

➔ more online @
acc-cancer.org



ICYMI Key Takeaways from #AMCCBS

Couldn't make it to D.C. for the ACCC 45th Annual Meeting & Cancer Center Business Summit in March? See what you missed, access key takeaways, session snapshots, videos, and more. acc-cancer.org/accbuzz45amccbs.



Case Studies in Immuno-Oncology: A Closer Look at Care Delivery

This CME/CE accredited program is available in two formats: as an on-demand audiocast and as an on-site live tumor board presentation. Five ACCC Cancer Program members have an opportunity to host this education program on-site at their facility. Apply at acc-cancer.org/projects/io-case-studies.



PUBLICATION

2018–2019 ACCC Annual Report

From a timeline of tools and resources developed last year to help members address clinician resiliency and well-being to new cancer programs that joined in the last 12 months to a recap of a robust menu of educational offerings, read how ACCC focused its time and resources in 2018-2019. acc-cancer.org/2018annualreport.



WEBINAR

Multidisciplinary Geriatric Oncology Care Webinar Series

By 2030, cancer incidence in the U.S. is expected to grow by 45 percent to 2.3 million adults. More than two-thirds of this increase will be in adults aged 65 and older. How is your program or practice preparing to meet the diverse needs of this patient population? Join in a six-part webinar series on caring for older adults with cancer. acc-cancer.org/geriwebinars.



TOOL

Downloadable IO Wallet Card

Early recognition and prompt management of immune-related adverse events (irAEs) are integral to the effective delivery of immunotherapy for cancer. For patients, knowing who call, when to call, and what immunotherapy they are receiving or have received is essential. The ACCC Immuno-Oncology Institute has developed a medical wallet card for patients on immunotherapy for cancer. Access the downloadable print-ready PDF at: acc-cancer.org/IO-walletcard.



EDUCATION

CLL: Lunch and Learn

As part of the ACCC Multidisciplinary Chronic Lymphocytic Leukemia (CLL) Care project, ACCC is offering member programs an opportunity to host a 60-minute lunch-and-learn program that will bring expert faculty to your facility to discuss important treatment and care management updates for these cancers. Interested? Contact Monique Dawkins at mdawkins@acc-cancer.org.

fast

Docs Call for Overhaul of EHRs

- More than half of surveyed physicians (**54%**) say using an EHR detracts from their professional satisfaction.
- Half (**49%**) think using an EHR detracts from their clinical effectiveness.
- Nearly **3/4** agree EHRs have increased the total number of hours they work daily (**74%**) and that EHRs greatly contribute to physician burnout (**71%**).
- **59%** think EHRs need a complete overhaul.
- **40%** believe there are more challenges with EHRs than benefits.
- Only **18%** reported being “very satisfied” with their current EHR.

Source: Stanford Medicine. How Doctors Feel About Electronic Health Records National Physician Poll by The Harris Poll. med.stanford.edu/content/dam/sm/ehr/documents/EHR-Poll-Presentation.pdf.



3 Key Reasons Why EHRs Overwhelm U.S. Physicians

- 1. Profit.** In the U.S. a key feature of EHR use is to document charges. While charges are audited by payers, longer notes support higher charges in the current fee-for-service system.
- 2. Multiple payers.** The U.S. has dozens of payers in any given market, each with their own rules about documentation and pre-approval. Physicians must document every single data point that any given payer in their marketplace might require at every single visit.
- 3. “Quality” metrics.** Each payer requires different “quality” metrics. Because payers don’t coordinate effort, physicians must document every quality metric that any given payer in their marketplace might require at every single visit.

Source: Drummond M. Physician Burnout and EMR—It’s the Keystrokes, Silly. Documentation Overload and Four Ways Forward. thehappyemd.com/blog.

facts



Telemedicine & Medicare Advantage Plans

While coverage of telehealth services is expanding, a survey of 781 Medicare Advantage members shows that few know about it:

- **46%** were unsure if their plan offers telehealth.
- **37%** said it is not offered.
- **17%** noted that their plan does offer these types of services.



Source: HealthMine Medicare Survey. healthmine.com.

Data Blues

- Surveyed organizations estimate that they lose more than **\$2 million** per year because of data management challenges.
- On average, this survey found that employees lose 2 hours a day searching for data, resulting in a **16%** drop in workforce efficiency.
- Almost all of the organizations surveyed (**97%**) believe they have missed valuable opportunities as a result of ineffective data management.
- More than **one-third (35%)** admit to losing out on new revenue opportunities while 2 in 5 (**39%**) say their data challenges have caused an increase in operating costs.

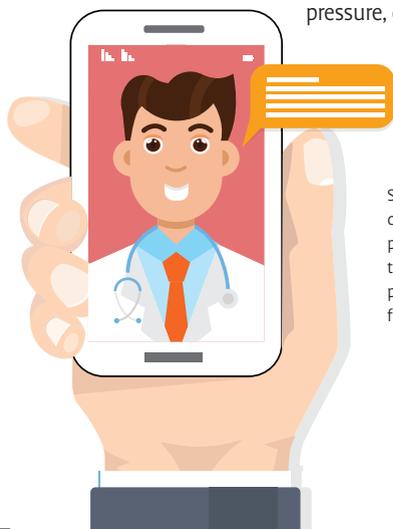
Source: Veritas Research. Value of Data Study. veritas.com/form/whitepaper/realizing-the-power-of-enterprise-data.

Secure Texting vs. Patient Portals

- When in-person conversations and phone calls are not an option, **twice as many** people surveyed prefer receiving information via secure text messages rather than through a patient portal.
- More than **90%** would like the ability to communicate via secure text messaging with a family member's care team if that loved one were ill.
- **83%** would welcome text reminders from their doctors about taking prescribed medications, checking blood

pressure, completing rehabilitation exercises, scheduling follow-up appointments, or similar tasks.

Source: DrFirst. drfirst.com/news/survey-patients-prefer-secure-texting-over-patient-portal-communication-from-their-physicians/.



Studies suggest that U.S. physicians now spend as much time on “desktop medicine” (interacting with the computer) as they do face to face with patients.

Source: Downing NL, et al. Physician burnout in the electronic health record era: are we ignoring the real cause? *Ann Intern Med.* 2018;169(1):50-51.

