	Policies and Procedures	No. 101
	<b>Title: CME Activity Process</b>	Page 1 of 9
		Review/Revised: 4/06
		Origination Date: 11/2/04
Distribution: CME Policy and Procedure Manual		

## PURPOSE

This policy will provide a process and standards for initiating and establishing a CME Activity with The Center of Excellence In Education (CEE). All CME (physicians) activities comply with accreditation standards set by the California Medical Association/Institute of Medical Quality (CMA/IMQ) and ACCME. All details, planning and implementation will be the responsibility of The Center of Excellence In Education.

The CEE is committed to quality performance improvement strategies for practicing physicians using the latest science and best practice evidence based content.

The CEE is additionally looking to improve and implement new activity delivery methods through new ideas and opportunities such as web based enduring activities.

## EQUIPMENT AND SUPPLIES

1. Institute of Medical Quality/CMA CME Accreditation Activity "Gold Book" 2005 Edition
2. Faculty CVs
3. Current CEE CME Application Packet
4. Secure locked storage container
5. File Requirements Checklist
6. CME files (maintained for 6 years)

## PROCEDURE

### I. CME Committee

The Committee shall consist of at least five, but no more than ten members as approved by the committee and are required to meet the minimum for the CME Consultant job description. All members of the CME committee are consultants with the exception of the CME Coordinator. Members of the committee may serve five-year terms or more. This Committee meets quarterly, but has an on-going dialog about our educational needs and activities via email and written communication.


The needs assessment for relevant topics are reviewed and discussed with CME Committee as indicated. Evidence based science; course evaluations and surveys reflect the continued need for more education in areas that improve patient care and safety. Various physician education formats, topics and patient safety issues will be researched for future activities.

A review of applications submitted at the request of a physician will be conducted by the CME Committee for relevance to the above. This will include but is not limited to assessment of needs data, activity content; proposed faculty; and potential opportunities for grants from commercial support organizations.

- a. The activity review approval is documented on the Activity Approval Report cover sheet that is filed in the CME binder.

### II. Submitting CME Activity Application

- a. The signed, Activity Application materials, should be presented to the CME Coordinator at the CEE Continuing Medical Education office (14813 Lamoine Drive, Redding, CA 96003). The

	Policies and Procedures	No. 101
	Title: <b>CME Activity Process</b>	Page 2 of 9
		Review/Revised: 4/06
		Origination Date: 11/2/04
Distribution: CME Policy and Procedure Manual		

date and location should be set and indicated in the packet and submitted at **least EIGHT weeks before the date (as much advance time as possible); multi-topic and multi-speaker lectures will be planned with least 16 weeks lead time.** Situations outside of this time frame will be considered on a case-by-case basis.

- b. Activity Request Form
  - This document provides a starting point to the process. The CME Committee will research each topic and provide needs assessment data to participants and faculty.
  - Additionally identifies the requesting physician and may refer a recommended speaker and potential learning objectives.
- c. Letter of Agreement (submit, signed)
  - Defines the conditions under which the CME activity will be presented, providing criteria for AMA PRA Category 1 Credit(s)<sup>TM</sup>.
- d. Course Outline
- e. Proposed speakers with their CVs

### III. Behavioral Objectives

When developing of objectives, the goal, wherever possible, is to address behavior changes in practice that improve patient care and safety.

### IV. Budget

An activity budget is created as a cost estimate of the total expenses and documented on the front cover of the file. This budget is also used to request unrestricted grants.

### V. Registration & Evaluation


If the grant does not include expenses for CEE travel, a contact is established to proctor the registration process and is paid a fee for this service. A packet is sent to the proctor prior to the activity from the CEE. The registration proctor will:

- a. Post flier & disclosure form at registration table
- b. Register activity guests
- c. Ensure legibility of name, address, zip code and license numbers
- d. Hand out and collect the post tests and evaluations at completion of the activity.
- e. ARP returns all paper work, left-over supplies, *resume or CV and SS # (for payment)* in the envelope provided to CME Coordinator and notifies of any comments, issues or problems.

### VI. Evaluation

Approved evaluation forms are completed and returned prior to distribution of CME certificates in all activities. Evaluations are used for needs data in future planning. Additionally, evaluations are summarized and distributed to appropriate parties after the CME activity.

Current course evaluations provide Level 2 needs data.

	Policies and Procedures	No. 101
	<b>Title: CME Activity Process</b>	Page 3 of 9
		Review/Revised: 4/06
		Origination Date: 11/2/04
Distribution: CME Policy and Procedure Manual		

## VII. Outcomes Data

When ever possible, the CME Committee links outcomes data and demonstrated needs to improved patient care.

- a. Evaluation completion is mandatory at each activity. Evaluations are used to assess education needs of the physician; they are summarized and assessed after each activity. The information is also used as an ongoing assessment of our CME process for committee review and improve as needed.
- b. Activities are regularly surveyed for Level 3 outcomes data post activity.

## VIII. Faculty Qualifications

Faculty CVs, previous evaluations, surveys and other documentation are reviewed for consideration as an expert and shows the ability to teach other physicians. Qualifications are additionally reflected in abstracts, current position or affiliations.

Goals expectations are documented and provided for faculty to ensure they can complete the audience motivation and desired result.

If poor course evaluation is received, it will be a required for the faculty to complete a CORE course or other approved instructor training before they teach again for the CEE.

## IX. Honorarium


It is the policy of the CEE that payment of reasonable honoraria and reimbursement of reasonable out-of-pocket expenses for faculty and others who contribute to CME development and delivery are customary and proper. The amounts of the honorarium and details about allowable expenses are documented in correspondence with the faculty or others who will receive the honorarium and reimbursement as a part of the process. Faculty Individuals who provide services for CME provider-produced continuing medical education activities may not receive payments from any other sources for their service.

A range of honoraria to be offered to or negotiated is noted in this policy. The CEE recognizes that there may be varying levels of honoraria depending on the type of activity, the number of faculty, credentials of faculty, etc.

### Honorarium Procedures

CME provider invites an individual to serve in the development of an educational activity in a specific role/capacity, ie: faculty. The approved honorarium and reimbursement criteria are offered as a part of the invitation.

- a. The CEE only pays honorarium for faculty who teach and for no other services.
- b. The CME Coordinator is authorized to negotiate honoraria with the following limits for lectures, conferences, enduring materials (Policy limit \$250 - \$2000).

	Policies and Procedures	No. 101
	<b>Title: CME Activity Process</b>	Page 4 of 9
		Review/Revised: 4/06
		Origination Date: 11/2/04
Distribution: CME Policy and Procedure Manual		


- c. Honorariums outside of this range will be approved and documented on a case-by-case basis by the CME Coordinator or the committee.
- d. Upon receipt of grant funding, honorariums will be paid when faculty has fulfilled submission of the requested documents to meet CME file requirements; and when the activity is completed and/or grant is received in full.

#### **X. Expenses and Reimbursement**

- a. All expenses must be returned within 30 days of program completion. Because of IRS regulations, an original receipt must accompany each reimbursable expenditure. If the original receipt is lost or otherwise misplaced and if the expenditure is approved for reimbursement, then this amount will be considered taxable income and included in your year-end 1099. Please allow 4 weeks for receipt of reimbursement check after grant funding has been received.
- b. Reimbursement will be made for reasonable out-of-pocket expenses for travel, lodging and meals on receipt of itemized expense reports. Approved hotel rooms and expenses will be paid for the date of the individual lecture (i.e. one lecture = one day; lectures on two days in a row = two days).
- c. Budgeted expenses will be submitted on the appropriate form with original receipts to the CME Coordinator. Once reviewed the expense report originals are submitted to a/p and expense check is sent to appropriate party.
- d. All reimbursement for expenses will be made directly by the Accredited Provider or joint sponsor.
- e. Commercial support may not be used to pay for travel, lodging, honoraria or personal expenses for non-teacher or non-author participants of a CME activity.
- f. If commercial support is received for an activity, non-commercial support money may not be used to pay for travel, lodging, honoraria or personal expenses for non-teacher or non-author participants of a CME activity.
- g. A detailed budget, including honoraria and expenses, are reported in the payment summary compiled at the completion of the activity.

#### **XI. Cost Reporting**

- a. For each activity a budget estimate is documented in the front section of the file.
- b. A grant letter for the estimated amount is sent.
- c. The check stub or wire transfer is noted when a grant is received and at that time the remaining outstanding accounts are paid.
- d. An accounting of the grant funds is provided to each commercial supporter and joint sponsors if appropriate.

	Policies and Procedures	No. 101
	<b>Title: CME Activity Process</b>	Page 5 of 9
		Review/Revised: 4/06
		Origination Date: 11/2/04
Distribution: CME Policy and Procedure Manual		

- e. All budget and accounting papers are stapled to the front of the CME file with the final payment summary report on the top.

## **XII. Confidentiality**

- a. All personal information and documents are considered confidential, except information provided by activity invitations/fliers.
- b. HIPPA regulations are followed when patient information is used.

## **XIII. CME Committee Content Control**

- a. The physician (or physician's delegate) requesting the activity or faculty must agree to accept changes and recommendations indicated by the CME Committee.


## **XIV. Fees**

- a. CME Fees (all fees are subject to change; discuss large events with the CME Coordinator for pricing):
  - 50 attendees and up to two speakers, \$800.00
  - Add \$800 for 50 - 100 attendees = \$1600.00
  - Add \$800 for 100 - 150 attendees = \$2400.00
  - Add \$200 per additional speaker above 2 (ie: 3 speakers = \$200 + \$800 (up to 50 attendees) = \$1000.
  - \$200 cancellation fee is charged if the activity is canceled.
- b. The grant check that includes expenses must be received in the CEE office TWO (2) weeks prior to the CME activity or the scheduled activities could be cancelled.
- c. Reimbursement and an accounting of the CME Activity will be provided to the necessary parties after the event.
- d. All funds above and beyond the expenses incurred will be refunded to the grant provider after the event or a credit is applied for future activities.

## **XV. Faculty Expenses**

- a. Faculty will submit expenses on the CEE Expense Report Form provided by the CME Coordinator.
- b. All CME activity expenses should be returned within 30 days of activity completion and faculty will be paid when grants are received or if funds are received they should allow 4 weeks for receipt of check.
- c. IRS regulations require an original receipt accompany each reimbursable expenditure. If the original receipt is lost or otherwise misplaced and if the expenditure is approved for reimbursement, then this amount will be considered taxable income and included in your year-end 1099.

## **XVI. Commercial Support**


	Policies and Procedures	No. 101
	Title: <b>CME Activity Process</b>	Page 6 of 9
		Review/Revised: 4/06
		Origination Date: 11/2/04
Distribution: CME Policy and Procedure Manual		

- a. The Standards for Commercial Support below are followed for all CME activities. For a complete version of these standards refer to [www.accme.org](http://www.accme.org).
- b. To ensure independence in development and implementation of CME activities from the control of commercial interests, the CEE CME program complies with the above standards. The CEE is committed to planning educational activities independent of commercial influence, keeping physician's in charge of physician's education.
- c. Activity Content
  1. The CME Committee decisions regarding content and faculty abide by The Standards for Commercial Support.
  2. All promotional materials must be reviewed by the CME Committee or delegate prior to distribution. This includes preliminary postcards, brochures, fliers, journal ads, etc. CME related printed materials must include the following specific to the activity:
    - Identification of target audience
    - Identification of education outcomes
    - Description of educational objectives
    - Activity details, location, date and time, e
  3. Activities are independent of the control or influence of commercial interests in activity planning and implementation.
  4. Content and related materials must promote improvements or quality in patient care.
  5. Content must be based on the most recent scientific evidence; have a balanced view of therapeutic options and references are provided to activity participants.
  6. Discussion of unlabeled or investigational use of commercial products must be identified.

## XVII. Faculty Disclosure

***Activities are for scientific and educational purposes and will not promote the company's product directly or indirectly.***

- a. The Center of Excellence in Education (CEE) is responsible for control of content and selection of faculty and moderators. Planning and implementation of these activities are done in compliance with the Standards for Commercial Support of the IMQ/CME and ACCME. All parties involved with any aspect of CME will comply with these standards and regulations.
- b. The faculty will disclose financial or other relationships between the commercial supporter and the speaker. This information will be provided in writing to the CME Coordinator. It is advised that the faculty present a slide at the beginning of the lecture to disclosure commercial support companies for whom they receive funding for lectures (list **ALL** companies that they lecture for including speakers bureau, consult, share holder, etc.)
- c. Faculty will declare to the audience that they or their spouse/partner ***has a financial interest or other relationship*** with commercial supplier(s) of services or products. This financial interest or relationship is specified and lists all companies and relationships (current and those of the previous 12 months). It is recommended that faculty use a slide at the beginning of the presentation and is also documented on the signed faculty disclosure form.

	Policies and Procedures	No. 101
	<b>Title: CME Activity Process</b>	Page 7 of 9
		Review/Revised: 4/06
		Origination Date: 11/2/04
Distribution: CME Policy and Procedure Manual		


- d. CEE will ensure disclosure to the audience of a company funding (i.e., educational grant provided) and any significant relationship between the commercial supporter and the company (i.e., grant recipient) or between individual speakers or moderators and the company.
- e. There will be no “scripting”, emphasis or influence on contract by the company of its agents.
- f. No promotional activities (i.e.: no commercial supporter name badges or solicitation) will be permitted in the same room or obligate path at the education activity.
- g. CEE will require that presenters disclose when a product is not approved in the United States for the use under discussion.

### **XVIII. Conflict of Interest Policy**

1. Below are guidelines for resolution of conflicts of interest between potential speakers and to ensure independence in CME Activities. A conflict of interest is created when an individual has an opportunity to affect CME content about products or services of a commercial interest with which he/she has a financial relationship. The ACCME Standards of Commercial Support require that when a potential conflict of interest is identified, that it be resolved prior to the educational event to ensure that the activity is free of commercial bias.
  - a. Each faculty speaker will be required to disclose all relevant financial relationships with commercial interests. This disclosure will be reviewed by the CME Coordinator for potential conflicts of interest. If none is identified, faculty signs the form indicating there is no conflict. If the speaker does not complete the disclosure form, then the speaker will be disqualified from participating in the activity.
  - b. CME committee members will be required to complete financial disclosure forms annually.
  - c. If a potential conflict of interest is identified, the faculty will identify the conflict by noting it on the Faculty Disclosure Form and sign where indicated that their presentation will comply with CME standards. The speaker will also be asked to provide copies of any presentation materials for review by the CME Committee if requested.
  - d. Potential commercial supporters will be required to sign a letter of agreement stating they will follow the requirements of the Standards for Commercial Support of Continuing Medical Education.
  - e. If any potential conflict cannot be resolved, the program will not qualify for CME approval, and will not be presented as such. If the CME Committee feels that the program may still be beneficial, they may choose to have it presented, with committee the approval.

### **XIX. Contributed funds**

- a. Unrestricted educational grants will be made payable to CEE. These funds include all fees and expenses (food, meeting room, AV, travel, honorarium, etc.) related to this activity.
- b. No other funds from the commercial company will be paid to the activity director, faculty, or others involved with the CME activity (additional honoraria, extra social events, etc.)

	Policies and Procedures	No. 101
	Title: <b>CME Activity Process</b>	Page 8 of 9
		Review/Revised: 4/06
		Origination Date: 11/2/04
Distribution: CME Policy and Procedure Manual		

**XX. Guidelines for Promotional Materials**


- a. All promotional materials must be reviewed by the CME Committee or delegate prior to distribution. This includes preliminary postcards, brochures, fliers, journal ads, etc.
- b. CME related printed materials must include the following specific to the activity:
  - Identification of target audience
  - Description of educational objectives
  - Identification of education outcomes
  - Activity details, location, date and time, etc
  - Accreditation statement
  - Per ADA requirements, we make every effort to accommodate disabilities.
  - Commercial support will be acknowledged on the activities printed materials, as follows:
    - *This educational program is supported by an unrestricted educational grant provided by .....*

**XXI. Guidelines for Review of CME Activity by CME Committee**

- a. Continuing medical education consists of educational activities that serve to maintain, develop or increase the knowledge, skills, professional performance and relationships that a physician uses to provide services for patients, the public, or the profession. The content of CME is 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 health care to the public, ultimately improving patient care.
- b. Continuing educational activities which respond to a physician's non-professional educational need or interest, such as personal financial planning or appreciation of literature or music are not accredited CME.
- c. All recommendations involving clinical medicine in the CME activity must be based on evidence that is accepted within the profession of medicine as adequate justification for their indications and contraindications in the care of patients.
- d. All scientific research referred to, reported or used in CME in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection and analysis.

**XXII. American's with Disabilities Act**

- a. Per ADA requirements, we make every effort to accommodate disabilities and comply with federal regulations. This is documented on the CME activity printed materials.
- b. When needed ADA requests should be addressed at the time of RSVP by notifying the registration contact identified on the activity printed materials.

	Policies and Procedures	No. 101
	<b>Title: CME Activity Process</b>	Page 9 of 9
		Review/Revised: 4/06
		Origination Date: 11/2/04
Distribution: CME Policy and Procedure Manual		

**Documentation:**

- Completed CME Application
- Completed CME File
- Correspondence related
- CEE Program List - CME

**Originator:**

CEE CME Committee

**References:** [www.IMQ.org](http://www.IMQ.org) ; *IMQ Update & Workshops 2005 printed materials;*  
*Standards for Commercial Support at [www.ACCME.org](http://www.ACCME.org)*