2018 Cancer Concerns of United States Health Plans

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BACKGROUND

- Cancer is costly and managed by a variety of treatments that include: traditional and robotic surgery, radiation, chemotherapy, and immuno therapy
- Pharmaceutical treatments for cancer are shifting from chemotherapy, with limited effectiveness and multiple side-effects, to effective, targeted immunotherapies with fewer side-effects, multiple treatment pathways with indications alone and in combination, and receiving fasttrack approvals
- In 2017, 11 novel (move than the 7 in 2016) therapies for cancer were approved by the US Food and Drug Administration ¹ including agents
- o Non-Small Cell Lung Cancer (brigatinib and durvalumab)
- o Acute myeloid leukemia (AML) with mutations (ostaurin)
- o Breast cancer: HER-2 positive (abemaciclib and neratinib) and HER-2 negative (abemaciclib)
- o Rare diseases such as Market cell carcinoma, and complications associated with cancers, relapsed or refractory B-cell precursor acute lymphoblastic leukemia; relapsed follicular lymphoma and maintenance therapies for ovarian, fallopian tube or primary peritoneal cancer
- New trends in the development of anticancer drugs include: immunotherapies, monoclonal antibodies, adoptive-cell therapies, and new vaccines¹
- Cancer care is an iterative process with significant off label use
- To help support the new tests and therapies, guidelines are published in the US by organizations including:
- o The National Comprehensive Cancer Network (www.NCCN.org)
- o The American Society of Clinical Oncology (www.ASCO.org)
- o The Association for Value Based Cancer Care (www.avbcconline.org)
- o The Society of Surgical Oncology (www.SurgOnc.org)
- o The American College of Radiology (www.ACR.org)
- o The Society of Gynecologic Oncology (www.SGO.Org)
- Increased patient survival from various cancers has resulted in new diagnostic tests and therapies to manage maintenance and follow-up care for survivors¹
- Based on recent programs with US payors, Medical Directors, and sponsors (pharmaceutical companies, medical device, and health technology companies), the authors and their organizations decided to conduct a survey of Medical and Pharmacy Directors involved with P&T Committees on cancer-related topics

OBJECTIVES

- This study sought to survey Medical and Pharmacy Directors of US payors representing: health plans, insurers, employer groups and Pharmacy Benefit Managers (PBMs)
- The survey focused on the management of:
 - Top cancer concerns
 - Policies regarding diagnostic and genetic tests for cancer
 - Coverage of agents used to treat cancers and the use of Specialty Pharmacies for cancer therapies
- Compare current results with results from prior surveys

METHODS

 To determine the types of cancers most concerning to US managed care plans, a survey invitation was sent to Medical and Pharmacy Directors (MDs+PDs) working with US health plans, insurers, and PBMs

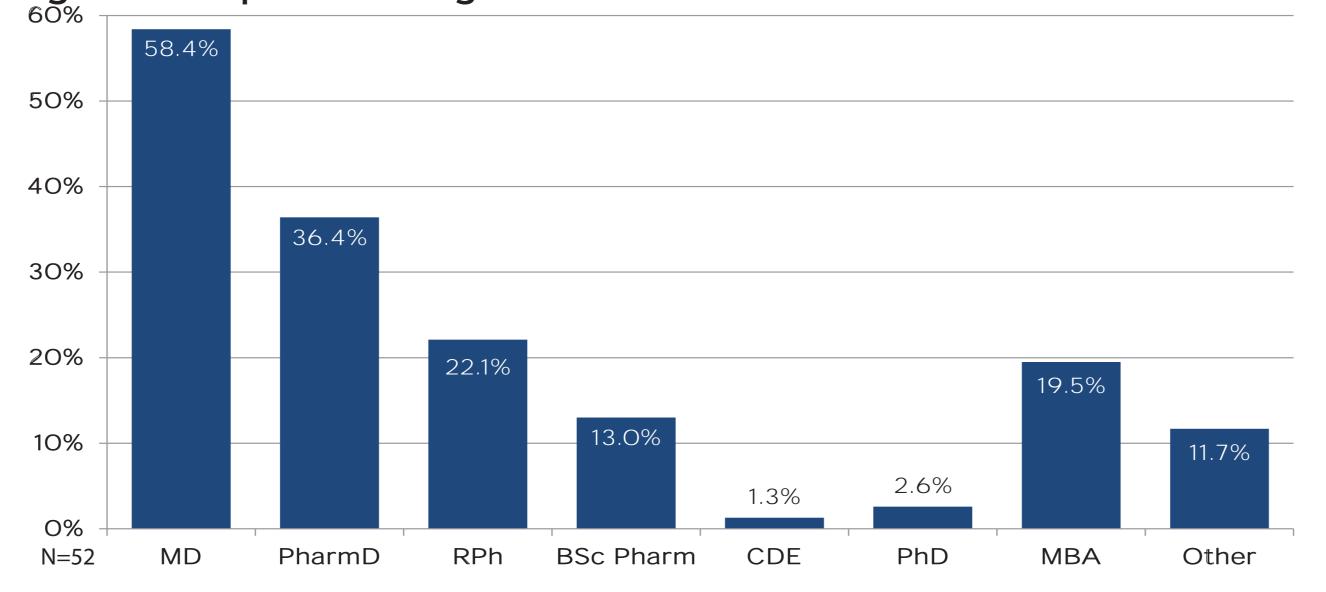
METHODS CONTINUED

- An online, interactive survey was developed with 69 questions and included:
- o Yes / No questions
- o Lists for users to select single or multiple answers
- o Open-ended responses (i.e., what disease states most concern you?)
- o Invitations to participate were sent to Medical and Pharmacy Directors from the PG-NPRT database in November 2017
- o Material or financial incentives were not offered for completion of the survey
- Topics included:
- o Plan coverage:
- Geographical coverage
- Types of lives
- o Coverage of cancer medications:
- Under the Medical or Pharmacy benefit
- Coverage of genomic tests for cancer
- Types of cancer most concerning to them
- Ranking (highest=1 to lowest=13) of cancer types
- Top concerns today and in 5 years from budgetary and medical points of view
- Current results were compared with prior surveys
- Survey invitations were received and reviewed by 247 managed care decision makers

RESULTS

- A total of 77 respondents (31.2% response rate) completed the survey o Some questions were not answered by all respondents
- Many respondents reported multiple degrees (Figure 1), and the most common degree was MD (57%). 86% of the respondents were involved in formulary decisions

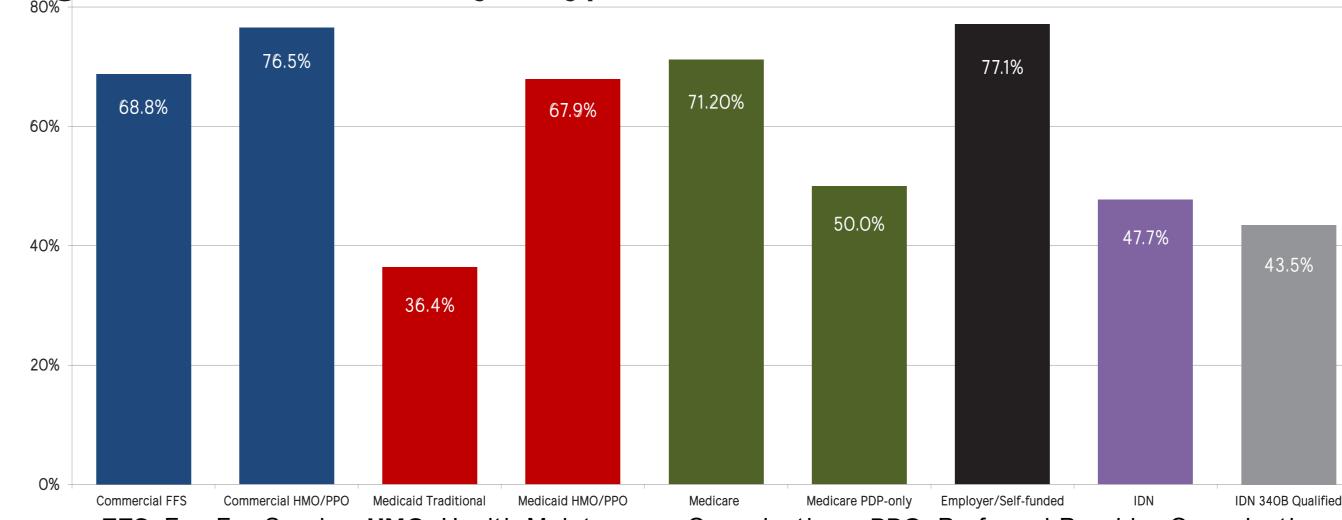
Figure 1: Respondent Degrees



- The most commonly reported respondent titles were: Chief / Senior Officer (43%), Payor specific (19%), Regional (8.9%), or therapeutic area specific (1.3%)
- 40.5% worked for health plans, 11.4% PBMs, 8.9% Integrated Delivery Networks (IDNs), 3.8% for Preferred Prescriber Organizations (PPOs) / Independent Provider Associations (IPAs), 1.3% for the Government, the remainder consultants
- 39.2% of plans were national=39.2%, 27.5% were regional and 33.3% were local
- Plans could cover multiple types of members (Figure 2)

RESULTS CONTINUED

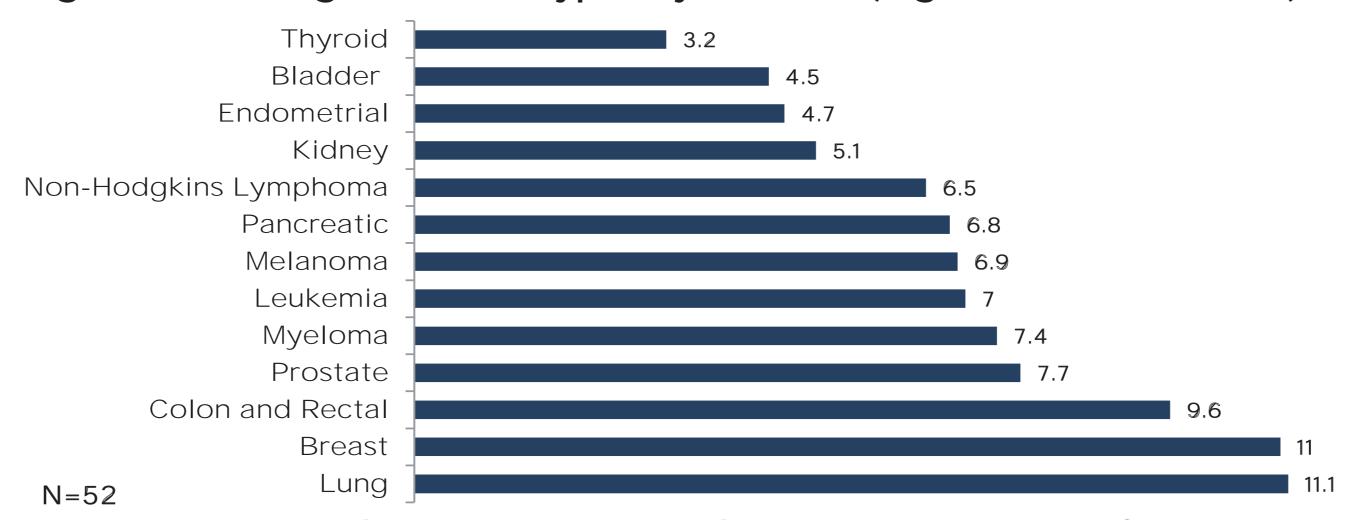
Figure 2: Advisor Plan Payor Types



FFS=Fee For Service; HMO=Health Maintenance Organizations; PPO=Preferred Provider Organization: Medicare=Care for the aged and special populations; Medicaid=Care for the poo

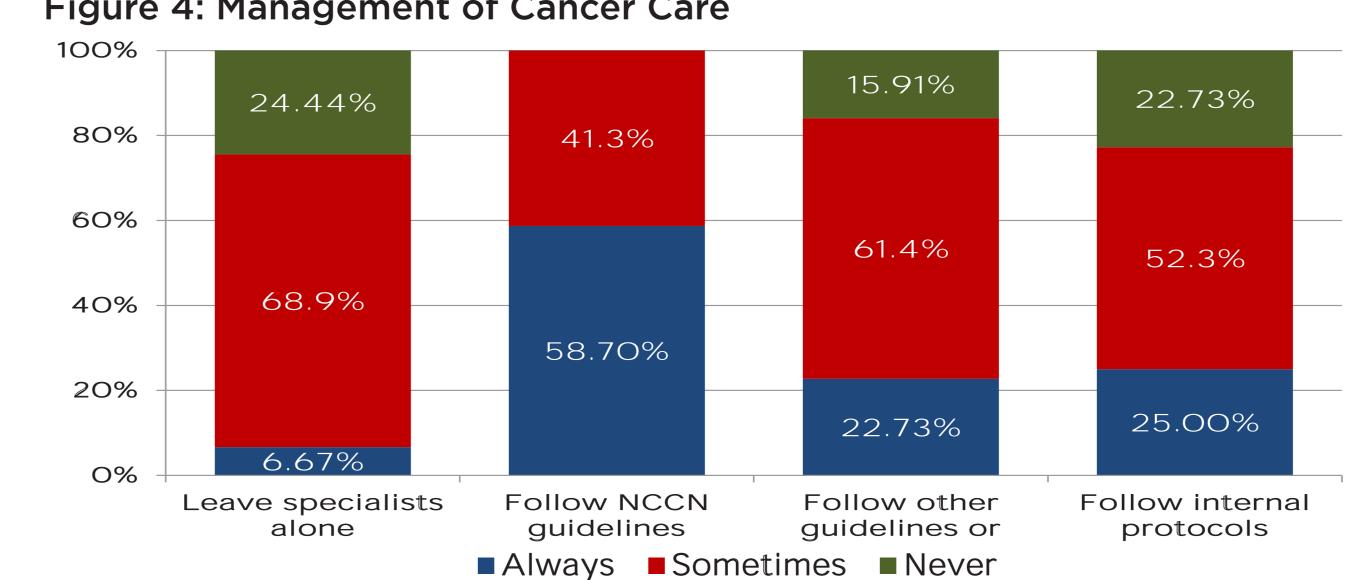
- 47.5% of respondents reported they participated in an Oncology Accountable Care Organization or Disease Management Organization (ACO or DMO) compared with 34.1% last year
- Cancer was tied for the third highest ranked Specialty Pharmacy condition covered by 87.7% of plans in 2017 (compared with 84.4% in 2016 and 64.3% in 2015)
- Similar to last year, lung cancer and breast cancer were the highest concerns and thyroid cancer was the least (Figure 3)
- o Increasing were: Non-Hodgkins Lymphoma, from 9th to 4th" and Bladder from 12th to 11th
- o Decreasing were "Prostate cancer from 4th to 5th, Myeloma from 5th to 7th, Pancreatic from 8th to 9th" and Endometrial from 11th to

Figure 3: Ranking of Cancer Types by Concern (highest=1 to lowest=13)



 Plans reported managing cancer therapies in a variety of ways as shown in Figure 4 (N=45)

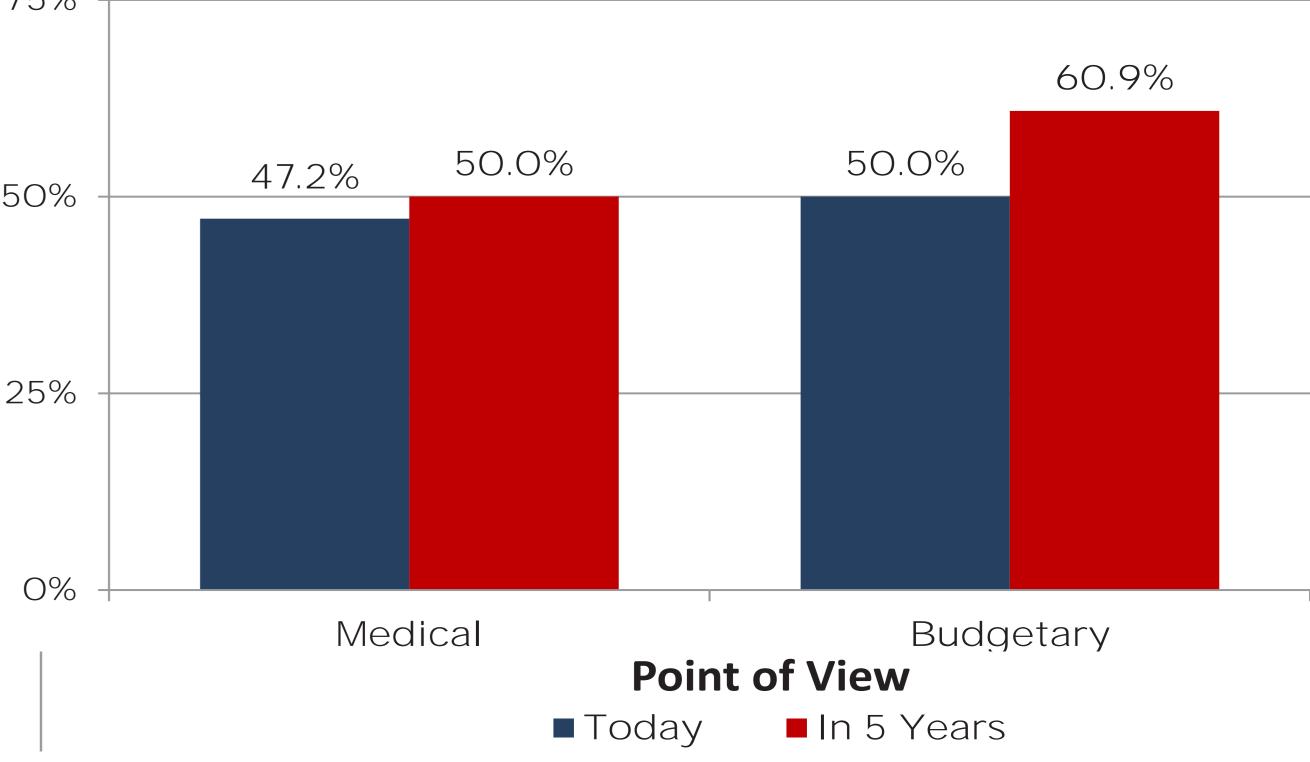
Figure 4: Management of Cancer Care



RESULTS CONTINUED

- Oncology genomic tests were covered by 87.7% of plans (compared with 90.2% last year)
- Cancer/oncology was consistently reported the top concern from medical and budgetary points of view (Figure 5)
- Compared with last year's survey, the percent citing cancer/oncology as a top concern from a:
- o Medical point of view in 2016 decreased from 50%, in 5 years (2021) increased by 7.5% from 42.5%
- o Budgetary point of view in 2016 increased 14.3% (from 35.7%) and in 5 years (2021) increased by 3.4%

Figure 5: Percent of Respondents Identifying Cancer as a Top Concern



CONCLUSIONS

- There is an increased emphasis in Oncology care management by ACOs and DMOs
- Cancer therapy is shifting from traditional chemotherapies toward targeted immunotherapies
- The potential cost implications of these new therapies require payors and Medical and Pharmacy Directors to adapt and evaluate these newer agents and pathways along the same rapid timelines as they become available

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Advancing Health Through Innovation: 2017 New Drug Therapy Approvals. US Food and Drug Administraion. January 2018. Available through www.FDA.gov accessed April 22, 2017



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