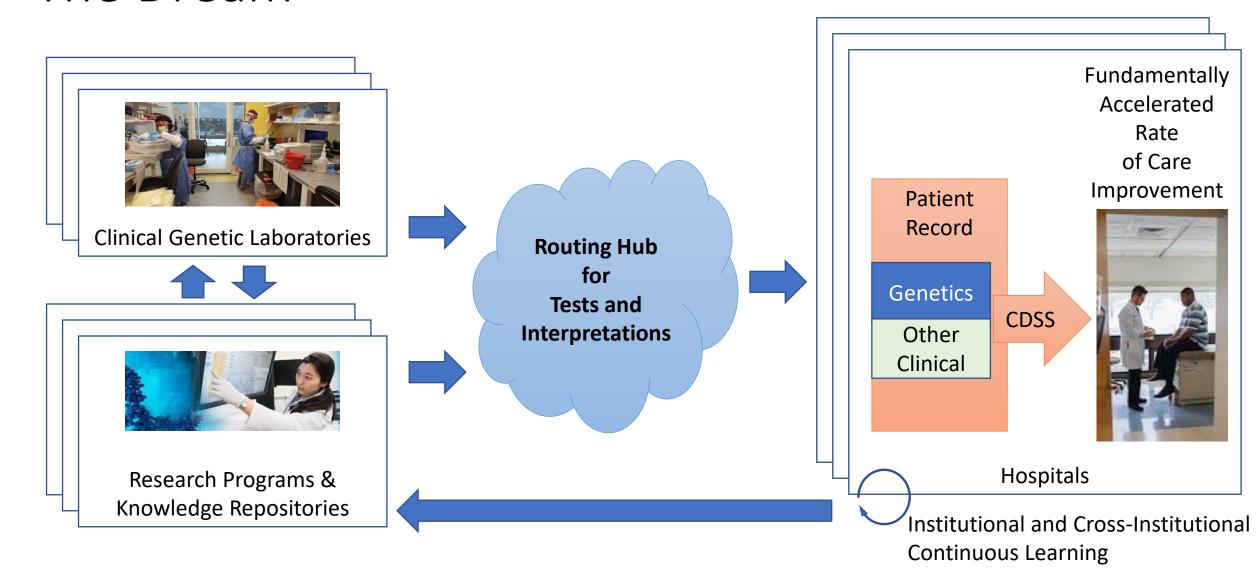
Realizing the Dream of a Genomic Information Exchange

Barriers that Must be Overcome

Disclosures

• Mass General Brigham, my employer, receives royalties from sales of GeneInsight software

The Dream

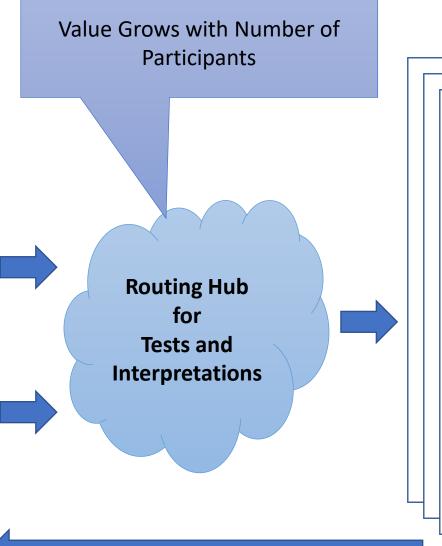


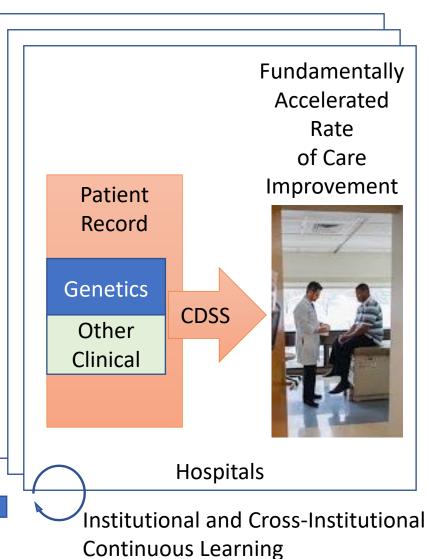
The Dream



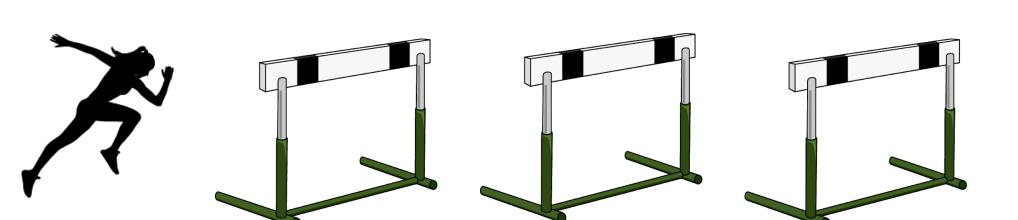


Research Programs & Knowledge Repositories





Stakeholder Adoption Hurdles

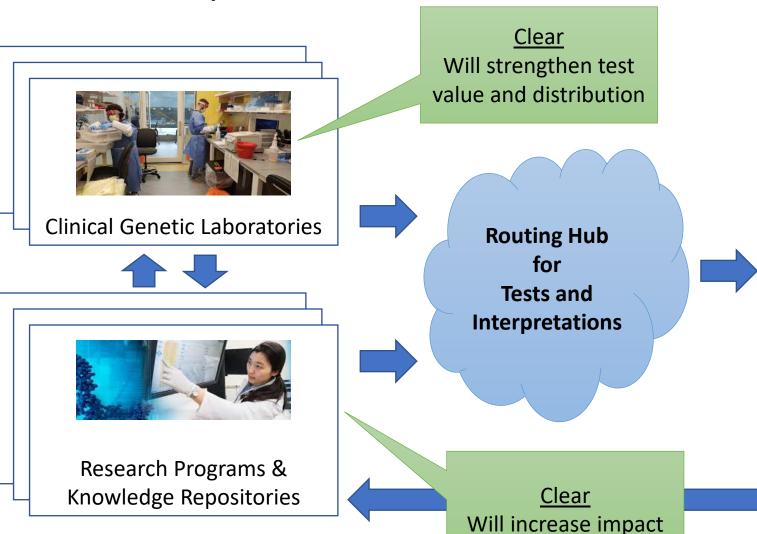


Considered for
Prioritization
Relative to
Potentially Hundreds
of Other Needs

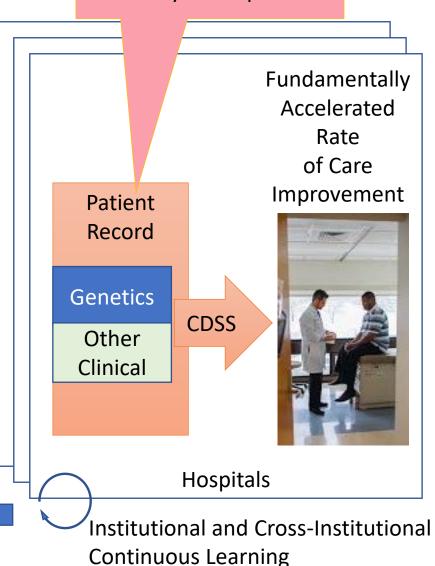
Technical Feasibility Clinical Benefit

Financial Viability

Value Propositions

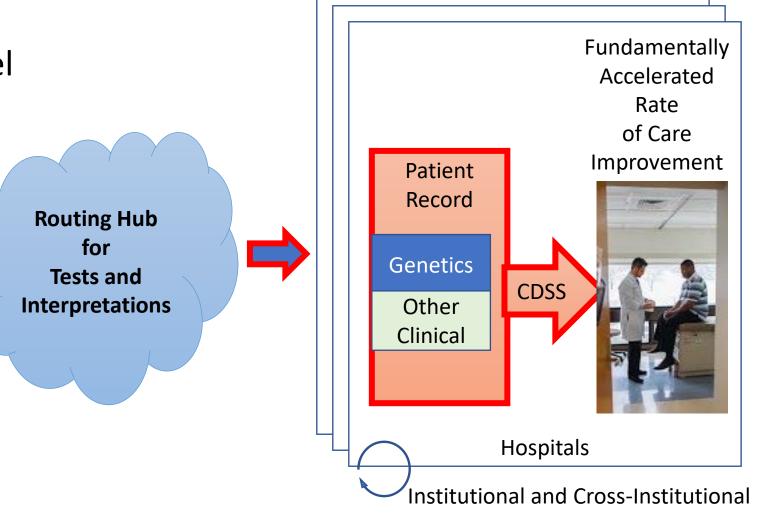


Applications that Move Value Levers Needed to Catalyze Adoption



Institutional Costs

- Assigning <u>clinical</u> IT personnel
- Working with vendors / paying for integration
- Updating clinical workflows & associated training
- Validating new processes
- Maintaining integration over time
- Monitoring and maintaining quality over time



Continuous Learning

Example Hospital Value Levers

All Hospitals

- Patient acquisition
- Service line expansion
- Clinician panel size
- Fee for service revenue
- Value based care metrics
- Quality improvement
- Liability risk reduction
- Burnout reduction

Research Institution

- Grant revenue
- Thought leadership

How Research Can Help

- Engage hospital decision makers to determine what applications/value propositions could trigger grant-independent institutional investment in genetic information technology infrastructure
 - CEOs, CFOs, COOs, CMOs, CIOs
 - Include leaders of large, medium and small institutions
- Fund projects must likely to produce applications that spark this institutional investment
- Study the economic dynamics of genetic IT infrastructure projects
 - Catalog both value creation and cost reduction opportunities
 - Focus standards funding on reducing cost and/or increasing value of implementing highest value applications