



Employers and Cancer Care Quality

A Closer Look

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April 2016

 **NORTHEAST**
BUSINESS GROUP ON HEALTH

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In early 2015, Northeast Business Group on Health (NEBGH) undertook an exploration designed to identify employers' top concerns when it comes to supporting employees and their family members diagnosed with cancer. This project, conducted by NEBGH's Solutions Center, not surprisingly highlighted the high cost of cancer care as a top concern among employer benefits professionals.

Background

Based on our 2015 exploration and outreach, cancer, despite significantly lower prevalence among employees than conditions like diabetes, hypertension and musculoskeletal disorders, consistently ranks at the top in terms of employer healthcare costs.

But on par with employers' concern about cost – and in many cases even topping it – is employers' worry and uncertainty about the quality of cancer care that employees and dependents receive. Even before considering the costs involved in providing cancer care benefits and programs, employers want to know if they are offering top-quality care, motivated both by the need to ensure their healthcare dollars are well spent as well as their desire to support the best possible outcomes and quality of life for those who have embarked on a cancer journey.

Employer benefits professionals often serve as the “gateway” to accessing cancer care during a tumultuous time for employees and families, and therefore play an important role within the healthcare ecosystem.



Employers feel fairly comfortable with cancer prevention and early detection strategies already in place, but expressed a substantial interest in better understanding how to improve the quality and reduce the cost of treatments once a diagnosis is made.

Demystifying Cancer Care Quality

In the fall of 2015, NEBGH's Solutions Center set out to “demystify” cancer care quality and educate employers about what quality means when it comes to cancer care. NEBGH employer members and other stakeholders attended a workshop in which prevailing experts defined key terms including clinical pathway use, treatment effectiveness, symptom management, longevity, survival rates and quality of life. The various “players” in cancer quality were identified – medical community networks and alliances such as National Comprehensive Care Network (NCCN) and American Society of Clinical Oncology (ASCO), accreditors including National Committee for Quality Assurance (NCQA) and Joint Committee, and the various purchasers and payers. “Gold standard” guidelines and pathways were discussed, and quality initiatives underway by the Federal Centers for Medicare and Medicaid Services (CMS), ASCO and others were highlighted, including those aimed at embedding quality measures in new payment models.

In the same Fall 2015 workshop's second session, panel participants discussed where quality currently stands when it comes to cancer care and patient support from each of their differing viewpoints – that of employee/patient, employer benefits professional, medical oncologist and health plan medical director. There was general agreement that progress is being made in better understanding, defining and delivering high quality cancer care, but that much remains to be done, especially given the fact that cancer is not one disease, but literally hundreds, with a myriad of new treatments on the market or in testing. Discussions revealed employers' concerns about gaps in quality within the existing care delivery system such as misdiagnosis and inappropriate treatment, cost variability depending on site of care without information about how site of care affects quality, and low utilization of health plan navigation and support programs.

Employers emerged from the workshop with a better sense of how to think about quality of care, but given the somewhat confusing cancer landscape wanted to know: **“If I want to be a top-performing employer when it comes to providing cancer care to my employees and their families, what do I need to do? What are the benefits, programs and policies I need to have in place?”**

Employer Resources Included in this Report:



- The Checklist for Cancer Care Benefits, Programs and Policies
- Cancer Care Quality Glossary
- Cancer Care Resource List



Survey At-A-Glance

Employers as Purchasers

Employers, while concerned with quality of care, on average do not fully engage with current value-based purchasing strategies for cancer care:

63%

Do not purchase their health plans' cancer care buy-up package

42%

Have a network of high-performing oncology providers

**Only
1**

Reported paying a monthly management fee for pathway-delivered care

Building Blocks for a Top-Quality Employer Cancer Program

A subsequent NEBGH Solutions Center workshop in late 2015 introduced NEBGH's Cancer Care Checklist—an exhaustive list of the types of benefits, programs and policies worthy of consideration by employers as they seek to make available the best possible cancer treatments and support for employees and family members who need them. The workshop also featured speakers and panelists on several topics relevant to different parts of the cancer journey—beginning, middle and end. Panelists presented data highlighting the importance of second opinions and early treatment navigation, and described similarities and differences among the services currently available to employers in this arena. Despite compelling data showing that second opinions can reveal an initial misdiagnosis and/or point to a different treatment path, employers do not necessarily guide employees in the direction of obtaining a second opinion, whether via their health plan or a second opinion service. The challenges and complexities of cancer care were addressed by panelists administering programs designed to support patients and caregivers, and guidance was provided on dealing with the physical, social and emotional issues relating to employees with cancer returning to work. A Cancer Care Resource List was assembled and distributed by NEBGH as an aid for employers.

NEBGH presented early highlights of an in-depth Employer Benchmarking Survey on Cancer Care Benefits, Programs and Policies the Solutions Center conducted with 19 employers representing nearly 1.2 million covered employees. This survey—together with interviews NEBGH conducted with employers, health plans and providers; information gathered from literature and subject matter experts; and the rich discussions that were part of the workshops described above—helped comprise the information and insights that follow.



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What Employers Currently Offer: Cancer Care and Support

NEBGH employer members offer a basic foundation of quality care to employees in the areas of prevention, screening, treatment and care support. Many employers provide on-site screenings and promotion of cancer identification programs in addition to prevention efforts such as tobacco-cessation programs. Employers enter into contracts with health plans for treatment and to administer the majority of cancer care services including case management, patient support and care coordination. Through health plans, employees also have access to oncology Centers of Excellence (COEs), palliative care coverage, hospice care, nutrition counseling and home health services. However, gaps between access to and actual utilization of these important services mean that employers have a pivotal role to play in communicating their availability and effectively integrating them with existing benefits and programs.

Employers may also contract with third-party providers for employee access to services that are not offered or utilized through the health plan, such as second opinion services, guidance and navigation services, behavioral health programs, cancer-specific short-term disability benefits and web-based navigation tools specific to employees' benefits and community resources. Trust in health plans is sometimes an issue; employers report that employees may distrust second opinions and navigation services offered by plans, perceiving their main interest to be in reducing costs.



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Survey At-A-Glance

Supporting the Cancer Journey

Many employers offer non-clinical support to employees but there are gaps in what is provided:

74%

Offer access to support for treatment questions, related illnesses, etc.

37%

Offer financial support services specific to cancer, such as financial planning

**Almost
1/2**

Do not offer second opinion services outside of their health plan

The Employer Role in Ensuring High Quality

Defining cancer care quality is complex. Beyond clinical pathway use and survival rates, quality encompasses patient preferences and goals, patient and family understanding of treatment options, financial implications, management of adverse side effects, convenience of treatment location, flexible work options and more.

In order to ensure that employees and their families receive the highest quality care, employers need to play the role of partner by ensuring access to and coverage of care, helping steer patients to providers and trusted institutions who demonstrate transparency by reporting outcomes and adherence to quality measures, and empowering employees with tools and information so they have knowledge about and confidence in their treatment plans. With increasingly effective therapies and better outcomes for some types of cancer, it is also important that employers do their best to support a de-stigmatized recovery environment for employees who want to work during or after completing treatment.

Employers have multiple channels with which to influence quality, including health plans, provider institutions and third parties. They can also develop their own internal resources, especially when it comes to areas like benefits navigation, education and information, and workplace accommodations. Without effective communication and integration of cancer care-related benefits, programs and policies, an employee can easily fall victim to gaps in the overall continuum of what is needed. Some leading employers have already begun to implement creative solutions designed to minimize gaps including:

- Rendering all approved family medical leave as paid time off
- Hiring cancer nurse managers dedicated to their employee population
- Training all managers, supervisors and co-workers in appropriate behavior and human resources policies in cases where an employee discloses a cancer diagnosis
- Developing a cancer-specific portal for all benefits, programs and policies, and guidance on how to use them



Trust in health plans is sometimes an issue; employers report that employees may distrust second opinions and navigation services offered by plans, perceiving their main interest to be in reducing costs.



Survey At-A-Glance

Communication and Integration of Benefits

Employees need better communication and integration of benefits:

68%

Do not have accessible, organized, and systematic communications efforts for cancer-related benefits

**Less Than
1/3**

Provide cancer-related trainings and resources for supervisors, managers and co-workers

58%

Do not offer access to an online portal with evidence-based cancer resources and patient communication guides

Action Steps for Employers

NEBGH's Solutions Center offers these resources to guide employers as they strive to become "best in class" when it comes to ensuring that employees and their families have access to high quality cancer care:

- Refer to the **NEBGH Solutions Center Cancer Care Glossary** to understand the key terms and organizations associated with defining cancer care quality;
- Use the **NEBGH Solutions Center Cancer Resource List** to learn about what is publicly available to assist employees and families;
- Check off current offerings and identify others that may be worthy of consideration by using the **NEBGH Solutions Center Cancer Care Checklist**
- Compare current benefits, programs and policies with those offered by other employers by referencing **NEBGH's Employer Benchmarking Survey** results.
- **What's next:** With a growing understanding of cancer care quality, employers are in improved position to evaluate quality in the marketplace for care. NEBGH will continue to guide employers to purchase value in cancer care.

Employer Resources



The Checklist

Cancer Care Benefits, Programs and Policies

Access to Traditional Cancer Care Services

Second Opinion Services – Most commonly a pathology review by an oncology specialist following an initial diagnosis. May be covered by a health plan or contracted through a third-party provider.

High-Performing Provider Network – Access to a network of providers, including Centers of Excellence, for specific and appropriate cancer diagnoses and treatments.

Molecular and Biomarker Testing – Procedure to test for availability of personalized treatment based on recommendations by NCCN Guidelines and subject to health plan review for appropriateness.

Genetic Testing and Counseling – Procedure and guidance to test for availability of personalized treatment based on recommendations by NCCN Guidelines and subject to health plan review for appropriateness.

Cancer-Specific Behavioral Health Services – Behavioral health support from a clinician with cancer-specific experience. Should include depression screenings. Services may be provided through Centers of Excellence, Employee Assistance Programs, etc.

Reconstructive Surgery – Procedure to restore appearance, functionality or mobility lost due to medically-necessary treatment.

Treatment and Preventive Dental Services – Dental services – provided through a Center of Excellence or other appropriate facility – not covered by dental benefit, should be covered when necessary cancer treatment may have negative side effects. Coverage of services should be subject to health plan review for appropriateness.

Palliative Care Coverage – Coverage for an approach to care that improves quality of life through prevention and relief of suffering. Should not be limited to hospice or care at end of life.

Hospice Coverage – Coverage for specialized care for patients at end of life, including physical, emotional, social and spiritual needs, and support for caregivers.

Access to Ancillary Services

Critical Illness Insurance – Insurance product in which an insurer pays a lump sum to policyholder should they be diagnosed with a specific illness from a pre-determined list.

Reimbursement for Services during Clinical Trials – Coverage for routine costs of care which may not be included by clinical trial provider.

Access and Awareness to Clinical Trials – Online employee resources for clinical trial databases. Resources include American Cancer Society Clinical Trial Matching Service, Clinicaltrials.gov, etc.

Cancer Nutrition Counseling – Access to a registered dietician with knowledge of care plan for accompanied nutrition counseling to support treatment and mitigate medication side effects.

Fertility Preservation Coverage – Coverage for fertility preservation when medically-necessary treatments may cause infertility.

Travel and Lodging Benefits – Assistance to help those receiving specialized care at a Center of Excellence or for those without transportation to routine appointments. Coverage can be provided through benefits or access to community resources through awareness of programs provided by organizations such as the American Cancer Society.

Patient Advocate Service – Critical illness assistance provided to patients who do not have a caregiver to accompany them to appointments.

Clinical Guidance and Decision Support – Services to assist employees with understanding cancer treatment options early in their journey.

Cancer-Specific Protocols for Disability Vendors – Disability vendor staff educated on cancer-specific needs.

Access to Value-Based Care Coordination	Care Coordination Reimbursement – Incentive for oncologists to work with specialists and other care team members. This may be implemented through health plan contracting for management fees, bundled payments, episodic care, etc.
	Payments for Pathway-Adherent Care – Incentives for oncologists to adhere to NCCN treatment pathways and guidelines. This may be contracted through health plans.
Rx-related Services	Single Out-of-Pocket Maximum for Medical and Pharmaceutical Benefits – Feature built into plan design.
	Coverage for Off-Label Use of Biologics – Coverage for biologics and biosimilars according to NCCN guidelines.
Psycho-Social Support	Financial Services – Access to financial planning and support services.
	Behavioral Health – Access to behavioral and mental health services specific to cancer.
	Awareness of Social and Community Services – Awareness of available community-based services to assist employees in the cancer journey.
	Lifestyle Services – Services that provide access to wigs, cosmetics, clothing etc. to support quality of life for employees with cancer.
	Awareness of Peer-to-Peer Support Services – Awareness of services for employees and caregivers in order to connect them with others to share their experiences on the cancer journey.
Employee Communication	Online Portal Exclusively for Cancer-Specific Services – Portal curated specifically for all cancer-related benefit offerings and resources, or access to a third-party resource portal such as Cancer+ Careers or Managing Cancer at Work.
	Communications Program for all Cancer-Specific Benefits – Ongoing email communication and education for all benefits related to cancer, such as disability benefits, EAP, medical and pharmaceutical benefits and Family Medical Leave education.
Reporting	Utilization and Cost Reporting – Reports from health plans, PBMs and vendors on utilization and cost of cancer-specific programs and services.
	Quality Reporting – Reports from health plans, PBMs and vendors on quality of cancer treatments based on NCCN guidelines and pathways, and cancer-specific programs and services.
	Outcomes Reporting – Reports from health plans, PBMs and vendors on outcomes of cancer treatment and cancer-specific programs and services.
	Employee/Patient Satisfaction – Reports from health plans, PBMs and vendors on employee satisfaction with cancer-specific programs and services.
	Gaps-in-Care Alert Services – Reports based on claims to health plans or plan sponsors when treatment has been abandoned.
Workplace Accommodation	Workplace Accommodation Training – Resources and training for managers, coworkers and supervisors for understanding how to support employees with cancer at work.
	Flexible Work Schedules – Establishment of company policies to accommodate employees with cancer who choose to return to work.
	Access to Privacy Rooms – Designated space in the workplace for employees to use for sensitive phone calls, rest, medication infusion, etc.
	Telecommuting Work Accommodations – Access to telecommuting options as appropriate for job function.

Sources include NEBGH’s 2015 Employer Benchmarking Survey on Cancer Care, NEBGH’s 2015 workshops and interviews, and NBGH’s “An Employers Guide to Cancer Treatment & Prevention.”



Cancer Care Quality Glossary

Accountable Care Organization

Groups of doctors, hospitals and other healthcare providers who come together voluntarily (or who are already part of a health network) to work with payers (still mostly Medicare) to tie provider reimbursements to quality metrics and reductions in the total cost of care for an assigned population of patients.

ASCO

American Society of Clinical Oncology – Nonprofit professional association for oncologists, a primary resource for clinical and patient policy, standards, procedures and guidelines. www.asco.org

Episodic and Bundled Payments

Shifts away from a fee-for-service structure and reimburses providers and care teams under a single payment for treatments of a specific type of cancer or diagnosis, depending on the contract. A number of health plans have launched pilot programs to measure the impact of episodic and bundled payments on total cost of care, as well as quality and outcomes for cancer patients. The Advisory Board compiled a guide to Oncology Payment Reform Pilots which can be found here: <https://www.advisory.com/research/oncology-roundtable/oncology-rounds/2015/05/your-guide-to-onc-payment-reform-pilots>.

Five-Year Survival Rate

The measure most often used in cancer mortality statistics for prognosis of a specific diagnosis. It is the percentage of people living five years following a similar diagnosis.

Guidelines

Clinical Guidelines that describe possible, evidence-based treatment options for physicians to use during their medical decision-making. Usually available in static form on paper or electronically. Guidelines may be created by anyone, but will be challenged by the medical community as to transparency, evidence-based documentation, etc. The Guidelines sources most commonly used by both providers and managed care are developed by NCCN and ASCO. Guidelines may be categorized by degree of evidence and consensus, and usually include reference to all possible treatment options – sometimes referred to as a “six-lane highway” because of the number of treatment options for a given disease.

McKesson/US Oncology Value Pathways powered by NCCN

A refinement of the NCCN Guidelines and the result of combined efforts through a collaboration among three organizations: NCCN, McKesson Specialty Health and The US Oncology Network. Value Pathways powered by NCCN is a shorter, distilled list of treatment choices that support the delivery of high-quality, cost-effective patient care. <https://oncology.mckessonspecialtyhealth.com/clinical-tools/value-pathways>

NCCN

National Comprehensive Cancer Network – Nonprofit alliance of 26 of the world’s leading cancer centers devoted to patient care, research and education. A primary resource for clinical guidelines for physicians and patients, clinical compendium, templates, education and research. <http://www.nccn.org/>

NCI-Designated Cancer Centers

As of 2015, there are 69 NCI-Designated Cancer Centers located in 35 states and the District of Columbia that form the backbone of NCI’s programs for studying and controlling cancer. This is the gold-standard accreditation for cancer centers as overseen by the National Institutes of Health.

Oncology Medical Home

First conceived for primary care, the medical home model for oncology brings the concept of patient-centered care managed by the physician practice into the specialty oncology setting. The oncology medical home model involves significant operational and culture change within the practice, and is intended to create a platform for a new payment model that focuses on performance of quality metrics and payment for the quality and oncology management functions of a transformed delivery model.

Outcomes

Quality measures often refer to “outcomes,” but are subject to varying definitions and perspectives. These can be clinical outcomes, such as disease-free survival, or progression -free survival, or reduction of pain from assessed levels. Outcomes can also be process or quality measures related – practices participate in a number of assessments where they are benchmarked against their peers, and the outcomes for those measurements could be frequency of patient experiences or results, or documentation of assessments.

Pathways

Oncology clinical pathways are decision support tools that refer to established clinical guidelines and literature but through some decision-making process, determine one preferred regimen over others for specific patients and diagnoses. Pathways can follow branches and decision forks that are unique to bio-markers, patient-specific health and medical responses and prior treatment, but usually a pathway culminates in one preferred choice. Again, like clinical guidelines, the variation and complexity of cancer does result in appropriate care of about 20% delivered off pathway. Because of the one preferred choice, clinical pathways are sometimes referred to as “one lane of a multiple lane highway of clinical options.”

Quality-Adjusted Life Year (QALY)

Often used as a measure to assess the value of money for an intervention, QALYs are calculated by weighing each potential year of life on a quality scale from 0 to 1 based on a person’s ability to perform activities of daily living, burden of pain and overall behavioral health.

Via Oncology

A commercial oncology clinical pathways program developed by clinicians at the University of Pittsburgh Medical Center. Now a National Cancer Institute (NCI)-designated comprehensive cancer program and a nationally recognized leader in oncology pathways, covering more than 90 percent of cancer types and all major modalities and phases of care, and used by oncologists around the country. <http://viaoncology.com/>

Thank you to Dawn Holcombe, FACMPE, MBA, ACHE; President, DGH Consulting for her substantial contribution to this glossary.



Cancer Care Resources List

Support and Educational Services for Employees

American Cancer Society (ACS) Support System

Free online and telephonic tools connecting employees to counselors for providing services such as patient advocacy, lodging and transportation support, a help line and more. www.cancer.org/treatment/supportprogramsservices/index

CancerCare

Resources for patients, caregivers and healthcare professionals. Hosts in-person community resources and events for the New York, New Jersey and Connecticut region. www.cancercare.org

Cancer.net

American Society of Clinical Oncology (ASCO)'s patient-facing online resource for cancer education. www.cancer.net

Curatio: Will2Thrive

A free private mobile social networking platform that connects and empowers young adult cancer fighters. The mission is to give cancer fighters the opportunity to create authentic and meaningful relationships with other survivors.

www.curatio.me/will2thrive

National Coalition for Cancer Survivorship (NCCS)

Resources for patients, caregivers and providers including an app that is a "pocket guide" to empower employees.

www.canceradvocacy.org

PatientsLikeMe

Connecting and learning from patients with similar cancer diagnoses. www.patientslikeme.com

Peer Support Network

Internet-based peer support service for people at any stage of the cancer journey or survivorship. www.peersupportnetwork.org

Clinical Trials Information for Employees

American Cancer Society Clinical Trials Matching Service

A free, telephonic confidential support program that helps patients and their families find cancer clinical trials most appropriate to a patient's medical and personal situation.

www.cancer.org/treatment/treatmentsandsideeffects/clinicaltrials/app/clinical-trials-matching-service.aspx

Clinicaltrials.gov

Search engine service of the U.S. National Institutes of Health for clinical trials. www.clinicaltrials.gov

National Cancer Institute (NCI)

Database of trials supported by NCI. www.cancer.gov/about-cancer/treatment/clinical-trials/search

PatientsLikeMe

Social support and information for clinical trials. www.patientslikeme.com

Navigation Services for Employees

BeatCancer.org Cancer Counseling

A service of the Center for Advancement in Cancer Education that offers a third party navigator to provide counseling, coaching and referral service for patients and caregivers. beatcancer.org/cancer-counseling/

C-Change Patient Navigation Toolkit

Promotional toolkit to educate employees/patients on the resources a navigator can provide. The toolkit includes videos and brochures to orient navigators and patients. www.cancerpatientnavigation.org/toolkit.html

Johns Hopkins Managing Cancer at Work

Personalized for employers, Managing Cancer at Work provides nurse navigation, resources for employees, resources for managers and co-workers and educational content related to cancer. www.managingcanceratwork.com/en/public/home/

Workplace Integration

Cancer + Careers

A user-friendly website that includes information on how to navigate benefits, resources for providers who talk to their patients about working while undergoing treatment, resources for co-workers to assist an employee who has cancer or who is acting as a caregiver for someone with cancer. www.cancerandcareers.org/en

Workplacetransitions.org

Toolkits for both benefit professionals and employees providing guidance on return-to-work policies and procedures. View a published report of a pilot program using the resources with six large companies. www.workplacetransitions.org

Access and Benefit Design for Benefit Professionals

CEO Cancer Gold Standard

A framework for employers to create a healthier workplace by focusing on cancer risk reduction, early detection, and access to clinical trials and high-quality care. www.cancergoldstandard.org/

NBGH Toolkit

Toolkit to guide employers in designing a comprehensive benefit package for employees with cancer. www.businessgrouphealth.org/cancer/resources.cfm

NCI-Designated Cancer Centers Database

The gold standard for cancer centers as designated by the National Institutes of Health. Using online tools, cancer centers can be found in regions throughout the United States. Also available is benchmarking data to better understand how centers compare and the metrics used. <http://cancercenters.cancer.gov/Center/CancerCenters>


Value Resources for Cancer Therapies

ASCO Value Framework

Conceptual framework developed by ASCO in 2015 to assess the value of new cancer therapies based on treatment benefits, toxicities and costs. The ASCO framework is currently undergoing a review with a 60-day comment period prior to publishing tools to assess the value of therapies. www.asco.org/practice-research/value-cancer-care

Drugabacus

An online interactive tool developed by Peter Bach, MD at the Center for Health Policy and Outcomes at Memorial Sloan Kettering Cancer Center to evaluate the cost of 54 cancer drugs. www.drugabacus.org



2015 Employer Benchmarking Survey Results for Cancer Care Benefits, Programs and Policies

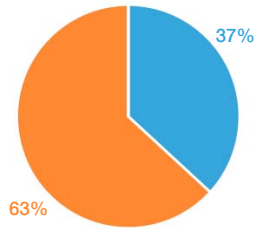
Total number of employers: 19 | Employees covered: 1,167,651

- Advanced Technology and Communications: 2
- Consumer Products: 1
- Digital Commerce: 1
- Energy: 1
- Finance: 1
- Government: 1
- Healthcare: 1
- Insurance: 2
- Media: 4
- Pharmaceuticals: 2
- Sports League: 1
- Union: 2

Question: Is this program or benefit available to your employees?

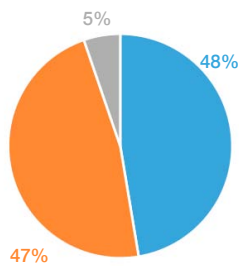
Cancer Buy-Up Package from Health Plan

Yes: 7
No: 12
Not Sure: 0



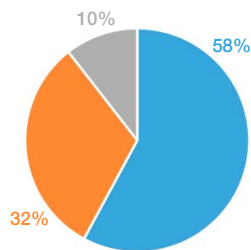
Critical Illness Insurance

Yes: 9
No: 9
Not Sure: 1



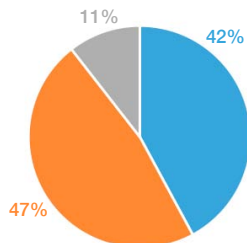
Oncology Centers of Excellence (COEs)

Yes: 11
No: 6
Not Sure: 2



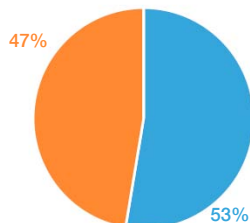
Network of high performing oncology providers

Yes: 8
No: 9
Not Sure: 2



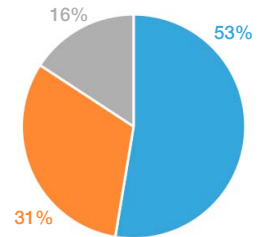
Second Opinion Services

Yes: 10
No: 9
Not Sure: 0



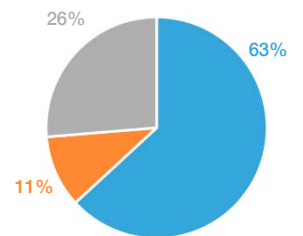
Reimbursement for services delivered as part of clinical trials

Yes: 10
No: 6
Not Sure: 3



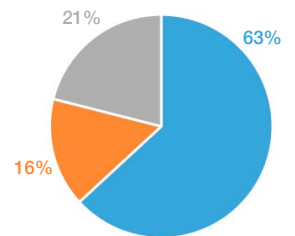
Palliative care coverage throughout course of treatment

Yes: 12
No: 2
Not Sure: 5



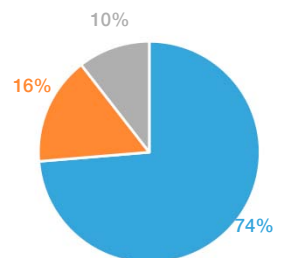
Extended hospice coverage at end of life

Yes: 12
No: 3
Not Sure: 4



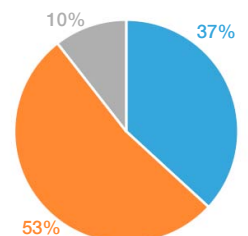
Cancer nutrition counseling

Yes: 14
No: 3
Not Sure: 2



Fertility preservation coverage

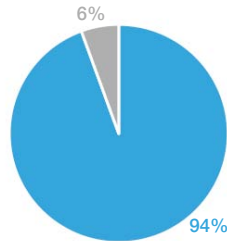
Yes: 7
No: 10
Not Sure: 2



Question: Is this program or benefit available to your employees?

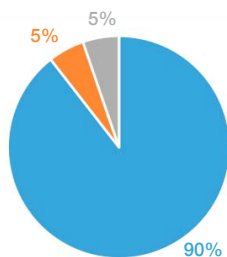
Reconstructive surgery coverage

Yes: 17
No: 0
Not Sure: 1



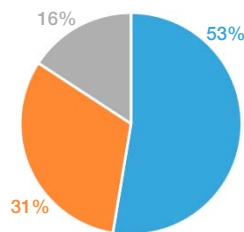
Home health services

Yes: 17
No: 1
Not Sure: 1



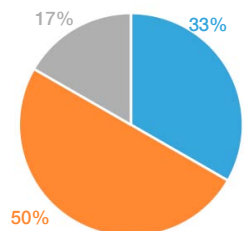
Behavioral health services specific to cancer-related issues

Yes: 10
No: 6
Not Sure: 3



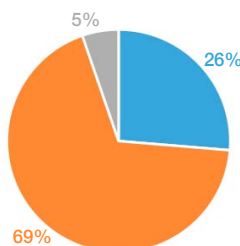
Reimbursement for care-coordination among providers (oncologists, specialists, sub-specialists, etc.)

Yes: 6
No: 9
Not Sure: 3



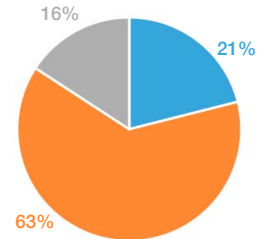
Concierge services

Yes: 5
No: 13
Not Sure: 1



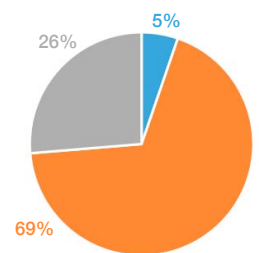
Travel and lodging benefits

Yes: 4
No: 12
Not Sure: 3



Monthly management payments to oncologists for pathway-delivered care

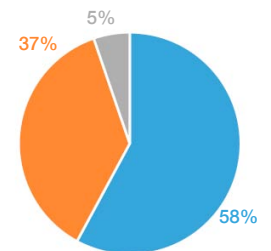
Yes: 1
No: 13
Not Sure: 5



Pharmacy Benefits

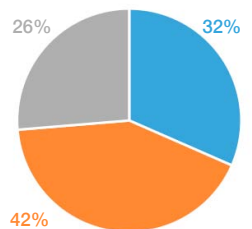
Plan design has a single individual and a single family out-of-pocket maximum that applies to the combined medical and pharmacy expenditures

Yes: 11
No: 7
Not Sure: 1



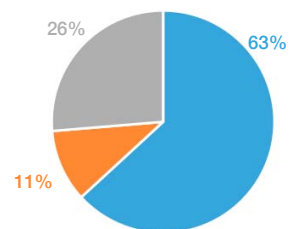
Coverage for off-label use of drugs and biologics

Yes: 6
No: 8
Not Sure: 5



Coverage of clinically efficacious drugs if more convenient (i.e. self-infused drugs for people that are remote from their infusion center)

Yes: 12
No: 2
Not Sure: 5

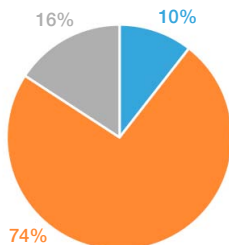


Question: Is this program or benefit available to your employees?

Disability Benefits

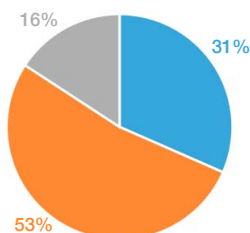
Cancer-specific protocols for short-term disability

Yes: 2
No: 14
Not Sure: 3



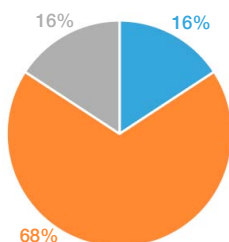
Short-term disability case managers with expertise in managing cancer-related disabilities

Yes: 6
No: 10
Not Sure: 3



Cancer-specific protocols for long-term disability

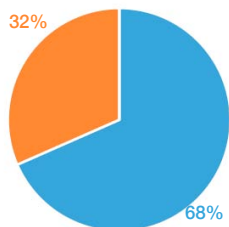
Yes: 3
No: 13
Not Sure: 3



Support Services

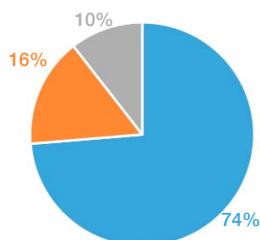
Decision support/guidance for employees newly told they may have cancer

Yes: 13
No: 6
Not Sure: 0



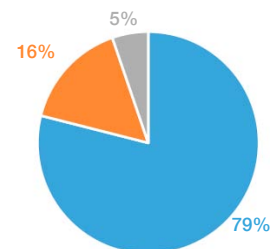
Support for treatment questions, related illnesses, etc.

Yes: 14
No: 3
Not Sure: 2



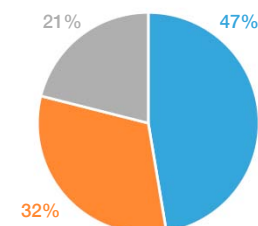
Support for questions around administering medication, medication side-effects, etc.

Yes: 15
No: 3
Not Sure: 1



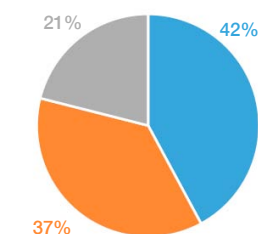
Patient advocate service/critical illness assistance (send support to appointments if employees has no able caregiver)

Yes: 9
No: 6
Not Sure: 4



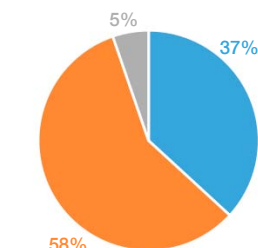
Guidance and access to information for clinical trials

Yes: 8
No: 7
Not Sure: 4



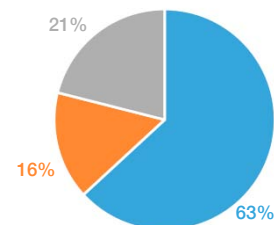
Access to online portal with evidence-based cancer resources and patient communication guides (ASCO, NCCN, ACS, etc)

Yes: 7
No: 11
Not Sure: 1



Emotional and psychosocial support specific to cancer

Yes: 12
No: 3
Not Sure: 4



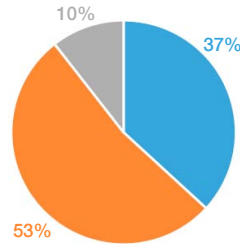
Question: Is this program or benefit available to your employees?

Financial support specific to cancer (access to financial planning services)

Yes: 7

No: 10

Not Sure: 2

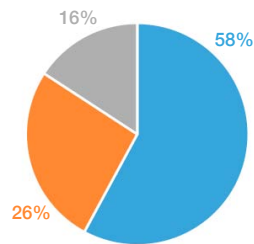


Cancer benefits education, coordination and navigation

Yes: 11

No: 5

Not Sure: 3

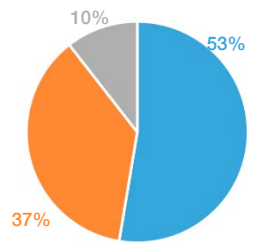


Social services specific to cancer (i.e. finding childcare, etc.)

Yes: 10

No: 7

Not Sure: 2

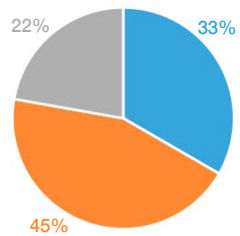


Transportation (i.e. to and from appointment)

Yes: 6

No: 8

Not Sure: 4

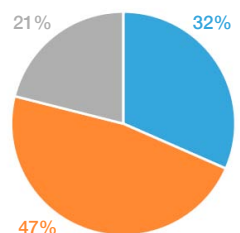


Awareness and access to peer-to-peer cancer support services

Yes: 6

No: 9

Not Sure: 4

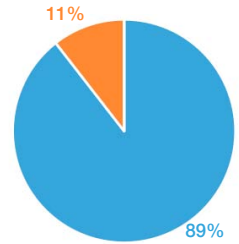


Awareness and education of Family Medical Leave (FML)

Yes: 17

No: 2

Not Sure: 0

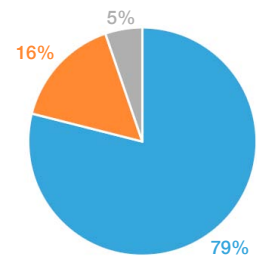


EAP network of referral services customized for diverse employee population

Yes: 15

No: 3

Not Sure: 1

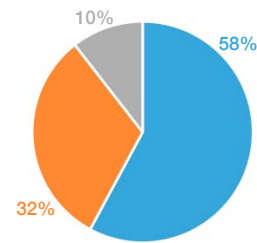


Additional lifestyle support services (i.e. wig coverage, cosmetics, etc.)

Yes: 11

No: 6

Not Sure: 2



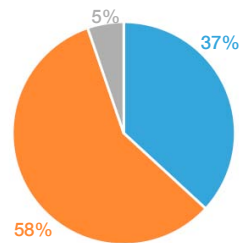
Organization and Communication of Benefits, Programs and Policies

Access to online portal for cancer-specific benefit and program resources

Yes: 7

No: 11

Not Sure: 1

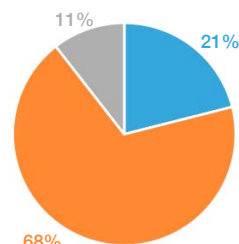


Regular and timely employee-directed email communication on cancer-specific benefits, programs and policies

Yes: 4

No: 13

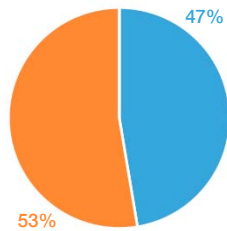
Not Sure: 2



Question: Is this program or benefit available to your employees?

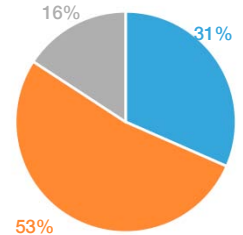
Easily accessible, organized and systematic communication effort on all cancer-related benefits (i.e. EAP, STD, FML, Medical, Pharmacy, Workplace Accommodation, etc). This could be found in a Summary Plan Description, for example.

Yes: 9
No: 10
Not Sure: 0



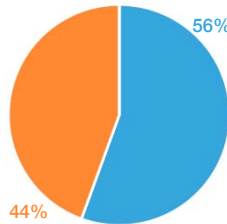
Quality or outcomes from health plan

Yes: 6
No: 10
Not Sure: 3



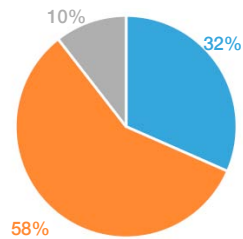
Employer assistance to employee in coordination of vendors

Yes: 10
No: 8
Not Sure: 0



Quality or outcomes from PBM

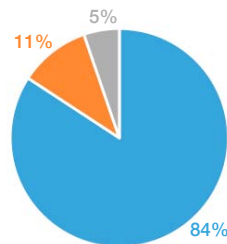
Yes: 6
No: 11
Not Sure: 2



Reporting and Analysis

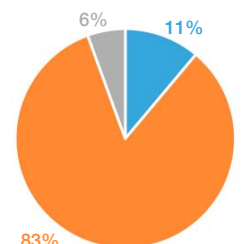
Employee utilization and cost of cancer-specific services from health plan

Yes: 16
No: 2
Not Sure: 1



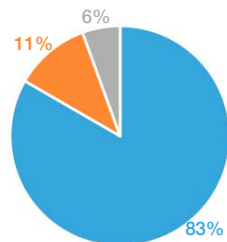
Quality or outcomes from vendors

Yes: 2
No: 15
Not Sure: 1



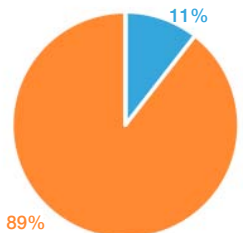
Employee utilization and cost of cancer-specific services from PBM

Yes: 15
No: 2
Not Sure: 1



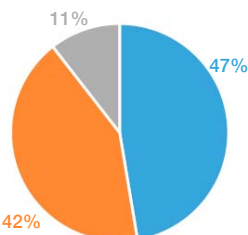
Employee satisfaction of cancer-specific services

Yes: 2
No: 17
Not Sure: 0



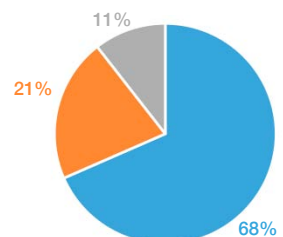
Employee utilization and cost of cancer-specific services from other vendors

Yes: 9
No: 8
Not Sure: 2



Gaps-in-care alert services

Yes: 13
No: 4
Not Sure: 2



Question: Is this program or benefit available to your employees?

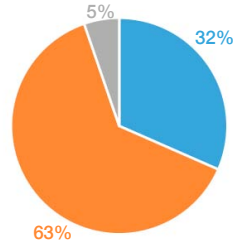
Work Accommodations

Cancer-related trainings and resources for supervisors, managers and co-workers

Yes: 6

No: 12

Not Sure: 1

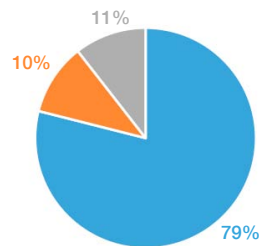


Flexible work schedules

Yes: 15

No: 2

Not Sure: 2

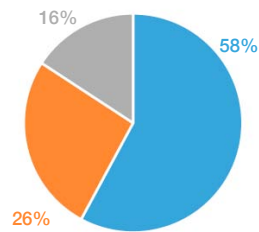


Access to private locations for employees to use for sensitive phone calls, rest, medication infusion, etc.

Yes: 11

No: 5

Not Sure: 3

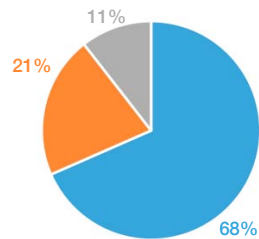


Access to telecommuting, if applicable

Yes: 13

No: 4

Not Sure: 2



Recognition

About NEBGH

Northeast Business Group on Health (NEBGH) is an employer-led coalition of healthcare leaders and other stakeholders that empowers its members to drive excellence in health and achieve the highest value in healthcare delivery and the consumer experience.

About NEBGH's Solutions Center

The Solutions Center is NEBGH's unique data-gathering and discovery platform for developing initiatives that can “move the needle” when it comes to critical healthcare issues. Focused on employers as a catalyst for change, the Solutions Center's mission is to identify the most promising, innovative opportunities for improving health outcomes, and create a framework with the potential for transforming results and changing the national dialogue.

Acknowledgements

NEBGH and the Solutions Center gratefully acknowledge Merck & Co. and Genentech for their financial support of this project, and their ongoing interest in, and support of, NEBGH's cancer work. NEBGH also acknowledges staff members Candice Sherman for extensive editing, Adria Subbiondo for graphic design and layout and Robert Murphy, Principal at Marketing Navigators, for graphic design and layout.

The authors are solely responsible for the conduct the research, analyses, and content of the manuscript.



Roundtable Panelists and Speakers

Ann Asbaty, Global Health and Wellness Officer, Cigna; **Elizabeth Comen, MD**, Medical Breast Oncologist, Memorial Sloan Kettering Cancer Center; **Michael Eleff, MD**, Medical Director, RVP, Health and Wellness Solutions, Anthem; **Kathleen Harris**, VP Benefits, Time Warner Inc.; **David Hines**, CEO & Co-Founder, Consumer Medical; **Lawrence “Rusty” Hofmann, MD**, Co-Founder, Grand Rounds; **Dawn Holcombe**, President, DGH Consulting; **Rebecca Nellis**, Chief Mission Officer, Cancer and Careers; **Nina Pederson, RN**, Director of Oncology and Transplant Case Management, Cigna; **Kerry Reynolds, MD**, Associate Medical Director, Oncology Programs, Advance Medical; **Lillie Shockney, RN**, Administrative Director, Johns Hopkins Breast Center, Johns Hopkins University; **Miles Varn, MD**, Chief Medical Officer, PinnacleCare; **Laurie Vokes-Jackson**, Senior Manager, Hospital Systems, American Cancer Society

Roundtable Participants

Michelle Alexander, MD, Medical Director, Con Edison; **Mary Bradley**, Director of Healthcare Planning, Pitney Bowes; **Christine Brennan**, Associate Director of Programs, Cancer and Careers; **Sasha Clynes**, Wellness Program Administrator, Direct Energy; **Lisa Coe, RPh**, Senior Employer Account Executive, Genentech; **Cindy Commisso, RN**, Critical Health Solutions, Wellness, Goldman Sachs; **Marco Diaz**, SVP, Global Head of Benefits, News Corp.; **Sue Duncan**, RN Manager, Medical Leaves of Absences at Reed Group, Goldman Sachs; **Adam Entenberg**, VP, Benefit Operations, Viacom, **Steve First**, VP, Global Benefits, Pfizer Inc.; **Kate Fitch, RN**, Principal & Healthcare Consultant, Milliman; **Jonathan Gelfand**, Health Management Consultant, Willis Towers Watson; **Harry Hayes**, Director, Group Health Strategy, Grand Rounds; **Kristin Jacob**, Wellness Advocate, Loews Corporation; **Mike Lanning**, Director, Employer Team, Genentech; **Deborah Mackin**, Program Manager, Benefits, PepsiCo; **Ray Macknowski**, Manager, Health Plans & Data Management, Johnson & Johnson; **Marty Makary, MD**, Professor, Johns Hopkins University School of Medicine; **Susan Margolis**, Director of Health & Welfare, NY Metro Region, PwC; **Candice Martin**, Benefits Specialist, MetLife; **Michelle Martin**, VP, HR Specialty Services, CBS Corporation; **Richard Moggio, MD**, Medical Director, L-3 Communications; **Noah Morgan**, LCSW, Human Capital Management, Optum at Goldman Sachs; **Linda Nilsen**, AVP, Human Resources, Princeton University; **Felicia Olt**, Director, Care Management, 1199 National Benefit Fund; **Elizabeth Oppenheim**, Manager, Health & Insurance Plans, Pfizer Inc.; **Andrea Pappas**, Director, Benefits and Compensation, 1-800Flowers.com, **Latricia Parker**, Executive Director, Global Benefits, The Estee Lauder Companies Inc.; **Amit Patel, MD**, Medical Affairs Director, Merck & Company Inc.; **Virginia Peddicord**, Corporate Account Executive, Merck & Company Inc.; **Wendy Perchick**, Chief Strategic Planning & Innovation, Memorial Sloan Kettering Cancer Center; **Michele Proscia**, Director, H&I Benefits & Policy, Pfizer, Inc.; **Rosaria Sasso**, SVP Compensation and Benefits, Viacom; **Shelley Sinclair**, Assistant Director, Health and Welfare Benefits, EY; **George Smith**, Senior Director, Total Rewards & Systems, Weight Watchers; **Scott Vaxman**, National Account Manager, Genentech

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