ACCME Annual Report Data 2011

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The Accreditation Council for Continuing Medical Education (ACCME) published its 2011 Annual Report Data, which includes data on the size and scope of the continuing medical education (CME) enterprise nationwide.

The report shows that in 2011:

- CME Economy grew by 4.8% to \$2,349,580,281
- Commercial support for CME decreased by 9.4%, - \$78,443,279 less than 2010
- Commercial support now represents 32% of the total CME funding, down from 51% of total funding in 2007
- Physician attendance increased by 20.2% - by 2,307,884 attendees to 13,741,621
- Non Physician attendance increased by 21.7%, 1,702,892 attendees to 9,558,789
- 38% of attendees participated in courses produced by Publishers/MECS, 30% courses by universities and 28% from hospitals.
- 37% of physicians attended regularly scheduled events such as grand rounds,

followed by 34% received credit for internet enduring materials, 16% for courses, and 9% for Journal CME.

For the first time, the 2011 Annual Report Data aggregates state and national statistics, including total numbers of accredited CME providers, activities, hours of instruction, and participants. This data shows that there are more than 2,000 accredited CME providers across the country that offered more than 130,000 activities in 2011, almost a 5% increase from 2010. Accredited CME providers report that their 2011 activities educated more than 23 million participants including more than 13 million physicians and more than 9 million nonphysician health care professionals.

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In addition, the 2011 Annual Report Data features separate data sets about the CME delivered by ACCME-accredited providers and by state-accredited providers, offering an overview of the CME system at both the national and state levels.

The ACCME directly accredits providers that offer CME primarily to national or international audiences of physicians and other health care professionals. The ACCME also recognizes state and territory medical societies as accreditors for providers that offer CME primarily to learners from their state or contiguous states. All accredited providers within the ACCME accreditation system are held to the same high standards and are required to report information about their programs that the ACCME collects and analyzes in order to produce annual report data.

The 2011 Annual Report Data includes an overview of commercial support received by ACCME-accredited providers. The data shows commercial support distribution by numbers and types of activities, hours of instruction, and participants. The ACCME is able to publish this commercial support overview because of the Program and Activity Reporting System (PARS). Launched in 2010, PARS is a Web-based portal designed to centralize and streamline the collection, management, and analysis of program and activity data from accredited CME providers. The structure of PARS and the CME community's adoption of PARS enable the ACCME to produce new information.

The 2011 Annual Report Data marks the 14th year the ACCME has been collecting, analyzing, and publishing information about accredited providers, and offers more than a decade-long perspective on

the evolution of the ACCME accreditation system. The annual data reports are produced as a service to accredited providers and other stakeholders. ACCME Chief Executive Murray Kopelow, MD, commented on the release of 2011's report.

2011 Report

Although the total income of the CME industry increased by \$107,252,031, 4.8% to \$2,349,580,281 between 2010 and 2011, the total income has decreased by -\$189,618,375, and 7.5% since 2007. Commercial support of CME continued to decline, by \$78,443,279, this represents a 9.4% reduction from \$830,849,917 in 2010 to \$752,406,638 in 2011 and a total reduction of a full \$458,938,566, 37.9% since 2007.

Making up for this lost income, however, were increases in Advertising/Exhibits (11.7% in 2011 and 12.7% since 2007) and Other Income (13.5% in 2011 and 37% since 2007).

Commercial support now represents only 32% of the total CME enterprise, a 5% decline since 2010 and a 19% decline since 2006.

Publisher/MEC

For publishing/medical education companies, total income increased 2.4%, however, total income since 2007 has decreased 35.3%. Commercial support declined 8.9% in 2011 and has declined a whopping 58.3% since 2007. Moreover, whereas commercial support was 71.5% of the enterprise in 2007, it was 46.1% in 2011. The income has increased minimally in advertising and exhibits (3.2% in 2011) and other income (50.7% in 2011).

Medical Schools

For schools of medicine (universities), total income decreased 4% in 2011. Commercial support declined 13.3% in 2011 and 17.9% since 2007.

Associations/Nonprofits

For Nonprofits (physician membership organizations and other non profits), total income increased 0.7%, however, it has decreased 2.7% since 2007. Commercial support decline 10.7% in 2011 and has declined 36.9% since 2007.

The number of activities, total hours of instruction, and total physician participants have continued to increase since 2007.

Type of Activity

The grand total types of activities supported directly by accredited CME providers are broken down below:

- Courses: 49,644 activities, with 287,793 hours of instruction and 1,673,014 physician participants
- Regularly scheduled series: 20,780 activities,

with 416,814 hours and 4,403,799 physician participants

- Internet (enduring materials): 18,569 activities, with 39,163 hours of instruction, and 3,568,207 physician participants
- Enduring materials (other): 6,310 activities, with 33,471 hours of instruction and 1,131,683 total physician participants
- Journal CME: 3,537 activities and 883,972 physician participants

Activities by Organization

The total numbers of directly sponsored activities based on type of CME provider and the top three formats of CME offered are as follows:

- Hospital/health care delivery system: 44,982 activities. Courses (24,414); Regularly scheduled series (13,784); internet (enduring materials) (3,390)
- School of medicine: 17,100 activities. Courses (7,769); Regularly scheduled series (6,208); internet (enduring materials) (2,249)
- Publishing/education company: 16,916 activities. Courses (4,811); internet (enduring materials) (7,980); enduring materials other (3,272)
- Nonprofit (physician membership organization): 12,405 activities. Courses (5,169); internet (enduring materials) (3,021); enduring materials (other) (1,150); journal CME (2,464)
- Government or Military: 3,362 activities. Courses (2,511). Most hours as well for courses (22,962).

Overall, Courses were the most popular format for offering directly sponsored CME (49,644); followed Regularly scheduled series (20,780); internet (enduring materials) (18,569); enduring materials (other) 6,310; and Journal CME (3,537).

Hours of Instruction

Overall, Regularly scheduled series offered the most total hours of instruction for directly supported CME (416,814), followed by courses (287,793); and internet (enduring materials) 39,163. The breakdown by type of CME provider is as follows:

- Hospital/health care delivery system: 314,214 hours; most hours are Regularly scheduled

series (211,633)

- School of medicine: 273,489 hours; most hours Regularly scheduled series (193,045)
- Nonprofit (physician membership organization): 92,417 hours; most hours courses (57,983)
- Publishing/education company: 52,681 hours; most hours courses (23,169); internet (enduring materials) (10,497); enduring materials (other) (14,386)
- Government or Military: 25,435 hours; most hours courses (22,962)
- Non-profit (other) 18,692 – most hours courses (12,190)

Physician Participants

Below is the number of total physician participants attending CME programs based on the provider of the CME.

- Publishing/education company: 3,776,293 participants; most participants: internet (enduring materials) 2,638,619; enduring materials (other) 812,492; courses (136,312)
- Hospital/health care delivery system: 3,053,328 participants; most participants: Regularly scheduled series (2,194,391); courses (48,532); internet (enduring materials) 150,218
- School of medicine: 2,520,108 participants; most participants Regularly scheduled series (2,090,214); courses (242,817); internet (enduring materials) 158,200
- Nonprofit (physician membership organization): 1,965,699 participants; most participants journal CME (682,359); courses (625,027); internet (enduring materials) 357,280

For jointly sponsored events, the total physician participants are as follows:

- School of medicine : 911,800 participants; most participants internet (enduring materials) (592,096); Regularly scheduled series (150,420); courses (119,825)
- Publishing/education company: 376,041 participants; most participants journal CME (225,544); internet (enduring materials) 87,856; courses (35,090)
- Nonprofit (physician membership organization): 247,121 participants; most participants courses (151,458); internet (enduring materials) (61,510); reg sched courses (15,158)
- Hospital/health care delivery system: 178,323 participants; Regularly scheduled series

(92,041); courses (64,254); internet (enduring materials) (18,518)

- Non-profit (other): 49,480 participants

Overall, publishing/education companies have the most physician participants (4,152,334) followed by:

- School of medicine – 3,431,908
- Hospital/health care delivery system – 3,231,651
- Nonprofit (physician membership organization) – 2,212,820
- Non-profit (other) – 322,585
- Not classified – 170,103
- Insurance company/managed care company – 127,645
- Government or Military – 92,575

Commercial Support Reporting

Through 2010, ACCME-accredited and state-accredited providers reported the monetary value of in-kind commercial support they received, and included that amount in their total commercial support numbers. Beginning in 2011, due to a modification in ACCME commercial support reporting requirements, accredited providers no longer included the monetary value of in-kind support and reported only the dollar values for funds actually received. The nature (required) and source (optional) of in-kind commercial support is now reported qualitatively. Examples of in-kind commercial support include equipment, supplies, facilities, and other nonmonetary resources provided by a commercial interest in support of the CME activity. Therefore, comparisons between 2011 commercial support numbers and previous years will not be valid.

The total commercial support with monetary value of in-kind commercial support excluded is as follows:

- Publishing/education company – \$248,015,575
- School of medicine – \$201,688,456
- Nonprofit (physician membership organization) – \$124,913,669
- Not classified – \$64,363,362
- Non-profit (other) – \$60,471,672
- Hospital/health care delivery system – \$52,568,251

- Insurance company/managed care company – \$348,502
- Government or Military – 37,150

ACCME-Accredited Providers Only

The following numbers apply only to ACCME-accredited providers. In 2011, other income made up 53% of total income, commercial support 33%, and advertising and exhibits 13%. Other income has increased steadily over the years with an increase of 4% in 2011 from 2010.

There are 687 ACCME-Accredited providers. The number of ACCME-accredited providers grew steadily until 2007. The ACCME lost 49 providers (7%) since 2007, including 7 providers (1%) between 2010 and 2011. Most of the loss in numbers has been from the following provider types: nonprofit physician membership organizations, publishing/education companies, and hospital/health care delivery systems. The numbers of schools of medicine, government or military providers, and insurance/managed-care companies has remained fairly steady. There has been a small decrease in nonprofit other providers and a slight increase in the number of not classified organizations.

When providers voluntarily withdraw their ACCME accreditation, the ACCME ascertains the reason whenever possible. The most common reason providers give is corporate changes, such as mergers and acquisitions. In addition, smaller providers sometimes withdraw because they have decided to offer CME through partnerships (joint sponsorships) with larger accredited providers. For that reason, the decline does not necessarily represent a reduction in physicians' and other health care professionals' access to CME. The number of physician and nonphysician participants in CME activities has increased steadily over the years, although participant numbers remained virtually flat between 2010 and 2011. The numbers of activities and hours of instruction increased between 2010 and 2011.

The majority of providers (80%) bring in \$1 million or less each year in commercial support, with almost half of providers (48%) bringing in \$100,000 or less. One-fifth of providers (20%) bring in more than \$1 million per year in commercial support, with the smallest percentage of those (2%) bringing in \$10 million or more.

Data showed the percentage of revenue that each provider type receives from commercial support, the percentage of activities receiving commercial support by provider type, and the total hours of instruction (with commercial support) offered by provider type, represented by the circle size. Data showed that nonprofit physician membership organizations receive the smallest percentage of their revenue from commercial support and produce the smallest percentage of commercially supported activities (excluding government or military providers—see note), while not classified providers receive the largest percentage of their revenue from commercial support and produce the largest percentage of commercially supported activities, although they offer fewer overall hours of instruction.

Medical schools receive about half of their income from commercial support, about 20% of their activities are commercially supported, and they produce the most overall hours of instruction. Commercial support accounted for fewer than 1% of activities and less than 1% of total revenue for government or military providers.

In 2011, the majority of CME activities (79%) did not receive commercial support, accounting for approximately 80% of physician participants, and 75% of nonphysician participants. Twenty-one percent of CME activities did receive commercial support, bringing in approximately 20% of physician participants, and 25% of nonphysician participants.

Comment

The CME Economy is growing ever so slightly, which given the current financial circumstances we may be nearing a bottom. The trend for the reduction in commercial support by companies fails to take into account that those resources and courses supported by industry may no longer be in existence or available to clinicians. There is a downside potential for physicians not getting the latest information on therapies that could potentially save patients lives.

By performance, we can see from this report that the Medical Communication Companies are becoming the engine for this market sector and have been able to reach the largest number of clinicians.

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