

Themes from day 1

- Diversity of topic areas
- Requires a spectrum of expertise/perspectives
- Some are strictly economic research, most are not
 - Technology development – ongoing
 - Epi research
 - Behavioral research
 - ELSI/education
 - Health Services

Genomics - economics

- Need better (quicker) approaches to performing health economic evaluations of tests and SNPs.
- Better understanding of the lens through which “economics” of sequencing should be viewed by application and setting.
What assumptions need to be examined?
- Development of improved methods for assessing value/personal utility /patient preference in economic analysis.

Genomics - economics

- Economic consequences of a dual system for regulation versus reimbursement.
- Value based and specific pricing versus old system (CPT stacking)
- Divergence of economic assessment models in public health, clinical care, and academics
- In the setting of a disruptive technology and a zeros sum game/ shrinking pool of resources what/who will be replaced and how to fund genomic interventions?

Genomics - mixed

- Potential for disparities from genomic medicine, including applicability of information to minority populations and SES disadvantages.
- When should genomic sequencing be integrated? NBS scenario with data being used over the lifespan.
- Methods/infrastructure (including informatics) in health systems to follow downstream consequences of providing sequence data.
- Integration of economic analysis into on-going wgs clinical studies.

Genomics – technology

- Increased accuracy of sequencing.
- Cheaper, faster technology for molecular characterization of samples.

Genomics – epi research

- Methodologies to evaluate risk assessments across platforms for various conditions.
- Determination of relative contribution of environment on outcomes.

Genomics – behavioral research

- Determination of if and how genomic/sequence information modifies provider and patient behavior.

Genomics – ELSI/education

- Developing outcomes data on informed consent/study of efficient methods for patient education.
- Better education of genomic scientists/clinicians regarding economic analysis.

Genomics – health services

- How to integrate genomic information into HIT and other infrastructures with current system constraints .
- Proper use of family history to guide medical decision making, integrated into HIT infrastructure.
- Methodology to increase participation in clinical trials.
- Need for evidence base development.

Genomics – health services

- Exploration of thresholds of evidence regarding data in hand vs data that must be obtained.
- Is cost reduction demonstrable? Do ACO's provide a possible mechanism for demonstration of more efficient health care using genomic technologies?