

TOPIC AND YEARLY INDICES OF HEALTH CARE ANTITRUST ADVISORY OPINIONS BY COMMISSION AND BY STAFF*

Health Care Division Bureau of Competition Federal Trade Commission Washington D.C. 20580

> Markus H. Meier Assistant Director

Bradley S. Albert Deputy Assistant Director

Kara Monahan Deputy Assistant Director

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^{*} Actions involving health care services and products are contained in a separate document, *Overview of FTC Actions in Health Care Services and Products*. Actions involving pharmaceutical products and distribution are contained in the *Overview of FTC Actions in Pharmaceutical Products and Distribution*.

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I. INTRODUCTION¹

The Federal Trade Commission will respond to requests for advice from health care providers and others through its advisory opinion process.² On September 27, 1994, the Federal Trade Commission and the Department of Justice jointly issued nine statements of antitrust enforcement policies and analytical principles regarding mergers and various joint activities in the health care area. In response to changes in the health care market, on August 28, 1996, the agencies issued revisions to statements eight and nine concerning physician network joint ventures and multi-provider networks.³

Under the statements, the Commission has committed to responding within 90 days to requests for advice from health care plans or providers about matters addressed by the "safety zones" or the non-merger policy statements; and within 120 days to requests for advice regarding multiprovider networks and other non-merger health care matters. The response period will commence once all necessary information has been received by the Commission.

In the mid-1970's, the FTC formed a division within the Bureau of Competition to investigate potential antitrust violations involving health care. The Health Care Division consists of approximately 40 lawyers and investigators who work exclusively on health care antitrust matters. The Commission and its health care staff have responded to numerous requests for guidance from health care industry participants through, among other things, the advisory opinion letter process. Those advisory opinions are listed below by topic and by year. Section II contains a list of advisory opinions by topic. Some advisory opinions are listed in more than one category because they discuss several issues. A yearly index follows this topic index in Section III. Commission advisory opinions are indicated by an asterisk (*); other opinions are staff advisory opinions. The indices, advisory opinions, and other information relating to the Commission's advisory opinion program are available at the FTC's website at https://www.ftc.gov/tips-advice/competition-guidance/industry-guidance/health-care (for the advisory opinions, look under the "Advisory Opinion" drop down menu and "View More Advisory Opinions"). For additional information concerning the advisory opinion program, contact Robert Canterman at (202) 326-2701.

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¹ Actions involving health care services and products are contained in a separate document, *Overview of FTC Actions in Health Care Services and Products*. Actions involving pharmaceutical products and distribution are contained in the *Overview of FTC Actions in Pharmaceutical Products and Distribution*. Both documents are available at the FTC's website at

https://www.ftc.gov/tips-advice/competition-guidance/industry-guidance/health-care.

² FTC Rules of Practice, §1.1-1.4; 16 C.F.R. §§ 1.1-1.4.

³ Statements of Antitrust Enforcement Policy in Health Care, issued on August 28, 1996, 4 Trade Reg. Rep. (CCH) ¶13,153; Statements of Enforcement Policy and Analytical Principles Relating to Health Care and Antitrust, issued on September 27, 1994, 4 Trade Reg. Rep. (CCH) ¶13,152. The 1996 Policy Statements are available on the FTC's website at

https://www.ftc.gov/sites/default/files/attachments/competition-policy-guidance/statements of antitrust enforcement policy in health care august 1996.pdf.

II. TOPIC INDEX OF HEALTH CARE ANTITRUST ADVISORY OPINIONS BY COMMISSION AND BY STAFF

A. Network Joint Ventures

1. Physician Network Joint Ventures

Greater Rochester Independent Practice Association, Inc. To Christi J. Braun and John J. Miles; September 17, 2007. (Proposal by a physician association to negotiate contracts with payers in connection with its integrated services program) (https://www.ftc.gov/sites/default/files/documents/advisory-opinions/greater-rochester-independent-practice-association-inc./gripa.pdf).

MedSouth Inc. To John J. Miles; June 18, 2007. (Follow-up to MedSouth, Inc. staff advisory opinion dated February 9, 2002 (see below) concerning the program's clinical integration activities, efficiencies, and market power)

 $(\underline{https://www.ftc.gov/sites/default/files/documents/advisory-opinions/medsouth-inc./070618 medsouth.pdf}).$

Bay Area Preferred Physicians. To Martin J. Thompson; September 23, 2003. (Proposal by six county medical societies located in the San Francisco Bay area to develop a physician network and establish a messenger arrangement to minimize the costs associated with physicians contracting with health plans and other payers)

(https://www.ftc.gov/policy/advisory-opinions/letter-jeffrey-w-brennan-martin-j-thompson-dated-september-23-2003).

MedSouth, Inc. To John J. Miles; February 19, 2002. (Proposal by multispecialty physician network joint venture to implement clinical resource management program and contract with third party payers)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-miles-02-19-02).

Associates in Neurology, Inc. To Robert C. Norton; August 13, 1998. (IPA network composed of eleven neurologists formed to contract with managed care plans) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-norton-08-13-98).

Phoenix Medical Network, Inc. To William T. Harvey; May 19, 1998. (Physician network of osteopathic services providers formed to contract with third party payers) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-harvey-05-19-98).

Yellowstone Physicians, L.L.C. To David V. Meany, Esq.; May 14, 1997. (Multispecialty physician network joint venture formed to contract with third party payers) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-meany-05-14-97).

Uronet of Louisiana, L.L.C. To Christopher C. Johnston; January 23, 1996. (IPA network of urologists formed to contract with managed care plans) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-johnston-01-23-96).

Eastern Ohio Physicians Organization, Inc. To Stephen P. Nash, Esq.; September 28, 1995. (Multi speciality physician organization established to contract on behalf of its participating physicians with third party payers)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-nash-9-28-95).

Hematology/Oncology Care Specialists of Western Pennsylvania, P.C. To Stephen P. Nash, Esq.; September 21, 1995. (Physician network of hematology/oncology services providers formed to negotiate with third-party payers)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-nash-09-21-95).

Otolaryngology Specialty Providers of Georgia. To Thomas W. Rhodes, Esq.; August 15, 1995. (Physician network of otolaryngology services providers formed to facilitate individual contracts among network members and payers)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-rhodes-08-15-95).

Northwestern Nevada Orthopaedic Surgery Alliance. To Jacqueline C. Cox; July 11 & 27, 1995. (Physician network of orthopaedic services providers formed to facilitate individual contracts among network members and payers) (https://www.ftc.gov/policy/advisory-opinions/northwestern-nevada-orthopaedic-surgery-alliance).

Oakland Physician Network, L.L.C. To John A. Cook, Esq.; March 28, 1995. (Physician network joint venture composed of primary care physicians formed to market primary and specialty physician services to health benefit plans)

 $(\underline{https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-cook-03-28-95}).$

Rocky Mountain Cardiovascular Affiliates. To Neil E. Ayervais, Esq.; September 23, 1994. (Proposal by a limited liability company composed of physician cardiovascular services practices to negotiate and contract with third party payers)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-ayervais-09-23-94).

South East Managed Care Organization/Jackson Medical Cooperative. To George Q. Evans, Esq.; July 5, 1994. (Physician network joint venture between physician directed managed care organization and group of physician providers)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-evans-07-05-94).

ACMG, *Inc*. To Paul W. McVay, President; July 5, 1994. (Proposed agreement between state medical society and independent health care management and development company to establish society-sponsored state-wide PPO)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-mcvay-07-05-94).

California Managed Imaging Medical Group, Inc. To J. Bert Morgan, Esq.; November 17, 1993. (Proposal by a radiologist-owned PPO network to provide professional radiology services to payers on a regional or statewide basis. The letter discusses fee-setting, market power, and

limitation of provider panel)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-morgan-11-17-93).

Maryland Medical Eye Associates. To Charles E. Rosolio; May 15, 1987. (Formation, marketing, and operation of a partially integrated professional organization, owned by nine ophthalmologists who are in five separate medical practices, to offer services to HMOs and other groups on a capitation and fee schedule basis)

(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/maryland-medical-eye-associates/16.pdf).

Pacific International Health, Inc. To Richard C. Greenberg, Esq.; August 28, 1986. (Formation and operation of a provider-controlled PPO; price agreements to be between individual participating physicians and each payer)

(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/pacific-international-health-inc./18.pdf).

Kitsap Physicians Service. To William G. Kopit, Esq.; May 22, 1984, and March 26, 1984. (Proposal by physician-owned IPA/HMO with most of the local physicians as participants to close off access to plan to additional physicians) (https://www.ftc.gov/policy/advisory-opinions/kitsap-physicians-service).

HMO/IPA. To Gilbert M. Frimet, Esq.; March 22, 1984. (Use by IPA of fee schedule to allocate capitation payment among participating physicians. The proposal would require exclusive dealing by IPA members with the IPA)

(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/hmo/ipa/32.pdf).

2. Hospital/Physician Network Joint Ventures

Norman Physician Hospital Organization. To Michael E. Joseph, Esq.; February 13, 2013. (Multiprovider network joint venture that seeks to create a "clinically integrated" network and engage in joint contracting with third party payers)

Tristate Health Partners, Inc. To Christi J. Braun; April 13, 2009. (Proposal by a physician-hospital organization to clinically integrate its members' provision of health care services, and to contract jointly with health plans and other payers on a fee-for-service basis on behalf of its members to provide services to plan beneficiaries)

 $(\underline{https://www.ftc.gov/sites/default/files/documents/advisory-opinions/tristate-health-partners-inc./} \underline{090413tristateaoletter.pdf}).$

Suburban Health Organization, Inc. To Clifton E. Johnson, Esq. and William H. Thompson, Esq.; March 28, 2006. (Proposed plan by PHO to be the exclusive bargaining and contracting agent with health plans for the primary care physicians employed at the PHO's eight member hospitals)

(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/suburban-health-organization/suburbanhealthorganizationstaffadvisoryopinion03282006.pdf).

IPA Sponsored PPO. To Martin J. Thompson; June 20, 1991. (IPA network's sponsorship of a PPO to negotiate prices with hospitals whose services will be marketed as part of the PPO) (https://www.ftc.gov/sites/default/files/documents/advisory-opinions/ipa-sponsored-ppo/4.pdf).

Pan American Management Associates. To Robert P. Macina, Esq.; June 27, 1989. (Creation of a limited partnership between hospital and physicians to establish a PPO. The physicians would be excluded from price negotiations with payers)

 $(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/pan-american-management \\ \underline{-associates/12.pdf}).$

California PPO. To Michael A. Duncheon, Esq.; March 17, 1986. (Proposal by PPO composed of multiple hospitals and physician organizations to negotiate contracts with third-party payers) (https://www.ftc.gov/sites/default/files/documents/advisory-opinions/california-ppo/20.pdf).

3. Hospital Network Joint Ventures

Mayo Medical Laboratories. To George A. Cumming, Jr., Esq.; July 17, 1996. (State or regional networks of hospital laboratories providing outpatient laboratory services organized to compete for payer contracts)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-cumming-07-17-96).

4. Other Provider Network Joint Ventures

Northeast Pharmacy Service Corporation. To Paul E. Levenson; July 27, 2000. (Network of independent pharmacies in Massachusetts and Connecticut offering package of medication-related patient care services to physician groups) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-levenson-07-27-00).

Orange Pharmacy Equitable Network. To John A. Cronin, Pharm D., J.D.; May 19, 1999. (Network of retail pharmacies and pharmacists offering drug product distribution and disease management services)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-cronin-05-19-99).

Alliance of Independent Medical Services, LLC. To Timothy C. Cashmore; December 22, 1997. (Network of ambulance and ambulette services providers formed to contract for transportation services with third party payers)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-cashmore-12-22-97).

New Jersey Pharmacists Association. To Allen Nichol, Pharm. D.; August 12, 1997. (Pharmacist network offering health education and monitoring services to diabetes and asthma patients) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-nichol-08-12-97).

First Look, L.L.C. To James L. Wiant; June 19, 1997. (Network of optical firms organized to respond to requests for proposals for employer contracts for optical and vision services) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-wiant-06-19-97).

Ohio Ambulance Network. To Shawn M. Lyden, Esq.; January 30, 1997. (Network of ambulance and ambulette services providers formed to contract for transportation services with third party payers)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-lyden-01-30-97).

Mobile Health Resources. To John A. Cook, Esq.; January 23, 1997. (Network of ambulance companies formed to contract for transportation services with third party payers) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-cook-01-30-97).

Southwest Florida Oral Surgery Associates. To Guy E. Whitesman; December 2, 1996. (Cooperative of oral and maxillofacial surgery practices formed to jointly market services to third party payers)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-whitesman-12-2-96).

Southern Arizona Therapy Network, Inc. To Martin Janello; December 7, 1995. (Provider network of physical, occupational, and speech therapists organized to facilitate contracts among network members and payers)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-janello-12-07-95).

Palmetto Dental Alliance. To Scott Y. Barnes, Esq.; September 23, 1994. (Proposal by exclusive provider organization to provide dental services to beneficiaries of third party health benefits plans) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-barnes-09-23-94).

5. Other Joint Bidding

California All Health. To William G. Kopit, Esq. and Clifford E. Barnes, Esq.; June 14, 1995. (Joint venture of six health maintenance organizations formed to bid for certain California Medicaid contracts)

(https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-kopit-06-14-95).

Peer Review Organizations of Ohio Foundation. To Larry D. Spencer, Executive Director; April 25, 1984. (Proposal by an association of nine Professional Standards Review Organizations to bid for contract with HHS to serve as a Peer Review Organization for Ohio under the Medicare program)

(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/peer-review-organizations-ohio-foundation/30.pdf).

B. Joint Purchasing Arrangements

1. Joint Purchasing By Health Care Providers

Elmore Community Hospital, Inc. To Derrell O. Fancher; June 20, 1995. (Joint venture between two acute care hospitals for the purchase of certain personnel and other services) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-fancher-06-20-95).

Louisiana Health Care Association. To Steven E. Adams, J.D., Director of Governmental Relations; April 23, 1982. (Group purchasing agreement for nursing home association's members)

(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/louisiana-health-care-association/41.pdf).

2. Joint Purchasing by Payers

Association for Quality Health Care, Inc. To Cecil M. Cheves, Esq.; August 28, 1986. (Proposal by an association of employers with self-funded health plans to negotiate with providers)

(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/association-quality-health-care-inc/17.pdf).

The Equitable Life Assurance Society. To Jonathan E. Gaines, Esq., V.P. and Counsel; March 26, 1986. (Proposal by an insurer to enter into contracts with hospitals for DRG-based payment. The prices would apply to insurer's own business and would be available to self-funded plans that contract with the insurer for that service)

 $(\underline{https://www.ftc.gov/sites/default/files/documents/advisory-opinions/equitable-life-assurance-society/19.pdf}).$

Private Healthcare Systems. To Michael L. Denger, Esq.; September 24, 1985. (Proposal by an insurer to develop a proprietary national network of managed health care systems and to function as a joint purchasing agent for commercial health insurers)

(https://www.ftc.gov/system/files/documents/advisory_opinions/private-healthcare-systems/private-healthsystems.pdf).

C. Other Joint Ventures

1. Hospital Joint Ventures

Columbine Family Health Center. To Richard J. Sahli; November 8, 1995. (Proposal to add a patient sorting provision to an agreement between an acute care hospital and a rural health care clinic) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-sahli-11-08-95).

Erlanger Medical Center/ Women's East Inc. To Carlos C. Smith, Esq. and Edward N. Boehm, Esq.; May 31, 1995. (Joint venture between two acute care hospitals for establishment of a new

hospital specializing in obstetrical hospital services) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-smith-05-31-95).

2. Insurer/Third-Party Payer PPOs

Association for Quality Health Care, Inc. To Cecil M. Cheves, Esq.; August 28, 1986. (Association of employers with self-funded health plans to negotiate with providers) (https://www.ftc.gov/sites/default/files/documents/advisory-opinions/association-quality-health-care-inc/17.pdf).

The Equitable Life Assurance Society. To Jonathan E. Gaines, Esq., V.P. and Counsel; March 26, 1986. (Proposal by an insurer to enter into contracts with hospitals for DRG-based payment. The prices would apply to insurer's own business and would be available to self-funded plans that contract with the insurer for that service)

(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/equitable-life-assurance-society/19.pdf).

Private Healthcare Systems. To Michael L. Denger, Esq.; September 24, 1985. (Proposal by an insurer to develop a proprietary national network of managed health care systems and to function as a joint purchasing agent for commercial health insurers) (https://www.ftc.gov/system/files/documents/advisory_opinions/private-healthcare-systems/private-healthsystems.pdf).

*Health Care Management Associates. 101 F.T.C. 1014 (1983). To Irwin S. Smith, M.D., President; June 7, 1983. (PPO organized by an independent intermediary between physicians and payers)

(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/health-care-management-as sociates/38.pdf).

D. Provider Participation in Exchanges of Price and Cost Information

Rx-360 International Pharmaceutical Supply Chain Consortium. To Joanne Lewers; September 15, 2010 (Proposal regarding the Rx-360 International Pharmaceutical Supply Chain Consortium ("Rx-360") to implement two supplier audit programs, which would permit pharmaceutical manufacturers to: (1) share information about the quality and safety of ingredients purchased from common suppliers; and (2) share the costs of sponsoring quality and safety audits of common suppliers)

(https://www.ftc.gov/sites/default/files/documents/advisory_opinions/rx-360-international-pharm_aceutical-supply-chain-consortium/100916bloomletter.pdf).

Medical Group Management Association. To Gerald Niederman; November 3, 2003. (Proposal by association of medical practice administrators relating to survey of physician practices regarding insurer payments and other aspects of insurer business practices) (https://www.ftc.gov/sites/default/files/documents/advisory-opinions/re-transfer-pharmaceuticals-cost-non-profit-hospital-patients-non-profit-free-clinic/mgma031104.pdf).

PriMed Physicians. To Gregory G. Binford; February 6, 2003. (Proposal by physicians in Dayton, Ohio, to collect and publish information about third party payers' policies and procedures, including fees that specific health plans pay to Dayton doctors compared to fees they pay for the same procedures to physicians in other areas, in connection with the formation of an advocacy group to educate the public about issues affecting the Dayton health care market) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-binford-02-06-03).

Business Health Companies, Inc. To Ralph T. Smith, Jr.; October 18, 1996. (Survey of hospital prices by third party consultant) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-smith-10-18-96).

Dental Consultant Salary Survey. To Samuel D. Dednam, D.M.D.; May 30, 1991. (Survey of salary ranges for certified dental consultants)

 $(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/dental-consultant-salary-survey/5.pdf\,).\\$

American Dental Association. To Peter M. Sfikas, Esq.; February 15, 1990. (Study of the establishment of UCR rates by dental insurers and the impact of those rates on consumers' out-of-pocket costs)

 $(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/american-dental-associatio \\ \underline{n/10.pdf}\).$

North Texas Chapter of the American College of Surgeons. To B. Ward Lane, M.D., President; December 12, 1985. (Survey of members' fees)

 $(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/north-texas-chapter-americ \underline{an-college-surgeons/22.pdf}).$

American Dental Association. To Peter M. Sfikas, Esq.; August 26, 1985. (Survey of the range of dentists' fees in local markets)

 $(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/american-dental-associatio \\ \underline{n/25.pdf} \).$

Utah Society of Oral and Maxillofacial Surgeons. To Dennis L. Dedecker, D.D.S., Secretary; February 8, 1985. (Survey of range of fees and average fees charged by members) (https://www.ftc.gov/sites/default/files/documents/advisory-opinions/utah-society-oral-and-maxillofacial-surgeons/27.pdf).

E. Providers' Collective Provision of Fee Related Information

1. Relative Value Schedules/Guides

American Medical Association. To Kirk B. Johnson; March 26, 1996. (Dissemination of public information relating to proposed revisions to Medicare's resource-based relative value scale) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-johnson-03-26-96).

Intracorp. To Sharon B. Donzis, Esq.; March 25, 1988. (Proposal by a cost-containment service to use a physician-developed RVS to determine UCR price screens) (https://www.ftc.gov/sites/default/files/documents/advisory-opinions/intracorp/13.pdf).

*American Society of Internal Medicine. 105 F.T.C. 505 (1985). To William G. Kopit, Esq.; April 19, 1985. (Development and dissemination of RVS by an association of physicians) (https://www.ftc.gov/sites/default/files/documents/advisory-opinions/american-society-internal-medicine/26.pdf).

2. Fee Review

*American Medical Association. (1994). To Kirk B. Johnson, General Counsel; February 14, 1994. (Proposal concerning professional society peer review of physicians' fees, required physician participation in advisory fee review, and medical society discipline for fee-related conduct) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-johnson-02-14-94).

National Capital Society of Plastic and Reconstructive Surgeons. To Robert J. Wilensky, M.D., President-Elect; April 23, 1991. (Formation of a physician panel which would render advisory opinions regarding fee disputes)

(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/national-capital-society-plastic-and-reconstructive-surgeons/8.pdf).

Academy of Ambulatory Foot Surgery. To Andrew K. Dolan, Esq.; July 31, 1987. (Professional association assistance to third-party payers in determining when foot surgery may be restricted to less expensive outpatient settings)

(https://www.ftc.gov/sites/default/files/documents/advisory_opinions/academy-ambulatory-foot-surgery/academy-ambulatory-foot-surgery-15.pdf).

Passaic County Medical Society. To William T. McGuire, Executive Director; January 3, 1986. (Professional society's peer review of physicians' fees that is mandatory and binding on the physician)

(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/passaic-county-medical-society/21.pdf).

Tarrant County Medical Society. To Lynn C. Perkins, M.D., President; July 11, 1984. (Medical society advisory fee review program for the voluntary resolution of disputes) (https://www.ftc.gov/sites/default/files/documents/advisory-opinions/tarrant-county-medical-society/28.pdf).

American Podiatry Association. To Werner Strupp, Esq.; March 13, 1984. (Use of HCFA's Medicare fee profile by society as reference aid in reviewing reasonableness of disputed fees) (https://www.ftc.gov/sites/default/files/documents/advisory-opinions/american-podiatry-association/33.pdf).

American Podiatry Association. To Norman Klombers, DPM, Executive Director, and John Grad, Esq., General Counsel, Podiatry Society of Virginia; August 18, 1983. (Peer review of

fees, utilization, and quality of care by professional society) (https://www.ftc.gov/sites/default/files/documents/advisory-opinions/american-podiatry-association/36.pdf).

*Iowa Dental Association. 99 F.T.C. 648 (1982). To Peter M. Sfikas, Esq.; April 8, 1982. (Voluntary and advisory peer review of dentists' fees by a professional society) (https://www.ftc.gov/sites/default/files/documents/advisory-opinions/iowa-dental-association/42-1.pdf).

3. Discussions with Payers

Medical Society of the County of Erie. To James F. Phillips, M.D., President; March 12, 1984. (Medical society discussions with third-party payers regarding fee allowances) (https://www.ftc.gov/sites/default/files/documents/advisory-opinions/medical-society-county-erie/34.pdf)

F. Providers' Collective Provision of Non-fee Related Information

1. Standard Setting Programs

Foundation for the Accreditation of Hematopoietic Cell Therapy. To Paul L Yde; April 17, 1997. (Standard-setting and accreditation program for organizations involved in medical or laboratory practice related to hematopoietic progenitor cell therapy) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-yde-04-13-97).

Washington Health Care Association. To Stephen J. Maag, Director of Legal and Regulatory Affairs; February 16, 1988. (Nursing home association's program to evaluate the quality of care provided by nursing homes)

(https://www.ftc.gov/sites/default/files/documents/advisory-opinions/washington-health-care-association/14.pdf).

2. Quality and Utilization Review

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Suffolk County Dental Society. To Steven L. Roberts, DDS, President, and Albert A. Sunshine, DDS, Chairman, Ethics Committee; July 6, 1994. (Legality of "exclusive dental plans"; proposed dental society disciplinary action against dentists sponsoring such plans) (https://www.ftc.gov/policy/advisory-opinions/advisory-opinion-roberts-sunshine-07-06-94).

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I. Robinson-Patman Act

1. Pharmaceutical Pricing Practices

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J. Failure to File Agreement Required by Medicare Prescription Drug, Improvement, and Modernization Act of 2003

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