

Transparency Reporting - Frequently Asked Questions

INDEX

Transfers of Value to Healthcare Professionals

Q1: How do we report who the payments are being made to?.....	2
Q2: The Healthcare Professional doesn't want their data disclosed; can we just not report?.....	2
Q3: Verification - what if the Healthcare Professional doesn't respond?.....	2
Q4: What are my reporting responsibilities where overseas parties involved?.....	3

Third-Party Educational Event Reporting

Q5: What's the best way to report if we have multiple locations for one event?.....	4
Q6: When do we need to report hospitality costs/support?.....	4
Q7: If an event sponsorship package includes complimentary event registration fees which are passed onto HCPs, is that reportable?.....	4
Q8 – Is the funding provided to an independent education provider reported as a grant or as a third-party meeting sponsorship?.....	5
Q9 – What's the best way to report if we have multiple locations for one event?.....	5

Grants and Donations Reporting

Q10: What is the difference between a grant and donation? How are these defined?.....	5
Q11: Do we report all our donations, such as to the state rural fire service? And fund-raising events where our employees seek donations?.....	6
Q12: The Code specifically doesn't apply to clinical research. are grants to a Healthcare Organisation to conduct research reportable?.....	6
Q13: Is a university a Healthcare Organisation?.....	7
Q14: Is sponsorship of a medical/nursing/pharmacy student conference reportable as a grant or donation?.....	7
Q15: Are complimentary event registrations which are passed onto HCPs or other attendees reportable?.....	8
Q16: Is reporting grants and donations retrospective? How should staged payments for long term projects be reported?.....	8

Patient Organisation Support Reporting

Q17: For which Patient Organisations do we report our support? Is there a defined list?.....	9
Q18: If we support a charity event that fundraises in a particular disease, do we need to report this?.....	9
Q19: What date do we use to report?.....	10
Q20: Help! We have missed data from our reports – what do we do?.....	10
Q21: Whose responsibility is it to report? is it only member companies?.....	11
Q22: Can we report our sponsorship in two reports simultaneously?.....	11

TRANSFERS OF VALUE TO HEALTHCARE PROFESSIONALS - REPORTING

Q1: HOW DO WE REPORT WHO THE PAYMENTS ARE BEING MADE TO?

There are three categories for assigning payments and transfers of value to healthcare professionals:

- The healthcare professional ('HCP'): a payment or transfer of value received by the individual HCP
- The HCP's employer: a payment or transfer of value received by the institution/clinic/research organisation. Payments made to a business account (clinic, etc) where the HCP undertaking the activity is the sole director of that business should be reported as being paid to the individual HCP, not to their 'employer'.
- Third Party: donations to a charity or similar on behalf of a HCP. Note: reporting is not meant to capture payments made to airlines or hotels (these transfers of value are assigned to the relevant HCP).

Q2: THE HEALTHCARE PROFESSIONAL DOESN'T WANT THEIR DATA DISCLOSED, CAN WE JUST NOT REPORT?

If the HCP does not want their data reported, they cannot receive the payment or transfer of value. There is no avenue for companies to report aggregated data (non-identified payments), or for a HCP to opt out once a payment or transfer of value has occurred. The HCP can opt to not receive payment for their work or receive any travel, accommodation or hospitality. Where there is no transfer of value, there is no need to report.

If the HCP chooses to donate their payment to a charity of their choice, but still receive the payment in the first instance, this remains reportable as a transfer of value to the HCP.

If the HCP requests that a third party (such as a research institute or charity) receive their payment on their behalf, this is reportable because a payment or transfer of value has occurred in lieu of the HCP keeping that transfer of value or payment (see definition of Third Party as per Q1 above). Note that reporting relates to being transparent about interactions between a company and a HCP. Although a payment might be made to a third party instead of the HCP, the relationship or interaction between the HCP and company should be reported.

Q3: VERIFICATION - WHAT IF THE HEALTHCARE PROFESSIONAL DOESNT RESPOND?

All companies should provide healthcare professionals with a period of at least six weeks to review, verify or correct collected information about payments and transfers of value relating to them. However, if the HCP does not provide the confirmation requested and remain uncontactable, it is reasonable to rely on the contractual agreement that will have acknowledged the payment will be declared. This would allow the information to be published as is, with no amendment. Should the HCP identify an issue at a later date – after it has been reported – reports may be amended.

Q4: WHAT ARE MY REPORTING RESPONSIBILITIES WHERE THERE ARE OVERSEAS PARTIES INVOLVED?

The Code of Conduct is only concerned about payments made to Australian HCPs by the Australian affiliate. The rationale is to provide transparency for Australian patients about how the HCPs who care for them interact with Australian pharmaceutical companies.

- If the Australian company pays to sponsor/support an event in Australia, for the benefit of Australian HCPs, it needs to be reported. It does not matter if the Third-Party event organiser is an overseas entity or based overseas.
- If the Australian company pays to sponsor/support a HCP from another country who is not caring for Australian patients, such as a US-based specialist giving a series of educational presentations in Australia, it does not need to be reported as a payment or transfer of value to that international HCP (but may be reportable as a Third Party Educational Event sponsorship OR may be reportable under the transparency requirements in the HCP's own country).
- If an overseas affiliate company or Global HQ pays for an Australian HCP to engage in an activity, or supports the HCP's attendance at an educational meeting (either in Australia or internationally) and subsequently bills the Australian affiliate member company, the payment/transfer of value is reportable because ultimately it is the Australian affiliate member company who has made the payment.
- Similarly, if an Australian affiliate passes on the costs/payments for an Australian HCP to an overseas company or Global HQ, this means the Australian company is not, in effect, making the transfer of value and it is not reportable. However, it would be inconsistent with the principle of transparency for this to be a regular practice. Such arrangements should not be made in order to avoid transparency of payments and transfers of value to Australian HCPs.

To summarise this:

Global HQ + Australian HCP = NOT REPORTABLE

Australian affiliate + Australian HCP + Global activity = REPORTABLE

Global HQ + Australian HCP - Global charges Australian affiliate = REPORTABLE

Australian affiliate + Australian HCP - Australian affiliate charges Global HQ = NOT REPORTABLE

Why not take a look at how and what other companies report?



All Medicines Australia members are committed to transparency in their interactions with healthcare professionals and other stakeholders.

See [Disclosure Australia website](#) for all transfers of value to healthcare professionals and [Medicines Australia website](#) for support and sponsorships to third party educational events and grants & donations, and to Patient Organisations.

THIRD PARTY EDUCATIONAL EVENT REPORTING

Q5: WHAT'S THE BEST WAY TO REPORT IF WE HAVE MULTIPLE LOCATIONS FOR ONE EVENT?

It depends on what information you have available – the requirement is simply to be transparent about the activity. If you pay a singular amount to an event organiser and they determine how it is split across locations, or physical/virtual formats, then it may be easier to report this as a single entry with details of the different locations/formats. If there are individual payments per location, each can be reported individually.

Q6: WHEN DO WE NEED TO REPORT HOSPITALITY COSTS/SUPPORT ?

Companies are required to report the cost of hospitality where the funding is paid to the third-party organisation holding the event. This includes where the cost of hospitality is a known/defined amount or unknown.

- If a company's sponsorship for an event specifically and solely covers hospitality, and this support is paid to the third-party event organiser, this is reportable.
- However, if hospitality is the only cost associated with the event, and that payment is made directly to the supplier of the hospitality (and not the event organiser), this transaction is not reportable.

Applying this rationale, if a Pharma representative buys a HCP a coffee during an educational exchange, this is not reportable. Similarly, if a company supports a third-party educational event by paying a restaurant directly for the hospitality provided at the event, this is not reportable (however, note that any hospitality spend needs to be compliant with the Code). If a company provides funding to the third-party organisation which then pays for hospitality provided at their event, this is reportable including where the funding is only for hospitality. Sponsorship which extends beyond hospitality (such as for AV costs, venue hire) is reportable, including the hospitality component.

Q7: IF AN EVENT SPONSORSHIP PACKAGE INCLUDES COMPLIMENTARY EVENT REGISTRATION FEES WHICH IS PASSED ONTO A HCP, IS THAT REPORTABLE?

Yes, the registration should be reported as a transfer of value for the individual healthcare professional. The HCP is receiving from the company the value of the conference registration, which the HCP would otherwise have to pay for themselves.

Q8 – IS THE FUNDING PROVIDED TO AN INDEPENDENT EDUCATION PROVIDER REPORTED AS A GRANT OR AS A THIRD-PARTY MEETING SPONSORSHIP?

There are a number of organisations whose business is to provide education and produce educational content for HCPs. The independent education provider is usually not a healthcare organisation, according to the Code definition. Pharmaceutical companies might provide a grant to the organisation to support their work in general or as sponsorship of a specific event or series of events.

Companies' support for these independent organisations to provide HCP education should be reported in the Third-Party Meeting Sponsorships Report. If you have reported these educational meetings in the past as third-party educational meeting sponsorships, you should continue to report them in the same manner. Although the funding might be called a 'grant', companies don't need to report this support differently under Code Edition 20.

See also Q22 below to help you decide the appropriate place to report.

Q9: WHAT'S THE BEST WAY TO REPORT IF WE HAVE MULTIPLE LOCATIONS FOR ONE EVENT?

It depends on what information you have available – the requirement is simply to be transparent about the activity. If you pay a singular amount to an event organiser and they determine how it is split across locations, or physical/virtual formats, then it may be easier to list as a single entry with details of the locations. If they are individual payments per location, it can be listed individually

GRANTS AND DONATIONS REPORTING

Q10: WHAT IS THE DIFFERENCE BETWEEN A GRANT AND DONATION? HOW ARE THESE DEFINED?

The purpose of expanding transparency reporting to include grants and donations is to be even more transparent about the relationships and interactions between companies and healthcare organisations where there is a financial transfer and the risk of influencing the conduct or decisions of the healthcare organisation.

Grants and donations are defined in the Code Glossary. Note that the definition describes grants and donations "collectively". This recognises that different companies might categorise grants and donations differently. There is no need to separate 'grants' and 'donations' or categorise them as one or the other; they are reported all together. Healthcare Organisations are also defined in the Code Glossary. Reporting ONLY relates to grants and donations made to healthcare organisations.

Q11: DO WE REPORT ALL OUR DONATIONS, SUCH AS TO THE STATE RURAL FIRE SERVICE? AND FUND-RAISING EVENTS WHERE OUR EMPLOYEES SEEK DONATIONS?

Reporting under Code Section 14.2 only relates to healthcare organisations. Whilst some healthcare organisations might be categorised as charities, all charities are not healthcare organisations. For example, the NSW Rural Fire Service is not a healthcare organisation. A different example is the Royal Flying Doctor Service (RFDS). The RFDS would meet the definition of a healthcare organisation. A grant or donation, a corporate partnership or other form of financial support provided to the RFDS or similar healthcare organisations should be reported.

In relation to charitable fund-raising events, such as the McGrath Foundation or the Kosi Challenge for Rare Cancers Australia (RCA), donations raised by company employees, including as part of a company team participating in an event, are not reportable – either in relation to support for a patient organisation (e.g. RCA) or a donation to a healthcare organisation (e.g. McGrath Foundation). However, corporate grants or donations to these organisations are reportable in the relevant type of report, including where a company pays for its employees to participate in an event or gives funding matched to the donations raised by its employees.

In relation to philanthropic donations, the primary question is whether the donation is to a healthcare organisation. If so, the donation should be reported EXCEPT if it is in relation to the conduct of clinical trials or clinical research (see question 11). A grant or donation associated with corporate standards, including B Corp activities or ISO standards is reportable if it is made to a healthcare organisation.

Member company employees' time volunteering to assist at fund-raising events for healthcare organisations or other 'in-kind' support is not reportable as a grant or donation to the healthcare organisation.

Q12: THE CODE SPECIFICALLY DOESN'T APPLY TO CLINICAL RESEARCH. ARE GRANTS TO A HEALTHCARE ORGANISATION TO CONDUCT RESEARCH REPORTABLE?

Section 14.2(e) states that sponsorship of clinical trials or clinical research is not reportable. The following are examples of sponsorship, by providing a grant to a healthcare organisation, that are NOT reportable:

- Any payment to a healthcare organisation associated with conducting clinical research or clinical trials, including where the company is the sponsor of the clinical trial or where the healthcare organisation is the sponsor.
- A grant to a research institute to undertake clinical research

The following are examples of grants or donations to a healthcare organisation that should be reported:

- A grant or donation to healthcare organisation, including a research institute, for general research support; for example, project development and set-up, medical writing of a protocol, database creation, patient screening tool development.

If funding is provided for a research project, consider how the project will be managed within your company. If the project is managed through the medical/clinical research business unit; is evidence generating; requires research governance oversight by the company – the project would be treated as clinical research and therefore not reportable. On the other hand, if the project funding is managed as a grant or donation; the company has no involvement in the project except for providing funding; the company receives no data or evidence from the project; management of the project is wholly by the healthcare organisation – the grant or donation would be **reportable** as such.

If in doubt about whether to report, there is no harm in being transparent and reporting a grant or donation.

Q13: IS A UNIVERSITY A HEALTHCARE ORGANISATION?

Refer to the Code Glossary definition of a healthcare organisation, which includes a university or other teaching institution **“through which one or more healthcare professionals provide services”**. Remember that the purpose of transparency is to provide visibility for patients and other consumers about payments and transfers of value that might risk influencing the decisions and choices made by the recipient healthcare organisation and healthcare professionals caring for patients through that organisation. In principle, the intention is to be transparent about grants and donations made to healthcare organisations, including where there is no direct link to individual patient care.

Therefore, a grant or donation made to a university health-related faculty (medicine, pharmacy, dentistry etc) to support its educational programs including fellowships should be reported. However, a grant made to a university law/humanities/economics department to support its educational programs, conduct non-medical/clinical research or build facilities would not be reportable.

Q14: IS SPONSORSHIP OF A MEDICAL/NURSING/PHARMACY STUDENT CONFERENCE REPORTABLE AS A GRANT OR DONATION?

Sponsorship of a student conference should be reported as a sponsorship of a third-party educational meeting, NOT as a grant or donation. In most cases HCP student conferences are organised and run by the relevant national or state student association, which is independent of a single university or teaching institution. If in doubt about where to report the activity, consider which organisation is receiving the payment.

Q15: ARE COMPLIMENTARY EVENT REGISTRATIONS WHICH ARE PASSED ONTO HCPS OR OTHER ATTENDEES REPORTABLE?

As noted in Q7, providing complimentary educational event registrations to a healthcare organisation to pass on to HCPs or other attendees is reportable either as a third-party educational event sponsorship or as a grant or donation to a healthcare organisation.

Consider who the complimentary registrations are being provided to – if provided to a healthcare organisation but the event is not an educational event for HCPs, the equivalent monetary value should be reported as a grant or donation to the healthcare organisation.

Q16: IS REPORTING GRANTS AND DONATIONS RETROSPECTIVE? HOW SHOULD STAGED PAYMENTS FOR LONG TERM PROJECTS BE REPORTED?

No, reporting is not retrospective. Report all grants and donations made after 30 March 2025, the effective date for Code Edition 20.

If your company already has an existing project with a healthcare organisation initiated prior to 30 March 2025, where staged payments are made as part of the grant agreement, report all grant payments made after 30 March 2025 and note in the project description that this is an interim or progress payment. Similarly, for new grants or donations commenced after 30 March 2025, report the total payments made in the 6-month reporting period.

For long-term projects, report the payments made in each 6-month reporting period, not the total for the project or cumulative sum of payments.

The table below summarises the transition between reporting under Code Ed19 to Code Ed20.

Payments and Transfers of Value to Healthcare Professionals	1 November 2024 – 30 April 2025	Due to Disclosure Australia Friday 22 August 2025	Publish date 31 August Due to w/end, actual publish date is 29 August 2025	6-month report same as Code Ed19 - same system, no changes
	1 May 2025 – 31 December 2025	Due to Disclosure Australia Thursday 30 April 2026	Publish date 10 May Due to w/end, actual publish date is 8 May 2026	8-month report bridging between Ed19 and Ed20

Third-Party Meeting and Symposia Sponsorship and Grants and Donations to Healthcare Organisations	1 November 2024 – 30 April 2025	Due to Medicines Australia 31 August 2025 Due to w/end, actual due date is 29 August 2025	Friday 31 October 2025	6-month report BUT INCLUDING Grants and Donations from 30 March 2025
	1 May 2025 – 31 December 2025	Due to Medicines Australia 30 April 2026	Wed 10 June 2026	8-month report including Grants and Donations to healthcare orgs

PATIENT ORGANISATION SUPPORT REPORTING

Q17: FOR WHICH PATIENT ORGANISATIONS DO WE REPORT OUR SUPPORT? IS THERE A DEFINED LIST?

This report should capture events and activities that are primarily intended to benefit patients, rather than HCPs.

Medicines Australia no longer provides a list of recognised Patient Organisations (formerly referred to as Health Consumer Organisations or HCOs). Companies are asked to report activities with organisations that meet the definition of a Patient Organisation set out in the Code (see the Code Glossary).

Q18: IF WE SPONSOR A CHARITY EVENT THAT FUNDRAISES FOR A PARTICULAR DISEASE, DO WE NEED TO REPORT THIS?

If a company SUPPORT the event directly, and that support is not made through, or as part of, any arrangement with a patient organisation, it is not reportable.

If any such support or payment is made to that event as part of the company's engagement with a patient organisation, then it should be reported.

GENERAL QUESTIONS

Q19: WHAT DATE DO WE USE TO REPORT?

For payments and transfers of value to healthcare professionals, report in relation to the date on which the payment or transfer of value is made:

- If a healthcare professional issues an invoice in December for an activity conducted in October, you report it for the time you make the financial transfer (e.g. December).
- If a flight is booked in October, but isn't taken until December, you report it for the time the HCP took the flight (same applies to conference registrations/hotel bookings).

For third party educational event sponsorships, report in relation to the date (month and year) of the event:

- If you sponsor an event scheduled for October, but you make the payment in September, you report it when the event happened (e.g. October)
- if you sponsor multiple events over a period of time, you can either report this as a single contribution or as multiple events – just make it clear.
- For grants and donations to healthcare organisations, report in relation to the date (month and year) of providing the funds:
- If the grant or donation is made in October, but the relevant project or activity doesn't occur or commence until December, report it in relation to when the funds were transferred (e.g. October)
- If the project covers an extended period, with staged or milestone payments, report payments made in each 6-month reporting period, not the total for the project or cumulative sum of payments. You can note in the report that it was a part or milestone payment or similar description.

Q20: HELP! WE HAVE MISSED DATA FROM OUR REPORTS – WHAT DO WE DO?

Please reach out and talk to the Ethics & Compliance Team, who will advise you of the most appropriate action to take.

- In most cases, adding them to the current reporting round will be adequate. In some cases, revisions of previous data records will be recommended to ensure published data remains accurate. In the interests of transparency, any revision on an existing published report will be noted upfront. Some HCPs invoice late, and the payments don't fall within the same reporting period. If it's a payment or transfer of value to a HCP, we ask that our members send any additional data along with their next reporting round, dated in relation to the activity date. This will update the older datasets, and those additional reports will be returned when that HCP's name is searched through the database Disclosure Australia. This satisfies the Code transparency requirements.

- If it's a third-party educational event, grant or donation, or a patient organisation engagement, out of cycle reporting sometimes occurs due to payment reconciliation processes. In many cases it will be appropriate to add them to the current reporting round with a note along the lines of "Out of cycle reporting due to payment reconciliation process".

Q21: WHOSE RESPONSIBILITY IS IT TO REPORT? IS IT ONLY MEMBER COMPANIES?

Transparency reporting is a requirement for all Medicines Australia members, as part of their compliance with the Medicines Australia Code of Conduct. It is not a requirement for non-members; however, Medicines Australia encourages and supports non-member companies to report, in the spirit of transparency.

The Code does not require event organisers, nor HCPs or patient organisations, or HCOs to report.

Q22: CAN WE REPORT OUR SPONSORSHIP IN TWO REPORTS SIMULTANEOUSLY?

Do not duplicate reporting. It is best to choose the most appropriate report category and list it there, not across multiple reports. The Code Help Desk can help you with any dilemmas you are facing, and there is information on the Medicines Australia website as to the rationale behind each of the three types of transparency reporting.

There is no overlap in the definitions of reportable transactions.

- If an event is organised by a patient organisation, then this is the most appropriate reporting mechanism to list that support, even if the event is educating HCPs. Ultimately these will provide transparency about events and activities that work primarily to benefit patients.
- A third-party educational event/meeting/symposia will capture sponsorships to independently organised events, designed to educate healthcare professionals, including if the third party is a healthcare organisation
- Any other grants or donations made to healthcare organisations, that are not third-party meetings reported on the third-party meeting transparency report, are reported via the grants and donations transparency report
- Consult the Transparency Decision-Tree to help guide how you can appropriately classify and report a payment.



"Companies are committed to transparency in their interactions with healthcare professionals and other stakeholders, to maintain trust and confidence in the industry."

- OVERARCHING PRINCIPLE 2, CODE OF CONDUCT