



127 Washington Avenue, East Building, 3rd Floor, North Haven, CT 06473
Phone (203) 865-0587 Fax (203) 865-4997 www.csms.org

Connecticut State Medical Society
Testimony on
House Bill 6522 An Act Concerning Continuing Medical Education
In Screening For Inflammatory Breast And Gastrointestinal Cancers
Presented to the Public Health Committee
February 25, 2019

Senator Abrams, Representative Steinberg, and members of the Public Health Committee, on behalf of the physicians and physicians in training of the Connecticut State Medical Society (CSMS) thank you for the opportunity to provide this testimony to you today on **House Bill 6522 An Act Concerning Continuing Medical Education In Screening For Inflammatory Breast And Gastrointestinal Cancers**

Robin Stevenson and Donald Moore, in a recent JAMA editorial state that “medical education is a continuum of 3 parts; undergraduate medical school education, postgraduate training, and continuing medical education (CME). More than a decade ago, CSMS was proud to partner with the Department of Public Health to develop appropriate statute regarding the requirement of Continuing Medical Education for healthcare providers in this state. Although statute acknowledges the minimum need for CME, it is important to note that physicians annually obtain far greater quantities of CMS to meet requirements for certain credentialing, staff privileges or national accreditation within specialties.

CSMS continues to support such requirements, recognizing that in most instances the physician is the person best qualified to determine the subject matter of the CME undertaken. CSMS recognizes that critical circumstances may arise from time to time that dictate the need for CME in specific subjects. Among these are the current mandated subjects that must be repeated every 6 years. While we understand this bill proposes to allow physicians to meet the currently required risk management hour of CME by obtaining training on these diseases, ***CSMS has opposed additional mandated requirements*** whenever they have not encompassed a compelling and unmet societal need. This opposition in no way questions the importance of the issue at hand, but more about the ability of physicians and other health care professionals to obtain CME in areas appropriate to their specialty area of patient care. Since the establishment of the original mandates, CSMS has worked with legislators interested in specific issues to find ways in which physicians could meet the established mandates with CME appropriate to their specialty and within the confines of established law.

We hold firm in our stance that physicians are fully qualified and capable of determining their individual needs for CME, making this language and approach unnecessary as well as

cumbersome, but would allow that the suggested language appears to permit those interested in such a narrow topic to meet an existing mandate contained in the statute.

We look forward to working with the Committee on this legislation.