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**Massachusetts
Board of Registration
in Medicine**

**FREQUENTLY-ASKED
QUESTIONS ABOUT
CONTINUING MEDICAL EDUCATION**

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INTRODUCTION

The Board of Registration in Medicine, through its Patient Care Assessment Unit, has developed the following guide to its Continuing Medical Education (CME) requirements for physicians. It is arranged topically, in a question-and-answer format, to respond to the most commonly-asked CME questions that the Board receives from physicians and medical education directors. It also provides a detailed, but easy-to-understand description of all major aspects of our CME requirements. The Board will provide a copy of the CME regulation itself (243 CMR 2.06(5)) to anyone who requests it. A number of individuals and groups have assisted the Board with this guide, notably the Massachusetts Medical Society and the Harvard Risk Management Foundation. The Board would like to thank them for their helpful advice and comments.

BASIC BIENNIAL CME REQUIREMENT

(1) How many Continuing Medical Education (CME) credits do I need for license renewal in Massachusetts?

ANSWER: During each two-year licensing cycle, you must earn a minimum of 100 credit hours, at least 40 of which must be in Category 1. The remainder may be in Category 1 or 2. (For more information about the distinction between Category 1 and 2, see Question 6 below).

(2) Do I receive one CME credit for one hour of study?

ANSWER: Generally, yes. However, programs approved for Category 1 credit usually will specify the number of credits awarded to participants. One Category 2 CME credit is earned for each hour of study. In addition, the Board may specify the number of credits awarded for certain activities, without regard to the exact amount of study time involved (see Questions 8 and 11 below).

(3) When must I obtain my CME credits?

ANSWER: All required CME credits must be earned during the physician's biennial license renewal cycle. Although most physicians renew their Massachusetts medical licenses on their birthdays in odd-numbered years, some do so on their birthdays in even-numbered years (renewal dates are set forth on physicians' wallet-size registration cards). It is not necessary to earn a specified number of CME credits during each year of the two-year cycle, or during any calendar year, so long as the full CME requirement is met during the two-year license renewal period.

(4) Can excess CME credits earned during one license renewal period be "saved" and used during a subsequent period?

ANSWER: No. A total of 100 CME credits must be earned during each biennial license renewal cycle. Physicians who do not have the necessary credits during a given cycle may apply for a waiver or consider inactive status (see Question 19 below).

(5) Must all physicians fulfill the Board's CME requirements?

ANSWER: Yes, except for physicians in the following license categories:

- Limited licensees (i.e., intern, resident or fellow pursuing post-graduate training in an accredited training program);
- Physicians who have placed their licenses on inactive status (note that all inactive physicians must continue to renew their licenses every two years) (see Question 19 below); and
- Full licensees who are enrolled in a residency program or fellowship that has been approved by the Accreditation Council for Graduate Medical Education (and is listed in its ACGME Directory, the so-called "Green Book"), or who are in the first or second year of a fellowship program not approved by ACGME (e.g., a pure research fellowship).

Separate consecutive research fellowships are viewed as a single fellowship for purposes of determining whether this exception applies. Part-time residencies and fellowships qualify for this exception provided that they involve a minimum of 16 hours of work per week, averaged over a four-week period.

TYPES OF REQUIRED CME CREDITS

(6) What is the difference between Category 1 and Category 2 study?

ANSWER: Generally, Category 1 programs are sponsored or jointly sponsored by an institution or organization accredited to offer American Medical Association Category 1 credit for CME activities. Accreditation is granted by the Accreditation Council for Continuing Medical Education (ACCME) or its designees. If you are not certain whether a program is sponsored by an accredited organization, contact the program sponsor or the Department of Education and Communications of the Massachusetts Medical Society, 1440 Main Street, Waltham, MA 02154-1649 [(617) 893-4610]. Often the program materials themselves clearly state the number of credits that will be granted, and in what category.

Category 2 study (which formerly consisted of Categories 2-6) is defined by the American Medical Association to include any of the following:

- Attendance at lectures and seminars on medical subjects not accredited for Category 1;
- Teaching of physicians, physician trainees and other health care professionals, except the teaching of interns and residents by full-time faculty;
- Preparation and publication of articles, books and exhibits relating to medicine. Up to 10 hours of credit may be claimed for an article, each chapter of a book or other medical education materials, or the preparation of an exhibit (however, credit may be claimed only once for the medical or educational content of a publication regardless of whether it is reissued or changed in format).
- Self-instruction, such as reading medical literature, use of audio-visual materials or computer-assisted instruction. This includes, for instance, study for specialty board certification.
- Medical consultation consisting of planned instruction from a consultant for not less than one hour. Both the consultant and the physician receiving the instruction may report this teaching activity (but see Question 16 below). Note that ordinary case consultation does not qualify for Category 1 or 2 credit.
- Participation in patient care review, including peer review, case conferences such as morbidity and mortality grand rounds, chart audits, and service on medical staff committees for tissue review, infections, pharmacy, etc., and hospital committees that oversee risk management, quality assurance and Patient Care Assessment.
- Self-assessment. Physicians may earn credit for time spent taking self-assessment examinations not eligible for Category 1 credit.

For more information on this subject, you can obtain a copy of the American Medical Association's Physician Recognition Award booklet by writing to the American Medical Association, Office of Physician Credentials and Qualifications, 535 North Dearborn Street, Chicago, IL 60610.

(7) Are there specific areas of study that the biennial 100-hour CME requirement must cover, and, if so, how many credits must be earned in each?

ANSWER: Yes. The Board requires that:

(a) A majority of the 100 credit hours must be directly related to the physician's primary area or areas of practice. However, it is not necessary that the majority of both Category 1 and Category 2 credits be in the primary practice area(s), provided that at least 51 of the 100 credit hours are in the primary practice area(s). For instance, a physician could meet this requirement by earning 51 hours of Category 2 credit in his or her primary practice area.

(b) The 100-hour requirement must include 10 credit hours of risk management study, at least four hours of which must be in Category 1-approved activities (see Question 10 below for more details).

(c) The 100-hour requirement must include two hours in Category 1 and/or 2 studying the Board's regulations. This study is eligible for Category 1 credit only if it is undertaken as part of a program accredited for Category 1 (see Question 6 above). Study of the Patient Care Assessment (PCA) regulations (243 CMR 3.01-3.16) also qualifies as risk management study, and may be counted for purposes of this requirement as well as the risk management requirement; however, the time spent simultaneously satisfying both of these requirements may be counted only once. Thus, a physician who reads the Board's Patient Care Assessment regulations for two hours fulfills the requirement to study the Board's regulations for two hours and earns two (not four) hours of Category 2 risk management credit.

The requirement to study the Board's regulations for two hours also may be met by reviewing official publications of the Board, including, for example, its AIDS policy or its Chemically Dependant Physician Policy. However, a Category 1 program that is not directly related to the Board's regulations themselves (for example, one that focuses on chemical dependency) will not meet this requirement (although it may qualify for risk management credit).

(8) Does the Board ever approve programs or activities for Category 1 or 2 CME credit?

ANSWER: Yes. In certain cases, the Board may award the equivalent of Category 1 or Category 2 credit for specified activities. It has voted to award the equivalent of Category 1 credit for work performed on its behalf by members of its panel of medical experts who review potential disciplinary cases, and to any physician who reviews certain materials published by the Risk Management Foundation of the Harvard Medical Institutions (see Question 11 below).

Generally, programs sponsored by other institutions or groups need not be approved in advance by the Board. However, on the license renewal form, each physician is required to certify under the penalties of perjury that he or she has met the Board's basic CME requirements. If you attend a program that you believe does not meet these requirements, please contact the Board's Patient Care Assessment Unit (617) 727-0303.

(9) I am giving a speech as part of a Category 1-accredited CME program. Can I claim Category 1 credit for my speaking time?

ANSWER: Yes, but only if this is the first time you have presented the speech. Revised or updated speeches are not considered to be new speeches. Otherwise, the speech (as well as the preparation time) may be eligible for Category 2 credit (see Question 6 above). Note that you may earn Category 1 CME credit for attending other presentations that are part of the Category 1 program.

(10) What is "risk management study"?

ANSWER: Risk management study must include instruction in medical malpractice prevention, such as risk identification, patient safety and loss prevention, and may include instruction in any of the following areas:

- medical ethics;
- quality assurance;
- medical-legal issues;
- patient relations;
- utilization review that directly relates to quality assurance; or
- non-economic aspects of practice management.

Note that at least some of the instruction should focus on medical malpractice prevention, and all instruction should be in one or more of the areas described above. A course designed to improve clinical skills by increasing technical knowledge will qualify for general CME credit, but typically will not constitute risk management study.

Participation on designated peer review committees dealing with quality assurance or on medical ethics committees can help to satisfy the Category 2 risk management requirement (see Question 6 above and Question 12 below).

(11) How can I find out about Category 1 CME courses, especially risk management courses?

ANSWER: Physicians should contact the Department of Education and Communications of the Massachusetts Medical Society, at (617) 893-4610, the license renewal program coordinator at the Board, at (617) 727-3086, or medical schools and hospital educational offices in Massachusetts. For Massachusetts-licensed physicians who practice out of state, certain Category 1 home-study courses in risk management may be available. Contact the Massachusetts Medical Society or the Patient Care Assessment Unit of the Board [(617) 727-0303] for more details.

In addition, the Board grants the equivalent of Category 1 risk management credit to physicians who listen to *Resource*, an audio digest, and read *Forum*, a risk management journal. Both are published by the Risk Management Foundation of the Harvard Medical Institutions. They may be ordered from its subscription service, at (203) 326-5400. CRICO-insured physicians should contact their institution's loss control coordinator. Category 1 CME risk management equivalency credits can be earned as follows: one hour for listening to one edition of *Resource* and reading one edition of *Forum*, or one-half hour for either listening to the cassette or reading the journal. Physicians should keep a record of these credits in the same way that records of Category 2 credits are kept. Excess credits earned in this way may be applied only to the Category 2 requirement (60 credits per renewal cycle). Excess credits may be earned as follows: one credit for each hour spent reviewing *Resource* or *Forum*. A data sheet with more complete details about this opportunity is available from the Board.

(12) What types of hospital committee work (including such activities as grand rounds) are eligible for risk management CME credit?

ANSWER: Eligibility depends on whether a significant element of the committee's work is focused on either of the following: (i) reviewing or improving the quality of care in a way that does not primarily focus on the purely technical refinement of a physician's clinical skills; or (ii) reviewing the quality of medical care through the examination of a number of cases that present similar issues, and drawing conclusions from them (particularly conclusions that suggest protocol or policy changes).

Thus, for example, service on a peer review committee or participation in morbidity and mortality grand rounds will qualify for risk management credit if the primary subject matter involves examination of a series of related cases, and if the review questions whether systemic changes (e.g., in medical practice, protocol or policy) could improve the quality of care. In many cases, service on a quality assurance or Patient Care Assessment Committee (among other hospital committees) will qualify for risk management credit, provided that the physician's work meets one of the two criteria listed above. However, a committee that considers from a strictly medical point of view the specifics of the care and management of an individual patient will not be eligible for risk management CME credit.

Similar activities that qualify for risk management CME credit include:

- Serving as a member of a medical malpractice tribunal (this meets the definition of risk management because it involves medical-legal issues).
- Preparing to appear and testifying as an expert witness in a medical malpractice case (however, you may not claim credit if you are a party to the lawsuit) (this also involves medical-legal issues).
- Performing utilization review committee work (either for a hospital or an agency), to the extent that it directly involves quality assurance issues.

Note that, unless the program is accredited for Category 1, it will be eligible only for Category 2 credit. For more information on the distinction between Category 1 and 2, see Question 6 above.

CALCULATING CREDITS

(13) What if my license renewal cycle is shorter than two years?

ANSWER: If you are a newly-licensed or newly-active physician, and your license will be renewed in one year or less, you need not earn any CME credits during that cycle. If your renewal cycle is longer than one year but shorter than two years, you must meet one half of the basic biennial CME requirement. Note that a special rule applies to physicians completing residency programs (see Question 14 below).

For example, if your license will be renewed in 18 months, you must earn one-half of the usual number of credits—in other words: 20 Category 1 credits, at least two in risk management; and 30 Category 2 credits, at least three in risk management. In addition, one of these hours must consist of studying the Board's regulations, and at least 26 of them must be in your primary area(s) of practice.

(14) I am completing a residency or fellowship program approved by the American Council of Graduate Medical Education. When must I begin accumulating CME credits?

ANSWER: You should start to earn credits beginning with the first full (i.e., two-year) license renewal cycle after your program has ended.

For example, if your residency program ends on July 1, 1990, and you next renew your license on April 30, 1991, you should begin to earn credits as of April 30, 1991, and fulfill the basic biennial CME requirement during the period that begins on April 30, 1991 and ends on April 30, 1993. You need not earn any CME credits during the period from July 1, 1990 to April 30, 1991.

(15) I am enrolled in a residency program in a foreign country, and hold a full Massachusetts license. The program is not approved by the American Council of Graduate Medical Education. Do I need to obtain CME credits?

ANSWER: Yes. Alternatively, you may want to request inactive status (see Question 19 below).

(16) Can a physician earn CME credits for time spent receiving medical consultation (or taking part in any other activities or study) that is required by the Board as a part of a disciplinary order or monitoring program?

ANSWER: Yes, but credits obtained in this way are in addition to those that must be earned to satisfy the basic biennial CME requirement.

DOCUMENTATION

(17) What documentation should I keep in order to demonstrate that I have earned my CME credits, and how long should I keep it?

ANSWER: For Category 1 programs, keep the certificate of attendance and/or a letter of attestation issued by the program sponsor, as well as a written record of the name of the program and program sponsor, the nature of the activity, the date(s) of attendance, and the number of credit hours earned. For Category 2 activities, keep a written record that lists the approximate number of hours spent on each type of CME activity.

In both cases, records should be maintained for at least one full license renewal cycle after the cycle in which the credits were earned. This will permit the Board to conduct audits of compliance with the CME requirement at any point during the two years following the physician's two-year license cycle. Note that, as a condition of license renewal, you must state under oath that you have obtained the requisite number of CME credits.

To keep track of your credits, use the form on the inside cover of this guide; or, you may order a larger form by contacting the the Department of Education and Communications of the Massachusetts Medical Society [(617) 893-4610].

(18) Should I send CME documentation with my license renewal application?

ANSWER: No. Send documentation only if you are audited or if the Board otherwise asks you to do so.

INACTIVE STATUS/LAPSED LICENSES/WAIVERS

(19) Can I apply for a waiver if I am not able to earn all of the required CME credits?

ANSWER: Yes. A physician may obtain a CME waiver application by writing to the Board. The completed application must be received by the Board at least 30 days prior to the physician's license renewal date, if the physician is to be eligible for a waiver. The Board will process a request for a CME waiver application if the request is in writing and includes a self-addressed, stamped envelope.

In applying for a waiver, the physician must explain the reasons for not fulfilling the Board's CME requirements, state how many credits in each category have been earned, and describe a plan for completing the requirements. The grounds for granting a waiver include prolonged illness of the physician, and inaccessibility or unavailability of CME activities. If the Board grants the waiver, the physician typically receives an extension of time in which to complete the Board's CME requirements; generally, a waiver will not completely exempt the physician from those requirements (see Question 20 below).

Alternatively, a physician may request inactive status, either by filing a special form with the Board (available on request) or by checking the appropriate box on the license renewal application. Physicians on inactive status are exempt from the CME requirements, but must continue to renew their license every two years and pay the renewal fee. Inactive physicians may not practice medicine in Massachusetts.

For further information....

If you have a question about the availability of Category 1 programs, or other types of CME programs (including risk management):

**Massachusetts Medical Society
Department of Education and Communications
1440 Main Street
Waltham, MA 02154-1649
(617) 893-4610**

If you have a question about risk management programs (Category 1 or 2), or the Board's CME requirements:

**Massachusetts Board of Registration in Medicine
10 West Street
Boston, MA 02111
ATTN: Renewal Coordinator or
Patient Care Assessment Unit
(617) 727-0303**