

***Realizing the Potential of Genomics  
across the Continuum of Precision Health Care***

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# Introduction

- Somatic testing of cancer samples has become critical for diagnosis and treatment decisions over the last decade
- Germline testing is crucial for diagnosis of genetic disorders, assessment of risk, pharmacogenomics and more
- Molecular applications have revolutionized microbiology
- Progress has been enormously beneficial to patient care
- Many challenges and barriers remain

# Education

- Education of our providers lags behind field
- Medical school and residency curricula lags practice and potential
- Genomics is advancing rapidly
- Solutions:
  - Training in practice needed
  - Training champions in primary and specialty care
  - EMR tools needed to make genomics part of routine care

# EMR

- Genomics is complex!
- EMR needs
  - Structured data
  - Family groupings and connections
  - Reflex testing
- Orders are complex
  - Consent
  - Preauthorization
- Display of results
- Availability of results
  - just in time results
  - once in a lifetime tests
- IT/EMR vendors are building tools....

# Reimbursement

- Need payment for clinical sessions to explain testing and results
- Many issues for lab testing:
  - Reimbursement rates often low
  - Tests often classified as “experimental”
  - Consensus guidelines lag behind actual practice
  - Clinical lab fee schedule (CLFS) used: does not cover professional interpretation

# Regulatory Issues

- Increasing availability of FDA-approved kits for molecular microbiology
- Most genetics and cancer testing is done using LDTs (LDPs)
- FDA oversight of LDPs has been debated for decades
- Current concerns over the VALID act
  - Would require ALL lab testing to be reviewed by FDA
  - Cost and access concerns
  - Lab testing is a process, not a kit (though it may use a kit)
  - Redundancy with CLIA
    - CLIA assesses quality of entire testing process
    - Includes proficiency testing with national comparisons