



Payer and Registry Synergy: Collaboration and Data Sharing for Improved Understanding of Cancer Care

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UnitedHealthcare Oncology Line of Service



Background

- UnitedHealthcare has a large population of members with cancer
- Expensive and complicated disease ripe with opportunities
- Data available from administrative claims is light on clinical detail
- Limitations on capabilities for improvements to quality and efficiencies of cancer care

UnitedHealthcare Cancer Registry

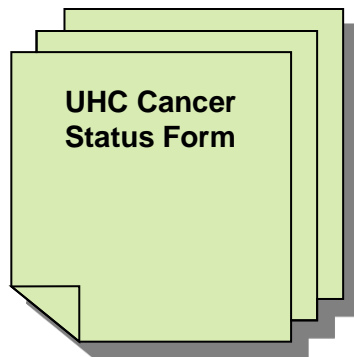


- Began in 2007
- Limited cancer types
- An involved and voluntary process

UnitedHealthcare is the first and only payer with a Cancer Registry

Oncologists/urologists contribute clinical data for patients with breast, colorectal, lung and prostate cancers

Integrate clinical data into UnitedHealthcare's Cancer Registry



8,300+ Participating Oncologists/Urologists

59,400+ UHC patients receiving care since 2007

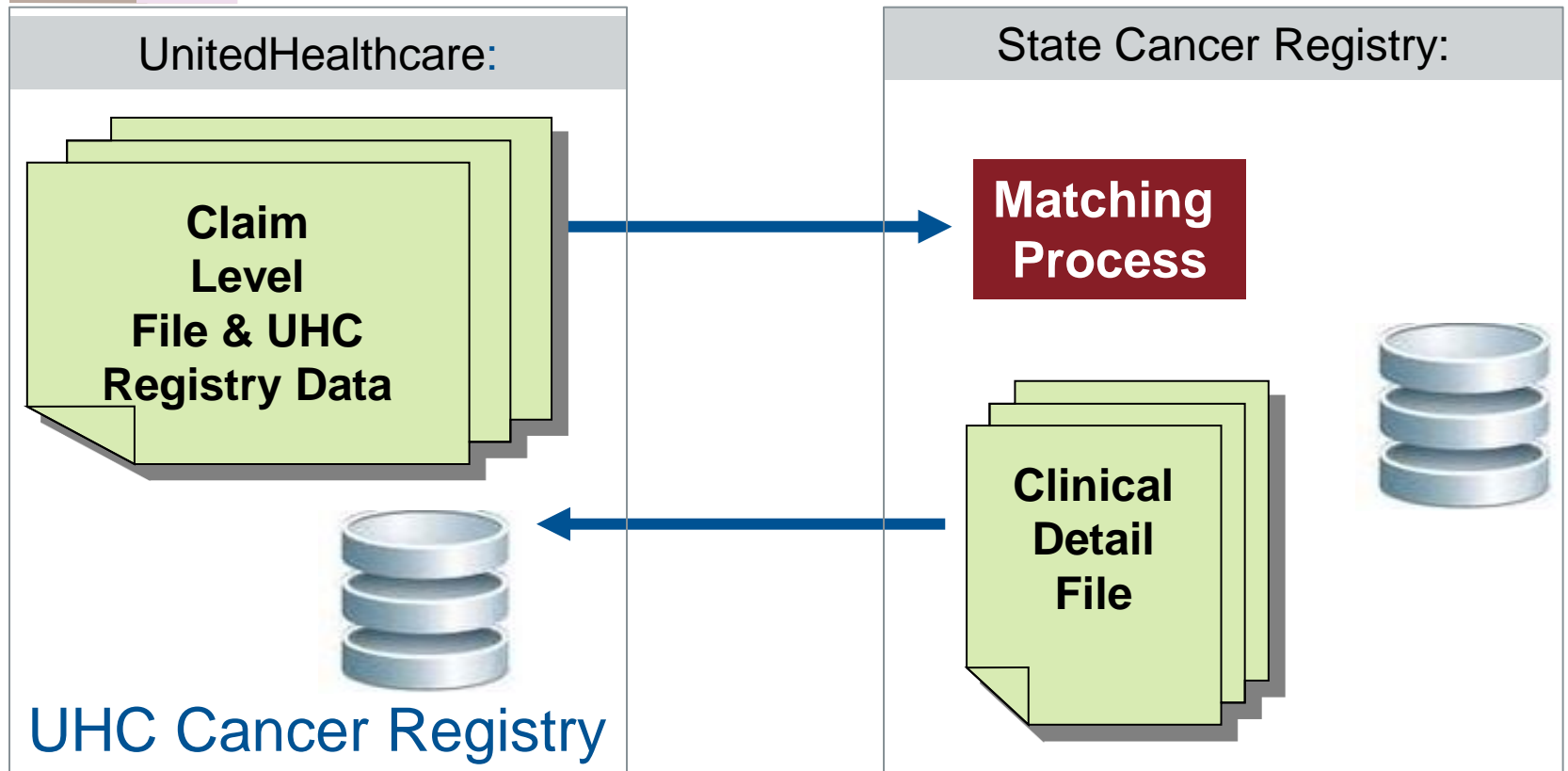
Improved analytic abilities and understanding for both sides

- State Cancer Registries
 - ❖ Strength of clinical fine details
 - ❖ Higher volume and accuracy of data
 - ❖ Weakness of longitudinal treatment/care details
- Payer
 - ❖ Strength of administrative claim level detail
 - ❖ Weakness in clinical fine details

The Exchange

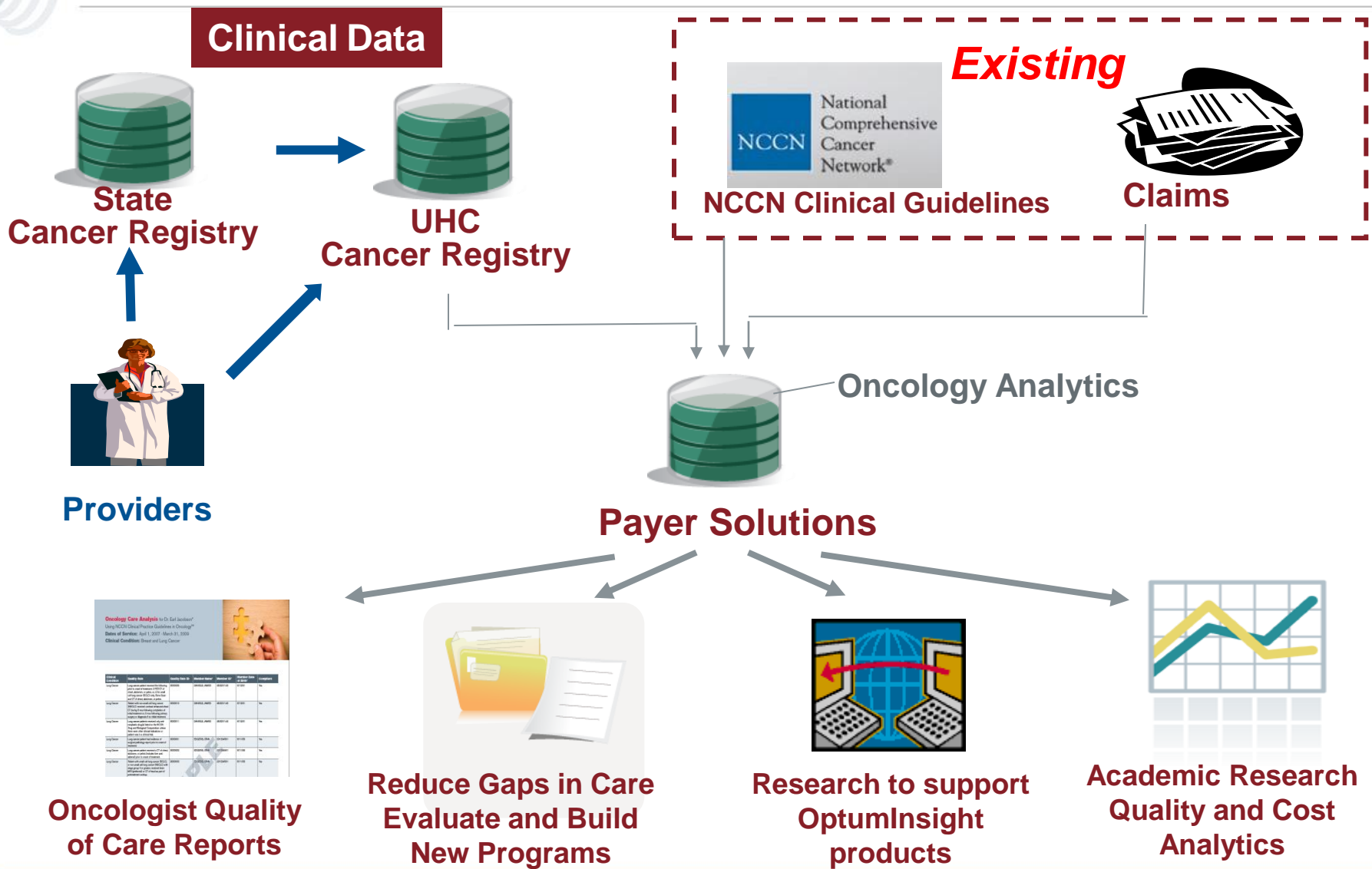


Legal, regulatory and compliance requirements satisfied



Solutions through Better Information

EMPLOYER & INDIVIDUAL



Conclusion: It's a WIN-WIN



Enabled Solutions for State Registries:

- Enhanced surveillance – additional cases
- Enhancement of research projects with additional detail on treatments, etc.

Enabled Solutions for Payer:

- Provide insight for oncology practices
- Driving new UHC programs aimed at quality improvement and cost effectiveness
- Comparative effectiveness research enablement
- Accurate case-mix adjustment

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