

Cancer Advocates Call for Two Measures to Advance Equitable Care

Establishing a comprehensive survivorship program and discussing genetic testing with clients will address disparities in cancer care, say advocates with Elevating Cancer Equity.

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Two new measurements have been added to the Health Equity Report Card ([HERC](#))—a tool for improving the quality and equity of cancer care. The new measures were put forth by a multi-disciplinary working group of experts in community oncology and agreed to by the original Elevating Cancer Equity working group members who drafted the original HERC. This expansion is part of ongoing efforts to address the impact of structural and interpersonal racism as a cause of disparities in cancer outcomes in the United States. The HERC was created by the [Elevating Cancer Equity](#) collaboration of the National Comprehensive Cancer Network (NCCN), American Cancer Society Cancer Action Network (ACS CAN), and National Minority Quality Forum (NMQF).

The HERC initially included 17 actionable practice changes designed to help providers and healthcare organizations identify and address discriminatory behaviors and bias in care delivery, address social determinants of health, and overcome systemic barriers to optimal care. The two added measurements are:

- Establish comprehensive survivorship programming, including a process for continuity of care when a patient is due for discharge/transfer of care.
- Discuss Germline and Somatic Biomarker Testing with all patients and document through medical records.

Visit [NCCN.org/HERC-infographic](https://www.nccn.org/HERC-infographic) to view all 19 practice change criteria for more equitable cancer care delivery.

“Despite advancements in cancer treatment, there remains a critical gap in survivorship care planning, leading to disparities in follow-up care after treatment completion,” explained Crystal S. Denlinger, MD, CEO, NCCN. “To address this disparity, health care providers should delineate a

clearly outlined process for continuity of care when patients are due for discharge or transfer of care, ensuring a seamless transition and continued support for patients beyond their active treatment and/or surveillance phase.”

Dr. Denlinger continued: “Furthermore, it is imperative that discussions regarding the potential role of biomarker testing become standard practice for all appropriate patients undergoing cancer treatment. Germline genetic testing plays a pivotal role in identifying potential hereditary cancer risks and tailoring treatments while somatic tumor testing can help identify treatment strategies based on the biology of a given tumor. By documenting these discussions within medical records, healthcare providers can ensure that every patient receives information about these crucial testing options, allowing them to make informed decisions on personalized care plans.”

A pilot program to assess the feasibility of using the HERC as a tool to improve quality and equity in cancer care was first announced in 2023 on [World Cancer Day](#). The pilot was launched to measure equitable care practices at five academic cancer centers, using concrete metrics and a scoring methodology vetted by healthcare administrators and oncology care professionals. It has since been adapted for use in community health systems as well.

“People in marginalized communities face disproportionate barriers to accessing timely diagnoses, appropriate treatments, and supportive care services,” said Darcie Green, Executive Director, Latinas Contra Cancer, Co-Chair of the Community Working Group advising the HERC implementation process to make sure it reflects the needs of underrepresented patients seeking cancer care in the community setting. “These proactive measures are fundamental for promoting equitable healthcare and addressing the disparities that are far too prevalent in cancer care.”

“We know health care providers are committed to implementing strategies and initiatives to advance equity across all facets of cancer care,” said Community Working Group Co-Chair Jahan Aghalar, MD, Medical Oncologist/Hematologist, New York Cancer & Blood Specialists, Chair, Genitourinary Disease Group at OneOncology. “By sharing this tool for measuring exactly where organizations have room to improve, we help them take a step toward offering better care for all patients going forward.”

Visit [NCCN.org/policy](https://nccn.org/policy) for more on NCCN’s work to improve and facilitate quality, effective, equitable, and accessible cancer care so all patients can live better lives.

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