# AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution: 313

(A-24)

Introduced by: Oklahoma

Subject: CME for Rural Preceptorship

Referred to: Reference Committee C

Whereas, rural Americans are more likely to die from heart disease, cancer, unintentional injury, chronic lower respiratory disease, and stroke than their urban counterparts<sup>1</sup>; and

Whereas, there are fewer health care providers per capita in nonmetropolitan areas; Although nearly 20% of the U.S. population lives in rural areas, less than 10% of U.S. doctors practice in rural areas<sup>2</sup>; and

Whereas, there are fewer health care providers per capita in nonmetropolitan areas; Although nearly 20% of the U.S. population lives in rural areas, less than 10% of U.S. doctors practice in rural areas<sup>2</sup>; and

Whereas, Continuing Medical Education (CME) credits are vital to all physicians; and

Whereas, being a "preceptor" for medical students, residents, fellows, and other allied health professional students requires countless hours of preparation; and

Whereas, the American Osteopathic Association (AOA) offers category 1B credit to its members for participation in the AOA Didactic and Preceptor Program<sup>4</sup>; and

Whereas, 60 AOA category 1B credits may be applied to the required 120 hours of CME for AOA physicians<sup>4</sup>; and

Whereas, the American Academy of Family Physicians offers CME credits to its members for teaching of medical students, residents, and other allied health professional students<sup>5</sup>; and

Whereas, the American Medical Association (AMA) does not recognize the AOA credits awarded for teaching and being a preceptor; and

Whereas, recognizing such efforts would encourage more physicians to be involved in preceptor programs especially rural, which in turn would expose more students to the practice of medicine in more rural and underserved areas; therefore be it

 RESOLVED, that our American Medical Association along with the Council of Medical Education, formulate a "toolkit" to teach physicians who serve as preceptors, especially in rural and underserved areas, how to be better preceptors and the process on claiming AMA Category 1 credits for preparation and teaching medical students, residents, fellows, and other allied health professional students training in Liaison Committee on Medical Education/Accreditation Council for Graduate Medical Education accredited institutions, thereby making them a more

39 effective preceptor (Directive to Take Action); and be it further

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RESOLVED, that our AMA study formulating a plan, in collaboration with other interested bodies, to award AMA Category 1 credits to physicians who serve as preceptors in rural and underserved areas teaching medical students, residents, fellows, and other allied health professional students training in Liaison Committee on Medical Education/Accreditation Council for Graduate Medical Education accredited institutions thereby improving the rural healthcare workforce shortage (Directive to Take Action); and be it further

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RESOLVED, that our AMA devise a method of converting those credits awarded by other organizations into AMA recognized credits for the purpose of CME. (Directive to Take Action)

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Fiscal Note: Modest - between \$1,000 - \$5,000

Received: 4/22/2024

#### **REFERENCES**

- 1. https://www.cdc.gov/ruralhealth/about.html#:~:text=Rural%20Americans%20are%20more%20likely,stroke%20than%20their%20urban%20counterparts.
- https://www.incrediblehealth.com/blog/8-statistics-that-explain-the-rural-doctorshortage/#:~:text=There%20are%20fewer%20health%20care,doctors%20practice%20in%20rural%20areas.
- 3. https://meridian.allenpress.com/jgme/article/14/4/441/484914/Family-Medicine-Residencies-How-Rural-Training
- 4. https://osteopathic.org/cme/cme-faqs/
- 5. https://www.aafp.org/pubs/fpm/issues/2012/0300/p8a.html#:~:text=Learning%20hands%2Don%20how%20a,rewarding%20way %20to%20earn%20CME

### **RELEVANT AMA POLICY**

## H-300.977, Revisions to Physician's Registration Award

Our AMA has adopted the following changes in the Physician's Recognition Award:

to accept recertification by an AMA-recognized specialty board in satisfaction of requirements for a threeyear PRA certificate;

- (2) to allow credit for international conferences when these have been approved by the AMA prior to the event; and
- (3) to allow credit for teaching to be reported for AMA PRA Category 2 Credit™ toward the award.

## H-300.988, Restoring Integrity to Continuing Medical Education

The AMA (1) supports retention of the definitions of continuing medical education in the Physicians' Recognition Award ("Continuing medical education consists of educational activities which serve to maintain, develop, or increase the knowledge, skills, and professional performance and relationships that a physician uses to provide services for patients, the public, or the profession. The content of CME is 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."); (2) urges members of the medical profession to be attentive to the distinction between continuing medical education and continuing education which is not related directly to their professional activities; (3) believes that accredited sponsors should designate as continuing medical education only those continuing education activities which meet the definition of continuing medical education; (4) encourages the ACCME and state medical associations on the state level to weigh seriously, in considering the sponsor's continued accreditation, instances where an accredited sponsor identifies non-continuing medical education activities as continuing medical education; and (5) encourages state medical boards to accept for credit continuing education which relates directly to the professional activities of physicians, although each state with mandatory continuing medical education for reregistration of license has the prerogative of defining the continuing education it will accept for credit.