CLINICAL LABORATORY TESTING VOLUME 2: KEY PLAYERS FOR LABORATORY TESTING, BUSINESS TRENDS AND STRATEGIES
(SAMPLE COPY, NOT FOR RESALE)
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1. Overview

Clinical laboratory analysis is one of the most important sections of medical care, generally involved in over 70% of medical diagnoses, but accounting for less than 1% of overall healthcare expenditures. By all accounts, clinical lab analysis is very mature, large and diverse. The term clinical laboratory analysis usually refers to determining the concentration or activity of a protein, carbohydrate, lipid, electrolyte, enzyme or small molecule in easily collected body fluids, such as blood, serum, plasma, urine, or saliva. Clinical laboratory analysis is not necessarily limited to these determinations. The analysis of virtually any biologically active substance—any place in the body—can loosely be defined as clinical laboratory analysis. Traditional specialization barriers, such as microbiology, hematology, blood banking, immunology and even anatomical pathology are rapidly fading both operationally and instrumentally in the face of rapid technological innovation. But for the sake of defining the subject to a reasonable size, a more traditional scope of clinical laboratory to be the subject of this study. As such, the purpose of this report is to describe the specific segments of the clinical laboratory analysis business and the strategies used by laboratory companies to develop new business opportunities. Although there is mention of world testing business, the emphasis of this report is on the U.S. market. However, most of the trends and business practices of the clinical lab testing business apply very well to other parts of the world. Within this area of clinical laboratory analysis, the report covers those segments that are highly active in terms of innovation and growth. Specifically, this clinical laboratory business report examines the retail markets for small labs and highly-automated, large labs, as well as hospital and doctor’s office labs.

1.1 Objectives of the Report

The emphasis in this analysis is on those companies that are actively analyzing and marketing laboratory data (as opposed to IVD manufacturers of lab equipment) for the clinical setting, which include hospitals, independent commercial clinical labs, physician’s offices and physician groups and miscellaneous clinics. This study concentrates on the clinical laboratory industry in the U.S. To a lesser extent the report examines the laboratory testing business and the world. Particular attention is paid to those areas of the clinical laboratory instrumentation sector that are showing the greatest growth or the most innovation. The report attempts to answer the questions:

- What companies are the key players in retail clinical lab testing, and what are their business strategies?
- What are the best growth opportunities in retail clinical laboratory testing?
- What is happening with the information revolution, and how is it affecting clinical lab testing?
- What are the development trends, especially in acquisitions and mergers?
- Where are the new market growth areas?

This examination reviews the market for clinical laboratory data used in clinical practice. It defines the dollar volume of retail sales in each major market segment determining and reporting clinical lab results, and analyzes the factors that influence the size and the growth of the individual market segments. The report details market sizes and growth rates for the U.S. markets for testing procedures (rather than sales of reagents and equipment). The study surveys some of the key laboratory companies who are marketing clinical laboratory data into the medical market. Each company is discussed in depth with a section on the history of the company, the product line, business and marketing analysis, and a subjective commentary of the position of the company in its market.

Unique benefits of this report are:

- In-depth analysis of the major sectors of the retail clinical laboratory business sector, their size, growth rates and major drivers.
- Presentation of some of the emerging business practices, elucidating the potential areas that could gain traction in this market.
- Analysis of the partnerships and alliances the various key sector players have forged, as well as describing financings of these market participants, giving insight into potential market collaborations.
- Examination of new business methods for clinical laboratories to identify lead positions and potential future growth areas.
- The reader will gain an understanding of key areas of the clinical laboratory testing business.
- New ways to adapt technology innovations and create new revenue streams.
• Sales and marketing strategies that will improve net income.
• Which diagnostic tests are emerging as high profit drivers.
• Transition to a consumer-based lab model.
• Financial underpinnings of entrepreneurial labs.
• Networking opportunities.
• Insights into the boomer emerging market and their growing expenditures on healthcare.
• Increased merger and acquisition (M&A) activity.
• Shift to preventative medicine.
• Impact of Point of care testing.
• Elements of personalized medicine, genetic testing and pharmacogenomics.

1.2 Methodology

The author of this report is a Ph.D. in biochemistry from the University of Minnesota with many decades of experience in scientific writing and as a medical industry analyst. He has been a senior director of several large regional and national healthcare laboratories. He has over 30 years of experience in laboratory testing and instrument and reagent development technology as a licensed clinical laboratory director, as well as extensive experience in senior level management positions in biotech and medical service companies. The editor has a Ph.D. in medicinal chemistry from Medical College of Virginia, Virginia Commonwealth University, with postdoctoral work in clinical assay development and validation combined with molecular biology, and has worked in small and large pharmaceutical companies in the department of drug safety evaluation to support efforts in drug discovery and for commercialization of new chemical entities as drugs for over 15 years.

Company-specific information is obtained mainly from industry trade publications, academic journals, news and research articles, press releases and corporate websites, as well as annual reports for publicly-held firms. Additionally, sources of information include the non-governmental organizations (NGOs) such as the World Health Organization (WHO) and governmental entities like the U.S. Department of Health and Human Services (HHS) and U.S. federal agencies such as the National Institutes of Health (NIH), the Food and Drug Administration (FDA) and the Centers for Disease Control and Prevention (CDC). Where possible and practicable, the most recent data available have been used.

Some of the statistical information was taken from Biotechnology Associates’ databases and from TriMark’s private data stores. The information in this study was obtained from sources that we believe to be reliable, but we do not guarantee the accuracy, adequacy or completeness of any information or omission or for the results obtained by the use of such information. Key information from the business literature was used as a basis to conduct dialogue with and obtain expert opinion from market professionals regarding commercial potential and market sizes.

Primary Sources

TriMark collects information from hundreds of Database Tables and many comprehensive multi-client research projects, as well as Sector Snapshots that we publish annually. We extract relevant data and analytics from TriMark’s research as part of this data collection.

Secondary Sources

TriMark uses research publications, journals, magazines, newspapers, newsletters, industry reports, investment research reports, trade and industry association reports, government-affiliated trade releases and other published information as part of its secondary research materials. The information is then analyzed and translated by the Industry Research Group into a TriMark study. The Editorial Group reviews the complete package with product and market forecasts, critical industry trends, threats and opportunities, competitive strategies and market share determinations.
Market Forecasts and Modeling

The numerical data on market size, growth rates and sales forecasts are obtained from a well-examined model based upon quantitative market information obtained from the leading global companies in the sector, private seminar presentations by company experts and public SEC filings.

TriMark Publications Report, Research and Data Acquisition Structure

The general sequence of research and analysis activity prior to the publication of every report in TriMark Publications includes the following items:

- Completing an extensive secondary research effort on an important market sector, including gathering all relevant information from corporate reporting, publicly-available data and proprietary databases.
- Formulating a study outline with the assigned writer, including important items, as follows:
  - Market and product segment grouping, and evaluating their relative significance.
  - Key competitors’ evaluations, including their relative positions in the business and other relevant facts to prioritize diligence levels and assist in designing a primary research strategy.
  - End-user research to evaluate analytical significance in market estimation.
  - Supply chain research and analysis to identify any factors affecting the market.
  - New technology platforms and cutting-edge applications.
- Identifying the key technology and market trends that drive or affect these markets.
- Assessing the regional significance for each product and market segment for proper emphasis of further regional/national primary and secondary research.
- Completing a confirmatory primary research assessment of the report’s findings with the assistance of expert panel partners from the industry being analyzed.

1.3 Scope of the Report

This report deals with the business of testing the chemical constituents of blood, plasma or serum of the patient by clinical labs. The two most important areas where such tests are measured are in the hospital and independent commercial clinical laboratories. The third place these tests are measured is in physician office laboratories (POLs) and large physician groups. Newer areas of testing interest for these analytes can be satellite labs and pharmacies and corporate clinics.

The emphasis in this report is on those laboratory companies that are marketing clinical laboratory testing for analysis and data reporting to physicians for medical care of patients. The reader should consult other TriMark Publications reports at www.trimarkpublications.com for a detailed discussion of the other areas with the clinical laboratory market. A companion report, Clinical Laboratory Testing Volume 1: IVD Instruments and Reagents Markets, deals primarily with the IVD industry and the instruments and reagents that are marketed to clinical laboratories.

This analysis touches on the specialty testing areas in clinical laboratory diagnostic testing, such as point of care testing, genetic testing and cardiac markers, since these segments are frequently a part of the overall analytical focus of companies marketing general laboratory data. However, no effort is made to quantify the size of these individual markets. This is left to specific market reports on these subjects.

The report does not cover instruments and reagents markets or other diagnostic device markets, although many of the instruments, reagents and techniques in the clinical laboratory diagnostics market segment are intimately associated with these broader areas of the lab testing business. All of these subjects are treated thoroughly in other
TriMark reports. Although this examination mentions many common clinical laboratory testing procedures and analytes in passing, as well as techniques, such as measuring the serum concentrations of therapeutic drugs and drugs of abuse, no extensive or in-depth treatment of this subject is presented. Such a discussion is outside the scope of this analysis. This report reviews the clinical lab business market in the U.S. and worldwide. This market can be divided into four broad areas: 1) the hospital market; 2) the independent lab market; 3) the doctor’s office market; and, to a much lesser extent, 4) the clinic market.

1.4 Executive Summary

Clinical laboratory testing is generally categorized as either of two general areas:

- Clinical testing.
- Anatomical pathology testing.

Clinical and anatomical pathology procedures are frequently ordered as part of regular physician office visits and hospital admissions in connection with the diagnosis and treatment of illnesses. Certain of these tests and procedures are used principally as tools in the diagnosis and treatment of a wide variety of medical conditions, such as cancer, AIDS, endocrine disorders, cardiac disorders and genetic disease. Clinical lab testing is used in virtually every part of the health delivery system and end-users generally fall into one of five categories:

- Reference laboratories that conduct batteries of tests for physicians and hospitals.
- Hospital operating rooms, emergency rooms, laboratories, near-patient and patient bedside.
- Physician’s offices, walk-in clinics and surgeries.
- Pharmacies and supermarkets that offer in-store testing.
- Individuals who purchase kits for self-testing.

The clinical laboratory testing sector consists primarily of three types of providers:

- Hospital-based laboratories.
- Physician office laboratories.
- Independent clinical laboratories.

The major clinical testing companies estimate the annual market for their retail testing services (as opposed to the parallel instrument and reagent market for diagnostic tests) to be more than $[blank]. The diagnostic equipment and reagent market serving this sector is currently valued at $[blank] worldwide. The number of clinical laboratory tests carried out within hospitals in the U.S. was estimated to grow to [blank] tests per annum by [blank]. Most of these tests are performed as screening, or multi-channel tests, performed on automated laboratory analyzers specifically designed for that purpose.

The principal tests undertaken in these areas include: complete blood counts, prothrombin and coagulation testing, thyroid stimulating hormone (TSH), lipid panels, blood gases and electrolytes, cardiac markers, infectious diseases, whole-blood glucose, drugs of abuse testing (DAT), urinalysis, coagulation and cardiac monitoring. In the diagnostic medical testing market, the clinical laboratory sector offers the prospect for moderate growth and considerable new innovation.

Specialty labs, particularly for cancer diagnosis and treatment are high growth, high profile business situations. Tests such as Vitamin D, Hemoglobin A1c (HbA1c) and hormone tests are generally profitable and high markup tests, compared to high volume but low profit tests like complete blood count (CBC) or chemistry panels. Moreover, molecular diagnostic tests like hepatitis and HVC for infectious diseases, or cancer panels for genetic risk like Myriad’s BRAC analysis, the Agenda MammaPrint, or the Genomic Health OncoType DX Recurrence Score are very profitable (revenues north of $[blank]) and very high growth too ( [blank]% to [blank]%).
There are presently two major national independent commercial clinical laboratories which dominate the clinical testing business:

- LabCorp.
- Quest Diagnostics.

These laboratories dominate the independent clinical laboratory business. LabCorp’s clinical testing business achieved revenues of $6.7 billion for a growth rate of 4.4%, Quest Diagnostics’ revenue at $7.5 billion, grew 4.2% in 2011. Other large independent clinical laboratories form a second and third tier. The second tier is notable for its dominance by specialty (cancer) labs, which have grown in volume and profitability through the recent interest in molecular diagnostic methods for evaluating cancer patients. Third tier labs again are older, well-established specialty labs often dedicated to drug testing.

The general growth of 6% for independent labs and 5% for hospital based labs is higher than the two majors. Overall, publicly traded clinical labs grew by 7%. In contrast, cancer related specialty labs like Myriad, Genoptix and Genomic Health are growing at more than 30% to 50% per year. Drug detection labs like Medtox Scientific and Psychemedics are growing nicely, but Orchid has experienced year over year decreases in revenue primarily due to reimbursement constraints by government agencies which use their lab services.

Total Medicare expenditures were $523 billion in 2010 and are expected to increase in future years at a faster pace than either workers’ earnings or the economy overall. As a percentage of GDP, expenditures are projected to increase from 3.2% in 2007 to 10.8% in 2011 (based on intermediate sets of assumptions). Growth of this magnitude, if realized, would substantially increase the strain on the nation’s workers, Medicare beneficiaries, and the federal budget.

The clinical laboratory sector had total revenues of approximately $59 billion in 2011 divided between the three major categories, and accounts for less than 3% of the $2 trillion annually spent on healthcare services in the U.S. The lab testing industry is estimated to be growing at approximately 6% to 7% annually. Estimated revenue is predicted to be over $60 billion by 2015.

There are 4,100 clinical laboratories in the U.S. Routine tests account for 72% of the clinical laboratory market and are growing at approximately 5% annually. Anatomic pathology, including cytology, accounts for 17% of the clinical laboratory market and is growing at between 7% and 12% annually. Esoteric tests account for 9% of the clinical laboratory market and are growing at 15% annually. Substance abuse tests account for 2% of the clinical laboratory market and are declining at 5% annually.

In the U.S., approximately 85% of clinical diagnostic testing is currently conducted in hospital-based and commercial laboratories. A total of $28.6 billion was generated by all types of hospital-based clinical laboratories in the U.S in 2011. A total of $20.8 billion was generated by all types of independent clinical laboratories in the U.S.

The POLs market was estimated to be about $9 billion in U.S. sales in 2011, or about 14% of the total $58.0 billion generated by all laboratories in the U.S. in 2011. Physician office laboratories comprise 1% of the total number of reportable test results performed in the U.S. in 2011. The three most common (CLIA-waived and non-waived) tests performed at POLs are dipstick/tablet urinalysis, fecal occult blood, and urine pregnancy tests. Physician in-office labs for histology, dermatopathology and urology are becoming popular as a way to bring income to specialized physician group practices. Spending on high volume pathology testing increased 8% to approximately $8 billion in 2011. Individual tests increased more rapidly in 2011, e.g., FISH testing (34%), immunohistochemistry (18%), special stains (15%), and flow cytometry (13%).

Hot sectors in the clinical lab testing market include:

- Workplace drugs-of-abuse testing.
- Clinical toxicology.
- Clinical testing for the pharmaceutical industry.
• Companion diagnostic testing.
• Molecular diagnostic testing.
• Cardiac markers.
• Genetic testing.
• Predictive medicine testing.
• Personalized medicine.
• Cancer testing.
• Cell based cancer testing.
• Monitoring technologies.
• Anatomic pathology.
• In-office labs for histology, dermatopathology and gastroenterology.

Worldwide M&A activity is high in the clinical laboratory sector. Consolidation in the clinical laboratory industry has resumed its generally strong and aggressive pace found in 2007 and 2008, where mergers or acquisitions have been completed in the period between January and December. In 2007, M&A activity in the laboratory industry was characterized by larger acquisitions for greater sums and culminated in Quest Diagnostics' acquisition of AmeriPath, Inc. Most striking about the M&As was the relative lack of participation on the part of Quest. In the recession year of 2009, M&As in the clinical lab sector still continued, albeit at a much slower pace. By 2010 and 2011, acquisition in the clinical lab testing space increased to the most active in years, with Quest very active in 2010, and LabCorp more active in 2011.

Drivers of Clinical Lab Testing Volume

• Aging of the population of the U.S.
• Awareness by patients of the value of laboratory tests.
• Decrease in the cost of tests.
• Decrease in the influence of managed care organizations on the ordering patterns of their physicians.
• Development of sophisticated and specialized tests for early detection of disease and disease management.
• Diagnosis and monitoring of infectious diseases such as AIDS and hepatitis C.
• Early detection and prevention as a means of reducing healthcare costs.
• Employer sponsored wellness programs.
• Research and development in genomics.

Barriers to Successful Clinical Lab Operations

• Regulation of clinical laboratory operations.
• Regulation of reimbursement for laboratory services.
• CLIA-88 extended federal licensing requirements.
• Compliance programs.
• Confidentiality of health information.
• Laboratory developed tests.
• Fraud and abuse regulations.
• Decreasing reimbursement rates.
• Delays to reimbursement by third-party payors.
• Difficulties in gathering complete and accurate billing information.
• Inability to collect accounts.
• Long collection cycles.
• Marketing only one diagnostic test.
• Difficulties to integrate newly acquired businesses and the costs related to integration.
• Failure to obtain and retain new customers and alliance partners.
• Reduction in tests ordered by existing customers.
• Continuous investigations of clinical laboratories by the government.
• Denial, suspension or revocation of CLIA certification or other licenses for clinical laboratories under the CLIA standards, revocation or suspension of the right to bill the Medicare and Medicaid programs loss or suspension of a license from CMS or other federal, state or local agencies.
• Changes in federal, state, local and third-party payor regulations or policies affecting governmental and third-party reimbursement for clinical laboratory testing.
• Failure to comply with the Federal Occupational Safety and Health Administration requirements and the recently passed Needlestick Safety and Prevention Act.
• Failure to comply with HIPAA, which could result in significant fines as well as substantial criminal penalties.
• Changes in payor mix, including any shift from fee-for-service to discounted or capitated fee arrangements.
• Increased competition, including price competition.
• Failure to comply with the Sarbanes-Oxley Act of 2002.
• Continued inconsistent practices among the different local carriers administering Medicare.
• The requirements of Medicare carriers to provide diagnosis codes for many commonly ordered tests (and the transition to a new coding set) and the possibility that third-party payers will increasingly adopt similar requirements.
• Inability to obtain from patients a valid advance beneficiary notice form for tests that cannot be billed without prior receipt of the form.
• Increased challenges in operating as a non-contracted provider with respect to health plans.
• The impact of additional or expanded limited coverage policies and limits on the allowable number of test units.
• Development of technologies that substantially alter the practice of clinical test medicine, including technology changes that lead to the development of more cost-effective tests such as 1) point of care tests that can be performed by physicians in their offices, 2) esoteric tests that can be performed by hospitals in their own laboratories, or 3) home testing that can be carried out without requiring the services of clinical laboratories.
• Development of proprietary tests by competitors.

The greatest growth in clinical laboratory will come in the following sectors:

• Workplace drugs-of-abuse testing.
• Clinical toxicology.
• Clinical testing for the pharmaceutical industry.
• Heavy metal, trace element and solvent analyses.
• Diabetes.
• Nucleic acid-based infectious-disease diagnostics.
• Cardiac markers.
• Cell-based cancer diagnostics.
• Blood bank screening.
• Genetic testing.
• Cancer biomarkers.
• Esoteric testing.
• Vitamin D testing.
• Molecular diagnostics.
• Anatomic pathology.
• Point of care testing.
• Physician’s office testing.
• Immunodiagnostics.

Key Developments

• Sector consolidation and continuing rate of M&A activity.
• Emergence of specialty testing labs, particularly in cancer testing and dermatopathology labs.
• Introduction of new diagnostic technology test platforms.
- Emphasis on high value added tests, for example, molecular diagnostic tests, vitamin D, opiate testing.
- New genomic based tests (gene expression profiling).
- Move by commercial labs into anatomic pathology, e.g., LabCorp acquires Dianon.
- Acquisition of podiatric pathology labs.
- Third-party payor payer consolidation.
- Esoteric tests like biomarkers drive new revenue.
- Competition is growing from non-traditional sources like satellite labs and diagnostic companies.
- Increasing use of thin film Pap smear technology, with reflexing tests for HPV.
- Improved lab tests for cancer and infectious disease.
- Growth of drug testing in the workplace, where in some industries almost ___% of employees use illicit drugs.
- Growing demand for healthcare services in emerging markets.
- Emergence of cancer biomarker tests.
- Decrease in value of clinical labs during M&A activity.
- Emergence of companion drug testing.
- More pharmaceutical drug screening testing.
- Aging of the population of the U.S.
- Awareness by patients of the value of laboratory tests.
- Decrease in the cost of tests.
- Decrease in the influence of managed care organizations on the ordering patterns of their physicians.
- Development of sophisticated and specialized tests for early detection of disease and disease management.
- Diagnosis and monitoring of infectious diseases such as AIDS and hepatitis C.
- Early detection and prevention as a means of reducing healthcare costs.
- Employer sponsored wellness programs.
- Research and development in genomics.