Attachment D2 - Policy/Payer Survey

This survey is intended for organizations that provide healthcare and/or develop policy about use of and/or coverage/reimbursement for genetic testing and related interventions. These include decision makers at health plans/HMOs, insurers (e.g., Aetna, BCBS), and their umbrella organizations (e.g., America's Health Insurance Plans, Blue Cross Blue Shield Association).

Note: Skip patterns will be programmed into the online form, making a streamlined survey for respondents.

Objectives - Types of information to be collected include:

1. Identify general descriptive characteristics of respondents (e.g., position in organization, role).
2. Understand respondents' awareness of EGAPP and EGAPP products (e.g., evidence reports, EGAPP Working Group recommendations).
3. Determine if the respondent has read any products (e.g., published or web-posted evidence reports, published recommendations).
4. Get feedback on whether specific products may have impact on coverage or policy decisions.
5. Determine if the products meet the organizations' general standards for making coverage or policy decisions.

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Evaluation of Genomic Applications in Practice and Prevention (EGAPP) Survey

Introduction to the EGAPP Survey

Evaluation of Genomic Applications in Practice and Prevention (EGAPP) is an initiative launched in 2004 by the National Office of Public Health Genomics (NOPHG) at the Centers for Disease Control and Prevention (CDC). The efforts of EGAPP are focused around an independent, non-federal, multidisciplinary EGAPP Working Group. The goal of EGAPP is to establish a systematic, evidence-based process to assess the effectiveness of selected genetic tests that are in transition from research to clinical and public health practice.

Products of the EGAPP project include evidence reports on selected genetic tests and published EGAPP Working Group recommendations on the appropriate use of the tests based on the evidence collected. Some evidence reports sponsored by the EGAPP project are conducted and released by Agency for Healthcare Research and Quality (AHRQ) Evidence-based Practice Centers.

To evaluate the value and impact of the EGAPP products, an independent consultant has been contracted to survey key stakeholder groups, including healthcare providers, healthcare payers and purchasers, certain policy organizations, targeted consumer groups, and website visitors. Response to these surveys is very important to inform the EGAPP Working Group and CDC about the best methods and approaches for future review of the effectiveness of emerging genetic tests, and about the potential impact of accurate and timely information on genetic tests on current healthcare practices.

Your feedback will provide important information about the relevance of EGAPP products to your practice. The questions relate only to EGAPP-supported evidence reports and EGAPP Working Group Recommendations. Thank you for your time and assistance.

Please note: While taking the survey, please do not use your browser's back and/or forward buttons; please only use the next and previous buttons within the survey. Thank you.

1. Which best describes your organization? (please check only one)
   ___ Health plan
   ___ Health insurer
   ___ HMO
   ___ Organization of health insurance plans
   (Checking any of the alternatives below redirects to Policy Survey):

   ___ Member of medical professional organization and involved in policy decisions/guideline development
   ___ Other policy organization
   ___ Advisory panel to the government
   ___ Public health program
   ___ Accreditation organization
   (Checking one of the alternatives in the group below redirects Purchaser Survey)
   ___ Small business that purchases healthcare for its employees
   ___ Large company or corporation that purchases healthcare for its employees
   ___ Federal purchaser of healthcare
   ___ Group purchasing organization
   ___I am not affiliated with any group listed. → Exit survey. **SUBMIT**

2. Within your organization, in which of the following activities are you involved? (Please check all that apply.)
   ___ Analyzing data/information that will be used to inform policy and coverage decisions
   ___ Making coverage/reimbursement decisions
   ___ Developing policy on use of tests and interventions
   ___ Developing technology reports, practice guidelines or recommendations
   ___ Other (please describe) _____

3. What is your background?
   ___ Physician
   ___ Other health care provider
   ___ Administrator
   ___ Other (please specify) _____

4. Prior to this survey, had you read or heard about EGAPP?
   ___ yes
   ___ no →Skip to question 6a (first survey distribution) or 7a (second survey distribution)
   ___unsure →Skip to question 6a (first survey distribution) or 7a (second survey distribution)

5. Where have you read or heard about EGAPP activities? (Please check all that apply)
   ____ I read about EGAPP on the CDC *or www.egappreviews.org* website.
   ____ I heard about EGAPP through a professional journal/newsletter.
   ____ A colleague told me about EGAPP.
   ____ I learned about EGAPP at a meeting.
   ____ Other (please describe) _____

   If you checked the "I heard about EGAPP through a professional journal/newsletter" response above, please specify that journal/newsletter title here:

   If you checked the "I learned about EGAPP at a meeting" response above, please specify that meeting here:

If this is the second survey distribution, respondents will be skipped to question 7a.

Following is a set of questions about a genetic test for which EGAPP has completed an evidence review and a recommendation. The test is described briefly before the questions.

> ***Cytochrome P450 (CYP450) genotyping is a genetic test proposed for use in patients treated for depression with selective serotonin reuptake inhibitors (SSRIs) to help in selection of drug and dosage.***

6a. Are you aware of the CYP450 genetic test?
___ yes
___ no →Skip to question 9
___ unsure →Skip to question 9

6b. From what source(s) have you heard about the CYP450 genetic test? (check all that apply)
___ An EGAPP-sponsored evidence report or published summary
___ An EGAPP Working Group recommendation
___ Primary research/review article
___ Professional organization
___ Colleague
___ Meeting/conference
___ News media
___ Other (please specify)

The following questions refer specifically to the evidence report/published summary and EGAPP Working Group recommendation on CYP450 testing

6c. Have you read the EGAPP-sponsored evidence report on CYP450 testing, or a published summary of the evidence report?
_____ yes _____ no _____unsure
If no or unsure, respondent skips to item 6f

6d. How understandable did you find the evidence report/published summary to be?
___very understandable ____somewhat understandable ___not understandable

6e. Will the evidence on CYP450 testing influence decisions your organization makes about use or coverage of CYP450 testing in patients with depression treated with SSRIs?
___ yes ___ no ___unsure

If yes, please explain: _____

6f. Have you read the EGAPP Working Group recommendation about the use of CYP450 testing in patients with depression treated with SSRIs?
___ yes ___ no ___unsure
If no or unsure, respondent skips to item 6j

6g. How understandable did you find the EGAPP recommendation to be?
___very understandable ____somewhat understandable ___not understandable

6h. Will the EGAPP recommendation on the use of CYP450 testing influence decisions your organization makes about use or coverage of CYP450 testing?

___yes ___no ___unsure

If yes, please explain: _____

6i. Which will be more useful to your organization? (Please check one.)

___evidence report or published summary of evidence ___recommendations ___Not applicable

6j Is your organization currently covering CYP450 testing for patients with depression treated with SSRIs?

___ yes ___ no ___ unsure

6k. Please provide any comments about the evidence report/published summary or EGAPP recommendation on the use of CYP450 testing in patients with depression treated with SSRIs that you feel would improve the information for payers and policy makers.

Comment box here

If this is the first survey distribution, respondents will be skipped to question 9.

Testing for Hereditary Non-Polyposis Colorectal Cancer (HNPCC or Lynch Syndrome) in newly diagnosed colorectal cancer patients and their families may be offered to a selected subset of high risk patients to detect a heritable form of colorectal cancer.

7a. Are you aware of genetic testing for HNPCC (Lynch Syndrome) in newly diagnosed patients with colorectal cancer?

___ yes
___ no →Skip to question 8a
___ unsure →Skip to question 8a

7b. From what source(s) have you heard about genetic testing for HNPCC (Lynch Syndrome)? (Please check all that apply)

___ An EGAPP-sponsored evidence report or published summary
___ An EGAPP Working Group recommendation
___ Primary research/review article
___ Professional organization
___ Colleague
___ Meeting/conference
___ News media
___ Other (please specify)

The following questions refer specifically to the evidence report/published summary and EGAPP recommendation on HNPCC (Lynch Syndrome) testing

7c. Have you read the EGAPP-sponsored evidence report on genetic testing for HNPCC (Lynch Syndrome), or a published summary of the evidence report?

____ yes ____ no ____unsure

If no or unsure, respondent skips to item 7f

7d. How understandable did you find the evidence report/published summary to be?

___very understandable ____ somewhat understandable ___ not understandable

7e. Will this information on genetic testing for HNPCC (Lynch Syndrome) influence your organization's decisions on the use or coverage of genetic testing for HNPCC (Lynch Syndrome) in patients with newly diagnosed colorectal cancer?

___ yes ___ no ___unsure

If yes, please explain: _____

7f. Have you read the EGAPP Working Group recommendation about the use of testing for HNPCC (Lynch Syndrome) in patients with newly diagnosed colorectal cancer?

___ yes ___ no ___unsure

If no or unsure, respondent skips to item 7j

7g. How understandable did you find the EGAPP recommendation to be?

___very understandable ____ somewhat understandable ___ not understandable

7h. Will this recommendation influence your organization's decision about the use or coverage of genetic testing for HNPCC (Lynch Syndrome) in patients with newly diagnosed colorectal cancer?

___ yes ___no ___unsure

If yes, please explain: _____

7i. Which is more useful to your organization? (Please check one.)

___evidence report or published summary of evidence ___recommendations ____ Not applicable

7j. Is your organization currently covering HNPCC (Lynch Syndrome) testing in patients with newly diagnosed colorectal cancer?

___ yes ____ in some cases ___ no ___ unsure

7k. Please provide any comments about the EGAPP evidence report/published summary or EGAPP recommendation on the use of HNPCC (Lynch Syndrome) testing in patients with newly diagnosed colorectal cancer that you feel would improve the information for payers/policy makers.

Comment box here

UGT1A1 testing is a pharmacogenetic test for colorectal cancer that may be offered to patients treated with irinotecan.

8a. Are you aware of genetic testing for UGT1A1 in colorectal cancer patients treated with irinotecan?

___ yes
___ no →Skip to question 9
___ unsure →Skip to question 9

8b. From what source(s) have you heard about genetic testing for UGT1A1? (Please check all that apply)

___ An EGAPP-sponsored evidence report or published summary
___ An EGAPP Working Group recommendation
___ Primary research/review article

___ Professional organization
___ Colleague
___ Meeting/conference
___ News media
___ Other (please specify)

The following questions refer specifically to the evidence report/published summary and EGAPP recommendation on UGT1A1 testing

8c. Have you read the EGAPP-sponsored evidence report on genetic testing for UGT1A1, or a published summary of the evidence report?

____ yes ____ no ____unsure

If no or unsure, respondent skips to item 8f

8d. How understandable did you find the evidence report/published summary to be?

___very understandable ____ somewhat understandable ___ not understandable

8e. Will this information on genetic testing for UGT1A1 influence your organization's decisions on the use or coverage of genetic testing for UGT1A1 in colorectal cancer patients treated with irinotecan?

___ yes ___ no ___unsure

If yes, please explain: _____

8f. Have you read the EGAPP Working Group recommendation about the use of genetic testing for UGT1A1 in colorectal cancer patients treated with irinotecan?

___ yes ___ no ___unsure

If no or unsure, respondent skips to item 8j

8g. How understandable did you find the EGAPP recommendation to be?

___very understandable ____ somewhat understandable ___ not understandable

8h. Will this recommendation influence your organization's decision about the use or coverage of genetic testing for UGT1A1 in colorectal cancer patients treated with irinotecan?

___ yes ___no ___unsure

If yes, please explain: _____

8i. Which is more useful to your organization? (Please check one.)

___evidence report or published summary of evidence ___recommendations ____ Not applicable

8j. Is your organization currently covering UGT1A1 testing in colorectal cancer patients treated with irinotecan ___ yes ____ in some cases ___ no ___ unsure

8k. Please provide any comments about the EGAPP evidence report/published summary or EGAPP recommendation on the use of UGT1A1 testing in colorectal cancer patients treated with irinotecan that you feel would improve the information for payers/policy makers.

Comment box here

9. Have you read any EGAPP sponsored evidence reports/published summaries or EGAPP recommendations other than the one mentioned in this survey?

___ yes ___ no ___unsure

Respondent directed to 10 if no or unsure to:
6a *and* 9 (first survey distribution)
7a *and* 8a *and* 9 (second survey distribution)

Respondent directed to question 11 if yes to 9 (first and second survey distribution)

10. If an evidence-based report on a specific test and a recommendation from a credible expert panel were available, please indicate your response to the statements below based on the scale given:

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Evidence-based information/guidelines on genetic tests are useful in my practice to:

	Not Useful	Somewhat Useful	Useful	Very Useful
a) understand what uses of the test are supported by evidence.	◡	◡	◡	◡
b) identify the population or individuals for whom the test may be appropriate.	◡	◡	◡	◡
c) provide expectations for laboratory performance and the estimated clinical validity of the test.				
d) know what actions or interventions may be suggested based on test results.				
e) understand what is known about the balance of benefits and harms related to use of the test.				
f) appreciate the ethical, legal, and social implications related to testing.	◡	◡	◡	◡

Respondents answering Question 10 skip to Question 15

Question 11 will only be asked of those respondents who have read at least one EGAPP-sponsored evidence review/summary or recommendations

11. Based on your experience with EGAPP sponsored evidence reports and/or Working Group recommendations, please indicate your response to the statements below based on the scale given:

Evidence-based information/guidelines on genetic tests are useful in my practice to:

	Not Useful	Somewhat Useful	Useful	Very Useful
a) understand what uses of the test are supported by evidence.				
b) identify the population or individuals for whom the test may be appropriate.				
c) provide expectations for laboratory performance and the estimated clinical validity of the test.				
d) know what actions or interventions may be suggested based on test results.				
e) understand what is known about the balance of benefits and harms related to use of the test.				
f) appreciate the ethical, legal, and social implications related to testing.				

12. In general, how well does the EGAPP process for evidence review and development of recommendations by the independent EGAPP Working Group meet standards that your organization requires for setting policy or developing guidelines?

___ Exceeds standards ___ meets standards
___ Does not meet/Falls below standards ___ Unsure ____Not applicable

13. Have you visited the EGAPP website: www.egappreviews.org_
___ yes ___ no →Skip to question 15

14. How useful did you find the EGAPP website?
___ Very useful
___ Somewhat useful
___ Not useful

15. If you have other comments you would like to make please do so in the box below.

COMMENT BOX HERE

This is the end of the survey, thank you for your feedback. Click the "Submit" button below to submit your responses.--------→ SUBMIT