

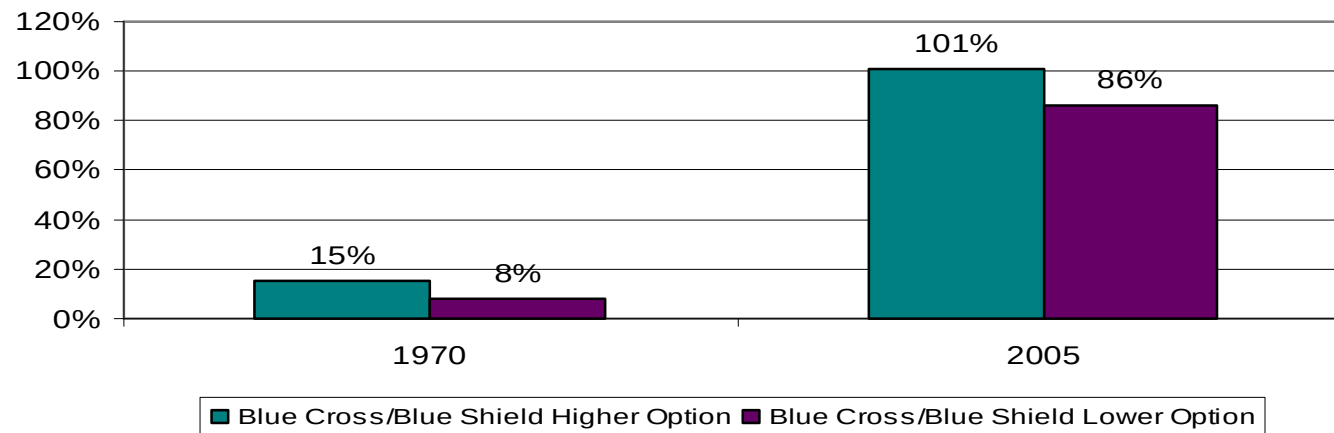
Paying for New Cancer Treatments: Rights and Responsibilities of Health Insurers

February 9, 2009
Lee N. Newcomer, M.D.

What is Our Responsibility?

- Create groups of people to share the risk of health care costs
- Pay for effective therapies at a reasonable cost
- Maintain the fiscal integrity of the risk capital pool

Total Family Premium for Health Insurance as a Percent of US Minimum Wage Earnings



The Agenda

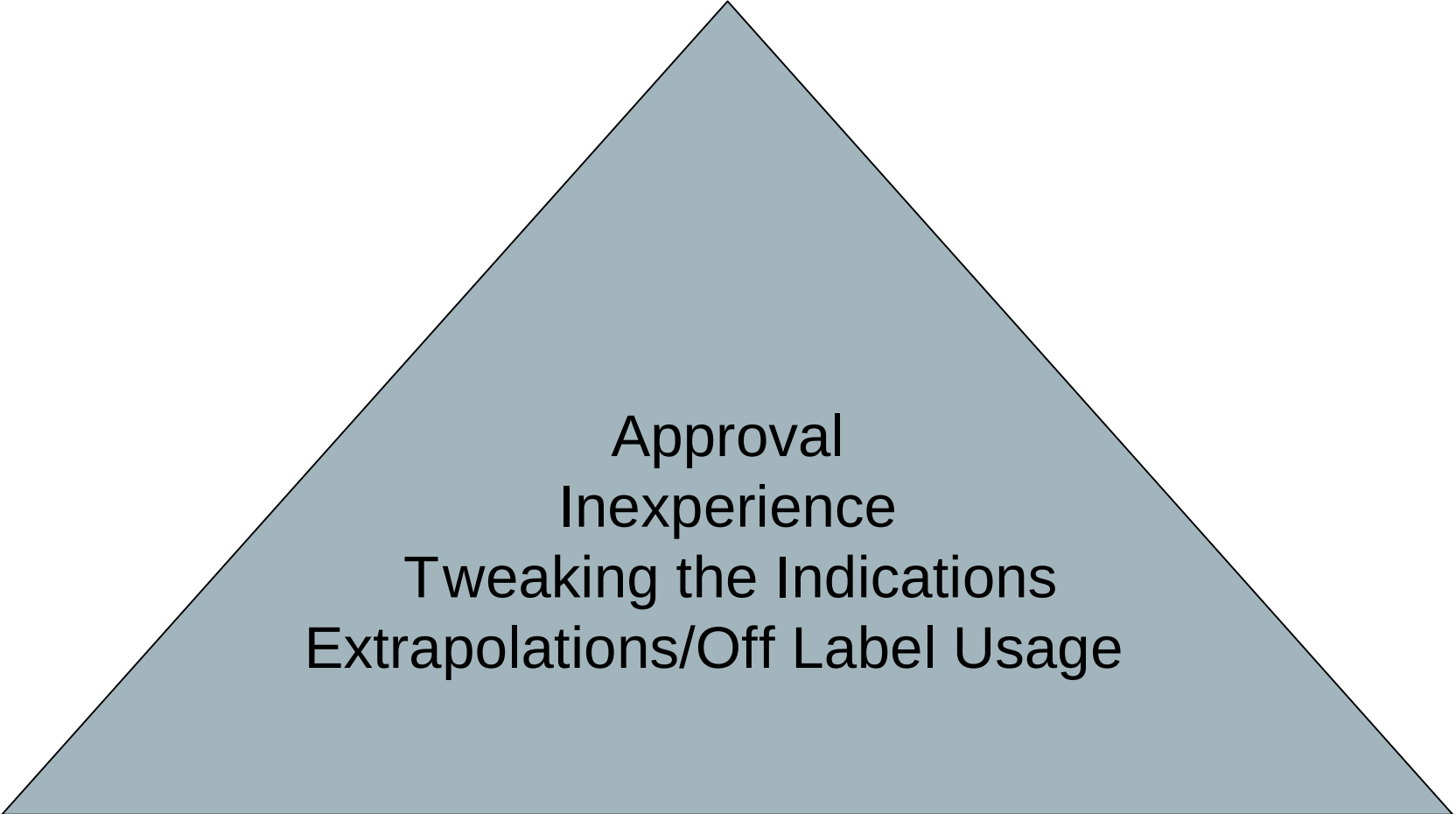
§ How effective is a new treatment?

§ It's hard to evaluate with expansion of indications

§ Today's inconsistency prevents evaluation of any therapy

§ Three proposals for better value

The Cascade of Chaos: The Life Cycle of a New Treatment



Approval
Inexperience
Tweaking the Indications
Extrapolations/Off Label Usage

Cascading with Herceptin and HER2

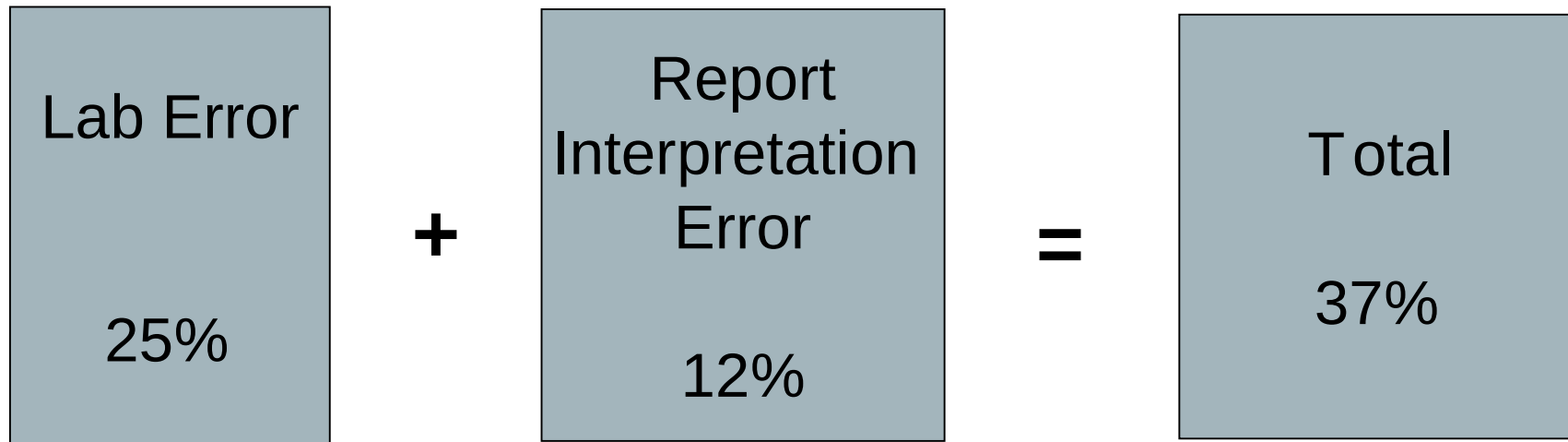
HER2 Testing in Local vs. Central Labs

Local	Central IHC Testing					
IHC Testing	0+	1+	2+	3+	Total	Concordance
0	76	106	36	6	224	34%
1+	33	101	46	8	188	54%
2+	15	70	48	51	184	26%
3+	9	32	46	290	377	77%
Total	133	309	176	355	973	--

Reddy et al, *Clin Breast Ca*, 2006: 153-157

Cascading with Herceptin and HER2

Inexperience causes 1 out of 3 patients to get the wrong treatment



Cascading with Herceptin and HER2

§ Tweaking/Extrapolations

- § Treatment of “almost” over-expressed patients

§ Off label Usage

- § Continued therapy for metastatic breast cancer

Cascading with Herceptin and HER2

Trastuzumab continued therapy

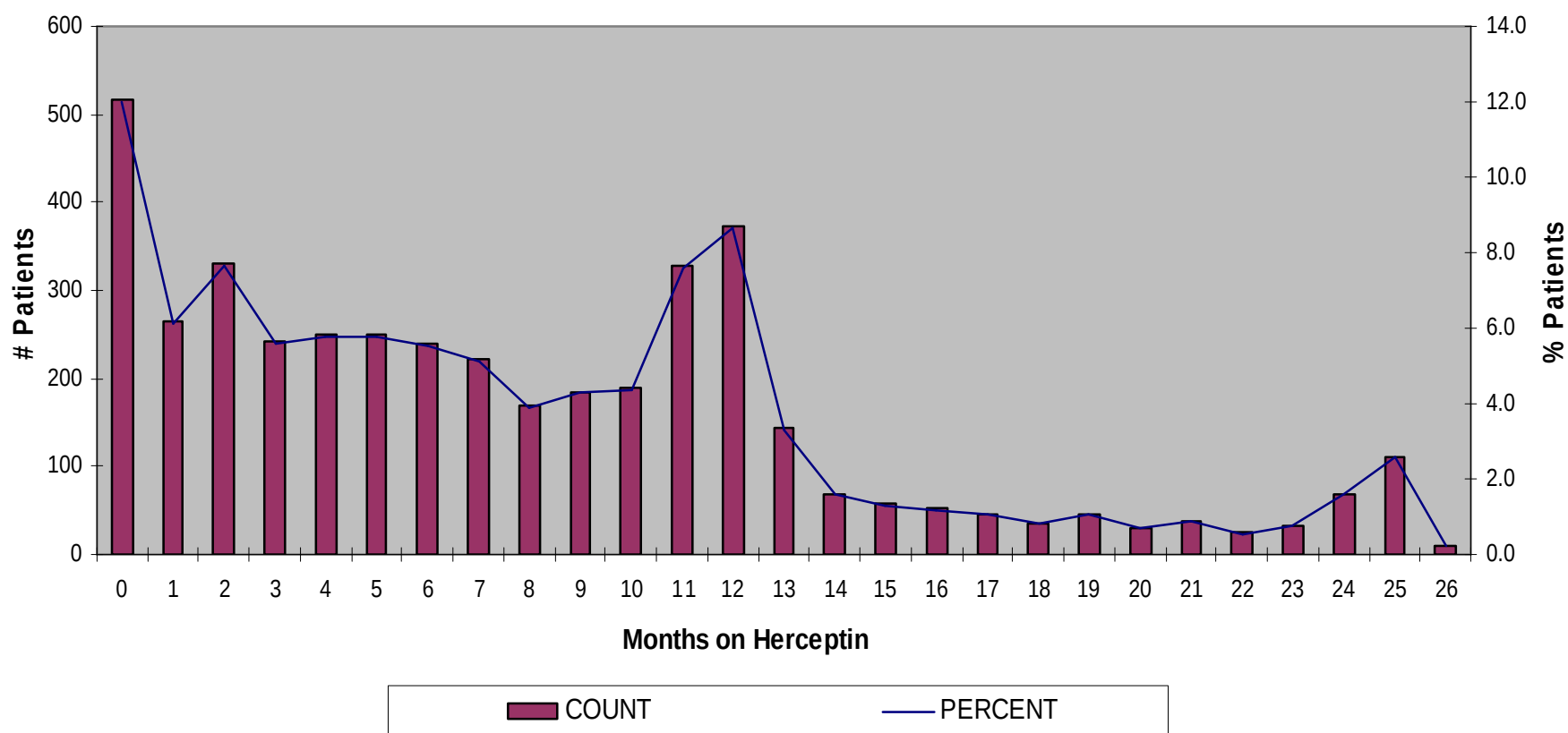
“It is **impossible** to decipher...to what extent continued treatment with trastuzumab benefit patients.”

“At least two attempted trials with no trastuzumab in the control arm were attempted, but **failed** to accrue patients.”

Pusztai, Cancer Investigation 2006;24:187-91

Trastuzumab Continued Therapy

Distribution of Patient-Months on Herceptin



The Agenda

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Inconsistency: Trastuzumab Therapy

Patient 5																															
CARBOPLATIN																															
DOCETAXEL																															
FULVESTRANT																															
PACLITAXEL																															
TRASTUZUMAB																															
VINORELBINE																															
Patient 6																															
BEVACIZUMAB																															
CARBOPLATIN																															
CYCLOPHOSPHAMIDE																															
DOCETAXEL																															
DOXDRUBICIN																															
FULVESTRANT																															
PACLITAXEL																															
TRASTUZUMAB																															
VINORELBINE																															

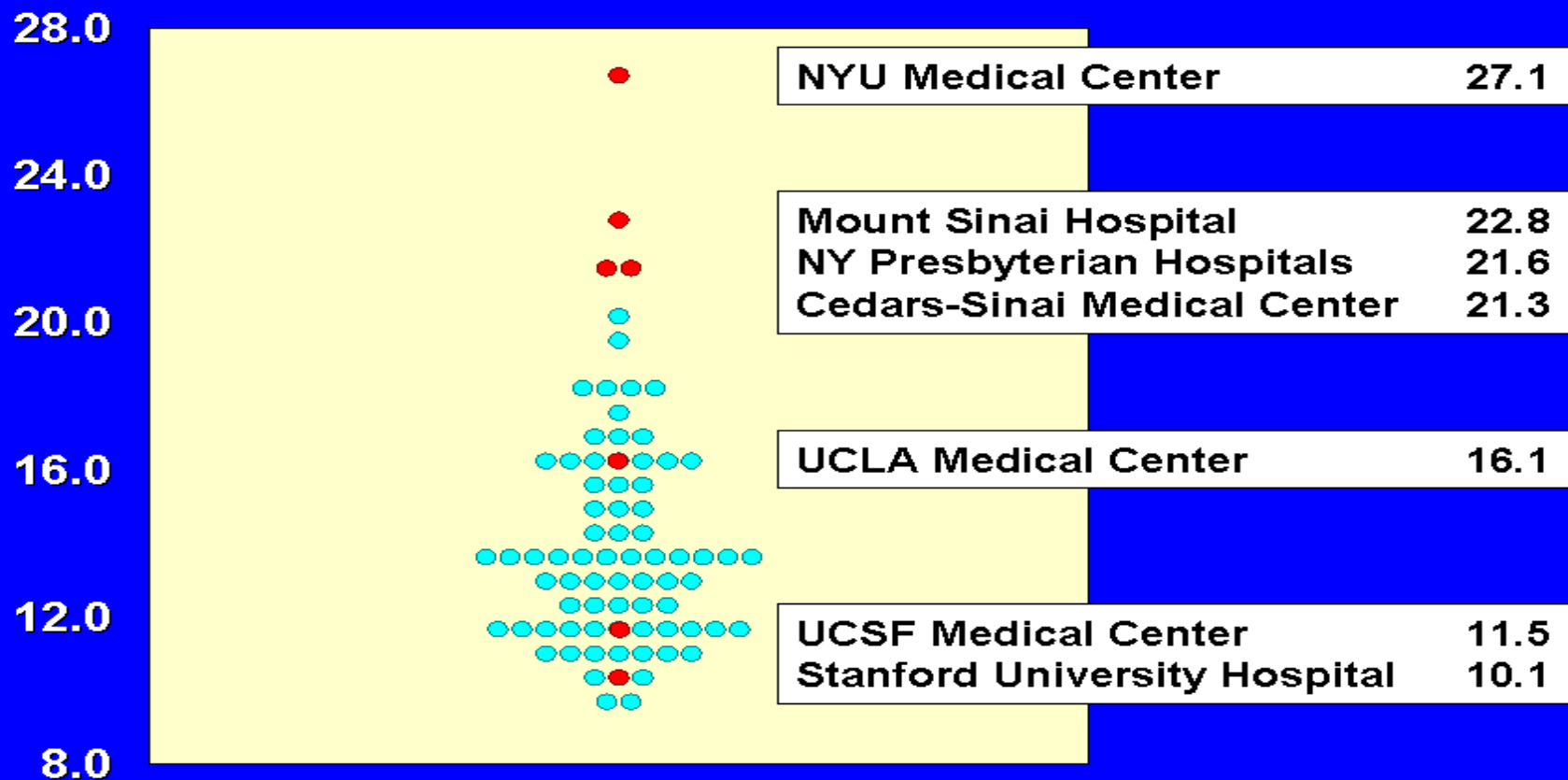
Inconsistency: Trastuzumab Therapy

Patient 1																																					
CARBOPLATIN																																					
GEMCITABINE																																					
PACLITAXEL																																					
TRASTUZUMAB																																					
VINOURELBINE																																					
Patient 2																																					
CARBOPLATIN																																					
FULVESTRANT																																					
GEMCITABINE																																					
PACLITAXEL																																					
TRASTUZUMAB																																					
VINOURELBINE																																					

Inconsistency is Geographic

Figure 11

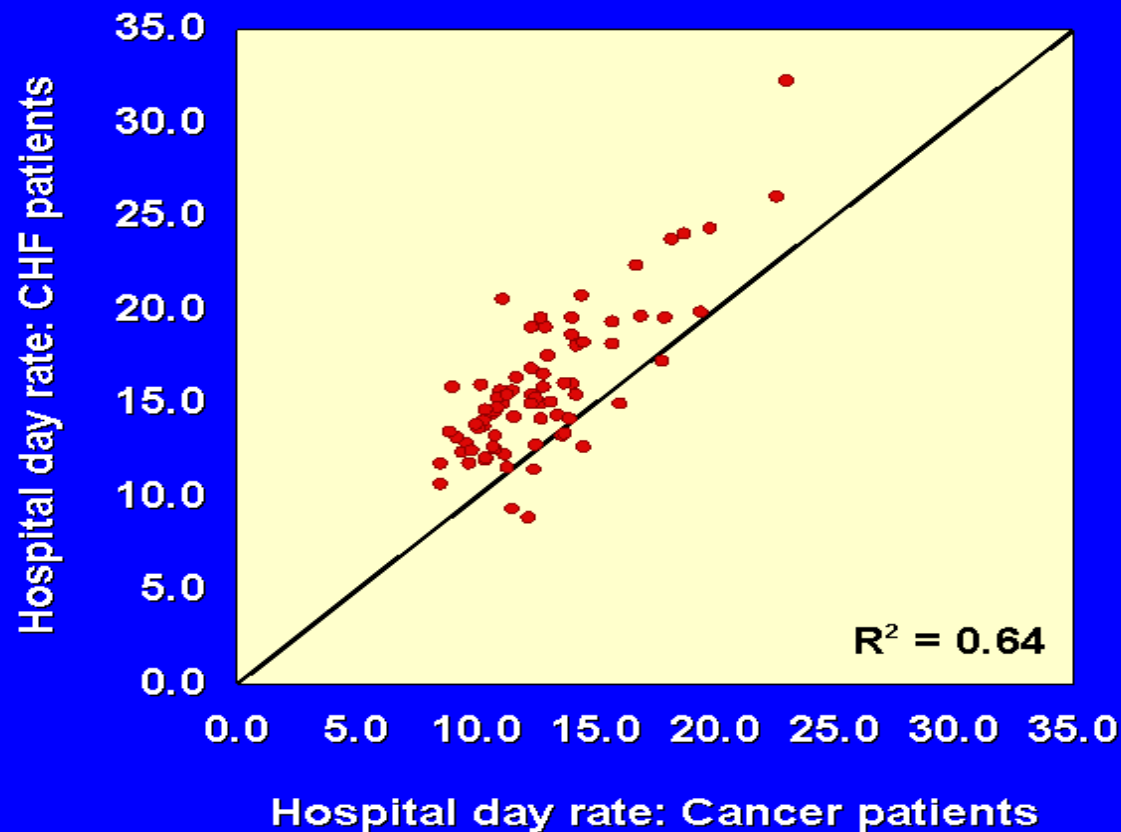
Days in hospitals during last six months of life among patients who received most of their care in one of 77 “best” U.S. hospitals



Inconsistency is Geographic

Figure 12

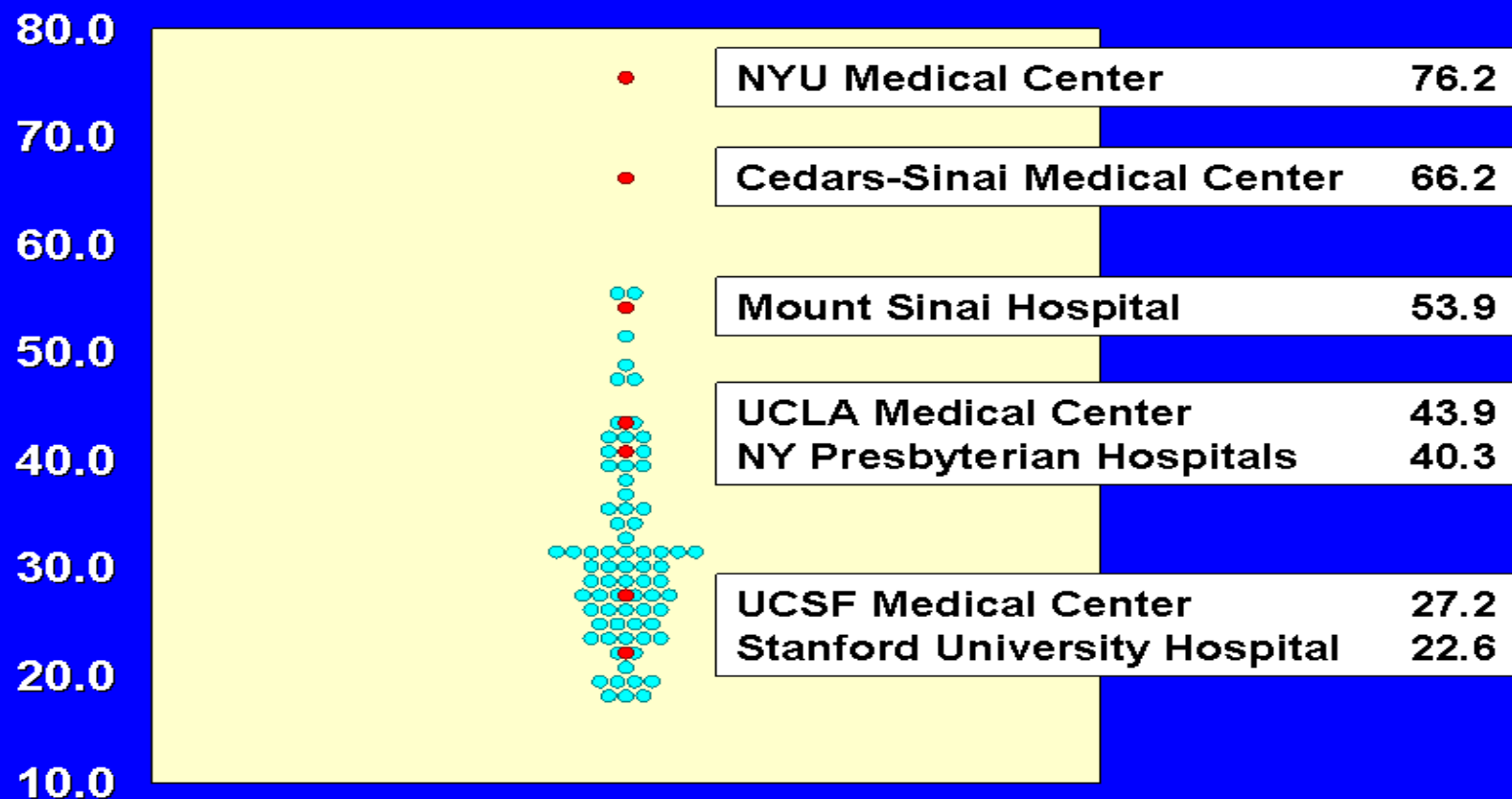
Association between hospital days for cancer and for CHF patients during last six months of life among 77 “best” U.S. hospitals



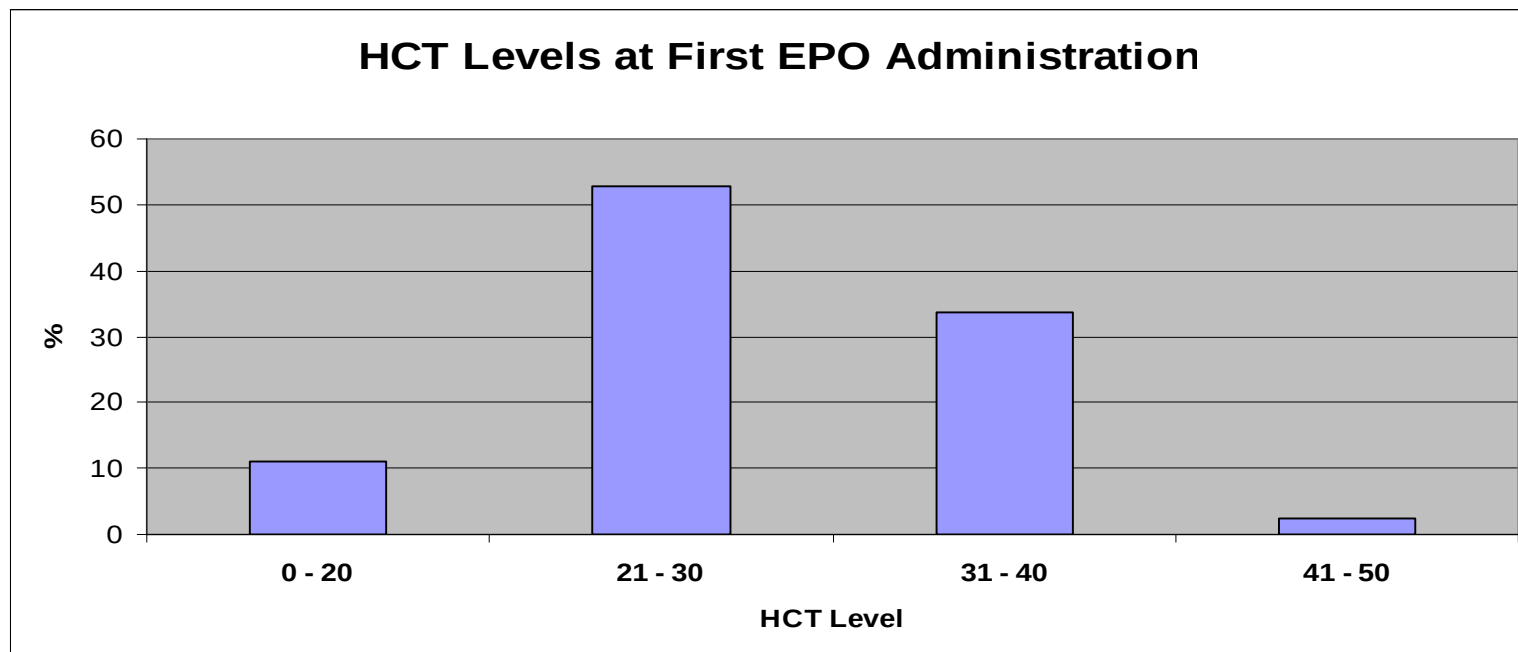
Inconsistency is Geographic

Figure 15

Average number of physician visits per patient during last six months of life who received most of their care in one of 77 “best” US hospitals



Inconsistency: Erythropoietin (EPO)



Inconsistency: Site of Care

Cetuximab/Panitumab for Metastatic Colon Cancer			
Setting	# of treatments	Cost/treatment	Total Cost Per Patient
Outpatient (53 patients)	5.3	\$4428	\$23,468
Office (157 patients)	9.0	\$2693	\$24,237

There was no correlation between physician fee schedules and use of the outpatient facility

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§ U.S. "NICE"

§ New FDA designation: "Scientific Approval"

§ Performance measurement

A New FDA Designation: Scientific Approval

Avastin for breast cancer

Significant response rates without prolongation of survival

Prescribing allowed in registry trials for additional data.

Not ready to be a standard, but...

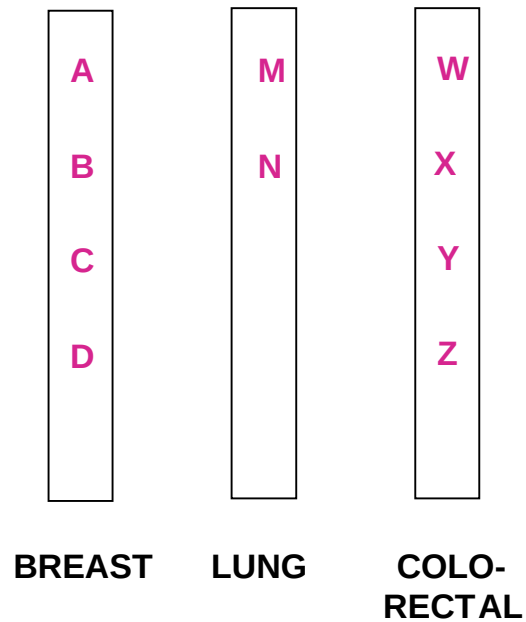
Trials show responses for a new class of drugs without clinically significant change

New designation allows prescribing in registry trials to determine value of compound

Mandatory re-evaluation in 3 years with final decision on label.

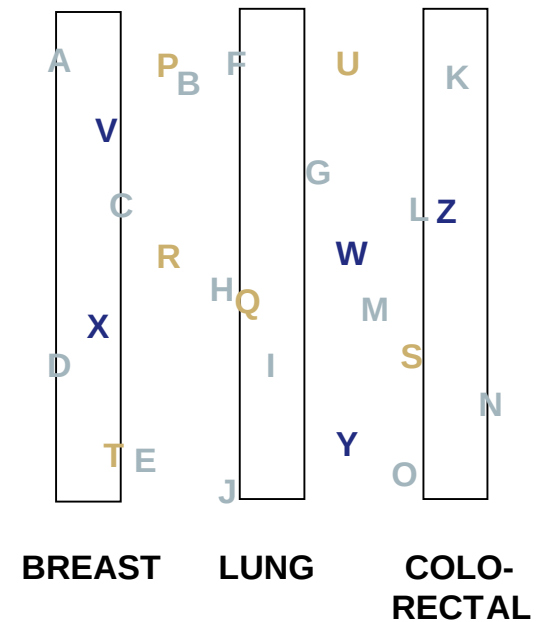
Current Practice or Consistent Practice?

A Consistent Group

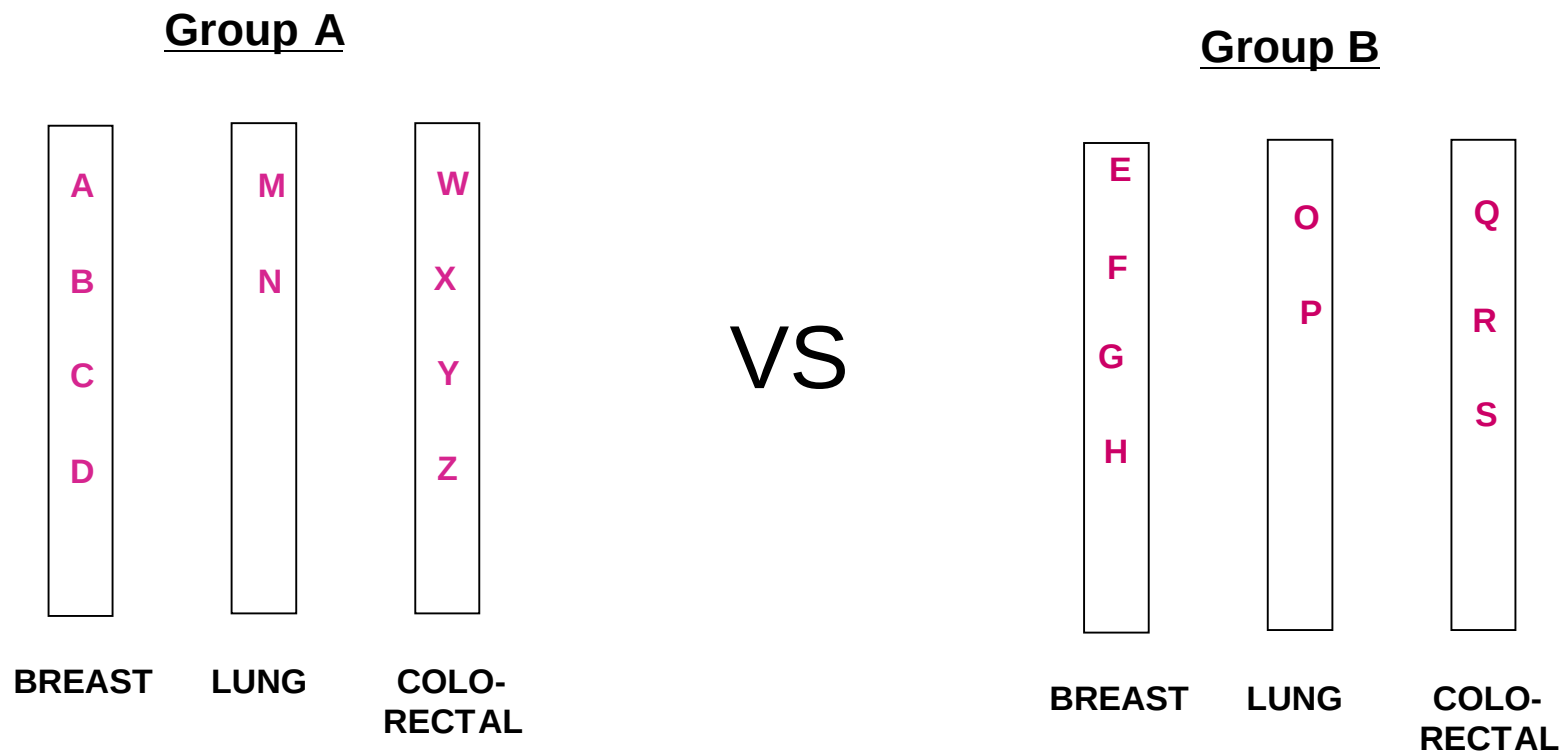


VS

Community

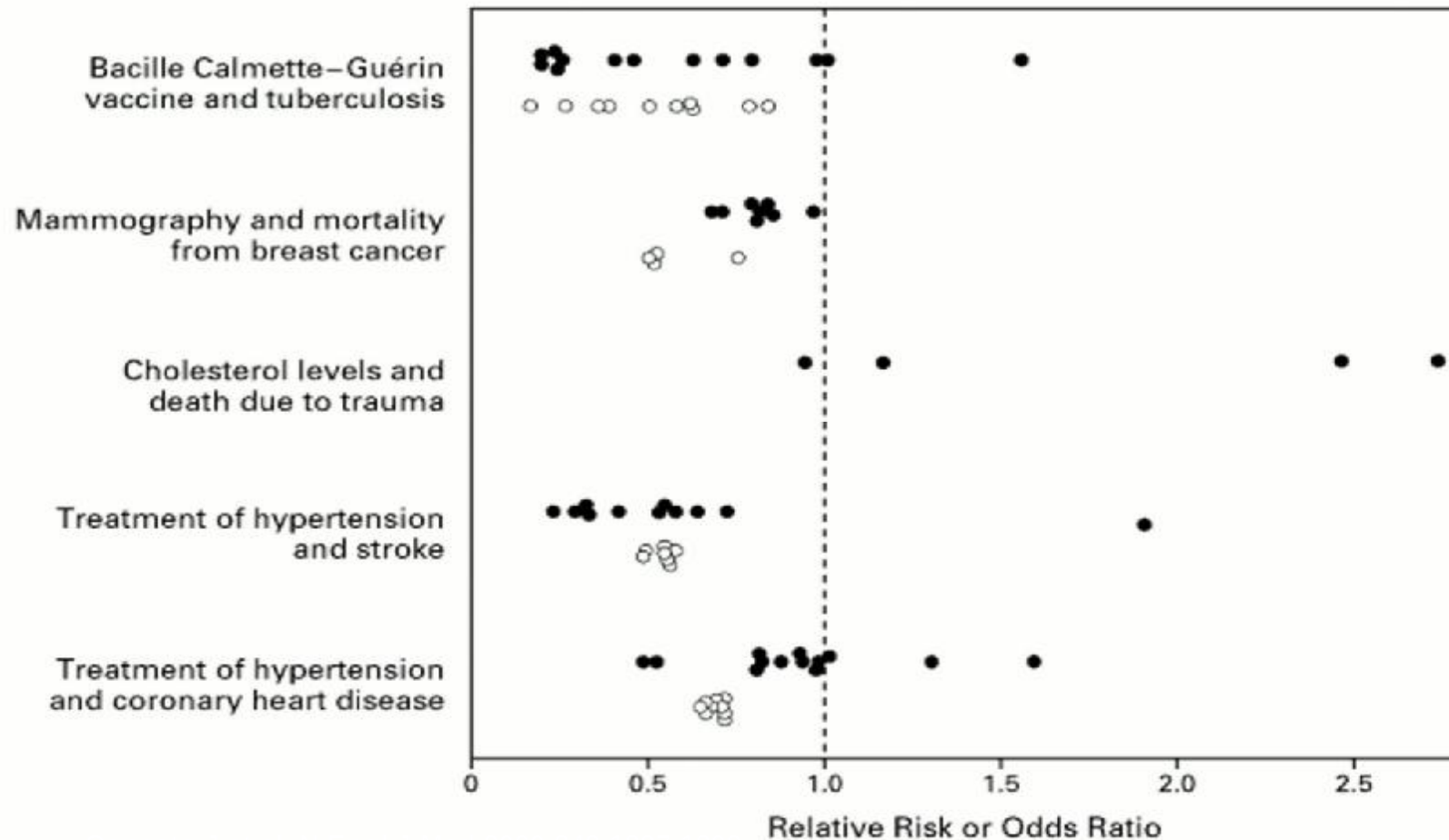


Consistency Allows Comparison



Compare performance and understand value

Observational Comparisons Are Effective



NEJM 2000; 342; 1887

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