

ONCOLOGY ISSUES

The Official Journal of the Association of Community Cancer Centers

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Technology Solutions in Practice

BY SIBEL BLAU, MD



he past few years have reminded us that all humans are vulnerable, yet recent events have underscored the promise technology holds for some of our most vulnerable patients. When

people are compromised and face challenges to accessing healthcare, food, shelter, education, and other basic human needs, technology can help. Technology, such as automation and artificial intelligence, is becoming a part of daily life, especially in the fields of medicine and healthcare.

My practice, Northwest Medical Specialties in Tacoma, Wash., is always looking at ways to improve our operational efficiency and quality of care. When appropriate, we look to external partners to help us create these efficiencies or to introduce new clinical tools that allow our teams to maximize their time and improve direct patient care. As one of the first oncology practices to adopt medically integrated dispensing—a care model that focuses on keeping both medical and pharmacy care within patients' core care teams—our practice saw firsthand the impact this model has had on the patient experience and patient outcomes, including faster therapy initiation times, reduced financial burden, better patient education, and improved therapy adherence.

Yet we are only as efficient as the technology we use. And our practice needed more sophisticated technology to successfully optimize its medically integrated dispensing. We also needed visibility into how our practice was performing, such as prescribing patterns across providers, time to fill, payers that were causing treatment delays, etc.

Our solution was to partner with HouseRx, which offers technology tailored to the workflow of a community oncology practice. Yet technology is just one piece of the solution. Today a team of pharmacists and pharmacy technicians help our care teams get patients started on their therapy by removing the operational burden associated with running a successful medically integrated dispensing program. They do this all while providing clinical consultations.

Our practice also operationalized artificial intelligence solutions. We chose lyion's prescriptive analytics platform that combines artificial intelligence algorithms with machine learning techniques to identify at-risk patients (i.e., those with a higher chance of experiencing poor outcomes). Based on its analyses, Jvion generates patient-specific, dynamic, and actionable insights. Appropriate resource utilization and initiation of a downstream workflow are critical to the success of these insights. Our practice uses a patient care coordinator team to track insights and review flagged patients, electronic health records, risk factors, and recommended interventions for high- to medium-risk patients, as well as to consider additional needs or barriers for these patients. Once these data are reviewed, patient care coordinators schedule palliative care visits with an advanced practice provider. By using this process to identify patients at risk for mortality, we increased our palliative care utilization by more than 30 percent and significantly improved our hospice utilization as well.

Human intervention in medicine is imperative, yet our care teams are exhausted and often overworked. Successful deployment of technology promises to improve the quality of patient care and the patient experience, while also alleviating excessive burdens on our clinicians and staff. The timing could not be better for ACCC to focus its efforts in this area through the 2022-2023 President's Theme, "Leveraging Technology to Transform Cancer Care Delivery and the Patient Experience." Learn more about these efforts in the "President's Message" on the next page. Then turn to page 36 to learn about a data analytics solution that streamlines revenue cycle management, provides greater clarity on insurance claims data, and collects and reports on business health key performance indicators. Though we work daily to improve the health of our patients, we must also focus on the health of our cancer practices and programs.