

NCCN Foundation Announces 2012 Young Investigator Awards

The NCCN Foundation, which through private philanthropy and grants, advances the mission of NCCN to improve the quality and effectiveness of care for patients with cancer, has awarded grants to 4 young investigators from NCCN Member Institutions dedicated to advancing and discovering new treatments for cancer. These awards represent the second series of the NCCN Foundation Young Investigator Awards, a program initiated in 2011. Each of the funded research initiatives will focus on assessing or improving outcomes of cancer care and provide grants of \$150,000 over a 2-year period. Funding will begin September 1, 2012.

“The goal of the NCCN Foundation Young Investigator Awards is to cultivate the next generation of cancer researchers at NCCN Member Institutions. We are very proud that we are able to continue to support young investigators at a time when defining quality in cancer care and supporting science is so essential,” said Cindy McGirk, RN, MBA, JD, Executive Director, Foundation & Legal Affairs, at NCCN.

Congratulations to the 2012 awardees:

- **Piero Dalerba, MD**, Instructor of Medicine, Stanford Cancer Institute. Dr. Dalerba’s research initiative is titled “Evaluation of CDX2 as a novel predictive biomarker to guide therapeutic algorithm design in colon cancer.”
- **Crystal Denlinger, MD**, Assistant Professor, Fox Chase Cancer Center. Dr. Denlinger’s research initiative is titled “Adherence to NCCN survivorship care guidelines in non-small cell lung cancer and colorectal cancer survivor care.”
- **Ronan Kelly, MD, MBA**, Assistant Professor, The Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins. Dr. Kelly’s research initiative is titled “Assessing the impact on chemotherapy decision making while utilizing the NCCN Guidelines when the cost of each regimen is provided to prescribers and patients.”
- **Elissa Ozanne, PhD**, Assistant Professor, UCSF Helen Diller Family Comprehensive Cancer Center. Dr. Ozanne’s research initiative is titled “Impact of implementing the NCCN Guidelines for genetic/familial high-risk assessment: breast and ovarian in clinical practice.”

The awardees responded to a request for proposals issued by the NCCN Foundation to the 21 NCCN Member Institutions. All submissions were reviewed by a multidisciplinary panel of oncology experts, and the awardees were selected based on several key components, including scientific merit and study design.

“The Young Investigator Awards represent a significant initiative for NCCN and the NCCN Foundation to support promising young researchers in oncology. It was exciting to again see so many excellent proposals, addressing many different cancer types and issues,” said F. Marc Stewart, MD, Medical Director, Seattle Cancer Care Alliance, a member of the review committee.

These awards were made possible via contributions from the following companies: Abbott Labs, Celgene, Genentech, Millennium Pharmaceuticals, Pfizer, and Teva.

NCCN Holds Equity Policy Summit

On Friday, May 11, 2012, NCCN convened the NCCN Oncology Policy Summit: Equity in Cancer Care—Pathways, Protocols, and Guidelines in Washington, DC at the Washington Plaza Hotel. This invite-only policy summit was attended by patient advocates, providers (e.g., oncologists, oncology nurses), payors, pathways developers, and industry representatives within the oncology community. These key stakeholders gathered for a day-long session to discuss current issues surrounding the use and

Cont. on page xxiii.

implementation of standardized treatment protocols, also known as pathways, including how much flexibility pathways should allow in care, how pathways impact public and private health insurance benefit design, what impact pathways may have on variation in care, and how data are used to determine pathways.

The quality of care received by patients often differs based on numerous factors, such as treatment protocols used in practice, health care setting, geographic location, access to medications, and insurance coverage. Recently, the issue of whether pathways can reduce costs without reducing the quality of care has been the subject of much debate, as has been their ability to reduce variance of care. As pathways are increasingly deployed in practice, they have a growing impact on how treatment is delivered and, ultimately, on health outcomes for patients. Identifying the benefits and limitations of clinical treatment guidelines and pathways to improve care for all patients was a major focus of the summit.

The summit featured 2 expert roundtable discussions, moderated by Clifford Goodman, PhD, of The Lewin Group, which covered the clinical, administrative, patient, payor, and pathway developer perspectives regarding the use and implementation of both guidelines and pathways. A question and answer session addressing the development of pathways, moderated by Lyn Fitzgerald, MJ, of NCCN, followed. In addition, there were several presentations to set the stage for the summit. The discussion from the summit will culminate in the publication of a White Paper on the use and implementation of pathways in oncology later this year.

Al Benson III, MD, Professor of Medicine and Associate Director for Clinical Investigations at Robert H. Lurie Comprehensive Cancer Center of Northwestern University, provided an overview regarding guidelines and pathways, including a description of the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines) development process and how guidelines and pathways are currently being used in practice. Dr. Benson highlighted the time-intensive nature and complexity of guideline development in the rapidly evolving oncology space.

J. Russell Hoverman, MD, PhD, Vice President of Quality Programs for Texas Oncology and Medical Director of Managed Care for US Oncology, and John Sprandio, MD, Chief of Medical Oncology and Hematology at Delaware County Memorial Hospital, both presented about their experiences implementing and using guidelines and pathways in the clinical setting. Issues related to value and quality of cancer care in the context of guidelines and pathways were highlighted.

The first expert roundtable panel addressed clinician, patient, and administrative issues related to the use and implementation of guidelines and pathways. Panelists representing these areas discussed how pathways are currently being used in oncology practice and the need for more data and education regarding their use for both patients and providers.

After the question and answer session with pathways developers, the second panel explored variability in the design and implementation of pathways, including a discussion of incentives and barriers to their use in practice. The panel, moderator, and audience members discussed transparency of pathways development, their utility in clinical decision-making, and their future role in oncology.

Stakeholder engagement and dialogue throughout the course of the summit validated the increasing role of guidelines and pathways in improving value and quality of care. As always, it is important that the oncology community continue to work collaboratively to identify mechanisms for increasing the quality of care for people with cancer.