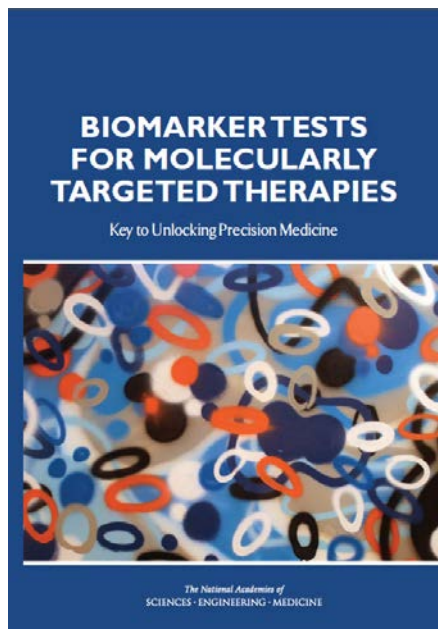


# Biomarker Tests for Molecularly Targeted Therapies

Key to Unlocking Precision Medicine

Report from the National Academy of Medicine



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Acknowledge help and input from

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# Disclosures

- Robert Nussbaum
  - Employee of Invitae Corporation and holds stock options in the company
  - Former Co-Principal Investigator on NIH grant establishing ClinVar database
  - Chair Rare Disease Therapeutic Area Scientific Advisory Panel, Pfizer
  - Medical Advisory Board, Genome Medical
  - Stock options in Personalis and Informed DNA

# Study Sponsors

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**Breast Cancer Research  
Foundation**

**Centers for Disease Control  
and Prevention**

**College of American  
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# Study Charge

- Examine **policy issues** related to the clinical development and use of **biomarker tests** (including genomic-based tests) for **targeting therapies** to patients
- Review **opportunities** for and **challenges** to the use of biomarker tests to select optimal therapy
- Formulate **recommendations** to accelerate progress in the field

## Areas of focus:

- **Regulation:** variability in the regulation of tests and combination products and the role of various oversight bodies
- **Reimbursement:** standards of evidence used by payers to make coverage decisions, and how to generate evidence of clinical utility
- **Clinical practice:** interpretation of molecular tests, clinical decision-making, dissemination of new technologies, and implications for clinical practice

# Key Report Themes

- Accurate, reliable, clinically useful, and appropriately implemented biomarker tests for molecularly targeted therapies are **key** to realizing the full potential of **precision medicine**.
- Substantial **variation in the evidence** used to inform regulatory, reimbursement and treatment decisions ultimately limits the broader adoption of potentially useful biomarker tests for molecularly targeted therapies into clinical practice.
- In this rapidly changing field, regulation, coverage, reimbursement and practice guidelines will continue to evolve as evidence is generated and new information becomes available. **Data sharing is essential**.
- A **rapid learning system** represents a framework for collecting and analyzing data and information and enables continuous learning from research and clinical practice.

## Supportive Policy Environment

Common evidentiary standards of clinical utility for biomarker tests for molecularly targeted therapies

Integrated regulatory and reimbursement decision-making process

Enhanced communication about test information

Strengthened laboratory accreditation standards

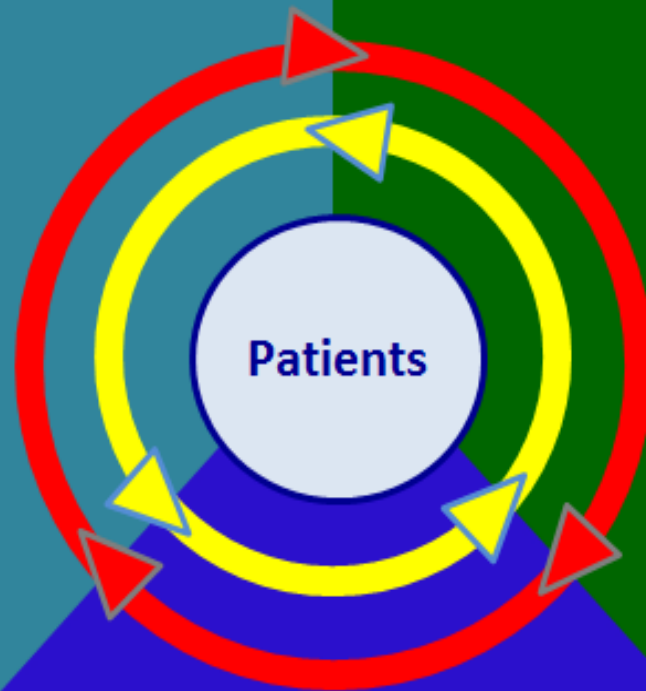
Ongoing assessment of clinical utility through research and clinical use of biomarker tests for molecularly targeted therapies

## Processes to Improve Patient Care

Equitable access to biomarker tests for molecularly targeted therapies

Improved specimen handling and documentation standards

Enhanced clinical practice guidelines development



## Supporting Data Infrastructure

Structured EHR data  
Capture of test information in a national database

# RECOMMENDATION 1

**Goal 1: Establish common evidentiary standards of clinical utility—using evidence generated both within and outside the context of clinical trials—across all stakeholders.**

**Recommendation 1:** The Secretary of HHS should **facilitate the development of common clinical utility evidentiary standards** that are applied for initial and ongoing coordinated regulatory, coverage, and reimbursement decisions for biomarker tests for molecularly targeted therapies.



# RECOMMENDATION 2

**Goal 2: Establish a more coordinated and transparent federal process for regulatory and reimbursement decisions for biomarker tests for molecularly targeted therapies.**

**Recommendation 2:** The Secretary of HHS should facilitate the development of a **new integrated federal review process** involving FDA and CMS to serve as a **pathway for coordinated regulatory, coverage, and reimbursement decisions** for IVD, LDT, and/or NGS biomarker tests and corresponding molecularly targeted therapies.

# RECOMMENDATION 3

**Goal 3: Enhance communication to patients and providers about the performance characteristics and evidence for use of specific biomarker tests for molecularly targeted therapies.**

**Recommendation 3: FDA should develop a patient- and provider-friendly standardized label for IVD and LDT biomarker tests**

# RECOMMENDATION 4

## **Goal 4: Update and strengthen oversight and accreditation of laboratories providing biomarker tests for molecularly targeted therapies**

**Recommendation 4:** The Secretary of HHS should establish and enforce **up-to-date laboratory accreditation standards** for biomarker tests for molecularly targeted therapies, either through CMS' CLIA\* or in collaboration with an existing up-to-date accreditation organization. Reimbursement should be dependent on meeting these standards.

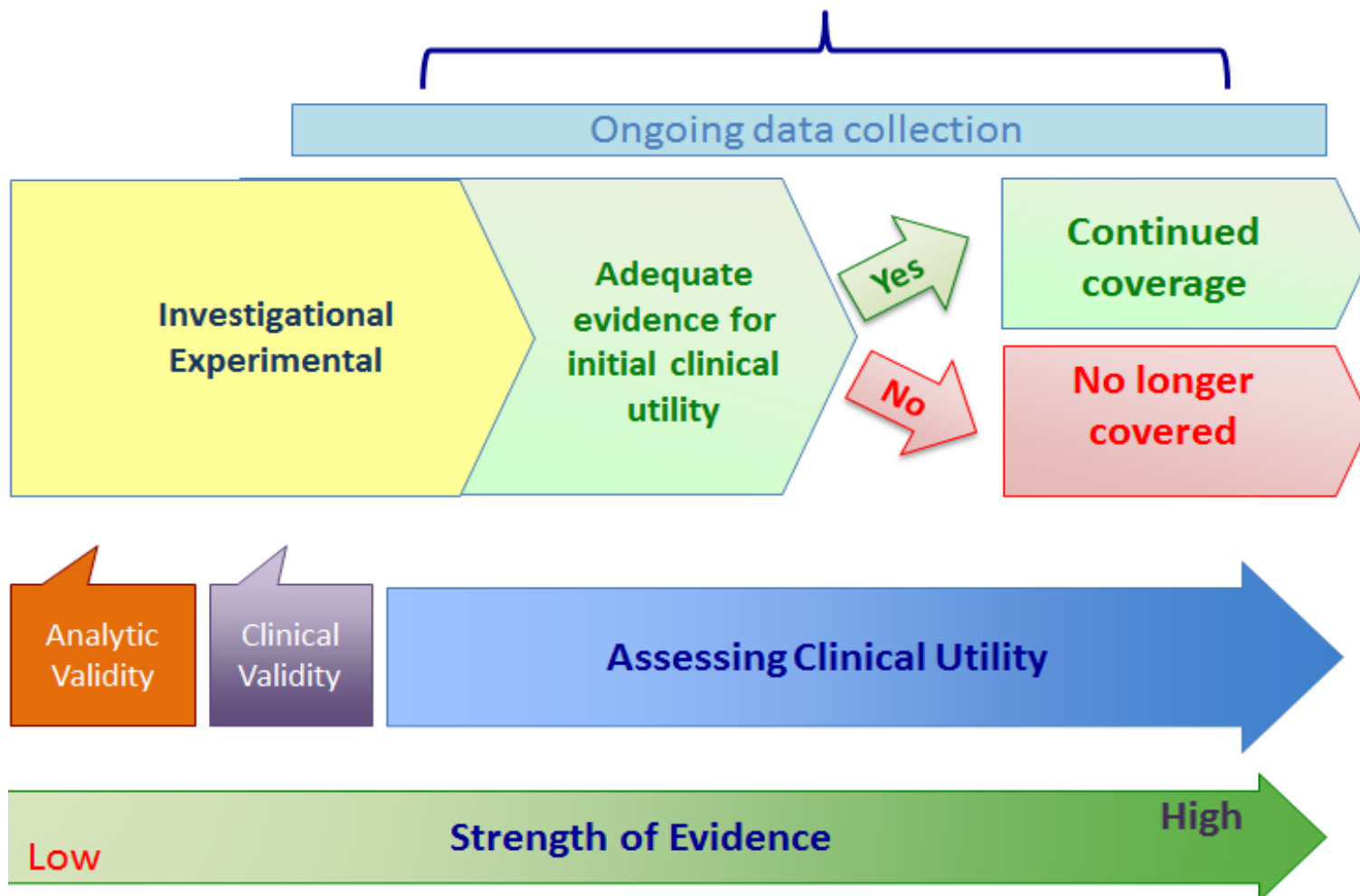
# RECOMMENDATION 5

**Goal 5: Ensure ongoing assessment of the clinical utility of biomarker tests for molecularly targeted therapies.**

**Recommendation 5a:** CMS and other payers should develop reimbursement models that support the ongoing collection of data within a rapid learning system. Clarify and expand appropriate implementation of coverage with evidence development (CED)

**Recommendation 5b:** PCORI and NIH, as well as other funding groups, should develop granting mechanisms that support the assessment of the clinical utility

## Reimbursement Policy Mechanism to Support Ongoing Assessment of Biomarker Tests for Molecularly Targeted Therapies



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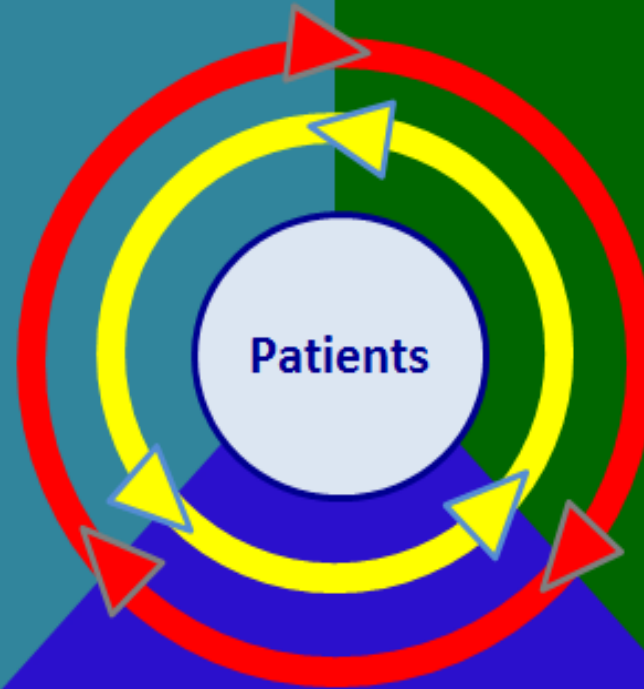
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# RECOMMENDATION 6

**Goal 6: Ensure development and use of EHRs and related biomedical informatics tools and assessments that support the effective clinical use of biomarker tests for molecularly targeted therapies.**

**Recommendation 6a:** EHR and LIS vendors and relevant software developers should **enable the capture and linkage of biomarker tests, molecularly targeted therapies, and longitudinal clinical patient data in the HER**

**Recommendation 6b:** EHR vendors and relevant software developers should **enable EHRs to facilitate point-of-care decision support** for biomarker test ordering, reporting, and shared clinical decision making.

# RECOMMENDATION 6 (con't)

**Recommendation 6c:** Health care institutions and physician practices should **use EHRs that facilitate point-of-care decision support** for biomarker test ordering, reporting, and clinical decision making.

**Recommendation 6d:** Licensing and specialty boards should recognize CME, CEU and MOC achieved through interaction with point-of-care decision support educational materials.



# RECOMMENDATION 7

**Goal 7: Develop and maintain a sustainable national database for biomarker tests for molecularly targeted therapies through biomedical informatics technology to promote rapid learning for the improvement of patient care.**

**Recommendation 7:** The Secretary of HHS should charge FDA and NIH to convene a **Task Force to develop a sustainable national repository** of biomarker tests, molecularly targeted therapies, and longitudinal clinical patient data to facilitate rapid learning approaches.

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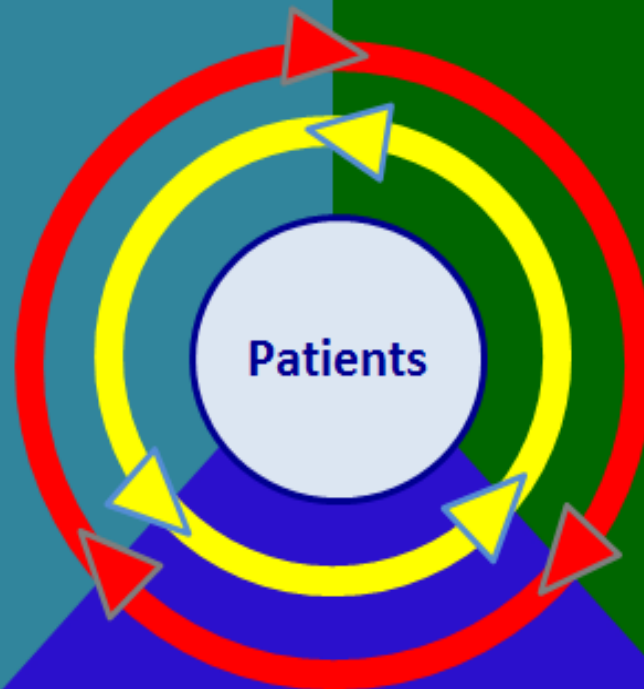
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# RECOMMENDATION 8

**Goal 8: Promote equity in access to biomarker tests for molecularly targeted therapies and the expertise for effective use of the results in clinical decision making.**

**Recommendation 8a: Funding to identify and overcome barriers to promote equity, access, and public understanding of precision medicine.**

# RECOMMENDATION 8 (con't)

**Recommendation 8b: Support demonstration projects** to enable and assess the effectiveness of collaboration between community health care providers and larger health care centers and/or academic medical centers to be part of a rapid learning system.

**Recommendation 8c:** Licensing and specialty boards **should ensure that** health care professionals have and maintain competencies needed for effective use of biomarker tests for molecularly targeted therapies.

# RECOMMENDATION 9

**Goal 9: Enhance specimen handling and documentation to ensure patient safety and the accuracy of biomarker test results.**

**Recommendation 9a:** Professional organizations and accrediting entities should develop, and health care institutions and providers should implement **standards for**

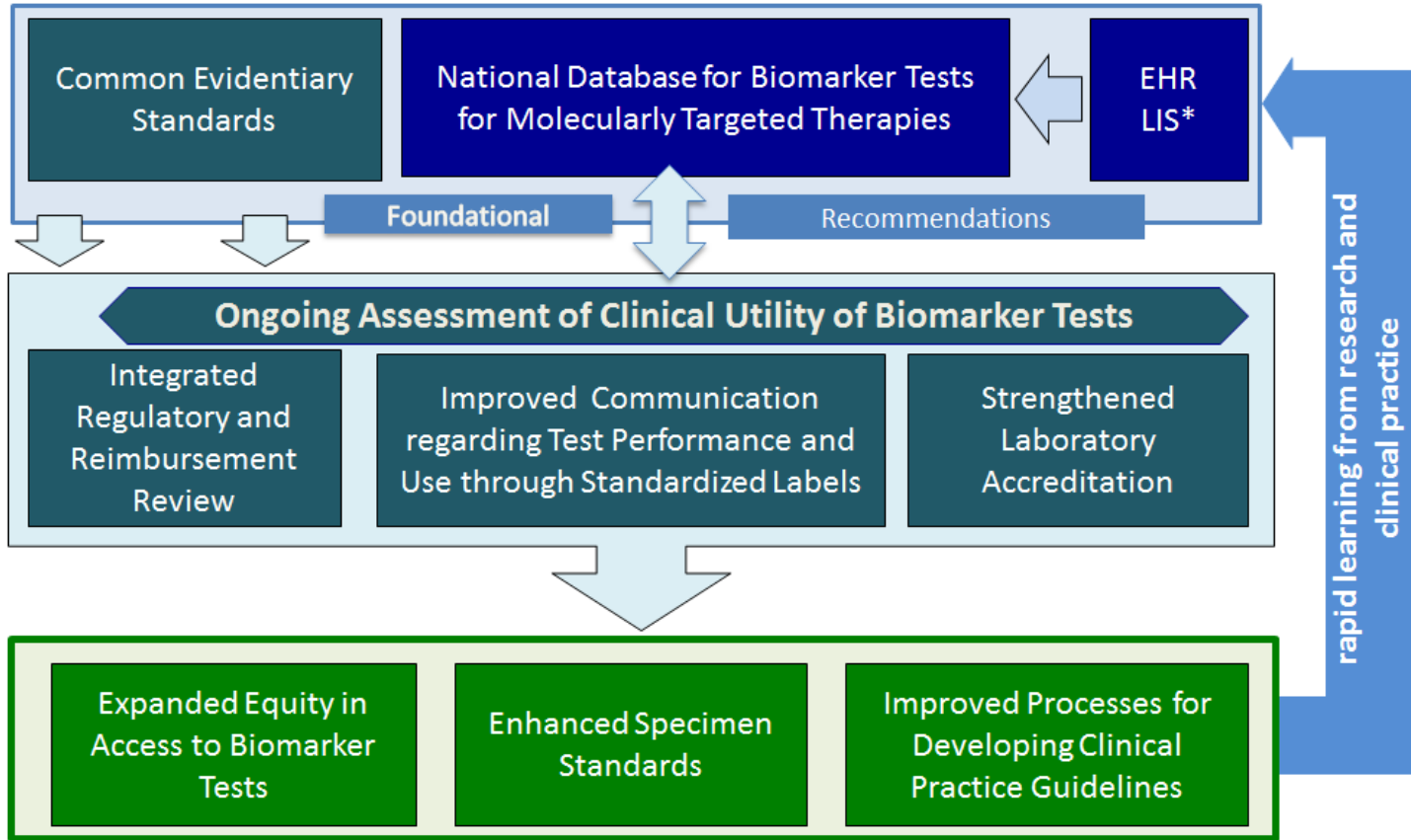
- **specimen requirements, handling, and documentation through an interdisciplinary effort**
- **reduce unnecessary repeat specimen collections.**

# RECOMMENDATION 10

**Goal 10:** Improve the processes for developing and updating clinical practice guidelines for the effective use of biomarker tests for molecularly targeted therapies.

**Recommendation 10:** Guideline-developing organizations should **expand interdisciplinary collaborations to develop integrated guidelines** on the appropriate use of biomarker tests for molecularly targeted therapies.

# Rapid Learning System for Biomarker Tests for Molecularly Targeted Therapies



Key:

Policy Environment  
Recommendations 1-5

Data Infrastructure  
Recommendations 6-7

Patient Care Processes  
Recommendations 8-10

# BIOMARKER TESTS FOR MOLECULARLY TARGETED THERAPIES

Key to Unlocking Precision Medicine



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To download the report, and view more resources, visit:  
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