

**Review of Priority Setting Process and Proposed Priority Issues**  
*Paul Wise, M.D., M.P.H.*

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DR. WISE: Thanks very much, Steve. Just to remind people, the Priority-Setting Task Force included members of the Committee and ex officios. You can see here on this list the membership.

We have also starred the people who were designated as cluster leads to help take us through the issues that we have identified as being potentially of highest concern.

I also want to, in addition to thanking the cluster leads, thank the staff, who have worked extremely hard and produced very high-quality work in helping us move through this agenda. That of course includes Sarah, but also Cathy Fomous, Darren Greninger, Kathi Hanna, and Linda Smith, who have really done a remarkable job putting this together and generating the issue briefs that we will discuss in a few moments.

I just want to quickly review the priority-setting process that we have used. Seventy-three potential priority issues were generated through a brainstorming session that we had at our February meeting earlier this year. We subsequently had discussions with ex officio members to make sure that we had a good sense of their concerns and the concerns of greatest interest to their respective agencies or departments.

We also solicited public comments and got a broad range of very helpful suggestions. In addition, we had specific interviews with both the content experts but also what we call vision leaders, to help make sure that we in fact had the best broad advice as to where we should be heading over the next few years.

These issues were then ranked by Committee members individually using a Likert scale. We then examined those priority issues and areas that emerged by just ranking the ones that were felt by Committee members to be the most important and the most relevant to our work, but also looking at affinities between the different issues to try to organize and create a coherent structure for the issues that were ranked high. Then we developed and confirmed that there were in fact a relatively small group of clusters of issues, based on both their content and the affinity within the patterns of voting that the members conducted.

The next steps were then to take those clusters and to develop issue briefs, which were distributed and really, I think, did a very nice job capturing the central elements of the clusters that were identified as being most important and relevant.

These clusters, just to remind everybody, were seven in number and included coverage and reimbursement for genetic services; ensuring the clinical utility of genetic information; genetics education and training, with attention to workforce diversity; informed consent, privacy, and discrimination issues in genomic data sharing; implications of consumer-initiated use of genomic services; public health applications of genomics research, with attention to health disparities; and genetics and the future of the healthcare system.

Just to identify what our goals are for today's conversation, we will first have presentations of each of the cluster areas by the cluster leads. There was a format that was suggested for the presentation of these issues. The order of cluster presentations in no way reflects anything about how we valued these issues. They are not ranked on the basis of any criteria. It is strictly the way we thought the order would be most helpful for presentation.

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We then want to discuss the specific policy questions and propose action steps in each cluster, and then to develop an overarching and flexible action plan.

There is no formal vote-taking today. We are really just looking for several things. One is to make sure that we got the issue right, that the central elements are truly reflected in the issue briefs and the presentations, and also to see if through the discussion we can develop or at least get a sense of a consensus of which of the seven deserve greatest attention, particularly in conversations with the incoming administration.

We will work through the seven clusters. These will be relatively short presentations. If you have questions for clarification or something that you really feel you need to voice at this time, that would be fine to ask the cluster leads. Otherwise, we have a lot of time set aside after the cluster presentations for discussion, for criticism, and additions. We would hope that the heart of the conversation would be after all seven clusters have been presented.

Comments or suggestions about this plan of action?

[No response.]