

West Virginia Cancer Action Day Training



February 5, 2024



West Virginia Cancer Action Day

**February 12, 2024
8:00 AM – 1:00 PM**

3

What is Cancer Action Day?

- Opportunity to advocate for cancer patients
- Speak directly with your state elected officials
- Fight for advancement in health equity



WV Legislative Photography, Photo by Perry Bennett





Doug Hogan
Government Relations Director

2024 WV Legislative Priorities

 @ACSCANWV

West Virginia Biomarker Insurance Coverage: HB 4753 to expand appropriate coverage of biomarker testing

- Access to appropriate biomarker testing can help to achieve better health outcomes, improved quality of life, and reduced costs.
- Insurance coverage for biomarker testing is failing to keep pace with innovation and advancement in treatment: 66% of oncology providers reported that insurance coverage is a significant or moderate barrier to appropriate biomarker testing for their patients.

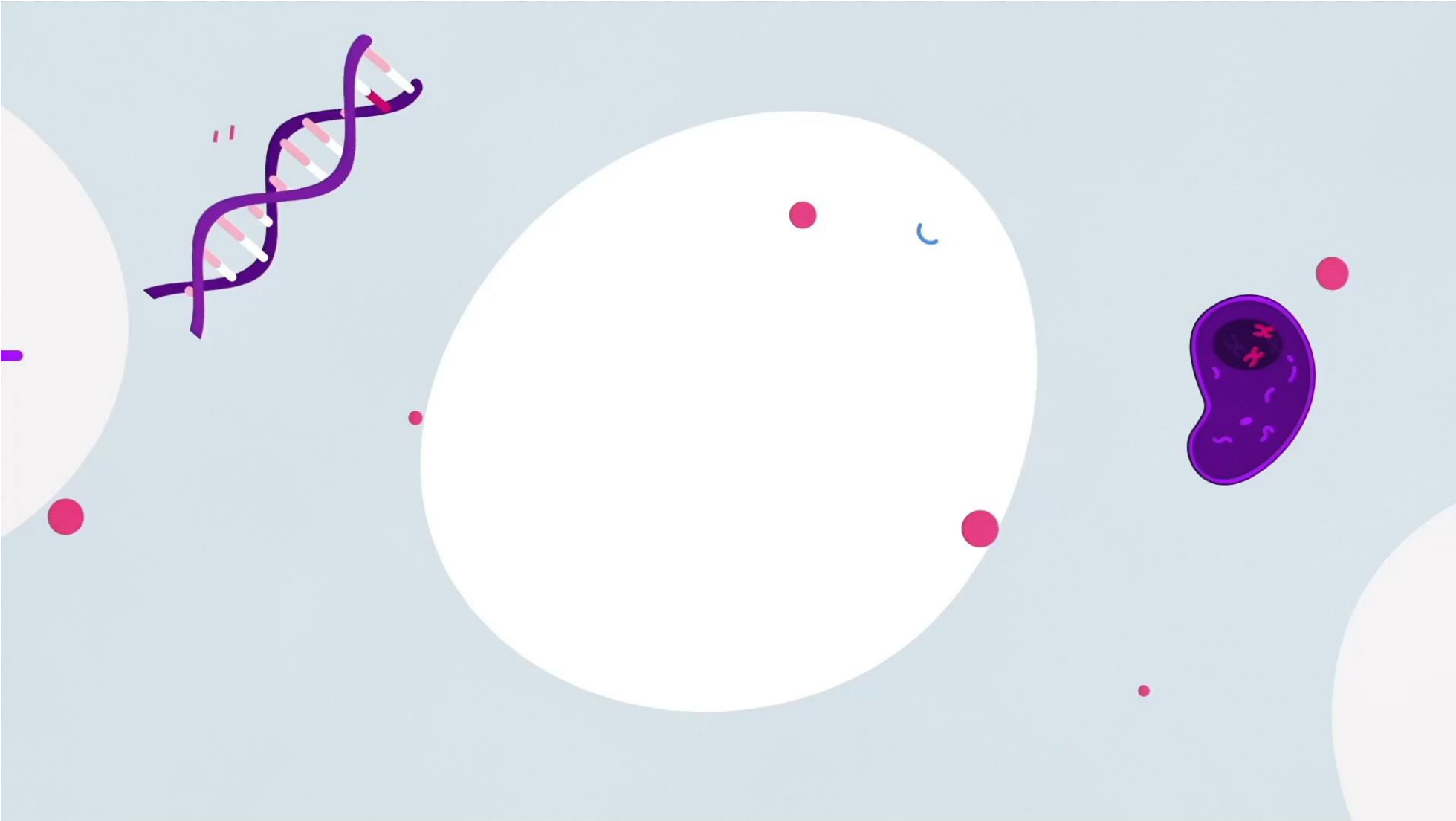




Biomarker Testing and Precision Medicine

**Hilary Gee Goeckner, MSW
Director, State & Local Campaigns – Access to
Care**

Biomarkers and Precision Medicine



Screening vs. Genetic testing vs. Biomarker testing

Screening tests – like MCED, mammograms

- Looking for signs of cancer in general population

Genetic testing

- Testing for inherited risk to determine risk for developing certain cancers or passing risk onto children

Biomarker testing

- Used in people who already have cancer to determine best treatment options, how aggressive the disease is, monitor for recurrence



Biomarkers and Precision Medicine

Biomarkers = a characteristic that is objectively measured and evaluated as an indicator of normal biological processes, pathogenic processes, or pharmacologic responses to a specific therapeutic intervention. Includes *gene mutations* or *protein expression*.

The right treatment, at the right time

- An essential component of precision medicine
- Targeted cancer therapy
- Avoidance of therapies unlikely to provide clinical benefit

Not just about cancer

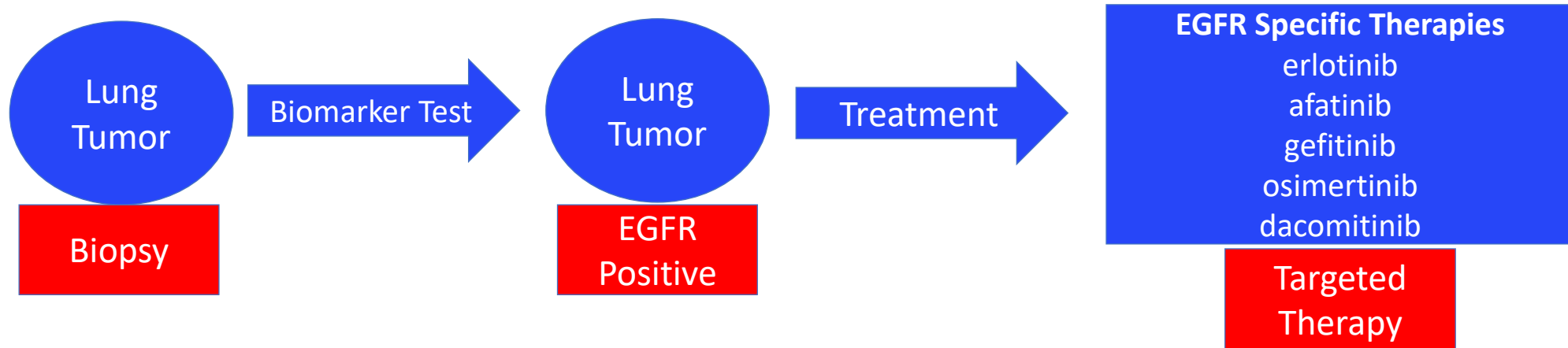
- Being explored in a variety of disease areas (e.g., cardiology, rheumatology, neurology, infectious, respiratory, autoimmune diseases)



What is biomarker testing?

Biomarker testing in people with cancer

- Looks for the presence of molecules like proteins or gene mutations found in cancer cells
- Can be used to inform therapy selection and treatment decisions
- Example: EGFR-positive non-small cell lung cancer --> several EGFR inhibitors



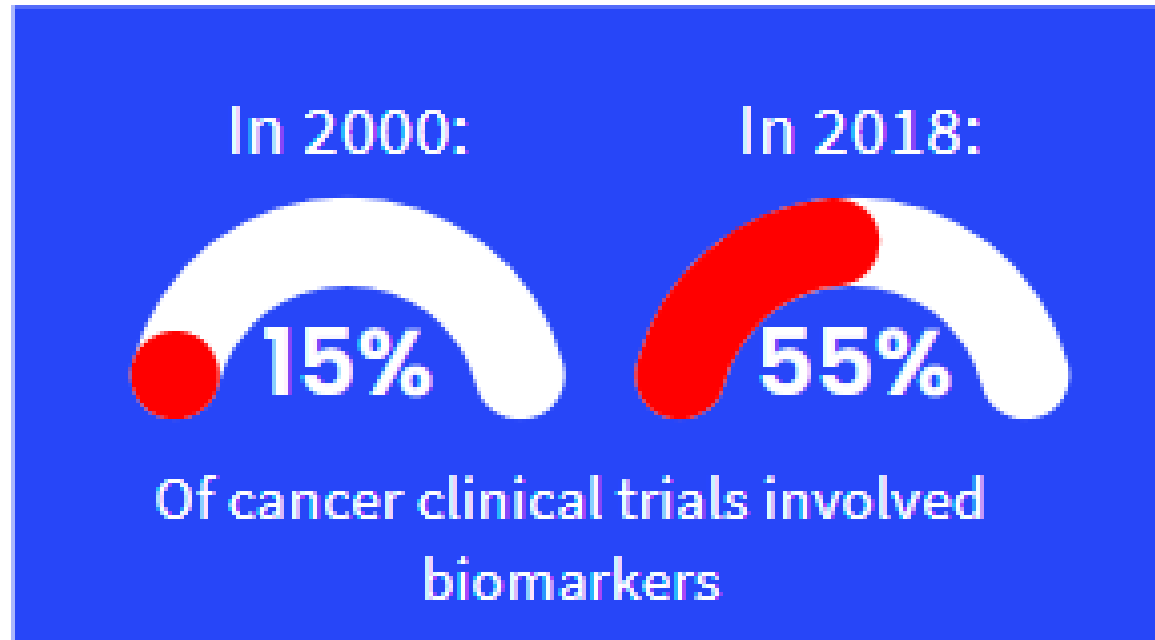
Biomarker testing can also be used to:

- Identify the likeliness of disease recurrence or progression
- Predict a drug's efficacy or likelihood of toxicity
- Identify signs of disease recurrence before it is visible on imaging



Biomarker testing and clinical trials

Cancer clinical trials are increasingly driven by biomarkers and the development of targeted therapies



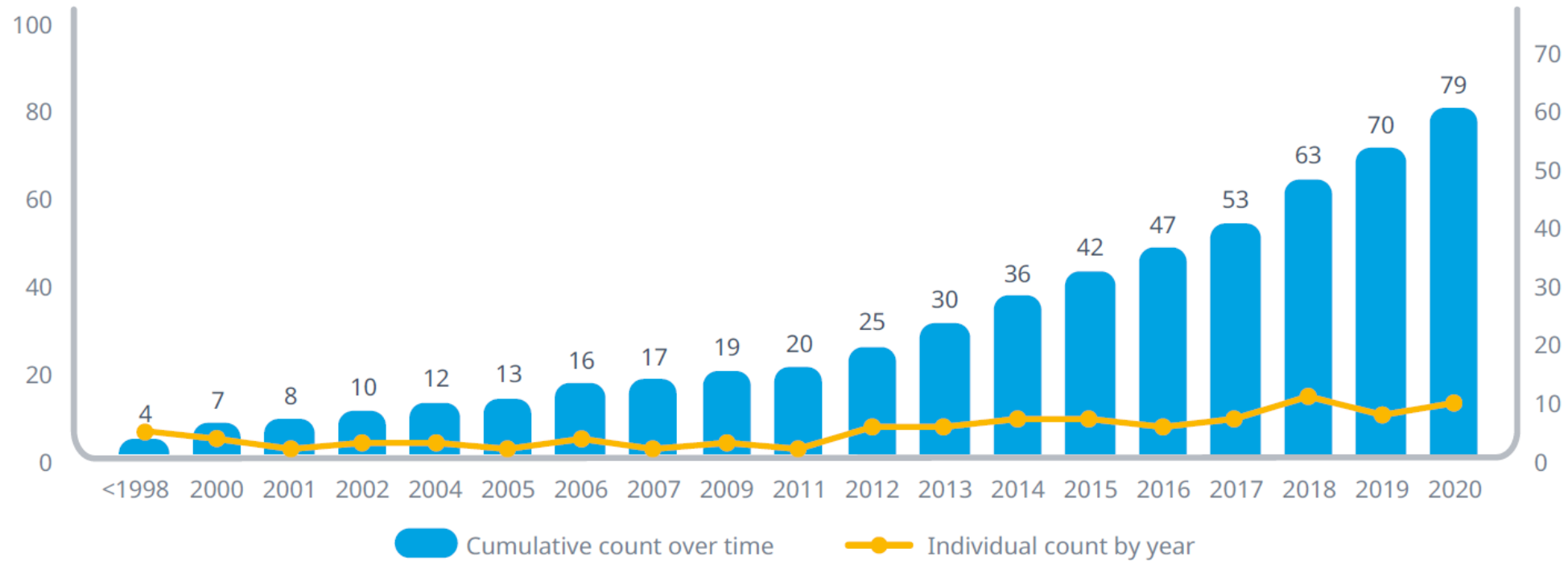
Increasing access to biomarker testing is key to supporting access to clinical trials

[1] The Evolution of Biomarker Use in Clinical Trials for Cancer Treatment Key Findings and Implications. Personalized Medicine Coalition 2019.

Trends in biomarker testing

Nearly 80 oncology medicines are used after a predictive biomarker test up from 20 in 2011

Exhibit 38: Number of U.S. Oncology Medicines with Required or Recommended Predictive Biomarker Testing



Source: IQVIA Institute, May 2021



Who Should Get Tested and Why?

The Role of Clinical Guidelines in Determining Appropriate Testing

- Several professional associations have cancer biomarker testing and treatment guidelines
 - National Comprehensive Cancer Network (NCCN) Clinical Practice Guidelines in Oncology, American Society of Clinical Oncology (ASCO), others
- Helps assure that testing and treatment take advantage of the latest knowledge
- Biomarker testing has become the standard of care in certain cancers

Patients who receive biomarker testing and are eligible for and receive targeted cancer therapy have better outcomes.



Who is Getting Tested?

Unequal access to testing

- In metastatic non-small cell lung cancer (NSCLC), **eligible Black patients are less likely to receive biomarker testing** compared to white patients.
- Patients with advanced NSCLC or colorectal cancer who were **Black, older, or Medicaid-insured had lower odds of next-generation sequencing biomarker testing** compared to patients who were white, younger, or commercially insured.
- There are **socioeconomic inequalities** in biomarker testing and targeted therapy utilization across cancer types.
- There **are lower rates of testing in community oncology settings versus academic medical centers.**

These disparities in access and use of guideline-indicated biomarker testing and targeted therapy can potentially widen existing disparities in cancer survival.



What does this look like for a patient?



What does this look like for a patient?

Kathy is a 54-year-old white woman with no history of tobacco use. After visiting her primary care physician for persistent cough and shortness of breath, she was ultimately referred to an oncologist.

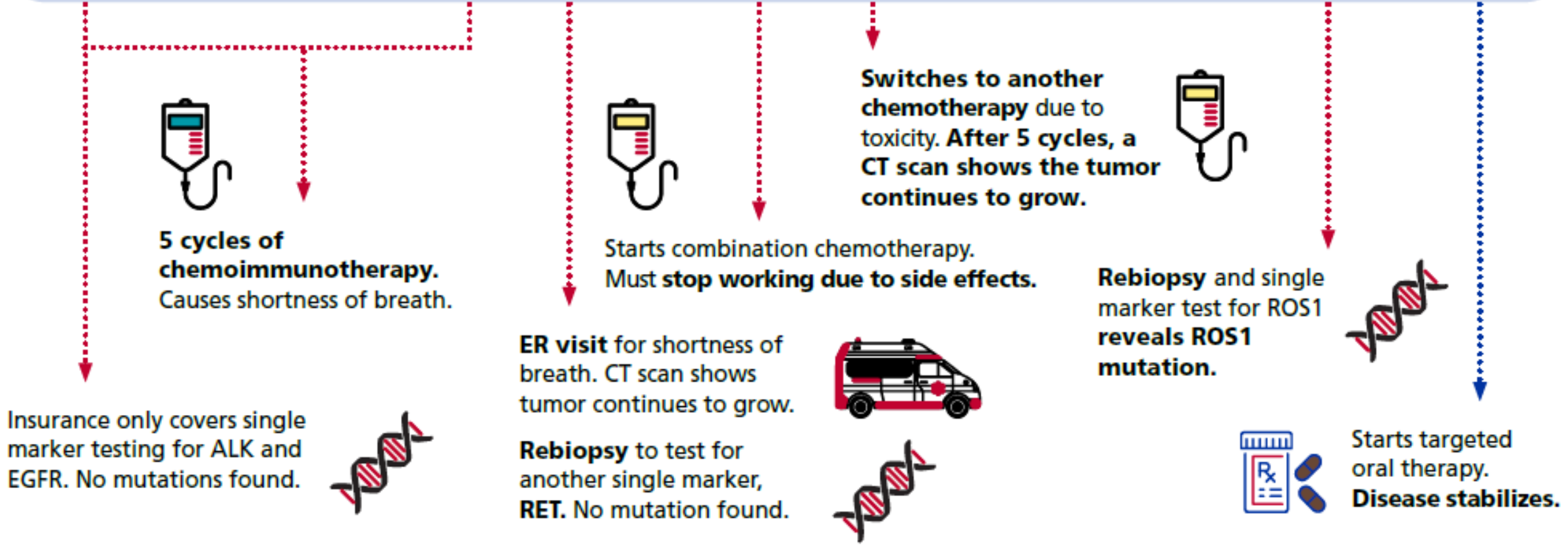
Her oncologist ordered a diagnostic CT scan which revealed a large mass in the left lung with lymph node involvement. A biopsy confirmed stage IV non-small cell lung cancer, and her PET/CT scan was consistent with extensive bone metastases.



Kathy, 54
Lung Cancer Patient

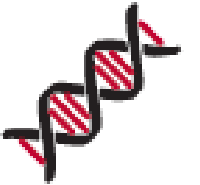


Without Comprehensive Biomarker Testing



With Comprehensive Biomarker Testing

Comprehensive biomarker testing reveals a **ROS1 mutation**.
Starts targeted oral therapy. **Disease stabilizes.**



Barriers: Insurance

Coverage of tests differs greatly across payers

- Coverage policies generally more common for single-gene tests vs. multi-gene panel tests

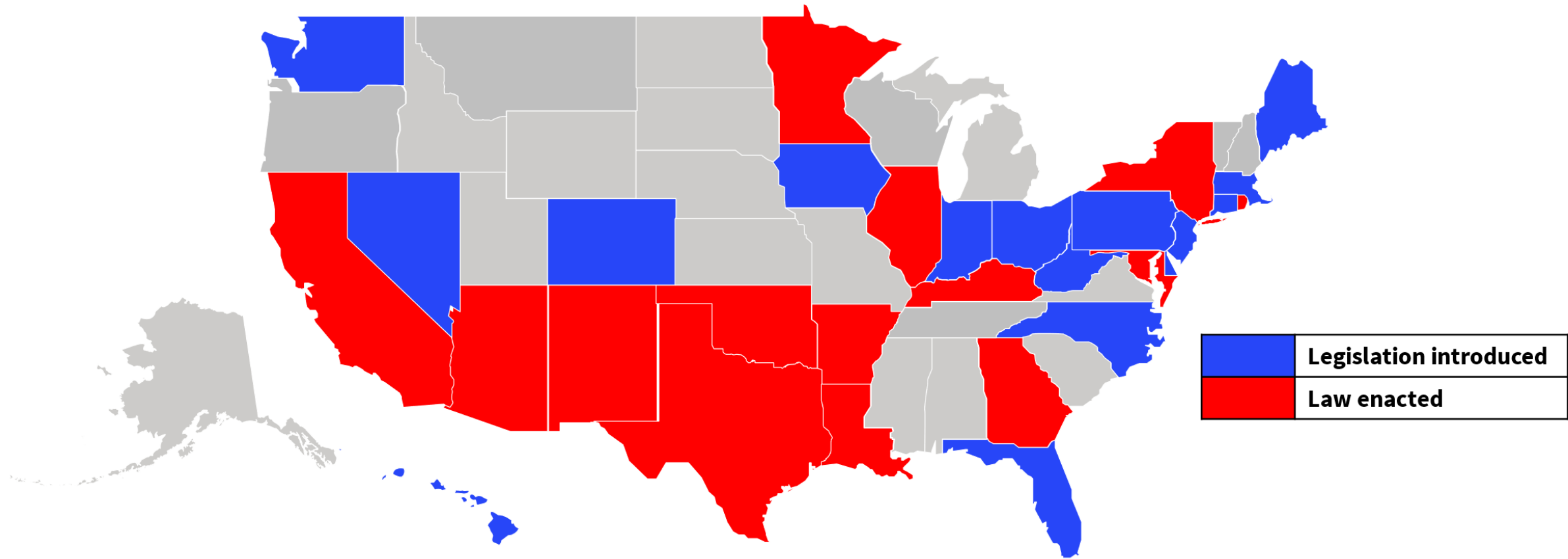
Plans aren't necessarily following the evidence

- A recent paper in *Personalized Medicine* highlights gaps between insurance coverage and clinical practice guidelines.
- Although 91% of plans evaluated reference NCCN treatment guidelines in their biomarker testing policies, **71% are “more restrictive” than these guidelines for biomarker testing in breast, non-small cell lung cancer, melanoma and/or prostate cancer patients.**

Wong, W., et al. (2022) *Alignment of health plan coverage policies for somatic multigene panel testing with clinical guidelines in select solid tumors.*



Legislation to Expand Access to Biomarker Testing



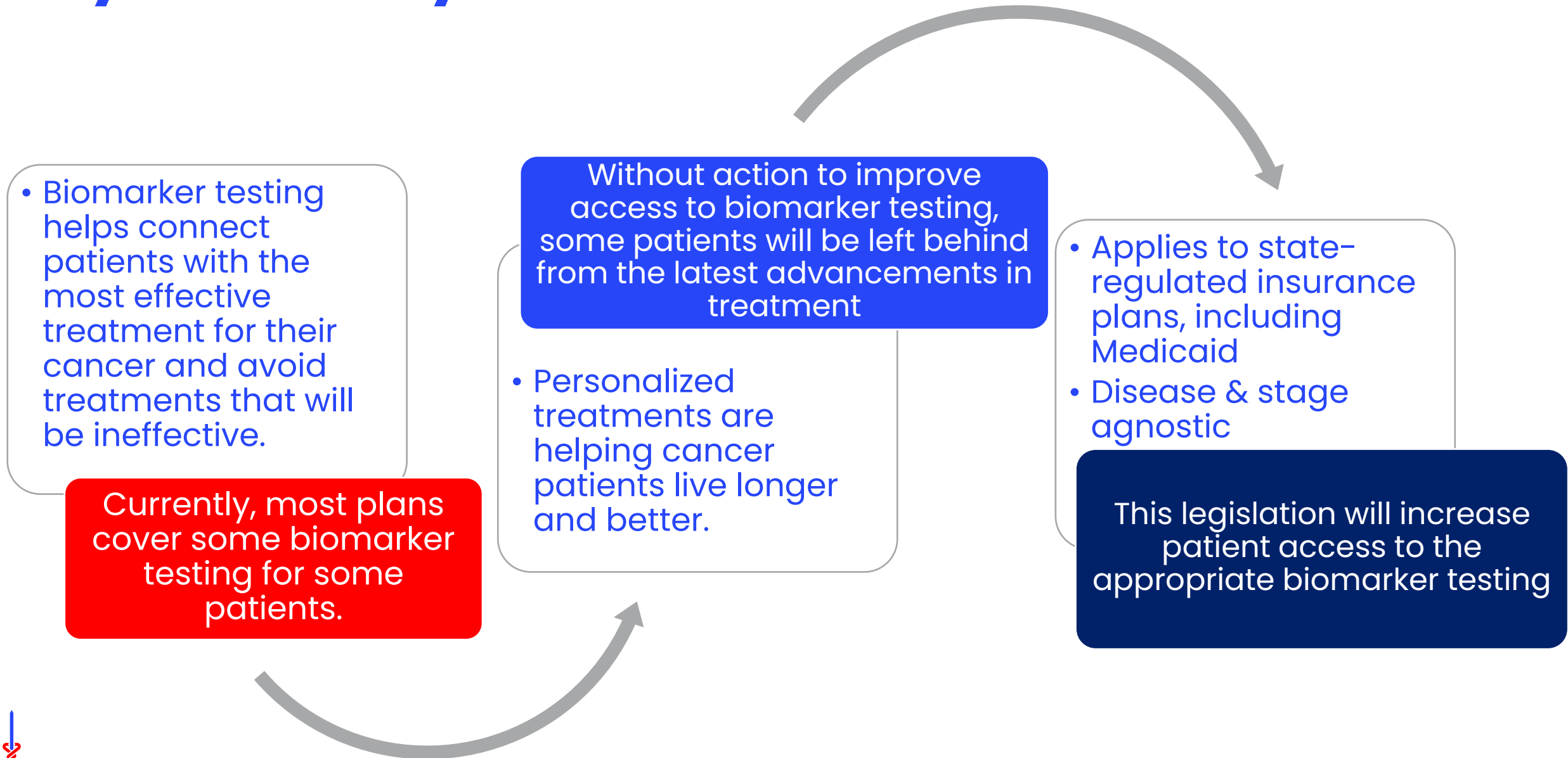
Legislation enacted: AZ, AR, CA, GA, IL, KY, LA, MD, MN, NM, NY, OK, RI, TX

Legislation introduced/expected: CO, CT, FL, HI, IA, IN, MA, ME, NV, NJ, OH, PA, WA

Updated 1/4/2024



Key Takeaways



Key Messaging

The right treatment, at the right time.

- An essential component of precision medicine
- Targeted cancer therapy
- Avoidance of therapies unlikely to provide clinical benefit

Improving access to biomarker testing (and thereby targeted therapies) is a strategy to reduce health disparities.

- Not all communities are benefitting from the latest advancements in testing and treatment

Triple Aim of Healthcare

- Timely access to biomarker testing will enable more patients to access the most effective treatments for their disease
- Can potentially help achieve the **triple aim of health care**
 - Better health outcomes
 - Improved quality of life
 - Reduced costs.



Questions

Cancer Action Day Schedule

8:00 AM **Breakfast & Networking**

8:20 AM **Welcome Presentation- Doug Hogan & Katie Rose Garden**

8:30 AM **Issue Briefing- Doug Hogan**

8:40 AM **Meeting with Legislators Briefing- Katie Rose Garden**

8:50 AM **Q&A's, break into groups, and Send off to Meetings**

9:00–11:00 AM **Meetings – Legislative Offices
Report Back Forms – Online, or Written**

11:00–12:30 PM **Debrief, Group Photo, Send Off- Governors Conference Room**





Location and Parking Details

- **Directions:**
 - Exit 99 on Interstate 77/64, one mile east of where I-64 and 77 join together in Charleston.
- **Parking Info: Personal Vehicles**
 - Personal vehicles can be parked at Laidley Field.
 - A free shuttle service is provided between the Capitol Complex and the Laidley Field parking area. The shuttle departs from Laidley Field, starting at 6:45 a.m. and ending at 5:15 p.m. Each stop is served approximately every 10 -15 minutes. The shuttle does not operate typically between 9:30 a.m. and 11:30 a.m. and 1:45 p.m. and 3:00 p.m.
 - If you ride to the Capitol, go to the Capitol entrance across from the Cultural Center to enter the Capitol. The shuttle bus is handicapped accessible.
 - For more shuttle information, call the Parking Section at 304-558-3062 or Piedmont Guard House at 304-558-0248.

Parking Map



Day of Reminders

What time?

- Please arrive to the breakfast by 8:00am
- Plan about 15-20 minutes to park and walk over

What to wear?

- We encourage business casual clothing and comfortable shoes

What to bring?

- Travel lightly! You will need to go through security at the entrance of each building
- Bring your cell phone for photos with your lawmaker and our team throughout the day

Will I go through security?

- Yes, you do have to go through security upon entry, but everything is in the same building





Hook, Link, and Sinker.

Three simple steps

1. Hook-Introduce yourself
2. Line -Share your story
3. Sinker-Ask for their support

HOOK

Meeting leader introduces the group (name + where you live)

- I am here as a volunteer for ACS CAN. We are meeting with legislators today to discuss our legislative priority issue, Biomarkers and Tobacco Prevention.

LINE

Explain the need:

- (INSERT why this is needed/impact on state/why important for cancer etc.)
- **Tell your personal story:** Connect your personal story to the importance of the ask/issue

SINKER

Make the ask!



**Share your
photos on social
media using**

#WVCAD24

#PRECISIONMATTERSWV

**Tag your lawmakers on Social
Media**



Questions

Thank You