



# CPPD Report

The Division of Continuing Physician Professional Development  
Newsletter for the Continuing Medical Education Community

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## AMA PRA 'Provider Booklet' Follow-up

The AMA Division of CPPD would like to wish all of our readers a happy and prosperous 2003. We have wrapped up an eventful year here at the AMA, as we are sure you have at your organizations. We hope that you have had a chance to read through the *AMA Physician's Recognition Award: Requirements for Accredited Providers* (version 3.2), published and distributed in October 2002. As a follow up to the cover article from issue number 9 of the CPPD Report, we will expand on some of the new requirements outlined in the new booklet.

### Designation Statement

The AMA's credit designation statement that providers must use has changed slightly. We continue to study how the AMA PRA credit system will recognize physicians for participating in new learning modalities, such as performance measurement and Internet based point of care activities, and are finding that length of time may not be the most appropriate way to award credit for these types of activities. We have changed the designation statement to eliminate the use of the word "hour" in association with credit. At this time, using hours to calculate credit is appropriate, but we want to be ready to work these new modalities into the credit system in the future. The new designation statement, found on page 9 of the booklet, reads as follows:

*The [name of accredited provider] designates this educational activity for a maximum of [number of credits] category 1 credits toward the AMA Physician's Recognition Award. Each physician should claim only those credits that he/she actually spent in the activity.*

Some providers have questioned the use of the word "spent" in the new language. We retained the word "spent" because, although we expect the credit system metric to evolve, the only current measure is time. We anticipate that once new credit system metrics are determined, we will modify the verb used to express a physician's participation in a CME activity. We expect providers to incorporate the new designation statement into their CME activities as soon as possible.

Continued on page 2

### AMA International Activity Approval Program

The AMA PRA credit system is, and has been since its creation in 1968, domestic in nature. Due to the AMA's ongoing discussions and agreements with international groups to establish shared standards for CME credit, we need to be aware of activities that are designated for AMA PRA category 1 credit and have international physician attendance. Effective February 1, 2003, international activities designated for AMA PRA category 1 credit by accredited providers must be approved by the AMA before credit can be awarded to non-US licensed physicians.

What do we mean by "international activity"? An international activity is a CME activity designated for AMA PRA category 1 credit that attracts non-US licensed physicians, and is held either inside or outside the US. It is an activity that is marketed to, or consistently experiences the attendance of, international physicians.

Providers can apply to the AMA for authorization to issue AMA PRA category 1 credit to non-US licensed physicians in one of two ways. Providers that typically generate a small number of international activities each year can complete a separate application for each activity using the *Individual International Activity Request Form*. This form is a Word document that can be completed electronically or by hand, and must be signed and submitted by fax or US mail. If your organization develops a large number of international activities on an annual basis and if you know about these activities in advance, the *Multiple International Activity Request File* may be more convenient and cost effective. This Excel spreadsheet allows providers to enter up to one hundred activities on one electronic form and submit them all at once (on a quarterly basis) to the AMA via e-mail.

Providers have asked if they are required to apply for approval if they do not market their activities to an international audience, but consistently draw international attendees, which may be the case in states that border Mexico and Canada. Our

answer is yes, and the reason is that if the AMA does not have the activity on file, we cannot verify that activity with an international agency. For example, a non-US licensed physician attends an activity sponsored by an accredited provider and is awarded an AMA PRA category 1 credit certificate. That physician then submits the certificate to the professional organization of his/her country. If that international agency contacts the AMA for details on how the activity meets their standards for CME, we would have no information to offer.

Once an activity has been approved, the AMA is then able to work with those international agencies, on the provider's behalf, to ensure that the credit international attendees receive is recognized. For background information and to download applications for approval, visit: [www.ama-assn.org/go/intlpracredit](http://www.ama-assn.org/go/intlpracredit)

As always, we encourage you to contact us with any questions regarding the changes to the AMA PRA "provider booklet," or with any other credit system questions to: [pra@ama-assn.org](mailto:pra@ama-assn.org)

### New Book Addresses Physician Performance Change

Many journal articles and about a dozen books touch on the subject of CME/CPD and issues related to physician or health professional learning and their outcomes. The AMA's "The Continuing Professional Development of the Physician: From Research to Practice" is unique in that it specifically addresses the process of turning knowledge acquired by traditional CME into physician performance change. Edited by Dave Davis, MD, Barbara E. Barnes, MD, and Robert Fox, EdD, this book is a must for CME providers and researchers. To purchase, call AMA Press at 800-621-8335 and request OP#230503.



## Exciting Program for 2003 CME Provider/Industry Conference

The 14<sup>th</sup> Annual Conference of the National Task Force on CME Provider/Industry Collaboration, “Partners in Progress: Serving the Profession and the Public,” will be hosted by the AMA on September 9-11, 2003. This year’s conference will feature a repeat of last year’s highly successful pre-conference, designed to provide new CME professionals with basic information about the field (different credit systems, idioms, organizational stakeholders, the government’s role, etc.) to be held on Monday afternoon, September 8. This year, the conference will break from our traditional Baltimore venues and be held at the Chicago Hilton Hotel in downtown Chicago.

The conference will address familiar themes in light of current events. Tuesday, our first full day, will focus on the Industry and regulatory components of the CME enterprise, with updates on the OIG Compliance Program Guidance for Pharmaceutical Manufacturers and other topics. On Wednesday, the conference will address CME specific issues ranging from a critical assessment of media perspectives on CME, to how the educational investment in CME translates into value for both patients and physicians, and practical direction on how providers can work with Industry to develop effective and appropriate CME activities.

Thursday morning will offer participants an opportunity to integrate the conference content, not just looking at the machinery of developing quality CME activities but also placing these in the larger context of continuing professional development (recognizing the increasing demand for education with demonstrable links to physician competence). In addition to our customary exhibit area, the conference may add a competitive poster session component, to serve as a springboard for small group discussions on topics of interest. Be on the lookout for details.

The CME Provider/Industry Conference continues to fill a unique niche for the CME community by

engaging high profile speakers on breaking topics. As always, the conference’s principal attraction remains the networking opportunities available to registrants. If you attend no other major CME conference this year, attend this one. For registration or exhibitor information, contact Regina Littleton at (312) 464-4637 or [regina\\_littleton@ama-assn.org](mailto:regina_littleton@ama-assn.org). For samples of last year’s presentations, as well as updates as these are released, visit: [www.ama-assn.org/go/cmetaskforce](http://www.ama-assn.org/go/cmetaskforce)

## Gifts to Physicians Modules Online

The AMA Council on Ethical and Judicial Affairs (CEJA) continues its national campaign to help educate medical students, residents, physicians and industry representatives on the ethical guidelines regarding gifts given to physicians from industry as a part of pharmaceutical and device companies’ marketing practices.

Starting in February the Gifts to Physicians website will feature two of the four educational modules: Module 1, “An Overview of Legal and Ethical Issues for Physician Relationships with Industry,” and Module 4, “The AMA/Council on Ethical and Judicial Affairs (CEJA) Guidelines on Gifts to Physicians from Industry”. These and the two other modules will help satisfy ACGME requirements for education on professionalism as well as similar requirements by the American Board of Medical Specialties. The remainder of the series, Module 2: “What Physicians Should Expect from Industry and Sales Personnel,” and Module 3: “Issues Concerning Gifts to Physicians from Industry,” will be available on the website in June 2003.

The modules will contain physician self-study materials and, what we believe will be of interest to CME providers, downloadable resource material that instructors can use to build one-hour learning sessions. The campaign is ongoing, and more resources will be added as the modules are updated. For background information and resources, visit: [www.ama-assn.org/go/ethicalgifts](http://www.ama-assn.org/go/ethicalgifts)

## AMA Foundation Tackles Low Health Literacy Campaign Promotes Better Communication

David Barshes, Communications Manager, AMA Foundation

In 1998, the American Medical Association became the first national medical organization to adopt policy recognizing that limited patient literacy effects medical diagnosis and treatment.

Studies show that 48% of all Americans may struggle with understanding basic healthcare communications, such as prescription instructions and insurance forms. Low “health literacy” results in poor health outcomes and costs the health care system up to \$73 billion every year in unnecessary doctor visits and longer hospitalizations.

### New Kits Ready

The AMA Foundation launched its Health Literacy campaign in 2000 and expanded the program in 2002 with the generous support of Pfizer, Inc. Now, the Foundation is ready to unveil its new 2003 Health Literacy Informational Kit.

The kits are the Foundation’s primary tool for informing physicians, health care professionals and

patient advocates about health literacy. Ten thousand kits will be distributed to numerous audiences to help raise awareness about this important issue.

The 2003 Health Literacy Informational Kit is an expanded version of the Health Literacy Kit that was introduced in 2001. The new kits include a manual for clinicians, a new video documentary, re-printable information, and additional resources for education and involvement. The activity is designated for 2.5 AMA PRA category 1 credits.

“Our Health Literacy initiative has already taken off,” says Joseph Riggs, MD, President of the AMA Foundation and an AMA Trustee. “In the past two years, thousands of physicians have improved health care for their patients by making them more aware of this problem.” To obtain the 2003 Health Literacy Kit, call the AMA at 800-621-8335 or visit: [www.amapress.com](http://www.amapress.com)



### About the AMA Foundation

As the philanthropic arm of the American Medical Association, the AMA Foundation is dedicated to investing in the health of America by supporting programs in medical education, research and service. Through our partnerships with our donors, the AMA Alliance, AMA affiliations and other organizations, the AMA Foundation works to improve the health of our nation’s communities and strengthen the patient-physician relationship with its better health initiatives.

Each year, the Foundation’s Scholar’s Fund awards nearly \$1,000,000 in tuition assistance to medical students across the country, and administers student scholarships and educational awards programs totaling close to \$295,000.

From seed grants to scholarships, the AMA Foundation is working hard to make a difference in the lives of all Americans. Contact the Foundation to learn how you can be involved by calling 312 464-4200 or visiting: [www.amafoundation.org](http://www.amafoundation.org)

### AMA PRA Credit System Attestation

The AMA has teamed with the ACCME in an effort to ensure that accredited providers are aware of AMA guidelines for designating activities for AMA PRA category 1 credit. Providers, as part of their initial application for accreditation or as at reaccreditation will be asked to attest that they will both follow the AMA PRA guidelines as listed in the *AMA Physician's Recognition Award: Requirements for Accredited Providers* (version 3.2), and permit future collection and sharing of information with the AMA. This information may include examples of the proper and consistent use of the designation statement, demonstration that activities conform to the AMA definition of CME, or data on credit awarded to physicians in past activities.

The AMA does not expect this new procedure to cause any inconvenience to providers. Please contact us with any questions by e-mail to: [pra@ama-assn.org](mailto:pra@ama-assn.org)

### AMA Internet CME Site Enhanced

The AMA has redesigned the portion of its CME Select site featuring enduring materials sponsored by the AMA's Division of Healthcare Education Products & Standards.

Improving physician access was the principal goal of the redesign. Primary care physicians, the site's intended audience, now have many options when it comes to accessing these monographs. Physicians can sign up to receive CME programs in print, download materials from the Internet, or review programs online and apply electronically for CME credit. Many of the online programs offer features unavailable in print, such as instant feedback on self-assessment questions and animated medical illustrations.

The site also includes information about AMA standards for its enduring materials, opportunities to fund programs, and the process of creating enduring materials. To learn more, visit: [www.ama-assn.org/ama/pub/category/9065.html](http://www.ama-assn.org/ama/pub/category/9065.html)

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### CPPD Report

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Past editions of the CPPD Report can be viewed in PDF format at:  
[www.ama-assn.org/go/cmecppd](http://www.ama-assn.org/go/cmecppd)

### April 2-6, 2003

SACME Spring Meeting  
Santa Fe, New Mexico  
Contact Melinda Steele: 806 743-2226  
or [melinda.steele@ttuhsc.edu](mailto:melinda.steele@ttuhsc.edu)

### June 16, 2003 (tentative)

AMA CPPD Town Hall Meeting  
Hyatt Regency Chicago, Chicago, IL  
Contact Regina Littleton: 312-464-4637  
E-mail: [regina\\_littleton@ama-assn.org](mailto:regina_littleton@ama-assn.org)

### June 22-24, 2003

GAME 8th Annual Meeting  
Global Alliance for Medical Education  
The Westin New York at Times Square  
Contact Celine Chasen: 713-798-4024

### July 25-26, 2003

CME: The Basics  
The Alliance for CME  
Rosemont, IL  
Contact the Alliance at 205-824-1355

### September 8-11, 2003

The 14th Annual Conference of the National Task Force on CME Provider/Industry Collaboration  
Chicago Hilton & Towers, Chicago, IL  
Contact Regina Littleton: 312 464-4637  
[www.ama-assn.org/go/cmetaskforce](http://www.ama-assn.org/go/cmetaskforce)

### May 16-19, 2004

CME Congress 2004  
Alliance for CME, AHME, SACME  
Toronto, Ontario, Canada

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