Cancer Treatment Centers of America - Southeastern Regional Medical Center
Cancer Hospital Network

<table>
<thead>
<tr>
<th>Facility Background/Data</th>
<th>Year established/historical background</th>
<th>Ownership/type/focus</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
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<td>Cancer Treatment Centers of America (CTCA) was founded in 1988 by Richard J Stephenson, after his mother, who had cancer, died. On June 18, 2009, CTCA announced Newnan, Georgia, as the site of its fifth cancer treatment facility. CTCA at Southeastern Regional Medical Center (SERMC) opened on August 15, 2012, CTCA at Southeastern Regional Medical Center, providing integrative and personalized cancer care.</td>
<td>Cancer Treatment Centers of America (CTCA), headquartered in Boca Raton, Florida, is a national, for-profit network of five hospitals that serves cancer patients throughout the United States. CTCA follows an integrative approach to cancer care that uses conventional approaches like surgery, chemotherapy, radiation and immunotherapy to treat the cancer, while also offering integrative therapies to help manage side effects. CTCA’s mission is to be “the home of integrative and compassionate cancer care. We never stop searching for and providing powerful and innovative therapies to heal the whole person, improve quality of life and restore hope.”</td>
<td>SERMC is located in Newnan, GA (population 41,109), which lies 38 miles southwest of Atlanta, GA (population 463,878). Other locations include the Midwestern Regional Medical Center located in Zion, IL;</td>
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Southwestern Regional Medical Center in Tulsa, OK; Eastern Regional Medical Center in Philadelphia, PA; and Western Regional Medical Center in Goodyear, AZ.

**Leadership structure/composition**

CTCA is led by Richard J Stephenson, Founder and Chairman of the Board. Anne Meisner is President and CEO of SERMC.

**Size**

- Beds/catchment/enrollees
- Departments/employees

The Newnan facility is approximately 455,000 square feet including 50 staffed beds and over 200 physicians.

**Departments:**
- Breast Center for Advanced Oncology
- Clinical Trials
- Critical Care
- Gastroenterology
- Genetics
- Infusion Center
- Interventional Pulmonology
- Interventional Radiology
- Laboratory Medicine
- Lung Center for Advanced Oncology
- Medical Oncology
- Nursing
- Radiation Oncology
- Radiology & Imaging
- Skin, Wound and Ostomy Care
- Surgical Oncology

**Revenue sources (private, Medicare, Medicaid)**

The facility accepts a mixture of cases including private insurance, self-payment, Medicare and Medicaid.

**Notable current initiatives/changes**

- CAM, spine, pain/opiate
- Patient experience

CTCA is differentiated by its integration of conventional and supportive therapies such as acupuncture, chiropractic care, mind-body medicine, naturopathic medicine, nutrition therapy, oncology rehabilitation, pain management, and spiritual support.
| Implementati\n| on of\n| chiropractic\n| services\n| | Impetus/climate/background | The founder/owner strongly supports integrative therapies. This was the fifth hospital in the system and the chiropractic division was already part of the system, with full-time DCs at all of the hospitals. | Integrative and chiropractic treatment is a hallmark of our programs everywhere (Staff) |
| Planning process/timeline | Inclusion of chiropractic is part of CTCA’s model, and they just needed to find the right provider to grow the program. The administration worked closely with CTCA’s National Director of Chiropractic Services to establish this new clinic. | As chiropractic was part of the corporate model, they still needed to “identify the right provider here, right training, right credentials, right focus, right demeanor all of the things that we look for.” (Staff) |
| Year clinical services established | CTCA implemented chiropractic services at its Midwestern Regional Medical Center (Zion, IL) in 2002. Chiropractic services were included at SERMC since the facility’s opening in 2012. | “At the start, we needed to determine what types of services a chiropractor is qualified to provide, what are the education requirements, and all of the basic types of information about what chiropractic does, who are appropriate patients and what are the contraindications. I was involved in creating all of that from the beginning.” (Provider) |
| Chiropractic Clinic Structures Administration | The chiropractors currently work in the chiropractic and acupuncture department. The chiropractors currently report to senior administration. | |
| | | Location/space/equipment | The chiropractic and acupuncture department consists of a reception area and three examination/treatment rooms. Rooms are furnished with state of the art tables and |
Chiropractors
- Number/FTE/appointment
- Privileges/services
- Non-clinical activities
- Professional attributes
- Interprofessional attributes

The chiropractic clinic sees patients 35 hours per week. The chiropractors selected to work in this setting need to be knowledgeable about medical services offered in this population, and to be able to communicate in a hospital setting as well as work closely with other health care providers. "They (the chiropractors) had to understand that chiropractic doesn't cure everything and that they needed to know how to be knowledgeable enough about the medical services to be able to speak articulately in the process and to be cooperative with the team to set appropriate roles." (Provider)

Support staff
- Discipline/number

One administrative assistant handles scheduling for the acupuncture and chiropractic department.

Patient access
- Referral, self-referral
- Appointment availability/wait
- Appointment length, number per week

The out-patient population can self-refer to the chiropractor. If a patient is in-patient at the hospital a referral is needed. The chiropractors’ schedules include time allocated to bedside visits.

Relevant partnerships
- Academic, research

Over 40 active trials are currently being conducted at the hospital. There are initiatives in place to conduct more integrative studies in this setting.

The facility is affiliated with multiple academic institutions to provide training for healthcare providers including Emory University (nursing), University of Georgia (pharmacy), Georgia State University (physical therapy, nutrition), University of West Georgia (nursing) and others.

Patients can access the chiropractic clinic directly, yet most are referred from other providers at the facility. By its nature CTCA
- **Access patterns seen**
  
  serves a highly complex patient population; with some early stage cancer cases, some later stages having gone through multiple procedures. In many instances, managing the side effects of a given cancer therapy is a key goal for the chiropractic clinic.

- **Services provided**
  - Diagnostic, therapeutic
  
  The clinic provides full scope diagnosis and management of musculoskeletal and neuromuscular conditions. This includes manual and instrument joint manipulation, soft tissue therapies, and active care approaches such as exercise and ergonomics.

- **Case management**
  - CPGs/care pathways used
  - Outcome assessment/reporting
  - Communication/collaboration with other providers
  
  Management of the cases seen here is beyond the scope of most widely-used care pathways and clinical practice guidelines for typical musculoskeletal pain conditions. Treatment plans must be tailored based on expertise of the chiropractors and other collaborating clinicians.

  Providers engage in informal face-to-face communication as needed, as well as structured team meetings. Providers also use the EMR for communication and to facilitate coordination of care.

  As a destination hospital, treatment plans are often tailored to meet the patients’ timeframe. If a patient chooses to follow up with a local community chiropractor when returning home, the CTCA chiropractic clinic communicates relevant case management information to the hometown provider.

- **Outcome assessment/reporting**

  Patients going through cancer treatment tend to have fatigue and a variety of other types of consequences from the treatment itself...patients receiving radiation often experience fibrous changes in the skeletal muscle and then they can't tolerate positioning for subsequent radiation treatments. So we end up treating those patients in order to facilitate their ability to actually have the radiation procedure in that case.

  (Provider)
### Impacts/Outcomes

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<tr>
<th>Clinic function</th>
<th>Use of chiropractic services has been steadily increasing. Much utilization and outcomes data exist but are not routinely analyzed and disseminated. The facility recently unveiled a five-year plan to implement ongoing assessment of administrative data.</th>
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<td>Patient status</td>
<td>All stakeholders expressed perceptions that clinical outcomes are very favorable, and that patient satisfaction is high.</td>
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<td>System status</td>
<td>The chiropractic service seems to be highly valued by facility leadership and referring clinicians. Medical physicians reported very favorable perceptions of care quality, as well as the clinical competence and collaborative behaviors of the chiropractors. Currently no specific fiscal benchmarks for chiropractic clinic performance have been established.</td>
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<td>System status</td>
<td>One of the things that I’m most delighted by is working with true professionals here who understand the differences between how they manipulate or treat one skeleton versus another. And how they treat someone who does have metastatic cancer versus another. I’ve been very, very happy with the [chiropractic] team that I have. (Provider)</td>
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<td>System status</td>
<td>If I think a singular treatment or an adjustment could actually change the course of a patient's well being, I'll call the chiropractor who's here and say &quot;can you</td>
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please work with this patient?" and I’ve never had them not do it. The [chiropractors] working here are very patient centric, and understand that if a provider is actually calling, that they’re amenable. Even though they literally don’t have [a moment's rest] all day.

(Provider)

Notes: Population data from 2015 US Census Bureau estimate