

Population Health NEWS

Most Value Assessment Frameworks Could Unintentionally Undermine Personalized Medicine

(This article has been adapted from a white paper by The Personalized Medicine Coalition entitled, Personalized Medicine and Value Assessment Framework: Context, Considerations and Next Steps).

Personalized medicine has become a critical component in the discovery of new treatments that improve outcomes, especially within certain therapeutic areas such as oncology, in which the emergence of mutation-specific indications has extended survival for many patients across diagnoses.

In 2006, there were six personalized medicine drugs, treatments and diagnostic products available, while there were 132 in 2016.¹ In 2014 and 2015, more than 20% of medicines approved by the FDA were personalized medicines.² This number rose to 27% in 2016, half of which were oncology drugs.

A recent study by the Tufts Center for the Study of Drug Development shows that almost half (42%) of all compounds and the vast majority (73%) of oncology compounds in development could lead to future personalized medicines.³ Significant increases anticipated in research and development investments by biopharmaceutical companies for personalized medicines are predicted to result in an almost 70% increase in the number of personalized medicines on the market by 2022.¹

The uptake and integration of personalized medicine in clinical practice, however, has lagged behind the science due to several sets of barriers, some of which involve the under-recognition and lack of evidence in demonstrating the value of personalized medicine to patients and the healthcare system.^{1,4}

Novel value frameworks have emerged in parallel with the field of personalized medicine, which has given rise to the question of whether value frameworks (some of which are rooted in conventional, 20th-century methods of value assessment) are aligned with the state of biomedical science.

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Five-Pillar Community Outreach Model Addresses Social Determinants of Health

by Thomas Lundquist, M.D., MMM, FAAP, FACPE

The idea that everyone deserves the opportunity to achieve the best health, regardless of ethnicity, race, geography and economic status, is an important goal to embrace and persevere. When community members lack necessities such as food or housing, healthcare services fail to achieve positive outcomes.

Healthcare providers must be committed to serving their communities by addressing social determinants of health to achieve population health goals. These initiatives are dynamic and help fill necessary gaps for achieving ideal outcomes by addressing specific needs of each community within a population.

In order to effectively address social determinants of health, programs must target five key pillars of community health—health, housing, education, financial stability and food insufficiency. Through Medicaid and other government health programs, providers must work together closely and develop relationships with community leaders to address these areas.

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