

### CME Activities with Commercial Support

As the provider of CME credit, the CME office is required by the Accreditation Council for Continuing Medical Education (ACCME) to manage the disposition and disbursement of commercial support. **Commercial support** for a CME activity is financial, or in-kind, contributions given by a commercial interest, which is used to pay all or part of the costs of a CME activity. A **commercial interest** is considered any entity producing, marketing, re-selling, or distribution health care goods or services consumed by, or used on, patients. All decisions regarding CME content, faculty selection and evaluation must be made independent of the commercial interest.

The CME office has the following policies and procedures in place to manage CME activities with commercial support:

- Disclosure forms required for all faculty/planners/authors
- Faculty Invite letter
- Commercial Support Letters of Agreement
- CME Honoraria and Out-of-Pocket Reimbursement policy
- Conflict of Interest Management Policy
- Disclosure to learners prior to the start of the CME activity of receipt of commercial support

The procedure is to ensure mandatory accreditation requirements for commercially supported CME activities are met. This applies to commercial support received from commercial interests only. This does not apply to grants from non-profit organizations, government agencies, etc.



#### Instructions

1. Notify CME office you plan to seek funding for a CME activity.
2. Receive approval from Office of Sponsored Projects to apply for grant.
3. Advise CME office as requests for commercial support are approved or denied.  
In some cases, commercial interests will require funds to be sent directly to the CME office.
4. When a grant is approved, a commercial interest will generally provide a letter of agreement (LOA). The letter of agreement **must** be signed by Dr. Moerschbaecher, Vice Chancellor for Academic Affairs and Laura J. Bell, Director of CME. Please contact the CME office if you need to provide the commercial interest with a LOA and a LOA template will be provided to you.
5. Disclose to learners prior to the activity the source of commercial support on activity overview sheet.
6. Complete page 2 and submit to the CME office at least 5 days prior to the CME activity
7. Failure to follow the above process will result in revocation or denial of CME credit for your activity.

**LSU CME COMMERCIAL SUPPORT DISBURSEMENT FORM**

Please complete the following information and return to the CME office:

|   |    |
|---|----|
| <b>CME Activity Receiving Commercial Support:</b>       |    |
| <b>Date of Activity:</b>                                |    |
| <b>Speaker Name:</b>                                    |    |
| <b>Speaker Topic:</b>                                   |    |
| <b>Commercial Interest:</b>                             |    |
| <b>Grant Amount Applied For:</b>                        | \$ |
| <b>Grant Amount Awarded:</b>                            | \$ |
| <b>Commercial Support Funds will Pay the Following:</b> |    |
| <b>Honoraria</b>  | \$ |
| <b>Travel Expenses</b>                                  | \$ |
| <b>Food/Beverage</b>                                    | \$ |
| <b>Program Materials</b>                                | \$ |
| <b>Audio Visual Support</b>                             | \$ |
| <b>Other Costs:</b>                                     | \$ |
|   |    |

- Will any other payment be given to the presenter (i.e., payment directly from commercial interest to faculty)?  
 Yes  No
- Are all honoraria payments to be made in compliance with LSU honoraria and out-of-pocket reimbursement policy?  
 Yes  No
- Do the program materials contain any type of advertising, trade name, or product group message?  
 Yes  No
- Were all decisions regarding speaker selection, topic, content and evaluation made free from the influence of the commercial interest?  
 Yes  No
- Will a commercial interest provide any materials or other types of displays at the CME activity?  
 Yes  No

6. Send completed form along with copy of contract or check request to:

**LSU CME Office  
 LSU School of Medicine  
 2020 Gravier St. 6<sup>th</sup> floor  
 New Orleans, LA 70112**

Or via email to [lbell@lsuhsc.edu](mailto:lbell@lsuhsc.edu) or [dgrigs@lsuhsc.edu](mailto:dgrigs@lsuhsc.edu)