

Guide to Your ACCME Decision

For Providers in the March 2019 Cohort

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Introduction

Your Decision

Upon completing the initial, reaccreditation or progress report process, your organization will receive an individualized ACCME decision through the ACCME's Program and Activity Reporting System (PARS). The decision is the ACCME's formal notification to you of the accreditation status and term that your organization has been assigned. The decision summarizes ACCME's findings related to your compliance with the [accreditation requirements](#). The decision will indicate if other actions are required, such as a progress report for providers receiving reaccreditation or progress report decisions or an activity review for providers receiving initial accreditation decisions. The decision might also contain some specific language that explains the ACCME's findings for some requirements.

Accessing Your Decision

You can access your organization's decision report from your [PARS dashboard](#). The screenshots below will guide you to the information you need to review the decision.

Once you sign in, from the "HOME" tab, you can see the accreditation status that resulted from your decision:

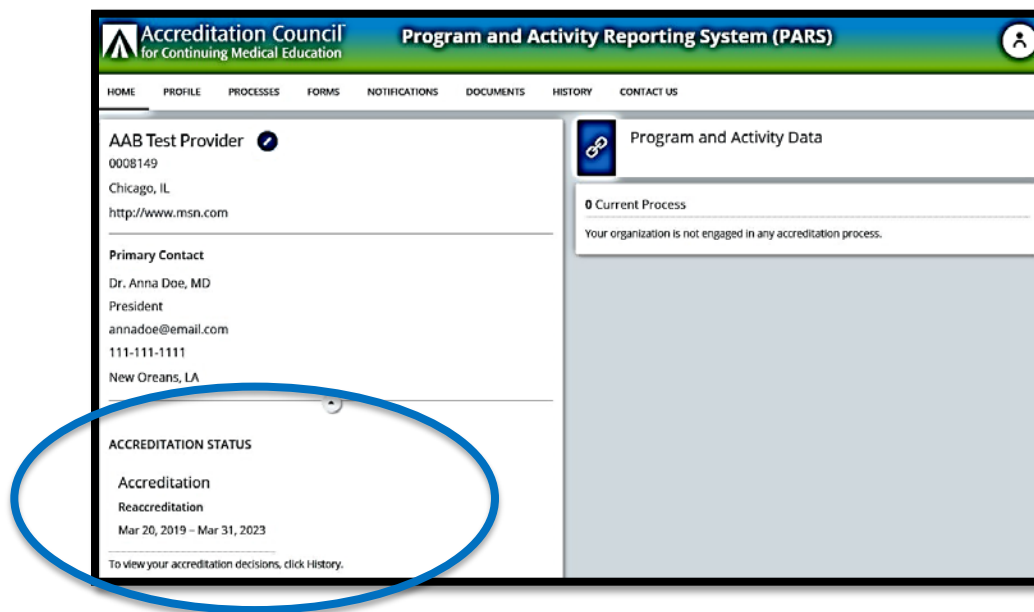


Figure 1

Next, move to the "HISTORY" tab, where you will see the most recent decision at the top, including your new term's expiration date. Next, you will click on "View Compliance Findings" to see the detail of your decision. See Figure 2 on the next page.

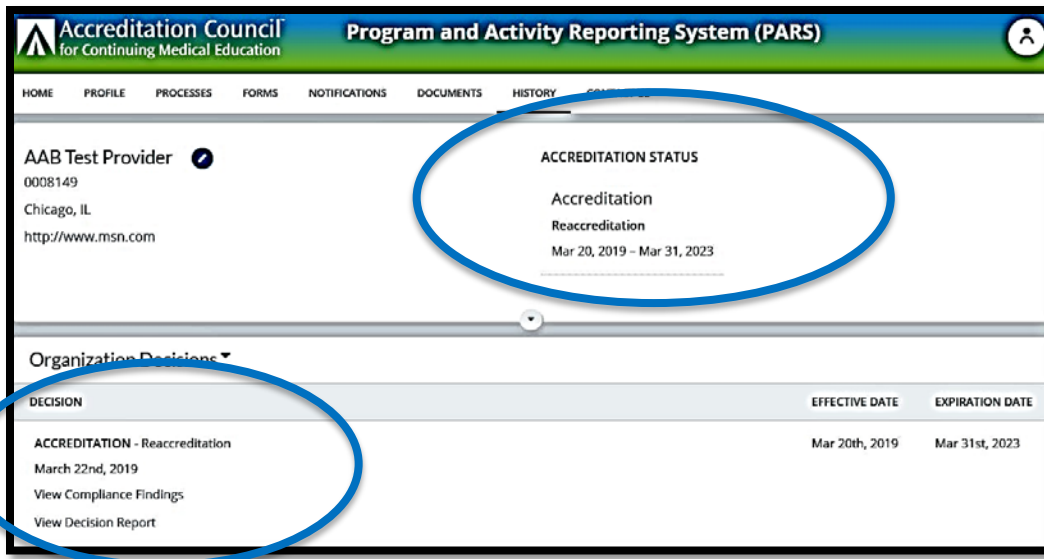


Figure 2

Once you click the “**View Compliance Findings**” link, you will be able to see the compliance findings, along with descriptions of performance, for the ACCME criteria and policies reviewed in this decision:

Criterion	C	N	EN	NA	Comments
Accreditation Statement Show Test	✓				
CME Activity Records Retention Policy Show Test	✓				
Absence Records Retention Policy Show Test	✓				
CRITERION 1 Show Test	✓				
CRITERION 2 Show Test	✓				
CRITERION 3 Show Test	✓				
CRITERION 5 Show Test	✓				
CRITERION 6 Show Test	✓				
CRITERION 7 SCS 1 Show Test	✓				
CRITERION 7 SCS 2 Show Test			✓		The provider did not consistently implement a mechanism to resolve conflicts of interest for planners.
CRITERION 7 SCS 6 Show Test			✓		The provider did not present evidence that it disclosed the presence or absence of relevant financial relationships for all persons in control of content.

Figure 3

Compliance (C): The CME provider fulfilled the ACCME’s requirements for the specific criterion or policy.

Noncompliance (NC): The CME provider did not fulfill the ACCME’s requirements for the specific criterion or policy.

Evidence Not Submitted (EN): The CME provider did not submit evidence. For example, providers applying for reaccreditation must meet the requirements of Criteria 1–13 but are not required to demonstrate compliance with the Criteria for Commendation. If the CME provider chose not to submit evidence for the Criteria for Commendation (either C16-22 or eight from C23-38), the provider would receive a finding of “evidence not submitted” for those criteria.

Not Applicable (NA): The CME provider was not required to comply with the specific criterion or policy. For example, initial applicants must comply with Criteria 1, 2, 3, and 7–12 in order to be eligible for Provisional Accreditation and would receive a finding of “not applicable” for the other criteria. CME providers seeking reaccreditation would receive a finding of “not applicable” in policy areas that do not apply to the types of activities they produce.

Accreditation Status

The accreditation and reaccreditation decision-making process assesses a CME provider's compliance with the [accreditation requirements](#). Based on these compliance findings, the ACCME decides on the provider's accreditation status.

Provisional Accreditation

An initial applicant's decision is based on a demonstration of compliance in Criteria 1-3, 7-12, and the accreditation policies. The decision includes feedback on criteria 5, 6, or 13 if evidence was submitted for ACCME review. However, noncompliance and not applicable findings in Criteria 5-6 or 13 are not considered in determining an initial applicant's accreditation status.

Accreditation Statement

With Provisional Accreditation, an organization becomes an ACCME-accredited provider. As an ACCME-accredited provider, your organization is responsible for using the ACCME accreditation statement to identify your organization as the entity responsible for demonstrating compliance with all ACCME accreditation requirements. The [ACCME accreditation statement](#) must appear on CME activity materials and brochures distributed by accredited organizations — with the exception, for example, of save-the-date activity announcements that contain only general, preliminary information about the activity such as the date, location, and title. If more specific information is included, such as faculty and objectives, you must include the accreditation statement.

Activity Review

If your organization did not have an Activity Review as part of its initial accreditation process, then this must occur as part of your reaccreditation review to be eligible for full accreditation. The Activity Review is in addition to the ACCME's standard performance-in-practice review. It entails the observation of one of your organization's CME activities, an activity of any type, by an ACCME surveyor. An Activity Review requires 1) a surveyor's observation of a CME activity as presented to the learners and 2) the surveyor's completion of an [ACCME Activity Review Form](#). Your organization will be contacted by the ACCME to make arrangements for fulfilling this requirement before your next decision. No additional information is required, at this time, to complete the Activity Review.

Reporting CME Activity Data

As an ACCME-accredited provider, your organization must enter into the ACCME's Program and Activity Reporting System (PARS) information about all of the activities — directly or jointly provided — offered under the umbrella of your accreditation statement. Providers must enter all program and activity data for each year and complete the attestation by the last business day of March of the following year to allow for the calculation of the ACCME Annual Report data.

In addition, providers are responsible for maintaining current, accurate contact information for your organization in PARS to ensure that you receive important policy updates, as well as information specific to your organization. To protect the best interest of all parties, the ACCME generally limits communications to persons identified as authorized contacts by the provider in PARS. To edit the contact information in PARS, please see the detailed instructions in the [Provider QuickStart Guide to PARS](#).

Annual Accreditation Fee

As an ACCME-accredited provider, your organization is responsible for the timely submission of the fees that are required either to attain or maintain accreditation, including the Annual Accreditation Fee payable by January 31 of each year. Failure to meet ACCME deadlines could result in an immediate change of status to Probation and subsequent consideration by the Board of Directors for a change of status to Nonaccreditation.

Accreditation with Commendation

Accreditation with Commendation confers a six-year term of accreditation awarded to accredited providers for demonstrating compliance in [Accreditation Criteria](#) (C1–13) and in Option A Commendation Criteria (C16-22) or from Option B: Menu of New Commendation Criteria (C23-38).

The ACCME encourages providers that achieve Accreditation with Commendation to publicize this accomplishment in the accreditation process within your organizations and to the larger community in which you operate. It is important to the ACCME that the healthcare system is aware of your achievement, the work you do, and of the standards you have met. We have created an [Accreditation with Commendation mark](#) to support your communications. Please see the policies on [ACCME Logo Usage and Publicizing ACCME Accreditation](#).

Accreditation

Accreditation is the standard, four-year term awarded to accredited providers for demonstrating compliance in [Accreditation Criteria](#) (C1–13) and [policies](#).

Providers that demonstrate one or more noncompliance findings in [Accreditation Criteria](#) 1–13 and/or the [policies](#) receive Accreditation with the standard, four-year term and are required to submit a [progress report](#).

Probation

Probation is given to accredited providers that have serious problems meeting ACCME [requirements](#). Providers on Probation are required to submit [progress reports](#). Providers with Accreditation may have their status changed to Probation if their [progress reports](#) do not demonstrate correction of noncompliance issues. Most providers on Probation implement improvements quickly, return to a status of Accreditation, and sustain compliance. Providers cannot remain on Probation for longer than two years.

Nonaccreditation

Although Nonaccreditation decisions are rare, the ACCME does make that determination in the following circumstances:

- An [initial applicant](#) is not in compliance with any one of the criteria required to achieve Provisional Accreditation.
- A provisionally accredited provider has serious noncompliance issues.
- A provider on Probation fails to demonstrate in one or more progress reports that it has achieved compliance in all Accreditation Criteria within two years.

In rare circumstances where there are compelling reasons, an accredited provider may have its status changed to Nonaccreditation. Examples of such circumstances include an accredited provider that has demonstrated recurrent noncompliance in the [Standards for Commercial Support](#):

[Standards to Ensure Independence in CME ActivitiesSM](#) and/or has received previous decisions of Probation, and/or has engaged in joint providerships while on Probation in violation of [joint providership policy](#).

Progress Report Required

The ACCME expects organizations found to be in noncompliance with Criteria 1-13, or with the policies reviewed in the accreditation or progress report processes, to demonstrate compliance through the progress report process.

A standard progress report review fee will be required; see the [ACCME-accredited provider fee schedule](#). The fee is due upon receipt of the invoice that you will receive via email.

A progress report serves as an important opportunity for a provider to demonstrate that it has mechanisms in place to make improvements to its CME program. The requirement to improve is an integral part of the ACCME's accreditation system. If all criteria or policies that were found to be in noncompliance are not corrected, the ACCME may require another progress report, a focused interview, and/or a change of status may result.

Determining if a Progress Report is Required

From the "PROFILE" tab in PARS, review the "PROFILE DATA" section on the lower right-side of the page. Under "Progress Report Required", you will see whether a progress report is required (Yes) or not (No). If a progress report is required, then the "Date of Progress Report Decision" will be indicated here as well.

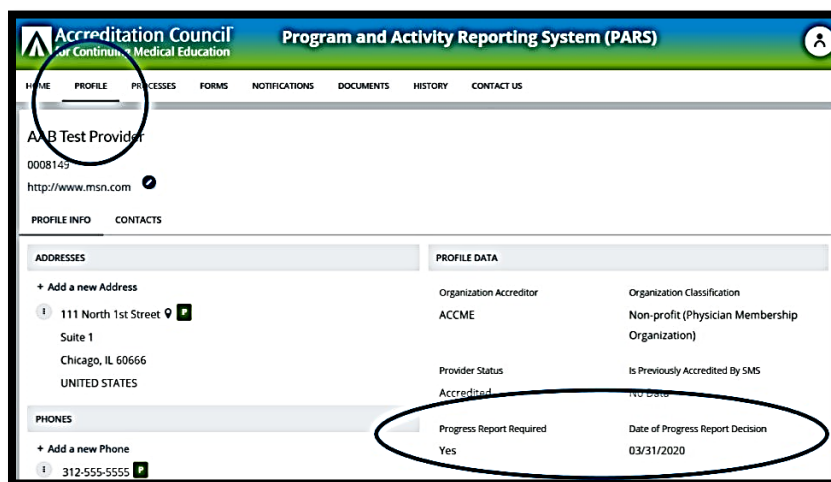


Figure 4

If the "Date of Progress Report Decision" indicates **11/30/2019**, then your organization should adhere to the milestones applicable to an **8-month progress report review** process located on page 7.

If the "Date of Progress Report Decision" indicates **03/31/2020**, then your organization should adhere to the milestones applicable to a **12-month progress report review** process located on page 7.

Date of Progress Report Decision: 11/30/2019

Date	8-Month Progress Report Milestones
Due Upon Receipt of Invoice	Provider remits the progress report review fee.
April 10 2019	Provider enters CME activity data. If applicable to your noncompliance findings, enter available information about the CME activities that your organization has provided, or will provide, under the umbrella of your ACCME accreditation statement, from April 1, 2019 - November 30, 2019 , into the ACCME's Program and Activity Reporting System (PARS) at www.pars.accme.org .
April 17 2019	ACCME notifies provider of activities selected for performance-in-practice review. Based on the CME activity data you entered, the ACCME will select up to five activities for performance-in-practice review, if applicable to your noncompliance findings. The ACCME will inform the primary contact for your organization via email. Upon receipt, please review the list of activities and notify ACCME right away if you note any discrepancies or if the activities will not reflect the improvements you are implementing to demonstrate compliance.
May 1 2019	ACCME notifies provider that Progress Report Self-Study and Performance-in-Practice forms are available in PARS.
July 10 2019	Progress Report Materials Submission Deadline. Progress Report Self-Study Report and Performance-in-Practice Structured Abstract forms close in PARS.
Dec 9 2019	ACCME notifies provider of the November 2019 progress report decision.

Date of Progress Report Decision: 03/31/2020

Date	12-Month Progress Report Milestones
Due Upon Receipt of Invoice	Provider remits the progress report review fee.
July 19 2019	Provider enters CME activity data. If applicable to your noncompliance findings, enter available information about the CME activities that your organization has provided, or will provide, under the umbrella of your ACCME accreditation statement, from April 1, 2019 - March 31, 2020 , into the ACCME's Program and Activity Reporting System (PARS) at www.pars.accme.org .
Aug 14 2019	ACCME notifies provider of activities selected for performance-in-practice review. Based on the CME activity data you entered, the ACCME will select up to five activities for performance-in-practice review, if applicable to your noncompliance findings. The ACCME will inform the primary contact for your organization via email. Upon receipt, please review the list of activities and notify ACCME right away if you note any discrepancies or if the activities will not reflect the improvements you are implementing to demonstrate compliance.
Aug 28 2019	ACCME notifies provider Progress Report Self Study and Performance-in-Practice forms are available in PARS.
Nov 6 2019	Progress Report Materials Submission Deadline. Progress Report Self Study and Performance-in-Practice forms close in PARS.
March 23 2020	ACCME notifies provider of the March 2020 progress report decision.

Preparing and Submitting Your Progress Report

Your progress report should address only the noncompliance findings in Criteria 1-13 and/or the accreditation policies as cited in your ACCME decision and only the specific performance issues described for those criteria and/or policies.

You will complete and submit your progress report using the online submission process and forms in PARS, providing 1) a narrative description of improvements identified and implemented and 2) if applicable to your findings of noncompliance, evidence of performance-in-practice from up to five (5) activities selected by the ACCME. You will receive an email from the ACCME notifying you when you will be able to access the progress report submission process and forms in PARS.

Your Accreditation Responsibilities

The ACCME expects all accredited providers to take an active, ongoing role in maintaining compliance with accreditation requirements, fulfilling their responsibilities, and improving their CME programs during their accreditation terms.

- Maintain compliance with [accreditation rules](#).
- Fulfill your [year-end reporting requirements](#) in the Program and Activity Reporting System (PARS).
- Pay accreditation fees in a timely manner, according to [ACCME policy](#).
- [Inform us of organizational changes](#).
- If requested, provide evidence of your [continuous compliance](#) with the accreditation requirements.

Accredited Provider Mark

Providers accredited within the ACCME System (providers directly accredited by the ACCME and those accredited by ACCME Recognized Accreditors) are welcome to use the ACCME Accredited mark for educational and identification purposes, and in [announcements related](#) to their attainment of ACCME accreditation. While the mark may be resized, the original aspect ratio should be maintained (it should not be stretched or condensed in a way that causes it to become distorted). Except for resizing, no other changes can be made. Please refer to the [ACCME's policy on logo usage](#) before downloading or using these images.