

GE HealthCare - TRANSPARENCY INITIATIVES

1. INTRODUCTION

As a globally active company in various areas of the healthcare sector, we are committed to a transparent partnership with all healthcare professionals (HCPs) and healthcare organizations (HCOs). This close and well-regulated partnership allows us to ensure that our medical products are continuously improved through research and the exchange of best clinical practices on state-of-the-art technology, and therefore this benefits the patient.

The disclosure of such partnerships is key because it helps to govern and promote a positive, collaborative and trust-based relationship between HCPs/HCOs and commercial life sciences organizations. This ensures that such relationships do not influence clinical decisions, as all financial interactions are fully transparent.

In 2013, EFPIA (European Federation of Pharmaceutical Industries and Associations) adopted this pharma self-regulation under the '**Code on Disclosure of Transfers of Value from Pharmaceutical Companies to HCPs and HCOs**' (the latest updated version came out in 2019) which requires companies, such as GE HealthCare (GEHC), to publicly publish annually a report of all transfers of value from GEHC to HCPs and HCOs accumulated in the previous year.

The ABPI is an EFPIA member association, committed to greater transparency of the financial relationships with HCPs/HCOs by complying and incorporating the guidelines of EFPIA Transparency Code.

We are convinced that this industry-driven initiative is an important opportunity to demonstrate to the public that a close relationship between companies and the healthcare sector is in the best interest of patients and will therefore establish mutual trust for a long-term benefit.

2. METHODOLOGY

The purpose of this methodology is to clarify how the EFPIA/ABPI Disclosure Code requirements have been implemented within the pharmaceutical business of GE HealthCare (GEHC) and its compliance programs. Any deviations from the EFPIA Disclosure Code that have been transposed into the ABPI Disclosure Code have been taken into account.

1. Disclosable Transfers of Value

In line with the EFPIA/ABPI code requirements, the following transactions are in scope:

1.1 Event support

GEHC may disclose ToVs related to either Third-party organized events or Stand-alone events organized by GEHC.

- a. Third-party events, organized by a third-party, such as a Scientific/Medical Association:

Sponsorship: GEHC may sponsor HCPs to attend congresses or events to enhance their medical and/or scientific knowledge, and their use of medicines. In this context, the sponsorship might include congress registration fees, travel, accommodation.

Congress Sponsorship: GEHC may sponsor a third-party event in exchange for services.

Example: GEHC is represented with a booth space during a medical congress.

- b. GEHC stand-alone meetings:

Events initiated by GEHC to provide information of GEHC medicinal products, therapeutic area, treatment options etc. Where permitted under local law/code, GEHC may pay or reimburse modest travel, living, and registration expenses for HCPs attending a GE led event or a third-party event such as a third-party congress. If a travel agency is being used to organize travel arrangements, the administrative fee for this service will not be reported.

Example: GEHC is paying the registration fee for an HCP to support his/her participation in a medical congress.

1.2 Service and Consultancy

GEHC may engage an HCP/HCO to provide consulting services, based on scientific/medical expertise, reputation, knowledge and experience in particular therapeutic area, to fulfill a legitimate business need.

Examples of the services provided include insights, presentations or other of consulting services such as speaking engagements, product training, advisory board participation, review/input on publications, and product input.

Participation in consultancy agreements requires an investment of time and expertise, therefore it is appropriate that they are paid for the time and reimbursed for expenses such as travel.

GEHC discloses services at individual level in two separate categories:

1. Fees: fees for services to HCP/HCO
Example: speaker fees in a meeting, fees for insights provided during an advisory board, fees for consultancy.
2. Related expenses: where a service agreement is in place, other expenses may occur which do not constitute part of the fees but relate to the provision of this service and are reimbursed to the HCP/HCO.
Examples: flight tickets, train tickets, taxi, hotel nights.

If GEHC makes indirect Disclosable Transfers to HCPs/HCOs through a contract research organization (CRO) as part of a consulting arrangement and is aware of their identity, then these transfers will be disclosed as well under the Service and Consultancy category.

Example: An HCP is hired to provide input on GEHC's product.

1.3 Grant and Donations

A Grant or a Donation is a payment made to a third party without consideration of any kind of return in exchange of such payment for an educational, scientific or a charitable purpose.

Educational Grant: is funding provided to an HCO to support a *bona fide*, independent educational program, such as medical science or public health policy. The primary purpose of the support is the provision of legitimate educational program;

Scientific Grant: funding to third party entities for the purpose of the advancement of medical or scientific knowledge;

Donation: charitable contribution to a third-party entity with charitable and philanthropic intent, without any expressed or implied benefit other than general goodwill.

Example: GEHC is providing a cash donation to a non-profit organization to support their work.

1.4 Research

GEHC may contract an HCP, an HCO or contract research organization (CRO) to conduct research. If GEHC makes indirect Disclosable Transfers to HCPs/HCOs through a CRO as part of R&D and is aware of their identity, then these transfers will be disclosed under the R&D category. The published amount is the same as the amount agreed in the underlying contract. Costs that are subsidiary to these activities can be included in the aggregated data.

Example: GEHC is hiring a CRO to do clinical study.

1.5 Collaborative working

This category refers to GEHC working with other organizations to deliver initiatives which either enhance patient care or are for the benefit of patients or alternatively benefit the National Health Service (NHS) and, as a minimum, maintain patient care.

Collaborative working is generally between GEHC, healthcare organizations and other organizations.

Joint working is a limited form of collaborative working.

2. Recipients of Transfers of Value

For each local report, GEHC has focused on the country where the recipient has his primary physical address.

2.1 Definition Healthcare Professional (HCP)

Any individual in a position, directly or indirectly, to purchase, lease, recommend, use, prescribe, or arrange for the purchase or lease of any GEHC product or service. Includes: physicians, physician assistants, nurses, pharmacists, technicians, other clinicians, or research coordinators.

2.2 Definition Healthcare Institution (HCO)

Any entity or its employees or agents, in a position, directly or indirectly, to purchase, lease, recommend, use, prescribe, or arrange for the purchase or lease of any GEHC product or service. Includes: hospitals, clinics, academic institutions, nursing homes, assisted living facilities purchasing agents, group purchasing organizations, physician's practice managers, and healthcare associations.

3. Period and value of transactions

To assure that a Disclosable Transfer of Value (ToV) has occurred and a consistent approach is being used, payments or any other transfers of benefit that have been made in 2022 for grants, donations, event support or services will only be disclosed in the 2022 data report if they have occurred or have been provided in 2022. Consequently, all ToV where either the payment or any other transfers of benefit has not been made in 2022, but in 2023, will only be reported in the next annual disclosure report.

Example: A speaker is providing his service during a congress in December 2022 but the payment is only made in January 2023. This transaction will be disclosed in the next EFPIA/ABPI report in 2023.

Also, if a ToV consists of several payments and some are not processed in same calendar year, the disclosure will be made across several years.

Example: An HCP consultant is providing his service in Q4 2022 and travels as well to conduct his study. If the travel but not the service has been paid in 2022 then the ToV will partly be disclosed in the 2022 and 2023 reports.

3.1 Currency and taxes

All amounts inside the report are listed with the local currency and excluding the VAT or any other applicable taxes. In case payments have been made in a foreign currency, the exchange rate of the payment date has been used.

3.2 Transfers across country borders

Since the focus lays on the primary physical address of the recipient, all payments regardless of the location of the paying GEHC legal entity will be included under each local report.

Example: GEHC Italy is paying an English HCP consultant to provide product input. This transaction will be reported by GEHC UK in accordance with the CoC of the local pharmaceutical association ABPI.

4. Individual and aggregate disclosure

The GEHC report will disclose all ToV individually if consent has been provided by the individual recipient. Where consent has not been provided, or has been revoked throughout the same calendar year, all ToV related to this individual will be published under the aggregate section.

As per the EFPIA/ABPI Disclosure Code guidelines, all ToV relating to R&D will be published under the dedicated R&D aggregate value section.

5. Data Privacy and consent management

As the Disclosure Code is a voluntary self-obligation of the pharmaceutical industry, publication of data is dependent on the consent of the HCP concerned. Every individual under the European Data Protection Regulation is entitled to protection of data relating to them.

The basic right covers the recording, processing, and dissemination of any personal information, whereby any of these shall require the specific consent of the person affected.

There are strict requirements for such consent to be valid: it must be informed - the Recipient must receive all the information on the objectives of the EFPIA/ABPI Disclosure Code and the protection status of his/her personal data; it needs to be visually highlighted in any contractual text/clause or similar and must be clearly and transparently worded.

Although the ABPI relies also on Legitimate Interest for disclosure purposes, as set out in its Privacy Statement, GEHC will continue to rely on individual consent being given by an HCP before declaring a ToV.

GEHC will disclose all ToVs individually if consent has been provided by the individual recipient and, where consent has not been provided, or has been revoked throughout the same calendar year, all ToVs related to this individual will be published under the aggregate section.

As per the EFPIA/ABPI Disclosure Code guidelines, all ToV relating to R&D will be published under the dedicated R&D aggregate value section.