Frequently Asked Questions

Q. What is the Hutchinson Institute for Cancer Outcomes Research?
A. Fred Hutchinson Cancer Research Center is home to the Hutchinson Institute for Cancer Outcomes Research, or HICOR, led by Drs. Scott Ramsey and Gary Lyman. HICOR is a research organization that seeks to improve the effectiveness of cancer prevention, early detection and treatment services in ways that reduce the economic and human burden of cancer. Fred Hutch believes that all cancer patients in Washington state deserve quality care at a reasonable cost, regardless of where they live or which cancer care provider they see. The “Community Cancer Care in Washington State: Quality and Cost Report,” or “Community Cancer Care Report” for short, represents a major step in that direction.

Q. What is the “Community Cancer Care in Washington State: Quality and Cost Report”?
A. This report is the first in the nation to publicly report clinic-level quality measures linked to cost in oncology. It is a major step forward in providing a statewide snapshot of cancer-care delivery and offers a depth and breadth of data that has not previously been accessible to the public. The report promotes transparency by providing an analysis of quality measures linked to cost on selected indicators of care. It is a tool to support HICOR’s ultimate goal of improving care quality while addressing the rising costs of cancer care for patients and the health care system.

Q. Who was involved in developing this report?
A. HICOR developed the quality and cost measures in this report in collaboration with more than 25 hospitals and clinics delivering cancer care, health insurance plan administrators, patient partners, researchers, health care quality organizations, policymakers and government leaders in Washington state. HICOR is committed to ongoing collaboration with regional stakeholders to ensure that our work is meaningful and relevant to our community.

Q. How is the “Community Cancer Care Report” different from other health care quality reports?
A. There are a number of organizations that report quality measures in oncology, including the Washington State Hospital Association and the Centers for Medicare and Medicaid’s HospitalCompare website. These organizations also report broadly on costs. The “Community Cancer Care Report” is unique because each individual quality measure is linked to total costs of care for a consistent patient population over the period of care relevant to the quality measure. This is important because it facilitates value comparison across clinics and is relative to the regional average.
Q. Where can I view the report?
A. The full “Community Cancer Care Report” is available on the HICOR website.

Q. What is the overall goal of this report?
A. The objective of the report is to present quality and cost data that reflect various aspects of cancer-care delivery in a clear and actionable way, to encourage collaboration across clinics to share best practices to improve care, to drive quality improvement programs, and to encourage research on experiments to improve care. HICOR and Washington state are leading the nation in using common data and transparent reporting to drive care transformation.

Q. How did the report come about?
A. The report is the result of a multiyear effort called the Value in Cancer Care Initiative led by HICOR in collaboration with hospitals and clinics delivering cancer care, health insurance plan administrators, patient partners, researchers, health care quality organizations, policymakers and government leaders in Washington state. These groups worked together to identify four high-priority clinical areas for reporting:
   • Adherence to treatment recommendations for breast, colorectal and lung cancer.
   • Emergency department visits and inpatient hospitalizations during chemotherapy.
   • Follow-up testing after treatment.
   • Appropriate provision of end-of-life care.

Q. Where did the data come from?
A. The data used for this report comes from a HICOR database that combines clinical information from cancer registries and health care use and cost information from health insurance claims. The Washington State Cancer Registry and the Western Washington Cancer Surveillance System collect comprehensive information on staging, initial treatment and survival for persons diagnosed with cancer in Washington state. HICOR linked enrollment files from Medicare, Regence Blue Shield, Premera Blue Cross and the Washington State Uniform Medical Plan with the cancer registries.

The Western Washington Cancer Surveillance System is headquartered at Fred Hutch and is part of the National Cancer Institute’s Surveillance, Epidemiology and End Results Program.

Q. What do the results look like?
A. The report shows that most clinics have areas where they excel as well as areas to improve. The report highlights areas where clinics are performing well as a region. For instance, nearly 86 percent of breast, colorectal and lung cancer patients in the population measured received recommended, evidence-based treatments in a timely fashion. The report also identifies areas where there is room for improvement. For example, over half (52 percent) of cancer patients have an emergency department visit or require hospitalization during their first six months of chemotherapy treatment.
Q. How can the report results be used?
A. The objective of the report is to present data that reflect various aspects of cancer-care delivery in a clear and actionable way. The report can be used to identify priority areas for quality-improvement programs and to identify areas for future research into how to improve care delivery. High-performing clinics can also share their best practices to improve care across the region.

Q. Will there be updated results in the future?
A. Yes. This version of the report includes results for the time period 2014-2016; HICOR plans to produce updated quality and cost reports over time. Continued refinement of HICOR’s quality and cost reporting could lead to the inclusion of additional data sources and new quality and cost measures.

Q. How does the “Community Cancer Care Report” help care providers?
A. This report gives providers access to information that was previously not available to them. It establishes common care metrics developed in collaboration with their peers and allows them access to data they can use to develop insights into clinic-level practice patterns. Clinics can more clearly see relationships and trends between costs and care and place themselves relative to the region. As a result, not only are clinics and providers able to track and improve their own quality and cost measures, but also the breadth of data can be used to share best practices that improve care and value regionally and statewide.

Q. How does the report help insurers?
A. The report gives insurers and other payers local, regional and statewide data, establishes common care metrics, and provides collective quality and cost measures to help them select resources for a particular type of care or treatment. The report also identifies trends and correlations between cost and quality of care.

Q. How does the report help patients, families and caregivers?
A. While HICOR developed this report to support the broad goal of improving care for patients in Washington state, the report is not designed to help patients make individual care decisions. The report shows patients and their families how clinics are providing care to their patient populations compared to evidence-based care guidelines issued by organizations such as the American Society of Clinical Oncology (ASCO). In addition, the report provides information about the cost of care in specific clinical areas. Over time, HICOR hopes to expand the report to include patient-reported outcomes such as quality of life and to develop a more patient-centered version of the report.

Q. Are there other relevant resources for patients, families and caregivers?
A. Choosing Wisely, an online resource offered by the American Board of Internal Medicine Foundation (ABIM) and ASCO, is a valuable tool for patients who want to start a conversation with their care provider about medical tests, treatments and procedures.

In addition, the National Cancer Institute (NCI) Contact Center, based at Fred Hutch, is a federally funded cancer education program that provides free, bilingual cancer information for cancer patients, families, health professionals and the general public. Patients and families with any cancer-related
questions may contact an information specialist at the NCI Contact Center through the toll-free number 1.800.4.CANCER (1.800.422.6237) Monday through Friday, 6 a.m.– 6 p.m. PT, or via online chat.

Q. How does the report help employers?
A. The report provides consistent, measurable data employers can use when evaluating plans and treatment options for their employees. Because most employers provide or contribute to health insurance coverage plans for their employees, this report gives them a view of cancer care that was previously unavailable. Overall, cancer is one of the top five spending categories in health care.

Q. How does the report help policymakers, communities and the future of health care?
A. The report is an example of a collaborative effort among interest groups for the betterment of the community. It offers data and information that officials can use to find balanced solutions that work for their constituents, and to retain payers and providers in their districts. With insights on trends and correlations between cost and care, policymakers can better guide regulations and reforms. Openness and transparency help ensure that public resources for cancer care are spent in the most beneficial way for patients.

Q. Is this report meant to rank clinics?
A. No. The report provides a limited window into the complex environment of cancer care. The report does not include every aspect of cancer care and thus cannot be used as an overall ranking tool. Instead, the report includes detailed information about community-prioritized clinical areas.

Q. How did the team ensure quality of the data? Did they validate the results?
A. This report is the result of five years of effort with quality checks on every level. The aforementioned Cancer Surveillance System is nationally recognized as one of the highest quality registries in the country. HICOR faculty and staff have decades of experience analyzing insurance claims and conducted extensive quality reviews of the insurance data. HICOR’s analytic methods are based on national standards.

Q. How were the specific measures chosen for inclusion in this report?
A. The measures included in the “Community Cancer Care Report” represent priority areas identified by regional stakeholders and supported by evidence-based care guidelines issued by organizations such as the National Comprehensive Cancer Network (NCCN), ASCO and quality initiatives such as the ABIM/ASCO Choosing Wisely Campaign. HICOR reviewed available metrics from national quality-improvement programs in oncology such as the Quality Oncology Practice Initiative (QOPI®), the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), the Oncology Care Model (OCM), and the ABIM/ASCO Choosing Wisely Campaign.

Q. Why doesn’t the report include data from patient-reported outcomes or patient experience?
A. Patient-reported outcomes were not available in the data sets used to generate the performance measures in the report. Over time, HICOR hopes to expand the report to include patient-reported
outcomes such as quality of life and to collaborate with stakeholders to develop a patient-centered version of the report.

Q. Why did HICOR release the data publicly? Couldn’t they have accomplished the same result by sharing it with clinics only?
A. Transparency and community dialogue are cornerstones of this collaborative effort. The purpose of releasing the data publicly is to allow clinics to share best practices in areas where they are performing well and seek shared solutions in areas where improvement is needed. Working closely with regional stakeholders, HICOR has developed and released the performance measures in an iterative process over time, starting with regional de-identified results and now results with identified clinic names. At every stage, we release quality and cost measures privately to clinics for review and quality control prior to publication.

Q. What steps has HICOR taken to make sure that the information is used fairly, for the betterment of cancer patient care?
A. It is important for the findings to be public in order for the community to work together to make improvements in both quality of care and cost. As a way to mitigate unintended consequences that would impact patient access, report recipients are required to adhere to strict rules around the usage of the report data for a period of two years. Specifically, they are prohibited from establishing networks based on the information, designing employee-benefits packages, negotiating contracts (without mutual agreement), and engaging in public relations, advertising or marketing purposes based on the data shared in the report.

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