

STATEMENT FROM THE US ONCOLOGY NETWORK

The US Oncology Network Expresses Concerns with Proposed International Pricing Index Model Demonstration Project

The US Oncology Network (“The Network”) expressed concerns with a new Centers for Medicare & Medicaid Services (CMS) proposal to change how Medicare pays for physician-administered drugs. If implemented, The Network believes that the proposal could have significant implications for patient access to timely care and would upend ongoing efforts to transition to value-based models in a careful and deliberate manner.

The proposed International Pricing Index (IPI) model would establish an expansive mandatory demonstration project to allow private-sector vendors to negotiate Medicare Part B drug prices to purportedly align payments with the prices paid in other countries.

“We support the administration’s focus on bringing down the high costs of prescription drugs. However, we believe this goal should be accomplished through collaborative, transparent and voluntary models that are also aimed at protecting patient safety and access to care,” said Marcus Neubauer, MD, chief medical officer for The US Oncology Network. “Rather than easing patient out-of-pocket costs associated with drug prices, we fear this proposal to dramatically restructure Medicare reimbursements for specialty drugs could actually expose patients to unnecessary barriers to care.”

Cancer therapies consist of complex drug regimens that are dynamic and frequently adjusted at the point of care. The Network warns that the IPI could make it more difficult for community oncology practices to offer personalized cancer treatment to Medicare patients.

The Network is also concerned with the mandatory nature of the proposed demonstration. The Network believes that models developed under the Centers for Medicare and Medicaid Innovation (CMMI) should be voluntary, targeted, patient-centered, transparent and supported by data. As a leader in providing cancer care in the community setting, The Network is proud to support the more than 900 physicians who participate in the Oncology Care Model (OCM), a CMS-led, voluntary alternative payment model meant to ensure a successful transition from fee-for-service to value-based payment. The Network has spent years developing, updating and adhering to a clinical pathways program that is now a cornerstone of the OCM. We have shown we can reduce costs and we believe pathways can certainly be used to drive price competition in an evidence-based and patient-centered way.

The Network stands ready to work with the administration and Congress to develop patient-centered and evidence-based models aimed at reducing costs while protecting patient access to safe and timely care.

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About The US Oncology Network

Every day, The US Oncology Network (The Network) helps more than 1,400 independent physicians deliver value-based, integrated care for patients — close to home. Through The Network, these independent doctors come together to form a community of shared expertise and resources dedicated to advancing local cancer care and to delivering better patient outcomes. The Network provides doctors with access to coordinated resources, best business practices, and the experience, infrastructure and support of McKesson Corporation. This collaboration allows the doctors in The Network to focus on the health of their patients, while McKesson focuses on the health of their practices. Together, The Network and its affiliated physicians are committed to the success of independent practices, everywhere.