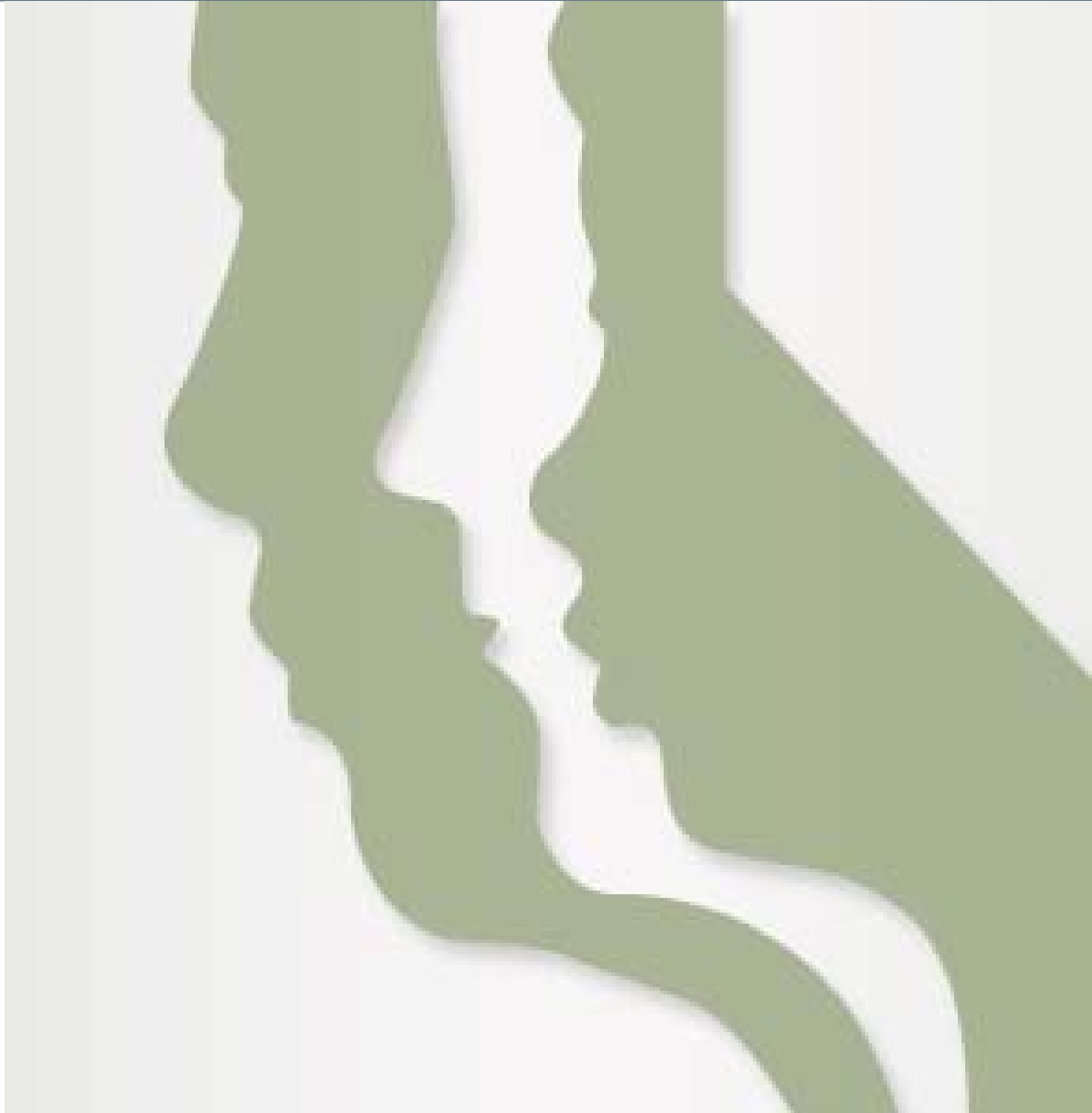




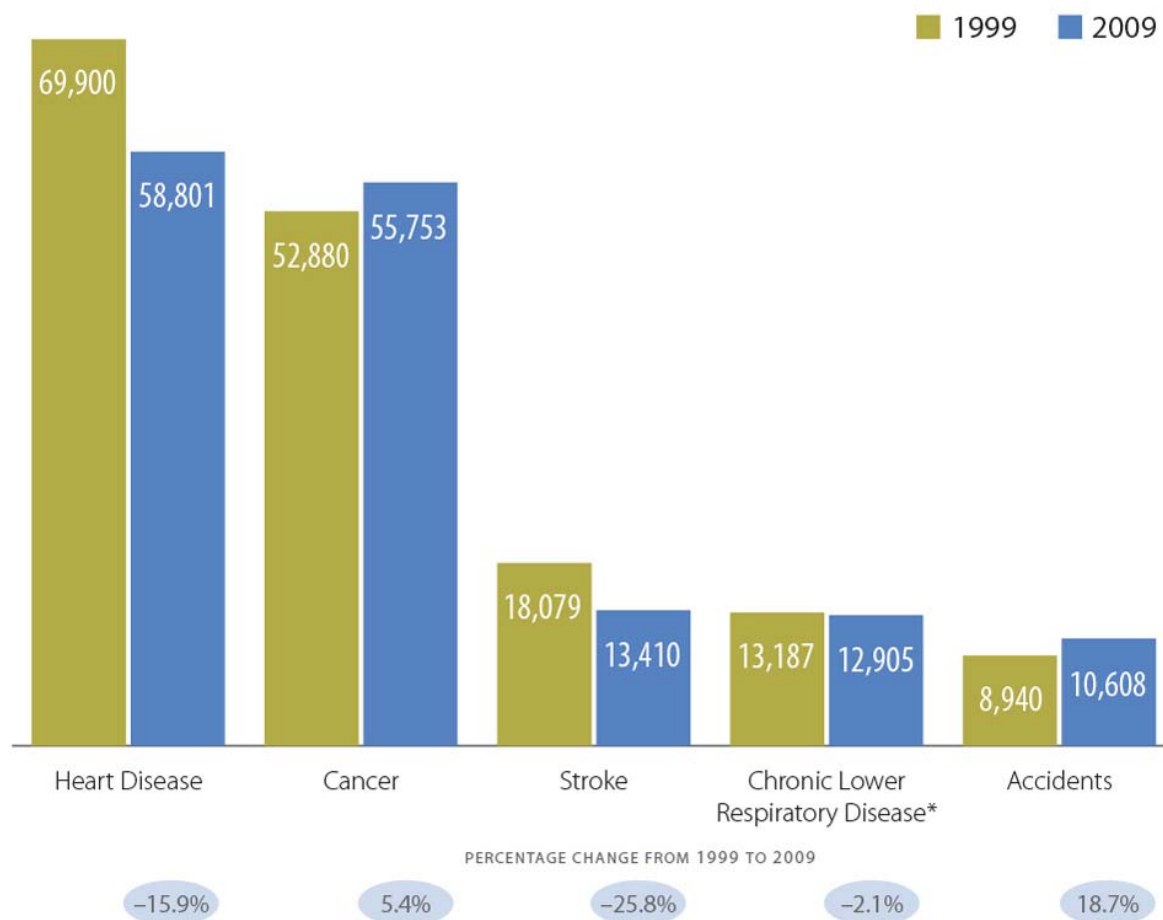
CALIFORNIA HEALTHCARE FOUNDATION

# Bringing Greater Transparency to Cancer Care in California

Mark Smith, MD, MBA  
CHCF President & CEO  
October 30, 2013



## Leading Causes of Death, California, 1999 and 2009



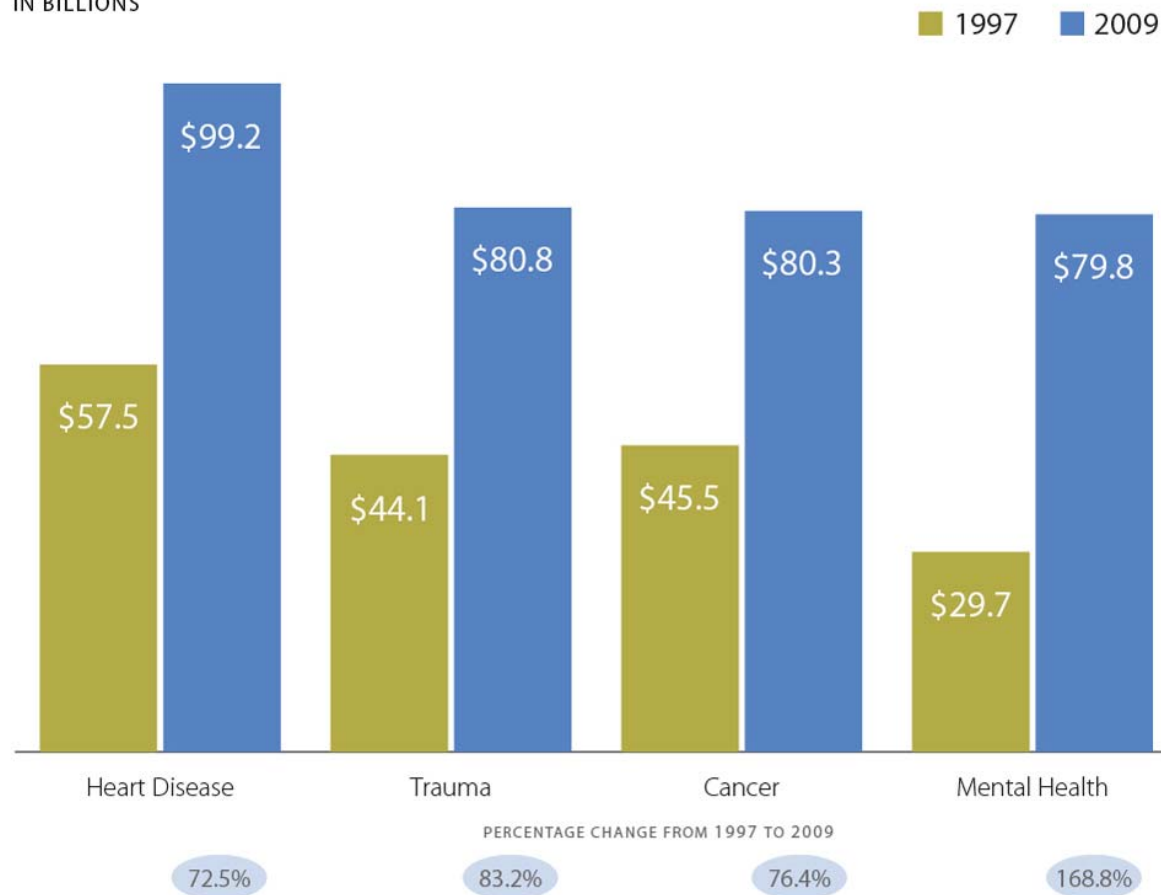
\*Includes chronic obstructed pulmonary disease (COPD), emphysema, chronic bronchitis, and other respiratory illnesses.

Source: California Department of Public Health, Death Records.

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## Expenditures on Four Most Costly Conditions, United States, 1997 and 2009

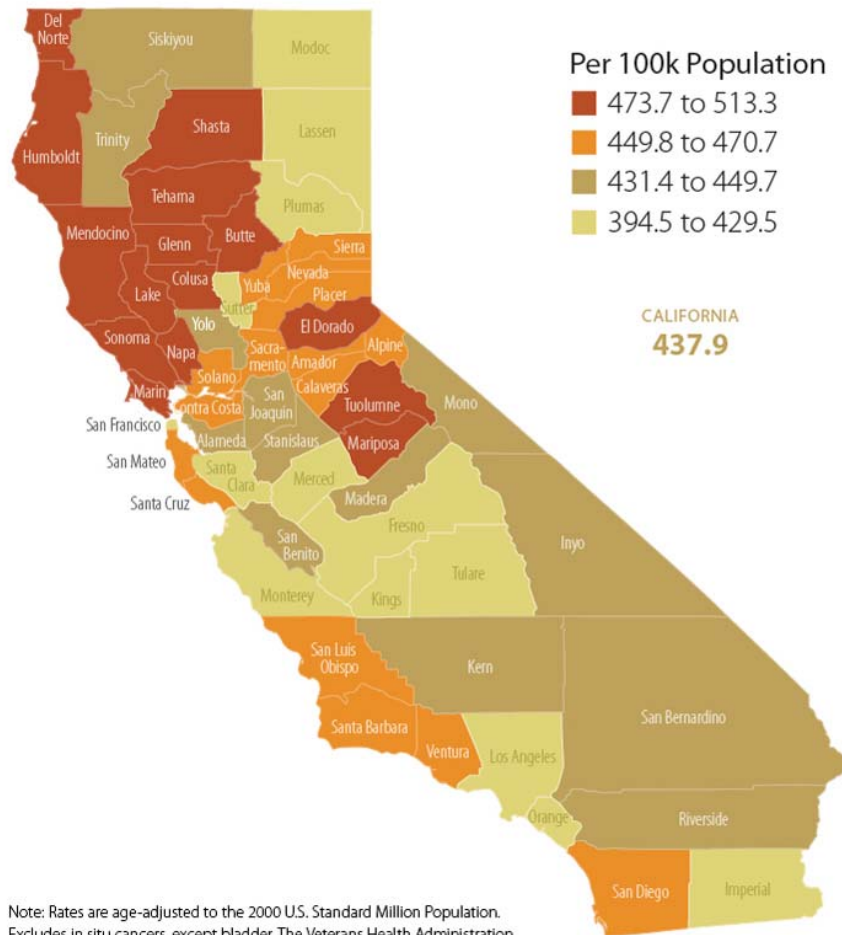
IN BILLIONS



Source: Agency for Healthcare Research and Quality, Total Expenses and Percent Distribution for Selected Conditions by Source of Payment: United States, 1997 and 2009. Medical Expenditure Panel Survey Household Component Data.

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## Cancer Incidence Rates, by County, California, 2005 to 2009

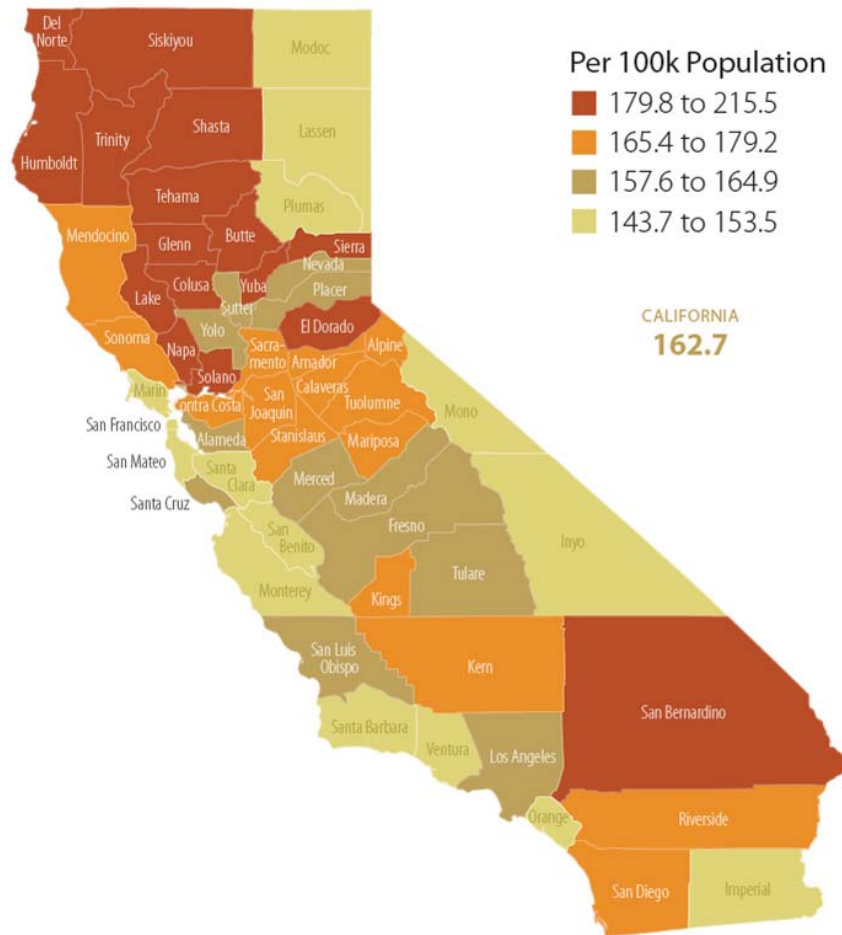


Note: Rates are age-adjusted to the 2000 U.S. Standard Million Population. Excludes in situ cancers, except bladder. The Veterans Health Administration did not report cancer cases to CCR in 2005–2009; therefore, incidence counts for adult males in 2005–2009 are underestimated and should be interpreted with caution.

Source: California Cancer Registry, Web Query Tool, [www.cancer-rates.info](http://www.cancer-rates.info), accessed December 20, 2011.

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## Cancer Mortality Rates, by County, California, 2005 to 2009

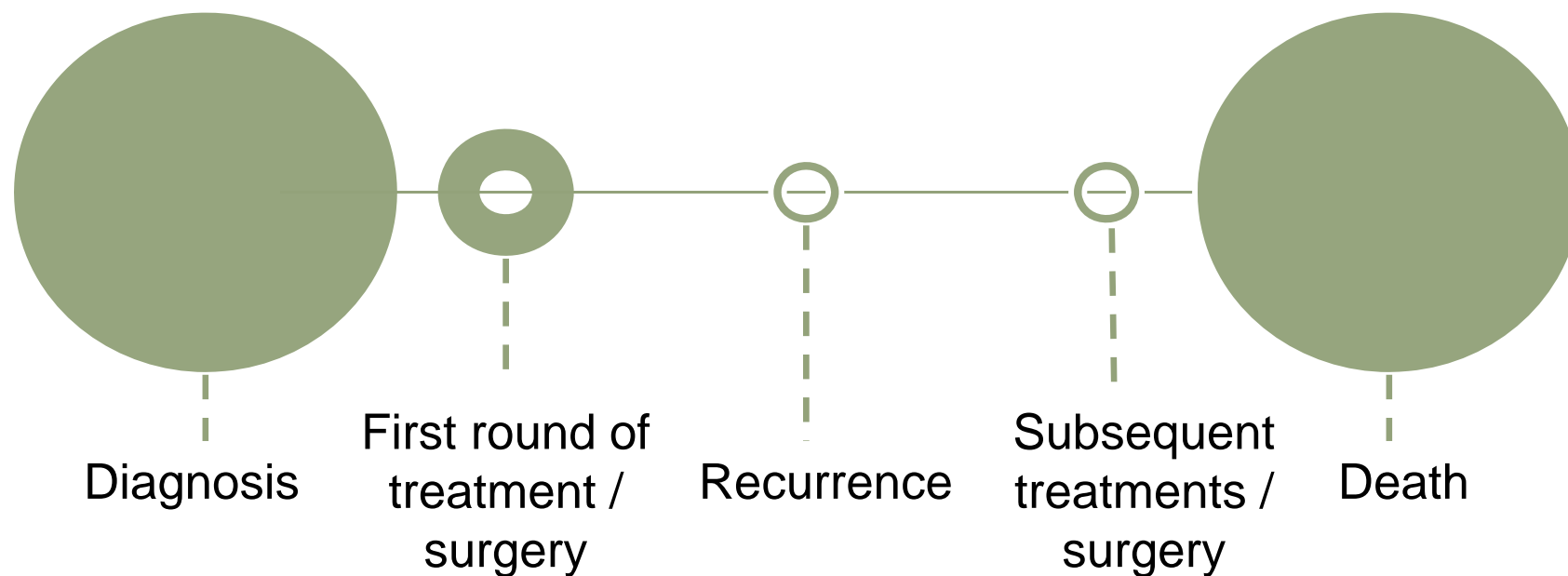


Note: Rates are age-adjusted to the 2000 U.S. Standard Million Population.

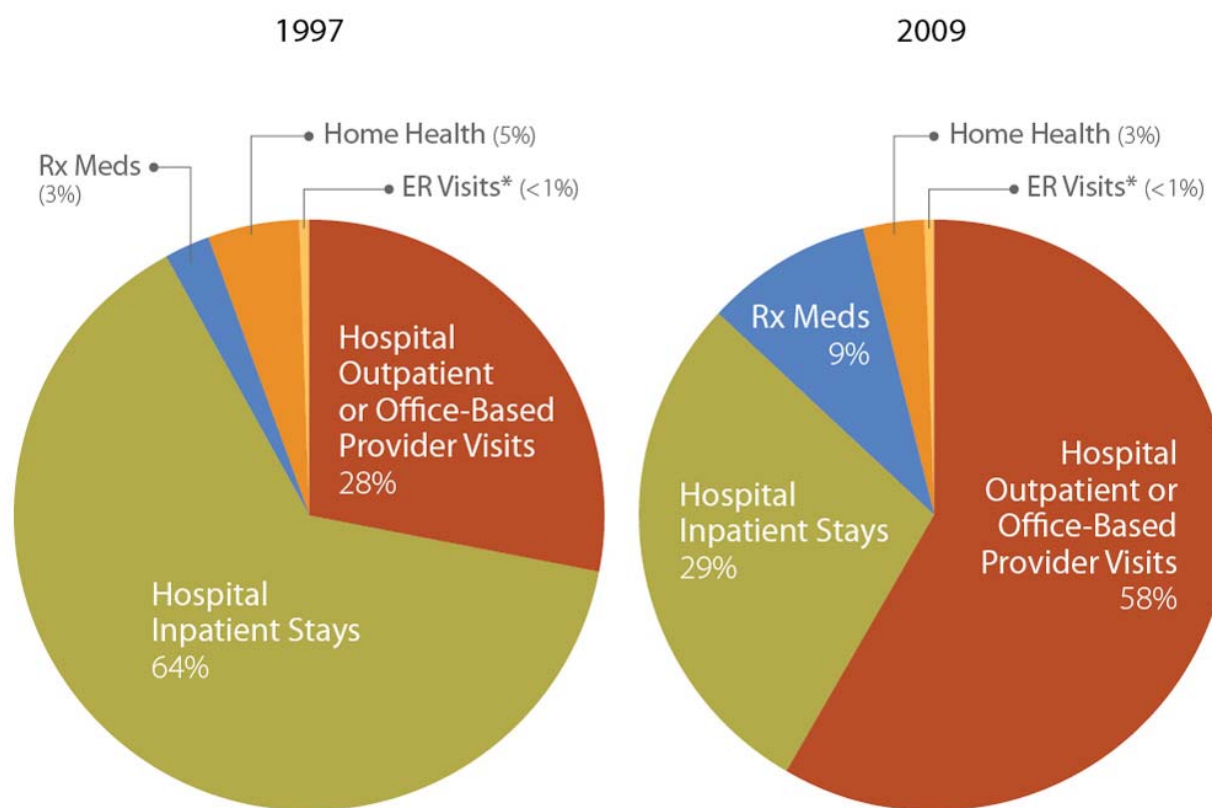
Source: California Cancer Registry, Web Query Tool, [www.cancer-rates.info](http://www.cancer-rates.info), accessed December 20, 2011.

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# Cancer Registries: A Wealth of Information



## Cancer Expenses, by Type of Service, United States, 1997 and 2009



\*Relative standard error equal to or greater than 30%.

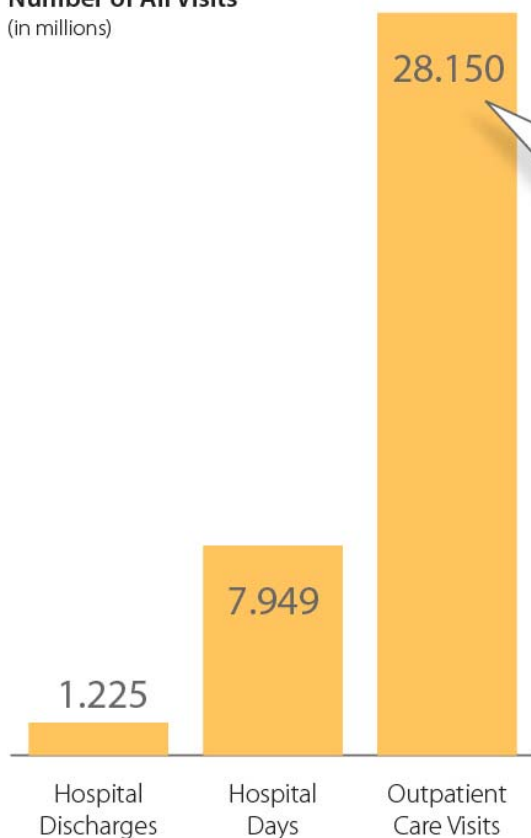
Note: Percents do not always add to exactly 100 due to rounding.

Source: Agency for Healthcare Research and Quality, Total Expenses and Percent Distribution for Selected Conditions by Type of Service: United States, 1997 and 2009, Medical Expenditure Panel Survey Household Component Data.

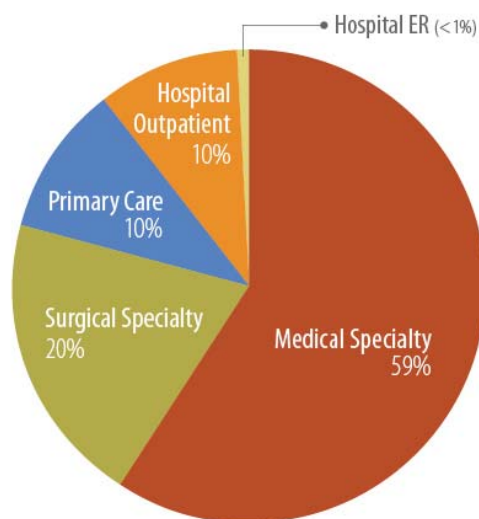
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# Use of Inpatient and Outpatient Care for Cancer Treatment, United States, 2007

**Number of All Visits**  
(in millions)



**Breakdown of Outpatient Care Visits**



Note: Percents do not always add to exactly 100 due to rounding.

Source: Center for Disease Control and Prevention, National Hospital Discharge Survey, Data Highlights-Selected Tables, 2007; Ambulatory Medical Care Utilization Estimates for 2007.

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## Cancer Screening Performance of Medical Groups, Riverside County, 2011

MEDICAL GROUP	BREAST*	CERVICAL†	COLORECTAL‡	OVERALL QUALITY RATING
Southern California Permanente Medical Group – Riverside	86%	73%	72%	★ ★ ★ ★
Family Practice Medical Group of San Bernardino, Inc.	83%	44%	41%	★ ★ ★
Beaver Medical Group	78%	33%	67%	★ ★ ★
Riverside Medical Clinic	76%	35%	65%	★ ★ ★
PrimeCare Medical Network, Inc.	76%	32%	45%	★ ★ ★
Empire Physicians Medical Group	72%	37%	37%	★ ★ ★
Desert Oasis Healthcare	71%	32%	43%	★ ★ ★
Pomona Valley Medical Group, Inc.	72%	32%	41%	★ ★
Loma Linda University Health Care	66%	29%	42%	★ ★
Riverside Physician Network	64%	29%	36%	★ ★
Prospect Medical Group	64%	28%	39%	★ ★
Pinnacle Medical Group	62%	36%	44%	★ ★
Upland Medical Group, Inc.	61%	31%	33%	★ ★
Hemet Community Medical Group	59%	36%	35%	★ ★
Angeles IPA	62%	28%	21%	★
Vantage Medical Group	56%	26%	24%	★

\*Women ages 42 to 69, with a mammogram during the past two years.

†Women ages 24 to 65, with a single Pap smear during the past three years.

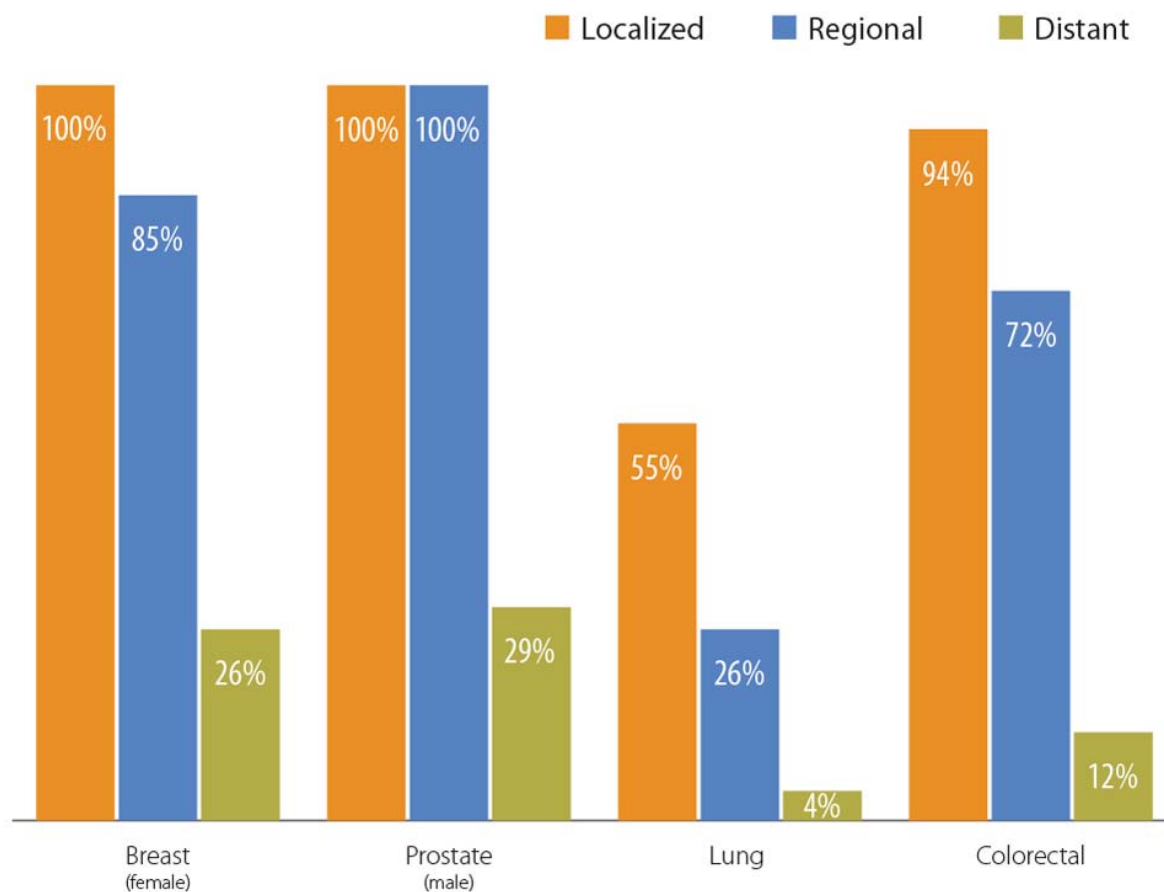
‡Ages 50 to 80, tested for colorectal cancer using any one of four recommended tests.

Note: Alpha Care Medical Group had incomplete data and Children's Physician Medical Group had too few patients to report.

Source: California Office of the Patient Advocate, Medical Group Ratings, accessed December 13, 2011. Screening performance data by county are available at [www.opa.ca.gov](http://www.opa.ca.gov).

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## Five-Year Relative Survival,\* by Stage at Diagnosis, Selected Cancers, California, 2000 to 2009



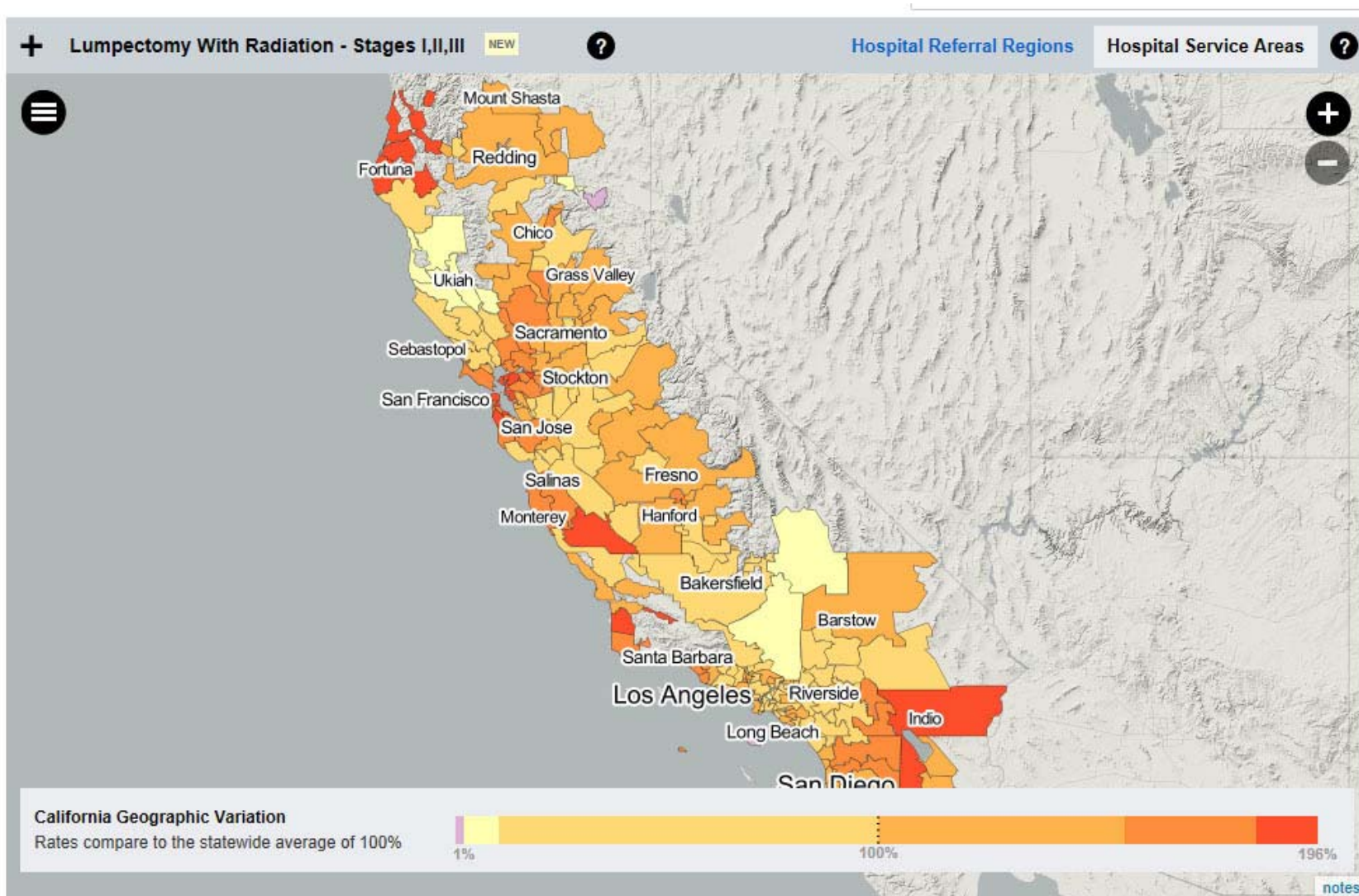
\*Estimate of the probability that an individual will not die from cancer within five years from diagnosis, after adjusting for expected mortality from other causes.

Note: Localized means confined to primary site; Regional means spread to regional lymph nodes; Distant means cancer has metastasized. See Appendix E for relative survival rates by stage at diagnosis for additional cancers in 1990–1999 and 2000–2009.

Source: California Cancer Registry, California Department of Public Health, *California Cancer Facts and Figures 2012*.

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# Wide Variation in Treatment



## Quality Process of Care Measures, Breast and Colorectal Patients, California vs. United States, 2008

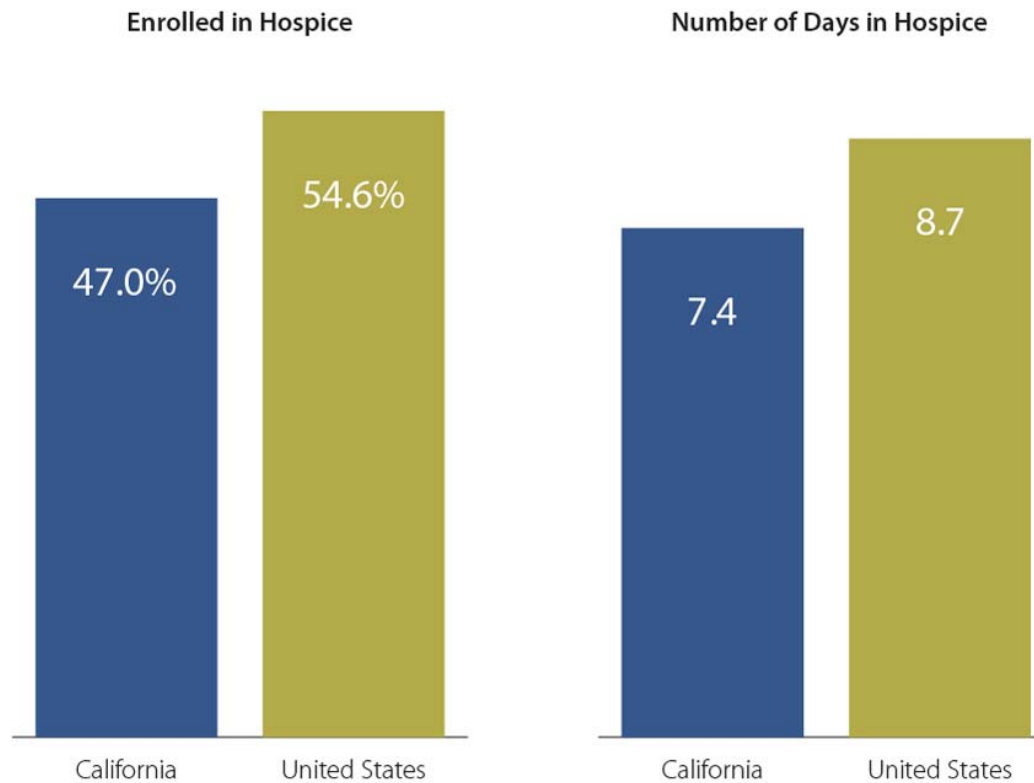
	CALIFORNIA		UNITED STATES	
	PERFORMANCE RATE	CASES	PERFORMANCE RATE	CASES
<b>Breast Cancer</b>				
Post breast conserving surgery radiation therapy	83.7%	4,730	86.3%	52,077
Adjuvant chemotherapy	80.5%	1,055	87.2%	13,326
Adjuvant hormonal therapy	76.2%	5,958	81.1%	64,090
<b>Colorectal Cancer</b>				
Adjuvant chemotherapy	84.4%	801	88.1%	10,571
Surgical resection includes at least 12 nodes	79.3%	2,893	82.2%	35,943
Post surgery radiation therapy	89.5%	334	89.6%	4,188

Notes: Data presented for 107 Commission on Cancer (CoC) accredited programs in California and 1,368 CoC accredited programs in US. See Appendix C for measure definitions.  
Source: American College of Surgeons, Commission on Cancer, Cancer Program Practice Profile Reports (CP3R), special data request.

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## Hospice Use for Medicare Cancer Patients, California vs. United States, 2003 to 2007

DURING THE LAST MONTH OF LIFE...



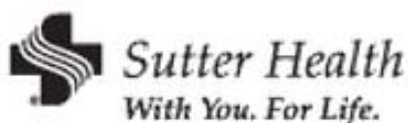
Note: Data population includes Medicare patients, aged 65 to 99, with poor prognosis cancer diagnoses, with full Part A and B entitlement and no HMO enrollment during the measurement period, and who died during the measurement period. Rates adjusted for age, sex, race, cancer type, and non-cancer chronic conditions.

Source: The Dartmouth Atlas, special data request; D. Goodman, E. Fisher, et al, "Quality of End-of-Life Cancer Care for Medicare Beneficiaries: Regional and Hospital-Specific Analyses," *The Dartmouth Atlas Project*, November 16, 2010.

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# Cancer Journey: Choosing a Provider – Where To Go??



# Cancer Journey: Choosing a Provider – Sources of Information



NCCN.com

