CANCER TREATMENT PATHWAYS

DRIVING VALUE AND QUALITY IN CANCER CARE
WHO WE ARE

Leading Specialty Benefit Management partner to the Blues

42M
Covered Lives

50
Health Care Organizations

96%
Provider Satisfaction

5M
Case Reviews per Year

40%
Fortune 50 Companies

330,000
Ordering Physicians

1,000
Peer-to-peer discussions daily

79
Board-certified primary care and specialty physician reviewers

+100
Medical subspecialties are represented by physician reviewers

Headquarters
Chicago, IL
CASE STUDY

AIM Oncology Solution

KEY POINTS WE’LL COVER

1. Challenges in cancer care and the opportunity to transform

2. How our program leverages value-based reimbursement to support oncology practices and patients

3. What we’ve learned
Challenge: how can patients, employers and health plans afford quality cancer care?

- Care is getting more complex...
  - ...and health plans aren’t certain their members are receiving appropriate care

- Community practices are closing...
  - ...while hospitals are less convenient and more expensive

- Cancer drugs are getting more expensive...
  - ...regardless of the setting where they are administered
2013

Institute of Medicine report recommends measures to improve quality and affordability of cancer care

Charting a new course for cancer care
NEW COST

New cancer drugs are becoming more expensive

8 new cancer treatments approved by FDA in 2014

- **2**
  - May extend survival by more than a median of 6 months
- **1**
  - Survival Extended by only 4 to 6 weeks
- **$23,000**
  - Average cost of treatment per month

VARIATION

The quality of cancer care is uneven

Not aligned with best practice
1 in 3 regimens not consistent with medical evidence

Unnecessary hospitalizations during treatment
due to avoidable side effects

Unneeded tests and treatments
put patients at risk and impose additional care burden and cost
Cancer care must change to a model that is value-based and patient-centered.

**ASCO:**
It is the position of ASCO that oncologists should make informed decisions regarding the value of care, understanding both the most accurate and up-to-date information on benefits and costs to patients and society.

**ESMO:**
The value of any new therapeutic strategy or treatment is determined by the magnitude of its clinical benefit balanced against its cost.

Source: Schnipper LE, J Clin Oncol, PMID: 26101248
Cherny NI, Ann Oncol. 2015, PMID: 26026162
SOLUTION
Align incentives for better value

OUR MODEL:
Cancer treatment pathways
Enhanced reimbursement
Synchronization with health plan medical policy
Jennifer

- 32 years old
- Diagnosed with Stage II ER+/HER2+ right breast cancer during pregnancy
- Plan is for neoadjuvant therapy
- Her academic regional care physician is choosing therapy to follow four cycles of adjuvant chemotherapy
Personal Health Information is protected.
“Jennifer” is a fictional identity.

P A T I E N T   E X P E R I E N C E

Jennifer

Considerations
Common treatment choice of oncology: TH+P
More appropriate, high value choice: TH (without P)

Our approach
Partner with health plan and oncologists to encourage optimal treatment through cancer treatment pathways and value-based reimbursement
Promoting high-value, high-quality oncology care

- Care that is not evidence-based
- Evidence-based Medicine
- Optimal Treatment
We have developed a comprehensive set of proprietary yet public pathways considering efficacy, toxicity, and cost.

### Possible Regimens

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<th>Clinical Evidence &amp; Compendia</th>
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**AIM Pathways Promoted (Optimal Treatments)**:

- 4
- 5
Drug margin income pays for patient support resources

- Net drug, infusion: 32%
- Net drug, point-of-care pharmacy: 3%
- Evaluation & management: 18%
- Infusion: 3%
- Imaging: 15%
- Laboratory: 10%
- Clinical trial: 3%
- Other medical: 1%
- Non-medical: 2%

Source: Barr TR, J Oncol Pract. 2014, PMID: 25398959
ENHANCED REIMBURSEMENT

Supports quality, cost-effective care

**S0353**
reimbursed once at the onset of treatment

**S0354**
reimbursed no more than monthly while managing care for an established patient
EXAMPLE

How enhanced reimbursement supports practices

Pathway regimen selection offers enhanced reimbursement (s-code) that can offset higher revenue associated with more expensive regimen.
PROVIDER ENGAGEMENT

Proactive outreach to key stakeholders

Key audiences
- Medical societies, national and local
- Cancer advocacy groups
- Oncology practices
- Media

Multiple communications channels
- Live presentations and webinars
- Mail and email campaigns
- Dedicated program website
- Network management representatives
- AIM oncology team and contact center

Ongoing updates and training
- Program changes such as new pathways
- Individual practice training sessions
Average time to enter request is 2-3 minutes

**PROCESS FLOW**

**CLINICAL REQUEST**
Enter entire regimen, along with other patient clinical information via the AIM ProviderPortalSM

**TREATMENT REVIEW**
Treatment request reviewed in real time to determine:
- Alignment with health plan medical policy
- Alignment with medical evidence
- Availability of Pathways regimen

**DECISION RENDERED**
Immediate approval is granted if consistent with plan medical policy
- Clinical experts available as necessary for peer-to-peer discussion
- Notified if Pathways option available

**PATHWAY ADHERENCE**
Your practice authorized to bill S0353 and S0354 for Treatment Planning and Care Coordination when regimen is on pathway
MEMBER BENEFITS

Improved quality care from their provider and support from their health plan

- Better outcomes
- Lower cost of care
- Less out-of-pocket expense
- Improved care management
Encourages and rewards pathway adherence

- Supports shift to value-based reimbursement
- Aligns reimbursement with best practices
- Provider participation is encouraged, but not required
- Greater patient satisfaction
- Profiling and benchmarking performance
Collaboration produces greater stakeholder value

- Reduced variation in care lowers overall cancer costs
- Fewer emergency room claims, hospitalizations and shorter length of stay through better supportive care
- Leveling of medical trend and payment reform
- Better quality cancer care
- Greater customer satisfaction
RESULTS

Wide market acceptance

“Your approach is a kinder, gentler approach”

– National Patient Advocacy Organization

“We love the portal, it’s easy to use. We enter all our cases this way.”

- Oncology Practice

“Creative – what you’re doing is leading edge.”

“Huge change in practice”

– National Industry Organization and International Scientific Society
Attracting positive media attention

“‘Best Drugs, Best Protocols’...these efforts have the potential to transform the way doctors practice medicine.”

WALL STREET JOURNAL

“A program that incentivizes oncologists to use the most effective – and most cost-effective – drug”

Bloomberg

“Early results from cancer care quality program shows promising future”

FierceHealthPayer
IMPACT Pathway adherence

PREDICTED PRE-PROGRAM: 35-40%

CURRENT AVERAGE: 65%

GOAL AT PROGRAM MATURITY: 80%
Tips for success

1. Market awareness and acceptance is critical
2. Oncologist involvement creates credibility
3. Collaboration and partnership necessary
4. Consider integrating management of related areas of care
Program evolution

**Increased program adoption**
- Robust data analysis and reporting
- Enhanced engagement resources

**Expansion to address cancer care continuum**
- Palliative care
- Genetic testing
Questions?