



# **Cancer Prevention & Screening Program**

## Cancer is the #1 driver of healthcare costs for your clients<sup>1</sup> and the #1 cause of death for working adults.<sup>2</sup>





<sup>&</sup>quot;Cancer Now Top Driver of Employer Health Care Costs, Says Business Group's 2023 Health Care Strategy and Plan Design Survey", Business Group on Health, August 2022

<sup>&</sup>quot;2022 Cancer Facts & Figures Cancer", American Cancer Society, January 2022 – Cancer is the #1 cause of death for those under the age of 85

Evidence-based screening guidelines work.

The only issue is access barriers.

65%

of U.S. adults behind on cancer screening<sup>1</sup>

73%

of those due for colorectal cancer screening did not receive recommendation from PCP at wellness visit<sup>2</sup>

41%

of those with a positive FIT did not receive follow-up testing<sup>3</sup>

2x

more likely to die of colorectal cancer when follow-up testing is missed after abnormal screens<sup>4</sup>







## Our program enables early detection and better management to address cancer costs

Avoiding late-stage diagnosis

A more cost-efficient model

Better outcomes from faster follow-through

\$156,000

average savings per cancer case detected at stage I vs. stage IV in the workforce<sup>1</sup>

50%+

savings on clinical and diagnostic services through more efficient healthcare delivery outside of high-cost health systems<sup>2</sup> 20%

decrease in mortality rate when breast cancer is diagnosed in fewer than 15 days vs. more than 44 days<sup>3</sup>

1 Difference in average first year costs when cancer is treated at Stage I Vs. Stage IV for breast, cervical, colorectal, lung, and prostate cancer. Adapted from McGarvey BMC Health Serv. Res. 2022. 2 Serif - Fees based on average reimbursement across commercial payers in California. Sourced from Serif Health, which compiles published price transparency data. Accessed on June 26, 2023. 3 National Library of Medicine, Evidence of increasing mortality with longer diagnostic intervals for five common cancers: a cohort study in primary care







## Color's Cancer Prevention and Screening Program, in Partnership with the American Cancer Society



#### Screening

(in-person and distributed)



**Abnormal results** management to diagnosis



High-risk patient management



Cancer care support for oncology patients

The only comprehensive approach to prevention and early identification of cancer using evidence-based guidelines.

We drive down total cost of care by making cancer screenings accessible to detect cancer earlier, and providing high-touch support throughout the full cancer continuum.





## Color and the American Cancer Society partner in program design and delivery



#### Experienced cancer healthcare delivery

- 50-state provider group with deep cancer expertise
- Distributed cancer screenings
- Networked imaging centers nationally
- Care advocates who ensure the right care happens
- National genetic counselor group for high-risk care
- Population health data reporting
- Experienced enterprise program management



#### Trusted source of guidelines, support, education

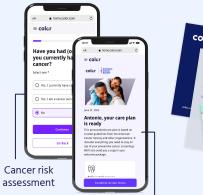
- Evidence-based screening guidelines
- Scientific leadership for high-risk care
- Educational resources from the American Cancer Society
- Cancer Information Specialist support, available 24/7/365
- Support & assistance to overcome barriers to care





## Patient experience: colorectal cancer screening

#### Risk Assessment and Screening



Dynamic care plan conveys screening recommendations on to participant



Convenient at-home tests including FIT, HPV, & PSA

#### **Support Team:**



#### Care Advocate, Lily

- Identifies in-network facilities
- Schedules appointments
- Manages prior authorizations
- Helps to estimate costs of care



#### Clinician, Dr. Hsiung

- Orders appropriate testing
- Provides clinical referrals
- Answers questions about care

#### Follow-up Testing and Care







Colonoscopy scheduled



Colonoscopy results

#### IF NORMAL RESULTS



Reaches out to confirm negative result



Reaches out to convey next steps

#### IF ABNORMAL RESULT



Reaches out to walk through abnormal result



Helps to schedule confirmatory testing

#### IF DIAGNOSIS CONFIRMED



Reaches out to discuss diagnosis and next steps



Helps to find post-diagnosis treatment

#### **Ongoing Care**



Clinician emails participant to take steps to reduce cancer risk, attend expert webinars, and reminds them when due for screening

#### **Support Team:**



#### Care Advocate, Lily

One year later, care advocate reaches out to update risk assessment and facilitate any needed screenings

## Multi-channel approach to ensure engagement happens

## Always-on education and resources



## Expert programming with monthly webinars



#### Workplace screening events







## Show up for employees to make sure screenings happen



Get started on your personal cancer screening plan.

Based on the information you provided, you have high risk for colorectal cancer and average risk for other cancers.





Yes please. Any time before noon.



Maria Coffield (Care Advocate) 2/3/23 · 3·15 PM

Ok! Your appointment is scheduled for 8/12/23 at 9:30am. I'm sharing some information below on how to prepare.

#### Risk adjusted care plans

Risk assessment determines personal risk and plan for cancer screening

#### At-home screening

- Ship kits directly to members' homes
- Members complete kits & connect with care at home

#### Worksite engagement

- "Staff-less" stations set-up with cancer screening kits
- Visits from cancer specialists, genetic counselors

#### **Appointment scheduling** & management

- Medical Group clinicians order screening, complete referrals
- Care advocates find providers, book appointments, manage insurance
- In-person appointments in <2 weeks through our networks

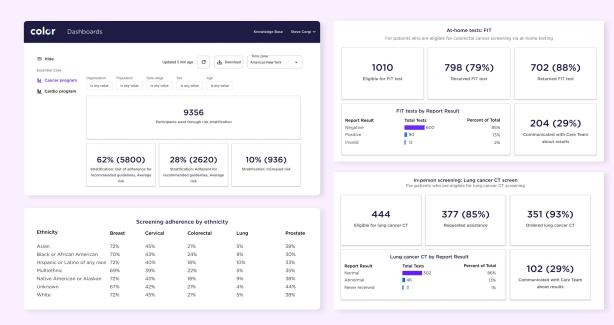




## Manage total cost of cancer through robust population health data

Access hard-to-get data on cancer in your member population and use that information to:

- Understand which groups are at highest risk
- Inform strategies for interventions in cancer prevention and care
- Predict cancer spend areas
- Address health inequities



https://color.invisionapp.com/console/share/7NH4V3FRJCM/986085767





## Designed for people. **Built for populations.**









>5M

patients served









>35M

healthcare interventions delivered

>10K

healthcare access sites across the U.S.









organizations





## We've helped Teamsters members identify cancer risk and earlier diagnoses

5X

**Higher engagement with Color** versus typical Teamsters wellness programs

- 20% participation rate in Color program in year 1
- 4% average participation in other prevention and wellness programs

12%

Percentage of participants identified as high risk of cancer

86%

Percentage of participants who scheduled follow-up care with healthcare provider following screening results

Read a <u>letter of recommendation</u> from Maria Scheeler, Executive Director



## The members and customers we help matter most

#### Member impact

A 52-year-old woman who was behind on cancer screenings enrolled in Color and became compliant with recommended screenings.

In her mammogram, she was diagnosed with Stage I breast cancer.

BREAST CANCER	Stage I	Stage IV
SURVIVAL RATE	98%	30%
COST OF CARE (FIRST YEAR)	~\$160k lower	

#### **Customer impact**

"It's a win-win situation because from a fund perspective, you're looking at catching something early. So, you're looking at savings there. And from a member's perspective, you're looking at catching something early and increasing your survival rate."

#### Maria Scheeler,

Executive Director, Teamsters Health & Welfare Fund of Philadelphia and Vicinity





## Addressing the barriers behind cancer health inequities head on

#### The people most at-risk are the ones getting the least help

#### Black Men

are twice as likely as white men to die of prostate cancer.

#### Individuals in Rural Areas

are ~14% more likely to die from cancer than their urban counterparts.

#### **Workers Exposed to Asbestos**

are five times more likely to develop lung cancer than those who are not exposed.

#### We address the biggest barriers

#### Logistical

- 7 days/week access outside standard clinic hours
- At-home or at-worksite access.
- Care advocates help with all logistics

#### Language & Cultural

- Full Spanish translation and 200+ languages supported via interpretation service
- Cultural competency trained care advocates

#### **Technological**

- Via phone or web
- User-friendly platform

#### **Financial**

- No co-pays
- Free to member
- Care advocates navigate costs

#### Delivering equitable healthcare

2.00 +languages supported for phone-based support

28%

of individuals served are racial minorities

6% served via staff hotline

3 of 4

Color clinicians are people of color

100%

of Color physicians speak a language other than English





## We integrate with other ecosystem partners to ensure a coordinated approach

#### New screening technologies

Incorporate new technologies into screening workflow to augment guidelines-based protocols

Examples

GRAIL



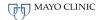


#### **Centers of Excellence**

Deepen connections with local Centers of Excellence to easily refer patients to timely, world class care

Examples







#### Cancer care management

Enhanced cancer care management partnerships focused on hands-on guided support and navigation









## Integration with other benefits

We make it simple to couple Color's programming with available benefits and health plans

98point6. - one medical Lyro













## Efficient pricing options aligned to incentives

Our pricing structure is designed for small budget investment relative to impact to align with your cost savings on cancer care.

#### Two pricing approaches

#### Platform Approach

Pricing per eligible member per month to allow for unrestricted access to the program and maximum employee support.

#### **Utilization Approach**

Pricing based on program utilization to minimize risk and align cost and health outcomes.

- De-risk organizations on utilization
- Able to bill through claims if desired

For 12,000 eligible members, total estimated spend is \$345,000







## Program outcomes

### Identified and closed cancer screening gaps

## 1 in 2

Participants behind on their recommended cancer screenings

#### +77%

Average-risk participants increase in adherence

## **Engaged participants** in appropriate care

#### <3%

of participants missed their Color appointments (vs. 15% industry average)1

#### 82%

Participants who followed up with the appropriate providers after participating in the program

#### Caught cancer early when it was treatable

#### 2.X

Net estimated savings from catching cancer cases earlier through screening





## **Our product demos**

<u>In-person screening experience</u>

At-home screening experience

Population health reporting

Color care team experience







color.com/cancer

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