Megatrends

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Each year, business pundits evaluate trends in our economy and make predictions defining the themes they believe will shape an industry. These “megatrends” define what an industry will look like in 20 to 30 years. In health care, pressures of limited health budgets (both private and public) coupled with increasing cost and demand will reshape the delivery of care. Momentum is increasingly driving the end of a cottage industry (small practices) and pushing providers into larger systems of care. Ultimately, many feel, health care systems will be accountable for care provided to a geographically defined population and paid for with a global budget tied to strictly defined quality targets. Such a system will require great sophistication in measurement and management, as it would be at financial risk to deliver the care and meet the targets.

Over the past 7 years, *Journal of Oncology Practice (JOP)* has presented work by Tom Barr and Elaine Towle describing business metrics of oncology practice. In this issue, readers will find their distillation and assessment of trends they have seen over these years, refreshed by analysis of data from 2011. Their information does not define megatrends; rather, it focuses on describing the recent past and using it to predict the near future. However, their data hint of larger shifts being present. Evident is a trend to extract efficiencies in care delivery in response to a squeeze in economic margins available to the practice. There are signals of practices moving to coalesce or join larger entities. Practices are finding ways to see more patients with the same resources. They point out that in the past year there has been some leveling—a steady state, if you will—but one wonders if this is simply a temporary calm before the storm.

Indeed, many anecdotes suggest we are in a greater tumult than outlined by these data, and readers should recognize potential shortcomings. As valuable as this information is (and it should be underlined that it is a singular resource), does it fully describe oncology practice? Not wholly. This is acknowledged by the authors. Their survey data are contributed by the willing and the capable: largely free-standing, community oncology practices. Practices that participate are surely the more successful, the survivors. They can afford professional management and have skills to analyze and critically evaluate their business. Many of these practices participate in the Oncology Circle, a consortium of practices that organize to share best practices and

benchmark themselves against one another. Such motivated and successful businesses are likely not representative of all practices, and indeed one suspects that there is a significant “tail” of practice data not represented in the numbers. Interestingly, another barrier to the collection of business data was identified by the authors. As some practices have been subsumed into large health systems, they no longer control much of their economic data and therefore can contribute only volume information. One has to wonder whether this is a nod to the purveyors of megatrend predictions.

Speaking of trends, readers of *JOP* have observed continuing growth in the amount of information we present. Similar to practice, we are finding efficient ways to present more content without busting our budget. In July, we published our largest issue yet, totaling 126 pages (with 70 pages as Web exclusive). A growing number of our readers are accessing *JOP* online, either through our Web site or via links through the electronic tables of contents. Apps for smartphones and iPads make our content even more accessible. Everything we publish is peer reviewed, is produced to a universal standard, and is available via open access 4 months after publication through our participation in PubMed Central. Though our print issues come out six times a year, we have new papers published ahead of print several times per month. Most medical publishing will be moving to an electronic format in the years to come, and we hope to lead to that future. In this issue, readers will find more than 100 pages of content addressing issues in the delivery of health care, the practice of research, business of practice, health policy, and quality of care. We seek your feedback on our content and on the mechanisms used to deliver it to you. Please contact us at jopeditorsdesk@asco.org.

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