

Office of Professional and Public Education 900 Prides Crossing, Newark, DE 19713

Phone: 302-366-1400 Fax: 302-366-1354

Joint Sponsorship Agreement

The following agreement outlines the responsibilities between the Medical Society of Delaware, Office of Professional & Public Education (henceforth referred to as the **Accredited Provider**) and

Accredited Provider Responsibilities Prior to Approval

- Hold an initial consultation meeting
 - o Discuss the CME application process
 - o Determine services needed
 - Agree upon CME fee and determine if additional services will be needed
- Review the CME Application Form
- Have a role in the planning process
 - o MSD member as Activity Director
 - o Involvement as a planning committee member
 - Recommend methods for outcomes data collection/ measurements
- Provide assistance to non-accredited provider with application, as needed
- Review the CME application and documentation
- Review promotional materials and provide feedback
- Provide consultation to non-accredited provider regarding commercial support, if needed
- Submit to MSD EAS for approval

After approval

- Notify joint sponsor of approval
- Send CME fee invoice
- Post the activity on the MSD website
- Follow-up, as needed to collect additional documentation, if necessary
- Provide, as needed, sign-in sheets, CME certificates, and other documentation
- Assist with evaluation development
- Develop disclosure slide/handout

After the activity

- Receive post-activity documentation from joint sponsor
- Review final documentation for compliance issues
- Enter credits for physicians requesting CME credit
- Develop post-activity survey, if applicable
- Share post-activity survey results with joint sponsor
- Maintain CME credit information for 6 years
- Maintain CME application and documentation for 4 years

Non-accredited Provider(s) Responsibilities Prior to Approval

- Participate in initial consultation meeting
 - o Discuss application process
 - o Determine if additional services are desired
 - o Agree upon the CME fee
- Adhere to the MSD timeline for application and document submissions
- Complete and submit the CME Application and attachments to MSD including:
 - o Joint Sponsorship Agreement
 - o Preliminary Budget
 - Disclosure forms completed and signed by ALL planners, moderators, speakers, and content reviewers, and ROCI, if needed
 - o Commercial Support Letters of Agreement, if applicable
 - Preliminary promotional materials (flyer, brochure, website content, etc.) for approval prior to printing

After approval

- · Send additional documentation to complete the file
- Remit CME fee

During the activity

- Provide disclosure information to the audience prior to the beginning of the activity, even if there is nothing to disclose.
- Acknowledge commercial support to the audience prior to the beginning of the activity, if applicable
- Collect event attendance information
- Collect evaluation forms from attendees

After the activity

- Submit required documentation within 45 days
 - o Sign-in Sheets
 - o Attendee Evaluations
 - o CME Educational Outcomes Evaluation Summary
 - o Verification of disclosure
 - Verification of acknowledgment of commercial support, if applicable
 - o Final detailed budget
- Conduct post-activity survey, if applicable

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Joint Sponsorship Agreement Form

Activity Title:
Activity Date:
Name & Title of Person Completing Form:
Address:
Phone:
Fax:
E-mail:
Name of the Organization Requesting Joint Sponsorship:
las this Organization been a joint sponsor with MSD in the past?
Name of Activity Director:
MSD Member?
Name of Activity Coordinator:
Phone:
Fax:
E-mail:
The non-accredited provided will pay a standard fee for CME accreditation and joint sponsorship for the activity listed on this document. This includes the responsibilities listed above. Fees for additional services not covered on the list will be invoiced separately as agreed upon by both parties.
CME Accreditation and Joint Sponsorship Fee: By signing this form, the accredited provider and non-accredited provider(s) have agreed to enter into a joint sponsor relationship for the above CME activity, and carry out the respective responsibilities outlined above. The MSD reserves the right to withdraw joint sponsorship and CME credit if any of the above requirements are not fulfilled.
Accredited Provider (MSD): Non-Accredited Provider:
Print Name Print Name
Date
For MSD CME Office Only: Joint Sponsor is a Commercial Interest: Yes No

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