



The ABMT NCI Trials; or, How Not to Pay for 40,000 Transplants

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FROM THE EDITOR

THE ABMT NCI TRIALS; OR, HOW NOT TO PAY FOR 40,000 TRANSPLANTS



Those who do not remember history are forced to repeat it. And so, let us take off our rose-colored glasses and see if we can refresh our memories.

Long ago, there was a prolonged war between two countries over a stolen prize. A siege was made of the great city of Troy and, as time passed, the Greeks despaired of ever overcoming the defenses of that vast fortress. One night, the Greeks retreated, leaving a wooden horse at the gates of Troy. The Trojans accepted the horse as a gift and hauled it within the citadel, unaware that the horse's belly was full of Greek warriors. The Trojans were dead meat in the morning.

How does this history lesson apply to today? After years of debate about payment for off-label drug uses and what is and is not experimental, the National Blue Cross and Blue Shield Association had a revelation. In a highly publicized moment of compassion, it offered the cancer community quite a present: funding for autologous bone marrow transplant (ABMT) trials developed by the National Cancer Institute (NCI) for breast cancer patients. What a present. Let's cart this horse right in!

"Oh, what a cynic," you say? I wish. The week after this announcement, attorneys for the Blues were in Federal Court in Baltimore defending the Maryland Blues in a big-time law suit brought by a breast cancer patient who was being denied payment for ABMT. The plan's lawyers cited the new clinical trial at NCI as evidence that the procedure was experimental and should not be paid for until the NCI research trial is completed and the evidence is conclusive!

Okay, kids, are we clear about this yet? Let's check our math. If it takes approximately 7 years to complete the NCI trial (follow-up, results, publication, etc.) x approximately 6,000 women per year who are eligible for the procedure = 42,000 women - 1,200 total women on the NCI trial = 40,800 ABMTs the Blues don't have to pay for.

Now let's say 20 Blues' plans invest in this little adventure. It costs each plan about \$100,000 per transplant x 10 per year or \$1 million per year. A major investment, right? But what about the other 40,000 transplants? Let's just call this a substantial savings, shall we?

The Blues have been repeatedly losing AMBT cases in court. Lots of clinicians and researchers are suggesting that this procedure is within the framework of "acceptable medical practice" for some breast cancer patients, and that the Blues' plans should pay for the procedure.

But folks, let's be clear about this great present. Beware Blues' plans bearing gifts! It is nothing more than a legalistic ploy not to pay for the vast majority of transplants.

Frankly, rather than bringing their present into our gates, I think we ought to haul it into the public square. Let's tell Blue Cross and Blue Shield subscribers about this ploy. Let's read them the courtroom documents of this fine, charitable organization. Then let's stuff all the legal paperwork under the belly of the beast and light a match to it. The flames should be high enough and hot enough to make our friends uncomfortable with the fact that we remember our history lessons, too.

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