

The Influence of Value Frameworks on Payer and **Oncologist Decision-Making in the United States**



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Background

• In the US, there is no formal, centralized, health technology assessment process for reviewing new oncology drugs. However, value frameworks can help facilitate value-based care. This research explores both payers' and oncologists' awareness of value frameworks and their influence on decision-making.

Methods

- Secondary research was conducted to understand the key elements of 5 value frameworks: American Society of Clinical Oncology (ASCO), National Comprehensive Cancer Network (NCCN), Memorial Sloan Kettering Cancer Center (MSKCC), European Society for Medical Oncology (ESMO) value frameworks, and Institute for Clinical and Economic Review (ICER).
- An online survey was developed and sent to 21 payers and 120 oncologists in the US.
- Respondents were asked whether they were aware of each of the 5 value frameworks.
- Payers were asked to rate the influence of each on their formulary decision-making on a scale of 1 to 7 where 1 was low and 7 was high; oncologists were asked to rate the influence on their clinical decision-making on the same 1-7 scale.

60

Oncologists

• Payer and oncologist responses were analyzed and compared to understand how awareness and influence of each value framework differ across the 2 stakeholder groups.

Conclusions

- Value frameworks play an important role in formulary and clinical decision-making in the US.
- US-specific national guidelines, specifically ASCO and NCCN, are well known among both payers and oncologists and have an important influence on decision-making for both stakeholders.
- ASCO and NCCN have a greater influence on oncologists' clinical decision-making than payers' formulary decision-making.
- Both payers and oncologists are less aware of MSKCC, which was developed by 1 well-known hospital system; MSKCC also has a more moderate influence on clinical and formulary decision-making, compared with ASCO and NCCN.
- Awareness of MSKCC is higher among payers than oncologists, and its influence on clinical and formulary decision-making is similar.
- ESMO, a European guideline, is less well known among payers and oncologists in the US compared with other value frameworks; for US oncologists who are aware of ESMO, this framework has a moderately high influence on clinical decision-making.
- ICER, which takes cost-effectiveness into account, is well known among US payers and has a moderately high influence on formulary decision-making; however, ICER is not well known among oncologists.
- Limitations: Because the research was conducted through a quantitative survey, there was no opportunity to probe on the rationale for payer and oncologist responses. In addition, the research

was limited to individuals willing to participate in online surveys. There is higher sensitivity in the oncologists due to payers, due to the higher number of oncologists surveyed.

Results

- 120 oncologists and hematologists responded to the survey.
- 60 respondents were oncologists, and 60 had a combined specialty in hematology/oncology.
- 57 were affiliated with a large academic center, 28 with a regional hospital, and 35 with private practice/standalone clinic.

Oncologist breakdown by specialty

60

Combined

hematologists

& oncologists

- 21 payers responded to the survey.
- 8 regional managed-care organizations (MCOs), 5 pharmacy-benefit managers (PBMs), 4 National MCOs, and 4 integrated delivery networks (IDNs).

Payer breakdown by organization type





- Developed by ASCO, the ASCO Value Framework evaluates cancer treatments based on clinical benefits, side effects, and patient quality of life.
- Designed to facilitate informed decisions between oncologists and patients, the framework has been periodically refined, incorporating broad stakeholder feedback.
- Recent studies have highlighted the frameworks versatility and potential to assist healthcare providers in making patient-centric treatment decisions.
- 95% of payers in the sample are aware of ASCO value frameworks, and these value frameworks have an important influence on formulary decision-making.



 76% of oncologists surveyed are also aware of ASCO value frameworks, and these have an important influence on their clinical decision-making.



Value framework NCCN

- The NCCN Value Framework was developed to provide clear, evidence-based criteria to guide clinical decision-making.
- This value framework focuses on patient-centered care, incorporating both therapeutic benefits and potential side effects to assess the value of cancer treatments based on benefits, toxicities, and costs.
- NCCN Evidence Blocks[™], introduced in 2016, are a key component of the framework and provide a visual representation of the value-specific treatment regimens.
- All of the payers surveyed are aware of NCCN, and it has an important influence on formulary decision-making.



Aware 📕 Not aware Influence of NCCN on payer and oncologist decision-making



 Oncologists surveyed are more aware of NCCN than any other value framework tested, with 82% aware; NCCN has the highest influence on clinical decision-making across all value frameworks tested.



• The MSKCC Value Framework provides a transparent and objective method to quantify the value of oncology therapies by assessing parameters such as efficacy, side effects, novelty, and R&D costs.

- Also known as the Drug Abacus, this framework was first introduced in 2015 as a response to the rising costs of oncology treatments.
- The framework focuses on the value a therapy provides to patients, rather than on solely market dynamics or R&D costs.
- 76% of payers are aware of MSKCC, but it has only a moderate influence on their decision-making.



• Awareness of MSKCC is low among oncologists, with only 50% aware; for those who are aware of MSKCC, this framework has a moderate influence on clinical decision-making.



• The ESMO Value Framework uses a holistic approach to assess the benefit of oncology treatments, considering factors such as





• The ICER Value Framework serves as a comprehensive tool to evaluate the value of healthcare interventions.

Awareness of the ICER value framework Oncologists Payers (n=21) (n=120) 9% 56% n=2 n=67

survival rates, side effects, and patient quality of life.

- It employs the ESMO Magnitude of Clinical Benefit Scale to distinguish between clinically meaningful and marginal treatment outcomes.
- The framework has been instrumental in guiding reimbursement and clinical decisions in oncology across Europe.
- For payers, awareness of ESMO, a European guideline, is low, with only 48% of payers aware, and influence is low as well.



Aware Not aware

Influence of ESMO on payer and oncologist decision-making **Oncologists** Payers Weighted average 4.07 2.9

- Awareness of ESMO is also low among oncologists, with only 51% aware, but these frameworks have a higher influence on clinical decision-making compared with formulary decision-making.
- ICER's assessments incorporate a breadth of evidence sources, including manufacturer data and patient inputs.
- It is periodically updated, most recently in 2023, to reflect evolving industry standards and stakeholder input.
- 90% of payers surveyed are aware of ICER, and it has a moderate influence on formulary decision-making.
- Oncologists are less aware of ICER than any other value framework, with only 44% aware of ICER; for those who are aware of ICER, this framework has a moderate influence on clinical decision-making.



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