

**FOUNDATION FOR INFORMED MEDICAL DECISION MAKING, INC.**  
**40 Court Street, Suite 300**  
**Boston, MA 02108**

**Policies and Guidelines with Respect to Potential Conflicts of Interest for  
Employees, Consultants and Members of the Board of Directors**

**I. Introduction**

The Foundation for Informed Medical Decision Making, Inc. (the “Foundation”) is a nonprofit organization devoted to improving the quality of medical decisions. The core of the Foundation’s mission is providing accurate, credible information to patients and their providers about choices they are facing. The most important potential conflict for Parties is a **financial relationship** with a group or an organization that has, or may generally be perceived to have, an interest or investment in certain treatment choices or approaches, over others. These organizations could include, but are not limited to, makers of medical devices and drug manufacturers (hereinafter “Industry”). Health plans (other than payments for patient care), disease management companies and medical professional societies may also be seen as having some prejudices related to treatment options, but the economic implications of those relationships are less direct. Relationships with hospitals, medical centers, medical schools, local physician organizations, not-for-profit organizations, and government agencies are not usually of concern.

Conflicts of interest may arise whenever a Party has entered into a relationship with a third party, which could impair the Party’s ability to meet his or her obligations to the Foundation or could impinge on the Foundation’s reputation or credibility. It is the Party’s responsibility to identify potential conflicts of interest. The following list, although not meant to be exhaustive, provides examples of the most common instances when a potential for conflict of interest exists:

- A. Accepting payment for consulting work, travel or other services;
- B. Accepting support for research projects;
- C. Acquiring stock or stock options;
- D. Accepting personal or professional gifts of any kind;
- E. Serving as a paid member of a “Speaker’s Bureau”
- F. Legal consulting or testimony supported by industry.

## II. Policy

All Parties to which these policies apply shall complete a disclosure form annually, describing any relationships which they or a member of their household have, that may put them in conflict with the basic goals of the Foundation. These include:

- A. Medical Editors, clinicians with final responsibility for verifying the accuracy of the content of Foundation products on a particular topic.
- B. Foundation Employees and consultants with a direct role in evidence management
- C. Members of the Board of Directors
- D. Clinical Advisors, those experts who provide review and consultation on Foundation products, but do not have the final responsibility for the accuracy of the content of Foundation materials and on-camera physicians who appear in our programs.

## III. Guidelines

Medical editors, employees, consultants with a direct role in evidence management, and Board members shall divest themselves of any of the following relationships and they must disclose any such relationships that exist with respect to family members in their households.

Clinical advisors must annually report any such relationships, but, in most cases, they do not have to divest or make other changes in order to work with the Foundation.

- A. Direct payments from industry (Speakers' fees, honoraria, travel or consulting fees).
- B. Research support from industry (including research funding for support staff)
- C. Ownership of stock or stock options in individual drug or device manufacturing companies (mutual funds are not included).

Medical editors, employees, consultants with a direct role in evidence management, Board members and clinical advisors shall disclose the following relationships but are not required to divest or make other changes:

- D. Any kind of financial relationship with a medical or professional society in the preceding year
- E. Any kind of financial relationship with a health insurer, disease management company, or health plan in the preceding year

## **IV. Review Procedures**

### **A. For Medical Editors**

In the process of interviewing and selecting Medical Editors, prospective Medical Editors will be asked about relationships that could pose conflicts of interest. Preference will be given to Medical Editors without potential conflicts. Individuals with significant potential conflicts, as judged by the President of the Foundation, will be disqualified as Medical Editors.

In the event that a new Medical Editor has a financial relationship that is ambiguous as to whether or not it poses an apparent conflict, Medical Editors will be asked to divest themselves of the relationships that raise potential concerns. The Foundation recognizes that exceptions to the ban on any financial relationships with drug or device manufacturers may be reasonable. Exceptions to the divestiture policy for Medical Editors shall be requested in writing from the President of the Foundation to a select committee of Medical Editors. Three Medical Editors appointed by the Chairman of the Board in consultation with the President, and not including the Medical Editor making the request, shall constitute the select committee. The select committee will review the request and make a recommendation to the President. Final decisions about exceptions to the policy will be made by the President in consultation with the Board of Directors.

At times, Medical Editors may be asked to consult or perform services that enhance the Medical Editors knowledge of their field (such as attending a meeting of experts funded by a pharmaceutical company), disseminate important information (such as giving a scientific report at a professional meeting), or performing a valuable function not related to marketing a particular product (such as reviewing grants or serving on a data safety monitoring board). Rather than accept payment from a pharmaceutical or device company for such activities, Medical Editors shall request funding from the Foundation for such an activity by sending a letter to the President of the Foundation. The letter should briefly describe the purpose and why it does not constitute a conflict, and provide an estimate of the amount of funding for the event, including travel expenses. The Foundation will provide funding when the case for the Medical Editor's participation is approved by the President.

Medical Editors shall also disclose relationships between family members in their households and the types of funders discussed above, but in most cases divestiture will not be required. Medical Editors will not be required to disclose information about the relationships of other faculty members in their department or research group, even if the Medical Editor holds a leadership position within that department or group. However, research funding going to the Medical Editor's support staff, or research grants to the Medical Editor as Principal Investigator (even if he or she does not receive salary support from the grant), shall be disclosed as research funding to the Medical Editor.

**B. For Employees and Consultants with a Direct Role in Evidence Management**

Guidelines for Employees of the Foundation will be parallel to those for the Medical Editors, except that the select committee that reviews potential exceptions for ambiguous cases will be a group of three employees appointed by the Chairman of the Board in consultation with the President, whose recommendation would then be forwarded to the Governance Committee of the Board for a final decision. The exception to this guideline for employees is Senior Management. Their cases will go directly to the Governance Committee of the Board for review.

**C. For Members of the Board of Directors**

Guidelines for Members of the Board of Directors will be parallel to those for Medical Editors and employees, except that the select committee of the Board will be appointed by the Chairman of the Board and will review ambiguous cases. In addition, once a year Board members will be asked to orally describe (and discuss as appropriate) any relationships they have with other organizations (paid or unpaid) that are relevant to the mission of the Foundation.

**D. For Clinical Advisors and On-Camera Physicians**

Clinical Advisors, On-Camera Physicians and others who work with the Foundation who do not have final responsibility for the clinical content of Foundation material will not be asked to divest or otherwise change to address conflicts. Their sole responsibility is to provide annual disclosure of their relevant financial relationships.

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**Disclosure Form**

The primary mission of the Foundation is to provide accurate, objective, credible information to patients and their providers about treatment options. The following are relationships **that may affect, or have the appearance of affecting, the objectivity of the information provided by the Foundation** or that may otherwise conflict with the mission of the Foundation.

**Please list any direct payments from drug or device manufacturers (speaker's fees, honoraria, travel, consulting fees, etc.) you received in the last year.**

*Please list all sources in the last year*

None

**Please list any research support from drug or device manufacturers you received in the last year that supported either your salary or that of support staff under your direct supervision.**

*Please list all sources in the last year*

None

**Please list any stock, stock options, or other forms of ownership in companies related to health care that you now own.**

*Please list all stock or any ownership (mutual funds not included)*

None

**In the past year, did any of the family members in your household have any of the financial relationships described above?**

Yes  (If yes, please complete a separate form for each household member)

No

**Please list any financial relationships you had with medical or professional societies in the past year.**

None

**Please list any financial relationships (other than those related to patient care) you had with any health plan or disease management company in the past year.**

None

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Reviewed by Foundation

\_\_\_\_\_  
Date

Revised 10/15/09