

Improving the Cancer Care Experience: Communication, Navigation, and Cost Efficiency

NLC-RISC Conference Supplementary Handout

Christie L. Clipper, DHA — Founder & CEO, Coreo, Inc. | Fellow, The Patient Revolution

This work is informed by both professional experience and personal loss. After nearly 30 years in healthcare leadership, losing my mom to a delayed cancer diagnosis drives my commitment to building systems that are not only efficient—but profoundly humane.

The Hidden Cost Drivers in Cancer Care

Cancer remains the top cost driver for approximately 80% of employers. In 2025, 86% of organizations reported an increase in oncology spending, with a median rise of 11%, resulting in total national costs of \$156.2 billion annually among privately insured adults under 65.

Key Contributors

- Fragmented communication and data silos between providers and benefits teams
- Redundant testing and delays from inconsistent hand-offs
- Poor treatment adherence due to low health literacy and mistrust
- Lack of proactive navigation support

For health-plan insurers, these inefficiencies manifest as high-cost claims, delayed interventions, and member dissatisfaction.

Communication improvement is not a “soft skill” — it’s a systemic risk mitigator.

Learn More

- [National Cancer Institute Cost Projections](#)
- [Kaiser Family Foundation Employer Health Benefits Report](#)

The Role of Communication and Navigation

Oncology nurse navigators or comparable coordination programs can transform fragmented care into synchronized care. Proven outcomes include:

- 33% reduction in emergency visits and hospital readmissions
- ROI up to 5:1, equating to approximately \$429 per member per month in savings

Navigation Programs

- Improve patient adherence, satisfaction, and time-to-treatment

- Reduce missed hand-offs and duplicate testing
- Provide early visibility into logistical or psychosocial barriers
- Strengthen trust through proactive, personalized communication

Explore

- [Academy of Oncology Nurse & Patient Navigators \(AONN+\)](#)
- [Navigation Metrics Toolkit \(AONN + American Cancer Society\)](#)
- [Outcomes4Me – Patient Empowerment Platform](#)

Cultural and Literacy Barriers as Financial Risks

Cultural mistrust, limited English proficiency, and low health literacy contribute to delayed care and higher-stage diagnoses.

- Language barriers delay screening and care initiation
- Historical trauma among marginalized groups impedes engagement and adherence
- Plain-language education and translated benefits materials improve early intervention rates and outcomes

Action Steps for Insurers

- Embed community navigators or cultural liaisons in benefit design
- Offer linguistically adapted care education and consent materials
- Fund screening outreach in underserved populations, measurable against claims-based early detection data

Read More

- [CDC Health Literacy Resources](#)
- [NIH Cultural Respect and Health Equity Framework](#)

Communication as Infrastructure, Not “Soft Skill”

Fragmentation often stems from:

- Incompatible EMRs that don’t share critical data
- Inconsistent handoffs between oncology, primary care, and benefits coordination
- Disconnected benefit vendors unaware of active treatment plans

A reliable communication system aligns the right information, right people, and right systems:

- Real-time alerts for care team hand-offs
- Shared dashboards to reduce manual tracking
- Accessible, understandable information for patients
- Integration of benefits communication with care navigation

Tools Empowering Systemic Change

[Outcomes4Me](#)

Empowers patients with guideline-based treatment options, plain-language support, and symptom tracking in alignment with NCCN Guidelines.

[AONN+ Navigation Metrics Toolkit](#)

Standardizes how navigation programs measure ROI and quality impact.

Community-Based Navigation Platforms

Identify high-risk employees using social determinants, claims data, and health-risk assessments to drive screening reminders and support.

Examples: [Unite Us](#) and [FindHelp.org](#)

Integrated EMR Communication Modules

Synchronize oncology and behavioral health coordination by embedding automatic follow-up triggers.

Example: [OpenEHR](#)

AI and Technology as Amplifiers of Empathy

Artificial intelligence in employee health plans can scale communication infrastructure while enhancing the human experience.

Effective AI Use Cases for Insurers

- Predictive analytics: Flag rising-risk members for early outreach using claims + clinical data
- Language intelligence: Simplify medical content into understandable, individualized language
- Digital companions: 24/7 assistance with benefits navigation, reminders, and care coordination
- Workflow automation: Reduce administrative friction and hand-off errors

These tools ease clinician and navigator burden — freeing time for human connection.

Explore

- [AHIP AI in Health Insurance Report](#)
- [IBM Watson Health Language Processing](#)

The Patient Revolution: Care That's Careful and Kind

Inspired by The Patient Revolution, founded by Dr. Victor Montori (Mayo Clinic), this movement urges care to be careful, kind, and aligned with what matters to each person.

For insurers, this means shifting from utilization management to human-outcome partnerships:

- Measure success by engagement, not just cost containment
- Use language that inspires collaboration – support, partnership, outcomes, not control or case management
- Build systems where empathy and efficiency coexist by design

Learn More

- [The Patient Revolution](#)
- [“Why We Revolt” by Dr. Victor Montori](#)

Business Case and ROI Summary

Outcome	Impact	Source
Reduction in ER visits and readmissions	Up to 33%	AONN ROI Data
ROI on navigation investment	Up to 5:1	JONS ROI Study
Monthly per-member savings	\$429	ASCO Post
Employee satisfaction and retention	Significantly improved	AONN + Patient Revolution findings

When employees feel heard, guided, and supported, cost metrics follow.

Compassion is not a cost center – it’s a cost-control strategy.

Next Steps

- Assess current communication inefficiencies within employee cancer journey touchpoints
- Pilot an oncology navigation program or digital companion to benchmark performance
- Use AONN metrics to tie navigation outcomes to ROI
- Partner with technology vendors that integrate predictive analytics and plain-language engagement tools
- Reframe messaging from “managing utilization” to “enhancing outcomes”
- Embed “What matters to you?” conversations into case management
- Treat communication as infrastructure – not a courtesy

Call to Action

When communication is treated as infrastructure—not improvisation—health plans can achieve what every employer and insurer truly wants: better outcomes, stronger trust, and lower cost through human-centered precision.

Let's continue the conversation.

If you're exploring ways to improve cancer care communication, navigation, or technology integration within your plan, I'd welcome the opportunity to connect.

Christie L. Clipper, DHA

734-751-7618

christie@coreo.health

