

Spring '24 Genomics Summit Highlights

The Health Management Academy (THMA) and Helix partnered to hold a Genomics Summit in May 2024. The purpose of this Summit was to convene Leading Health Systems (LHS) leaders to discuss key challenges and share insights and learnings from their efforts to build, implement, and scale genomics programs. While some LHS are still nascent in their genomics journey, they are interested in better understanding the genomics landscape and its role in building and enabling a precision health strategy.

Three Key Takeaways from our Genomics Summit



Strong business rationale exists for Leading Health Systems to justify scaling a genomics program

A common genomics discussion point is "what is the LHS business model to scale genomics." While the clinical rationale has consistently been clear, the business model and rationale for genomics, particularly population-based genomics, has continued to evolve.

During our Inaugural Genomics Summit, LHS discussed multiple business models they used to get buy-in on an expanded, enterprise-wide genomics program. While diagnosis and treatment are the baseline, LHS are tying genomics programs to population health and health equity strategies to build a business case for genomics. AMCs have embraced both their clinical and research mandates to support faster scaling of genomics. And some LHS see investment in a genomics strategy as part of their growth diversification efforts.

If you would like to learn more about our Genomics Summit and/or get involved, please contact Jessica Liu.





Technology's ability to simplify current testing challenges increases health systems' use cases for genomics.

Genomics testing, as it is performed today, is an onerous process with slow turnaround times, thereby limiting the potential use cases and challenging a health system's ability to scale its genomics programs. Given tight margins and ability to scale, health systems have been slow in pushing forward expanded genomics strategies and integrating sequenced patient data with phenotypic data in a manner needed for true longitudinal precision.

Novel technologies that allow health systems to "sequence once, query often" can reframe genomics from a testing problem to a data problem and shift the focus towards comprehensive data management and analysis. The ability to query a genomics data set allows for more real-time clinical insights and decision making, thereby expanding the use cases for genomics from diagnostics to prognostics, prevention, and avoidance.



To alleviate workforce shortages and ethical/legal risks, health systems would benefit from engaging the right stakeholders for better use of limited resources.

Workforce shortages continue to be a challenge across many health care roles, and genomics is no exception. The shortage of genetic counselors, who provide guidance on testing and communicate implications of results to patients, can be a bottleneck. Ethical and legal risks are also key challenges in implementing genomic programs. If LHS have genomic data, what are they legally and ethically obligated to do?

Given workforce challenges will continue to hamper LHS' abilities to fill genetic counselor roles, LHS may want to consider partnering with companies that can help them leverage and/or develop technology and care pathways to accommodate an increasing demand for genetic counselors. We've also seen LHS' begin to incorporate their legal teams and medical ethicists into Steering Committees to proactively get in front of and address ethical and legal risks.