

**Continuing Education Committee Report  
AAIM Executive Council Meeting  
May 14, 2006**

- 1) **CME Committee leadership:**
  - Laura Vecchione is new chair of CME Committee
  
- 2) **ACCME Reaccreditation Review**
  - AAIM's accreditation will expire in Mach 2007
  - Reaccreditation review to take place in September 2006
  - AMEDCO is preparing our documents
  - Cost: ACCME fee \$6500  
AMEDCO fee for preparing self-study report and documentation packets: \$6000  
Travel to Chicago for Educ. VP and CME chair (one day, in and out)
  
- 3) **2006 CME Activities:**
  - Triennial 2006 (Valerie Kaufman, course director)
  - MMDA Spring 2006 (Gina Guzman, course director)
  - AAIM 2006 (Rod Richie and Linda Goodwin, program chair)
  - Introductory Course will not be given in 2006 (Triennial year)
  - Basic Mortality Course (Tom Ashley and Marty Engman, course directors)
  - MMDA Fall 2006 (Richard Braun, course director).
  
- 4) **AMEDCO Fees/Services**
  - Instead of per-activity (\$750) and per-attendee (approx. \$7) fees, AMEDCO will now charge an all-inclusive annual fee of \$6500
  - AMEDCO will no longer assume responsibility for obtaining disclosure forms from speakers and planners. They will supply the electronic form, will notify planners of what is needed and track receipt of forms. AAIM needs to assume responsibility for following up on "delinquent" forms.
  - AMEDCO will charge \$2.50 per form for tabulating evaluation forms. Alternatively, AAIM can do the tabulation and supply a summary to AMEDCO.
  
- 5) **Triennial 2006.** Detailed report under separate cover.
  
- 6) **Disclosure:** (revisit from 2005 council meeting)
  - The Committee recommends a broader disclosure policy than required by ACCME.
  - The intent of ACCME's policy is to disclose to attendees any potential conflicts of interest and any relationships that potentially could introduce bias into educational presentations so that attendees can assess objectivity.
  - ACCME requires disclosure of any financial relationship "with a commercial organization which produces health-care products or services." Given the nature of our organization, the committee feels that financial relationships with reinsurance companies, industry laboratories, paramedical service providers or any other insurance industry vendors should also be disclosed.