

I am writing on behalf of the Association for Hospital Medical Education to express our deep concern about a recently proposed CMS policy that we fear would effectively eliminate the Sunshine Act reporting exemption for accredited continuing medical education (CME).

The Association for Hospital Medical Education, founded in 1956, is a national, nonprofit professional organization involved in the continuum of medical education. AHME's members represent hundreds of teaching hospitals, academic medical centers, and consortia involved in undergraduate, graduate, and continuing medical education. Our Association serves as a resource for medical education information, promotes improvement in medical education, and develops medical education professionals. AHME annually provides a three-day educational institute, several one-day programs, a series of teleconferences, the Guide to Medical Education in the Teaching Hospital, Remediation of the Struggling Medical Learner, AHME News, as well as additional resources on our website (www.ahme.org). We support interest groups for administrative directors of medical education, CME professionals, residency coordinators, and transitional year program directors. AHME is also a member organization of ACCME and ECFMG.

AHME members are among the stakeholders in the health care community who care deeply about the ability of providers to participate in CME programs. Continuing medical education is a vital component of our healthcare system and allows our nation's doctors and healthcare providers to remain up to date with the latest in medical science. As such, CME serves to enhance the ability of practicing physicians to provide the best of care to their patients. It is also a critical mechanism for the faculty members charged with the instruction of medical students and residents to ensure that this next generation of physicians are well prepared to fulfill their responsibilities.

Accredited CME is the gold standard of continuing medical education. By incorporating strong criteria that ensure that the education being provided to learners is based firmly in science, accredited CME guarantees that any supporter bias - be it commercial or otherwise - is eliminated from the curriculum.

We strongly urge CMS to appreciate the need to promote physician participation in CME rather than adopt policies that could diminish it.

In CMS' February 2013 Final Rule on Sunshine Act implementation, your agency wisely created a bright line "CME exemption" that made it clear to physician participants that they could present at, and attend, accredited continuing education programs without risking the stigma and reputational impact that accompanies a listing in the Open Payments system.

It is our understanding that your stated goal is actually to expand the definition of "Sunshine exempt" CME to take into account programs that may be accredited for nurses, optometrists, pharmacists, and others. If this is so, we wholeheartedly endorse this goal.

However, we are concerned that your recent proposal of July 3rd would instead eliminate the current CME "safe harbor" from reporting by redefining CME payments as "indirect payments" which may be reportable.

We implore you to ensure that indirect commercial support for CME programs, where the accredited provider exercise complete discretion on the content, remains exempted from reporting under the Open Payments system. It is vital to America's patients that their healthcare providers remain well educated and informed on the latest medical science in their field, and therefore, we must

encourage, rather than discourage, participation in CME.

Finally, it is important to America's doctors that they have clear rules that provide a safe harbor from Open Payments reporting when they participate in accredited CME. This is what we understand was intended by Congress and exists in the Final Rule as it currently stands, and we would encourage you to create a similarly clear "safe harbor" for doctors and CME at the conclusion of this process.

Thanks in advance for considering the comments expressed on behalf of our organization as well those expressed by the many other organizations all of which are concerned about the consequences of the proposed change in this regulation.