

#NNRT2024

AMERICAN CANCER SOCIETY  
NATIONAL NAVIGATION ROUNDTABLE

# 2024 ANNUAL MEETING

SEPTEMBER 18-20  
OMNI HOTEL  
WASHINGTON, D.C.



## Introduction

The American Cancer Society National Navigation Roundtable (ACS NNRT) held its **2024 Annual Meeting** from September 18-20, 2024, at the Omni Hotel in Washington, DC. National experts, advocates, and thought leaders convened around the ACS NNRT’s five-year AIM (2021-2026): creating a sustainable oncology patient navigation model to achieve health equity across the cancer continuum.

The ACS NNRT was established in 2017 with the mission of catalyzing high-quality cancer care for all through evidence-based patient navigation. The ACS NNRT is a coalition of over 150 member organizations with members from diverse sectors. With an explicit focus on health equity, the ACS NNRT convened its members for the first in-person meeting in five years to:

- Promote the Patient Navigation Sustainability Assessment Tool,
- Increase knowledge and utilization of current revenue streams, contributing to the fiscal sustainability of patient navigation,
- Invest in the development of the patient navigation workforce,
- Identify gaps in the field of patient navigation and develop strategies to address them,
- Increase collaboration through networking, and
- Advance health equity.



On Wednesday, September 18, the ACS NNRT hosted a new member orientation and task group breakout sessions.

On Thursday, September 19, the morning sessions consisted of 3 level-setting presentations and a keynote presentation from Anabella Aspiras, MPA, RN, BSN, Assistant Director for Engagement on the White House Cancer Moonshot. In the afternoon, participants engaged in concurrent sessions on the topics of Preparing for and Utilization of PIN Codes and Implementation of Organizational Policy; Leveraging Technology to Benefit Patient Navigation; Building a Business Case for the Investment and Sustainability of Patient Navigation; and Sustaining and Evolving Your Patient Navigation Workforce: Getting Back to the Basics.

On Friday, September 20, two armchair conversations were held on the Impact of Patient Navigation and Bridging Local Initiatives to State and Federal Change. The meeting closed with brief updates from the ACS NNRT Task Groups: Public Awareness and Communication, Policy, Workforce Development, and Evidence-Based Interventions.

This document provides an overview of the three-day meeting, including the keynote presentation and links to presentation slides.



## The Importance of Incorporating a Sustainability Model in the Development of Patient Navigation Programs

**Andi Dwyer, BS, and Linda Fleisher, PhD, MPH**, delivered a presentation titled *The Importance of Incorporating a Sustainable Model in the Development of Patient Navigation Programs*, in which they emphasized the need for sustainable and equitable patient navigation systems. The presentation began with Ms. Dwyer acknowledging the collaborative efforts and partnerships that have been instrumental in developing patient navigation programs. She highlighted the importance of thinking holistically about the role of patient navigation in achieving health equity, stressing the need for fair compensation for navigators and integrating navigation into broader healthcare systems.

Dr. Linda Fleisher expanded on the mission and vision of the ACS NNRT, which focuses on providing high-quality cancer care for all patients through evidence-based patient navigation. Dr. Fleisher underscored the need for equitable care and explained that the traditional grant-funded model of patient navigation is not a sustainable long-term solution. She shared that the ultimate goal is to integrate navigation into routine oncology care and healthcare teams.

The speakers introduced a sustainability framework, which offers a structured approach to ensuring the long-term viability of patient navigation programs. The Patient Navigation Sustainability Assessment Tool (PNSAT), an adaptation of two tools from Washington University that focus on program and clinical sustainability, includes domains such as funding stability, organizational capacity, workflow integration, and community engagement, all of which are critical for maintaining successful patient navigation programs. Ms. Dwyer shared insights from Colorado's experience in implementing the framework, noting that PNSAT has been instrumental in helping clinics assess their sustainability efforts and plan for the future.

Continued collaboration and strategic thinking are vital to building sustainable patient navigation programs. The framework and tools introduced during the presentation provide a practical way for organizations to evaluate and strengthen their patient navigation efforts, ensuring long-term success and improved cancer care outcomes for patients.

## Keynote: The Importance of Patient Navigation

**Anabella Aspiras, MPA, RN, BSN**, Assistant Director for Engagement on the Biden Cancer Moonshot, presented the meeting’s **Keynote: *The Importance of Patient Navigation***. She highlighted the importance of patient navigation in cancer care and the Biden-Harris administration’s efforts to expand access to these services. She began by stating the goals of the reignited [Cancer Moonshot](#), which are to reduce cancer deaths



by 50% over the next 25 years and improve the experience of cancer patients and caregivers. The Cancer Moonshot is a part of President Biden’s Unity Agenda, which seeks to address major societal issues, including ending cancer as we know it.

Ms. Aspiras shared that the Cancer Moonshot operates through a “whole-of-government” approach, through the first-ever [Cancer Cabinet](#) working together on five priority actions: 1) closing the cancer screening gap, 2) addressing environmental exposures, 3) reducing preventable cancers, 4) driving new innovation for patients and communities, and 5) supporting patients and caregivers, including through navigation services. The focus of her presentation was on navigation and its role in addressing social determinants of health, such as transportation, housing, and food insecurity, all of which impact cancer care outcomes.

One of the key accomplishments of the Cancer Moonshot is the introduction of [six new insurance codes](#) in 2024, allowing healthcare providers to bill for patient navigation services. This is essential for making navigation more accessible, especially in lower-resourced settings that previously couldn’t afford to hire navigators. Ms. Aspiras discussed two types of codes: principal illness navigation ([PIN](#)) codes, which focus on care coordination and health education, and principal care management ([PCM](#)) codes, which focus on clinical navigation and are generally used for licensed staff such as nurses and social workers.

Ms. Aspiras shared a success story of a healthcare system that implemented the PIN codes and saw a significant reduction in emergency room visits for high-risk patients, highlighting the potential for navigation to improve patient outcomes, reduce healthcare costs, and prevent provider burnout. She also shared her personal connection to navigation through her mother’s cancer experience and her background as a nurse, underscoring how navigation could have improved both the patient and caregiver experience in her family’s situation.

Ms. Aspiras concluded by restating the Biden Cancer Moonshot’s commitment to expanding navigation services and called on healthcare providers to continue implementing these critical services to ensure all patients can benefit from them. She expressed gratitude for the work of healthcare professionals and acknowledged their role in moving closer to the Cancer Moonshot’s goals of improving cancer care and reducing disparities nationwide.

## Armchair Conversations: From Practice to Policy – Bridging Local Initiatives to State and Federal Change



During the ***Armchair Conversations: From Practice to Policy – Bridging Local Initiatives to State and Federal Change***, **Carter Steger, BA** (ACS CAN), facilitated discussions focused on connecting local initiatives to broader policy changes at the state and federal levels. The speakers explored strategies for establishing patient navigation as a standard of care, emphasizing the role of patient and provider advocacy in driving healthcare reform.

**Julie Nickson, JD**, provided an overview of the federal landscape, including updates on two bills currently pending before Congress: 1) The Patient Navigation Assistance Act (H.R. 9446), which would require state Medicaid programs to provide patient navigation services for enrollees, and 2) The Community Health Worker Access Act (S. 3892), which would improve reimbursement for Community Health Workers (CHWs) and Community Health Representatives (CHRs) in Medicare and Medicaid while expanding access to community-based services for enrollees. She emphasized the importance of educating members of Congress moving forward and working to secure bipartisan support for reimbursement policies.

**Rebecca Kirch, JD**, highlighted the critical role of needs navigation in connecting clinical care with community resources to advance health equity. She discussed policy goals focused on integrating navigation into value-based care and addressed the confusion surrounding navigation terminology. Ms. Kirch emphasized the need for grassroots advocacy, community partnerships, and strategic investments in media outreach to support navigation policies, as well as strong coalition leadership to guide these efforts.

**Andi Dwyer, BS**, shared insights from Colorado's experience with Medicaid legislation integrating CHW services into reimbursement policies. She highlighted how the state's training programs for CHWs and Patient Navigators align with Medicaid and Medicare standards, equipping the workforce to address social determinants of health affecting cancer care. Ms. Dwyer emphasized that this approach supports sustainable integration of navigation services, ensuring a well-prepared workforce capable of delivering effective care across various settings.

**Ray Liu, MD**, offered observations from California's efforts to implement similar policies, providing insights into the diverse challenges and opportunities faced across different states. He noted the importance of adapting strategies to local contexts while building on successful models like those from Colorado. Dr. Liu also highlighted the need for coalition-building and bipartisan support to advance navigation policies effectively, addressing potential barriers and leveraging state-specific strengths to achieve policy goals.

The session included practical recommendations for state-level legislative strategies, encouraging participants to build coalitions, educate policymakers, and expand Medicaid reimbursement for navigation services. By embedding patient navigation as a core healthcare component, the speakers aimed to improve health outcomes and advance equity across the cancer continuum. The discussion underscored the potential of navigation models to drive systemic change and called for collaboration to make navigation accessible and sustainable.

## Resources, Presentations, and Slides

Resources: [2024 ACS NNRT Annual Meeting - National Navigation Roundtable](#)

Wednesday, September 18, 2024

<b><u><a href="#">New Member Orientation</a></u></b>
Michelle Chappell, MS – ACS NNRT Donna Moore Wilson, MSN, RN, CBCN – UVA Health Breast Care Center
<b><u><a href="#">Task Group Breakouts</a></u></b>
<b><i>Workforce Development</i></b> <b><i>Policy</i></b> <b><i>Public Awareness and Communication</i></b> <b><i>Evidence-Based Promising Practices</i></b>

Thursday, September 19, 2024

<b>Welcome from ACS NNRT and ACS</b>
<p>Andi Dwyer, BS – University of Colorado Cancer Center, Chair – ACS NNRT            Shanthi Sivendran, MD, MSCR, MBA – American Cancer Society, ACS Chair – ACS NNRT</p> <p><b>Welcome</b></p> <p>Angelo Moore, PhD, RN, NE-BC, FAAN – North Carolina Agricultural &amp; Technical State University</p> <p><b>Importance of Health Equity</b></p>
<b>The Importance of Incorporating a Sustainability Model in the Development of Patient Navigation Programs</b>
<p>Andi Dwyer, BS – University of Colorado Cancer Center            Linda Fleisher, PhD, MPH – Fox Chase Cancer Center, Vice Chair – ACS NNRT</p>
<b>Keynote: The Importance of Patient Navigation</b>
<p>Anabella Aspiras, MPA, RN, BSN – Assistant Director for Engagement on the White House Cancer Moonshot</p>
<b>The Current and Future Implications of the Oncology Navigation Professional Standards of Practice Domains</b>
<p><b>Facilitator:</b> Kristina Thomson, LCSW – ACS NNRT            Sally Werner, RN, BSN, MSHA – CSC – Cancer Support Community            Monica Dean, HON-OPN-CG – AONN – Academy of Oncology Navigation            Danelle Johnston, MSN, RN, HON ONN-CG, OCN – Genomic Life</p>
<b>Policy in Action: Preparing for and Utilization of the PIN Codes and Implementation of Organizational Policy Goals</b>
<p><b>Facilitator:</b> Tracy Battaglia, MD, MPH – Yale</p> <p><b>Policy in Action: Preparing for and Utilization of the PIN Codes &amp; Implementation of Organizational Policy</b></p> <p>Jeanne Silva, MSN, RN-BC – RWJ Barnabas</p> <p><b>Policy in Action: Preparing for and Utilization of the PIN Codes &amp; Implementation of Organizational Policy</b></p> <p>Danielle Brown, MBA, BSN, RN, OCN, CN-BN – FL Cancer Specialists &amp; Research Institute</p> <p><b>Policy in Action: Preparing for and Utilization of the PIN Codes &amp; Implementation of Organizational Policy</b></p> <p>Alan J. Balch, MD – Patient Advocate Foundation</p> <p><b>Preparing Community Based Organizations to Utilize PIN Codes and the Patient Advocate Foundation’s Response</b></p> <p>Tim Mullett, MD, MBA, FACS – University of Kentucky</p> <p><b>Commission on Cancer</b></p>



Friday, September 20, 2024

<b>Welcome</b>
<p>Donna Moore Wilson, MSN, RN, CBCN – UVA Health Breast Care Center Co-Chair, Planning Committee, ACS NNRT Annual Meeting Zarek Mena, OPN-CG – SHARE   Support for Women’s Cancers Co-Chair, Planning Committee, ACS NNRT Annual Meeting</p>
<b>Armchair Conversations: The Impact of Patient Navigation</b>
<p><b>Facilitator:</b> Jennifer Bires, LCSW, OSW-C, CST – Inova Schar Cancer Institute Cheryl Perry, Lived Experience Expert Eva Ruiz Olivares, BSN, RN – Inova Molly Harden, MSW – Inova Peterson Life with Cancer</p>
<b>Armchair Conversations: From Practice to Policy – Bridging Local Initiatives to State and Federal Change</b>
<p><b>Facilitator:</b> Carter Steger, BA – ACS CAN Julie Nickson – ACS CAN <b>The Federal Landscape</b> Rebecca Kirch, JD – National Patient Advocate Foundation <b>We Believe the Healthcare System Should Work for ALL OF US</b> Andi Dwyer, BS – University of Colorado Cancer Center <b>The Colorado Experience</b> Ray Liu, MD – Kaiser Permanente Northern California <b>The Experience in California: Thoughtful Observations</b></p>
<b><u>The Work of ACS NNRT</u></b>
<p>Julie McMahon, MPH – Susan G. Komen Tracie Lewis, MS – University of South Carolina <b>Public Awareness and Communication</b> Elizabeth Franklin, PhD – Oncology Sanofi Gladys Arias, MPA – ACS CAN Katie Garfield, JD – Harvard Law School <b>Policy</b> Arti Patel Varanasi, PhD, MPH, CHP – Advancing Synergy Linda Burhansstipanov, MSPH, DrPH - Native American Cancer Initiatives, Inc. <b>Workforce Development</b> Elizabeth Calhoun, PhD, MEd – University of Illinois Chicago Electra D. Paskett, PhD – The Ohio State University <b>Evidence-Based Promising Practices</b></p>

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