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Empowered by hope

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Rino Aldrighetti

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Administrator

U.S. Department of Health & Human Services  
Centers for Medicare & Medicaid Services  
Hubert H. Humphrey Building  
200 Independence Avenue, SW, Room 445-G  
Washington, DC 20201

Re: Open Payments Program

Dear Administrator Tavenner:

The Scientific Leadership Council (SLC) of the Pulmonary Hypertension Association respectfully urges you to create an exclusion under the Open Payments Program that would exempt reporting for indirect payments to voluntary health agencies (VHAs) in cases when an applicable manufacturer grants full and independent discretion to VHAs in selecting recipients for funding.

As you may know, pulmonary hypertension (PH) is a complex, deadly lung condition that is often misdiagnosed as asthma and other less serious conditions. PH is challenging to diagnose and treat. When medical professionals, even pulmonologists and cardiologists, without expertise in PH attempt to treat PH patients, the results can be fatal. The disease is progressive, and past a certain point, irreversible so an inexperienced clinician who delays referral to an expert may cost a patient their life.

For these reasons, education of non-expert medical professionals by the leaders in the pulmonary hypertension field is critical. The Pulmonary Hypertension Association is proud to provide such education through our Medical Education Fund, which served over 1,193 physicians and 1,076 allied health professionals in a variety of in-person venues in 2013. In post-session surveys sent three months after the educational activity, over 80% of participant indicate that they have changed their practice as a result of what they learned.

PHA's Medical Education Fund is supported by unrestricted educational grants from several pharmaceutical companies, but PHA maintains full discretion over speakers and content. Requiring the disclosure of physicians who receive funding will create substantial administrative burden and potentially undermine the entire program. As leaders in the field of

pulmonary hypertension medicine, we are concerned by the lack of context provided when CMS shares reported information with the public. To the uninformed reader, it could easily appear that a physician received funds directly from a pharmaceutical company, when in fact those funds came through the Pulmonary Hypertension Association as part of a program funded through multiple sources.

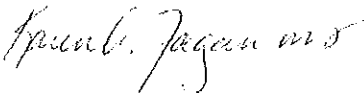
We anticipate that, given the lack of context CMS provides when presenting reported data to the public, requiring physician disclosure would result in medical institutions nationwide refusing to permit their faculty to present at such events. Furthermore, we anticipate that institutions will impose limits on experts presenting at grand rounds within the institution and that limits may even be imposed on medical professionals wishing to attend educational sessions.

We are deeply troubled by the negative impact that the Open Payments Program could have on PHA and hundreds of other voluntary health agencies to fulfill our missions and goals by supporting medical professional education.

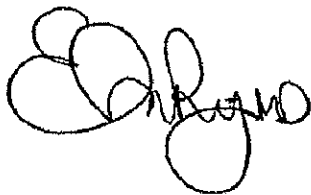
Sincerely,



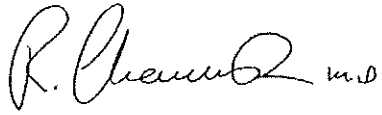
Rino Aldrighetti  
President  
Pulmonary Hypertension Association



Karen Fagan, MD  
Chair, PHA Scientific Leadership Council  
Chief of Pulmonology, Critical Care  
Professor of Internal Medicine and Pharmacology  
University of South Alabama



Erika S. Berman Rosenzweig, MD  
Chair Elect, PHA Scientific Leadership Council  
Associate Professor of Clinical Pediatrics in Medicine  
Columbia Presbyterian Medical Center

A handwritten signature in black ink, appearing to read "R. Channick MD". The signature is fluid and cursive, with the letters "R.", "Channick", and "MD" clearly distinguishable.

Richard N. Channick, MD  
Immediate Past Chair, PHA Scientific Leadership Council  
Associate Professor of Medicine  
Harvard Medical School  
Director, Pulmonary Hypertension Program  
Massachusetts General Hospital