

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

25%

Drop in cancer
mortality rate
since early 2000s¹

Costs of treatment
are skyrocketing



**100,000-
400,000**

Cost per year for many
new cancer drugs

Inconsistent coding and care
pathways are a roadblock to
managing cost and quality

700,000

Genetic biomarker tests

BUT ONLY

200

Lab billing codes

% of Rx claims
subject to
prior authorization

**<5%
to
>75%**

¹Unless otherwise indicated,
references may be found in the
National Alliance's publication,
Achieving Value in Cancer Care

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

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

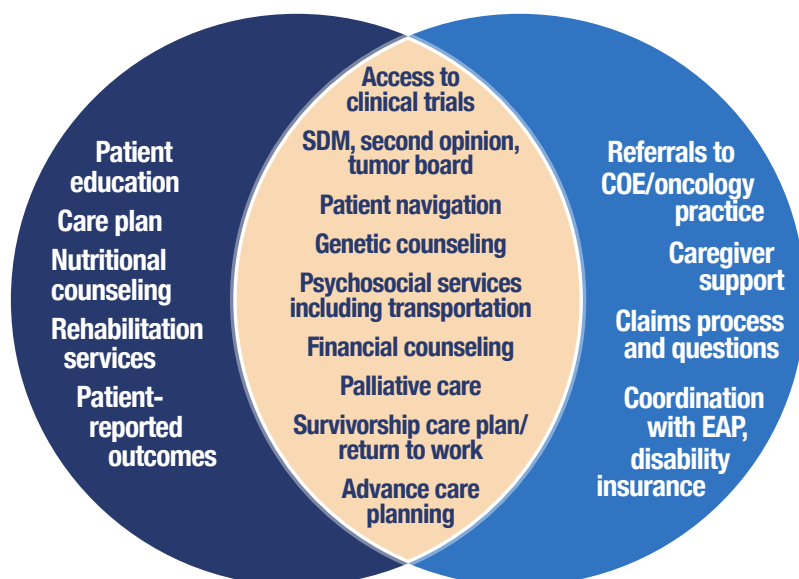
National plans typically adapt existing
approaches to encourage appropriate care

- ◆ Most rely on prior authorization and case management
- ◆ Most offer web-based tools
- ◆ Few use feedback reporting
- ◆ None use incentive payments

CANCER CARE IS EVOLVING TO DELIVER PATIENT-CENTERED CARE

CANCER PCMH
REQUIRED SERVICES

SPECIALIZED CANCER
CASE MANAGEMENT

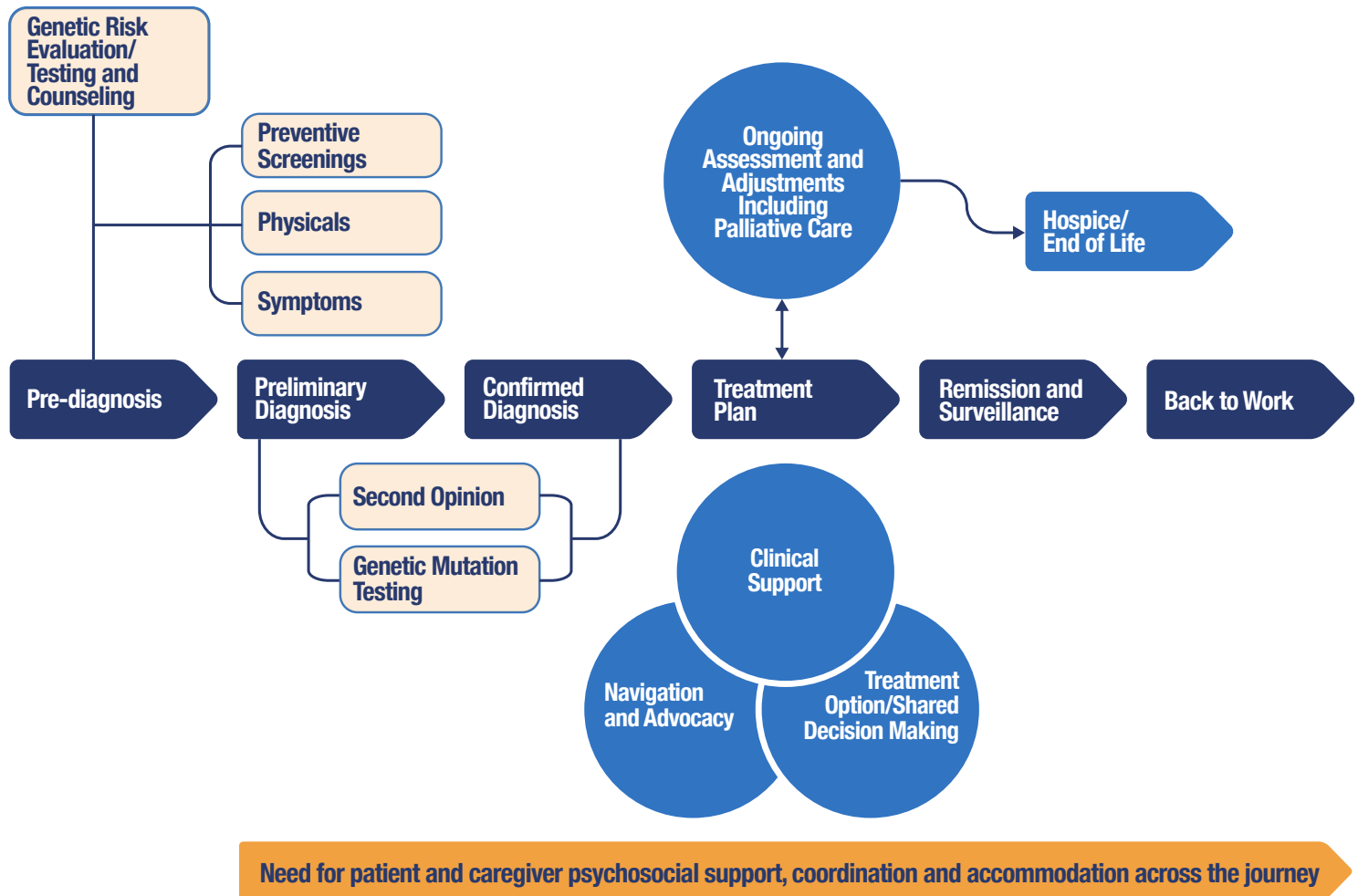


The majority of patient-centered
care is offered by three entities:

- 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.

PATIENT-CENTERED CANCER JOURNEY



WHAT PURCHASERS CAN DO ABOUT CANCER*

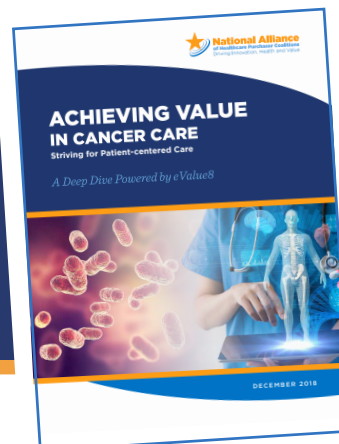
- ☐ Provide benefits, navigation, advocacy and support to ensure a Patient-Centered Cancer Journey
- ☐ Work with health plans, providers and pharmacy benefit managers to root out waste related to inappropriate or low-value care
- ☐ Have your health plan measure inappropriate care and care inconsistent 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

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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."