



## American Oncology Network Vice President of Pharmacy Operations Melody Chang Co-Authors Study Examining Cost of Care in Hospital Outpatient Versus Community Oncology Among Commercially Insured Patients with Metastatic Pancreatic Cancer

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Study reveals total cost of care is 29% lower in community oncology settings.



**Melody Chang**  
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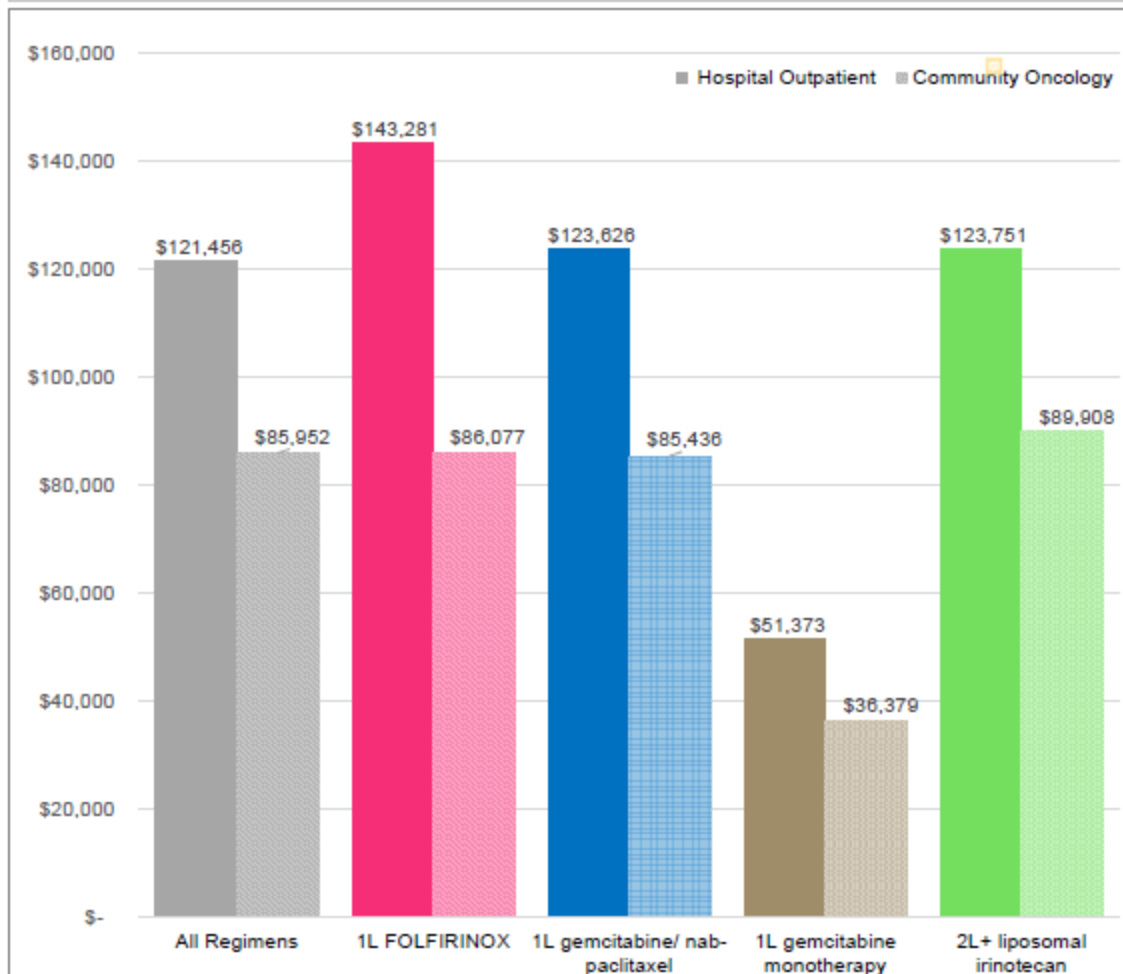
**Fort Myers, Fla., Apr. 11, 2022** – [American Oncology Network, LLC](#) (AON) Vice President of Pharmacy Operations [Melody Chang, RPh, MBA, BCOP](#) is co-author of a study that examined the total cost of care among commercially insured patients with metastatic pancreatic cancer receiving NCCN® Category 1 preferred regimens in hospital outpatient versus community oncology settings. Results from the research study were presented at the [Academy of Managed Care Pharmacy \(AMCP\) 2022 annual meeting](#) recently held in Chicago March 29 – April 1, 2022.

Research shows that cancer treatment costs among commercially insured patients vary depending on where patients receive care. There is limited research evaluating cost of care for commercial patients with metastatic pancreatic cancer receiving NCCN® Category 1 preferred regimens.

The study's analysis indicates that across all regimens, mean total cost of care was 29% lower in community oncology centers than in hospital outpatient settings. This difference in cost was most pronounced for patients receiving 1L FOLFIRINOX and least for patients receiving 1L gemcitabine monotherapy. Chang and her fellow co-authors concluded: "Mean total cost of care is lower for patients receiving treatment with the same regimens at community oncology centers compared to hospital outpatient settings."

To read the complete research poster, visit: <https://www.jmcp.org/doi/pdf/10.18553/jmcp.2022.28.3-a.s1> page 15.

**Figure 1: Comparison of Mean Total Cost of Care per LOT for NCCN® Category 1 Regimens in Hospital Outpatient vs Community Oncology settings**



\*All Regimens\* consists of all beneficiaries receiving NCCN® Category 1 preferred regimens.