

# Value in Cancer Care

## Achieving Patient Centered Care in Today's Environment

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### **ASCO's Efforts to Lower Costs and Increase Value**

- Supporting evidence-based medicine: Guidelines
- Participating in & promoting "Choosing Wisely"
- Commitment to quality improvement: QOPI
- Working with payers: Integration of meaningful quality measures into reimbursement decision-making
- Cultivating a learning healthcare system: CancerLinQ
- Establishing clinically meaningful outcomes in cancer research
- Payment reform
- The Value in Cancer Care Task Force



## A Closer Look at Two Major ASCO Efforts to Address Value in Oncology

### **Payment Reform**

### Value Task Force

## Consolidated Payments for Oncology Care (CPOC)

#### • Flexible payment

- Patient centered
- Better match to services we provide to patient needs
- Simpler billing structure
- More predictable revenue
- Incentivize high quality, highvalue care
- Support coordinated, patientcentered care



# **Components of CPOC**

- The Quality Oncology Practice Initiative
- A Chemotherapy Management Fee
- Value Based Pathways
- Monthly Episodes of Care/Bundled Payments
- Care coordination/ Patient centered Medical Oncology Home

### **Current vs. Proposed Payments**

E&M (new patient) E&M (established patient) Consultations Chemotherapy administration / therapeutic injections / hydration



- New patient payment
- Treatment month payment
- Transition of treatment payment
- Active monitoring month payment

6% of ASP+6% could be folded into treatment month payments once an alternative to buy and bill is developed and sufficiently tested.

Continued FFS payments for lab tests, bone marrow biopsy, transfusion, portable pumps (and likely more)

### **Additional Payment Adjustments**

- Quality measures phased in over time
- Pathways, two stages:
  - Adherence
  - Use of certified pathways
- Resource utilization
  - OMH
  - ER and hospital admissions
- Clinical Trials
  - Higher treatment month and non-treatment month payments for enrolled patients



# **Moving Forward**

Ongoing testing/refinement of the model

• Seeking feedback on model from ASCO members and others in the cancer community

• Discussions with Congress and CMS

# What is "Value"?



"the regard that something is held to deserve; the importance, worth, or usefulness of something."

Benefit(s)

Value = -----

(Financial Cost + Non-financial Cost)

### **ASCO Value in Cancer Care Task Force**

- Established in 2007 as the Cost of Care Task Force to define the challenges related to the cost of cancer care and develop strategies to address these challenges in the context of ASCO's mission
- Reframed by ASCO Board in 2013 to focus on Value
- Goals:
  - Increase physician education and guidance about cost
  - Increase patient education and assistance regarding cost
  - Promoting high-value medical decision-making
  - Assuring value care

### ASCO Value in Cancer Care Task Force

- Lowell Schnipper, MD- Beth Israel Deaconess Medical Center
- Doug Blayney, MD- Stanford University
- Joseph Bailes, MD
- Diane Blum, MSW
- Nancy Davidson, MD- University of Pittsburgh Cancer Institute
- Adam P. Dicker, MD, PhD- Thomas Jefferson University
- Patricia A. Ganz, MD- University of California Los Angeles
- J. Russell Hoverman, MD, PhD- Texas Oncology, P.A.
- Robert Langdon, MD- Oncology Hematology West, P.C.
- Allen Lichter, MD- ASCO
- Gary Lyman, MD- Fred Hutchinson Cancer Center

**Neal J. Meropol, MD-** Case Medical Center

**Therese Mulvey, MD-** Southcoast Centers for Cancer Care

Lee Newcomer, MD- United Healthcare

Jeffrey Peppercorn, MD- Duke University Cancer Center

Blase Polite, MD- University of Chicago

**Derek Raghavan, MD, PhD-** Levine Cancer Institute

Gregory Rossi, PhD- AstraZeneca UK

**Leonard Saltz, MD-** Memorial Sloan Kettering Cancer Center

**Deborah Schrag, MD-** Dana Farber Cancer Institute

**Richard Schilsky, MD-** American Society of Clinical Oncology

**Thomas Smith, MD-** Johns Hopkins University

### **Physician Education**

- Goal: To develop educational resources to assist oncologists and patients in addressing cost of care.
- Accomplishments to Date:
  - JCO Guidance Statement (2009)
  - JCO Statement on Individualized Care for Patients with Advanced Cancer (2011)
  - Robust offering of sessions at ASCO meetings
  - ASCO University webinar course



### **Patient Resources**

 Goal: To develop decision-making and communication tools to help patients ask questions about cost, understand the realities of the cost involved and interpret cost-benefit.

#### Managing the Cost of Cancer Care

#### **Patient Information Booklet**

An easy-to-read booklet to help patients start and guide a conversation with their health care team about coping with costs of cancer care. For distribution to patients in the office setting as well as online.



ASCOS\* American Society of Clinical Oncology Making a world of difference in cancer care

Managing the Cost of Cancer Care

**Practical Guidance for Patients and Families** 

Cancer Net

## Choosing Wisely Campaign: ASCO's "Top 5" Lists for Oncology

- ASCO has issued two "Top Five" lists of interventions that should be questioned because they are frequently practiced but not evidence-based
- Examples:
- Cancer directed therapy in patients with low performance status
- Imaging in early-stage prostate cancer with low risk of metastasis
- Use of white cell stimulating factors to prevent febrile neutropenia in patients with < 20% risk</li>



## **ASCO's Value Framework**

- Designed to support shared decision making between doctor and patient
- Will provide information about three primary parameters: Clinical Benefit, Toxicity, and Cost
- Goal is to develop tool that can customize information for each patient (importance of side effects vs. clinical benefit, out of pocket cost and other personal considerations, etc)
- Draft model shared in series of stakeholder (patient advocates and industry) meetings in August
- Refined model to be shared for public comment in early 2015

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