Laboratory-Developed Tests The FDA's Proposed Rule and Potential Clinical Laboratory Impact

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### Introduction

#### **ARUP Laboratories**

ARUP is a nonprofit clinical laboratory enterprise of the University of Utah Department of Pathology





### **October 3, 2023**

# FDA Published a <u>**Proposed</u> Rule to Regulate Laboratory Developed Tests as Medical Devices**</u>

#### **Public Announcement**



#### **Proposed Rule**

| NAV CANADA is amending RNAV   |   | id exclude the airspace   | List of Subjects in 14 CFR Part 71   |
|---|---|---|--|
| route Q-801 in their airspace to ensure<br>continuity and cross-border<br>connectivity with the new RNAV route  | in Canada.<br>Regulatory Noti   | ces and Analyses  | Airspace, Incorporation by reference<br>Navigation (air).  |
| Q-801 proposed in this NPRM. The  | The FAA has   | determined that this  | The Proposed Amendment   |
| proposed Åir Traffic Service (ATS)<br>route actions are described below.<br>J-133: Jet route J-133 currently<br>extends between Galena, AK, VOR/DME<br>and Sitka, AK, NDB. The FAA proposes                                       | proposed regula<br>established body<br>regulations for v<br>routine amendm                        | tion only involves an<br>y of technical<br>which frequent and<br>tents are necessary to                                     | In consideration of the foregoing, the<br>Federal Aviation Administration<br>proposes to amend 14 CFR part 71 as<br>follows:   |
| to rovoke the portion between the<br>Anchorage, AK, VOR/DME and the<br>Sitka, AK, NDB. As amended, Jet route<br>J=133 would extend between Galena,<br>AK, VOR/DME and Anchorage, AK,  | therefore: (1) is<br>regulatory action<br>Order 12866; (2)  | itionally current. It,<br>not a ''significant<br>n'' under Executive<br>  is not a ''significant<br>F Regulatory Policies   | PART 71—DESIGNATION OF CLASS<br>B, C, D, AND E AIRSPACE AREAS; AI<br>TRAFFIC SERVICE ROUTES; AND<br>REPORTING POINTS   |
| VOR/DME.<br>Q-801: Q-801 would extend between   | and Procedures<br>26, 1979); and (3   | (44 FR 11034; February<br>3) does not warrant   | 1. The authority citation for 14 CFR<br>part 71 continues to read as follows:  |
| the Anchorage, AK, VOR/DME and the<br>HARPR, OR, WP. The new route would<br>remain within United States airspace  | the anticipated i<br>Since this is a re   | regulatory evaluation as<br>impact is so minimal.<br>outine matter that will  | Authority: 49 U.S.C. 106(f), 106(g); 40103<br>40113, 40120; E.O. 10854, 24 FR 9565, 3 CF<br>1959–1963 Comp., p. 389.   |
| between the Anchorage VOR/DME and<br>the EEVER, AK, Fix and between the   | only affect air tr  | affic procedures and air  | §71.1 [Amended]  |
| CYVIC, WA, WP and the HARPR WP.<br>The new EEVER route point is being<br>established on the Alaska/Canada<br>border north of the MOCHA, AK, Fix.<br>The new CYVIC route point is being<br>established on the United States/Canada | proposed rule, v<br>not have a signi<br>on a substantial<br>under the criteri<br>Flexibility Act. | certified that this<br>when promulgated, will<br>ficant economic impact<br>number of small entities<br>ia of the Regulatory | 2. The incorporation by reference in<br>14 GFR 71.1 of FAA Order JO 7400.111<br>Airspace Designations and Reporting<br>Points, dated August 11, 2023, and<br>effective September 15, 2023, is<br>amended as follows: |
| border in Washington state replacing,<br>the CFPXC computer navigation fix  | Environmental   | Review  | Paragraph 2004 Jet Routes  |
| (CNF) currently charted. This action is   | This proposal   | will be subject to an   |  |
| part of an ongoing FAA initiative to  |   | inalysis in accordance  | J-133 [Amended]  |
| replace CNF and unpronounceable<br>border fix/waypoint names with   | with FAA Order  | 1050.1F,<br>Impacts: Policies and   | From Galena, AK to Anchorage, AK.  |
| standard, pronounceable, five-letter<br>names. This proposed action would<br>establish RNAV route Q-801 within the  |   | or to any FAA final   | Paragraph 2007 Canadian Area Navigatio<br>Routes.  |
| Q-801 HARPR, OR to A  | asheran AK (TRD)  | NEW   |  |
| HARPR, OR   | WP  | (Lat. 42*28'50.00" N, long. 11  | 22°53'01.54" W)  |
| FELIX, OR<br>ECTOF, OR  | WP  | (Lat. 42"28'50.00" N, long. 12<br>(Lat. 43"19'13.98" N, long. 12<br>(Lat. 44"10'49.55" N, long. 12                          | 23°06'39.51" W)  |
| WAPTO, WA   | FIX   |   |  |
| Tatoosh, WA (TOU)   | VORTAG  | [Lat. 48"17'59.64" N. long. 11  | 24*37'37.36* W)  |
| CYVIC, WA<br>GOVAD, Canada  | FIX   | [Lat. 48"29'59.97" N, long. 11<br>[Lat. 49"02'48.65" N, long. 11  | 25°42'15.00" W)  |
| FINCS, Canada<br>SIMSU, Canada  | PIX   | (Lat. 50°15'00.00" N, long. 12<br>(Lat. 50°46'56.00" N, long. 12  | 27"34"00.00" W)<br>28"25"37.00" W)   |
| CAFTA, Canada   | FIX   | [Lat. 50 <sup>4</sup> 66'56.00" N, long. 11<br>[Lat. 51"17'43.00" N, long. 11   | 29"05'19.00" W)  |
| EEVER, AK<br>MACIE, AK  | FIX   | (Lat. 54°35'01.79" N, long. 11<br>(Lat. 57°43'38.87" N, long. 13  |  |
| LAIRE, AK<br>FROZN, AK  | FIX   | [Lat. 58 <sup>4</sup> 48'14.67" N, long. 14<br>[Lat. 52 <sup>9</sup> 40'34.90" N, long. 14                                  | 10°31'43.36" W)  |
| FRUZAN, AK.<br>Johnstona Point, AK. (JOH<br>Ancherage, AK. (TED)  | WP<br>VOR/DME<br>VOR/DME  | (Lat. 50°40'34.90" N, long. 14<br>(Lat. 60°20'51.43" N, long. 14<br>(Lat. 61°10'04.32" N, long. 14                          |  |
| Issued in Washington, DC, on September  | DEPARTMENT<br>HUMAN SERVIC  | OF HEALTH AND   | ACTION: Proposed rule.   |
| 28, 2023.<br>Karen L. Chiodini.   | Food and Drug   | Administration  | SUMMARY: The Food and Drug<br>Administration (FDA, the Agency, or  |
| Acting Manager, Rules and Regulations<br>Group.   | 21 CFR Part 809   |   | we) is proposing to amend its<br>regulations to make explicit that in vite<br>diagnostic products (IVDs) are devices   |
| [FR Doc. 2023-21811 Filed 10-2-23; 8:45 am]<br>BILLING CODE 4910-13-P   | [Docket No. FDA-  | 2023-N-2177]  | under the Federal Food, Drug, and<br>Cosmetic Act (FD&C Act) including   |
|   | RIN 0910-AI85   |   | when the manufacturer of the IVD is a<br>laboratory. In conjunction with this  |
|   | Medical Device<br>Developed Test  |   | amendment, FDA is proposing a policy   |
|   | Developed Test  | •   | under which FDA intends to phase ou  |

#### **Regulatory Impact Analysis**

| DEPARTMENT (<br>Food and Drug Ac | DF HEALTH AND HUMAN SERVICES  |
|----------------------------------|---|
| Labo                             | ratory Developed Tests Proposed Rule  |
|                                  | Preliminary Regulatory Impact Analysis<br>Initial Regulatory Flexibility Analysis<br>Jnfunded Mandates Reform Act Analysis                    |
| c                                | Economics Staff<br>Office of Economics and Analysis<br>Office of Policy, Legislation, and International Affairs<br>Office of the Commissioner |



### Laboratory Developed Test (LDT)

"an [in vitro diagnostic] IVD that is intended for clinical use and designed, *manufactured*, and used within a single laboratory"

[e.g. "home brew" test]

Draft Guidance for Industry, Food and Drug Administration Staff, and Clinical Laboratories. Framework for Regulatory Oversight of Laboratory Developed Tests (LDTs). Food and Drug Administration. Center for Devices and Radiological Health. Rockville, MD. October 3, 2014.



### **Proposed Amendment**

"We are proposing to amend...<u>updating the definition</u> of "in vitro diagnostic products" to make explicit that IVDs are devices under the FD&C Act <u>including when</u> <u>the manufacturer of the IVD is a laboratory</u>."

26,000 words of explanation and *proposed* role-out

Federal Register / Vol. 88, No. 190 / Tuesday, October 3, 2023, p.68017.



### **FDA Proposed Rule**

#### • Exercise enforcement over all essentially all LDTs

- » Continued <u>enforcement discretion</u> over manual tests ("pre-1976 tests"), HLA, forensic (law enforcement), public health
- Many more rules and guidance Proposed Stages documents would be required. **Time after Final Publication** Stage **Action (Ending Enforcement Discretion Over) Medical device reporting (MDR)**, correction, and removal Stage 1 1 year requirements Registration, listing, labeling, investigational use Stage 2 2 years requirements Quality systems requirements (e.g., purchasing controls, Stage 3 3 years acceptance activities, CAPA, records requirements) Stage 4 Pre-market review of high-risk IVDs 3.5 years Pre-market review of low and moderate risk IVDs Stage 5 4 years



### **Current User Fees**

| Application Type  | Standard<br>Fee | Small Business<br>Fee† |                                    |
|---|-----------------|------------------------|------------------------------------|
| 510(k)‡   | \$21,760        | \$5,440                | Medium Risk                        |
| 513(g)  | \$6,528         | \$3,264                |                                    |
| PMA, PDP, PMR, BLA  | \$483,560       | \$120,890              | High Risk                          |
| De Novo Classification Request  | \$145,068       | \$36,267               | Medium Risk (No Predicate)         |
| Panel-track Supplement  | \$386,848       | \$96,712               | And "Change in Intended Use"       |
| 180-Day Supplement  | \$72,534        | \$18,134               |                                    |
| Real-Time Supplement  | \$33,849        | \$8,462                |                                    |
| BLA Efficacy Supplement   | \$483,560       | \$120,890              | Annual                             |
| 30-Day Notice   | \$7,737         | \$3,869                | Establishment                      |
| Annual Fee for Periodic Reporting on a Class III device (PMAs,PDPs, and PMRs) | \$16,925        | \$4,231                | <b>Registration Fee</b><br>\$7,653 |

### **Medical Device Amendments of 1976**

"to amend the Federal Food, Drug, and Cosmetic Act [...] to provide for the <u>safety</u> and <u>effectiveness</u> of <u>medical devices...</u>"

- Authorized FDA to regulate in vitro diagnostic devices
- Established Device <u>Classes</u> (risk based):
  - Class I, General Controls (lowest risk)
  - Class II, Performance Standard (moderate risk)
    - Subject to General and Special Controls
    - Premarket notification (510k) "clearance"
  - Class III, Premarket Approval (highest risk); PMA; "approval"



8



Law

### **Medical Device Amendments**

Law

(d) the term '**device**'...means an instrument,...**in vitro reagent**, or other similar or related article..., which is: (2) intended for use in the diagnosis of disease or other condition... In Vitro Reagents <u>Are</u> Devices Neither in the law nor in LDTs Are Not Discussed prior Congressional hearings.

Law only applies to devices "distributed through interstate commerce"

**Commercial Distribution** 

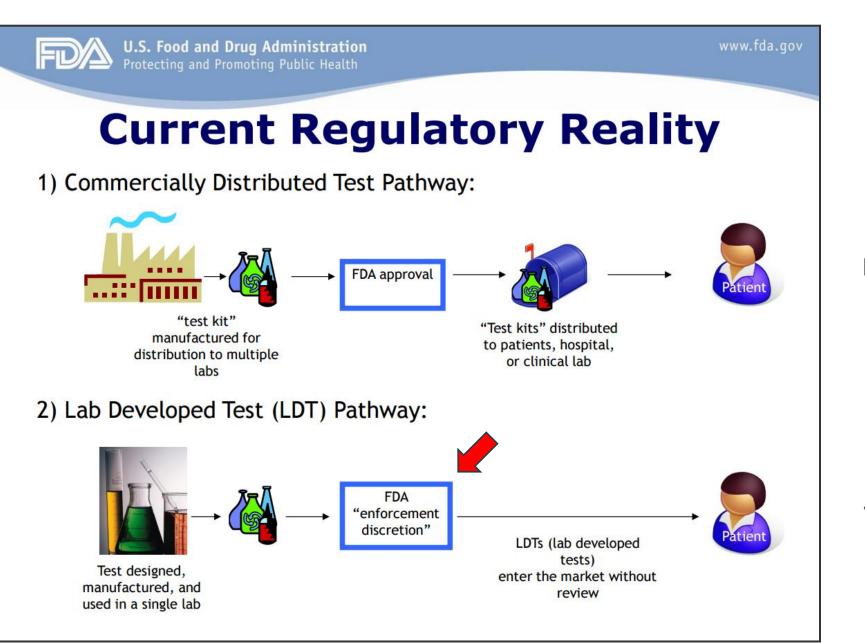
**Interstate Commerce** 



### 1977-1992

- For 16 years after passage of the Medical Device Amendments, the FDA did not claim any authority over LDTs
- Two "pathways" for laboratory testing developed:
  - Commercially Distributed Pathway (regulated by the FDA)
  - LDTs (regulated by CMS under CLIA)





#### Buy Someone Else's Kit FDA

Validate Your Own Test Perform In-house Only

**CLIA** 

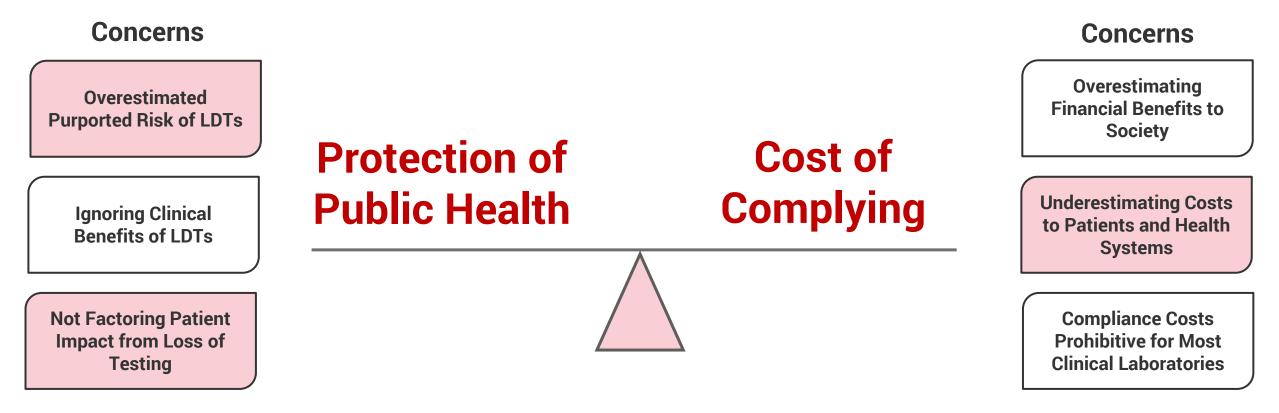
Oversight of Laboratory Developed Tests APHL Annual Meeting 2015; Alberto Gutierrez, PhD http://www.aphl.org/conferences/proceedings/Documents/2015/70Gutierrez.pdf



### **MDA "General Rule"**



"shall not impose requirements **unduly burdensome** to a device manufacturer, importer, or distributor taking into account his **cost of complying** with such requirements and the **need for the protection of the public health** and the **implementation of this Act**."



Medical Device Amendments of 1976." (PL 94 – 295, May 28, 1976) United States Statutes at Large, 90 (1976) pp. 539–83. https://www.goo.gov/fdsys/pkg/STATUTE-90/pdf/STATUTE-90-Pg539.pdf. Accessed 11/13/2023



### **LDTs in Clinical Care**

2021 Data, University of Utah Health

Study of <u>all</u> test orders in our health system.

|                  | Volume of Tests<br>Ordered       | Distinct<br>Assays       |
|------------------|----------------------------------|--------------------------|
| FDA Assays       | 2,831,489 ( <mark>93.9%</mark> ) | 983 (50.3%)              |
| FDA              | 2,807,104 (93.0%)                | 977 (50.0%)              |
| EUA              | 24,385 (0.8%)                    | 4 (0.2%)                 |
| LDT Assays       | 116,583 ( <mark>3.9%</mark> )    | <mark>880</mark> (45.0%) |
| LDT              | 110,282 (3.7%)                   | 831 (42.5%)              |
| Modified FDA     | 6,301 (0.2%)                     | 49 (2.5%)                |
| Standard Methods | 68,856 ( <mark>2.3%</mark> )     | 91 (4.7%)                |
| Total            | 3,016,928                        | 1,954                    |
| Leveling the     |                                  |                          |

Leveling the playing field?

Rychert J, Schmidt RL, Genzen JR. Laboratory-Developed Tests Account for a Small Minority of Tests Ordered in an Academic Hospital System. *AJCP*. 2023 Sep 1;160(3):297-302.



### **LDTs in Clinical Care**

2021 Data, University of Utah Health

#### Laboratory-Developed Tests

#### **Standard Tests**

| Test Name                      | Specimen | % LDT<br>Volume | Assay                            | Specimen | % Standard<br>Volume |
|--------------------------------|----------|-----------------|----------------------------------|----------|----------------------|
| Tacrolimus                     | WB       | 10.9%           | Differential cell count (manual) | WB       | 37.6%                |
| Cytomegalovirus, viral load    | Р        | 4.5%            | Erythrocyte sedimentation rate   | WB       | 30.8%                |
| Estradiol                      | S, P     | 3.9%            | Urinalysis                       | U        | 10.4%                |
| Leukemia/lymph. phenotyping    | WB       | 3.8%            | Cell count                       | BF, CSF  | 7.4%                 |
| Targeted drug profile          | U        | 2.9%            | Blood smear with interpretation  | WB       | 3.5%                 |
| CD4 lymphocyte subset          | WB       | 2.9%            | Gram Stain                       | BF, CSF  | 1.9%                 |
| Vitamin B1                     | WB       | 2.8%            | Ova and parasite exam            | Stool    | 1.9%                 |
| Zinc                           | S, P     | 2.5%            | Wet prep, vaginal                | G        | 1.1%                 |
| Copper                         | S, P     | 2.3%            |                                  |          |                      |
| Epstein-Barr virus, viral load | S, P     | 2.2%            |                                  |          |                      |

Rychert J, Schmidt RL, Genzen JR. Laboratory-Developed Tests Account for a Small Minority of Tests Ordered in an Academic Hospital System. *AJCP*. 2023 Sep 1;160(3):297-302.

### **Theranos Paradox**



# FDA

"Cleared a Theranos Test"

|                 | 107 AST<br>BETH<br>MES<br>5 THE<br>JF 2014 |
|-----------------|--|
| Invest<br>Jourr |  |
|                 |  |

#### Devices@FDA

FDA Home
Medical Devices
Databases

| T Device Name 4 Company 4                                 | Date Device or Consumer Information/Instructions |
|---|--|
| Theranos Herpes Simplex Virus-1 lgG Assay. THERANOS, INC. | Jul 02, 2015 <u>K143236</u>                      |

FDA's substantial equivalence decision is *still* in effect!

### (CLIA) + Investigative Journalism

"<u>LDTs</u>"

"Running FDA-cleared assays off label with

dilutions"

CMS

"Stopped Theranos"



### **Supreme Court Cases**

**2022** West Virginia v. Environmental Protection Agency Issue: Major Questions Doctrine

"Courts presume that Congress does not delegate to administration issues of major political or economic significance"

NextLoper Bright Enterprises et al. v. RaimondoYearIssue: Challenge to Chevron Deference

"Courts should defer to the agencies' interpretations of a law if it is <u>ambiguous</u>"



### **Public Comments**

#### Deadline – December 4, 2023

#### **Medical Devices; Laboratory Developed Tests**

A Proposed Rule by the Food and Drug Administration on 10/03/2023

This document has a comment period that ends in 6 days. (12/04/2023)

SUBMIT A FORMAL COMMENT

https://www.federalregister.gov/documents/2023/10/03/2023-21662/medical-devices-laboratory-developed-tests

Google 3 Words: "Federal Register LDT"



### **Submitting Your Own Comments**

- We encourage you to submit a public comment
- Your voice is <u>incredibly important</u> you are the experts

Remember: These are <u>public</u>, anyone can read them!

#### **Guidance**

- Share your personal opinions and experiences with laboratory testing and LDTs
- Share your opinion on the impact of the proposed rule to patient care
- Be professional

#### **VERY IMPORTANT**

Please do **<u>NOT</u>**:

- Submit your comment "on behalf" of your organization
- Share any proprietary information (test volumes, financials, or test details)
- Share any PHI or otherwise sensitive information

### **ARUP Public Comment**

#### **Statutory Authority Over LDTs**

- LDTs are Not Devices
- Labs are Not Manufacturers
- Interstate Commerce
- Commercial Distribution
- States are Not Persons
- Violation of MDA General Rule

#### **Regulatory Impact Analysis**

- Flawed Calculations
- Overestimated Benefits
- Underestimated Costs

#### **General Concerns**

- Patient Safety
- Practice of Medicine
- Logistical Challenges
- Test Modifications
- Academic Medical Centers
- Grandfathering



#### Public Comment Period Ends December 4<sup>th</sup>!

https://www.federalregister.gov/documents/2023/10/03/2023-21662/medical-devices-laboratory-developed-tests

Google 3 Words: "Federal Register LDT"

## **Questions and Discussion**

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#### Public Comment Period Ends December 4<sup>th</sup>!

https://www.federalregister.gov/documents/2023/10/03/2023-21662/medical-devices-laboratory-developed-tests

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## For more information go to: aruplab.com/fda-ldt





A nonprofit enterprise of the University of Utah and its Department of Pathology

