

# United States Senate

WASHINGTON, DC 20510

October 21, 2024

Albert Bourla  
Chairman and CEO  
Pfizer, Inc.  
235 East 42<sup>nd</sup> Street  
New York, NY 10017

Dear Mr. Bourla:

Pfizer recently launched a new telehealth platform, PfizerForAll, that links patients interested in receiving specific medications with a health care provider who can virtually prescribe that medication. This manufacturer-sponsored arrangement appears intended to steer patients toward particular medications and creates the potential for inappropriate prescribing that can increase spending for federal health care programs. We write to learn more about the financial relationship between Pfizer and its chosen telehealth prescribers, given the potential implications for the federal Anti-Kickback Statute (AKS).

Direct-to-consumer (DTC) advertising of prescription drugs has been shown to increase both patient demand for specific medications and the likelihood of a patient receiving a prescription for that drug. Pharmaceutical manufacturers like Pfizer spend an estimated \$6 billion annually in DTC advertising to boost patient awareness and demand for advertised medications. The U.S. is one of only two developed countries in the world that permits such health claims. The American Medical Association has stated, “direct-to-consumer advertising inflates demand for new and expensive drugs, even when these drugs may not be appropriate.”

A recent study found that more than two-thirds of drugs advertised on television were considered “low added value.” This creates concern for taxpayers, as a review by the Government Accountability Office (GAO) found that the small number of prescription drugs advertised on television accounted for 58 percent of Medicare’s overall spending on prescription drugs between 2016-2018. For example, these DTC advertisements helped to balloon Medicare spending on Pfizer’s Xeljanz to more than \$886 million in 2022.

Telehealth can help to address barriers to care, including by expanding access for patients facing transportation barriers, helping to overcome stigma, and identifying providers when there may be workforce shortages. But those important aspects of care can be undermined without comprehensive services that ensure a thorough patient evaluation and follow-up, especially if there is any appearance of a conflict of interest for the treatment provider.

The launch of Pfizer’s telehealth platform, similar to an existing one for the virtual prescribing of Nurtec, raises questions about the nature of Pfizer’s relationship with its contracted telehealth prescribers and the potential for inducement of prescriptions payable by federal health programs. The Department of Health and Human Services’ Office of the Inspector General (HHS OIG) warns, “as a physician, you are an attractive target for kickback schemes because you can be a source of referrals for ... health care ... suppliers.” OIG adds, “many ... companies want your patients’ business and would pay you to send that business their way.”

After describing Pfizer's medications and the benefit they can have for patients, Pfizer's telehealth platform provides a link for patients to "talk to a doctor now" and fill prescriptions via an online pharmacy. This creates the impression that any patient interested in a particular medication can indeed receive it with just a few clicks, and the appearance of Pfizer's approval that these chosen telehealth providers can ensure a patient receives the given medication.

In 2022, the HHS OIG issued a Special Fraud Alert to notify health care practitioners of the specific risks of schemes involving telehealth platforms that "intentionally paid physicians ... kickbacks to generate ... prescriptions for medically unnecessary ... medications, resulting in submission of fraudulent claims to Medicare [and] Medicaid." According to the HHS OIG, fraudulent aspects of these arrangements for prescribers may include: limited interaction with the purported patient, limited opportunity to review the patient's medical records, and/or a directive to prescribe a preselected item, regardless of clinical appropriateness.

The nature of the PfizerForAll platform appears to reflect many aspects of the HHS OIG warning for potential fraud. Unsurprisingly, a patient coming straight from Pfizer's website to a telehealth appointment with a prescriber chosen by Pfizer is overwhelmingly more likely to ask for Pfizer's medication. Further, that prescriber may have an incentive to prescribe such medication, whether or not it is medically necessary or clinically appropriate. Payments by Pfizer hold the potential to induce specific actions of the prescribing pen.

These concerns are underscored by statements from Pfizer's chosen prescribing contractor—Populus—for its Nurtec migraine medication. Populus' co-founder claimed in reporting by *STAT News* that more than 90 percent of eligible patients receive a prescription for the brand of drug whose marketing they clicked on, further adding, "We're driving prescriptions." Similarly, UpScriptHealth has advertised job openings to prescribers with the statement, "on average, providers can complete 6-10 visits an hour" and by defining "a completed visit is either an approval or denial of prescription request," which raises concerns about the adequacy of the provider's patient engagement, quality of medical review, and expected outcomes.

To better understand the nature of Pfizer's relationship with contracted telehealth prescribers, we request written responses to the following questions by November 25, 2024:

1. Do Pfizer's DTC advertisements for certain medications, including commercials on television or promotions on social media, direct consumers to PfizerForAll or the Nurtec/Populus page?
  - a. How much has Pfizer spent on such advertisements in the most recent six-month period for which data is available?
  - b. How much has Pfizer spent on disease awareness, continuing medical education activities, medical publications, patient advocacy/engagement, or other health promotion directed at prescribers or consumers for diseases related to medications listed on PfizerForAll or the Nurtec/Populus page in the most recent six-month period for which data is available?

2. Are any forms of insurance excluded from eligibility or participation with PfizerForAll or the Nurtec/Populus page? Please list which types of insurance are not eligible to participate.
3. Does Pfizer direct, encourage, or educate UpScriptHealth- or Populus-affiliated health care providers to prescribe Pfizer's medications?
4. Did Pfizer share, consult, or communicate with UpScriptHealth or Populus in creating the "discussion guide" for patients to speak with their Pfizer-linked telehealth provider?
5. What is the average duration of the virtual health care visit between an UpScriptHealth- or Populus-affiliated health care provider and a patient who is connected to them via Pfizer's website?
  - a. After initially filling out information, are such visits always conducted via a video platform, or are there other options available?
6. Do UpScriptHealth- or Populus-affiliated health care providers always review the medical history and records of a patient who is connected to them via Pfizer's website? If so, please describe in detail how those records are accessed.
7. How does Pfizer set the compensation paid to its telehealth partners? Please provide a copy of the terms of agreement between Pfizer and UpScriptHealth, and between Pfizer and Populus.
  - a. Is Pfizer paying fair market value for the services of UpScriptHealth or Populus?
  - b. Does Pfizer make a bonus payment to UpScriptHealth or Populus based on the number of prescriptions written, including refills?
  - c. Does Pfizer contract with UpScriptHealth or Populus to furnish a certain number of prescriptions for certain medications?
  - d. Would the UpScriptHealth- or Populus-affiliated health care provider have actual or constructive knowledge that a patient was referred to them via Pfizer's telehealth platform?
  - e. What metrics does Pfizer use to evaluate the performance of its contracts with UpScriptHealth and Populus and affiliated health care providers?
8. What data is being provided by UpScriptHealth or Populus to Pfizer as part of these agreements? Please list all fields or categories of data being provided to Pfizer, including patient information, consumer behavior information, and marketing outcomes information.
9. What role, if any, does Pfizer play in collecting, defraying, or otherwise interacting with the co-pay that is associated with the provider consultation on Pfizer's telehealth platforms?

10. Based upon prescribing or claims data that Pfizer has access to, how many prescriptions for a Pfizer medication have UpScriptHealth- or Populus-affiliated health care providers written in the most recent 30-day period for which Pfizer has available information?
11. What percentage of consumers who meet virtually with an UpScriptHealth- or Populus-affiliated health care provider receive a prescription for a Pfizer medication?
  - a. What percentage of such consumers receive a prescription for a medication manufactured by another brand-name company?
  - b. What percentage of such consumers receive a prescription for a generic medication?
  - c. What percentage of such consumers receive no prescription?
12. How much revenue has Pfizer generated from these telehealth platforms in the most recent 30-day period for which Pfizer has available information?
13. Outside of the contract terms with UpScriptHealth or Populus, please provide a list of all payments by Pfizer to each health care provider that is linked to via PfizerForAll over the past 12-month period, including for “speaking,” “consulting,” or other goods, fees, or services.

Thank you for your attention to this matter. We look forward to your response.

Sincerely,



Richard J. Durbin  
United States Senator



Bernard Sanders  
United States Senator



Peter Welch  
United States Senator



Elizabeth Warren  
United States Senator