A Case for Pharmaceutical Web Site Accreditation
by John Mack

As the founder and president of the Internet Healthcare Coalition, I have been involved with ethics and quality initiatives for health Web sites for quite some time. The Coalition, for example, lead the development of the e-Health Code of Ethics, which is the only such code developed independently by a broad array of stakeholders and written by medical ethicists. Other organizations, including Health on the Net Foundation (HON), Hi-Ethics, and the AMA have also developed codes of conduct, guidelines, and principles intended to improve the quality of information and services available on health Web sites. Except for HON, however, none of these organizations has developed a plan to implement guidelines outside a narrow scope of interest (e.g., AMA’s guidelines are followed by AMA-owned web sites but AMA does not have a program to oversee the implementation of their guidelines for other sites).

Into this void has stepped URAC (aka American Accreditation HealthCare Commission), which is a 501(c)(3) (non-profit) organization founded in 1990 to establish standards for the health care industry. In July 2001, URAC approved a set of standards for health Web site accreditation. These standards, which cover privacy, security, quality of information, fairness of transactions and professional conduct, borrow heavily from the e-Health Code of Ethics and Hi-Ethics Principles. Members from all the organizations mentioned above participated in the development of URAC’s standards, which were also available for public comment before being finalized. On 12 December 2001, URAC announced the first round of 13 health Web site accreditation awards and several other sites announced that they were in the process of applying for accreditation.

I was involved in the development of URAC’s Health Web Site Accreditation Program Standards from the beginning as an unpaid volunteer and representative of the Internet Healthcare Coalition. I currently volunteer as a member of URAC’s Web Site Accreditation Committee, which votes on accreditation applications. Owing to this unique experience, I have had a front row seat on how the process works. I can attest to the professionalism and objectivity of the URAC staff and all the volunteers who have made the program a success.

Should Pharmaceutical Web Sites Seek Accreditation?
There are thousands of health Web sites on the Internet. Accreditation is not an appropriate path for all these sites to take, but for those sites that can afford it and that meet rigorous standards for quality and accountability, accreditation can help distinguish them from their competitors and increase consumer trust. Pharmaceutical sites focusing on consumers, in particular, stand to benefit.

Pharmaceutical sites already follow rigorous standards, some of which are mandated by federal regulations. But this fact is clearly not getting out to consumers, only 14% of whom by some surveys have a high degree of trust in pharmaceutical Web sites. It seems to me, therefore, that pharmaceutical companies should consider URAC accreditation as one tool to improve trust in their consumer-focused Web sites.

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There are precedents for third-party “accreditation” of pharmaceutical sites such as when a pharmaceutical company seeks a “seal of approval” from a relevant medical society, which reviews specific content on the site. Such seals lend more credibility to the content, especially for physicians. URAC’s accreditation program, however, is different in that it does not review content per se, but policies and processes and the disclosure of such. One mandatory URAC standard (WS 5), for example, states “Web site discloses to users its editorial policy.” This standard requires disclosure of author qualifications as well as the editorial process, but there is no approval of the content by URAC. Since pharmaceutical Web site editorial policies – from the development and review of content by medical experts to legal/regulatory review to assure compliance with FDA regulations – are rigorous, trust in pharmaceutical sites would be greatly enhanced if these policies were disclosed to visitors as per URAC’s standard WS 5.

**URAC Accreditation is Rigorous**

URAC’s web site accreditation process, however, is rigorous and requires 100% compliance with mandatory standards and a detailed application procedure. There are 53 standards that you need to know about, a possible audit from TRUSTe, pre-application and application forms to fill out, and on-site or teleconference interview of Senior Management to prepare for. No other standards implementation process – not even HON’s – is as thorough and based on actual review of internal policies rather than just public statements. URAC accreditation, moreover, must be renewed on a yearly basis.

**Conclusion**

Accreditation is not going to improve the overall quality of health information on the Net, nor prevent the bad guys from taking advantage of healthcare consumers. Consequently, there is still a need for organizations like the Internet Healthcare Coalition to develop and implement educational tools to help consumers identify quality health information on the Net. Nevertheless, having health web sites that passed a rigorous and independent third-party accreditation process raises the bar for all health sites. And URAC accredited sites have competitive advantages, including professional liability discounts, a sound risk management strategy, market differentiation, and possible avoidance of state and federal regulations.

**Where to Find More Information**

For more information about URAC’s Health Web Site Accreditation program, including the list of standards, FAQs and details of the application process, see http://websiteaccreditation.urac.org.

For more information about the Internet Healthcare Coalition, including the e-Health Ethics Initiative, Coalition-sponsored e-Health Ethics Training Workshops, and Tips for Consumers, see http://www.ihealthcoalition.org.
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