Evolution of the Oncology Landscape

Emerging Trends and Focus on Value
Introduction

Owing to advances in early detection and treatment of cancer, people are living longer after a cancer diagnosis. Consequently, this has led to a growing proportion of long-term survivors and a subsequent rise in cancer costs. As pressures to control costs escalate, stakeholders are pursuing methods to lower spending while preserving quality of care.
Increased Focus on the Value in Oncology

Several Drivers Have Led to an Increased Focus on the Value of Oncology Drugs

Costs associated with cancer care are rising faster than costs in other medical sectors. For patients with cancer, two issues of critical importance are the cost of cancer drugs and the increased patient burden associated with rising deductibles and out-of-pocket costs. This growing cost of care has led to an increased focus on the value of oncology drugs.

The Number of People Living After a Cancer Diagnosis in the US Increased by 100%
From 7 million in 1992 to 14 million in 2014
And is expected to rise to nearly 19 million by 2024.

The Number of Newly Diagnosed Cancers Increased by 35%
From 1.25 million in 1995 to 1.6 million in 2016.

The role of personalized medicine grew
From 13 products* in 2006 to 113 products* in 2014.
35% of novel new oncology drugs approved in 2015 were personalized medicines.

The continual innovation of targeted therapies contributes to the rising cost of cancer care.

Once diagnosed, cancer patients are living longer than in the past, which is a driver of cost.

The growing and aging population drives demand for oncology services.

Estimated Total Direct Cost of Cancer Care

2007: $89 billion
2020: $173 billion
+94%

*Including personalized medicines, treatments, and diagnostics.
Measuring and Defining the Value of Oncology Drugs

Key Stakeholders Have Developed New Ways to Measure Value of Oncology Drugs

Three major organizations—NCCN Guidelines®, ASCO, and ICER—and a top cancer hospital—Memorial Sloan Kettering Cancer Center (MSK)—have each launched their own approach to measuring value. These frameworks are representative of how costs are now being systematically considered in determining value.

Developed as tools to assist the physician and patient in shared decision making

NCCN Guidelines® with NCCN Evidence Blocks™

ASCO Value Framework

Developed as methods to determine a value-based price for drugs

Memorial Sloan Kettering Cancer Center Drug Abacus

ICER Value Framework

NCCN=National Comprehensive Cancer Network®; ASCO=American Society of Clinical Oncology; ICER=Institute for Clinical and Economic Review.
The Frameworks Have Varying Approaches for Assessing the Value of Drugs\textsuperscript{13}

<table>
<thead>
<tr>
<th>ASCO Framework</th>
<th>NCCN Evidence Blocks</th>
<th>MSK Drug Abacus</th>
<th>ICER Value Framework</th>
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<tbody>
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<tr>
<th>Parameter</th>
<th>ASCO</th>
<th>NCCN</th>
<th>MSK</th>
<th>ICER</th>
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<td>Treatment Cost</td>
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<td>Cost to Patient</td>
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<td>Economic Evaluations</td>
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The key parameters used by all organizations to define value are:
- Clinical performance
- Cost

No single tool is likely to emerge as the determiner of value, as stakeholders need multiple characteristics in a value tool, including\textsuperscript{13}:
- Flexibility in accommodating any mitigating factors that influence value
- Evidence support for population health decisions
- Ability to personalize based on individual preferences

Drug Abacus and ICER include other metrics such as:
- Disease burden
- Other economic evaluations

QALY=quality-adjusted life-year.
Potential Implications of Current Trends and the Focus on Value for Stakeholders

Value initiatives in oncology have potential implications for both payers and providers.\(^{13}\)

**IMPACT ON PAYERS**

- Coming from respected professional societies (ASCO and NCCN), these frameworks are likely to be considered for informational purposes at Pharmacy & Therapeutics drug reviews and, where applicable, may be used to create step edits or preferred therapies when multiple options and large price differentials exist.
- In contrast, the framework produced by ICER is designed to identify the clinical rationale for a numerical value price of treatments, and there is some interest from payers, including Medicare, in applying its findings in this way.

**IMPACT ON PROVIDERS**

- In regards to emerging approaches to assessing value in cancer care, according to ASCO, oncologists have not only a role, but a responsibility to help address and manage the issue of high drug costs\(^{14}\).
- The frameworks will likely be restricted to use on a case-by-case basis since there may be a need for the ability to accommodate individual preference and allow for personalization.
Lilly Oncology Resources

Eli Lilly and Company is dedicated to creating value for all stakeholders by accelerating the flow of innovative medicines that provide improved outcomes for individual patients.15

Your Lilly Oncology account manager can offer educational resources that may help patient care.

Additional Topics Within the Evolution of Oncology Presentation

New Payment and Delivery Models
Rewarding Quality Through Payment Reform
Understanding Healthcare Quality in Oncology
Understanding Quality Measures
Quality Improvement in Oncology
Clinical Pathways in Oncology

Additional Resources

10th Edition Zitter Monograph
Oncology Landscape
ACCC Trends Brochure

For additional information on Lilly Oncology resources, please contact your Lilly Oncology account manager.
REFERENCES


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