June 12, 2020

Meredith Loveless, MD
2 Vantage Way
Nashville, TN 37228
cmd.inquiry@cgsadmin.com

RE: MolDX: MolDX: Phenotypic Biomarker Detection in Circulating Tumor Cells DL38584

Dear Dr. Loveless,

On behalf of the Association for Molecular Pathology (AMP) and the College of American Pathologists (CAP), we thank you for the opportunity to review and comment on the proposed policy for MolDX: Phenotypic Biomarker Detection in Circulating Tumor Cells DL38584.

The AMP is an international medical and professional association representing approximately 2,500 physicians, doctoral scientists, and medical technologists who perform or are involved with laboratory testing based on knowledge derived from molecular biology, genetics, and genomics. Membership includes professionals from academic medicine, hospital-based and private clinical laboratories, the government and the in vitro diagnostics industry.

The CAP is the world's largest organization of board-certified pathologists and leading provider of laboratory accreditation and proficiency testing programs. The CAP serves patients, pathologists, and the public by fostering and advocating excellence in the practice of pathology and laboratory medicine worldwide.

We are submitting joint comments because currently both of our organizations share the same position regard this draft LCD.

We appreciate CGS' willingness to provide limited coverage for assays that detect circulating HER2 positive cells and for your continued monitoring of emerging evidence that could impact future coverage of these tests. Given the limited evidence at this time for the clinical use of these assays, we agree with the coverage limitations that are outlined in CGS' proposed policy.

Regarding the third bullet under coverage criteria, the proposed policy states that, "assays that detect circulating HER2 positive cells are covered when all of the following are met:

- "The clinical validation includes a comparison to tissue HER2 testing"

The use of the term "clinical validation" appears to be inappropriately applied. Clinical validation requires diagnoses to be substantiated by clinical criteria generally accepted by the medical community, typically from authoritative professional guidelines, consensus, or evidence-based sources. Clinical validation involves a clinical review of the case to see if a patient truly possesses the conditions that were documented in the medical record. The HER2 has already been shown to be a clinically valid test that is medically reasonable and necessary, so a test only needs to perform comparable to tissue HER2 testing.

Recommend: Replace the third bullet ("The clinical validation includes a comparison to tissue HER2 testing") with the following, "**the assay performs comparable to tissue HER2 testing.**"

Thank you again for the opportunity to review and comment on this proposed policy. We are happy to be of assistance in providing additional clinical or other information to assist you with this draft LCD. Please direct your

correspondence to either Tara Burke, Director of Public Policy, at tburke@amp.org or Nonda Wilson, CAP's Manager, Economic and Regulatory Affairs, at nwilson@cap.org

Sincerely,

Association for Molecular Pathology
College of America Pathologists