

Addressing conflicts of interest

OMeGA is committed to its mission of administering orthopaedic graduate medical education (GME) grants without conflicts of interest. Our processes have been created to reduce bias in four categories:

Institutional bias – Bias for an institution with which one is or has been associated.

Industry conflict – Bias for a particular company that has provided incentives of any kind.

Region or reputation bias – Bias for a specific country, part of the country, state or city.

Diversity bias – Bias against a fellow’s gender, race or country of origin.

Established in 2008, OMeGA created processes that worked to eliminate or reduce bias in all four categories. Please e-mail info@omegamedicalgrants.org with any questions or suggestions of how we can further improve.

Institutional bias	Industry conflict	Region or reputation bias	Diversity bias
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OMeGA Board of Directors selection process

Potential members (speaking for themselves and their immediate family members) verify their eligibility on an annual basis.	×	×		
Verify that they have no “Financial Interest” in any orthopaedic medical device, pharmaceutical and biotechnology companies. “Financial Interest” shall mean ownership or personal compensation arrangements such as employment, consulting, speaking, or development relationships. Ownership of less than 5% in publicly traded securities and mutual funds in an orthopaedic medical device, pharmaceutical and biotechnology companies will not be considered a Financial Interest.		×		
Verify that they have no leadership roles in orthopaedic fellowship or residency programs and educational institutions that may apply for a grant. “Leadership Role” is defined to include a department chair or other position that involves financial decision making within the orthopaedic department of an institution. Board members must recuse him/herself from consideration of grant applications from institutions with which the individual has been associated in the previous two years.	×			
Disclose any other financial or other personal considerations that may compromise, or may have the appearance of compromising, the individual’s ability to serve as an objective evaluator of GME programs.	×	×	×	
Annual check against data reported on the Centers for Medicare & Medicaid Services (CMS) website.		×		
Names are checked annually against AAOS and AOA disclosures.		×		

OMeGA Review Committee (RC) selection process

Subspecialty societies are invited to nominate non-conflicted RC candidates with no mandate or expressed preference for any regional, institutional or other demographic characteristic.	×	×	×	×
Potential members (speaking for themselves and their immediate family members) verify their eligibility on an annual basis.		×		
Verify that they have no “Financial Interest” in any orthopaedic medical device, pharmaceutical and biotechnology companies. “Financial Interest” shall mean ownership or personal compensation arrangements such as employment, consulting, speaking, or development relationships. Ownership of less than 5% in publicly traded securities and mutual funds in an orthopaedic medical device, pharmaceutical and biotechnology companies will not be considered a Financial Interest.		×		
Disclose all leadership roles in orthopaedic fellowship or residency programs and educational institutions that may apply for a grant, recusing him/herself from consideration of grant applications made by institutions with which the individual has been associated in the last two years.	×			
Disclose any other financial or other personal considerations that may compromise, or may have the appearance of compromising, the individual’s ability to serve as an objective evaluator of GME programs.	×	×	×	





- Institutional bias** – Bias for an institution with which one is or has been associated.
- Industry conflict** – Bias for a particular company that has provided incentives of any kind.
- Region or reputation bias** – Bias for a specific country, part of the country, state or city.
- Diversity bias** – Bias against a fellow’s gender, race or country of origin.

OMeGA Review Committee selection process *continues*

	Institutional bias	Industry conflict	Region or reputation bias	Diversity bias
RC members are not required to be members of any professional medical organization.	✗			
Annual check against data reported on the Centers for Medicare & Medicaid Services (CMS) website.		✗		
Names are checked annually against the AAOS conflicts list.		✗		

In the application review process

Grant recipients agree to AdvaMed and PhRMA guidelines if located in United States, or MEDEC Code of Conduct if located in Canada.		✗		
Grant recipients covenant, warrant, and agree that neither the recipient, nor any of its affiliates, officers, directors, subcontractors, or agents who may benefit from a grant have ever been debarred, excluded, suspended, or otherwise deemed ineligible to participate in federal or state health care programs or from federal or state procurement programs, or convicted of a criminal offense with respect to health care reimbursement, nor threatened to be debarred, excluded, suspended or indicted for a crime or otherwise engaged in conduct for which a person can be debarred, excluded or suspended.	✗	✗	✗	
Grant recipients and their employees, agents or affiliates agree to comply with Anti-Kickback laws (Statute, 42 U.S.C. § 1320a-7b(b)).	✗	✗		
Unbiased application evaluation based on objective orthopaedic criteria, thorough knowledge of academic environment and merit.	✗	✗	✗	
Grants are not awarded on the use, order, or purchase of (or the recommendation to use, order or purchase) any products or services of any specific medical device, pharmaceutical and biotechnology companies.		✗		
Two or three reviewers review each application separately.	✗	✗	✗	
Reviewer scores and rankings are tracked on a master sheet by application number, not by name.	✗		✗	
Evaluation form scores program’s recent history of promoting women and under-represented minorities.				✗
Subspecialty review group discusses each application, talk about the similarities and differences in their rankings and come to a consensus ranking.	✗	✗	✗	
Blinded presentation by subspecialty review group with grading explanations, conclude with the group’s recommendation for ranking and grant amounts.	✗	✗	✗	✗
Questions from the review committee oblige the subspecialty review group to defend their position. (This process also stimulates further food for thought to the other groups.) This process is completed for all nine subspecialty fellowship categories.	✗	✗	✗	✗
The board reviews recommendations for all nine subspecialty categories in aggregate. They ensure diversity of funding using their collective expertise.	✗	✗	✗	✗

Once the grant is awarded

Grant recipients agree again to AdvaMed and PhRMA guidelines (MEDEC guidelines if in Canada).	✗	✗	✗	✗
Fellow names are not collected in the reporting process. Fellow demographics are collected in the Midyear report to track trends.	✗	✗	✗	✗
Midyear and Final reports from funded programs provide updates to confirm continued non-bias.		✗		