

United States Senate

COMMITTEE ON FINANCE

WASHINGTON, DC 20510-6200

December 7, 2009

Via Electronic Transmission

Michael D. Maves, M.D.
Executive Vice President and Chief Executive Officer
American Medical Association
515 North State Street
Chicago, IL 60654

Dear Dr. Maves:

The United States Senate Committee on Finance (Committee) has jurisdiction over the Medicare and Medicaid programs and, accordingly, a responsibility to the more than 100 million Americans who receive health care coverage under these programs. As Ranking Member of the Committee, I have a duty to protect the health of Medicare and Medicaid beneficiaries and safeguard taxpayer dollars authorized by Congress for these programs.

For the last three years, the Committee has been looking into various aspects of the pharmaceutical industry, including consulting arrangements, and industry funding for Continuing Medical Education (CME). My inquiry was spurred, in part by press accounts documenting the lack of transparency in the relationships between the pharmaceutical industry and nonprofit organizations. For instance, in April 2008, *The Wall Street Journal* reported that industry representatives, including ten major drug companies, formed a coalition to promote looser restrictions on off-label marketing.¹ The coalition asked the National Alliance on Mental Illness (NAMI) to speak in favor of this issue.

On October 6th of this year, I sent letters to all fifty state chapters of NAMI asking them to disclose income from pharmaceutical companies. In that letter, I explained that NAMI National receives almost two-thirds of its funding from the drug industry.² I learned recently that a few days after I sent those letters, one of the founders of NAMI and member of the NAMI National Board of Directors emailed his resignation, stating that he was shocked at NAMI's reliance on pharmaceutical industry funding. In particular he said: "This financial dependency presents a number of problems."
[ATTACHMENT]

¹ Alicia Mundy, "Off-Label Use of Drugs Gets a Push --- Big Pharma Lobbies Washington to Relax Rules on Marketing," *The Wall Street Journal*, April 18, 2008.

² Gardiner Harris, "Drug Makers Are Advocacy Group's Biggest Donors," *New York Times*, October 21, 2009.

In response to my concerns, NAMI began to disclose publicly on its website, any amount of funding exceeding \$5,000 that it received from pharmaceutical companies and other foundations. This decision in favor of transparency by NAMI is encouraging.

In April of this year, the Institute of Medicine issued a report endorsing transparency and stating that protections against conflicts can be established without inhibiting productive relationships between medicine and industry to improve medical knowledge and care. I am hoping you can assist me in this effort by providing additional insights into these relationships as well as any changes in transparency that your organization may be planning for in the future. Operating with transparency sends a message that there is nothing to hide.

Accordingly, I would appreciate an accounting of industry funding that pharmaceutical, medical device companies, foundations established by these companies or the insurance industry have provided to the American Medical Association (AMA) (The term “industry funding” means any transfer of value, including but not limited to grants, donations, and sponsorship for meetings or programs, etc.) This request covers the period of January 2006 to the present.

Because reporting practices vary widely from one charitable organization to another, I would appreciate you also placing this income into a chart, detailing annual amounts of industry funding. For each year, please provide the following information for AMA:

- 1) Year;
- 2) Name of company;
- 3) Amount of funding; and
- 4) Reason(s) that the funding was provided.

In addition, please explain AMA’s policies for accepting industry funding and the disclosure requirements of your top executives and board members by answering the following questions. For each question, please respond by first repeating the enumerated question followed by the appropriate answer. Again, this request covers the period of January 2006 to the present:

- 1) Please describe the policies for accepting industry funding and whether or not AMA allows companies to place restrictions or provide guidance on how funding will be spent.
- 2) If AMA allows companies to place restrictions on industry funding, then please explain all restrictions and/or guidance for each transfer of value from industry. For every transfer of value with a restriction, please provide the following information: year of transfer, name of company, and restriction placed on funding.
- 3) Please explain what policies, if any that AMA plans to adopt to ensure transparency of funding in order to provide a greater public trust in the independence of your organization.

- 4) Please explain your policies on disclosure of outside income by your top executives and board members.
- 5) Please provide the disclosures of outside income filed with your organizations by your top executives and board members.

In cooperating with the Committee's review, no documents, records, data or information related to these matters shall be destroyed, modified, removed or otherwise made inaccessible to the Committee.

I look forward to hearing from you by no later than December 21, 2009. All documents responsive to this request should be sent electronically in PDF format to Brian_Downey@finance-rep.senate.gov. If you have any questions, please do not hesitate to contact Paul Thacker or Brian Downey of my Committee staff at (202) 224-4515.

Sincerely,



Charles E. Grassley
Ranking Member

Attachment

From: H Lamb [hlamb@]
Sent: Friday, October 09, 2009 5:22 PM
To: STEPHEN FEINSTEIN
Cc: NAMI Board
Subject: Letter of Resignation

Steve Feinstein, Ph. D.
President
NAMI National Board of Directors
3803 N. Fairfax Dr., Ste. 100
Arlington, VA 22203

Dear Steve,

I am writing to resign as a Member of the NAMI National Board of Directors. I would like this resignation to take place immediately.

My reason for doing this is the relationship between NAMI and the large pharmaceutical companies. After I joined the Board, I was shocked to learn that approximately half of NAMI's income comes from the large pharmaceutical companies. At that time, I asked Mike Fitzpatrick about this and he assured me that they were working to correct this situation. This is now my fifth year on the Board. During this period, I have asked Mike on a number of occasions about our progress in eliminating our financial dependency on the drug companies, and each time he assured me that it was being worked on. However, very little has changed, right up to the present day.

This financial dependency presents a number of problems. First of all there can be the perception that we have a conflict of interest. For instance, in the May 2008 issue of Psychiatric Services, an article by Ken Duckworth and Mike Fitzpatrick stated "Policy makers may be tempted to oversimplify the results of CATIE by restricting access to the costlier second-generation medications. However, doing so will hurt clinical care, and any savings to state and community mental health programs may be illusory. Policy can be constructed to focus on clinical outcomes and not merely restrict access to medications on the basis of cost". I believe Ken and Mike sincerely believe this, as do I. However, this position is the same as that of the drug companies and is worth billions of dollars to them. This article could easily be seen as the result of a conflict of interest. It would seem to me that in as much as we are financially dependent on the large pharmaceutical companies, we should be careful to take no public positions, one way or the other on psychopharmacology.

An even worse possibility is that there actually could be a conflict of interest. This could easily happen, and there is some indication that it might have in the past.

To what extent is the Board consulted about such issues? In my experience, not very much.

Clearly, NAMI needs money to accomplish its objectives. Just as important, and perhaps even more so, is that NAMI be perceived as having integrity.

I have not come easily to this conclusion to resign from the Board. After all, I helped to found this organization over thirty years ago. I feel however, that I must do this for the reasons given above.

Please call upon me if I can be of any help in any way.

Best Regards,

Dick