Sunshine Act FAQs

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Revised: 3/30/15
**General**

**Question 1 & 2:** Who has to report payments for the Sunshine Act? Do physicians self-report payments made to them? *Where do I find the currently posted public data?*

**Answer:**
Manufacturers of the listed below have the responsibility to report transfers of value under the Sunshine Act:
- Covered Drugs
- Devices
- Biologics
- Medical Supplies

Physicians only need to follow the requirements under OHSU's Conflict of Interest policies to disclose to the institutional CoI disclosure system. See the [2013 OHSU Policy Sunshine Act Guide of Physicians](#) for guidelines.

**Question 3:** What are the timelines manufacturers have to follow for submission of data?

**Answer:**
Applicable manufactures and applicable Group Purchasing Organizations (GPOs) are required to collect data documenting transfers of value to physicians and teaching hospitals for the Open Payments database every year.

Around February of each calendar year, applicable manufacturers and GPOs will begin the data submission process for the new program year. Thereafter, registered providers and teaching hospitals will have a 45-day time period to review and dispute payments before publication.

On September 30, 2014, the first public report was published listing payments made during the last 5 months of 2013. Future reports will be published every year on June 30th and will contain the previous calendar year of payment data. For example, payment data that is submitted by applicable manufacturers and GPOs for the 2014 calendar year will be published in June, 2015.

Explore the Data for reporting year 2013 and forward on the [CMS Open Payments website](#).

**Question 4:** Does the Sunshine Act etc. apply to physician assistants and nurse practitioners?

**Answer:**
No, only the following types of professionals that are legally authorized by the state to practice, regardless of whether they are Medicare, Medicaid, or Children’s health Insurance Program (CHIP) providers:
- Doctors of medicine or osteopathy
- Doctors of dental medicine or dental surgery
- Doctors of podiatric medicine
- Doctors of optometry
- Chiropractors

Note: Medical residents are excluded from the definition of physicians for the purpose of this program.
Question 5: Why should I review the information before it becomes public?

Answer: It is true that physicians have no reporting obligations under this regulation but should consider reviewing the reported information before it becomes public. Reviewing the data before public release can increase the accuracy of the data and allow physicians to dispute inaccuracies in the reported information. Anyone can view the information once it is published annually in June, including your chief or chair, institutional officials, the Integrity Office, patients, government representatives, colleagues, attorneys, and the media. Patients may ask you about payments or transfers of value you received. Reviewing data before and after public release, gives you the opportunity to understand what questions you may receive.

Question 6: Should I be worried if my name appears in Open Payments?

Answer: No. A very large number of physicians and teaching hospitals will have information posted about them. Open Payments is focusing on transparency; simply having data posted under your name does not mean you have violated a law or any institutional policy. The most important thing is that the information posted should be as accurate as possible. If you have concerns about reconciling information on the Open Payments database with information you have reported to your institution or to other organizations, contact the Integrity Office.

Question 7: What if my patients or the media have questions about the payments appearing under my name in the database?

Answer: Payments attributed to you in the database present you with the opportunity to begin a discussion with patients about healthcare innovation and advancing health and patient care through productive and principled partnerships with industry. We encourage you to communicate openly with patients about your relationship with industry and address any concerns they may have. If your patients would like to know details about OHSU policies, you may cite those as well or you may contact the Integrity department for assistance and information about how your institution is responding to the Sunshine Act requirements.

If someone from the media contacts you, please speak to a member of the media relations staff within the Strategic Communications office. Click here for contact information for the media relations staff.
### Question 8 & 9: When do you suggest we register by? Is there a deadline?

**Answer:**
There is no deadline for actual registration. However, the deadline for corrections and disputes occurs every program year during the month of April. This means that any discovered conflicts must be reported before the publication date at the end of June.

Please keep in mind that identity verification can take some time; contact the CMS [helpdesk](mailto:helpdesk@cms.hhs.gov) if you have trouble completing the registration process.

### Question 10: CMS Registration Tips

**Answer:**
- Registration must be completed in one session. The Open Payments system logs out all users after 15 minutes of inactivity.
- Never use the navigation buttons on your browser toolbar. Only use the navigation buttons (Back buttons) within the Open Payments system itself.
- If you do not know your ten-digit NPI number, you can find it on the [NPI Registry website](https://npiUSR.nlics.gov/).
- If you cannot find your DEA number, contact the [DEA Office of Diversion Control](https://diversioncontrol.usdoj.gov/).
- Use Internet Explorer versions 8-10, Chrome or Firefox browsers. Currently the Open Payments system is not optimized for the Safari browser.

### Question 11: What information do physicians need to be able to register in the Open Payments system?

**Answer:**
When registering in Open Payments, enter all of your **state license numbers**, your **National Provider Identifier (NPI)** (if applicable) and any **Physician Specialty codes**.

Records submitted to Open Payments are associated with physician license numbers and NPI. Verify **state license information** with the licensing office of the state it is held and verify **NPI information** matches in **PECOS** or **NPPES**. Registrants submitting information that does not match these external sources will fail vetting within the system. Vetting helps ensure the security of the Open Payments system and data integrity.

For **Physician Specialty code(s)**, refer to the [taxonomy code list](https://www.cms.gov/OpenPayments/Downloads/2011-Taxonomy-11-14-11.pdf) for a complete listing of the available taxonomy codes. Specialty codes that are not on the taxonomy code list may not be entered.

To update registration profile information, log onto the Open Payments system and select "My Profile" from the menu bar at the top of the landing page. On the “My Profile” page, users can update their profile information.

For assistance, please call the CMS live Help Desk at 1-855-326-8366, Monday through Friday, from 7:30 a.m. to 6:30 p.m. (CT), excluding Federal holidays. Questions can also be submitted to the Help Desk via email, at openpayments@cms.hhs.gov.

Revised: 3/30/15
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<thead>
<tr>
<th>Question 12:</th>
<th>Answer:</th>
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<tbody>
<tr>
<td>I registered in the Enterprise Portal (EIDM) for Phase I, but when I try to log into the system I get an error message. What do I do?</td>
<td>When you registered in the Enterprise Portal (EIDM) for Phase I, you should have received an email notification from a <a href="mailto:donotreply@cms.gov">donotreply@cms.gov</a> address that has the following message:</td>
</tr>
<tr>
<td></td>
<td>Dear &lt;your first and last name&gt;</td>
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<tr>
<td></td>
<td>Thank you for registering. The User ID that you have chosen is &lt;Username You Chose&gt;. You can log in to the CMS Portal using the following link with your User ID and Password. Please keep this E-mail for your records.</td>
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<td>• If you did not receive such an email, check your junk/spam filters.</td>
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<td>• If you are still unable to locate the confirmation email, then try to register in the system again.</td>
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<td>• If that does not work, call the customer support line: 1-855-326-8366, Monday through Friday, from 7:30 a.m. to 6:30 p.m. (CT), excluding Federal holidays.</td>
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<td>• CMS has user guides available to offer further instruction and assistance at their Physicians website.</td>
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<td>o Look under the ‘Phase 1’ header for the link “Phase 1 Step-by-Step CMS Enterprise Portal Registration...”</td>
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<th>Question 13:</th>
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<tr>
<td>I logged into the Enterprise Portal and when I tried to register in the Open Payments system under Phase II, I received an error message. What do I do?</td>
<td>We have heard from several users that the CMS system has been having technical issues since it launched. Here are some options available:</td>
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<td>• If you were able to do the &quot;request access&quot; step to request access to open payments after logging in through the EIDM system and are having problems, you may need to log out and log back in to then gain access to open payments.</td>
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<tr>
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<td>• CMS has user guides available to offer further instruction and assistance at their Physicians website.</td>
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<td>o Look under the ‘Phase 2’ header for the link &quot;how a physician can register...&quot;</td>
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<td>• If you still continue to experience problems, contact the CMS help desk by submitting an email to the Help Desk at <a href="mailto:openpayments@cms.hhs.gov">openpayments@cms.hhs.gov</a>.</td>
</tr>
<tr>
<td></td>
<td>• For live assistance, call Help Desk Support on 1-855-326-8366, Monday through Friday, from 7:30 a.m. to 6:30 p.m. (CT), excluding Federal holidays.</td>
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### Question 14 & 15
How long do I have to review my data? What if I find a payment posted in error?

**Answer:**
The review period is activated every year during April and remains open for disputes for 45 days, in the Open Payments system. If you have any concerns about accuracy, this is the time to dispute and correct the data submitted by industry. For more information, see the CMS Dispute and Resolution website. Follow this link to a Quick Reference Guide for Review and Disputes for help through the steps in the process.

### Question 16:
Can I delegate someone else to review and manage disputes on my behalf?

**Answer:**
The CMS Open Payments system allows this, however, note that this individual would need to have access to specific information about transfers of value to the physician in order to be able to determine if certain transfers of value should be questioned. The Integrity Office is not able to perform this function on behalf of physicians.

**Process:**
1. Physician registers through the CMS Enterprise Portal and in the Open Payments system
2. Representative registers through the CMS Enterprise Portal, EIDM, and request access to the Open Payments system.
3. If you are using a delegate, assign delegate and authorize representatives to review and dispute data on your behalf.
   a. Select one of three available access levels:
      i. View only
      ii. Review and dispute
      iii. Modify profile
4. Representative to accept their nomination as an authorized representative.
   a. Authorized representative will be able to view a physician's:
      i. Birth name and last name
      ii. Business address, telephone and email
      iii. NPI and state license numbers
   b. Authorized representatives will not have access to
      i. Physician User IDs or passwords
      ii. Will not be able to modify or reset any user IDs or passwords.

For instructions on how to accept or reject a nomination, click here to see the Open Payments System Quick Reference Guide.