

CMS Announces Dayton Physicians Network Selected for Initiative Promoting Better Cancer Care

CMS Oncology Care Model attracts almost twice the expected number of physician group practices

The Centers for Medicare & Medicaid Services (CMS) today announced that it has selected Dayton Physicians Network as one of nearly 200 physician group practices and 17 health insurance companies to participate in a care delivery model that supports and encourages higher quality, more coordinated cancer care. The Medicare arm of the Oncology Care Model includes more than 3,200 oncologists and will cover approximately 155,000 Medicare beneficiaries nationwide.

Dr. Charles Bane, Medical Oncologist and President of Dayton Physicians Network- Cancer Care and Urology stated “Dayton Physicians Network is thrilled to be involved in the Oncology Care Model, designed to further enhance access to care and quality of service for our cancer patients.”

Cancer is one of the most common and devastating diseases in the United States: more than 1.6 million new cases of cancer will be diagnosed and cancer will kill an estimated 600,000 Americans in 2016. According to the National Institutes of Health, based on growth and aging of the U.S. population, medical expenditures for cancer in the year 2020 are projected to reach at least \$158 billion (in 2010 dollars) – an increase of 27 percent over 2010. A significant proportion of those diagnosed are over 65 years old and Medicare beneficiaries.

“The Oncology Care Model encourages greater collaboration, information sharing, and care coordination, so that patients get the care they need, when they need it,” said Health and Human Services Secretary Sylvia M. Burwell. “This patient-centered care model fits within the Administration’s dual missions for delivery system reform and the White House Cancer Moonshot Task Force – to improve patient access to and the quality of health care while spending dollars more wisely.”

The Oncology Care Model encourages practices to improve care and lower costs through episode- and performance-based payments that reward high-quality patient care. The Oncology Care Model is one of the first CMS physician-led specialty care models and builds on lessons learned from other innovative programs and private-sector models. As part of this model, physician practices may receive performance-based payments for episodes of care surrounding chemotherapy administration to Medicare patients with cancer, as well as a monthly care management payment for each beneficiary. The two-sided risk track of this model would be an Advanced Alternative Payment Model under the newly proposed [Quality Payment Program](#), which would implement provisions from the Medicare Access and CHIP Reauthorization Act of 2015.

Practices participating in the five-year Oncology Care Model will provide treatment following nationally recognized clinical guidelines for beneficiaries undergoing chemotherapy, with an emphasis on person-centered care. They will provide enhanced services to beneficiaries who are in the Oncology Care Model to help them receive timely, coordinated treatment. These services may include:

- Coordinating appointments with providers within and outside the oncology practice to ensure timely delivery of diagnostic and treatment services;
- Providing 24/7 access to care when needed;
- Arranging for diagnostic scans and follow up with other members of the medical team such as surgeons, radiation oncologists, and other specialists that support the beneficiary through their cancer treatment;
- Making sure that data from scans, blood test results, and other tests are received in advance of patient appointments so that patients do not need to schedule additional visits; and
- Providing access to additional patient resources such as emotional support groups, pain management services, and clinical trials.

“CMS is thrilled with how many physician groups chose to be a part of the Oncology Care Model,” said Patrick Conway, M.D., CMS principal deputy administrator and chief medical officer. “We have nearly doubled the number of participants that we anticipated. It’s clear that oncology physicians recognize the importance of this new performance-based, episode-based payment approach to cancer care. As a practicing physician and son of a Medicare beneficiary who died from cancer, I know the importance of well-coordinated care focused on the patient’s needs.”

The names of those practices and payers participating in the Oncology Care Model, and more information about the model, can be found on the model’s website: <http://innovation.cms.gov/initiatives/Oncology-Care/>. The Oncology Care Model begins on July 1, 2016 and runs through June 30, 2021.

As part of the Administration’s “[better care, smarter spending, healthier people](#)” approach to improving health delivery, the Oncology Care Model is one of many innovative payment and care delivery models developed by the CMS [Innovation Center](#) and advanced by the [Affordable Care Act](#). The Innovation Center is committed to transforming the Medicare, Medicaid and Children’s Health Insurance Program (CHIP) programs and is expected to help deliver better care for individuals, better health for populations, and lower growth in expenditures for Medicare, Medicaid and CHIP beneficiaries.

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