

# Open Payments Submission Suggestions

January 2021

## Introduction

These suggestions may be helpful when working to meet the requirements for timely, accurate, and complete reporting to Open Payments.

For technical assistance, please contact the Open Payments Help Desk at [openpayments@cms.hhs.gov](mailto:openpayments@cms.hhs.gov). The Open Payments Help Desk is available by phone at 1-855-326-8366 (TTY Line: 1-844-649-2766).

To report a possible reporting violation, please contact the Compliance Team at [opcompliance@cms.hhs.gov](mailto:opcompliance@cms.hhs.gov).

## 1. Review Content

Remember to verify your data for accuracy before finalizing your submission.

While submitted information may meet the requirements for data type, format, and field size, that does not necessarily mean that the contents of the fields are valid. Simple errors can impact the value of this data, such as: a misplaced dash or wrong number in a National Drug Code<sup>1</sup> or a misspelling or abbreviation in a product name. Failing to review the content of the submitted data may result in the reporting of inaccurate data.

Review your submission to ensure that the appropriate nature of payment categories have been selected. When deciding on a nature of payment category, it may be helpful to consider the following:

- Choose the Nature of Payment category that most closely describes the reportable payment or transfer of value.
- The context field can be used to include additional information. The information included in this context field is published on the Open Payments website.
- The assumptions statement can be used to explain any methodologies used for selecting nature of payment categories. This statement is not published and is used to explain any methodologies or unusual submissions to CMS.

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<sup>1</sup> Information about NDCs can be found on the U.S. Food and Drug Administration's website: (<https://www.accessdata.fda.gov/scripts/cder/ndc/default.cfm>).

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## 2. Submit Early

CMS recommends beginning the reporting process early in the submission window in order to allow time for addressing any errors or issues. Starting early helps to avoid longer upload times that may occur towards the end of the submission window when the system is being used most heavily, and may help to avoid a late submission. In the event that records fail validation, reporting entities should be mindful of additional time needed to edit, resubmit and complete record validation. In order for data submission to be considered timely, both data submission and attestation must be completed by the end of the reporting window.

## 3. Record Resubmission

Keep in mind when making changes to records that some may need to be deleted and re-uploaded, while other changes only require resubmission. If fields that identify the record's covered recipient or principal investigators need to be changed in a record that is in a "ready for attestation" or "attested" status, the original record must be deleted and then re-submitted as a new record. Deleting records and submitting new records will remove the old records from publication and will make the newly submitted records eligible for review and dispute again. The attester is encouraged to use or amend the assumptions statement to note when records have been deleted and then re-submitted, including when those records were re-submitted after the submission deadline. Since the new record and the old record are not linked in the Open Payments system, noting this resubmission in the assumptions document can help avoid any compliance communications about late submission.

## 4. Consult Ownership and Investment Interest Definitions

When reporting ownership or investment interest held by a physician or their immediate family member, it is important to be conscious of the definitions of "Dollar Amount Invested" and "Value of Interest". These can be found in the [Open Payments submission mapping document](#).

Dollar Amount Invested refers only to the ownership interest obtained DURING THAT PROGRAM YEAR. Value of Interest is the cumulative value of ALL interest held in the entity at the most recent feasible valuation date. Circumstances vary, but it would not generally be anticipated that the value of interest would be less than the dollar amount invested within a given program year. It would also not generally be anticipated that the dollar amount invested and value of interest would have the same values year over year if they are both greater than zero.

Please also note these additional facts about ownership and investment interest:

- Entities that are solely owned by physicians are required to report ownership and investment interest.
- Companies that are publicly traded are not required to report ownership and investment interest.

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- CMS does not have any recommendations on how to value ownership and investment interest of a private company. However, any methodologies can be included in the assumptions statement.

## **5. COVID-19**

CMS is sensitive to the challenges caused by the pandemic and will consider the impact that these circumstances have on reporting entities' ability to report in a timely, accurate, and complete manner.

CMS will exercise enforcement discretion with respect to submissions completed after the statutory deadline due to circumstances beyond the reporting entity's control associated with the pandemic. In the assumptions statement, you may explain your organization's reporting methodologies or reasons for unusual or partial submissions.

If the pandemic has impacted your reporting processes, please include the phrase "COVID-19 Impact" in your assumptions statement alongside the explanation of the circumstances and, if applicable, include reference to any related help desk ticket numbers.

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