Community Cancer Care in Washington State: Quality and Cost Report 2018

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Mission

Eliminate cancer and related diseases as causes of human suffering and death.

Improve the effectiveness of cancer prevention, early detection and treatment services in ways that reduce the economic and human burden of cancer.

Presentation from HICDR Value in Cancer Care Summit 2018 - Please cite author when referencing content
We believe that every cancer patient in Washington state should get quality care that meets their goals at a reasonable cost, wherever they live.
Community Cancer Care in Washington State: Cost and Quality Report 2018

www.fredhutch.org/cancer-care-report

First in the nation to publicly report clinic-level quality measures linked to cost in oncology

Fred Hutch and Washington state are showing national leadership in data transparency in cancer care.

Unprecedented collaboration between health care stakeholders: payers, providers, patients, researchers

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Community Cancer Care Report

Our goal is to promote **TRANSPARENCY** so that providers, payers, patients and researchers have access to the same high quality information in order to:

- Enable sharing of best practices
- Facilitate collaboration across traditional boundaries
- Develop shared solutions
- Test feasibility, effectiveness and scalability of new models of care *(Cancer Care Delivery Research)*
Rules of Use and Disclosure

Optimal Uses of Performance Metrics

• Drive quality improvement within clinics
• Facilitate collaboration to improve care in the community
• Share best practices

Rules of Use

For at least two years after release of this Report, its data may not be used for the following:

• Establishing coverage networks
• Designing employee benefit packages
• Negotiating contracts without mutual agreement from all involved parties
• Clinic or payer advertising or marketing
Clinical, Utilization, Cost and Survival Data for ~70% of cancer patients in Washington state

Over 160,000 patients at Diagnosis
Over 60,000 at Time of Death

Reporting Years: 2014 – 2016
### What’s in the report

#### Quality Measures

<table>
<thead>
<tr>
<th>Recommended Treatment</th>
<th>Hospitalization During Chemotherapy</th>
<th>Follow-up Testing after</th>
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</thead>
</table>
| - Breast, Colorectal, and Lung Cancer  
- Breast Cancer        |                                      | - Breast, Colon, and Lung Cancer Treatment  
- Breast Cancer Treatment |                                      |

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<tr>
<th>End of Life Care</th>
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#### Cost of Episodes of Care

- Treatment period
- 6 months after first chemotherapy
- 13 months after last treatment
- Last 30 days of life

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1A: Recommended Treatment

1B: Recommended Treatment (Breast)

2: Chemo Hospitalization

3A: Follow-Up Imaging

3B: Follow-Up Testing (Breast)

4: End of Life

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1A: Recommended Treatment

1B: Recommended Treatment (Breast)

2: Chemo Hospitalization

3A: Follow-Up Imaging

3B: Follow-Up Testing (Breast)

4: End of Life

Low variation in quality
High variation in cost
High variation quality and cost

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Strong negative relationship, suggesting that efforts to improve quality may also lower costs.

Regional average cost: $51,561
Follow-up episode average length: 168 days
Cost range: $19,090
The quality score: difference of 22.6%
3B: Follow-up testing after breast cancer treatment

Regional average cost: $13,978
Follow-up episode average length: 388 days
Cost Range: $4,219

The quality score: difference of 42.1%

There is a strong negative relationship: indicating higher quality is associated with lower costs.
4: End of life care

Regional average cost: $14,494
Last 30 days of life
Cost range: $4,832
The quality score: difference of 61.8%

There is a strong negative relationship: indicating higher quality is associated with lower costs.
Making Measurement Matter: Our Strengths

• Partnerships

• Strong community engagement

• Comprehensive, current data asset
Making Measurement Matter: What do we need to create change?

• Innovative ideas
  • Capitalize on unique science and technology environment in Washington state

• Novel partnerships and resources to leverage the ideas
  • Flexible funding

• Willingness to pilot test novel approaches
  • Implement strategies that work
  • Move on from approaches that don’t work
  • Hold fast to the goal of making cancer care better
Collaboration across organizations, fields, and geography is necessary to create solutions to address challenges in cancer care
Use data visualization platform to understand barriers to care and challenges for vulnerable populations
Use AI, machine learning and biosensors for early identification of treatment-related symptoms to reduce ER visits during chemotherapy
Thank you to the Community Cancer Care Report team

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