NCCN Trends™ is an analytics tool from the National Comprehensive Cancer Network® (NCCN®) that surveys how clinicians across the U.S. and around the globe are delivering cancer care. This summary includes the results of the January 2013 NCCN Trends™ Survey, which focused on Non-Small Cell Lung Cancer. This survey was sent to U.S. and International users of NCCN.org.

DEMOGRAPHICS†

Distribution of Respondent Types (n = 1,055)

- Physician/Surgeon/Oncologist: 73%
- Nurse/Oncology Nurse or Clinical Nurse Specialist: 14%
- Pharmacist: 4%
- Physician Assistant or Nurse Practitioner: 4%
- Other Clinician: 5%
Q1. Do you treat patients with non-small cell lung cancer (NSCLC) and treat them according to a pathway program which is driven by either a practice, a hospital, an accountable care organization, or a payer? (n = 1,055)

- Yes, I treat patients with NSCLC according to one of the above pathways: 65%
- No: 35%
Q2. According to which types of pathways do you currently practice? (select all that apply) (n = 534)

- Practice: 48%
- Hospital: 67%
- Accountable care organization: 13%
- Payer: 8%
Q2. According to which types of pathways do you currently practice? (select all that apply)

By Geography †

†Note: Percentages may not total 100 because of rounding.
Q2. According to which types of pathways do you currently practice? (select all that apply)

By Practice Size †

<table>
<thead>
<tr>
<th>Practice (n=253)</th>
<th>1 to 3</th>
<th>4 to 9</th>
<th>10 or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>20%</td>
<td>26%</td>
<td>54%</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Hospital (n=354)</th>
<th>1 to 3</th>
<th>4 to 9</th>
<th>10 or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>22%</td>
<td>22%</td>
<td>56%</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Accountable care organization (n=66)</th>
<th>1 to 3</th>
<th>4 to 9</th>
<th>10 or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>17%</td>
<td>27%</td>
<td>56%</td>
<td></td>
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<table>
<thead>
<tr>
<th>Payer (n=40)</th>
<th>1 to 3</th>
<th>4 to 9</th>
<th>10 or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>18%</td>
<td>30%</td>
<td>53%</td>
<td></td>
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</tbody>
</table>

†Note: Percentages may not total 100 because of rounding.
Q2. According to which types of pathways do you currently practice? (select all that apply)

By Practice Setting

- Academic Setting
- Community Setting

Practice (n=247)
- 43% Academic Setting
- 57% Community Setting

Hospital (n=351)
- 63% Academic Setting
- 37% Community Setting

Accountable care organization (n=64)
- 48% Academic Setting
- 52% Community Setting

Payer (n=39)
- 44% Academic Setting
- 56% Community Setting
Q2. According to which types of pathways do you currently practice? (select all that apply)

By Specialty †

- Medical Oncology
- Radiation Oncology
- Surgical Oncology
- Internal Medicine
- General Surgery
- Other

Percentage of Respondents

Practice (n=253): 60% Medical Oncology, 14% Radiation Oncology, 6% Surgical Oncology, 6% Internal Medicine, 2% General Surgery, 12% Other

Hospital (n=354): 45% Medical Oncology, 23% Radiation Oncology, 9% Surgical Oncology, 8% Internal Medicine, 2% General Surgery, 14% Other

Accountable care organization (n=86): 55% Medical Oncology, 21% Radiation Oncology, 11% Surgical Oncology, 5% Internal Medicine, 9% General Surgery, 9% Other

Payer (n=40): 73% Medical Oncology, 13% Radiation Oncology, 10% Surgical Oncology, 3% Internal Medicine, 3% General Surgery, 3% Other

†Note: Percentages may not total 100 because of rounding.
Q3. Which statement best reflects your use of guidelines or pathways when treating 1st line, stage IV, non-squamous NSCLC patients? (select all that apply) (n = 519)

**Limited guideline or pathway is defined as 3 options or less for a specific cancer. (e.g.: Stage IV, non-squamous NSCLC)**

- I follow a limited guideline or pathway 80% or more of the time; because it is our practice approved pathway. 49%
- I follow a limited guideline or pathway 80% or more of the time; because it is an approved guideline for the hospital I work within. 37%
- I follow a limited guideline or pathway 80% or more of the time; because it is an approved guideline for the accountable care organization (ACO) I work within. 12%
- I follow a limited guideline or pathway 80% or more of the time because the payer (e.g.: government, insurance company) will enhance my reimbursement if I meet their threshold. 6%
- I follow a limited guideline or pathway 80% or more of the time because the payer (e.g.: government, insurance company) will decrease my reimbursement if I don’t meet their threshold. 6%
- I am not expected by the organization I work within, to comply with any set guidelines or pathways when treating non-squamous NSCLC patients. 14%
Q3. Which statement best reflects your use of guidelines or pathways when treating 1st line, stage IV, non-squamous NSCLC patients? (select all that apply)

Limited guideline or pathway is defined as 3 options or less for a specific cancer. (e.g.: Stage IV, non-squamous NSCLC)

By Geography †

I follow a limited guideline or pathway 80% or more of the time; because it is our practice approved pathway. (n=254)

I follow a limited guideline or pathway 80% or more of the time; because it is an approved guideline for the hospital I work within. (n=192)

I follow a limited guideline or pathway 80% or more of the time; because it is an approved guideline for the accountable care organization (ACO) I work within. (n=60)

I follow a limited guideline or pathway 80% or more of the time because the payer (e.g.: government, insurance company) will enhance my reimbursement if I meet their threshold. (n=33)

I follow a limited guideline or pathway 80% or more of the time because the payer (e.g.: government, insurance company) will decrease my reimbursement if I don’t meet their threshold. (n=29)

I am not expected by the organization I work within to comply with any set guidelines or pathways when treating nonsquamous NSCLC patients. (n=71)

†Note: Percentages may not total 100 because of rounding.
Q3. Which statement best reflects your use of guidelines or pathways when treating 1st line, stage IV, non-squamous NSCLC patients? (select all that apply)

Limited guideline or pathway is defined as 3 options or less for a specific cancer. (e.g.: Stage IV, non-squamous NSCLC)

By Practice Size †

I follow a limited guideline or pathway 80% or more of the time; because it is our practice approved pathway. (n=254)
- 1 to 3: 23%
- 4 to 9: 25%
- 10 or more: 52%

I follow a limited guideline or pathway 80% or more of the time; because it is an approved guideline for the hospital I work within. (n=192)
- 1 to 3: 20%
- 4 to 9: 23%
- 10 or more: 56%

I follow a limited guideline or pathway 80% or more of the time; because it is an approved guideline for the accountable care organization (ACO) I work within. (n=60)
- 1 to 3: 25%
- 4 to 9: 18%
- 10 or more: 57%

I follow a limited guideline or pathway 80% or more of the time because the payer (e.g.: government, insurance company) will enhance my reimbursement if I meet their threshold. (n=33)
- 1 to 3: 12%
- 4 to 9: 48%
- 10 or more: 39%

I follow a limited guideline or pathway 80% or more of the time because the payer (e.g.: government, insurance company) will decrease my reimbursement if I don't meet their threshold. (n=29)
- 1 to 3: 17%
- 4 to 9: 24%
- 10 or more: 59%

I am not expected by the organization I work within, to comply with any set guidelines or pathways when treating nonsquamous NSCLC patients. (n=71)
- 1 to 3: 28%
- 4 to 9: 15%
- 10 or more: 56%

†Note: Percentages may not total 100 because of rounding.
Q3. Which statement best reflects your use of guidelines or pathways when treating 1st line, stage IV, non-squamous NSCLC patients? (select all that apply)

Limited guideline or pathway is defined as 3 options or less for a specific cancer. (e.g.: Stage IV, non-squamous NSCLC)

By Practice Setting

- I follow a limited guideline or pathway 80% or more of the time, because it is our practice approved pathway. (n=246)
  - Academic Setting: 47%
  - Community Setting: 53%

- I follow a limited guideline or pathway 80% or more of the time, because it is an approved guideline for the hospital I work within. (n=190)
  - Academic Setting: 61%
  - Community Setting: 39%

- I follow a limited guideline or pathway 80% or more of the time, because it is an approved guideline for the accountable care organization (ACO) I work within. (n=58)
  - Academic Setting: 53%
  - Community Setting: 47%

- I follow a limited guideline or pathway 80% or more of the time because the payer (e.g.: government, insurance company) enhance my reimbursement if I meet their threshold. (n=33)
  - Academic Setting: 45%
  - Community Setting: 55%

- I follow a limited guideline or pathway 80% or more of the time because the payer (e.g.: government, insurance company) decrease my reimbursement if I don't meet their threshold. (n=28)
  - Academic Setting: 57%
  - Community Setting: 43%

- I am not expected by the organization I work within, to comply with any set guidelines or pathways when treating nonsquamous NSCLC patients. (n=71)
  - Academic Setting: 51%
  - Community Setting: 49%
Q3. Which statement best reflects your use of guidelines or pathways when treating 1st line, stage IV, non-squamous NSCLC patients? (select all that apply)

Limited guideline or pathway is defined as 3 options or less for a specific cancer. (e.g.: Stage IV, non-squamous NSCLC)

By Specialty †

- Medical Oncology
- Radiation Oncology
- Surgical Oncology
- Internal Medicine
- General Surgery
- Other

†Note: Percentages may not total 100 because of rounding.
NCCN Trends™ is an analytics tool from the National Comprehensive Cancer Network® (NCCN®) that surveys how clinicians across the U.S. and around the globe are delivering cancer care. NCCN Trends™ surveys are designed to reach targeted populations that can include several thousand clinicians as a potential sample size. NCCN can also provide analytics on existing NCCN Trends™ and clinician demographic data sets, allowing for greater insight into oncology practice patterns.

To commission an NCCN Trends™ survey, to discuss analytic and data services, or to request information on other NCCN programs and resources, please contact:

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National Comprehensive Cancer Network® (NCCN®)

The National Comprehensive Cancer Network® (NCCN®), a not-for-profit alliance of 21 of the world’s leading cancer centers, is dedicated to improving the quality and effectiveness of care provided to patients with cancer. Through the leadership and expertise of clinical professionals at NCCN Member Institutions, NCCN develops resources that present valuable information to the numerous stakeholders in the health care delivery system. As the arbiter of high-quality cancer care, NCCN promotes the importance of continuous quality improvement and recognizes the significance of creating clinical practice guidelines appropriate for use by patients, clinicians, and other health care decision-makers. The primary goal of all NCCN initiatives is to improve the quality, effectiveness, and efficiency of oncology practice so patients can live better lives.