Welcome to our Spring newsletter

As health reform implementation continues, it is useful to consider how the system may adapt to handle new medical technology. In a recent NEJM perspective, my CEVR colleague, James Chambers, and I analyze Medicare’s ongoing national coverage analysis for “Provenge” (Sipuleucel-T) a new treatment option for certain patients with prostate cancer. With estimated survival gains of 4.1 months compared to placebo, and costing $93,000 per course of treatment, Provenge raises many policy questions. Ultimately, its lasting legacy may be its role in accelerating overdue payment reforms, which could take the form of bundled payments or accountable care organizations.

- Peter J. Neumann, ScD
  Director, CEVR

COST-EFFECTIVENESS ANALYSIS (CEA) REGISTRY

CEVR is the home of the CEA Registry (www.cearegistry.org).

We have now updated the CEA Registry through July 2010. The full 2010 data will be posted soon.

HIGHLIGHTS

Willingness to pay for predictive tests
We surveyed a representative sample of nearly 1,500 people to find out how much they would pay for predictive healthcare tests, and what they would do with the resulting information. The survey asked about hypothetical tests for predicting Alzheimer’s disease, breast and prostate cancer, and arthritis. Most people were willing to pay for these tests themselves, even if the tests were not perfectly accurate and even if there were no direct treatment consequences. READ MORE

Cost-savings and improved outcomes for critically ill patients
The type of nutritional support provided to critically ill patients can affect costs and clinical outcomes. A meta-analysis conducted by CEVR researchers found that moving an eligible patient from intravenous to tube (enteral) feeding can save $4,000 and substantially reduce the risk of major, life-threatening events. READ MORE

Listening to Provenge
The Centers for Medicare and Medicaid Services’s (CMS) national coverage policy for sipuleucel-T (Provenge) may prove to be a landmark case. In this perspective we highlight the challenges faced by CMS when making the coverage decision and what it means for payment. READ MORE

What’s next for QALYs?

RECENT PUBLICATIONS


Chambers J, Neumann PJ. Listening to Provenge - What a costly cancer treatment says about Medicare policy on new technology. NEJM 2011. Published online Apr. 6, 2011. Read More


Neumann PJ. What’s next for QALYs. JAMA. 2011 May; 305(17):1806-1807. Read More

CEA REGISTRY BLOG

Visit the CEA Registry Blog

The CEA Registry blog is a frequently updated resource targeted at the health policy community. Blogs range from brief updates on evolving policies to more in-depth comment pieces.
What’s next for QALY’s?
The quality-adjusted life year (QALY) has come under criticism lately. In the United States, health reform legislation prohibited use of cost-per-QALY thresholds. In this commentary, I argue that much of the opposition is unreasonable. For all of its shortcomings, the QALY provides a helpful benchmark in considerations of comparative value. READ MORE

Natalia Olchanski, M.S., is a Project Director and works on projects involving modeling of health outcomes and costs, evaluation of the impact of resource reallocation on optimizing life expectancy, quality of life, productivity and costs. Her additional interests include understanding and quantifying the value of information technology in health care.

Katie May, B.A., is a Research Assistant and helps provide administrative support for CEVR.

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Sponsors receive complete access to the CEVR Value Databases, an invitation-only meeting and many other unique benefits. If you would like to learn more about how to become a sponsor, please contact our Research Manager, Dr. Amy Stern.

UPCOMING PRESENTATIONS

ISPOR, May, 2011
Issues Panels:
• Is FDA/CMS parallel review worthwhile? Is it feasible?
• How do we stop paying for low value care?
Podium:
• Using cost-effectiveness information to allocate Medicare resources- How much more health for the money?
Poster Presentations:
• Current uses of and perceptions about FDAMA Section 114.
Symposium
• Is health economics an un-American activity?

ASCO Annual Meeting, Chicago June 2011
Poster Presentations:
• Framing the benefits of cancer treatment: How survival is described influences preferences for care.

AcademyHealth Annual Research Meeting, June 2011
Poster Presentations:
• Recent trends in the performance of Medicare special needs plans.