

Conflict of Interest 101

Identifying, Managing, and Preventing Research Risk

HCCA Virtual Research Compliance Conference
June 3, 2020

1

What We'll Cover Today

- Understanding the Sunshine Act, including recent changes and how they impact your research organization
- Gain useful insight and tools for managing COI research risk at your institution
- Learn to identify risks using the Open Payment database

Disclaimer: None of the speakers are attorneys and are not providing legal advice.

2

Polling Question 1-

How many years of experience do you have in conflict of interest management?

- I'm brand new here
- I've been doing this for one to three years
- I've been a COI manager for four to eight years
- I've been doing this since dinosaurs roamed the earth

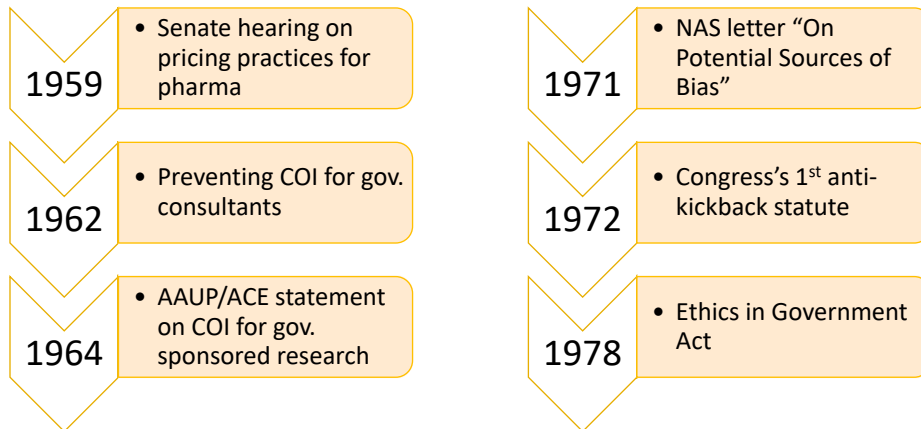
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COI: Origin story

Presented by Rebecca Scott, Compliance/Privacy Manager, UK HealthCare

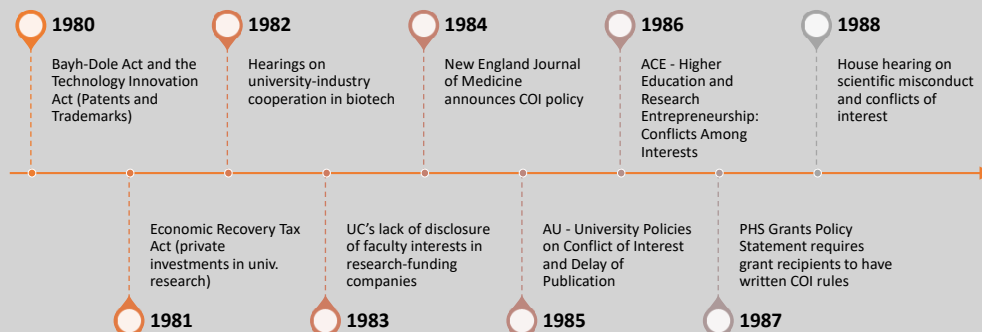
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Historical Look at Conflict of Interest



5

The 1980's



Source: Conflicts of Interest in Medical Research, Education, and Practice, 2009, NIH

6

Omnibus Budget Reconciliation Act ('89)

STARK LAW!!

Bans self-referral arrangements for clinical laboratory services under Medicare

Later updated in 1993 and 2004, expanding and defining restrictions

7

1990

- *Are Scientific Misconduct and Conflicts of Interest Hazardous to Our Health?*
- AAMC – Guidelines for Dealing with Faculty Conflicts of Commitment and Conflicts of Interest in Research
- AMA – statement on inappropriate gifts to physicians from industry
- ACP – paper on physicians and pharma

Source: Conflicts of Interest in Medical Research, Education, and Practice, 2009, NIH



8

The Rest of the 1990's

- NAS report *Responsible Science* “The issues associated with conflict of interest in the academic research environment are sufficiently problematic that they deserve thorough study and analysis by major academic and scientific organizations.”
- 1993: Minnesota law limiting drug company gifts and requiring disclosure
- 1994: NSF creates Investigator Financial Disclosure Policy
- 1995: PHS 42 CFR 50 on promoting objectivity in research
- 1998: FDA 63 FR 5233 clinical investigators must disclose financial relationships

Source: Conflicts of Interest in Medical Research, Education, and Practice, 2009, NIH

9

Jesse Gelsinger

- FDA investigated Gelsinger's death
 - PI ignored exclusion criterion in clinical trial
 - University didn't report serious adverse events from gene therapy
 - Didn't disclose death of monkeys in pre-human trials

10

Broad Media Coverage



Wired: Another Chance for Gene Therapy?



Guideapigzero.com: Paul Gelsinger, Jesse's father, tells of Jesse's death



Bioethics.net: On gene therapy and informed consent



BBC: Horizon Trial and error



New York Times: The Biotech Death of Jesse Gelsinger



Nature: Gene-therapy trials must proceed with caution



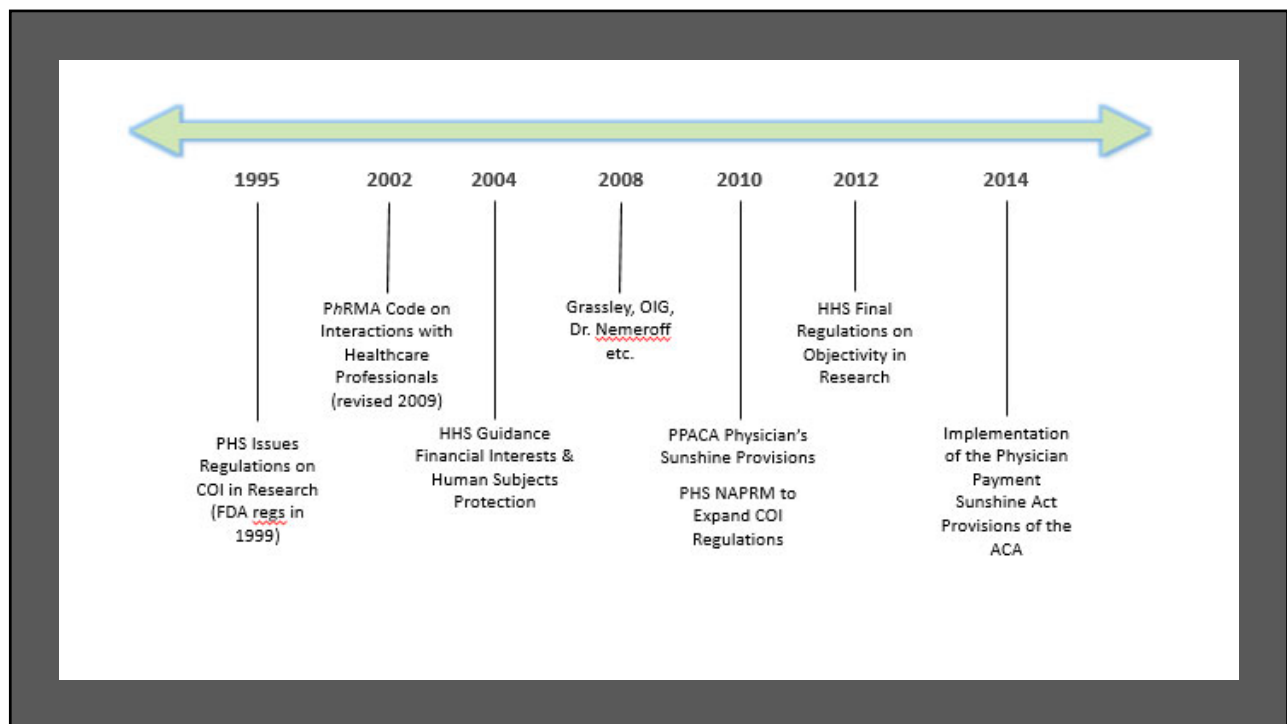
Scientific American: An Interview with an Unfortunate Pioneer

11

Dr. Charles B. Nemeroff

- \$2.8M in consulting for pharma from 2000 to 2007
- Example: Disclosed less than \$10,000 in one year, but earned \$170,000 from GSK
- At one point consulted for 21 drug and device companies simultaneously
- Consulted for companies while engaging as PI in their clinical trials
- Still practicing today
- Led to Senator Grassley's investigation into other physicians and pharma's influence on their prescribing practices
- Example: Dr. Joseph Beiderman

12



13

Sunshine Act

2010

14

Purpose

- Promote transparency in financial interactions between pharmaceutical and medical device companies and certain healthcare providers
- Created by the Affordable Care Act
- Implemented in 2014

15



Mandate

- Manufacturers of a drug, device, biological or medical supply covered under Medicare, Medicaid or the Children's Health Insurance Program must report most payments or other transfers of value made to a covered recipient (*i.e.*, physicians and teaching hospitals)
- Applies only to manufacturers and group purchasing organizations
- Transactions reported involve teaching hospitals and physicians

16

Reporting



Manufacturers must annually register and submit reports to the Centers for Medicare & Medicaid Services (CMS) by 90 days after calendar year end



Separate reports for general transfers of value and research transfers of value



Annual reports cover transfers of value made in the preceding calendar year

17

Types of Reporting Requirements

Research Payments

Payments or other transfers of value if (1) made in connection with “research” and (2) protocol or written agreement

General Payments

All other transfers of value

18

18

Payments Categories

- Consulting Fee
- Honoraria
- Gift
- Entertainment
- Food and Beverage
- Travel and Lodging
- Education
- Charitable Contribution
- Royalty or License
- Grant
- Research
- Compensation for services other than consulting, including serving as faculty or as a speaker at a venue other than a continuing education program;
- Current or prospective ownership or investment interest;
- Compensation for serving as faculty or as a speaker for a non-accredited and noncertified continuing education program;
- Compensation for serving as faculty or as a speaker for an accredited or certified continuing education program;
- Space rental or facility fees

19

19

Covered Recipients

Physicians

- Licensed physician, osteopath, dentist, dental surgeon, podiatrist, optometrist, or chiropractor
 - Legally authorized to practice medicine
 - U.S. or U.S. territory (Puerto Rico, Virgin Islands, Guam and American Samoa) even if living abroad
- Excludes:
 - Employee of manufacturer
 - Residents

Teaching Hospitals

- Any institution receiving Medicare direct or indirect graduate medical education payments
- CMS posts list annually on Open Payments website and manufacturers may rely on that list

20

Research Transfers of Value

- Manufacturers must track and report the following information for research transfers of value related to clinical research:
 - Name of individual/entity directly receiving the transfer of value
 - Physician: Name, business and email addresses, National Provider Identifier (NPI), state license number and state, specialty (as per the taxonomy and code in National Plan and Provider Enumeration System (NPPES)) and type of medicine practiced (M.D., D.O., D.P.M., O.D., or D.C.P.)
 - Teaching Hospital: Name, business and email addresses, TIN and NPI (if applicable)
 - Other Third Party: Name and business and email addresses

21

Data Elements

- Total amount, date and form of research payment
- Name of research study
- Whether the product is a Covered Product, a non-Covered Product, a combination, or neither
 - Covered Product: Prescription drug or medical device if premarket approval by or premarket notification to the FDA is required and payment is available under Medicare, Medicaid or the Children's Health Insurance Program
- Name of related covered product(s)
- Information on physician principal investigators (same as for physicians above)

22

More Data Elements

- Manufacturers must track and report the following abbreviated information for research transfers of value related to pre-clinical research:
 - Name of individual/entity receiving the transfer of value
 - Physician: Name, business and email addresses, NPI, state license number and state, specialty and type of medicine practiced
 - Teaching Hospital: Name, business and email addresses, TIN and NPI (if applicable)
 - Other Third Party: Name, business and email addresses
 - Total amount, date and form of the transfer of value
 - Information on physician principal investigators

23

Review Process

- Manufacturers *and* covered recipients have 45 days to review information through secure website prior to public disclosure
 - Covered recipients register to review manufacturer submissions
- Reviewers may indicate agreement/disagreement with information posted
- CMS will not arbitrate disputes between manufacturers and covered entities
- If dispute not resolved, CMS will post information as reported by manufacturer but note that information is in dispute

24

Penalties for Non-Compliance

- Failure to Report: Civil money penalty from \$1,000 to \$10,000 for each unreported transfer of value up to \$150,000
- Knowing Failure to Report: Civil money penalty from \$10,000 to \$100,000 for each unreported transfer of value up to \$1,000,000

25

Corrections

- Manufacturers must report discovered errors or omissions in information submitted immediately
- CMS notifies affected covered recipients and updates website posting annually
- CMS may undertake interim “refreshes” of data posted

26

Documentation Retention

- Manufacturers must maintain all records sufficient to enable audit of compliance with reporting requirement
- Records mentioned for at least 5 years from date that transfer of value is publicly posted not date that transfer of value is reported

27

Meanwhile, at NIH

- Significant Financial Interest (SFI)
 - Consist of one or more of the following interests of the investigator (and those of the investigator's spouse and dependent children) that reasonably appears to be related to the investigator's institutional responsibilities
 - A SFI exists if the value of remuneration received from the entity in the 12 months preceding disclosure and the aggregated value exceeds \$5,000
 - SFI does not include...salary, royalties, certain IP rights, investment vehicles
 - SFI does not include...income from seminars, lectures, teaching if sponsored by a federal, state, or local government agency, higher education institution, academic teaching hospital, medical center, it's affiliated research institute, income from advisory committees or review panels, from groups named above

28

Open Payments Defined

- Section 6002 of the Affordable Care Act (Public Law No. 111-148)
- Health Care and Education Reconciliation Act of 2010 (Public Law No. 111-152)
- Substance-Use Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act for Patients and Communities Act (Public Law No. 115-271)

29

Grassley,
Brown, and
Blumenthal

“The opioid epidemic has taught us a terrible lesson: without full transparency, pharmaceutical companies can operate under the cover of darkness, possibly using gifts and payments to influence the prescribing practices of medical professionals like nurse practitioners and physicians assistants. That’s why it is absolutely essential that pharmaceutical companies disclose gifts and payments made to additional health care providers who prescribe opioids and other drugs – not just doctors.”

Richard Blumenthal (D-CT)

Senator

30

Fighting the Opioid Epidemic with Sunshine Act of 2018

- Introduced May 2018
- Proposed effective date of January 1, 2020
- Related legislation: HEAL Act, CRIB Act, SUPPORT Act, TeleCAST Act, Opioid Addiction Treatment Programs Enhancement Act, Securing Flexibility to Treat Substance Use Disorders Act, Help for Moms and Babies Act, Assessing Barriers to Opioid Use Disorder Treatment Act, Building Capacity for Family-Focused Residential Treatment Act, Comprehensive Screenings for Seniors Act of 2018, etc...

31

SUPPORT ACT



Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act



Massive set of opioid crisis Acts



More than 170 titles




Signed into law October 25, 2018



Section 6111: Fighting the Opioid Epidemic with Sunshine (FOES?)

Grassley, Brown, and Blumenthal repackaged

32



Impact on Open Payments

- Expands the definition of a covered recipient
 - Physician Assistants
 - Nurse Practitioners
 - Clinical Nurse Specialists
 - Certified Nurse Midwives
 - Certified Registered Nurse Anesthetists
- Allows National Provider Identifiers (NPIs) to be publicly available
 - Weren't they already?

33

2020 Medicare Physician Fee Schedule

- Effective on or after January 1, 2020
- Reflects the same five provider types new to Open Payments
- Includes three new payment/transfer of value types
 - Debt forgiveness
 - Long term medical supply or device loan
 - Acquisitions
- Merges the two types of education programming into one
- Adds requirements for reporting unique device identifier numbers
- Effective on or after January 1, 2022

34

Effective Dates in Conflict

- 2020 Medicare Physician Fee Schedule effective on or after January 1, 2020
- SUPPORT Act
 - Change applies to information required to be submitted on or after January 1, 2022
 - Effective for data collection beginning in calendar year 2021 for reporting to CMS 2022

35

MITIGATING RISK

Program Development, Investigations, and Management Plans

Presented by Andrew Hill, Compliance Analyst/Auditor, UK
HealthCare

36

Polling Question 2

37

Conflict of Interest Reporting – Develop Your Program

Appoint a Conflict Manager to oversee day-to-day monitoring plan

- Reviewing disclosed potential conflicts
- Conducting investigations
- Creating management plans

Create well-defined policies

- Determine reporting limits
 - How much outside activity is too much?
- Provide faculty with clear expectations and definitions
 - “What is honoraria?”

38

Conflict of Interest Reporting – Develop Your Program

01

Determine the frequency of reporting

- Annual? Biannual? Continuous?
- Update existing disclosure? Provide new disclosure for each new conflict?

02

Construct an effective questionnaire

- Broad questions vs specific inquiries
- Revise!!

03

Decide on a management tool

- Electronic vs paper
- Databases vs spreadsheets
- What can be simplified using the proper tool?

39

COI Technology Enablement

Electronic COI management systems can be used to simplify the COI reporting process – and ultimately the investigation process – for managers and researchers.

- Electronic conflict reporting options
- Centralization of management processes
- Integration with publicly reported databases

40

Conducting Investigations

Sometimes the most obvious resources are the best

- Ask the Googles!
- Industry websites
 - Dr. C and ABC Pharmaceuticals
 - What do they do?
 - How does it relate to Dr. C's research or specialty?
 - Has Dr. C spoken on their behalf? Mentioned them in lectures?

41

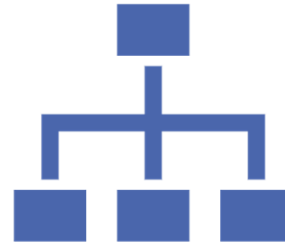
Conducting Investigations

- Doctor's history, research and publications
 - What are the recurring themes and how do they relate to outside interests?
 - Who has the doctor worked with in the past? How might they be involved?
- Institutional records
 - Is there a record of the doctor being granted permission for the work they're doing?
 - Do we have other business agreements in place and how do they relate?

42

Reporting

- Once investigations are concluded, how do you share the information?
- Who is the audience?
- What is the frequency?
- Where at your institution does the management plan "live"?



43

Conflict of Interest

Activity	Management Plan?
Incoming department chair owns controlling interest in pharma drug (brand name), wishes to do clinical trial using drug	Advise chair to swap interest, divest entirely, or forego clinical trial
Surgeon, who is also department chair, wishes to hire spouse as surgeon	Nepotism. Disallow, or follow institutional process for exceptions, or have chair step down
Provider consults for pharma and accepts \$170,000/year in "honoraria" (almost exceeds salary)	Monitor prescribing practices, or treat honoraria as income, or disallow as income
Addiction researcher/provider has opened a community clinic	Disallow, or refer to non-compete, or inform research personnel, or...? Corrective Action?

44

Minimal Risk

- Faculty members cousin's son works part-time in the ER as dietician
- Royalties from work prior to joining institution
- TIAA/CREF managed retirement plan investments
- Service on church board
- Stock in Disney
- Money earned as part of a wind ensemble that plays on the weekends

45

Management Plans

1. Minimal Risk- once disclosed, activity can continue without significant management or concern
2. Perceived or Potential Conflict – once disclosed, activity can continue, but with written guardrails and agreements
3. Conflict of Interest – once disclosed, activity may or may not continue with a management plans in place

46

Management Plan Monitoring

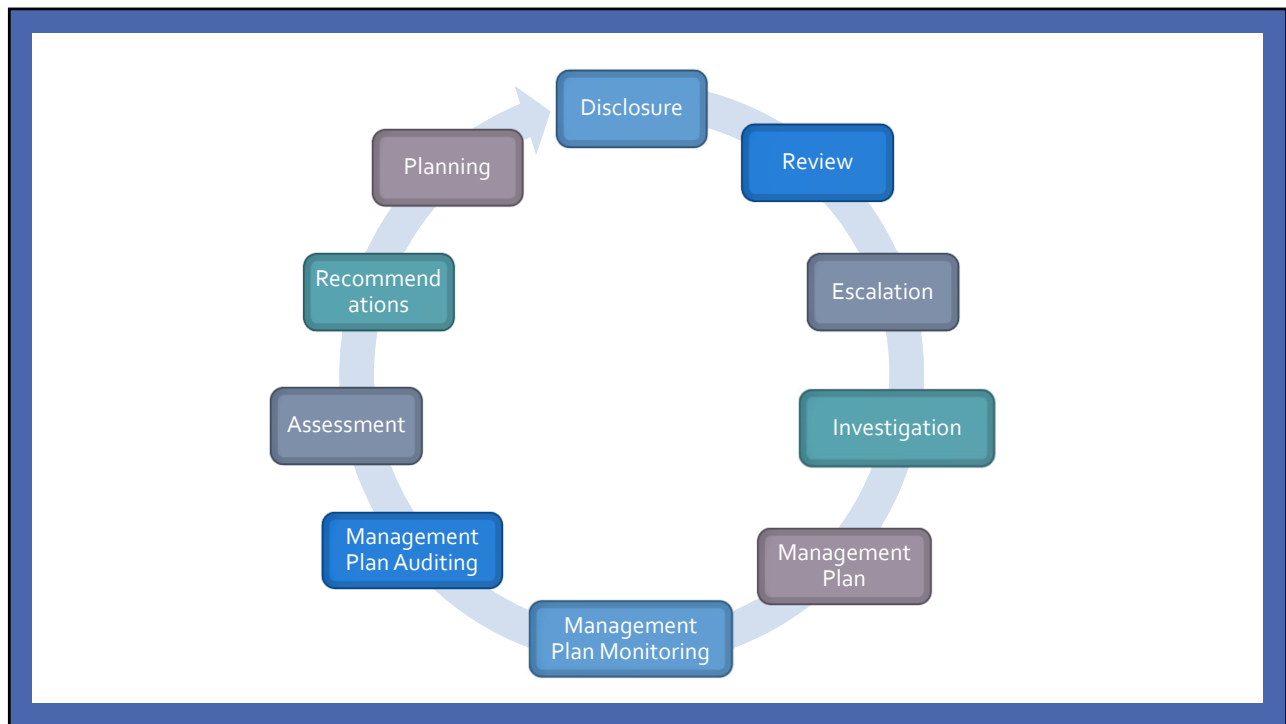
- Depending on the size and scope of your organization, monitoring your management plans could become unruly.
- Where do the plans "live"?
- Central, division, department, college, enterprise?
- How often are they reviewed?
- Who is responsible for the review?
- What is the process in the event of non-compliance?

47

COI Management Plan Steps

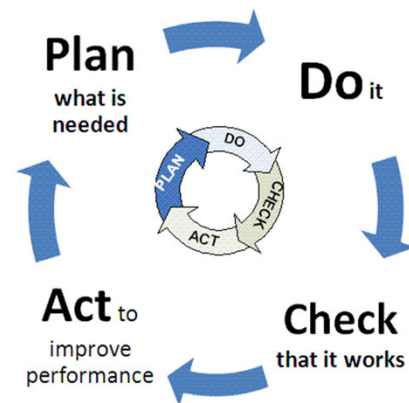
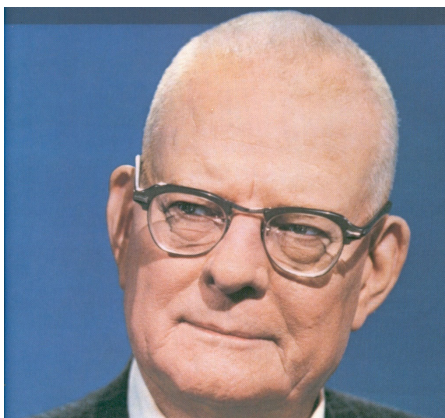
- Disclosure
- Review
- Escalation
- Investigation
- Management Plan
- Management Plan Monitoring
- Management Plan Auditing
- Assessment
- Recommendations
- Planning

48



49

Deming's Model of Continuous Improvement (PDCA)



50

Identifying Risks Through the Open Payments Database

CJ Wolf, Director, Conflict of Interest Program
Intermountain Healthcare, Salt Lake City, UT
cj.wolf@imail.org



51

Polling Question 3 -

What is the primary method you use when searching the OpenPayments data?

- ▶ *I don't know, I haven't used the data search features yet*
- ▶ *I primarily use the OpenPayments, online single physician/single teaching hospital search tools*
- ▶ *I download the data sets from OpenPayments and search offline*
- ▶ *Other*

52

Department of Justice

Office of Public Affairs

FOR IMMEDIATE RELEASE

Wednesday, September 4, 2019

Drug Maker Mallinckrodt Agrees to Pay Over \$15 Million to Resolve Alleged False Claims Act Liability for “Wining and Dining” Doctors

Pharmaceutical company Mallinckrodt ARD LLC (formerly known as Mallinckrodt ARD Inc. and previously Questcor Pharmaceuticals Inc. “Questcor”), has agreed to pay \$15.4 million to resolve claims that Questcor paid illegal kickbacks to doctors, in the form of lavish dinners and entertainment, to induce prescriptions of the company’s drug, H.P. Acthar Gel (Acthar) from 2009 through 2013.

The Federal Anti-Kickback Statute prohibits a pharmaceutical company from offering or paying, directly or indirectly, any remuneration — which includes money or any other thing of value — with the intent to induce a health care provider to prescribe a drug reimbursed by a federal health care program, including Medicare. This prohibition extends to such practices as “wining and dining” doctors to induce them to write Medicare prescriptions of a company’s products.

The government alleged that, from 2009 to 2013, twelve Questcor sales representatives marketing Acthar provided illegal remuneration to health care providers in the form of lavish meals and entertainment expenses. The company paid this remuneration, the government alleges, with the intent to induce Acthar Medicare referrals from those health care providers,

53

FOR IMMEDIATE RELEASE

Thursday, March 5, 2020

DOJ Files Suit against Spine Device Manufacturer and Executives Alleging Kickbacks to Surgeons through Sham Consulting Payments

The Justice Department announced today that the United States intervened and filed a complaint in two whistleblower cases filed under the False Claims Act against SpineFrontier, Inc. (SpineFrontier) and related entities and executives, alleging that the defendants paid kickbacks to spine surgeons to induce use of SpineFrontier surgical devices, in violation of the Anti-Kickback Statute (AKS). According to the United States’ complaint, the defendants paid spine surgeons over \$8 million in sham “consulting” payments ostensibly for product evaluations, when in fact the payments were for use of SpineFrontier devices.

“Kickbacks undermine the integrity of federal health care programs and can result in unnecessary or harmful medical care,” said Assistant Attorney General Jody Hunt of the Department of Justice’s Civil Division. “The Department of Justice will pursue unlawful kickback arrangements in whatever form they occur to ensure the integrity of the medical care received by federal program beneficiaries.”

According to the United States’ complaint, Dr. Kingsley Chin is the founder and Chief Executive Officer of SpineFrontier, a spine device manufacturer headquartered in Malden, Massachusetts, which sells spinal implant devices across the United States. Dr. Chin is also the founder and principal owner of KIC Management Group Inc. and KICVentures LLC, which own

54

FOR IMMEDIATE RELEASE

Thursday, March 5, 2020

U.S. Attorney Sues Spinal Device Company and Its Executives for Allegations that they Paid Kickbacks to Surgeons

Five doctors admit to taking kickbacks and will pay \$1.56 million

BOSTON – The U.S. Attorney's Office has filed a civil health care fraud complaint against SpineFrontier, Inc. (SpineFrontier); Impartial Medical Experts, LLC (IME); Kingsley Chin, the founder and CEO of SpineFrontier; Aditya Humad, the CFO of SpineFrontier; Vanessa Dudley, Chin's wife and the Business Administrator of IME; and other entities Chin owns and controls.

The government alleges that SpineFrontier, based in Malden, Mass., and the other defendants paid, and conspired to pay, kickbacks in the form of sham consulting fees via a sham third-party, IME. The lawsuit alleges that the defendants made these payments to surgeons to induce them to use SpineFrontier's devices in spinal surgeries. The government contends that the defendants violated the Anti-Kickback Statute, and as a result caused federal health care programs to pay millions of dollars in false claims.

In addition, the U.S. Attorney's Office has settled civil health care fraud claims against five physicians, each of whom admits to seeking and obtaining kickbacks from SpineFrontier, via the sham third-party

55

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Centers for Medicare & Medicaid Services

Medicare Medicaid/CHIP Medicare-Medicaid Coordination Private Insurance Innovation Center Regulations & Guidance Research, Statistics, Data & Systems Outreach & Education

Home > Open Payments

Open Payments | About | Explore the Data | Program Participants | FAQs | Contact Us

Happening Now: Program Year 2019 Pre-Publication Data Review

Pre-publication Review and Dispute is available now through May 15, 2020. Covered Recipients: this is your opportunity to review your attributed data before it is published this June. Review of the data is voluntary, but strongly encouraged. [Sign in](#) or [Register](#) in the Open Payments system to review your data. To learn more about review and dispute activities visit the Review and Dispute section on the [Open Payments Resources Page](#).

Program Year 2018 Data Refresh

The Program Year 2018 data has been refreshed to include updates made after June 2019 data publication. Check out the [data dashboard](#) to see an overview of the refreshed data, or dive right in and use the [search tool](#).

Explore Open Payments

- [View Summary Data](#)
- [Search the Data](#)
- [Download Open Payments Datasets](#)
- [Read the Annual Report to Congress \(PDF\)](#)

Open Payments

Open Payments is a national disclosure program that promotes a more transparent and accountable health care system by making the financial relationships between applicable manufacturers and group purchasing organizations (GPOs) and health care providers (physicians and teaching hospitals) available to the public. [Learn more](#) about Open Payments.

Search Explore Open Payments Data

- Use the [search tool](#) to look up doctors, hospitals, or companies.
- [Download](#) the data sets.
- [Interact](#) with all the data sets.

Physicians and Teaching Hospitals

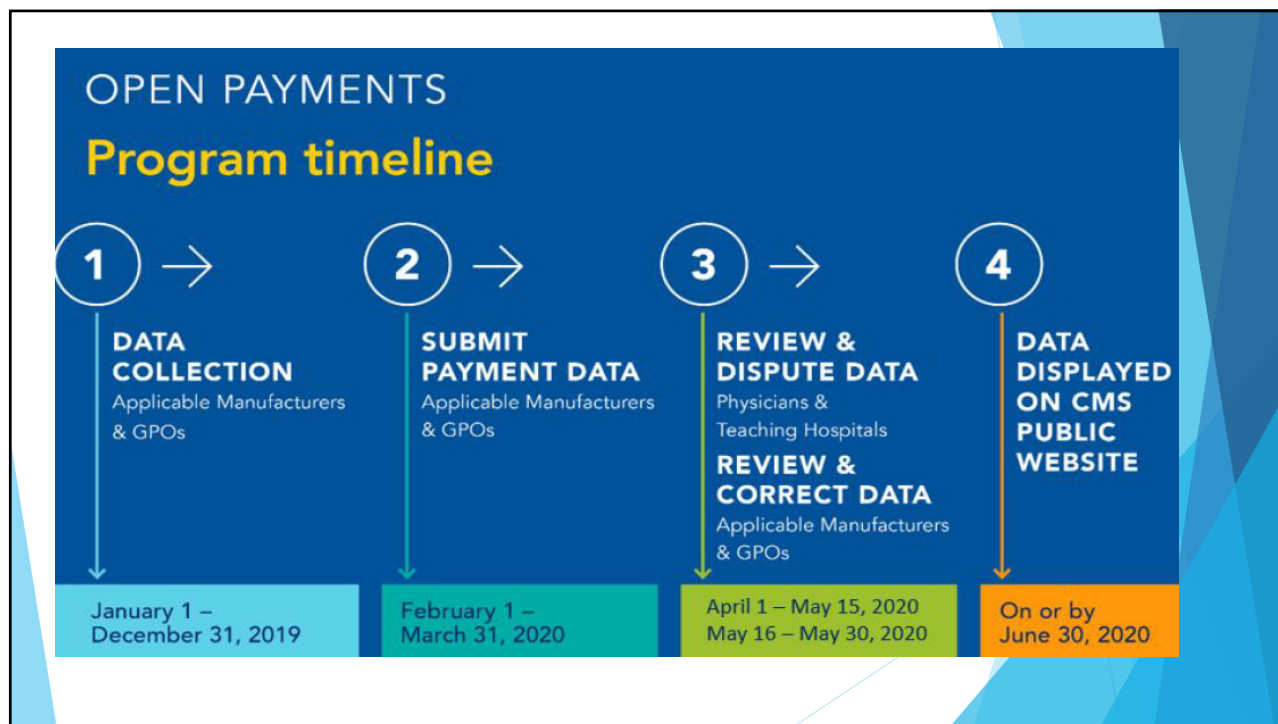
- Learn how to [register](#) to [review](#) (and [dispute](#)) your financial data.
- [Sign by state guides](#) available.
- Already registered? [Login here](#).

Applicable Manufacturers and Group Purchasing Organizations

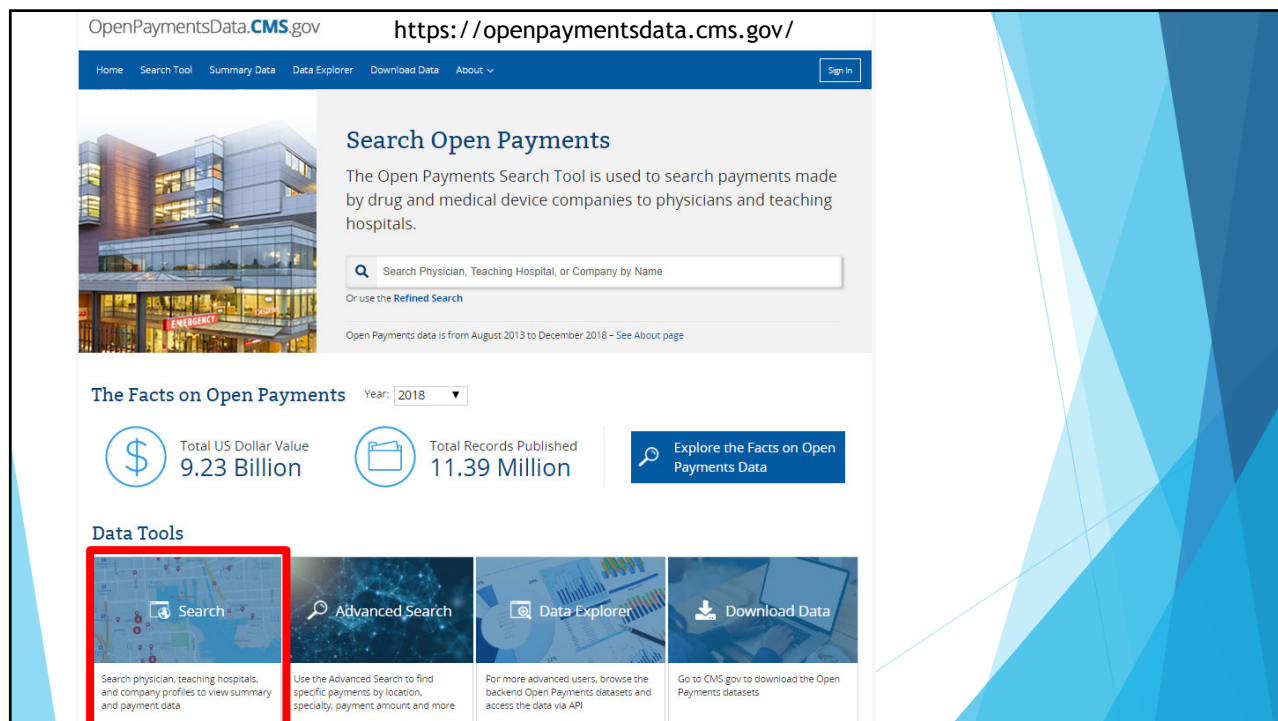
- Learn how to [register](#).
- Already registered? [Login here](#).
- Attend helpful [events](#) to learn more about Open Payments.

<https://www.cms.gov/OpenPayments>

56



57



58

Search for a ...

Physician

Teaching Hospital

Company Making Payments

By Name, Location, and Specialty

OR

By Distance

First Name

Last Name

City

State

ZIP/Postal Code

Country

Specialty

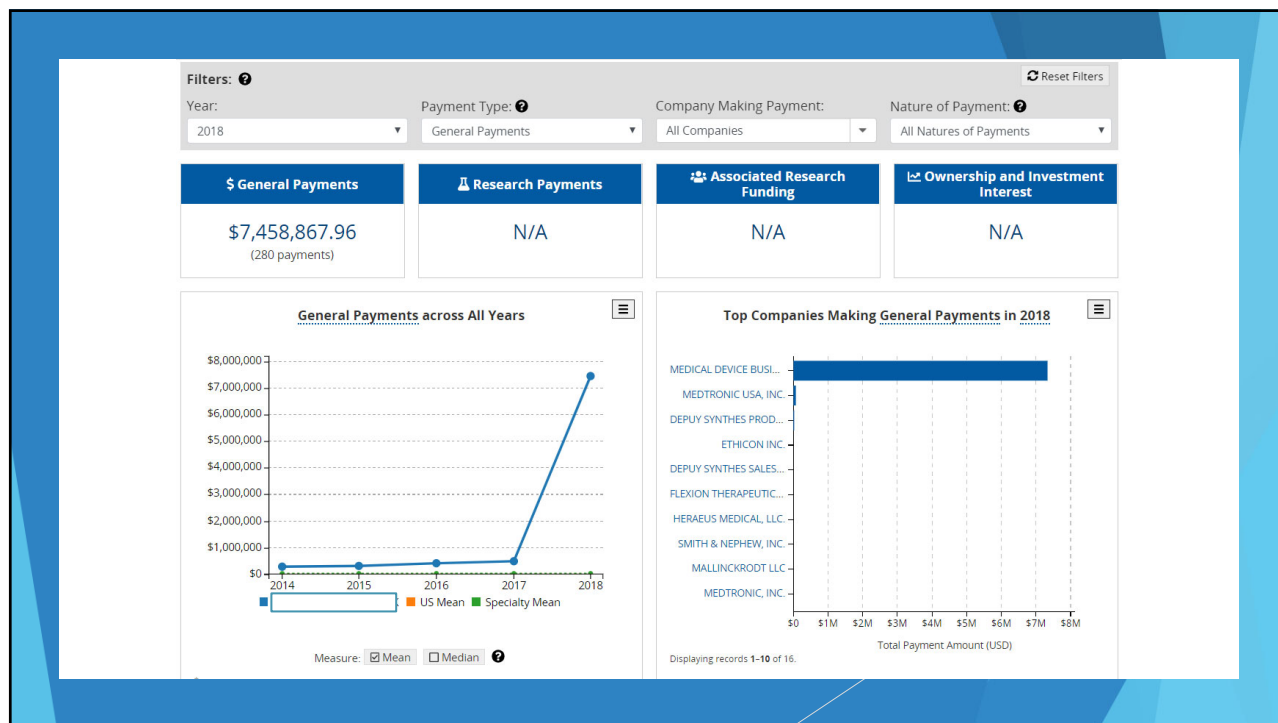
☐ Include other name(s) reported in search.

Please be patient, search results take a few moments to load.

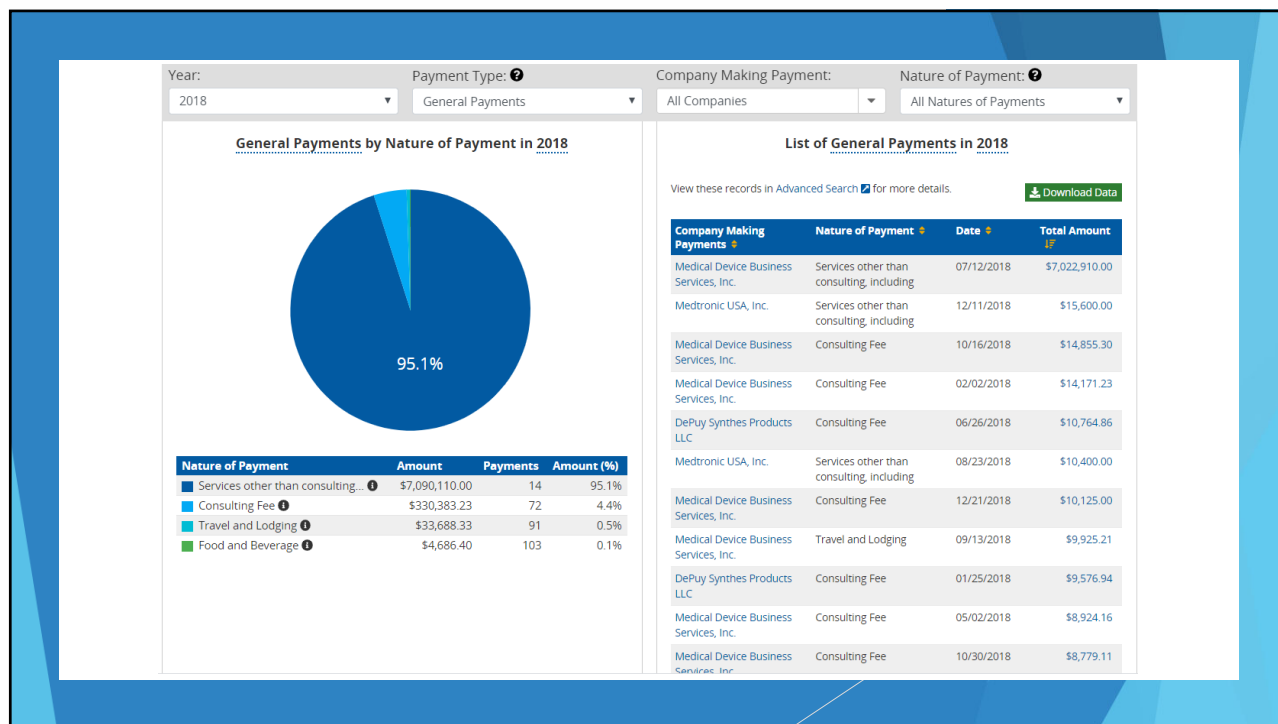
Search

For Best Search Results

59



60



61

OpenPaymentsData.CMS.gov <https://openpaymentsdata.cms.gov/>

Home Search Tool Summary Data Data Explorer Download Data About Sign In

Search Open Payments

The Open Payments Search Tool is used to search payments made by drug and medical device companies to physicians and teaching hospitals.

Or use the [Refined Search](#)

Open Payments data is from August 2013 to December 2018 - See About page

The Facts on Open Payments

Year: 2018

Total US Dollar Value

9.23 Billion

Total Records Published

11.39 Million

[Explore the Facts on Open Payments Data](#)

Data Tools

Search

Search physician, teaching hospitals, and company profiles to view summary and payment data

Advanced Search

Use the Advanced Search to find specific payments by location, specialty, payment amount and more

Data Explorer

For more advanced users, browse the backend Open Payments datasets and access the data via API

Download Data

Go to CMS.gov to download the Open Payments datasets

62

Open Payments Advanced Search

The Open Payments Advanced Search lets you search Open Payments data based on the filters you apply below. The results include a summary table of the total number of payments and total amount of those payments and a link to download the data as a CSV file. The payments data is grouped by year and you can sort by each column. You can also click on the Recipient or Company Making Payment link to view their profile page. Please note the results do not include Associated Research Payments. You can also continue to use the Data Explorer to view and download the data or connect via API to all of the backend Open Payments datasets and/or download the datasets for offline use.

Recipient Physician Name <input type="text" value="Physician's Name"/> Physician Specialty <input type="text" value="Specialty"/> Hospital Name <input type="text" value="Hospital Name"/>		Company Company Name <input type="text" value="Company Name"/>	
Recipient Location Recipient Address <input type="text" value="Recipient Address"/> Recipient State <input type="text" value="State"/> Recipient City <input type="text" value="Recipient City"/> Recipient ZIP/Postal Code <input type="text" value="Recipient ZIP/Postal Code"/>		Payment Details Year <input type="text" value="All Years"/> Payment Type <input type="text" value="General Payments"/> Nature of Payment (only applicable to General Payments) <input type="text" value="Nature of Payment"/> Payment is... <input type="text" value="Greater than or equal to"/> Disputed by the Recipient <input type="text" value="All Payments"/>	


Please be patient, search results may take a few moments to load.

[Search](#) [Reset](#)

63

OpenPaymentsData.CMS.gov
https://openpaymentsdata.cms.gov/

Home Search Tool Summary Data Data Explorer Download Data About
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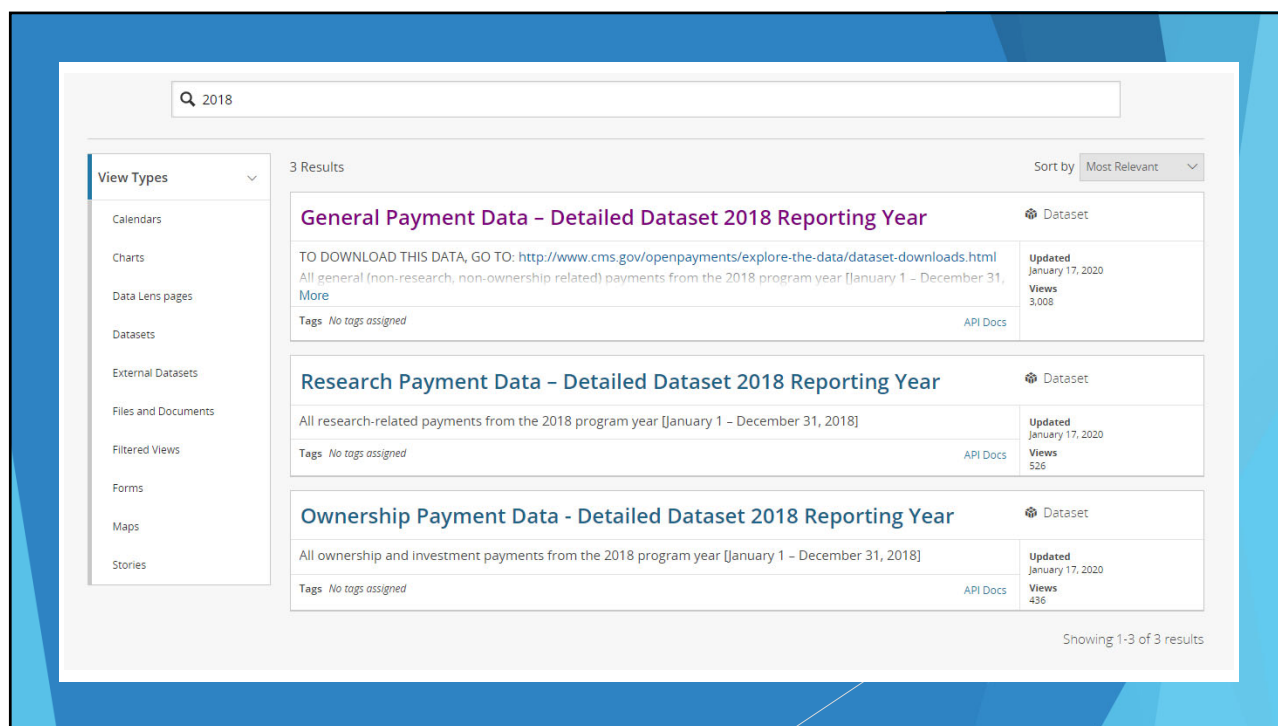
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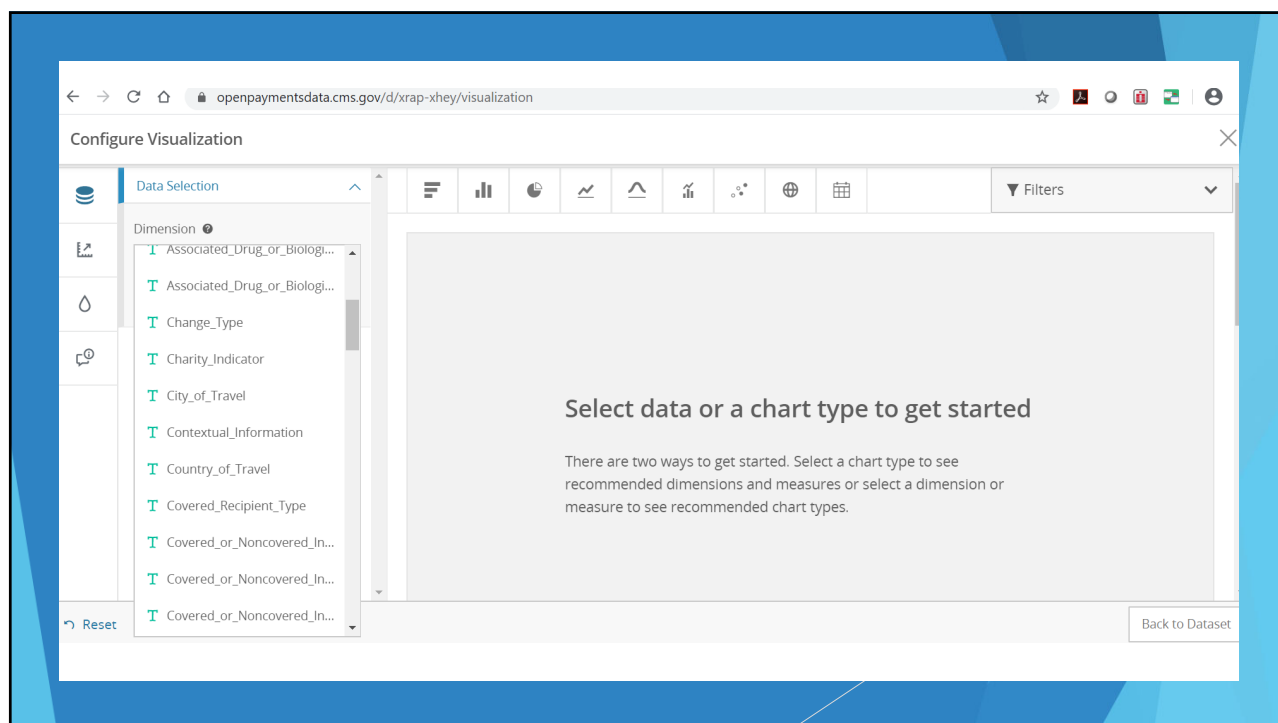
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For more advanced users, browse the backend Open Payments datasets and access the data via API

Download Data
Go to CMS.gov to download the Open Payments datasets

64



65



66

<div> <div>Add Filter</div> <div>Entertainment</div> </div>						
Amount of Payment, USD	Date of Payment	Number of Payments Included in Total Amount	Form of Payment or Transfer of Value	Nature of Payment or Transfer of Value	City of Transfer	
\$7,800.00	09/28/2016		1 Cash or cash equivalent	Entertainment		
\$4,980.00	12/08/2016		1 Cash or cash equivalent	Entertainment		
\$3,609.96	03/18/2016		1 Cash or cash equivalent	Entertainment		
\$3,492.70	02/02/2016	14	Cash or cash equivalent	Entertainment		
\$3,462.75	10/15/2016	17	Cash or cash equivalent	Entertainment		
\$2,500.00	04/06/2016	1	In-kind items and services	Entertainment		
\$2,500.00	08/15/2016	1	Stock	Entertainment		
\$2,135.33	06/07/2016	3	Cash or cash equivalent	Entertainment		
\$2,022.75	09/23/2016	22	Cash or cash equivalent	Entertainment		
\$2,000.00	12/16/2016	1	Cash or cash equivalent	Entertainment		
\$1,655.00	08/05/2016	1	Cash or cash equivalent	Entertainment		
\$1,500.00	07/21/2016	1	In-kind items and services	Entertainment		
\$1,442.07	10/10/2016	4	Cash or cash equivalent	Entertainment		
\$1,442.07	10/10/2016	4	Cash or cash equivalent	Entertainment		
<div> <div>< Previous</div> <div>Next ></div> </div>						Showing 1-14 out of 8,448

67

<div> <div>Add Filter</div> <div>Gift</div> <div>TX</div> <div>Covered Recipient P...</div> </div>						
Total Amount of Payment, USD	Date of Payment	Number of Payments Included in Total Amount	Form of Payment or Transfer of Value	Nature of Payment or Transfer of Value	City of Transfer	
\$43,588.54	12/31/2016	1	In-kind items and services	Gift		
\$19,044.31	12/31/2016	1	In-kind items and services	Gift		
\$11,390.00	06/30/2016	1	In-kind items and services	Gift		
\$9,786.43	02/23/2016	1	In-kind items and services	Gift		
\$9,000.00	04/29/2016	1	In-kind items and services	Gift		
\$7,989.00	05/23/2016	1	In-kind items and services	Gift		
\$7,549.96	04/29/2016	1	In-kind items and services	Gift		
\$7,476.00	02/08/2016	1	In-kind items and services	Gift		
\$7,000.00	07/22/2016	3	Cash or cash equivalent	Gift		
\$6,971.00	06/03/2016	1	In-kind items and services	Gift		
\$5,399.46	04/29/2016	1	In-kind items and services	Gift		
\$5,093.49	08/30/2016	1	In-kind items and services	Gift		
\$4,490.00	05/12/2016	1	In-kind items and services	Gift		
\$3,852.20	04/29/2016	1	In-kind items and services	Gift		
<div> <div>< Previous</div> <div>Next ></div> </div>						Showing 1-14 out of 3,488

68

<div> <div>Add Filter</div> <div>Food and Beverage</div> <div>FL</div> <div>Covered Recipient P...</div> </div>						
oun	Total_Amount_of_Payment_USD	Date_of_Payme	Number_of_Payments_Included_in_Total_Amo	Form_of_Payment_or_Transfer_of_Val	Nature_of_Payment_or_Transfer_o	
	\$3,500.00	07/28/2016		1	Cash or cash equivalent	Food and Beverage
	\$2,600.00	04/22/2016		37	Cash or cash equivalent	Food and Beverage
	\$2,585.86	10/22/2016		1	In-kind items and services	Food and Beverage
	\$2,500.00	07/01/2016		1	Cash or cash equivalent	Food and Beverage
	\$2,450.00	09/15/2016		1	Cash or cash equivalent	Food and Beverage
	\$2,430.00	05/10/2016		1	Cash or cash equivalent	Food and Beverage
	\$2,275.00	08/04/2016		1	Cash or cash equivalent	Food and Beverage
	\$2,000.00	05/13/2016		1	In-kind items and services	Food and Beverage
	\$1,600.00	12/01/2016		1	Cash or cash equivalent	Food and Beverage
	\$1,500.00	05/03/2016		1	In-kind items and services	Food and Beverage
	\$1,500.00	11/16/2016		1	Cash or cash equivalent	Food and Beverage
	\$1,401.60	08/02/2016		5	In-kind items and services	Food and Beverage
	\$1,400.00	06/09/2016		1	Cash or cash equivalent	Food and Beverage
	\$1,333.44	03/09/2016		1	In-kind items and services	Food and Beverage
<div> <div>< Previous</div> <div>Next ></div> <div>Showing 1-14 out of 757,430</div> </div>						

69

<div> <div>Add Filter</div> <div>Physician_Profile_ID</div> <div>'15</div> </div>					
ment_USD	Date_of_Payme	Number_of_Payments_Included_in_Total_Amo	Form_of_Payment_or_Transfer_of_Val	Nature_of_Payment_or_Transfer_of_Value	
\$86,381.50	10/28/2016		1	Cash or cash equivalent	Royalty or License
\$81,169.63	07/28/2016		1	Cash or cash equivalent	Royalty or License
\$68,222.74	04/25/2016		1	Cash or cash equivalent	Royalty or License
\$56,082.87	01/26/2016		1	Cash or cash equivalent	Royalty or License
\$8,307.16	10/21/2016		1	In-kind items and services	Travel and Lodging
\$8,151.19	05/26/2016		1	In-kind items and services	Travel and Lodging
\$7,241.51	04/08/2016		1	In-kind items and services	Travel and Lodging
\$4,500.00	03/30/2016		1	Cash or cash equivalent	Compensation for services other than consulting, including serving as fa
\$4,000.00	10/25/2016		1	Cash or cash equivalent	Compensation for services other than consulting, including serving as fa
\$3,872.50	07/23/2016		1	In-kind items and services	Travel and Lodging
\$3,471.20	08/25/2016		1	In-kind items and services	Travel and Lodging
\$3,250.00	07/25/2016		1	Cash or cash equivalent	Compensation for services other than consulting, including serving as fa
\$3,122.00	08/13/2016		1	Cash or cash equivalent	Compensation for services other than consulting, including serving as fa
\$2,905.49	07/08/2016		1	In-kind items and services	Travel and Lodging
<div> <div>< Previous</div> <div>Next ></div> <div>Showing 1-14 out of 237</div> </div>					

70

OpenPaymentsData.CMS.gov <https://openpaymentsdata.cms.gov/>

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Search Open Payments


The Open Payments Search Tool is used to search payments made by drug and medical device companies to physicians and teaching hospitals.


Or use the [Refined Search](#)

Open Payments data is from August 2013 to December 2018 - [See About page](#)

The Facts on Open Payments


Year: 2018


 Total US Dollar Value **9.23 Billion**


 Total Records Published **11.39 Million**


[Explore the Facts on Open Payments Data](#)

Data Tools

 **Search**
 Search physician, teaching hospitals, and company profiles to view summary and payment data

 **Advanced Search**
 Use the Advanced Search to find specific payments by location, specialty, payment amount and more

 **Data Explorer**
 For more advanced users, browse the backend Open Payments datasets and access the data via API

 **Download Data**
 Go to CMS.gov to download the Open Payments datasets

71

Dataset Downloads

BEFORE YOU DOWNLOAD

Some datasets, particularly the general payments dataset included in these zip files, are extremely large and may be burdensome to download and/or cause computer performance issues. Be advised that the file size, once downloaded, may still be prohibitive if you are not using a robust data viewing application. Microsoft Excel has limitations on the number of records it can display, which this file exceeds. CMS recommends against using Windows File Compression to decompress downloaded files. Programs recommended for file decompression are WinZip, WinRAR, and 7-Zip.

Use the [search tool](#) or [Data Explorer](#) as alternatives to search and refine views of the larger Open Payments data sets.

Complete 2018 Program Year Open Payments Dataset

A complete set of all data from the 2018 Program Year, which includes data reported about payments made from January 1 through December 31, 2018.

[Download Complete 2018 Program Year Dataset](#)

Complete 2017 Program Year Open Payments Dataset


A complete set of all data from the 2017 Program Year, which includes data reported about payments made

72

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**OPEN PAYMENTS DATA:
REVIEW OF ACCURACY,
PRECISION, AND
CONSISTENCY IN REPORTING**

[https://oig.hhs.gov/oei/reports/
oei-03-15-00220.pdf](https://oig.hhs.gov/oei/reports/oei-03-15-00220.pdf)



Suzanne Murrin
Deputy Inspector General
August 2018
OEI-03-15-00220

73

Questions?

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- ▶ CJ Wolf: cj.wolf@imail.org

74