BACKGROUND

Comprehensive cancer care (CCC) delivery is recommended in guidelines, required by oncology care models and reimbursement policies, and necessary to ensure adequate care. The survey responses demonstrated that programs are not consistently using strategies to optimize reimbursement and are underutilizing available billing codes. This is important to provide adequate care. The survey responses demonstrated that programs are not consistently using strategies to optimize reimbursement and are underutilizing available billing codes. There is a need to estimate the costs of providing these essential services. When doing so, the appropriate use of available billing codes should be considered. Costs of services not currently reimbursed should also be factored in when developing uniform strategies for payment reform.

METHODS

Survey development methodology included item generation with expert review, iterative piloting and cognitive interviews to achieve content and internal validity. An online survey was piloted at the 2018 ACCC Annual Meeting and sent to member programs via email. The final survey included 22 sets of questions on availability, reimbursement/funding and patient navigation. Each program was asked to report whether or not the program offers each of 27 services. The survey was anonymous and completion was voluntary.

RESULTS

There is a lack of sufficient staffing, reimbursement, and budget to provide comprehensive cancer care across the United States, regardless of region or practice type. Oncology care models and reimbursement policies must include comprehensive cancer care services to optimize delivery of care. Over 50% of the cancer programs reported that 10 essential services have no coding and that 9 of these services have limited or underutilized coding. This is important to provide adequate care. There is a lack of sufficient staffing, reimbursement, and budget to provide comprehensive cancer care across the United States, regardless of region or practice type.

CONCLUSIONS

There is a lack of sufficient staffing, reimbursement, and budget to provide comprehensive cancer care across the United States, regardless of region or practice type. Oncology care models and reimbursement policies must include comprehensive cancer care services to optimize delivery of care. Over 50% of the cancer programs reported that 10 essential services have no coding and that 9 of these services have limited or underutilized coding. This is important to provide adequate care. There is a need to estimate the costs of providing these essential services. When doing so, the appropriate use of available billing codes should be considered. Costs of services not currently reimbursed should also be factored in when developing uniform strategies for payment reform.

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