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Martique Jones
Deputy Director
Regulations Development Group
Office of Strategic Operations and Regulatory Affairs
Centers for Medicare & Medicaid Services
U.S. Department of Health and Human Services
7500 Security Boulevard
Baltimore, MD 21244-1850

Re: Data Collection: Reports of Physician Ownership and Investment

Dear Deputy Director Jones:

On behalf of the physician and medical student members of the American Medical Association (AMA), I appreciate the opportunity to provide comments on the agency's implementation of the Affordable Care Act's (ACA) Section 6002, the Physicians Payments Sunshine Act (Sunshine Act) *Agency Information Collection Activities: Proposed Collection*. The AMA has reviewed the proposed Non-Research Payment Template, the Physician Ownership Template, the Research Payment, as well as the Supporting Statement for Data Collection and Submission of Transparency Reports and Reporting of Physician Ownership or Investment Interests. We generally support the agency's outlined templates, but strongly urge adoption of a number of recommendations as the agency develops and manages the Sunshine Act industry reporting portal. The following recommendations will enhance the accuracy and fairness of information that CMS ultimately posts on the Sunshine Act public website, while minimizing the possibility of physician identity theft by limiting information submitted to the agency to that which is strictly necessary to implement the Sunshine Act.

Limiting Mandatory Data Submissions

The AMA urges the agency to limit *mandatory* reporting to only that data required for accurate Sunshine Act reporting, while limiting the personally identifiable physician information beyond that which is required by statute and the final regulation. While we urge the agency to increase the information that physicians and industry may *voluntarily* submit, we continue to have concerns that the public disclosure of personally identifiable information along with any potential data breaches or overly broad disclosures of information under the Freedom of Information Act would heighten the possibility of widespread physician identity theft. For example, allowing industry to submit physician e-mail addresses may create some confusion and undermine operational aspects of the Sunshine Act notification process as physicians may elect to have a third party, such as a practice

manager, oversee and manage information as it relates to Sunshine Act disclosures. Since physicians will have the option to register for the Sunshine Act physician portal, the e-mails that the industry utilizes may be different than the e-mail specified by the physician for purposes of the Sunshine Act correspondence. For example, a third party, such as a practice manager, may handle Sunshine Act reporting for physicians and use an alternative email.

Expanding Voluntary Data Submission and Voluntary Context

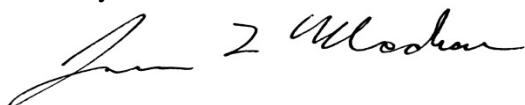
The AMA urges CMS to include the option to add any contextual information to all of the templates and not limit it to the Non-Research Payment Template. Specifically, it has been proposed on the Non-Research Payment Template that industry may provide “[a]ny free text which the reporting entity deems helpful or appropriate regarding this payment or transfer of value.” When the agency issues the final templates, we strongly urge the agency to include this as an option for all three templates. Furthermore, we continue to urge CMS to exercise agency discretion to allow physicians to provide voluntarily context as Congress intended so that transparency reporting would be accurate, fair, and balanced. We will outline our support of the foregoing in our response to a Proposed Collection of physician information collected as part of the physician Sunshine Act secure portal registration (that has not yet been issued, but we expect would be forthcoming). Furthermore, the final regulations did not prohibit the inclusion of such information submitted voluntarily by physicians.

Allowing Physician to Designate A Third Party to Access Secure Database

We urge CMS to include functionality that allows physicians to designate and authorize a third party, such as a practice manager, to assist them with handling Sunshine Act registration, review, and challenging reports, and other administrative Sunshine Act functions. Other stakeholders have noted that CMS has prior experience with developing such an option (e.g., quality reporting, Medicare enrollment). The Sunshine Act has the potential to create significant administrative burdens for physicians, including the initial registration and any subsequent disputes that physicians may have with industry reporting. As a result, we strongly urge CMS to issue an Agency Information Collection Activities: Proposed Collection that outlines the information that physicians will submit to the registration portal as well as authorizing third parties.

We appreciate the opportunity to continue working with CMS to ensure that the implementation of the Sunshine Act minimizes the administrative burden on physicians, ensuring that information reported is accurate, fair, and consistent with the congressional stated purpose of transparency, and not undermining those interactions that advance the art and science of medicine. If you have any questions, please contact Margaret Garikes, Director, Division of Federal Affairs, 202-789-7409 or margaret.garikes@ama-assn.org.

Sincerely,

A handwritten signature in black ink, appearing to read "James L. Madara".

James L. Madara, MD