AIMING FOR THE MOON(SHOT):

VA's National Oncology Program

2023 Program Guide



U.S. Department of Veterans Affairs Veterans Health Administration







Equity (05-14)

- 07 PACT ACT **10** ENACT Clinical Trials Program
- **11** Virtual Tumor Boards **13** VA National TeleOncology

Cancer Screening (15-24)

- 17 MAMMO ACT **19** National Center for Lung Cancer Screening 20 Lung Precision Oncology Program 21 Colorectal Cancer Screening 22 Breast & Gynecologic Oncology System of Excellence

- 23 Molecular Analysis Researching Carcinogenic Exposures

- 27 MISSION ACT
- 31 Pharmacogenomics & Clinical Cancer Genetic Services 32 Close to Me
- **33** Precision Oncology Program for Cancer of the Prostate
- 35 Final Thoughts from the Office of Research and Development

Welcome

01 Letter From Leadership 03 Milestones and Future Plans for Cancer Care at VA

09 Clinical Pathways & National Radiation Oncology Program

Innovation (25-24)

- 29 National Precision Oncology Program

A LETTER LEADERSHIP

It has been one year since the reignition of President Biden's Cancer Moonshot challenge: to cut the cancer death rate in half within 25 years and to improve the experience of people and their families living with and surviving cancer. Since then, VA's National Oncology Program (NOP) has taken concrete steps to improve outcomes for Veterans and Veterans Health Administration (VHA) continues to lead the charge with best-inclass cancer care for Veterans across the country.

As demand for our services continues to grow, Veterans trust us to care for them more than ever. Often, Veterans treated for cancer at VA have better outcomes than they would elsewhere. We ensure that Veterans get the best clinical care possible through specific priorities:

> We are connecting Veterans to the soonest and best care. According to an American Society of Clinical Oncology workforce report, 66 percent of rural counties have no oncologist. Veterans in these counties may face serious issues accessing care. VA has responded by prioritizing access for Veterans to top-rated physicians and cancer care specialists nationwide through an integrated clinical trials network and the VA National TeleOncology(NTO). NTO allows cancer care providers to reach Veterans regardless of where they are located. This service delivers screenings, diagnostics, and treatment for medical oncology – including rehabilitation and palliative care.

We are supporting a pilot program called the Close to Me Infusion service, which deploys chemotherapy certified RNs to communitybased outpatient clinics so that they can administer anti-cancer therapy closer to where Veterans live. This effort has saved tens of thousands of miles of travel for Veterans across the country.

We are also scaling best practices and driving innovation by developing and expanding oncology Clinical Pathways. VA providers are equipped with treatment process guidelines that help determine the best, least toxic, and most efficient clinical route for every Veteran.

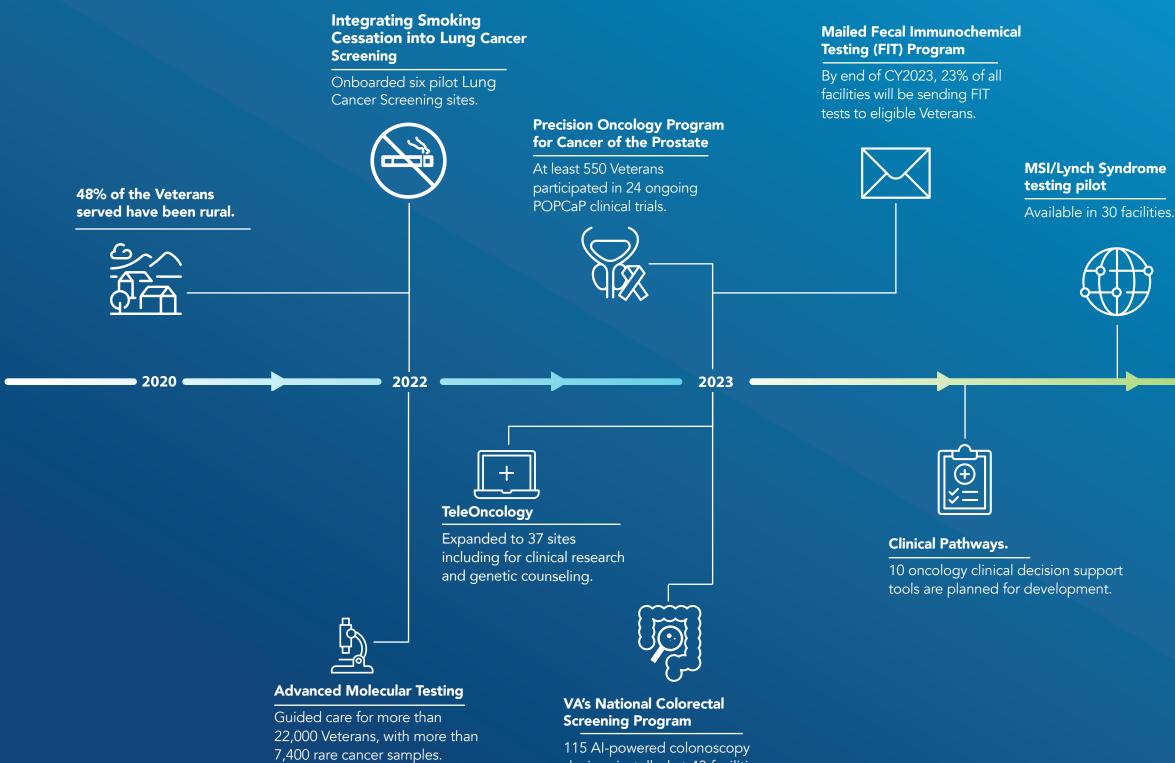
We are supporting Veterans' families, caregivers, and survivors. We recently expanded access to Lynch Syndrome testing for those recently diagnosed with colorectal cancer to 30 sites across the country. This test will help family members understand if they are at an increased risk of colorectal cancer and can help VA providers determine the best course of action early. This effort will result in the increased capacity to test up to 1,300 Veterans per year.

Throughout it all, we have prioritized health equity as a key consideration. Equitable cancer care means recognizing that even though cancer impacts every race and ethnicity, its effects are amplified in certain groups due to long-standing social and economic prejudices and unfair biases, also known as structural inequalities. Health equity at VA means health care quality or treatment is not affected by a Veteran's gender, race or ethnicity, location, or socioeconomic status.

These programs represent VA's commitment to the Cancer Moonshot challenge and to improving the lives of our Nation's Veterans. As we look forward to reduced mortality and improved cancer outcomes through Cancer Moonshot efforts, we remain focused on the Veteran: their unique risks, their needs, and their outcomes.

> **Shereef Elnahal, M.D., MBA** Under Secretary for Health, United States Department of Veterans Affairs

Where we have been & where we are going



devices installed at 43 facilities.

Pharmacogenomics

16 drug-gene interaction alerts are planned to deploy in CY2023.





Clinical Cancer Genetics program launched

EQUITY: A 3-FOLD FOCUS IN CANCER CARE



Health care quality or treatment will never be affected by a Veteran's gender, race, ethnicity, location, or socioeconomic status.



— Linda Torres, D.N.P., CRNA,

Health Advisor to the Under Secretary for Health, United States Department of Veterans Affairs

Centering Equity in Care

Health equity at VA, including equitable cancer care, means health care quality or treatment is not affected by a Veteran's gender, race or ethnicity, location, or socioeconomic status. At VA, we go the extra mile to reach Veterans where they are because we believe health equity means all people deserve to reach their full health potential.

Early efforts within VA to prioritize health equity included the foundation of the Center for Health Equity Research and Promotion in 2001. Then in 2007, a comprehensive report for VA leadership was developed on health care disparities. Later in 2013, the establishment of the VA Office of Health Equity formalized VA's commitment to health equity. For cancer care, health equity is

approached in three ways: people, places, and partnerships.

Diversified Approaches to Ensure Equity

Oncology physicians are often affiliated with National Cancer Institute centers of excellence. VA's clinical pharmacists are fully integrated into care teams and provide close oversight of a Veteran's medication and treatment plans. The nursing staff supporting oncology are dedicated, thorough, and provide incredible care coordination to help ease the logistical burden of care.

VA cancer specialists around the country work through the VA National TeleOncology (NTO) from their local VA medical center office, providing care virtually to a selected regional site. Further, NTO initiates programs like the Close to Me Infusion Care Delivery

service, which administers anticancer therapy at communitybased outpatient clinics closer to where Veterans live.

By leveraging partnerships with the Prostate Cancer Foundation, the American Cancer Society, and the Bristol Myers Squibb Foundation, VA brings lung cancer screening and precision oncology treatments to Veterans nationwide.

PACT ACT

The PACT Act is transformational for any Veteran who may need cancer care. These men and women have served their country with bravery and honor. Thanks to this legislation, we can provide them with bestin-class cancer care. VA is ready to support Veterans facing a cancer diagnosis.

Michael Kelley, M.D. VHA National Executive Director, National Oncology Program

in 3

It is estimated that 1 in 3 Veterans had toxic exposure during their active duty.

7

New VA authorized medical facilities across the country, providing greater access to VA Health care.

20 & 11

The Act adds more than 20 burn pit and toxic exposure-related conditions, as well as 11 different types of cancer to VA's military service presumption list.



Meaningful Impact

The Honoring our Promise to Address Comprehensive Toxics Act of 2022 (PACT Act) is a transformational new law that expands VA health care and benefits for Veterans exposed to burn pits and potentially toxic substances.

It expands health care eligibility to several groups of Veterans, including Vietnam era, Gulf War era and Post-9/11 combat Veterans. It also adds more than 20 burn pit and toxic-exposurerelated conditions to VA's military service presumption list, including several different types of cancers. This means if a Veteran has been diagnosed with one of these conditions, VA assumes that toxic exposure during military service led to the diagnosis.

Added **Cancers:**

- Brain cancer
- Gastrointestinal cancer of any type
- Glioblastoma
- Head cancer of any type
- Kidney cancer
- Lymphoma of any type
- Melanoma
- Neck cancer
- Pancreatic cancer
- Reproductive cancer of any type, including prostate cancer
- Respiratory (breathingrelated) cancer of any type.

Honoring Our Promise

In addition to expanding the list of presumptive cancers, the act strengthens the Cancer Moonshot effort to address rare cancers which make up approximately 25% of all cancer diagnoses within VA. If a Veteran is diagnosed with a rare cancer or a common cancer with an unusual or unique presentation, VA can support them.

This is the most significant expansion of benefits and services for toxin-exposed Veterans in more than 30 years—and it demonstrates VA's commitment to health equity in cancer care. All Veterans potentially exposed to toxins will be screened and get the best clinical care possible, which helps foster a cancer research community within VA that prioritizes equity, collaboration, and the needs of the Veteran.

CLINICAL PATHWAYS

Moving Cancer Care Forward

Since the relaunch of President **Biden's Cancer Moonshot** initiative, VA has continued its work on collaborative programs like Clinical Pathways that will help understand and defeat all cancers, including ones that may be associated with military environmental exposures.

Clinical Pathways are treatment process guidelines that help our clinicians determine the best, least toxic and most efficient clinical plan for each individual Veteran. They also facilitate coordination within care teams, bringing together providers who may be located across the country. By leveraging VA's national network of experts, these Clinical Pathways ensure that Veterans have access to the highest quality of care, no matter where they live.

Responsive and Focused

As VA looks to further advance both its cancer care and the Cancer Moonshot program, more Clinical Pathways will be coming, providing improved decision making and care for a wider range of Veterans with cancer.

While there are 10 Pathways

currently developed, VA plans on finalizing nine more in 2023.

Best-in-Class Care is Built-In

Clinical Pathways are reviewed on a continuous basis, so providers can trust them to have the most up-todate treatment recommendations available. It is like having the most recently published clinical literature pre-sorted and ordered into the most useful information for a patient's specific diagnosis.

By using Clinical Pathways, VA clinicians can provide cancer care at a subject matter expert level.

ENACT/ CLINICAL TRIALS PROGRAM

Increasing Access to High Quality Clinical Trials

Veterans with cancer deserve access to high quality and cuttingedge cancer treatment, including cancer clinical trials. Cancer clinical trials help find out if new therapies are better than current therapies.

As part of VA's focus on Cancer Moonshot 2.0, the Enact Equity and Access to Clinical Trials (ENACT) group aims to:

- clinical trials

Integrating Clinical Trials into Treatment Plans

Cancer clinical trials are part of precision oncology because cancer clinical trials try to find better treatments for cancer, often focusing on subtypes of cancer or subgroups of cancer patients. Cancer clinical trials are an excellent option for Veterans, their caregivers, and their oncologists

-NATIONAL-RADIATION **ONCOLOGY** PROGRAM

Roughly 60% of Veterans with a malignant cancer diagnosis will receive radiation treatment at one point in their care. The National Radiation Oncology Program at VA (NROP) is guided by best-in-class leaders in radiation oncology, who are committed to providing the highest quality care to Veterans. Through the management of

complimentary programs and the strength of its talented staff, NROP walks with Veterans on every step of their cancer journey.

A Leader in **Radiation Oncology**

NROP is a leader in radiation oncology throughout the country. Radiation oncology care at VA offers Veterans the most efficient, effective, and state-of-the-art therapies that are not always available to the general population. Moreover, because care is not driven by financial outcomes, Veterans receive unbiased opinions focused solely on patient outcomes. NROP prioritizes direct, hands-on care for all ages and alltypes of cancer at every stage. VA has expanded the number of sites

gives Veterans greater access to continuous, follow-up care.

offering radiation oncology, which

Facilities offer radiation oncology

VA now has 41 dedicated radiation oncology suites, all accredited



• Make cancer clinical trials an option as part of Veterans' cancer care

• Educate Veterans, their caregivers, and their oncologists about cancer

Increase the ability for Veterans with cancer to take part in cancer clinical trials.

to think about, together with considering different standard cancer treatments.



Visit: Clinicaltrials.gov

By standing up these specialized VTBs, we have the ability to connect experts nationwide and leverage systems and partnerships with academic affiliates to provide multidisciplinary care for Veterans no matter where they live.



Vida Almario Passero, M.D., MBA Chief Medical Officer, VA National TeleOncology

VIRTUAL TUMOR **BOARDS**

A NATIONWIDE NETWORK OF SPECIALISTS

A Nationwide **Network of Specialists**

VA's National TeleOncology Program launched the Virtual Tumor Boards (VTBs) to unite VA health care professionals across the country and provide guided discussions around cancer treatment plans—bettering patient care for Veterans. VA's VTBs provide a nationwide forum where VA providers can present patients for discussion to develop individualized, wellrounded treatment plans that

implement the knowledge of a multidisciplinary team. Facilities that do not have the resources or volume of cases for a disease to establish a Tumor Board of its own can bring cases and tap into the expertise of VA specialists across the nation. Furthermore, VTBs are specialty-specific, ensuring that those in attendance have the expertise needed.

Since program launch in early CY2022:

• Fifteen Hematologic, nine Breast and Gynecologic

- sessions, and a Central Nervous System pilot program were held between March and December.
- Fifty patients were discussed between these three VTBs.
- Twenty-four facilities across the country participated in VTBs.
- As of spring 2023, 100 Veterans' cancer cases reviewed via VTBs.

Focused Efforts on Prioritized Cancers

Upcoming VTBs will focus on:

- Thoracic
- Liver

- Rare cancers

By standing up these specialized VTBs, VA can leverage the physician specialists and systems of excellence within VA, and partnerships with academic affiliates.



The VTBs are a tool that can help spread the wealth of expertise that exists within VA across the nation. Veterans who are at smaller or rural facilities can have a consistent standard of care as one at a larger academically affiliated VA.

> Michael Kelley, M.D. Executive Director, VHA National **Oncology Program**

• Melanoma

• Gastrointestinal

Genitourinary



VA NATIONAL TELEONCOLOGY

Bringing Innovative Oncology Care to the Veteran

VA National TeleOncology (NTO) allows Veterans to access toprated physicians and cancer care specialists nationwide, regardless of where they are located. This service delivers screenings, diagnostics, and treatment for medical oncology – including rehabilitation and palliative care.

VA uses a "hub-and-spoke" model for this program. The main hub is based in the Durham VA Health

Care System, while VA cancer specialists around the country work through NTO from their local VA Medical Center office, providing care virtually to a selected spoke site.

Patients can connect with providers two different ways: they can either travel to a spoke site to connect with clinicians via video telehealth or connect from their home using an internet-connected device with VA Video Connect.

NTO Operationalizes Equity

To help reduce issues with access to care, NTO is supporting a pilot

2021 **14** NTO

31 NTO

2022

NTO expanded from 14 to 31 sites in CY2022, a growth of 116%.

chemotherapy certified RNs to

community based outpatient

therapy closer to where Veterans

live. This effort has saved tens of

thousands of miles of travel for

Veterans across the country.

program called the Close to Me Infusion program, which deploys scheduling. clinics to administer anti-cancer

save lives.

A key element of NTO's equity effort is the cancer navigation provided by the team's registered nurses. Cancer care navigation has been shown to reduce barriers to care by providing patients with deeper understanding of

45 sites

As of Spring 2023, there are seven dedicated disease type teams that support Veterans across 37 spoke sites nationwide.



of Veterans who received cancer care through the VA National TeleOncologylived in rural areas.

their treatment plans and care coordination through treatment

In this way, NTO is on the forefront of delivering equitable oncology care that will improve outcomes and



CANCER SCREENING A VITAL STEP IN VETERANS HEALTH



Cancer Screening: A Vital Step in Veterans Health

There are four cancers where routine screening leads to a positive impact on the outcome of treatment: lung, colorectal, breast and cervical. In these four instances, the earlier cancer is identified, the more likely treatment is to be effective.

- Lung cancer and colorectal cancer are the second and third most diagnosed cancers within the Veteran community.
- Approximately 1-2 million ٠ Veterans may be eligible for lung cancer screening.

treatable stages.

Breast and cervical cancer screenings are an established priority within VA as the female population of Veterans continues to grow.

Equity through Screening

The National Center for Lung Cancer Screening (NCLCS) supports systematic, integrated, and equitable access to high quality lung cancer screening for Veterans. To this end, VA has implemented the Lung Cancer Screening Platform (LCSP) at

2023.

Screening is critical to catching colorectal cancer at its most

98,890

Veterans screened for lung cancer at lung cancer screening program sites from April 2022 to January 90 sites across the nation. This platform is a suite of tools that include clinical reminders, health factor alerts, note templates, and a patient management system. Between 2021 and 2022, VA increased the total number of Veterans screened for lung cancer by 59%.

Al-assisted colonoscopy devices installed across 43 facilities nationwide.

Between CY2021 and 2022, VA increased the total number of Veterans screened for lung cancer by **59%**

MAMMO ACT

The MAMMO Act emphasizes the need for delivering screening, particularly in rural areas, where there are several facilities that do not have mammography.

Haley Moss, M.D., MBA DCI Gynecologic Oncologist, Lead, VA Breast and Gynecologic Oncology System of Excellence

131 Facilities

VA's Breast and Gynecologic Oncology System of Excellence can support virtual tumor boards for complex breast and gynecologic cancers at 131 facilities across the nation.

12 Partnerships Sites

VVA's National Oncology Program has entered into a partnership with NCI to provide access to clinical trials across 12 VAMCs. expand

12+6 Additional Partnership Sites

Per MAMMO Act legislation, VA's National Oncology Program is working to add 6 more VAMCs to the NCI partnership.

Meaningful Progress

The Making Advances in Mammography and Medical Options for Veterans Act of 2022 (MAMMO Act) expands Veterans' access to highquality breast cancer screening by improving and modernizing breast imaging services within the VA health care system.

Women are the fastest growing group within the Veteran population and access to mammography is an essential tool to detect breast cancer early. VA is empowered by the MAMMO Act to transform cancer research, treatment, prevention and outcomes for female Veterans.

Partnerships That Matter

Through VA's Breast and Gynecologic Oncology System of Excellence (BGSoE), VA is partnering with national leaders in cancer research and care to transform cancer prevention, treatment, and outcomes, while continuing to provide coordinated, integrated patient-centered care.

Through current partnerships with NCI-Designated Cancer Centers such as Duke University Medical Center, Baylor College of Medicine, and the Huntsman Cancer Institute at the University of Utah, the BGSoE is uniquely situated to provide care via TeleOncology and decentralized clinical trials to Veterans nationwide. The BGSoE is exploring additional cancer center partnerships as well.



NATIONAL CENTER FOR LUNG CANCER SCREENING

Systematic, Integrated, and Equitable

The National Center for Lung Cancer Screening (NCLCS) supports systematic, integrated, and equitable access to high quality lung cancer screening processes for Veterans. The mission of the Center is to reduce lung cancer related mortality and morbidity by leveraging a learning health care system to increase access to evidence-based lung cancer screening through a collaborative, interdisciplinary network.

To help achieve these goals, VA has implemented the Lung Cancer Screening Platform, a suite of lung cancer screening tools integrated with the medical record system that allows us to identify and manage LCS patients.

The NCLCS will continue to provide education and support to clinical teams regarding LCS standards of care, VHA policy, best practices, as well as data and policy advice to central VA leadership regarding LCS quality improvement and standards.

Fast-Paced Growth

VA is prioritizing lung cancer screening to identify early-stage disease in high-risk Veterans when treatment is more likely to be effective. Lung cancer screening has been implemented nationwide, growing from **63** sites to **93** sites from August 2022 to February 2023.

Meeting the Veteran's Needs

In 2023, VA is working to bring high-quality screening to every VA medical center across the country, so Veterans will be able to receive integrated and equitable access to high-quality lung cancer screening no matter where they live.

LUNG PRECISION ONCOLOGY PROGRAM

Care Across the Cancer Journey

VA's Lung Precision Oncology Program (LPOP) means Veterans receive the best possible care across the cancer care continuum. VA prioritizes lung cancer screening to help identify early-stage disease in high-risk Veterans and supports Veterans with resources geared towards smoking cessation. 20 To achieve these goals of equitable and accessible care, VA has established lung cancer precision oncology sites across all VISNs to leverage the relationships between academic affiliate NCIdesignated cancer centers, VA, and other community partners. These relationships help provide Veterans with systematic and equitable access to high quality oncology care.

Innovation for Better Outcomes

LPOP has employed computer vision and machine learning in precision oncology. This technology integrates and applies artificial intelligence, computer vision, and machine learning tools to enable translational and clinical research efforts with the goal of improving Veteran care.



98 Medical Centers

LPOP has increased access to molecular testing and precision oncology clinical trials to 98 medical centers across the nation.



Cancer Cabinet Community Conversation

COLORECTAL CANCER SCREENING

Catching Colorectal Cancer Early

Colorectal cancer is among the most diagnosed cancers in Veterans. In CY2022, nearly 500,000 Veterans underwent testing for occult blood in their stool, a potential sign of colorectal cancer.

The screening gap has only widened during the COVID-19 pandemic. To help address this

gap, VA has begun mailing fecal immunochemical testing (FIT) kits to a select group of Veterans who are eligible for screening. FIT, a home-based screening test that looks for blood in stool samples, is recommended annually for adults aged 45-75 at average risk for colorectal cancer.

The Mailed FIT Program launched in January 2023 and will be initiated at two medical centers per VISN. It will increase screening capacity and assist in identifying cancers earlier, while also improving access for Veterans who need to be screened.

Technology to Improve Screening

The Food and Drug Administration has recently approved artificial intelligence devices to reduce the number of colorectal polyps missed during colonoscopy. Removal of these polyps may help prevent future colorectal cancer.

Access and Equity

These efforts work in concert with VHA policy to recommend colorectal cancer screening of various modalities to appropriate, averagerisk Veterans in accordance with VHA clinical preventive services guidance.

With the Mailed FIT implementation, Veterans across the nation will have better access to high quality colorectal cancer screening without leaving their home.

VA has deployed 115 of these artificial intelligenceassisted colonoscopy devices across 43 facilities.

40% of Veterans

Are currently due or overdue for colorectal cancer screening.



BREAST & GYNECOLOGIC ONCOLOGY SYSTEM OF EXCELLENCE

Supporting a **Growing Demographic**

Women represent the fastestgrowing demographic to serve in the military and enroll in VA health benefits. In response, VA's National Oncology Program established the Breast & Gynecologic **Oncology System of Excellence** (BGSoE) to improve the quality of care for Veterans diagnosed with reproductive cancers such as breast, ovarian, uterine, and

cervical cancer.

The BGSoE's multidisciplinary team includes medical oncology, gynecologic oncology, breast surgery, radiation oncology, advanced practice practitioner, pharmacy and nursing. The team is developing a system to ensure coordinated, integrated, and compassionate patient-centered care, particularly for Veterans who need to navigate different health systems to receive care from various subspecialties. In addition, through the National TeleOncology service, the BGSoE team offers telehealth services and electronic consultative services.

Achievements



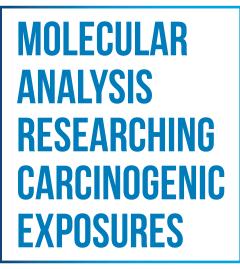
• Hosted a White House Cancer Cabinet Community Conversation event in October 2022, featuring

cancer specialists from the community and VA, and Veteran cancer survivors.

- Developed women's health research priorities within VA, including ongoing literature review
- Efforts and coordination of a women's cancer research conference in March 2023
- Developed a biweekly national virtual multidisciplinary tumor board to develop treatment plans for complex breast and gynecologic cancers among Veterans.



Watch the Cancer Cabinet Community Conversation!



Research Into Environmental Exposures

The Molecular Analysis Researching Carcinogenic Exposures (MARCE) program is one of VA Cancer Moonshot's research efforts geared towards further understanding the effects of military environmental exposures. Through VA and Department of Defense, this program studies Veteran tumor samples located using new and

existing databases.

Currently, the research project is focused on a cohort of tumor samples from Veterans who were stationed at Marine Corps Base Camp Lejeune between 1950 and 1985. Researchers are looking to understand and identify the impact that contaminated drinking water may have had on the risk of developing cancers of the kidney, multiple myeloma, bladder, liver, leukemia (bone marrow), and others.

It appears that Veterans who were stationed at Camp Lejeune have a higher risk of several cancers:

Marines from Camp Lejeune

35% Higher risk of kidney cancer
42% Higher risk of liver cancer
47% Higher risk of non-Hodgkin's lymphoma
50% Higher risk of ALS
68% Higher risk of Multiple Myeloma

Overview

The MARCE project will analyze gene expression patterns to help researchers study the relationships between toxic exposures and cancer type. Researchers will then be able to establish if the gene expression patterns can be linked to specific Veteran carcinogenic exposures. These key research questions will help the project determine better treatments for Veterans in the future through precision oncology approaches.

The goal of this project is to identify gene expression patterns associated with toxic exposures.



Learn more about MARCE and VA.

Photo Courtesy of: The National Museum of Health and Medicine Archive.





The Future of Cancer Care is at VA

Veterans, and VHA, are unique among patient populations and health care organizations.

Veterans often contend with challenging health care circumstances. They can struggle with environmental exposures, high rates of smoking, and, because nearly 30% of Veterans live in rural areas, extended travel times to access health care services.

However, because VA provides unprecedented access to the largest integrated healthcare network in the nation, Veterans over the past 25 years have had better cancer outcomes than the general population does using private healthcare.

Network

The needs of the Veteran inform programmatic cancer care decisions at every turn.

For example, smoking cessation cues and questions are integrated into primary care reminders, helping equip frontline providers with the critical education and support necessary to engage and inform Veterans.

Furthermore, VA's use of precision oncology approaches ensures every Veteran has a tailored treatment approach, while programs like VA National TelOncology (NTO) brings VA's best-in-class cancer care to where Veterans live—even those in rural locations. In CY2022, NTO provided care to 3,550 rural Veterans.

Informing Care Across the

9 Oncology Clinical Pathways

were updated or developed in CY2022.

48% Of Veterans

cared for through NTO in CY2022 were rural.

MISSION ACT

... if we think that a Veteran needs a referral to specialty care, for example, in our clinics, and we see that the Veteran qualifies for the MISSION Act, we offer a Veteran that option. Many times, the Veteran choose to stay within the system, because we have over 90% trust score in our care.

Shareef Elnahal, M.D. MBA, Under secretary for Health, United States Department of Veterans Affair

Minutes

As a result of the MISSION Act, Veterans can receive cancer care within the community if a Veteran's local VA facility is unable to provide such care or if a Veteran lives a distance from the VA facility – typically when the average drive time exceeds 60 minutes.

89.2% Trust in VA Healthcare

according to outpatient survey responses.

BGSoE

Through a partnership with VA's Office of Community Care, the Breast and Gynecologic Oncology System of Excellence (BGSoE) provides centralized comprehensive care coordination to Veterans undergoing cancer treatment both inside and outside of VA.

Meaningful Impact

The VA Maintaining Internal Systems and Strengthening Integrated Outside Networks (MISSON) Act of 2018 (VA MISSION Act) strengthens the nationwide VA Health Care System by empowering Veterans with more health care options.

Through the VA MISSION Act, Veterans may be eligible for care through a provider in their local community depending on their health care needs and specific circumstances. Even if a Veteran is eligible for community care, they generally still have the option to receive care from a VA medical facility.



Enable, Offer & Provide

In addition to new eligibility criteria, there are a variety of improvements under the VA MISSION Act that make community care work better for Veterans and strengthen the Cancer Moonshot's effort to provide timely, quality cancer care.

While VA's quality and patient safety within the direct care system typically exceeds that of the community, the MISSION Act enables VA's National Oncology Program to offer care in the community when it is truly needed. Veterans benefit most when providers have more options and can offer specialty care.

VA MISSION Act Improvements

- Consolidated community care programs
- Better customer service
- New urgent care benefits
- New Community Care Network

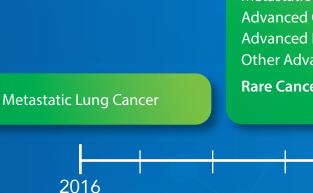
Cancer Types Tested

Continued Expansion of Molecular Testing



NATIONAL PRECISION **ONCOLOGY PROGRAM**

IMPROVING THE VETERAN'S QUALITY OF LIFE



IMPROVING THE VETERAN'S QUALITY OF LIFE

Cancer affects everyone differently, and VA clinicians use precision oncology to more accurately predict which cancer treatment strategies will work best for each Veteran. This personalized approach, accomplished through VA's National Precision Oncology Program (NPOP), can improve patient results and quality of life. This innovative program makes molecular testing (somatic and germline) available to VA cancer

patients for whom testing may a course of treatment. NPOP also houses VA's molecular tumor board, a second opinion consulting service with educational programming and resources to support VA providers in the adoption of precision medicine in their practice. Through NPOP, VA oncologists can use these services to interpret complex results.

>12,000

Sequencing tests are performed annually.

>34,000

Veterans with advanced cancer have had their care guided by advanced molecular testing

>50,000

Molecular tests have been ordered.

NPOP continues to lead the way in delivering groundbreaking treatment options to Veterans based on results generated from the vast precision oncology menu. NPOP now works with six vendors, offers seven different testing technologies, and has completed more than 12,000 next generation sequencing tests this year. These testing options will continue to expand through additional pilot programs set to launch in 2023.

Metastatic Lung Cancer Metastatic Prostate Cancer Advanced Cholangiocarcinoma Advanced Bladder Cancer Other Advanced Solid Tumors

Rare Cancer: Sarcoma

All Lung Cancers Metastatic Prostate Cancer All Pancreatic Cancers Advanced Cholangiocarcinoma Advanced Bladder Cancer Other Advanced Solid Tumors

Rare Cancer: Sarcoma Select Hematology Malignancies All cancers with <40,000 diagnoses/year

2019

Delivering groundbreaking treatment

VA Medical Centers

2022

Now offering molecular testing to Veterans.

~1,500

Provider to provider interfacility consults conducted.



Learn More

PHARMACOGENOMICS

Genetic Testing for Medication Optimization

Pharmacogenomics (PGx) testing looks to understand how a Veteran's genetic attributes affect their response to therapeutic drugs. VA is investing in making high quality, evidence based, PGx testing available to all Veterans who may benefit from it.

The National Pharmacogenomics Program empowers VA to deliver more accurate prescriptions and to bring precision medicine to Veterans throughout the VA health care system. This is yet another way VA provides the best-in-class care.

Growing Use of Pharmacogenomics

Right now, for every ten Veterans who have undergone pharmacogenomics testing and

are prescribed certain common medications, one is identified as having an actionable druggene interaction. Paired with evidenced-based recommendations pharmacogenomic testing enables the provider to reevaluate medication options and provide the from the field, up from nine Veteran with one that will be better suited to their genetic profile.

In CY2022, the PGx program has seen significant growth in its utilization:

>14,000

orders were placed for PGx, up from 5,900 in CY2021, an increase of 137%.

VAMC made testing available

Facilities using PGx testing increased 34%, from 23 in CY2021 to 31 in CY2022.

24 Drug-Gene alerts were deployed

in CY2021. The program is positioned to release another 16 alerts in CY2023.

The Roadmap to Personalized Medicine

As the use of PGx testing continues to expand across the nationwide network of VA providers, Veterans are expected to experience fewer adverse reactions to medications and greater positive medication effects. This improvement in medication efficacy and toxicity will ultimately increase Veterans' chances of living healthier lives.

CLOSE TO ME **INFUSION** PROGRAM

capabilities to be suitable alternative care sites for Veterans.

To resolve these challenges, the Close to Me Infusion Care Delivery service was launched in mid-2022.

The service seeks to reduce travel time for Veterans, improve VA care continuity, and increase access points to Veteran-centric care by providing anti-cancer therapy services at three new types of locations: CBOCs, mobile infusion units, and patient homes.

Future Expansion of Close to Me

The Close to Me pilot launched at Pittsburgh VA medical center in June 2022, based on prior work done at the Minneapolis VA medical center.

The service is gearing up guickly to

CLINICAL CANCER **GENETIC** SERVICES

Innovating for Effective Treatments

In CY2023, VA launched the **Clinical Cancer Genetics Service** (CCGS) program to provide accessible, world-class cancer genetic counseling to Veterans,

regardless of where they reside.

This innovative program makes hereditary and germline genetic testing available to Veterans predisposed to cancer based on their genetic profiles. CCGS uses genetic testing to improve rates of detection, diagnosis, and treatment of Veterans with cancer by identifying effective treatments (e.g., immunooncology, chemotherapy, etc.) customized to the Veteran's unique genetic background.

Supporting Veterans with Education

CCGS also informs providers

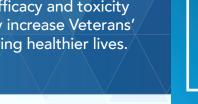
and patients about personalized cancer treatment decisions and surveillance options.

Moreover, CCGS assists patients in navigating the emotional and logistical implications of the genetic information presented to them. This service supports Veterans through their complex and often difficult cancer diagnoses, while also elevating and expanding the level of care delivered for more typical diagnoses.

Because of VA's infrastructure and this program, providers focus on the individual Veteran.

Increasing Access to Care Delivery

Infusion treatments offered solely at VA medical centers are often inaccessible for some Veterans. Travel, distance, parking, time, and caregiver support often prevent Veterans from attending treatment appointments and adhering to prescribed anti-cancer therapy regimens. Furthermore, community-based outpatient clinics (CBOCs) and health care centers often have limited infusion clinic space or sterile compounding





expand. Twelve VA facilities were selected to implement the CBOC care models and home care models as part of Close to Me in FY24.

Salt Lake City, Houston, Minneapolis, Northern Indiana, Cleveland, Ann Arbor, Erie, and Puerto Rico were the eight facilities selected to implement the CBOC care model.

38,549

Miles of travel saved in CY2022 for Veterans in the Pittsburgh and Minneapolis areas.



Enrollments in interventional, translational, and observational clinical trials within POPCaP.

PRECISION **ONCOLOGY PROGRAM** FOR CANCER OF THE PROSTATE

State-of-the-Art Care for Veterans with Prostate Cancer

VA's healthcare system delivers world-class cancer research, care, and cures to Veterans daily. Prostate cancer research and treatment is top of mind. VA has a network of medical centers and a range of clinical trials providing state-of-the-art precision oncology care for Veterans with prostate cancer through a partnership with the Prostate Cancer Foundation (PCF). Collaborative efforts coordinated through the Precision Oncology Program for Cancer

of the Prostate (POPCaP), a strategic partnership between VA and PCF, provide tumor and germline sequencing for all Veterans with metastatic prostate cancer, regardless of their location throughout the country. The network also provides Veterans with cutting-edge therapies through VA-sponsored and industry-sponsored clinical trials coordinated through the Prostate cancer Analysis for Therapy Choice (PATCH) program.

Key Accomplishments

In August 2022, POPCaP opened the first remote clinical trial site. This novel approach to clinical research opened trials to Veterans at facilities without research infrastructure, vastly expanding access to cutting-edge therapies. Additionally, POPCaP rolled out the VA-Multiomic Platform for Prostate Cancer, a database that harnesses the potential of prostate cancer data and biospecimens within the enterprise-wide system. This database will be used to inform prostate cancer research.

Looking Forward

Over the next year, clinical trial offerings and enrollments are expected to increase significantly. POPCaP and the genitourinary sites use these clinical trials to bring the most cutting-edge therapies to Veterans across the country (including to those in rural historically underserved communities), making VA the patients' choice for prostate oncology care.

clinical trial site.



Academic publications in CY2022.

In August 2022, POPCaP opened the first remote

63,000

In CY2022, POPCaP served more than 63,000 Veterans, which is 35% of all Veterans diagnosed with prostate cancer.



Cancer Cabinet Community Conversation on prostate cancer.

Thank You,

VA's oncology researchers and clinicians share a singular goal: provide worldclass cancer care that delivers positive outcomes for our Veterans. As part of a learning healthcare system, the VA's ongoing investment in precision oncology research directly translates into the continuous improvement of cancer care, from access to clinical trials and novel treatments that offer hope to those with complex or rare cancer diagnoses, to better informed strategies that reduce cancer morbidity and mortality.

Our researchers work in concert with clinicians and subject matter experts across the enterprise on efforts like the molecular analysis of tumor samples from Veterans with toxic exposures, and longitudinal studies that follow 50,000 Veterans and the results of their different colorectal cancer screening options. Our efforts are also making long strides in eliminating the disparities in disproportionately affected populations and informing clinical management to reduce inequities in access to care.

With VA physicians and advanced practice providers deeply invested in both research and patient care, VA is conscientiously creating a thinking health care model that anticipates the needs of Veterans and matches the appropriate treatment to the right patient at the right time.



Rachel B. Ramoni, D.M.D., Sc.D., Chief Research and Development Officer, Department of Veterans Affairs

For more information about VA's cancer care and Cancer moonshot efforts, please visit cancer.va.gov

For media related questions, please contact:

Rachael Burden

Media Relations Veterans Health Administration rachael.burden@va.gov







U.S. Department of Veterans Affairs
Veterans Health Administration

