

Senate Bill 539 Report: Compensation and Samples Distributed by Pharmaceutical Sales Representatives in Nevada

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

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Introduction

Senate Bill No. 539 was passed during the 2017 legislative session, requiring the Department of Health and Human Services (DHHS) to compile lists of prescription drugs used to treat diabetes and requiring each pharmaceutical sales representative to report samples as well as compensation in excess of \$10 provided to health care providers within the State of Nevada. This report is submitted pursuant to Section 4.6, subsection 5 of SB539 as follows:

The Department shall analyze annually the information submitted pursuant to subsection 4 and compile a report on the activities of pharmaceutical sales representatives in this State. Any information contained in such a report that is derived from a list provided pursuant to subsection 1 or a report submitted pursuant to subsection 3 must be reported in aggregate and in a manner that does not reveal the identity of any person or entity. On or before June 1 of each year, the Department shall:

(a) Post the report on the Internet website maintained by the Department; and

(b) Submit the report to the Governor and the Director of the Legislative Counsel Bureau for transmittal to the Legislative Committee on Health Care and, in even-numbered years, the next regular session of the Legislature.

Methodology

All drug manufacturer reports received by DHHS were standardized and merged into one dataset. Those reporting compensation or sample incidents indicating that “doctor” was the professional designation of the recipient were linked to licensing lists for Medical Doctors (MD) and Doctors of Osteopathy (DO). Only a fraction (13%) of the original records reported by the drug companies contained enough information to link the provider records to the physician licensing data. Due to time constraints related to establishing regulations for reporting, a specific format was not designated by DHHS during this first year. A report format will be prescribed in future years.

Some sales representative reports only listed the name of the recipient given compensation or a sample, which did not allow the department to conclusively identify whether a recipient was a health professional. Only 26% of the reports provided sufficient information to determine if a recipient was or was not a health provider.

Manufacturers and Sales Representatives

Table 1 indicates the unique number of drug manufacturers that reported on behalf of their sales representatives or drug manufacturers from which sales representatives sent reports. Reports were submitted in both ways. Some manufacturers sent a comprehensive list on behalf of all sales representatives, while some manufacturers required sales representatives to submit their own reports.

Table 1:	
Total Number of Manufacturers Reporting	154

As of April 12, 2018, there were 2,572 active sales representatives reported by drug companies. Table 2 indicates the number of sales representatives for whom or from whom reports were received. That number represents slightly more than 52% of sales representatives. It is unknown whether the other 48% were unaware of the new law or did not have anything to report. Outreach to drug companies and sales representatives will be conducted in coming years to ensure compliance with statutory requirements.

Number of Sales Representatives Reporting	1347
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Health Providers

Incidents in which recipient professional designation information was provided were utilized to create Chart 1 which illustrating the percentage of each professional group receiving any type of sample or compensation between October and December of 2017.

**Chart 1:
Percent Professional Designation Group Receiving Sample or Compensation Incident**

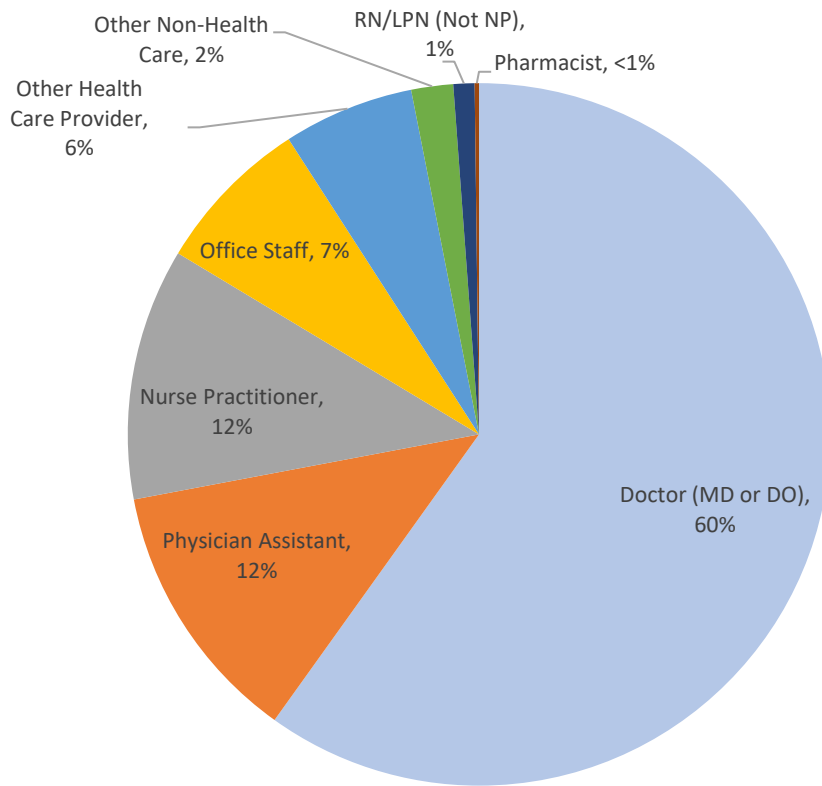


Table 3 compares the percentage of incidents across all professions reported as compensation or sample. Samples were provided more frequently than compensation to all health providers or other staff.

Table 3:	
Comparison of Compensation versus Sample Incidents	
Compensation	36.80%
Samples	63.20%
Total	100.00%

Physician Data

Table 4 indicates the number and percentage of primary care doctors receiving compensation or samples compared to all other specialties.

Table 4:		
Number/Percent of Specialist or Primary Care* Doctors Receiving Compensation or Samples		
Specialty of Doctors Receiving Compensation or Samples	Number of Doctors	Percent
All Other Specialties	358	37.53%
Primary Care*	596	62.47%
Grand Total	954	100.00%

* For the purposes of this report, primary care doctors include the following self-reported specialties: family practice, general practice, internal medicine, obstetrics/gynecology, pediatrics, psychiatry, and geriatrics.

Table 5 illustrates the percentage of doctors that received compensation only, samples only, or a combination of compensation and samples. Almost 60% of doctors received samples only. As an important note, the 954 unique doctors identified in Table 5 represent only those recipients that could be conclusively identified as a doctor from the information submitted to the department.

Table 5:		
Individual Doctors Receiving Compensation, Samples or Both		
	Number of Doctors	Percentage
Compensation Only	170	17.82%
Sample Only	558	58.49%
Compensation and Sample	226	23.69%
Total	954	100.00%

Compensation Data

Only 18% of the doctors receiving compensation had specific monetary values identified. Table 6 illustrates that of the records in which a compensation amount was specified, only 10.40% received over \$100 in aggregate during the reporting period. More than 95% of doctors reported in Table 6 received over \$10 in a single incident. Some reported compensation values were below \$10 in a single incident (less than 5%). Those were not included here. Individual incidents of compensation less than \$10 were not required to be reported to the department, although some manufacturers or sales representatives submitted those values.

Table 6:	
Individual Doctors Receiving \$10 in a Single Incident or Over \$100 Total in the Reporting Period	
Compensation Event	Percentage
Doctors Receiving \$10 or More in a Single Incident	95.38%
Doctors Receiving over \$100 During the Reporting Period	10.40%

After cross referencing sales representative reports with the list of licensed doctors, the average total compensation per doctor and the average compensation per doctor per event were calculated (Table 7).

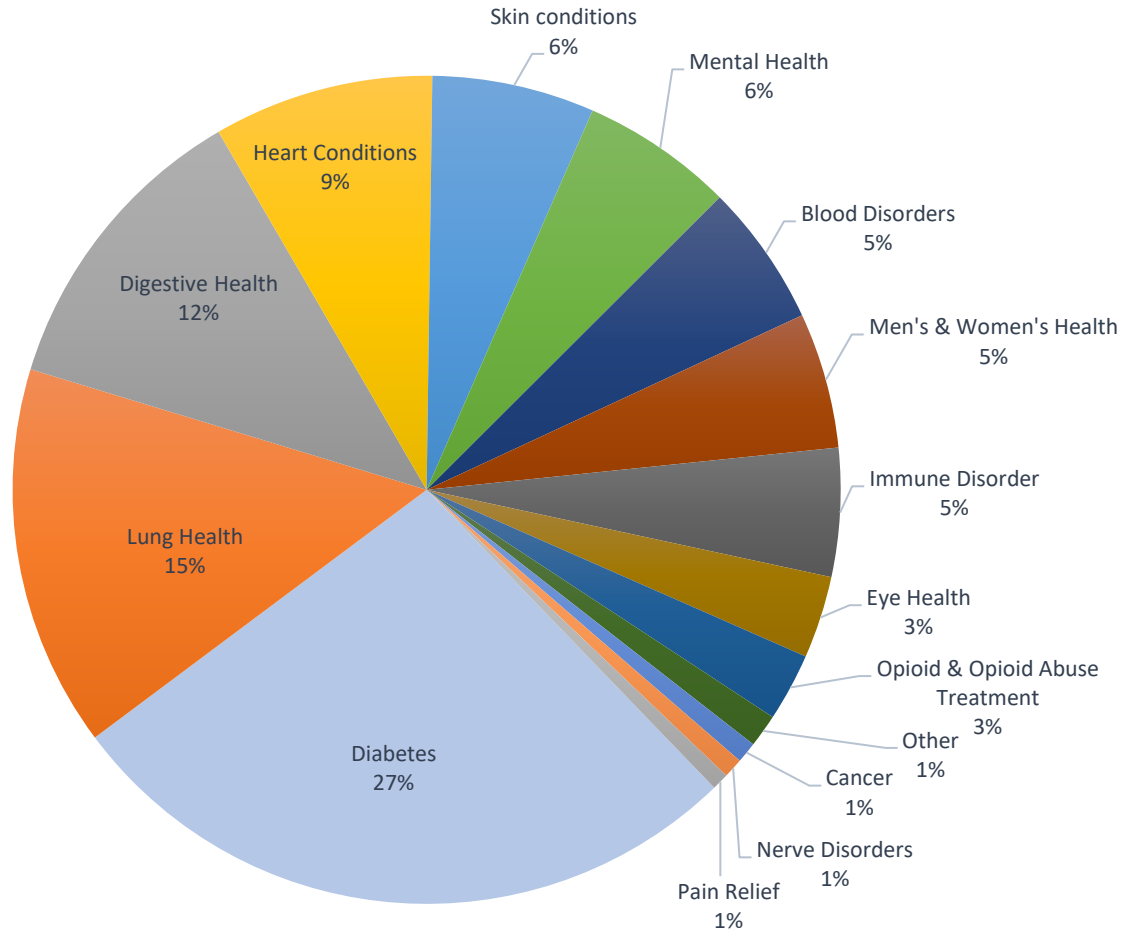
Table 7:	
Average Total Compensation Per Doctor	\$160.80
Average Compensation Event Per Doctor	\$103.41

Sample Data

Total incidents in which samples were distributed were queried for the targeted health condition treated by each corresponding drug. The targeted health conditions were grouped into major health issues treated or organ systems targeted. A complete listing of all health issues included in each grouping in Chart 2 on the following page is included at the end of this report.

The final chart in this report illustrates that samples most frequently provided were to treat diabetes (27%). Other frequently provided drug samples included those that support lung health (15%), digestive health (12%) and those that treat heart conditions (9%).

Chart 2: Percentage Samples Distributed by Targeted Health Condition as Reported by Sales Representatives



The following includes health conditions grouped into each major category.

- **Blood Disorders:** Anemia, Venous Thromboembolism, Kidney Conditions, Anticoagulants
- **Cancer:** Cancer, Chemotherapy, Carcinoid Syndrome Diarrhea, Cancer-related Nausea and Vomiting
- **Diabetes:** Diabetes Mellitus, Diabetic Nerve Pain, Hyperglycemia, Type 1 and 2 Diabetes
- **Digestive Health:** Acid Reflux, Bowel Prep Kit, Crohn's Disease, Ulcerative Colitis, Exocrine Pancreatic Insufficiency, Heartburn, Hemorrhoids, Irritable Bowel Syndrome, Overactive Bladder, Pancreatic Enzymes, Ulcer
- **Eye Health:** Conjunctivitis, Dry Eye, Eye Drops, Eye Pain and Swelling, Glaucoma, Macular Degeneration
- **Heart Conditions:** Angina, Atrial Fibrillation, Cardiovascular Disease, Heart Attack, Stroke, Heart Disease and Pancreatitis, Heart Failure, High Cholesterol, Hypertension

- **Immune Disorder:** Auto Immune Diseases, Gout, Immunosuppressive Drug, Nonsteroidal Anti-Inflammatory Drug, Osteoarthritis, Psoriatic Arthritis, Rheumatoid Arthritis
- **Lung Health:** Asthma, Chronic Obstructive Pulmonary Disease
- **Men's & Women's Health:** Birth Control, Endometriosis, Erectile Dysfunction, Fertility, Genital Warts, Infection - Women's Health, Menopause, Morning Sickness, Prenatal Vitamin, Prostate, Testosterone, Vaginal Dryness, Osteoporosis, Urinary Tract Infection
- **Mental Health:** Attention Deficit Hyperactivity Disorder, Binge Eating Disorder, Parkinson's Disease, Alzheimer's Disease, Antidepressant, Bipolar Disorder, Depression, Dyspareunia, Schizophrenia, PseudoBulbar Affect
- **Nerve Disorders:** Multiple Sclerosis, Epilepsy, Parkinson's Disease, Neuropathy, Restless Leg Syndrome
- **Opioid & Opioid Abuse Treatment:** Drug Withdrawal, Opioid, Opioid-Induced Constipation
- **Other:** Tonsillitis, Vitamin Supplement, Weight Loss, Hyperparathyroidism, Hyperthyroidism, Allergies, Cough Syrup, Dry Mouth, Ear Drops, Familial Cold Autoinflammatory Syndrome, Non-24-hour Sleep-Wake Disorder, Transfusional Iron Overload
- **Pain Relief:** Migraine, Muscle Relaxer
- **Skin conditions:** Acne, Actinic Keratosis, Angioedema, Anti-Inflammatory Steroid, Antifungal, Anti-parasite, Antipruritics, Athlete's Foot, Botox, Cold Sores, Dermatitis, Eczema, Psoriasis, Rosacea/Severe Acne, Seborrheic Dermatitis

For questions or concerns, please contact Margot Chappel, DPBH Deputy Administrator of Regulatory and Planning at mchappel@health.nv.gov or (775) 684-4041.