



March 17, 2021

Graham McMahon, MD, MMSc
President and Chief Executive Officer
Accreditation Council of Continuing Medical Education
401 North Michigan Avenue
Suite 1850
Chicago, IL 60611

Dear Dr. McMahon:

On behalf of the Academy of Managed Care Pharmacy (AMCP), an Accreditation Council of Pharmacy Education (ACPE)-accredited provider, I am writing in response to the recently released Accreditation Council of Continuing Medical Education (ACCME) Standards for Integrity and Independence for Accredited Continuing Education. As you are aware, these standards have now been adopted by ACPE.

AMCP is a professional association leading the way to help patients get the medications that need at a cost they can afford. Our diverse membership of more than 8,000 pharmacists, physicians, nurses, and other health professionals leverages its specialized expertise in clinical evidence and economics to optimize medication benefit design, helping patients access safe, appropriate, and cost-effective medications and other therapies.

We are both confused and concerned by the inclusion of pharmacy benefit management organizations in the list of ineligible entities, which generally disqualifies health professionals employed by these organizations from serving as faculty and planners for continuing education activities. Pharmacy benefit managers administer prescription drug plans for the more than 270 million Americans covered by commercial, employer-sponsored, and government health plans. Their primary business is not “producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients” as the definition for ineligible entities states.^[1]

Further complicating this categorization is the complex, vertically integrated environment in which health professionals currently practice. Recent mergers and acquisitions have created organizations that comprise health plans, pharmacy benefit managers, outpatient clinics,

and retail pharmacy networks. It is unclear how these multifaceted health care organizations might be viewed within the context of the standards.

Essential to our mission as a professional society is providing education to enable our members to improve medication use and patient outcomes. As an accredited provider, we incorporate into our CPE activities the educational needs that underly the professional practice gaps of our own learners, as the ACCME and ACPE standards require. [\[2\]](#) [\[3\]](#)

Pharmacists, physicians, and other health professionals practicing in managed care settings, including those employed by pharmacy benefit managers, are often the most appropriate experts to address the unique needs of our learners. Excluding clinical experts solely on the basis that they are employed by a pharmacy benefit manager impedes the providers' ability to provide accredited continuing education that addresses the unique needs of managed care practitioners.

As an accredited provider, we support efforts to ensure accredited education is free from commercial bias and take our responsibilities in that regard very seriously. Our program routinely utilizes employees from pharmacy benefit management organizations as planners and faculty as they are a significant portion of our membership. We institute appropriate measures to identify and resolve potential conflicts of interest and we closely monitor our activities for evidence of potential commercial bias. A review of our data does not indicate any trends suggesting a higher level of perceived or potential commercial bias in these programs compared to other activities with other faculty.

As a matter of course, our organization submitted comments on the ACCME Standards in February 2020. We remain concerned that disqualifying health professionals employed by pharmacy benefit managers from serving as faculty and planners for accredited continuing education will compromise providers' ability to provide learners with education that reflects the current health care landscape in which they practice. A review of the feedback shows significant confusion among providers regarding the categorization and definition of eligible and ineligible entities. [\[4\]](#)

We recommend ACCME revisit its definition and categorization of ineligible entities with consideration of the current complex health care landscape and the educational needs of learners in all settings, including pharmacy benefit managers. We further recommend that ACCME work with the accredited provider community and its accrediting partners to explore other methods to ensure CME is free from commercial bias that do not unnecessarily eliminate otherwise qualified health professionals from participating in CME activities as faculty and planners.

We would welcome and appreciate the opportunity for further dialogue with ACCME and ACPE on this important matter.

Sincerely,



Susan A. Cantrell, RPh, CAE
Chief Executive Officer

cc: Jan Engle, PharmD, PhD (Hon), FAPhA, FCCP, FNAP, Executive Director, ACPE

References:

- ^[1] ACCME. https://accme.org/sites/default/files/2020-12/884_20201210_New%20Standards%20Standalone%20Package.pdf. 2020.
- ^[2] ACCME. <https://accme.org/accreditation-rules/accreditation-criteria/educational-needs>.
- ^[3] ACPE. https://www.acpe-accredit.org/pdf/CPE_Standards_Final.pdf. p.13.
- ^[4] ACCME. Call for comment survey responses. https://www.accme.org/sites/default/files/2020-04/857_20200424_Call%20for%20Comment_Survey%20Responses_Proposed%20Standards.pdf