POLICY
FOR INDUSTRY SUPPORT OF
CONTINUING MEDICAL EDUCATION

450 CLARKE AVE
BROOKLYN, NY 11203
OFFICE OF CME

SCOPE OF POLICY

This policy will apply to continuing educational programs (grand rounds series, annual conferences and symposia) accredited by the Office of Continuing Medical Education (OCME) at SUNY Downstate Health Sciences University and our affiliated partners.

The OCME policy is to comply with the Industry Policy of the State University of New York. It is the policy of the OCME that industry grants for continuing medical education must comply with the Standards for Integrity and Independence in Accredited Continuing Education of the Accreditation Council for Continuing Medical Education (ACCME) and be executed by the Office of CME.

PROCEDURE


All CME activity directors must comply with the Industry Support Policy of the OCME. The ACCME believes that independence from commercial interests will help ensure that CME is free of commercial bias and, therefore would be in the best interest of the public. As a result, the OCME, CME affiliates and joint-providership will comply with the Standards for Integrity and Independence in Accredited Continuing Education and follow these procedures:

- The OCME will monitor all activities to ensure that they are free from the control of commercial interests. Downstate OCME does not allow ineligible companies to play any role in providing access to CME activities. An ineligible company is any entity whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

1. CME Activity Directors and planning committee members are responsible for identifying professional practice gaps and needs; determining their educational objectives, selecting content, faculty, teaching methods, and evaluation methods for their activities.

2. All planning committee members will provide full disclosure. In addition, all annual conferences are reviewed by a CME sub-committee.

3. Approval of the activity is dependent upon ensuring that the educational needs have been identified, objectives have been determined, that the content is valid and serves the best interest of the public, and that there is no influence from a commercial interest.
4. Commercial support shall be provided with the knowledge, consent, and written approval of the Office of Continuing Medical Education (OCME) and shall be in the form of an educational grant. All General Sponsorship is considered commercial support. No other payment from a commercial interest shall be given to the Activity Director, planning committee members, faculty (speakers or presenters), authors, joint sponsor, or any others involved with the supported CME activity.

5. Commercial Support Acknowledgments may state the name, mission, and areas of clinical involvement of an ACCME-defined ineligible companies but may not include corporate logos and slogans.

6. Content without commercial bias
Each CME Activity Director signs a policy and procedure statement attesting that their activity promotes improvements or quality in health care and is not in the proprietary interest of a commercial interest, that the content is balanced and that they will comply with the mission of the Downstate Office of CME. CME certified activities will be free from control of commercial interests in both planning, and implementation. The use of peer and content review to ensure data validity is encouraged. A balanced view of therapeutics should be included in content, and disclosure should be made to participants regarding the source and type of evidence use for content.

7. Disclosure of relationships to participants
Downstate Health Sciences University Office of CME endorses the Guidelines of the American Medical Association and the Standards of the Accreditation Council for Continuing Medical Education. Therefore, faculty or anyone involved with the presentation content for a CME activity must disclose to participants the presence of any relationships with any ineligible company. All relevant financial relationships of any amount include receiving (from a company) research grants, consultancies, honorarium and travel, or other benefits or having self-managed equity in a company.

ACCME current definition reads “An ineligible company is any entity whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. For specific examples of ineligible companies visit accme.org/standards. Any persons who are owners or employees of ineligible companies are excluded from planning or presenting.”

Examples of financial relationships include employee, researcher, consultant, advisor, speaker, independent contractor (including contracted research), royalties or patent beneficiary, executive role, and ownership interest. Individual stocks and stock options should be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies should be disclosed by the principal or named investigator even if that individual’s institution receives the research grant and manages the funds.

Has the Relationship Ended? If the financial relationship existed during the last 24 months, but has now ended. Let us know. This will help the education staff determine if any mitigation steps need to be taken.

An individual who refuses to disclose relevant financial relationships will be disqualified from being a planning committee member, a teacher, or an author of CME, and cannot have control of, or responsibility for, the development, management, presentation or evaluation of the CME activity (ACCME Standard 2.3).
8. All individuals who are involved with the content of an educational activity are required to disclose all relevant financial relationships in any amount occurring within the past 24 months related both to content and to commercial supporters of the activity including:
- The name of the individual
- The name of the ineligible company(ies)
- The nature of the relationship the individual has with each ineligible company.
- Any individual who does not disclose relevant financial relationships will be disqualified from participating in the planning and implementation of educational activities.
- All relationships and source of support whether in-kind or otherwise must be disclosed in a text format (print, slide, online) to participants prior to the presentation of the content of the activity; if no relationship exists, this must be disclosed in the same manner.
- The source and type of evidence for key teaching points must be made clear to participants
- The OCME will monitor all activities to identify and resolve all conflicts of interest prior to the educational activity being delivered to learners.

9. A commercial interest cannot take the role of non-accredited partner in a jointly sponsored activity.

10. **Commercial Support Letter of Agreement (LOA)** must be completed and signed by both the Activity Director and company representative for each commercial support occurrence. **All letters of agreement require the signature of the accredited provider.** This Downstate OCME form may be duplicated and used for each commercial support occurrence. Letter of Agreement Forms from Pharmaceutical companies may also be used. Devices on loan from commercial companies also require a LOA.

11. **Grants made payable to: Downstate Office of CME.** The OCME will process all disbursements to the appropriate parties via the Research Foundation of SUNY. Please have the pharmaceutical representative contact the OCME for additional information. An administrative fee will be charged. All checks are to be made out to RF Research.

12. **Grants made payable to the Clinical Departments (SUNY Downstate and Affiliates).** With “full knowledge and approval” of the OCME, the clinical departments at SUNY and at our affiliates may make all disbursements. Signature of the Director of CME must be on all Letters of Agreement. A record must be kept of all disbursements and entered on your Final Budget form, which will be submitted to the OCME at the conclusion of the activity.

13. At no time should the commercial supporter pay an honorarium or other disbursements directly. **This includes catering expenses or social events associated with the activity. No commercial support payment will be provided for tuition to CME program, lodging, or other course expenses to participants or their guests.**

14. **Reimbursements:** For honorariums, reimbursements of travel, and catering expenses from a commercial source, you must provide the OCME with a W9 for the recipient, original receipts, and a letter/invoice requesting payment.
15. **CME Application** - On the application, you will find a section to indicate whether or not commercial funds will be used. In this section, you must indicate whether the activity will be funded all or in part by departmental funds, commercial support, etc.

16. **Preliminary Budget** is to be submitted with your CME certification request for all symposiums and enduring activities. The estimated costs for your activity, which includes your estimated commercial support funds, and the names of your supporters, must be included on the form.

17. **Final Budget** is to be submitted when your CME activity has concluded if commercial support was received. The final reconciliation will outline total costs, which includes departmental or divisional funds, income from participant fees, and funding from commercial companies. It includes a breakdown of expenses, and a record of disbursements made from commercial support funding. Unused funds are returned as applicable. **Final budget information is essential to the completion and compliance of your CME activity and the grantor.**

18. **Sponsorship**: “Downstate Health Sciences University” is the sponsor of all CME activities accredited by the ACCME; not the pharmaceutical company and not the Hospital. Therefore, when you read the Letter of Agreement, the word “sponsor” refers to Downstate.

19. **Signature**: All Letters of Agreement must be signed by the Office of CME at Downstate where “Provider” or “Sponsor” is indicated **before** the activity takes place.

**Exhibit policy**

Exhibit fees are considered a business transaction – they are not considered commercial support. However, it is the policy of the OCME that all exhibits, ads, or promotion are kept separate from the CME activity.

1. All exhibitors must sign the Exhibitor Agreement
2. Exhibitors must respect and adhere to the terms of the Agreement.
3. For **exhibits**, all exhibitors must be in a room or area separate from the educational activity, and the exhibits must not interfere or compete with the learning experience.
   a. Arrangements for exhibits or advertisements cannot influence planning or interfere with the presentation, nor can they be a condition of the provision of commercial support for CME activities.
   b. Educational materials such as slides, abstracts, and handouts must not contain any advertising or trade names, when they are part of a CME activity.
   c. If a presentation must mention a trade name, it must be for more than one company. Otherwise, generic names must be used.
CONFLICT OF INTEREST POLICY

The ACCME considers financial relationships to create actual 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 increasing the value of the financial relationship with the commercial interest creates an incentive to influence the content of CME—an incentive to insert commercial bias. Commercial bias is prohibited in CME.

The Resolution of Conflict of Interest Form is to be used to assist CME Activity Directors in determining if a conflict of interest exists; and to document the actions taken to resolve any potential conflicts of interest with all individuals in a position to influence and/or control the content of CME activities.

To COI Resolution Form contain the following options:

1. The Planning Committee may choose not to use the individual and identify a replacement.
2. Faculty used a peer review* process validating the content (materials are peer reviewed or judged to ensure the data support the conclusions before they are accepted for presentation). If necessary, faculty will be required to revise content based on recommendations from the peer review.
3. Change the focus of the activity. The education planners can change the focus of the activity so that the content is not about products or services of the commercial interest that is the basis of the conflict of interest.
4. Change the content of the person’s assignment. The role of a person with a conflict of interest can be changed within the activity so that it is no longer about products or services of commercial interest. For example, an individual with a conflict of interest regarding products for treatment of a condition could address the pathophysiology or diagnosis of the condition, rather than therapeutics.
5. Limit the content to a report without recommendations. If an individual has been funded by a commercial company to perform research, the individual’s presentation may be limited to the data and results of the research. Someone else can be assigned to address broader implications and recommendations.
6. Limit the sources for recommendations. Rather than having a person with a conflict of interest present personal recommendations or personally select the evidence to be presented, limit the role of the person to reporting recommendations based on formal structured reviews of the literature with the inclusion and exclusion criteria stated (evidence-based).
7. Individuals may change their relationships with commercial interest (e.g. discontinue contracted services). This way, no duty, loyalty, or incentive remains to introduce bias into content.
8. Planning members with COI will be asked to recuse from decisions about aspects of the planning related to their financial relationship. Additionally, members of the committee without conflicts of interest will review their speaker’s recommendations if any. The CME Director will also be part of the planning process and review slide presentations.

If a conflict arises during a presentation, the Activity Director or appointed moderator will ask questions or make comments to counter the commercial bias. After each activity, program evaluations are reviewed for any perceived commercial bias. If over 5% of the audience perceives bias, the CME Office will discuss the issue with the individual and the Activity Director to avoid future incidents.

*Peer review must ensure that 1) all practice recommendations involving clinical medicine are based on evidence that is accepted within the profession of medicine as adequate justification for indications and contradictions in the care of patients; and 2) all scientific research referred to, reported or used in the CME activity in support or justification of patient care recommendations conforms to the generally accepted standards of experimental design, data collection and analysis.
Please review the following ACCME Standards for Integrity and Independence in Accredited Continuing Education carefully, so that you are knowledgeable of all of the required guidelines. This information is essential to everyone involved in planning CME activities, but especially important to those who routinely request grants in support of their CME activities.

**PREAMBLE**

The purpose of continuing medical education (CME) is to enhance the physician’s ability to care for patients. It is the responsibility of the accredited provider of a CME activity to assure that the activity is designed primarily for that purpose. Accredited providers often receive financial and other support from non-accredited commercial organizations. Such support can contribute significantly to the quality of CME activities. The purpose of these Standards is to describe appropriate behavior of accredited providers in planning, designing, implementing, and evaluating certified CME activities for which commercial support is received.

**Standards for Integrity and Independence in Accredited Continuing Education**

The health professions are not only defined by expertise, but also by a dedication to put service of others above self-interest. When individuals enter the healthcare professions, they commit to upholding professional and ethical standards including acting in a patient’s best interests, protecting the patient from harm, respecting the patient, fostering informed choices, and promoting equity in healthcare.

While the interests of healthcare and business sometimes diverge, both are legitimate, and collaboration between healthcare professionals and industry can advance patient care. Since healthcare professionals serve as the legally mandated gatekeepers of medications and devices,
and trusted authorities when advising patients, they must protect their learning environment from industry influence to ensure they remain true to their ethical commitments.

As the stewards of the learning environment for healthcare professionals, the accredited continuing education community plays a critical role in navigating the complex interface between industry and the health professions. Organizations accredited to provide continuing education, known as accredited providers, are responsible for ensuring that healthcare professionals have access to learning and skill development activities that are trustworthy and are based on best practices and high-quality evidence. These activities must serve the needs of patients and not the interests of industry.

This independence is the cornerstone of accredited continuing education. Accredited continuing education must provide healthcare professionals, as individuals and teams, with a protected space to learn, teach, and engage in scientific discourse free from influence from organizations that may have an incentive to insert commercial bias into education.

The Accreditation Council for Continuing Medical Education (ACCME®) acts as the steward of the Standards for Integrity and Independence in Accredited Continuing Education, which have been drafted to be applicable to accredited continuing education across the health professions. The Standards are designed to:

• Ensure that accredited continuing education serves the needs of patients and the public.
• Present learners with only accurate, balanced, scientifically justified recommendations.
• Assure healthcare professionals and teams that they can trust accredited continuing education to help them deliver safe, effective, cost-effective, compassionate care that is based on best practice and evidence.
• Create a clear, unbridgeable separation between accredited continuing education and marketing and sales.

Terms used for the first time are written in blue italics, followed by the definition for the term.
Eligibility

The ACCME is committed to ensuring that accredited continuing education (1) presents learners with only accurate, balanced, scientifically justified recommendations, and (2) protects learners from promotion, marketing, and commercial bias. To that end, the ACCME has established the following guidance on the types of organizations that may be eligible to be accredited in the ACCME System. The ACCME, in its sole discretion, determines which organizations are awarded ACCME accreditation.

Types of Organizations That May Be Accredited in the ACCME System

Organizations eligible to be accredited in the ACCME System (eligible organizations) are those whose mission and function are: (1) providing clinical services directly to patients; or (2) the education of healthcare professionals; or (3) serving as fiduciary to patients, the public, or population health; and other organizations that are not otherwise ineligible. Examples of such organizations include:

- Ambulatory procedure centers
- Blood banks
- Diagnostic labs that do not sell proprietary products
- Electronic health records companies
- Government or military agencies
- Group medical practices
- Health law firms
- Health profession membership organizations
- Hospitals or healthcare delivery systems
- Infusion centers
- Insurance or managed care companies
- Nursing homes
- Pharmacies that do not manufacture proprietary compounds
- Publishing or education companies
- Rehabilitation centers
- Schools of medicine or health science universities
- Software or game developers

Types of Organizations That Cannot Be Accredited in the ACCME System

Companies that are ineligible to be accredited in the ACCME System (ineligible companies) are those whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients. Examples of such organizations include:

- Advertising, marketing, or communication firms whose clients are ineligible companies
- Bio-medical startups that have begun a governmental regulatory approval process
- Compounding pharmacies that manufacture proprietary compounds
- Device manufacturers or distributors
- Diagnostic labs that sell proprietary products
- Growers, distributors, manufacturers or sellers of medical foods and dietary supplements
- Manufacturers of health-related wearable products
- Pharmaceutical companies or distributors
- Pharmacy benefit managers
- Reagent manufacturers or sellers

Owners and Employees of Ineligible Companies

The owners and employees of ineligible companies are considered to have unresolvable financial relationships and must be excluded from participating as planners or faculty, and must not be allowed to influence or control any aspect of the planning, delivery, or evaluation of accredited continuing education, except in the limited circumstances outlined in Standard 3.2.

Owners and employees are individuals who have a legal duty to act in the company’s best interests. Owners are defined as individuals who have an ownership interest in a company,
except for stockholders of publicly traded companies, or holders of shares through a pension or mutual fund. Employees are defined as individuals hired to work for another person or business (the employer) for compensation and who are subject to the employer’s direction as to the details of how to perform the job.

Ineligible companies are prohibited from engaging in joint providership with accredited providers. Joint providership enables accredited providers to work with nonaccredited eligible organizations to deliver accredited education.

The ACCME determines eligibility for accreditation based on the characteristics of the organization seeking accreditation and, if applicable, any parent company. Subsidiaries of an ineligible parent company cannot be accredited regardless of steps taken to firewall the subsidiaries. If an eligible parent company has an ineligible subsidiary, the owners and employees of the ineligible subsidiary must be excluded from accredited continuing education except in the limited circumstances outlined in Standard 3.2.

**Standard 1: Ensure Content is Valid**

Standard 1 applies to all accredited continuing education. Accredited providers are responsible for ensuring that their education is fair and balanced and that any clinical content presented supports safe, effective patient care.

1. All recommendations for patient care in accredited continuing education must be based on current science, evidence, and clinical reasoning, while giving a fair and balanced view of diagnostic and therapeutic options.

2. All scientific research referred to, reported, or used in accredited education in support or justification of a patient care recommendation must conform to the generally accepted standards of experimental design, data collection, analysis, and interpretation.

3. Although accredited continuing education is an appropriate place to discuss, debate, and explore new and evolving topics, these areas need to be clearly identified as such within the program and individual presentations. It is the responsibility of accredited providers to facilitate engagement with these topics without advocating for, or promoting, practices that are not, or not yet, adequately based on current science, evidence, and clinical reasoning.

4. Organizations cannot be accredited if they advocate for unscientific approaches to diagnosis or therapy, or if their education promotes recommendations, treatment, or manners of practicing healthcare that are determined to have risks or dangers that outweigh the benefits or are known to be ineffective in the treatment of patients.

**Standard 2: Prevent Commercial Bias and Marketing in Accredited Continuing Education**

Standard 2 applies to all accredited continuing education. Accredited continuing education must protect learners from commercial bias and marketing.
1. The accredited provider must ensure that all decisions related to the planning, faculty selection, delivery, and evaluation of accredited education are made without any influence or involvement from the owners and employees of an ineligible company.

2. Accredited education must be free of marketing or sales of products or services. Faculty must not actively promote or sell products or services that serve their professional or financial interests during accredited education.

3. The accredited provider must not share the names or contact information of learners with any ineligible company or its agents without the explicit consent of the individual learner.

**Standard 3: Identify, Mitigate, and Disclose**

**Relevant Financial Relationships**

Standard 3 applies to all accredited continuing education.

Many healthcare professionals have financial relationships with ineligible companies. These relationships must not be allowed to influence accredited continuing education. The accredited provider is responsible for identifying relevant financial relationships between individuals in control of educational content and ineligible companies and managing these to ensure they do not introduce commercial bias into the education. Financial relationships of any dollar amount are defined as relevant if the educational content is related to the business lines or products of the ineligible company.

Accredited providers must take the following steps when developing accredited continuing education. Exceptions are listed at the end of Standard 3.

1. **Collect information**: Collect information from all planners, faculty, and others in control of educational content about all their financial relationships with ineligible companies within the prior 24 months. There is no minimum financial threshold; individuals must disclose all financial relationships, regardless of the amount, with ineligible companies. Individuals must disclose regardless of their view of the relevance of the relationship to the education.

   Disclosure information must include:
   a. The name of the ineligible company with which the person has a financial relationship.
   b. The nature of the financial relationship. Examples of financial relationships include employee, researcher, consultant, advisor, speaker, independent contractor (including contracted research), royalties or patent beneficiary, executive role, and ownership interest. Individual stocks and stock options should be disclosed; diversified mutual funds do not need to be disclosed. Research funding from ineligible companies should be disclosed by the principal or named investigator even if that individual’s institution receives the research grant and manages the funds.

2. **Exclude owners or employees of ineligible companies**: Review the information about financial relationships to identify individuals who are owners or employees of ineligible companies. These individuals must be excluded from controlling content or participating as planners or faculty in accredited education. There are three exceptions to this exclusion—employees of ineligible companies can participate as planners or faculty in these specific situations:
a. When the content of the activity is not related to the business lines or products of their employer/company.

b. When the content of the accredited activity is limited to basic science research, such as pre-clinical research and drug discovery, or the methodologies of research, and they do not make care recommendations.

c. When they are participating as technicians to teach the safe and proper use of medical devices, and do not recommend whether or when a device is used.

3. **Identify relevant financial relationships**: Review the information about financial relationships to determine which relationships are relevant. Financial relationships are relevant if the educational content an individual can control is related to the business lines or products of the ineligible company.

4. **Mitigate relevant financial relationships**: Take steps to prevent all those with relevant financial relationships from inserting commercial bias into content.

   a. Mitigate relationships prior to the individuals assuming their roles. Take steps appropriate to the role of the individual. For example, steps for planners will likely be different than for faculty and would occur before planning begins.

   b. Document the steps taken to mitigate relevant financial relationships.

**Disclose all relevant financial relationships to learners**: Disclosure to learners must include each of the following:

   a. The names of the individuals with relevant financial relationships.
   b. The names of the ineligible companies with which they have relationships.
   c. The nature of the relationships.
   d. A statement that all relevant financial relationships have been mitigated.

**Identify ineligible companies by their name only**. Disclosure to learners must not include ineligible companies’ corporate or product logos, trade names, or product group messages.

**Disclose absence of relevant financial relationships**. Inform learners about planners, faculty, and others in control of content (either individually or as a group) with no relevant financial relationships with ineligible companies.

**Learners must receive disclosure information, in a format that can be verified at the time of accreditation, before engaging with the accredited education.**

**Exceptions**: Accredited providers do not need to identify, mitigate, or disclose relevant financial relationships for any of the following activities:

1. Accredited education that is non-clinical, such as leadership or communication skills training.

2. Accredited education where the learner group is in control of content, such as a spontaneous case conversation among peers.

3. Accredited self-directed education where the learner controls their educational goals and reports on changes that resulted, such as learning from teaching, remediation, or a personal development plan. When accredited providers serve as a source of information for the self-
directed learner, they should direct learners only to resources and methods for learning that are not controlled by ineligible companies.

**Standard 4: Manage Commercial Support Appropriately**

Standard 4 applies only to accredited continuing education that receives financial or in-kind support from ineligible companies.

Accredited providers that choose to accept *commercial support* (defined as financial or in-kind support from ineligible companies) are responsible for ensuring that the education remains independent of the ineligible company and that the support does not result in commercial bias or commercial influence in the education. The support does not establish a financial relationship between the ineligible company and planners, faculty, and others in control of content of the education.

1. **Decision-making and disbursement:** The accredited provider must make all decisions regarding the receipt and disbursement of the commercial support.
   
   a. Ineligible companies must not pay directly for any of the expenses related to the education or the learners.
   
   b. The accredited provider may use commercial support to fund honoraria or travel expenses of planners, faculty, and others in control of content for those roles only.
   
   c. The accredited provider must not use commercial support to pay for travel, lodging, honoraria, or personal expenses for individual learners or groups of learners in accredited education.
   
   d. The accredited provider may use commercial support to defray or eliminate the cost of the education for *all* learners.

**Agreement:** The terms, conditions, and purposes of the commercial support must be documented in an agreement between the ineligible company and the accredited provider. The agreement must be executed prior to the start of the accredited education. An accredited provider can sign onto an existing agreement between an accredited provider and a commercial supporter by indicating its acceptance of the terms, conditions, and amount of commercial support it will receive.

3. **Accountability:** The accredited provider must keep a record of the amount or kind of commercial support received and how it was used, and must produce that accounting, upon request, by the accrediting body or by the ineligible company that provided the commercial support.

4. **Disclosure to learners:** The accredited provider must disclose to the learners the name(s) of the ineligible company(ies) that gave the commercial support, and the nature of the support if it was in-kind, prior to the learners engaging in the education. Disclosure must not include the ineligible companies’ corporate or product logos, trade names, or product group messages.
Standard 5: Manage Ancillary Activities Offered in Conjunction with Accredited Continuing Education

Standard 5 applies only when there is marketing by ineligible companies or nonaccredited education associated with the accredited continuing education.

Accredited providers are responsible for ensuring that education is separate from marketing by ineligible companies—including advertising, sales, exhibits, and promotion—and from nonaccredited education offered in conjunction with accredited continuing education.

1. Arrangements to allow ineligible companies to market or exhibit in association with accredited education must not:
   a. Influence any decisions related to the planning, delivery, and evaluation of the education.
   b. Interfere with the presentation of the education.
   c. Be a condition of the provision of financial or in-kind support from ineligible companies for the education.

2. The accredited provider must ensure that learners can easily distinguish between accredited education and other activities.
   a. Live continuing education activities: Marketing, exhibits, and nonaccredited education developed by or with influence from an ineligible company or with planners or faculty with unmitigated financial relationships must not occur in the educational space within 30 minutes before or after an accredited education activity. Activities that are part of the event but are not accredited for continuing education must be clearly labeled and communicated as such.

   b. Print, online, or digital continuing education activities: Learners must not be presented with marketing while engaged in the accredited education activity. Learners must be able to engage with the accredited education without having to click through, watch, listen to, or be presented with product promotion or product-specific advertisement.

   c. Educational materials that are part of accredited education (such as slides, abstracts, handouts, evaluation mechanisms, or disclosure information) must not contain any marketing produced by or for an ineligible company, including corporate or product logos, trade names, or product group messages.

   d. Information distributed about accredited education that does not include educational content, such as schedules and logistical information, may include marketing by or for an ineligible company.

3. Ineligible companies may not provide access to, or distribute, accredited education to learners.

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