Continuing Pharmacy Education

Provider eUpdate

As 2014 winds down, ACPE staff is preparing for the upcoming Board of Directors meeting on January 21-25, 2015, which follows a productive CPE Commission meeting held November 12-14, 2014.

For this end-of-year issue, we are sharing a few updates, announcements, and reminders for your consideration.

1. Physician Payments Sunshine Act
2. Risk Evaluation and Mitigations Strategies (REMS)
3. Joint Accreditation for Interprofessional Continuing Education**™**
4. Field Reviewer Recognition
5. Educational Opportunities
6. Administrative Items

For a short-cut to the previous versions of the CPE Provider eUpdate, please <click here>.

As always, please do not hesitate to contact CPE staff with questions related to CPE activities. ceinfo@acpe-accredit.org | (312) 664-3575.

Happy Holidays and warm wishes for 2015!

All the best,
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Assistant Director, CPE Provider Accreditation Program
Accreditation Council for Pharmacy Education

Continuing Pharmacy Education

Provider eUpdate

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1. Physician Payments Sunshine Act

The Physician Payments Sunshine Act requires pharmaceutical and device manufacturers to report to the Centers for Medicare & Medicaid Services (CMS) their direct and indirect payments or other transfers of value made to healthcare providers and teaching hospitals (covered recipients). The Final Rule, released by CMS in February 2013, originally contained an exemption for payments to healthcare providers who serve as speakers for accredited continuing education programs. However, this exemption excluded ACPE as well as other accrediting bodies who utilize standards of independence from commercial interests (i.e. Standards for Commercial Support[SM]). With the implementation of the Final Rule, ACPE-accredited providers noted a decline in physician involvement in CPE activities as well as grant funding despite the existence of appropriate safeguards in place.

On October 31, 2014, following a period of proposed changes and open comment, CMS announced changes to the Final Rule whereby revisions included "deleting the Continuing Education Exclusion in its entirety." CMS stated they would not consider any CE-related payments to be reportable so long as the applicable manufacturer "provides funding to support a continuing education event but does not require, instruct, direct, or otherwise cause the continuing education event provider to provide the payment or other transfer of value in whole or in part to a covered recipient."[1] With adherence to the CPE standards, commercial support received by ACPE-accredited providers utilizing physician faculty would not be considered reportable; manufacturers would be not responsible for reporting on values that ultimately go to physician speakers.

[1]Federal Register, the Daily Journal of the United States Government. *Medicare Program; Revisions to Payment Policies Under the Physician Fee Schedule, Clinical Laboratory Fee Schedule, Access to Identifiable Data for the Center for Medicare and Medicaid Innovation Models & Other Revisions to Part B for CY 2015*. https://federalregister.gov/a/2014-26183. Accessed December 16, 2015.

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2. Risk Evaluation and Mitigation Strategies (REMS)

FDA REMS Standardization

In partnership with the Accreditation Council for Continuing Medical Education (ACCME) and the American Nurses Credentialing Center (ANCC), ACPE issued a response to the Food and Drug Administration (FDA) report entitled "Standardizing and Evaluation Risk Evaluation and Mitigation Strategies (REMS)".[1] The FDA's report articulated four priority projects in its commitment "to standardizing REMS to better integrate them into the existing and evolving health care system": providing benefit-risk information to patients, prescriber education, pharmacy systems, and practice settings.

Specific to Project 2, Prescriber Education under REMS: Prescriber Education—REMS and Continuing Education (CE) for Healthcare Providers, FDA proposes to "assess if it is feasible to accredit CE with certain REMS so health care professionals will receive accredited CE when they complete prescriber education activities (such as study and self-assessment tests, modular web-based activities, webinars, etc.). Accrediting bodies will ensure that CE activities developed as part of this project will be in compliance with the CE standards for their organizations. (Accreditation Council of Continuing Medical Education (ACCME), American Nurses Credentialing Center (ANCC), and Accreditation Council for Pharmacy Education (ACPE))."

In their response, ACCME, ACPE, and ANCC stated, "As the national continuing education accreditors for the professions of medicine, pharmacy, and nursing, we share the FDA's aspiration to leverage the accredited continuing education (CE) system to deliver REMS to health care professionals, as described in your report *Standardizing and Evaluating Risk Evaluation and Mitigation Strategies (REMS)*…. We believe that accredited CE can play a significant role in addressing the patient safety issues identified in REMS. We appreciate that the FDA recognizes the value of accredited CE and is exploring how to leverage the accredited CE system to carry out these important public health initiatives."

[1]The Food and Drug Administration (September 2014). REPORT: Standardizing and Evaluating Risk Evaluation and Mitigation Strategies (REMS).

Extended-Release and Long-Acting (ER/LA) Opioid Analgesics REMS

FDA's Extended-Release (ER) and Long-Acting (LA) Opioid Analgesics REMS was approved in July 2012 with the first CE activities launched in February 2013. To date, 15 CE providers financially supported through independent educational grants by the manufacturers of ER/LA opioid analgesics, known as REMS Program Companies (RPC), have offered over 50 individual REMS-compliant CE activities. According to the RPC, the 2015 Request for Applications (RFA) process to award its educational grants is anticipated to be released late in the first quarter of 2015.

Given the current state of prescription drug abuse as a critical public health concern in the U.S., continuing education for health care professionals about the risks of opioid medications as well as safe prescribing and safe use practices can serve as a means to impact the problems of abuse and misuse. Independent of RPC-funding, CPE providers can look to the FDA Blueprint for Prescriber Education for Extended-Release and Long-Acting Opioid Analgesics ("FDA Blueprint") as a resource to develop CPE activities to meet the educational needs of their learners. Utilizing the Blueprint in a manner consistent with the CPE Standards, providers may identify through their needs assessment processes components of the Blueprint might address the identified knowledge and/or practice gaps of their learners. Activities that are not REMS-compliant, as defined in ACPE policy, may be considered REMS-related CE in that they meet some but not all of the requirements established by FDA.

Resources:
FDA ER/LA Opioid Analgesics REMS website - includes links to the REMS blueprint, Q&A, news releases, and other resources

RPC ER/LA Opioid Analgesics REMS website – includes materials for CE providers, health professional, and patients

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3. Joint Accreditation for Interprofessional Continuing Education[TM]

Joint Accreditation[TM]**: 2014 Year in Review**

As 2014 comes to a close, the Joint Accreditation program experienced continued growth through streamlined processes and the addition of several providers. This year the Joint Accreditation program streamlined the fee structure and payment process for its providers now requiring only one annual fee, eliminating confusion for providers who previously followed three separate dollar amounts and timelines. In 2010, the Institute for Healthcare Improvement (IHI) and VHA Inc. became the first two organizations to receive joint accreditation as providers of continuing education for healthcare teams. In 2014, these two organizations have become the first to receive reaccreditation—a milestone for interprofessional continuing education. Additionally, this year three new providers were also welcomed to the list of Jointly Accredited organizations; they include the Joint Commission, the American Society of Parenteral and Enteral Nutrition (A.S.P.E.N.), and Contemporary Forums.

Looking ahead to 2015, the Joint Accreditation program will continue to streamline processes for providers by offering a common database that will resemble ACPE's Provider Web Tool; this database, expected in the first half of 2015, will serve as the single reporting system required of the ACCME, ACPE, and ANCC. The Joint Accreditation Program intends to expand educational programming for prospective applicants and existing providers through online education and live summits to address the needs of Providers offering interprofessional continuing education.

Joint Accreditation is starting off the year by offering a free webinar on **January 8, 2015** to explain the basics and benefits of Joint Accreditation and answer your questions. The webinar will be useful for organizations in the initial stages of the application process as well as organizations that are considering applying for Joint Accreditation. Organizations interested in learning more about the Joint Accreditation process are encouraged to attend this webinar. Register for this webinar HERE.

For more information, visit Joint Accreditation for Interprofessional Continuing Education.

4. Field Reviewer Recognition

During 2014, ACPE utilized 54 field reviewers to assist in the review and evaluation of providers undergoing comprehensive review for continued accreditation or ongoing monitoring. Field reviewers involved in the comprehensive review process attended online training, evaluated a provider's Self-Assessment Report, and participated as a review team member in a 2-hour conference call with the provider, a CPE Commission member, and an ACPE staff member. A subset of trained field reviewers evaluated an individual activity against CPE standards and policies, providing their findings to the CPE Commission as part of the provider's ongoing monitoring.

ACPE greatly appreciates the volunteer efforts of the following individuals:

Fadi Alkhateeb	Barbara Hayward	Barbara Nussbaum
Maggie Allen	Molly Hewitt	Theresa U. Ofili
Sandeep Bains	Dina Hunsinger-Norris	Christine Okafor
Barbara Barnes	Michele Ingram	Carolyn Orendorff
Steve Biddle	Charisse Johnson	Gail Orum
Postelle Birch-Smith	Gagan Kaushal	Louis Pagliaro
Sara Bork	Seema Kazmi	Dean Parry
Deidra Clark	Tanya Keegan	Kristine Paschalis
Jeffrey Copeland	Kristi Kelley	Randy Pittman
Steve Crosby	Karen Kier	Larry Selkow
Vickie Danaher	John Koerber	Bupendra Shah
Sarah Jane Faro	Dorothea Lee	Trina Stewart
Jill Fitzgerald	Tina Christi Lopez	Jeanne Sun
Amanda Fowler	Enas Mahmoud	Angela Thornton
Tamara Fox	Barb Mason	Bernadette Walker
Courtney Gallion	Marcy May	Emma Webb
Rashid Ghani	Patty Melissen	Scott Weston
Maria Gorrick	Mai Nguyen	Antonia Zapantis

5. Educational Opportunities

CPE Administrator Workshop

ACPE will be offering a CPE Administrator Workshop on **April 27-28, 2015** at the ACPE office in Chicago, IL. The workshop is designed to provide a working knowledge of the ACPE accreditation process as it relates to continuing pharmacy education, including training and group activities on the ACPE *Standards for Continuing Pharmacy Education*,

Policies and Procedures Manual, Provider Web Tool, and Continuing Professional Development for the CE Professional. The workshop also strives to offer opportunities for networking with other ACPE-accredited providers.

Registration for the workshop is now available on the ACPE website. We look forward to seeing you!

CPE Administrator Webinar: Self-Assessment Report Preparation

In addition to the webinars available on CPE standards and policies, ACPE has released a webinar to assist those providers preparing their self-assessment report for comprehensive review. The webinar is designed to offer instruction and guidance on the components and formatting of the self-assessment report. Unlimited access is available for one year from date of webinar purchase.

To learn more about available webinars and make a purchase, click here.

If you have additional questions or concerns, please consult the FAQ page by clicking here or contact ACPE staff.

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6. Administrative Items

CPE Monitor

As a reminder, providers have 60 days after the date of CPE activity participation to upload participant information [i.e. ePID, DOB (mmdd), UAN, date of participation] into CPE Monitor.

- For **live CPE Activities**, the provider must upload participant information 60 days from the date the learner completed the CPE activity. This date must be identical to the live date listed in the Activity Description Form in the ACPE Provider Web Tool.
- For **home study CPE Activities**, the provider must upload the participant information 60 days from the date the learner successfully completed the CPE activity. The date of participation must be between the initial release date and the expiration date of the home study CPE activity that is listed in the Activity Description Form in the ACPE Provider Web Tool. If the learner completes the home study activity on the date of expiration, the provider will have 60 days post-expiration date to upload the participant information.

Providers should establish an adequate interval for learners to complete all activity components required for credit (e.g. learning assessments, evaluations) within the 60-day window. Requirements to receive credit, including the established timeframe, should be clearly communicated to learners. If there are circumstances where providers may not be able to meet the 60-day requirement, please contact cpemonitor@acpe-accredit.org.

Provider Web Tool

ACPE has made available an updated User's Guide and webcast tutorial as a resource for the revised Provider Web Tool. These items can be found on the <u>Web Tool</u> section of the ACPE website under the heading "Web Tool Manual and Tutorial."