



AMA's Position Regarding State Proposals to Restrict Disclosure Of Physician Prescribing Data

Background

- The American Medical Association (AMA) is troubled by pending legislation that would prohibit or severely restrict the collection and disclosure of prescribing information that identifies a specific *physician* prescriber.
- The AMA has been a long standing advocate of legislative efforts to protect patient confidentiality and agrees strongly that the unauthorized dissemination of any identifiable *patient* information is inappropriate and illegal pursuant to federal HIPAA law.
- The AMA believes that physician prescribing data do not undermine patient confidentiality laws because all patient data have been de-identified prior to the collection and aggregation of this information.
- There are many important reasons for state legislatures to reject measures to impose broad limitations on disclosure of *physician* prescribing data. Most significantly, this information is critical to improving the quality, safety and efficacy of pharmaceutical prescribing through evidence-based medical research.
- All Healthcare Information Organizations (HIOs) that compile and market prescribing data for commercial use are licensees of the AMA Physician Masterfile. The AMA imposes safeguards on the appropriate use of physician prescribing information through carefully-monitored provisions in licensing agreements with HIOs. HIOs utilize the Masterfile to match and append prescribing data, package these data into various products, and license the resulting information to the pharmaceutical industry, academia and government entities. This commercial use of prescribing data generates profits to make possible the development of a variety of derivative research databases that would otherwise go unfunded. Through these databases, hundreds of studies are made available to the medical community for a wide variety of activities to improve health care quality and safety.
- The AMA has worked proactively to address concerns involving instances of misuse of prescribing data by pharmaceutical sales representatives. As an advocate for physicians and ultimately their patients, the AMA has created a solution to address physician concern over use of these data. As described more fully below, the AMA is launching the Prescribing Data Restriction Program (PDRP) that will give physicians the option to restrict access to their prescribing data, making government-imposed restrictions unnecessary. All companies that purchase data from HIOs will be contractually obligated to adhere to this program.



The Importance of Prescribing Data in Evidence Based Research

Restrictions on the use of prescription information will disrupt health care research and its corresponding benefits for patients, government agencies, health planners, academicians, businesses and others. This research supports many beneficial applications, including: (1) setting and promoting public health policy, (2) accelerating healthcare innovation, (3) driving best clinical practice, (4) maintaining safety, (5) enabling physicians and patients to make better decisions, and (6) balancing value and cost. In addition, prescription information is used in bioterrorism surveillance, Medicare Part D uptake studies and physician feedback reporting. Commercial uses of the information underwrite the substantial costs to collect and process this information. The unintended consequence of restrictive state legislation is that this information would no longer be available for those public benefits.

AMA's New Prescribing Data Restriction Program (PDRP)

- The AMA will launch a new web-based Prescribing Data Restriction Program (PDRP) on July 1, 2006. This program will address physician concern over inappropriate use of prescribing information while ensuring these data continue to be available for evidence-based research. The AMA believes this approach provides physicians with the tools they need to restrict information that they do not want shared while avoiding legislatively-mandated restrictions that could have unintended consequences.
- The PDRP is being implemented in response to feedback from AMA constituents. The overwhelming majority of a sampling of America's doctors have told AMA that where concerns exist, they will be alleviated through the existence of a formalized program that allows them to restrict this information from going to pharmaceutical sales representatives.
- Based on the direction of the AMA Board of Trustees and its physician constituents, AMA has created exactly such an opt-out mechanism. In addition to it enabling physicians to restrict access to prescribing information, it provides doctors with a avenue to register complaints against a company or individual who has used the information inappropriately. The AMA will take appropriate action on behalf of the physician based on the specifics of the complaint.
- As part of the PDRP the AMA has developed a web-based Prescribing Data Information Center that provides information to physicians on what the AMA considers responsible use of prescribing data by HIOs and pharmaceutical companies. The AMA has also developed Industry Best Practice Guidelines on the appropriate use of physician prescribing data.



Summary

- The AMA strongly supports state legislative efforts to protect the confidentiality of patient information. However, one should not confuse confidential patient data with physician prescribing data. Measures that restrict disclosure of physician prescribing data would greatly harm research and development activities dependent upon this information. The safeguards offered by the AMA's PDRP offer a much more reasonable and targeted approach to protecting unwanted disclosures.