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Opinion

Office Visit: Experimental, investigational treatments – at what cost?

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Health care access and affordability are topics receiving much attention locally and nationally. In focusing on affordable health care, one of the critical factors to be considered is what medical treatments are covered under a health care benefit plan. In my opinion health care plans should provide benefits for certain medical treatments that are within the established standard of care and supported by peer-reviewed medical literature.

Covered treatments are generally those proven to be effective by medical and scientific evidence. An experimental treatment is one in which the results, as well as the risks to the patient, are unknown. Many times an experimental treatment has never been tested on a human. An investigational treatment is one for which experimental trials have been conducted and patient safety has been determined; however, research studies lack evidence of the beneficial effects.

Experimental and investigational treatments can be very expensive. As health care costs rapidly increase, employers, consumers, health care providers and insurers struggle with the rising costs and the impact on the uninsured. With that in mind, consumers' health care dollars must be spent prudently on medical treatments that are proven effective and that demonstrate improved health outcomes. For health plans to have adequate resources to provide benefits for covered medical treatments that are the standard of care and supported by medical evidence of effectiveness, health plan dollars should not be spent to cover experimental and investigational treatments.

If health care plans covered experimental or investigational treatments, health premiums would increase. Since employers purchase the majority of insurance coverage in Oklahoma, they would be forced to pay those additional costs. As a result, employers might limit benefits, pass the additional costs to employees, or eliminate insurance plans for employees, adding to the number of uninsured Oklahomans. Mandating coverage of certain treatments that are costly would increase the burden on small employers who purchase insurance policies. Many large employers have self-funded health care plans that are exempt from state-mandated benefits.

Patients sometimes are compelled to seek any kind of treatment out of desperation – even if there's no evidence that the treatment works. Although patients have freedom to choose such treatments, health care plan coverage may not be available if the treatment is not based on evidence-based medical care.

An intervention making headlines in the news recently is applied behavior analysis. Many health care plans and medical professionals consider ABA to be investigational or an unproven treatment for autism. ABA encompasses behavior modification training programs that are based on the concept that behavior is learned through interaction between an individual and the environment. The programs are primarily used to change behavior to achieve educational objectives, rather than address medical problems.

ABA is not supported by pertinent medical and scientific research. While studies have been conducted, most included small sample sizes, non-randomized controlled trials, or conclude with differing outcomes. As a result of a collaborative effort of the Kaiser Foundation Health Plan, Southern California Permanente Medical Group and Blue Cross and Blue Shield Association's Technology Evaluation Center, a special report was published in February on the use of early intensive behavioral intervention, known as EIBI, based on ABA for the treatment of children with autism spectrum disorders. The report systematically reviewed research studies on EIBI. The report concluded that the evidence on the effectiveness of early intensive behavior therapy is uncertain. Weaknesses in research design and analysis, as well as inconsistent conclusions across studies, undermined confidence in the reported results.

It's imperative that patients receive quality, consistent care based on the most current, scientific knowledge and

research. Health care plans provide benefits for covered medical treatments that are the established standard of care. Simply increasing premium costs to cover a particular treatment that may or may not be effective is not in the best interest of health care consumers.

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