

Nick Fitterman

Disclosure Purpose:

Annual Governance Disclosure 2022-23, CME Contributor, Internal Medicine Meeting 2022 faculty

Employment Information:

Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
nick fitterman	Employment Current Employment	Self	-
<div><div><i>Title:</i> executive director Huntington Hospital <i>Start Date:</i> 10/03/2018 <i>Additional Information:</i></div><div><i>Position Description:</i> executive director <i>End Date:</i> Ongoing / No Known End Date</div></div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
- Investments and proprietary interests excluding broadly diversified investments such as mutual or pension funds (e.g., stocks, bonds, stock options, commercial business interests, patents, trademarks, copyrights)
- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

- ☐ Yes (please provide additional details below).
- ☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☐ Yes (please provide additional details below).
- ☒ No

If you answered yes to either question above, please list any relevant measure publications in the space below (or send a list of relevant measures/publications as an attachment). Otherwise, you may leave blank.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name: nick fitterman

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☐ I have publications to report (please list in space below).
- ☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

- ☐ I have interests to report (please list in space below).
- ☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

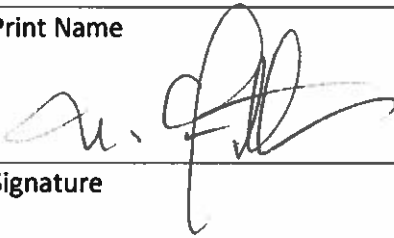
Acknowledgements and Attestations

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- I attest that I have reviewed the attached Convey disclosures report and that my disclosures are up to date.
- I attest that I have disclosed all healthcare-related financial and intellectual interests for myself and any household members from the last 3 years and I will promptly disclose any changes. These include but are not limited to: research and consulting roles; investments and proprietary interests, and intellectual interests such as participation in workgroups, panels, or committees through other medical societies or healthcare organizations.

Nick fitterman

Print Name



Signature

Date

12/8/2022

Jacob Cross

Discloser Identifier: 00084806 **Disclosure Purpose:** Annual Governance Disclosure 2022-23 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Jacob Cross	Employment Current Employment	Self	-
<i>Title:</i> President <i>Start Date:</i> 01/01/2012 <i>Additional Information:</i> <i>Position Description:</i> President and CEO <i>End Date:</i> Ongoing / No Known End Date			
Ochsner Health System	Consultant Current Employment	Self	-
<i>Category:</i> Consultant <i>Start Date:</i> 04/01/2020 <i>End Date:</i> <i>Compensation Type:</i> Cash, <i>Compensation:</i> <i>Additional Information:</i>			

Certification

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- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name: Tommy Cross

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☐ I have publications to report (please list in space below).
- ☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

- ☐ I have interests to report (please list in space below).
- ☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

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Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ Yes (please provide additional details below).

☒ No

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**American College of Physicians
Department of Clinical Policy
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Jacob Thomas Cross, MD

Print Name

Jacob Cross  Digitally signed by Jacob Cross
Date: 2022.12.08 12:07:42 -07'00'

Signature

Date

Rebecca Andrews

Disclosure Purpose: Annual Governance Disclosure 2022-23, Planning Committee, CME, Faculty/Speakers, Internal Medicine Meeting 2022 faculty, Internal Medicine Meeting 2023 faculty

Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Fiduciary Officer	Self	-
<p>Official Title: Chair- Elect; Chair of the Board of Governors</p> <p>Compensation Type: Cash, Start Date: 04/27/2020 End Date: 05/01/2022 Compensation: Additional Information: average of 6 hours a week over the 2 years</p> <p>Position Description: serve 1 year as the Chair-elect of the BOG and 1 as the Chair. Liason b/t leadership and Governors Other Compensation:</p>			
Center for Integrated Healthcare, U.S. Department of Veterans Affairs	Employment Current Employment	Self	-
<p>Title: Staff physician Start Date: 10/01/2009 Additional Information: Salaried employment</p> <p>Position Description: Rocky Hill VA in CT - staff physician End Date: Ongoing / No Known End Date</p>			
uconn health	Employment Current Employment	Self	-
<p>Title: Assoc Program Director, Lead physician CCPC and PCMH Start Date: 09/30/2009 Additional Information:</p> <p>Position Description: primary care practitioner also assoc program director for IM residency program and lead clinician for the comprehensive pain center and pcmh End Date: Ongoing / No Known End Date</p>			
various entities for expert witness	Expert Witness Current Employment	Self	-
<p>Category: Expert Witness Start Date: 01/01/2017 End Date: Ongoing / No Known End Date Compensation Type:Cash, Compensation: Additional Information: compensation varies year to year 2019 were 5,000 to 10,000; 2020 10,000 to 20,000; 2021 estimated 10,000 to 20,000; 2022 estimated \$500-10000</p>			

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**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name:

Disclosures of Interests: Supplemental Questions

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

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Topic Areas: diabetes

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- ☐ Yes (please provide additional details below).
- ☐ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

- ☐ Yes (please provide additional details below).
- ☐ No

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**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

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Print Name

Signature

Date

Peter Basch

**Disclosure
Purpose:**

Annual Governance Disclosure 2022-23, faculty, Disclosure for Continued
Leadernet Access

**Employment
Information:**

Currently
Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
MedStar Health	Employment Current Employment	Self	-
<div><div>Title: Senior Director, IT Quality and Safety</div><div>Start Date: 07/01/1995</div><div>Additional Information:</div></div> <div>Position Description: I manage regulatory quality submissions for MedStar Health for the Medicare QPP, and serve an advisory role within Quality and Safety for our performance contracts with 3rd party payers</div> <div>End Date: Ongoing / No Known End Date</div>			

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**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Peter Basch

Disclosures of Interests: Supplemental Questions

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

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Topic Areas: diabetes

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- ☐ Yes (please provide additional details below).
- ☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

- ☐ Yes (please provide additional details below).
- ☒ No

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**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

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Peter Basch

Print Name



12/8/2022

Signature

Date

Caroline Goldzweig

Discloser Identifier: 00070058**Disclosure Purpose:** Annual Governance Disclosure 2022-23**Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American Physicians Group	Fiduciary Officer	Self	-
<i>Official Title:</i> Board Member <i>Compensation Type:</i> Unpaid, <i>Start Date:</i> 01/01/2019 <i>End Date:</i> Ongoing / No Known End Date <i>Compensation:</i> <i>Additional Information:</i> <i>Position Description:</i> serve as board member for Board of Directors for non-profit advocacy organization <i>Other Compensation:</i>			
Cedars-Sinai	Employment Current Employment	Self	-
<i>Title:</i> Chief Medical Officer <i>Start Date:</i> 09/19/2016 <i>Additional Information:</i> <i>Position Description:</i> oversee clinical care and clinical strategy for medical care foundation <i>End Date:</i> Ongoing / No Known End Date			
Cedars-Sinai	Fiduciary Officer	Self	-
<i>Official Title:</i> Board member <i>Compensation Type:</i> Unpaid, <i>Start Date:</i> 01/01/2018 <i>End Date:</i> Ongoing / No Known End Date <i>Compensation:</i> <i>Additional Information:</i> <i>Position Description:</i> Serve as member of Cedars-Sinai Medical Care Foundation Board of Directors <i>Other Compensation:</i>			
Imagine LA	Fiduciary Officer	Self	-
<i>Official Title:</i> Member, Board of Directors <i>Compensation Type:</i> <i>Start Date:</i> 04/08/2022 <i>End Date:</i> <i>Compensation:</i> No <i>Additional Information:</i> time commitment for meetings and subcommittee support; expectation to raise money for organization <i>Position Description:</i> serve as director for BOD of a non-profit organization focusing on support for homeless families <i>Other Compensation:</i>			

Certification

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**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Caroline Goldzweig

Disclosures of Interests: Supplemental Questions

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

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Topic Areas: diabetes

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☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area?
Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measures publications in space below (or send list of relevant measures/publications as attachment). Otherwise, you may leave blank.

**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

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Caroline L. Goldzweig

Print Name

Caroline Goldzweig

Digitally signed by Caroline Goldzweig
Date: 2022.12.22 11:39:14 -08'00'

Signature

Date

Discloser Identifier:	01097919	Disclosure Purpose:	Annual Governance Disclosure 2022-23	Employment Information:	Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value						
AMGA	Consultant	Self	\$6000.00						
<div>Category: Consultant Start Date: 09/28/2020 End Date: 09/28/2020 Compensation Type:Cash, Compensation: Yes</div> <table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2020</td><td>\$6,000.00</td><td>Actual</td></tr></table> <div>Additional Information:</div>				Year	Amount	Type	2020	\$6,000.00	Actual
Year	Amount	Type							
2020	\$6,000.00	Actual							
Cerner Corporation	Stock	Self	\$8165.00						
<div>Percentage Ownership: 0 Estimated Value:\$8,165.00 Divestment Date: 12/07/2022 Additional Information: New owner of Cerner, an EHR vendor</div> <div>Valuation Date: 12/07/2022</div>									
CIGNA Corporation	Stock	Self	\$246.00						
<div>Percentage Ownership: 0 Estimated Value:\$246.00 Divestment Date: 04/27/2021 Additional Information:</div> <div>Valuation Date: 04/13/2021</div>									
Merck	Stock	Self	\$2363.00						
<div>Percentage Ownership: 0 Estimated Value:\$2,363.00 Divestment Date: 04/27/2021 Additional Information:</div> <div>Valuation Date: 04/13/2021</div>									
Pfizer	Stock	Self	\$1665.00						
<div>Percentage Ownership: 0 Estimated Value:\$1,665.00 Divestment Date: 04/27/2021 Additional Information:</div> <div>Valuation Date: 04/13/2021</div>									
University of California, Davis Health	Employment Current Employment	Self	-						
<div>Title: Medical Director, Clinical informatics Start Date: 07/01/2000 Additional Information:</div> <div>Position Description: Direct projects and programs relating to informatics education, EHR usage and configuration End Date: Ongoing / No Known End Date</div>									

Entity	Type	Interest Held By	Value
viatris	Stock	Self	\$65.00
<p> <i>Percentage Ownership:</i> 0 <i>Estimated Value:</i> \$65.00 <i>Divestment Date:</i> 04/27/2021 <i>Additional Information:</i> </p> <p style="text-align: right;"><i>Valuation Date:</i> 04/13/2021</p>			

Certification

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**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Scott MacDonald MD

Disclosures of Interests: Supplemental Questions

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

Intellectual interests are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: diabetes

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Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

☐ Yes (please provide additional details below).

☒ No

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Scott MacDonald mD

Print Name



1/9/23

Signature

Date

Catherine MacLean

Discloser Identifier:	00074011	Disclosure Purpose:	Annual Governance Disclosure 2022-23	Employment Information:	Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Hospital for Special Surgery	Employment Current Employment	Self	-
<div><div>Title: Senior VP and Chief Value Medical Officer Start Date: 07/01/2015 Additional Information:</div><div>Position Description: Strategic oversight for value strategy and operations. End Date: Ongoing / No Known End Date</div></div>			

Certification

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**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Catherine MacLean

Disclosures of Interests: Supplemental Questions

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Topic Areas: diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measures publications in space below (or send list of relevant measures/publications as attachment). Otherwise, you may leave blank.

**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

By signing this form,

- I acknowledge that in order to maintain transparency, all participants' disclosure of interests will be publicly available on ACP's website and a link to the disclosures will be included in each published work.
- I attest that I have reviewed the attached Convey disclosures report and that my disclosures are up to date.
- I attest that I have disclosed all healthcare-related financial and intellectual interests for myself and any household members from the last 3 years and I will promptly disclose any changes. These include but are not limited to: research and consulting roles; investments and proprietary interests, and intellectual interests such as participation in workgroups, panels, or committees through other medical societies or healthcare organizations.

Catherine MacLean

Print Name

Catherine H MacLean

Digitally signed by Catherine H MacLean
Date: 2023.01.06 12:21:49 -07'00'

January 6, 2022

Signature

Date

Suja Mathew

Disclosure Purpose: Annual Governance Disclosure 2022-23, Contractor Disclosure, Internal Medicine Meeting 2022 faculty, podcast content contributor **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value						
American Medical Association	Consultant Current Employment	Self	\$3000.00						
<div>Category: Consultant Start Date: 09/01/2019 End Date: Compensation Type:Cash, Compensation: Yes</div> <table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2021</td><td>\$3,000.00</td><td>Estimated</td></tr></table> <div>Additional Information:</div>				Year	Amount	Type	2021	\$3,000.00	Estimated
Year	Amount	Type							
2021	\$3,000.00	Estimated							
Atlantic	Employment Current Employment	Self	-						
<div>Title: EVP Chief Clinical Officer Start Date: 03/14/2022 Additional Information:</div> <div>Position Description: Oversee education, research, quality, clinical strategy and innovation End Date:</div>									
Cook County	Employment	Self	-						
<div>Title: Chair of Medicine Start Date: 07/01/2014 Additional Information:</div> <div>Position Description: Oversee internal medicine, neurology, dermatology for the health system End Date: Ongoing / No Known End Date</div>									
MBOS	Employment	Spouse/Partner	-						
<div>Title: Owner Start Date: 07/15/2003 Additional Information:</div> <div>Position Description: Owner End Date: Ongoing / No Known End Date</div>									

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)

- Investments and proprietary interests excluding broadly diversified investments such as mutual or pension funds (e.g., stocks, bonds, stock options, commercial business interests, patents, trademarks, copyrights)
- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

Disclosure Purpose:	Annual Governance Disclosure 2022-23, speaker disclosures, Faculty/Speakers, Disclosure for Continued Leadernet Access	Employment Information:	Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value												
Dynamed	Other	Self	\$11875.00												
<div>Category: Other Start Date: 05/01/2020 End Date: Ongoing / No Known End Date Compensation Type:Cash, Compensation: Yes</div> <table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2022</td><td>\$8,000.00</td><td>Actual</td></tr><tr><td>2021</td><td>\$2,250.00</td><td>Actual</td></tr><tr><td>2020</td><td>\$1,625.00</td><td>Actual</td></tr></table> <div>Additional Information: Rheumatology subject reviewer</div>				Year	Amount	Type	2022	\$8,000.00	Actual	2021	\$2,250.00	Actual	2020	\$1,625.00	Actual
Year	Amount	Type													
2022	\$8,000.00	Actual													
2021	\$2,250.00	Actual													
2020	\$1,625.00	Actual													
Northeast Medical Group	Employment Current Employment	Self	-												
<div>Title: Employed Physician Start Date: 11/01/2012 Additional Information:</div> <div>Position Description: Physician & Medical Director End Date: Ongoing / No Known End Date</div>															

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Robert McLean

Disclosures of Interests: Supplemental Questions

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measures publications in space below (or send list of relevant measures/publications as attachment). Otherwise, you may leave blank.

**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

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Robert M. McLean

Print Name

Signature

12/10/22

Date

Cristin Mount

Disclosure Purpose:	Annual Governance Disclosure 2022-23, Disclosure for Continued Leadernet Access	Employment Information:	Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Other	Self	-
<i>Category:</i> Other <i>Start Date:</i> 01/01/2020 <i>End Date:</i> 01/01/2022 <i>Compensation Type:</i> Unpaid, <i>Compensation:</i> No <i>Additional Information:</i>			
Providence Health Care	Employment Current Employment	Self	-
<i>Title:</i> Intensive Care Unit Physician <i>Start Date:</i> 02/01/2022 <i>Additional Information:</i>			
<i>Position Description:</i> Intermittent ICU coverage as a physician <i>End Date:</i> Ongoing / No Known End Date			
Society of Critical Care Medicine	Gift	Self	\$1300.00
<i>Description:</i> Honoraria and travel expenses paid to teach the Adult Critical Care Ultrasound Course <i>Estimated Gift Value:</i> \$1,300.00 <i>Additional Information:</i> Air fair and 2 night hotel stay + \$300 honorarium to teach the two-day Adult Critical Care Ultrasound Course at the Society of Critical Care Medicine Annual Congress			
<i>Date Gift Received:</i> 01/18/2023 <i>Valuation Date:</i> 01/19/2023			
Suburban Hospital, Johns Hopkins University Health System	Employment Current Employment	Self	-
<i>Title:</i> Staff Physician <i>Start Date:</i> 06/01/2022 <i>Additional Information:</i>			
<i>Position Description:</i> Provides intermittent, as needed coverage of the Suburban Hospital Intensive Care Unit Service <i>End Date:</i> Ongoing / No Known End Date			
US Army	Employment Current Employment	Self	-
<i>Title:</i> Staff Physician <i>Start Date:</i> 08/01/1999 <i>Additional Information:</i>			
<i>Position Description:</i> I am a staff physician in the US Army <i>End Date:</i> Ongoing / No Known End Date			

Certification

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- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
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- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Cristin Mount, MD

Disclosures of Interests: Supplemental Questions

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

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Topic Areas: diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area?
Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measures publications in space below (or send list of relevant measures/publications as attachment). Otherwise, you may leave blank.

**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

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Cristin Mount

Print Name

MOUNT.CRISTIN.ANN.1050343410
0343410

Digitally signed by
MOUNT.CRISTIN.ANN.1050343410
Date: 2022.12.09 16:05:07 -08'00'

9 December 2022

Signature

Date

Rhea Powell

Discloser Identifier: 01792642 **Disclosure Purpose:** Annual Governance Disclosure 2022-23 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Mathematica	Employment	Self	-
<p>Title: Senior Researcher Start Date: 09/05/2019 Additional Information: Full time research and evaluation role on projects related to health care delivery and organization. I updated the end date, as I have given notice and will be leaving this role on 9/9/2022</p> <p>Position Description: Heath researcher End Date: 09/09/2022</p>			
Perelman School of Medicine, University of Pennsylvania	Employment	Spouse/Partner	-
<p>Title: Assistant Professor of Medicine Start Date: 07/01/2010 Additional Information: Spouse is a full time clinician-researcher in infectious disease</p> <p>Position Description: Clinician researcher End Date:</p>			
Society of General Internal Medicine	Other	Self	-
<p>Category: Other Start Date: 05/01/2015 End Date: Compensation Type: Unpaid, Compensation: No Additional Information: Society of General Internal Medicine - Health Policy Research Subcommittee - Participate in monthly 1 hour meetings, occasional work in between meetings totaling less than 8 hours annually.</p>			
Thomas Jefferson University	Employment Current Employment	Self	-
<p>Title: Associate Professor of Medicine Start Date: 09/19/2012 Additional Information: Full time</p> <p>Position Description: Division Director for Internal Medicine with administrative responsibilities and primary care physician and faculty in department of medicine End Date:</p>			

Certification

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- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Rhea Powell

Disclosures of Interests: Supplemental Questions

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

- ☐ Yes (please provide additional details below).
- ☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

- ☒ Yes (please provide additional details below).
- ☐ No

If you answered yes to either question above, please list any relevant measures publications in space below (or send list of relevant measures/publications as attachment). Otherwise, you may leave blank.

I published two papers related to diabetes care in the last few years. The first was a systematic review of approaches to overcome therapeutic inertia in diabetes care (Powell RE, Zaccardi F, Beebe C, et al. Strategies for overcoming therapeutic inertia in type 2 diabetes: A systematic review and meta-analysis. Diabetes, Obesity and Metabolism. 2021 Sep;23(9):2137–2154.)

I also was a coinvestigator on a study looking at medically tailored meals to improve diabetes outcomes. The protocol for this trial was published in 2021. (Rising et al. Assessing the impact of medically tailored meals and medical nutrition therapy on type 2 diabetes: Protocol for Project MiNT. Contemporary Clinical Trials 2021 Sep;108:10651)

**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Neither paper discusses or relates to development or validity of diabetes measures, though both use diabetes measures to evaluate outcomes.

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Rhea Powell

Print Name



Signature

1/20/23

Date

Sameer Saini

Discloser Identifier: 01164590 **Disclosure Purpose:** Annual Governance Disclosure 2022-23 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Michigan Medicine	Employment Current Employment	Self	-
Title: Professor Start Date: 07/01/2008 Additional Information: Position Description: Department of Internal Medicine, Division of Gastroenterology End Date:			
U.S. Department of Veterans Affairs	Employment	Spouse/Partner	-
Title: Staff Physician Start Date: 07/01/2005 Additional Information: Position Description: General internist at VA Ann Arbor Healthcare System End Date: Ongoing / No Known End Date			
U.S. Department of Veterans Affairs	Employment Current Employment	Self	-
Title: Director, HSR&D Center for Clinical Management Research Start Date: 07/01/2008 Additional Information: Primary employer Position Description: Gastroenterologist at VA Ann Arbor Healthcare System Research Scientist at the VA Ann Arbor Center for Clinical Management Research End Date: Ongoing / No Known End Date			
U.S. Department of Veterans Affairs	Grant / Contract	Self	\$5500000.00
Recipient Name: Sameer D Saini Grant / Contract Description: VA Center of Innovation Grant Grant / Contract Amount: \$5,500,000.00 Contract Start Date: 10/01/2018 Additional Information: Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Valuation Date: 08/21/2020 Contract End Date: 09/30/2023			
U.S. Department of Veterans Affairs	Grant / Contract	Self	\$1099389.00
Recipient Name: Sameer D Saini, Grace Su Grant / Contract Description: Using Analytic Morphomics to Predict Outcomes and Improve Access in Chronic Liver Disease Grant / Contract Amount: \$1,099,389.00 Contract Start Date: 05/01/2019 Additional Information: Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Valuation Date: 01/08/2021 Contract End Date: 04/30/2023			
U.S. Department of Veterans Affairs	Grant / Contract	Self	\$50000.00
Recipient Name: Sameer D Saini Grant / Contract Description: Grant related to performance measure refinement on colorectal cancer screening overuse Grant / Contract Amount: \$50,000.00 Contract Start Date: 09/01/2019 Additional Information: Recipient Type: Institution Grant / Contract Purpose: Other - Operational development Grant / Contract Valuation Date: 08/21/2020 Contract End Date: Ongoing / No Known End Date			
U.S. Department of Veterans Affairs	Grant / Contract	Self	\$1099615.00

Entity	Type	Interest Held By	Value
<p>Recipient Name: Sameer Saini, Loren Laine, Yu-Xiao Yang Grant / Contract Description: Evaluation of the National Randomized Proton Pump Inhibitor De-Prescribing Program Grant / Contract Amount: \$1,099,615.00 Contract Start Date: 11/01/2018 Additional Information:</p> <p>Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Valuation Date: 01/08/2021 Contract End Date: 10/31/2021</p>			
U.S. Department of Veterans Affairs	Grant / Contract	Self	\$1085144.00
<p>Recipient Name: Sameer D Saini, Michael Ho, Peter Kaboli, Stephanie Shimada Grant / Contract Description: Improving Access to Care for Veterans through Partnered Research Grant / Contract Amount: \$1,085,144.00 Contract Start Date: 01/01/2020 Additional Information:</p> <p>Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Valuation Date: 01/08/2021 Contract End Date: 06/30/2022</p>			
U.S. Department of Veterans Affairs	Grant / Contract	Self	\$500000.00
<p>Recipient Name: Sameer D Saini Grant / Contract Description: Reducing use of low value colonoscopy Grant / Contract Amount: \$500,000.00 Contract Start Date: 10/01/2019 Additional Information:</p> <p>Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Valuation Date: 08/21/2020 Contract End Date: 09/30/2024</p>			

Certification

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- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

Ryan Mire

Disclosure Purpose:

Annual Governance Disclosure 2022-23, Faculty, Faculty List, CME Application, Internal Medicine Meeting 2023 faculty, Annual Meeting, Planning Committee

Employment Information:

Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value									
Heritage Medical Associates	Employment Current Employment	Self	-									
<div><div>Title: Physician Start Date: 01/02/2005 Additional Information:</div><div>Position Description: End Date: Ongoing / No Known End Date</div></div>												
Overbrook School	Employment	Spouse/Partner	-									
<div><div>Title: Registered Nurse Start Date: 08/15/2013 Additional Information:</div><div>Position Description: End Date:</div></div>												
State Volunteer Mutual Insurance Company	End Point Review Committee	Self	\$7925.00									
<div><div>Category: End Point Review Committee Start Date: 01/01/2018 End Date: Ongoing / No Known End Date Compensation Type:Cash, Compensation: Yes</div><table><tr><th>Year</th><th>Amount</th><th>Type</th></tr><tr><td>2021</td><td>\$3,806.25</td><td>Actual</td></tr><tr><td>2020</td><td>\$4,118.75</td><td>Actual</td></tr></table><div>Additional Information: Serve as a member of the Underwriting Committee for SVMIC. Compensated for time spent reviewing applications.</div></div>				Year	Amount	Type	2021	\$3,806.25	Actual	2020	\$4,118.75	Actual
Year	Amount	Type										
2021	\$3,806.25	Actual										
2020	\$4,118.75	Actual										

Certification

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**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name: Ryan D. Mire

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☐ I have publications to report (please list in space below).
- ☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

- ☐ I have interests to report (please list in space below).
- ☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measure publications in the space below (or send a list of relevant measures/publications as an attachment). Otherwise, you may leave blank.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

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Ryan D. Mire

Print Name

Ryan D. Mire

Signature

Digitally signed by Ryan D.
Mire

1/6/2023

Date

Laura Baldwin

Discloser Identifier: 01367349 **Disclosure Purpose:** Annual Staff Disclosure 2022 - 2023 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div>Title: Director, Public Relations Start Date: 02/06/2006 Additional Information:</div><div>Position Description: End Date:</div></div>			

Certification

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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name:

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ I have publications to report (please list in space below).

☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

☐ I have interests to report (please list in space below).

☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measure publications in the space below (or send a list of relevant measures/publications as an attachment). Otherwise, you may leave blank.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

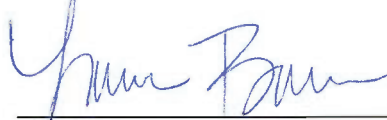
Acknowledgements and Attestations

By signing this form,

- I acknowledge that in order to maintain transparency, all participants' disclosure of interests will be publicly available on ACP's website and a link to the disclosures will be included in each published work.
- I attest that I have reviewed the attached Convey disclosures report and that my disclosures are up to date.
- I attest that I have disclosed all healthcare-related financial and intellectual interests for myself and any household members from the last 3 years and I will promptly disclose any changes. These include but are not limited to: research and consulting roles; investments and proprietary interests, and intellectual interests such as participation in workgroups, panels, or committees through other medical societies or healthcare organizations.

Laura Baldwin

Print Name



Signature

Date

11/17/23

Wayne Bylsma

Discloser Identifier: 01431719 **Disclosure Purpose:** Annual Staff Disclosure 2022 - 2023 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<i>Title:</i> Chief Operating Officer <i>Start Date:</i> 10/15/1997 <i>Additional Information:</i> <i>Position Description:</i> Oversees operations of the organization <i>End Date:</i> Ongoing / No Known End Date			
Ewing Cole	Employment	Spouse/Partner	-
<i>Title:</i> Project Manager <i>Start Date:</i> 01/01/1998 <i>Additional Information:</i> <i>Position Description:</i> Manages building/renovation of health care facilities <i>End Date:</i> Ongoing / No Known End Date			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
- Investments and proprietary interests excluding broadly diversified investments such as mutual or pension funds (e.g., stocks, bonds, stock options, commercial business interests, patents, trademarks, copyrights)
- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name: Wayne H. Bylsma

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☐ I have publications to report (please list in space below).
- ☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

- ☐ I have interests to report (please list in space below).
- ☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measure publications in the space below (or send a list of relevant measures/publications as an attachment). Otherwise, you may leave blank.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

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Wayne H. Bylsma

Print Name

Wayne Bylsma Digitally signed by Wayne Bylsma
Date: 2022.12.18 10:33:36 -05'00'

Dec 18 2022

Signature

Date

Karen Campos

Discloser Identifier: 04227079 **Disclosure Purpose:** Annual Staff Disclosure 2022 - 2023 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div>Title: Associate, Performance Measurement Start Date: 04/04/2022 Additional Information: Full-time exempt</div><div>Position Description: - Review measurement science work with the PMC End Date: Ongoing / No Known End Date</div></div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

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- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name: Karen Campos

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☐ I have publications to report (please list in space below).
- ☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

- ☐ I have interests to report (please list in space below).
- ☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measure publications in the space below (or send a list of relevant measures/publications as an attachment). Otherwise, you may leave blank.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

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Karen Campos

Print Name

Karen Campos, CHES

Digitally signed by Karen Campos, CHES
Date: 2023.01.06 13:22:37 -05'00'

Signature

Date

Discloser Identifier: 02186486 **Disclosure Purpose:** Annual Staff Disclosure 2022 - 2023 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div>Title: Manager, Clinical Policy Start Date: 08/26/2013 Additional Information:</div><div>Position Description: Manage activities related to the Clinical Guidelines Committee and Scientific Medical Policy Committee End Date: Ongoing / No Known End Date</div></div>			
Council of Medical Specialty Societies	Other	Self	-
<div>Category: Other Start Date: 10/01/2020 End Date: 10/31/2022 Compensation Type:Unpaid, Compensation: No Additional Information: Co-chair, Clinical Practice Guidelines Developers Professional Peer Group</div>			
Guidelines International Network	Other	Self	-
<div>Category: Other Start Date: 09/26/2022 End Date: 09/26/2024 Compensation Type:Unpaid, Compensation: No Additional Information: Steering group member, GIN North America Regional Community</div>			
The Beasley Firm, LLC	Employment	Spouse/Partner	-
<div><div>Title: Technology Specialist Start Date: 09/01/2009 Additional Information:</div><div>Position Description: Provides technical and media support End Date: Ongoing / No Known End Date</div></div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

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- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name: Kate Carroll

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☐ I have publications to report (please list in space below).
- ☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

- ☐ I have interests to report (please list in space below).
- ☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measure publications in the space below (or send a list of relevant measures/publications as an attachment). Otherwise, you may leave blank.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

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Kate Carroll

Print Name

Kate Carroll



Digitally signed by Kate Carroll
Date: 2022.12.16 17:30:23 -05'00'

12/16/2022

Signature

Date

**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name: Sarah Crossan

Disclosures of Interests: Supplemental Questions

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measures publications in space below (or send list of relevant measures/publications as attachment). Otherwise, you may leave blank.

**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

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Sarah Crossan

Print Name

Sarah Crossan

Digitally signed by Sarah Crossan
Date: 2023.01.20 15:37:27 -05'00'

1/20/23

Signature

Date

Shari Erickson

Disclosure Annual Staff Disclosure 2022 - 2023, 2022 South Dakota Meeting, Program Planning Committee, CME **Employment** Currently
Purpose: Program Faculty, Internal Medicine Meeting 2022 faculty, Planners and Faculty, Faculty List, Internal **Information:** Employed
Medicine Meeting 2023 faculty, Annual Meeting

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div>Title: Chief Advocacy Officer and Senior Vice President, Governmental Affairs and Public Policy</div><div>Start Date: 09/04/2007</div><div>Additional Information:</div></div> <div><div>Position Description:</div><div>End Date:</div></div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
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- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

Discloser Identifier: 04021574 **Disclosure Purpose:** Annual Staff Disclosure 2022 - 2023 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div>Title: Senior Scientist Start Date: 11/07/2022 Additional Information:</div><div>Position Description: Senior Scientist End Date: Ongoing / No Known End Date</div></div>			
American College of Physicians	Consultant	Self	-
<div>Category: Consultant Start Date: 09/01/2018 End Date: 10/31/2022 Compensation Type: Cash, Compensation: Additional Information:</div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
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- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

Disclosure Purpose: Annual Staff Disclosure 2022 - 2023, Planners and Faculty**Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div>Title: Senior Vice President, Marketing & PR Start Date: 06/10/1996 Additional Information:</div><div>Position Description: Chief Communications Officer End Date: Ongoing / No Known End Date</div></div>			

Certification

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- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name: Allison Ewing

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☐ I have publications to report (please list in space below).
- ☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

- ☐ I have interests to report (please list in space below).
- ☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measure publications in the space below (or send a list of relevant measures/publications as an attachment). Otherwise, you may leave blank.

American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation

Acknowledgements and Attestations

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- I attest that I have reviewed the attached Convey disclosures report and that my disclosures are up to date.
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Allison Ewing

Print Name

Allison Ewing

1-6-22

Signature

Date

Andrew Hachadorian

Discloser Identifier: 04028463 **Disclosure Purpose:** Annual Staff Disclosure 2022 - 2023 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<i>Title:</i> Manager of Media Relations <i>Start Date:</i> 04/27/2020 <i>Additional Information:</i> <i>Position Description:</i> I manage media relations for the College. <i>End Date:</i> Ongoing / No Known End Date			
Bristol-Myers Squibb	Employment	Self	-
<i>Title:</i> Contract content writer <i>Start Date:</i> 10/21/2019 <i>Additional Information:</i> <i>Position Description:</i> I wrote content for internal and external websites as well as social media copy. <i>End Date:</i> 04/20/2020			
Cutanea Life Sciences	Employment	Self	-
<i>Title:</i> Manager of Digital Marketing and Media <i>Start Date:</i> 02/29/2016 <i>Additional Information:</i> <i>Position Description:</i> I was responsible for internal and external communications as well as social media and digital functions. <i>End Date:</i> 06/26/2019			
Main Line Health	Employment	Spouse/Partner	-
<i>Title:</i> Medical secretary <i>Start Date:</i> 01/02/1995 <i>Additional Information:</i> <i>Position Description:</i> I work at the Perinatal Testing Center at Paoli Hospital. <i>End Date:</i> 12/09/2021			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

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- Investments and proprietary interests excluding broadly diversified investments such as mutual or pension funds (e.g., stocks, bonds, stock options, commercial business interests, patents, trademarks, copyrights)
- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation

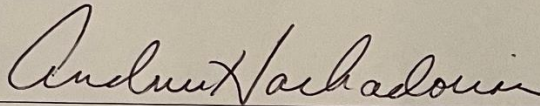
Acknowledgements and Attestations

By signing this form,

- I acknowledge that in order to maintain transparency, all participants' disclosure of interests will be publicly available on ACP's website and a link to the disclosures will be included in each published work.
- I attest that I have reviewed the attached Convey disclosures report and that my disclosures are up to date.
- I attest that I have disclosed all healthcare-related financial and intellectual interests for myself and any household members from the last 3 years and I will promptly disclose any changes. These include but are not limited to: research and consulting roles; investments and proprietary interests, and intellectual interests such as participation in workgroups, panels, or committees through other medical societies or healthcare organizations.

Andrew Hachadorian

Print Name



Signature

1-6-2023

Date

Curtis Harrod

Discloser Identifier: 04119425 **Disclosure Purpose:** Annual Staff Disclosure 2022 - 2023 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div>Title: Senior Scientist Start Date: 05/31/2022 Additional Information:</div><div>Position Description: I am a methodologist contributing to or leading work on evidence synthesis to inform clinical guidelines. End Date: Ongoing / No Known End Date</div></div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
- Investments and proprietary interests excluding broadly diversified investments such as mutual or pension funds (e.g., stocks, bonds, stock options, commercial business interests, patents, trademarks, copyrights)
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- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name: Curtis Harrod

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☒ I have publications to report (please list in space below).
- ☐ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

- ☐ I have interests to report (please list in space below).
- ☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

Migraines and diabetes reports at OHSU. Author on CRC guidance statements and CC



**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measure publications in the space below (or send a list of relevant measures/publications as an attachment). Otherwise, you may leave blank.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

By signing this form,

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- I attest that I have reviewed the attached Convey disclosures report and that my disclosures are up to date.
- I attest that I have disclosed all healthcare-related financial and intellectual interests for myself and any household members from the last 3 years and I will promptly disclose any changes. These include but are not limited to: research and consulting roles; investments and proprietary interests, and intellectual interests such as participation in workgroups, panels, or committees through other medical societies or healthcare organizations.

Curtis Harrod

Print Name

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BE15CC00B263431A96126255C355ACAD
Date: 2022.12.12 08:17:04 -08'00'

12/12/2022

Signature

Date

Darilyn Moyer

Disclosure Purpose: Annual Governance Disclosure 2022-23, Faculty - MA ACP Annual Chapter Mtg, CME, Planners and Faculty, Faculty, Internal Medicine Meeting 2023 faculty

Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
Title: EVP/CEO Start Date: 01/01/2017 Additional Information: Position Description: EVP/CEO End Date: Ongoing / No Known End Date			
American Medical Association	Other	Self	-
Category: Other Start Date: 01/01/2017 End Date: Ongoing / No Known End Date Compensation Type: Unpaid, Compensation: Additional Information:			
Council of Medical Subspecialty Societies	Fiduciary Officer	Self	-
Official Title: Former CMSS Board Member/President Compensation Type: Unpaid, Start Date: 10/27/2020 End Date: Ongoing / No Known End Date Compensation: Additional Information: Position Description: Former CMSS Board member/President Other Compensation:			
Gender Equity in Academic Medicine and Science Alliance	Fiduciary Officer	Self	-
Official Title: Founding Member and Executive Board Member Compensation Type: Unpaid, Start Date: 01/01/2022 End Date: Compensation: No Additional Information: Position Description: Member, Board of Directors Other Compensation:			
Inspira Health Woodbury	Employment	Spouse/Partner	-
Title: Physician Staff- Inspira Medical Group Start Date: 01/01/2017 Additional Information: Inspira Group Physicians 2950 College Drive Suite 1E Vineland, NJ 08360 Position Description: Salaried Pulmonary Critical Care Sleep Physician End Date: Ongoing / No Known End Date			
PCPCC	Fiduciary Officer	Self	-
Official Title: Former PCPCC Board Chair and Current PCPCC Board Member Compensation Type: Unpaid, Start Date: 01/01/2017 End Date: Ongoing / No Known End Date Compensation: No Additional Information: Position Description: PCPCC Board Member and Immediate Past Chair Other Compensation:			
Temple University	Fiduciary Officer	Self	-

Entity	Type	Interest Held By	Value
Official Title: Lewis Katz School of Medicine at Temple University Medical Alumni Board Compensation Type: Unpaid, Start Date: 01/01/2017 End Date: Ongoing / No Known End Date Compensation: No Additional Information:			
Position Description: Nonfiduciary Board (MEd School AlumniBoard)member Other Compensation:			

Intellectual Property

Type	Is Licensed	Interest Held By	Value
Other Intellectual Property - Multiple presentations	-	Self	-
Description: Multiple presentations Income Source: Board of Regents Yearly Income: Additional Information:			
Other Intellectual Property - Multiple presentations and publications	-	Self	-
Description: Multiple presentations and publications Income Source: None Yearly Income: Additional Information:			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
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- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name: Darilyn V. Moyer, MD, MACP

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☒ I have publications to report (please list in space below).
- ☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

- ☐ I have interests to report (please list in space below).
- ☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

- 1) Christine Laine, MD, MPH; Deborah Cotton, MD, MPH; Darilyn V. Moyer, MD; "COVID-19 Vaccine Distribution and Allocation: What Physicians Need to Know" A special article in Annals of Internal Medicine, 2021; doi:10.7326/M21-0331, 03/21
- 2) Christine Laine, MD, MPH; Deborah Cotton, MD, MPH; Darilyn V. Moyer, MD; "COVID-19 Vaccine Distribution and Allocation: Promoting Vaccine Acceptance" A special article in Annals of Internal Medicine, 2021; doi.org/10.7326/M20-8008, 02/21
- 3) Christine Laine, MD, MPH; Deborah Cotton, MD, MPH; Darilyn V. Moyer, MD; "COVID-19 Vaccine: What Physicians Need to Know" A special article in Annals of Internal Medicine, 2020; 173:830. doi:10.7326/M20-6841, 11/20
- 4) Christine Laine, MD, MPH; Deborah Cotton, MD, MPH; Darilyn V. Moyer, MD; "COVID-19 Vaccine: Practical Clinical Considerations" A special article in Annals of Internal Medicine, 2021; doi.org/10.7326/M21-1260, 03/21
- 5) Jain, S. & Kim, D. (Eds.). (2020). An evolution of empowerment: A women in medicine summit compendium. "Perfect Prescription for Inequity: The intersection of COVID-19 and the U.S. health care system" Darilyn V. Moyer. Wiley. 09/20

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measure publications in the space below (or send a list of relevant measures/publications as an attachment). Otherwise, you may leave blank.

1)

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

By signing this form,

- I acknowledge that in order to maintain transparency, all participants' disclosure of interests will be publicly available on ACP's website and a link to the disclosures will be included in each published work.
- I attest that I have reviewed the attached Convey disclosures report and that my disclosures are up to date.
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Darilyn V. Moyer, MD, MACP, FRCP, FIDSA, FAMWA

Print Name



Signature

1/9/23

Date

Disclosure Purpose:	Annual Staff Disclosure 2022 - 2023, Coding for Clinicians CME disclosure, Internal Medicine Meeting 2022 faculty	Employment Information:	Currently Employed
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Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div> <div> Title: Director, Regulatory Affairs Start Date: 04/30/2014 Additional Information: </div> <div> Position Description: Director, Regulatory Affairs End Date: Ongoing / No Known End Date </div> </div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
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- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

David Pugach

Disclosure Purpose:

Annual Staff Disclosure 2022 - 2023, Internal Medicine Meeting 2023
faculty

Employment Information:

Currently
Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div>Title: Vice President, Governmental Affairs and Public Policy Start Date: 08/01/2022 Additional Information:</div><div>Position Description: End Date: Ongoing / No Known End Date</div></div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
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- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

Disclosure Purpose: Annual Staff Disclosure 2022 - 2023, Internal Medicine Meeting 2022 faculty, CME, Internal Medicine Meeting 2023 faculty, Planners and Faculty

Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<p><i>Title:</i> Chief Science Officer <i>Start Date:</i> 12/07/2003 <i>Additional Information:</i></p> <p><i>Position Description:</i> <i>End Date:</i> Ongoing / No Known End Date</p>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name: Amir Qaseem

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☐ I have publications to report (please list in space below).
- ☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

- ☐ I have interests to report (please list in space below).
- ☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measure publications in the space below (or send a list of relevant measures/publications as an attachment). Otherwise, you may leave blank.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

By signing this form,

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- I attest that I have disclosed all healthcare-related financial and intellectual interests for myself and any household members from the last 3 years and I will promptly disclose any changes. These include but are not limited to: research and consulting roles; investments and proprietary interests, and intellectual interests such as participation in workgroups, panels, or committees through other medical societies or healthcare organizations.

Amir Qaseem

Print Name

Amir Qaseem

Digitally signed by Amir Qaseem
DN: cn=Amir Qaseem, o, ou,
email=aqaseem@acponline.org, c=US
Date: 2023.01.09 23:10:40 -05'00'

1/9/2023

Signature

Date

Discloser Identifier: 01975766 **Disclosure Purpose:** Annual Staff Disclosure 2022 - 2023 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div>Title: Senior Research Associate Start Date: 01/13/2021 Additional Information:</div><div>Position Description: Center for Evidence Reviews End Date:</div></div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
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- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name: Tatyana A Shamliyan

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☐ I have publications to report (please list in space below).
- ☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

- ☐ I have interests to report (please list in space below).
- ☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measure publications in the space below (or send a list of relevant measures/publications as an attachment). Otherwise, you may leave blank.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

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- I attest that I have reviewed the attached Convey disclosures report and that my disclosures are up to date.
- I attest that I have disclosed all healthcare-related financial and intellectual interests for myself and any household members from the last 3 years and I will promptly disclose any changes. These include but are not limited to: research and consulting roles; investments and proprietary interests, and intellectual interests such as participation in workgroups, panels, or committees through other medical societies or healthcare organizations.

Tatyana A Shamliyan

Print Name

Tatyana A Shamliyan

Digitally signed by Tatyana A Shamliyan
Date: 2023.01.07 16:11:54 -05'00'

01/07/2023

Signature

Date

Samantha Tierney

Discloser Identifier: 03794192 **Disclosure Purpose:** Annual Staff Disclosure 2022 - 2023 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
Title: Senior Scientist, Clinical Policy Start Date: 06/15/2020 Additional Information: Position Description: Leading the performance measurement strategy End Date: Ongoing / No Known End Date			
PCPI Foundation	Employment	Self	-
Title: Senior Director, Measurement Science Start Date: 01/01/2017 Additional Information: My salary at the PCPI was supported by services provided as a contractor and subcontractor to CMS and non-profit organizations for measure development, specification, testing and endorsement. Position Description: Orchestrate daily activities of the Measurement Science Program, developing and implementing key performance measures, and monitoring performance to uphold market competitiveness. End Date: 06/12/2020			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
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- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name: Samantha Tierney

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☐ I have publications to report (please list in space below).
- ☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

- ☐ I have interests to report (please list in space below).
- ☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measure publications in the space below (or send a list of relevant measures/publications as an attachment). Otherwise, you may leave blank.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

By signing this form,

- I acknowledge that in order to maintain transparency, all participants' disclosure of interests will be publicly available on ACP's website and a link to the disclosures will be included in each published work.
- I attest that I have reviewed the attached Convey disclosures report and that my disclosures are up to date.
- I attest that I have disclosed all healthcare-related financial and intellectual interests for myself and any household members from the last 3 years and I will promptly disclose any changes. These include but are not limited to: research and consulting roles; investments and proprietary interests, and intellectual interests such as participation in workgroups, panels, or committees through other medical societies or healthcare organizations.

Samantha Tierney

Print Name



Signature

1/9/2023

Date

Discloser Identifier: 04242806 **Disclosure Purpose:** Annual Staff Disclosure 2022 - 2023 **Employment Information:** Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
American College of Physicians	Employment Current Employment	Self	-
<div><div>Title: Research Associate</div><div>Start Date: 04/19/2022</div><div>Additional Information:</div></div> <div>Position Description: Identifies content and prepares agendas for Scientific Medical Policy Committee meetings and conference calls. Manage and coordinates timelines, deliverables, logistics, and contracts for manuscripts. Reviews, edits, and proofreads papers.</div> <div>End Date: Ongoing / No Known End Date</div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
- Investments and proprietary interests excluding broadly diversified investments such as mutual or pension funds (e.g., stocks, bonds, stock options, commercial business interests, patents, trademarks, copyrights)
- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name: Karla Umana

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☐ I have publications to report (please list in space below).
- ☒ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

- ☐ I have interests to report (please list in space below).
- ☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☐ Yes (please provide additional details below).

☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measure publications in the space below (or send a list of relevant measures/publications as an attachment). Otherwise, you may leave blank.

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Acknowledgements and Attestations

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- I attest that I have disclosed all healthcare-related financial and intellectual interests for myself and any household members from the last 3 years and I will promptly disclose any changes. These include but are not limited to: research and consulting roles; investments and proprietary interests, and intellectual interests such as participation in workgroups, panels, or committees through other medical societies or healthcare organizations.

Karla Umana

Print Name

Karla Umana

Digitally signed by Karla Umana
Date: 2023.01.06 13:51:19 -05'00'

1/06/2023

Signature

Date

**Discloser
Identifier:**03994247**Disclosure
Purpose:**Contractor/Guest Annual Disclosure 2022 - **Employment
Information:** 23Currently
Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
COVID-END	Other	Self	-
<i>Category:</i> Other <i>Start Date:</i> 05/01/2020 <i>End Date:</i> Ongoing / No Known End Date <i>Compensation Type:</i> Unpaid, <i>Compensation:</i> No <i>Additional Information:</i>			
European Cooperation in Science and Technology	Other	Self	-
<i>Category:</i> Other <i>Start Date:</i> 10/17/2018 <i>End Date:</i> 04/16/2023 <i>Compensation Type:</i> Unpaid, <i>Compensation:</i> No <i>Additional Information:</i>			
Evidence Based Research Network	Fiduciary Officer	Self	-
<i>Official Title:</i> Steering Committee Member <i>Compensation Type:</i> Unpaid, <i>Start Date:</i> 10/01/2016 <i>End Date:</i> Ongoing / No Known End Date <i>Compensation:</i> No <i>Additional Information:</i> <i>Position Description:</i> <i>Other Compensation:</i>			
Evidence Synthesis International	Fiduciary Officer	Self	-
<i>Official Title:</i> Secretariat <i>Compensation Type:</i> Unpaid, <i>Start Date:</i> 03/01/2018 <i>End Date:</i> Ongoing / No Known End Date <i>Compensation:</i> <i>Additional Information:</i> <i>Position Description:</i> Organize and support activities of the organisation <i>Other Compensation:</i>			
McMaster University	Employment	Self	-
<i>Title:</i> Assistant Clinical Faculty <i>Start Date:</i> 07/01/2017 <i>Additional Information:</i> <i>Position Description:</i> <i>End Date:</i> Ongoing / No Known End Date			
Sigma Theta Tau International	Fiduciary Officer	Self	-
<i>Official Title:</i> Immediate Past President <i>Compensation Type:</i> <i>Start Date:</i> 10/01/2021 <i>End Date:</i> 09/30/2022 <i>Compensation:</i> No <i>Additional Information:</i> <i>Position Description:</i> <i>Other Compensation:</i>			

Entity	Type	Interest Held By	Value
Sigma Theta Tau International	Fiduciary Officer	Self	-
<div> <div> Official Title: President - Alpha Nu Chapter Compensation Type: Unpaid, Start Date: 09/01/2019 End Date: 09/30/2021 Compensation: No Additional Information: </div> <div> Position Description: President - Alpha Nu Chapter Other Compensation: </div> </div>			
Villanova University	Employment Current Employment	Self	-
<div> <div> Title: Professor Start Date: 08/22/2017 Additional Information: </div> <div> Position Description: End Date: Ongoing / No Known End Date </div> </div>			
Villanova University	Grant / Contract	Self	\$50000.00
<div> <div> Recipient Name: M. Louise Fitzpatrick College of Nursing Grant / Contract Description: COVID-19 Caring About Health for All Study (CHAMPS) Grant / Contract Amount:\$50,000.00 Contract Start Date: 03/31/2020 Additional Information: Principal Investigators: Kaufman, P., Havens, D., Mensinger, J.; Co-Investigators: Bradley, P., Brom, H., Copel, L., Maldonado, L., Smeltzer, S., Yost, J. </div> <div> Recipient Type: Institution Grant / Contract Purpose: Research Grant / Contract Valuation Date: 03/31/2020 Contract End Date: Ongoing / No Known End Date </div> </div>			
Villanova University	Other	Self	-
<div> Category: Other Start Date: 03/20/2020 End Date: Compensation Type:Unpaid, Compensation: No Additional Information: COVID-19 Caring About Health for All Study (CHAMPS) funded with in-kind funding in the amount of \$50,000 USD. A longitudinal study to assess the experience and self-reported health and well-being of essential workers and first responders, service staff, and healthcare professionals who provided support for patients, treatment sites and the community during the COVID-19 pandemic in the short and long-term. CHAMPS will also serve as a registry for future, ancillary- and sub-studies. </div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
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Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the last page)

Name: Jennifer Yost

Disclosures of Interests: Supplemental Questions for Clinical Guidelines Committee and Scientific Medical Policy Committee

Please review the following topic areas and report any intellectual interests held by you or any household members that may be relevant to the topic areas.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: Migraine, Colorectal Cancer, Diabetes, COVID-19

Within the past 3 years, have you or any household members published on any of the above topic areas? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

- ☒ I have publications to report (please list in space below).
- ☐ I have no publications to report.

Do you or any household members have any other intellectual interests related to any of the above?

- ☐ I have interests to report (please list in space below).
- ☒ I have no interest to report.

If you answered yes to either of the above questions, please provide additional details on the relevant interests (if not already captured in the Convey System) and list any relevant publications in the space below (or send a list of relevant publications as attachment).

See page 3

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

Disclosures of Interests: Supplemental Questions for Performance Measurement Committee

Please review the clinical topic area listed below and report any intellectual interests held by you or any household members that may be relevant to measures in the topic area under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Area: Diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

☒ Yes (please provide additional details below).

☐ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog).

☐ Yes (please provide additional details below).

☒ No

If you answered yes to either question above, please list any relevant measure publications in the space below (or send a list of relevant measures/publications as an attachment). Otherwise, you may leave blank.

See page 3

**American College of Physicians
Department of Clinical Policy
Disclosure of Interests: Supplemental Questions and Attestation**

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Jennifer Yost

Print Name



Signature

January 9, 2023

Date

DIABETES [non-ACP related italicized]

1.Navodia, N., Wahoush, O., Tang, T., Yost, J., Ibrahim, S., & Sherifali, D. (2019). Culturally tailored self-management interventions for South Asians with type 2 diabetes: A systematic review. *Canadian Journal of Diabetes*, 43(6), 445-452.

COVID 19 [non-ACP related italicized]

*Qaseem, A., et al. Outpatient Treatment of Confirmed COVID-19: Living and Rapid Practice Points from the American College of Physicians (Version 1). (2022). *Annals of Internal Medicine*. doi: 10.7326/M22-2249

*Smeltzer, S. C., et al. (2022). Vulnerability, loss, and coping experiences of health care workers during the Covid-19 pandemic. *International Journal of Qualitative Studies on Health and Well-being (QHW)*. doi: 10.1080/17482631.2022.2066254

*Qaseem, A., Yost, J., Etxeandia-Ikobaltzeta, I., Abraham, G. M. A., Jokela, M., Forciea, J. A., Miller, M., Humphrey, L. L., for the Scientific Medical Policy Committee of the American College of Physicians. (2022). Should remdesivir be used for the treatment of patients with COVID-19? Rapid, living practice points from the American College of Physicians (Version 2, Update 3). *Annals of Internal Medicine*. doi: 10.7326/M21-4810

*Qaseem, A., et al. (2022). What is the role of antibody determination in patients after SARS-CoV-2 infection? Rapid, living practice points from the American College of Physicians (Version 2). *Annals of Internal Medicine*. doi: 10.7326/M21-3272

*Mensing, J. L., et al. Psychological responses of hospital-based nurses working during the COVID-19 pandemic in the United States: An observational study. *Applied Nursing Research*, 63(2022).

*Kaufmann, P. G., et al. (2022). The COVID-19 study of healthcare and support personnel (CHAMPS): Objectives and design. *JMIR Research Protocols*, doi: 10.1016/j.apnr.2021.151517

*Qaseem, A., et al.. Should remdesivir be used for the treatment of patients with COVID-19? Rapid, living practice points from the American College of Physicians (Version 2, Update Alert 2). (2021). *Annals of Internal Medicine*. doi: 10.7326/L21-0607

*Qaseem, A., et al Should remdesivir be used for the treatment of patients with COVID-19? Rapid, living practice points from the American College of Physicians (Version 2, Update Alert 1). (2021). *Annals of Internal Medicine*. doi: 10.7326/L21-0389

*Qaseem, A., et al. The Development of Rapid, Living Practice Points: Summary of Methods from the Scientific Medical Policy Committee of the American College of Physicians. *Annals of Internal Medicine*. doi: 10.7326/M20-7641

*Qaseem, A., et al (2021). What is the role of antibody determination in patients after SARS-CoV-2 infection? Rapid, living practice points from the American College of Physicians (Version 1). *Annals of Internal Medicine*. doi: 10.7326/M20-7569

*Qaseem, A., et al. Should remdesivir be used for the treatment of patients with COVID-19? Rapid, living practice points from the American College of Physicians (Version 2). (2021). *Annals of Internal Medicine*. doi: 10.7326/M20-8101

*Qaseem, A., et al. (2020). Update alert: What is the effectiveness of N95 respirators, surgical masks, and cloth masks in community and healthcare settings for prevention of COVID-19? Living Practice Points from the American College of Physicians. *Annals of Internal Medicine*. doi: 10.7326/L20-1268

*Qaseem, A., et al. (2020). Update alert 2: Should clinicians use chloroquine or hydroxychloroquine alone or in combination with azithromycin for the prophylaxis or treatment of COVID-19? Living practice points from the American College of Physicians. *Annals of Internal Medicine*. doi: 10.7326/L20-1007.

*Qaseem, A., et al. (2020). What is the effectiveness of N95 respirators, surgical masks, and cloth masks in community and healthcare settings for prevention of COVID-19? What is the effectiveness for re-use or extended use of N95 respirators for prevention of COVID-19? Living Practice Points from the American College of Physicians (Version 1). *Annals of Internal Medicine*. doi: 10.7326/M20-3234.

*Qaseem, A., et al. (2020). Update alert: Should clinicians use chloroquine or hydroxychloroquine alone or in combination with azithromycin for the prophylaxis or treatment of COVID-19? Living practice points from the American College of Physicians. *Annals of Internal Medicine*. doi: 10.7326/M20-3862.

*Qaseem, A., et al. (2020). Should clinicians use chloroquine or hydroxychloroquine alone or in combination with azithromycin for the prophylaxis or treatment of COVID-19? (Version 1) *Annals of Internal Medicine*. doi: 10.7326/M20-1998

Disclosure Purpose: Annual Governance Disclosure 2022-23, Faculty/Speakers, 2021 ANNUAL MEETING EDUCATION, Internal Medicine Meeting 2022 faculty

Employment Information: Currently Employed

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Fox & Brantley Internal Medicine	Employment Current Employment	Self	-
<div><div>Title: MD Managing Partner Start Date: 11/01/2003 Additional Information:</div><div>Position Description: MD Managing Partner End Date: Ongoing / No Known End Date</div></div>			
Obagi Cosmeceuticals LLC	Other	Self	-
<div><div>Category: Other Start Date: 11/01/2003 End Date: Compensation Type: Other, Compensation: Additional Information:</div><div>Other Compensation: Reseller of Obagi Products</div></div>			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

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- Membership on boards, workgroups, panels, or committees through other medical societies or healthcare organizations
- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

Please enter your name: (You will need to sign on the second page)

Name:

Disclosures of Interests: Supplemental Questions

Please review the following measures or topic areas and report any intellectual interests held by you or any household members that may be relevant to the measures or topic areas under discussion.

- *Intellectual interests* are defined as academic ideas or activities or specific viewpoints and relate to such issues as academic advancement, clinical revenue streams, or community standing. Examples of types of intellectual interests include publications, unpaid participation on workgroups, panels, or committees, or membership in special interest groups.

Topic Areas: diabetes

Please review the topic area listed above. The PMC will review measures in this topic area during the upcoming meeting.

Within the last 3 years, have you or any household members contributed towards the development, testing and/or maintenance of measures in this topic area?

- ☐ Yes (please provide additional details below).
- ☒ No

Within the last 3 years, have you or any household members published on this clinical topic area? Please include both peer-reviewed and non-peer-reviewed sources (e.g., newspaper op-ed; blog)

- ☐ Yes (please provide additional details below).
- ☒ No

If you answered yes to either question above, please list any relevant measures publications in space below (or send list of relevant measures/publications as attachment). Otherwise, you may leave blank.

**American College of Physicians
Performance Measurement Committee
Disclosure of Interests: Supplemental Questions and Attestation**

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William Fox MD FACP

Print Name

William Fox

Signature

1/23/2023, 12:50:46 PM

Date

Billy Oglesby

Discloser Identifier: 03664138 **Disclosure Purpose:** Contractor/Guest Annual Disclosure 2022 - **Employment Information:** 23 **Currently Employed**

Summary of Interests

Company or Organization

Entity	Type	Interest Held By	Value
Association for Prevention Teaching and Research	Fiduciary Officer	Self	-
<i>Official Title:</i> President <i>Compensation Type:</i> Unpaid, <i>Start Date:</i> 03/01/2020 <i>End Date:</i> 03/01/2023 <i>Compensation:</i> <i>Additional Information:</i>			
<i>Position Description:</i> Elected president of this professional organization. <i>Other Compensation:</i>			
Leonard N. Stern School of Business, New York University	Employment	Self	-
<i>Title:</i> Adjunct Professor <i>Start Date:</i> 11/01/2022 <i>Additional Information:</i>			
<i>Position Description:</i> Teach a course in the business school. <i>End Date:</i>			
School of Arts and Sciences, University of Pennsylvania	Employment	Spouse/Partner	-
<i>Title:</i> Lecturer <i>Start Date:</i> 12/01/2022 <i>Additional Information:</i>			
<i>Position Description:</i> Teaches courses at Penn. <i>End Date:</i> Ongoing / No Known End Date			
Thomas Jefferson University	Employment Current Employment	Self	-
<i>Title:</i> Interim Dean, Jefferson College of Population Health <i>Start Date:</i> 07/01/2019 <i>Additional Information:</i>			
<i>Position Description:</i> Chief academic and executive officer of college and member of the University's academic leadership team. <i>End Date:</i> Ongoing / No Known End Date			
University of Alabama at Birmingham	Consultant	Self	-
<i>Category:</i> Consultant <i>Start Date:</i> 05/01/2019 <i>End Date:</i> 06/01/2023 <i>Compensation Type:</i> Cash, <i>Compensation:</i> Yes <i>Additional Information:</i> Taught a course as an adjunct professor.			

Certification

By submitting this form, I attest that I have disclosed all interests related to healthcare from the last 3 years on behalf of myself and any household members, including consideration of interests in the following areas:

- Research and consulting support (e.g., grants, contracts, sponsorships, honoraria, or any other fees related to role as consultant, speaker's bureau participation, or expert as part of regulatory, legislative, or judicial process)
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- Participation in advocacy or lobbying activities, including any roles or relationships with disease advocacy organizations

Other aspects of my background or present interests not addressed above that might be perceived as affecting my objectivity or independence

**American College of Physicians
Clinical Guidelines Committee, Performance Measurement Committee,
& Scientific Medical Policy Committee
Disclosure of Interests: Attestation and Supplemental Questions**

Guest Disclosures of Interests: Acknowledgements and Attestations

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Willie H. Oglesby, PhD

Print Name

Signature

Date

