

Regularly Scheduled Series (RSS) Handbook

(Grand Rounds, M&M, Lecture Series, Journal Club, etc.)



**UT Health San Antonio
Office of Continuing Medical Education**

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Introduction

Regularly Scheduled Series (RSS) are defined as recurring daily, weekly or monthly CME activities that are **primarily planned by** UTHSA Long School of Medicine Departments/Divisions and *Centers and **presented to** the accredited organization's own professional staff (same audience) and are designated for credit as one activity. Examples of activities that are planned and presented as a Regularly Scheduled Series are Grand Rounds, Tumor Boards, M&M Conferences, Lecture Series and Journal Club.

*Based on Activity Application for CME submitted, the Office of CME will determine if the activity qualifies as a Regularly Scheduled Series or other type activity.

The Office of Continuing Medical Education serves as the provider of CME credit for the **UT Health San Antonio Long School of Medicine (UTHSA SOM)**. The Office of CME plays a critical role in the planning, implementation and evaluation of all RSS.

UTHSA Long SOM Office of Continuing Medical Education has developed a process that monitors all regularly scheduled series ensuring compliance with the Accreditation Council for Continuing Medical Education (ACCME) Essential Areas and Elements, ACCME Standard for Commercial Support and UTHSCSA Policies. This system ensures that activities are:

1. Planned, implemented and evaluated based on real performance data
 - State the learner's performance gaps (for professional practice gaps that are identified in methods other than direct measurement of your professional staff – e.g., national trend data, state level data – explain how you connect these gaps to your own RSS attendees (learners)
 - State the needs you identify based on these gaps
 - Articulate the need in terms of knowledge, competence or performance
 - Incorporate the identified needs into the RSS (state specific topics that will address needs)
 - Describe how the content of your RSS is matched to your learner's current or potential scope of practice
 - Establish improvement measures
 - Describe changes in performance, competence, or patient outcomes that take place as a result of improvements derived from the RSS educational interventions
2. Each UTHSA Long SOM Department/Division or Center that organizes a RSS is expected to comply with Institutional and LSOM policies located on the Office of CME website and the following step-by-step processes as they relate to how the RSS will be planned, implemented and evaluated. UTHSA LSOM Departments and Center should consider the following when planning RSS activities:
 - A complete RSS Activity Application for CME must be submitted to the UTHSA Long SOM Office of CME no less than two months prior to the beginning of the RSS. Should grant funding be required, the RSS Activity Application for CME should be submitted five months prior to the beginning of the RSS. This allows time for review and follow up with the Department/Division/Center should there be any questions or additional information required by the Office of CME.

- There must be at least one individual from the Department/Division or Center who serves as the RSS Activity Coordinator for each RSS.
- The RSS Activity Coordinator participates in CME RSS training as required by the Office of CME. RSS Activity Coordinator also consistently adheres to the UTHSA Long SOM Office of Continuing Medical Education RSS Handbook guidelines.
- Each RSS series will be required to complete the annual evaluation provided by the Office of Continuing Medical Education.
- Per the AMA PRA/The Physician's Recognition Award (PRA) and credit system 2017 revision states:
 - **Credit certificates, transcripts or other documentation available to physicians**
 - Only physicians (MDs, DOs and those with equivalent medical degrees from another country) may be awarded *AMA PRA Category 1 Credit™* by accredited CME providers.
 - **Credit certificates, transcripts or other documentation available to non-physician participants**
 - Non-physician health professionals and other participants may not be awarded *AMA PRA Category 1 Credit™*. However, accredited CME providers may choose to issue documentation of participation to non-physicians that states that the activity was certified for *AMA PRA Category 1 Credit™*.
- The Office of Continuing Medical Education documents and maintains all attendee records for a period of six years. The attendee record consists of:
 - Name/topic of activity/presentation
 - Date of activity
 - # of credits awarded
- Attendees may download/print a transcript of all CME credits/attendance for RSS for the past six years from date of activity/session via <http://cme.uthscsa.edu>.
- The Office of CME customers have access to their transcripts 24/7. Anyone who attends UTHSA CME-sponsored activities (grand rounds, tumor boards, M&M conferences, journal clubs, lecture series, live conferences, internet courses, etc.) has the ability to view and print their CME transcript.

- Instructions on how to access your transcript:
 - Go to: <http://cme.uthscsa.edu>
 - Scroll down and click on the button “**My CMEs**”
 - Scroll down and Click on **CME Transcript** button (on the menu to the left)
 - Click **Sign In to generate Transcript button**
 - Enter your **email address** (the one used to register).
 - Enter your **password**.
 - If you have an account but have forgotten your password, click on “**Forgot Password**” (a numeric code will be sent to your email)
 - Enter a Begin Date Range
 - Enter an End Date Range
 - Click on **Submit** button

- If you have any questions, please contact Melissa Craig via email at CraigM@uthscsa.edu or at 210.567.6531. I am here to assist you!

Administrative Fees for FY22

- 1-12 sessions / \$1,000.00
- 13-24 sessions / \$1,500.00
- 25-36 sessions / \$2,000.00
- 37-52 sessions / \$2,500.00

Other costs:

- Grants:
 - For all grant requests, a grants management fee of 10% of the face value of the grant will be charged.

- Enduring Material:
 - If you wish to offer recordings of your live activity for cme credit (considered enduring material and a separate activity), the fees are below:
 - 1-12 sessions / \$1,000.00
 - 13-24 sessions / \$1,500.00
 - 25-36 sessions / \$2,000.00
 - 37-52 sessions / \$2,500.00

Step-by-Step process for requesting *AMA PRA Category 1 Credit*[™]

Planning a quality Continuing Medical Education (CME) program is a thoughtful process which often begins a year or more prior to intended activity. The Accreditation Council for Continuing Medical Education (ACCME) requires that the UT Health Science Center San Antonio use planning processes that link identified educational needs with a desired result in its provision of all CME activities. To assist with this process the Director of the Office of Continuing Medical Education is available to meet with UTHSA Long SOM RSS Chairs to discuss how the Office of CME can be involved in the overall planning process for RSS.

We encourage Departments/Divisions/Centers to contact our office at as early as possible when considering a new series. The Office of CME does not provide retroactive *AMA PRA Category 1 Credit*[™].

Following is a step-by-step process to help guide you.

Step 1 – Contact the UTHSA Office of CME

The first step is to contact Melissa Craig, RSS Conference Coordinator with the Office of CME to inform us of your intent to plan an RSS and your desire to have this activity designated for *AMA PRA Category 1 Credit*[™]. At this time, you can inform us of the dates/times of planning meetings, your target audience, estimated # of attendees, the general description of your RSS, and provide an overview of how the educational need for this activity was identified.

- Email: CraigM@uthscsa.edu
- Phone: 210.567.6531

Step 2 – Complete the CME RSS Activity Application

Access and complete the RSS Activity Application for CME via <https://www.uthscsa.edu/academics/medicine/about/ocme/resources> and submit to Melissa Craig in the Office of CME via email to CraigM@uthscsa.edu. Upon receipt of your activity application, UTHSA Office of CME will review for approval. Completed activity application to include the following:

- Marketing material (flyer/brochure)
- Schedule of dates for your activity

Website resource to assist with completion of the RSS Activity Application for CME

- <https://www.accme.org/ceeducatorstoolkit>

After assessment by the Office of CME and determination that the RSS series is in full compliance with ACCME accreditation requirements and policies, the Office of CME will send a Service Agreement to the RSS Chair, RSS Activity Coordinator, and the department finance director/business administrator.

Director, Office of Continuing Medical Education
Letti Bresnahan
Bresnahan@uthscsa.edu
210.567.0299

Step 3 – Submit Sample of Marketing Materials

A sample of each type of marketing material used to market or announce your RSS series must be attached when submitting the RSS Activity Application for CME. Marketing materials include flyers, posters, websites and/or e-mails.

All marketing materials must be approved by Melissa Craig in advance of their circulation.

Step 4 – Submit Planning Committee and Speaker Documentation

- **Pre-activity.** Adhere to CME activity requirements as provided in the CME RSS Handbook
 - **PLEASE NOTE: Beginning FY21-22 Academic Year, financial disclosures will now be valid for a period of 2 years from date of completion**
 - Ensure planners/speakers complete their biographical data and financial disclosure information via the following link in advance of the activity:
 - <https://www.surveymonkey.com/r/CMEFinDis052021>
 - CVs, Profiles, and Biographical Sketches will not be accepted.
 - **Financial disclosures:**
 - Planners must complete financial disclosure via above referenced link prior to activity being approved for *AMA PRA Category 1 Credit*[™]
 - Ensure speakers complete financial disclosure at least 5 working days prior to lecture to allow time to resolve any potential conflicts of interest and receive approval for *AMA PRA Category 1 Credit*[™]
 - **Financial disclosure for each speaker must be provided to attendees at the beginning of each session (prior to the lecture), per the ACCME**
 - Speaker disclosure may be done using one or more of the following options:
 - PowerPoint slide (**see Forms and Resources on the CME web site for templates**)
 - Included in course handouts, if applicable (**see Forms and Resources on the CME web site for templates**)
 - Included in flyer, and then posted on the door of the session. (**see Forms and Resources on the CME web site for templates**)
 - Included in meeting invite for virtual RSS activities

Step 5 – Submit Requests for Medical Ethics and/or Professional Responsibility/Pain Management Credit

The Office of CME can facilitate the review of any presentation within the series for compliance with criteria established by the Texas Medical Board regarding Ethics and/or Professional Responsibility/Pain Management. To facilitate this process, please email the following information to Melissa Craig at CraigM@uthscsa.edu no less than 2 weeks prior to the presentation.

1. Date of presentation
2. Title of presentation
3. Speaker title
4. Learning objectives
 - a. For presentations related to medical ethics the learning objectives must mention ethics
 - b. For presentations related to professional responsibility (which include risk management, domestic abuse or child abuse), the learning objectives must mention risk management
 - c. Requirements for Pain Management must involve the study of the following topics:
 - best practices, alternative treatment options, and multi-modal approaches to pain management that may include physical therapy, psychotherapy, and other treatments;
 - safe and effective pain management related to the prescription of opioids and other controlled substances, including education regarding:
 - standards of care;
 - identification of drug-seeking behavior in patients; and
 - effectively communicating with patients regarding the prescription of an opioid or other controlled substances; and
 - prescribing and monitoring of controlled substances.
5. Presentation slides (in PowerPoint or pdf)

If your presentation is approved for Medical Ethics and/or Professional Responsibility/Pain Management, Melissa Craig will provide the Texas Medical Board Ethics/Pain Management statement for your marketing material.

Step 6 – Submit attendance documentation (electronic format)

RSS activities are encouraged to use the “CME Credit via TEXT” System for registration of attendance. Attendance documentation will only be accepted in an electronic format (by using the Attendance Roster template on the CME website under Forms and Resources/Regularly Scheduled Series). **Hard copy sign-in sheets are no longer accepted.** Attendance documentation for each session is due to Melissa Craig no later than 5 business days after the session has ended. File name of attendance roster template must be in the following format: Medicine Grand Rounds 1/1/21, 1/7/2021, etc.

Step 7 – Submit Post Activity Documentation:

Per the ACCME, attendees of your program must be provided with the opportunity to **evaluate the educational activity’s effectiveness in meeting the identified educational need in terms of their satisfaction, knowledge improvement, and skill improvement.** To meet this ACCME requirement, Melissa Craig will send an annual series evaluation for you to provide to your audience to complete by a specified date.

Step 8 – Responsibilities

The **RSS Chair/Content Expert** is responsible for the following:

- Ensuring** your Regularly Scheduled Series is in compliance with the guidelines/policies:
 - UTHSA HOP 10.1.11 - Guidelines for Interactions Between Clinicians and Industry
 - UTHSA HOP 10.1.12 - Policy on Conflict of Interest
 - UTHSA Office of Continuing Medical Education Policy on Review and Approval of CME Ethics/Professional Responsibility Credit/Pain Management Credit
 - UTHSA HOP 2.4.1 - Continuing Education Policy
 - Accreditation Council for Continuing Medical Education (ACCME) Standards for Integrity and Independence in Accredited Continuing Education – 12_1_2020
 - ACCME Policies and Accreditation Criteria - <https://www.accme.org/educatorstoolkit>
- Completing** the **RSS Activity Application for CME**
- Providing** your RSS Activity Coordinator with proposed and confirmed speaker(s) and their contact information
- Supporting** the RSS Activity Coordinator in obtaining the required documentation from planning committee members/proposed speaker(s)
- Reviewing** speaker presentation(s) to resolve Conflict of Interest (when applicable) and email the respective CME conference coordinator accordingly.
- Verifying** that Financial Disclosure took place before presentation
 - Verification may include financial disclosure on a slide and/or verbally
- Completing** the Conflict of Interest Presentation Review Form when a speaker discloses relationships.
- Completing** the Resolution of Conflict of Interest Form for Planning Committee Members when a planning committee member discloses relationships.

The **RSS Activity Coordinator** is responsible for the following:

[Newly assigned RSS Activity Coordinators should contact Melissa Craig with the Office of CME via email at \[CraigM@uthscsa.edu\]\(mailto:CraigM@uthscsa.edu\) to schedule training.](#)

- Submit** completed RSS Activity Application for CME with supporting documentation to Melissa Craig at CraigM@uthscsa.edu in the Office of CME prior to beginning of annual series.
- Provide** current SurveyMonkey link for the Speaker/Planner Financial Disclosure forms to planners/speakers.

➤ **PLEASE NOTE: Beginning FY21-22 Academic Year, financial disclosures will now be valid for a period of 2 years from date of completion**

- For planners – this should be completed before the first session begins
- For speakers – this should be completed at least 5 days prior to their lecture
 - For speakers that you believe may be providing a presentation anytime during the upcoming academic year, we suggest requesting that they all complete a disclosure prior to the beginning of the academic year. Having the speakers complete their financial disclosures at the beginning of the academic year will save you time as you prepare your flyers/meeting invites/etc each week to distribute.
- For planners and speakers – be sure to instruct them to note the name of your grand rounds/M&M/tumor board/case conference in the Activity Title when they are completing their disclosure.

Review weekly master financial disclosure spreadsheet sent each Monday by Melissa Craig for financial disclosure information for your marketing materials.

Submit marketing materials (flyers/meeting invites/etc) to Melissa Craig at CraigM@uthscsa.edu prior to distribution for review/approval for compliance.

- All marketing materials **MUST** contain
 - disclosure statements for planning committee members and speakers
 - Continuing Medical Education statements (accreditation and credit designation statements)
- SUBJECT LINE MUST INCLUDE YOUR ACTIVITY TITLE AND **DATE**:
 - Medicine Grand Rounds 1/1/2021, 1/7/2021, etc

Submit presentations **ONLY** when:

- **UTHSA or Non-UTHSA faculty** disclose financial relationships
- **Non-UTHSA (visiting) faculty** are presenting at your activity

These presentations should be submitted to Melissa Craig in advance (3 days minimum) of the lecture for review/approval. (Draft version is acceptable.)

- Ensure Conflict of Interest (COI) form is completed by RSS chair or their delegate **AND** that the completed form is returned to Melissa Craig / CraigM@uthscsa.edu

Retain completed Model Authorization Release Form (formerly titled the Talent Release Form) in **your files**. It is only required to be completed for **non-UTHSA** faculty (**ONLY** if session is videotaped)

- Provide** attendance mechanism – either by providing a “CME Credit via TEXT” Activity Code to the attendees of your RSS or providing Melissa Craig a roster of attendees (by using the Attendance Roster template on the CME website under Forms and Resources/Regularly Scheduled Series), with spreadsheet labeled with name of RSS activity and date of session.
- Distribute** the annual RSS Overall Series Evaluation to your activity attendees when requested.

The **Office of CME** is responsible for the following:

- Responding promptly to CME inquiries
 - Communicating with RSS Activity Coordinators on a regular basis regarding updates
- Reviewing the completed **RSS Activity Application for CME** to ensure compliance current ACCME accreditation criteria.
 - Review presentations of visiting faculty or speakers with disclosures for any commercial bias
 - Identify potential conflicts of interest
- Notifying the RSS Chair/RSS Activity Coordinator when there is a Conflict of Interest with a speaker and provide the Conflict of Interest Presentation Review Form for completion prior to the speaker’s lecture.
- Notifying the RSS Chair/RSS Activity Coordinator when there is a Conflict of Interest with a planning committee member and provide the Resolution of Conflict of Interest Form for Planning Committee Members for completion.
- Designating approved regularly scheduled series for *AMA PRA Category 1 Credit™*.
- Tracking CME participation and credit for each RSS activity for up to six years
- Submitting requests for educational grants from commercial interests
- Executing letters of agreement with commercial interest for educational grants
- Communicating updates to RSS Activity Coordinators via emails / newsletters / workshops
- Monitoring the Regularly Scheduled Series usage of ACCME accreditation and AMA designation statements and the documentation submitted by the RSS Activity Coordinator
- Monitoring the Regularly Scheduled Series for compliance with the following:
 - UTHSA HOP 10.1.11 - Guidelines for Interactions Between Clinicians and Industry
 - UTHSA HOP 10.1.12 - Policy on Conflict of Interest
 - UTHSA Office of Continuing Medical Education Policy on Review and Approval of CME Ethics and/or Professional Responsibility Credit
 - UTHSA HOP 2.4.1 - Continuing Education Policy
 - Accreditation Council for Continuing Medical Education (ACCME) Standards for Integrity and Independence in Accredited Continuing Education – 12_1_2020
 - ACCME Policies

Office of CME Management Fees:

The Office of CME offers any one of the following services for all CME activities. Standard services provided for UTHSA RSS activities are noted below.

File Management for CME	Inclusive of record data management, credit records, transcripts, audit services for state/national medical board, retention of records
Accreditation Maintenance	Monitoring and ensuring compliance with various accreditation bodies, manage peer review process for content
Faculty Management	Collect and review faculty documentation needed for CME accreditation
	Manage disclosure process and conflicts of interest resolution process
Technical Support	Provide on-line registration services/via CME Credit via TEXT System
	Develop/maintain on-line annual evaluation instrument
	Develop online certificates and/or transcripts
	Upload activity to CME Web site
Marketing	Review/approve all marketing communications
Administrative and management	ACCME annual reporting
RSS Chair/RSS Activity Coordinator post conference meeting	Review evaluation summaries
	Pre-planning activities for upcoming year



Accreditation Council for Continuing Medical Education (ACCME®) and American Medical Association (AMA) Glossary of Terms and Definitions

ACCME Recognized Accreditors

State and territory medical societies recognized by the ACCME as accreditors of intrastate CME providers. To achieve recognition, a state or territory medical society must meet the ACCME requirements, the [Markers of Equivalency](#).

Accreditor

An organization that sets and enforces the standards for CME provider organizations and/or activities through review and approval of organizations/activities, and monitors and enforces guidelines for these organizations/activities.

Accreditation

The framework by which a program of CME is assessed to determine whether the program meets the accreditor's requirements. See also *Accredited CME provider*.

Accreditation criteria

The requirements against which CME providers' compliance is determined in order to achieve or maintain accreditation.

Accreditation decision

The decisions made by an accreditor concerning the accreditation status of CME providers. In the ACCME System, there are five options for accreditation status: Provisional Accreditation, Accreditation, Accreditation with Commendation, Probation, and Nonaccreditation.

Accreditation interview

A step in the accreditation and reaccreditation process. In the ACCME System, volunteer surveyors review the CME provider's self-study report and performance-in-practice files, and then meet with the provider for the interview portion of the reaccreditation process. The purpose of the interview is for the provider to explain how the CME program fulfills accreditation requirements, and to discuss its strengths, accomplishments, and challenges.

Accreditation Review Committee (ARC)

The ACCME volunteer committee that reviews and analyzes the materials submitted by CME providers and surveyors to determine providers' compliance with the ACCME Accreditation Criteria and policies. Based on this review, the ARC makes recommendations about accreditation decisions to the ACCME Decision Committee.

Accreditation statement

The standard statement that must appear on all CME activity materials and brochures distributed by ACCME-accredited providers. There are two variations of the statement; one for directly provided activities and one for jointly provided activities.

Accreditation with Commendation

The highest accreditation status available in the ACCME System, accompanied by a six-year term of accreditation; available only to providers seeking reaccreditation, not to initial applicants.

Accredited CME

The term used to refer to continuing medical education that has been deemed to meet the requirements and standards of a CME accrediting body.

Accredited CME provider

An organization accredited as a provider of continuing medical education. Accredited CME providers assume the responsibility and accountability for developing certified educational activities. ACCME-accredited providers represent a range of organizational types and offer CME primarily to national or international audiences of physicians and other health care professionals. Intrastate-accredited providers offer CME primarily to learners from their state/territory or contiguous states.

Activity

See *CME activity*.

Activity review

One of the ACCME requirements for achieving Provisional Accreditation or transitioning from Provisional Accreditation to Accreditation.

Advertising and exhibits income

Advertising and exhibits are promotional activities and not continuing medical education. Therefore, monies paid by commercial interests to providers for these promotional activities are **not** considered to be commercial support under the ACCME Standards for Integrity and Independence in Accredited Continuing Education. Arrangements for these activities must be made in compliance with the Standards, specifically Standard 5: Manage Ancillary Activities Offered in Conjunction with Accredited Continuing Education.

AMA core requirements

The AMA requirements that every activity certified for *AMA PRA Category 1 Credit™* must meet. They can be found in the AMA PRA booklet.

AMA Credit Designation Statement

The statement that indicates that the activity has been certified for *AMA PRA Category 1 Credit™*, and includes the type of activity and number of credits.

AMA Direct Credit Activities

Activities that do not occur under the auspices of an accredited CME provider and for which the AMA directly awards credit to physicians who meet the requirements as listed in the AMA PRA booklet.

AMA House of Delegates

The principal policy-making body of the AMA. This democratic forum represents the views and interests of a diverse group of member physicians who meet twice per year, to establish broad policy on health, medical, professional and governance matters, as well as the broad principles within which the AMA's business activities are conducted.

AMA Physician's Recognition Award (PRA)

The AMA PRA has recognized physician participation in CME since 1968. The AMA established the PRA certificate and the related AMA PRA credit system to recognize physicians who, by participating in CME activities, demonstrate their commitment to staying current with advances in medicine. More information can be found in the AMA PRA booklet.

AMA PRA Category 1 Credit™

The type of CME credit that physicians earn by participating in certified activities sponsored by CME providers accredited by either the ACCME or an ACCME-recognized State/Territory Medical Society; by participating in activities recognized by the AMA as valid educational activities and awarded directly by the AMA; and by participating in certain international activities recognized by the AMA through its International Conference Recognition Program.

AMA PRA Category 2 Credit™

Credit that is self-claimed and self-documented by physicians by participating in activities that are not certified for *AMA PRA Category 1 Credit™* and that the physician individually determines comply with the AMA definition of CME; and comply with the relevant AMA ethical opinions (see CEJA Opinions relevant to CME); and are not promotional; and the physician finds to be a worthwhile learning experience related to his/her practice.

AMA PRA CME credit system

Developed in 1968, the credit system initially described the type of educational activities that would qualify to meet the requirement to obtain the AMA's PRA (See Physician's Recognition Award). The AMA PRA Standards and Policies have evolved and now AMA PRA credit has been accepted as an educational metric for the purposes of state licensure, professional credentialing, hospital privileging and maintenance of certification of physicians.

Annual Report data

Data that accredited providers are required to submit to the ACCME on at least an annual basis describing their overall CME program. This information includes summary data about the numbers and types of CME activities, the hours of instruction, the numbers of physician and other learner participants, and some financial information. The ACCME analyzes this data to monitor changes in individual CME programs as well as to assess trends across the CME enterprise. Each year, the ACCME publishes the aggregated information, offering a comprehensive analysis of the size and scope of the CME enterprise nationwide.

Certified CME

Nonpromotional learning activities certified for credit prior to the activity by an organization authorized by the credit system owner, or nonpromotional learning activities for which the credit system owner directly awards credit.

CME activity

An educational offering that is planned, implemented, and evaluated in accordance with the ACCME Accreditation Criteria, Standards for Integrity and Independence in Accredited Continuing Education, and policies; the AMA Physician's Recognition Award CME credit system standards and policies; and the AMA Council on Ethical and Judicial Affairs pertinent opinions.

CME credit

The “currency” assigned to CME activities. Physicians and other healthcare professionals use credits to meet requirements for maintenance of licensure, maintenance of specialty board certification, credentialing, membership in professional societies, and other professional privileges. The requirements for credit designation are determined by the organization responsible for the credit system. Besides the AMA, other organizations in the US that administer credit systems for physicians include the American Academy of Family Physicians and the American Osteopathic Association. Please refer to those organizations for more information. See *AMA PRA Category 1 Credit™* and *AMA PRA Category 2 Credit™* above.

Commercial bias

Content or format in a CME activity or its related materials that promotes the products or business lines of an ineligible company. As described in the Standards for Integrity and Independence in Accredited Continuing Education, providers are responsible for protecting learners from commercial bias and marketing. In addition to preventing influence from ineligible companies, the Standards prohibit faculty from actively promoting or selling products or services that serve their professional or financial interests.

Commercial interest

See *ineligible company*.

Commercial support

Financial or in-kind support from an ACCME-defined ineligible company that is used to pay all or part of the costs of a CME activity. The requirements for receiving and managing commercial support are explained in the ACCME [Standards for Integrity and Independence in Accredited Continuing Education](#), specifically Standard 4: Manage Commercial Support Appropriately.

Committee for Review and Recognition (CRR)

The ACCME volunteer committee that collects, reviews, and analyzes data about Recognized Accreditors' (state or territory medical societies) compliance with the ACCME's recognition requirements, the [Markers of Equivalency](#), through a process called [Maintenance of Recognition](#). The CRR makes recognition recommendations to the ACCME Decision Committee. See also *Maintenance of Recognition*.

Committee learning

A live CME activity that involves a learner's participation in a committee process addressing a subject that would meet the ACCME definition of CME if it were taught or learned in another format.

Competence

In the context of evaluating effectiveness of a CME activity in the ACCME System, the extent to which learners know how to implement (or stop doing) what the activity intended to teach them.

Compliance

The finding given when a CME provider has fulfilled the ACCME's/Recognized Accreditor's requirements for the specific criterion in the Accreditation Criteria or policy.

Continuing Medical Education (CME)

The educational activities that serve to maintain, develop, or increase the knowledge, skills, and professional performance and relationships a physician uses to provide services for patients, the public, or the profession. CME represents that body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine, and the provision of healthcare to the public.

Continuing Professional Development (CPD), or Continuing Physician Professional Development (CPPD)

Includes all activities that physicians undertake, formally and informally, including CME, in order to maintain, update, develop, and enhance their knowledge, skills, and attitudes in response to the needs of their patients.

Co-provided activity

A CME activity presented by two or more accredited providers. One of the accredited providers must take responsibility for the activity in terms of meeting ACCME and AMA requirements and reporting activity data to the ACCME. See also *directly provided activity*.

Council on Ethical and Judicial Affairs (CEJA)

The AMA elected body responsible for developing ethics policy for the AMA. Comprising seven practicing physicians, a resident or fellow, and a medical student, CEJA prepares reports that analyze and address timely ethical issues that confront physicians and the medical profession. CEJA maintains and updates the AMA Code of Medical Ethics, widely recognized as the most comprehensive ethics guide for physicians. In addition, CEJA has judicial responsibilities, which include appellate jurisdiction over physician members' appeals of ethics-related decisions made by state and specialty medical societies. To protect the integrity and quality of the CME enterprise and to support the autonomy of physicians as voluntary participants in CME activities, CEJA has rendered Opinions 9.2.6, Ethical Issues in CME; 9.2.7, Financial Relationships with Industry in Continuing Medical Education; and 9.6.2, Gifts to Physicians from Industry. Activities certified for *AMA PRA Category 1 Credit™* must be developed in accordance with these opinions.

Council on Medical Education

The AMA elected body that formulates policy on medical education (including undergraduate, graduate, and CPPD/CME) by recommending educational policies to the AMA House of Delegates, through the AMA Board of Trustees. The Council provides stewardship of the AMA PRA credit system, and is also responsible for recommending nominees to the boards of ACCME and other accrediting bodies, as well as to other national organizations.

Course

A live CME activity where the learner participates in person. A course is planned as an individual event. Examples: annual meeting, conference, seminar.

Designation of CME credit

The declaration that an activity meets the requirements for a specific type of credit. The accredited provider is responsible to those organizations that administer credit systems for compliance with applicable credit requirements. Note: The designation of credit for CME activities is not within the purview of the ACCME or ACCME Recognized Accreditors. Requirements for the designation of *AMA PRA Category 1 Credit™* are within the purview of the AMA. See also *CME credit*.

Directly provided activity

One that is planned, implemented, and evaluated by the accredited CME provider. This definition includes co-provided activities (offered by two accredited providers) reported by the accredited provider that awards the credit.

Documentation review

See *performance-in-practice review*.

Enduring material

An activity that endures over a specified time and does not have a specific time or location designated for participation; rather, the participant determines whether and when to complete the activity. Examples: online interactive educational module, recorded presentation, podcast.

Faculty

The individuals responsible for teaching, authoring, or otherwise communicating the activity content to learners.

Financial relationships

Accredited providers must collect information from all planners, faculty, and others in control of educational content about all their financial relationships with ineligible companies within the prior 24 months. There is no minimum financial threshold; individuals must disclose all financial relationships, regardless of the amount, with ineligible companies. Individuals must disclose financial relationships with ineligible companies regardless of their view of the relevance of the relationship to the education. See also *relevant financial relationships*.

Focused accreditation interview

A specially arranged interview between the ACCME/Recognized Accreditor and an accredited provider to address noncompliance areas that had been identified in an accreditation review or had not been corrected in a progress report.

Ineligible Company

Companies that are ineligible to be accredited in the ACCME System (ineligible companies) are those whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

In-kind commercial support

In the context of the ACCME's Standards for Integrity and Independence in Accredited Continuing Education, non-monetary support provided by an ineligible company used for a CME activity. Examples of in-kind support include use of equipment and supplies.

Internet live activity

A live course available via the Internet at a certain time on a certain date and is only available in real-time, just as if it were a course held in an auditorium. Example: webinar or webcast.

Internet Point of Care (PoC) learning (Internet searching and learning)

An activity in which a physician engages in self-directed, online learning on topics relevant to their clinical practice from a database whose content has been vetted by an accredited CME provider.

Interprofessional continuing education (ICPE)

When members from two or more professions learn with, from, and about each other to enable effective collaboration and improve health outcomes. Definition established by the ACCME, Accreditation Council for Pharmacy Education (ACPE), and American Nurses Credentialing Center (ANCC) in 2015. See also *Joint Accreditation for Interprofessional Continuing Education*.

Intrastate accredited provider

See *Accredited CME provider*.

Joint Accreditation for Interprofessional Continuing Education

Joint Accreditation establishes the standards for providers to deliver continuing education planned by the healthcare team for the healthcare team. Cofounded by the ACCME, Accreditation Council for Pharmacy Education (ACPE), and American Nurses Credentialing Center (ANCC). Joint Accreditation offers organizations the opportunity to be simultaneously accredited to provide continuing education for multiple health professions through a single, unified application process, fee structure, and set of accreditation standards.

Jointly provided activity

An activity that is planned, implemented, and evaluated by an accredited provider and one or more nonaccredited entities.

Journal-based CME

An activity that is planned and presented by an accredited provider and in which the learner reads one or more articles (or adapted formats for special needs) from a peer-reviewed, professional journal.

Knowledge

In the context of educational needs for a CME activity in the ACCME System, the extent to which learners have a need for new information.

Learner

An attendee at a CME activity. See also *physician learners*, and *other learners*.

Learning from teaching

Personal learning projects designed and implemented by the learner with facilitation from the accredited provider. It recognizes the learning that occurs as physicians prepare to teach.

Live activity

Activity that occurs at a specific time as scheduled by the accredited CME provider. Participation may be in person or remotely as is the case of teleconferences or live internet webinars.

Maintenance of Certification/Continuing Certification

Maintenance of Certification (MOC), also known as Continuing or Continuous Certification, is the process by which a physician who has initially become board certified in the specialty practice of their choice maintains their board certification status. The ACCME collaborates with some of the member boards of the American Board of Medical Specialties (ABMS) to facilitate the integration of accredited CME and MOC. These collaborations enable CME providers to offer educational activities that count for both CME credit and MOC credit and to report learner-participation data, which is transmitted to the collaborating boards.

Maintenance of Recognition

ACCME system to ensure that Recognized Accreditors are applying the national standards for accreditation decisions and the accreditation process. Recognized Accreditors submit documents and information on an ongoing basis. The ACCME provides detailed, formative feedback to Recognized Accreditors in real time as the data is reviewed. Feedback is given in relation to the [Markers of Equivalency](#). The ACCME adopted Maintenance of Recognition in 2011 in order to improve the quality, value, and efficiency of the recognition process and to enable the ACCME and Recognized Accreditors to identify areas for improvement on an ongoing basis.

Manuscript review activity

Activity in which a learner participates in the critical review of an assigned journal manuscript during the pre-publication review process of a journal.

Merit-Based Incentive Payment Systems (MIPS)

A participation track of the Quality Payment Program (QPP) from the Centers for Medicare & Medicaid Services (CMS) that offers performance-based payment adjustments for services provided by eligible clinicians to Medicare patients. The CMS includes accredited CME as an Improvement Activity in the MIPS track, which gives an opportunity for providers to demonstrate the value of CME in promoting clinician engagement in efforts to improve performance, quality, and safety.

Monitoring

The ACCME monitors accredited providers between formal accreditation reviews by reviewing the program and activity data they submit on at least an annual basis. In addition, the ACCME and AMA each have a formal procedure for accepting and reviewing complaints from the public and the CME community about accredited providers' compliance with accreditation and credit system requirements.

New procedures and skills training

Activity whereby accredited CME providers can train physicians on topics that may allow them to request new or expanded clinical privileges. The AMA PRA framework for new skills and procedures training consists of four levels so that accredited CME providers and physicians can clearly identify the depth and complexity of the training.

Nonaccreditation

The accreditation decision by the ACCME/Recognized Accreditor that a CME provider has not demonstrated compliance with the appropriate ACCME requirements.

Noncompliance

The finding given by the ACCME/Recognized Accreditor when a CME provider does not fulfill the ACCME's requirements for the specific criterion in the Accreditation Criteria or policy.

Other activities

The *other* activity format is used for blended (combining existing and/or new formats), new, or unique approaches that do not fall into one of the established activity types as long as the activities meet the AMA core requirements and the ACCME's accreditation requirements.

Other learners

Learners other than those who have obtained an MD, DO, or equivalent medical degree from another country. Examples: nurses, pharmacists, PAs.

Parent organization

An outside entity, separate from the accredited provider, that has control over the accredited provider's funds, staff, facilities, and/or CME activities.

Performance

In the context of evaluating effectiveness of a CME activity in the ACCME system, the extent to which learners *do* what the CME activity intended them to be able to do (or stop doing) in their practice.

Performance Improvement CME (PI CME)

An activity structured as a three-stage process by which a physician or group of physicians learn about specific performance measures, assess their practice using the selected performance measures, implement interventions to improve performance related to these measures over a useful interval of time, and then reassess their practice using the same performance measures.

Performance-in-practice review

During the initial accreditation, reaccreditation, and progress report processes, the ACCME/Recognized Accreditor selects activities to review from the CME provider's current accreditation term. The provider then submits materials documenting how these activities fulfilled accreditation requirements. This process enables the ACCME/Recognized Accreditor to ensure that accredited providers are consistently complying with requirements on an activity level.

Physician learners

Activity learners who are MDs or DOs, or have an equivalent medical degree from another country.

Probation

Accreditation status given by the ACCME/Recognized Accreditor to accredited providers that have serious problems meeting ACCME requirements. Probation may also be given to providers whose progress reports are rejected. The accredited provider must correct the noncompliance issues in order to return to a status of Accreditation.. While on probation, a provider may not jointly provide new activities. See also *progress report*.

Program of CME

The provider's CME activities and functions taken as a whole.

Progress Report

Accredited providers that receive noncompliance findings in the Accreditation Criteria or policies must submit a progress report to the ACCME/Recognized Accreditor demonstrating that they have come into compliance. If the accredited provider successfully demonstrates compliance, the progress report is accepted and the provider can then complete its accreditation term. If the progress report does not yet demonstrate compliance, the accredited provider will be required to submit a second progress report and/or the ACCME may require a focused accreditation interview to address the areas of noncompliance. The ACCME/Recognized Accreditor can also place an accredited provider on Probation or issue a decision of Nonaccreditation after reviewing a progress report.

Program and Activity Reporting System (PARS)

A web-based portal from the ACCME designed to streamline and support the collection of program and activity data from accredited CME providers. PARS is also used by accredited providers to enter, track, and manage physician-learner data, and to specify which activities count for Maintenance of Certification/Continuing Certification, and government programs, such as the Food and Drug Administration's Risk Evaluation and Mitigation Strategies (REMS), and the Merit-Based Incentive Payment System (MIPS). The ACCME is collaborating with state medical boards to report physician participation in accredited CME to participating boards via PARS, with the goal of reducing burdens on physicians and simplifying the audit process for boards.

Provider

See *Accredited CME provider*.

Provisional Accreditation

A two-year term given to initial applicants in the ACCME System that comply with the necessary Accreditation Criteria.

Recognition

The process used by the ACCME to approve state and territory medical societies as accreditors of intrastate providers.

Recognized Accreditor

State and territory medical societies may choose to become “recognized” by the ACCME. Recognition allows them to accredit intrastate providers of continuing medical education.

Regularly scheduled series

A course planned as a series with multiple, ongoing sessions, e.g., offered weekly, monthly, or quarterly; and is primarily planned by and presented to the accredited organization’s professional staff. Examples include grand rounds, tumor boards, and morbidity and mortality conferences.

Relevant financial relationships

As defined in the Standards for Integrity and Independence in Accredited Continuing Education, specifically, Standard 3: Identify, Mitigate, and Disclose Relevant Financial Relationships, relevant financial relationships are financial relationships of any amount with ineligible companies if the educational content is related to the business lines or products of the ineligible company. Providers are required to collect information from all those individuals in control of educational content about all of their financial relationships with ineligible companies within the prior 24 months. The provider is then responsible for determining which relationships are relevant.

Risk Evaluation and Mitigation Strategy (REMS)

A drug safety program that the U.S. Food and Drug Administration (FDA) requires for certain medications with serious safety concerns to help ensure the benefits of the medication outweigh its risks. The FDA currently leverages accredited continuing education to achieve the goals of its Opioid Analgesics REMS and Mycophenolate REMS.

Self-study report

One of the data sources used in the ACCME process of accreditation or reaccreditation. When applying for accreditation or reaccreditation, CME providers prepare a report to explain their accomplishments and practices related to the Accreditation Criteria and policies, assess areas for improvement, and outline a plan for making those improvements.

Standards for Integrity and Independence in Accredited Continuing Education

ACCME requirements designed to ensure that accredited continuing education serves the needs of patients and the public, is based on valid content, and is free from commercial influence. The [Standards](#) comprise five standards: Ensure Content is Valid; Prevent Commercial Bias and Marketing in Accredited Continuing Education; Identify, Mitigate, and Disclose Relevant Financial Relationships; Manage Commercial Support Appropriately; Manage Ancillary Activities Offered in Conjunction with Accredited Continuing Education. Released in December 2020, the Standards for Integrity and Independence replace the Standards for Commercial Support.

State medical society accreditor

See *Recognized Accreditor*.

Test-item writing activity

An activity wherein physicians learn through their contribution to the development of examinations, or certain peer-reviewed self-assessment activities, by researching, drafting and defending potential test items.

Unstructured online searching and learning

An activity in which a physician uses Internet sites to learn about a topic. If it meets the guidelines for *AMA PRA Category 2 Credit™* a physician may designate it as such and claim credit based on the time devoted to it.

Abbreviated CME Terms

ACCME	Accreditation Council for Continuing Medical Education
AMA	American Medical Association
COA	Certificate of Attendance
COC	Certificate of Credit
COI	Conflict of Interest
CME	Continuing Medical Education
CPE	Continuing Professional Education
LOA	Letter of Agreement for Commercial Support
PRA	Physician's Recognition Award
RSS	Regularly Scheduled Series
SOA	Statement of Attendance