



# Accreditation Council for Continuing Medical Education (ACCME®) and American Medical Association (AMA) Glossary of Terms and Definitions

## **ACCME Recognized Accreditors**

State and territory medical societies recognized by the ACCME as accreditors of intrastate CME providers. To achieve recognition, a state or territory medical society must meet the ACCME requirements, the [Markers of Equivalency](#).

## **Accreditor**

An organization that sets and enforces the standards for CME provider organizations and/or activities through review and approval of organizations/activities, and monitors and enforces guidelines for these organizations/activities.

## **Accreditation**

The framework by which a program of CME is assessed to determine whether the program meets the accreditor's requirements. See also "Accredited CME provider."

## **Accreditation criteria**

The requirements against which CME providers' compliance is determined in order to achieve or maintain accreditation.

## **Accreditation decision**

The decisions made by an accreditor concerning the accreditation status of CME providers. In the ACCME System, there are five options for accreditation status: Provisional Accreditation, Accreditation, Accreditation with Commendation, Probation, and Nonaccreditation.

## **Accreditation interview**

A step in the accreditation and reaccreditation process. In the ACCME System, volunteer surveyors review the CME provider's self-study report and performance-in-practice files, and then meets with the provider for the interview portion of the reaccreditation process. The purpose of the interview is for the provider to explain how the CME program fulfills accreditation requirements, and to discuss its strengths, accomplishments, and challenges.

## **Accreditation Review Committee (ARC)**

The ACCME volunteer committee that reviews and analyzes the materials submitted by CME providers and surveyors to determine providers' compliance with the ACCME Accreditation Criteria and policies. Based on this review, the ARC makes recommendations about accreditation decisions to the ACCME Decision Committee.

## **Accreditation statement**

The standard statement that must appear on all CME activity materials and brochures distributed by ACCME-accredited providers. There are two variations of the statement; one for directly provided activities and one for jointly provided activities.

**Accreditation with Commendation**

The highest accreditation status available in the ACCME System,, accompanied by a six-year term of accreditation; available only to providers seeking reaccreditation, not to initial applicants.

**Accredited CME**

The term used to refer to continuing medical education that has been deemed to meet the requirements and standards of a CME accrediting body.

**Accredited CME provider**

An organization accredited as a provider of continuing medical education. Accredited CME providers assume the responsibility and accountability for developing certified educational activities. ACCME-accredited providers represent a range of organizational types and offer CME primarily to national or international audiences of physicians and other health care professionals. Intrastate-accredited providers offer CME primarily to learners from their state/territory or contiguous states.

**Activity**

See "CME activity."

**Activity review**

One of the ACCME requirements for achieving Provisional Accreditation or transitioning from Provisional Accreditation to Accreditation.

**Advertising and exhibits income**

Advertising and exhibits are promotional activities and not continuing medical education. Therefore, monies paid by commercial interests to providers for these promotional activities are **not** considered to be commercial support under the ACCME Standards for Commercial Support: Standards to Ensure Independence in CME Activities<sup>SM</sup>.

**AMA core requirements**

The AMA requirements that every activity certified for *AMA PRA Category 1 Credit™* must meet. They can be found in the AMA PRA booklet.

**AMA Credit Designation Statement**

The statement that indicates that the activity has been certified for *AMA PRA Category 1 Credit™*, and includes the type of activity and number of credits.

**AMA Direct Credit Activities**

Activities that do not occur under the auspices of an accredited CME provider and for which the AMA directly awards credit to physicians who meet the requirements as listed in the AMA PRA booklet.

**AMA House of Delegates**

The principal policy-making body of the AMA. This democratic forum represents the views and interests of a diverse group of member physicians who meet twice per year, to establish broad policy on health, medical, professional and governance matters, as well as the broad principles within which the AMA's business activities are conducted.

**AMA Physician's Recognition Award (PRA)**

The AMA PRA has recognized physician participation in CME since 1968. The AMA established the PRA certificate and the related AMA PRA credit system to recognize physicians who, by participating in CME activities, demonstrate their commitment to staying current with advances in medicine. More information can be found in the AMA PRA booklet.

**AMA PRA Category 1 Credit™**

The type of CME credit that physicians earn by participating in certified activities sponsored by CME providers accredited by either the ACCME or an ACCME-recognized State/Territory Medical Society; by participating in activities recognized by the AMA as valid educational activities and awarded directly by the AMA; and by participating in certain international activities recognized by the AMA through its International Conference Recognition Program.

**AMA PRA Category 2 Credit™**

Credit that is self-claimed and self-documented by physicians by participating in activities that are not certified for *AMA PRA Category 1 Credit™* and that the physician individually determines comply with the AMA definition of CME; and comply with the relevant AMA ethical opinions (see CEJA Opinions relevant to CME); and are not promotional; and the physician finds to be a worthwhile learning experience related to his/her practice.

**AMA PRA CME credit system**

Developed in 1968, the credit system initially described the type of educational activities that would qualify to meet the requirement to obtain the AMA's PRA (See Physician's Recognition Award). The AMA PRA Standards and Policies have evolved and now AMA PRA credit has been accepted as an educational metric for the purposes of state licensure, professional credentialing, hospital privileging and maintenance of certification of physicians.

**Annual Report Data**

Data that accredited providers are required to submit to the ACCME on at least an annual basis describing their overall CME program. This information includes summary data about the numbers and types of CME activities, the hours of instruction, the numbers of physician and other learner participants, and some financial information. The ACCME analyzes this data to monitor changes in individual CME programs as well as to assess trends across the CME enterprise. Each year, the ACCME publishes the aggregated information, offering a comprehensive analysis of the size and scope of the CME enterprise nationwide.

**Certified CME**

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

**CME activity**

An educational offering that is planned, implemented, and evaluated in accordance with the ACCME Accreditation Criteria, Standards for Commercial Support, and policies; the AMA Physician's Recognition Award CME credit system standards and policies; and the AMA Council on Ethical and Judicial Affairs pertinent opinions.

**CME credit**

The "currency" assigned to CME activities. Physicians and other healthcare professionals use credits to meet requirements for maintenance of licensure, maintenance of specialty board certification, credentialing, membership in professional societies, and other professional privileges. The requirements for credit designation are determined by the organization responsible for the credit system. Besides the AMA, other organizations in the US that administer credit systems for physicians include the American Academy of Family Physicians and the American Osteopathic Association. Please refer to those organizations for more information. See *AMA PRA Category 1 Credit™* and *AMA PRA Category 2 Credit™* above.

**Commercial bias**

Content or format in a CME activity or its related materials that promotes the products or business lines of an ACCME-defined commercial interest.

**Commercial interest**

Any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests. A commercial interest is not eligible for ACCME accreditation or participation in joint providership.

**Commercial support**

Monetary or in-kind contributions given by an ACCME-defined commercial interest that is used to pay all or part of the costs of a CME activity. The requirements for receiving and managing commercial support are explained in the ACCME Standards for Commercial Support. Advertising and exhibit income are not considered commercial support.

**Committee for Review and Recognition (CRR)**

The ACCME volunteer committee that collects, reviews, and analyzes data about Recognized Accreditors' (state or territory medical societies) compliance with the ACCME's recognition requirements, the [Markers of Equivalency](#), through a process called [Maintenance of Recognition](#). The CRR makes recognition recommendations to the ACCME Decision Committee. See also "Maintenance of Recognition."

**Committee learning**

A live CME activity that involves a learner's participation in a committee process addressing a subject that would meet the ACCME definition of CME if it were taught or learned in another format.

**Competence**

In the context of evaluating effectiveness of a CME activity in the ACCME System, the extent to which learners know how to implement (or stop doing) what the activity intended to teach them.

**Compliance**

The finding given when a CME provider has fulfilled the ACCME's/Recognized Accreditor's requirements for the specific criterion in the Accreditation Criteria or policy.

**Conflict of interest**

The ACCME considers financial relationships to create conflicts of interest in CME when individuals have both a financial relationship with a commercial interest **and** the opportunity to affect the content of CME about the products or services of that commercial interest. The potential for maintaining or increasing the value of the financial relationship with the commercial interest creates an incentive to influence the content of the CME—an incentive to insert commercial bias. See also "relevant financial relationships."

**Continuing Medical Education (CME)**

The educational activities that serve to maintain, develop, or increase the knowledge, skills, and professional performance and relationships a physician uses to provide services for patients, the public, or the profession. CME represents that body of knowledge and skills generally recognized and accepted by the profession as within the basic medical sciences, the discipline of clinical medicine, and the provision of health care to the public.

**Continuing Professional Development (CPD), or Continuing Physician Professional Development (CPPD)**

Includes all activities that doctors undertake, formally and informally, including CME, in order to maintain, update, develop, and enhance their knowledge, skills, and attitudes in response to the needs of their patients.

**Co-provided activity**

A CME activity presented by two or more accredited providers. One of the accredited providers must take responsibility for the activity in terms of meeting ACCME and AMA requirements and reporting activity data to the ACCME. See also “directly provided activity.”

**Council on Ethical and Judicial Affairs (CEJA)**

The AMA elected body responsible for developing ethics policy for the AMA. Comprising seven practicing physicians, a resident or fellow, and a medical student, CEJA prepares reports that analyze and address timely ethical issues that confront physicians and the medical profession. CEJA maintains and updates the AMA Code of Medical Ethics, widely recognized as the most comprehensive ethics guide for physicians. In addition, CEJA has judicial responsibilities, which include appellate jurisdiction over physician members' appeals of ethics-related decisions made by state and specialty medical societies. To protect the integrity and quality of the CME enterprise and to support the autonomy of physicians as voluntary participants in CME activities, CEJA has rendered Opinions 9.2.6, Ethical Issues in CME; 9.2.7, Financial Relationships with Industry in Continuing Medical Education; and 9.6.2, Gifts to Physicians from Industry. Activities certified for *AMA PRA Category 1 Credit*<sup>™</sup> must be developed in accordance with these opinions.

**Council on Medical Education**

The AMA elected body that formulates policy on medical education (including undergraduate, graduate, and CPPD/CME) by recommending educational policies to the AMA House of Delegates, through the AMA Board of Trustees. The Council provides stewardship of the AMA PRA credit system, and is also responsible for recommending nominees to the boards of ACCME and other accrediting bodies, as well as to other national organizations.

**Course**

A live CME activity where the learner participates in person. A course is planned as an individual event. Examples: annual meeting, conference, seminar.

**Designation of CME credit**

The declaration that an activity meets the requirements for a specific type of credit. The accredited provider is responsible to those organizations that administer credit systems for compliance with applicable credit requirements. Note: The designation of credit for CME activities is not within the purview of the ACCME or ACCME Recognized Accreditors. See also “CME credit.”

**Directly provided activity**

One that is planned, implemented, and evaluated by the accredited CME provider. This definition includes co-provided activities (offered by two accredited providers) reported by the accredited provider that awards the credit.

**Documentation review**

See “performance-in-practice review.”

**Enduring material**

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 complete the activity. Examples: online interactive educational module, recorded presentation, podcast.

**Faculty**

The individuals responsible for teaching, authoring, or otherwise communicating the activity content to learners.

**Financial relationships**

See “relevant financial relationships.”

**Focused accreditation interview**

A specially arranged interview between the ACCME/Recognized Accreditor and an accredited provider to address noncompliance areas that had been identified in an accreditation review or had not been corrected in a progress report.

**Hours of instruction**

Hours of instruction represents the total hours of educational instruction in a CME activity. The information is used for the purpose of reporting the activity in PARS. (See PARS below.) For example, if a one-day course lasts eight hours (not including breaks or meals), then the total hours of instruction reported for that course is eight. Hours of instruction may or may not correspond to the number of *AMA PRA Category 1 Credits™* for which the activity is designated.

**In-kind commercial support**

In the context of the ACCME’s Standards for Commercial Support, non-monetary resources provided by a commercial interest in support of a CME activity. Examples of in-kind support include equipment, supplies, and facilities.

**Internet enduring material activity**

An enduring material provided via the Internet, meaning that there is no specific time designated for participation. Rather, the participant determines when to complete the activity. Examples: online interactive educational module, recorded presentation, podcast.

**Internet live activity**

A live course available via the Internet at a certain time on a certain date and is only available in real-time, just as if it were a course held in an auditorium. Example: webcast.

**Internet Point of Care (PoC) learning (Internet searching and 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.

**Intrastate accredited provider**

See “Accredited CME provider.”

**Jointly provided activity**

An activity that is planned, implemented, and evaluated by an accredited provider and one or more non-accredited entities.

**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.

**Knowledge**

In the context of educational needs for a CME activity in the ACCME System,, the extent to which learners have a need for new information.

**Learner**

An attendee at a CME activity. See also “physician learners,” and “other learners.”

**Learning from teaching**

Personal learning projects designed and implemented by the learner with facilitation from the accredited provider. It recognizes the learning that occurs as physicians prepare to teach.

**Live activity**

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.

**Maintenance of Recognition**

ACCME system to ensure that Recognized Accreditors are applying the national standards for accreditation decisions and the accreditation process. Recognized Accreditors submit documents and information on an ongoing basis. The ACCME provides detailed, formative feedback to Recognized Accreditors in real time as the data is reviewed. Feedback is given in relation to the [Markers of Equivalency](#). The ACCME adopted Maintenance of Recognition in 2011 in order to improve the quality, value, and efficiency of the recognition process and to enable the ACCME and Recognized Accreditors to identify areas for improvement on an ongoing basis.

**Manuscript review activity**

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

**Monitoring**

The ACCME monitors accredited providers between formal accreditation reviews by reviewing the program and activity data they submit on at least an annual basis. In addition, the ACCME and AMA each have a formal procedure for accepting and reviewing complaints from the public and the CME community about accredited providers' compliance with accreditation and credit system requirements.

**New procedures and skills training**

Activity whereby accredited CME providers can train physicians on topics that may allow them to request new or expanded clinical privileges. The AMA PRA framework for new skills and procedures training consists of four levels so that accredited CME providers and physicians can clearly identify the depth and complexity of the training.

**Nonaccreditation**

The accreditation decision by the ACCME/Recognized Accreditor that a CME provider has not demonstrated compliance with the appropriate ACCME requirements.

**Noncompliance**

The finding given by the ACCME/Recognized Accreditor when a CME provider does not fulfill the ACCME's requirements for the specific criterion in the Accreditation Criteria or policy.

**Other learners**

Learners other than those who have obtained an MD, DO, or equivalent medical degree from another country.

**Parent organization**

An outside entity, separate from the accredited provider, that has control over the accredited provider's funds, staff, facilities, and/or CME activities.

**Performance**

In the context of evaluating effectiveness of a CME activity in the ACCME system, the extent to which learners *do* what the CME activity intended them to be able to do (or stop doing) in their practice.

**Performance Improvement CME (PI CME)**

An activity structured as a three-stage process by which a physician or group of physicians learn about specific performance 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.

**Performance-in-practice review**

During the initial accreditation, reaccreditation, and progress report processes, the ACCME/Recognized Accreditor selects activities to review from the CME provider's current accreditation term. The provider then submits materials documenting how these activities fulfilled accreditation requirements. This process enables the ACCME/Recognized Accreditor to ensure that accredited providers are consistently complying with requirements on an activity level.

**Physician learners**

Activity learners who are MDs or DOs, or have an equivalent medical degree from another country.

**Probation**

Accreditation status given by the ACCME/Recognized Accreditor to accredited providers that have serious problems meeting ACCME requirements. Probation may also be given to providers whose progress reports are rejected. The accredited provider must correct the noncompliance issues in order to return to a status of Accreditation.. While on probation, a provider may not jointly provide new activities. See also "progress report."

**Program of CME**

The provider's CME activities and functions taken as a whole.

**Progress Report**

Accredited providers that receive noncompliance findings in the Accreditation Criteria or policies must submit a progress report to the ACCME/Recognized Accreditor demonstrating that they have come into compliance. If the accredited provider successfully demonstrates compliance, the progress report is accepted and the provider can then complete its accreditation term. If the progress report does not yet demonstrate compliance, the accredited provider will be required to submit a second progress report and/or the ACCME may require a focused accreditation interview to address the areas of noncompliance. The ACCME/Recognized Accreditor can also place an accredited provider on Probation or issue a decision of Nonaccreditation after reviewing a progress report.

**Program and Activity Reporting System (PARS)**

A web-based portal from the ACCME designed to streamline and support the collection of program and activity data from accredited CME providers. PARS is also used by accredited providers to register CME activities that will count for Maintenance of Certification™ and other uses, such as the Food and Drug Administration's Risk Evaluation and Mitigation Strategies (REMS).

**Provider**

See "Accredited CME provider."



**Provisional Accreditation**

A two-year term given to initial applicants in the ACCME System that comply with the necessary Accreditation Criteria.

**Recognition**

The process used by the ACCME to approve state and territory medical societies as accreditors of intrastate providers.

**Regularly scheduled series**

A course planned as a series with multiple, ongoing sessions, e.g., offered weekly, monthly, or quarterly; and is primarily planned by and presented to the accredited organization's professional staff. Examples include grand rounds, tumor boards, and morbidity and mortality conferences.

**Relevant financial relationships**

The ACCME requires anyone in control of CME content to disclose relevant financial relationships to the accredited provider. Individuals must also include in their disclosure the relevant financial relationships of a spouse or partner. The ACCME defines *relevant financial relationships* as financial relationships in any amount that create a conflict of interest and that occurred in the twelve-month period preceding the time that the individual was asked to assume a role controlling content of the CME activity. The ACCME has not set a minimal dollar amount—any amount, regardless of how small, creates the incentive to maintain or increase the value of the relationship. Financial relationships are those relationships in which the individual benefits by receiving a salary, royalty, intellectual property rights, consulting fee, honoraria for promotional speakers' bureau, ownership interest (e.g., stocks, stock options or other ownership interest, excluding diversified mutual funds), or other financial benefit. Financial benefits are usually associated with roles such as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and other activities from which remuneration is received, or expected. See also "conflict of interest."

**Self-study report**

One of the data sources used in the ACCME process of accreditation or reaccreditation. When applying for accreditation or reaccreditation, CME providers prepare a report to explain their accomplishments and practices related to the Accreditation Criteria and policies, assess areas for improvement, and outline a plan for making those improvements.

**Standards for Commercial Support: Standards to Ensure Independence in CME Activities<sup>SM</sup>**

ACCME requirements designed to ensure that CME activities are independent and free of commercial bias. The Standards comprise six standards: independence, resolution of personal conflicts of interest, appropriate use of commercial support, appropriate management of associated commercial promotion, content and format without commercial bias, and disclosures relevant to potential commercial bias.

**State medical society accreditor**

State medical societies may choose to become "recognized" by the ACCME. Recognition refers to a designation awarded to state and territorial medical societies that allows them to accredit intrastate providers of continuing medical education.

**Test-item writing activity**

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 items.

**Unstructured online searching and learning**

An activity in which a physician uses Internet sites to learn about a topic. If it meets the guidelines for *AMA PRA Category 2 Credit™* a physician may designate it as such and claim credit based on the time devoted to it.