

UNITED STATES HEALTH PLAN CANCER CONCERNS IN 2019

Richard A. Brook, MS, MBA^{1,2}; Jim E. Smeeding, RPh, MBA¹; Jeff A. Carlisle, BA¹; Michael J. Sax, PharmD¹
¹TPG-NPRT, Glastonbury, CT, USA; ²Better Health Worldwide, Newfoundland, NJ, USA



The TPG-National Payor Roundtable (TPG-NPRT) focuses on market access programs within the United States, is a subsidiary of The Pharmacy Group, and maintains a database of Chief Medical Officers and Chief Pharmacy Officers in the United States.



Better Health Worldwide provides evidence-based research and support to the healthcare industry. We partner with pharmaceutical and device manufacturers to develop and conduct domestic and international clinical-based advisory board programs, conduct retrospective research and communicate findings with an emphasis on outcomes, absenteeism and the impact of conditions on caregivers.

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 fast-track approvals
- The onslaught of newer Oncology therapies increased health plan economic concerns
- Coinsurance and benefit limitations can leave a patient in “Financial” Toxicity but these newer agents produce outcomes that justify coverage
- Efforts utilizing Immuno-Oncology such as chimeric antigen receptor (CAR)-T (gene) therapy and tumor agnostic treatments specifically directed at cancers that contain certain molecular signatures are revolutionizing chemotherapy
 - In early 2019 there were 165 CAR-T therapies in trials and 3 marketed tumor agnostic drugs used in combination with other oncology agents
- 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 the:
 - National Comprehensive Cancer Network (www.NCCN.org)
 - American Society of Clinical Oncology (www.ASCO.org)
 - Association for Value Based Cancer Care (www.avbcconline.org)
 - Society of Surgical Oncology (www.SurgOnc.org)
 - American College of Radiology (www.ACR.org)
 - 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 Pharmacy and Therapeutics (P&T) Committees on cancer-related topics

OBJECTIVES

- To determine oncology areas that are most concerning to managed care plans

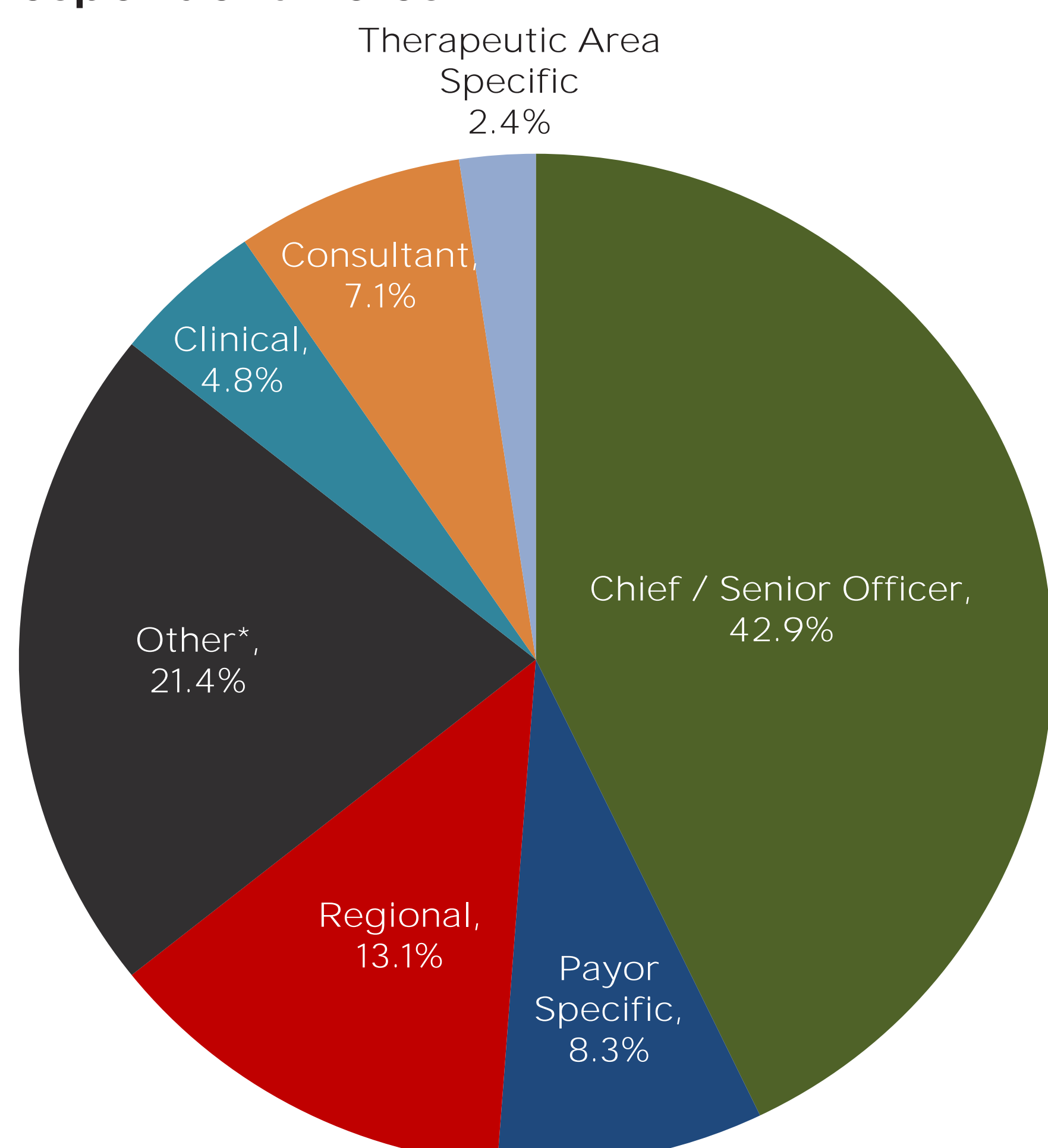
METHODS

- An online interactive survey invitation was sent to senior officers of US health plans and PBMs covering: officer+plan information, cancer ranking (lowest=1-to-13=highest), copays, benefit design, cancer management, concerns today and in 5 years from budgetary and medical points of view (POV)
- Results compared with prior surveys

RESULTS

- A total of 85 respondents working for Health Plans, IDNs, ACOs, PPOs and SPs completed the survey
- 36.9% worked for health plans, 13.1% PBMs, 9.5% Integrated Delivery Networks (IDNs), 2.4% for Preferred Prescriber Organizations (PPOs) or Independent Provider Associations (IPAs), 1.2% for the Government, the remainder consultants
- 29.9% of plans were national, 24.7% were regional, and 22.1% were local
- Plans could cover multiple types of members:
 - Employer/Self-funded=79%
 - Medicaid (Traditional=27.8%, HMO/PPO=72.3%)
 - Commercial (58.6%=FFS, 77.8%=HMO/PPO)
 - Medicare (71%,PDP-only=51%)
 - IDN (43.6%, 340B Qualified=43.8%)
- The respondents’ roles are shown in Figure 1

Figure 1: Respondent Roles



N=84

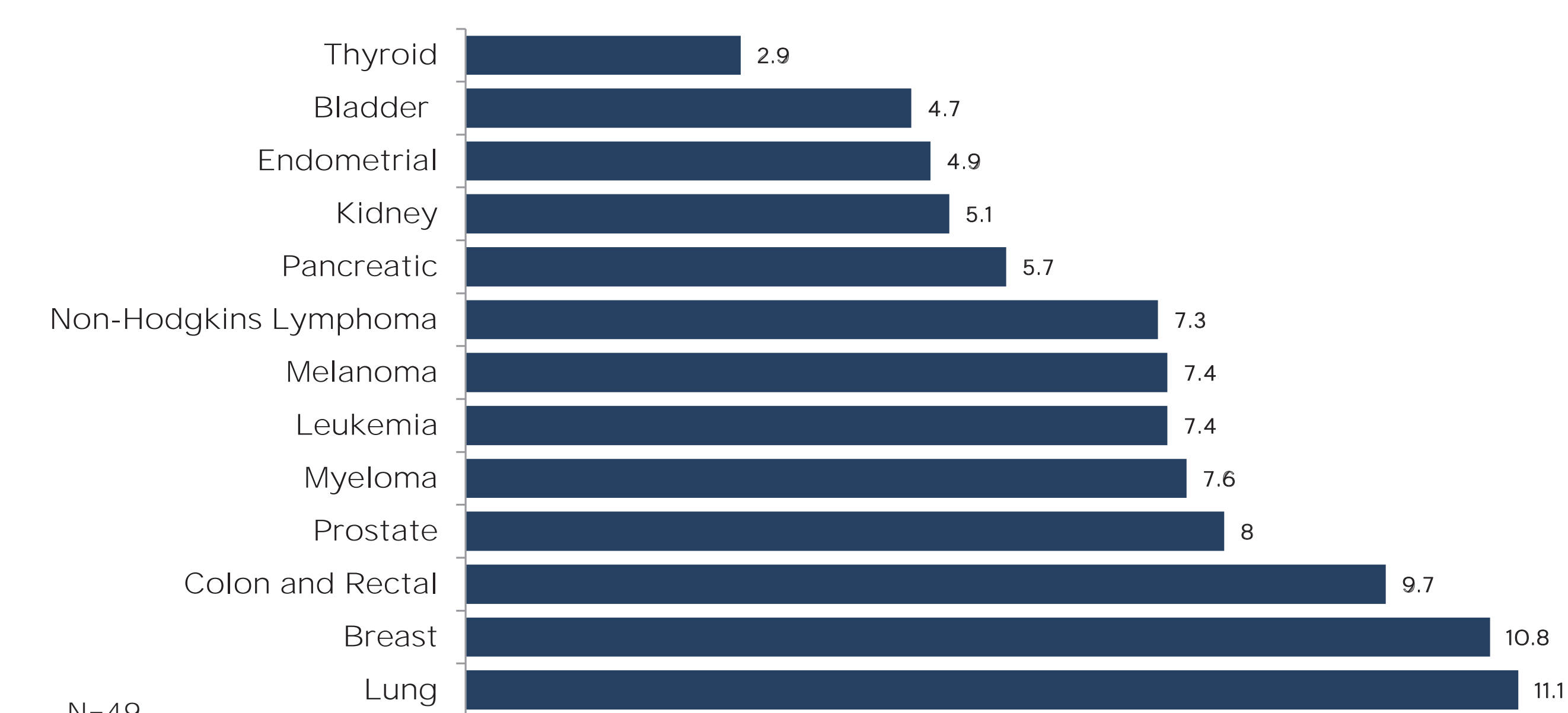
* Other includes: Senior Management, HEOR, Researcher, and various other titles

- 51.2% of respondents reported they participated in an Oncology Accountable Care Organization or Disease Management Organization (ACO or DMO) compared with 47.5% last year
- Oncology was the 3rd highest ranked Specialty Pharmacy condition covered 85.3% (↑3.5%)

RESULTS CONTINUED

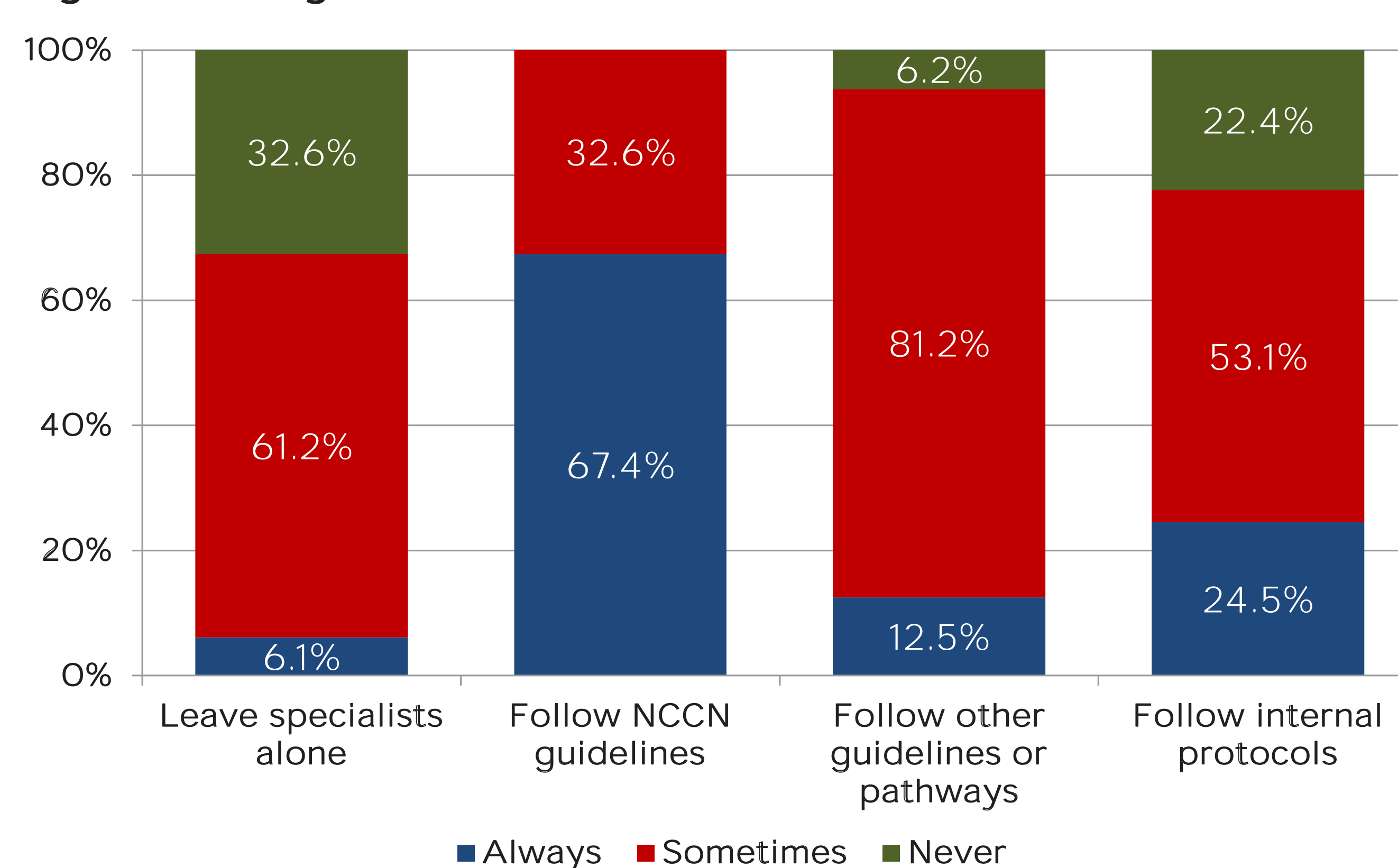
- The rankings of Cancer types by concern are shown in Figure 2:
 - Similar to last year, lung cancer and breast cancer were the highest concerns and thyroid cancer was the least
 - Non-Hodgkins Lymphoma increased from 9th to 8th, changing places with Pancreatic Cancer (decreased from 8th to 9th)
 - The remainder did not change from last year

Figure 2: Ranking of Cancer Types by Concern (lowest=2.9 to highest=11.1)



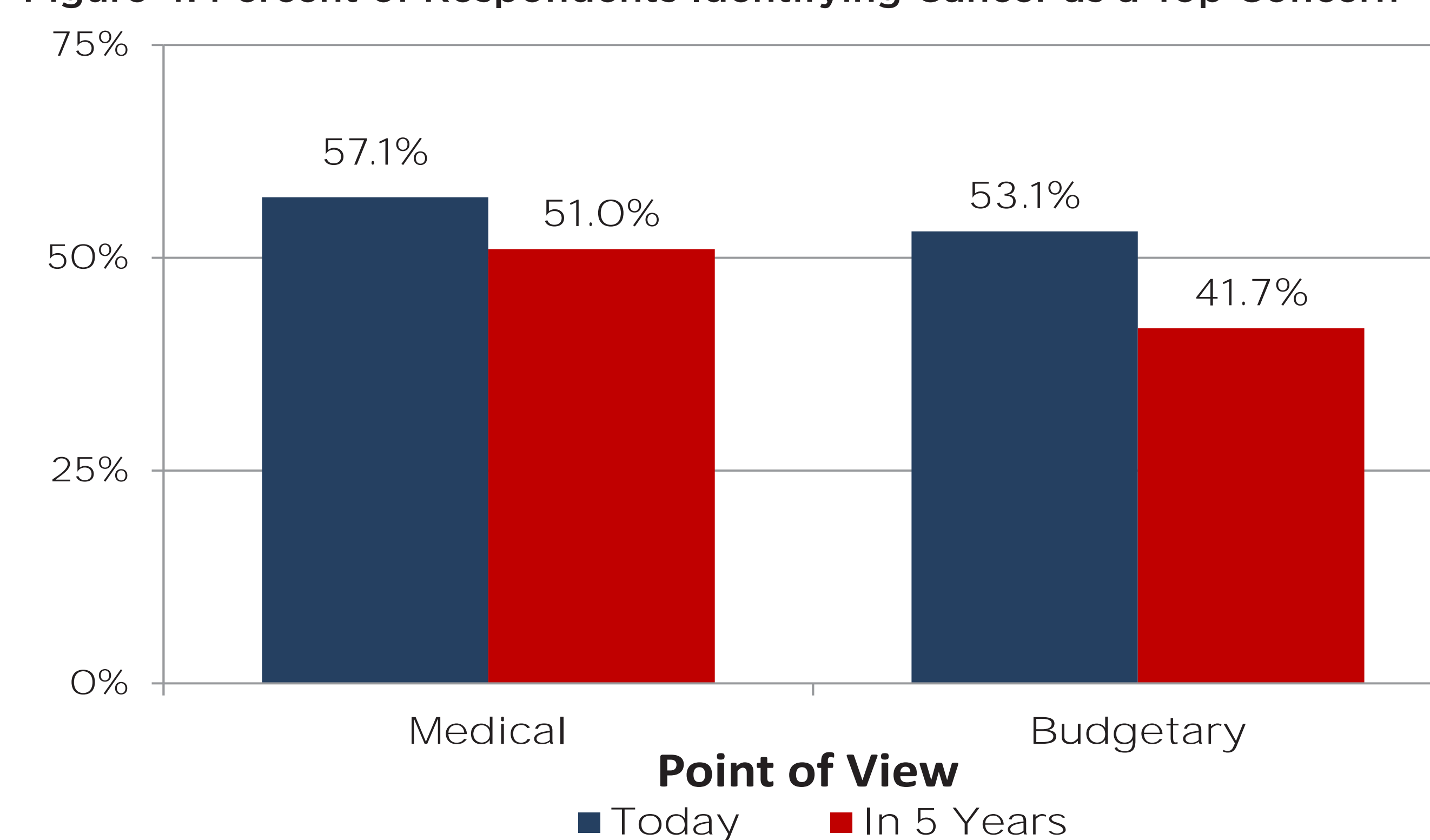
- Plans reported managing cancer therapies in a variety of ways as shown in Figure 3 (N=49)

Figure 3: Management of Cancer Care



- 88.5% of plans covered Oncology genomic tests and 13.8% used Value-Based Contracting (VBC) for Oncology
- Cancer/Oncology was consistently reported the top concern from medical and budgetary points of view (Figure 4)
- Compared with last year’s survey, the percent citing cancer/oncology as a top concern from a:
 - Medical point of view in 2018 increased from 47.2%, in 5 years (2023) increased from 50%
 - Budgetary point of view in 2018 increased from 50%, in 5 years (2023) decreased from 60.9%
 - The drop in future budgetary concerns was due to increased concern for Diabetes, Alzheimer’s Disease, and Rare diseases
- Oncology outranked other newer expensive therapies as a financial concern
 - Combination oncology therapy was ranked first=68%
 - CART-T second 35.3%

Figure 4: 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
- Constant improvements in Oncology agents and the movement to Immuno-Oncology has great cost implications that require plans to focus on benefit design, adopt newer agents and utilize pathways

REFERENCES

¹ Advancing Health Through Innovation: 2018 New Drug Therapy Approvals. US Food and Drug Administration. January 2019. Available through www.FDA.gov accessed April 26, 2019



Citation: Brook RA, Smeeding JE, Carlisle JA, Sax MJ. United States Health Plan Cancer Concerns In 2019. *Value Health*.2019;21(5): In Press. Available at www.TPG-NPRT.com

SPONSORSHIP: TPG-National Payor Roundtable

Presented at the International Society for Pharmacoeconomics and Outcomes Research (ISPOR) 24th Annual International Meeting, New Orleans, LA May 18-22, 2019