

Mandated CME Requirements Shift Under TMB Rules Revamp

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A recent reorganization of Texas Medical Board (TMB) rules has removed certain universal CME obligations. The removal of universal CME requirements could result in a lighter load for physicians but may make it more challenging to determine what is required and when.

As the Texas Medical Association continues to reach out to TMB for further clarification, here's a look at some of the impact on mandated CME requirements in two areas – opioid prescribing and identification and assistance of trafficked persons.

Who must take this CME?

No longer do all physicians need to take CME on opioids and trafficked persons. TMB's reorganization removed rules that required the CME for all physicians. Now, only the state law requirements remain, which require physicians with a direct patient care practice to complete CME in these two areas.

How many hours of CME are required and when?

For both the CME on opioids and trafficked persons, the hours required may depend on when a physician submitted their first application for renewal in relation to the laws' effective dates: The requirement for the opioid CME went into effect Jan. 1, 2021, and the requirement for CME on trafficked persons went into effect Sept. 1, 2023.

For opioids, a physician whose first license renewal falls after the statute's effective date must take at least four hours of opioid CME in each of the first two renewal periods following initial licensure. Two of those hours must be completed by or before the first anniversary of the date of licensure.

For example: If a physician gets licensed on May 1, 2025, with a renewal date of May 1, 2027, that first round of opioid CME (of at least two hours) would need to be completed by May 1, 2026. The physician would need to complete an additional two hours between May 1, 2027, and May 1, 2029, to fulfill the second renewal period requirement. From that point on, taking two hours of opioid CME once every eight years (or every four license renewal periods) would satisfy TMB requirements.

For the CME on trafficked persons, a physician who submits their first application for renewal after Sep. 1, 2023, must complete at least one hour of CME in the first renewal period (i.e., the first two years the physician has a license to practice medicine in the state). If the TMB approves more than one course, then afterward this CME must be taken every six years (or every third license renewal period).

However, for both the CME on opioids and trafficked persons, it is not clear that the requirements for subsequent CME – every eight years for opioids and every six years for trafficked persons – apply to a physician whose first application for license renewal occurred before the requirements' effective dates: Jan. 1, 2021, for opioids, and Sept. 1, 2023, for trafficked persons. Those requirements are tied to the renewal period following an initial registration permit. A physician who renewed prior to the requirements' effective dates would be unable to satisfy that criteria and presumably would not be subject to the requirement.

TMB has not addressed its interpretation of this language in its rulemaking or other guidance. As such, physicians with questions about the applicability of these requirements to their CME compliance are advised to inquire with TMB and their own retained counsel.

Is there a separate federal CME requirement for opioids?

The state mandate relating to opioids is separate from the one-time federal mandate for Drug Enforcement Administration (DEA) licensing. That mandate calls for eight hours of training on the recognition and treatment of substance use disorders unless other criteria are previously met. Once the eight hours of training is completed, it does not need to be repeated for future DEA registration renewals.

Do CME exceptions apply to these requirements?

There are exceptions to CME requirements, including licensed physicians in residency training, recently completed residency training, or specific board certification processes.

For these exceptions, the prior TMB rules indicated that meeting the exceptions would still require physicians to complete the CME on opioids and the trafficked persons. The current rules do not address the interaction between the exceptions and the CME requirements relating to opioids and trafficked persons.

What opioid CME is available for physicians right now?

TMA offers a slate of opioid CME courses that satisfy both state and federal requirements, and some but not all education satisfying the Texas mandate can also apply toward DEA requirements.

In the [TMA Education Center](#), courses with the “Opioid” designation meet state requirements, and those with the “DEA SUD” designation meet the federal mandate. These courses are free to members courtesy of TMA Insurance Trust.

The U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration provides more details about DEA-compliant courses [on its website](#).

What CME on the identification and assistance of trafficked persons is available for physicians right now?

As of this writing, a course on the identification and assistance of trafficked persons may be approved by either TMB or the Texas Health and Human Services Commission (HHSC). HHSC has several [approved courses](#) that can meet this requirement, including a free course offered [via the HHSC website](#): HEART, or “Hearing, Evaluating, Activating, Resourcing and Training.”

However, after Sept. 1, 2025, it is not clear whether a course approved by HHSC will meet the requirements, as a statutory change shifts the responsibility to TMB. TMA continues to investigate the legislative shift of responsibility for the approval of courses and the impact of the change on this CME requirement.

Continue to read *Texas Medicine Today* for updates on this and other portions of the TMB rules reorganization.

Legal disclaimer: Taking a given CME course does not guarantee a physician has fully met the federal and state-mandated training requirements. Physicians are solely responsible for ensuring any mandated training requirements are completed.

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