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### Nicole Chambers Sr. Director, Corporate Services AmerisourceBergen

Nicole Chambers is a Corporate Account Director with AmerisourceBergen Specialty GPOs. In this role, Nicole is the main liaison to all precision medicine diagnostic partners as well as our service partners. She assists in the management of the Precision Medicine Working Groups to update testing recommendations for the membership and develop education opportunities as it relates to precision medicine. Nicole also works with our Innovation Team on initiatives for patient engagement/medication adherence and remote patient monitoring. She works with Genentech's biomarker testing team to identify operational gaps in testing and increase testing for all applicable patients. Previously, Nicole worked for IntrinsiQ Specialty Solutions as Senior Director, Analytical Sales. She started with IntrinsiQ at its inception in 2003 where she was responsible for productizing and selling clinical usage data to pharmaceutical companies. Nicole managed the informatics sales team who are responsible for working with pharmaceutical manufacturers to fulfill their data needs. She holds a Bachelor of Science in Business Administration from the College of Charleston and a Master of Business Administration from Monmouth University, where she was an adjunct business professor for five years.



### Susan Weidner Sr. Vice President, IntrinsiQ Specialty Solutions

Susan Weidner joined AmerisourceBergen in 2013. As the Senior Vice President of IntrinsiQ Specialty Solutions, Susan is responsible for our specialty solutions business, including software and analytics capabilities focused our Specialty Physician Services customers, including specialty providers, manufacturers, and payers. She launched our newly formed Digital Health segment including solutions to address precision medicine and community-based research strategies. In her position, she also coordinates activities across both our software and analytics businesses in support of our specialty distribution and physician group purchasing organizations.

With over 20 years of healthcare experience, she has led the design, development and implementation of innovative healthcare solutions, including those driven by healthcare informatics. Leveraging her expertise in clinical and outcomes research along with health economics, she has assisted pharmaceutical companies, payers and provider organizations in demonstrating the value of their product(s) and/or organizations.

Prior to joining IntrinsiQ Specialty Solutions, Susan held executive leadership positions at pharmaceutical, healthcare consulting, and precision medicine companies.

# Disparities in Cancer Care Summit

**Initial Findings and Action Plan** 

Susan Weidner, SVP, IntrinsiQ

Nicole Chambers, Sr. Director, Corporate Services



Segments of the US population are disproportionately less likely to receive standard recommended cancer care.

34% of all cancer deaths in patients 25 to 74 years old could be prevented if socioeconomic disparities were eliminated.

Eliminating disparities in minorities would have saved \$230 billion in direct costs and over \$1 trillion in premature deaths and illnesses between 2003 and 2006.

#### Social Determinants of Health



#### **Economic Stability**

- Employment
- Income
- Expenses
- Debt
- Medical bills
- Support



### Neighborhood and Physical Context

- Housing
- Transportation
- Safety
- Parks and playgrounds
- Walkability
- ZIP code/geography



#### Education

- Literacy
- Language
- Early childhood education
- Vocational training
- Higher education



#### Food

- Hunger
- Access to healthy options



### Community and Social Context

- Social integration
- Support systems
- Community engagement
- Discrimination
- Stress



Health Care System

- Health coverage
- Provider availability
- Provider linguistic and cultural competency
- Quality of care

#### **Health Outcomes**

Mortality, morbidity, life expectancy, health care expenditures, health status, functional limitations

## Lack of Cancer Screening and Impact on Individual and Population Health

Cancer screening saves lives and reduces total lifetime cost of care.

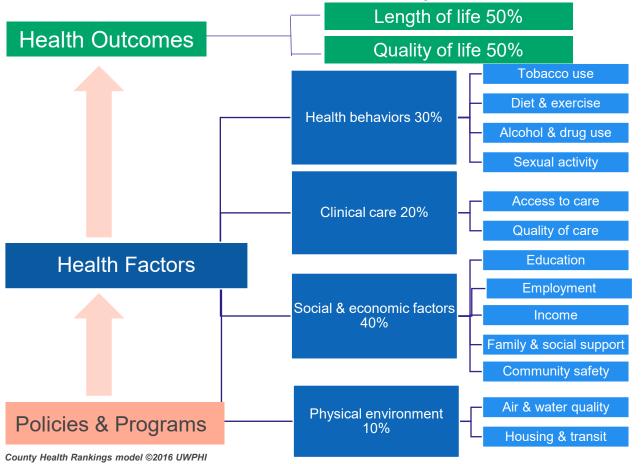
Breast cancer is the most common cancer worldwide.<sup>1</sup> In American women, it is the most diagnosed and the second leading cause of cancer death.<sup>2</sup>

- Even though breast cancer is curable when caught early, nearly 30% of women 50 years and older are not up-to-date with screening mammograms.<sup>3</sup>
- The rate is especially low among uninsured women, with only 30% being current with recommended screening.

87% of eligible Medicaid or Medicare participants did not receive lung cancer screenings, according to one study.<sup>4</sup>

- States in which Medicaid covered this preventive exam had higher screening rates.
- Only 15.7% of 48,923 Medicaid patients received screening, meaning 84% did not.
- Only 12.5% of 332,926 Medicare beneficiaries received screening, meaning 87.5% were not screened.

### Social determinants of health impact health outcomes



<sup>1.</sup> Magnan, S. 2017. Social Determinants of Health 101 for Health Care: Five Plus Five. NAM Perspectives. Discussion Paper, National Academy of Medicine, Washington, DC. https://doi.org/10.31478/201710c

Providing medical care alone is insufficient for ensuring better health outcomes; Social Determinants of Health (SDoH) must be addressed as well<sup>1</sup>

SDoH Medical Care 80-90% 10-20 % Health-related behaviors Socioeconomic factors Modifiable Environmental contributors factors

## AmerisourceBergen's Roadmap to Address Disparities in Cancer Care

In collaboration with Key Leaders **Immediate** Ongoing Short term Strategic Strategic Communication Research Advocacy Initiatives Relationships Goal Research, learn and Grow our footprint in the Work with our Government Leverage new tools and Partner with our pharma publish on the issue practices that serve solutions to support Affairs team to raise colleagues on initiatives to disparate populations stakeholders in addressing awareness and support address the issue(s) solutions for change these challenges Provider Increased participation ION membership and Broad participation in Engage practice Collaborate in AIQ key RWE opportunities Pharma Begin engaging pharma partners in the discussion to Support the various AB activities to address the issue(s) (i.e. strategic research or enhance awareness and develop collaborative PM initiatives) approaches Lab Engage lab companies and stakeholders to establish necessary data exchanges that will support our overall goals and objectives

#### Description

Work collaboratively with Dr. Patel to develop and publish a white paper on the issue and AB's commitment to the solution

Expand our footprint in oncology using marketing and other efforts to target small and medium sized practices as well as others who serve disparate patient populations

Through the launch of both PME and CTN we will be better positioned to identify patient populations, study opportunities, provide support in the PM journey, educate and drive change

Expand on our current relationships with partners to collaboratively identify strategic initiatives we could partner on to address challenges Work collaboratively across the internal AB team and with external stakeholders to support solutions for change

### Disparities in Cancer Care Summit- Event Summary

#### **Industry Advisory Council**

#### Thursday, August 11, 2022

90-minute Industry Advisory Council Meeting

- Moderator: Nancy Hoak, AmerisourceBergen
- Objectives:
  - Understand the types of disparities cancer patients are experiencing
  - Discuss ideas to address these disparities, including any solutions that the group has implemented or considering
- Participating Industry Advisory Council included representation from: Amgen, AZ, BMS, CTI, DSI, GNE, Incyte, Lilly, Mirati, Patient Discovery, Pharmacosmos, Sanofi, and Takeda representing multiple segments within the industry including DEI, medical affairs, market access, and diagnostic liaisons

### Clinical Care Team Focus Group

#### Friday, August 12, 2022

60-minute Focus Group

- Moderator: John Marshall, MD, Georgetown University
- Objectives:
  - Understand the types of disparities cancer patients are experiencing
  - Discuss ideas to address these disparities, including any solutions that the group has implemented or are considering
- Six healthcare providers including clinicians, practice administrators, and individuals involved in the delivery of equitable cancer care – participated in the focus group

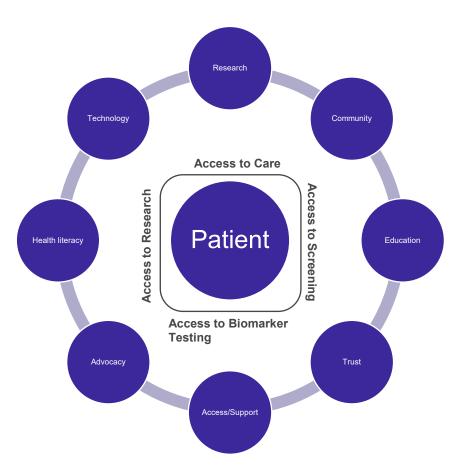
### Disparities in Cancer Care Summit

Friday, August 12, 2022

**Disparities Summit** 

- Program agenda:
  - The Role of Personalized Medicine in Addressing Health Equity
  - The Role of Community Oncology in Addressing Cancer Health Disparities
  - Diversity, Equity, and Inclusivity in Cancer Treatment from a Payer Perspective
  - The Impact of Global Health Equity and the Impact of Access to Cancer Care
  - Leveraging Digital Health Tools to Deliver Equitable Care Across Diverse Patient Populations
  - Creating an Ecosystem that Breaks Down the Barriers of Access to Care
- Ten speakers representing a diverse set of organizations and viewpoints engaged attendees through podium presentations and panel discussions

### **Key Learnings**



## Disparities Summit Learnings: AB's Addressing Disparities in Cancer Care Action Plan



#### Consortium

Lead through the development of a consortium focused on studying, defining, aligning, and generating evidence to advance the work of addressing disparities in cancer care.



#### **Trust**

Maintain a leadership position by establishing community-based partnerships focused on early education that is tailored to specific patient populations in collaboration with a broad set of stakeholders.



#### Community

Success will happen locally and within the community. Leveraging our deep relationships across the care delivery system positions us well to create a ecosystem of support.



#### **Stakeholder Engagement**

Establish a centralized repository of resources from across the continuum of care that support the delivery of equitable cancer care. In addition, create a forum to share information, ideas, etc.



#### **Education/Communication**

Develop an education strategy focused on education of all stakeholders (patients, care givers, HCP teams, etc.).

### Audience Response Survey

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1. Which of these options best describe the general geographic area where you practice?

A. Rural

B. Suburban

C. Urban

## 2. Do you or your staff ask patients about their social determinants of health?

- A. Always (e.g., at every visit)
- B. Often (e.g., once a quarter / twice a year)
- C. Sometimes (once a year)
- D. Only upon intake of a new patient
- E. Never

# 3. Do you currently have any programs in your practice that address health disparities?

A. Yes

B. No

C. It is under consideration

D. Unsure

- 4. What types of programs would you find most valuable in addressing cancer health disparities to offer your patients?
  - A. Screening programs and partnerships
  - B. Greater access to clinical trial opportunities
  - C. Greater access to biomarker testing
  - D. Support staff focused on addressing SDOH
  - E. Community partnerships

5. If payment models incentivized your practice to address social determinants of health at the local level, would you do more to support your patients and local community at large?

A. Yes

B. No

C. Not Sure

