



FEDERATION OF  
STATE MEDICAL BOARDS

**Continuing Medical Education**  
Board-by-Board Overview

	CME Required	Number of Hours and Category/Content Requirement	Statute/Rule/Regulation
AL	YES*	25 hours per year; all must be AMA PRA Category 1. Effective January 1, 2018, all Alabama Controlled Substance Certificate (ACSC) holders must complete 2 AMA Category 1 CME hours every 2 years in the area of controlled substance prescribing practices, recognizing signs of the abuse or misuse of controlled substances, or controlled substance prescribing for chronic pain.	Ala. Admin. Code r. 540-x-14.02
AK	YES*	50 hours every 2 years; all must be AMA Category 1 or AOA Category 1 or 2.  Physician may not be exempted from more than 15 hours of continuing education in a five-year period.  For each licensee who holds a DEA number, at least 2 hours must be in pain management and opioid use and addiction.	Alaska Admin. Code tit. 12, § 40.200.  Alaska Statutes § 8-64-312.  Alaska Statutes § 8-36-070(a)
AZ-M	YES	40 hours every 2 years.  Effective April 2018, all health professionals with a valid DEA registration number who are renewing their licenses are required to complete a minimum of three (3) hours of opioid-related, substance use disorder-related or addiction-related CME each renewal cycle.	Ariz. Admin. Code R4-16-102.  A.R.S. 32-3248.02
AZ-O	YES	40 hours every 2 years; 24 must be AOA Category 1-A and no more than 16 hours are obtained annually by completing a CME classified as AMA Category 1 by the ACCME.  Effective April 2018, all health professionals with a valid DEA registration number who are renewing their licenses are required to complete a minimum of three (3) hours of opioid-related, substance use disorder-related or addiction-related CME each renewal cycle.	Ariz. Admin. Code R4-22-207.  A.R.S. 32-3248.02

AR	YES*	20 hours per year. Fifty percent of said hours shall be in subjects pertaining to physician's primary area of (current) practice and designated as Category 1.	Code Ark. R. 060.00.001 Reg. No. 17.
CA-M	YES*	<p>50 hours of approved CME during each biennial renewal cycle (every two years). If an initial license was issued for less than 13 months, only 25 hours must be completed. All must be Category 1 approved.</p> <p>All physicians (except pathologists and radiologists) are required to take, as a one-time requirement, 12 units on pain-management and the appropriate care and treatment of the terminally ill. Physicians must complete this requirement by their second license renewal date or within four years, whichever comes first.</p> <p>As an alternative, a physician and surgeon may complete a one-time continuing education course of 12 credit hours in the subjects of treatment and management of opiate-dependent patients, including 8 hours of training in buprenorphine treatment or other similar medicinal treatment for opioid use disorders. Those who choose to comply with this section shall complete the requirements of this section by his/her next license renewal date.</p> <p>General internists and family physicians which have over 25% of the patient population at least 65 years of age are required to complete at least 20 percent of their mandatory CME in geriatric medicine.</p>	<p>Cal. Code Reg. tit. 16, §1336.</p> <p>Cal. Bus. &amp; Prof. Code § Sec. 2190.5.</p> <p>Cal. Bus. &amp; Prof. Code § Sec. 2190.6</p> <p>Cal. Bus. &amp; Prof. Code § Sec. 2190.3.</p>
CA-O	YES*	<p>Effective January 1, 2018, licensees must complete 100 CME hours every 2 years; 40 hours must be AOA Category 1A or 1B.</p> <p>All physicians (except pathologists and radiologists) are required to take, as a one-time requirement, 12 units on pain-management and the appropriate care and treatment of the terminally ill. Physicians must complete this requirement by their second license renewal date or within four years, whichever comes first.</p> <p>As an alternative, a physician and surgeon may complete a one-time continuing education course of 12 credit hours in the subjects of treatment and management of opiate-dependent patients, including 8 hours of training in buprenorphine treatment or other similar medicinal treatment for opioid use disorders. Those who choose to comply with this section shall complete the requirements of this section by his/her next license renewal date.</p>	<p>16 Cal. Admin. Code § 1635.</p> <p>Cal. Bus. &amp; Prof. Code § Sec. 2190.5.</p> <p>Cal. Bus. &amp; Prof. Code § Sec. 2190.6.</p>

		General internists and family physicians which has over 25% of the patient population at least 65 years of age are required to complete at least 20 percent of their mandatory CME in the field of geriatric medicine.	Cal. Bus. & Prof. Code § Sec. 2190.3.
CO	YES*	Effective March 30, 2020, licensees must complete at least two hours of training per licensing cycle related to best practices for opioid prescribing, recognition of substance use disorders, referral of patients with substance use disorders for treatment, and use of the Electronic Prescription Drug Monitoring Program. Licensees who maintain a national board certification that requires equivalent substance use prevention training, or attests to the Board that the health care provider does not prescribe opioids are exempted.	Senate Bill 19-228
CT	YES*	50 contact hours within the preceding twenty-four month period in an area of the physician's practice. In the first renewal period for which CME is required (the second license renewal), and once every six years after that, a physician must take at least one contact hour of training or education in <u>each</u> of the following topics: infectious diseases, cultural competency, risk management, including, but not limited to, for registration periods beginning on or after October 1, 2015, prescribing controlled substances and pain management, sexual assault, domestic violence, and behavior health.  The commissioner may grant a waiver for not more than 10 contact hours of CME for physicians who 1) engage in activities related to the physician's service as a member of the Connecticut Medical Examining Board; 2) engages in activities related to the physician's service as a member of a medical hearing panel; or 3) assists the departments with its duties to boards and commissions as described in Sec. 19a-14.	Conn. Gen. Stat. § 20-10(b).
DE	YES*	40 hours every 2 years; all must be AMA or AOA Category 1.  Starting with 2017 renewals, a physician must complete 2 hours of continuing education (CE) biennially in the areas of controlled substance prescribing practices, treatment of chronic pain, or other topics related to prescribing controlled substances.  A physician who is renewing his registration for the first time and who has been licensed to practice medicine in Delaware for less than one year shall not be required to meet any continuing medical education requirements until the time of the next subsequent renewal of his registration.	24 Del. Admin. Code 1700-12.0.  24 Del. Admin. Code Uniform Controlled Substances Act Regulations 3.1.3.

DC	YES*	<p>50 hours every 2 years; all must be Category 1.</p> <p>As part of the 2018 renewal process, physicians, physician assistants and nurses must complete 3 hours in the subject of HIV/AIDS, two (2) hours in the subject of LGBTQ cultural competency, and at least one (1) course in the subject of pharmacology.</p>	<p>D.C. Mun. Regs. tit.17, § 4614.</p> <p>D.C. Official Code § 3–1205.10.</p>
FL-M	YES*	<p>First time license renewal: 40 hours; 1 hour must be Category 1 on HIV/AIDS, 2 hours must be Category 1 or 2 on prevention of medical errors.</p> <p>Second and subsequent renewals require 40 hours including 2 hours of Category 1 or 2 on prevention of medical errors.</p> <p>Every third renewal requires 40 hours, including two hours of Category 1 or 2 in prevention of medical errors and two hours of Category 1 or 2 in domestic violence.</p> <p>Each person registered with the DEA and authorized to prescribe controlled substances must complete 2 hours of AMA Category 1 or AOA Category 1-A on prescribing controlled substances for each biennial renewal.</p>	<p>Fla. Admin. Code. Ann. r. 64B8-13.005; 64B8-45.001, 64B8-45.006, 64B8-9.0131.</p> <p>Fla. Stat. Ann. 456.0301.</p>
FL-O	YES*	<p>First time renewal: 40 hours; five hours to include one hour in each of the following topics: 1) Risk Management, Florida Laws and Rules, and laws regarding the use and abuses of controlled substances; and two hours in Prevention of Medical Errors. Beginning in the 2010-2012 licensure biennium, five of the CME hours must include one hour in each of the following topics: 1) professional and medical ethics education, Florida laws and rules, and federal and state laws related to the prescribing of controlled substances; and two hours required in the Prevention of Medical Errors.</p> <p>Every third biennial renewal, licensee shall complete a two hour domestic violence court.</p> <p>Licensee must complete a one hour HIV/AIDS course no later than upon the first biennial renewal.</p> <p>Twenty (20) hours of general, AOA Category 1-A CE related to the practice of osteopathic medicine or under osteopathic auspices.</p> <p>Each person registered with the DEA and authorized to prescribe controlled substances must complete 2 hours of AMA Category 1 or AOA Category 1-A on</p>	<p>Fla. Admin. Code. Ann. r. 64B15-13.001.</p> <p>Fla. Stat. Ann. 456.0301.</p>

		prescribing controlled substances for each biennial renewal.	
GA	YES*	40 hours every 2 years; 25% must be Category 1. Effective January 1, 2018, each licensee with DEA registration and prescribes controlled substances must complete before their next renewal 3 hours of Category 1 CME on responsible opioid prescribing. The Board may accept certification or recertification by a member of ABMS, the AOA or the Royal College of Physicians and Surgeons of Canada in lieu of compliance with CME requirements during the cycle in which the certification or recertification is granted.	Ga. Comp. R. & Regs. r. 360-15-.01.
GU	YES	100 hours every 2 years; 25% must be Category 1.	25 GAR Prof. & Voc. Regs § 11101(g)(9)
HI	YES	40 Category 1 or 1A CME hours every 2 years; 20 Category 1 or 1A CME hours if initial license was received between 2/1/16 – 1/31/17. 20 hours are required for the initial renewal. Beginning with the 2020 renewal and thereafter, 40 hours will be required.	Haw. Admin. R. §16-85-33.
ID	YES	40 hours every 2 years; all must be Category 1. The Board may accept certification or recertification by a member of ABMS, the AOA or the Royal College of Physicians and Surgeons of Canada in lieu of compliance with CME requirements during the cycle in which the certification or recertification is granted.	Idaho Admin. Code r. 22.01.01-079.01. Idaho Admin. Code r. 22.01.01-079.01.
IL	YES	150 hours every 3 years; 60 hours must be Category 1.  Beginning in 2020, physicians must also complete three (3) CME hours on safe opioid prescribing practices offered or accredited by a professional association, state government agency, or federal agency. CME taken by physicians as a requirement for licensure in another state, or for purposes of board certification application or renewal, count towards this new requirement.  Additionally, physicians in Illinois are required to complete one (1) hour of continuing education specific to sexual harassment prevention.	Ill. Admin. Code tit.68., § 1285.110.
IN	YES*	Beginning July 1, 2019, 2 hours of CME addressing the topic of opioid prescribing and opioid abuse.	IC 35-48-3-3.5
IA	YES*	40 hours every 2 years; may include up to 20 hours of credit carried over from the previous license period. A licensee who regularly provides primary health care to children must complete two hours of training in child abuse identification in the previous five years. A primary care provider must complete two hours of training in dependent adult abuse identification and reporting in the previous five years.	Iowa Admin. Code r. 653-11.4(1).

		<p>The Board will accept as equivalent to 50 hours of Category 1 activity, participation in an approved resident training program or board certification or recertification by an ABMS or AOA specialty board within the licensing period.</p> <p>Iowa-licensed physicians who provide primary care must complete two hours of Category 1 training for chronic pain management and two hours of Category 1 training for end-of-life care every five years.</p>	<p>Iowa Admin. Code r. 653-11.2(2).</p> <p>Iowa Admin. Code r. 653-11.4(272C)</p>
KS	YES	<p>Licensee must during the 18-month period preceding the expiration date, verify completion of at least 50 credits of continuing education, at least 20 in Category 1 and the remaining credits in Category 2; during the 30-month period preceding the expiration date, verify completion of at least 100 credits of continuing education, at least 40 in Category 1 and the remaining credits in Category 2; or during the 42-month period preceding the expiration date, verify completion of at least 150 credits of continuing education, at least 60 in Category 1 and the remaining credits in Category 2.</p>	<p>Kan. Admin. Regs. § 100-15-5.</p>
KY	YES*	<p>60 hours every 3 years; 30 must be in Category 1; One-time domestic violence course for primary care physicians; a minimum of 2 hours must be acquired once every 10 years in HIV/AIDS education; For each three (3) year continuing education cycle beginning on January 1, 2015, at least four and one-half (4.5) hours of approved continuing education hours relating to the use of KASPER, pain management, addiction disorders, or a combination of two (2) or more of those subjects for licensees who are authorized to prescribe or dispense controlled substances within the Commonwealth.</p>	<p>201 KAR 9:310.</p>
LA	YES*	<p>20 hours per year; all must be Category 1. Effective January 1, 2018, all licensees with a CDS license are required to complete a one-time, 3 hour CME course on drug diversion training, best prescribing practices of controlled substances, and appropriate treatment for addiction. Additionally, licensees are required to complete a one-time board orientation course to acquaint new licensees with the Louisiana Medical Practice Act, the function of the Board and its rules, opportunities available in rural and professional health shortage areas, etc.</p>	<p>La. Admin. Code tit. 46, pt. XLV, §§ 435</p>
ME-M	YES*	<p>100 hours every 2 years; 40 must be in Category 1. Physicians who prescribe controlled substances must complete 3 hours of continuing medical education on the prescription of opioid medication every 2 years.</p>	<p>Code Me. R 02-373 Ch.1 § 11</p>
ME-O	YES*	<p>100 hours every 2 years; 40 must be osteopathic medical education; primary care physicians: all must be AOA Category 1; osteopathic specialists: all must be AOA, ACGME, or AMA Category 1. Physicians</p>	<p>Code Me. R. 02-383 Ch. 14 §§ 1-2.</p>

		who prescribe controlled substances must complete 3 hours of continuing medical education on the prescription of opioid medication every 2 years.	
MD	YES*	50 hours every 2 years; all must be Category 1; 1 hour must be on opioid prescribing.	COMAR 10.32.01.10
MA	YES*	<p>Effective January 1, 2018, the Board's CME Pilot Program requires licensees to obtain no fewer than 50 continuing medical education credits. Credits shall be earned from an organization accredited by the ACCME, AOA, AAFP or a state medical society recognized by the ACCME or from material used for point of care.</p> <p>The following content-specific CME must be completed: 2 credits in end-of-life issues, as a one-time requirement; 3 credits in opioid education and pain management if the physician prescribes controlled substances; 10 credits in risk management, which may be Category 1 or 2; 2 credits for studying each chapter of the Board's regulations and these credits may applied to the risk management requirement; 3 credits in electronic health records as required under state law; the child abuse and neglect training required under state law; and the domestic violence and sexual violence training required under state law. Licensees may also claim 1 credit for every hour of reading a journal or a point of care resource accessed in the process of delivering patient care or updating clinical knowledge.</p> <p>The Board has expanded experiences that will support Risk Management CMEs to include many topics dealing with physician burnout and wellness.</p>	<p>Board of Registration in Medicine, Policy 2017-05, "A CME Pilot Program."</p> <p>Board of Registration in Medicine, Policy 2019-06, "Risk Management CME Credits and Physician Burnout."</p>
MI-M	YES*	150 hours every 3 years; 75 must be Category 1; 1 hour must be earned in the area of medical ethics. Effective December 6, 2017, a minimum of 3 hours of continuing education must be earned in the area of pain and symptom management.	Mich. Admin. Code r. 338.2371-.2382
MI-O	YES*	150 hours every 3 years; 60 must be Category 1. Effective December 6, 2017, a minimum of 3 hours of continuing education must be earned in the area of pain and symptom management.	Mich. Admin. Code r. 338.91-.99.
MN	YES	75 hours every 3 years; all must be Category 1.	Minnesota Rules, part 5605.0100-.1200.
MS	YES*	40 hours every 2 years; all must be Category 1. For licenses with DEA certificates, 5 hours must be related to prescribing medications with an emphasis on controlled substances.	Code Miss. Rules 50 013 001.
MO	YES	50 hours every 2 years; all must be AMA Category 1 or AOA Category 1A or 2A; or 40 hours Category 1 or AOA Category 1A with proof of post-testing.	Mo. Code Regs. Ann. Tit. 20, 2150-2.125.
MT	NO	--	--

NE	YES*	50 hours every 2 years; all must be Category 1. Effective October 1, 2018, physicians who prescribe controlled substances must complete at least three (3) hours of CME biennially regarding prescribing opioids, of which one half hour shall cover PDMPs.	Neb. Admin. R. & Regs. Tit. 172, Ch. 88, § 016.
NV-M	YES*	40 hours every 2 years; all must be Category 1. 20 hours must be in scope of practice of specialty; 2 must be in medical ethics, pain management, or addiction care; 2 must be in misuse and abuse of controlled substances, prescribing of opioids, or addiction; 16 may be in other medical education, including 2 hours every 4 years on suicide detection, intervention, and prevention. New licensees must complete 4 hours in WMD/bioterrorism within the first 2 years of licensure.  Applicants for issuance or renewal of a license must attest to knowledge of and compliance with the guidelines of the Centers for Disease Control and Prevention concerning the prevention of transmission of infectious agents through safe and appropriate injection practices.	Nev. Rev. Stat. 630.253; Nev. Admin. Code ch. 630, s. 153, 154, 155.
NV-O	YES*	35 hours every year; 10 must be Category 1A. Licensees must complete 2 hours every 4 years on suicide detection, intervention, and prevention.  As part of the biennial continuing education requirements for an osteopathic physician, the Board requires at least 2 hours of continuing education credits in ethics, pain management, or addiction care. The Board will add this requirement on every odd year renewal application.	Nev. Admin. Code § 633.250.
NH	YES*	100 hours of approved continuing medical education requirements every 2 years, 40 hours of which shall be in Category I, and no more than 60 credit hours of which shall be in Category II. Three (3) hours shall be on pain management.	N.H. Rev. Stat. § 329:16-g; N.H. Admin. R. Ann. Med 402.01.
NJ	YES*	100 hours every 2 years; 40 must be Category I; 60 hours can be Category II; 6 hours Cultural competence (for physicians licensed prior to 3/2/2005, the cultural competence hours are in addition to 100 hour requirement).  Two (2) of the required Category 1 Credits must be in End-of-Life-Care.  For 2019 renewals and every renewal thereafter, one (1) of the required Category 1 Credits needs to be in topics concerning prescription opioid drugs, including responsible prescribing practices, alternatives to opioids for managing and treating pain, and the risks and signs of opioid abuse, addiction and diversion.	N.J. Stat. Ann. § 45:9-7.1; N.J. Admin. Code 13:35-6.15.  N.J. P.L. 2011, c.145 (C45: 9-7.7)  N.J. P.L. 2017, c. 28.

		For newly licensed physicians, the Board requires attendance at an orientation program; no CME credit.	
NM-M	YES*	75 hours every 3 years; all must be Category 1.  All NM medical board physician licensees who hold a federal drug enforcement administration registration and license to prescribe opioids shall be required to complete and submit five (5) CME hours. All new licensees holding a federal drug enforcement administration registration and license shall complete five (5) CME hours in pain management during the first year of licensure.	N.M. Admin. Code § 16.10.4.
NM-O	YES	75 hours every 3 years; all must be Category 1.	N.M. Admin. Code tit. 16, § 17.4.
NY	YES*	2 hours on identifying and reporting child abuse and maltreatment. Licensees must also complete coursework or training on infection control and barrier precautions once every four years.  Prescribers who have a DEA registration number to prescribe controlled substances, as well as medical residents who prescribe controlled substances under a facility DEA registration number, must complete at least three (3) hours of course work or training in pain management, palliative care, and addiction.	N.Y. Comp. Codes, R. & Regs. tit. 8, §§ 59.12, 59.13.
NC	YES*	60 hours every 3 years; all must be Category 1 relevant to the physician's current or intended specialty or area of practice.  Every physician who prescribes controlled substances shall complete at least three hours of CME, from the required 60 hours of Category 1 CME, that is designed specifically to address controlled substance prescribing practices. The controlled substance prescribing CME shall include instruction on controlled substance prescribing practices, recognizing signs of the abuse or misuse of controlled substances, and controlled substance prescribing for chronic pain management.	N.C. Admin. Code tit. 21, r. 32R.0101.
ND	YES	60 hours every 3 years; all must be Category 1.	N.D. Admin. Code 50-04-01-01.
NMI (Northern Mariana Islands)	YES	25 hours annually; all must be Category 1.	Public Law No. 7-48
OH	YES*	100 hours every 2 years; 40 hours must be Category 1.  Physician owner/operators of pain management clinics must complete at least twenty hours of category I continuing medical education in pain medicine every two years, to include one or more courses addressing the potential for addiction. The courses completed in compliance with this rule shall	Ohio Rev. Code Ann. § 4731.281, 282, 283; Ohio Admin. Code §§ 4731-10-01 through 4731-10-15; Ohio Admin. Code § 4731-29-01.

		be accepted toward meeting the category I requirement for certificate of registration renewal for the physician.	
OK-M	YES*	60 hours every 3 years; all must be Category 1. Effective November 1, 2018, each licensee must complete not less than one (1) hour of education in pain management or one (1) hour of education in opioid use or addiction each year preceding an application for renewal of a license, unless the licensee has demonstrated to the satisfaction of the Board that the licensee does not currently hold a valid federal DEA registration number.	Okla. Admin. Code § 435:10-15-1.
OK-O	YES*	16 hours every year; all must be AOA Category 1A or 1B; 1 hour every year must be on prescribing, dispensing, and administering controlled substances.	Okla. Admin. Code § 435:10-3-8.
OR	YES*	60 hours every 2 years, or 30 hours if licensed during the second year of the biennium. All AMA Category 1; AOA Category 1A or 2A.  All licenses of the Oregon Medical Board (except licensee holding Lapsed, Limited, Telemedicine, Teleradiology, or Telemonitoring licenses) must complete a 1 hour pain management course; a minimum of 6 CME credit hours in the subject of pain management and/or the treatment of terminally ill and dying patients. Any combination of CME coursework focusing on pain management and/or treatment of terminally ill and dying patients may be used to fulfill this requirement.  Participation in cultural competency, suicide risk assessment, and Alzheimer's education may be counted toward the mandatory continuing education required of all Board licensees.	Or. Admin. R. § 847-008-0070  Or. Admin. R. § 847-008-0075(1).  Or. Admin. R. § 847-008-0070.
PA-M	YES*	100 hours every 2 years; 20 hours must be Category 1; 12 hours of patient safety or risk management; 2 hours must be in child abuse recognition and reporting requirements; remaining hours either Category 1 or 2.  2 hours of CME is required on pain management or identification of addiction, as well as 2 hours on practices of prescribing or dispensing opioids within 12 months of initial licensure. Subsequent license renewals require 2 hours of CME on pain management, identification of addiction, or prescribing practices.	Pa. Code tit. 49, § 16.19.  35 P. S. § 872.3
PA-O	YES*	100 hours every 2 years; 20 hours must be Category 1; 12 hours of patient safety or risk management; 2 hours must be in child abuse recognition and reporting requirements; remaining hours either Category 1 or 2.	Pa. Code tit. 49, § 25.271.

		2 hours of CME is required on pain management or identification of addiction, as well as 2 hours on practices of prescribing or dispensing opioids within 12 months of initial licensure. Subsequent license renewals require 2 hours of CME on pain management, identification of addiction, or prescribing practices.	35 P. S. § 872.3
PR	YES*	60 hours every 3 years; 40 must be Category 1	--
RI	YES*	40 hours every 2 years; all must be AMA Category 1 or AOA Category 1A; 2 hours on universal precautions, infection control, modes of transmission, bioterrorism, end of life education, palliative care, OSHA, ethics, or pain management.	Code R.I. R. r. 14.140.031(6).
SC	YES*	40 hours every 2 years; all must be Category 1; at least 30 hours of which must be related directly to the licensee's practice area and at least two (2) hours must be related to approved procedures for prescribing and monitoring schedules II-IV controlled substances.	SC Code § 40-47-40; S.C. Code Regs. 81-95.
SD	NO	--	--
TN-M	YES*	40 hours every 2 years; all must be Category 1; at least 2 of 40 required hours on controlled substance prescribing, which must include instruction in the Department's treatment guidelines on opioids, benzodiazepines, barbiturates, and carisoprodol and may include topics such as medicine addiction, risk management tools, and other topics approved by the Board; providers of intractable pain treatment must have specialized CME in pain management.	Tenn. Comp. R. & Regs. 0880-02-.19. Tenn. Comp. R. & Regs. 0880-02-.14.
TN-O	YES*	40 hours every 2 years; all must be AOA 1A or 2A; at least 2 of the 40 hours shall be a course(s) designated specifically to address prescribing practices.	Tenn. Comp. R. & Regs. 1050-02-.12.
TX	YES*	48 hours every 2 years; 24 must be AMA Category 1 or AOA Category 1A; 2 of those 24 hours must be on medical ethics and/or professional responsibility including, but not limited, to courses in risk management, domestic abuse or child abuse; a human trafficking prevention course must be completed as part of the medical ethics and/or professional responsibility requirement; the remaining 24 hours may be composed of informal self-study, attendance at hospital lectures, grand rounds, or case conferences not approved for formal CME, and shall be recorded in a manner that can be easily transmitted to the board upon request. For licensees with direct patient care practice, no less than 2 hours of CME regarding safe and effective pain management related to the prescription of opioids and other controlled substances must be completed in each of the first two renewal periods following initial licensure, and every eight years thereafter.	TX Occupations Code §§ 156.051 through 156.057; Tex. Admin. Code tit. 22, § 166.2.  Tex. Admin. Code tit 22 § 195.2

		For licensees practicing in pain management clinics, licensees must complete 10 hours of CME annually in the area of pain management.	
UT-M	YES*	40 hours every 2 years; 34 must be Category 1; 6 hours maximum may come from the Division of Occupational & Professional Licensing.  A controlled substance prescriber shall complete at least 3.5 hours of CE in one or more controlled substance prescribing classes.	Utah Admin. Code r. 156-67-304.  Utah Code 58-37-6.5.
UT-O	YES	40 hours every 2 years; 34 must be Category 1; 6 hours maximum may come from the Division of Occupational & Professional Licensing.  A controlled substance prescriber shall complete at least 3.5 hours of CE in one or more controlled substance prescribing classes.	Utah Admin. Code r. 156-68-304.  Utah Code 58-37-6.5.
VT-M	YES*	30 hours every 2 years; 1 hour must be on hospice, palliative care, or pain management services. For each licensee who holds a DEA number, at least 2 CME hours must be on safe and effective prescribing of controlled substances and pain management.	12-5 Vt. Code R. § 200.
VT-O	YES*	30 hours every 2 years; 40% must be osteopathic medical education.	Code Vt. R. 04 030 220
VI	YES	25 hours every year; all must be Category 1.	VI Code 27 § 38d.
VA	YES*	60 hours every 2 years; 30 must be Category 1, of which 2 hours must be in pain management, proper prescribing of controlled substances, and the diagnosis and management of addiction.	Va. Admin. Code 85-20-235.
WA-M	YES*	200 hours every 4 years. Every physician must take a one-time, six (6) hour CE course in suicide assessment, treatment, and management.  Effective 1/1/19, a physician licensed to prescribe opioids shall complete a one-time CE requirement regarding best practices in the prescribing of opioids or the opioid prescribing rules in this chapter. The CE must be at least one hour in length.	WAC 246-919-421-480, 246-919-435.  WAC 246-919-875.
WA-O	YES*	150 hours every 3 years; 60 must be Category 1. Every osteopathic physician must take a one-time, six (6) hour CE course in suicide assessment, treatment, and management.  Effective 1/1/19, an osteopathic physician licensed to prescribe opioids shall complete a one-time CE requirement regarding best practices in the prescribing of opioids and the current opioid prescribing rules in this chapter. The CE must be at least one hour in length.	WAC 246-853-070, 246-853-080, 246-853-065.  WAC 246-853-685.

WV-M	YES*	<p>50 hours every 2 years; all must be Category 1; 30 hours must be related to the physician's area of specialty.</p> <p>A physician may earn CME by teaching medical education courses or lecture to medical students, residents, or licensed physicians, or serve as a preceptor to medical students or residents: Provided, that a physician may not count more than twenty (20) hours in this category toward the required fifty (50) hours of continuing medical education</p> <p>The Board will accept as equivalent to 47 hours of Category 1 activity, participation in a board certification or recertification by an ABMS specialty board within the licensing period.</p> <p>Beginning May 1, 2014, every physician as a prerequisite to license renewal shall complete a minimum of three (3) hours of drug diversion training and best practice prescribing of controlled substances training during the previous reporting period, which three (3) such hours may be provided only by a Board-approved program.</p>	W. Va. R. tit. 11, § 6-3; W. Va. Code, § 30-3-12.
WV-O	YES*	<p>32 hours every 2 years; 50% must be AOA Category 1A or 1B.</p> <p>Beginning May 1, 2014, every physician as a prerequisite to license renewal shall complete a minimum of three (3) hours of drug diversion training and best practice prescribing of controlled substances training during the previous reporting period, which three (3) such hours may be provided only by a Board-approved program.</p> <p>A licensee participating in a clinical residency program for more than nine months out of the most recent licensing period may substitute a verification of participation in lieu of documentation of the CME hours specified.</p>	W. Va. Code R. § 24-1-15; W. Va. Code, § 30-1-7a; W. Va. Code R. § 24-1-15.2.g.
WI	YES*	30 hours every 2 years; all must be Category 1; 2 must be on the opioid prescribing guidelines issued by the Board.	Wis. Admin. Code MED § 13.02.
WY	YES	60 hours every 3 years; all must be Category 1 or 2.	WY Rules & Regulations AI BM Ch.1 s5

**\*Jurisdiction requires content-specific CME.**

*For informational purposes only: This document is not intended as a comprehensive statement of the law on this topic, nor to be relied upon as authoritative.*

*Non-cited laws, regulation, and/or policy could impact analysis on a case-by-case or state-by-state basis. All information*

*should be verified independently.*