Conflict of Interest Policy Implementation for Quality Measures of American Society of Clinical Oncology

(December 13, 2018)

The American Society of Clinical Oncology (ASCO) is dedicated to conquering cancer through research, education, prevention and delivery of high-quality patient care. One of the primary ways in which ASCO fulfills this responsibility is through quality measurement and improvement. Provider and public confidence in quality measurement depends on the development of measures in a manner designed to minimize actual and perceived conflicts of interest.

Quality measures are developed from an array of sources. In general, ASCO develops quality measures based on priorities set by the Quality of Care Council (QCC) and the QOPI Steering Group. ASCO develops measures independently and collaborates with other organizations to develop quality measures applicable to stakeholders of both groups. Quality measures are drafted by Measure Development Panels (“Measure Panels”), reviewed by the Measures Steering Group (“MSG”) of the Quality of Care Council (QCC). Measures are updated from time to time, typically every 2-3 years or when practice-changing evidence becomes available. The following procedures provide strategies for managing potential conflicts of interest (COI) through the stages of measure development in accordance with the principles in ASCO’s Policy for Relationships With Companies.¹

I. General Policy

ASCO requires disclosure of relationships with for-profit health care Companies by individuals involved at any stage of the measure development process. As a signatory Society to the Council of Medical Specialty Societies Code for Interactions with Companies² (CMSS Code), ASCO adopts the CMSS Code definition of “Company.” A Company is a for-profit entity that develops, produces, markets, or distributes drugs, devices, services or therapies used to diagnose, treat, monitor, manage, and alleviate health conditions.³

II. Disclosure

ASCO’s policy is to promote the development of measures in a manner that minimizes the risk of actual and perceived bias. Disclosure of relationships with Companies is the first step in ASCO’s process of evaluating and managing relationships that could result in actual or perceived bias.

All prospective members of a Measure Panel, or any other group charged with developing measures will disclose financial interests and other relationships with Companies in accordance with ASCO’s Policy for Relationships With Companies.⁴ All members of existing Committees and Sub-Committees disclose the same information. Individuals who are not ASCO members but are being

² Council of Medical Specialty Societies, Code for Interactions with Companies. www.cmss.org/codeforinterations.aspx
³ Council of Medical Specialty Societies, Code for Interactions with Companies. www.cmss.org/codeforinterations.aspx
⁴ American Society of Clinical Oncology, Policy for Relationships With Companies 2013 JCO2013.49.5002. http://jco.ascopubs.org/content/early/2013/04/22/JCO.2013.49.5002
considered for appointment to a Measure Panel must also disclose the relationships in accordance with ASCO policy.  

Occasionally, an individual may have a relevant indirect or non-financial interest or relationship that is not covered by ASCO’s general COI disclosure, such as an intellectual property interest; a strong professional or research opinion; or an outside affiliation. In these situations, the interest should be disclosed to the appropriate ASCO staff member or group leader.

Disclosure reports identifying members’ relationships will be available to Panel Members during the measure development process. The Measures Steering Group will have this information available when considering proposed measures for approval.

III. Identifying Affected Companies

Companies with products affected by a quality measure or measure set are considered “affected Companies” for purposes of determining whether a conflict of interest exists in the development of ASCO quality measures. A Company is an “affected Company” if there is a reasonable likelihood of direct regulatory or commercial impact (positive or negative) on the entity as a result of care being measured. Affected Companies will generally be identified at the time of development of the measure concepts, prior to selection of panel members, chairs or co-chairs. Affected Companies will generally be identified by an independent party who will not serve as a panel member. In some cases where identification is straightforward, an ASCO staff member or the Chief Medical Officer may identify affected Companies using criteria approved by the independent party. The list of affected Companies should remain consistent throughout measure development and adoption. If changes in the marketplace or in the focus of the measure set make revisions necessary, a modified list may be developed or reviewed by ASCO. The list of Companies affected by a measure set will be made available to prospective panel chairs and panel members and the appropriate committees overseeing measure development.

IV. Measure Development Panels

A. Panel Composition
ASCO’s goal is to assemble a diverse and well-qualified group of experts to develop and approve quality measures in a manner that minimizes the risk of actual and perceived bias.

In the case of measures related to ASCO Guidelines or Guidelines Endorsements, an individual is not eligible serve on a Measure Development Panel if he or she was or would have been ineligible to serve on the guideline panel from which the measure is being derived. In all other instances, decisions about participation on a Panel will be made at the discretion of ASCO.

B. Panel Approval of Measures
At meetings, whether in person or via teleconference, Measure Panel recommendations must be adopted by a 75% majority of Panel members in attendance, where a simple majority of panel members are present. When the Panel votes electronically, recommendations must be adopted by a 75% majority of the entire Panel. Because of the supermajority voting standard, panel members

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5 American Society of Clinical Oncology, Policy for Relationships With Companies 2013 JCO2013.49.5002  
http://jco.ascopubs.org/content/early/2013/04/22/JCO.2013.49.5002
who have disclosed financial relationships with affected Companies do not need to recuse themselves from discussing and voting on measures on these grounds.

V. Measures Steering Group of the Quality of Care Council
Following development and approval by a Measure Panel, measures are reviewed and approved by the Measures Steering Group.

A. Disclosure
Steering Group members’ general disclosure reports will be provided to Measures Steering Group members prior to Steering Group discussion and vote of measures under review.

B. Recusal
To underscore the independence and integrity of the measure development process, measures will only be voted on by Steering Group members who do not have financial relationships with affected Companies, in instances where such companies can be identified. A Steering Group member recused from voting may take part in initial discussion of the measure, recognizing that there may be additional discussion by remaining members after recusal and before the vote.

C. Approval
Generally, measures will be reviewed and approved by a vote of the Steering Group at a meeting where a quorum is present. However, if the quorum is lost by virtue of recusals, the remaining Steering Group members in attendance will constitute a quorum as long as at least three members are present. Approval by majority vote of this group will be considered approval by the Steering Group.

If recusals result in fewer than 3 members of a Steering Group remaining eligible for voting, the Measures Steering Group Chair will invite an unconflicted member of the Quality of Care Committee to participate in voting on the Measures impacted.

VI. Publication
When ASCO publishes a measure, all disclosures of panel members from the period when measure development work was completed will generally be published concurrently. This Policy is also posted publicly on ASCO’s website.

VII. Exceptions
ASCO’s goal is to assemble a diverse and well-qualified group of experts to develop, approve, and adopt quality measures. If required to achieve this goal, these procedures may be adapted by ASCO on a case-by-case basis to the extent necessary.

VIII. Decisions
Questions about the application of this Policy will be decided by ASCO. ASCO will consider recommendations from the Measure Panel chair or co-chairs and the Measures Steering Group
Chair (unless the question concerns their roles). ASCO decisions can be made by the Chief Medical Officer or the Vice President and General Counsel, advised by the Ethics Counsel and staff from Quality and Performance Measures, especially the Division Director or lead staff for the Measures Steering Group. Questions and decisions may concern, for instance, whether an individual is eligible to serve on a panel, or as a panel chair; whether an individual should be recused from voting; or whether an exception is warranted.

**Application:**
Applies to ASCO and its affiliates

**History:**
Adopted by ASCO Executive Committee on July 17, 2014
Updated by ASCO Board of Directors on December 13, 2018