# Value-Based Payment and the Delivery of High-Quality Cancer Care: Lessons Learned and Future Directions

Nancy L. Keating, MD, MPH
Professor of Health Care Policy & Medicine
NCPF/ASCO Workshop on High-Quality Cancer Care
October 5, 2023







### Disclosures

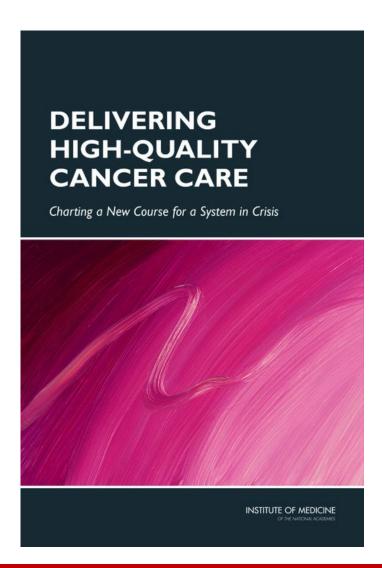
I am Clinical Lead of the CMS Oncology Care Model (OCM)
 Evaluation Team. Any mention of OCM reflects work that has been published in the OCM Evaluation Team Annual Reports.
 My comments and opinions are my own and not reflective of those of CMS.



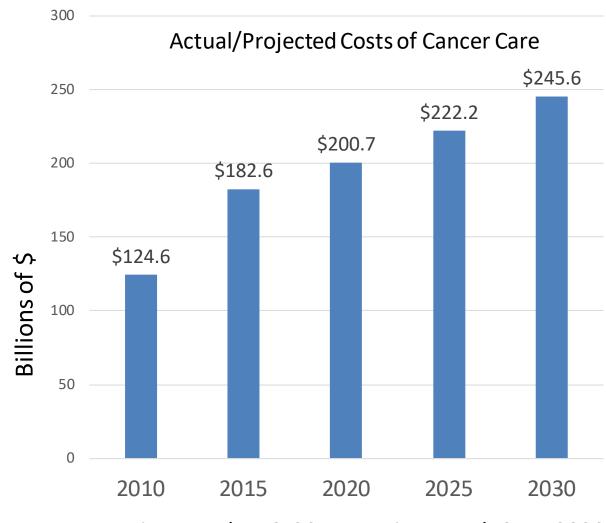




### Cancer Care: A System in Crisis



IOM 2013



Mariotto et al, JNCI 2011; Mariotto et al, CEBP 2020









### Value Based Care

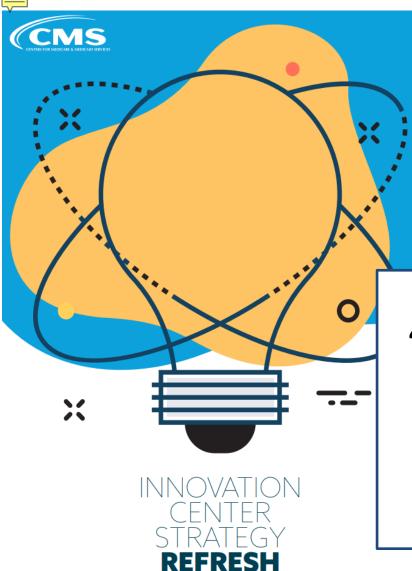
Value-based care ties the amount health care providers earn for their services to the results they deliver for their patients, such as the quality, equity, and cost of care.

> -Lewis et al, The Commonwealth Fund, 2023 Value-Based Care: What It Is, and Why It's Needed









### CMS Strategy Refresh

#### **CMS Innovation Center Vision**

A health system that achieves equitable outcomes through high-quality, affordable, and person-centered care.

"All Medicare beneficiaries will be in a care relationship with accountability for quality and total costs of care by 2030."

NNOVATION CENTER STRATEGY REFRESH

CMS Strategy Refresh 2021







### CMS Oncology Care Model







1,285,105 patient episodes completed through June 2021







### CMS Oncology Care Model

- Multi-payer voluntary model, 2016-2022
- Episode-based
  - Targeted chemotherapy & related care over 6 months
- Emphasized practice transformation
  - Incentivized practices to redesign care delivery for providing better care



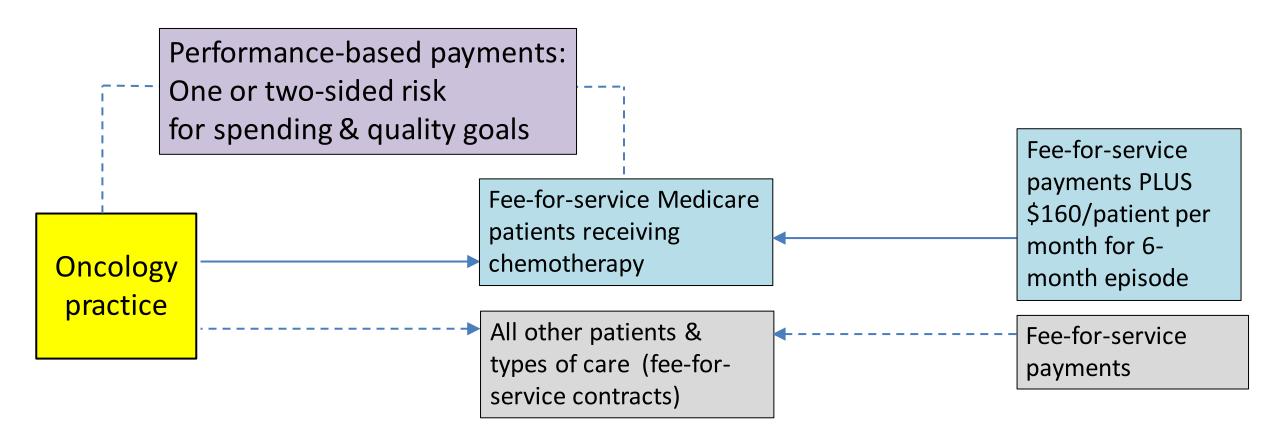








### CMS Oncology Care Model Payments









### **OCM Quality Measures**

Measure	Measure Description	Measure Source
OCM-2	% of patients with all-cause emergency department visits	Claims
OCM-3	% of patients that died who were admitted to hospice for ≥3 days	Claims
OCM-4	% of patients with pain intensity quantified & plan of care for pain if screen positive	Practice reported
OCM-5	% of patients screened for depression & plan if screen positive	Practice reported
OCM-6	Patient-reported experience of care	Patient survey

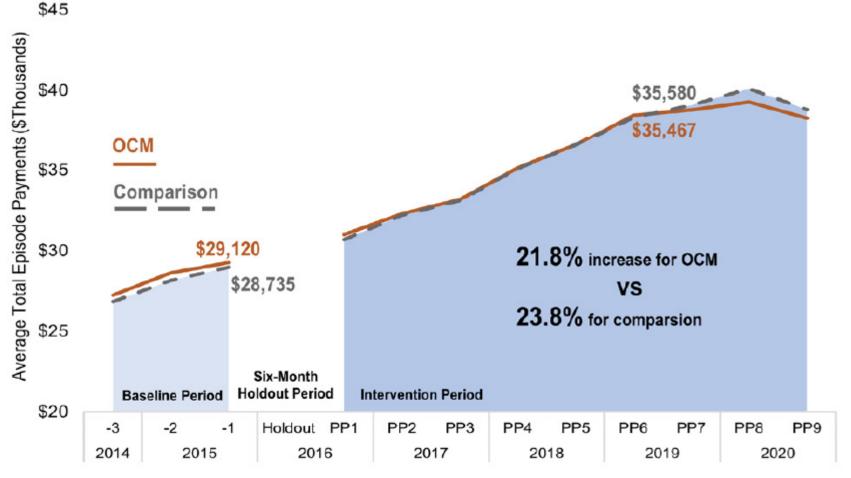
OCM Overview. CMS OCM Website







## Impact: Total Episode Payments (excluding Monthly Enhanced Oncology Service Payments)



**DiD Impact Estimates** 

All episodes: -\$499\*\*

Higher-risk

episodes: -\$799\*\*

Lower-risk

episodes: \$72

\*\*P<0.01

Through first 4.5 years of OCM

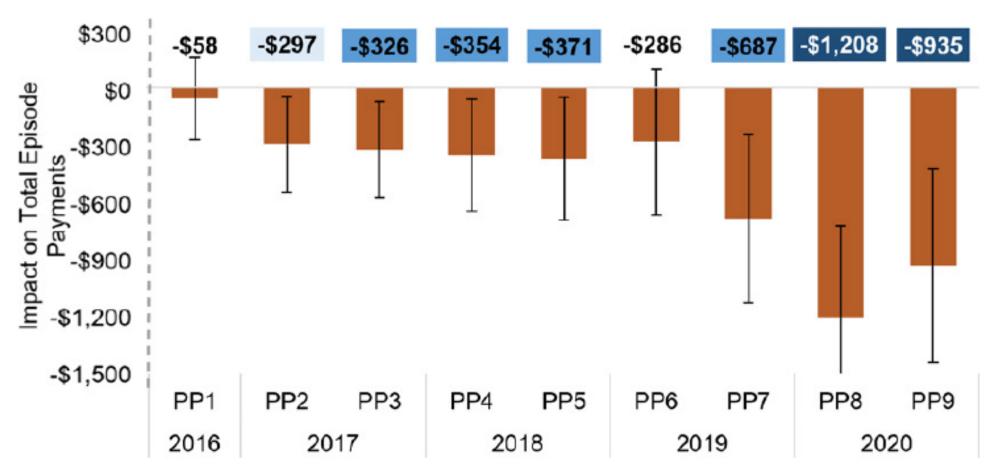
OCM Evaluation Report: Performance Periods 1-9







### Larger Increases in Savings Over Time



OCM Evaluation Report: Performance Periods 1-9

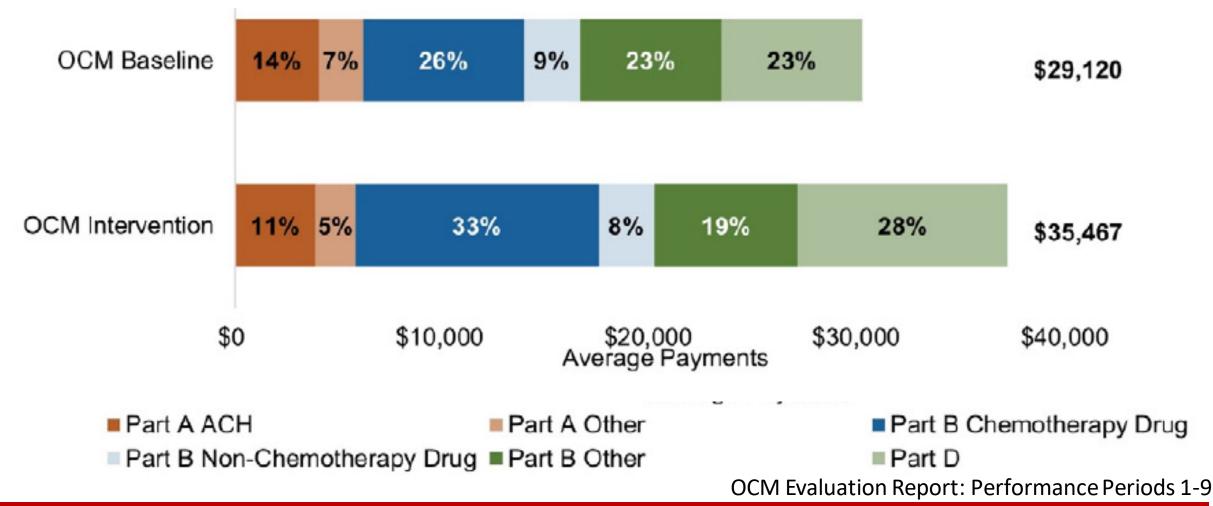








### Total Episode Payments Increased Over Time— Mostly Driven by Chemotherapy Payments



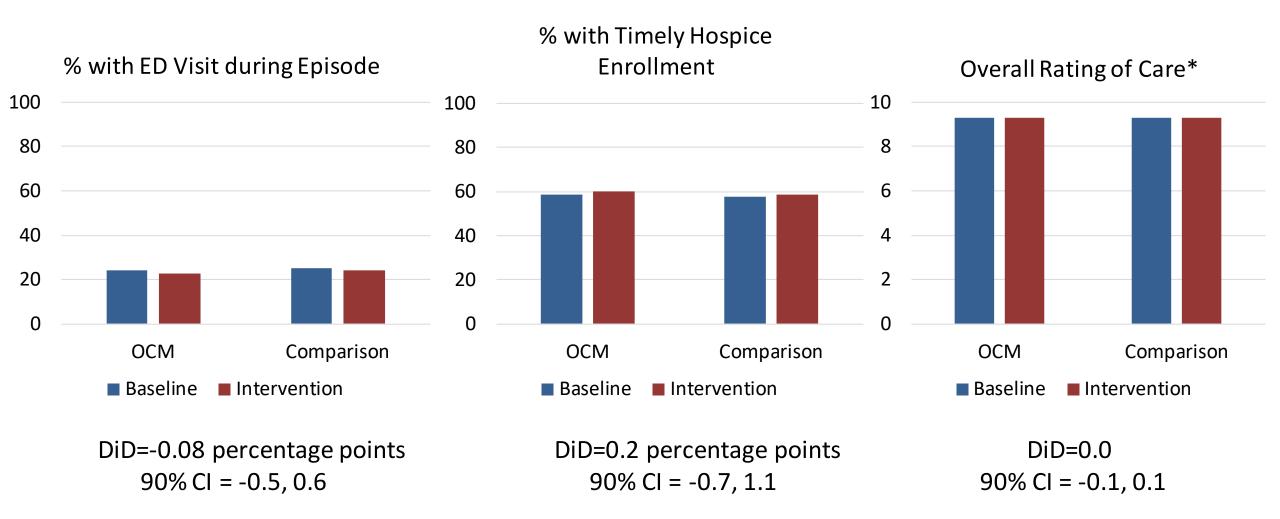








### Did Quality Improve for OCM Participants?



<sup>\*</sup> Ratings measure through model's first 3 years only

OCM Evaluation Report: Performance Periods 1-9









### Radiation Oncology Model



- Prospective payment for 90-day episodes of care for 15 cancer types in randomly selected areas
- Congress delayed model start







### **Enhancing Oncology Model**

- Voluntary model with 2-sided risk; started July 2023
- Patients with 7 cancer types receiving systemic therapy
  - Breast, colorectal, lung, prostate cancers, multiple myeloma, chronic leukemia, lymphoma
- Quality
  - Care transformation through redesign activities
  - Quality measures and reporting
  - Advancing health equity



https://innovation.cms.gov/innovation-models/enhancing-oncology-model









### **Enhancing Oncology Model: Health Equity**

- 1. Higher monthly payments for dual eligible beneficiaries (\$100 instead of \$70)
- 2. Practices must collect and report sociodemographic data
- Practices must screen for and address health related social needs
- 4. Improved shared decisions and care planning
- 5. Develop a health equity plan



https://innovation.cms.gov/innovation-models/enhancing-oncology-model







### Challenges to Value-Based Payment Models in Oncology

- Cancer care is quite heterogeneous—depends on cancer type, stage, and tumor characteristics
- Current models focus on individual treatments
- For chemotherapy models, drug spending comprises more than half (and growing) portion of episode spending
- Limited enthusiasm for two-sided risk
- Quality measurement in oncology care is early in development
  - More work needed to identify reliable measures







### Acknowledgements-OCM Evaluation Team

- Abt Associates
  - Matthew Trombley, Sean McClellan, Andrea Hassol, Qing Zheng, Morgan Michaels, Lauren Davis, Roberta Glass, Louisa Buatti
- Harvard Medical School
  - Mary Beth Landrum, Lauren Riedel, Michael Liu, Robert Wolf, Joyce Lii
- Dartmouth Medical School
  - Gabriel Brooks, Nirav Kapedia
- The Lewin Group
  - Carol Simon, Timothy O'Brien, Yijing Shen, Alex Kappes, Erin Huffstetler, Darin Ullman, Maxwell Mindock, Colin Doyle, Anna Ialynytchev, Annalise Maillet, Soumita Lahiri
- General Dynamics Information Technology
  - Colleen Kummet, Van Doren Hsu, Stephanie Shao
- CMS: Jessica McNeely, Susannah Cafardi







### Questions/Comments keating@hcp.med.harvard.edu





