

## PMC 2022 POLICY AGENDA

	<i>Priority / currently engaged</i>	<i>Monitor / engage if need be</i>	<i>Monitor only</i>
<b>Modernizing regulatory policies</b>	<ul style="list-style-type: none"> <li>• Oversight of diagnostic tests (e.g. VALID Act, modifications)*</li> <li>• Engaging user fee amendments reauthorization (e.g. PDUFA, MDUFA) to advance novel clinical trial designs (e.g. decentralized, adaptive trials), patient-focused drug development, patient preferences in medical device evaluation, digital health technologies, real-world evidence, expedited approval pathways, and FDA staffing needs*</li> <li>• Cell- and gene-based therapies</li> <li>• Pharmacogenomic testing (incl. STRIPE Collaborative Community in pharmacogenomics)</li> <li>• Tracking FDA approvals and market authorizations</li> </ul>	<ul style="list-style-type: none"> <li>• Co-development of diagnostics and drugs*</li> <li>• Biomarker qualification</li> <li>• Genetic non-discrimination (e.g. GINA)</li> <li>• Artificial intelligence/machine learning-based diagnostics</li> <li>• Digital biomarkers</li> <li>• Direct-to-consumer genetic tests</li> <li>• Patent protection and intellectual property law</li> <li>• Global regulatory policies (harmonize with FDA)</li> <li>• Orphan Drug Designation</li> </ul>	
<b>Modernizing coverage and payment policies</b>	<ul style="list-style-type: none"> <li>• Genetic and genomic testing services (e.g. Sec. 407 of Cures 2.0)*</li> <li>• Payment models incentivizing innovation (e.g. value-based and outcomes-based payment, alternative payment models, CMMI demos impacting Part D and Part B; guardrails for CMMI; financing high-price, high-impact therapies; Oncology Care First payment model)*</li> <li>• Novel approaches to facilitating coverage and reimbursement (e.g. successor to MCIT pathway, parallel review)</li> <li>• Ensuring drug pricing proposals do not endanger access to PM (e.g. reference pricing/ “Most Favored Nation,” Part B to Part D Switch)</li> </ul>	<ul style="list-style-type: none"> <li>• Diagnostic testing (e.g. clinical lab fee schedule, laboratory date of service policy, PAMA implementation)*</li> <li>• Next generation sequencing diagnostic tests (e.g. NCD for NGS in Advanced Cancer)*</li> <li>• Preventive screening and early disease detection</li> <li>• Benefit design reforms (e.g. prior authorization for diagnostics, step therapy)</li> <li>• Cell- and gene-based therapies (e.g. CAR-T)</li> <li>• Telehealth and remote/home-based care</li> </ul>	

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	<i>Priority / currently engaged</i>	<i>Monitor / engage if need be</i>	<i>Monitor only</i>
<b>Advancing innovation in care delivery and value of personalized medicine</b>	<ul style="list-style-type: none"> <li>• Use of real-world evidence*</li> <li>• Clinical guidelines</li> <li>• Value assessment frameworks and methodologies</li> <li>• Advancing a patient-centered outcomes research agenda for PM</li> <li>• NAS study on use of genetic/genomic testing to improve outcomes</li> </ul>	<ul style="list-style-type: none"> <li>• Clinical trial enrollment rates; diagnostic testing treatment arms in trials</li> <li>• Utilization management (e.g. clinical-decision-making tools)</li> <li>• Quality measures</li> <li>• Tissue-agnostic diagnosis and treatment</li> <li>• De-identified data</li> <li>• Interoperability and data management</li> <li>• Access to genetic counselors (e.g. Access to Genetic Counselor Services bill)</li> </ul>	<ul style="list-style-type: none"> <li>• Expanded role for pharmacists</li> </ul>
<b>Cultivating support for personalized medicine</b>	<ul style="list-style-type: none"> <li>• Congressional Personalized Medicine Caucus*</li> <li>• Cures 2.0*</li> <li>• Diversity and inclusion in research, clinical trials</li> <li>• FDA appropriations</li> <li>• NIH appropriations</li> </ul>	<ul style="list-style-type: none"> <li>• New initiatives in Biden administration (e.g. ARPA-H)</li> </ul>	<ul style="list-style-type: none"> <li>• Impacts of COVID-19 (reduction in preventive screening and biomarker testing, pre-submissions to FDA)</li> </ul>

\* an asterisk indicates PMC members rated this issue as a high priority

### Additional Resources

- For more information on PMC’s previous work on these topics, please visit the “Policy” section of our website [here](#). The issue categories in the left sidebar will direct you to respective archives of comments.
- This policy agenda relates mainly to PMC’s advocacy activities. More information about PMC’s initiatives in education and evidence development, are outlined in our [2022 Strategic Plan](#).
- PMC has multiple forums convening its members to discuss policy issues and advocate for personalized medicine. This includes the Public and Science Policy Committees; working groups convening patients, industry, and health care professionals; as well as working groups for special projects. For more information about these forums, please visit our website [here](#) and contact David Davenport at [ddavenport@personalizedmedicinecoalition.org](mailto:ddavenport@personalizedmedicinecoalition.org) to join. We also encourage you to let us know if you have subject matter expertise on a specific policy issue above.