

Guide to Your ACCME Decision

For Providers in the November 2019 Cohort

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Introduction

Your Decision

Upon completing the initial, reaccreditation or progress report process, your organization will receive an individualized ACCME decision through the ACCME's Program and Activity Reporting System (PARS). The decision is the ACCME's formal notification to you of the accreditation status and term that your organization has been assigned. The decision summarizes ACCME's findings related to your compliance with the [accreditation requirements](#). The decision will indicate if other actions are required, such as a progress report for providers receiving reaccreditation or progress report decisions or an activity review for providers receiving initial accreditation decisions. The decision might also contain some specific language that explains the ACCME's findings for some requirements.

Accessing Your Decision

You can access your organization's decision report from your [PARS dashboard](#). The screenshots below will guide you to the information you need to review the decision.

Click on the "HISTORY" tab, where you will see the most recent decision at the top, including your new term's expiration date. Next, you will click on "View Decision Report" to see the detail of your decision, including compliance findings, along with descriptions of performance, if applicable, for the ACCME criteria and policies reviewed in this decision.

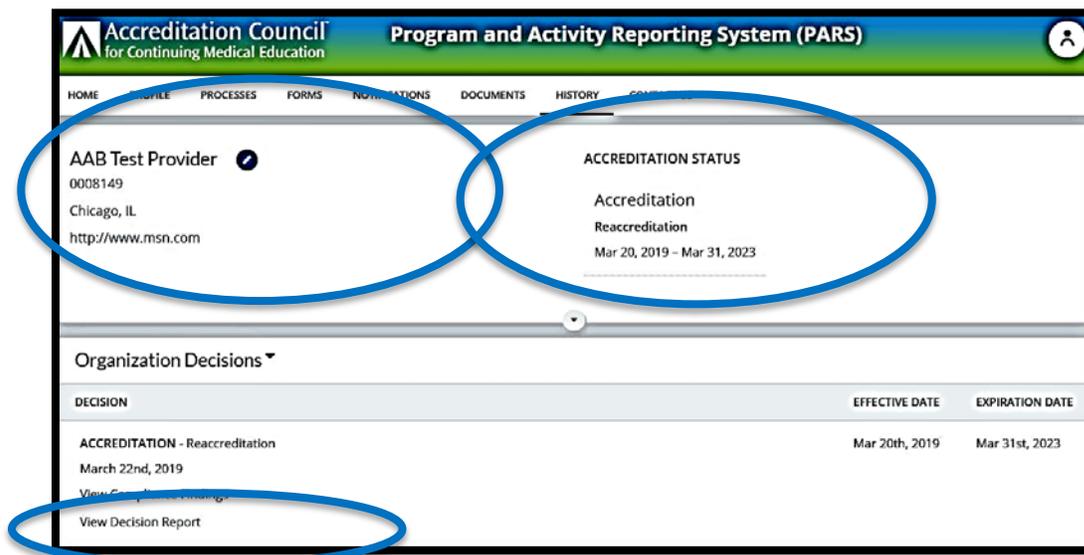


Figure 1

Compliance (C): The CME provider fulfilled the ACCME's requirements for the specific criterion or policy.

Noncompliance (NC): The CME provider did not fulfill the ACCME's requirements for the specific criterion or policy.

Evidence Not Submitted (EN): The CME provider did not submit evidence. For example, providers applying for reaccreditation must meet the requirements of Criteria 1–13 but are not required to demonstrate compliance with the Criteria for Commendation. If the CME provider chose not to submit evidence for the Criteria for Commendation (either C16-22 or eight from C23-38), the provider would receive a finding of "evidence not submitted" for those criteria.

Not Applicable (NA): The CME provider was not required to comply with the specific criterion or policy. For example, initial applicants must comply with Criteria 1, 2, 3, and 7–12 in order to be eligible for Provisional Accreditation and would receive a finding of "not applicable" for the other criteria. CME providers seeking reaccreditation would receive a finding of "not applicable" in policy areas that do not apply to the types of activities they produce.

Accreditation Status

The accreditation and reaccreditation decision-making process assesses a CME provider's compliance with the [accreditation requirements](#). Based on these compliance findings, the ACCME decides on the provider's accreditation status.

Provisional Accreditation

An initial applicant's decision is based on a demonstration of compliance in Criteria 1-3, 7-12, and the accreditation policies. The decision includes feedback on Criteria 5, 6, or 13 if evidence was submitted for ACCME review. However, noncompliance and not applicable findings in Criteria 5-6 or 13 are not considered in determining an initial applicant's accreditation status.

Accreditation Statement

With Provisional Accreditation, an organization becomes an ACCME-accredited provider. As an ACCME-accredited provider, your organization is responsible for using the ACCME accreditation statement to identify your organization as the entity responsible for demonstrating compliance with all ACCME accreditation requirements. The [ACCME accreditation statement](#) must appear on CME activity materials and brochures distributed by accredited organizations — with the exception, for example, of save-the-date activity announcements that contain only general, preliminary information about the activity such as the date, location, and title. If more specific information is included, such as faculty and objectives, you must include the accreditation statement.

Activity Review

If your organization did not have an Activity Review as part of its initial accreditation process, then this must occur as part of your reaccreditation review to be eligible for full accreditation. The Activity Review is in addition to the ACCME's standard performance-in-practice review. It entails the observation of one of your organization's CME activities, an activity of any type, by an ACCME surveyor. An Activity Review requires 1) a surveyor's observation of a CME activity as presented to the learners and 2) the surveyor's completion of an [ACCME Activity Review Form](#). Your organization will be contacted by the ACCME to make arrangements for fulfilling this requirement before your next decision. No additional information is required, at this time to complete the Activity Review.

Reporting CME Activity Data

As an ACCME-accredited provider, your organization must enter into the ACCME's Program and Activity Reporting System (PARS) information about all of the activities — directly or jointly provided — offered under the umbrella of your accreditation statement. Providers must enter all program and activity data for each year and complete the attestation by the last business day of March of the following year to allow for the calculation of the ACCME Annual Report data.

In addition, providers are responsible for maintaining current, accurate contact information for your organization in PARS to ensure that you receive important policy updates, as well as information specific to your organization. To protect the best interest of all parties, the ACCME generally limits communications to persons identified as authorized contacts by the provider in PARS.

Annual Accreditation Fee

As an ACCME-accredited provider, your organization is responsible for the timely submission of the fees that are required either to attain or maintain accreditation, including the Annual Accreditation Fee payable by January 31 of each year. Failure to meet ACCME deadlines could result in an immediate change of status to Probation and subsequent consideration by the Board of Directors for a change of status to Nonaccreditation.

Accreditation with Commendation

Accreditation with Commendation confers a six-year term of accreditation awarded to accredited providers for demonstrating compliance in [Accreditation Criteria](#) (C1–13) and in Option A Commendation Criteria (C16-22) or from Option B: Menu of New Commendation Criteria (C23-38).

The ACCME encourages providers that achieve Accreditation with Commendation to publicize this accomplishment in the accreditation process within your organizations and to the larger community in which you operate. It is important to the ACCME that the healthcare system is aware of your achievement, the work you do, and of the standards you have met. We have created an [Accreditation with Commendation mark](#) to support your communications. Please see the policies on [ACCME Logo Usage and Publicizing ACCME Accreditation](#).

Accreditation

Accreditation is the standard, four-year term awarded to accredited providers for demonstrating compliance in [Accreditation Criteria](#) (C1–13) and [policies](#).

Providers that demonstrate one or more noncompliance findings in [Accreditation Criteria](#) 1–13 and/or the [policies](#) receive Accreditation with the standard, four-year term and are required to submit a [progress report](#).

Probation

Probation is given to accredited providers that have serious problems meeting ACCME [requirements](#). A provider that receives a decision of Probation is required to submit a [progress report](#). Most providers on Probation implement improvements quickly, return to a status of Accreditation, and sustain compliance. Providers cannot remain on Probation for longer than two years. Providers with Accreditation may have their status changed to Probation if their progress reports do not demonstrate correction of noncompliance issues.

Nonaccreditation

Although Nonaccreditation decisions are rare, the ACCME does make that determination in the following circumstances:

- An [initial applicant](#) is not in compliance with any one of the criteria required to achieve Provisional Accreditation.
- A provisionally accredited provider has serious noncompliance issues.
- A provider on Probation fails to demonstrate in one or more progress reports that it has achieved compliance in all Accreditation Criteria within two years.

In rare circumstances where there are compelling reasons, an accredited provider may have its status changed to Nonaccreditation. Examples of such circumstances include an accredited provider that has demonstrated recurrent noncompliance in the [Standards for Commercial Support](#):

[Standards to Ensure Independence in CME ActivitiesSM](#) and/or has received previous decisions of Probation, and/or has engaged in joint providership while on Probation in violation of [joint providership policy](#).

Progress Report Required

The ACCME expects organizations found to be in noncompliance with Criteria 1-13 or policies to demonstrate compliance through the progress report process.

A standard progress report review fee will be required. Please see the [ACCME-accredited provider fee schedule](#). The fee is due upon receipt of the invoice that you will receive via email.

A progress report serves as an important opportunity for a provider to demonstrate that it has mechanisms in place to make improvements to its CME program. The requirement to improve is an integral part of the ACCME's accreditation system. If all criteria or policies that were found to be in noncompliance are not corrected, the ACCME may require another progress report, a focused interview, and/or a change of status may result.

Determining if a Progress Report is Required

From the "History" tab, click on "View Decision Report" located under the most current accreditation decision. Your Decision Report will open in a the browser window. At the top of the compliance grid, you will find additional information related to your decision, including whether your organization is required to submit a progress report and the cohort the progress report will be reviewed.



The screenshot shows the ACCME Decision Report interface. At the top is the ACCME logo with the tagline "learn well". Below the logo is the title "ACCME Decision Report". A table contains the following information:

Organization Name	ACCME Hospital Test
ACCME Organization ID	0008185
Decision Type	Reaccreditation
Accreditation Status Awarded	Accreditation
Term	03/31/2021 - 03/31/2023
Is a Progress Report Required?	Yes
Is an Activity Review Required?	No
Next Decision Date	03/31/2021

A blue circle highlights the "Is a Progress Report Required?" and "Is an Activity Review Required?" rows. Two blue arrows point from the "Yes" and "No" cells to the right.

Figure 4

If, as a result of the ACCME's decision, your organization is required to submit a progress report, please download the [ACCME Guide to the Progress Report Process](#) and the [ACCME Progress Report Milestones For November 2019 Cohort Decisions Requiring a Progress Report](#) document for information about the timeline and requirements of the ACCME's progress report process.

Your Accreditation Responsibilities

The ACCME expects all accredited providers to take an active, ongoing role in maintaining compliance with accreditation requirements, fulfilling their responsibilities, and improving their CME programs during their accreditation terms.

- Maintain compliance with [accreditation rules](#).
- Fulfill your [year-end reporting requirements](#) in the Program and Activity Reporting System (PARS).
- Pay accreditation fees in a timely manner, according to [ACCME policy](#).
- [Inform us of organizational changes](#).
- If requested, provide evidence of your [continuous compliance](#) with the accreditation requirements.

Accredited Provider Mark

Providers accredited within the ACCME System (providers directly accredited by the ACCME and those accredited by ACCME Recognized Accreditors) are welcome to use the ACCME Accredited mark for educational and identification purposes, and in [announcements related](#) to their attainment of ACCME accreditation. While the mark may be resized, the original aspect ratio should be maintained (it should not be stretched or condensed in a way that causes it to become distorted). Except for resizing, no other changes can be made. Please refer to the [ACCME's policy on logo usage](#) before downloading or using these images.