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Biomarker Testing Program Resource Grid

Designed to support health care organizations' biomarker program growth and development





Overview of Advisory Board's research

About this program resource grid

The following document is based on Advisory Board's original research and analysis of literature and primary research interviews with health care executives, clinicians, and stakeholders in the biomarker testing process.

The grids in the following document, as well as the program features, resources, and accompanying prioritization, are designed to provide a starting framework for initial discussions around biomarker testing program implantation. It is based on a synthesis of Advisory Board's research calls, literature review, and internal expert analysis, and cannot be attributed to a single organization or piece of literature. The program resource grids and accompanying recommendations do not reflect the opinions or suggestions of AstraZeneca.

About Advisory Board research

Advisory Board is a best practice research firm serving the health care industry. We provide strategic guidance, thought leadership, market forecasting, and implementation resources. For more information about our services—including webinars, analytics, expert insights, and more—visit advisory.com.

About Advisory Board's research process

Our research process is member-driven. We conduct 80+ research interviews with health system executives and service line leaders across the country to understand program challenges and identify and vet best practice solutions. The results from these interviews are then published in white papers, webinars, conference presentations, and data tools.





Biomarker Testing Program Resource Grid

Molecular biomarker testing is integral to cancer care and precision medicine. One study of 5.954 patients with refractory malignancy showed that 37.6% of these patients had therapeutically actionable genetic alterations, meaning they can be matched to approved targeted drugs, across several different cancer types.¹ Advisory Board research shows there is a large opportunity for health care organizations to use biomarker testing to help get the right patients on the right drugs at the right time.

However, biomarker testing practices and overall adoption varies across hospitals, health systems, and community sites. This variability is often due to insufficient resources dedicated to the biomarker testing process from staffing, to education, to technology support.²

Therefore, oncology program leaders should consider investing in the resources needed to advance their biomarker testing process and prepare to advocate to leadership for additional support when necessary.

What is this resource and how do I use it?

This grid outlines the resources recommended by Advisory Board, based on its proprietary research and analysis, to develop basic, intermediate, and advanced biomarker testing programs. However, the categories listed are not mutually exclusive. A biomarker testing program can have resources listed across all categories (e.g., an "intermediate" program can have several "advanced" resources). The resources listed in each program level are not an exhaustive list but rather offer suggestions for organizations looking to advance their biomarker testing process. The grid can also serve as a way to identify current program processes and guide future investment.

Use this resource grid to understand where your program stands and to lead discussions on what resources to invest in to advance your biomarker testing program.

Program levels

Bearing in mind that organizations have various resource constraints and patient populations, Advisory Board uses these definitions to describe the three program levels:

•Basic: Organizations that offer the standard of care; the "must have" oncology biomarker testing resources and services

•Intermediate: Organizations that actively incorporate biomarker testing into their oncology and precision medicine programs

•Advanced: Best-in-class biomarker testing programs; offer industry-leading services, provide cutting edge treatments, drive research and forward innovative approaches

Ratings

Finally, the grid includes a numerical rating, ranking the importance of each element from least important (1) to most important (4) based on Advisory Board research and analysis.

Take these ratings as suggestions for how to prioritize areas of improvement or allocation of additional resources.



Sources: 1. Flaherty K, et al., "Molecular Landscape and Actionable Alterations in a Genomically Guided Cance Clinical Trial: National Cancer Institute Molecular Analysis for Therapy Choice (NCI-MATCH)," Journal of Clinical Oncology, doi: 10.1200/JCO.19.03010, 2020; 2. Data on File. US-57118. AstraZeneca Pharmaceuticals LP. pg. 4

	Program Feature	Basic	Intermediate	Advanced
4	Leadership ³	 Ad hoc based on specific cases or program needs 	Physician champion leader	 Dedicated precision medicine and/or biomarker testing leadership Regular communication and meeting cadence with all stakeholders
4	Education ³	 Organization-wide access to nationally recognized guidelines (e.g., NCCN, AMP, or CAP) 	 Optional, physician-led education sessions (e.g., lunch and learns) Staff member(s) dedicated to monitoring changes to clinical guidelines or pathways and communicating with team 	 Mandatory, organization- sponsored education sessions (e.g., lunch and learns, education checkpoints) Dedicated library for biomarker testing education materials
4	Testing and treatment protocol ⁴	 Organization recognizes appropriate guidelines 	 Complete adoption of nationally recognized guidelines or clinical pathways Actively track adherence to nationally recognized guidelines or clinician pathways 	 Actively looks for new technologies such as: concurrent testing, automated clinical trial enrollment system, next-gen sequencing machines Uses the latest tests, technologies, and methodologies to assess the need for further lines of treatment
S	Clinical Staffing ³	 Dedicated frontline clinicians including: Oncologist Pathologist Support staff including: General hospital administration 	 Dedicated support from: Oncology staff Oncology-focused data team Multidisciplinary group dedicated to discussing biomarker testing includes: Oncologist Lab staff Pharmacist Pulmonologist Radiologist Administrative staff 	 Dedicated precision medicine expertise from: Pharmacogenomics (PGx) specialist Geneticist Genetic data specialists Bioethicist Dedicated biomarker testing staff: Genetic counselors
3	Data tracking ³	 Manual biomarker testing data entry (e.g., via excel) 	 Automated electronic biomarker testing data entry (e.g., through EHR or vendor platform) 	 Dedicated data team tracks, analyzes, and informs future processes using biomarker testing data Pilot new data tracking tools and methods Collects metrics including: Number of patients receiving testing Number of patients who receive therapy Turnaround time Quality Not Sufficient (QNS) rate Progression free survival rate

Sources: 3. Data on File. US-57118. AstraZeneca Pharmaceuticals LP; 4. Advisory Board Oncology Roundtable, "Lung Cancer Program Resource Grid," 2020, advisory.com.

	Program Feature	Basic	Intermediate	Advanced
3	Standardization⁵	 Protocol enforced by clinicians-leaders 	 Site-wide biomarker testing protocols 	 System-wide biomarker testing protocols
2	EHR capabilities⁵	 Basic EHR that can upload PDF of biomarker test results 	 EHR is standardized across sites of care EHR is integrated with lab vendor ordering processes Built-in alerts and prompts to provide clinical decision support 	 EHR directly integrates genetic testing results into relevant fields Built-in alerts proactively flag patients with actionable biomarkers
2	Financial Services⁵	 Ad hoc process for biomarker testing reimbursement and pre-authorization (PA) Frontline clinicians connect patients with financial services 	 Frontline clinicians execute formal reimbursement process Established process for submitting PA 	 Dedicated reimbursement team Lab vendors handle PA process Dedicated financial navigators support patients
2	External Partnerships⁵	 Ad hoc relationships with lab vendor, technology partners, and payers 	 Therapeutic area or site-level lab agreement(s) with partners Site-level partnerships with local payers Site-level partnerships with technology vendors 	 System-level lab agreement(s) System-level partnerships with local payers System-level partnerships with technology vendors Local community partnerships to advance testing knowledge
2	Patient Engagement ⁶	 Staff provide education materials to patients Online patient navigation resources 	 Biomarker testing expertise help patients navigate journey 	 Dedicated biomarker testing personnel to help patients through process



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