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The Precision Oncology Annual Trend Report

Perspectives From Oncologists, Pathologists, and Payers

Sixth Edition Is Available!

As part of Novartis' ongoing commitment, ***The Precision Oncology Annual Trend Report: Perspectives From Oncologists, Pathologists, and Payers*, Sixth Edition,** offers insights into the trending topics and discoveries taking place in the evolving field of precision oncology.

This year's report includes new biomarker tests, such as:

- NTRK fusion
- RET for NSCLC
- FGFR for bladder cancer

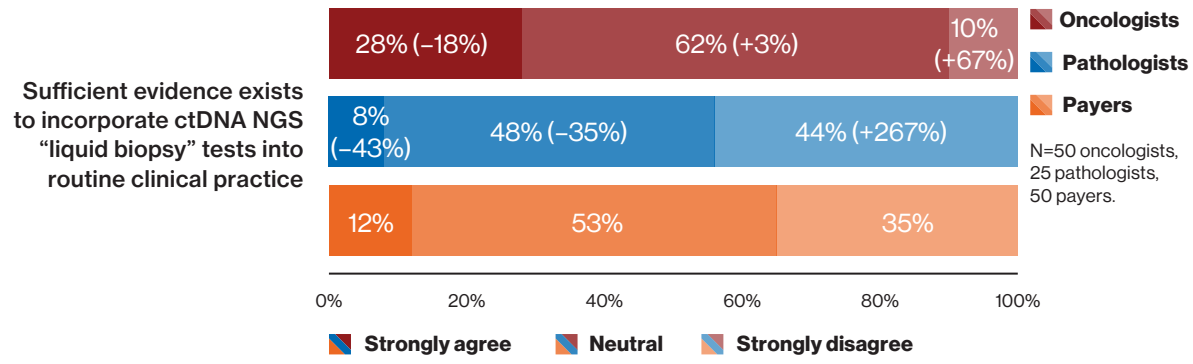
It also covers findings regarding influencers of utilization as well as the guidelines, coverage policies, payment models, emerging trends, and new technologies being integrated into the oncology health care landscape.

Did you know?

- In 2019, **64% of oncologists** used **PIK3CA biomarker testing** in breast cancer and **43%** of payers surveyed covered it[1]
- **88%** of oncologists used ***BRAF* V600 E/K biomarker testing** in melanoma, and **78%** of payers surveyed covered it [1]
- Following CMS' decision to automatically cover FDA-approved NGS companion diagnostic tests, nearly **one-third (29%)** of payers adopted a similar policy in 2019[1]
- In a study analyzing TAILORx data, it was reported that Oncotype DX®– guided treatment could **reduce the cost for the first year** of breast cancer care in the United States by approximately **$50 million**[2]
- In 2019, the top factor **influencing payers' coverage decisions** for oncology biomarker tests was if the test was mandated in a therapeutic's **FDA labeling (+27% from 2018)**[1]

Highlights of trends and survey findings[1]

28% of oncologists strongly agree evidence supports incorporating ctDNA NGS "liquid biopsy" tests into clinical practice; however, pathologists and payers disagree



Values in parentheses indicate percent change from 2018.

Q34. With regard to next-generation sequencing (NGS) technology and genomic sequencing panels (GSPs), please indicate whether you agree or disagree with the following statements on a scale from 1-7.

CMS, Centers for Medicare and Medicaid Services; ctDNA, circulating tumor DNA; FDA, US Food and Drug Administration; NGS, next-generation sequencing; NSCLC, non-small cell lung cancer.

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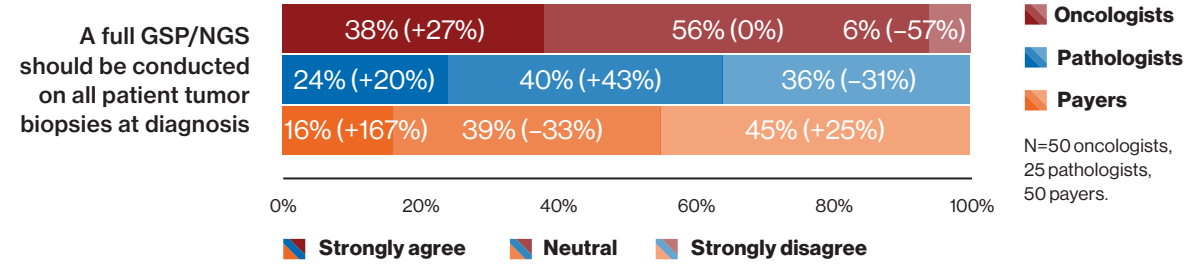
Highlights of trends and survey findings (continued)[1]

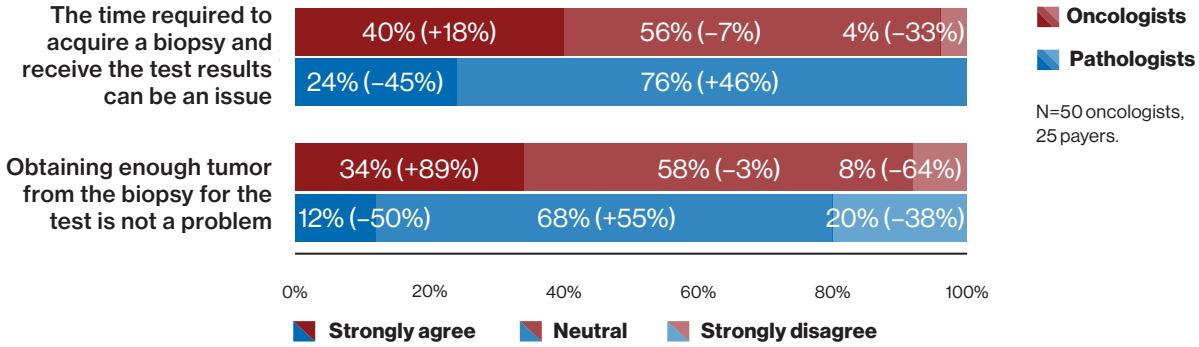
38% of oncologists believe GSP/NGS should be used at diagnosis; 36% of pathologists and 45% of payers strongly disagree



Values in parentheses indicate percent change from 2018.

Q35. Please indicate whether you agree or disagree with the following statements on a scale from 1-7.

The time required and obtaining sufficient tumor biopsy may be issues for NGS/GSP testing



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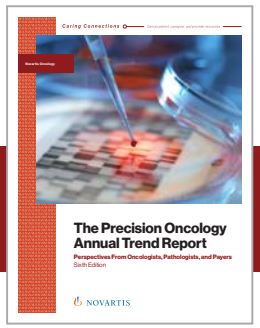
The Precision Oncology Annual Trend Report continues to bring to light developing trends and how they impact the important decisions being made to adopt and utilize precision oncology.



For a copy of *The Precision Oncology Annual Trend Report*, **contact your Novartis representative.**

GSP, genomic sequencing panel.

References: 1. Novartis Oncology. *The Precision Oncology Annual Trend Report: Perspectives From Oncologists, Pathologists, and Payers.* 6th ed; 2020. **2.** Mariotto A, Jayasekerea J, Petkov V, et al. Expected monetary impact of Oncotype DX score-concordant systemic breast cancer therapy based on the TAILORx trial [published online ahead of print April 24, 2019]. *J Natl Cancer Inst.* doi:10.1093/jnci/djz068.

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