Intermountain Healthcare

Healing for life"

Precision Medicine at Intermountain Healthcare

Lincoln Nadauld, MD PhD Executive Director, Precision Genomics Intermountain Healthcare

Precision Medicine at Intermountain Healthcare: An Overview

- Clinically implementing precision oncology
- The survival and cost outcomes associated with precision oncology
- Precision Medicine in other medical disciplines outside of oncology

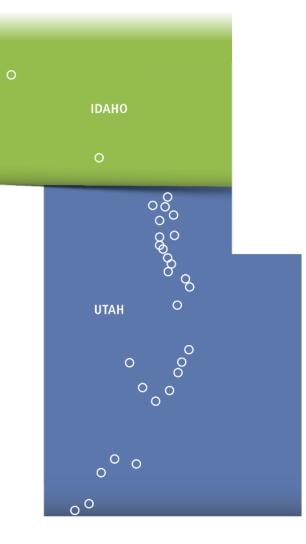


Intermountain Healthcare: An Integrated System

22 Hospitals

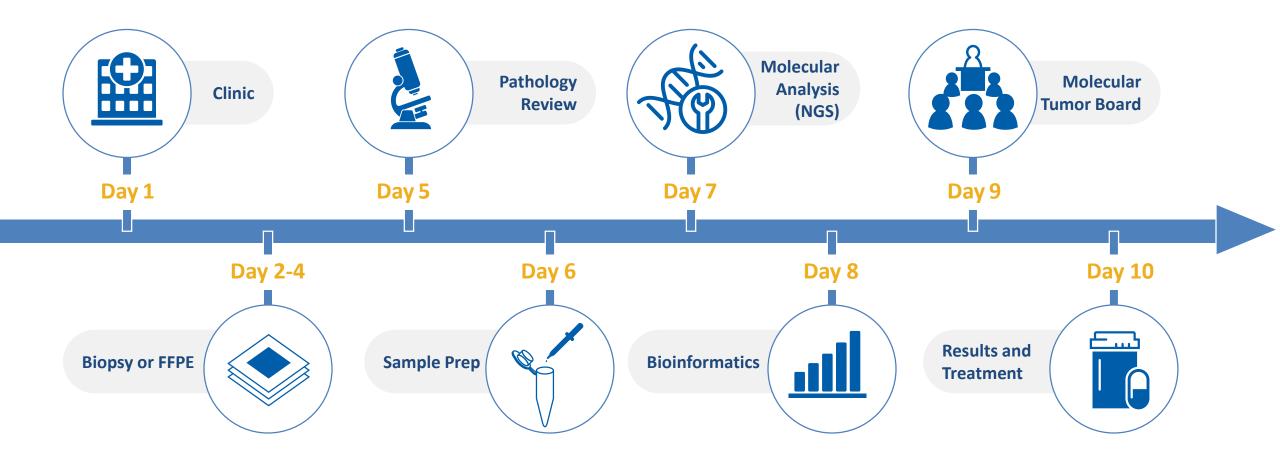
180 Medical Group Clinics **2,800** Licensed Beds

875,000 SelectHealth Members





Precision Oncology Workflow



MTB Interpretation included on the report

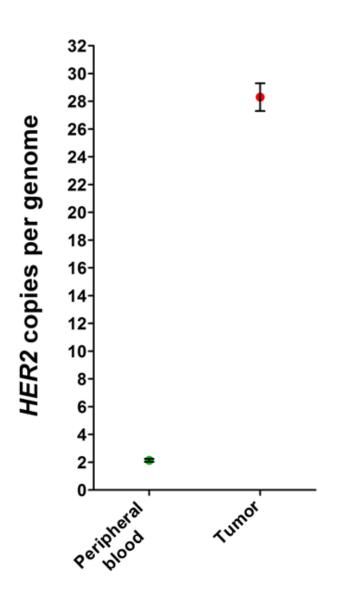
| | / Workflow: ICG Tumor | Panel for TRF-171 / Step | record: IMH-244 / | Edit note | |
|---|---|---|---------------------------|----------------------------|----|
| | • Previ | ew Report 🔘 View & Edit | Details | | |
| PATIENT | SPECIMEN INFORMAT | ION | | | |
| Name John M. Doe Patient DOB 1965-01-01 | Surgical Procedure Date 11/03/2014 Clinical Diagnosis Bladder Cancer | Date Received 11/14/2014 | | Specimen Source bladder | |
| Gender Male | PHYSICIAN INFORMAT | TION | | | |
| | Ordering Physician John Dolittle | Ordering Physician Phone (555)555-5555 | Pathology L Path Lab I | | |
| | BOARD INTERPRI | TATION | | | |
| MOLECULAR TUMOR | | | | | |
| Edit | | | | | |
| [III] (III) | e of your patient's tur tic interventions in th | nor, the Molecular Tum e ranked list below* | or Board's interpr | etation suggests t | he |
| Edit | e of your patient's tur tic interventions in th RANKED LIST OF AGENTS | nor, the Molecular Tum e ranked list below* | or Board's interpr | etation suggests t | he |
| Edit Based on the genomic profil following potential therapeu | | nor, the Molecular Tum e ranked list below* Order | or Board's interpr | etation suggests t | he |

Interp. in the report

Patient Case: HER2+ Colon Cancer

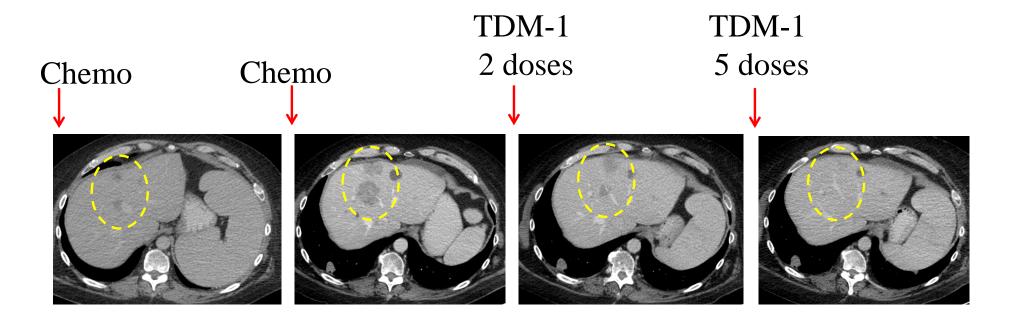
- 47 yo man with metastatic colon cancer
- Genomic analysis: HER2 amplification

ntermountain[®] Healthcare



Nadauld et al, JCO-PO, 2017

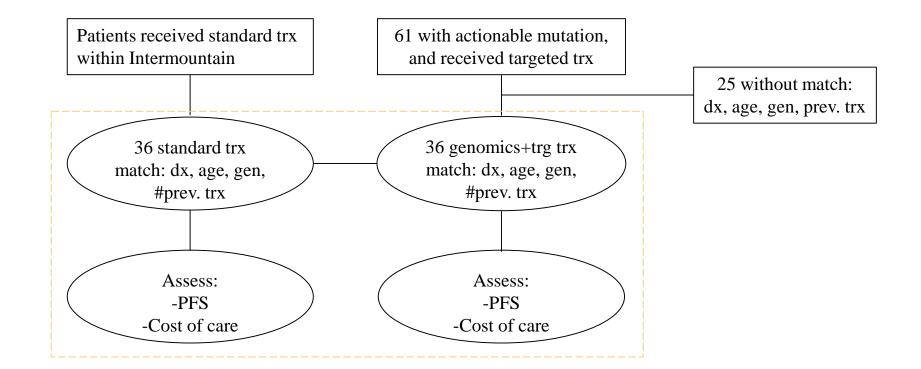
Patient Case: HER2+ Colon Cancer



- > Time to response: 2 months
- > Total time on drug: 18 months

Nadauld. JCO-PO. 2017

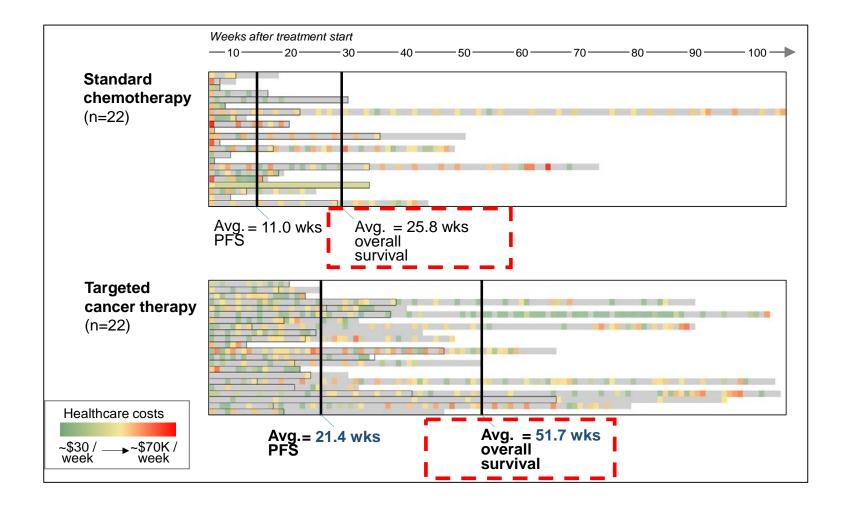
Intermountain Precision Medicine Cohort Study





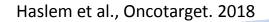
Haslem and Nadauld. JOP. 2016

Precision Oncology: Overall Survival

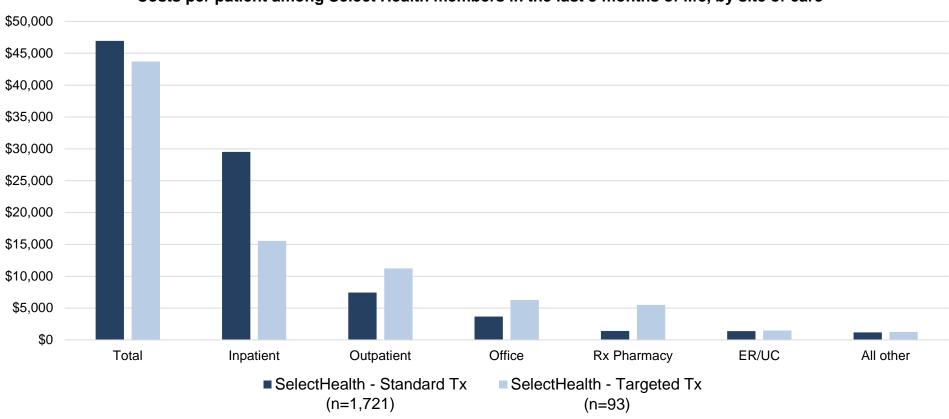


Precision Oncology Costs

| | Control (N=22) | Targeted (N=22) | Difference |
|------------|----------------|-----------------|------------|
| Inpatient | \$552 | \$448 | (\$104) |
| Outpatient | \$2,376 | \$1,167 | (\$1,209) |
| ER | \$34 | \$45 | \$11 |
| Rx drugs | \$346 | \$940 | \$594 |
| Hospice | \$146 | \$9 | (\$137) |
| Sequencing | \$0 | \$112 | \$112 |
| Total/week | \$3,453 | \$2,720 | (\$734) |



Precision Oncology Costs



Costs per patient among Select Health members in the last 3 months of life, by site of care

| Image: Addition of the standard TxTotalImpatientOutpatientOfficeRx PharmacyER/UCAll otherSelectHealth - Standard Tx\$46,940\$29,523\$7,425\$3,663\$1,415\$1,385\$1,177SelectHealth - Targeted Tx\$43,711\$15,535\$11,216\$6,265\$5,500\$1,469\$1,242-6.9%-47.4%51.1%71.1%288.7%6.1%5.5% | | | | | | | | |
|---|----------------------------|----------|-----------|------------|---------|-------------|---------|-----------|
| SelectHealth - Targeted Tx \$43,711 \$15,535 \$11,216 \$6,265 \$5,500 \$1,469 \$1,242 | | Total | Inpatient | Outpatient | Office | Rx Pharmacy | ER/UC | All other |
| | SelectHealth - Standard Tx | \$46,940 | \$29,523 | \$7,425 | \$3,663 | \$1,415 | \$1,385 | \$1,177 |
| -6.9% -47.4% 51.1% 71.1% 288.7% 6.1% 5.5% | SelectHealth - Targeted Tx | \$43,711 | \$15,535 | \$11,216 | \$6,265 | \$5,500 | \$1,469 | \$1,242 |
| | | -6.9% | -47.4% | 51.1% | 71.1% | 288.7% | 6.1% | 5.5% |

Genomic Testing now covered by local health plan



MEDICAL POLICY

GENETIC TESTING: MOLECULAR PROFILING FOR DETERMINING THERAPYOF MALIGNANT TUMORS

Commercial Plan Policy

Intermountain[。] Healthcare SelectHealth covers multi-marker tumor panels using next generation sequencing in the diagnosis and treatment of cancer as a method to guide the selection of therapeutic agents for malignant tumors in *limited circumstances*.

Patients must meet ALL of the following to be eligible for next-generation sequencing:

- 1. The member has one of the following clinic circumstances.
 - a. Any advanced stage IV solid tumors;
 - b. All lymphomas;
 - c. Multiple myeloma.
- 2. Patient has demonstrated progression of disease despite at least 1 lines of FDA approved and NCCN approved standard cancer therapy,
- Member has performance level as evidence by documentation of ECOG performance status 0-2 or <u>Karnofsky</u> score <u>>70</u>*
- Advance care planning (ACP) has been completed, and documented, with a trained facilitator (i.e. nurse navigator, licensed clinical social worker) or a palliative care provider, or the treating provider.

Precision Medicine Menu

ICG100TM Cancer Panel

RxMatchTM Pharmacogenomics in Mental Health

HerediGeneTM Hereditary Cancer Panel

All orderable and reportable within the EMR (Cerner)

Intermountain Healthcare

ICG100[™] Precision Cancer Test: *Product + Impact*

Overall Survival:

- Precision Med: 51.7 weeks
- o Control: 25.8 weeks
- **HR:** 0.53, p < 0.002

Cost of Care:

- Precision Med: \$3,453/week
- o **Control:** \$2,720/week
- o p = 0.22

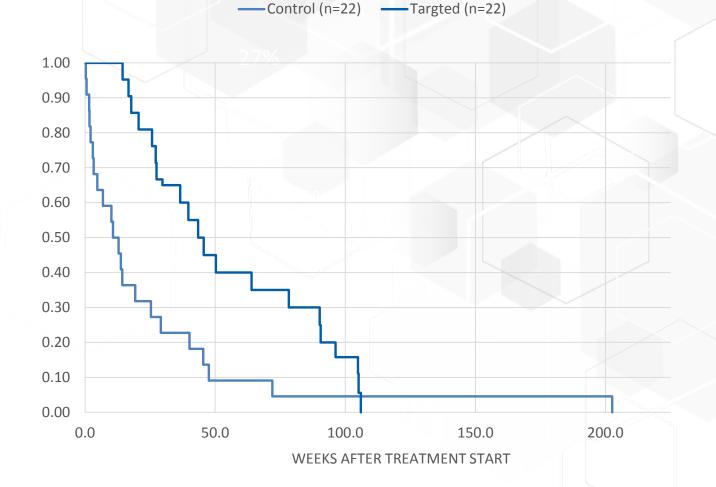


Figure 1. Overall survival, *p* = 0.002



RxMatch™: Mental Health Product + Impact

Behavioral Health Clinical Program recommendation

Consider ordering RX Match for depression and anxiety in:

- 1. New diagnosis of depression and/or anxiety to be treated with an antidepressant
- 2. Existing diagnosis of depression and/or anxiety not responding





HerediGene™: Hereditary Cancer Test Product + Impact

10% of all cancers are due to a gene mutation that can be passed through a family.



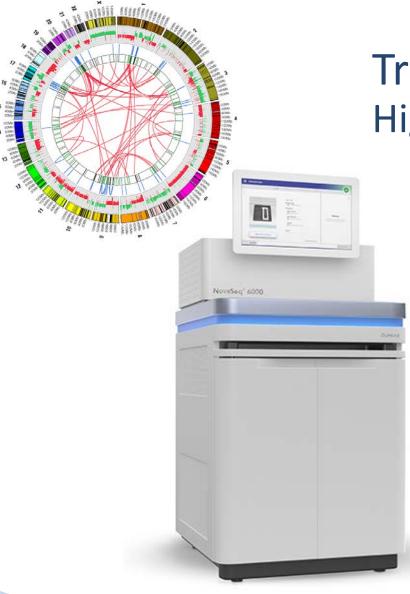


System Wide Genetic Counseling: Product + Impact

Reduced time to genetic counseling appointment

12 days - 6 days





Translational Science Center Hight Throughput Genomics Facility

Illumina NovaSeq 6000

- 15,000 whole genomes at 30X per year
 WGS, WES and Transcriptome
 Chromium 10X Genomics Instrument
- Haplotyping and single cell sequencing
 Fluidigm Helios/Hyperion Mass Cytometer
 Lab Automation Hamilton Stars
 Full LIMS integration (LabVantage)
 CLIA/CAP certification 2H 2018



NGSOne: Whole Genome Product + Impact

- Whole Genome, Whole Exome Sequencing, Whole Transcriptome
- New external collaborations
- NICU sequencing
- Precision Nephrology
- Biorepository (4.3M archival samples)

NGS UNE **Genomic Services**



Precision Genomics across all Clinical Programs and Services



Acknowledgements Intermountain Precision Genomics:

- - **Derrick Haslem** •
 - Gary Stone
 - Pravin Mishra •
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 - **Genomics** Core Lab
 - Cancer Clinical Program •
 - Sharanya Raghunath
 - Jason Gillman •
 - **Robin Romero** •
 - **Brent James**

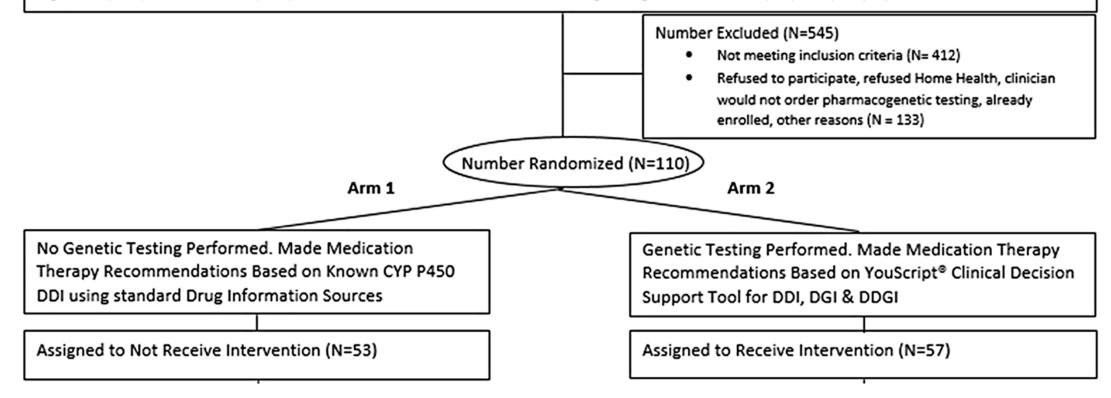
Intermounta Healthcare

- **Stanford University**
- Jim Ford
- Hanlee Ji
- NCI
- AACR • ASCO

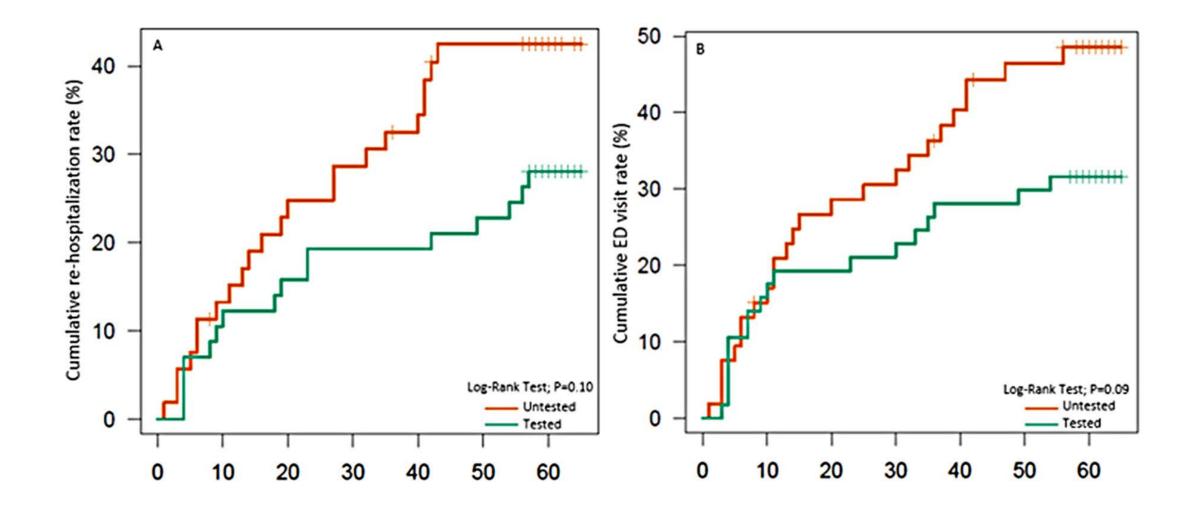
Pharmacogenetics and Hospital Readmissions

Number of Home Health Patients Assessed for Eligibility (N= 655)

Obtained informed consent; screened potential subjects by inclusion & exclusion criteria; obtained history, document. <u>(Inclusion criteria</u>: Aged 50 & older, admitted to Home Health after hospitalization, taking or starting one of 55 medications associated with genetic risk in YouScript[®]; <u>Exclusion criteria</u>: Previous CYP testing, history of organ transplant, current malabsorption, treatment of invasive solid tumors or hematologic malignancies in the last year, ESRD, dialysis)

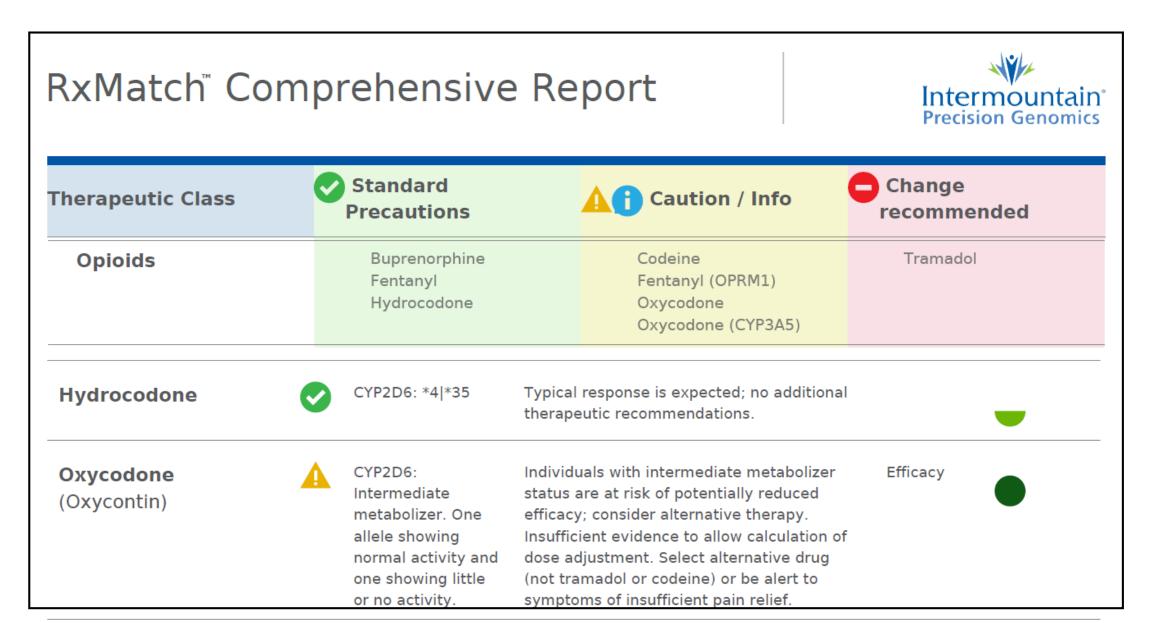


Decreased re-hospitalization and ED visit rates



Elliott, L., PLOS One. 2017

Pharmacogenetics: Opioids as an example



RxMatch[™]

- Identifies how a patient metabolizes medication.
- •The RxMatch report guides medication selection and dosing for prescribing providers.

| Drug | | Finding | Recommendation | Concern | Evidence |
|-----------------------------------|----------|---|---|-------------------|----------|
| Selective Serotoni | n Reupta | ke Inhibitors (SS | iRIs) | | |
| Citalopram (Celexa) | | CYP2C19: Rapid metabolizer status. One allele showing normal activity and one showing increased activity. | The therapeutic outcome of this combination of alleles is uncertain. However, individuals with rapid metabolizer status may show increased enzyme activity compared to normal metabolizers but less than ultrarapid metabolizers. Consider monitoring plasma concentration and titrate dose to a maximum of 150% in response to efficacy and adverse drug reaction or select alternative drug (e.g. fluoxetine, paroxetine). | ADR & Efficacy | • |
| Esc italopram (Lexapro) | | CYP2C19: Rapid metabolizer status. One allele showing normal activity and one showing increased activity. | The therapeutic outcome of this combination of alleles is uncertain. However, individuals with rapid metabolizer status may show increased enzyme activity compared to normal metabolizers but less than ultrarapid metabolizers. Consider monitoring plasma concentration and titrate dose to a maximum of 150% in response to efficacy and adverse drug reaction or select alternative drug (e.g. fluoxetine, paroxetine). | ADR & Efficacy | • |
| Fluvoxamine (Luvox) | A | CYP2D6: *4 *35 | Individuals with intermediate metabolizer status may be at an increased risk of adverse drug reactions due to reduced metabolic clearance. Insufficient evidence to allow calculation of dose adjustment. Be alert to adverse reactions. | ADR | • |
| Paroxetine (Paxil) | 0 | CYP2D6: Intermediate metabolizer. One allele showing normal activity and one showing little or no activity. | Individuals with intermediate metabolizer status may have increased plasma concentrations/ decreased clearance of paroxetine. However, an association with treatment response or severity of side effects is not conclusive. | ADR | • |
| Sertraline (Zoloft) | 0 | CYP2C19: Rapid metabolizer status. One allele showing normal activity and one showing increased activity. | The therapeutic outcome of this combination of alleles is uncertain. However, individuals with rapid metabolizer status may show increased enzyme activity compared to normal metabolizers but less than ultrarapid metabolizers. No additional therapeutic recommendations. | | • |

Donor 14 - - Reported Apr 27, 2018

The information contained in this report is intended to be interpreted by a licensed physician or other licensed healthcare professional. This report is not intended to take the place of professional medical advice. Decisions regarding use of prescribed medications must be made only after consulting with a licensed physician or other licensed healthcare professional, and should consider each patient's medical history and current treatment regimen



Page 25 of 30



PyMatch⁻ Comprohensive Pepert