**GUIDELINES FOR REQUESTING BOARD APPROVAL OF CME COURSES, ACTIVITIES OR TRAININGS**

May 16, 2012

Amended May 9, 2024

The Board, by majority vote, may certify that any activity, course or training deemed appropriate shall be eligible for the equivalent of Category 1 or Category 2 credit for purposes of license renewal in Massachusetts. 243 CMR 2.06(6)(h)3.

The Board of Registration in Medicine's continuing medical education (CME)1 requirement consists of three parts: a general requirement, a risk management requirement and a requirement to take certain specialized courses and trainings. On October 26, 2017, the Board adopted Policy 17-05, a "CME Pilot Program." Under Policy 17-05, a licensee must complete 50 hours of CME credits in each license renewal cycle to satisfy the Board's biennial CME general requirement. The Pilot Program kept the Board's risk management requirement at 10 credits. The specialized CME courses and trainings have different requirements. Additional information on the specialized CME requirements can be found at [https://www.mass.gov/doc/borim-cme-requirements­](http://www.mass.gov/doc/borim-cme-requirements)

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**Legal Basis for Board Approval of CME Courses, Activities or Trainings**

Since Oct. 20, 1977, the above-cited regulation of the Massachusetts Board of Registration in Medicine has granted the Board the authority to approve educational activities, courses or trainings for continuing medical education credit for license renewal. The Board defines CME broadly, as "educational activities that 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 profession." 243 CMR 2.01(4). The Board considers CME a vital part of each physician's efforts to maintain competence and to provide the highest level of care to patients.

In the past, the Board has granted CME credit for its general CME requirement, its risk management activities and its specialized courses and trainings. The Board has approved implicit bias in healthcare courses, Alzheimer's Disease and related Dementias trainings and opioid and pain management courses, among others.

##### Applying for CME Credit

1 The term "continuing professional development (CPD)' has been largely discontinued in the medical field. The Board uses the term "continuing medical education (CME)" to encompass its entire program, consisting of courses, activities and trainings.

An organization or individual seeking Board approval of a proposed CME should submit to the Board a description of the proposed CME activity, course or training that includes sufficient information for the Board to evaluate it. The Board recognizes that the necessary information for each proposal will vary .The proposal should include the following:

* a description of the activity, course, or training;
* the activity objectives;
* the type of learning format;
* a description of the evaluative tool that will be used to determine if improvements should be made to the activity;
* a plan for documenting successful completion of the activity, including retention of that documentation for at least three years;
* the number of credits and type of credits sought;
* the CV of any presenters or developers of the activity, course, or training; and
* an affirmation that the activity, course, or training is independent and free of commercial bias.

The Board may request additional information from course sponsors if the Board deems it necessary. The Board has developed a form for submitting CME proposals to the Board which is attached to these guidelines. Please submit this form when applying for CME approval.

**The Standards for Board Evaluation of a CME Course, Activity or Training**

The organization or individual seeking Board approval of a CME is responsible for establishing that the activity, course or training meets or is the equivalent of the standards set by one or more of the following organizations:

* The American Medical Association (AMA)
* The American Academy of Family Physicians (AAFP)
* The American Osteopathic Association (AOA)
* The Massachusetts Medical Society (MMS) or another state medical society which is recognized by the Accreditation Council for Continuing Medical Education (ACCME) as an accredited CME provider.

In determining whether an educational activity, course or training is eligible for credit, the Board may consider the standards used by these organizations.

**What is a Category 2 Activity?**

The Board follows the AMA definition for a Category 2 activity, a "worthwhile learning experience related to practice."2 If the Board determines that the proposed activity, course

2 *"AMA PRA Catego,y 2 CreditTM* is self-designated and claimed by individual physicians for participation in activities not certified for *AMA PRA Catego,y 1 Credit™* that: comply with the AMA Definition of

or training does not qualify for the equivalent of Category 1 credit, the Board may advise the physician whether the proposed activity, course, or training might be eligible for the equivalent of Category 2 credit for state licensure. However, all Category 2 credits are self-designated by the physician. To be eligible for Category 2 credits, the activity, course or training must meet either the AMA Category 2 definition, or the AOA Category 2-A3 or 2-B definition.

Some examples of Category 2 activities are (but are not limited to) the following:

* Participating in an activity that did not qualify for Category 1 credit
* Teaching residents or other healthcare professionals
* Online learning that is not Point of Care
* Reading medical literature
* Consulting with peers and medical experts
* Small group discussions
* Self-assessment activities
* Medical writing
* Research
* Peer Review or Quality Assurance participation

**CME is IndeQendent and Free of Commercial Bias**

In addition, any sponsor seeking Board approval of an activity for CME credit must demonstrate that the activity, course or training is independent and free of commercial bias. The Board considers the ACCME "Standards for Integrity and Independence for Accredited Continuing Education" (effective 1/1/2022) to be a useful guide in making this determination. The Standards impose stringent restrictions on CME providers' interactions with drug/device companies and other companies the ACCME defines as a commercial interest. The ACCME allows providers to accept company funding for CME activities, but prohibits any commercial influence, direct or indirect, over CME content.

The ACCME details five standards for the CME Sponsor(s) to meet:

* Ensure Content is Valid
* Prevent Commercial Bias and Marketing in Accredited Continuing Education
* Identify, Mitigate and Disclose Relevant Financial Relationships
* Manage Commercial Support Appropriately
* Manage Ancillary Activities Offered in Conjunction with Accredited Continuing Education

CME; and comply with the relevant AMA ethical opinions... and are not promotional; and a physician finds to be a worthwhile learning experience related to his/her practice." The AMA Physician's Recognition Award and credit system. Page 10. (9/29/2017).

3 Category 2-A credit includes fom1al educational programs that are AMA accredited, AAFP approved, an internationally known sponsor acceptable to the CCME, or sponsored by AOA accredited Category I CME Sponsors that do not meet the 1-A faculty/hours requirement for Category 1-A credit. American Osteopathic Association.

**How does the Board determine how many credits to award for each activity, course, or training?**

The Board calculates credits based upon the AMA's credit designation for each of the eight AMA-approved learning formats:

|  |  |
| --- | --- |
| Live Activity | 1 credit per 60 minutes |
| Enduring Material | 1 credit per 60 minutes |
| Journal-based CME | 1 credit per article |
| Test Item Writing | 10 credits per complete test item writing activity |
| Manuscript Review | 3 credits per accepted manuscript review |
| Performance Improvement CME | 20 credits per Performance Improvement Activity |
| Internet Point-of-Care | 0.5 credits per Point-of-Care cycle |
| Other | 1 credit per 60 minutes |

Please note: When the Board awards a CME credit, it considers whether the course/training is the equivalent of an AMA PRA Category 1 Credit™. However, the Board does not award AMA PRA Category 1 Credit™. If a physician is seeking credit for purposes of the AMA's Physician's Recognition Award (PRA), they should apply directly to the AMA for the credit.

Attachments:

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Request for Board Approval for CME Credit Form ACCME Standard for Integrity and Independence

The AMA's Physician Recognition Award and Credit System

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REQUESTYOR BQARD APPROVAL OF CME FORM

REQUEST FORM FOR BOARD APPROVAL OF CME COURSE & AFFIRMATION THAT CME ACTIVITY IS INDEPENDENT AND FREE OF COMMERCIAL BIAS

|  |
| --- |
| **CRITERIA** |
| Name of Course, Activity or Training: |
| Sponsoring Institution and Address: |
| Contact Person Name and Phone No. |
| Description of the Course: |
| Objectives: |
| Type of Learning Format: |
| Description of Evaluative Tool: |
| Documentation of Completion: |
| How many credits is it? |
| Information on Presenters: |
| Affirm that Course is Free of Commercial Bias: |

## TabB

ACCME Standard for Integrity and Independence

4/30/24, 9:43 AM Standards for Integrity and Independence in Accredited Continuing Education Resources I ACCME

The Standards for Integrity and Independence in Accredited Continuing Education (https://accme.org/publications/standards-for-integrity-and-independence­ accredited-continuing-education-pdf)

were released in December 2020 and went into effect on January 1., 2022, replacing the Standards for Commercial Support. All providers in the ACCME System are expected to comply with the Standards. This page features resources to support your successful implementation of the Standards, including a section with archived resources for the Standards for Commercial Support. If you need more information or have suggestions for additional resources, please contact [info@accme.org](mailto:info@accme.org) [(mailto:info@accme.org).](mailto:info@accme.org) We're happy to help.

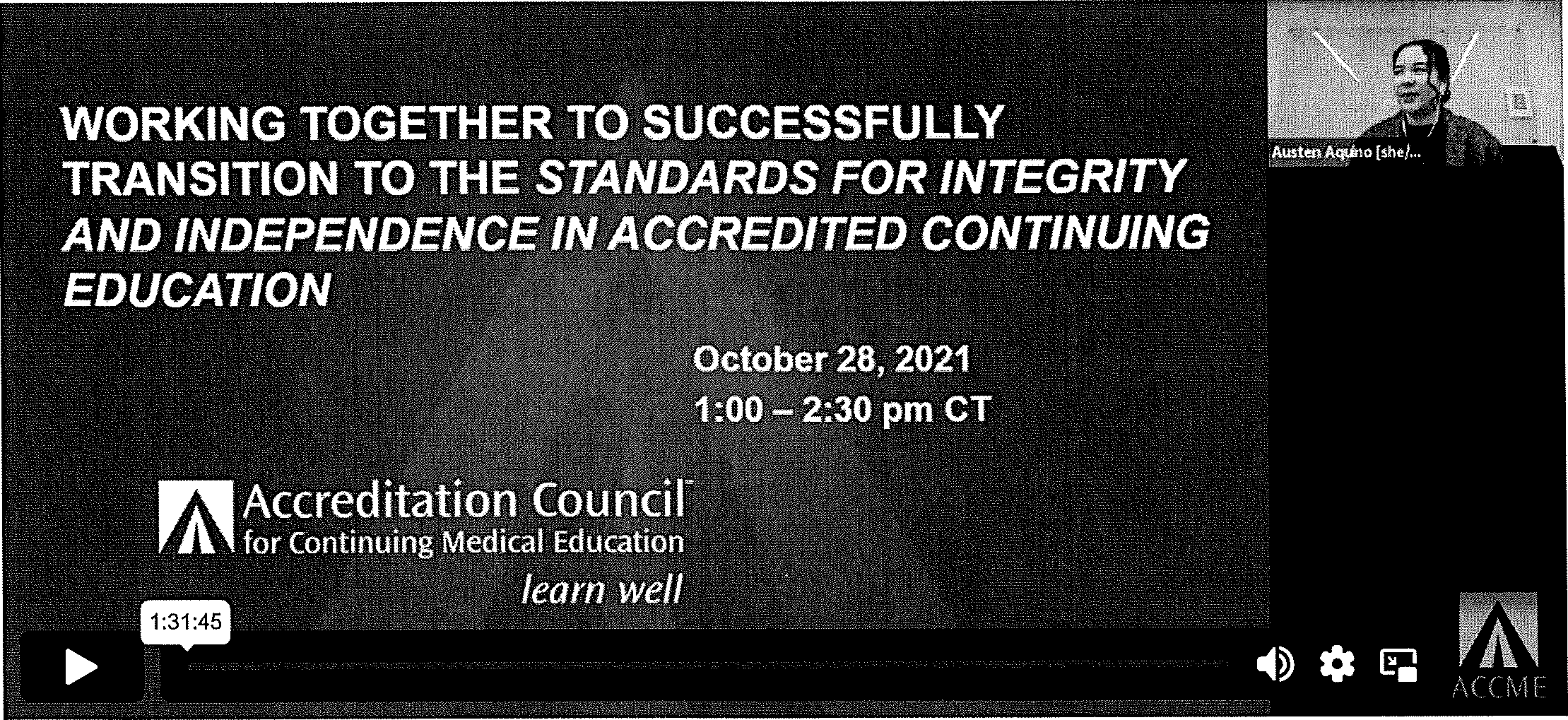
#### Webinar: Working Together to Successfully Transition to the Standards for Integrity and Independence in Accredited Continuing Education

On October 28, 2021, we hosted a public webinar to highlight our newly available Standards resources and answer your questions about successfully transitioning to the Standards for Integrity and Independence. You can navigate to different sections of the video faster and easier with the chapter marker feature. Download the slide deck here ([http://accme.org/publications/working-together-successfully-transition-standards-for-integrity­](http://accme.org/publications/working-together-successfully-transition-standards-for-integrity) and-independence)

. The Q&A chat log from the webinar is available here

(https://accme.org/publications/working-together-successfully-transition-standards-for-integrity­ and-independence-0)

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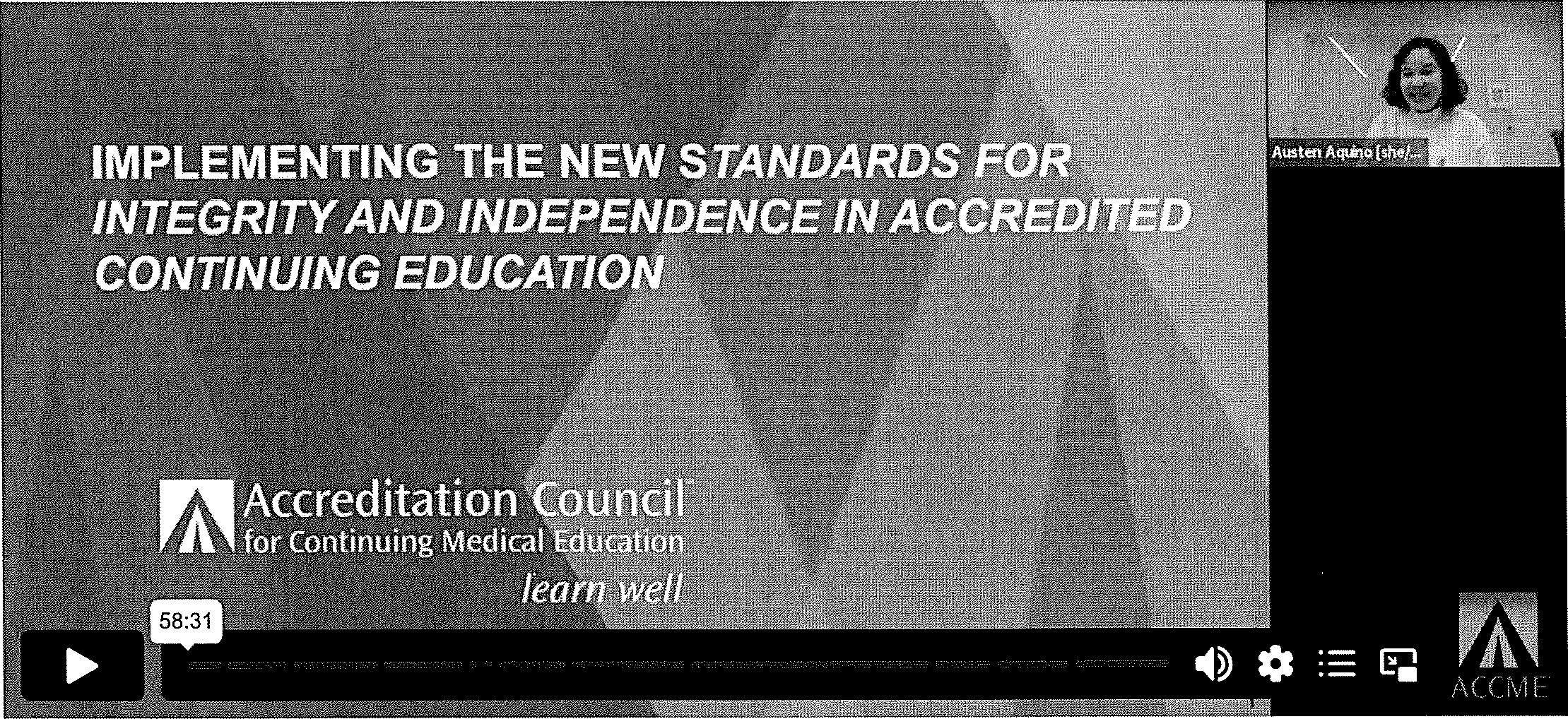


#### Webinar: Implementing the new Standards for Integrity and Independence in Accredited Continuing Education

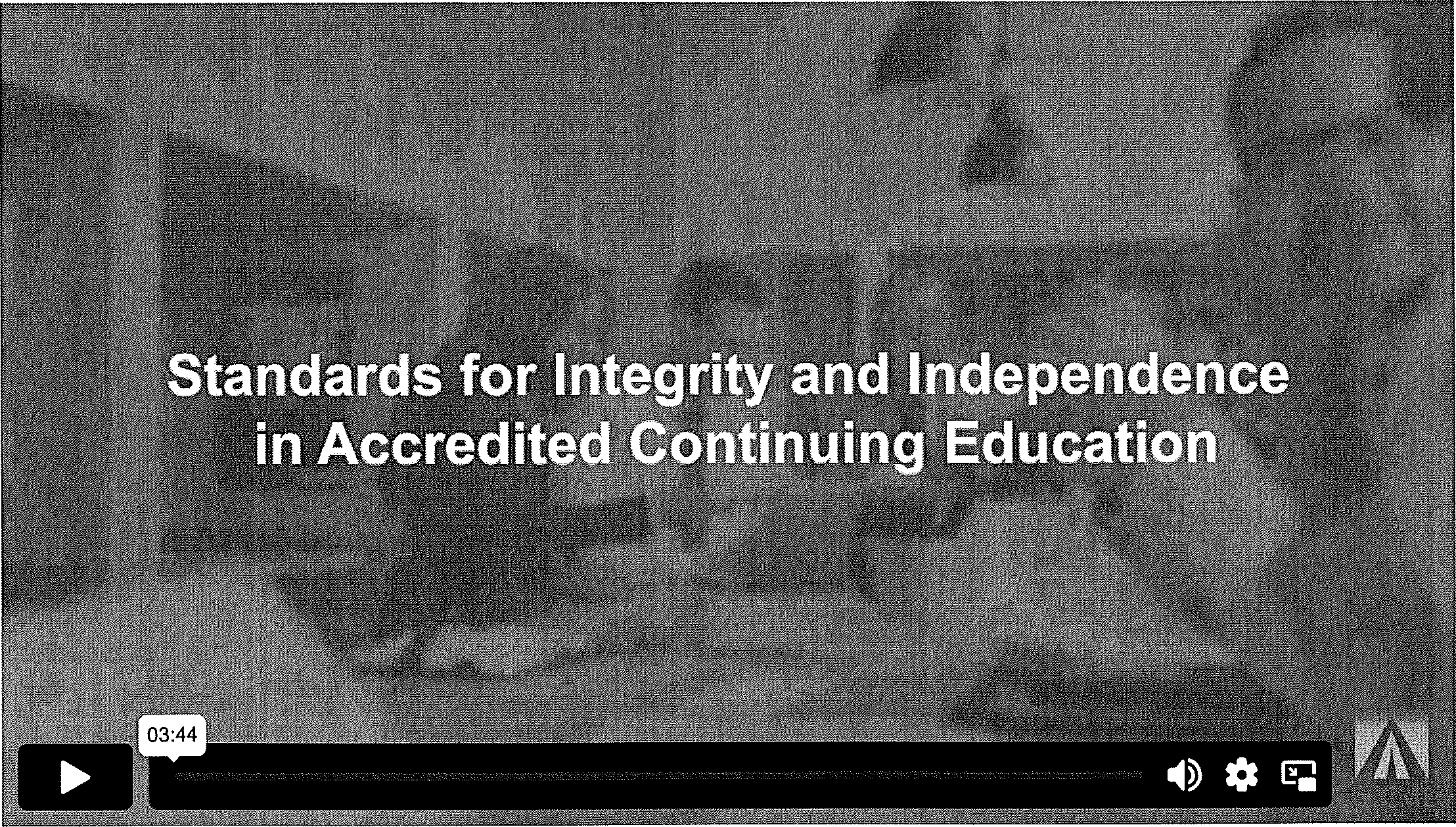
On January 11, 2022, we hosted a public webinar to answer questions about the Standards for Integrity and Independence in Accredited Continuing Education. You can navigate to different sections of the video faster and easier with the chapter marker feature. Download a PDF (https://accme.org/publications/implementing-new-standards-for-integrity-and-independence­ accredited-continuing)

with the slide deck.

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#### Introductory Video



**Getting Started Info Package**

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This PDF

(https://accme.org/publications/standards-for-integrity-and-independence-accredited­ continuing-education-info-package)

includes an introduction to the new Standards, with a transition timeline, Standards at a Glance, and full text of the Standards.

#### View the Standards for Integrity and Independence

* Standards for Integrity and Independence (webpage)(https://accme.org/standards)
* Standards for Integrity and Independence (PDF) (https://accme.org/publications/standards-for-integrity-and-independence-accredited­ continuing-education-standalone)
* Accreditation Requirements (PDF)

([https://www.accme.org/publications/accme-accreditation-requirements):](http://www.accme.org/publications/accme-accreditation-requirements)) includes the Accreditation Criteria, Standards, and ACCME Policies

#### Toolkit for the Standards for Integrity and Independence

This toolkit includes templates, sample forms, and checklists in fillable PDF format for you to adapt and use as you choose. Use of these resources is completely optional.

* + Download the full toolkit(https://accme.org/standards-toolkit) (fillable PDF) (https://accme.erg/standards-toolkit)
  + Download the full toolkit (fillable Word Doc) (https://accme.org/publications/standards-for-integrity-and-independence-accredited­ continuing-education-toolkit-word)
  + Download the tools from the Toolkit as separate fillable PDFs:
    - Tools for Identifying, Mitigating, and Disclosing Relevant Financial Relationships (https://accme.org/publications/tools-for-identifying-mitigating-and-disclosing-relevant­ financial-relationships)
    - Tools to Ensure that Clinical Content is Valid (https://accme.org/publications/tools-ensure-clinical-content-valid)
    - Quick Tool to Simplify Educational Planning When Identification, Mitigation, and Disclosure Are Not Required

(https://accme.org/publications/quick-tool-simplify-educational-planning-when­ identification-mitigation-and-disclosure)

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#### Excel Spreadsheet for Documenting Individuals in Control of Content in the Performance-in-Practice Structured Abstract

This spreadsheet template includes the precise information required for the accreditation process. Providers can use this template together with the Standards Toolkit to ensure they are adequately documenting information regarding individuals in control of content for accredited continuing education activities.

* Initial Accreditation: Excel Spreadsheet for Documenting Individuals in Control of Content in the Performance-in-Practice Structured Abstract

(https://accme.org/publications/excel-spreadsheet-for-documenting-individuals-control­ content-performance-practice)

* Reaccreditation: Excel Spreadsheet for Documenting Individuals in Control of Content in the Performance-in-Practice Structured Abstract

(https://accme.org/publications/excel-spreadsheet-for-documenting-individuals-control­ content-performance-practice)

#### Standards for Integrity and Independence: Transition Checklist

* Standards for Integrity and Independence: Transition Checklist (Word Doc) (https://accme.org/publications/standards-for-integrity-and-independence-transition­ checklist-word-doc)
* Standards for Integrity and Independence: Transition Checklist (PDF) (https://accme.org/publications/standards-for-integrity-and-independence-transition­ checklist-pdf)

#### Managing the Use of Employees and Owners of Ineligible Companies in Accredited CE (Standard 3.2)

Case Scenarios: When It Is Acceptable to Use Owners and Employees of Ineligible Companies in Accredited Continuing Education

Take this self-guided quiz to practice and improve your understanding of the expectations of Standard 3 related to owners and employees of ineligible companies and relevant financial relationships. Participation in the quiz is free, anonymous, and the quiz can be shared freely for educational use. Also included below are the PDF and PowerPoint versions of the

case questions and answers.

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* Quiz-Case Scenarios: When It Is Acceptable to Use Owners and Employees of Ineligible Companies in Accredited Continuing Education (https://docs.google.com/forms/d/e/1FAlpQLSdSkqL6IVLiiOOOiGgoaNhi8ERJiGG5dg3rkkO1
* Case Scenarios: When It Is Acceptable to Use Owners and Employees of Ineligible Companies in Accredited Continuing Education (PDF) (https://accme.org/publications/case-scenarios-when-it-acceptable-use-owners-and­ employees-ineligible-companies)
* Case Scenarios: When It Is Acceptable to Use Owners and Employees of Ineligible Companies in Accredited Continuing Education (PPT) (https://accme.org/publications/case-scenarios-when-it-acceptable-use-owners-and­ employees-ineligible-companies-0)

This FAQ([https://www.accme.org/faq/10236#collapse-592781)](http://www.accme.org/faq/10236#collapse-592781)) includes additional scenarios that provide examples of content that is and is not related to the business lines of an ineligible company. This can be helpful in the implementation of Standard 3.2a: Employees of ineligible companies can participate as planners or faculty when the content of the activity is not related to the business lines or products of their employer/company.

#### Planning Guide for Independence in Accredited Continuing Education

Use these visual aids to explain Standards processes to those who may be recruited to plan, deliver, review, and/or evaluate accredited continuing education activities.

* Planning Guide for Independence in Accredited Continuing Education (PDF) ([http://accme.org/publications/planning-guide-for-independence-accredited-continuing­](http://accme.org/publications/planning-guide-for-independence-accredited-continuing) education-pdf)
* Planning Guide for Independence in Accredited Continuing Education (PPT) (https://accme.org/publications/planning-guide-for-independence-accredited-continuing­ education-ppt)

#### Compliance Check

Compliance Check is a series of quick tips to help accredited providers meet accreditation requirements. Explore Compliance Checks on the following topics:

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* Information from Speakers and Planners

(https://accme.org/highlights/compliance-check-information-speakers-and-planners)

* Joint Providership(https://accme.org/highlights/compliance-check-joint-providership)
* Enduring Materials(https://accme.org/highlights/compliance-check-enduring-materials)
* Mitigating Relevant Financial Relationships for CME Planners (https://accme.org/highlights/compliance-check-mitigating-relevant-financial-relationships­ for-cme-planners)
* Non-Clinical Education and Standard 3

(https://accme.org/highlights/compliance-check-non-clinical-education-and-standard-3)

#### JAMA Article

"Changes to the Standards for Integrity and Independence in Continuing Medical Education (https://jamanetwork.com/journals/jama/fullarticle/2778925)," by ACCME President and CEO, Graham McMahon, MD, MMSc, published in *JAMA,* discusses the guiding principles behind the new Standards for Integrity and Independence in Accredited Continuing Education. Providers can use this article to share with faculty and other stakeholders to explain the new Standards, along with resources available on this webpage.

#### Archived: Standards for Commercial Support

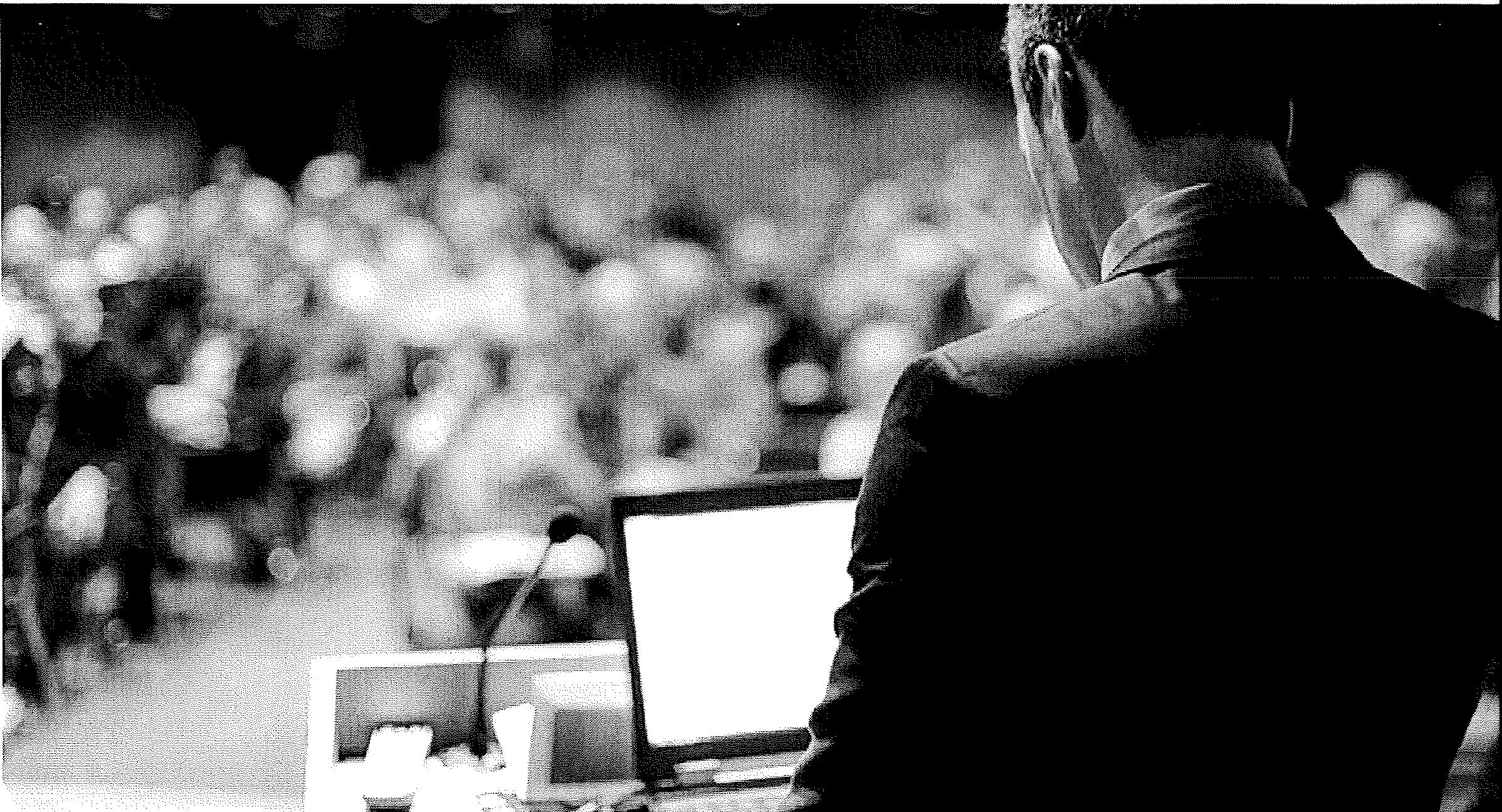
* Standards for Commercial Support: Standards to Ensure Independence in CME Activities (PDF)

(https://accme.org/publications/standards-for-commercial-support-standards-ensure­ independence-cme-activities)

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The AMA' s Physician Recognition Award and Credit Syste1n

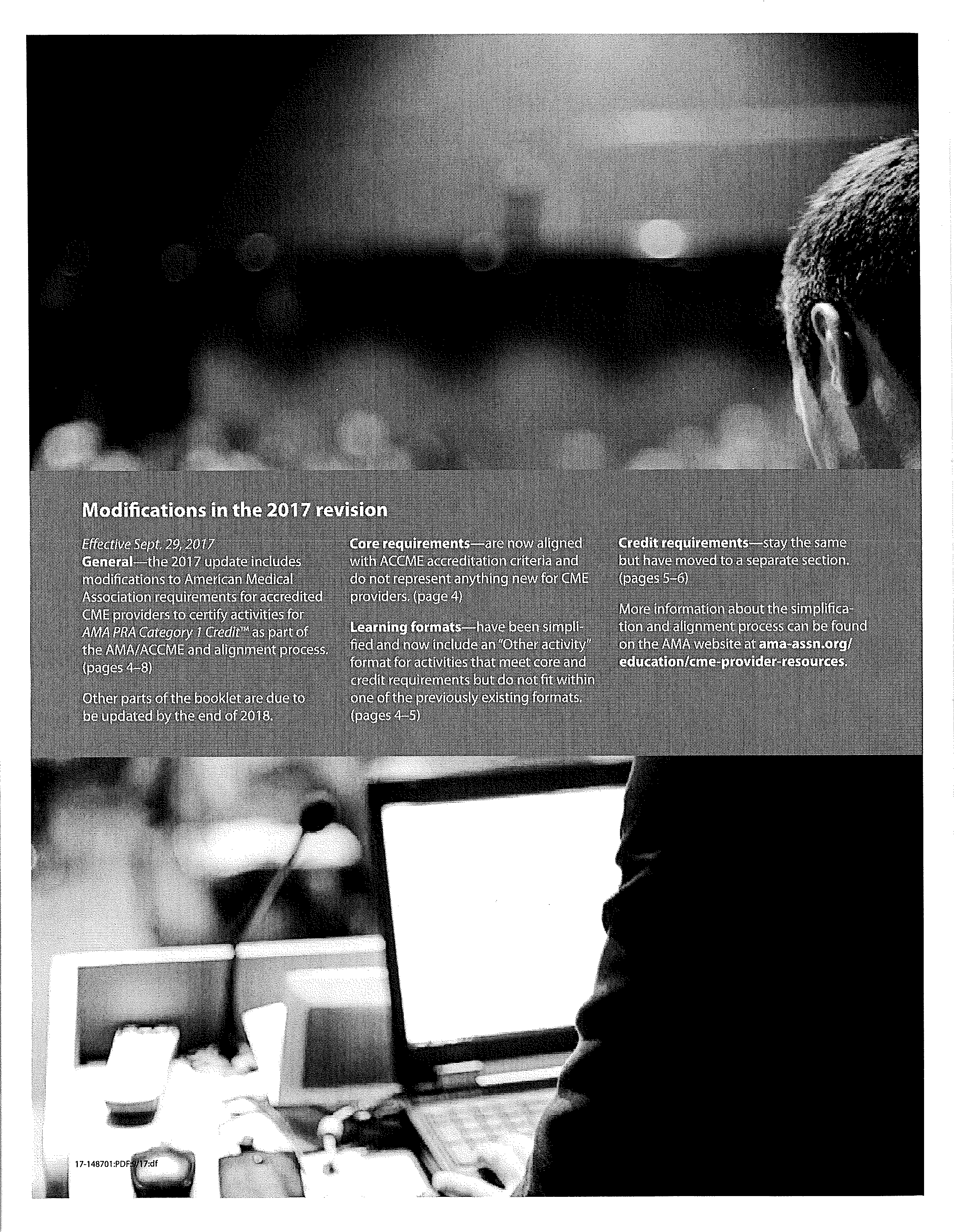
The AMA Physician's Recognition Award and credit system

**Information for accredited providers and physicians**

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The American Medical Association Physician's Recognition Award and continuing medical education credit system

This document describes the requirements that must be followed by accredited continuing medical education (CME) providers in order to certify activities for *AMA PRA Category 1 Credit™* and award credit to physicians. It also describes *AMA PRA Category 2 Credit™,* requirements for physicians wishing to obtain the American Medical Association (AMA) Physician's Recognition Award (PRA) and other important related information. The AMA PRA has recognized physician participation in CME for more than 40 years. AMA PRA credit is recognized and accepted by hospital credentialing bodies, state medical licensure boards and medical specialty certifying boards, as well as other organizations.

#### Brief history

The AMA was founded by Dr. Nathan Davis, in 1847 in Philadelphia. The first two committees constituted by the new organization were the Committee on Medical Education and the Committee on Ethics, emphasizing the importance the association and the medical profession placed on these two areas. The AMA reorganized in 1901 at which time the Commit­ tee on Medical Education became the AMA Council on Medical Education as it continues to be known today. This elected body of physicians formulates policy on medical education by mak­ ing recommendations to the AMA House of Delegates (HOD) through the AMA Board ofTrustees.

Due to the state of undergraduate and graduate education at the time, the organization's early efforts focused primarily on these areas. A major accomplishment of the AMA Council on Medical Education in its early history was laying much of the ground work for, and participating in, the Carnegie Foundation for the Advancement ofTeaching's national study of existing medical schools. The study began in 1909 and resulted in what is known today as the "Flexner Report;' named for its author, Abraham Flexner of the Carnegie Foundation. N. P. Colwell, MD, secretary to the Council on Medical Education, and Arthur

D. Bevan, MD, chairman of the Council on Medical Education, were major contributors to the work that went into the report. This report had a major effect on the medical school education of physicians and essentially established the model for medical education in the United States until the present, more than 100 years later.

In the 1940s and 1950s the AMA Council on Medical Educa- tion increased its focus on postgraduate medical education (PGME). The AMA surveyed practicing physicians to determine how many of them participated in PGME after completion of residency and/or pursued self-directed learning. The council re­ ported to the AMA-HOD in 1955 that almost a third of the 5,000 physicians responding to this survey reported no participation in formal PGME for at least the past five years. The AMA Coun- cil on Medical Education declared that PGME (later changed

to "continuing" medical education by the AMA-HOD) "lacked direction and was suffering from a lack of clearly defined objec­ tives:' As a result of the report, the AMA-HOD took many actions to support CME in the 1960s, one of which was to establish a standing Advisory Committee on Continuing Medical Educa­ tion which, by 1967, had developed a nationwide accreditation system for CME providers. In 1968 the AMA established the AMA PRA. The related AMA PRA credit system for physicians was developed as the metric to be used in determining qualifi­ cations for the AMA PRA.

Over the next two decades the AMA created other entities to make accreditation decisions. In 1981 the AMA and six other national organizations formed the Accreditation Council for Continuing Medical Education (ACCME). The seven member organizations of the ACCME are: the AMA, American Board of Medical Specialties, American Hospital Association, Association for Hospital Medical Education, Association of American Medi­ cal Colleges, Council of Medical Specialty Societies and the

The AMA PRA program continually evolves to meet physicians' learning needs.The AMA Council on Medical Education welcomes input from physicians, accredited CME providers, and consumers of CME credit on recommendations for revisions and/or additions to the AMA PRA credit system. These recommendations should

be communicated to the AMA Division of Continuing Physician Professional Development (CPPD). We would like to thank the

·accredited CME provider and physician communities, without whom the changes and improvements reflected in this booklet would not *have* been possible, and the patients who lend meaning to this work.

In support of the AMA.PRA and the credit system, staff from the AMA Division of CPPD is available to answer questions from physi­ cians, accredited CME providers or the public about compliance with the AMA PRA requirements, standards and policies. Questions may be directed to [cme@ama-assn.org.Resources](mailto:cme@ama-assn.org.Resources) are also available on the"AMA PRA Credit System"web page. Anyone who is involved in planning or Implementing CME activities is encouraged to subscribe, free of charge, to the *AMAMedEd Update* monthly email newsletter.

Federation of State Medical Boards.

Within the United States, the AMA only authorizes organiza­ tions that are accredited by the ACCME or by a state medical so­ ciety recognized by the ACCME, referred to as "accredited CME providers;'to designate and award *AMA PRA Category 1 Credit™* to physicians. With the exception of those activities directly certified by the AMA, individual educational activities *must* be offered only by accredited CME providers, in accordance with AMA PRA credit system requirements, to be certified for *AMA PRA Category 1 Credit The* AMA, on behalf of its physician constituency, also maintains international relationships for certain educational activities that meet AMA standards.

##### Ethical underpinnings of CME

The AMA Principles of Medical Ethics, which are part of the more extensive AMA *Code of Medical Ethics* (Code), are stan­ dards of conduct that define the essentials of honorable physician behavior. These ethical statements were developed primarily for the benefit of the patient and recognize the physi­ cian's responsibility to patients first and foremost, as well as to society, to other health professionals and to him/herself.

Recognizing the central role of education for the continuing professional development of physicians, Principle V of the Code provides the grounding tenet for CME and medical education, in general:

Principle V. A physician shall continue to study, ap­ ply, and advance scientific knowledge, maintain a commitment to medical education, make relevant information available to patients, colleagues, and the public, obtain consultation, and use the talents of other health professionals when indicated.

In addition, physicians have certain ethical responsibilities when participating in CME activities, either as a learner, faculty or planner. Accredited CME providers are encouraged to be fa­ miliar with the relevant ethical issues for physicians and ensure that participation in certified CME activities will not encourage or require physicians to violate the AMA ethical guidance. As

of the time of this writing, the ethical opinions relevant to CME include 9.2.6 "Continuing Medical Education'; 9.2.7 "Financial Relationships with Industry in Continuing Medical Educatibn;' and 9.6.2 "Gifts to Physicians from Industry;' which can be found in full in the AMA.Code *of Medical Ethics.* Questions regarding the interpretation of these opinions should be addressed to

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The AMA expects accredited CME providers to present physi­ cians with commercially unbiased, independent and objective information in all of their activities. Accredited providers must be in compliance with the ACCME Standards for Commercial Support5M.

##### AMA definition of CME

The AMA-HOD and the AMA Council on Medical Education have defined continuing medical education as follows:

CME consists of educational activities which serve to maintain, develop, or increase the knowledge, skills, and professional performance and relation­ ships that a physician uses to provide services for patients, the public or the profession. The content of CME is the body of knowledge and skills gener­ ally 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. (HOD policy #300.988)

##### Educational content of certified CME

Certified CME is defined as:

1. Nonpromotional learning activities certified for credit prior to the activity by an organization authorized by the credit system owner, or
2. Nonpromotional learning activities for which the credit system owner directly awards credit

Accredited CME providers may certify nonclinical subjects (e.g., office management, patient-physician communications, faculty development) for *AMA PRA Category 1 Credit™* as long as these are appropriate to a physician audience and benefit the profession, patient care or public health.

CME activities may describe or explain complementary and alternative health care practices. As with any CME activity, these need to include discussion of the existing level of scientific evidence that supports the practices. However, education that advocates specific alternative therapies or teaches how to perform associated procedures, without scientific evidence

or general acceptance among the profession that supports their efficacy and safety, cannot be certified for *AMA PRA Category 1 Credit™.*

##### Activities ineligible for AMA PRA credit

CME credit may not be claimed for learning which is incidental to the regular professional activities or practice of a physician, such as learning that occurs from:

Clinical experience Charity or mission work Mentoring

Surveying

Serving on a committee, council, task force, board, house of delegates or other professional workgroup

Passing examinations that are not integrated with a certi­ fied activity

#### Categories of AMA PRA credit

There are two categories of AMA PRA credit: *AMA PRA Category 1 Credit™* and *AMA PRA Category 2 Credit™.*

**EARNING *AMA PRA CATEGORY 1 CREDIT™***

There are three ways for physicians to earn *AMA PRA Category 1 Credit™.*

* 1. By participating in certified activities sponsored by ac­ credited ACCME or SMS CME providers. Information for accredited CME providers to certify activities for *AMA PRA Category 1 Credit™* can be found on pages 4-8 and on the "AMA\_PRA Credit System"web page.
  2. By participating in activities recognized by the AMA as valid educational activities. Information about these activi­ ties can be found on page 9 and on the "Cla,im\_ CME Credit From the AMA" web page.
  3. By participating in certain international activities recog­ nized by the AMA. Information regarding these activities can be found on page 10 and on the "Earn Credit for. Participation\_in\_lnternational Activities"web page.

**EARNING *AMA PRA CATEGORY 2 CREDIT™***

*AMA PRA Category 2 Credit"·'* is self-claimed and documented by physicians for participating in activities that are not certified for *AMA PRA Category 1 Credit™.* More information about

*AMA PRA Category 2 Credit™* can be found on page 10 of this booklet.

#### Eligibility for AMA PRA credit

AMA PRA credit may only be claimed by, and awarded to, physi­ cians, defined by the AMA as individuals who have completed an allopathic (MD), osteopathic (DO) or an equivalent medical degree from another country.

#### AMA monitoring of accredited CME providers

To assure the integrity of the AMA PRA credit system, the AMA monitors for compliance with AMA PRA credit system

requirements in several ways including through the ACCME ac­ creditation self-study process, the investigation of complaints received and the review of information found in the public domain. Whenever warranted, the AMA will proceed with follow-up inquiries to ascertain and address compliance with AMA PRA credit system requirements. In most cases, the AMA is able to assist accredited CME providers with finding strate­

gies that will bring their program and activities into compliance with AMA PRA standards.

#### Withdrawal of privilege to designate credit

The AMA reserves the right to withdraw an accredited CME provider's privilege to certify activities for *AMA PRA Category 1 Credit™* should the accredited CME provider fail to bring the

program and activities into compliance with AMA PRA policies, regardless of accreditation status. Accredited CME providers have appropriate recourse through a due process system that has been established for the investigation of any issue related to the AMA PRA requirements. Information about this process can be found on the "Procedures for \_Handling CompJaints\_ Regarding\_AMA\_PRA Credit"web\_page.

Requirements for educational activities eligible for *AMA PRA Category 1 Credit™*

Certification of activities for *AMA PRA Category l Credit™* by accredited CME providers

Accredited CME providers must ensure that activities certified for *AMA PRA Category 1 Credit™* meet all AMA requirements, which include core requirements, format-specific requirements, and requirements for designating and awarding

*AMA PRA Category 1 Credit™.*

**Core requirements for certifying activities for *AMA PRA Category 1 Credit™***

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 Activities5M.

**Format-specific requirements for certifying activities for *AMA PRA Category 1 Credit™***

Activities may be held in one or more of the formats described below, and the applicable format requirements must be met.

**LIVE ACTIVITIES**

An activity that occurs at a specific time as scheduled by the accredited CME provider. Participation may be in person or remotely as is the case of teleconferences or live internet webinars.

**ENDURING MATERIALS**

An activity that endures over a specified time and does not have a specific time or location designated for participation, rather, the participant determines whether and when to com­ plete the activity. (Examples: online interactive educational module, recorded presentation, podcast.)

Provide access to appropriate bibliographic sources to allow for further study.

**JOURNAL-BASED CME**

An activity that is planned and presented by an accredited provider and in which the learner reads one or more articles (or adapted formats for special needs) from a peer-reviewed, professional journal.

Be a peer-reviewed article.

**TEST ITEM WRITING**

An activity wherein physicians learn through their contribution to the development of examinations or certain peer-reviewed self-assessment activities by researching, drafting and defending potential test it"ems.

**MANUSCRIPT REVIEW**

An activity in which a learner participates in the critical review of an assigned journal manuscript during the pre-publication review process of a journal.

**PERFORMANCE IMPROVEMENT CONTINUING MEDICAL EDUCATION (Pl CME)**

An activity structured as a three-stage process by which a physician or group of physicians learn about specific per­ formance measures, assess their practice using the selected performance measures, implement interventions to improve performance related to these measures over a useful interval of time, and then reassess their practice using the same performance measures.

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 Pl CME activity documentation.

Consist of the following three stages:

**Stage** A-learning from current practice performance assessment. Assess current practice using the identi­ fied performance measures, either through chart reviews or some other appropriate mechanism.

**Stage** B-learning from the application of Pl to patient care. Implement the intervention(s) based on the results of the analysis, using suitable tracking tools. Participating physicians should receive guid­ ance on appropriate parameters for applying the intervention(s).

**Stage** C-learning from the evaluation of the Pl CME effort. Reassess and reflect on performance in

practice measured after the implementation of the intervention(s), by comparing to the original assess­ ment and using the same performance measures. Summarize any practice, process and/or outcome changes that resulted from conducting the Pl CME activity.

INTERNET POINT-OF-CARE (POC) LEARNING

An activity in which a physician engages in self-directed, online learning on topics relevant to their clinical practice from a database whose content has been vetted by an accredited CME provider.

OTHER

Accredited CME providers can introduce new instructional practices, as well as blend new and/or established learning formats appropriate to their learners and setting, as long as the activity meets all core requirements. Certified CME activities that do not fit within one of the established format categories must identify the learning format as "Other activity'; followed by a short description of the activity in parentheses, in both the AMA Credit Designation Statement and on documentation provided to learners (certificates, transcripts, etc.). See page 7,

"AMA Credit Designation Statement"for additional information.

**Designating and awarding *AMA PRA Category 1 Credit™***

**EVERY ACTIVITY** (regardless of format)

Must comply with the seven core requirements.

Must comply with the format-specific requirements, if any.

Must be certified for *AMA PRA Category 1 Credit™* in advance of the activity; i.e., an activity may not be retroactively approved for credit.

Must include the AMA Credit Designation Statement in activity materials that reference CME credit.

Must have the credits claimed by physicians retained by the accredited CME provider for a minimum of six years.

LIVE ACTIVITY

Credit for a live activity is determined by measuring for­ mal interaction time between faculty and the physician audience; 60 minutes equals one (1) *AMA PRA Category*

*1 Credit™;* credit is designated in 15 minute or 0.25 credit increments and rounded to the nearest quarter hour.

Physicians claim credit based on participation time, rounded to the nearest quarter hour; this is the number of credits awarded.

When concurrent sessions are offered in a live activity the time is only counted once-i.e., the designated maximum amount of credit may not exceed that which could be claimed by an individual physician.

Only segments of the activity that comply with the AMA core requirements may be certified for *AMA PRA Category 1 Credit™* and included in the designated maximum for the activity. Certified segments must be clearly identified in activity materials.

**Faculty credit for learning associated with preparing and presenting an original presentation**

Accredited CME providers may also award *AMA PRA Category 1 Credit™* to their physician faculty to recognize the learning associated with the preparation and teaching of an original

presentation at the accredited CME provider's live activities that are certified for *AMA PRA Category 1 Credit™.*

Credit for faculty is calculated on a 2-to-1 ratio to presentation time, rounded to the nearest quarter credit.

Credit may only be claimed once for an original presenta­ tion; credit may not be claimed for subsequent presenta­ tions of the same material.

Physician faculty may not claim credit as a participant for their own presentations, but may claim credit for other segments they attend as a participant.

**Faculty credit for learning that takes place while preparing to teach and then is used in teaching medical students and/or residents**

Accredited CME providers that are also accredited by either the LCME (for faculty teaching medical students) and/or the ACGME (for faculty teaching residents/fellows) are eligible to certify a live activity that recognizes the learning associated with teaching medical students and residents. Organiza- tions that are LCME- and/or ACGME-accredited may work in a

joint-providership relationship with a CME provider accredited through the ACCME system to certify this type of live activity for *AMA PRA Category 1 Credit™.*

Credit for faculty is calculated on a 2-to-1 ratio to time spent teaching based on what was learned in preparation for it, rounded to the nearest quarter credit.

Credit should only be awarded for teaching that is verified by the UME and/or GME office.

In addition to the institution being ACGME accredited, the residency/fellowship program itself must also be ACGME accredited in order for faculty to be awarded *AMA PRA Category 1 Credit™* for teaching residents/fellows in that program.

ENDURING MATERIAL

Credit is designated based on the average time it would take a small sample group of the target audience to com­ plete the material. Accredited CME providers can use other mechanisms to establish credit if the result is the same.

Credit is designated in 15 minute or 0.25 credit increments and rounded to the nearest quarter hour.

Physicians who successfully complete the activity are awarded the number of credits for which the activity is designated.

JOURNAL-BASED CME ACTIVITY

Individual articles are designated for, and physicians are awarded, one (1) *AMA PRA Category 1 Credit™.*

TEST-ITEM WRITING ACTIVITY

Each test-item writing activity is designated for, and physi­ cians are awarded, ten (10) *AMA PRA Category 1 Credits™.*

MANUSCRIPT REVIEW ACTIVITY

Each manuscript review is designated for, and physicians are awarded, three (3) *AMA PRA Category 1 Credits™.*

Pl CME ACTIVITY

Each Pl CME activity is designated for twenty (20) *AMA PRA Category 1 Credits™.*

Physicians completing Stage A are awarded five (5) *AMA PRA Category 1 Credits™;* Stages A and B, 1O credits; A, Band C, 20 credits.

INTERNET POINT-OF-CARE ACTIVITY

Each Internet PoC search is designated for, and physicians are awarded, one-half (0.5) *AMA PRA Category 1 Credit™.*

OTHER ACTIVITY

Accredited CME providers designate *AMA PRA Category 1 Credit™* on a one credit-per-hour basis, using their best reason­ able estimate of the time required to complete the activity.

Physicians are awarded the number of credits for which the activity is designated.

# Additional information for accredited CME providers

#### Designation of new procedures and skills training

Through new procedures and skills courses, accredited CME providers can train physicians on topics that may allow them to request new or expanded clinical privileges. The AMA PRA requirements for new skills and procedures training consist

of four levels so that accredited CME providers and physicians can clearly identify the depth and complexity of the training. Accredited CME providers will need to assess, at the activity's conclusion, the participant physician's level of achievement. 1 This is in addition to planning and implementing the activi­ ties to meet the AMA core requirements, the format-specific requirements for the activity and the requirements for designating and awarding *AMA PRA Category 1 Credit™,* to be certified for *AMA PRA Category 1 Credit™.* The requirements

for designation of new procedures and skills training and the certificate wording for each of the levels may be found on the AMA website.

#### AMA Credit Designation Statement

The AMA Credit Designation Statement indicates to physicians that the activity has been certified by an accredited CME pro­ vider as being in compliance with *AMA PRA Category 1 Credit™* requirements. The AMA Credit Designation Statement must be written without paraphrasing and must be listed separately from accreditation or other statements.

The following AMA Credit Designation Statement must be included in relevant announcement and activity materials:

The <<name of accredited CME provider>> designates this <<learning format>> for a maximum of <<number of credits» *AMA PRA Category 1 Credit(s)™.* Physicians should claim only the credit commensurate with the extent of their participation in the activity.

The learning format listed in the AMA Credit Designation Statement must be one of the following AMA approved learning formats:

1. Live activity
2. Enduring material
3. Journal-based CME activity
4. Test-item writing activity
5. Manuscript review activity
6. Pl CME activity
7. Internet point-of-care activity
8. Other activity (<<provide short description>>)

For activities in the "Other activity" format:

The <<name of accredited CME provider>> designates this Other activity (<<provide short description>>) for

a maximum of <<number of credits>> *AMA PRA Category 1 Credit(s)™.* Physicians should claim only the credit commensurate with the extent of their participation

in the activity.

Due to the nature of faculty credit for teaching medical stu­ dents and residents/fellows, the standard credit designation statement listed above is not appropriate for this type of live activity since the number of credits will not be known in advance. The following credit designation statement should be used in its place for faculty credit for teaching medical students and residents/fellows only:

The <<name of accredited CME provider>> designates this live activity for a maximum of 2 *AMA PRA Category 1 Credits™* per one hour of interaction with medical students and/or residents/fellows. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

**Use of phrase"*AMA PRA Category 1 Credit™"***

The phrase*"AMA PRA Category 1 Credit''* is a trademark of the American Medical Association. Accredited CME providers must always use the complete italicized, trademarked phrase. The phrase "Category 1 Credit" cannot be used when referring to *AMA PRA Category 1 Credit™.*

#### Use of the AMA Credit Designation Statement in program materials and activity announcements

PROGRAM MATERIALS

The AMA Credit Designation Statement must be used in any program materials, in both print and electronic formats (e.g., a course syllabus, enduring material publication, landing page of an internet activity), that reference CME credit.

ACTIVITY ANNOUNCEMENTS

Activity announcements include all materials, in both print and electronic formats, that are designed to build awareness of the activity's educational content among the target physician audi­ ence. The complete AMA Credit Designation Statement must always be used on any document or publication that references the number of *AMA PRA Category 1 Credits™* designated for the activity.

A "Save the date" announcement (such as a postal mailer with limited space) may indicate that the activity has been ap­ proved for *AMA PRA Category 1 Credit™* without stating an exact number of credits if the accredited CME provider has already certified the activity. This announcement may read, "This activity has been approved for *AMA PRA Category 1 Credit™"* or similar language. Accredited CME providers may never indicate that*"AMA PRA Category 1 Credit™* has been applied for" or any similar wording.

#### Recording credit

Accredited CME providers must have a mechanism for physi­ cians to claim credit and must award the actual number of *AMA PRA Category 1 Credits™* claimed by each physician. The records documenting the credit awarded must be retained by accred­ ited CME providers, for each certified activity, for a minimum of six years after the completion date of the activity.

Although it is necessary to uniquely identify the physicians who claim CME credit, AMA House of Delegates policy opposes the use of Social Security numbers to do so. An alternative that might be used is the physician's Medical Education number, a unique 11-digit proprietary identifier assigned by the AMA to every U.S. physician.

#### Credit certificates, transcripts or other documentation available to physicians

Only physicians (MDs, DOs and those with equivalent medical degrees from another country) may be awarded *AMA PRA Cat­ egory 1 Credit™* by accredited CME providers. Accredited CME providers must be able to provide documentation to participat­ ing physicians of the credit awarded upon the request of the physician. When an accredited CME provider issues a certificate, transcript or another means of documentation, it must reflect the actual number of credits claimed by the physician. An ex­ ample of wording that might be used on certificates awarding *AMA PRA Category 1 Credit™* to physicians follows:

The <<name of accredited CME provider>> certifies that

<<name of physician>> <<degree>> has participated in the <<learning format>> titled <<title of activity>> on

<<date>> and is awarded <<number of credits>> *AMA*

*PRA Category 1 Credit(s)™.*

Documentation provided to participating physicians must ac­ curately reflect, at a minimum, the following:

Physician's name

Name of accredited CME provider Title of activity

Learning format

Date(s) of live activity or date that physician completed the activity

Number of *AMA PRA Category 1 Credits™* awarded

#### Credit certificates, transcripts or other documentation available to non-physician participants

Non-physician health professionals and other participants may not be awarded *AMA PRA Category 1 Credit™.* However, ac­ credited CME providers may choose to issue documentation of participation to non-physicians that states that the activity was certified for *AMA PRA Category 1 Credit™.* An example of word­ ing that might be used on documentation for a non-physician participant follows:

The <<name of accredited CME provider>> certifies that

<<name of non-physician participant>> has participated in the <<learning format>> titled <<title of activity>> on

<<date>>. This activity was designated for <<number of credits» *AMA PRA Category 1 Credit(s)™.*

#### Joint and co-providership

If a certified activity is either jointly provided (by an accredited CME provider and a non-accredited organization) or co-provid­ ed (by two or more accredited CME providers), then the accred­ ited CME provider certifying the activity must keep a record of the *AMA PRA Category 1 Credit™* claimed for each physician participating in that activity.

Additional ways for physicians to earn AMA PRA credit and the AMA Physician's Recognition Award

Activities for which *AMA PRA Category l Credit™* is awarded directly by the AMA

Some activities do not occur under the auspices of an accred­ ited CME provider. The AMA Council on Medical Education recognizes the learning that occurs in completing these activi­ ties and allows physicians to claim *AMA PRA Category 1 Credit™* directly from the AMA for the activities defined in this section.

To claim credit for these activities the physician should apply to the AMA for a certificate indicating the *AMA PRA Category 1 Credit™* awarded for completion of each activity. Information and the direct credit application can be found on the "Claim\_ CME Credit.From the\_AMA"web page. These activities include:

#### Teaching at a live activity

Preparing and presenting an original presentation at a live activity that has been certified for *AMA PRA Category 1 Credit™* (if the accredited CME provider has not already awarded credit for this).

**Documentation:** a copy of the page(s) used by the provider to announce or describe the activity which includes the name of the speaker, accredited CME provider, AMA Credit Designation Statement, date and location of the activity.

**Credit assignment:** two (2) *AMA PRA Category 1 Credits™*

per one (1) hour of presentation time.

#### Publishing articles

Publishing, as the lead author (first listed), a peer-reviewed article in a journal included in the MEDLINE bibliographic database.

**Documentation:** a reprint or copy of the page(s) of the journal, which include the name of the author listed first, the name of the journal and date published.

**Credit assignment:** ten (1O) *AMA PRA Category 1 Credits™* per article.

#### Poster presentations

Preparing a poster presentation, as the first author, which is included in the published abstracts, at an activity certified for *AMA PRA Category 1 Credit™.*

**Documentation:** a copy of the page(s) in the published activity documents that lists the author and poster abstract, accredited

CME provider, AMA Credit Designation Statement, title and date of activity.

**Credit assignment:** five (S) *AMA PRA Category 1 Credits™*

per poster.

#### Medically related advanced degrees

Obtaining a medically related advanced degree, such as a masters in public health (not available if the academic program certified individual courses for *AMA PRA Category 1 Credit™).*

**Documentation:** a copy of the diploma or final transcript.

**Credit assignment:** twenty five (25) *AMA PRA Category 1 Credits™.*

#### ABMS member board certification and Maintenance of Certification (Mo(©)

Successfully completing an ABMS board certification or Moc process.

**Documentation:** a copy of the board certificate or the specialty board notification letter.

**Credit assignment:** sixty (60) *AMA PRA Category 1 Credits™.*

#### Accreditation Council for Graduate Medi­ cal Education accredited education

Successfully participating in an Accreditation Council for Graduate Medical Education (ACGME) accredited residency or fellowship program.

**Documentation:** a copy of the certificate or letter of comple­ tion from the approved residency/fellowship program

**Credit assignment:** twenty (20) *AMA PRA Category 1 Credits™*

per year

The successful completion of an ABMS member board certifica­ tion process or an ACGME accredited residency or fellowship program also qualifies a physician for the AMA PRA. Please see the section regarding the AMA PRA or visit the "b.P.P!Y.forJ.b. .

AMA\_PhY.sician\_Recognition Award" web\_ page.

International activities for *AMA PRA Category l Credit™*

For participation in certain international activities, physicians may earn *AMA PRA Category 1 Credit™.*

#### AMA international conference recognition program

Each year the AMA recognizes and provides physicians with an opportunity to earn *AMA PRA Category 1 Credit™* for certain international conferences. Contact [cme@ama-assn.org](mailto:cme@ama-assn.org) learn out if there are any upcoming approved conferences.

#### AMA PRA credit system international agreements for credit conversion

As of this writing, the AMA has agreements with the European Union of Medical Specialists, the Royal College of Physicians and Surgeons of Canada, and the Qatar Council for Healthcare Practitioners for the conversion of their CME credit to *AMA PRA Category 1 Credit™.*

Visit the "Earn Credit.for ParticipationJnJnternational\_Activities".

.w !:?.P.9gg for more information.

Requirements for *AMA PRA Category 2 Credit™*

*AMA PRA Category 2 Credit™* is self-designated and claimed by individual physicians for participation in activities not certified for *AMA PRA Category 1 Credit™* that:

Comply with the AMA definition of CME; and

Comply with the relevant AMA ethical opinions; at the time of this writing this includes 8.061 "Gifts to Physicians from Industry" and 9.011 "Continuing Medical Education;' and

Are not promotional; and

A physician finds to be a worthwhile learning experience related to his/her practice.

Examples of learning activities that might meet the require­ ments for *AMA PRA Category 2 Credit™* include, but are not limited to:

Participation in activities that have not been certified for

*AMA PRA Category 1 Credit™*

Teaching physicians, residents, medical students or other health professionals

Unstructured online searching and learning (i.e., not Internet PoC)

Reading authoritative medical literature Consultation with peers and medical experts Small group discussions

Self assessment activities Medical writing Preceptorship participation Research

Peer review and quality assurance participation

Organizations may not certify activities for *AMA PRA Category 2 Credit™* or advertise that an activity qualifies for *AMA PRA Category 2 Credit™.* Organizations may choose to maintain records of physician participation in activities that have not been certified for *AMA PRA Category 1 Credit™* but, since they may not certify or award such credit, should not record them as *AMA PRA Category 2 Credit™.*

A physician must individually assess the educational value for each learning experience in which he or she participates to determine if it is appropriate to claim *AMA PRA Category*

*2 Credit™.*

**Claiming *AMA PRA Category 2 Credit™***

**Documentation:**the physician should self claim credit for ap­ propriate *AMA PRA Category 2 Credit™* activities and document activity title or description, subject or content area, date(s) of participation and number of credits claimed. Physicians may not claim *AMA PRA Category 2 Credit™* for an activity for which the physician has claimed *AMA PRA Category 1 Credit™.* Each physician is responsible for claiming and maintaining a record of their *AMA PRA Category 2 Credit™.*

**Credit calculation:** as with live activities, physicians should claim credit based on their participation time with 60 minutes of participation equal to one (1) *AMA PRA Category 2 Credit™;* credit is claimed in 15 minute or 0.25 credit increments; physi­ cians must round to the nearest quarter hour.

# The AMA Physician's Recognition Award

##### Professional recognition of accomplish­ ments in CME

Since 1968 patients and colleagues have recognized the AMA PRA as evidence of a physician's commitment to keeping cur­ rent with the advances in biomedical science, as well as other developments in medicine. The goals of this award remain the same as established more than 40 years ago:

To provide recognition for the many thousands of physicians who regularly participate in CME

To encourage all physicians to keep up-to-date and to improve their knowledge and judgment by CME

To provide reassurance to the public that America's physicians are maintaining their competence by regular participation in CME

To emphasize the AMA's position as a leader in CME

To emphasize the importance of developing more mean­ ingful continuing education opportunities for physicians

To strengthen the physician's position as the leader of the health service team by focusing attention on his or her interest in maintaining professional competence

The AMA encourages all physicians to become involved in a program that honors them as professionals who participate in CME in order to better meet the needs of their patients.

In addition, the AMA PRA is widely accepted by multiple entities as proof of participation in CME. Most state licensing boards and hospitals will accept the AMA PRA or the AMA ap­ proved application as proof of having met CME requirements.

##### AMA PRA requirements

ELIGIBILITY

Physicians may apply for the AMA PRA if they hold a valid and current license issued by one of the United States, Canadian or Mexican licensing jurisdictions, or are engaged in an ACGME­ accredited residency training program in the United States.

CREDIT REQUIREMENTS FOR THE AMA PRA

In order to apply for an AMA PRA, physicians must earn a speci­ fied number of *AMA PRA Category 1 Credits™,* either through accredited CME provider certified activities, from the AMA for direct credit activities, or international activities. The rest of the credits required for the award may be either *AMA PRA Category 1 Credits™* or *AMA PRA Category 2 Creditsr".*

The AMA offers one-, two- and three-year AMA PRAs. The requirements for each are as follows:

**One-year award**

Twenty (20) *AMA PRA Category 1 Credits™* and thirty (30) *AMA PRA Category 1 Credits™* or *AMA PRA Category 2 Credits™* (50 credits total), **or**

one year ACGME residency/fellowship training

**Two-year award**

Forty (40) *AMA PRA Category 1 Credits™* and sixty (60) *AMA PRA Category 1 Credits™* or *AMA PRA Category 2 Credits™* (100 credits total), **or**

two years ACGME residency/fellowship training

**Three-year award**

Sixty (60) *AMA PRA Category 1 Credits™* and ninety (90) *AMA PRA Category 1 Credits™* or *AMA PRA Category 2 Credits™* (150 credits total), **or**

Three years ACGME residency/fellowship training, **or**

ABMS board certification or MoC

**The AMA PRA with commendation is available for physicians who meet the following requirements:**

One-year award with commendation: ninety (90) credits total

Sixty (60) *AMA PRA Category 1 Credits™* and thirty (30) *AMA PRA Category 1 Credits™* or *AMA PRA Category 2 Credits™*

Two-year award with commendation: one hundred and eighty (180) credits

One hundred and twenty (120) *AMA PRA Category 1 Credits™* and sixty (60) *AMA PRA Category 1 Credits™* or *AMA PRA Category 2 Credits™*

Three-year award with commendation: two hundred and seventy (270) credits

One hundred and eighty (180) *AMA PRA Category 1 Credits™* and ninety (90) *AMA PRA Category 1 Credits™* or *AMA PRA Category 2 Credits™*

The AMA requires that at least half of the credit applied toward the AMA PRA be within the physician's specialty or area of practice. Ethics, office management and physician-patient communication can serve as appropriate topics for CME,

but are not considered specialty specific education.

###### AWARDDURATI ON

The AMA PRA signals a commitment to ongoing participation in CME and acknowledges past participation in CME activities. The AMA grants the award based on the prior one to three years of CME credit attainment. The award's term begins on the first of the month following the completion date of the latest CME activity listed on the application for which the physician claimed *AMA PRA Category 1 Credit™.* For example, a physician applying for a three-year award whose last activity was on May 21, 2017, will be issued a certificate valid from June 1, 2017 un­ til June 1, 2020. If a physician is renewing his/her AMA PRA the renewal date will be the same as the expiration date of his/her last AMA PRA if he/she earned the allotted credits in the time period of his/her expiring AMA PRA.

###### ACTIVITY-SPEC IFIC CREDIT LIM ITS FOR THE AMA PRA

For the purpose of applying for an AMA PRA certificate, certain activities include specific limits on the amount of credit a physician can claim, per year, toward their AMA PRA:

Teaching at live activities certified for *AMA PRA Category 1 Credit™:* Limit of ten (10) *AMA PRA Category 1 Credits™* per year

Internet PoC: Limit of twenty (20) *AMA PRA Category 1 Credits™* per year

Manuscript review: Limit of five (5) reviews-

or fifteen (1S) *AMA PRA Category 1 Credits™* per year

Poster presentation: Limit of one (1) poster- or five (S) *AMA PRA Category 1 Credits™* per year

Publishing articles: Limit of one (1) article-

or ten (10) *AMA PRA Category 1 Credits™* per year

###### OTHER TYPE S OFCREDITTHATMA Y BE U SEDFOR THE AMA PRA

For the purpose of obtaining an AMA PRA application physi­ cians may identify credit earned within the following CME systems on a one-to-one basis for *AMA PRA Category 1 Credit™*

American Academy of Family Physicians' prescribed credit American College of Obstetricians and

Gynecologists' formal learning cognates

The AMA Physician's Recognition Award and credit system

### AMA PRA agreements with other organizations

The AMA has agreements with specialty societies, state medical societies, medical staff groups and other organizations whereby an AMA PRA can be issued to any U.S. licensed physician as established by an agreement between the

AMA and the organization.

Organizations that are interested in developing a similar agreement should contact the AMA at [pra@ama-assn.org.](mailto:pra@ama-assn.org)

### Jurisdictions that accept the AMA PRA certificate for licensing purposes

All U.S. licensing jurisdictions requiring CME recognize the AMA PRA credit system. Some of these licensure boards will also accept a current and valid AMA PRA or the AMA approved AMA PRA application as documentation of having met their CME requirements.

Information about state CME requirements for license renewal may be found on the website of the Federation of State Medical Boards (fsmb.org). For the most current information, we sug­ gest that the particular jurisdiction be contacted directly.

### The Joint Commission compliance

The Joint Commission requires that, at hospitals and health care organizations it accredits, physicians with clinical privi­ leges document their participation in CME. The Joint Commis­ sion will accept, subject to their review, correctly completed AMA PRA applications stamped "approved" by the AMA as documented physician compliance with Joint Commission CME requirements. The Joint Commission requires that physicians conduct at least half of their reported CME in their specialty or area of clinical practice.

### Disclaimer

Physicians should note that the AMA PRA does not serve as a direct measure of physician competency and should not be used for that purpose. Physician competency represents the assessment of many complex measures, of which CME partici­ pation is only one.

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