Impact of Enhanced Reimbursement on Provider Participation in a Cancer Care Quality Program and Adherence to Cancer Treatment Pathways in a Commercial Health Plan

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BACKGROUND

The Anthem Cancer Care Quality Program was designed to align the practice patterns of oncologists with evidence-based treatments and improve patient outcomes. This economic reality places a significant financial strain on oncology practices, and further, existing cross-sectional evidence suggests that measurable improvements in patient outcomes, quality, and cost for tumor-specific care have been realized through practice guideline implementation.

METHODS

The Anthem Cancer Care Quality Program was implemented across the nation in June 2012. Prior to implementation, evidence-based guidelines and care protocols for selected tumor types were developed. Provider education was conducted through a variety of channels, including clinical practice guidelines, educational webinars, and site visits. Post-implementation data were obtained through a web-based electronic medical record system and claims information.

RESULTS

The majority of requests for therapy were delivered within the first two weeks of submission for review. Approximately 75% of requests for breast cancer treatment were delivered within the first month of submission. The top 5 most frequently requested regimens for breast, colon, and lung cancers were: 1. 4. TCH+P (Docetaxel, Carboplatin, Trastuzumab and Pertuzumab); 2. AC (Doxorubicin and Cyclophosphamide) followed by Paclitaxel; 3. TC (Docetaxel and Cyclophosphamide); 4. 2. FOLFOX-6 (Fluorouracil (5-FU), Leucovorin and Oxaliplatin) and Bevacizumab; 5. ECF (Epirubicin, Cisplatin and 5-Fluorouracil).

CONCLUSIONS

- The overwhelming pathology prevalent among both breast (87%) and colon cancer (92%) patients was wild-type.
- HER2 biomarkers were available among 92% of breast cancer patients, with 53%, 33%, and 3% indicating negative, positive, and equivocal results across all stages, respectively.
- 52.8% of breast cancer patients were HER2 positive.
- 8.1% of breast cancer patients were HER2 negative.
- 40% of colon cancer patients, among whom 35% of non-metastatic and 65% of metastatic patients were HER2-positive.
- The majority of patients in each cancer group (82%, 80%) had an ECOG performance status of 0 or 1 across all stages.

Table 1. Patient Characteristics

<table>
<thead>
<tr>
<th>Cancer</th>
<th>Gender</th>
<th>Age (mean ± SD)</th>
<th>Weight (lb)</th>
<th>Height (in)</th>
<th>Race</th>
<th>Ethnicity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast</td>
<td>Female</td>
<td>50 ± 15</td>
<td>150 ± 25</td>
<td>5'6 ± 3</td>
<td>White</td>
<td>Caucasian</td>
</tr>
<tr>
<td>Colon</td>
<td>Female</td>
<td>60 ± 10</td>
<td>140 ± 20</td>
<td>5'5 ± 2</td>
<td>White</td>
<td>Caucasian</td>
</tr>
</tbody>
</table>

Figure 2. Cancer Care Quality Program Admitted by AIM Specialty Health

Figure 3. Pathway: Lung Cancer Pathway

Figure 4. Cancer Type Distribution

Figure 5. Initial Pathway Adherence

Figure 6. Time from Planned Regimen Request to Therapy Administration