

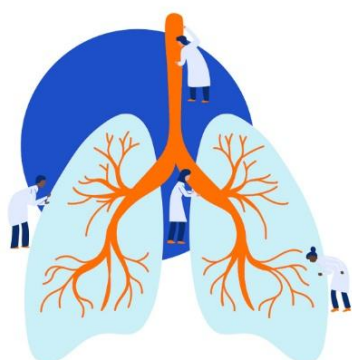
BRIDGING THE GAP

Enhancing Equitable Access & Innovation in Lung Cancer Care in South Korea

EXECUTIVE SUMMARY

South Korea has established itself as a leader in lung cancer care, with a system that combines cutting-edge technology, equitable access, and strong public health campaigns. Its success is the result of well-integrated national policies—from universal screening and insurance coverage to investments in AI-driven diagnostics and personalized medicine.

This policy brief examines how South Korea's lung cancer care ecosystem has achieved global excellence and highlights scalable strategies for other nations seeking to improve patient outcomes and system-wide efficiency.



INTRODUCTION

Leveraging National Systems for Equitable Excellence

South Korea's comprehensive lung cancer strategy showcases how government-led, evidence-based initiatives can drive long-term improvements across prevention, diagnosis, treatment, and end-of-life care. Flagship institutions like **Seoul National University Hospital** and **Samsung Medical Center** anchor a network of high-performing cancer care centers, while the **National Health Insurance (NHI)** ensures that innovations in care are universally accessible.

South Korea holds an **Overall Lung Cancer Maturity Level of 5 – Leading**, indicating excellence across all six pillars of lung cancer care.



South Korea Ranks at Level 5 – Lung Cancer Maturity Framework

LUNG CANCER IN SOUTH KOREA

System Strengths and Strategic Levers

Pillar	Current Status	Barrier	Policy Action
Early Detection & Diagnosis	National LDCT screening is available to high-risk individuals aged 55-74. Participation rates are high in urban areas.	Yes, screening is free—but rural uptake is lower, and primary care referral systems need strengthening.	Enhance screening participation in rural areas. Train primary care providers in risk assessment and referral protocols.
Biomarker & Molecular Testing	Broadly available in tertiary hospitals. Testing for EGFR, ALK, ROS1, and PD-L1 is common in urban cancer centers.	Yes, biomarker panels are used—but regional facilities often lack capacity for timely and complete testing.	Invest in regional biomarker labs and ensure NHI coverage includes full testing panels across all hospitals.
Treatment Access	EGFR inhibitors, ALK inhibitors, and immunotherapy are covered by NHI. Robotic-assisted surgeries are performed in top hospitals.	Yes, advanced treatments are reimbursed—but high-tech care is centralized, delaying access in peripheral areas.	Decentralize delivery of advanced therapies. Create telemedicine-enabled oncology outreach teams for rural regions.
Clinical Guidelines	National guidelines exist and are aligned with global standards. Hospitals follow evidence-based practices for NSCLC and SCLC.	Yes, guidelines are in place—but updates take time, and implementation varies across institutions.	Establish a national lung cancer registry to monitor adherence. Create fast-track channels for integrating global advances.
Palliative & Survivorship Care	Strong hospice and home-based palliative care system exists, coordinated by Korean Society for Hospice and Palliative Care.	Yes, services are comprehensive—but survivorship care is less structured, and caregiver support needs improvement.	Develop formal survivorship care pathways. Fund caregiver training programs and mental health support services for long-term survivors.

CONCLUSION & Call to Action

South Korea's approach demonstrates that national commitment, paired with evidence-based policymaking, can drive transformative outcomes in lung cancer care. With over 33% of patients surviving beyond five years, the country has redefined what success looks like in the fight against lung cancer.

Other countries, particularly those with universal health systems or those aspiring to implement them, can draw powerful lessons from South Korea's integrated, prevention-driven model. Key takeaways include the importance of **early detection infrastructure, AI-enhanced diagnostics, and system-wide reimbursement policies** that leave no patient behind.



KEY POLICY PRIORITIES

- 1 Implement national LDCT screening programs** with high-risk stratification and follow-up pathways.
- 2 Ensure universal access to advanced treatment** through public insurance or subsidy programs.
- 3 Embed public health campaigns within broader tobacco control policies** and integrate early screening into primary care.
- 4 Create and enforce national lung cancer guidelines**, with regular updates and clinical audits.
- 5 Strengthen palliative care integration**, with emphasis on training, accessibility, and community-based support.

South Korea's model reminds us that the future of lung cancer care lies in **cohesive systems that bridge innovation with inclusivity**—offering not just longer lives, but better ones.