

Health Plans Navigate Unsustainable Cancer Costs and Ever-Evolving Therapies



WHITE PAPER

THE RISING COST OF CANCER

The burden of cancer is heavy on patients, providers, and payers. Approximately 40 percent¹ of men and women will be diagnosed with cancer at some point during their lifetimes. It's one of the leading causes of death in the United States, and the direct and indirect costs of cancer are staggering.

The National Cancer Institute estimated that cancer-related direct medical costs in the United States were \$183 billion in 2015 and projected to increase to \$246 billion by 2030², a 34% increase based on population growth and aging. In 2020, the National Cancer Institute estimated that cancer-related medical costs in the US were already at \$208.9 billion.³

As drug prices rise and the overall expense of cancer care increases, unnecessary or inappropriate cancer therapy has never been more costly.

In this paper, we outline new ways payers can reduce and manage the costs of cancer while driving positive outcomes for their members, their provider network, and their business processes to ultimately enable the highest standard of evidence-based care.



Increasing Prevalence of Cancer

2+ MILLION new cancer cases estimated in the United States in 2025³

Approximately **40%** of men and women will be diagnosed with cancer in their lifetimes¹



Magnitude and Complexity of New Treatment Options

1,300+ new medicines and vaccines were in development to treat cancer in 2020⁴



Unsustainable Costs of Care

\$208.9 BILLION estimated expenses for cancer care in the U.S.³ Projected to grow to \$246 billion by 2030²

25% of healthcare spending attributed to waste (up to \$935 billion)⁵

1. Siegel RL, Miller KD, Fuchs H, Jemal A. (2022) *Cancer Statistics, 2022*. CA: A Cancer Journal for Clinicians. 72(1), 7-33.
2. American Cancer Society Cancer Action Network. (2020). *The Costs of Cancer* (p. 3).
3. See National Cancer Institute at <https://www.cancer.gov/about-cancer/understanding/statistics>.
4. America's Biopharmaceutical Companies. (2020). *Medicines in Development | 2020 Report Cancer* (p. 1).
5. Shrank WH, Rogstad TL, Parekh N. (2019) Waste in the US Health Care System Estimated Costs and Potential for Savings. *JAMA*. 322(15), 1501-1509.
6. New Report: 1,600 cancer treatments and vaccines in clinical development | PhRMA

THE NEED: DECISION SUPPORT

There is significant complexity in diagnosing and treating cancer, and keeping up with continuous research advancements adds to the complexity of making treatment decisions. More than 1,600 medicines and vaccines for various cancers were in development during 2023.⁶ While new treatments are promising, it's laborious for providers to stay abreast of the ever-changing treatment landscape, including the complexities of emerging biotechnologies such as immunotherapies. It's also challenging for health plans to efficiently review prescribed treatment plans to approve and authorize payment for care.

Unsustainable care costs and complexity are driving forces for change. Payers have an opportunity to help reduce these added burdens by empowering provider treatment decisions to higher-value care.

THE SOLUTION: TREATMENT PLAN VALIDATION

When payers utilize digital technology to validate the appropriateness of the requested treatment plan electronically and automatically, they enable efficiencies for all parties. Payers can approve treatments almost instantaneously, providers can receive authorization for treatment quickly, and the patient can begin treatment without delay.

Treatment plan validation rapidly compares the prescribed treatment plan with evidence-based standards of care. Selecting an evidence-based treatment that offers the best possible outcome at a better cost than a competing therapy creates value for payers, providers, and patients.



CASE STUDY

National Insurer Reduces Costs and Cancer Care Variability

A national carrier of commercial, Medicare, and Medicaid health plans with over 18 million members, began searching for an objective third party to provide real-time expertise and guidance to facilitate authorizations for evidence-based cancer treatments to manage costs.

The health plan sought to evaluate its cancer spending and extend the knowledge of their state-level Chief Medical Officers with supplemental oncology expertise to effectively manage the quality of member care and positively impact the health plan's bottom line.

They turned to NantHealth's **Eviti Connect**®, a web-based oncology decision support and treatment plan validation platform, to build out their oncology expertise and create collaborative relationships with providers to better support care decisions. Eviti Connect's **evidence-based medical library** is a robust database of more than 4,600 cancer treatments covering all cancers and cancer subtypes and more than 9,500 active, federally-registered clinical trials. It helps providers make informed treatment decisions based on evidence and health plan language. Proactive alignment of payers and providers in the member's best interest significantly reduces appeals and denials.

Before the health plan became a customer, the NantHealth team reviewed the health plan's retrospective claims and was quickly able to find treatment plans that did not meet

evidence-based guidelines. The retrospective review found that Eviti Connect could have significantly reduced incidences of inappropriate care had the solution already been in place. Working closely with the health plan, the NantHealth team established processes integrated into its daily workflows, ensuring the most value from their investment.

Eviti Connect has relieved pressure on the payer's network providers by offering peer-to-peer expertise and facilitating real-time decision-making for cancer treatment, certifying that care meets evidence-based guidelines for the best possible patient outcomes.

RESULTS

By partnering with NantHealth, a national health plan leveraged Eviti Connect to build collaborative relationships with providers, empower clinicians with real-time decision support, and achieve an average quarterly ROI of 8.25:1—demonstrating measurable improvements in care quality and cost efficiency.

The health plan initially introduced Eviti Connect to their provider network in two states and has incrementally added additional states and covered lives over several years.



8.25:1 average quarterly return on investment

VALUE-BASED CARE THAT BENEFITS ALL PARTIES

Leveraging the evolving body of evidence-based standards of care can drive better and more efficient outcomes for members. Eviti Connect eliminates unwarranted variability in care by applying nationally accepted treatment standards at the moment of clinical prescribing. This facilitates early health plan compliance, transparency, and peace of mind for members, providers, and payers—driving better outcomes and sustainable value for all.

Selecting an evidence-based treatment that offers the best-expected outcome at a better cost than a competing therapy creates value-based care that benefits all parties.

- Members experience peace of mind that they receive the most appropriate treatment for their disease.



- Physicians demonstrate the prescription of high-quality care and receive appropriate reimbursement from the payer.



- Payers ensure they are reimbursing for high-quality, high-value care.



ABOUT NANTHEALTH

At NantHealth, we believe technology should enhance—not replace—the human experience in healthcare. As cancer prevalence and treatment complexities rise, our solutions empower payers to navigate unsustainable costs and ever-evolving therapies, delivering value-based, patient-centric care at scale.

Our innovative, people-focused solutions modernize healthcare while upholding the highest standards for privacy, security, and ethical care. NantHealth's product portfolio comprises the latest technology in payer/provider collaboration platforms for real-time coverage decision support (Eviti and NaviNet). The OpenNMS Group, Inc., a NantHealth subsidiary, helps businesses monitor and manage network health and performance.

Eviti Connect is an intelligent treatment plan validation platform that combines advanced technology with clinical expertise, empowering providers and payers to confidently prescribe and reimburse high-quality, high-value care.

For more information, visit NantHealth.com or email PayerSales@NantHealth.com to see Eviti Connect for Oncology in action.

