**WHAT PURCHASERS NEED TO KNOW ABOUT CANCER**

Based on National Alliance of Healthcare Purchaser Coalitions’ eValue8 Deep Dive

**ARE YOUR HEALTH PLANS KEEPING PACE WITH THE RAPID ADVANCES IN CANCER CARE?**

- Cancer mortality rates are dropping
- Costs of treatment are skyrocketing
- Inconsistent coding and care pathways are a roadblock to managing cost and quality
- % of Rx claims subject to prior authorization

25%

$100,000-400,000

700,000 Genetic biomarker tests

BUT ONLY

200 Lab billing codes

<5% to >75%

*Unless otherwise indicated, references may be found in the National Alliance’s publication, Achieving Value in Cancer Care

**ARE YOUR EMPLOYEES GETTING THE RIGHT CARE?**

Milliman reported that the cost of chemotherapy can vary by 30% to 50% between a physician’s office and a hospital outpatient setting.

**CANCER CARE IS EVOLVING TO DELIVER PATIENT-CENTERED CARE**

National plans typically adapt existing approaches to encourage appropriate care:
- Most rely on prior authorization and case management
- Most offer web-based tools
- Few use feedback reporting
- None use incentive payments

**Some types of cancer can now be managed like a chronic condition**

**CANCER PCMH REQUIRED SERVICES**

- Patient education
- Care plan
- Nutritional counseling
- Rehabilitation services
- Patient-reported outcomes

**SPECIALIZED CANCER CASE MANAGEMENT**

- Access to clinical trials
- SDM, second opinion, tumor board
- Patient navigation
- Genetic counseling
- Psychosocial services including transportation
- Financial counseling
- Palliative care
- Survivorship care plan/return to work
- Advance care planning

- Referrals to COE/oncology practice
- Caregiver support
- Claims process and questions
- Coordination with EAP, disability insurance

The majority of patient-centered care is offered by three entities:
1. Providers, e.g., Cancer Patient-Centered Medical Home (PCMH),
2. Health plans (e.g., Specialized Cancer Case Management), or
3. Employers and third-party contractors

Care is often not coordinated among these three. “Cancer Huddles” are one way to bring them together to ensure superior patient and family support.
WHAT PURCHASERS CAN DO ABOUT CANCER*

- Provide benefits, navigation, advocacy and support to ensure a Patient-Centered Cancer Journey
- Work with health plans, providers and pharmacy benefit managers to root out waste related to inappropriate or low-value care
- Have your health plan measure inappropriate care and care inconsistent with best practice guidelines (e.g., frequency of colonoscopies, breast cancer screenings, Pap tests)

Only 1 in 5 plans collects 14 health-industry-developed core quality measures. For example:
- Proportion with more than one emergency room visit in the last 30 days of life
- Proportion admitted to the ICU in the last 30 days of life
- Proportion not admitted to hospice
- Proportion admitted to hospice for less than 3 days

For more information, see our detailed report, which includes a comprehensive employer checklist.

*For a comprehensive employer checklist, see the full report, “Achieving Value in Cancer Care.”