

# Conflict of Interest and Voting Policies for ClinicalPath Committees



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## Definitions

**ClinicalPath Co-Chairs (Co-Chairs)** are oncologists from within the practices who license ClinicalPath (ClinicalPath Network) and are selected to serve as one of two chairs for a ClinicalPath Committee (Committee). Co-Chairs are compensated \$1,000 per meeting cycle for their time (estimated at 2-4 hours per quarter).

**Voting Members** are any physicians from within the ClinicalPath Network who volunteer to participate on one or more ClinicalPath Committees and who complete a conflict of interest disclosure on an annual basis. There is no limit how many physicians from each organization can become Voting Members per committee.

**Observers** are invited guests of ClinicalPath as well as any interested physicians from the ClinicalPath Network who have not signed up to be a Voting Member. ClinicalPath Network practices may also invite other staff such as pharmacists to be observers. Observers may ask questions and participate in discussions but cannot vote.

**ClinicalPath Content Team** is comprised of Clinical Content Analysts, Content Managers, Clinical Pathway Pharmacists, Informatics Pharmacists, and Nurse Analysts. These individuals work closely with the Committees and Co-Chairs to develop all needed materials for Committee meetings, document discussions and decisions from Committee meetings, and incorporate approved changes to the ClinicalPath Pathways into the ClinicalPath Portal.

**Significant Changes** are any proposals that require a vote. This includes anything related to pathway branching, treatment recommendations, work-up, surveillance guidance, and monitoring. This does NOT include guidance notes, which are updated based on committee consensus.

## Conflict of Interest Policy

In order to minimize the risk of actual or perceived conflicts of interest that might arise with ClinicalPath Committee members, the following conflict mitigating controls are in place:

- All Co-Chairs and Voting Members must complete an annual conflicts of interest disclosure noting all personal and direct family member's financial relationships with vendors and the type of funding received:
  - Direct support for research (not payments to their institution)
  - Advisory board, consultant or speaker's bureau
  - Ownership, patent, royalty or employment

These disclosures include, but are not limited to, pharmaceutical and biotechnology companies as well as diagnostic companies. Disclosures for Co-chairs and Voting Members are available per request.

- A COI collection survey is distributed and memorialized by the ClinicalPath staff during the month of June for the year beginning July 1st. Updates to COI's should be made as they are incurred by re-completing the COI collection survey or by emailing [support@viaoncology.com](mailto:support@viaoncology.com).
- Co-Chairs and Voting Members are strongly encouraged, but are not required, to recuse themselves from discussing or voting on any matter for which they have a conflict of interest.
- The results of voting will be documented in the final meeting minutes and evidence reviews in terms of number of votes for, against and abstaining from each motion.
- ClinicalPath staff are not Voting Members and, as such, do not have a vote on any aspect of the ClinicalPath Pathways.
- Any physicians contracted as medical directors for ClinicalPath are required to complete an annual COI disclosure.



## Voting Policy

In order to ensure a fair and comprehensive physician-driven process for making changes to the ClinicalPath Pathways, the following policy has been developed and implemented:

- In preparation for Committee Meetings, the ClinicalPath Clinical Content Team prepares a proposed agenda for review, guidance, and approval by the Committee Co-chairs. Finalized agendas will include discussion topics and relevant citations for the committee and may include proposed voting measures as well. Agendas are distributed to all committee members for review and preparation for the committee meetings.
- At the Committee meeting, agenda items are presented for discussion by the committee. These discussions may result in proposed voting motions to modify the ClinicalPath pathway. Any new topic introduced during the Committee meeting that was not included on the agenda can be discussed if time permits but cannot result in a motion until the next meeting. This ensures that all Voting Members have an opportunity to review the relevant data before the topic moves to a proposed motion.
- There must be consensus from committee members present on the call in order to propose a motion to vote to modify the ClinicalPath pathway for Significant Changes.
- Following the Committee meeting, the ClinicalPath Clinical Content Team prepares minutes that include the proposed motion to modify the ClinicalPath pathway as well as the evidence and rationale for proposed changes. This information is sent to the Co-Chairs with written approval required by at least one Co-Chair.
- Upon approval by at least one Co-Chair, the ClinicalPath Clinical Content Team emails the proposed motions, minutes, and drafted pathway flowcharts to all Voting Members for that Committee.
- Voting Members have two business days to cast their vote of either Agree, Disagree, or Abstain.
- Voting members do not need to be present on the Committee call to be eligible to vote; however, in order to cast their vote by email, Voting Members must acknowledge that they have read the attached minutes from the Committee meeting.
- At least three votes from Voting Members are required to pass a motion.
- A simple majority of Agree votes (>50%) is required to pass a motion. Tie votes or less than 50% will result in no change to the ClinicalPath Pathway.
- Final minutes will reflect the total Agree, Disagree, and Abstain counts. Individual names/votes will not be reflected in the minutes or evidence reviews. A record of who voted, but not their actual vote, will be available to customer leadership for their physicians