

MEDICE UK Methodological note for HCP/ORDM/HCO disclosure 2025

Data year: 2025

Year of publication: 2026

The information below describes the methodology that Medice UK Ltd had adopted, which has been applied to disclose the Transfers of Value (ToV) in the UK (and across the wider EU) are both in accordance with, and in keeping with the Association of British Pharmaceutical Industry Code of Practice for the Pharmaceutical Industry, 2024 (the Code) and the EFPIA Code of Practice that are made to Healthcare Professionals (HCPs), Other Relevant Decision Makers (ORDMs) and Healthcare Organisations (HCOs), in the submission to the Association of British Pharmaceutical Industry (ABPI) for 2024. As such, all Transfers of Value (ToV) will be published in accordance with the Code on the ABPI Central Platform.

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1 Definitions

1.1 Recipients

All activities and engagements carried out by Medice UK Ltd (Medice) with healthcare professionals (HCPs), other relevant decision makers (ORDMs), healthcare organisations (HCOs) and patient organisations (POs) in the UK (and across the wider EU) are both in accordance with, and in keeping with the Association of British Pharmaceutical Industry Code of Practice for the Pharmaceutical Industry, 2024 (the Code) and the EFPIA Code of Practice. As such, all Transfers of Value (ToV) will be published in accordance with the Code on the ABPI Central Platform.

Medice wrote to all HCPs, ORDMs and HCOs in January 2026 to give them the opportunity to review any transfer of value made to them during 2025. Once the data is verified, it shall be published on the ABPI central platform in June 2026.

As part of the pharmaceutical industry's annual disclosure of transfers of value to HCPs, ORDMs, HCOs and POs via the Disclosure UK platform and to ensure accuracy of the published data, the ABPI writes to all of the HCPs, ORDMs and HCOs named in companies' disclosure data ahead of its publication on Disclosure UK at the end of June.

Medice is committed to preserving the integrity of Disclosure UK and transparency in our interactions with HCPs, ORDMs and HCOs. Payments, or payments in-kind, made by Medice to HCPs, ORDMs and HCOs, will be collated on a secure internal company database.

Paperwork associated with all activities will be recorded, checked,

stored, and made available by Medice as required by the Code.

In accordance with applicable laws, rules, regulations and requirements relating to the privacy and security of Personal Data (as defined in the EU Data Protection Directive 95/46/EC or any replacement legislation), the Company shall obtain permission from the individual prior to disclosing personal data such as individual Transfers of Value. The Company has made every effort to secure the necessary permissions. The rights of all parties will be respected with regards to Data Protection. Parties shall have their Data Protection rights explained to them, in line with Medice's corporate Data Protection policy. Where one or more individuals withdraw their consent or in situations where consent could not be obtained, ToV will be declared as part of the aggregate reported. Medice endeavours to encourage disclosure by all HCPs that we work with.

1.2 Kind of ToVs

The following types of ToV will be provided as per identified HCPs and ORDMs, as defined in Clauses 1.9 and 1.13 allocated to one of the categories outlined below:

- Fees for service and consultancy with related expenses where Medice engages an HCP/HCO/PO for services when there is genuine and legitimate business need and where the HCP/HCP/PO is qualified and appropriate to provide the services and will be paid at the Fair Market Value. These services include:
 - Speaking at and chairing meetings
 - Training services
 - Participation at advisory boards
 - Development of educational materials
 - General consulting/advising
 - Market research activities where there is remuneration; payment for these services are only disclosed if Medice is aware of the identity of those participating in the market research
 - Services performed in connection with a third-party conference
 - Related expenses such as travel costs and subsistence incurred by an HCP while carrying out engagements on behalf of Medice as agreed as part of their sponsorship as per ABPI Code and as per Art 10 EFPIA Code of Practice within limits set by the national association.
- Registration fees (maximum of one per year) that are paid by Medice to, or on behalf of, an HCP associated with their attendance at national or international educational meetings, congresses or courses.
- Travel (this can be flights, trains, taxis, bus transfers and other travel related costs) and hotel accommodation include costs associated with travel, subsistence and accommodation agreed as part of sponsorship paid by Medice to, or on behalf of, an HCP. Costs for ground transportation (e.g. bus or taxi) that are organised for group transportation and not assigned to certain HCPs are reported in aggregate, but where the identity of the HCP is known, it is split by HCP. This is associated with their attendance at national and international educational meetings, congresses or courses as part of support towards continuous medical education.

- Sponsorship agreements through financial or non-financial support to legitimate established organisations for medical or scientific education (including independent conferences). The aim is to increase the scientific or educational quality of the event and/or support with the logistics in modest venues in line with Medice ethical principles, as described in the mandatory sponsorship agreements. This may include symposia and sponsoring of the speakers or faculty.
- Donations, grants and benefits in kind as in accordance with Clause 23 of the ABPI Code 2024; following a written request, a 'donation' is a contribution made towards the work or fund-raising activities that an HCO carries out independent of Medice. Following a discussion or a request from an HCO, a 'grant' is a contribution to some, or all, of the costs of an activity that an HCO carries out independent of Medice.
- Following a request or discussion with an HCO, 'a benefit in kind' is the provision of a service, benefit, technical or administrative input given to an HCO as an alternative to a financial contribution (donation or grant); the cost of the benefit in kind (the cost the HCO would reasonably expect to pay) is the value of the ToV recorded.
- Contribution to the cost of an event; this may include sponsorship or support for the running of an event by an organisation independent to Medice.
- Support to attend an event in accordance with Clause 10.11 of the ABPI Code 2024, travel and/or accommodation booked via Medice or third party acting on behalf of Medice.
- Fees for service payments made to an organisation as part of real-world evidence (RWE) research agreements, defined as a service evaluation study, non-interventional study that is retrospective in nature and where a fee for service has been paid directly by Medice or via a third-party acting on behalf of Medice.

In line with updates in requirements for disclosure of Transfer of Value in 2025 that require Medice to disclose values supplied to non-HCPs. Where Medice has engaged with non-HCPs for services having provided a Transfer of Value, these individuals will be treated in the same way as HCPs.

2 Disclosure's Scope

2.1 Products concerned

- CNS - Prescription Only Medicine
- Nephrology - Prescription Only Medicine
- Urology - Prescription Only Medicine

2.2 Company concerned

MEDICE UK

2.3 Excluded ToVs

- ToVs where the identity of the recipient of the ToV is unknown e.g., market research.
- Ordinary course purchases and sales of medicines by and between a company and an HCP or HCO.
- Package deals solely related to ordinary course purchases and sales of medicines.

- Payments made directly to medical journals and publishing companies.
- ToVs provided in accordance with Clauses 10.5, 10.6 & 19.2 of the ABPI Code of Practice.
- Direct costs towards food and drinks to individuals. However please note that some catering costs may have been disclosed where costs for catering have been invoiced and charged for certain activities e.g.,
 - breakfast costs with hotel room rates.
 - Individuals or organisations that have been contracted by third parties unless the third party (i) is required to disclose such information Medice; and (ii) has, in fact, made Medice aware of the individuals or organisation and their ToV, (in which case Medice has included these ToVs in the Disclosure report).
- Third-party recipients of donations from independent charitable organisations which have themselves received donations from Medice and are not otherwise subject to disclosure.

2.4 ToVs date

1st January 2025 to 31st December 2025

2.5 Direct ToVs

- All direct payments to HCPs/ORDMS and HCOs will be included in the calendar year in which Medice has executed the payment or reimbursement in our financial system.
- ToVs related to travel (e.g., flight and train tickets, etc.), accommodation (e.g., hotel room cost).
- Registration fees will be included in the calendar year during which the activity/meeting took place. Out-of-pocket expenses that are paid directly to HCPs/ORDMS are disclosed in the calendar year in which they were paid.
- Payments that have been processed via a third party acting on behalf of Medice; the payment date to the third party or the payment date provided by the third party is used as the determining factor to allocate the payment to the related calendar year.

2.6 Indirect ToVs

- The HCP/ORDM aggregate section of the disclosure reporting template contains the total value per type of cost paid to HCPs/ORDMS that have chosen to object to disclosure on an individual basis.
- According to individual privacy rights, objection to a legitimate interest disclosure and consent to individual disclosure can be withdrawn by HCPs/ORDMS in which case, the disclosure is made on an anonymous aggregate basis. Where an HCP or ORDM has objected to disclosure on an individual basis, all associated.
- ToV will be disclosed in the aggregate section of the report.
- Research and Development (R&D) payments are also included in aggregate, within the R&D category. Please see "Research & Development (R&D) ToV reporting" for further details on what is included in R&D.

2.7 Non-monetary ToVs

Medice discloses benefits in kind using the fair market value listed in the contract between Medice and the HCO.

2.8 ToVs in case of partial attendances or cancellation and refund

Where an HCP/HCO does not receive the benefit due to a no-show or cancellation of the event, the associated costs are not reported, such as cost of cancelling travel or hotel booking. In case of a partial attendance, only the costs received will be reported. Where Medice has to pay cancellation fees as per contractual agreements, for events that have been cancelled, Medice will report the payments.

2.9 Cross-border activities

Medice endeavours to capture and report all ToV to HCPs and ORDMs with their primary practice in a country with the EFPIA Code of Practice and/or other cross border transparency reporting requirements. The country of disclosure is determined by the address of main practice for HCPs.

2.10 R&D

Research & Development (R&D) ToVs to UK HCPs or HCOs that have been disclosed in aggregate are related to the planning or conduct of:

1. Non-clinical studies (as defined in the OECD Principles on Good Laboratory Practice and Human Medicines Regulations 2012)
2. Non-interventional studies that are prospective in nature and that involve the collection of patient data from or on behalf of individuals or groups of health professionals specifically for the study.

2.11 Voluntary disclosure

Where an HCP or ORDM has objected to disclosure on an individual basis, all associated ToV will be disclosed in the aggregate section of the report.

HCOs cannot withdraw their consent and therefore all interactions are disclosed.

3 Specific considerations

3.1 Country unique identifier

UK

3.2 Self-incorporated HCP

If an HCP/ORDM contracts with Medice through their private limited company and if any ToV is paid to the company in place of the HCP/ORDM, we will attribute the ToV to the individual HCP/ORDM and not the private limited company.

If an HCP/ORDM contracts with Medice and the ToV is paid to the HCO that the HCP/ORDM is employed by Medice, we will attribute the ToV to the HCO that received the ToV and not the HCP/ORDM.

Any individual expenses, like travel & accommodation, will be reported and attributed to the HCP unless otherwise stated in the contract.

3.3 Multi-year agreements

Where contracts span multiple years, each individual annual ToV is captured and disclosed in the corresponding reporting period.

3.4 Country specificities

All Medice affiliates have a duty to disclose all ToVs made to HCPs/ORDMs, or HCOs based in the UK.

3.5 Quality Checks

Medice relies on a combination of systems, standardised processes, and manual data entry from internal and external sources to record and report relevant ToV data. The information reported in this methodological note and submission is done in good faith and with the best efforts in complying with the requirements of the ABPI Code and spirit of the EFPIA Code. Whilst Medice endeavours to have efficient and timely processing, it may occur that payment information becomes available only after the date of publishing. Despite our best efforts to ensure accurate reporting, should we fail to include complete and correct information in our submission, we will appropriately investigate and address in case of erroneous information. We expect this to be exceptional and will monitor actual occurrences. In case of significant changes to the initial publication, we will publish an amendment within a reasonable timeframe.

Should an HCP/ORDM or HCO consider that the report is incomplete or incorrect, please:

(1) contact us at enquiries@medice.co.uk;

(2) as requested by the ABPI, please also make a request through the ABPI central database to ensure your query is captured and we will endeavour to make appropriate changes as soon as possible.

The information on ToVs is disclosed to the ABPI for the purpose of meeting ABPI reporting requirements.

The payments disclosed should not be used for tax declarations or any other purpose.

4 Data protection legal basis

4.1 Consent collection

Medice ensures that all efforts have been made at a local level to achieve a high level of individual HCP payment disclosure whilst aligning with the recognisable applicable Data privacy regulations. The process is to request consent once from the individual HCP with the first contract for all future engagements in the year for the period the consent is given.

The data of the HCP is only reported after the consent is given; where no response is received, there is no consent assumed and the data is reported as aggregate data.

Consent to disclosure can be withdrawn at any time by the HCP and

after public disclosure on receipt from the HCP/HCO then:

- Where the consent is withdrawn before disclosure, the consent value is registered as a 'no'
- Where the consent is withdrawn after public disclosure, there is a process of withdrawal, and all requests and issues are managed by Medice UK. HCPs and HCOs can email Medice at enquiries@medice.co.uk if there is any data that is believed to be inaccurate.

4.2 Legitimate interests

In the case of the individual deciding to object to legitimate interest disclosure, all payments instructed as above will be disclosed in the aggregate HCP section.

5 Form of disclosure

5.1 Date of publication

30/03/2026

5.2 Disclosure platform

PMCPA- www.disclosure.org.uk

5.3 Disclosure language

English

6 Disclosure financial data

6.1 Currency

Where payments are made to groups or individuals in Europe in a currency other than Sterling (£), the exchange rate will mean the exact equivalent in Sterling (£), and were paid in Euros (€) these payments will be declared in Pounds Sterling (£) on the ABPI Central Platform calculated using a fixed exchange rate for 2025 payments. Readers should understand that the total amounts disclosed in sterling could therefore vary slightly from the exact amount paid in the local currency; variations will be greater if there have been significant movements in exchange rate during the reporting period.

6.2 VAT included or excluded

All payments made by Medice will be subject to the appropriate local taxes (Medice is not responsible for the tax arrangement of individuals or organisations or the subsequent reporting thereof in relation to any ToV made by Medice).

All ToVs for HCP/ORDM travel and accommodation (e.g., flight ticket, hotel room, etc.) are reported inclusive of VAT, where applicable.

The disclosure reported ToV amounts should not be used for VAT/Tax reporting purposes.

In line with all invoices and payment requests received, Medice will pay all fees and appropriate local taxes such as 'Value Added Tax' at the specified local rates.

6.3 Calculation rules

Where foreign exchange has occurred calculations are made to two decimal places, based on individual costs (rather than the total cost) to ensure accuracy.

7. Additional information

Please contact enquiries@medice.co.uk for the supply of additional information, outlining the enquiry in full, with the subject title 'Transfer of Value Enquiry – 2025'.