

2019



AANP Accreditation Application Process

v 2019.1



1.0 AANP ACCREDITATION APPLICATION DETAILS

The following information is provided to assist with the preparation for completing the application for AANP Accreditation approval. **Please review the *AANP Accreditation Policy Handbook* in detail to ensure a successful application process.**

The AANP **Online** Accreditation Application is the preferred method for all submissions beginning January 1, 2018. **Beginning April 1, 2018, all applications that are not submitted online will incur a hard-copy handling fee (this includes emailed, faxed, scanned, and mailed submissions).**

1.1 Online Application Process (for the Hard-Copy process, see section 1.2)

A complete application and review fee (and expedite fee, if applicable) is required to begin the review process. Applications submitted greater than 90 calendar days prior to the activity's start date will be rejected. The online system will require one individual to be responsible for completing the online application (this person will be identified as the Primary Planner). The online application portal is located on the AANP website.

All the following information is REQUIRED to complete the online application:

- a. Submission sponsor/provider name and demographic details
 - b. General information regarding the activity (date, location, title, etc.)
 - c. Name and email contact of responsible party for payment
 - d. Names and email addresses for all Planners and Faculty involved in the activity¹
 - e. STOP: If you have greater than 10 Planners, and/or greater than 20 Faculty involved in this activity, you will complete a hybrid application. Download and send the PDF documents (Faculty and/or Planner disclosure/Faculty Bio) found in the Hard-Copy Resource section of the Accreditation webpage to the individuals involved in the activity for them to complete. You will complete all other items in the online application but will upload these forms into the system once finalized.
 - f. Agenda and/or schedule
 - g. Activity Detail Form²
 - h. Activity evaluation questions (see AANP Policy; Section 5.0, item #10)
 - i. Certificate of completion (see AANP Policy; Section 5.0, item #12)
 - j. Samples of any education activity related material such as announcements and marketing pieces (draft copies accepted). These materials must include:
 - i. Pending accreditation statement (see AANP Policy; Section 8.0, item #8)
 - ii. Acknowledgement of any commercial support, if applicable (see AANP Policy; standard 6);
 - k. Any activity material (i.e., slide presentations to resolve potential COI) requiring AANP review;
 - l. Any activity material (i.e., pilot test results, post-test questions) to validate requested time (contact hours) for enduring materials (see AANP Policy; Section 6.0, item #s 7 & 8).
2. Payment must be received prior to full review of the application. Instructions for payment will be emailed to the application contact person after AANP accepts the application for review (see section 3.0 in this guide).

¹The system requires names and email addresses for all Planners and Faculty involved in the activity as it automatically distributes the requirements to those participants. The invitation to complete required documentation will be emailed to the user, and the user will then log in to complete the form(s).

²The activity detail form is on a spreadsheet and will require the Primary Planner to submit one form for the entire activity. The form requires the following details: date and time, session title, session faculty, session objectives (3), pharmacology specific objectives (if applicable), and pharmacology minutes requested (if applicable). The Primary Planner may collect these details from the Faculty using any method; however, the spreadsheet in the system will be the only form allowed for the submission.

1.2 Hard-Copy Application Process (for Online process, see section 1.1)

Beginning April 1, 2018, all applications that are not submitted online will incur a hard-copy handling fee (this includes emailed, faxed, scanned, and mailed submissions). **Applications submitted greater than 90 calendar days prior to the activity's start date will be rejected.**

A complete application is required to begin the review process. AANP reserves the right to require the use of specific AANP forms to provide efficiency and consistency to the review process. **All the following information is REQUIRED for submission. AANP requires that select AANP forms must be used. The AANP forms that must be used are marked with an asterisk (*) in the following list.** If this creates a significant challenge related to the provider's process (i.e., faculty disclosures are completed online), please contact the education department to discuss potential options.

1. Required submission documents and/or information includes:
 - a. AANP's Cover Sheet*
 - b. AANP's Repeat Activity and Website Request form* (if applicable)
 - c. Agenda and/or schedule
 - d. AANP Planner disclosure form for each planner *
 - e. AANP Planner List*
 - f. Faculty/Speaker bio-sketch form. CV's are not accepted. See example of AANP's form.
 - g. AANP Faculty/Speaker disclosure form for each faculty/speaker, poster presenter, and moderator*
 - h. Activity Detail Form (single session OR multi session) *
 - i. Activity evaluation questions (see AANP Policy; Section 5.0, item #10);
 - j. Certificate of completion (see AANP Policy; Section 5.0, item #12);
 - k. Samples of any education activity related material such as announcements and marketing pieces (draft copies accepted). These materials must include:
 - i. Pending accreditation statement (see AANP Policy; Section 8.0, item #8);
 - ii. Acknowledgement of any commercial support, if applicable (see AANP Policy; standard 6);
 - l. Any education activity material (i.e., slide presentation) requiring AANP review;
 - m. Any activity material (i.e., pilot test results, post-test questions) to validate requested time (contact hours) for enduring materials (see AANP Policy; Section 6.0, item #s 7 & 8).
2. If the file is too large for email, contact AANP Accreditation at ceapps@aanp.org for an upload link. It is also acceptable to send the attachments in multiple emails; however, please number your emails to ensure receipt of all.
3. Instructions for payment will be emailed to the application contact person after a preliminary review (see Section 3.0 in this guide).
4. Applications that are mailed or faxed must be submitted in duplicate (2 complete copies).

2.0 AANP ACCREDITATION REVIEW PROCESS

1. Depending on whether the application is complete, **the applicant can expect the standard review process to take 15-20 business days**. Applications submitted greater than 90 calendar days prior to the activity's start date will be rejected.
2. Expedited Reviews:
 - a. **For online submissions:** A 10-14 business-day expedited review can be requested by completing the expedite request inquiry in the online application and completing the entire submission process, for an additional fee. AANP reviews all expedite requests on a case-by-case basis and requests are granted at the discretion of the Accreditation Department. Approval or denial for an expedited review will be made within 1 business day of the emailed request. This expedited review does not guarantee approval. If additional information/material is required during the full review, a longer review period may result
 - b. **For hard-copy submissions:** A 10-14 business-day expedited review can be requested in writing with a complete application and sent to CEApps@aanp.org for an additional fee. AANP reviews all expedite requests on a case-by-case basis and requests are granted at the discretion of the Accreditation Department. Approval or denial for an expedited review will be made within 1 business day of the emailed request. This expedited review does not guarantee approval. If additional information/material is required during the full review, a longer review period may result
3. If additional information/material is required during the full review, a longer review period may result. Refer to Section 8.0 in the *AANP Accreditation Policy Handbook* for other important information regarding the review process.

3.0 AANP ACCREDITATION APPLICATION FEES

For purpose of the AANP Accreditation fees, applicants are categorized by tiers:

Tier 1: AANP NP Organization member (NPO)

- NP groups that meet AANP-defined membership criteria
- This tier does not apply to individual AANP members
- For more information, please contact membership@aanp.org

Tier 2: Non-Profit 501(c) Organizations

- Non-profit organizations with a federal tax exemption
- Must supply proof of tax-exempt status (official IRS letter) or supply federal EIN with application

Tier 3: Health Professions

- Hospital systems/Private Medical Practices/Clinics
- Individual clinicians offering CE to peers in the workplace that do not qualify for other tiers
- Government agencies whose staff provide healthcare to the public
- Academic institutions/Professional Associations for the health professions

Tier 4: All Other Applicants

- All other applicants that do not qualify for Tiers 1-3, regardless of tax status
- Medical Education Companies
- Marketing/Communication firms

To utilize AANP NPO accreditation benefits, the membership must be current. **AANP membership benefits apply to the membership year and the membership may not be renewed early to restart the benefits.**

Applicants cannot use both the NPO and the 501(c) discount in combination. Breakdown of accreditation fees are listed on pages 5 and 6 of this handbook.

1. AANP reserves the right to change the fee schedule with a six (6) week notice. In addition to the basic review fee, added fees are assessed for expedited review, credit breakdown, repeat session and handling of hard-copy submissions.
2. For purposes of determining accreditation approval fees, the total contact hour credit requested is rounded up to the next full number.
3. If more than one provider is applying, ALL applicants must apply with the same category (e.g., ALL are AANP NPO members, or ALL are non-profit 501(c) organizations). If applicants are not in the same category, the highest fee scale must be used.
4. Once an application is submitted and a preliminary review is complete, the applicant will be notified via email with payment instructions. These instructions will include a link to pay via credit card at my.aanp.org (**preferred method**). Payment can also be made by overnight check.
5. **The non-refundable review fee must be received before a full review can begin.**
6. **If an Expedited Review is requested and approved, the review fee and expedite fee must be received prior to moving the application into full review.**
7. After the application has been reviewed and finalized, the applicant will receive a second email for payment of all fees for the approval, credit breakdown, repeat session and handling of hard-copy submissions.
8. An approved live activity may be presented up to 25 times based on the tier selected with the initial approved application. Refer to the 2019 Repeat Fee Schedule located in this Handbook.

4.0 AANP ACCREDITATION APPLICATION FORMS

For online submissions: All entries made in the online submission system will be downloaded and maintained in AANP's files. Required documents that are uploaded into the system by the user (i.e., certificate, evaluation, marketing) will also be downloaded and saved by AANP. URLs linking to online documents will not be accepted because accreditation applications must be maintained for six years, and online documentation cannot be guaranteed for that time-period. Online pages can be copied to a PDF or Word document for online submissions.

For Hard-Copy submissions: A document (electronic or hard copy) must be provided for all required information (see Section 1.0 in this application process). URLs linking to online documents will not be accepted because accreditation applications must be maintained for six years, and online documentation cannot be guaranteed for that time-period. Online pages can be printed to a PDF document and sent via email attachment or as a hard copy in the mail. This document includes the example forms for required information and the checklist for your convenience. For the required AANP forms, please download from the links on the [AANP Accreditation webpage](#).

2019 Accreditation Fees

Tier 1: AANP NP Organization Member		
<ul style="list-style-type: none"> NP groups that meet AANP-defined membership criteria This tier does not apply to <u>individual</u> AANP members For more information, visit the AANP website – Membership section 		
Accreditation Fees		
Fees below are based on the NPO exhausting all 16 CHs. The initial 16 contact hours (CHs) submitted are reviewed free during the membership year.		
Fee Description	Fees	
LIVE or ENDURING Application Review based on contact hour:	(CH = contact hour)	
Level 1	0.25 – 15.0 CH	\$150.00
Level 2	15.1 – 50.0 CH	\$200.00
Level 3	50.1 CH and above	\$250.00
LIVE Application Approval	\$10 per CH reviewed	
ENDURING Application Approval	\$1,000 plus \$10 per CH reviewed	
Expedited Application: \$200.00 Hard Copy Handling: \$50.00 Credit Breakdown Spreadsheet: \$25.00		
Repeat Presentation Fees		
<i>Note: Accredited activities may be repeated 1 time before below fees apply.</i>		
Repeat Level	Fee	
Level 1: Up to 10 presentations	\$300.00	
Level 2: Up to 15 presentations	\$400.00	
Level 3: Up to 25 presentations	\$700.00	

Tier 2: 501(c) Organizations		
<ul style="list-style-type: none"> Nonprofit organizations with a federal tax exemption. These organizations must supply proof of tax-exempt status with application 		
Accreditation Fees		
Fees below are based on the NPO exhausting all 16 CHs. The initial 16 contact hours (CHs) submitted are reviewed free during the membership year.		
Fee Description	Fees	
LIVE or ENDURING Application Review based on contact hour:	(CH = contact hour)	
Level 1	0.25 – 15.0 CH	\$200.00
Level 2	15.1 – 50.0 CH	\$300.00
Level 3	50.1 CH and above	\$400.00
LIVE Application Approval	\$15 per CH reviewed	
ENDURING Application Approval	\$1,500 plus \$15 per CH reviewed	
Expedited Application: \$200.00 Hard Copy Handling: \$50.00 Credit Breakdown Spreadsheet: \$25.00		
Repeat Presentation Fees		
<i>Note: Accredited activities may be repeated 1 time before below fees apply.</i>		
Repeat Level	Fee	
Level 1: Up to 10 presentations	\$550.00	
Level 2: Up to 15 presentations	\$800.00	
Level 3: Up to 25 presentations	\$1300.00	

Tier 3: Health Professions

- Hospital Systems/Private Practices/Clinics
- Individual Clinicians offering CE to colleagues/peers
- Government agencies whose staff provide care to the public
- Academic Institutions/Professional Associations for the health professions

Accreditation Fees

Fee Description	Fees	
LIVE or ENDURING Application Review based on contact hour:	(CH = contact hour)	
Level 1	0.25 – 15.0 CH	\$300.00
Level 2	15.1 – 50.0 CH	\$400.00
Level 3	50.1 CH and above	\$500.00
LIVE Application Approval	\$20 per CH reviewed	
ENDURING Application Approval	\$2,000 plus \$20 per CH reviewed	
Expedited Application: \$200.00 Hard Copy Handling: \$50.00 Credit Breakdown Spreadsheet: \$25.00		
Repeat Presentation Fees		
Note: Accredited activities may be repeated 1 time before below fees apply.		
Repeat Level	Fee	
Level 1: Up to 10 presentations	\$600.00	
Level 2: Up to 15 presentations	\$850.00	
Level 3: Up to 25 presentations	\$1400.00	

Tier 4: All Other Applicant Types

- All other applicants that do not fall in Tiers 1-3, regardless of tax status
- Medical Education Companies
- Marketing/Communication Firms

Accreditation Fees

Fee Description	Fees	
LIVE or ENDURING Application Review based on contact hour:	(CH = contact hour)	
Level 1	0.25 – 15.0 CH	\$400.00
Level 2	15.1 – 50.0 CH	\$500.00
Level 3	50.1 CH and above	\$600.00
LIVE Application Approval	\$30 per CH reviewed	
ENDURING Application Approval	\$3,000 plus \$30 per CH reviewed	
Expedited Application: \$500.00 Hard Copy Handling: \$50.00 Credit Breakdown Spreadsheet: \$25.00		
Repeat Presentation Fees		
Note: Accredited activities may be repeated 1 time before below fees apply.		
Repeat Level	Fee	
Level 1: Up to 10 presentations	\$800.00	
Level 2: Up to 15 presentations	\$1000.00	
Level 3: Up to 25 presentations	\$1600.00	

AANP SAMPLE Activity Evaluation

This is provided as a guide only. **The first 4 questions below (highlighted in yellow) are required.**
See AANP Policy section 5.0 item # 10 for requirements.

Activity Title: _____ Activity ID # _____
(Required for final report – will be provided by AANP)

Date: _____ Location: _____

Circle the number that best fits your evaluation of this activity:

4=strongly agree 3=agree 2=somewhat disagree 1=strongly disagree

1. As a result of my participation in this activity, I am better able to:

a. Type Objective 1 here	4	3	2	1
b. Type Objective 2 here	4	3	2	1
c. Type Objective 3 here	4	3	2	1

2. The following speaker(s) demonstrated experiential knowledge of the topic.

a. Type Speaker # 1 name here	4	3	2	1
b. Type Speaker # 2 name here	4	3	2	1
c. Type Speaker # 3 name here	4	3	2	1

3. The content provided a fair and balanced coverage of the topic.

4 3 2 1

4. The content was free of commercial bias.

4 3 2 1

5. Speaker(s) fully disclosed any conflict of interest and discussion of off-label usage of medication and/or medical devices at beginning of, or during the presentation

4 3 2 1

6. The individual objectives/content topics were cohesive with one another

4 3 2 1

Additional (optional) questions that you may want to add:

- What topics would you like to be offered in the future?
- This activity enhanced my current knowledge base.
- I would recommend this activity to my colleagues.
- What, if any, recommendations would you like to share for future improvement of this activity?

Marketing/Agenda Example

The NP Group of City, State

Invites you to attend: *Title of Activity*
Speaker: Nurse Practitioner, MSN, NP-C

Learning Objectives: At the end of the presentation, participants will be able to:

Objective 1

Objective 2

Objective 3

Date/Time:

Location:

RSVP to: NP Group Representative at: XXX-XXXX by Date

This activity is supported by an unrestricted educational grant from XXX Pharmaceuticals.

AANP Accreditation statement here*

*Prior to submission to AANP, use: This education activity will be submitted to the American Association of Nurse Practitioners for approval of up to _____ contact hours of accredited education.

*Once accepted for AANP review, use: This education activity is pending approval by the American Association of Nurse Practitioners of up to _____ contact hours of accredited education.

*Once approved by AANP, use: This activity is approved for XX contact hour(s) of continuing education (which includes XX hour(s) pharmacology) by the American Association of Nurse Practitioners. Activity ID# xxxxxxxx. This activity was planned in accordance with AANP Accreditation Standards and Policies.

Activity Certificate of Completion Requirements

The following page includes an example CE Certificate of completion. This is provided as an EXAMPLE only and you must submit the **actual** Certificate of Completion that will be used with application submission.

If your organization does not have a certificate template, you are welcome to use the sample provided but you must make the changes listed below. These items are highlighted on the form to assist you.

The following information is required on the certificate of completion:

1. The submitting sponsor name/organization name as the title
2. The submitting sponsor's logo, if applicable
3. Area to enter the name of the participant
4. Title of the educational activity as submitted to AANP
5. Location of the educational activity
6. Date of the educational activity
7. Name of the person coordinating the activity
8. Sponsor/provider name
9. The following statement:

This activity is approved for XXX contact hour(s) of continuing education (which includes XXX hour(s) pharmacology) by the American Association of Nurse Practitioners. Activity ID # XXXXXX.

This activity was planned in accordance with AANP Accreditation Standards and Policies

Submitting Sponsor's Name/Organization's Name Here

CE CERTIFICATE

This is to certify that:

Learner's Name

Has attended and successfully completed the educational activity:

ACTIVITY TITLE

**This activity is approved for XXX contact hour(s) of continuing education
(which includes XXX hour(s) of pharmacology) by the American Association of Nurse Practitioners.**

ACTIVITY ID # XXXXXXXX

This activity was planned in accordance with AANP Accreditation Standards and Policies.

Location:

Date:

Activity Coordinator:

Sponsor/Provider Name: