - Exercise is Medicine

### Connect with a General Exercise Program

Based on your responses, a General Exercise will best meet your needs



#### **i** What is a general exercise program?

General exercise programs are not cancer specialized and typically do not have clinical staff. Programs are offered by local gyms, fitness centers, and community clubs. Options may include fitness classes, sports, yoga, personal training, and gym memberships. These programs are best if you are already active and have few side effects. Try to get at least 150 minutes of moderate-intensity exercise per week for the greatest health benefits!

#### Overview of program types



#### Recommended Programs Near You:

Limited Programs near you? [View all Programs](#)

# Workforce





# ACSM Cancer Exercise Credentialing

## ACSM/ACS Certified Cancer Exercise Trainer<sup>SM</sup>

The ACSM/ACS Certified Cancer Exercise Trainer specialty certification will be sunset at the end of May 2023. The course is moving to an advanced, online course. The last delivery date of the specialty certification exam is May 31, 2023 with PearsonVue.

Current, CET professionals may continue to use the designation if the certification remains in good standing.



education and training for health and fitness professionals



# Stakeholder Awareness



# Stakeholder Awareness, Empowerment, Engagement



- Ensure everyone living with cancer is aware of exercise benefits
  - Brochure development and distribution
- Goals:
  - Distribution of brochures, postcards
    - Social media campaign
    - TX Oncology
    - >25K @ National Coalition of Breast Centers
  - Translate the brochure into Spanish
  - Evaluation of current knowledge





# **MOVING THROUGH**



Being physically active can be challenging after a cancer diagnosis. But research clearly shows that most people who are more active during cancer treatment have:

**FEWER  
SIDE  
EFFECTS**

**FASTER  
RECOVERY  
FROM  
TREATMENT**

**LESS RISK  
OF CANCER  
RETURNING**  
(IN SOME CASES)

If possible, consult with an exercise oncology professional or physical therapist if you have questions about exercise during and after your cancer treatment.

For a screening survey and to find help in your area, scan this code:





The primary messages of their recommendations are:

# SOME MOVEMENT IS BETTER THAN NONE. *MOVEMENT MATTERS!*



Helen rides her bike in the park on weekends for one hour and enjoys online dance exercise videos two days after work.



Maria walks each day for 20-25 minutes.



Malik attends a 60-minute ballroom dancing class once a week and goes to the gym on two other days.\*

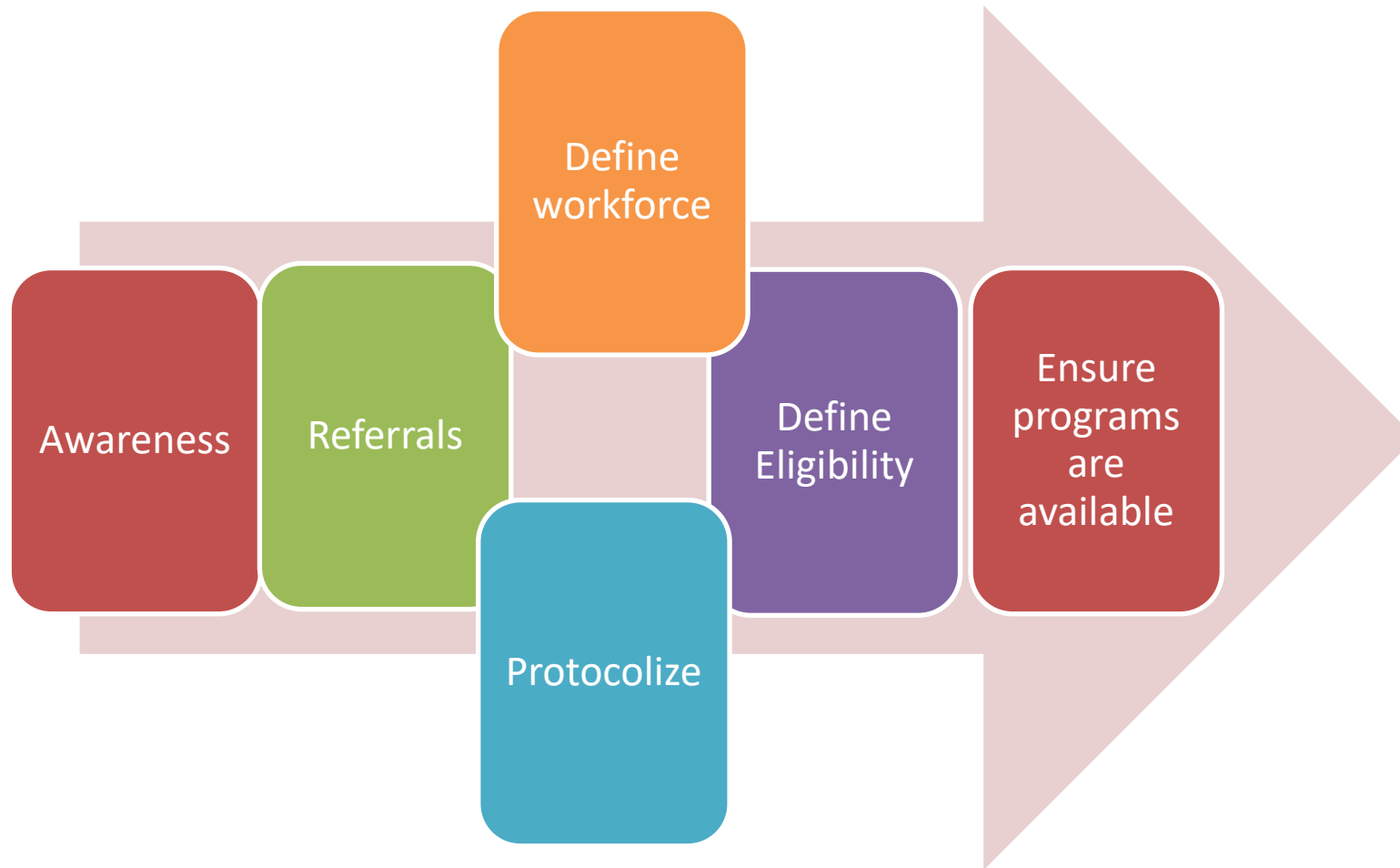


Earl does a 60-minute water exercise class and walks 30 minutes 3x/week.





# Exercise Oncology as Standard of Care



# Current MTC Task Force



Kelley  
Covington



Neil Iyengar



Melissa  
Maitin-Shepard



Kathryn  
Schmitz



Anna  
Campbell



Jess  
Gorzelitz



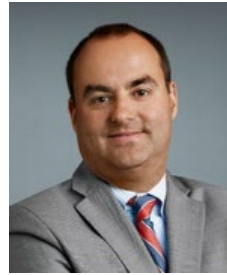
Bernadine  
Pinto



Mary  
Kennedy



Anna  
Schwartz



Jonas  
Sokolof



Chris  
Wilson



Kristen  
Sullivan

# MOVING THROUGH CANCER

A stylized human figure in blue, positioned behind the word 'CANCER' in the title. The figure is depicted in a dynamic, forward-leaning pose, suggesting movement or running.

[www.exerciseismedicine.org/eim-in-action/moving-through-cancer-2/](http://www.exerciseismedicine.org/eim-in-action/moving-through-cancer-2/)

# Cancer Care in the Department of Defense

Commission on Cancer  
Member Organization Representatives Meeting  
October 22, 2003

MAJ Jessica Weiss, MD

# Disclosures

- The views expressed are those of the author(s) and do not reflect the official policy of the Department of the Army, the Department of Defense or the U.S. Government.

# Who are we?





# Who are we?



Acquisition &  
Sustainment

Budget & Financial  
Management

Intelligence &  
Security

Personnel &  
Readiness

Policy

Reform

Research &  
Engineering

# Who are we?



VA



U.S. Department  
of Veterans Affairs

Veterans Health  
Administration



Acquisition &  
Sustainment

Budget & Financial  
Management

Intelligence &  
Security

Personnel &  
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Engineering

# DoD as a stakeholder in cancer care



# DoD as a stakeholder in cancer care



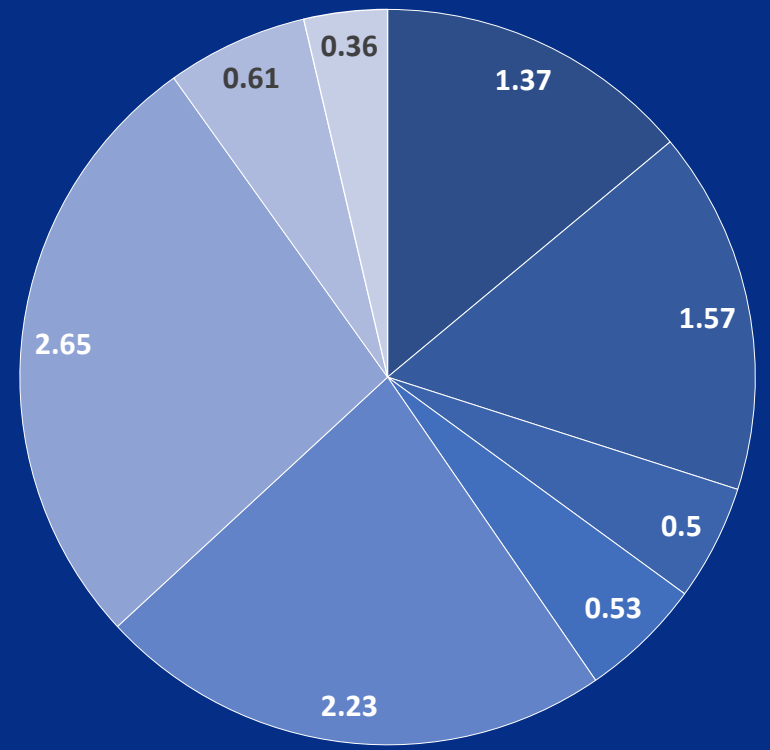
Direct Patient Care



Dedicated Research Funding

# DoD as a *provider* of cancer care

The MHS serves **9.5 million** beneficiaries



- Active Duty Service Members
- National Guard/Reserve Beneficiaries
- Retired Service Members
- Survivors
- Active Duty Family Members
- Inactive Guard/Reserve Beneficiaries
- Retiree Family Members
- Other

Patient Care Numbers in the Military Health System (FY 2022)	
Outpatient Visits	86,000,000
Emergency Department Visits	3,750,000
Inpatient Admissions	865,800
Prescriptions Filled	105,200,000

# DoD as a *provider* of cancer care

- 4% of the DoD beneficiary population carries an invasive cancer diagnosis exclusive on non-melanoma skin cancer
- Colon, breast, prostate, and lung are the most common cancers in the DoD beneficiary population









# DoD as a *provider* of cancer care

MILITARY MEDICINE, 188, 7/8:190, 2023

## Contributions of the Department of Defense Congressionally Directed Medical Research Programs to Advances in Cancer Therapeutics

Melanie Neagley, PhD\*; Alexis Helsel, PhD, MPH\*,†; Regina Buachie, MPH\*,†; Tracy Behrsing, PhD\*; Sagar Ghosh, PhD, MBA\*; Gayle Vaday, PhD\*; Melissa D. Cunningham, PhD\*

	Patients 	Outpatient Encounters 	Hospital Bed Days 	
Prostate Cancer	Active Service Members	1,416	14,628	1,549
	Other DoD Beneficiaries	210,209	3.60 million	113,162
Ovarian Cancer	Active Service Members	350	2,672	1,196
	Other DoD Beneficiaries	22,607	423,545	87,923

	Patients 	Outpatient Encounters 	Hospital Bed Days 	
Female Invasive Breast Cancer	Active Service Members	1,531	40,541	2,093
	Other DoD Beneficiaries	203,384	4.11 million	160,056
Female In Situ Breast Cancer	Active Service Members	438	2,786	210
	Other DoD Beneficiaries	48,915	321,015	8,764
Male Invasive Breast Cancer	Active Service Members	61	339	41
	Other DoD Beneficiaries	2,131	26,700	537

# DoD as a *funding source* for cancer research

- Collaborations across DoD facilities and with other government and private partners
  - Cancer Moonshot (2023)
  - DoD Congressionally Directed Medical Research Programs

# DoD as a *funding source* for cancer research

- Cancer Moonshot (2023)
  - \$47 million for the Murtha Cancer Center
  - Applied Proteogenomics Organizational Learning and Outcomes (APOLLO) project
  - Project for Military Exposures and Toxin History Evaluation in U.S. Service Members (PROMETHEUS)
- DoD Congressionally Directed Medical Research Programs

# DoD as a *funding source* for cancer research

- Cancer Moonshot (2023)
- DoD Congressionally Directed Medical Research Programs
  - Founded in 1992 with the goal of supporting potentially high risk-high reward research projects through military-civilian-congressional partnership
  - Multiple cancer-specific research programs
    - Total funding for Peer Reviewed Cancer Program from 2009-2022: \$784.4M



# DoD as a *funding source* for cancer research

- Cancer Moonshot (2023)
- DoD Congressionally Directed Medical Research Programs

**TABLE I.** The utilization of CDMRP-Funded Drugs Within the MHS (Through December 31, 2018)

Research program	Drug	Approval year	Patients	Prescriptions	FDA-approved indications
Breast cancer	HERCEPTIN® (trastuzumab) <sup>a</sup>	1998	673	9,527	Breast cancer Stomach cancer
	KADCYLA® (ado-trastuzumab emtansine)	2013	47	392	Breast cancer
	IBRANCE® (palbociclib)	2015	2,473	23,903	Breast cancer
	KISQALI® (ribociclib)	2017	90	428	Breast cancer
	KISQALI FEMARA CO-PACK® (letrozole and ribociclib)	2017	26	288	Breast cancer
	VERZENIO® (abemaciclib)	2017	227	796	Breast cancer
	Ovarian cancer	RUBRACA® (rucaparib)	2016	105	481
Prostate cancer	XGEVA® (denosumab)	2010	740	7,094	Bone metastases Multiple myeloma
	ZYTIGA® (abiraterone acetate)	2011	5,478	54,244	Prostate cancer
	XTANDI® (enzalutamide)	2012	4,436	41,097	Prostate cancer
	ERLEADA® (apalutamide)	2018	176	787	Prostate cancer





# Challenges of Cancer Care in the DoD



Acquisition & Sustainment

Budget & Financial Management

Intelligence & Security

Personnel & Readiness

Policy

Reform

Research & Engineering



# Challenges of Cancer Care in the DoD

- In aggregate, the DoD manages a large number of cancer patients but at the individual facility level, the numbers are small
  - Fewer opportunities for patients to participate in clinical trials
  - Individual providers have lower volumes

# Opportunities to Improve Cancer Care in the DoD

- Developing partnerships with civilian counterparts
  - Clinical trial enrollment
  - Tumor boards
  - Augmentation of operative volume for Active Duty cancer surgeons
  - Research
- Enhancing integration of care across the spectrum of service
  - MHS Genesis electronic medical records system

# Questions?





Society for Immunotherapy of Cancer

# SITC Quality Measures Initiative

Sara I. Pai, MD, PhD, FACS

SITC Representative

Professor of Surgery, Yale University School of Medicine

CoC Member Organization Meeting

Boston, MA

October 22, 2023



# About SITC: Founded in 1984 by 40 Charter Members

## MISSION STATEMENT

The Society for Immunotherapy of Cancer (SITC) is the world's leading member-driven society dedicated to professionals working in the field of cancer immunotherapy. It is the mission of the Society for Immunotherapy of Cancer to improve cancer patient outcomes by advancing the science, development and application of cancer immunology and immunotherapy through our core values of interaction/integration, innovation, translation and leadership in the field.



**4,650** members

*representing* **35** medical specialties members

*in* **63** countries

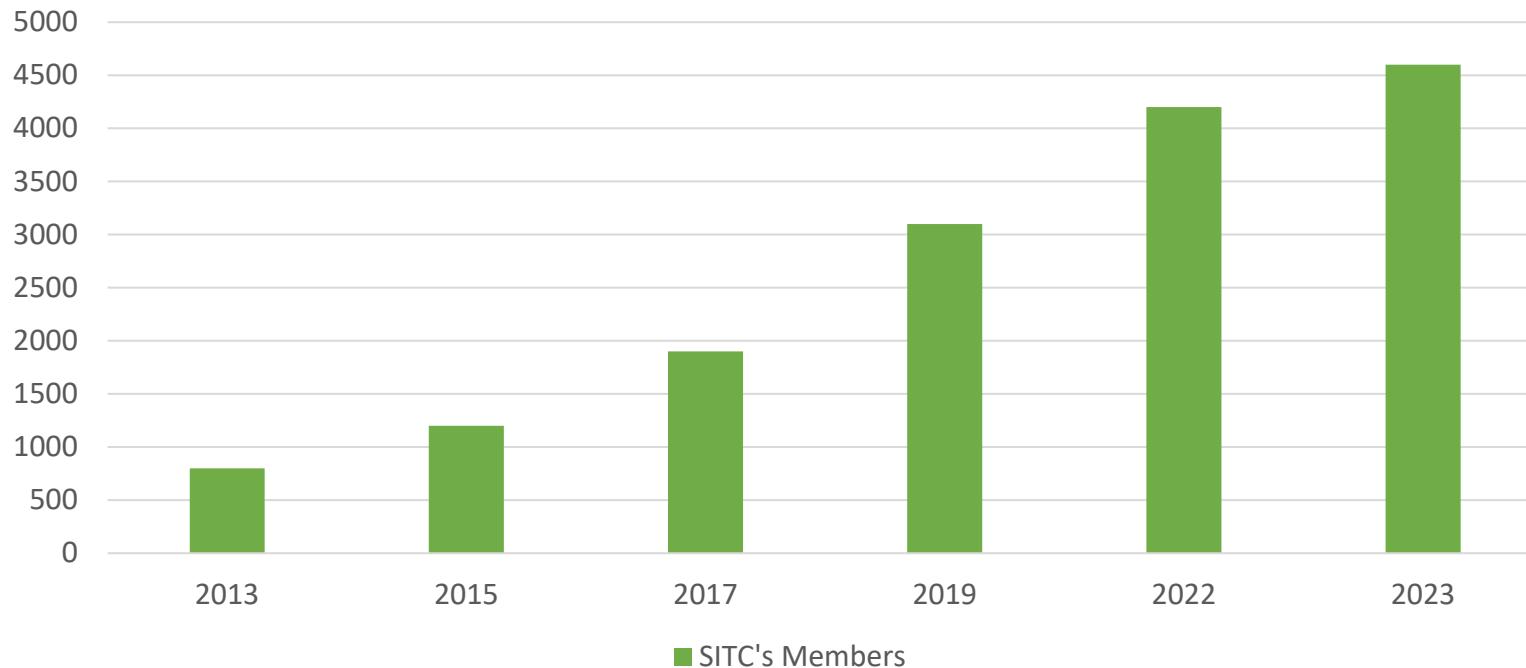


Society for Immunotherapy of Cancer

# About SITC

*SITC Roots in Surgery:* Many of SITC's founding members were surgeons including multiple past SITC presidents including Dr. Michael Lotze and Dr. Howard Kaufman. SITC lifetime achievement award winner Dr. Steven Rosenberg. SITC currently maintains a Surgery Committee focused on Immunotherapy issues related to surgeons including neoadjuvant care and TIL therapies.

SITC's Growth



# SITC Quality Initiative -Background



**Policy and Advocacy:** Inform and influence the science and research, regulation, as well as quality of care and quality of access impacted by public policy, ensuring the patient voice is heard and recognized

- **Presidential Directive**

- Initiated under SITC past president Dr. Howard Kaufman (2014-2016)
- Belief that quality improvement would be among the **most impactful mechanisms for SITC to impact day-to-day patient care** as it became standard of care
- Serves as foundation for development of national benchmarks for Immunotherapy care

- **SITC Leadership approved 2-phase quality pilot project:**

- Phase 1: Identify quality measure concepts via Quality Expert Panel
- Phase 2: Fully develop quality measures and submit to CMS

# SITC's Quality Efforts to Date

- **2019 Quality Expert Summit**

- Panel of clinicians, IO experts, and quality experts designed to identify the current gaps in IO quality of care, and draft quality measure concepts for potential development
- Results published in the *Journal for ImmunoTherapy of Cancer* (JITC) “Defining current gaps in quality measures for cancer immunotherapy: consensus report from the Society for Immunotherapy of Cancer (SITC) 2019 Quality Summit”
  - <https://jitc.bmj.com/content/8/1/e000112>

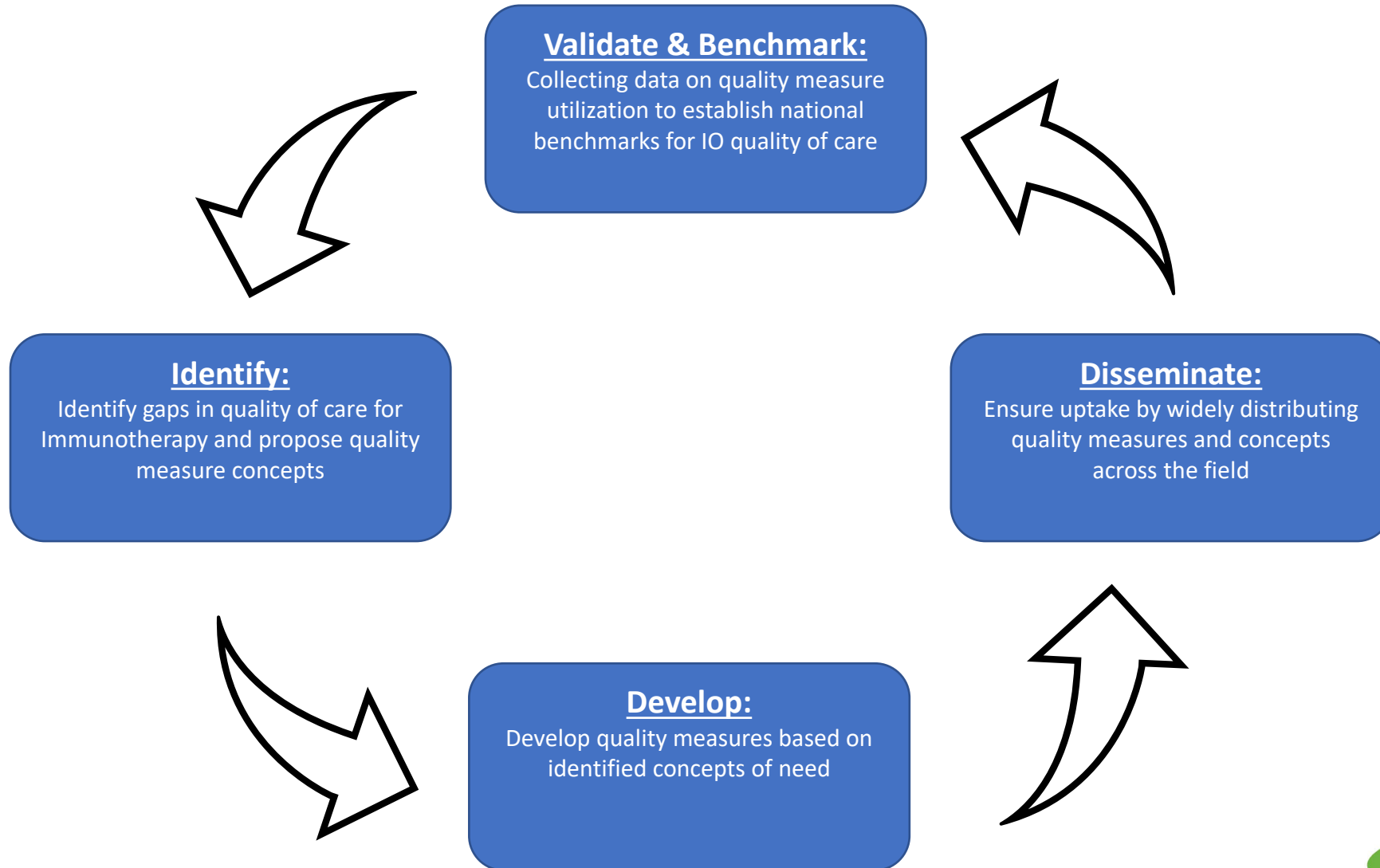
- **Quality Measure Development**

- SITC formed a Technical Expert Panel (TEP) to fully develop and test two IO-specific quality measures
- SITC contracted a measure development team from ASCO to assist in the technical development of the measure

# SITC's Quality Measures

- *Appropriate Intervention of Immune-Related Diarrhea and/or Colitis in Patients Treated with Immune Checkpoint Inhibitors (QI 490)*
  - Intended to improve timely and appropriate treatment for IO patients experiencing grade 3 diarrhea and colitis leading to improved outcomes
  - Accepted into CMS Merit-based Incentive Payment System (MIPS) program (Nov 2022)
  - Recently included into CMS Oncology MVP
- *Positive PD-L1 Biomarker Expression Test Result Prior to First-Line Immune Checkpoint Inhibitor Therapy (MUC2023-141)*
  - Intended to ensure biomarker testing is taking place prior to first line treatment within appropriate indications
  - Accepted onto Measures Under Consideration (MUC) list (2023-24)

# SITC's Quality Cycle





# SITC Quality Initiative – Future Directions and Potential for Collaboration

- *Stewardship of SITC's current quality measures*
  - Integration of current quality measures into national accreditation programs
  - Exploration of national benchmarking projects related to current quality measures including data collection and validation
    - Ex: Optimal time to treatment with steroids using the previously described colitis measure
  - Further integration of measures into other educational programming
  - Upkeep of current measures in CMS MIPS program
- *Continued quality measure development*
  - Hold second quality measure concept panel in 2023/2024
  - Development of new IO-specific quality measures
  - Submission of developed quality measures to CMS



Society for Immunotherapy of Cancer

Questions?

# Open Forum



# Thank you!

Staff Liaisons:

Melissa Leeb at [mleeb@facs.org](mailto:mleeb@facs.org)

Rebecca Medina at [rmedina@facs.org](mailto:rmedina@facs.org)