



Addressing the complex challenges of cancer care



The U.S. cancer incidence is high and will continue to trend up. At the same time, cancer treatments are advancing rapidly.

While these medical innovations can be lifesaving for cancer patients, the cost and complexity of these new treatments is extremely high. And the volume of new therapies, combined with a rising caseload, can make it difficult for providers to keep up with the latest evidence-based medicine.

Cancer treatment is also a complex, difficult and expensive experience for patients. Unnecessary hospitalizations and emergency department visits for cancer patients drive considerable costs. Many patients are unprepared for the challenges of cancer treatment and need better education and support.

Payers need a forward-thinking, comprehensive, integrated and specialized strategy that addresses the needs of cancer patients and providers to reduce the total cost of care and improve the care experience and clinical outcomes.



Cancer costs are on the rise

\$240B

Rising global spend on oncology therapies and supportive care drugs projected by 2023¹



Increasing number and complexity of treatments²

43

new drug indications across

42

cancer types



More cancer diagnoses³

38.4%

of Americans will be diagnosed with cancer in their lifetimes and will require lifesaving treatments

10%

increase in cancer cases by 2024⁴

Cancer Guidance Program: Utilization management for oncology treatments

The Optum® Cancer Guidance Program (CGP) is an evidence-based utilization management and analytics service for outpatient cancer treatments. CGP helps reduce medical expenses by guiding providers to select high-value, clinically appropriate chemotherapy/systemic therapy, supportive care, radiopharmaceutical and radiation oncology treatments.

The easy-to-use online prior authorization portal maximizes provider satisfaction by simplifying the request process and driving high auto-approval rates. Requests that are not auto-approved are submitted for custom review and peer-to-peer outreach from our team of medical directors. The majority of these custom requests are converted to an appropriate treatment.

With a broad set of customizable utilization management capabilities, each client can adjust their management strategy to promote regimen pathways, preferred products, optimal suppliers and correct dosage amounts. All of these capabilities drive incremental savings beyond basic utilization management while reducing provider abrasion. Our comprehensive data capture and reporting helps clients maximize these capabilities and generate additional affordability opportunities.

Cancer Support Program: Specialized care management for cancer patients

The Optum® Cancer Support Program (CSP) helps patients through some of the most traumatic and complex medical challenges they will ever face. This specialized oncology care management program delivers compassionate and value-driven service to meet the needs of each cancer patient, resulting in improved quality of life and significantly reduced expenses. Experienced cancer nurse advocates, available through phone and digital channels, help patients coordinate care, prevent and manage symptoms and side effects, and collaborate with treating physicians at every stage of the care continuum.

CSP nurses use targeted interventions during the treatment episode to help reduce costs by reducing inpatient utilization, ER visits and unnecessary end-of-life treatments and increasing hospice care. Our growing digital capabilities, such as a patient-facing online platform and texting capabilities, capture patient-reported outcomes and allow us to respond to patient needs in real time.

CGP results

5-10:1
ROI⁵

60+
provider NPS⁶

29M
members and **450K cases**
managed annually⁷

CSP results

60+
consumer NPS

6%
reduction in hospitalizations
leading to **\$0.63 PMPM**
cost savings⁹

96%
patient satisfaction rate
with care manager¹⁰

Cancer Resource Services: Centers of Excellence for complex cancers

Optum® Cancer Resource Services (CRS) is designed to deliver better outcomes at reduced costs by providing access to a national network of quality cancer centers. The program focuses primarily on rare and complex cancers for which practice variability and expenses tend to be high and can also be used for any type of cancer care.

CRS providers are rigorously qualified on an annual basis by experienced medical directors, quality review specialists and advisory panels. Providers are rated on their expertise, quality, experience and processes, as well as additional data sources such as patient satisfaction surveys and quality improvement initiatives as part of the qualification process.

Provider value-based care

Optum offers a pay-for-performance model that allows providers the opportunity to earn incentive payments based on adherence to Cancer Guidance Program pathway regimens, and quality of care targets based upon nationally recognized guidelines from ASCO, NQF and CMS (e.g., advanced care planning, palliative and hospice care, and unnecessary ER/IP utilization).

Optum oncology clinicians proactively engage with providers to deepen their understanding and acceptance of evidence-based clinical recommendations, build trusted relationships with provider practices to assess and improve their cancer care capabilities, and report on provider performance against quality metrics.

CRS results

25%+
average savings using a COE¹¹

50K
members served since 2001¹²

97%
satisfaction with RN¹³

Learn more about how Optum oncology solutions can help reduce medical expenses and improve the cancer care experience.

1-866-427-6845

engage@optum.com

optum.com

1. Dagenais G, Leong D, Rangarajan S, et al. Variation in common diseases, hospital admissions, and deaths in middle-aged adults in 21 countries from five continents (PURE): A prospective cohort study. *The Lancet*. 2019;395(10226):785-794.
2. Optum book of business analysis as of June 2020.
3. Ibid.
4. Advisory Board. Oncology 2021 Market Trends Presentation. Estimates are based on the CDC USCS database.
5. 2018-2019 Optum book of business analysis for commercial and Medicaid client populations vs. competitor programs. Medicaid analysis: Nov. 2018-Aug 2019, for Medicaid client with membership across 11 states. Reviewed states managed by CGP for a specific client vs. those without prior auth. Assumes 6.78 months of treatment. Costs are based on per diseased member per month (PDMPM). Commercial analysis: 2018-2019 Optum CGP program results vs. competitor program for commercial ASO population. Jan 2019: Optum client had a different vendor in place and Optum assumed UM in Feb 2019. Costs are based on per treated member per year (PTMPY).

6. Provider NPS based Optum CGP book of business analysis, September 2020.
7. Optum CGP book of business analysis, July 2021.
8. Optum Healthcare Economics outcomes analysis of patients engaged in CSP in 2017.
9. Ibid.
10. Optum CSP book of business, Consumer Health Survey, FY 2020.
11. Optum CRS book of business analysis, FY 2020.
12. Ibid.
13. Optum CRS book of business, Consumer Health Survey, FY 2020.



optum.com

Optum is a registered trademark of Optum, Inc. in the U.S. and other jurisdictions. All other brand or product names are the property of their respective owners. Because we are continuously improving our products and services, Optum reserves the right to change specifications without prior notice. Optum is an equal opportunity employer.

© 2023 Optum, Inc. All rights reserved. WF9439560 02/23