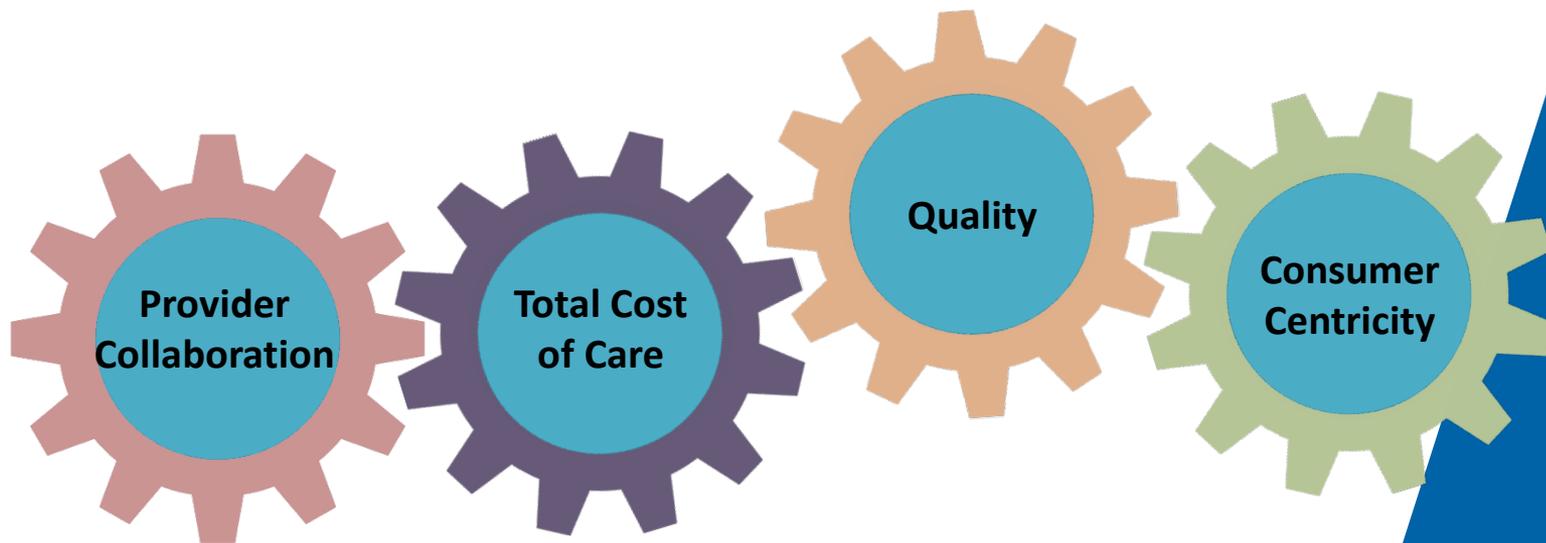


Cancer Care Quality Program

Striving to improve Quality & Affordability in cancer care



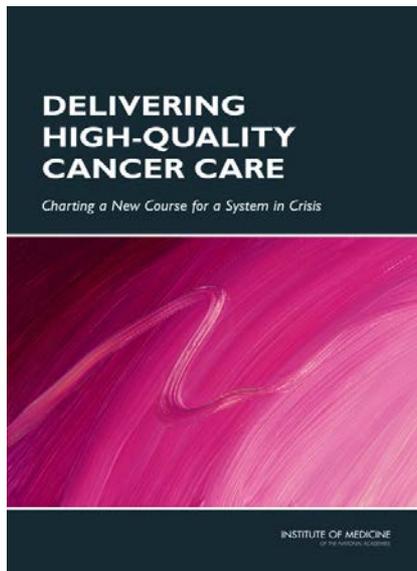
Focusing on Anthem's Strategic Pillars

Together we are transforming health care with trusted solutions

01/11/2017

“The Cancer Care Delivery System is in Crisis.”

Cancer care is often not as patient-centered, accessible, coordinated, or evidence based as it could be.



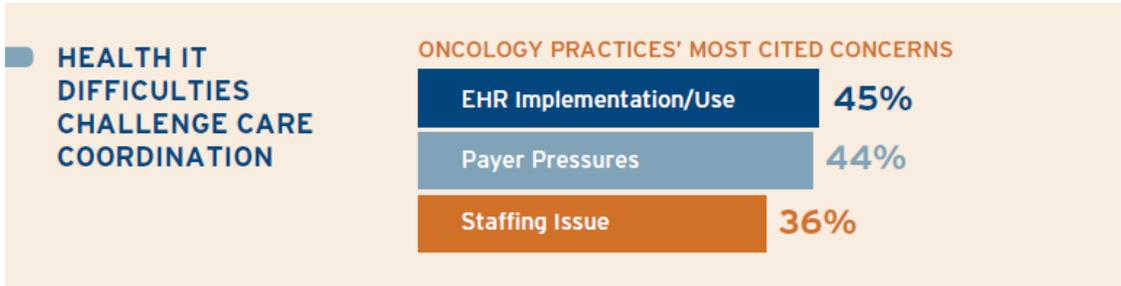
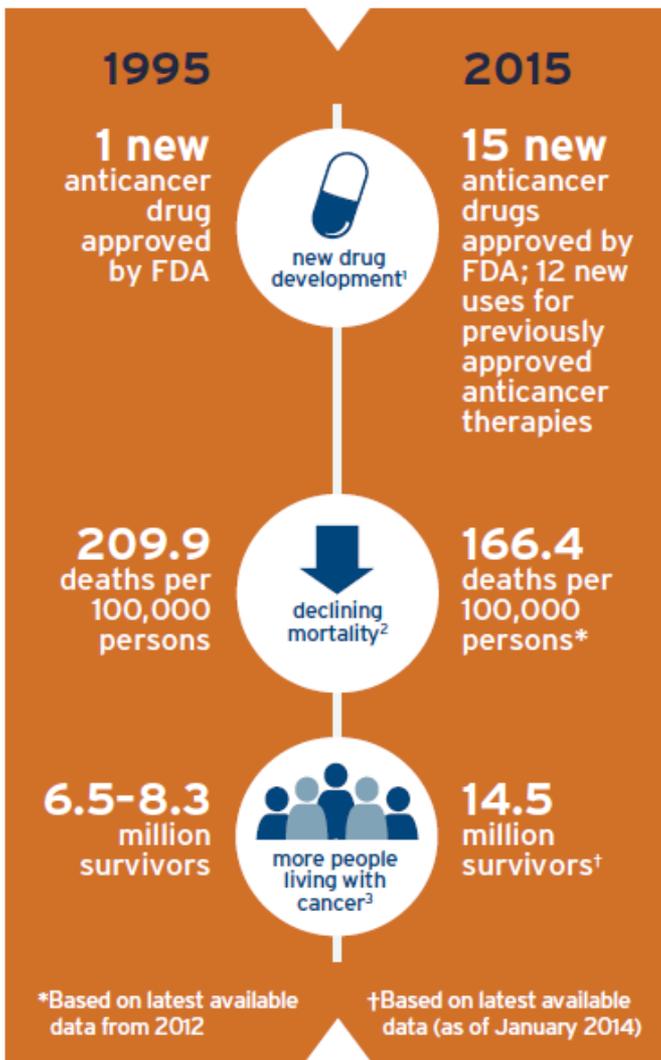
Institute of Medicine
2013

Additional trends amplifying crisis

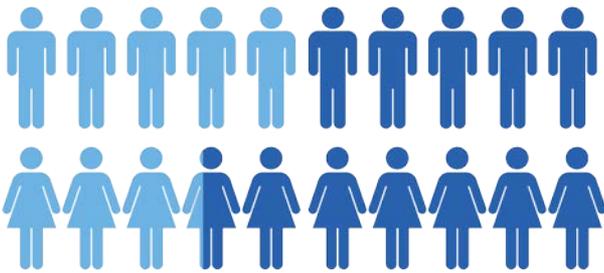
- Aging population
- Workforce shortages
- Reliance on family caregivers and direct care workers
- Rising cost of cancer care
- Complexity of cancer care
- Limitations in tools for improving quality

Where is cancer today?

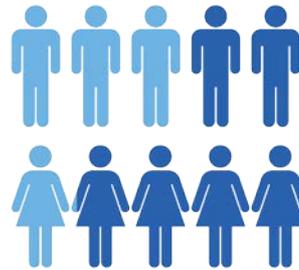
US cancer care system ill-equipped to deliver new advances to patients (ASCO 2016)



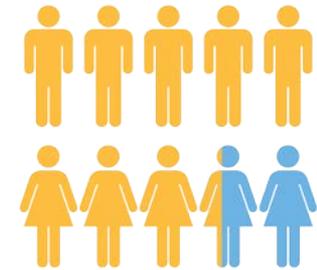
Cancer Impacts Many



50% of all men and **33%** of all women in America will get cancer during their lifetime.¹



Based on rates from 2007-2009, **41.2%** of men and women born today will be diagnosed with cancer at some time during their lifetime.²

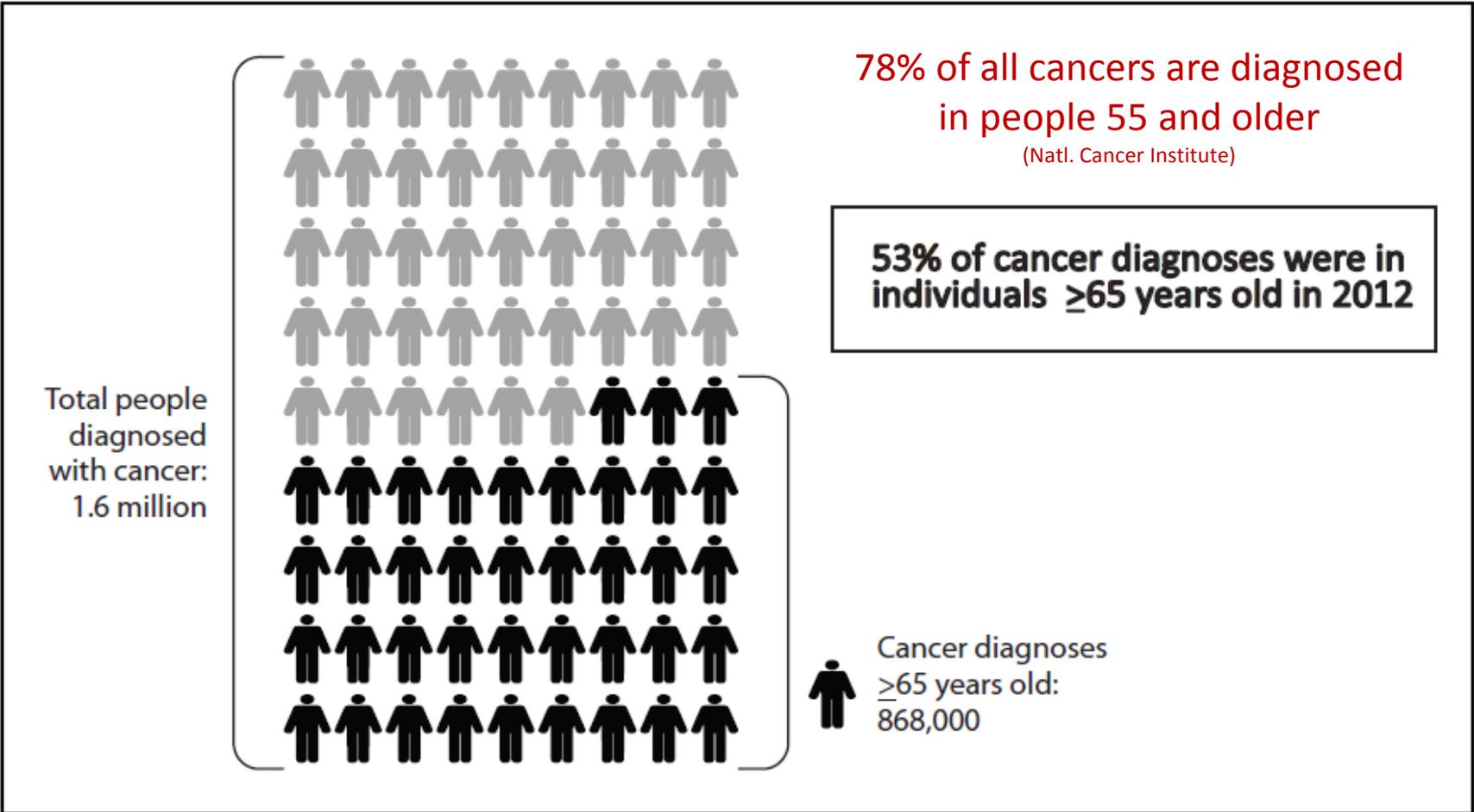


73% of cancer survivors are living five years or longer after a diagnosis.²

1 American Cancer Society: Questions People Ask About Cancer. <http://cancer.org/cancer/cancerbasics/questions-people-ask-about-cancer> (January 25, 2013)

2 National Cancer Institute: Cancer. <http://seer.cancer.gov/statfacts/html/all.html#survival> (accessed February 2013)

The majority of cancer diagnoses are in older adults



Quality of cancer care is inconsistent

Not aligned with best practice

1 in 3 regimens not
consistent with medical
evidence¹

Unnecessary hospitalizations during treatment

which could be avoided
by using less toxic
treatment regimens and
appropriate supportive
care²

Unneeded tests and treatments

put patients at risk and
impose additional care
burden and cost²

¹ J Clin Oncol 2011, 30:142-50; J Clin Oncol 2012, 30:3800-09; J Clin Oncol 2006, 24:626-34; Oncologist 2011;16:378-87;
² J Clin Oncol 2002 20:4636-42. JACR 2012, 9:33-41; JAMA 2013, 309:2587-95; J Clin Oncol 2013; 31:epub.

Rising cost of cancer care



\$86 Billion

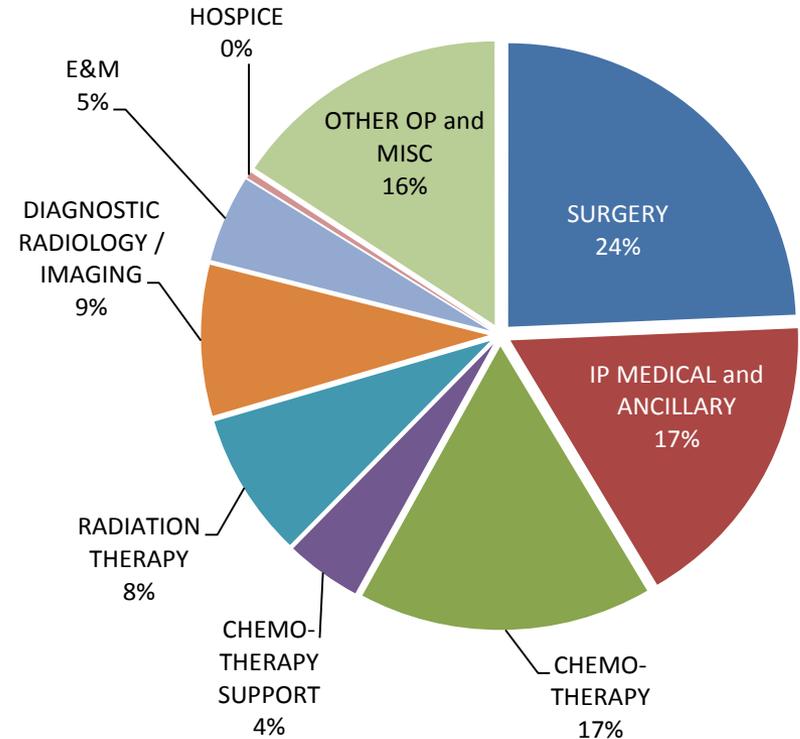
direct annual costs of cancer care in the US¹



\$173 Billion

Projected US cost in 2020²

Distribution of Cost: All Cancers³



1 The State of Cancer Care in America. ASCO. 2015
2 <http://costprojections.cancer.gov/expenditures.html>
3 Anthem's Company Data

Rising cost of cancer care

FORTUNE

[Full Article](#)

Cancer drug spending hit \$100 billion in 2014. Here's why it'll soon be much higher

by Laura Lorenzetti @lauralorenzetti MAY 8, 2015, 3:35 PM EDT

“The increased prevalence of most cancers, earlier treatment initiation, new medicines and improved outcomes

are all contributing to the greater demand for oncology therapeutics around the world,”

Murray Aitken, IMS Health senior vice president and executive director of the IMS Institute for Healthcare Informatics.

[Full Article](#)

This Cancer Doctor Is Leading the Attack on Astronomical Drug Prices

BloombergBusiness

The price tag for treating every U.S. patient with the newest melanoma treatment: \$174 billion per year

by Robert Langreth and Cynthia Koons

June 1, 2015 – 1:54 PM PDT

Rising cost of cancer care

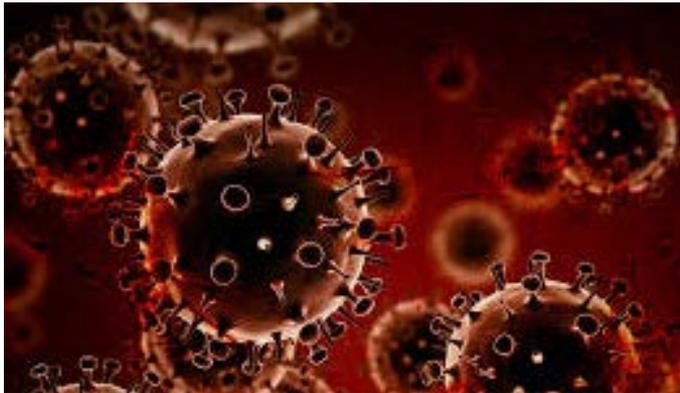


JAMA Oncol. 2016;2(1):19-21. doi:10.1001/jamaoncol.2015.4191

Data were supplied by Peter Bach and Geoffrey Schnorr of Memorial Sloan Kettering Cancer Center. Adapted with permission of Bloomberg LP. Copyright 2015 Bloomberg LP

Drug therapies are generally multi-drug combinations

Cancer is not ONE disease but a group of more than 100 diseases



Scenario: *Breast cancer therapy (HER2+) disease*

Day 1: doxorubicin

Day 1: cyclophosphamide

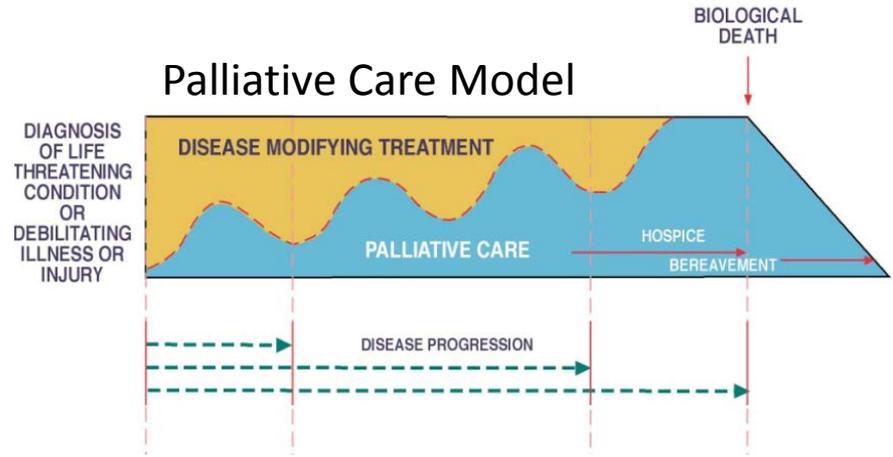
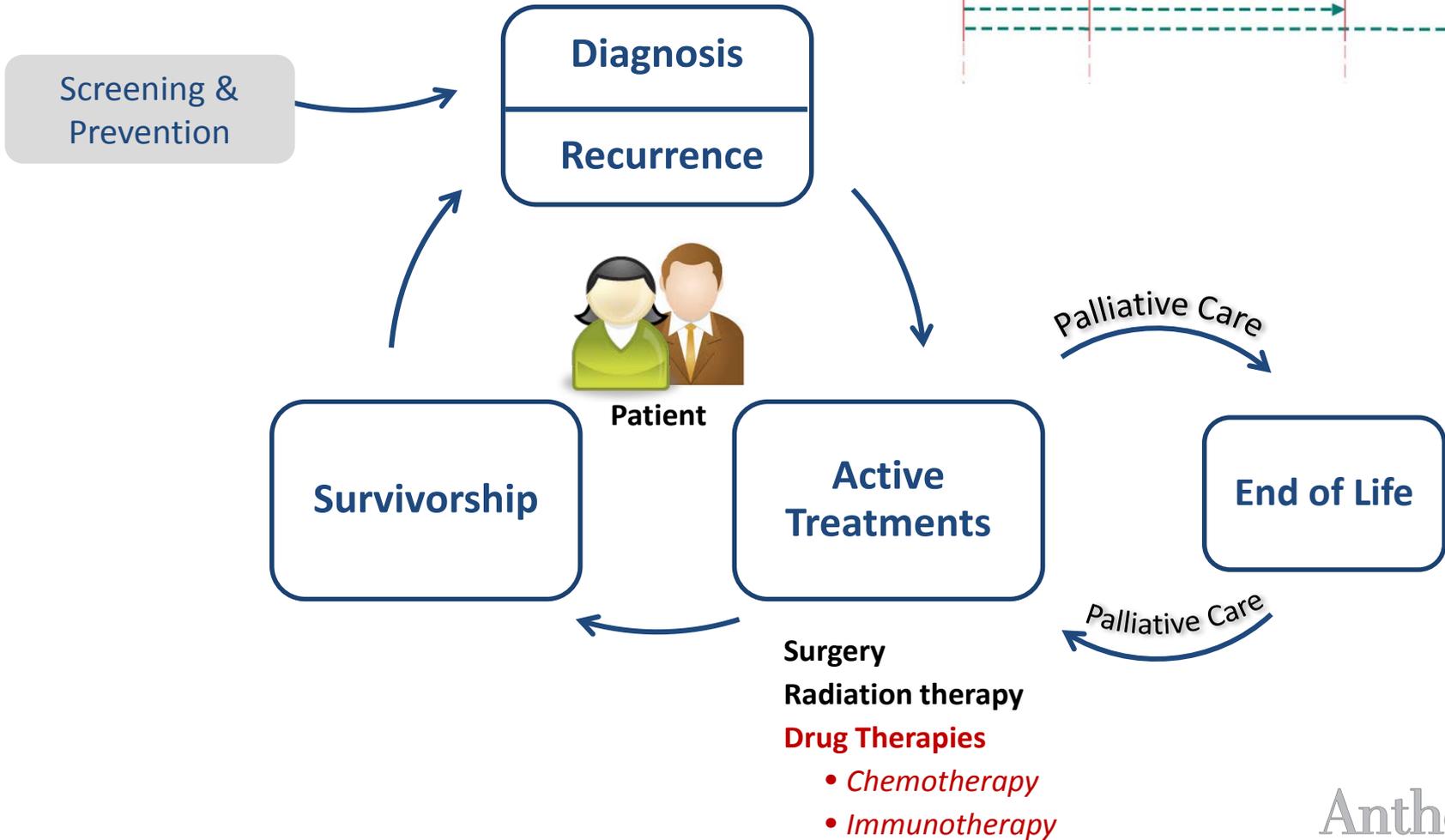
Every 21 days for 4 cycles, then follow by

Paclitaxel once weekly for 12 weeks plus
Herceptin once weekly for 1 year

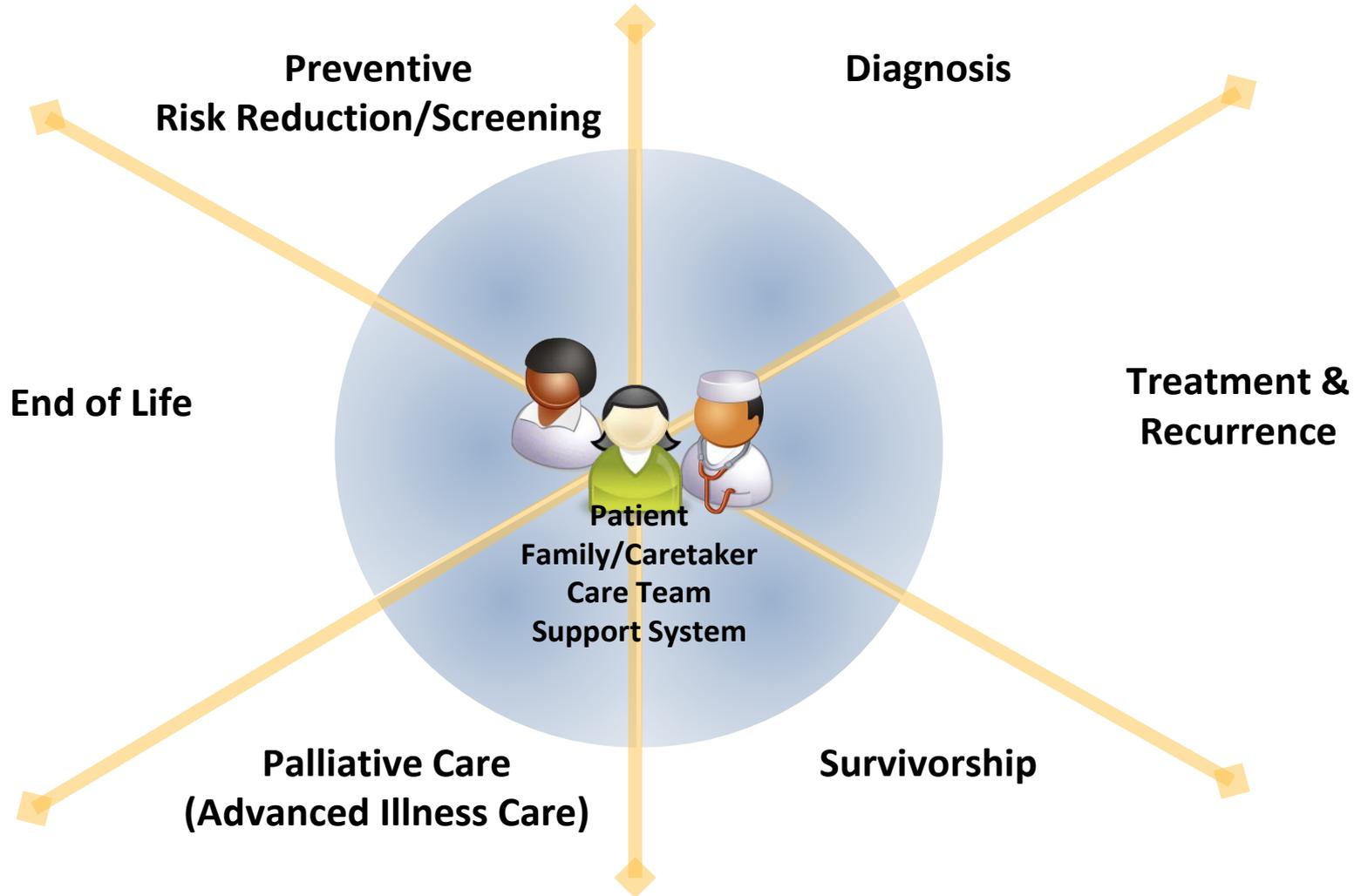
Key variables

- Type of cancer (solid vs liquid)
- Stage of disease (early, late, metastatic)
- Biomarkers (e.g. HER+)
- Lines of therapy
 - Before surgery
 - After surgery
 - Radiation therapy
 - Drug therapy
 - Mixed treatment modalities
- Types of oncology specialists
 - Surgical oncologist
 - Radiation oncologist
 - Medical oncologist
 - Hematologist
 - Urologist...

Cancer Continuum



Building Caring and Trusted Solutions



“Anthem's cancer care program sets standard for oncology management”



Joseph R. Swedish, CEO WellPoint

We want to **make certain that our long-term strategic engagement in the market helps us manage to a new future**, not just relative to where we are today or where we have been in the past,” Swedish adds.

“Members are looking for new value and how they access the system, and they want to make certain the value comes to them through technologies that work.”

Goals: *Collaborating with Providers to...*



Improving the quality of cancer care by promoting evidence-based and patient-centered care



Appropriately aligning financial incentives to enhance care coordination and treatment planning



Lowering total cost of care to help improve access to quality and affordable cancer care

Program Methodology

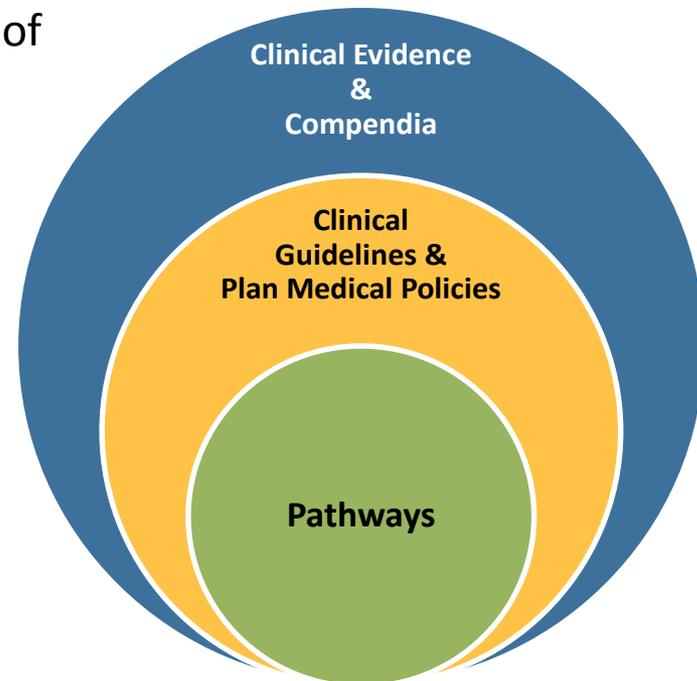
	Alternative Payment Model	Voluntary prospective payment model—enhanced reimbursement for care coordination & treatment planning when treatment pathways are selected
	Enhanced reimbursement criteria	\$350 PMPM while member is on active therapy with cancer treatment pathways
	Eligible practices	In-network providers who treat members with cancer
	Eligible members	Commercial and Medicare Advantage members (~ 15 million members & expanding)
	Cancers included	Focusing on high volume cancers—currently more than 17 cancer types included in Program
	Treatment Episode	Episode begins at the 1 st cycle of drug therapies. Length of episode is dependent on the duration of the course, e.g. 3, 6, 9, 12 months.
	Data Collection	Web browser application, available 24/7 or direct call with members of provider team.

Program Methodology: Defining Pathways

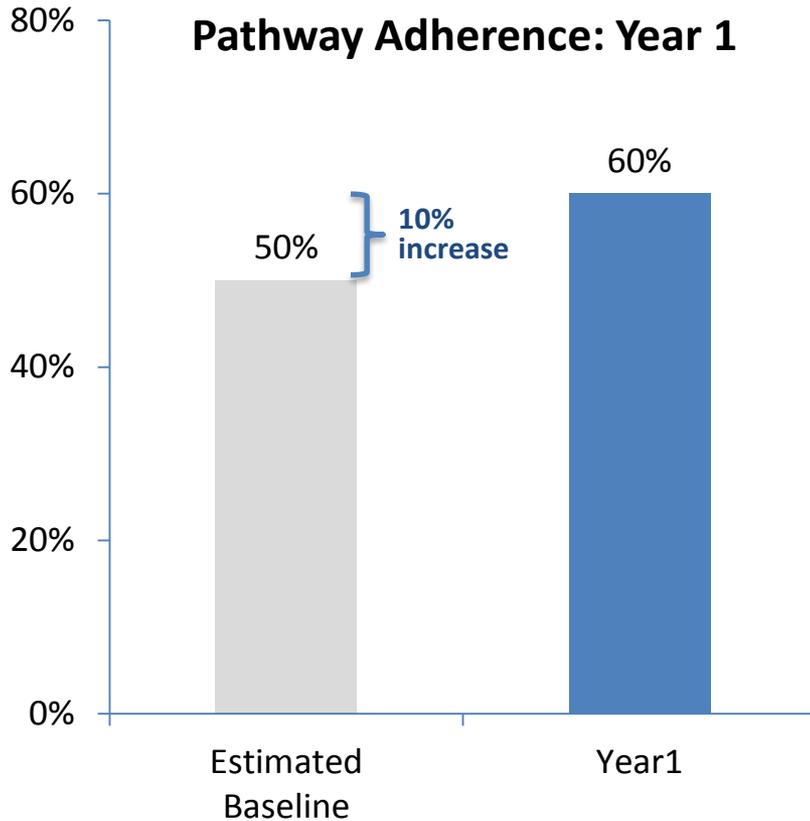
Oncology Pathways are detailed, evidence-based treatment protocols for delivering quality cancer care for specific patient presentations, including the type and stage of disease.

Oncology pathways balance the consideration of

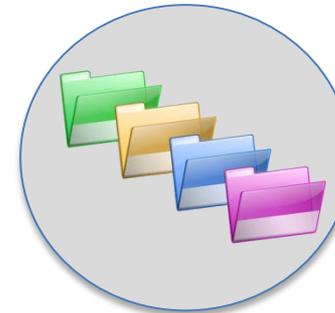
1. Clinical efficacy
2. Safety
3. Toxicities (incl. quality of life)
4. Cost (total cost)
5. Scientific advances



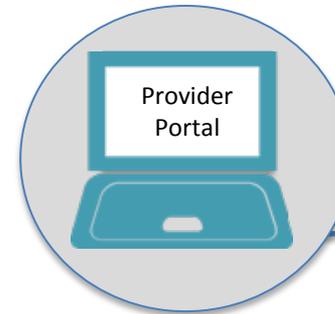
Success Metrics and Early Outcomes



8000+
providers participating



6000+
cases/month



~45%
requests submitted online

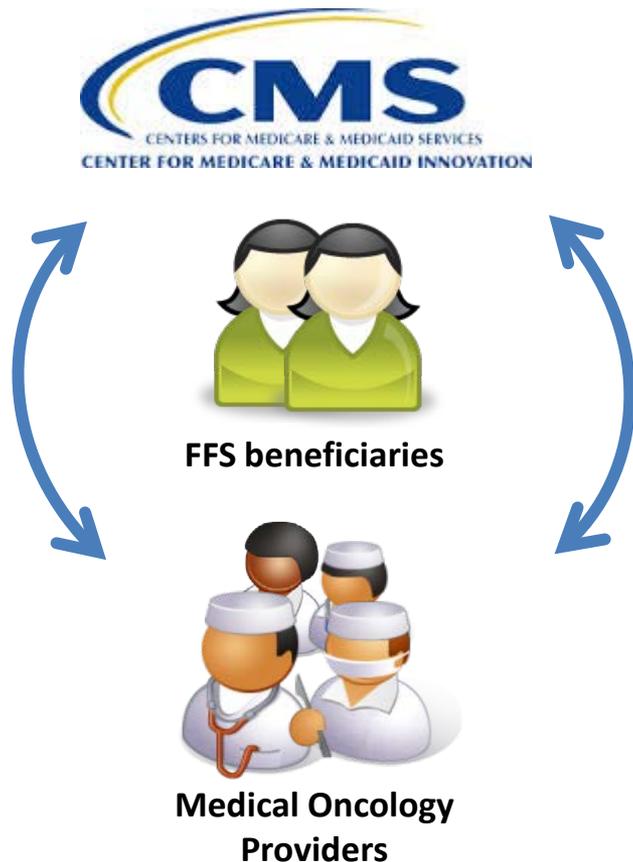
CMS/CMMI Oncology Care Model

Program Overview

This initiative is between CMS (payer) and oncology providers/practices **for FFS beneficiaries** (estimated to make up 50% of practices' membership)

CMS OCM goals (using appropriately aligned financial incentives to)

1. Improve care coordination
2. Improve appropriateness of care
3. Improve access for beneficiaries undergoing chemotherapy



Defining Value

This Cancer Doctor Is Leading the Attack on Astronomical Drug Prices

BloombergBusiness

The price tag for treating every U.S. patient with the newest melanoma treatment: \$174 billion per year

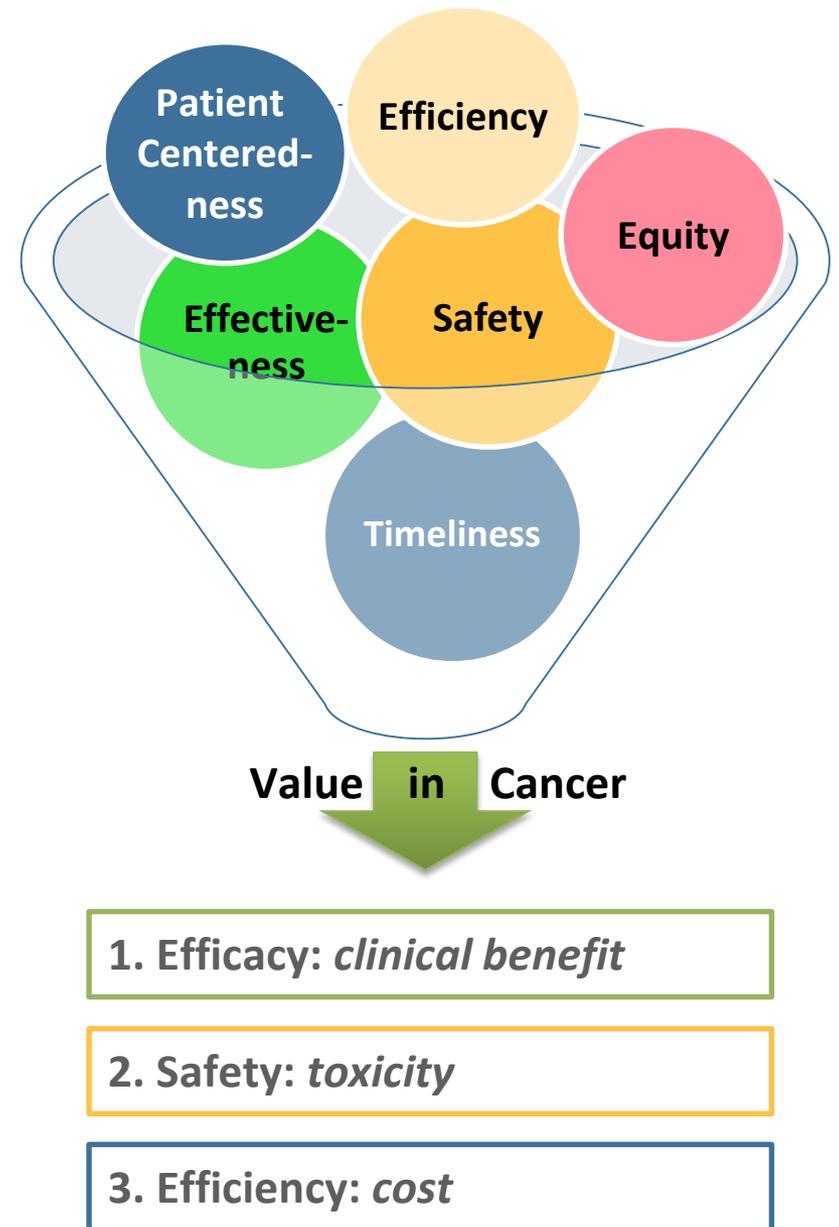


Defining Value

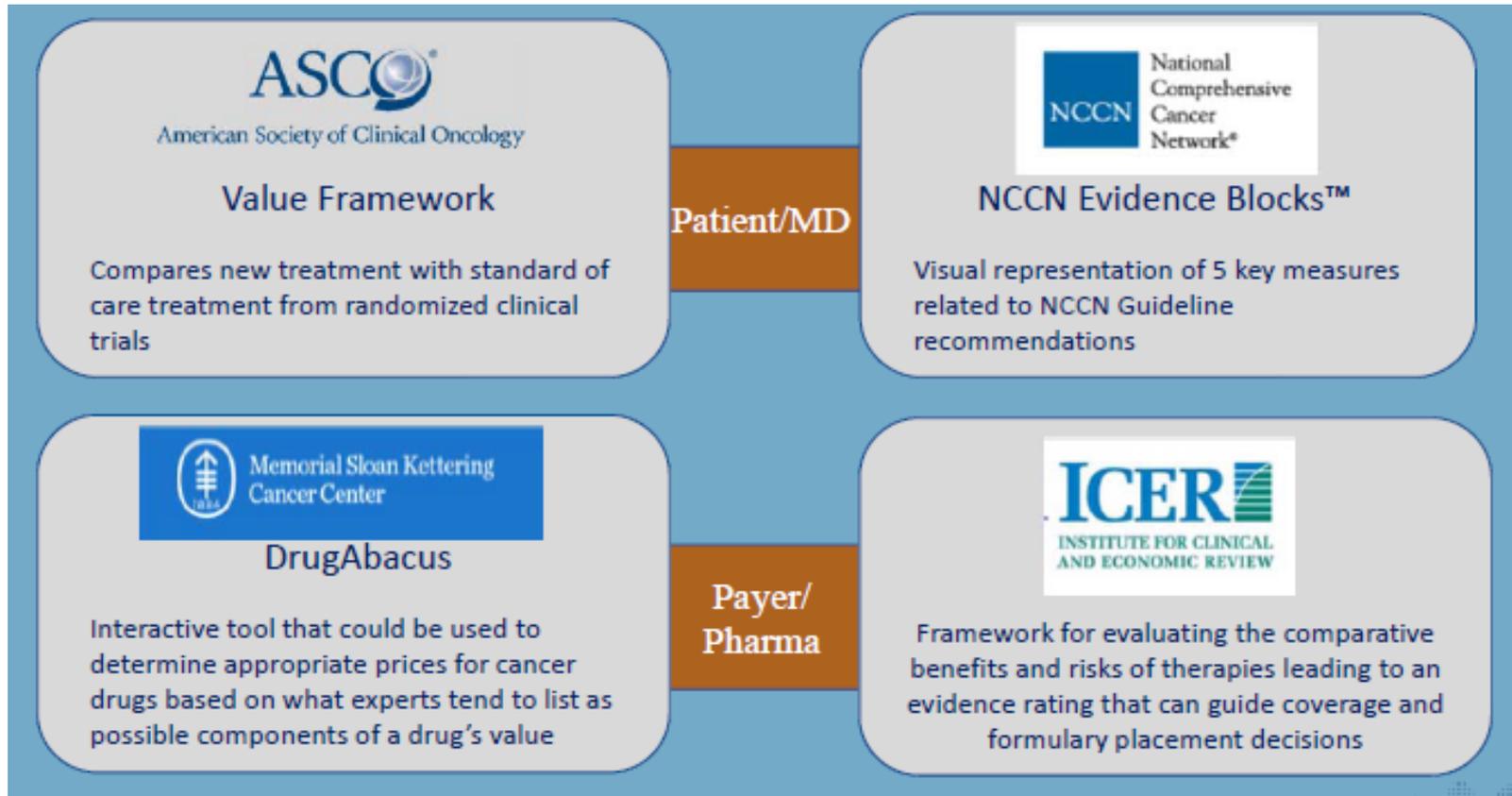
CMS has projected that US health care spending will reach \$4.3 trillion and account for 19.3% of the national gross domestic product by 2019.

ASCO Focus on Value

The high costs of cancer care affect everyone in society, but there are many stakeholders in our complex health care system with specific responsibilities and influence. These include **patients**, **manufacturers**, **providers**, and **payers**.



Defining Value: *Tools Under Development*



Defining Value: *By the Patient*



Defining Value in Oncology: Perspectives from Patients with Metastatic Breast Cancer

Longacre ML¹, Charap ES², Buzaglo JS¹, Kennedy V¹, House L¹

¹Cancer Support Community, Philadelphia, PA, ²InVentiv Health, Adheris Behavioral Insights Group

[Full Poster](#)

Among the 769 patients, responses were categorized as:

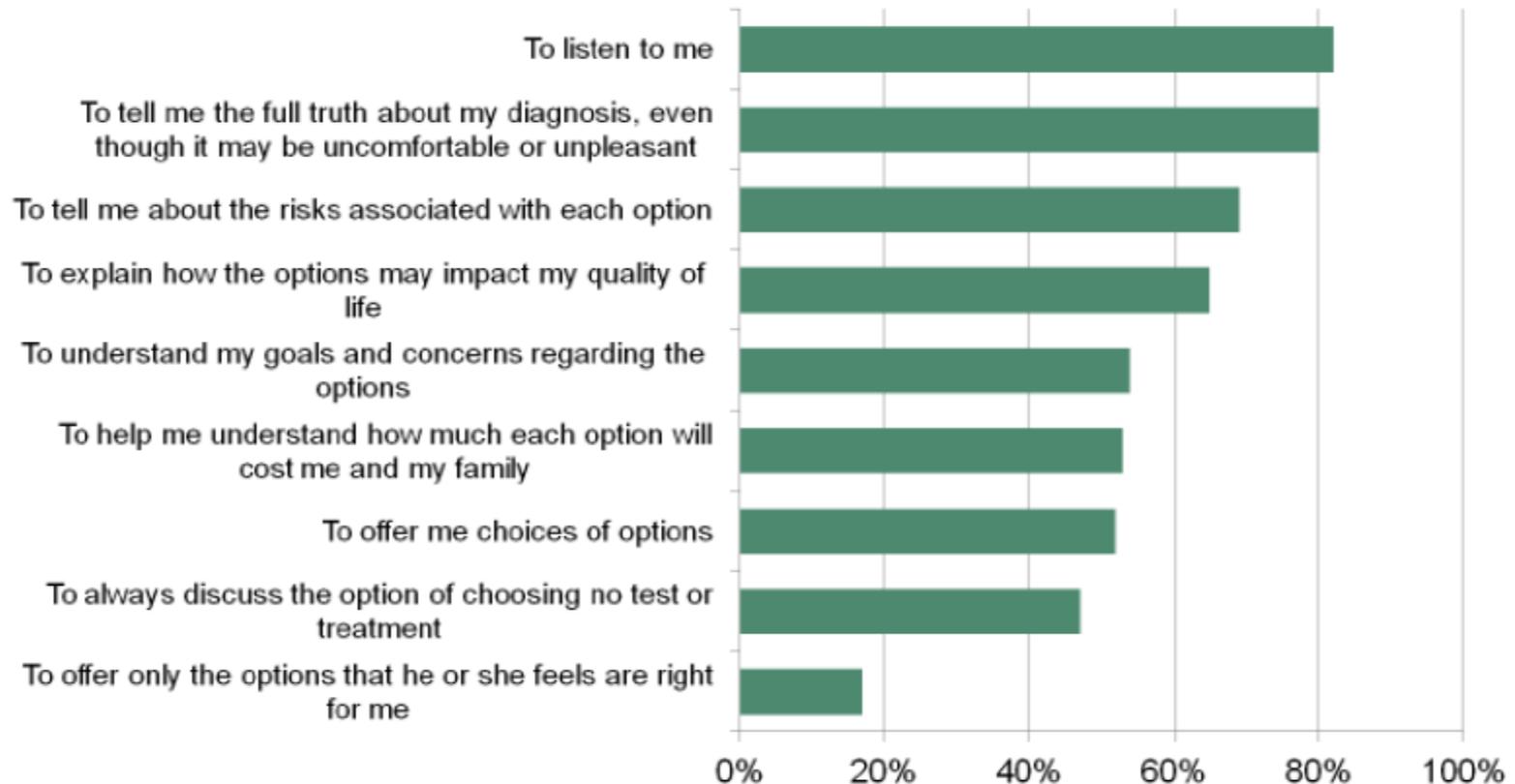
- 2.34% were unclear
- 2.73% reported “no value”
- **7.41% provided an exchange value type response**
- 8.97% did not understand the question
- **38.4% provided a personal value type response**
- 45.9% did not respond

Of the 7.41%, exchange values were great medical care, best care team relationships, best options lowest costs, and effective outcomes

Of the 38.4%, the personal values were, e.g. cherishing everyday, information and appropriate communications, comfort, quality of life, whatever will give me integrity.

Patients Want Involvement

Figure 1. People want involvement in evidence and decisions
Bars show the percent of people surveyed who strongly agree with the statement: "I want my provider..."



A brave new world

THE PRECISION MEDICINE INITIATIVE



Precision medicine is an emerging approach for disease prevention and treatment that takes into account people's individual variations in genes, environment, and lifestyle. The Precision Medicine Initiative will generate the scientific evidence needed to **move the concept of precision medicine into clinical practice.**

www.nih.gov/precisionmedicine

The **time is right** because of:

Sequencing of the human genome



Improved technologies for biomedical analysis



New tools for using large datasets

