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PLUGS®

Patient-centered Laboratory
Utilization Guidance Services

Est. 2013

PLUGS History & Evolution

Challenges

- ✓ High out-of-pocket cost for low-value testing, e.g., misordered genetic testing
- ✓ Labs bear the cost for the many patients who can't pay
- ✓ Issue exaggerated in pediatrics because of rare diseases

PLUGS evolved beyond pediatrics & genetic tests to broad laboratory stewardship advocacy

Today, we collaborate with:

- ✓ Adult and Pediatric Clinical Labs
- ✓ Lab IT and Healthcare Companies
- ✓ 3rd Party Payers including government



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PLUGS Mission & Vision

MISSION

Improve laboratory test access,
ordering, retrieval, interpretation and
reimbursement

VISION

Be the #1 advocate for laboratory
test stewardship.

$$\text{Value} = \frac{\text{Quality}}{\text{Cost}}$$



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PLUGS Initiatives

Case
Management

Laboratory
Stewardship
Standards

Tools for
Stewardship
Program
Development

Insurance
Alignment



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PLUGS Initiatives

- ✓ **Laboratory Stewardship Program Guidance, Tools & Education** to help hospital laboratories and practitioners implement their own laboratory stewardship programs. These programs improve patient safety by reducing errors, and significantly reduce laboratory testing expenses.
- ✓ **Insurance Alignment** to guide national consensus policies related to laboratory tests and framework and guidance to build partnerships with local payers to improve efficiencies around test review and improve reimbursement outcomes. This will ultimately increase testing approval for patients who meet medical necessity criteria.
- ✓ **Case Management** service for genetic tests is provided in partnership with Metis Genetics to clients who are interested in contracting additional laboratory genetic counseling services for case review.
- ✓ **Laboratory Stewardship Standards** created by the National Committee for Laboratory Stewardship (NCLS) will include checklists for promoting and formalizing laboratory stewardship programs. The core elements will also be helpful for independent commercial clinical laboratories.



The Power of the PLUGS® Network

ACL Laboratories
 Aetna
 AiLife Diagnostics, Inc.
 Akron Children's Hospital
 Arkansas Children's Hospital
 Baylor Genetics
 Blue Shield of California
 Boston Children's
 Bronson Methodist Hospital
 CentraCare Health
 Children's Health
 Children's Healthcare of Atlanta
 Children's Hospital Colorado
 Children's Hospital of Los Angeles
 Children's Hospital of Philadelphia
 Children's Hospital of Pittsburgh of UPMC
 Children's Hospital of Wisconsin
 Children's Hospitals and Clinics of Minnesota
 Children's National Health System
 ChristianaCare
 Cincinnati Children's Hospital Medical Center
 Cleveland Clinic
 Cook Children's Medical Center
 Concert Genetics
 Dayton Children's Hospital
 East Tennessee Children's Hospital
 Fairview Health Services
 Fred Hutchinson Cancer Center

Froedtert Health
 Geisinger
 GeneDx | Sema4
 Genetic Support Foundation
 Global Genes
 Guardant Health
 Gundersen Health System
 HealthPartners (Park Nicollet / Regions and
 Methodist Hospitals)
 Intermountain Healthcare
 Johns Hopkins Hospital
 Kaiser Permanente - SCAL Region
 Kaiser Permanente NW Regional Lab
 LAC+USC Medical Center
 Lahey Hospital and Medical Center
 Le Bonheur Children's Hospital
 Legacy Health
 Lifespan Academic Medical Centers
 Lurie Children's Hospital of Chicago
 MedStar Health
 Mercyhealth
 Metis Genetics
 Mountain States Regional Genetics Network
 MultiCare Tacoma General Hospital
 Nationwide Children's Hospital
 Nemours Children's Health
 New York Presbyterian Hospital

Nicklaus Children's Hospital
 NW Rare Disease Coalition
 Ochsner Health System
 Oregon Health Sciences University (OHSU)
 Pathnostics
 Penn Medicine
 Phoenix Children's Hospital
 Providence Health & Services
 Providence Sacred Heart Medical Center
 Quest Diagnostics
 Rady Children's Institute for Genomic Medicine
 Saint Francis Health System
 Sanford Health
 Southern Illinois Healthcare
 SSM Health Cardinal Glennon Children's Hospital
 SSM Health St. Mary's Hospital - Madison
 St. Jude Children's Research Hospital
 St. Louis Children's Hospital
 St. Luke's
 Stanford Healthcare

Stormont Vail Health Laboratory
 Sutter Health
 Texas Children's Hospital
 TriCore Reference Laboratories
 TriHealth
 UC Davis Health
 UCLA Health
 UCSF Benioff Children's Hospital Oakland
 University of Florida Health
 University Of Kentucky Chandler Medical Center
 University of Michigan Health System
 University of Missouri
 University of North Carolina
 University of Virginia School of Medicine
 University of Washington
 UW Health University Hospital
 Valley Children's Hospital
 Versiti
 Wake Forest Baptist Health
 Wellspan

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GOLD



MAYO CLINIC
LABORATORIES



PREVENTION
GENETICS part of EXACT SCIENCES



CORPORATE



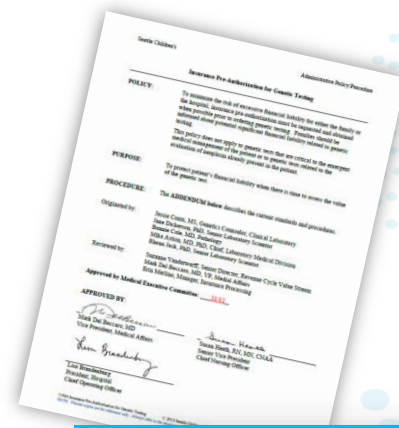
PARTNERS



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Stewardship Program Development Tools

- ✓ Customized strategic assessment from the PLUGS Team
- ✓ Policies, procedures & communication templates that help providers reduce unnecessary testing & correct test orders
- ✓ Database for collecting, tracking, & analyzing cases
- ✓ Tool to assess the risk of errors in send-outs area
- ✓ Provider-satisfaction survey to solicit feedback regarding the program
- ✓ And much more...

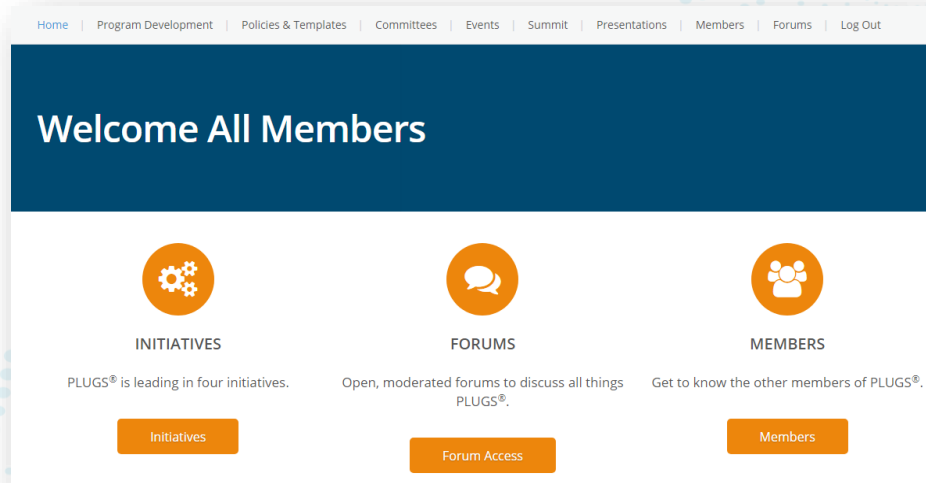


MR	1438	request, follow up	Yes
Referral Name	Contra, Nicole	Assigned to	David Sherman
MRN	123456	Immunizations	15 year old female with mild stable aortic root enlargement, scoliosis, prelex excavation and a paternal family history concerning for
Accession Number		Outpatient	
Ordering Provider	Walters, Stephanie	Patient Type	Trying to establish dx & guide appropriate mgmt.
Resident	82	Clinical Necessity	
Provider Specialty	Genetics	Immunizations	Sequential testing requested, possible cost savings if del/dup not needed. low-\$1200 D/D-\$1200
Request Date	6/7/2013	Updates	
Requested by	Jane Dickerson	Presymptomatic	No
Current Order	Core	Cost Savings	\$1,200.00
Test request	FBN1 sequencing, reflex to del/dup	Results supported	Unclear
Test Request sent	FBN1 sequencing, reflex to del/dup	Result details	FBN1 pt not
Quantity sent	5		
Reference Lab	CFOT		
Reference Lab Test	CFOT		
Cost	\$1,400.00		
Test sent	\$1,200.00		
Specimen type	DNA Banking		
Received	6/2/2013		
Submitter, in problem	Sequential Testing		
MRN, last	123456		
Submission	PLUGS		



Be Connected

- ✓ PLUGS Committees
 - National Committee for Laboratory Stewardship (NCLS)
 - Informatics
 - Insurance Alignment
- ✓ Weekly Newsletter
- ✓ Monthly Member Meetings
- ✓ Website: www.schplugins.org
- ✓ Discussion Forum
- ✓ Office Hours/Call Center



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Education

- ✓ Annual and regional conference
- ✓ Quarterly member meetings
- ✓ Monthly webinars



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SUMMIT

Join us for the annual PLUGS Summit, where stakeholders gather to learn practical tools for laboratory stewardship program development and insurance alignment that will apply to hospitals, health systems, reference labs, insurance payers, and patients.



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The savings from eliminating
unnecessary esoteric laboratory tests will
pay for a PLUGS membership
in about 5 days.

**The other 360 days of savings are for your health system
& your patients.**

APPENDIX 1:

Seattle Children's Hospital Lab Stewardship Program



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Test Utilization: Four Big Problem Areas

- 1 Misordering tests
- 2 Misinterpreting test results
- 3 Failure to retrieve and act on test result
- 4 Unnecessary cost to patients and healthcare system



Laboratory Test Stewardship

Refers to a healthcare “ethic that embodies responsible planning and management of resources”

$$\text{Value} = \frac{\text{Quality}}{\text{Cost}}$$



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Source: National Research Council. *Controlling Costs and Changing Patient Care?* The Role of UM. Washington, DC: The Natl Academies Press, 1989.

Lab Stewardship Interventions

LEVELS OF GUIDANCE		
Gentle	Medium	Strong
<ul style="list-style-type: none">✓ Posting of guidelines on the requisition✓ Computerized reminders regarding utilization guidelines✓ Educational lectures✓ Consensus reference laboratory pre-selection for specialized testing✓ Providing relative cost information in CPOE	<ul style="list-style-type: none">✓ Utilization report cards✓ Changes to manual requisition✓ Hiding tests in computerized provider order entry systems✓ Periodically reviewing and updating physician preferences	<ul style="list-style-type: none">✓ Privileging specific tests to specialty providers✓ Lab test formulary✓ Utilization report card with peer or leadership review✓ Requirement for high-level approval (e.g. Pathologist) or consultation (e.g. genetic counselor)✓ CPOE: Hard stops



Case



Patient

12 y/o inpatient with hypoglycemia secondary to hyperinsulinism and associated seizures evaluated by Endocrinology

Testing

Genetic testing recommended to work up possible genetic etiology vs. insulinoma

Analysis

Requested concurrent analysis of 8 genes including "GLUT-1"

Review

Error caught on review by utilization management GC

GLUT-1

(glucose transporter type-1)

SLC2A1 gene

De Vivo disease

Order
Modified



GLUD-1

(glutamate dehydrogenase-1)

GLUD1 gene

Hyperinsulinemic hypoglycemia



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Interventions at SCH

HYPOTHESIS

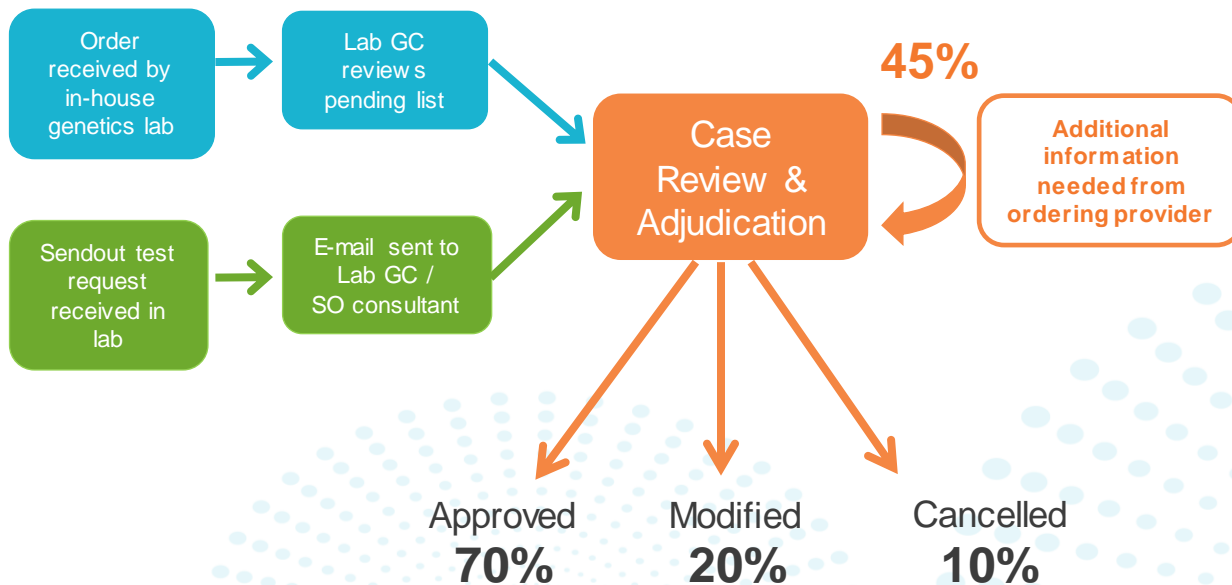
By implementing a review process for expensive genetic sendout tests, we will save \$ and improve value for patients.

Sample Test Review Criteria

- ✓ All Miscellaneous requests
 - ✓ Requests to send to non-preferred laboratory
 - ✓ Requests to send to international laboratories
 - ✓ Requests to send tests performed in-house
- ✓ All genetic send out tests
- ✓ Tests defined as under management

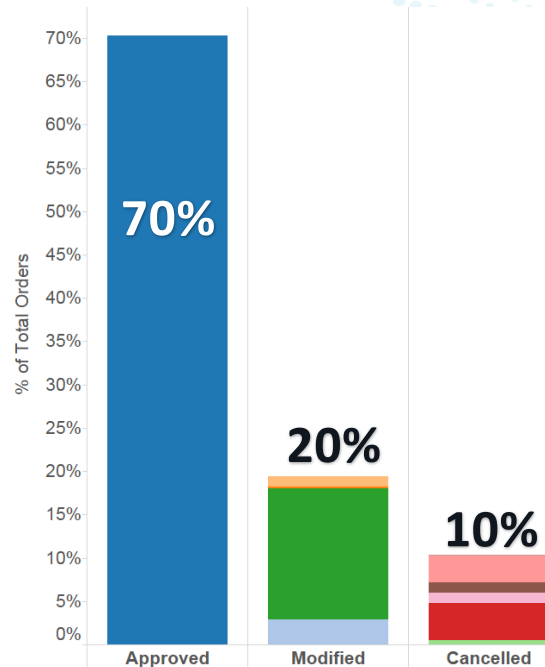


Case Review Process at Seattle Children's...



Seattle Children's: Lab genetic counselor review of genetic testing produces steady 30% order modification/cancellation rate

- Reasons for cancellation include duplicate testing and “not medically necessary”
- Modifications include correcting erroneous test orders and improving an order.
- >\$2 million in cost avoidance since 2011, with 50% accruing to patients and 50% to organization.



(N= 13,815 genetic cases SCH, Sept 2011 – Sept 2020)



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Case Review ROI

Cost-Avoidance Model for Genetic Test Review:*

- 10 requests/week (\$1560 average charge per test)
- 30 minutes/request
- 25% modification rate
- \$180 saved/request
- **ROI:** \$1800 saved/week with 5 hr consultant time/week=
 - \$93,600 saved/yr - ~\$11,180 consultant salary/yr**)=
 - **\$82,220 annual cost avoidance**

* Data for FY19 genetic test case review at Seattle Children's Hospital, N= 1548.

** Estimates to illustrate example using annual GC salary of \$90K. Specific costs per test, salary details, and cost-avoidance will vary and are unique to each institution.



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Surveys Reveal Positive Provider Response

I really appreciate the efforts of the UM team. **Given the state of our health care 'system'** we definitely need a **team of experts** to navigate these challenging waters!

I think the lab UM team overall is doing a phenomenal job. Their **services are definitely helpful**, if not necessary, for genetics and non-genetic providers alike **to appropriately plan and carefully select laboratory tests**.

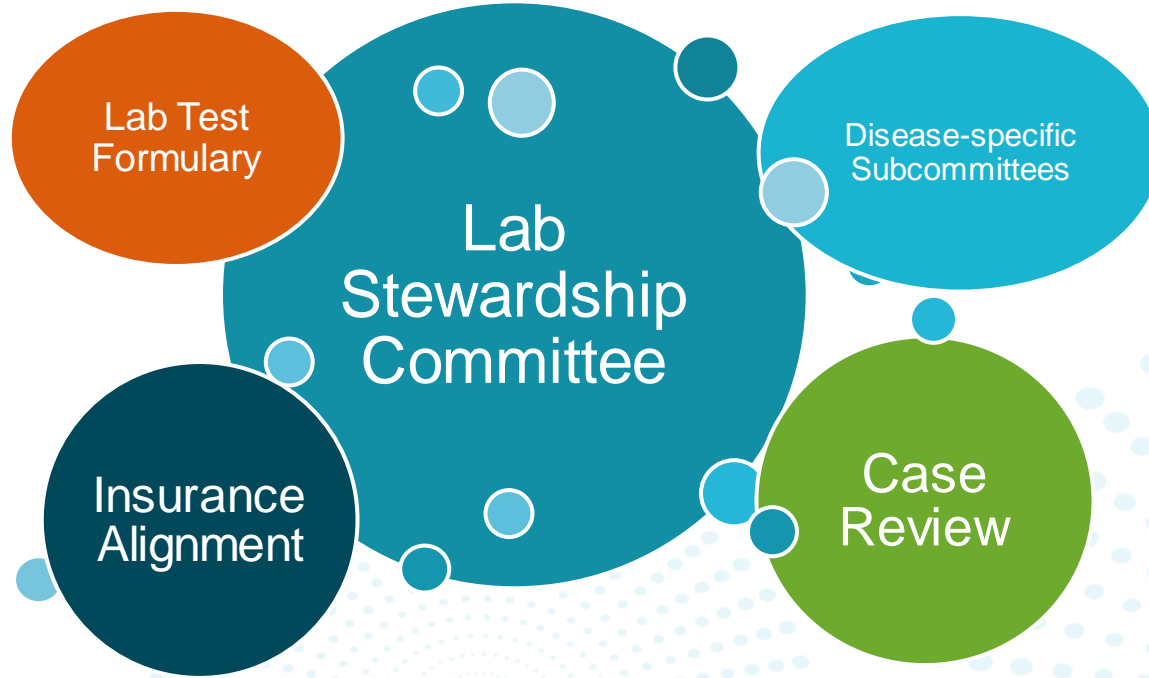


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SCH Lab Stewardship Program

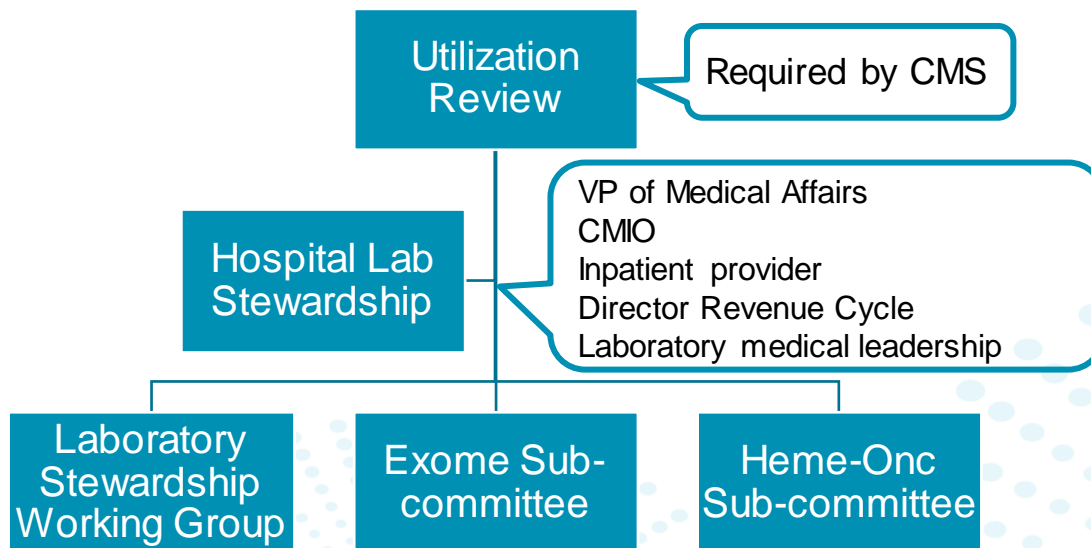


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Committee Hierarchy



Hospital Laboratory Stewardship at SCH

- Established Jan 2017
- Meets quarterly
- High-level decision making:
 - ✓ Clinician Test Requests (Pleximmune)
 - ✓ Peri-mortem genetic testing policy
 - ✓ “Free” testing policy
 - ✓ Policies/coverage for rapid exomes and tumor testing
 - ✓ Best-practice guideline for autoimmune encephalopathy

WHO:

VP of Medical Affairs
CMIO
Inpatient provider
Director Revenue Cycle
Laboratory medical leadership



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Laboratory Stewardship Working Group

- Committee includes:
 - pathologists, clinical chemists, laboratory genetic counselors, medical geneticists, specialty labs manager, lab business operations manager, clinical genetic counselors
- Weekly working meeting includes:
 - Case review
 - Test build & reference lab discussions (e.g. lab formulary)
 - Focused intervention project development/management



Initiatives

Improve lab test formulary:

- ✓ Monitor MISC tests & determine when to build
- ✓ Guide systematic process for removing tests from the menu

Example: MTHFR

- Notification process for providers, families & lab staff
- Improved patient care, reduced provider frustration, & reduced cost

Methylene Tetrahydrofolate Reductase, thermolabile



Important Note

Analysis of the *MTHFR* gene for variants c.677C>T & c.1298A>C is no longer offered at Seattle Children's.

Our Laboratory Test Utilization Management Team has determined that there is no proven, evidence-based clinical utility for this test for thrombophilia evaluation or other clinical indications.



APPENDIX 2:

Case Management



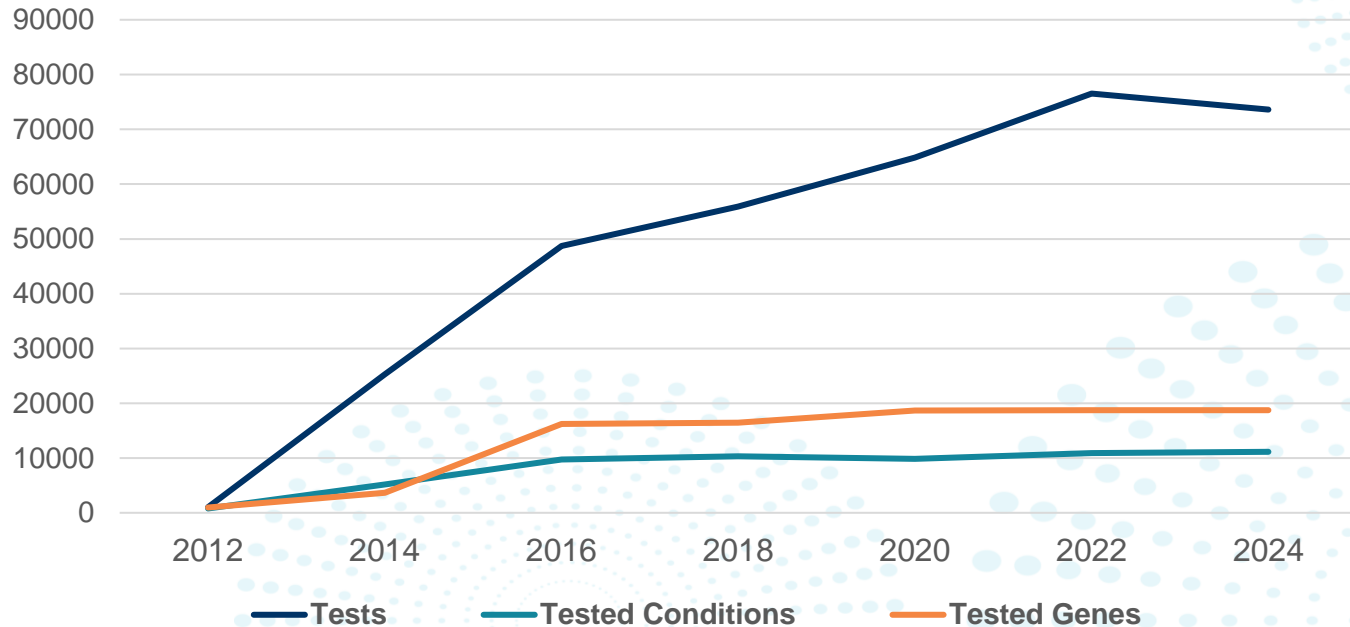
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Making the Case for Case Management

Genetic Test Registry Trends 2012 - 2024



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GTR: Genetic Test Registry
<https://www.ncbi.nlm.nih.gov/gtr>

Case Management from Reference Labs

RESEARCH ARTICLE

AMERICAN JOURNAL OF **medical genetics** PART A

Genetic Counselor Review of Genetic Test Orders in a Reference Laboratory Reduces Unnecessary Testing

Christine E. Miller,* Patti Krautscheid, Erin E. Baldwin, Tatiana Tvrdik, Amanda S. Openshaw, Kim Hart and Danielle LaGrave

Genetics Division, ARUP Laboratories, Salt Lake City, Utah

Manuscript Received: 1 May 2013; Manuscript Accepted: 3 January 2014

COMMUNIQUE

Test Utilization and Appropriate Test Orders: The Role of the Genetic Counselor

AJMG AMERICAN JOURNAL OF **medical genetics** PART A

[Explore this journal >](#)

RESEARCH LETTER

Adding value to genetic testing through utilization management: Commercial laboratory's experience

Gina K. Londre MS, Christina A. Zaleski MS ✉, Jessie H. Conta MS



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Case Management in the Hospital Setting

Improving the Value of Costly Genetic Reference Laboratory Testing With Active Utilization Management

Jane A. Dickerson, PhD; Bonnie Cole, MD; Jessie H. Conta, MS; Monica Wellner, BS; Stephanie E. Wallace, MD; Rhona M. Jack, PhD; Joe Rutledge, MD; Michael L. Astion, MD, PhD

Preventing Genetic Testing Order Errors With a Laboratory Utilization Management Program

Patrick C. Mathias, MD, PhD,¹ Jessie H. Conta, MS,² Eric Q. Konnick, MD,¹ Darci L. Sternen, MS,² Shannon M. Stasi, MS,² Bonnie L. Cole, MD,² Michael L. Astion, MD, PhD,^{1,2} and Jane A. Dickerson, PhD^{1,2}

Journal of Molecular Diagnostics, Vol. 17, No. 3, May 2015

SPECIAL ARTICLE

Improving Molecular Genetic Test Utilization through Order Restriction, Test Review, and Guidance

Jacquelyn D. Riley,* Gary W. Procop,* Kandice Kottke-Marchant,* Robert Wyllie,[†] and Felicitas L. Lacbawan*[‡]

ORIGINAL RESEARCH ARTICLE

Genetics
in Medicine

Promoting appropriate genetic testing: the impact of a combined test review and consultative service

Carlos J. Suarez, MD¹, Linbo Yu, MS², Natalie Downs, MS², Helio A. Costa, PhD³ and David A. Stevenson, MD⁴



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Optimize Your Lab Test Stewardship Program

Do you want to perform genetic test stewardship but lack the Genetic Counselor resources ?



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GeneTestAdvisor can help



GeneTestAdvisor (GTA)

Genetic counselors helping optimize genetic test selection

Created in collaboration between Metis Genetics® and PLUGS®,

GTA is a genetic test stewardship service providing:



Medical necessity



Optimal test selection



Cost efficiency



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GeneTestAdvisor can help



Healthcare Systems



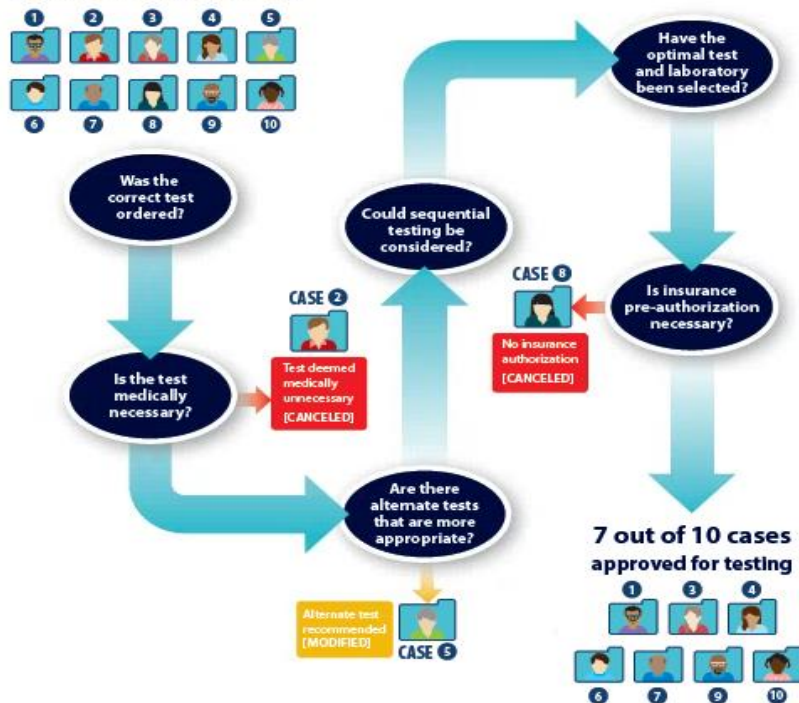
Patients



Payers

GeneTestAdvisor: Our Process

Cases submitted for review (10)






30% of genetic tests ordered are inappropriate and should be modified or canceled^{3,4}



- Customizable yet systematic approach
- Follow existing processes
- Interaction with ordering provider to define optimal test selection
- Prioritize medical necessity and professional guidelines
- Request appropriate clinical documentation

Case Study: Texas Children's Hospital

Case example: GTA potential cost savings on WES orders ²		
WES Order Review Guidance	Number of Cases	Estimated Cost Savings
 CANCELED	30	\$122,000
 MODIFIED	6	\$ 17,000
 APPROVED	8	\$ 0
Net cost savings*		\$130,000

The above example is based on simulated prospective case review of Whole Exome Sequencing (WES) orders. Estimated test charges were \$3000–\$4500 for WES, based on the average charge at three major reference laboratories; and \$890–\$2500 for panel tests.

*Net cost savings was calculated after case review fee applied. See reference 2.



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Conway ME, Kalejta CD, Stemen DL, Singh IR. The Importance of Genetics Experts in Optimizing Genetic Test Orders Through Prospective and Retrospective Reviews. *Am J Clin Pathol.* 2020;153(4):537-547. doi:10.1093/ajcp/aqz188



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Return on Investment

GeneTestAdvisor pays for itself.

30%

Average modification rate

Includes:

- Recommendation of different test or less expensive test
- Cancelling order

\$
Review

Cost savings per review

Dependent upon:

- Average test cost
- Ordering department
- Insurance contracts



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APPENDIX 3:

Insurance Alignment



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PLUGS Beliefs

- Understanding the insurance industry enables collaboration for fair payment for patients, labs, and insurers.
- The average lab or hospital executive is not more (or less) intelligent or ethical than the average insurance executive.



Lab and insurance executives in friendly debate over medical necessity



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Patient Financial Bill of Rights

1. ... an itemized bill
2. ... protection from surprise out-of-network bills
3. ... understand the provider network in the health plan
4. ... a stable network
5. ... know conflicts of interest
6. ... know facility fees
7. ... see the price list!
8. ... be offered cheaper options
9. ... to avoid a collection agency



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Rosenthal E. Nine Rights Every Patient Should Demand: We need a Financial Bill of Rights to protect consumers of health care from unfair charges. *New York Times* April 27, 2018.
www.nytimes.com/2018/04/27/opinion/sunday/patients-rights-hospitals-health-care.html

Challenges faced by Insurers:

- Coding: don't know what they are buying
- High cost/unit for genetic tests, PLAs
- Should they pay for DTC testing?
- Test ordering errors
- Lack lab experts to write policies
- Tests without proven clinical utility
- Billing abuses by labs
 - “free” testing
 - tendency to bill largest panel (respiratory, GI, tox)
 - billing below costs...
- Need for innovative partnerships regarding evidence accumulation

Source: Interviews by Dr. Dan Anderson and Mike Astion

More than a CPT Code: An interview with Matthew Fickie. *Clinical Laboratory News*, April 2019. www.aacc.org/publications/dn/articles/2019/april/more-than-a-cpt-code-a-view-on-genetic-testing-from-inside-a-health-plan



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3 strategies to improve insurance coverage

1. Collaborate with insurers to...
 - ↓ ↓ fraud, waste, and abuse
 - update medical policies
2. Share best practices to reduce administrative burden and align insurance work with stewardship practices
3. Help patients win ethical insurance grievances



PLUGS medical policy work: Philosophy

- ✓ Don't be afraid to **land a narrow policy where no policy exists**
- ✓ **Partner with everybody:** IVD (e.g. Illumina), labs, insurers
- ✓ Make as many **policies freely available** as possible
- ✓ **Praise insurers** who keep up to date with evidence



<http://6sme.com/blog/2017/08/01/the-secrets-to-success/>



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PLUGS Medical Policy Work

These PLUGS® policies were developed by experts within the PLUGS network and are intended for use by insurance payers, laboratories, providers, families, and consumer groups to guide coverage and reimbursement for medically appropriate genetic tests.

- ✓ Genomic Sequencing in Rare Disease Policy
- ✓ Rapid Genome Sequencing Policy
- ✓ Epilepsy Genetic Testing Policy
- ✓ Inherited Bone Marrow Failure Syndromes Policy
- ✓ MELAS Genetic Testing Policy
- ✓ MERFF Genetic Testing Policy
- ✓ Mitochondrial Genetic Testing Policy
- ✓ Mitochondrial DNA Deletion Syndromes Genetic Testing Policy
- ✓ LHON Genetic Testing Policy
- ✓ MNGIE Genetic Testing Policy
- ✓ NARP Genetic Testing Policy



Coding Conundrums

- Lack of specificity of codes in many domains of lab testing
- # of panel **codes** (~40 GSP codes) \neq # of panel **tests** (WAY more)
- Evolving complexities, including Proprietary Laboratory Analyses (PLA) Codes



Annual increase in PLA codes



Code Submission for Epilepsy Gene Panel

- Working group from PLUGS Insurance Alignment Committee
- Experts represented a variety of perspectives
- Application for GSP (genomic sequencing procedure) code submitted with support from the American Academy of Neurology
- Code approved! Included in the 2021 CPT code set

Approved!



GSP-Epilepsy 81XX6

Add genomic sequencing procedure code 81XX6 for reporting epilepsy gene panel

CPT® Smart App

Submit an online application with the CPT® Smart App.

[Start Your Application](#)

<https://www.ama-assn.org/practice-management/cpt/cpt-code-change-applications>



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PLUGS Preauthorization Toolkit

- Working group from PLUGS Insurance Alignment Committee
- Experts represented a variety of perspectives
- Tool includes practical guidance for insurance preauthorization coordination & workflows

TABLE OF CONTENTS

I. Laboratory Stewardship

Laboratory Stewardship for Genetic Tests
Current Procedural Terminology (CPT) Codes
Coding Genetic Tests: Multi-Gene Panels, Exome Sequencing, & PLA Codes

II. Preauthorization

The Basics
The Appeals Process
External Review

III. Implementing a Preauthorization Process

Introductory Assessment Questionnaire
Workflow Considerations
External Resources for Preauthorizations

IV. Payer Policies, Medical Necessity, & Documentation

Navigating Payer-Specific Policies
Medical Necessity Documentation and Required Test Rationale

V. Partnering with Payers to Reduce Administrative Burdens

Support for a successful grievance



**Complex Lab Tests:
How to Get Them Covered**



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Utilization Guidance Services

We developed a tool for patients & families that provides information about payment systems for complex lab tests & guidance/checklists on navigating an appeal.

Feedback from patients & families:

"I wish I would have had access to this guide during my years of struggle to get a diagnosis, it would have made my life a lot easier."

"The checklists are extremely helpful and synthesize large amounts of complex information."

schplugins.org/plugs-patient-toolkit/



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Insurance Alignment Committee



Systematic Solutions to improve preauth processes / workflow

- ✓ Standardize workflow within institution
- ✓ Right person doing right work
- ✓ Align approach with payer systems
- ✓ Focus on stewardship at all steps



Coding Transparency

- ✓ Obtain new CPT codes to improve coding transparency
- ✓ Provide evidence reviews for PLA codes



Policy Creation & Improvement

- ✓ Develop rational policies using experts
- ✓ Distribute policies
- ✓ Create infrastructure to ensure policies are kept up-to-date



Insurance Alignment: Systematic Solutions



Standard SOP for genetic testing
preauthorization



Robust case review process supports
efforts to obtain exemption from payer
preauthorization process



Strong partnership with local payer
resulted in significant improvement in
authorization & reimbursement for exome
sequencing



Streamlined process that is integrated in
Cerner and improves insurance
reimbursement rates, reduces time required
to obtain authorization and significantly
improves efficiency



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APPENDIX 4:

National Committee for Laboratory Stewardship (NCLS)



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National Committee for Laboratory Stewardship

MISSION

Improve the quality and value
of clinical care
through establishing
national standards for
laboratory test utilization

VISION

To promote and enable
the highest standards of
effective test utilization in
every clinical setting

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Patient-centered
Laboratory Utilization
Guidance Services

Guidelines Published in J. of Applied Laboratory Medicine

The
Journal
of **APPLIED LABORATORY MEDICINE**
An AACC Publication

Transforming laboratory utilization review into laboratory stewardship: Guidelines by the PLUGS National Committee for Laboratory Stewardship

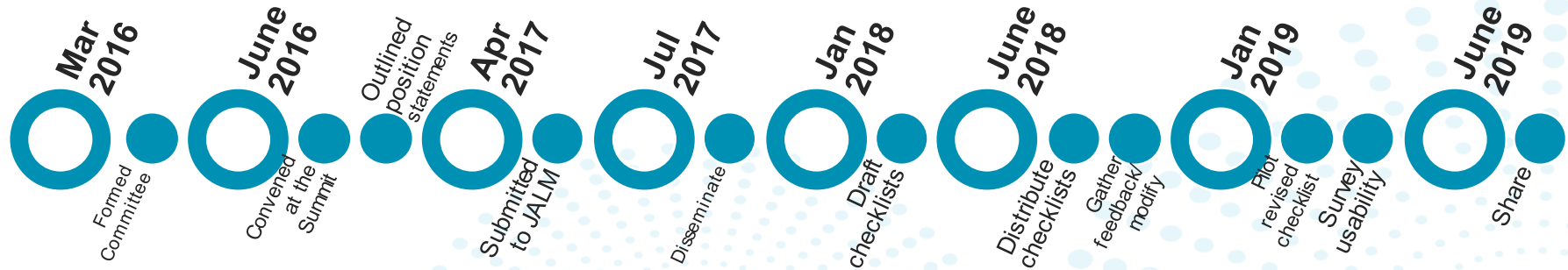
Four basic elements of lab stewardship programs:

- 1 Governance
- 2 Interventions
- 3 Data extraction and monitoring
- 4 Review and improve

Dickerson, J.A.; Fletcher, A.H.; Procop, G.W.; *et al.* Transforming laboratory utilization review into laboratory stewardship: Guidelines by the PLUGS National Committee for Laboratory Stewardship. *Journal of Applied Laboratory Medicine*. 2017; 2(2): 259-268.

NCLS Progress and Goals

- Gather feedback from published guidelines
- Create detailed checklists
- **Pilot checklists**



We need you!

Laboratory Stewardship Checklist: Instructions

This checklist can be completed by one or several team members familiar with your institution's laboratory stewardship program. Prepare to spend 1-4 man hours completing the below checklist. Because this checklist covers multiple disciplines, we recommend identifying a few key stakeholders to complete together. These stakeholders may include laboratory administrative director, laboratory medical director, laboratory stewardship committee clinicians, or informaticist. You may consider completing together or distributing the checklist among the key stakeholders to make sure different perspectives are captured.

Laboratory Stewardship Checklist: Governance

Leadership Commitment

A successful committee needs support from institutional and medical leadership. Individual leaders can provide this support by participating on the committee, appointing a chair/co-chair, or recommending members. Leadership support will also help determine the composition of the committee and the governance structure (i.e., the department that has ownership of the committee). It is recommended that the committee report back to both institutional and medical leadership on a regular basis to share success, as well as to request assistance for challenges.

1. Does the institution have a dedicated hospital-wide committee geared towards the improvement of laboratory stewardship?
☐ Yes
☐ No
2. Does your facility have a formal, written statement of support from leadership (outside of Pathology/Laboratory Medicine) that encourages laboratory stewardship efforts?
☐ Yes
☐ No
☐ Under consideration.
3. Does your facility receive any financial support from your institution for laboratory stewardship activities (e.g., support for salary, training, or IT support)?
☐ Yes
☐ No
☐ No budget, but ancillary support provided

Step 1: Complete the checklist.

Step 2: Give feedback with usability survey.



<https://redcap.iths.org/surveys/?s=TYNPMPPKPT>



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