



ABQAURP Continuing Medical Education (CME) Policy

General Information

Established in 1977, the American Board of Quality Assurance and Utilization Review Physicians, Inc. (ABQAURP) is a 501 (c)(6) non-profit organization. Through its ultimate goal to improve the quality of health care, ABQAURP is dedicated to providing health care education and certification for physicians, nurses, and other health care professionals. Continuing Medical Education (CME) in new research, identified problem areas in clinical practice, quality assurance, utilization management, risk management/patient safety, case management and managed care fields are eligible for continuing education (CE) credit consideration.

ABQAURP Mission Statement

The primary purpose of the American Board of Quality Assurance and Utilization Review Physicians, Inc. (ABQAURP) is to improve the overall quality of health care that is provided to the consuming public.

CME Mission Statement

The Continuing Medical Education (CME) program will be continually reviewed and improved by incorporating traditional adult educational methods with non-educational strategies. The program will focus on barriers to physician change and develop activities in the context of desirable physician attributes as described in standards such as the Institute of Medicine (IOM) and Accreditation Council for Graduate Medical Education (ACGME) competencies.

Purpose

The CME and Continuing Nursing Education mission of the ABQAURP is to develop and provide educational opportunities for medical and health care professionals. Innovative courses provide important updates and practical tools for all health care professionals. These programs ensure that participating health care professionals receive up-to-date information on the ever-changing health care environment.

Content Area

The CME program shall address content related to topics that encompass Quality Assurance/Management, Utilization Review, Insurance & Managed Care, Workers' Compensation, Clinical Resource Management, Credentialing & Privileging, Risk Management, Prevention of Medical Errors, Case Management, Regulatory Environment and Patient Safety.

Target Audience

Medical Directors, Physicians from all Specialties, Nurses, Case Managers, Claims Medical Advisors, Directors of QM/UM, Risk Managers, Hospital Administrators and CEO's, Claim Specialist and all other Health Care Professionals.

Activity Types

CME is delivered via live conferences, enduring materials and Internet programs. ABQAURP participates in jointly sponsored programs with select non-accredited sponsors when the program is consistent with the CME mission and falls within the Accreditation Council for Continuing Medical Education (ACCME) guidelines for CME.



Expected Results

By participating in ABQAURP CME programs, participants will:

- Improve the efficiency, effectiveness and quality of health care delivered to the patients to improve the overall clinical outcome;
- Provide a national standard for education, certification and recertification in health care process and outcomes assessment and management to ensure current knowledge and ongoing learning skills for these individuals as practitioners and reviewers;
- Encourage CME participants to put into practice knowledge learned and assess the impact.

The CME program objective is to effectively improve and/or change competence, performance-in-practice, or patient outcomes through the quality of care that physicians and other health care professionals provide. The goal is to develop CME that address the professional practice gaps of the learner and contributes to quality, patient safety, and practice improvement, based on valid content, and is independent of commercial interests.

Quality and Continuing Education

ABQAURP is recognized by the Accreditation Council for Continuing Medical Education (ACCME) as a quality educational provider. This accreditation allows us to assign AMA PRA Category 1 credits™ to educational programs. ACCME accreditation seeks to assure the medical community and the public that ABQAURP provides physicians with relevant, effective, practice-based continuing medical education that supports US health care quality improvement.

The ACCME employs a rigorous, multilevel process for evaluating institutions' continuing medical education programs according to the high accreditation standards adopted by all seven ACCME member organizations. These organizations, which represent the profession of medicine, are: the American Board of Medical Specialties, the American Hospital Association, the American Medical Association, the Association for Hospital Medical Education, the Association of American Medical Colleges, the Council of Medical Specialty Societies, and the Federation of State Medical Boards.

ABQAURP is responsible for ensuring compliance with all ACCME's Accreditation requirements and policies, Standards for Commercial Support, and the American Medical Association (AMA) tenets. The AMA and other ACCME member organizations have entrusted the ACCME with maintaining the quality of CME in the United States.

ABQAURP is approved by the Florida Board of Nursing to provide nursing contact hours (CEs); transferable to all 50 states and Washington D.C. Provider # 50-94.

CME Policy revision date August 2015



A. Educational Planning

All activities will be planned and implemented in full compliance with the accreditation requirements and policies established by the ACCME. ABQAURP’s CME staff and committee members are responsible for ensuring that each activity meets the ACCME’s requirements.

Category 1 Credit will be awarded for activities that meet the definition of CME and the requirements for **AMA PRA Category 1 Credits™** as set forth by the American Medical Association (AMA) Physician's Recognition Award (PRA). CME consists of 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 health care to the public.

CME providers (i.e., organizations that produce CME programs for physicians) that are accredited by the ACCME, or state medical societies recognized by the ACCME, are authorized to certify CME activities for **AMA PRA Category 1 Credit™** in accordance with PRA guidelines.

All activities must be planned utilizing the ABQAURP CME Planning Document and Policies following all ACCME guidelines. Detailed instructions are provided in the Planning Document.

Identifying the Educational Gap(s)

Educational Gaps are determined through a comparison of **current practice** and the **best available standard(s) of practice**.

CURRENT PRACTICE is the existing level of knowledge, competence or performance of the learner for the identified disease state, patient safety issue, ethical/cultural issue, etc.

BEST PRACTICE is the best evidenced-based data or highest standard of care.

PROFESSIONAL PRACTICE GAP(S) is the difference between current and best practice.

EDUCATIONAL GAPS can be categorized into 4 domains; based on your gap analysis above, state the domain(s) to which this activity applies. Change in knowledge only is NOT an acceptable outcome for CME.

Knowledge (understanding)

Competence (understanding + strategy about how to implement in practice)

Performance (understanding + strategy + implementation in practice)

Patient Outcomes (understanding + strategy + implementation in practice + impact on patient or healthcare)

Specifying the Pertinent ABMS/ACGME, IOM and IPEC Competencies

The ACCME has determined that CME providers must specify which competencies are most relevant to the identified gap(s).

Needs Statement

Once the professional practice gaps have been determined and linked to the core competencies, the next step is to translate this into the needs statement for the activity. State the educational need that will drive the development of the activity objectives and ultimately the outcomes measurement.

CME Activities must be designed for a potential outcome of changing physician competence, performance and/or patient health. Change in knowledge only is NOT an acceptable outcome for CME.

Learning Objectives

Based on the educational gap(s) stated above, list overall objectives that are measurable and contribute to a current

or potential impact in professional practice and/or patient health [i.e. each objective should include a verb that describes a physician action in practice (and not what the teacher will teach). For example: Employ interdisciplinary care coordination strategies to reduce hospital readmissions and improve patient care. See below for the guide to writing performance-based learning objectives.

Guide to Writing Performance-Based Learning Objectives

- Start with a measurable verb followed by a description of the action that the **learner** will take.
- Use the top four levels of Bloom's Taxonomy or the top three levels of Webb's Depth of Knowledge Levels (DOK) in the selection learning objectives.
- Be careful when using verbs such as *describe, explain, review, or summarize*. They imply that the learner will communicate verbally with someone, these verbs should be used in the context of communicating with the patient



Consolidated Bloom's Taxonomy (updated by Anderson & Krathwohl) & Webb's Depth of Knowledge (DOK) Taxonomies						
Bloom's Level 1: Knowledge Remembering	Bloom's Level 2: Comprehension Understanding	Bloom's Level 3: Application	Bloom's Level 4: Analysis	Bloom's Level 5: Synthesis Creating	Bloom's Level 6: Evaluation Evaluating	
DOK Level 1 Activities (Recall):		DOK Level 2 Activities (Skill/Concept):		DOK Level 4 Activities (Extended Thinking):		
<p>Example:</p> <p>Recognizing or recalling knowledge from memory.</p> <p>The ability to grasp or construct meaning from material.</p> <p>Describe treatment options.</p>	<p>Example:</p> <p>The ability to use learned material, or to implement material in new and concrete situations.</p> <p>Solve routine multiple-step problems.</p> <p>Identify patterns in behavior.</p>	<p>Example:</p> <p>Support ideas with details and examples.</p> <p>Breaking material or concepts into parts, determining how the parts relate or interrelate to one another or to an overall structure or purpose.</p> <p>When one is analyzing he/she can illustrate this mental function by creating spreadsheets, surveys etc.</p>	<p>Example:</p> <p>Analyze and synthesize information from multiple sources.</p> <p>Making judgments based on criteria and standards through checking and critiquing.</p> <p>Creating requires users to put parts together in a new way or synthesize parts into something new and different a new form or product.</p>			
<p>Verbs</p> <p>Arrange Calculate Define Describe Identify Label List Match Measure Memorize Name Quote Recall Recite Recognize Repeat Report Review State Tabulate Tell Use</p>		<p>Verbs</p> <p>Categorize Cause/Effect Classify Collect Compare Construct Determine Display Distinguish Estimate Graph Identify Patterns Infer Interpret Make Observations Modify Organize Perform Predict Relate Separate Show Summarize</p>		<p>Verbs</p> <p>Apprise Assess Cite Evidence Construct Coordinate Care Critique Develop a Diagnose Differentiate Draw Conclusions Explain Concepts Formulate Hypothesize Improve Investigate Prescribe Revise Solve a problem Use Concepts to</p>		<p>Verbs</p> <p>Analyze Apply Concepts Connect Choose Confirm Counsel Create Critique Design Determine Establish Evaluate Integrate Manage Prove Rate Recommend Select Synthesize Validate Verify</p>



B. Joint Providership

Joint Providership (JP) is a process in which an accredited provider and a non-accredited organization collaborate to plan and implement an accredited continuing education (CE) activity. When a CE activity is consistent with ABQAURP's educational mission and goals on a local, regional or national scope, ABQAURP will consider becoming the accredited provider through a JP relationship.

ABQAURP is an accredited Continuing Medical Education (CME) provider by the Accreditation Council for Continuing Medical Education (ACCME) and can provide nursing contact hours (CE) through the Florida Board of Nursing. ABQAURP can also assist with obtaining other forms of CE credit (i.e. ACPE contact hours, AAFP credit, AAPA credit, CCMC clock hours, etc.) for an additional fee.

As the accredited provider, ABQAURP is required to demonstrate direct involvement in all JP activities. A member of ABQAURP's staff and CME committee must be involved from the initial stages to approve preliminary accreditation and ensure all requirements are in compliance, monitoring the activity's planning, implementation and outcomes measurement.

CME Planning Document – Joint Providership Agreement

All joint providers must enter into an agreement with ABQAURP in order to establish a JP relationship. Non-accredited providers may enter into an agreement either by:

- Submitting a CME Planning Document for one accredited activity AND a previously approved JP Attestation Form* describing your organizational corporate structure, OR
- Signing a long-term contract for multiple accredited activities AND a previously approved JP Attestation Form* describing your organizational corporate structure.

The accredited provider and the non-accredited provider have control of CME needs identification, determination of educational gaps/objectives, selection and presentation of content, selection of all persons and organizations in a position to control the content of the CME, selection of educational methods, and evaluation of the activity.

To maintain educational independence from commercial interests, a commercial interest **CANNOT** have control/influence over the content of a CME activity. ABQAURP will **NOT** enter into a Joint Provider relationship with a commercial interest.

A **commercial interest** is "any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients."

* **The Joint Provider Attestation Form** must be completed by the joint provider prior to CME planning submission to ensure the provider can be an approved applicant to jointly provide activities with ABQAURP. Once the attestation form has been independently reviewed and approved, the CME planning document may be completed for further review.

The attestation form will demonstrate if the provider is owned and/or controlled by a parent or sister company of a commercial interest. ABQAURP cannot partner with any provider who has ties to a commercial interest.

It is the responsibility of the joint provider to notify ABQAURP immediately of any commercial interest changes, company buyout, change in corporate entity name, which may occur at any time, resulting in a change to their company status. Each provider will also be required to submit an annual attestation form.



* JOINT PROVIDER ATTESTATION FORM

The American Board of Quality Assurance and Utilization Review Physicians (ABQAURP) is committed to ensuring that all jointly provided accredited educational activities are planned and implemented in accordance with the Accreditation Council for Continuing Medical Education (ACCME) Accreditation requirements, policies and Standards for Commercial Support. The aim is to provide physicians and other healthcare providers with clinically relevant education that promotes improvements in the quality of health care and is independent of the control of commercial interests. As part of this commitment, ABQAURP does not jointly provide CME activities with commercial interests, which are defined by the ACCME as any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients.

Standard 1.2 of the ACCME Standards for Commercial Support states that "a commercial interest cannot take the role of non-accredited provider in a joint providership relationship." Therefore, it is the responsibility of ABQAURP to ensure that all non-accredited organizations with which we collaborate are not commercial interests, owned or controlled by a commercial interest. To facilitate the determination of your eligibility to enter into a joint providership relationship with ABQAURP, we ask that you complete the following questionnaire and return it for review.

I. Organization

Name _____ Tax ID _____
Legal Entity Name _____
Type of Organization _____ Date Established _____
City, State, ZIP _____
Telephone _____ Fax _____ Website _____
Contact _____ E-Mail _____

II. Mission

A. Is your organization involved in providing commercial or other company-directed activities or services for pharmaceutical companies, medical device manufacturers, nutraceutical or herbal supplement companies, etc., including, but not limited to, advertising/promotional services, publication planning, speaker bureau management, speaker training, and advisory board/consultant meeting planning?

[] Yes [] No

B. Please provide a brief overview of your organization or attach a copy of your mission statement.

[Empty text box for mission statement overview]



III. Corporate Structure

A parent organization is defined as one that owns and fiscally controls another organization. In that context, do you have a parent organization?

- Yes No

A. If yes, please identify your parent organization.

Name _____ Tax ID _____
Address _____
City, State, ZIP _____
Website _____

B. Please provide a brief overview of your parent organization or attach a copy of their mission statement.

C. The ACCME defines a commercial interest as “**any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients.**” Do you believe that your parent organization is a commercial interest as defined by the ACCME?

- Yes No N/A

D. Is your organization part of a larger family of companies that is affiliated with any other organization(s) (i.e. do you have any sister companies)?

- Yes No

E. Is any organization (sister company) with which you are affiliated involved in providing commercial or other company-directed activities or services for pharmaceutical companies, medical device manufacturers, nutraceutical or herbal supplement companies, etc., including but not limited to advertising/promotional services, publication planning, speaker bureau management, speaker training, and advisory board/consultant meeting planning?

- Yes [*complete section IV, Corporate Firewalls*]
 No [*proceed to section V, Attestation*]



IV. Corporate Firewalls

If any affiliate (sister company) or subsidiary of your organization is involved in providing commercial or other company-directed activities for a commercial interest, you must have a corporate firewall in place to maintain independence in the development of content and implementation of CME activities. Therefore, please verify that your organization has guidelines and firewalls in place to provide for separation of CME staff and promotional staff (e.g. independent, non-overlapping management, distinct and separate staff responsible for the development of educational content, separate physical locations, different telephone and fax numbers and Internet domains for e-mail addresses, individual computer networks, etc.).

A. Please describe the elements of your firewall.

B. Attach an organizational chart that depicts how your organization and management and content-related personnel are distinct and separate from those that are involved in providing commercial or other company-directed activities for a commercial interest.

V. Attestation

A. I hereby certify that the above information is correct and that the American Board of Quality Assurance and Utilization Review Physicians will be immediately notified if any of the above information changes.

Signature _____ Date _____

Print Name _____ Title _____

REVIEW AND ACCEPTANCE
This organization has been reviewed and approved as a joint provider of CME activities.

Signature: _____
Deborah Naser
CME Coordinator



C. Planning Committee

Selecting your planning committee is an essential component to the success of your activity. A well-appointed CME committee including MDs, RNs, and other health care providers will ensure a balanced and interdisciplinary approach to your CME activity.

For all CME activities, ABQAURP must have a list of all planning committee members with full contact information, email addresses, curriculum vitae (CV) and/or biographical sketch, along with a completed Conflict of Interest Disclosure Forms. This documentation must be received from **everyone** in a position to control the content of an educational activity before the content is developed.

Planning committee members may **NOT** be “employees” of a commercial interest.

The ACCME defines “relevant financial relationships” as those in which an individual (including spouse/domestic partner) **has**:

A relevant financial relationship (any amount) **with a commercial interest** (any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients) in the past 12 months, whether the relationship has now ended or is currently active.

The ACCME has not set a minimum dollar amount for relationships to be significant. Inherent in any amount is the incentive to maintain or increase the value of the relationship.

Conflict of Interest: Circumstances create a conflict of interest 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.

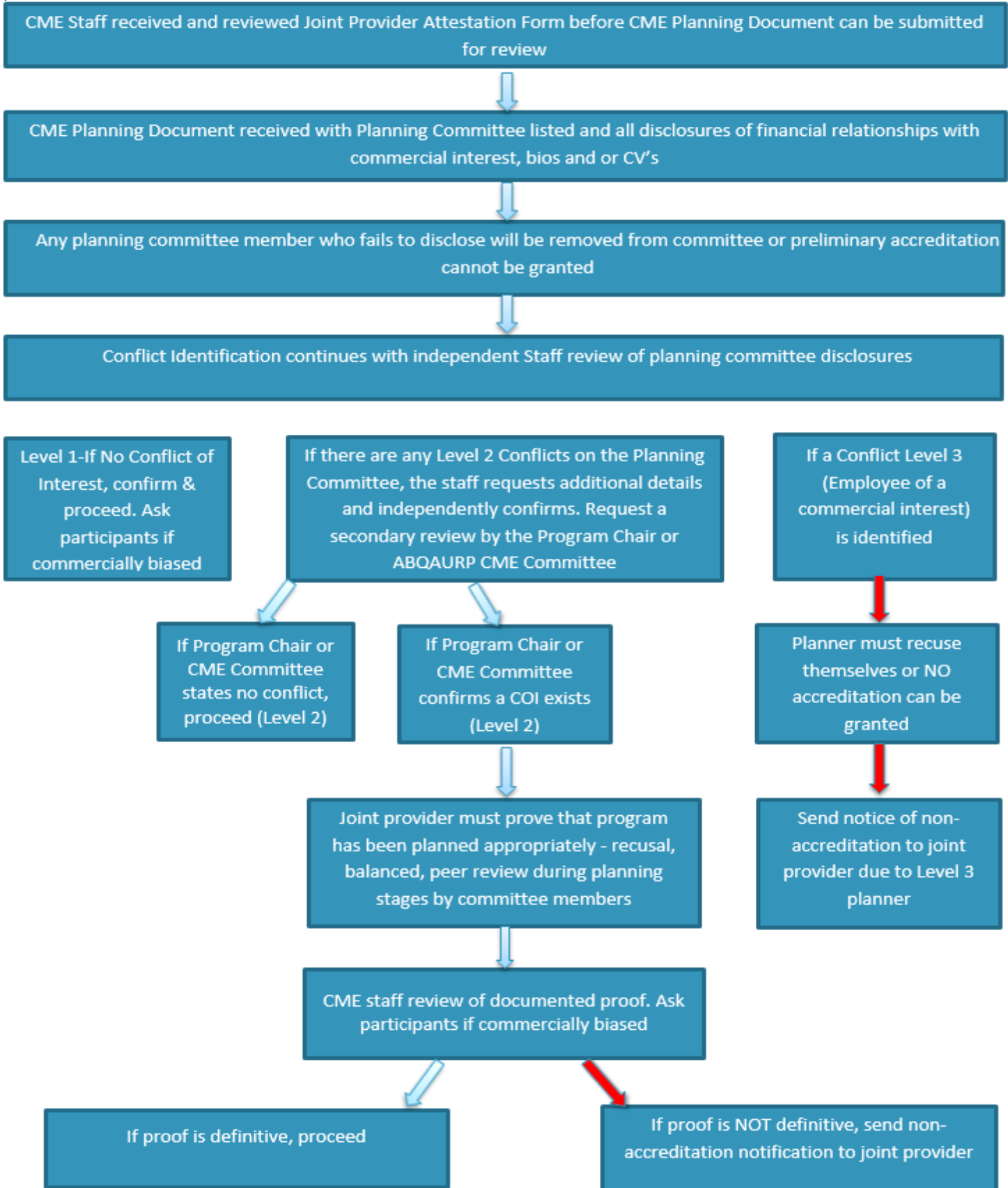
The ACCME considers financial relationships to create actual conflicts of interest in CME when individuals have both a financial relationship with a commercial interest and the opportunity to affect the content of CME about the products or services of that commercial interest.

Anyone refusing/neglecting to provide a completed disclosure form cannot have control of, or responsibility for, the development, management, presentation, or evaluation of the CME activity and **will be required to withdraw in order to maintain accreditation.**

Refer to ABQAURP Policy - Planner Conflict Identification and Management Chart**



**** ABQAURP PLANNER CONFLICT IDENTIFICATION AND MANAGEMENT CHART – 2015**





D. Faculty Information and Disclosure

For all CME activities, ABQAURP must receive a full list of all faculty employed (or contracted) by your organization that are in a position to control the content of this Continuing Medical Education (CME). Everyone, herein known as faculty, who is in a position to control the content of an educational activity throughout the planning and delivery phases must disclose to us the nature of any relationship with a commercial interest as defined by ACCME. This includes all physicians and non-physician employees involved in planning, as well as authors, presenters, faculty and their spouse/partner. **Employees of a commercial interest cannot be planners/faculty nor have any control of the content of an ACCME-accredited activity.**

Also required is a current curriculum vitae (CV) and/or biographical sketch (bio), full mailing information, telephone number and email address.

Faculty that refuses to disclose relevant financial relationships will be disqualified from the CME/CE activity. **(Note: No response is considered a refusal and the session(s) will not be accredited.)**

ABQAURP will use the Conflict of Interest & Risk Management Tool to identify any faculty/author conflicts of interest, and determine the appropriate mechanisms through our conflict identification and management chart to resolve the conflict.

If the conflict of interest cannot be resolved or was not disclosed, then the session will lose accreditation.

All presentations must be reviewed by ABQAURP prior to the commencement of the CME/CE activity. The Joint Provider must submit them to ABQAURP a minimum of (30) days prior to the CME/CE activity to identify and resolve any potential conflict(s)/bias(s).

If a resolution of the conflict is not achieved, the presentation will not be accredited. Once a speaker's presentation has been reviewed and approved, the presentation may not change by that speaker or the non-accredited provider unless sent to ABQAURP for review.



ABQAURP CONFLICT OF INTEREST DISCLOSURE FORM

ABQAURP Planner/Faculty Guidelines for CME Presentations

As an accredited provider of the Accreditation Council for Continuing Medical Education (ACCME), ABQAURP must ensure that all CME programs meet all ACCME accreditation requirements and policies while maintaining the highest standards and meeting expectations of its audience.

Below are planner/faculty (herein referred to as "faculty") guidelines to assist in developing the highest quality educational content and materials. These guidelines also ensure compliance with ABQAURP's CME policies.

Scientific Integrity

Individuals giving presentations at CME activities should follow these guidelines to ensure materials are evidence-based, objective, and balanced:

- Presentations must be free of commercial bias for or against any product or services.
- Presentations must give a balanced view of therapeutic options. Faculty use of generic names will contribute to this impartiality. If trade names are used, those of several companies should be used to avoid bias.
- Presentations that include products must present objective information about those products, based on scientific methods generally accepted in the medical community.
- Information presented must conform to the generally accepted standards of experimental design, data collection and analysis.
- If unapproved uses of a product or service are discussed, the audience must be informed.
- The slides included in the presentation should reflect original thoughts of the speaker.
- It is the responsibility of the faculty to obtain written permission for print inclusion of material that is under copyright protection.
- Material presented from clinical trial results must include information on study design, subject selection and participation/compliance, therapeutic agents administered including source/dosage, adverse effects encountered, funding source, etc.
- Faculty must offer a balanced presentation of all available clinical trial data that is pertinent to the topic.
- The data presented from clinical trials should be from peer-reviewed publications.

Definition and Disclosure of Conflicts of Interest

In order to comply with the ACCME Standards for Commercial Support regarding relationships with commercial interests, **everyone** in control of CME content must be familiar with current disclosure policy and procedures:

- Faculty (including spouse/partner) must disclose to ABQAURP any relevant financial relationships with a commercial interest - **A commercial interest is any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients.**
- The ACCME does not consider **providers of clinical service** directly to patients to be commercial interests - unless the provider of clinical service is owned, or controlled by, an ACCME-defined commercial interest.
- The ACCME **exempts** non-profit or government organizations, non-health care related companies, liability and health insurance providers, group medical practices, for-profit hospitals, rehabilitation centers, nursing homes, blood banks, and diagnostic laboratories. ACCME reserves the right to modify this definition and this list of eligible organizations from time to time without notice.
- Planner's completed ABQAURP Conflict of Interest Disclosure Forms must be provided to ABQAURP **before** planning of the activity begins to ensure no conflict of interest or bias exists.
- All faculty at CME events are required to complete and return the ABQAURP Conflict of Interest Disclosure Form along with biographical data or curriculum vitae (CV) to validate them as a speaker. This completed form must be received a **minimum** of 30 days prior to the activity to allow sufficient time to resolve conflicts of interest. Not all conflicts of interest can be resolved. **Faculty that are employees of, or have any full time appointment with, a commercial interest will not be approved as faculty for CME activities.**



- At the beginning of your presentation, (i.e., title slide), please provide a disclosure statement. Disclosure to the CME audience also includes if the faculty has "nothing to disclose in regard to the content of this presentation".
- Preliminary presentations are required a **minimum** of 30 days in advance to resolve any conflicts of interest. Final presentations are required a **minimum** of 14 days before the conference. CME will be removed from the session/activity if these deadlines are not met.

Copyright

CME presenters should keep in mind that while it is legal to copy another's work for inclusion in a PowerPoint presentation, these slides must not be printed out and distributed.

- This legislation covers all information in print and electronic (CD-ROM, Internet) audio and video formats.
- The distribution of complete journal or other print articles as handouts are generally subject to a license fee for which the presenter would be responsible.
- Providing a bibliographic reference or link to this article is not subject to a license fee and, therefore, is preferable.

Slides

- Educational material (slides, abstracts, handouts, etc.) **cannot** include commercial company and product logos.
- Do not use identifiable photographs of patient identifiers. Remove or cover all patient identifiers from laboratory studies, x-rays, imaging studies, slides, etc.
- University or hospital logos may be included on the first slide.

Handouts

Handouts are highly valued by participants because they reinforce and clarify verbal information and aid recall. Here are some things to consider when preparing handouts:

- PowerPoint slides make effective handouts when they are printed in black and white with the background removed.
- PowerPoint slides may be printed with 3, 4, or 6 slides per page depending on the number of slides and the density/clarity of material on the slides.
- Include important ideas and significant information from your presentation.
- Copyright guidelines apply to all educational materials. ABQAURP reserves the right to edit material that will breach copyright laws.

CME Credit for Presenters

Faculty can earn CME credit for the learning that occurs in the preparation of an original presentation as part of an *AMA PRA Category 1 Credit™* live activity. The formula for granting such credit is 2 *AMA PRA Category 1 Credits™* per participant credit (or a 2:1 ratio). Credits are awarded based on time metrics and can be designated in 15 minute increments. No credits are given for repeat presentations of the same material, it is the responsibility of the physician to only claim the credit once, and credit may not be simultaneously earned as both a presenter and learner. Physicians may claim this credit directly from the AMA by completing the Direct Credit Application <http://www.ama-assn.org/resources/doc/cme/x-pub/direct-credit-application.pdf>.

By signing the ABQAURP Conflict of Interest Disclosure Form, I agree to ABQAURP's guidelines for CME presentations.



ABQAURP CONFLICT OF INTEREST DISCLOSURE FORM

Complete all applicable fields and return the signed and dated form by email to Deb Naser dnaser@abqaurp.org or fax to 727-569-0195.

Table with 4 columns: Name & Employer, Activity & Presentation Title, Activity/Conference Host, Date(s) of Activity.

Purpose: The Accreditation Council for Continuing Medical Education (ACCME) requires CME providers identify and resolve all potential conflicts of interest of faculty prior to a CME activity...

Definition: "Relevant financial relationships" are those in which an individual (including spouse/domestic partner) has: A financial relationship (any amount) with a commercial interest...

Check or Circle one or more: Presenter Moderator Panel Planner Reviewer Coordinator

Under the ACCME Standards for Commercial Support, everyone who is in a position to control the content of an educational activity must disclose all financial relationships with any commercial interest.

In the past 12 months, did you (or your spouse/partner) have a relevant financial relationship with any commercial interest? Check or Circle one. YES NO

If No - Skip to declaration

If Yes - List Commercial Interest, what was received, and for what role. Employees of a commercial interest cannot be planners/faculty nor have any control of the content of an ACCME accredited activity.

Table with 4 columns: Check Appropriate Boxes, Commercial Interest (company name, institution, etc.), What was received? (within the past 12 months), For what role? (i.e. management position, inventor, consulting, speaking/teaching, etc.)

DECLARATION

- 1. I will uphold academic standards to insure balance, independence, objectivity, and scientific rigor in my role in the planning, development or presentation of this CME activity.
2. I agree that my presentation will be free from the control of a commercial interest.
3. I agree to comply with the requirements to protect health information under the Health Insurance Portability & Accountability Act of 1996 (HIPAA).
4. I will inform learners of all relevant financial relationships or the lack thereof before my presentation begins.

Signature _____ Date _____

This disclosure is intended to protect all parties involved from any potential conflict of interest that may arise. If your disclosure status changes prior to the activity, you must submit a revised Disclosure Form.

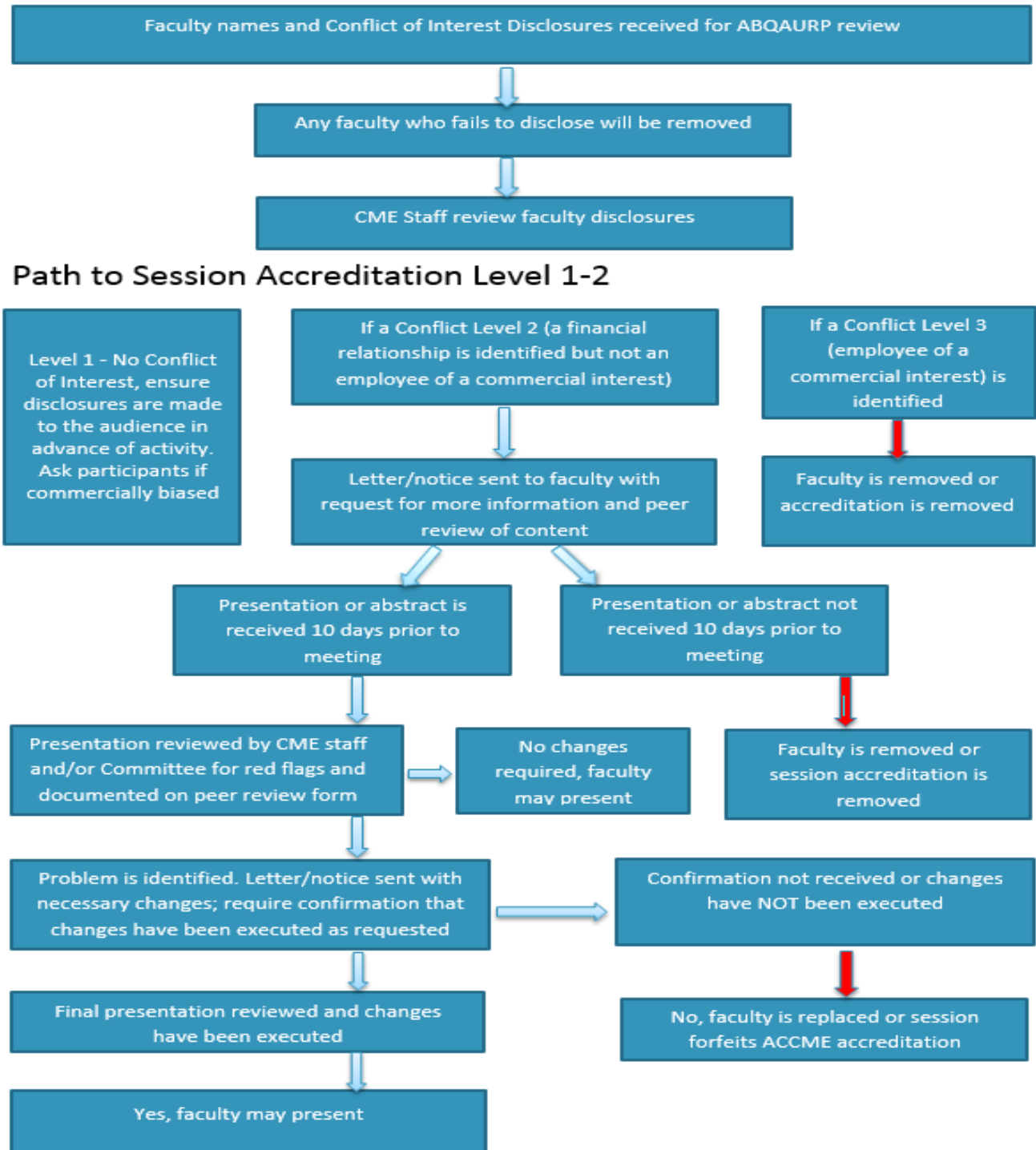
ABQAURP CME Office Signature (confirmed no relevant financial relationship or the conflict of interest was resolved):

CME Office Signature: _____ Role: _____ Date: _____

E. Conflict Identification and Management

ABQAURP's CME staff and/or CME committee will review the faculty disclosures utilizing the Faculty Conflict Identification and Management Chart below. If a conflict exists, we will attempt to resolve this conflict, unless they are an EMPLOYEE of a commercial interest.

ABQAURP FACULTY CONFLICT IDENTIFICATION AND MANAGEMENT CHART – 2015





The CME staff and/or CME committee will determine if the faculty has a conflict using the Conflict of Interest & Risk Management Tool. If there is a conflict, the individual will be instructed as to how to resolve the conflict if possible.

ABQAURP Conflict of Interest & Risk Management Tool

Level of Potential Conflict	Action by ABQAURP	Joint Provider Actions
<p>Level 1: Nothing to disclose</p>	<p>Faculty-planner acknowledged adherence of the following CME requirements:</p> <ul style="list-style-type: none"> Conflict of interest Content validation Trademark or brand names prohibited Unapproved “off-label” usage HIPAA laws are observed Copyright laws are observed Advertising or promotion of any kind is prohibited No payments will be accepted from a commercial interest for presenting <p>CME staff to review biographical data or curriculum vitae (CV) to confirm qualifications and disclosure</p> <p>Perform independent internet search to validate the disclosure</p>	<p>Print disclosures in printed program guide, website or anywhere objectives are listed.</p> <p>A summary disclosure slide will be shown before the presentations begin.</p> <p>Ask participants whether there was commercial bias on the evaluation.</p>
<p>Level 2: Any financial relationship(s) with commercial interests that is relevant to the content of the session and/or lecture may be resolved (not including an employee or full time appointment – see below)</p>	<p>All actions performed in Level 1</p> <ul style="list-style-type: none"> Faculty confirmation that the relationship is not an employee of a commercial interest Faculty confirmation that the relationship is not relevant to the content of the presentation, limitations of subjects or multiple products without bias or trademark/brand names may be discussed Request abstracts and/or presentation to review the content Secondary review by Physician Advisor (peer review of the content) Determination of management technique (faculty notification of peer review, limitations on subjects, or recusal) 	<p>All actions performed in Level 1</p> <ul style="list-style-type: none"> Letter to faculty informing them of conflict and management technique to apply based on the conflict discovered Receive proof of conflict resolution (revised power point showing limitations of subjects or recusal) Management technique applied and documented in advance of activity
<p>Level 3: Employment or any full-time appointment with an ACCME-defined commercial interest</p>	<ul style="list-style-type: none"> CME staff to confirm employment is with a commercial interest Remove faculty member from planning or faculty position OR Activity and/or session will not be accredited 	<ul style="list-style-type: none"> Letter to faculty and/or joint provider informing faculty/session was NOT accepted for CME Must notify the participants prior to the session that no CME will be available



ABQAURP Commercial Support Policy for Faculty/Presenters/Planners

The American Board of Quality Assurance and Utilization Review Physicians, Inc. (ABQAURP), in compliance with the Accreditation Council for Continuing Medical Education's "Standards for Commercial Support of Continuing Medical Education," has adopted the following policy statements regarding faculty and planning committee members' relationships involving commercial support.

1. All tenets of the American Medical Association's opinion on "Gifts to Physicians from Industry" must be followed, not only by the Society, but by participants in jointly provided CME activities.
2. Faculty, presenters, and planners may not accept payment or reimbursement (including travel funds, airline tickets, hotel stays, or meals) directly from any commercial interest for their role teaching/speaking at an ABQAURP-accredited activity.
3. Presentations must give a balanced view of all therapeutic options. Use of generic names will contribute to this impartiality. If trade names are used, those of several companies should be used rather than that of a single company.
4. When an unlabeled use of a commercial product, or an investigational use not yet approved for any purpose, is discussed during an educational activity, ABQAURP requires the speaker to disclose that the product is not labeled for the use under discussion or that the product is still investigational.
5. All clinical recommendations must be based on evidence that is accepted within the profession as adequate justification for their indications and contraindications in the care of patients. All scientific research referred to, reported, or used to support or justify a patient care recommendation must conform to the generally accepted standards of experimental design, data collection and analysis.
6. It is recognized that conflicts of interest can arise in many different situations and instances. There should be full disclosure of the facts of the planner & faculty members' financial relationship with commercial interests involved in the topic that will be discussed. ABQAURP requires planners, speakers and faculty members to complete a conflict of interest form with disclosure information. This information will be published to learners in advance of the CME activity. Additionally, ABQAURP will manage all conflicts in advance of presentation to ensure that presentations are balanced and unbiased.
7. Planners/speakers/faculty of CME accredited activities may not be employees of commercial interests.
8. All presenters must include a disclosure slide, listing their financial relationships with commercial interests (or none).
9. All printed material presented must be done with the author's permission and must not violate copyright laws.



F. Disclosure to Learners

Disclosures Relevant to Potential Commercial Bias

All planner/speaker/faculty/authors financial relationship(s) with a commercial interest must be disclosed to the learners in advance of the activity. This disclosure must include:

- Name
- Commercial interest(s) name
- Nature of the relationship with each commercial interest
- What was received

Planner/speaker/faculty/authors with no relevant financial relationship(s) must also be conveyed to the learners.

Timing of Disclosure

Disclosure to learners is to occur prior to the beginning of the educational activity. There are a variety of methods to achieve this (i.e. disclosure statement on the title slide of a presentation, listed in the syllabus, listed on a summary disclosure slide, website, etc.). Examples of disclosure statements are below:

(Dr. Smith) indicated he/she is a (Insert Disclosure, example Consultant, Received Consulting Fees, from Company XYZ).

Or

(Dr. Smith) has indicated no relevant financial relationships to disclose in regard to the content of this presentation.



G. Activity Evaluation

ABQAURP activities (directly and jointly provided) will be evaluated using the Knowledge Direct online Learning Management System to verify attendance & evaluate the activity. All participants requesting CME or contact hours must utilize this program in order to obtain continuing education credits.

ABQAURP will provide participants a detailed instruction sheet on how to claim continuing education credits, with a link to the Learning Management System website. Joint providers must reproduce the flyer and provide it to attendees.

The Joint Provider or ABQAURP will send a follow-up email to all participants' post-activity, as a reminder to complete the online activity evaluation and attendance verification to claim continuing education credits. Participants will have 14 days post-activity to request credits.

Once the activity has been closed and reports are compiled, participants will be charged a \$39.00 non-refundable administrative processing fee for requesting credit after the activity is closed. Participant attendance must be verified with the joint provider before granting access to claim credits.

ABQAURP will maintain a complete attendee list of participants claiming credits, including their contact information in our database (i.e. address, email address, etc.) for a minimum of 6 years post-activity.

Joint providers must submit to ABQAURP the complete participant list of attendance within two (2) weeks of the activity. (i.e. sign-in sheets, attendance roster, etc.)

An evaluation report of the overall activity and individual sessions, along with an attendance report, will be provided within 30 days post-activity to the joint provider or ABQAURP speakers.



H. Commercial Support and Exhibits

Commercial Support (CS) is a financial, or in-kind, contribution given by a commercial interest, which is used to pay all or part of the costs of a CME/CE activity. Commercial exhibits and advertisements are promotional activities and not continuing medical education. Therefore, monies paid to exhibit by a commercial interest to providers for these promotional activities are not considered to be commercial support.

ABQAURP will not enter into joint providership with any organization that solicits commercial support at this time.

Separation of promotion from education

- Arrangements for commercial exhibits or advertisements cannot influence planning or interfere with the presentation.
- Educational materials, part of a CME/CE activity, such as slides, abstracts, and handouts, cannot contain any advertising, trade name, or product-group message.
- Exhibits, etc. cannot be in the educational space.

Scientific Integrity and Commercial Support

The following represents a summary of the ACCME Standards for Commercial Support (SCS). It is the ultimate responsibility of ABQAURP to ensure compliance with the following ACCME SCS. The joint provider must comply with each in accordance with ABQAURP's accreditation of the activity.

The content and presentation of educational material for the activity will:

- Be for scientific and educational purposes only and will not promote a company's products directly or indirectly.
- Be free of commercial influence in the planning, as well as in the design and production of the educational activity.
- Not enhance the specific proprietary interests of any commercial entity through the use of slides, reference materials and/or handouts in print, electronic, or other media.
- Give a balanced view of therapeutic options, use generic drug names and/or trade names of the products of several companies and be objective in reporting research.
- Reflect total control by presenters, which includes no "scripting", emphasis, or influence by a company or its agents.
- Adhere strictly to principles of the highest quality, scientific integrity, and selection.

ABQAURP will:

- Ensure the arrangements for commercial exhibits will not influence activity planning or interfere with CME/CE presentations, nor are a condition of commercial support.
- Ensure no commercial materials will be displayed, nor will sales activity be allowed, in the same room(s) as the CME/CE activity.
- Ensure funds from a commercial source are in the form of an educational grant for support of programming, catering, production of syllabus, or other support of the course. The terms, conditions, and purposes of such grants must be documented in a signed agreement.
- Ensure exhibits and marketing opportunities are never a condition for the receipt of an educational grant.
- Ensure no other funds from a commercial source are paid to the director, faculty, or others involved with the CME/CE activity.
- Ensure funds provided by a commercial source will not be used to pay expenses for non-course faculty and that social events do not compete or take precedence over an educational event.
- Acknowledge commercial support in printed activity materials; however, no reference will be made to specific products or services unless the support is "In-kind" support and then the nature of the support must be disclosed to learners.
- Report to each commercial supporter, upon their request, information concerning the expenditure of funds following the CME activity.
- Comply with AMA guidelines on "Gifts to Physicians" and must not compete with nor take precedence over educational events in any commercially supported ancillary event.



I. Activity Marketing and Attendee Communication

All ABQAURP activities must include the following elements in marketing materials:

- Statement of overall objectives for the activity
- Session descriptions (this area may include the objectives)
- List of faculty
- Agenda/schedule to include date and times
- Clear information concerning fees, and, if appropriate, what the fee covers
- Statement of commercial support
- Accreditation and designation statements clearly identifying the accrediting provider (ABQAURP)

ABQAURP will provide joint providers with the appropriate accreditation statement for use on websites, announcements, brochures or any documents that CME is noted. ABQAURP must approve all activity announcements **PRIOR TO BEING RELEASED and/or PRINTED** to ensure proper accreditation statements have been included. All activity changes, additions, substitutions, etc., must be discussed with, and agreed upon, by ABQAURP. Once promotional materials have been approved, ABQAURP must receive a final copy. ABQAURP must review and approve all materials associated with the activity prior to their release or designation of **AMA PRA Category 1 Credit(s)**™ will be withdrawn. ABQAURP must be clearly recognized as the joint provider.

Sample CME Accreditation Announcement - Pending accreditation statements are NOT allowed

For activities directly provided: “The American Board of Quality Assurance and Utilization Review Physicians, Inc. (ABQAURP) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

ABQAURP designates this (learning format – see examples below) for a maximum of _____ **AMA PRA Category 1 Credit(s)**™. Physicians should only claim credit commensurate with the extent of their participation in the activity.”

For activities jointly provided: “This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of the American Board of Quality Assurance and Utilization Review Physicians, Inc. (ABQAURP) and (the name of your organization). ABQAURP is accredited by the ACCME to provide continuing medical education for physicians.

ABQAURP designates this (learning format – see examples below) for a maximum of _____ **AMA PRA Category 1 Credit(s)**™. Physicians should only claim credit commensurate with the extent of their participation in the activity.”

AMA approved learning formats:

- Live activity
- Enduring material
- Journal-based CME activity
- Test-item writing activity
- Manuscript review activity
- Performance Improvement (PI) CME activity
- Internet Point of Care activity



ACCME Activity types:

C	Course
RSS	Regularly Scheduled Series
IL	Internet Live Course
EM	Enduring Material
IEM	Internet Activity Enduring Material
JN	Journal-based CME
MR	Manuscript Review
TIW	Test Item Writing
CML	Committee Learning
PI	Performance Improvement
ISL	Internet Searching and Learning
LFT	Learning from Teaching

Sample CEU Accreditation Announcement

Should the activity also be awarded nursing contact hours, a separate designation statement should be included in all CME activity announcements.

The American Board of Quality Assurance and Utilization Review Physicians, Inc. (ABQAURP) is an approved provider with the Florida Board of Nursing to provide continuing education for nurses. ABQAURP designates this activity for contact hours through the Florida Board of Nursing, Provider # 50-94.





J. Honoraria and Reimbursement Policy

ACCME requires written policies and procedures governing honoraria and reimbursement of out-of-pocket expenses for planners, teachers and authors. Additionally, the provider, the joint provider, or designated educational partner must pay directly any teacher or author honoraria or reimbursement of out-of-pocket expenses in compliance with the provider's written policies and procedures.

Joint providers have the option of using the ABQAURP policy (outlined below) or another policy. If using another policy, a copy must be provided with the application for accreditation.

ABQAURP Honoraria & Reimbursement Policy

As a member supported, non-profit organization, ABQAURP requests a speaker's expenses be covered by their own organization. If expenses are not covered by the speaker's organization, prior approval must be received by ABQAURP. ABQAURP reserves the right to find a replacement speaker. If an activity receives commercial support, ABQAURP enforces the ACCME procedure to verify commercial support funds designated for honoraria and expenses, as outlined in the "Written Agreement for Commercial Support." ABQAURP must maintain/receive a detailed reconciliation of the commercial support funds at the conclusion of the activity. Honoraria and expenses are paid from the net revenue of the activity. If a JP organization does not have its own policy, it is encouraged to use ABQAURP's policy.

The Chairman of the Board must approve any changes to the following for ABQAURP Board of Directors. The Chief Financial Officer must approve any changes to the following for ABQAURP staff.

1. Airfare
 - a. Reimbursable expenses
 - i. 21-day advance purchase
 - ii. Coach airfare
 - b. Non-reimbursable expenses
 - i. Less than 21-day advance purchase
 - ii. First class airfare
 - iii. Additional* &/or overweight baggage fees
2. Lodging
 - a. Reimbursable expenses
 - i. Standard room at host hotel
 - ii. Length of speaking engagement stay (usually 1 night)
 - b. Non-reimbursable expenses
 - i. Phone charges
 - ii. Internet charges
 - iii. Movies
 - iv. Alcohol
 - v. Mini-bar items
 - vi. Business center expenses
3. Transportation to/from airport
 - a. Reimbursable expenses
 - i. Personal vehicle – mileage to/from airport (current standard IRS rate)
 - ii. Airport shuttle
 - iii. Hotel shuttle
 - iv. Standard taxi service
 - v. Rental vehicle – economy class only (only applicable for Board & Staff members)
 - b. Non-reimbursable expenses
 - i. Limo service
 - ii. Rental vehicle – any other class above economy



4. Meals & Entertainment
 - a. Reimbursable expenses
 - i. Business related (following items must be detailed on the expense report)
 1. Where
 2. With whom
 3. Business purpose
 - ii. \$60/day maximum
 - b. Non-reimbursable expenses
 - i. Alcohol
5. Honoraria
 - a. ABQAURP requests speakers to waive all fees
 - b. Prior approval required to pay honorarium
6. Miscellaneous Expenses
 - a. Tips (not to exceed 20% of documented expense)
 - i. Airport
 - ii. Transportation
 - iii. Hotel

ABQAURP requires all expense reports to be submitted within 10 business days following the activity.

K. Budget and Income/Expense Statement

ABQAURP will maintain income and expense statements detailing sources of income, as well as the expenditure of all commercial support. ABQAURP will also ensure documentation of faculty expense and honorarium following the above policy.

Joint provider organizations may not accept commercial support at this time, and therefore no budgets or income/expense statements are required.