

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 organisations (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 organisations. This ensures that such relationships do not influence clinical decisions, as all financial interactions are fully transparent.

One of the most recent transparency initiatives comes from the European Federation of Pharmaceutical Industries and Associations (EFPIA). In 2013, EFPIA adopted this pharma self-regulation under the 'Code on Disclosure of Transfers of Value from Pharmaceutical Companies to HCPs and HCOs', which requires companies, such as GE Healthcare, to publicly publish a report by the end of June 2016 of all transfers of value from GE Healthcare to HCPs and HCOs accumulated in 2016. Such disclosures will occur on an annual basis. GE Healthcare, as a member of the pharmaceuticals industries, is committed to greater transparency of the financial relationships with HCPs by complying with both the EFPIA Transparency Code and other national Transparency regulations.

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.

In accordance with the reporting standards of the EFPIA/ABPI Disclosure Code and all applicable data privacy regulations, the report lists the payments made to HCOs, HCPs and research and development for 2016.

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 support a third-party organized event in the form of a sponsorship. If the event is organized by a third party (e.g. event organizer, travel agency) then the healthcare association responsible for the content of the educational program will be listed as the recipient of this transfer of value.

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

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 a HCP to support his/her participation in a medical congress

1.2 Service and Consultancy

GEHC may engage a HCP to provide consulting services to fulfill a legitimate business need. Examples of consulting services include speaking engagements, product training, advisory board participation, review/input on publications, and product input. The published amount is the same as the amount agreed in the underlying contract.

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: A HCP is hired to provide input on GEHC's product

1.3 Grant

GEHC may provide funding or in-kind support of medical education programs (e.g., grand rounds, fellowships, scholarships) in the form of educational grants. The published amount is the same as the amount agreed in the underlying contract.

Example: GEHC is paying for medical books.

1.4 Donation

GEHC may donate money, products or services to legitimate charitable organizations. The published amount is the same as the amount agreed in the underlying contract.

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

1.5 Research

GEHC may contract a HCP, an HCI (e.g., the site or investigator) 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.

Example: GEHC is hiring a CRO to do clinical study

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 2016 for grants, donations, event support or services will only be disclosed in the 2016 data report if they have occurred or have been provided in 2016. Consequently, all ToV where either the payment or any other transfers of benefit has not been made in 2016 will only be reported in the next annual disclosure report.

Example: A speaker is providing his service during a congress in December 2016 but the payment is only made in January 2016. This transaction will be disclosed in the next EFPIA report in 2017.

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: A HCP consultant is providing his service in Q4 2016 and travels as well to conduct his study. If the travel but not the service has been paid in 2016 then the ToV will partly be disclosed in the 2017 and 2018 reports.

3.1 Currency and taxes

All amounts inside the report are listed with the local currency and including 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 aggregated section. As per the EFPIA/ABPI Disclosure Code guidelines, all ToV relating to R&D will be published under the dedicated aggregated value section.