



David C. Hohn, MD

David C. Hohn, MD, was recruited to Roswell Park Cancer Institute in 1997 to serve as the Institute's 12th President. Dr. Hohn came to Roswell from the University of Texas MD Anderson Cancer Center, where he served as Vice President for Patient Care from 1993 to 1997. During his 10 years as President and CEO, Dr. Hohn achieved landmark legislation creating a new governance model for the Institute, built new research facilities, and recruited a new leadership team in addition to more than 160 new clinical and scientific faculty members. In the ensuing decade under his leadership, the Institute increased employment by nearly 60% (adding >1200 employees) and tripled both its operating budget and its extramural grants and contracts. Dr. Hohn was appointed President Emeritus and Executive Director of Health Policy at Roswell Park Cancer Institute on his retirement in 2007. He continues his involvement in health policy issues, especially as they relate to cancer research and treatment and training the next generation of specialists. He previously served as Chair of the Board of Directors of NCCN from 2004 to 2007. He 2014, he was appointed as Special Advisor to the President, and he is currently playing a leading role in planning the joint Hematology/Oncology program at Roswell Park and the new Oishei Children's Hospital.

Reflections on NCCN's First 20 Years

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I first became involved with NCCN during its formative stages more than 20 years ago and served as Board Chair from 2004 to 2007. My close colleague, Charles Balch, MD, then Chair of the Division of Surgery at The University of Texas MD Anderson Cancer Center, had been having discussions with Robert Young, MD, and others about the national movement toward managed care and how our comprehensive cancer centers might best compete. Another of my colleagues at MD Anderson, Rodger Winn, MD, an early advocate of health services research, was deeply concerned about discordant patterns of cancer care in both academic and community cancer centers in the face of compelling evidence from clinical trials. Dr. Winn felt strongly that the best strategy for enhancing treatment outcomes and controlling costs was to build a comprehensive system of treatment guidelines based on evidence from trials or recommendations of disease-site thought leaders when evidence from trials was lacking, and to disseminate these guidelines widely and without charge to payers and providers. NCCN rapidly matured, with an ever-evolving core of cancer treatment guidelines that have become the worldwide reference standard for cancer treatment.

Additional accomplishments made by NCCN during its first 2 decades are too numerous to elaborate in detail, so I will highlight some of the accomplishments made through the duration of my tenure as the NCCN Chairman of the Board. NCCN made a strategic decision to work with insurance companies and, later, major employers to educate them about the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines) and the value of treatment and trials in our respective institutions.

This strategy took us in several different directions. Dr. Winn had begun to offer comprehensive educational seminars for case managers and medical directors from the major insurance companies, a strategy that continues to evolve and grow to this day. Using panels of experts drawn largely from our member institutions, we worked closely with Blue Cross Blue Shield in Chicago to develop disease-specific criteria for designating community cancer programs as Centers of Excellence for cancer care. We engaged strong support from the National Business Group on Health in advocating for continued access to NCCN Member Institutions. We inaugurated the fall NCCN Annual Congress: Hematologic Malignancies.

Based on strong encouragement from our member institutions, we developed the Drug & Biologics Compendium, a comprehensive set of disease- and stage-specific reference guides for the use of drugs and biologics that are now widely used by providers and by payers in setting coverage policy. Our NCCN Chemotherapy Order Templates have also gained wide acceptance and, along with the NCCN Guidelines, are being integrated into several electronic medical record and computerized provider order entry systems. An expanding International Guidelines Program provides worldwide access to our guidelines, now published in multiple languages. NCCN Guidelines for Survivorship were developed, and 2 more cancer centers were added to our membership roster—Vanderbilt-Ingram Cancer Center and Siteman Cancer Center at Barnes-Jewish Hospital and Washington University School of Medicine (with others subsequently added). We also successfully launched *JNCCN*.

These are remarkable accomplishments for a 2-decade-old organization, and they provide a solid foundation for the challenging decades ahead. We owe a huge debt of gratitude to the visionaries who recognized the need for NCCN, the talented staff who built the framework for our many successful programs, and, above all, the many hundreds of faculty who write and update the guidelines and lead our educational programs. Happy 20th Anniversary, NCCN!