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# CONTINUING MEDICAL EDUCATION

MAY 7, 2019

-BALTIMORE, MD-

# Speakers

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- ❖ Senior Advisor, CME Coalition
- ❖ Founding Partner, Thorn Run Partners (TRP)
- ❖ 25 years of experience as a lobbyist, Capitol Hill staffer and health policy expert
- ❖ Served on the committee (Senate Health, Education, Labor and Pensions) and personal staffs of Senator Edward M. Kennedy (D–MA)

**Tom Sullivan**



- ❖ Founding Member, CME Coalition
- ❖ President, Rockpointe
- ❖ President, Medical Education Exchange (MEDX) Conferences
- ❖ Editor/Publisher, Policy and Medicine

# 2019 Political Dynamics



Party  
Infighting

Discontent  
with  
Established  
Leadership

Divided  
Government

2020  
Presidential  
Primaries

Legislative  
Friction



# Health Policy in the 116<sup>th</sup> Congress

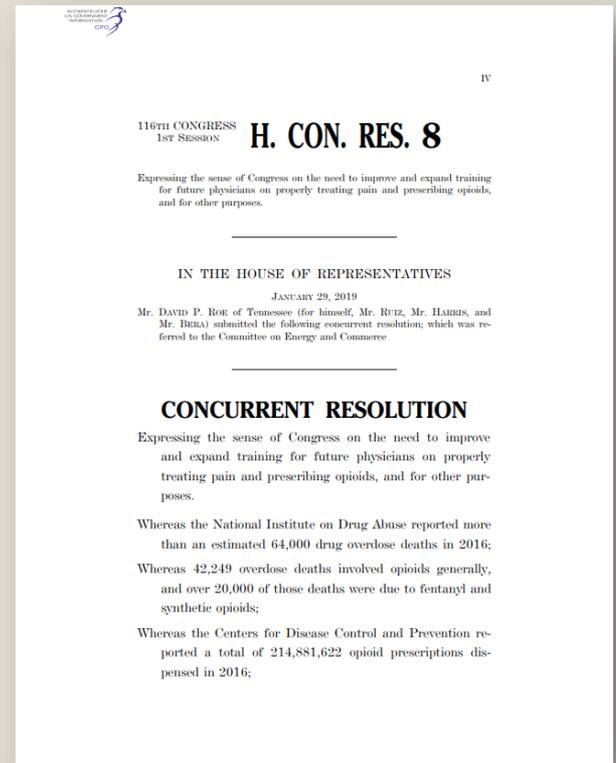
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- **ACA in the courts**
  - DOJ is no longer defending the ACA in court... but the law is likely to stand.
  - Trump administration regulations have weakened the ACA, but the Exchanges are not in crisis.
- **Drug pricing**
  - Senate and House committees are taking action.
  - Most major policy shifts will occur through regulations.
- **Surprise medical bills**
  - Hospitals and insurers have been at odds over legislation to limit consumer's exposure to surprise medical bills.
  - Among the few bipartisan issues in 2019.

# CME on Capitol Hill (1/2)

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- Reps. Phil Roe (R-TN), Raul Ruiz (D-CA), Andy Harris (R-MD), and Ami Bera (D-CA) recently introduced a congressional resolution expressing support for the need to expand training for physicians on opioid prescribing.
- Congress may revisit opioid legislation in 2019 or 2020, and lawmakers continue to see a role for prescriber education.



# CME on Capitol Hill (2/2)

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Bill #	Official Title	Lead Sponsor(s)	Summary
S.1129 H.R.1384	Medicare for All Act	Sen. Bernie Sanders (I-VT) Rep. Pramila Jayapal (D-WA)	Among other things, establish national minimum standards for institutional providers of services and individual health care practitioners, including requirements related to the number of or type of required continuing education hours.
S. 402 H.R.1082	“Survivors’ Access to Supportive Care Act”	Sen. Patty Murray (D-WA) Rep. Pramila Jayapal (D-WA)	Provides grants to states to identify the availability of continuing education for sexual assault forensic examiners.
H.R. 647	Palliative Care and Hospice Education and Training Act	Rep. Eliot Engel (D-NY)	Supports continuing education of health professionals who provide palliative care to patients with serious or life-threatening illness
S.299	Geriatrics Workforce Improvement Act	Sen. Susan Collins (R-ME)	Provides grants for the establishment or operation of Geriatrics Workforce Enhancement Programs, which are required to report on, among other things, the number of faculty and practicing professionals who participated in continuing education programs.
H.R.826	End Neglected Tropical Diseases Act	Rep. Chris Smith (R-NJ)	Provides grant funds which may be used for clinical training, including training for allied health professionals, continuing education for health professionals and allied health professions personnel, and information programs for the public with respect to neglected tropical diseases.
S. 498	Assessment of the Indian Health Service Act of 2019	Sen. Mike Rounds (R-SD)	Requires the GAO and OIG to study for the Indian Health Service, how much time is spent on training and participating in continuing education courses for the approximately 3,700 Medicaid-reimbursable full-time equivalent employees.

# CME for MIPS

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- The CME Coalition has championed CMS for recognizing Quality Improvement continuing medical education (QI-CME) as an 'Improvement Activity' under Medicare's new Merit-Based Incentive Payment System (MIPS).
- In coordination with the ACCME, the CME Coalition has developed a logo and official descriptive language identifying accredited CME activities that meet CMS' standards under MIPS.
- The CME Coalition encourages CME provider organizations to utilize this logo and language to signify all activities that meet the CMS MIPS requirements.



*“Completion of this accredited CME activity meets the expectations of an Accredited Safety or Quality Improvement Program (IA\_PSPA\_28) for the Merit-based Incentive Payment Program (MIPS).”*

# Shared Decision-Making

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- By training in shared decision-making, providers can empower patients to become more engaged in their own treatment.
- As SDM tools continue to be developed, CME providers play a leading role in ensuring that providers have access to them.
- The CME Coalition website has a new landing page to serve as an information hub for shared decision-making (SDM). This will serve as a storefront for our campaign to create greater awareness of the role of CME in shared decision-making and provide access to resources.

# Maine Gift Ban Law

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- The Maine Board of Pharmacy released a Notice of Agency Rule-making Proposal to update definitions in the state's gift ban law enacted in 2017.
- The law essentially bans manufacturers or wholesalers, including its agents, from offering or giving a practitioner a cash gift in any amount, or a gift for which reciprocity is expected or implied.
- They are soliciting feedback on key exceptions:
  - prescription drug samples
  - educational items to practitioners
  - meals and refreshments (Proposed – modest meal standard)
  - Honoraria – Proposed \$250/limit
  - Reasonable expenses” related to the honoraria.
- Comments are also being accepted and are due May 19, 2019
  - 76 Northern Avenue, Gardiner, Maine 04333, Central Conference Room.

# Open Payments Implementation

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- Under the Sunshine Act, CMS has provided guidance that effectively exempts most independent CME payments from Open Payments reporting.
  - Relies on sub-regulatory guidance (FAQs)
  - Exempts large, widely attended buffet meals
- Under the Sunshine Act final rule, CMS explicitly required the reporting of value of medical texts and journal reprints.
  - Considered to directly benefit *docs*, rather than *patients*

# Congress is Keeping Watch

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- Seven pharmaceutical company CEOs recently testified before the Senate Finance Committee on rising drug prices. Senate Finance Committee sent follow-up letters to the CEOs asking them to provide additional information on a variety of topics, including how much each company spends on non-profit CME support payments.
- Congress is shedding light on the relationships between patient advocacy groups and pharmaceutical companies.
- This questioning shows that there is still skepticism and misunderstanding among Members of Congress on what CME is.
- Payments to CME non-profits was one of many issues the Committee sought information on and we will continue to monitor the congressional interest in the issue.

# Thank you!

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