

The current approach to cancer care isn't working for employers or employees.

WHY HASN'T THIS BEEN SOLVED?



THE SOCIALLY-CONSCIOUS PARADOX:



Employers are committed to being socially conscious, but wouldn't it be great to start at home with our own families?

What's keeping us from doing that?

Employers are facing unsustainable cost increases

Advancements in cancer care...

- Immunotherapy
- Keytruda
- CAR T
- CRISPR
- Robotic Surgery

come at an enormous price...



which is passed to employers and employees

- Cancer claims can disrupt renewals
- Double digit rate increases
- "Lasers" for individual employees

Employee's Cost Burden Creates "Financial Toxicity"

Clinical Toxicity:

 Adverse physical effects from treatment

Financial Toxicity:

- Adverse effects from financial stress and worry
- 50% of people
 with cancer are
 afraid to tell their
 employers

High costs... Average Out-of-pocket:

- Individual \$9,100
- Family \$18,200
- 40% of employees can't afford a \$400 unexpected expense

Create Financial Toxicity:

- Stress hinders recovery, increases chance of recurrence
- Employees avoid care due to guilt of financial ruin
- Bankruptcy from medical debt is common

Why hasn't this been solved?



Employers can't fix it

- No data
- Perceived complexity
- Cost/Employee engagement trade-off
- "It's always been this way"

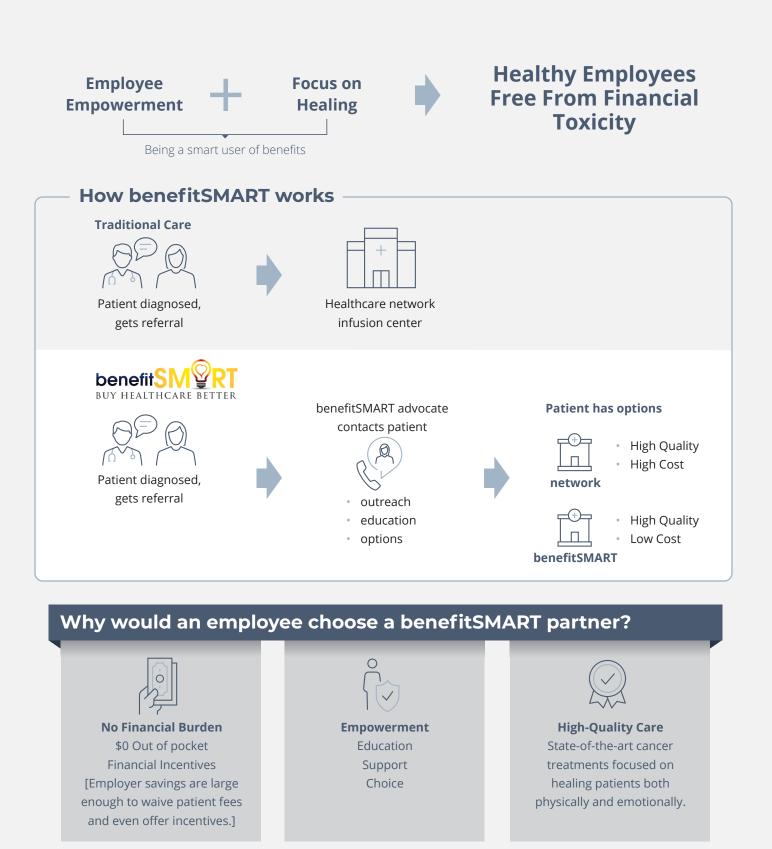


The system doesn't want to fix it

- Enormous profits
- Misaligned incentives
- Health systems have a vested interest in where care is delivered
- Fiduciary responsibility to the network, not to patient or employer

Everyone says they are "Patient-First." Are they really?

WHAT PATIENT-FIRST ACTUALLY IS



Result: Patients have no financial toxicity, so they can focus on healing.

What does this mean for you?

A solution for employers that breaks the cost/employee engagement trade-off



Savings

- 30-50% savings on infusion treatment
- Avoids high renewal increases
- Avoids individual "lasers"



Employee Engagement

- Healthy employees
- Lower overall cost
- Employer of choice

CASE STUDIES - \$250,000 Average Savings per 1,000 lives

PORTLAND, OR—CANCER OF THE LIVER Savings per infusion \$8,975

Total Savings \$124,486

PLEASANT LAKE, IN—ADENOCARCINOMA Savings per infusion \$31,307

Total Savings \$539,903

Implementation is Simple

No cost to you No sign-on expense

Flexible timing No premium increases

Coordination

No need to switch plans or networks. benefitSMART will work with you to implement.

Next Step:

Meet with benefitSMART to model costs and determine whether you are a good candidate.



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