BACKGROUND

- Had at least 1 visit within 90 days after advanced or metastatic diagnosis
- Age ≥ 18 years
- Biomarker testing information was abstracted from patient records

To better understand personalized healthcare delivery in the OneOncology network, treatment for personalized healthcare1-4 patients in order to identify actionable mutations to inform appropriate targeted established in 2018, has a network-wide precision oncology initiative, with some technology-enabled abstraction of unstructured data in patient medical charts with:

- mCRC: stage IV at diagnosis or diagnosis of recurrent mCRC
- mBC: stage IV at diagnosis and patients who presented with earlier-stage mBC: ER, PR and HER2 had the highest testing rates (Figure 4b).
- aMel: BRAF, KIT, NRAS, PD-L1
- cMel: PIK3CA, breast cancer (BRCA), PD-L1, KRAS
- NGS, regardless of the number of genes in the panel, was derived from Flatiron biomarker testing variable confirmed via abstraction from patient records. See Table 1 for other biomarker testing rates.

RESULTS

- Across indications, the majority of patients at the selected OneOncology sites were White, had commercial insurance and had Eastern Cooperative Oncology Group performance status of 0 or 1 (Table 1).
- Majority (≥84%) of patients had at least 1 biomarker test at any time (Figure 2).

Table 1: Patient Characteristics and Demographics

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>Median Age (range)</th>
<th>Median ECOG PS (range)</th>
<th>Sex (%)</th>
<th>Race (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>aNSCLC</td>
<td>69 (22-79)</td>
<td>0 (0-2)</td>
<td>54 (75)</td>
<td>93 (100)</td>
</tr>
<tr>
<td>mBC</td>
<td>65 (24-89)</td>
<td>0 (0-2)</td>
<td>54 (75)</td>
<td>93 (100)</td>
</tr>
<tr>
<td>mCRC</td>
<td>63 (21-89)</td>
<td>0 (0-2)</td>
<td>54 (75)</td>
<td>93 (100)</td>
</tr>
<tr>
<td>aMel</td>
<td>68 (21-87)</td>
<td>0 (0-2)</td>
<td>54 (75)</td>
<td>93 (100)</td>
</tr>
</tbody>
</table>

The median turnaround time for the first test result conducted within 90 days after advanced or metastatic diagnosis was longer for NGS testing than for other biomarker testing. The median turnaround time for NGS test results was 5 (2-7) days, while the median turnaround time for other biomarker test results was 12 (7-21) days (Table 5).

CONCLUSIONS

- The varying testing rates across indications reflect the intended use of biomarker tests to guide first-line therapies.
- The majority of patients were tested within 90 days after advanced or metastatic diagnosis, and 18% to 33% of patients were not tested within 90 days of an advanced or metastatic diagnosis.
- The majority of patients who received biomarker testing was done in commercial laboratories.

REFERENCES


LIMITATIONS

- The results of this study are based on the Rigel Health data, representing a selected subset of the OneOncology network and may not be generalizable to other populations in the United States.
- The sites are subject to algorithms inherent to retrospective studies, including:
  - While all biomarker testing in this study was documented patients may have received biomarker testing not identified in the Rigel Health database.

DISCLOSURES

- The varying testing rates across indications reflect the intended use of biomarker tests to guide first-line therapies.
- The majority of patients were tested within 90 days after advanced or metastatic diagnosis, and 18% to 33% of patients were not tested.
- More than 75% of patients were treated after testing results were available, indicating that community oncologists recognize the importance of biomarker testing in guiding treatment decisions.
- Biomarker testing within 90 days appears to reflect guideline concordant first-line targeted options across diseases.
- Improvement in turnaround time for NGS may drive more utilization compared to other methods of biomarker analysis.
- Percentage of testing varies by insurance type reflecting a potential access issue to biomarker analysis.