



HealthPolCom Case Study

Improving Medicare's Coverage for Cancer Treatments

Situation: Medicare's reimbursement rules were creating incentives for physicians to provide off-label cancer treatments to patients in hospitals rather than in outpatient clinics.

Medicare did not cover oral forms of anti-cancer medicines even though the same chemical compounds were covered when given to patients via an injection or an infusion.

Actions: Wrote legislative language to require Medicare to pay for:

- Off-label uses of medicines for treating cancer in outpatient clinical setting; and
- Oral forms of anti-cancer medicines that were already covered when administered to patients by physicians as an injection or an infusion.

Oversaw economic analyses demonstrating cost neutrality of proposals.

Created integrated messages that coupled economic analyses with an explanation of how the legislation would improve the quality of care for patients with cancer:

- Outpatient care is less likely to result in hospital acquired infections, and is a less costly setting for providing the same treatments;
- Oral forms of medicines are less likely to cause systemic side-effects and don't involve the staff, equipment, costs or patient discomfort of IV administration; and
- Created messages about how the proposal would increase the incentives for developing more oral forms of cancer treatments.

Worked with Congressional staff to refine and support the proposals, and draft specific legislative language.

Developed relationships with cancer patient advocacy groups and educated them about the value of the proposals, and worked with their representatives and other allies to support the proposals.

Researched, developed and implemented legislative strategy characterized by a Congressional colleague as a "miracle," which enabled passage of the proposals.

Outcome: Both proposals were signed into law. These improved the quality of care for Medicare patients with cancer by removing disincentives for treating Medicare cancer patients as outpatients, and by increasing incentives for the development of more oral forms of anti-cancer medicines.