**MINUTES**

**CPIC CONFERENCE CALL**

DATE: July 3rd, 2014

| TOPIC | DISCUSSION/ACTION | FOLLOW-UP |
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| Housekeeping Announcements | Attendance will be taken by poll after each conference call. Members will receive an email with a doodle link after each call. Please enter your first and last name and check the box indicating you were in attendance. No action required if you were unable to make the conference call. | Kelly will send the poll link after each conference call. |
| CPIC guidelines in progress | - *G6PD/*rasburicase guideline: published on-line (http://www.pharmgkb.org/drug/PA10176)  *- CYP2C9*/ *HLA-B*/phenytoin: in review  - *CYP2D6*/SSRI: Evidence review complete and recommendation finalized; writing underway  - *CYP3A5*/tacrolimus: Evidence review complete; writing underway  Guideline Updates:  - *SLCO1B1*/simvastatin: published on-line (http://www.pharmgkb.org/drug/PA451363)  - *CYP2C9*/*VCORC1*/warfarin: Will be a major update. Evidence review underway.  - *HLA-B*/allopurinol: Starting now; identifying authors. | Kelly will follow-up. |
| Authorship guideline changes | The CPIC Steering Committee approved the changes to the CPIC Authorship guideline (discussed on the June CPIC conference call). Changes include:   1. Add that COIs due to employment by an entity in clear conflict will be considered problematic for authors. 2. Start with draft of Table 2 to gauge consensus of the group; however, lack of prescribing recommendations does not preclude a guideline (can be level C). 3. Add desirable characteristics for authorship:    1. Include leaders in the specific CPIC topic    2. Importance of authorship that lends credibility to the prescribing recommendations    3. international representation    4. evidence of prior publications relevant to the gene, drug, disease state    5. expertise in clinical pharmacogenetics    6. adequate representation of senior individuals    7. limited to those with an identified authorship role 4. Updates: not exactly q 2 yrs 5. Emphasize role of Steering committee in approving authorship | New authorship guidelines posted at CPIC site. |
| MolDX advice | Teri Manolio (NIH/NHGRI) contacted CPIC leadership regarding the potential for providing advice to CMS’s MolDx process for evaluating evidence to support coverage and reimbursement decision-making for PGx testing. CPIC has been contacted on other occasions to advocate for or weigh in on considerations for reimbursement. However, we don’t think we can comment from CPIC officially—primarily because CPIC’s stance is that CPIC provides guidance on HOW to use genetic test results, not whether or how they should be ordered or how they might be reimbursed.  We do know that individual members of CPIC may feel strongly about whether some pharmacogenetic test results should be generated and should be reimbursed, and we have a number of gene-specific experts who might like to be involved in providing information to CMS or others. Therefore, we can refer CMS to these content experts.  Furthermore, the ACMG, AMP, and several other organizations submitted a hundred-page letter outlining concerns with the MolDx process (available at <https://www.acmg.net/docs/MolDx_Coverage_Letter_and_Attachments_10302013.pdf> ). | If you are interested in being contacted by CMS for your input, please email Mary Relling ([mary.relling@stjude.org](mailto:mary.relling@stjude.org)) or Teri Manolio ([manoliot@mail.nih.gov](mailto:manoliot@mail.nih.gov)). |
| CPIC Informatics working group update | -Working group finalized implementation workflow diagrams and tables that combine both *CYP2C9* and *HLA-B* phenytoin recommendations (instead of two separate recommendations). Guideline in review with CPT now.  -The CPIC Informatics work group is researching the current activities of the HL7 Clinical Genomics work group (CG WG) to identify possible areas of overlap, specifically existing or emerging standards that may impact the content of the guideline supplemental tables. The CG WG is currently working on draft standards for associating genetic test results to phenotypes within the EHR and for representing family history. Additional opportunities exist in the areas of 1) developing LOINC codes to represent genetic tests and the associated results, and 2) developing a standard to represent genetic variations, although the CG WG is not currently working on these topics. The CPIC Informatics work group will continue discussing how to best engage the HL7 organization.  -Informatics working group continues to work on translation tables for upcoming guidelines and guideline updates.  -Mary Relling mentioned that the IOM Roundtable of genetic medicine is working on an initiative, “An Action Collaborative of the Roundtable of Translating Genomic Based Research for Health,” to facilitate translating genomic medicine into the medical record (e.g., defining features that should be included into a genetic test report). See <http://www.iom.edu/Activities/Research/GenomicBasedResearch.aspx> for more information.  -Marc Williams mentioned the NHGRI Genomic Medicine Working Group GMVII meeting on a similar topic <http://www.genome.gov/27549220> | -James, Michelle, and Bob will continue to update CPIC group on progress.  -Email Mary Relling ([mary.relling@stjude.org](mailto:mary.relling@stjude.org)) or Marc Williams ([mswilliams1@geisinger.edu](mailto:mswilliams1@geisinger.edu)) if you are interested in being involved. |