



## POTENTIAL EDUCATION PARTNER ATTESTATION FORM

American Academy of CME, Inc. (Academy) is committed to ensuring that all jointly sponsored/co-provided activities are planned and implemented in compliance with the Elements, Standards and Policies of the Accreditation Council for Continuing Medical Education (ACCME), American Nurses Credentialing Center (ANCC), Accreditation Council for Pharmacy Education (ACPE), and Commission on Dietetic Registration (CDR), as well as the policies of the AMA, FDA, PhRMA, and OIG pertaining to continuing medical education, and to providing clinically-relevant educational activities for practitioners to promote improvements or quality in health care that are independent of the control of commercial interests. As part of this commitment, Academy does not jointly sponsor/ co-sponsor CME/CE-certified activities with commercial interests.

**A commercial interest is defined by the ACCME, ANCC, and ACPE as any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients.** ANCC also includes as a commercial interest an entity that is owned or controlled by an entity that produces, markets, resells, or distributes healthcare goods or services consumed by or used on patients. Exceptions are made for nonprofit or government organizations and non-healthcare-related companies.

Standard 1.2 of the ACCME *Standards for Commercial Support* states that “a commercial interest cannot take the role of non-accredited provider in a joint sponsorship relationship.” ANCC prohibits co-providing with a commercial interest or sponsor, as does the ACPE. Therefore, it is the responsibility of Academy to ensure that all non-accredited organizations with which it collaborates are not commercial interests or owned or controlled by a commercial interest. To facilitate the determination of your eligibility to enter into a joint sponsor/co-provider relationship with Academy, we ask that you complete the following questionnaire and return it for our review.

### I. Organization

Organization _____	Tax ID _____
Mailing Address _____	
City _____	State _____
Postal Code _____	Country _____
Telephone _____	Fax _____
Organization website _____	
Contact Email _____	Skype _____

### II. Mission

A. Is your organization involved in providing commercial or other company-directed activities or services for pharmaceutical companies, medical device manufacturers, nutraceutical or herbal supplement companies, etc., including but not limited to advertising/promotional services, publication planning, speaker bureau management, speaker training, and advisory board/consultant meeting planning?

- Yes
- No

Policy 2.1

B. Please provide a brief overview of your organization or attach a copy of your mission statement.

**III. Corporate Structure**

A. A parent organization is defined as one that owns and fiscally controls another organization. In that context, do you have a parent organization?

- Yes
- No

B. If yes, please identify your parent organization.

<b>Parent Organization</b> _____
<b>Mailing Address</b> _____
<b>City</b> _____ <b>State</b> _____
<b>Postal Code</b> _____ <b>Country</b> _____
<b>Telephone</b> _____ <b>Fax</b> _____
<b>Organization website</b> _____

C. If applicable, please provide a brief overview of your parent organization or attach a copy of their mission statement.

D. The ACCME, ANCC, and ACPE define a commercial interest as “**any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients.**” If applicable, do you believe that your parent organization is a commercial interest as defined by the ACCME/ANCC/ACPE?

- Yes
- No
- N/A

Policy 2.1

- E. Is your organization part of a larger family of companies that is affiliated with any other organization(s) (i.e., do you have any sister companies)?
  - Yes
  - No
  
- F. Is any organization (sister company) that you are affiliated with involved in providing commercial or other company-directed activities or services for pharmaceutical companies, medical device manufacturers, nutraceutical or herbal supplement companies, etc., including but not limited to advertising/promotional services, publication planning, speaker bureau management, speaker training, and advisory board/consultant meeting planning?
  - Yes [*complete section IV, Corporate Firewalls*]
  - No [*proceed to section V, Attestation*]
  - N/A [*proceed to section V, Attestation*]

**IV. Corporate Firewalls**

If any affiliate (sister company) or subsidiary of your organization is involved in providing commercial or other company-directed activities for a commercial interest, you must have a corporate firewall in place to maintain independence in the development of content and implementation of CME/CE activities. Therefore, please verify that your organization has guidelines and firewalls in place to provide for separation of CME/CE and promotional staff (e.g., independent, non-overlapping management, distinct and separate staff responsible for the development of educational content, separate physical locations, different telephone and fax numbers and Internet domains for e-mail addresses, individual computer networks, etc.).

- A. Please attach a description of the elements of your firewall.
  
- B. Attach an organizational chart that depicts how your organization and management and content-related personnel are distinct and separate from those that are involved in providing commercial or other company-directed activities for a commercial interest.

**V. Attestation**

I hereby certify that the above information is correct and that American Academy of CME, Inc. will be immediately notified if any of the above information changes.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Print Name** \_\_\_\_\_ **Title** \_\_\_\_\_

**ACADEMY REVIEW AND ACCEPTANCE**

*This organization has been reviewed and approved as a joint sponsor/co-provider of CME/CE activities.*

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Title** \_\_\_\_\_