issues

What Can Be Done?

BY CHRISTIAN G. DOWNS, JD, MHA



ver the last several months one healthcare issue has been the focus of attention, globally, nationally, locally, and personally: COVID-19.

Though it is too soon to comprehend all of the lessons learned from the pain, suffering, deaths, and devastation the novel coronavirus 2019 has brought, we are reminded that diseases do not discriminate: a virus has no morals or ethics. COVID-19 is communicable and highly contagious. Cancer is not. Despite this significant difference, our weapons against COVID-19 are already familiar to those in the cancer community: research, education, prevention, screening, early diagnosis, and treatment. We depend on our clinician scientists, multidisciplinary teams, and frontline healthcare professionals to educate us, diagnosis us, treat us, and care for us. In the midst of the COVID-19 emergency, each of us had to adjust to a "new normal," follow healthcare mandates, and accept uncertainty.

COVID-19 has given us a harsh, real-time understanding of why population health is a critical issue—in our communities, cities, states, nation, and the world. If the importance of our healthcare infrastructure was ever in question, COVID-19 has made the answer clear. Modernizing our healthcare delivery system is essential. Over recent months our hospitals, clinics, physician practices, and healthcare workforce have been on the frontlines, caring not only for COVID-19 patients but for all those with acute and chronic illnesses. Cancer programs and practices in communities large and small have responded by sharing information and effective practices, leveraging telemedicine and telehealth, creating new workflows and policies, and implementing new procedures to keep cancer patients as safe as possible and to minimize treatment disruptions.

Every segment of the oncology ecosystem has had to quickly adapt and innovate to minimize the impact of COVID-19 on patients with cancer.

Professional societies have opened access to content in clinical journals and on their websites. For links to the latest information from the American Society of Clinical Oncology, American Society of Hematology, American Pharmacists Association, American Society for Radiation Oncology, National Comprehensive Cancer Network, Oncology Nursing Society, Society for the Immunotherapy of Cancer, and others, visit accc-cancer. org/COVID-19.

Federal agencies have worked tirelessly to provide needed updates and information on changes to policy, regulations, and reporting requirements in response to the COVID-19 public health emergency. In March, the Centers for Medicare & Medicaid Services issued:

- Updates to coverage and payment related to COVID-19.
- FAQs on catastrophic health plan coverage, essential health benefits coverage, COVID-19 tests, and provider enrollment relief.
- Coverage and benefits related to COVID-19 for Medicaid and CHIP.
- Expanded telehealth coverage for Medicare.
- Medicaid telehealth guidance for the states.

• Relaxed quality reporting requirements.

The Centers for Disease Control and Prevention and the Food and Drug Administration have provided information and tools for clinicians and consumers on prevention, treatment, and progress in curbing the spread of COVID-19; critical updates on management of oncology clinical trials in the midst of the epidemic; updates on the drug supply chain; and more.

ACCC mobilized by creating the ACCC Coronavirus Response webpage (accc-cancer.org/coronavirus), updated continually, providing quick access to information from these organizations, as well as resources from patient advocacy organizations. ACCC members continue to offer support, post peer-to-peer questions, and share strategies on the ACCCExchange online forum.

In the words of Senator Debbie Stabenow (D-MI) as she addressed the ACCC 46th Annual Meeting & Cancer Center Business Summit, "For every one of us, healthcare is not political. It's personal." Senator Stabenow urged oncology professionals to stay engaged in policy and advocacy: "When you speak up, people listen. You can and must remain engaged and help us move forward in a positive way. I know this can be done." Going forward, the oncology community must focus on what can be done to advance and protect our healthcare delivery infrastructure.

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