NHMA PRESENTS

ZOOM WEBINAR - SESSION 3

Biomarker Testing: Improving

Access to Improve Care

Moderator



Elena Rios, MD, MSPH, MACP President and CEO National Hispanic Medical Association



Speaker

Estelamari Rodriguez, MD, MPH

Associate Director of Community Outreach and Co-Lead of the Thoracic Site Disease Group Sylvester Comprehensive Cancer Center at the University of Miami Miller School of Medicine

Dr. Rodriguez is board certified in medical oncology and hematology. She has a special interest in the early detection of lung cancer and developing programs to eradicate healthcare disparities.





Welcome

Elena Rios, MD, MSPH, MACP

President & CEO
National Hispanic Medical Association

Housekeeping

- All participant microphones will be muted, but please feel free to use the raised hand feature to be unmuted to ask a question or type your question into the Q & A box for the panelists to address during our Q & A session at the end.
- The recording will be housed on NHMAmd.org and our YouTube channel.
- The recording and slides will be sent out one week after the event.







Agenda & Learning Objectives

<u>Agenda</u>

- Overview of Biomarker Testing presentation Dr. Estelamari Rodriguez, MD, MPH
- Legislative Discussion Hilary Gee Goeckner, MSW Senior State and Local Campaign Manager ACS CAN – Access to Care
- Roundtable Discussion with patient Julia Maues
- Q & A from Audience

Learning Objectives

- To educate health advocates about biomarker testing among Hispanics with cancer.
- To discuss policies that are potential Texas State solutions to barriers of biomarker testing



The Importance of Biomarker Testing for the Hispanic/LatinX Community

Estelamari Rodriguez, MD, MPH
Thoracic Oncologist
Co-Lead Thoracic Site Disease Group
Associate Director Community Outreach





Cancer Mortality Among Hispanics

Leading Causes of Mortality for Hispanics: 1) Cancer

Leading Causes Mortality for NHWs:

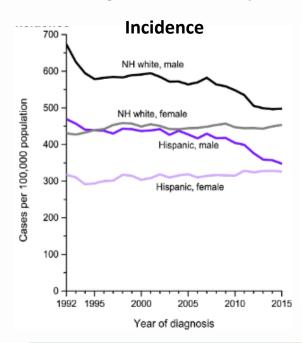
1) Heart Disease

2) Heart Disease

2) Cancer

3) Accidents

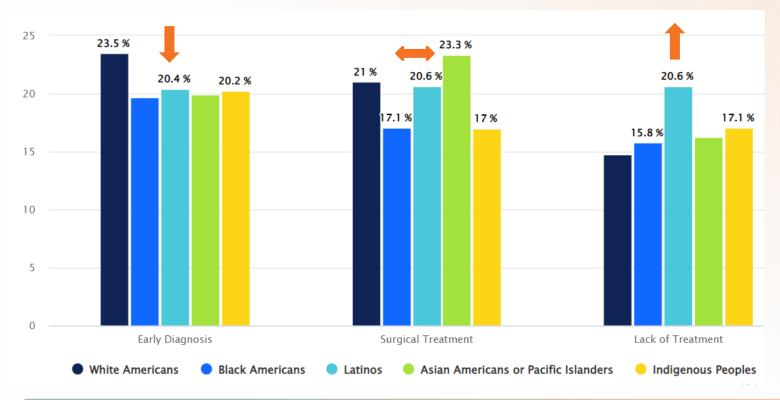
3) COPD



Estimated Deaths									
Males			Females	Females					
Lung & bronchus	3,500	16%	Breast	3,200	16%				
Liver & intrahepatic bile duct	2,700	12%	Lung & bronchus	2,600	13%				
Colon & rectum	2,400	11%	Colon & rectum	1,800	9%				
Prostate	2,000	9%	Pancreas	1,600	8%				
Pancreas	1,700	8%	Liver & intrahepatic bile duct	1,300	6%				
Stomach	1,100	5%	Ovary	1,100	5%				
Leukemia	1,000	5%	Uterine corpus	1,000	5%				
Non-Hodgkin lymphoma	1,000	4%	Leukemia	900	4%				
Kidney & renal pelvis	900	4%	Stomach	800	4%				
Brain & other nervous system	700	3%	Non-Hodgkin lymphoma	700	3%				
All sites	22,300	100%	All sites	20,400	100%				



Lung Cancer: Racial and Ethnic Disparities



Latinos with lung cancer:

16% less likely to be diagnosed early

Equally likely to receive surgical treatment

26% more likely to not receive any treatment,

16% less likely to survive five years compared to white Americans.



What is Biomarker Testing? Why Is it Important?



Biomarker Testing





Biomarker Testing is any molecule that can be measured in your blood, tumor tissue, or other bodily fluids to help inform treatment decisions.



Comprehensive biomarker testing can help your healthcare team identify your appropriate treatment options. Guidelines recommend Broad Molecular Testing at the time of diagnosis of advanced/ recurrent lung cancer.



Genomics and Biomarker Testing have revolutionized the discovery and investigation of novel drug targets/ targeted therapies



35% of Patients With Advanced Nonsq NSCLC Have a Driver Mutation Targetable by an FDA-**Approved Agent** MFTex14:

ALK: Crizotinib **Alectinib** Ceritinib Lorlatinib Brigatinib

EGFR

Sensitizing:

Osimertinib

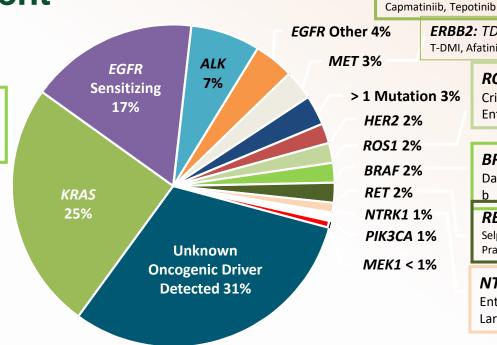
Dacomitinib

Gefitinib

Erlotinib

Afatinib





ROS1:

ERBB2: TDXd

T-DMI, Afatinib

Crizotinib Entrectinib

BRAF V600E:

Dabrafenib/Vemurafeni

RET fusion:

Selpercatinib Pralsetinib

NTRK fusion:

Entrectinib Larotrectinib

*Approved in combination with trametinib (MEK inhibitor) for BRAF V600E mutation.



Slide credit: clinicaloptions.com

The Power of Targeted Therapy



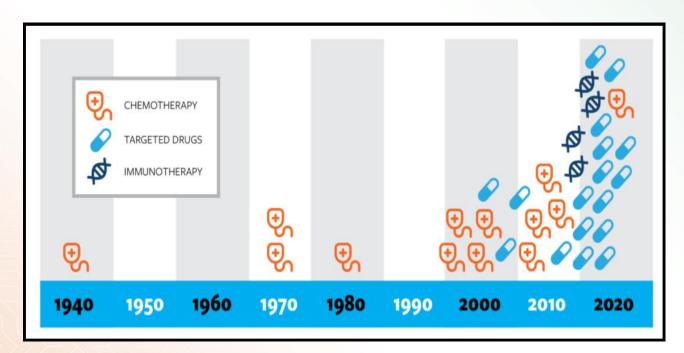


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Biomarker Testing Drives Discovery Drug Approvals In Lung Cancer



May 2020:

- Ramucirumab + Erlotinib
- Nivolumab + Ipi
- Brigatinib (1st line)
- Atezolizumab-(PDL1High)
- Capmatinb
- Selpercatinib

June 2020:

Lurbinectedin

Sept 2020:

Praseltinib

Feb 2021:

- Tepotinib
- Cemiplimab

May 2021:

- Sotorasib (KrasG12c)
- Amivantamab (EGFR Ex20)

Sept 2021:

Mobocertinib (EGFREx20)



Barriers to Access for Biomarker Testing



Guideline-Recommended Biomarker Testing May Improve Patients Outcomes

Adherence to testing for guideline-recommended biomarkers, regardless of therapy

Decreased mortality risk by

Many Patients With Newly Diagnosed NSCLC Do Not Receive Broad Molecular Testing¹¹



of metastatic patients received comprehensive biomarker testing^{11,‡}

Regardless of patient characteristics such as age, race, and smoking status, biomarker testing should be conducted in all eligible patients with advanced NSCLC¹²

A retrospective, observational study assessing real-world biomarker testing patterns in 3,474 patients with metastatic NSCLC from community oncology practices within The US Oncology Network between 2018 and 2020.



^{*}This was a retrospective study of 28,784 patients diagnosed with advanced NSCLC. Adherence to biomarker testing consisted of patients with evidence of testing for any biomarker, including EGFR, ALK, BRAF, KRAS, ROS1, or PD-L1 between 14 days prior to and 90 days after diagnosis of advanced NSCLC and the main outcome, overall survival (OS), was agnostic to treatment.¹⁰

Multivariable analysis was adjusted for age at diagnosis of advanced NSCLC, sex, smoking status, and stage at initial diagnosis of NSCLC.10

Racial disparities in biomarker testing and clinical trial enrollment

Real World Practice Cohort (Flatiron)
N=14,768 Stage IV NSCLC
Diagnosed 1/2017-10/2020
Treated within 120 days of diagnosis

- Black patients less likely to get NGS
- Participation in clinical trials lower in patients without biomarker testing





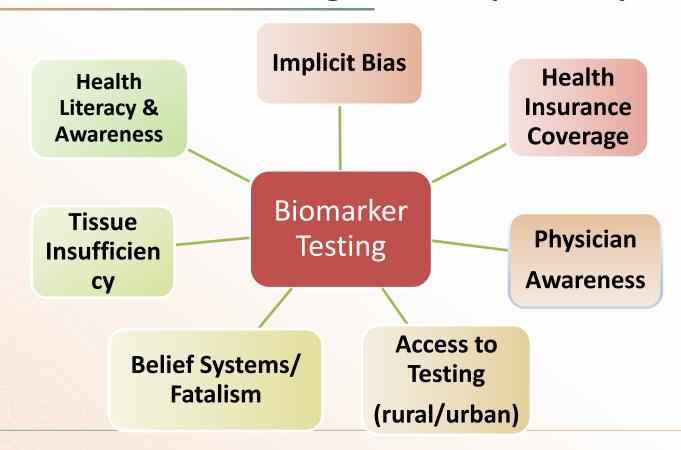
Biomarker Testing

All patients with NSCLC								
	NSCLC overall N=14,768	White N=9,793	Black/AA N=1,288	P-value, White vs Black/AA				
Ever tested	11,297 (76.5%)	7477 (76.4%)	948 (73.6%)	0.03				
Tested prior to first line therapy		6,064 (61.9%)	784 (60.9%)	0.47				
Ever NGS tested	7,185 (48.7%)	4,904 (50.1%)	513 (39.8%)	<0.0001				
NGS tested prior to first line therapy		3,081 (31.5%)	332 (25.8%)	<0.0001				
Patients	s with non-squamo	us NSCLC						
	Non-squamous N=10,333	White N=6,705	Black/AA N=922	P-value, White vs Black/AA				
Ever tested	8,786 (85.0%)	5,699 (85.0%)	764 (82.9%)	0.09				
Tested prior to first line therapy		4,881 (72.8%)	662 (71.8%)	0.52				
Ever NGS tested	5,494 (53.2%)	3,668 (54.7%)	404 (43.8%)	<0.0001				
NGS tested prior to first line therapy		2,452 (36.6%)	274 (29.7%)	<0.0001				

AA = African American; NGS = next-generation sequencing



Barriers to Biomarker Testing in the Hispanic Population





Thank You

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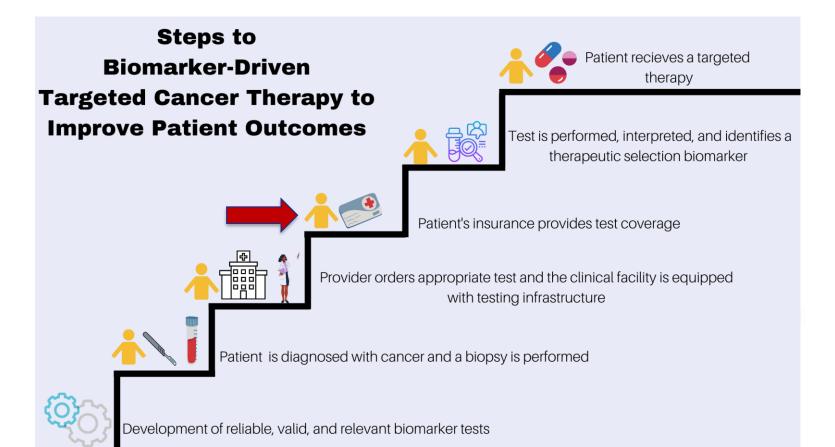
Legislative and Advocacy Overview Biomarker Testing

Hilary Gee Goeckner, MSW

Senior State and Local Campaigns Manager – Access to Care American Cancer Society Cancer Action Network



Barriers to Cancer Biomarker Testing

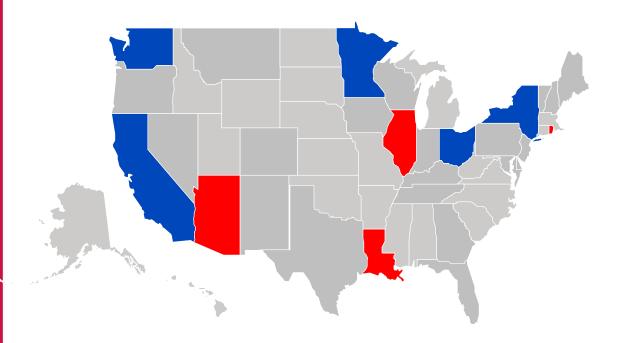


Legislation to Address Coverage

Biomarker testing must be covered for the purposes of diagnosis, treatment, appropriate management, or ongoing monitoring of an enrollee's disease or condition when the test is supported by medical and scientific evidence, including, but not limited to:

- Labeled indications for an FDA-approved or -cleared test or indicated tests for an FDA-approved drug;
- 2. Centers for Medicare and Medicaid Services (CMS) National Coverage Determinations and Medicare Administrative Contractor (MAC) Local Coverage Determinations; or
- Nationally recognized clinical practice guidelines and consensus statements.

Legislation to Expand Access to Biomarker Testing



Legislation introduced

Legislation passed

Legislation introduced: CA, MN, NY, OH, WA

Legislation passed: AZ, IL, LA, RI



fightcancer.org/biomarkers



Roundtable Discussion

Audience Q & A



- COVID-19 Virtual Briefing Session 17, August 31, 2022 7 8:15PM ET
 - Register here: https://bit.ly/covidsession17
- NHMA Southern California Chapter Event September 9, 2022 6-9:00 PM PT ET
 - University of Southern California Caruso Catholic Center in Los Angeles, CA
 - RSVP by Friday, September 2nd
 - https://bit.ly/nhmasocal
- NHMA HIV Chapter Forum September 14, 2022 1-2:00 PM ET
 - Register here: https://bit.ly/HIVCF2022
- NHMA 26th Annual Conference: Chicago, IL April 27 April 30th, 2023: Hyatt Regency Chicago
- NHMA VaccinateForAll Campaign
 - New websites launched <u>HispanicHealth.info</u> & <u>Vaccinateforall.org</u>
 - Register for FREE to join over 200+ individuals and organizations the champions today!







Thank You











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