



Economic Considerations for Implementing Pharmacogenomics

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What are Economic Considerations?

- Cost of testing
- Cost of returning results
 - o Clinical decision support
 - o Education
 - o Managing data
- Reimbursement
- Savings from improved therapeutic outcomes
- Cost Effectiveness (CE)

CE – Specific PGx Scenarios

Scenario	ICER (\$/QALY)
HLA-B 1502 Antiepileptics in Asian populations	\$7,930 - \$136,630
HLA-B 5701 Abacavir	\$36,700
CYP2C19 Antiplatelet agents post-PCI	\$30,200
UGT1A1 Atazanavir	~\$2,000,000

ICER = Incremental Cost-Effectiveness Ratio QALY = Quality Adjusted Life Year

> Kazi, Ann. Int. Med. 2014 Berm, PLoS One. 2016

CE - Panel Testing

- Economy of scale
- Broadens the opportunities to perform testing
 - Pre-emptive testing
 - "First Indication" testing
- Behavior: No need for physicians to remember to order
- In most cases, panels cost more
- The information may never be used
- Benefits are accrued in the future

Pharmacogenomics: PREDICT Model



Genetic Risk

Clinical Application



Cumulative Medication Rates

Probability of being exposed to at least X medications



Number of unique medication exposures over time

Years since medical home established

Schildcrout JS, 2012, CPT.

Can Target Patients for Preemptive Genotyping





Schildcrout JS, IHEA 2016





Compare Genotyping Strategies

- Base case: No Genotyping
- Serial Single Gene
- Universal Preemptive
- Targeted Preemptive
- First Indication

Determine effect of clinician behavior on value of the panel

RIGHT Study: Simulation of Multiplexed Genotyping



Stages of Simulation



Select population for genotyping that optimizes use of variants on panel Simulate rate of development of drug indications over time Compare outcomes among a genotyped and non-genotyped population

Features of Simulation

- Models the benefits and risks of PGx tailored therapy
 - E.g the risk of bleeding when prescribing a potent alternative antiplatelet agent
- Manages Competing Risks
 - Secular death assumed based on standard life tables
- Individualizes Cardiac Risk to predict timing of cardiac indications
 - Based on Framingham cohort
- Includes behavioral factors
 - Genetic ordering behavior
 - Use of genetic data to tailor prescription

Drug-Specific Simulations: Simvastatin -SLC01B1



Results – Single Drug Models

PGx Scenario	ICER Compared to No Genotyping
Clopidogrel – CYP2C19	\$36,618
Simvastatin – SLC01B1	\$1,405,163
Warfarin – CYP2C9/VKORC1	\$371,649

Comparing Four Genotyping Strategies

Three Drug Model

\$100 Single Drug Test and \$250 Panel Test

STRATEGY	ICER to Base [*]
None	NA
Reactive Single	118,366
Reactive Panel	$195,\!256$
Targeted Preemptive Panel	$255,\!173$
Universal Preemptive Panel	$318,\!972$

Comparing Four Genotyping Strategies



IGNITE Antiplatelet CYP2C19 Simulation

		Genotyping	Average Drug	Avg. Event
Strategy	Average Cost	Cost	Cost	Cost
Clopidogrel Only	\$6,164	NA	\$786	\$5,378
CYP2C19 Guided				
- Prasugrel	\$6,137	\$100	\$1,232	\$4,804
CYP2C19 Guided				
-Ticagrelor	\$6,046	\$100	\$1,086	\$4,860

Sensitivity Analyses: Behavior

3 – Drug Model: Reactive Panel Strategy

Clinician Behavior	ICER Compared to No Genotyping
Reactive: Orders and uses 100%	\$195,256
Reactive: Orders 50% and Uses 100%	\$235,408
Universal Preemptive: Order 100% but use 25%	\$1,466,076



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right RATIONAL INTEGRATION OF GENOMIC HEALTHCARE TESTING

RIGHT is a research group based at Vanderbilt University Medical Center estimating the clinical benefits of multiplexed genetic testing across health systems.







Publically Hosted Simulation Tools https://rightsim.org/RIGHT/

Clopidogrel Simulation

A discrete event simulation model for evaluation of clinical benefit and costs-effectiveness of utilizing pharmacogenomic testing in Simvastatin treatement

Run Save
Parameters
Simulation Population Costs
Sample Size
1000
Time Horizon (Year)
1 9 17 25 33 41 49 57 65 73 80
Genotyping Strategy (by default no testing)

Simulation Results

Event Counts

Show 25 • entries		Search:	
Event	None	Genotyping	÷
Ν	1000	1000	
Secular Death	127	127	
Single Test	0	1000	
DAPT Start	1000	1000	
Drug Exposure	2000	2000	
Clopidogrel	1000	779	
Ticagrelor	0	221	

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RATIONAL INTEGRATION OF GENOMIC HEALTHCARE TESTING