Addressing Gaps In Survivorship Care: Evaluating A Virtual Clinic For Working-Age Adults

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A Nationwide Model for Survivorship Care for Working-Age Adults

Due to an increasing incidence of cancer among individuals under the age of 50, a growing number of working-age adults (WAA) (ages 18-65) are living with or beyond a cancer diagnosis. For WAA a cancer diagnosis is life changing, with lasting impacts on health, wellbeing, family, and livelihood. Although most WAA cancer survivors have a projected lifespan of decades, there are few care models that offer long-term care regardless of treating institution, age at diagnosis, and time since diagnosis. As a result, critical opportunities for prevention, early detection of late effects, care coordination, and quality-of-life improvement are frequently missed.

To address these gaps and missed opportunities for health improvement, Color Health developed a **50-state Virtual Cancer Clinic** that provides patient-centered survivorship care and complements existing oncology and primary care. This oncologist-led virtual clinic -offered through participating employers and unions supports a broad, equitable approach to survivorship care delivery.

Clinic Overview:

Eligibility: Working-age adult with a history of cancer including those in active treatment **Platform:** 100% virtual care delivery to reduce time, geographic, and financial barriers Integrated within existing employer-sponsored benefits

Access: Licensed in all 50 U.S. states, offering national reach and scalability Potential to become the largest survivorship care platform in the country

Multidisciplinary Team

- Physicians: Oncologists, internists, and family medicine providers
- Oncology nurse navigators
- Registered dietitians
- Board-certified genetic counselors
- Care advocates: Ensure follow-through on recommended screenings (e.g., mammography, colonoscopy)
- Behavioral health program, which includes clinically-proven peer-led support groups: Individuals with lived cancer experience, facilitating skills-based wellness programs

Initial Visit Structure

- Cancer survivors: 60-minute telehealth visit with an oncology survivorship physician
- Individuals in active treatment: 60-minute visit with an oncology nurse navigator and an oncology physician

Methods

A retrospective chart review was conducted to evaluate patients who completed a Color survivorship visit during two phases:

Interventions based on the framework described in Table 1 were quantified and stratified by:

- Current age
- Age at cancer diagnosis
- Years since cancer diagnosis

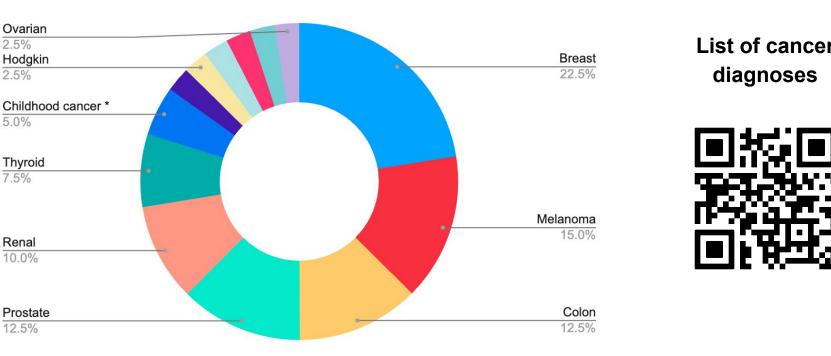
Results

Pilot Participant demographics

During roll-out of pilot (September, 1, 2024 - February 7, 2025)

- 404 individuals self-identified as having a history of cancer
- 42 individuals completed survivorship visit as of Feb 7

Cancer diagnosis of patients who completed a survivorship visit



- Average age of patients: 48.6 years (range: 28–67 years)
- **Time since diagnosis**: Approximately two-thirds of patients were diagnosed within the last 5 years
- **Age at diagnosis**: Over 40% of patients seen were diagnosed with cancer prior to age 39

5 Most Common Interventions Offered

- 1 Genetic testing (22.8%)
- 2 Educational support group (13.3%)
- 3. Cancer screening (12.3%)
- 4 Referral to dietician (4.8%)
- 5. Referral to brick and mortar oncologist (4.8%)
 - Note: most common reason was concern for recurrence

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Care Gaps Identified Among Working-Age Adults (WAA)

- ≥95% had at least one care gap or opportunity for health improvement.
- 100% of individuals in active treatment had unmet needs, highlighting the model's complementary role with oncology.
- 85% of survivors, whether diagnosed within the past 5 years or more than 5 years ago, had identifiable care gaps.

Conclusions

A novel 50-state virtual survivorship care model—offered as an employer-sponsored benefit—effectively identifies and addresses care gaps in working-age adults (WAA) with a history of cancer.

Care was delivered to individuals across a wide spectrum of cancer types (n=15), including those currently undergoing treatment and long-term survivors. By eliminating geographic, logistical, and financial barriers, this virtual model complements existing care and expands access to evidence-based survivorship support for a diverse WAA population.

Next Steps

Interventions

demographics

offered by

Future evaluation will focus on the effectiveness of care advocates in facilitating follow-through with recommended cancer screenings and late effect monitoring.

Limitations

This evaluation reflects a self-selected sample comprising approximately 10% of eligible individuals who self-identified as cancer survivors and chose to schedule a visit. As such, findings may not be generalizable to all survivors, particularly those not currently engaged in the workforce.

References

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