Welcome to this quick guide on Clinical Pathways. Moving through this guide is easy. To view a topic at any time, click the menu button. To move forward, click on the NEXT button. To move backwards, click on the BACK button. To fast forward, click and drag this button. Use this button to play or pause the guide. Click on this button for Closed Captioning. You can view the resources available to download by clicking on this button. After you complete the quick guide, you will be asked to take a Quiz. You will also be asked to give us your feedback on the guide by completing an Evaluation.

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Some cancer treatments are very expensive

$107 billion was spent on cancer drugs worldwide in 2015.

Experts predict this will grow to more than $150 billion by 2020. For an individual cancer patient, this can mean huge medical bills. Studies show most cancer patients need to pay about $7,000 a year for their cancer drugs. Many patients find it hard to pay for these drugs – as well as other cancer treatments.

It’s becoming an even greater problem as more health plans require patients to pay more of the cost of their exams, tests and drugs.

The problem is so common it’s often talked about as another side effect of cancer, one called “financial toxicity.”

Financial toxicity --patient distress related to the high cost of Cancer care--is recognized by doctors too. This had led them to think more about both the value and benefit of the drugs they prescribe.

Health systems and insurers are also looking more closely at the cost, value and benefit of cancer treatments.
In response, they have developed new models for choosing cancer treatments and paying physicians. These models are designed to improve patient care and lower costs.

This course is about one model, called Clinical Pathways.

As of 2016, about 60 U.S. health insurance plans are using clinical pathways for cancer care.

Clinical pathways are also sometimes called “care pathways,” “critical pathways” or “care maps.”

Pathways often use charts or diagrams to illustrate a patient’s treatment options. These charts often look like treatment guidelines. But guidelines and pathways aren’t the same thing.

Guidelines and pathways both rely on what is referred to as evidence-based medicine.

That’s the term used for the treatments research studies have shown are effective. But after that, differences appear.

Guidelines are developed by nonprofit organizations, and include all approved cancer medications.

Pathways are typically developed by insurers or for-profit companies or cancer centers. They include only the cancer drugs and other medications included in and covered by the insurer’s or cancer center’s formulary. They take into account cost, risks and benefits.

There are other important differences, too.

Guidelines do not take into account how much a treatment costs. Pathways take into account cost, risks and benefits.

Guidelines are recommendations.

Doctors do not get paid more for following treatment guidelines. Doctors may receive a cash incentive or bonus for staying on a pathway.

Clinical pathways are becoming more common in cancer care. The goal is to provide good cancer care at a lower cost. But there are concerns. Patients may not know doctors are using them.

Pathways may give patients fewer treatment choices. And they may not be good for patients who have a rare cancer or many treatment options.
A clinical trial may be an option for you during your cancer treatment. Having a doctor who is using a clinical pathway will not keep you from being able to take part in a clinical trial.

It is important to know if your doctor is using a clinical pathway to guide your treatment. There are many ways to talk to your doctors about clinical pathways. You will now hear one example of the type of conversation you may want to have with your doctor when you are making treatment decisions. In this example, a man recently diagnosed with cancer has just learned the treatment his oncologist is recommending.

**Patient:** Is this recommendation based on a clinical pathway provided by my insurer or this cancer center?

**Doctor:** Our health system does use clinical pathways. The treatment recommendation I am making is supported by this pathway.

**Patient:** If you didn’t use this pathway, what other treatment options might I have?

**Doctor:** There might be another chemotherapy regimen we would consider. But studies haven’t yet shown it’s more effective than what we are recommending.

**Patient:** Are there clinical trials I should consider for my treatment?

**Doctor:** We have some trials that might be options for you. I will look to see if you are eligible.

**Patient:** Thank you. I’m going to think about your recommendation and also get a second opinion.

**Narrator:** Be sure to take notes, and bring someone with you to the appointment. That can help you more easily remember and understand how your doctor decided on your recommended choices for treatment.

Many things help you and your doctor make decisions. These include the type of cancer you have, your overall health and the things in your life that are important to you - your values and your goals. Knowing whether your doctors are using clinical pathways to make treatment recommendations can help you as you make treatment decisions.

Congratulations you’re almost done with the quick guide. The next step is to take the Quiz. Once you have completed the Quiz, you will be asked to evaluate the guide. We appreciate your feedback. After you complete the Evaluation, click on the close button. The guide details page will allow you to download a PDF of the full guide, a list of Resources and use the Question Builder to create a list of
questions to bring to your next doctor's appointment. Please click on the Quiz link to start the Quiz.