

Opportunities to improve the efficiency of oncology care in fee-for-service Medicare

ISSUE: Concern has been expressed that fee-for-service payment systems can create incentives to use more costly interventions—oncology-related drugs, radiation, and surgery—that lack evidence of improved clinical effectiveness compared with other treatment options, lead to the overuse of oncology-related interventions, and do not facilitate cancer care coordination.

KEY POINTS: In the Commission’s June 2015 report to the Congress, we began to examine bundled approaches as a mechanism to improve the value of oncology care. At the March meeting, we will continue our discussion of approaches that seek to pay efficiently for oncology services while improving care quality.

ACTION: At the March meeting, Commissioners should consider the evidence presented and discuss possible directions for the Commission’s work.

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