



January 10, 2014

Ms. Marilyn Tavenner
Administrator
Centers for Medicare and Medicaid Services
Department of Health and Human Services
7500 Security Boulevard
Baltimore, MD 21244-1850

Request for Feedback on the CMS Quality Strategy: 2013 – Beyond

Dear Administrator Tavenner:

The American Society for Radiation Oncology (ASTRO) appreciates the opportunity to provide written comments on the “CMS Quality Strategy: 2013 – Beyond,” publicly released on November 18, 2013.

ASTRO members are medical professionals, who practice at hospitals and cancer treatment centers in the United States and around the globe, and make up the radiation therapy treatment teams that are critical in the fight against cancer. As the leading organization in radiation oncology, biology, and physics, representing more than 10,000 radiation oncology medical professionals treating more than 1 million Americans with cancer each year, ASTRO is dedicated to promoting excellence in patient care and safety, and improving the quality and value of radiation therapy care.

ASTRO strongly supports the agency’s efforts and vision to optimize health outcomes by improving clinical quality and transforming the health system. ASTRO has taken significant strides and invested significant resources to improve the quality of care in radiation oncology, assess and improve patient care and patient safety, reduce variations in quality, and decrease overall costs. Additionally, ASTRO’s efforts and goals are consistent with the mission and goals of the CMS Quality Strategy and we have actively promoted participation in the agency’s quality initiatives. In these comments, we respond directly to the questions raised by the agency and provide specifics on ASTRO’s quality initiatives.

Questions Posed by CMS

- 1. What are the top three quality topics that you think CMS should focus on?*

Quality Measures Development

A critical first step for improving the quality of care is measuring the quality of care provided. In recent years, the agency has implemented several programs to measure quality through clinical quality measures, including the Physician Quality Reporting System (PQRS) and the EHR Incentive Program. However, a barrier specialties like radiation oncology face is the lack of a robust set of specialty-specific measures. ASTRO has developed a measures subcommittee

responsible for working collaboratively with other stakeholders to develop radiation oncology-specific measures that address gaps and disparities in radiation therapy. The subcommittee is aligning its measure strategy goals with the National Quality Strategy (NQS) to develop measures that cover the six NQS domains, including patient safety and care coordination. Thus, ASTRO supports the CMS Quality Strategy focus to lead quality measures alignment, prioritization, and implementation and the development of new innovative measures. We believe this is a critical area, and ASTRO urges the agency to support and facilitate specialty society development of quality measures. Furthermore, we urge the agency to collaborate with physician specialties like ASTRO to develop meaningful measures proven to improve the quality of care. We believe that a collaborative approach would result in valuable and innovative quality measures.

Payment Models that Reward High Quality and Cost-Effective Care

ASTRO strongly supports the CMS Quality Strategy focus of rewarding value over volume of care by developing and implementing delivery systems and payment models to improve care and lower costs. The agency has implemented several quality programs designed to incentivize quality care, such as PQRS and the Value-Based Payment Modifier, but these programs are in addition to, and not alternatives to, fee-for-service. ASTRO believes that it is important for the agency to shift the focus away from the fee-for-service model to the development of alternative models that reward and incentivize high quality and efficient care, which we believe will have a stronger impact than the current programs. ASTRO's support for this focus is demonstrated by our payment reform action plan, which begins with stabilizing payments, transitions to quality-based incentives tied to a comprehensive practice accreditation program, and ultimately aims to create an alternative payment model based on the adherence to established quality standards and the reduction of total costs, not just the volume.

Patient-Centered Care

The third quality topic ASTRO believes that the agency should focus on is patient-centered care. ASTRO believes that high quality care must involve the active engagement of patients and families, and that there should be effective communication and coordination of care. Open dialogue between patients and providers is essential, particularly when navigating the challenges of cancer from diagnosis through treatment. ASTRO has begun work in this area by partnering with cancer patient groups to develop a list of questions patients should ask to better understand the safety checks that are put into place to guard against errors. This is just the beginning, as ASTRO plans to continue looking for ways to measure and promote patient-centered care in areas such as patient safety, patient satisfaction, care coordination and more. The patient should be at the forefront of all care decisions. ASTRO is a strong proponent of this aspect of patient-centered care and has engaged in many efforts to ensure that patients are receiving necessary and valuable care (discussed below).

- 2. Do you see your organization reflected in this strategy? If so, how will your organization help execute the CMS quality strategy?*

ASTRO generally sees itself reflected in the CMS Quality Strategy. However, we note that the words “physician specialty” are not mentioned in the strategy document. ASTRO continues to

urge the agency to enhance its focus on measures and quality program requirements that are applicable and meaningful to all medical specialties, including more niche specialties like radiation oncology, which can become a daily part of the lives of millions of patients.

Radiation oncologists' goal for every cancer patient is to treat the disease in the safest and most effective way possible. Thus, a culture of safety and quality control are integral to radiation oncology, and there are checks and balances at every level to ensure that the safest and most effective care is delivered. In recent years, ASTRO has developed and implemented several important quality- and safety-focused programs and plans. Examples of the programs that we believe will be vehicles for executing the CMS Quality Strategy include ASTRO's payment reform action plan and our practice accreditation program, which encompass nearly all of the goals addressed in the strategy. ASTRO's new practice accreditation program particularly has great potential, as it will use evidence-based guidelines and consensus statements to establish performance standards to guarantee that entities accredited under the program will have an underlying culture committed to quality and safety, as well as policies, procedures, and a quality improvement infrastructure to ensure that patients receive the highest quality of care possible. ASTRO has also developed the Target Safely action plan that focuses on improving patient safety and reducing chances of medical errors during radiation therapy treatments. The patient safety and quality projects that have successfully resulted from this action plan include the development of a series of white papers on clinical safety considerations, education programs focusing on safety and quality issues, and a patient safety organization (discussed below).

- 3. Please select the goal most applicable to your organization and provide your thoughts on how your organization can contribute to CMS' effort to achieve this goal.*

The goal most applicable to ASTRO, at least initially, is Goal 1: Make care safer by reducing harm caused in the delivery of care. ASTRO has taken the lead in the field of radiation oncology to promote and provide valuable resources to help ensure the delivery of safe and quality radiation treatments, and to reduce errors and harm. We are guided by a mantra that one error is too many. ASTRO will be able to effectively contribute to CMS' effort by continuing to expand its quality programs and initiatives. We look forward to continuing our conversation with CMS, as well as other federal partners such as the Food and Drug Administration, the Agency for Healthcare Research and Quality, and the Nuclear Regulatory Commission, which has jurisdiction over the medical use of radioactive isotopes used frequently in radiation therapy, as well as state radiation control programs.

ASTRO has already commenced a groundbreaking effort that applies to the objectives of improving support for a culture of safety and minimizing the risk of harm in all settings by creating the Radiation Oncology Incident Learning System (RO-ILS), the first national medical error reporting system and patient safety organization for radiation oncology. RO-ILS will contribute to making care safer and reducing harm because it will allow radiation oncology professionals to report patient safety incidents to a national database. The information reported will be used to help identify unsafe conditions and practices and quickly disseminate this information to improve patient safety and patient care and help decrease future errors or harm

caused in the delivery of radiation treatment delivery. RO-ILS began beta testing in early September 2013, and the full launch of the program will begin in 2014.

ASTRO has long recognized the importance of preventing and minimizing harm to patients, given that radiation therapy involves a highly complex process of care that requires many steps, including simulation, treatment planning, and the actual treatment delivery. Due to the extensive preliminary set-up necessary before a patient can actually be treated, risks of error and concern for patient safety abound. To help prevent errors, ASTRO has been the chief financial supporter and lead organization of the Integrating the Healthcare Enterprise Radiation Oncology (IHE-RO) program since 2004. Under IHE-RO, radiation oncologists, physicists, other cancer care professionals and the medical device industry collaborative to create an environment of interconnectivity and interoperability where vital clinical information is passed seamlessly from system to system, within and across practices/settings, and made readily available at the point of care. Projects for enhancing the treatment delivery process and other advanced information exchange efforts are underway with the goal of full device interoperability by 2015. These integration profiles have already been implemented by many radiation oncology software companies, and we hope that these integration profiles can be implemented by all manufacturers.

ASTRO will further contribute to CMS' effort through use of health information technology, most notably a qualified clinical data registry, to improve safety and quality across settings of care. ASTRO is developing the National Radiation Oncology Registry (NROR), the first of its kind for radiation oncology. The objective of the NROR is to improve the care provided to cancer patients by capturing real-time, real-world reliable information on radiation treatment delivery and health outcomes. We believe that the NROR will contribute significantly to this goal because it will assess, determine, and address gaps in quality of care, and it will also provide feedback reports, establish benchmarks, and provide other vital quality improvement tools.

Additionally, ASTRO's continued commitment to and successful development of best practice statements and evidence-based clinical guidelines will contribute to the agency's desired outcome of expanding the use of evidence-based services. A complete account of ASTRO's quality assurance and quality improvement initiatives can be found at <https://www.astro.org/Clinical-Practice/Index.aspx>.

Reduce Inappropriate and Unnecessary Care

ASTRO is also committed in its quality initiatives, as well as public policy advocacy, to reduce inappropriate and unnecessary care. Not only is ASTRO concerned about the impact of inappropriate care on patients, but we believe addressing these issues can achieve healthcare cost reductions attributable to the reduction of unnecessary, duplicative, and inappropriate care. ASTRO is very proud to participate in the American Board of Internal Medicine Foundation's Choosing Wisely campaign. In September 2013, ASTRO released an initial list of five important radiation oncology treatment options that are commonly ordered but may not always be appropriate as part of the Choosing Wisely campaign. This list addresses breast cancer, prostate cancer, palliative care, proton therapy, and intensity modulated radiation therapy (IMRT). ASTRO is considering translating these topics into measures. ASTRO is also considering the development of additional Choosing Wisely topics in 2014.

Another front on which ASTRO will continue fighting to protect patients from inappropriate care is by continuing its efforts to end the abuse of the in-office ancillary services (IOAS) exception to the physician self-referral law for radiation therapy. A Government Accountability Office report and a recent *New England Journal of Medicine* article released in 2013 analyzed and discussed self-referral abuse in radiation therapy that is leading to unnecessary treatments for cancer patients and contributing to higher costs in the health care delivery system. ASTRO is deeply concerned about this issue and is committed to continuing to urge Congress to close this self-referral loophole so that patients are only provided with necessary and quality care. We remain grateful that President Obama included narrowing the IOAS exception in his FY 2014 budget and urge CMS to continue supporting this important policy reform.

ASTRO believes that the CMS Quality Strategy will support the agency's efforts to deliver high quality care, promote efficient outcomes, and ensure affordable health care. We believe the CMS Quality Strategy covers valuable aspects of quality care, including an effective evaluation plan. ASTRO has always believed that an evaluation plan for assurance is a key component for ensuring the delivery of quality care, and thus commends the agency for including a process to assess implementation and evaluate the impact and effectiveness of quality improvement activities.

Thank you for the opportunity to comment on this important issue. ASTRO looks forward to working collaboratively with the agency to successfully advance and further implement both its quality improvement initiatives and the CMS Quality Strategy. Should you have any questions, please contact Priya Lamba, ASTRO's Medicare Policy Analyst at priyal@astro.org or 703-839-7396.

Sincerely,

A handwritten signature in black ink that reads "Laura Thevenot". The signature is written in a cursive, flowing style.

Laura I. Thevenot
Chief Executive Officer