

STANDARDIZING CANCER CARE OR DISCOURAGING PERSONALIZED MEDICINE?

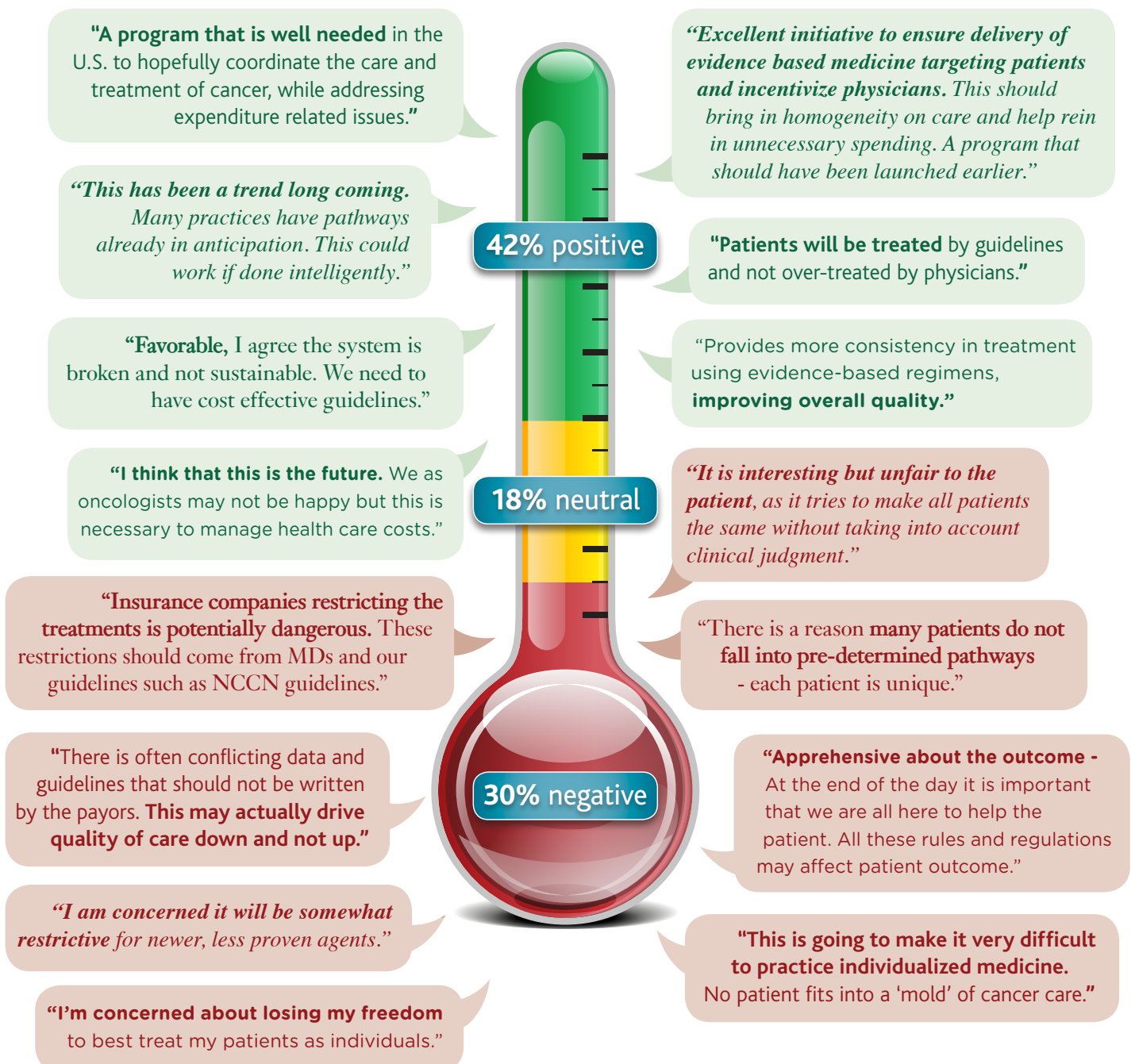
The escalating expense of cancer care in the US has driven payers to implement programs to control costs and encourage oncologists to adhere to standardized treatment guidelines. The latest effort, implemented in July 2014 by WellPoint, Inc. is the WellPoint Cancer Care Quality Program, which identifies certain cancer treatment pathways that are selected based upon factors such as current medical evidence and peer-reviewed published literature. **The program offers oncologists a \$350-per-month payment for each patient who is on one of the insurer's recommended regimens.**

WellPoint's cancer initiative highlights the dichotomy between the efficiencies that can be realized by standardizing care and the fact that improvements in targeted cancer therapies are rapidly enhancing the opportunities for individualized approaches to treatment. By incentivizing physicians to prescribe particular regimens, are payers discouraging personalized approaches to care? This type of prudent cost control may be at odds with medical advancements, and speaks to the overriding challenge of who will be deciding on the appropriate treatment protocol: payers or physicians?

Here's what Oncologists had to say:

How will this program impact Physicians?

How will this program impact Patients?



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