

Subject: Question about advertising local/regional CME programs on the Chapter website

August 18, 2015

Andrew Miller, MD, FACC (amiller@cvapc.com)

Dear Friends:

Here in Alabama, we (Steve and I) have had a healthy discussion about the above topic and I'm interested in your thoughts.

Specifically, the question is: "On the chapter website, should we post or advertise flyers/links for CME programs that are not ACC programs but are accredited CME programs possibly of interest to our members?" This would include academic and private practice educational programs that are put on for other physicians or care team members (often their referring base).

As I see them,

Pros:

1. Member value – Often care team members in particular get something out of these CME events.
2. Advertising these programs might build some community amongst groups around the state – we are trying to be inclusive and encourage crosstalk amongst competitors.
3. Professional home – Encourages members to look to our Chapter website for information.

Cons:

1. Often these programs are big commercials (or that is an underlying goal) – Though hopefully the CME process makes the program of scientific rigor and valuable to attendees.
2. If you post one, then you must post them all – And some have more merit than others (though we would limit it to CME accredited programs).
3. Professional home – If our members go to other meetings then they are less likely to attend ours.

I'm interested in your thoughts. We are going to discuss this at our next Executive Council meeting and develop a position there. A few responses would be good fodder for that discussion. Does anyone do this?

Warmest Regards,
Andy

August 18, 2015

Norman Lepor, MD, FACC (norman.lepor@gmail.com)

Why not associated yourself with the better CME program that you think provide member value? Who says if you promote one, you have to promote all?

August 18, 2015

Andrew Miller, MD, ACC (amiller@cvapc.com)

Good question. We did this last year to a small degree and it led to the discussion. We advertised a UAB program that is mostly preclinical science last year – fairly benign and seemingly not a commercial (but arguably it could have some purpose of advertising to a referral base). We did not link with CME programs from private practices and there are at least 4 of these in our state.

For example:

<http://www.uab.edu/medicine/cardiovascularcenter/>

<http://www.cvupdate.org/>

We would not include the CME non-accredited or accredited program from industry. But, if we do advertise one practice's program then we probably will need to advertise all member practices' programs.

This could be a slippery slope.

In full disclosure, I'm the chair of the second link above and am also loosely favoring a stance that we not add it to the Chapter website.

Andy

August 18, 2015

Anuj Gupta, MD, FACC (anujslink@gmail.com)

I think it is mutually beneficial to list programs that may be of interest to our FACCs to be listed on our website. We ask that we get to review the itinerary, and the Maryland ACC board reviews whether or not the educational purposes are reasonable. If we agree to list it on our website (and send our FACCs an email notifying them of the program as part of our monthly emails), we require that we are listed as a sponsor of the event without cost to the chapter and that someone from our chapter speak briefly about the ACC.

August 18, 2015

Steven Lloyd, MD, PhD, FACC (sglloyd@uab.edu)

Norman & others,
More background.

The academic medical center is beleaguered financially and there is intense competition among cardiology groups (both the academic medical center, as well as private hospitals and groups) in the Birmingham area. Nothing wrong with that. This goes on in lots of places.

The academic center has a mainly research symposium, linked in Andy's message. Other groups offer CME-accredited programs mainly geared towards updating primary care physicians on cardiovascular topics. All of these are worthwhile in my view. Actually, probably few private practicing cardiologists attend any (either the private group programs or the university symposium). There is definite concern that NP's may choose to go to any of these conferences to get their CEUs, rather than attend our chapter meetings. This is legitimate.

But the main concern is that in this environment of competition, there was a feeling that posting the academic medical center's symposium on our chapter web site amounts to clinical advertising, and that the academic center is elitist i.e. the chapter placing this program on its web site while not posting other group's programs was an endorsement-- by the chapter-- that the academic medical center is a "Special Place" better than other hospitals / groups.

For this reason, a proposed neutral position was for the chapter to just advertise any cardiology program that was CME accredited. The chapter then stays out of the business of trying to determine which program is more meritorious or playing favorites. But the concerns about loss of attendance at our

chapter meetings may be a real concern. The other position was to just have no advertising for any of these programs, period.

Meanwhile among this debate, some of those at the academic medical center feel that competing private cardiology groups would like the academic center to only exist for 3 reasons: to do transplants, to train new cardiologists for the groups to employ, and to take care of indigent / uninsured or undesirable other patients that the private groups don't want to see.

To me, an even bigger topic that underlies this is "What is the role of the academic cardiology center in today's healthcare environment". Seems to me that there must be a way that academic centers can coexist with successful private practice groups and I know this does work in many places.

By the way I like Anuj's comment about requiring a brief message about ACC at any meeting that we post on our web site.

August 19, 2015

Matthew Phillips, MD, FACC (mattphillips1@me.com)

All

I am impressed anyone actually looks at the website. I think they get emails from us and it goes to spam

They all pay dues however. It's very strange

We are having our chapter meeting and short of offering uber black to transport the members from home for free; it's a free event at a major resort - food; dinner, receptions etc ..

It will be interesting to see the attendance

Time is the most valuable commodity anyone has and they are not making any more of it. That's the problem with the attendance

August 19, 2015

Jeffrey Williams, MD, FCC (lcaep@hotmail.com)

Hello:

The PA ACC has transitioned to Partnering meetings in the state as opposed to sponsoring meetings as attendance has dwindled. This has proven to be a wise decision by Govs Murali (West) and Ferrari (East).

We doubled in interest from 10 partnered meetings in 2014 to 20 in 2015. Of those 20, 10 requested, and were approved for the \$2,500 grant in kind. Nine have actually followed through so we are spending \$22,500 on Partnered meetings in 2015. With each of those grants, we require 30 minutes at the start of the meeting for a ACC/PaACC speaker/update. We choose one of those grant in kind partnering meetings for our one "ACC LEADERSHIP SPEAKER" that we get from national each year. The other 10 partnering meetings are simple, no money, no speaker, just the logo and some marketing of the event.

We hope to avoid the appearance of impropriety and favoring one institution over another while keeping the PA ACC active in CME.