



July 17, 2017

The Honorable Eric Swalwell  
U.S. House of Representatives  
129 Cannon House Office Building  
Washington, DC 20515

Sent via email: [carly.reed@mail.house.gov](mailto:carly.reed@mail.house.gov)

Re: "Access to Precision Medicine Advancement Act"

Dear Representative Swalwell:

On behalf of the Personalized Medicine Coalition (PMC), which represents innovators, scientists, patients, providers, and payers to promote the understanding and adoption of personalized medicine concepts, services, and products for the benefit of patients and the health care system, I am writing to share our coalition's support for your draft legislation, the "Access to Precision Medicine Advancement Act."

PMC defines personalized medicine as an emerging field that uses diagnostic tools to identify specific biological markers, often genetic, to help determine which medical treatments and procedures will be best for each patient. By combining this information with an individual's medical history and other clinical information, personalized medicine allows doctors and patients to develop targeted prevention and treatment plans. The goal is to provide the right treatment in the right dose to the right patient at the right time.

We appreciate that your draft legislation directs the National Academy of Medicine (NAM) to study the use of genetic and genomic testing to improve health care outcomes, and support in particular the provision addressing the need to develop evidence for the clinical utility and appropriate use of genetic and genomic tests. As PMC explains in its enclosed signature document, [\*The Personalized Medicine Report: Opportunity, Challenges, and the Future\*](#), there is a critical need to describe how evidence for clinical utility should be measured in order to improve health care outcomes and reduce inefficiencies.

Our coalition welcomes a study from NAM and a Center for Medicare and Medicaid Innovation demonstration project identifying ways in which genetic and genomic testing can be better utilized to improve patient outcomes, as well as identify what the government can do to help define the levels of evidence necessary to establish clinical utility, especially given that these studies can sometimes be cost prohibitive. To be most impactful, we also encourage the study to define from its outset criteria to measure improved health outcomes.

PMC appreciates your leadership in calling attention to the promise of personalized medicine, and we would like to request a meeting to discuss how we can assist your efforts.

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If you have any questions about the content of this letter, please contact me at eabrahams@personalizedmedicinecoalition.org or 202-787-5907.

Sincerely yours,

A handwritten signature in cursive script that reads "Edward Abrahams".

Edward Abrahams  
President