



Comprehensive Cancer Care at Billings Clinic

Impact of the NCCCP Pilot

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Health Care, Education and Research

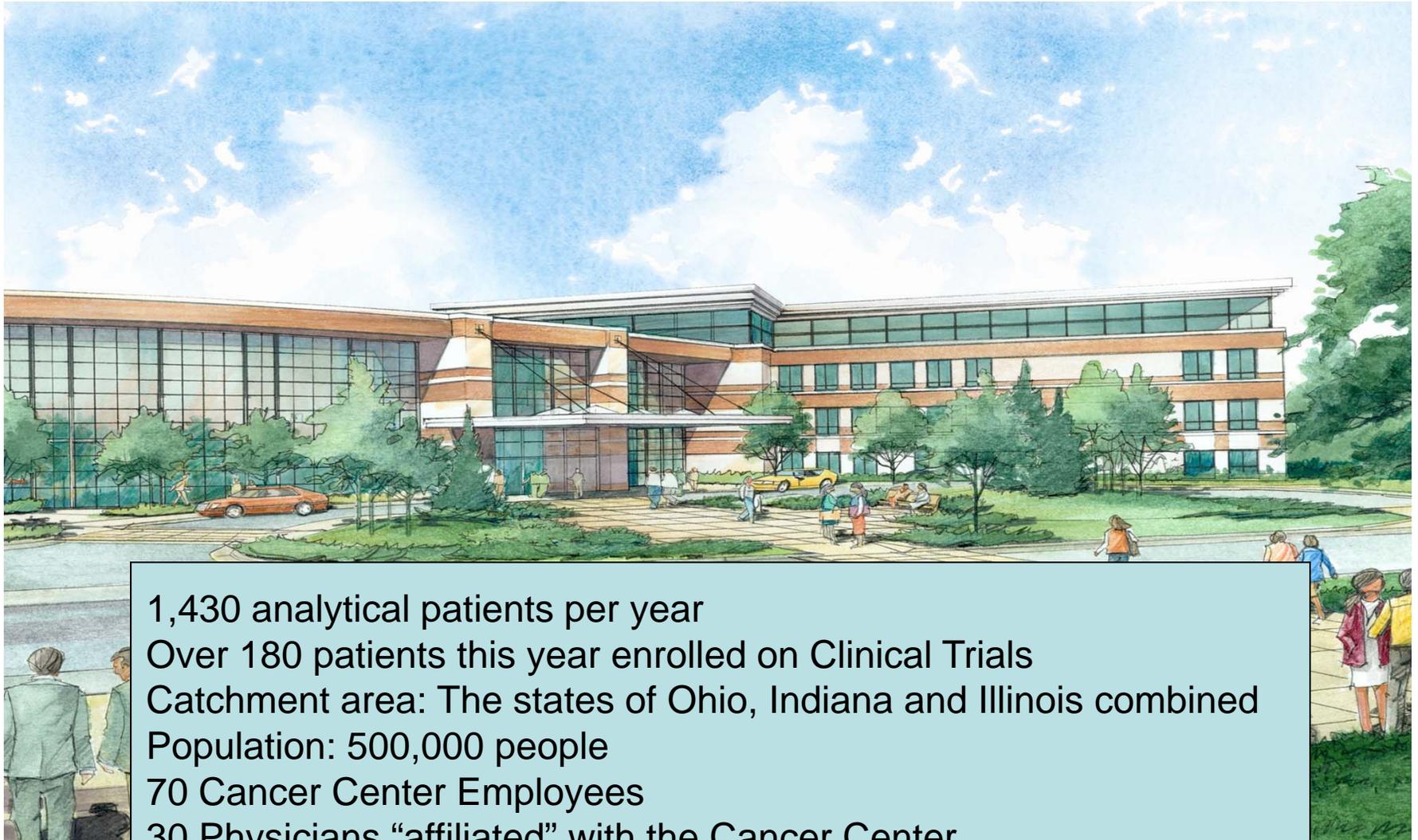


Billings Clinic.... Multispecialty Clinic with Academic-like Structure

**240 physicians
300 bed hospital
catchment area size of Indiana, Ohio and Illinois**

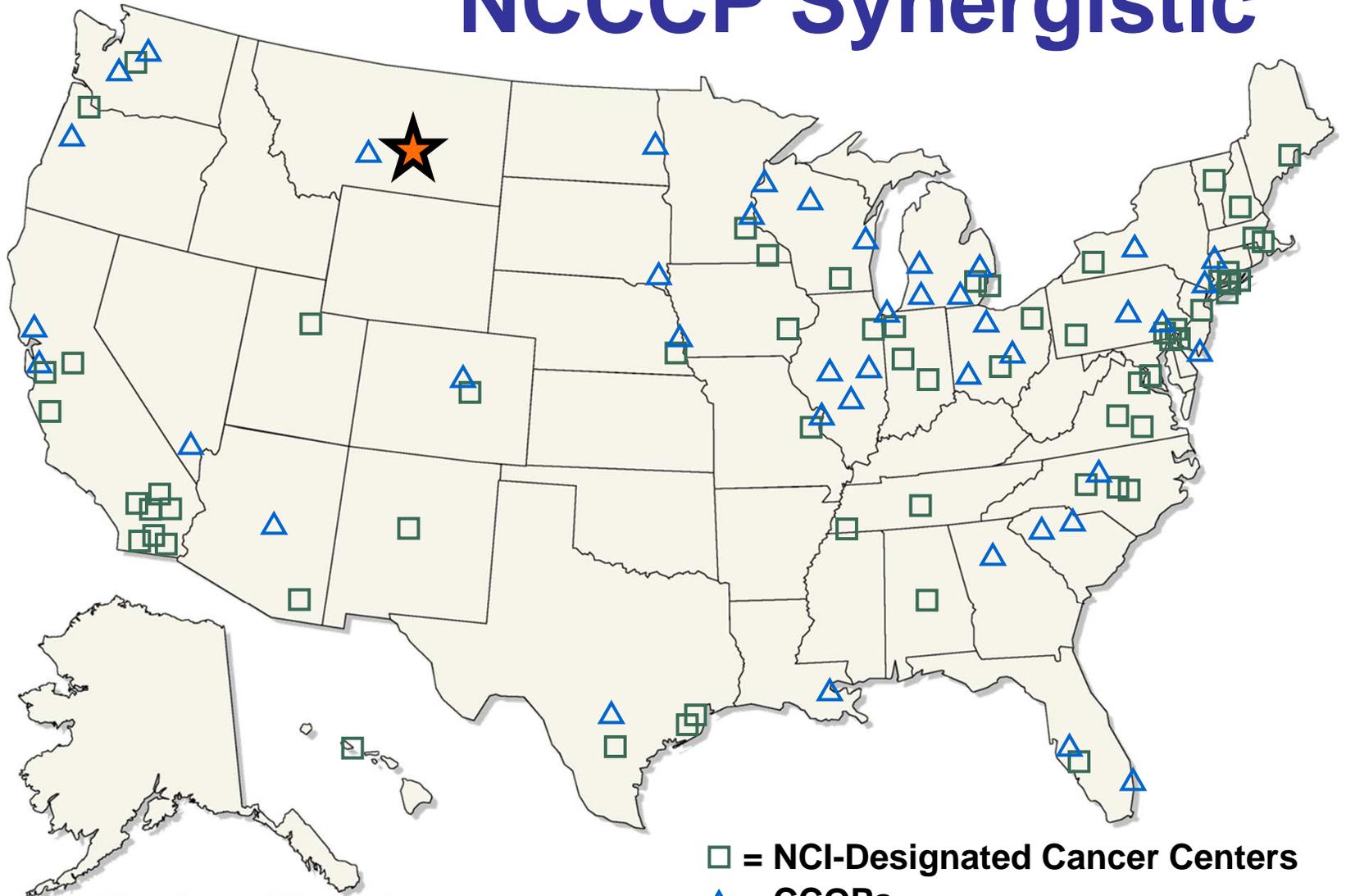


Billings Clinic Cancer Center



1,430 analytical patients per year
Over 180 patients this year enrolled on Clinical Trials
Catchment area: The states of Ohio, Indiana and Illinois combined
Population: 500,000 people
70 Cancer Center Employees
30 Physicians "affiliated" with the Cancer Center

Montana CCOP and NCCCP Synergistic

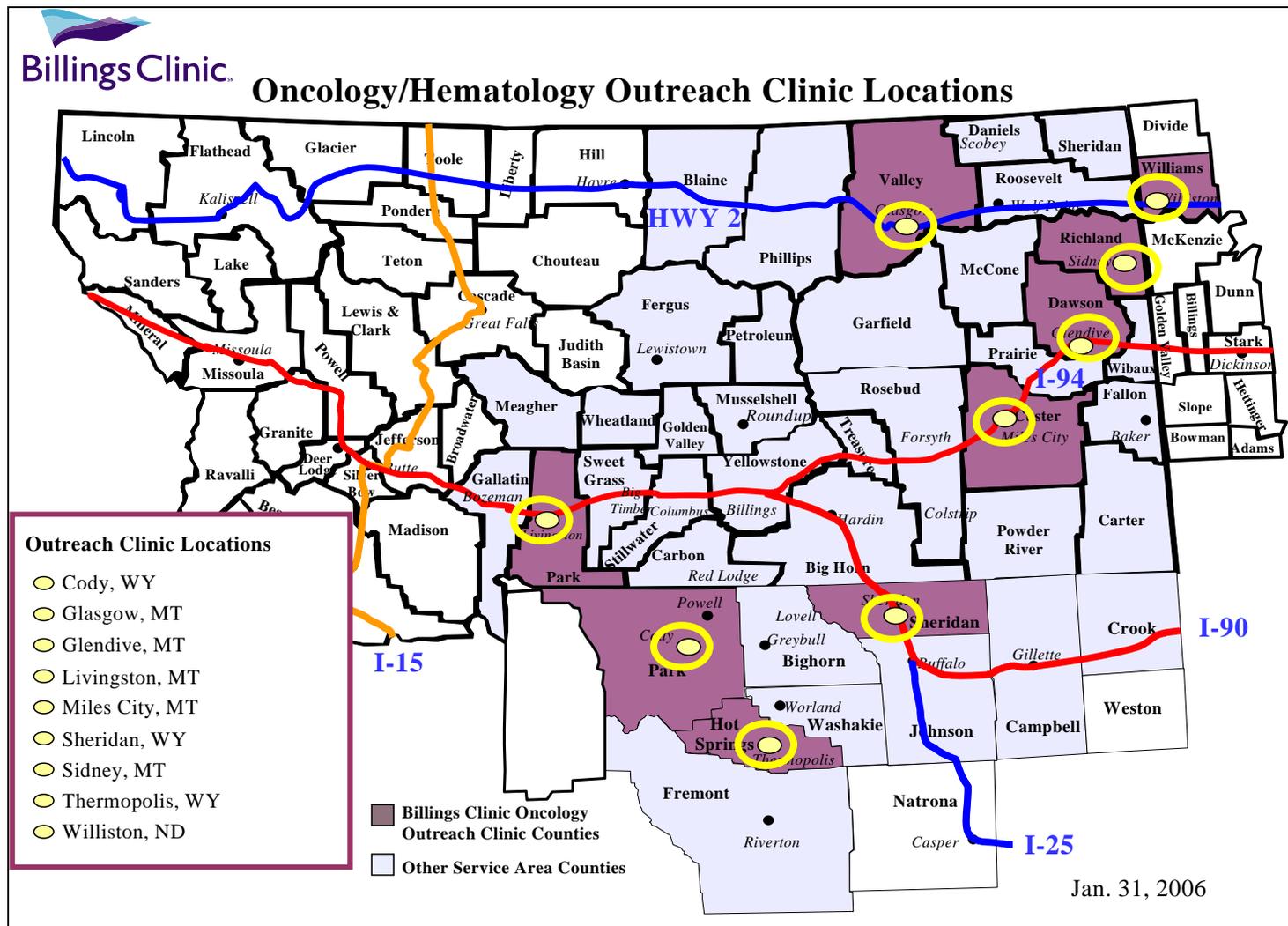


Montana CCOP and NCCCP Synergistic

- CCOP provides foundation for trials
- NCCCP provides “outreach” to rural, underserved populations
- Regional research infrastructure not present without NCCCP

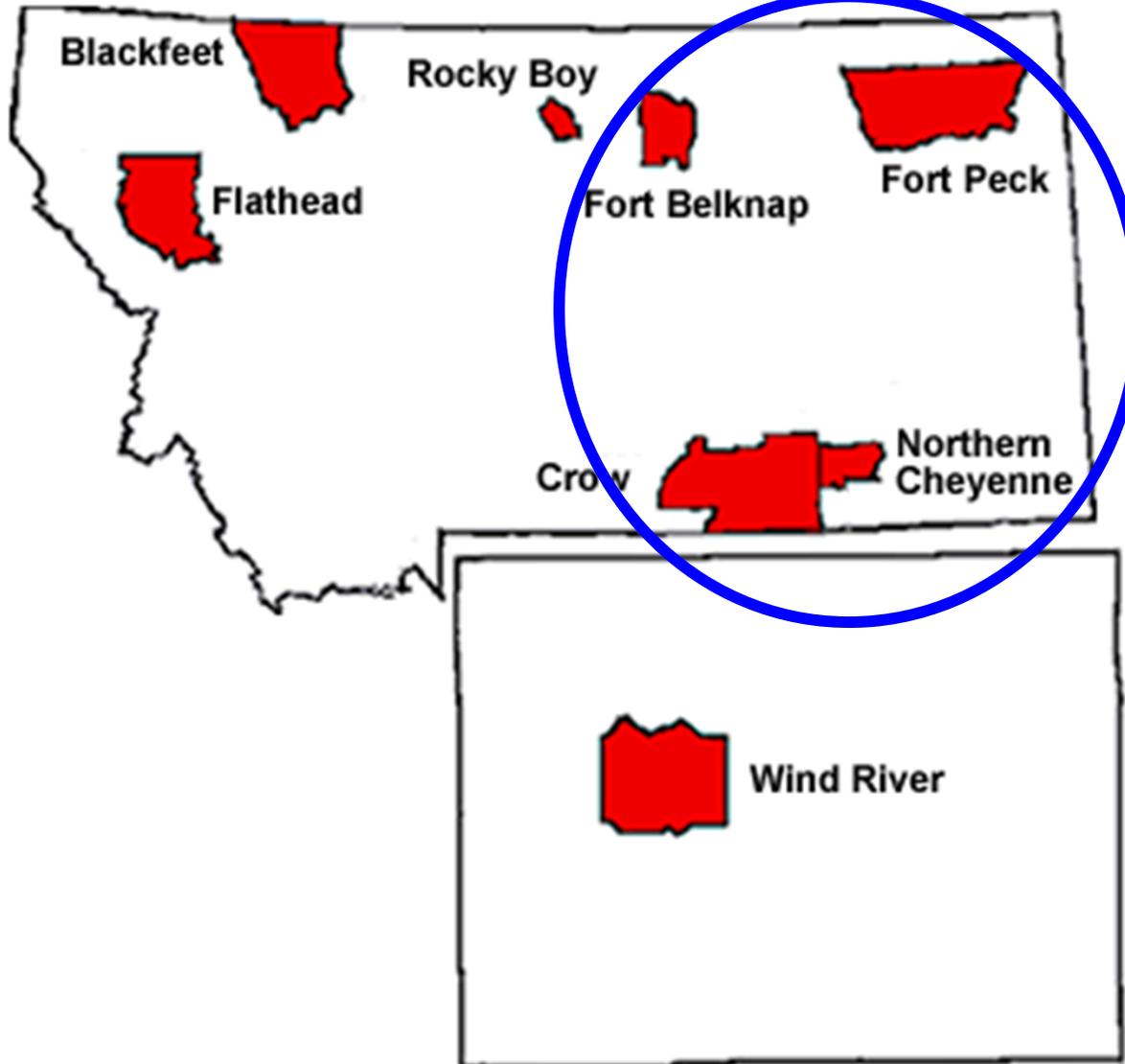


Cancer Outreach Clinics





American Indian Populations served by NCCCP





Example NCCCP Metrics for Billings Clinic Pilot

- Increase cancer screenings in rural areas among disparate populations
- Increase accrual for clinical trial patients with specific emphasis on American Indian population
- Increase number of physicians participating in Multi-disciplinary care across region
- Create new NCI-NCCCP collaborative trials
- Increase number of patient samples entered into biospecimen repository



BC Cancer Program Growth

- FY2003
 - \$25 million overall cancer services revenue
 - 10 employees
 - 3 MDs
- FY2007
 - **NCCCP pilot starting July 2007**
- FY2008
 - \$80 million overall cancer services revenue
 - 70 employees
 - 10 MDs plus ND plus 3 mid-levels plus admin director

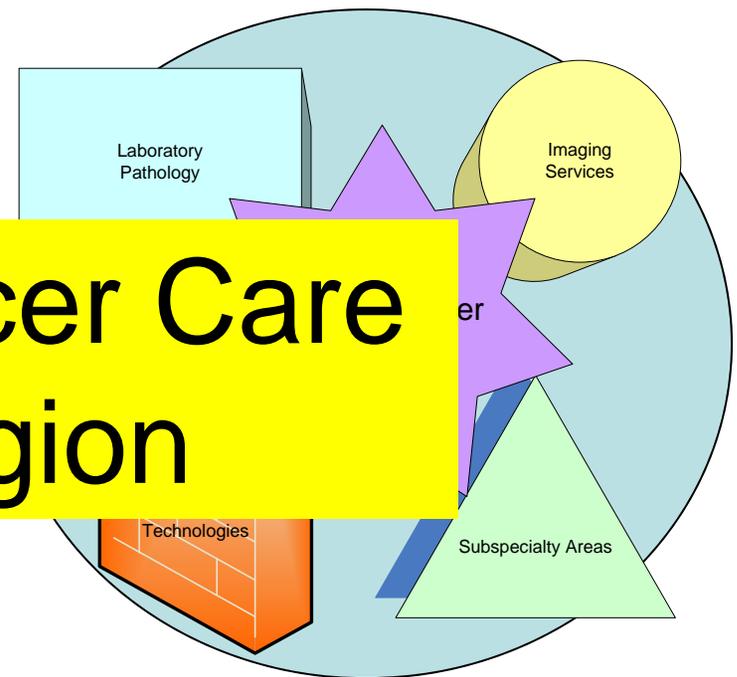
Reflections from Year 1

- Strong institutional management support
- Increase in outside “group” affiliations, both in number and in the strength of the relationships

- State
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Galvanized Cancer Care for entire region

- Laboratory
- Radiology
- Subspecialty areas
- Information technologies
- Additional staff resources
 - NCCCP Coordinator
 - Regional Navigator





What does the NCCCP mean for Montana and this region?

- Greater access to NCI sponsored research programs in rural areas
- Access to NCI Biospecimen and caBIG technology expertise
- Better care for individuals living with cancer in Montana
- Emphasis on disparate populations in our area (American Indian and 20% uninsured)



Billings Clinic Research and NCCCP

- Now a Regional leader in cancer research
 - Novel biologics in conjunction with national trials
- The resources and people to do high level / complicated clinical trials
- Perfect fit with established oncology strategy
 - Regional Asset, resource for unique therapy not otherwise available



Billings Clinic Cancer Trials

- Phase 1-2
 - MD / Billings Clinic sponsored trials
 - Industry and Biotech
 - Relationship w/ Johns Hopkins, UCSF, Washington University and Mayo Clinic

CCOP

- Phase 2-3
 - CALGB, ECOG, NCCTG, SWOG
 - RTOG and GOG



Melanoma and Hepatocellular Cancer – Unique Trials at Billings Clinic

- Phase 1/2, JX 594
 - Vaccinia virus encoding GM-CSF
 - Active virus replication and GM-CSF secretion in tumors with RB mutations
- Direct injection into tumor as monotherapy
- Previous phase 1 data showed CR and PR



Unique Bladder Cancer Trial at Billings Clinic

- CG0070
 - Adenovirus encoding GM-CSF
 - Replicates and produces GM-CSF in cells with RB mutations
- Phase 1 targeting patients with superficial TCC (T1, Ta, CIS) after BCG failure
- Phase 1 data thus far shows complete responses after a single dose

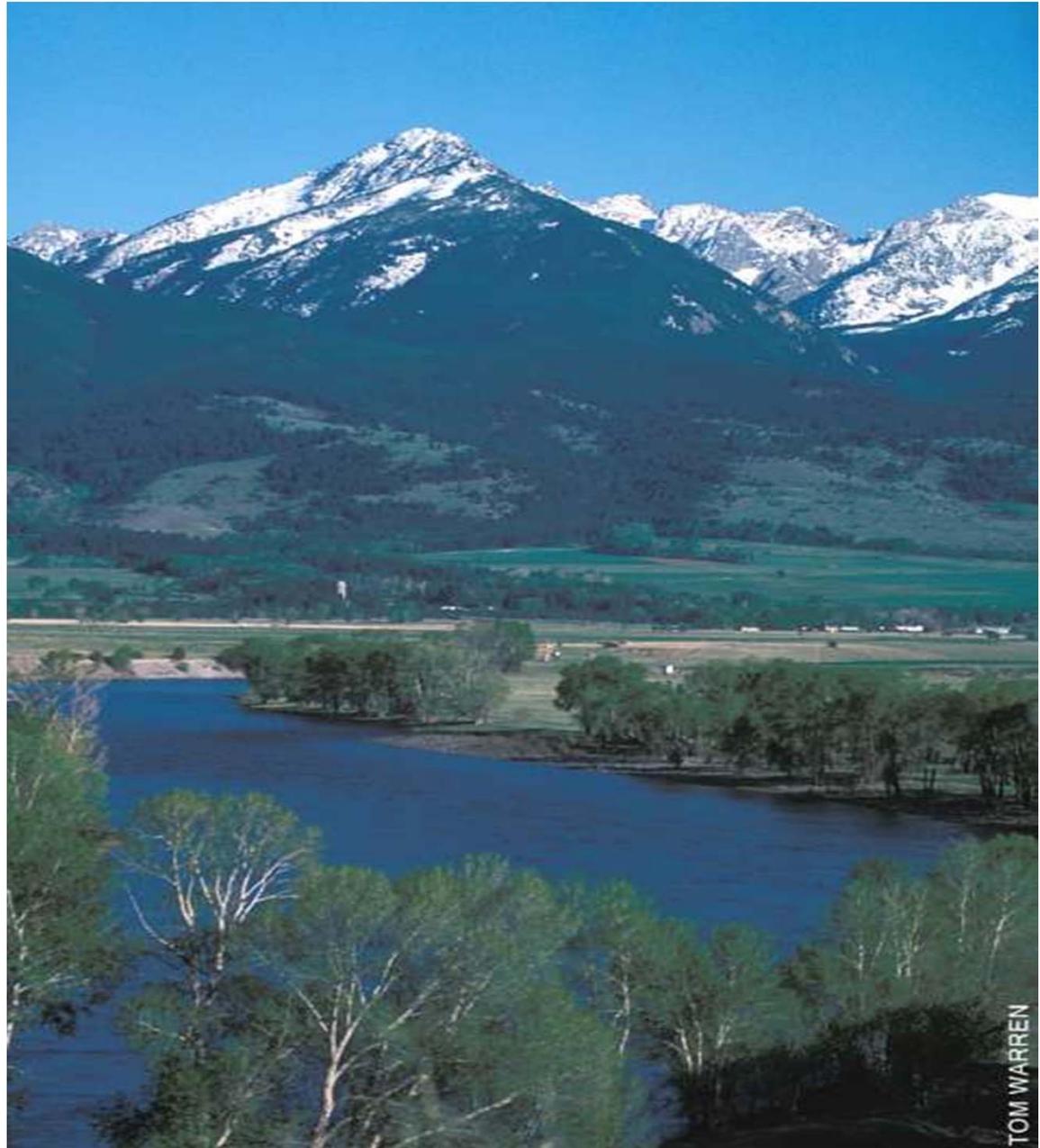


Overcoming Challenges through NCCCP

- American Indian
 - IHS – prevention/lack of screening coverage
 - Tribal norms – trust, access
 - Travel – roads, distance, cost
- Rural Population
 - Long distances
 - Implementation of telemedicine in most rural communities
- Financial ability of organization to support all the programs long term
 - Significant co-investment by Billings Clinic



Thank You !



TOM WARREN