



AMA and ACCME Announce Call for Comment on Proposal to Align Credit and Accreditation Systems

Proposal to simplify and align requirements aims to encourage flexibility and innovation in continuing medical education

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The American Medical Association (AMA) and the Accreditation Council for Continuing Medical Education (ACCME[®]) are today opening a [call for comment](#) on their proposal to simplify and align their expectations for accredited continuing medical education (CME) activities that offer the *AMA PRA Category 1 Credit*[™]. **Comments will be accepted through May 25, 2017, at 5 pm CDT.**

Reflective of the AMA and ACCME's shared values, the proposal for alignment is designed to encourage innovation and flexibility in accredited CME while continuing to ensure that activities meet educational standards and are independent of commercial influence. The proposal is aimed at allowing accredited CME providers to introduce and blend new instructional practices and learning formats that are appropriate to their learners and setting, provided they abide by the seven core requirements described in the proposal.

The core requirements outlined in the proposal are aligned with ACCME requirements—and do not represent any new rules for accredited providers. However, the AMA has simplified and reduced its learning format requirements to provide more flexibility for CME providers. To further encourage innovation in educational design and delivery, CME providers may design and deliver an activity that uses blended or new approaches to driving meaningful learning and change. For these activities, the provider can designate credits on an hour-per-credit basis using their best reasonable estimate of the time required to complete the activity. Additional details about the "Proposed Simplification of Requirements for Accredited CME Activities Certified for *AMA PRA Category 1 Credit*[™]" can be found appended to this news release.

"We celebrate this collaborative effort with our AMA colleagues and the opportunity to advance the evolution of CME. This proposal reflects the values of our CME providers and supports their aspirations to engage in education that makes a meaningful difference in clinician practice and patient care. We want to do everything we can to encourage innovation and experimentation in CME, so that educators are free to respond nimbly to their learners' changing needs while staying true to core principles for educational excellence and independence. We thank accredited CME providers for their participation in this process and look forward to their feedback on our proposal and to our continued work together to drive quality in postgraduate medical education and improve care for the patients and communities we all serve," said **Graham McMahon, MD, MMSc, President and CEO, ACCME.**

“Based on the feedback we received from the CME community during listening sessions, we recognize the need to better align the AMA and ACCME’s requirements for CME accreditation and reaccreditation,” said **Susan Skochelak, M.D., AMA Group Vice President for Medical Education**. “We believe that our proposal will support the evolution of CME to better meet the needs of educators, physicians, and the patients they serve. We want to hear from the CME community to make sure the proposal addresses their feedback. We encourage CME providers to submit their comments to the proposal so we can continue to evolve to a more streamlined system that meets their needs.”

In addition to collaborating on the proposal, the AMA and ACCME produced a [shared glossary of terms and definitions](#) to help clarify terminology for accredited CME providers and learners. Developed both as part of their alignment efforts and in response to requests from CME providers, the AMA is also seeking feedback on the glossary during the comment period.

Following the call for comment period, the AMA and ACCME will analyze the feedback and determine whether to make modifications to the proposal and glossary. Once finalized, the resulting new process will be integrated into the existing accreditation and reaccreditation processes.

The alignment proposal was developed by the Bridge Committee, which was formed by the AMA and ACCME to support their collaborative realignment efforts. The committee—made up of staff and volunteers from both organizations—serves in an advisory capacity on issues related to alignment and the evolution of the two complementary systems of credit and accreditation.

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More Information

- “Proposed Simplification of Requirements for Accredited CME Activities Certified for *AMA PRA Category 1 Credit*™ is appended to this news release.
- Respond to the call for comment [here](#).
- [Download the shared glossary](#).
- CME providers: please contact info@accme.org for more information.

About the AMA

The American Medical Association is the premier national organization providing timely, essential resources to empower physicians, residents and medical students to succeed at every phase of their medical lives. Physicians have entrusted the AMA to advance the art and science of medicine and the betterment of public health on behalf of patients for more than 170 years. For more information, visit ama-assn.org.

About the ACCME

The Accreditation Council for Continuing Medical Education (ACCME®) is a nonprofit organization based in Chicago, responsible for accrediting institutions that offer continuing medical education (CME) and for recognizing state medical societies as accreditors of local CME programs.

The ACCME sets standards for CME that reflect the values of the educator community and aim to accelerate learning, inspire change, and champion improvement in healthcare. These standards ensure that accredited CME is designed to be relevant to clinicians' needs, evidence-based, evaluated for its effectiveness, and independent of commercial influence. Through participation in accredited CME, clinicians and teams drive improvement in their practice and optimize the care, health, and wellness of their patients.

Accredited CME facilitates engagement with physicians and healthcare teams where they live, learn, and work. There are nearly 1,900 accredited CME providers within the ACCME System, across the country and internationally, representing a range of organizations including medical schools, hospitals/health systems, government/military agencies, specialty societies, and insurance/managed-care companies. Accredited providers offer more than 148,000 activities each year, comprising more than one million hours of instruction and including more than 26 million interactions with physicians and other healthcare professionals.

For more information, visit www.accme.org. You can also follow the ACCME on [Twitter](#), [LinkedIn](#), and [Facebook](#).

AMA Media Inquiries

Kelly Jakubek
312-464-4443
Kelly.Jakubek@ama-assn.org

ACCME Media inquiries

Tamar Hosansky
312-245-4066
thosansky@accme.org

Patty Harrison
312-245-4054
pharrison@accme.org

Accredited Provider Inquiries

info@accme.org

PROPOSED SIMPLIFICATION OF REQUIREMENTS FOR ACCREDITED CME ACTIVITIES CERTIFIED FOR *AMA PRA CATEGORY 1 CREDIT™*

Based on feedback from the community and a comprehensive review of the *AMA PRA Category 1 Credit™* requirements, the American Medical Association (AMA) Council on Medical Education and Accreditation Council for Continuing Medical Education (ACCME®) are proposing an alignment of their expectations for accredited CME activities certified for *AMA PRA Category 1 Credit™*. Reflective of the AMA and ACCME's shared values, the proposal for alignment is designed to encourage innovation and flexibility, while ensuring that activities are independent and educationally appropriate. Accredited CME providers can introduce and blend new instructional practices and formats appropriate to their learners and setting, as long as they abide by the core requirements. CME providers may designate an activity format as "other" if it does *not* fall into one of the established format categories, without asking permission from the AMA. For these activities, providers can designate credits on an hour-per-credit basis, using their best reasonable estimate of the time required to complete the activity.

This proposal contains the following two elements:

- A. Core requirements for activities
- B. A limited number of format-specific requirements

A. Core Requirements for Activities

Please note: The core requirements are aligned with ACCME requirements and do not represent any new rules for accredited providers.

1. The CME activity must conform to the AMA/ACCME definition of CME.
2. The CME activity must address an educational need (knowledge, competence or performance) that underlies the professional practice gaps of that activity's learners.
3. The CME activity must present content appropriate in depth and scope for the intended physician learners.
4. When appropriate to the activity and the learners, the accredited provider should communicate the identified educational purpose and/or objectives for the activity, and provide clear instructions on how to successfully complete the activity.
5. The CME activity must utilize one or more learning methodologies appropriate to the activity's educational purpose and/or objectives.
6. The CME activity must provide an assessment of the learner that measures achievement of the educational purpose and/or objective of the activity.
7. The CME activity must be planned and implemented in accordance with the ACCME Standards for Commercial Support: Standards to Ensure Independence in CME Activities.

B. If the learning modality is an enduring material, journal-based CME, or performance improvement CME, the accredited provider must ensure the following format-specific requirements are met:

1. Enduring materials will provide access to appropriate bibliographic sources to allow for further study.
2. Journal-based CME will include one or more peer-reviewed articles.

3. Performance improvement CME will:
- have an oversight mechanism that assures content integrity of the selected performance measures. If appropriate, these measures should be evidence-based and well-designed.
 - provide clear instruction to the physician that defines the educational process of the activity (documentation, timeline).
 - provide adequate background information so that physicians can identify and understand the performance measures that will guide their activity and the evidence behind those measures (if applicable).
 - validate the depth of physician participation by a review of submitted PI CME activity documentation.
 - consist of the following three stages:
 - Stage A: learning from current practice performance assessment. Assess current practice using the identified performance measures, either through chart reviews or some other appropriate mechanism.
 - Stage B: learning from the application of PI to patient care. Implement the intervention(s) based on the results of the analysis, using suitable tracking tools. Participating physicians should receive guidance on appropriate parameters for applying the intervention(s).
 - Stage C: learning from the evaluation of the PI CME effort. Reassess and reflect on performance in practice measured after the implementation of the intervention(s), by comparing to the original assessment and using the same performance measures. Summarize any practice, process and/or outcome changes that resulted from conducting the PI CME activity.