

## Cancer Guidance Program



### Growing cancer complexity results in greater medical spend

The number and complexity of cancer treatments is rapidly increasing. This creates a challenge for payers to effectively manage cancer medical costs, which are projected to increase to \$158B–\$173B by 2020.<sup>1</sup>

More than 30 cancer drugs have been approved by the FDA since 2017. This brisk pace of approval of new, often expensive therapies has also made a substantial impact on the standard of care as new clinical data emerges. For example, the National Comprehensive Cancer Network's guidelines for lung cancer were revised five times in one year.<sup>2</sup>

These trends have made it difficult for providers to stay current on evidence-based treatments and optimal site of service, adding medical expenses for payers and employers. Nearly 80% of the chemotherapy utilization increase for a large payer client was the result of eight new and expanded in-use chemotherapy drugs.<sup>3</sup> Focus is needed to address the unique challenges associated with appropriateness of care for each cancer type. A rigorous, evidence-based oncology program is essential to control costs.

### Guide providers to better outcomes

The Optum® Cancer Guidance Program (CGP) is an evidence-based cancer treatment, utilization management and analytics service that helps reduce medical expenses associated with a range of high cost, complex cancer treatments. This comprehensive solution includes an online portal that helps providers obtain authorizations quickly and easily. It also provides extensive analytics and reporting to encourage better decision making.

Our deep oncology expertise and broad utilization management experience enables clients to reduce costs while enhancing provider experience and patient outcomes.

### Recommend patient-specific treatment plans

CGP recommends multiple patient-specific treatment plan options to providers based on guidelines from an extensive library. This library includes information on more than

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60 types of cancer and 2,100 regimens from nationally recognized third parties such as the National Comprehensive Cancer Network. Since two regimens of the same efficacy can vary by five to 10 times in cost, CGP encourages providers to prescribe the highest quality, most cost efficient treatment. This results in savings for payers and better outcomes for members.

Requesting Provider   Servicing Provider   Request Details  
**Rectal Cancer**   Clinical Status   **Regimens**   Request Summary

**Regimens**

Expand All | Collapse All   Export (PDF)   Print   Drug Pronunciation

1   CAPEOX (Capecitabine 850-1000 mg / m2 / Oxaliplatin)

Febrile Neutropenia Risk	Emetic Risk	Authorization Duration						
	Day 1 Moderate Days 2-15 Oral Low / Minimal	9 months	Drug Name	Drug Code	Drug Route	Dosage	Days of Cycle to be Administered	Length of Cycles (Days or weeks)
			Injection Oxaliplatin 0.5 Mg	J9263	Intravenous	130mg / m2	day 1	21 day cycle
			Capecitabine Oral 150 Mg	J9520	Oral	850-1000mg / m2	Days 1-15	21 day cycle
			Capecitabine Oral 500 Mg	J9521	Oral	850-1000mg / m2	Days 1-15	21 day cycle

2   FOLFIRI (Fluorouracil continuous infusion / Leucovorin / Irinotecan)

3   FOLFIRI (Fluorouracil continuous infusion / Leucovorin / Irinotecan) + Bevacizumab

CGP automatically approves the majority of all prior authorization requests with no human review needed. The quick turnaround time results in less administrative burden and quicker payment to the provider.

Optum also has a team of oncology clinicians that reviews custom requests related to chemotherapy, radiopharmaceuticals<sup>3</sup> and cancer supportive care. The team can also engage in peer-to-peer discussions with providers as needed. After such discussions, 15–20 percent of providers change their request to a regimen that aligns with evidence-based guidelines.

## Drive better clinical intelligence

CGP provides robust utilization management and analytics to help providers make better decisions and payers to identify opportunities for cost savings. We can identify which providers select a preferred pathway most frequently. We also enable claims-based analysis on cost and quality outcomes for patients who are given different regimens. With over 17 million members managed through this program, we have the scale to generate meaningful insights on how to drive cost and quality outcomes.

## Your trusted partner in oncology solutions

CGP was developed and is supported as part of a larger Optum oncology operation, including over 150 oncology nurses, six board-certified oncologists and three oncology pharmacists. We have managed more than 100,000 oncology cases since 2006.

Sources:

1. Milliman April 2016. Cost drivers of cancer Care: A retrospective analysis of Medicare and commercially insured population claim data 2004–2013.
2. Applied Clinical Trials. The impact of faster drug approvals on oncology clinical trial design. [appliedclinicaltrialsonline.com/impact-faster-drug-approvals-oncology-clinical-trial-design](http://appliedclinicaltrialsonline.com/impact-faster-drug-approvals-oncology-clinical-trial-design). Sept. 13, 2017. Accessed Feb. 6, 2019.
3. 2016 vs. 2017 Book of Business analysis. Produced by Optum Analytics.
4. Available April 1, 2019.



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Learn more about how Optum Cancer Guidance Program can help provider treatment guidance and reduce medical expenses.

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