

REPORT OF THE COUNCIL ON MEDICAL EDUCATION

CME Report 5-I-09

Subject: Opposition to Increased CME Provider Fees

Presented by: Susan Rudd Bailey, MD, Chair

1 Resolution 302 (A-09) introduced by the Illinois Delegation and adopted by the House of
2 Delegates asked that:

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4 Our American Medical Association (AMA) study and report back at the 2009
5 Interim Meeting on the system of intrastate accreditation, including the
6 Accreditation Council for Continuing Medical Education (ACCME) fee structure
7 for state accreditors and their providers, the concept of equivalency, and the new
8 criteria for compliance, and the impact these changes will have on state
9 accreditors and their providers.

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11 INTERIM REPORT FOR INFORMATION

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13 In response to Resolution 302 (A-09), the Council on Medical Education initiated several
14 activities to gather data for an informational report to the House of Delegates at its 2009 Interim
15 Meeting. These efforts included a 27-question survey of 1,323 intrastate-accredited providers
16 conducted in July to learn how proposed ACCME fees and updated ACCME criteria might affect
17 CME providers' willingness to continue to be accredited. An additional 60-question survey was
18 sent in July to the 46 state/territorial medical societies (SMS) that are recognized to accredit these
19 intrastate CME providers to collect their perspectives not only on the ACCME fees and criteria
20 but also on the new ACCME markers of equivalency. The response to these surveys (41% [549]
21 and 83% [38] respectively) was considerable and has generated significant data for the Council to
22 review, including a 108-page summary report for the CME provider survey and a 35-page
23 summary of the SMS survey.

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25 Further, the Council asked the ACCME to provide comments related to each of these issues and it
26 has responded with approximately 400 pages of information. In addition, in reply to AMA's
27 request to the ACCME to reconsider the proposed fee increases, the ACCME has communicated
28 that it will do an intensive review of its fee structure for 2010 and beyond and expects to have
29 information on this analysis no later than March 2010.

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31 Because the Council requires additional time to complete its study of the data from the surveys,
32 the ACCME, and other sources including the anticipated fee analysis promised by ACCME,
33 which will be available after the 2009 Interim Meeting, the full report to the House with
34 recommendations will be presented at the 2010 Annual Meeting.