

## CME JOINT PROVIDERSHIP WITH THE MEDICAL SOCIETY OF VIRGINIA

Thank you for reaching out about having your physician education accredited for CME through joint providership with the Medical Society of Virginia (MSV).

MSV is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide accredited education to physicians. This includes the granting of AMA PRA Category 1 Credit<sup>TM</sup> for physicians and certificates of completion to other members of the healthcare team. As an accredited provider, MSV is also able to partner with other eligible organizations who are not accredited but want to provide CME to their physicians and others on the healthcare team.

You will have control over your educational program. Your organization will identify your educational needs, then create, market, deliver, and document your educational activities. We will guide you through the process of ensuring that your activity meets all the criteria and standards that are required for accredited CME, and we will help you with the necessary documentation. You will be responsible for taking attendance, and for reporting attendance to MSV (including specific information about each learner that will allow us to give them full credit for their participation). You will also be responsible for having your learners complete an evaluation after the activity; we recommend that you make completion of the evaluation mandatory to receive CME credit. We will take responsibility for following up with your learners with an evaluation, assessing the learners' changes, compiling the data for you, and generating their credit certificates.

We look forward to speaking with you about it in greater detail, but here is more detailed information on the process of having your activities accredited through joint providership:

 INITIAL CALL AND APPLICATION: It is best if you contact MSV prior to doing much more than the very basic planning of your activity, so that we can help you ensure that you meet all the compliance criteria of the ACCME. Prior to having your activity approved, you'll be expected to complete an application and submit it to MSV. The application asks you to describe the educational needs you've identified, the format you've chosen for the activity, what physician attributes your activity is targeting, and how you will assess change in your learners. You will need to attest to the validity of the activity's content. You will be required to identify everyone who has influence over the content of the activity, including all planning committee members, speakers, moderators, panel members, skills trainers, etc. The completed application must be sent to MSV at least four (4) weeks before the activity date. NOTE: There is an incentive for submitting an application early, as <u>you are prohibited</u> from advertising your activity as being accredited for CME before it is approved. You can't advertise "CME pending" or "CME credit applied for" or "CME anticipated", or anything of the sort. Once your activity is approved, you will be able to (and should) include CME credit information in your marketing.

- 2. REVIEW AND APPROVAL: Once we have your application, we will review it promptly, and we'll set up a Zoom call to go over it with you, if needed.
- 3. DISCLOSURES: You will need to obtain disclosures from each of the people who you identify as being involved in the activity (the planners, faculty, etc.) in advance of their participation. MSV has a fillable pdf form that you can send to each person in control of content. The form asks them to list all their financial relationships with ineligible companies (defined below and formerly known as "commercial interests") for the last 24 months, and it asks them to attest to mitigating any potential conflicts of interest.

NOTE: This step can be problematic for planners, as their role begins long before the activity happens. You will need to be sure that all your planning committee members are either free of relationships or have disclosed their relationships and had them mitigated (see below) *prior to working on the committee*.

The financial disclosure forms do not have to be included with the activity application, but they all must be received by MSV at least **two weeks** before the activity. MSV CME staff will review each form, and if a financial relationship exists, MSV will determine whether it is relevant to the activity and that person's role. In cases where the relationship is relevant, mitigation of the relationship will need to be done by such mechanisms as having the person attest that they will give a balanced presentation, that they will not use brand names or product logos, having them submit their slides for peer review in advance of their presentation, etc. These mitigation methods are part of the disclosure form, and we will require speakers to submit their slides for review **two weeks** prior to the activity.

4. ATTENDANCE: During the activity, you will need to take attendance and report specific learner information to MSV so that we can upload it to the ACCME's activity database. Because the ACCME shares learner data with state medical boards and some specialty boards (such as the ABIM, ABS, ABP, and others), you will need to obtain permission from your learners to share the data. We can provide you with a spreadsheet that you can use. 5. EVALUATION: Using a short evaluation after the activity, you will assess changes in your learners' competence or performance, not just their knowledge. You might use an online survey tool or a paper form, but you will share the data with us. We strongly recommend that you require an evaluation be done in order for learners to receive their CME credit.

For one-time Live Courses, you'll be required to send us your list of learners and your evaluation data within one week of the activity. With the attendance information you provide, we will create certificates for CME credit to each learner and send them to you to distribute. Regularly Scheduled Series activities that are ongoing will need to have records submitted at least quarterly; we can work out a schedule together.

All materials related to your activity will need to be submitted to us electronically. We won't be able to accept hard-copy applications, attendance records, etc.

Activities that receive commercial support from ineligible companies, or those funded by exhibits or advertising, require substantial additional accreditation effort, and MSV accepts those activities for joint providership only on a select basis, for an additional fee. (*Ineligible companies* are those whose primary business is producing, market, sell, re-selling, or distributing products that are used on or by patients.

MSV's fees for joint providership are below. They are scaled to reflect the amount of work that has to be done on our end. You can use these numbers to calculate what the cost will be for your activities.

Application fee	Fee per credit hour		Fee per learner certificate issued	
\$500	\$100		\$10	
If commercial support is received		Plus: per commercial supporter		
\$500		\$100		
If advertisements or exhibits				
are part of your activity				
\$500				

For example, a half-day conference for three hours with 15 participants and no commercial support would have a fee of  $\$500 + (\$100^*3hr) + (\$10^*15 \text{ learners}) = \$950$ . A monthly morbidity conference that meets 10 times a year for an hour and has 25 different learners who get credit over the course of the year would have a fee of  $\$500 + (\$100^*10hr) + (\$10^*25) = \$1750$ . A two-day conference with 12 hours of credit, 100 learners, five commercial supporters, and advertising banners or posters would cost  $\$500 + (\$100^*12) + (\$10^*100 \text{ learners}) + \$500 + (\$100^*5 \text{ supporters}) + \$500 = \$4200$ .

I hope this information is helpful as you consider engaging with MSV in joint providership. I'll be happy to answer any questions and will be available to assist you through the application and accreditation processes. Please feel free to follow up with questions.

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## **HELPFUL CME GLOSSARY**

## Activity Types Eligible for Accreditation:

**Live Course**: an activity with one or multiple sessions, held for a target audience over one or more consecutive days. Examples include a one- or several-hour activity on a topic delivered on one afternoon; a multi-hour activity with several speakers, delivered over a weekend; an "annual meeting" with multiple speakers addressing the same audience over several days.

<u>Regularly Scheduled Series</u>: a series of sessions with different content held over time (but not on consecutive days), all for the same general target audience. Examples include a grand rounds series held over a year; a "tumor board" conference held every two weeks; an "infection morbidity conference" held monthly.

<u>Enduring Materials</u>: an educational activity that is available unchanged over a period of time that allows learners to access it at their convenience. Examples include online learning modules that are available to a group's members; recorded sessions from an annual meeting that are available online after the activity has ended; printed study books with learning tutorials and question forms that are available for free or for purchase.

There are other less common types of activities that are found on pages 4-5 of the AMA PRA booklet.

**Commercial Support**: any financial or in-kind support from ineligible companies intended to defray the cost of producing an accredited activity. **Commercial support is money that is given as a grant, without any return value other than recognition.** This includes money with any label such as "educational grant" or "financial support" or "sponsorship". It also includes in-kind support, such as the loaning of equipment for a demonstration or the time/effort of a medical device trainer. In-kind support should be assessed at a fair market value. **Commercial support does not include fees for advertising, exhibits, or for ancillary activities sponsored by ineligible companies.** There are strict but straightforward rules governing the management of Commercial Support, found in the <u>ACCME's Standard 4</u>.

**Employee of an Ineligible Company**: anyone who is employed directly by an ineligible company, including those with part-time status. Such people receive an IRS W9 form at the end of the tax year. Employees have a duty to their employer that cannot be mitigated, and employees of ineligible companies are prohibited from participating in the planning or delivery of accredited CME. Consultants are not considered employees, although it <u>is</u> a financial relationship that must be disclosed and mitigated; these people receive IRS 1099-NEC forms at the end of the tax year.

**Exhibits, Advertising, and Ancillary Activities**: any arrangement that allows an ineligible company to market or exhibit as part of an accredited CME activity. **This category includes all financial support from ineligible companies where they receive something for their contribution**. Examples include such things as a booth in an exhibit hall, a conference program with advertisements, banners or signs with corporate branding, sponsored events, lanyards or meeting badges with logos or branding, presentations organized by an ineligible company such as product demonstrations or "scientific symposia", and branded meeting features like registration desks or charging stations. We are required to clearly separate accredited education from marketing. The rules for exhibits and advertising are found in the <u>ACCME's Standard 5</u>.

**Financial Relationship**: <u>any</u> financial relationship between an ineligible company and someone who controls the content of a CME activity. There is no dollar minimum, and all relationships in the prior 24 months must be reported by those individuals, even if they have ended. Examples include being on a company's advisory board, being part of a speaker's bureau, or consulting on marketing strategy; research support is also a financial relationship, even when the money is given to the person's department or institution and not directly to the individual.

**Ineligible Company**: any company that makes, markets, sells, re-sells, or distributes products used on or by patients. For-profit or non-profit status is immaterial. Direct providers of healthcare services (e.g., hospitals, health systems, physician practices) are <u>not</u> ineligible companies. For a full list of examples and exclusions to the definition, see page 4 of the <u>ACCME's Standards</u> for Integrity and Independence.

**Owner of an Ineligible Company**: anyone with an ownership interest in an ineligible company, including those with stock in a privately held company (i.e., one that is not traded on an open stock exchange). Like employees, owners of ineligible companies are not allowed to have control over content in any accredited CME activity. Holding stock in a company whose stock trades on an open stock exchange is not considered ownership. Also, holding shares of mutual funds that include stock in ineligible companies is not considered ownership.