

PHELIX Rx Intelligence Summary

Traditional Medicare - Novitas | Phase 1 PRE-TEST | v1.5 | Novitas Fixed Standard

Patient	DOB	Sex	Provider	Specimen	Diagnosis
CARDIO DEMO1	07/01/1966	Male	Sam Smith, MD	CARDIO12341	I50.9 - Heart failure, unspecified

Phase 1 Genetic Rule

All relevant inherited genes are DEFAULT/ASSUMED NORMAL - NOT TESTED RESULTS. Actual tested genotype in the source report is excluded from Phase 1. Medication-driven functional PK changes remain active.

Current Medications

Fluoxetine 100 mg | Irbesartan 300 mg | Meloxicam 5 mg | Metoprolol 100 mg | Amiodarone 150 mg | Apixaban (Eliquis) | Eplerenone 25 mg | Simvastatin 40 mg

1. Clinical Priorities - Review First

Medication	Severity	Why Flagged	PK Effect	Dosing/Clinical Guidance
Meloxicam 5 mg	SEVERE	Current Novitas A58801 drug table includes meloxicam-CYP2C9; source has 1 Severe + 5 Major DDIs.	Assumed-normal CYP2C9 becomes functionally Slower than normal from medication inhibition; clearance may decrease and exposure increase.	CPIC/FDA/source guidance supports CYP2C9 review; monitor renal/GI/bleeding risk. Novitas coverage additionally requires a supporting ICD-10 from the CYP2C9 code group.
Simvastatin 40 mg	MAJOR	Current Novitas A58801 includes statins including simvastatin-SLCO1B1; source has 6 Major DDIs.	SLCO1B1 assumed Normal - NOT TESTED; current CYP/transport interactions may independently increase exposure.	CPIC/FDA/source: OATP1B1/CYP3A4 effects can increase simvastatin exposure/myopathy risk. Novitas coverage additionally requires a supporting ICD-10 from the SLCO1B1 code group.
Metoprolol 100 mg	MAJOR	Clinically important CYP2D6 substrate with fluoxetine strong inhibition; 4 Major DDIs. Metoprolol is NOT in current Novitas A58801 drug tables.	Assumed-normal CYP2D6 becomes functionally Slow; metoprolol exposure/response may increase.	FDA/source supports CYP2D6 exposure review clinically. Do not represent metoprolol as a Novitas qualifying drug-gene relationship.
Fluoxetine 100 mg	MAJOR	Strong CYP2D6/CYP2C19 inhibitor; 5 Major DDIs. Fluoxetine itself is NOT in current Novitas A58801 drug tables.	CYP2D6/CYP2C19 functional activity Slow despite assumed-normal genetics.	No genotype-based dosing recommendation in source; monitor response/adverse effects/QTc. Do not represent fluoxetine itself as a Novitas qualifying drug.
Irbesartan 300 mg	SEVERE	CYP2C9 substrate; 1 Severe + 5 Major DDIs. Irbesartan is NOT in current Novitas A58801 drug tables.	CYP2C9 functional activity Slower than normal; exposure may increase.	Monitor BP/renal function/potassium. Clinical PK risk is separate from Novitas coverage qualification.

2. High-Priority DDIs - Prioritized by Current Exposure Risk

Bucket	Source interactions	Phase 1 interpretation
2 or more drugs with increased exposure risk	Fluoxetine + Metoprolol; Irbesartan + Meloxicam; Meloxicam + Apixaban; Simvastatin + Apixaban	Both interacting drugs have source-supported increased-exposure mechanisms or current Slow/Slower pathway context.
1 drug with increased exposure risk	Irbesartan + Amiodarone; Meloxicam + Amiodarone; Eplerenone + Amiodarone; Apixaban + Amiodarone; Simvastatin + Amiodarone; Fluoxetine + Amiodarone	One interacting drug is the primary increased-exposure target in the source interaction statement.

3. TruMAP - Functional PK Map

Pathway	Start	Modifier	Final	Affected CURRENT drugs
CYP2D6	Normal - NOT TESTED	Fluoxetine strong; amiodarone moderate	Slow	Fluoxetine; Metoprolol
CYP2C19	Normal - NOT TESTED	Fluoxetine strong; amiodarone moderate	Slow	Fluoxetine
CYP2C9	Normal - NOT TESTED	Amiodarone moderate	Slower than normal	Irbesartan; Meloxicam
ABCB1/P-gp	Normal - NOT TESTED	Amiodarone moderate	Slower than normal	Simvastatin; Apixaban
SLCO1B1	Normal - NOT TESTED	No qualifying moderate/strong modifier	Normal	Simvastatin

4. TruIMPACT

Fluoxetine: strong CYP2D6 and CYP2C19 inhibition. **Amiodarone:** moderate CYP2C19, CYP2C9, CYP2D6 and in-vitro ABCB1 inhibition. Weak inhibition excluded.

5. TruSELECT - Screened Alternatives

Only controlled source alternatives may be screened. No alternative becomes CONSIDERED unless provider-selected/recorded. Full-regimen rescreen remains mandatory.

6. Autogenerated EMR Note

Phase 1 pre-test review uses assumed-normal genetics only. Current medication exposure produces functional slowing in CYP2D6, CYP2C19, CYP2C9 and ABCB1/P-gp. Novitas A58801 directly contains meloxicam-CYP2C9 and simvastatin-SLCO1B1 drug-gene relationships, but the only documented diagnosis I50.9 does not satisfy the current CYP2C9 or SLCO1B1 ICD-10 coverage groups. I50.9 does appear in the Novitas CYP2D6/81418 psychiatric medication-management code group; however, none of the CURRENT drugs is a Novitas-listed CYP2D6 drug for this indication. Amiodarone-to-propafenone trigger remains provider-selectable.

7. Suggested Medication Action Plan

Medication	Suggested MAP
Meloxicam	Suggested MAP applies if drug-related symptoms or non-therapeutic response are suspected. Review CYP2C9 functional slowing and renal/GI/bleeding risk.
Simvastatin	Suggested MAP applies if drug-related symptoms or non-therapeutic response are suspected. Review muscle symptoms/tolerance and transporter/CYP burden.
Metoprolol	Suggested MAP applies if drug-related symptoms or non-therapeutic response are suspected. Review HR/BP and CYP2D6 phenoconversion.
Fluoxetine	Suggested MAP applies if drug-related symptoms or non-therapeutic response are suspected. Review QTc and CYP2D6/CYP2C19 inhibition.
Irbesartan	Suggested MAP applies if drug-related symptoms or non-therapeutic response are suspected. Review BP/renal/potassium and Severe amiodarone interaction.

Clinician / PharmD Comments