



Thyme  
Care



2026 | Case Study

## Advancing Value-Based Oncology Through 24/7, Integrated Virtual Cancer Care

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Rising oncology costs are putting unprecedented pressure on health plans and providers. Payers are seeking dedicated, value-based oncology solutions that improve outcomes and member experience while bending the cost curve. Key market dynamics that have heightened the need for these solutions include:

- **Demographic shifts:** Incidence is [increasing across younger adult populations](#), and survivorship is expanding, with more members living with cancer as a chronic condition.
- **Avoidable utilization:** More than [50% of emergency department \(ED\) visits among patients with cancer are potentially preventable](#), reflecting a need for better symptom monitoring and care coordination.
- **Escalating costs:** Breakthrough therapies are driving remarkable improvements in survival and quality of life, yet many cancer drugs now exceed [\\$100,000 per year](#).
- **System fragmentation:** Patients face disconnected systems that don't fully integrate oncology, primary care, and behavioral or palliative services - leading to poor member experience and inefficient resource use.

As cancer care becomes increasingly complex - with rapidly evolving treatments, fragmented care teams, and rising patient needs - it's becoming harder for providers to consistently deliver coordinated, high-value care.

## Thyme Care's Model

Thyme Care is an oncology-focused value-based care enablement company that delivers proactive, data-driven, and human-centered cancer care support. Thyme Care's model integrates human support, technology, and data insights to address both clinical and non-clinical needs across the entire cancer journey. Their model provides 24/7 virtual oncology navigation, in coordination with the member's oncologist.

### **24/7 virtual navigation includes**

- Diagnosis education and second opinion support
- Proactive symptom management
- Admission and discharge support
- Social and financial resource support
- Behavioral health
- Palliative care
- Survivorship support

Thyme Care's rigorous, data-driven return on investment (ROI) frameworks quantify the clinical, operational, and financial impact of these interventions, ensuring that improved patient and clinical outcomes also translate into total cost of care savings. Their frameworks enable their partners to clearly understand: (1) how proactive navigation reduces avoidable utilization, (2) which interventions are most likely to improve care quality and patient experience, and (3) what specific actions drive predictable financial impact.

Thyme Care's model has proven to reduce total cost of care and generate savings for their partners. There are two main categories of spend reduction:

1. Acute care spend reduction via the fully employed, wraparound oncology care team, which contributes to 60-70% of savings.
2. Medical drug spend reduction via both the oncology care team and integrated partnerships with oncologists, which contributes 30-40% of savings.

## Core Clinical Interventions to Reduce Avoidable Acute Care and Medical Drug Spend

Thyme Care drives ROI impact to payer partners by implementing the following care team interventions for all members that qualify for Thyme Care, across all oncologists and all settings, which appropriately reduce acute care costs. All these interventions are delivered in close coordination with the member's oncologist:

- **Proactive symptom monitoring and 24/7 urgent clinical support:** Early identification and management of symptoms through real-time patient-reported outcomes data, enabling rapid nurse triage and escalation to the member's oncologist or to Thyme Care clinicians when needed. This intervention prevents avoidable ED visits and hospitalizations while improving member experience.
- **Oncology-focused transitions of care:** Post-discharge coordination and communication with oncology providers to ensure continuity of care and address care gaps during high-risk transition periods. This intervention reduces avoidable readmissions, improves care continuity, and supports safer recovery following acute care episodes.
- **Integrated behavioral health and social support:** Mitigation of non-medical drivers of cost and poor outcomes by addressing behavioral health needs and critical social barriers, including transportation, nutrition, financial toxicity, and housing instability through targeted, navigator-led interventions.
- **Oncology-focused advanced illness and palliative care:** Facilitates early goals-of-care discussions and appropriate referrals to palliative care and hospice, aligning treatment with member preferences while reducing non-beneficial end-of-life therapies. This intervention reduces inpatient admissions and chemotherapy costs at end of life.



## Oncologist Integration to Further Reduce Avoidable Drug Spend

While Thyme Care coordinates with all oncologists, they form a deeper level of integration with select oncologists that become a Thyme Care Oncology Partner (TCOP) through a contractual agreement, enabling:

- **Value-driven drug selection and utilization:** Through targeted analytics, tailored operational workflows and value-based incentive payments, Thyme Care helps practices deploy targeted interventions – beyond utilization management – to reduce drug costs while maintaining treatment efficacy. These interventions focus on reducing utilization of lower value drugs, minimizing drug waste, and appropriately billing to reduce out-of-pocket costs for patients.
- **Improved care coordination and reduced admin burden:** Oncology practices share EHR access and partner with Thyme Care on tailored operational workflows to enable seamless coordination.
- **Shared accountability for quality and total cost of care:** Oncology practices participate in upside-only financial incentive programs. Oncologists are compensated for adhering to value-aligned clinical decisions and interventions.

## Financial Arrangements

Thyme Care partners with Medicare Advantage and Commercial health plans, employers, and risk-bearing provider groups, to take financial accountability for outcomes by assuming risk on the payer's cancer population in active treatment.

**In one Medicare Advantage partnership, Thyme Care achieved a 10% reduction in total per member per month spend in one year, representing more than a 2:1 ROI while maintaining a 9/10 member satisfaction rating.**

In most arrangements, Thyme Care assumes responsibility for the total cost of care (TCOC) for all members attributed to them. The TCOC framework includes all medical expenditures – ED and inpatient spend, all oncology drug spend, and all other spend associated with a given member, with limited targeted exclusions to protect against extreme outliers. Thyme Care's model is intentionally centered on TCOC rather than medical loss ratio (MLR), reflecting both the limitations of the HCC risk-adjustment framework in oncology and the need to give payer partners clear, defensible confidence that Thyme Care is driving true medical cost reduction for the cancer population.

The company puts fees at risk to ensure payers see a guaranteed ROI and total cost of care savings against a benchmark based on payer data. Thyme Care then shares upside savings with payers when costs are reduced. Early analyses suggest additional savings potential as the program expands, driven by deeper collaboration with oncology practices and more optimized drug interventions deployed with Thyme Care Oncology Partners.

## Outcomes

Thyme Care's approach has demonstrated meaningful improvements in clinical care, care coordination, and member experience. By pairing continuous, oncology-specific navigation with provider integration, the model consistently reduces avoidable emergency and inpatient utilization while sustaining high levels of member engagement and satisfaction across the cancer care continuum.

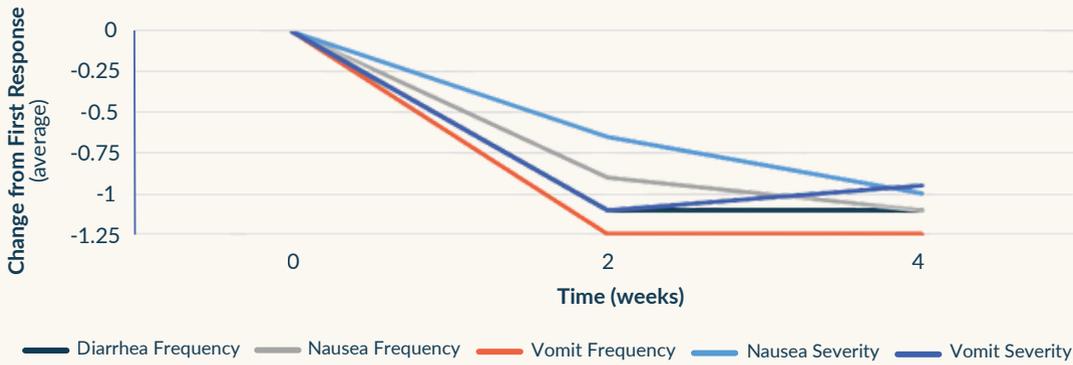
- **Emergency Department (ED) Diversion:** Thyme Care's ePROs program reduces treatment-related symptom burden and avoidable hospitalizations. **Members who completed Thyme Care's ePROs program experienced a 28% relative risk reduction in ED presentation or inpatient admission.**
- **Readmission Prevention:** 83% of discharged members had a coordinated follow-up visit scheduled by Thyme Care within days of discharge. **Complex members who participated in Thyme's readmission prevention program experienced a 30% relative risk reduction for readmission.**
- **Advanced Illness and Palliative Care:** Thyme Care facilitates clinically appropriate referrals to palliative care & hospice, reducing unwanted aggressive treatment and aligning care with patient goals. **72% of members with limited prognosis were educated about palliative care.**
- **Adherence to High-Value Drug Interventions:** Thyme care drives improved adherence to high-value drug interventions by incorporating [real-time prescribing guidelines through the electronic health record](#). Their guidelines recommend biosimilars and minimize drug waste by incorporating personalized dosing approaches. **Thyme Care has seen 60-70% oncologist adherence to recommended drug interventions.**

In addition to these findings, 88% of members surveyed reported feeling more supported since engaging with Thyme Care, highlighting the program's impact on driving better health outcomes and greater member satisfaction.

**In collaboration with their partners, Thyme Care measures and demonstrates value across the operational and clinical metrics that matter most, including but not limited to:**

- Reduced ED utilization
- Reduced hospital admissions and readmissions
- Improved adherence to clinically appropriate, value-aligned drug decisions
- Increased advanced care planning and palliative care referrals to better align end-of-life treatment with patient goals
- Improved connections to needed social, financial and behavioral health resources
- Improved patient experience
- Strong enrollment & sustained longitudinal engagement

### Change in Dehydration Related Symptom Ratings All Payers

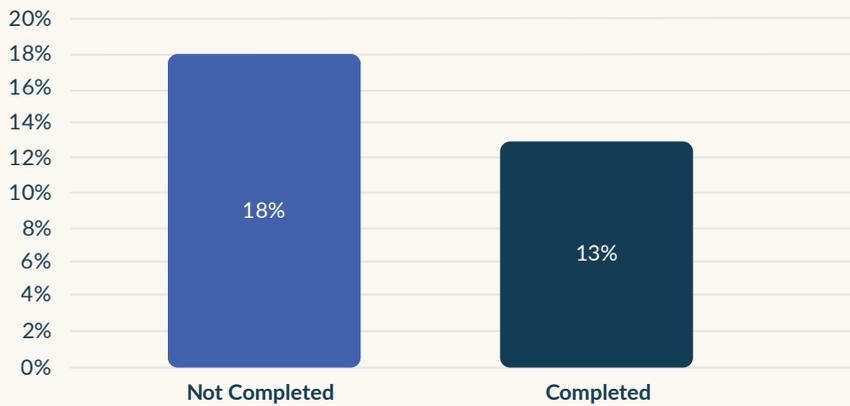


**31%**  
reduction in  
vomiting frequency  
in 2 weeks

**28%**  
reduction in diarrhea  
frequency in 2  
weeks

Data from Thyme Care's internal analysis. HCTTF did not independently validate the results.

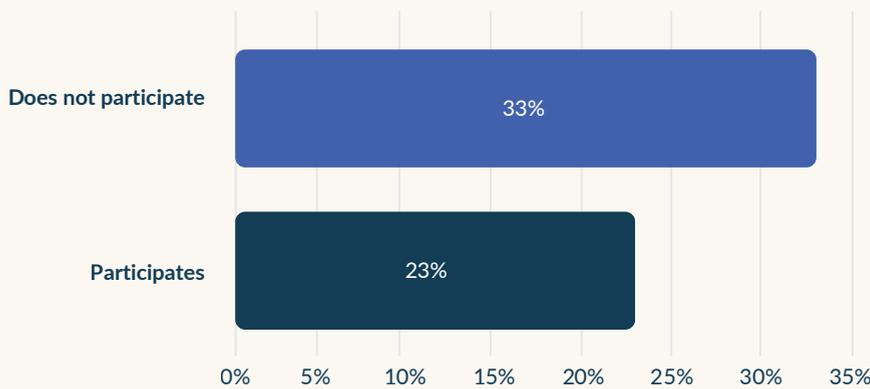
### ED Presentation or Inpatient Admission Rate by ePRO Completion Status



**28%**  
relative risk  
reduction for ED  
presentation or  
inpatient event for  
members who  
complete an ePRO

Data from Thyme Care's internal analysis. HCTTF did not independently validate the results.

### Readmission Rate by Discharge Assessment Completion Status



**30%**  
relative risk  
reduction for  
readmission for  
complex members  
who participate in  
Thyme Care's TOC  
program

Data from Thyme Care's internal analysis. HCTTF did not independently validate the results.

## Replicating this Model

Replicating this model requires a clear understanding of the structural and demographic forces reshaping oncology care. The following principles highlight the core elements organizations must address to successfully scale value-based oncology care.

- 1. Evolving patient demographics means reimagining how oncology care is delivered:** Because working age adults are facing cancer at greater rates and the survivorship population is growing, health plans and providers must adapt care models to address long-term symptom management, increase demand for digital access points, and support members balancing work, family, and treatment. Meeting members where they are within the shifting demographic landscape will become essential to improving experience and outcomes.
- 2. Alignment with oncology providers is foundational to any value-based cancer care model:** Successful value-based oncology arrangements depend on tight collaboration with the treating oncologist, who drives most clinical decisions and utilization patterns. Shared visibility into patient status, coordinated workflows, and aligned incentives help reduce duplication, and ensure interventions complement clinical care. Models that strengthen relationships between patients and providers will see greater adoption and impact.
- 3. A shift from reactive to proactive care is nonnegotiable in oncology:** A significant portion of ED visits and hospitalizations among cancer patients are preventable with timely symptom monitoring, nurse-led triage, and rapid care coordination. Investments in proactive, clinically informed workflows – rather than reactive crisis management – have meaningful downstream effects on both total cost of care and patient experience. This remains an underutilized but high-leverage lever for payers and providers pursuing value-based oncology.

As oncology continues to evolve, models that combine continuous access, deep provider integration, and financial accountability will be essential to delivering sustainable, high-quality cancer care. Thyme Care demonstrates how 24/7 virtual navigation aligned with oncology practices and outcomes-based risk can meaningfully improve patient experience while reducing total cost of care. This approach offers a scalable, evidence-based blueprint for advancing value-based oncology.