



**STATEMENT SUBMITTED BY
THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY
TO THE SENATE HEALTH, EDUCATION, LABOR, AND PENSION COMMITTEE
Addressing Healthcare Workforce Issues for the Future
February 12, 2008**

The American Society of Clinical Oncology (ASCO) is the world's largest medical society of physicians who specialize in the care of cancer patients and conduct research, numbering more than 25,000 worldwide. ASCO appreciates the opportunity to offer its views regarding healthcare workforce issues.

There is growing evidence that the nation is facing a physician shortage, largely driven by the aging of the population and a physician workforce that has not grown to meet the needs of the nation. The Census Bureau projects the number of Americans 65 years and older will double between 2000 and 2030. Oncologists care disproportionately for older patients; therefore, the aging of the population will likely have a significant impact on the demand for oncology services. Age-related growth in cancer rates will also be accompanied by an increasing number of cancer survivors requiring ongoing monitoring and care from oncologists. New therapies will also influence the demand for services. All of this will come at a time when the oncologist workforce is aging and heading into retirement in increasing numbers.

An ASCO study of the oncologist workforce conducted in the mid-1990s found that supply and demand were in equilibrium. The current analysis shows a similar balance in 2005, but projects that this balance will not be sustained into the future. Oncology will not be the only specialty facing future shortages. There has been a recent surge of reports highlighting future specialty shortages, most citing the aging of the population as a key factor leading to increased demand.

ASCO FINDINGS:

ASCO commissioned the Association of American Medical Colleges' Center for Workforce Studies to conduct an analysis of the oncologist workforce. The study was designed to gain a better understanding of the current supply of oncologists and to forecast the supply of and demand for oncologists through 2020. The study is available on ASCO's website at www.asco.org/workforce.

As of 2005, there were nearly 10,500 oncologists (in the subspecialties of medical oncology, hematology/oncology, and gynecologic oncology) practicing in the United States: 81% were medical oncologists or hematologist/oncologists and 5% were gynecologic oncologists. Over half (54%) of the currently practicing oncologists are aged 50 or older and will be 65 or older by the year 2020. Taking into account the aging of the U.S. population, by 2020 there will be a shortage of between 2,550 and 4,080 oncologists, which could lead to between 9.4 to 15 million fewer oncologist visits.

While the number of oncologists has grown over the past two decades, supply is only projected to increase 20% between now and 2020. The supply is limited by lack of growth in medical students choosing to enter internal medicine training, which provides the pipeline for new medical oncologists and hematologists/oncologists.

Demand for oncologist services is projected to grow by 48% during that same time period – driven by an 81% increase in cancer survivors and 48% increase in cancer cases. The projections were based on current cancer rates and delivery patterns applied to the expected U.S. population in 2020. Unless there is a dramatic change in the number of oncologists or modifications to cancer care treatment or delivery between now and 2020, the nation is expected to face an acute shortage of oncologists.

Many workforce studies focus on the overall physician to population ratio, but this only tells part of the story for a specialty like oncology that primarily provides care to one segment of the population, the growing population of people aged 65 or older. Additionally, the increasing number of cancer survivors will contribute to an increase in need and demand for oncologists. In 1971, there were approximately 3 million cancer survivors in the United States and by 2001, that number increased to nearly 10 million. Cancer survivors make up a significant proportion of overall cancer visits.

The increasing numbers of cancer survivors is a significant driving force behind the increased demand for oncologist services. The study found that 68% of current oncologist visits are for patients who are more than one year post-diagnosis. Practices and institutions are beginning to implement alternate arrangements for managing the care of these cancer survivors because oncologists will not be able to continue to see the anticipated 81% increase in survivors projected in the study by the National Cancer Institute.

When this shortage is combined with the current nursing shortage, it translates into a challenge for the entire oncology care team and the delivery of quality cancer care because of the collaborative nature of oncology care.

ASCO RESPONSE:

No single potential remedy will fully address the likely future shortage of oncologists. While there are opportunities to reduce the gap between projected supply and demand, a multi-faceted approach is the only way to effectively offset the projected shortages. The nation is facing a potential crisis, and action taken throughout the next several years can minimize the crisis and may even lead to more effective approaches to delivering high-quality oncology services.

ASCO cannot fully address the oncology workforce shortage by training more oncologists because of the time and resources it requires. Therefore, ASCO is laying the groundwork to employ several different approaches to help guide and shape the oncology care team of the future to help ensure that patients continue to access quality cancer care.

In response to the projected shortage, the ASCO Board formed the Workforce Implementation Group (WIG) in early 2007 to develop comprehensive recommendations regarding how all of ASCO's programs and services can help ensure the future delivery of oncology services. A key component of this will be collaboration among health care professionals to ensure continuity and quality of care, particularly for cancer survivors who are no longer in active cancer treatment.

The WIG is examining pilot projects to assess the impact of various practice models that incorporate 1) collaborative care between oncologists and Nurse Practitioners and Physician Assistants, 2) innovative approaches to survivorship care, and 3) other methods to increase practice efficiency. Further, they are also considering initiatives that are designed to attract medical students and residents to oncology; enhance fellowship training to encourage leadership, business and management training, as well as outpatient experience; and funding for training programs.

Additionally, in response to concern about cancer care delivery, ASCO will be studying the impact of a clinician shortage on other key aspects of oncology treatment, including the conduct of oncology research and time spent training and mentoring tomorrow's oncologists.

We appreciate the opportunity to submit this statement to the record. We look forward to working with the Health, Education, Labor, and Pensions Committee to address the critical issue of how we care for patients now and in the future.