



North Carolina  
Division

May 22, 2023

Llogan R. Walters  
Assistant Attorney General  
North Carolina Department of Justice  
P.O. Box 629  
Raleigh, NC 27602-0629

Dear Assistant Attorney General Walters:

We are pleased to respond to your May 11, 2023, letter regarding oncology services at the Mission Health Cancer Center (“Cancer Center”). Mission Health System (“Mission”) remains committed to providing quality oncology services and treatment to cancer patients in Western North Carolina. At the outset, please know that there are no plans to reduce services at the Cancer Center nor to close the Mission Medical Oncology practice.

As detailed below, Mission has invested heavily in the Cancer Center, its comprehensive cancer program, and the Mission Medical Oncology practice. At the Cancer Center, Mission has undertaken \$12.4 million in capital improvements in the past four years. Mission’s comprehensive cancer program has multiple cancer care and treatment options including the largest surgical oncology robotics program in the state, along with extensive radiation oncology and imaging capabilities, such as mammography, PET/CT, and MRI, along with a wide array of personalized care services at the Hope Women’s Cancer Center. Mission also continues to invest heavily in the Mission Medical Oncology practice, devoting significant resources to recruiting oncologists to the practice and seeking to retain skilled advanced practice practitioners.

### **The Cancer Center**

We are surprised by the concerns raised in your letter about the condition of the Cancer Center. The Cancer Center is a safe and modern building and is in excellent condition. As with any medical facility in constant use, we undertake regular upgrades and repairs at the Cancer Center to address ordinary wear and tear. In just four years, Mission has invested \$12.4 million in capital improvements to the Cancer Center, including, but not limited to, a \$3.7 million renovation of the Mission Cancer Specialists space, replacing two linear accelerators at a cost of nearly \$6 million, replacing waiting room and common space flooring, and an upcoming \$2 million upgrade to the compounding pharmacy.

Mission is also investing in capital improvements that patients will see and feel every day. Cancer Center patients will soon benefit from 39 new, top-of-the-line chemotherapy infusion chairs (at a total cost of approximately \$140,000). The new infusion chairs will improve the patient experience when they are installed this summer.

Although we are not aware of the facility-related complaints raised in your letter, we are happy to address any specifics you can provide. We also welcome you to visit the Cancer Center so that we may share with you the facility where we are proud to welcome patients and their families. If you are interested, please let us know and we will arrange a tour for you.

**Oncology Services at Mission**

Mission remains deeply committed to caring for patients throughout Western North Carolina through our comprehensive cancer program. Mission offers a robust set of oncology services across a range of specialties (breast, colorectal, hepatobiliary, gynecological, infusion, interventional, medical, orthopedic sarcoma, pediatric, plastics, radiation, surgical, urological and more). Mission also deploys nurse navigators, pathologists, radiologists, and reconstructive physicians to offer comprehensive and specialized care from diagnosis through survivorship. While we continue to recruit for and welcome new physicians and care providers to our team, we also work very closely with other programs in the area, such as Messino Cancer Center and GenesisCare Surgery, whose physicians continue to operate every day at Mission Hospital.

Indeed, MHS and the Cancer Center provide some of the most robust products and cancer treatment services in all of HCA’s nationwide network of hospitals, including:

- Surgical oncology robotics programs to treat adrenal, biliary/gallbladder, gynecology, liver, pancreatic, prostate, renal, small bowel, stomach, thoracic, and colorectal cancers
- The only CyberKnife<sup>1</sup> in the region
- The largest radiation oncology program in HCA with two linear accelerator machines (nearly 1,000 patients with over 13,000 fractions per year)
- The largest mammogram screening programs within HCA (over 30,000 per year), providing 3D mammography for all 10 mammo units and includes a high-risk program
- Nurse Navigation<sup>2</sup> services specific to six different types of cancer, providing support and advocacy through each phase of prevention, diagnosis, treatment, and survivorship

Your letter alludes to incorrect reports that the Cancer Center has stopped scheduling new chemotherapy infusion services and that the adult oncology practice is being “discontinue[d].” There is no practice or plan to discontinue chemotherapy services or the adult oncology practice at the Cancer Center. The Cancer Center’s infusion department is fully staffed, and no patients are being denied access to care. Far from turning patients away, the Cancer Center had a steady volume of medical oncology services provided in each of 2020, 2021, and 2022. Medical oncology outpatient volumes are on pace to increase by more than fifteen percent in 2023, and inpatient volumes are consistent with the prior year. Chemotherapy volumes at the Cancer Center have also increased in recent years, as reflected in the chart below.

|  | 2020           | 2021           | 2022           | Total           |
|--|----------------|----------------|----------------|-----------------|
| Chemotherapy Services Provided to Patients | 5,282 patients | 5,481 patients | 5,789 patients | 16,552 patients |

In fact, many oncologists in the market who are not affiliated with Mission, such as the providers at Messino Cancer Center, are sending patients to the Cancer Center for outpatient chemotherapy

<sup>1</sup> See <https://cyberknife.com/cyberknife-how-it-works/>

<sup>2</sup> See <https://missionhealth.org/services-treatments/cancer-care/nurse-navigation-services/>

infusion services, particularly patients who are either uninsured or underinsured, a group that constitutes more than half of the outpatient volume sent by Messino Cancer Center physicians to the Cancer Center. The Cancer Center has provided and will continue to provide a critical safety net for cancer patients in the region.

### **Mission Medical Oncology Practice**

Last, your letter raises concerns about the number of oncologists employed by the Cancer Center-based Mission Medical Oncology practice and asserts that there are shortages of “certain other staff.”

Mission has invested considerable time and resources to hire highly qualified physicians who are the right fit for Mission and our patients. Mission has recruited oncologists continuously since the physician group now known as Messino Cancer Center announced that it would end its professional services agreement with Mission and align itself with the nation’s largest for-profit oncology network. Since that time, Mission has continuously posted job openings for oncologists. Three job openings are currently posted (two for general oncology and one for breast oncology). Those openings are posted on many popular job search websites used by practicing physicians, including Indeed, LinkedIn, Healthcare Job Finder, PracticeMatch, MDSearch.com, MDJobSite.com, and HCACareers.com. Mission also invested nearly \$3,000 per month to have the jobs posted on two paid sites. Mission offers competitive salary and benefits for its oncology positions, but we have found that many physicians are reticent to enter a practice that competes against Messino Cancer Center, a larger, more established group of oncologists in the market. Since 2020, the physicians in the Mission Medical Oncology practice have assessed 131 oncologists who applied for the open positions and progressed past the initial screening interview. Approximately forty of those candidates came to Asheville with their families for on-site interviews. Mission hired six of those physicians.

Unfortunately, five of the six oncologists hired since 2020 have recently left Mission Medical Oncology or are scheduled to leave soon to pursue other opportunities, including some who have decided to stop practicing medicine. Mission worked diligently to retain those oncologists, but ultimately does not and cannot control the physicians’ career decisions. Despite these challenges, Mission is not reducing oncology services or “combin[ing] its adult oncology unit with its pediatric care unit,” as suggested in your letter. As described above, many oncologists from other practices in the market, including the sixteen oncologists at Messino Cancer Center, remain on the Mission medical staff and continue to use their admitting privileges at Mission. In fact, Messino Cancer Center physicians have accounted for approximately half of all inpatient medical oncology admissions at Mission in 2023.

Although Mission faces headwinds in hiring and retaining oncologists for the Mission Medical Oncology practice, we remain committed to the practice, and we continue to employ a full support staff, including all advanced practice practitioners that the practice has utilized in recent years. Although your letter references shortages in “certain other staff,” please know that Mission has retained all staff associated with the Mission Medical Oncology practice despite physician departures. Outside of the current oncologist vacancies, the Cancer Center remains fully staffed and there are no plans for any reduction in force.

We hope this information addresses your concerns. Mission has and will continue to comply with all obligations in APA Section 7.13(a), including its obligation to provide oncology services at Mission Hospital. The Cancer Center is an outstanding facility that will remain open to citizens in the region, and we are proud of our work to support cancer patients and their families every day. We remain available to discuss these matters with you in the future and we would welcome you for a visit at your convenience.

Sincerely yours,



Greg Lowe  
President, North Carolina Division