24.0 Continuing Medical Education

24.1 Minimum Education Requirement - Hours and Subjects

24.1.1 Each physician applying for renewal of a license to practice medicine must complete at least thirty hours of qualifying CME during the most recent two-year licensing period.

24.1.1.1 The licensee is not required to file documentation of CME that verifies completion at the time that it is reported, however, it is the licensee's responsibility to retain documentation for four years from the time the information is submitted to the Board.

24.1.1.2 The Board may audit records of CME for up to four years from the time of submission; a licensee is required to promptly submit documentation of CME completion in response to a request from the Board.

24.1.2 For physicians licensed in Vermont for the first time during the most recent two-year licensing period, if licensed in Vermont for less than one year, there is no requirement for CME at the time of the first renewal. If licensed for one year or more during that initial period of Vermont licensure, the licensee shall complete at least 15 hours of approved CME activity and those 15 hours shall include any subject-specific CME required by this rule.

24.1.3 Time is calculated from the date the license was approved by the Board until the date of expiration. Any physician who has not completed the required continuing medical education shall submit a make-up plan with a renewal application, as specified in this rule.

24.1.4 Except for required subjects that are mandated by this rule, all CME hours completed in satisfaction of this requirement shall be designed to assure that the licensee has updated knowledge and skills within their own specialties and also has kept abreast of advances in other fields for which patient referrals may be appropriate. A licensee's "own area of practice" shall not be interpreted narrowly; it is acknowledged that training in many other fields may be reasonably related to a practitioner's own specialties.

24.1.5 Required Subject: Hospice, Palliative Care, Pain Management. 26 V.S.A. § 1400(b) mandates that the Board of Medical Practice shall require physician licensees to provide "evidence of current professional competence in recognizing the need for timely appropriate consultations and referrals to assure fully informed patient choice of treatment options, including treatments such as those offered by hospice, palliative care, and pain management services." Accordingly, all physician licensees who are required under this rule to complete CME shall certify at the time of each renewal that at least one of the hours of qualifying CME activity has been on the topics of hospice, palliative care, or pain management services.

24.1.6 Required Subject: Prescribing Controlled Substances.

All physician licensees who are required to certify completion of CME and who prescribe controlled substances shall certify at the time of each renewal that at least two hours of qualifying CME activity on controlled substances prescribing. The following topics must be covered, as required by Vermont law: abuse and diversion, safe use, and appropriate storage and disposal of controlled substances; the appropriate use of the Vermont Prescription Monitoring System; risk assessment for abuse or addiction; pharmacological and nonpharmacological alternatives to opioids for managing pain; medication tapering and cessation of the use of controlled substances; and relevant State and federal laws and regulations concerning the prescription of opioid controlled substances. Each licensee who is registered with the D.E.A. and who holds a D.E.A. number to prescribe controlled substances, or who has submitted a pending application for one, is presumed to prescribe controlled substances and must meet this requirement.

24.1.7 Licensees who are not in active practice shall still complete CME, including all required subjects, to be relicensed. For purposes of subsection (b), a physician not in active practice may consider the last area of practice as the area of practice to which activity shall relate, or the activity may relate to any intended new area of practice.

24.1.8 Licensees who are members of the armed forces and who are subject to a mobilization and/or deployment for all or part of a licensing cycle will be treated the same as licensees who are licensed for the first time during a licensing cycle. E.g., a licensee whose military mobilization/deployment covers a year or more is not required to complete CME for that cycle. A licensee whose military duties during the two-year cycle total less than one year shall be required to meet the CME requirement of at least 15 hours, including any required subjects.

24.1.9 A licensee who allows a license to lapse by not timely applying for renewal shall certify completion of all CME that would have been required to remained licensed in order to be granted a renewal license.

24.2 Qualifying Continuing Medical Education Activities

24.2.1 CME activities that are approved for American Medical Association Physician's Recognition Award Category 1 Credit AMA PRA Category 1 Credit™ qualify as approved Vermont CME.

24.2.2 Credit for providing training. The Board accepts all AMA PRA Category 1 Credit™ activity. The AMA PRA program grants two hours of credit for each hour of training presented by a physician. The Board recognizes those credits the same as the AMA PRA program.

24.2.3 Certain activities sponsored by the Board may qualify for CME credit even if not designated as AMA PRA Category 1 activities. If CME credit is available, it will be specifically stated by the Board.

24.2.4 Special Rule for holders of a full, unlimited license who are participants in a residency or fellowship program approved by a nationally-recognized body that approves graduate medical education (GME). Some physicians who are still in a GME program obtain full licensure in addition to a limited temporary license for training. As fully-licensed physicians, if licensed for a year or more (see Section 24.1.2) they must complete at least 15 hours of CME. If licensed the full period, they must complete 30 hours of CME. However, the Board will recognize participation in a GME program as qualifying for CME credit to the extent provided here.

24.2.4.1 The licensee must have successfully completed the program or continue to be in good standing in the GME program throughout the licensing period to have GME count as CME.

24.2.4.2 Successful completion of a year of full-time participation in an approved program during the two-year licensing period may count for 15 hours of CME to be used to satisfy a CME requirement for that licensing period. Licensees who wish to use participation in a GME program to satisfy part of the CME requirement shall submit a letter to the Board stating so and attesting to successful completion of the GME program year.

24.2.4.3 GME students who are fully licensed must meet the subject-specific requirement for hospice, palliative care, or pain management services if fully licensed for a year or more. See Section 24.1.5. GME students who are fully licensed for a year or more and who have applied for or hold a D.E.A. number must satisfy the statutory requirement for two hours of CME on controlled substances prescribing. See Section 24.1.6.

24.3 Make-Up Plans

24.3.1 Any physician who has not completed the minimum number of hours of CME, or who has not completed the required subject-specific training, as of the deadline for submission of license renewal applications, will not be granted a renewal license unless the application includes an acceptable make-up plan signed by the licensee. The Board Executive Director is authorized to review and determine if make-up plans are acceptable.

24.3.2 An acceptable make-up plan must include a timeline for making up all CME that needs to be completed to satisfy the requirements of this rule. The timeline shall identify the approved activities that the licensee plans to attend. The licensee may later substitute activities, but the plan shall indicate that it is the licensee's good faith intent to complete the activities listed at the time of submission. A licensee shall have up to one hundred twenty (120) days to complete the CME make-up plan.

24.3.3 Any licensee who will not complete a make-up plan within the time specified by the plan shall contact the Board at least 30 days in advance of

the date on which the period will end to notify the Board and submit a revised plan and request for extension of time.

24.3.3.1 The request for extension of time must include an explanation of the reasons why the licensee was unable to complete the required training in accordance with the plan.

24.3.3.2 Extensions of the make-up plan period are limited to 90 days, during which the licensee shall complete the required CME. Further extensions will be granted only for good cause shown, for reasons such as: serious illness of the licensee or a family member; death of an immediate family member; significant personal hardship, such as a house fire; significant and ongoing medical staff shortage during the make-up period; or similarly compelling reasons.

24.3.3.3 The Board may delegate to the Board Executive Director the authority to approve requests to extend the time for a make-up plan in accordance with this rule. Any request for extension not granted by the Executive Director shall be considered by the Board.

24.3.4 CME activity completed as part of a make-up plan does not count toward satisfaction of the requirement to complete CME during that current licensing cycle; activity may only be counted once. If a multi-hour activity is performed partly in satisfaction of a make-up plan and partly for the CME requirement associated with the current licensing cycle, the licensee shall clearly document the allocation.

24.4 Failure to Certify Completion of Required CME, File a Make-Up Plan, or Complete a Make-Up Plan

24.4.1 A licensee who has failed to submit certification of completion of CME as required by law and this rule, or who having failed to certify completion of CME has failed to submit a make-up plan with a license renewal application, will be notified of such failure and have not more than 15 days from receipt of notice to file with the Board either a certification of completion of CME or a make-up plan.

24.4.2 A licensee who fails to file a certificate of completion of CME at the end of a make-up period, or to file a request for an extended make-up period, shall be notified of such failure and have not more than 15 days from receipt of notice to file with the Board either a certificate of completion of CME or another request for extension of time in which to make up CME.

24.4.3 A licensee who submits a certificate of completion at the time of submission of the license renewal application, or who has filed an acceptable make-up plan with the renewal application and is in the make-up period, or who having failed to complete the first make-up plan has

received approval from the Board for an extended make-up period that has not yet expired, is in good standing with respect to CME requirements.

24.4.4 Any licensee not in good standing with respect to CME requirements is subject to investigation by the Board for unprofessional conduct.