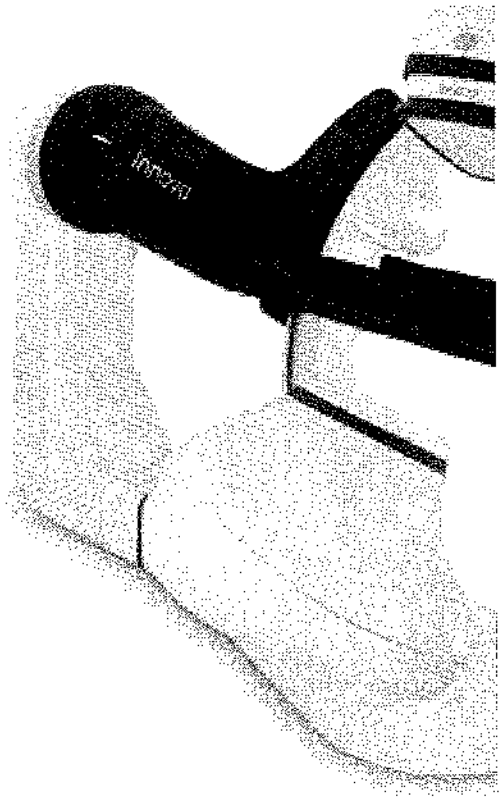
GE Healthcare

Sunshine Provisions CMS-5060-P



Broad Support, Targeted Fixes

GE supports the smart and targeted development of the rule to implement Section 6002 of the Affordable Care Act. We submit the following changes designed to maintain the spirit of the Sunshine Provisions while minimizing unintended consequences for doctors, patients, and the healthcare industry.

Recommendations

→ Clarify the scope of "applicable manufacturers" as it relates to commonly owned entities –these entities should report only those payments that have a nexus to covered products, and exclude:

- → ex. Employer compensation of a physician for providing employee medical records to enable the employee to return to work
- → ex. Employer provision of fees or honoraria to a medical provider for providing continuing education to the company's on-site medical team, or for working at an employee health fair

⇒ Clarify the responsibilities of third parties—these parties should report payments when made as an agent of an applicable manufacturer, and exclude situations such as:

- → ex. Employer films a commercial; actors' union rules require a paid doctor on site for the duration of filming

⇒ Clarify the reporting format to make the information easy to understand by consumers, and allow reporting of:

- → The product name most familiar to consumers ("MRI" not "Optima X")
- ⇒ ex. The entity name most familiar to consumers ("GE Healthcare")
- › ex. Context ("research and development related to...")

→ Provide overall context to the database for consumers, with descriptions of what vague categories (e.g. "fees") may include

- ⇒ Consider presenting *de minimis* value transfers in separately marked database to minimize consumer confusion from these payments

⇒ Delay implementation of reporting requirements for 180 days following the publication of the final rule—tracking systems are complex, and they require thorough training to implement

GE Healthcare (in a glance)

[illegible]

Projected Impacts

[illegible]

imagination at work