FEDERATION OF STATE MEDICAL BOARDS

Continuing Medical Education

Board-by-Board Overview

63/67 boards require substantial (≥ 15 hours per year) CME.
55/67 boards require content-specific CME.
28/67 boards allow CME equivalents.

Note: Under the federal *Medication Access and Training Expansion (MATE) Act*, beginning with DEA initial registrations or renewals starting June 27, 2023, all DEA-registered practitioners (with the exception of DVM-only license holders) are required 8 hours on treating and managing patients with opioid or other substance use disorders, including the appropriate clinical use of all FDA-approved drugs for the treatment of a substance use disorder, one-time only.

SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
AL	YES	YES	**25 hours per year;** all must be AMA PRA Category 1. (ALBME Guidance) 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. Effective January 1, 2025, each new applicant issued a license to practice medicine or osteopathy shall complete a Board-designated course in the area of professional boundaries within twelve (12) months of the license issue date. Effective January 1, 2025, all actively licensed physicians shall complete a Board-designated course in the area of professional boundaries by December 31, 2025. • The sole exemption from these requirements is for physicians licensed pursuant to Ala. Code §34-24-75 ("limited licensee") who are enrolled in a residency training program or a clinical fellowship. (Ala. Admin. Code r. 540-x-14.02) The Alabama State Board of Medical Examiners does not allow the rollover of credits. The ALBME also accepts the "successful completion of an ABMS board certification or maintenance of certification (MoC) process (credit accrues to the year in which board certification or MoC is completed; date-specific certificates are required)" as equivalent credits, among other alternative routes. Please see ALBME Guidance for more information.
AK	YES	YES	**50 hours every 2 years**; all must be AMA Category 1 or AOA Category 1 or 2. (Alaska Admin. Code tit. 12, § 40.200) Physician may not be exempted from more than 15 hours of continuing education in a five-year period. (Alaska Stat. § 8-64-312) For each licensee who holds a DEA number, at least 2 hours must be in pain management and opioid use and addiction. (Alaska Stat. § 8-36-070(a)(7))

Last Updated: August 2026

SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
			The Board accepts "initial certification or recertification during the concluding licensing period by a specialty board recognized by the American Medical Association or the American Osteopathic Association" as equivalent credits, among other routes. Please see Alaska Admin. Code tit. 12, § 40.210 for more information.
AZ-M	YES	NO	**40 hours every 2 years**. The board does not allow for rollover credits. 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	NO	**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	NO	**20 hours per year.** 50 percent of which must be in subjects pertaining to physician's primary area of (current) practice and designated as Category 1. One of the 20 annual credits must be in the area prescribing opioids and/or benzodiazepines. There is a one-time requirement of 3 hours in prescribing education within the first 2 years of licensure. (AR Admin Rules 060.00.18-001 & ASMB Guidance)
CA-M	YES	YES	**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. (Cal. Code Reg. tit. 16, § 1336 & CMB Guidance) 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. (Cal. Bus. & Prof. Code § Sec. 2190.5) 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. (Cal. Bus. & Prof. Code § Sec. 2190.6) General internists and family physicians who have over 25 percent 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. "Any physician who takes and passes a certifying or recertifying examination administered by a recognized specialty board shall be granted credit for four consecutive years (100 hours) of continuing education credit for relicensure purposes. Such credit may be applied retroactively or prospectively." (16 CA ADC § 1337)
CA-O	YES	NO	Effective January 1, 2024, licensees must complete **50 CME hours every 2 years;** 20 hours must be AOA Category 1A or 1B. (OPSC Guidance) 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. (Cal. Bus. & Prof. Code § Sec. 2190.5) Licensees must also complete a course on risks of addiction associated with the use of Schedule II drugs every renewal cycle. (OBMC Guidelines)

SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
			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. (Cal. Bus. & Prof. Code § Sec. 2190.6) General internists and family physicians, who has over 25 percent 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	NO	Effective January 1, 2026, licensees must complete **30 hours of CME per 24-month renewal period.** To qualify for CME credit hours, a program must be accredited by the Colorado Medical Society, AMA, or ACCME, and qualify for AMA Category 1 credit; qualify for prescribed credit from AAFP; be an approved program of ACOG; or be a program required in order to maintain national board certification, not including a program of self-study or a program self-claimed or self-documented. The Board is also authorized to audit up to 5 percent of physician renewals annually and to require the physician submit proof of CME completion, failure to comply with CME regulations or with an audit without reasonable cause can result in an unprofessional conduct charge. (HB 1153 (2024)) 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 attest that they do not prescribe opioids, are exempted. (SB 228 (2019))
CT	YES	NO	**50 contact hours within the last two years** 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 each of the following topics: infectious disease, risk management, and for registration periods beginning on or after October 1, 2022, such risk management CME may also include endometriosis, sexual assault, domestic violence, cultural competency, and behavior health. Behavioral health continuing medical education may include, but not be limited to, at least two contact hours of training or education during the first renewal period in which continuing education is required and not less than once every six years thereafter, on (i) suicide prevention, or (ii) diagnosing and treating cognitive conditions or mental health conditions. 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) & CT Dept. of Public Health Guidance)
DE	YES	NO	**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. (24 Del. Admin. Code 1700-12.0, 24 Del. Admin. Code Uniform Controlled Substances Act Regulations 3.1.3, & Board of Medical Licensure and Discipline Guidance)
DC	YES	NO	**50 hours every 2 years**; all must be Category 1. Effective January 1, 2021, 10 percent (five hours) of the total CME requirement must be completed in topics identified by the Director of the Dept. of Health as public health priorities. (DOH Guidance) Physicians, physician assistants and nurses must complete two (2) hours in the subject of LGBTQ cultural competency and at least one (1) course in pharmacology. (D.C. Mun. Regs. tit.17, § 4607.4)

SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
FL-M	YES	NO	**38 hours every 2 years** (FL BOM Guidance) *not counting* the 2 hour medical errors course (see below) 1 hour must be Category 1 on HIV/AIDS, 2 hours must be Category 1 or 2 on prevention of medical errors (incl. second and subsequent renewals) Every third renewal requires two hours of Category 1 or 2 in domestic violence. 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 (Fla. Admin. Code. Ann. r. 64B8-13.005; 64B8-9.0131, Fla. Stat. Ann. 456.0301). Effective July 1, 2026, this two hour course must also include pain management for patients with sickle cell disease (2026 SB 844).
FL-O	YES	NO	**40 hours every 2 years**; five hours to include one hour in each of the following topics: risk management, Florida Laws and Rules, controlled substances; and two hours in prevention of medical errors. (FL Osteopathic Medical Association) Every third biennial renewal, licensees shall complete a two-hour domestic violence court. Licensees must complete a one-hour HIV/AIDS course no later than upon the first biennial renewal. (Fla. Admin. Code. Ann. r. 64B15-13.001) Twenty (20) hours of general, AOA Category 1-A CE related to the practice of osteopathic medicine or under osteopathic auspices. 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 (Fla. Stat. Ann. 456.0301). Effective July 1, 2026, this two hour course must also include pain management for patients with sickle cell disease (2026 SB 844).
GA	YES	YES	**40 hours every 2 years.** (GCMB Guidance) The Board accepts the following as meeting its requirement for Board approval: A.M.A. (American Medical Association) Category 1 credit; A.O.A. (American Osteopathic Association) Category 1 credit; A.A.F.P. (American Academy of Family Physicians) Prescribed credit; A.C.O.G. (American College of Obstetricians and Gynecologists) Cognates, Category 1; and A.C.E.P. (American College of Emergency Physicians) 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. Physicians who do not hold a certification in pain management or palliative medicine, and whose opioid pain management patients comprise 50% or more of the patient population must demonstrate competence by biennially obtaining 20 hours of CME pertaining to pain management or palliative medicine. In meeting the continuing education requirements, the Board will waive one hour CME requirement for physicians for each four hours of documented work by the physician in uncompensated health care services… waive up to eight CME hours per biennium for peer reviews of Board investigative cases for the Board. (Ga. Comp. R. & Regs. 360-15-.01 & GCMB Guidance) Effective January 1, 2022, every physician and allied health care professional that is licensed by GCMB must complete a one-time, two-hour sexual misconduct and professional boundaries course before their next renewal. (GA HB 458 (2021))
GU	YES	N/A	**100 hours every 2 years**; 25 percent must be Category 1 (25 GAR Prof. & Voc. Regs § 11101(g)(9))
HI	YES	NO	**40 Category every 2 years,** all must be 1 or 1A CME hours (Haw. Admin. R. §16-85-33)
ID	YES	YES	**40 hours every 2 years**; all must be Category 1. (DOPL Guidance; Idaho Admin. Code r. 22.01.01-079.01) 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. 22.01.01-079.03)
IL	YES	NO	**150 hours every 3 years**; 60 hours must be Category 1. (IL SMS Guidance; Ill. Admin. Code tit.68., § 1285.110)

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SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
			During each three-year cycle, physicians must complete one (1) CME hour on sexual harassment prevention, and one (1) CME hour on implicit bias. Every six years, physicians must complete one (1) CME hour on each of the following topics: opioids, cultural competency, and dementia. Physicians licensed for the first time during the 2023 – 2026 licensure period must complete the dementia training once prior to renewal in 2026, and thereafter have six years to complete the training again (Illinois State Medical Society Requirements) CME used by physicians as a requirement for licensure in another state, or for purposes of board certification application or renewal, count towards the CME requirement. Additionally, physicians in Illinois are required to complete one hour of continuing education specific to sexual harassment prevention. (IDFPR Guidance (Archived Link) & Illinois State Medical Society Guidance) Beginning January 1, 2023, a health care professional who has continuing education requirements must complete at least a one-hour course in training on the diagnosis, treatment, and care of individuals with Alzheimer's disease and other dementias per renewal period. This training shall include, but not be limited to, assessment and diagnosis, effective communication strategies, and management and care planning. This requirement shall only apply to health care professionals who provide health care services to, and have direct patient interactions with, adult populations age 26 or older in the practice of their profession. (20 ILCS 2105/2105-365) Beginning January 1, 2023, a health care professional who has continuing education requirements must complete at least a one-hour course in training on implicit bias awareness per renewal period. (20 ILCS 2105/2105-15.7) Beginning July 1, 2026, health care professionals who provide maternal health care services to complete a one hour implicit bias training course, including education on maternal health risks for marginalized racial or ethnic groups with higher maternal mortality rates. (2025 HB 2517) Beginning July 1, 2026, the Medical Board is required to accept simulation training by an approved sponsor as CME. (2025 HB 3850)
IN	NO	NO	Indiana **does not have a set number of required CME credit hours** for physician license renewal. (AMA Ed Hub)
IA	YES	YES	**40 hours every 2 years**; may include up to 20 hours of credit carried over from the previous license period. 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 (Iowa DIAL Guidance & Iowa Admin. Code r. 653-11.2(2)) Licensees who provide primary care to children must complete two (2) hours of CME related to child abuse, and those who provide primary care to adults must complete two (2) hours of CME related to adult abuse every three years. Licensees who have prescribed opioids during the previous license period must complete two (2) hours of Category 1 CME regarding the CDC guidelines for prescribing opioids for chronic pain every five years. Licensees who regularly provides direct patient care to dying patients must complete end-of-life training as part of a Category 1 CME credit every five years (Iowa Admin. Code r. 653-11.4(1)) 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(272C))
KS	YES	NO	**50 hours every year**, minimum of 20 Category 1 (AMA Ed Hub); 100 hours for 2 year cycle (40 Category 1), or 150 hours for 3 year cycle (60 Category 1) (Net CE)

SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
			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. (Kan. Admin. Regs. § 100-15-5) All physicians are required to complete at least one, two, or three hours (1 hour for each year of chosen continuing education cycle) of Category 3 CME, which is defined as covering one of the following topics: acute or chronic pain management; the appropriate prescribing of opioids; or, the use of prescription drug monitoring programs, every renewal period (Kan. Admin. Regs. § 100-15-4(d)).
KY	YES	YES	**60 hours every 3 years**; 30 must be in Category 1 (Kentucky Board of Medical Licensure Guidance) One-time domestic violence course for primary care physicians. 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 (201 KAR 9:310). In lieu of the 60-hour requirement, the Board will accept the following: (1) Verification that the licensee has completed CME requirements of any specialty organization, which is recognized by the American Medical Association or the American Osteopathic Association, which is at least equivalent to their recognized awards and that such certification is in effect at the time the license is renewed; (2) Passing a certification or recertification examination of one of the specialty boards that are members of the American Board of Medical Specialties or the AOA Bureau of Osteopathic Specialists. This will count for 60 hours of CME credit; or (3) Verification that a licensee is in or has been in an accredited postgraduate training program during the three-year cycle. Each year of postgraduate training is equivalent to 50 hours of CME for full time and 25 hours of CME for part time (Kentucky Board of Medical Licensure Guidance).
LA	YES	YES	**20 hours per year**; all must be Category 1. (LSBME Guidance). 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 (La. Admin. Code tit. 46, pt. XLV, §§ 435). 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. (La. Admin. Code tit. 46, pt. XLV, §§ 449). As of June 20, 2025, the Board of Medical Examiners is required to adopt rules requiring physicians, PAs, and APRNs practicing family medicine, internal medicine, pediatrics, and obstetrics and gynecology to complete one hour of CME every two years on nutrition and metabolic health, the specific content of which is to be determined by the Board (2025 SB 14). CME requirements are not applicable to physicians who have, within the past year, been certified or recertified by a member board of the American Board of Medical Specialties (ABMS) or a specialty board recognized by the AOA (LA Register Vol. 52 No. 1 January 20, 2026)
ME-M	YES	YES	**40 hours every 2 years**; all must be in Category 1. Physicians must complete three (3) hours of CME on the prescription of opioid medication every 2 years. (ME BLM CME Information) Category 1 CME may include 25 credit hours of American Board of Medical Specialties (ABMS) specialty board certification or recertification within the 24 months preceding renewal (Code Me. R § 373-1-11)

SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
ME-O	YES	NO	**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 who prescribe controlled substances must complete 3 hours of continuing medical education on the prescription of opioid medication every 2 years. (02 ME Code Rules § 383-14-1)
MD	YES	YES	**50 hours every 2 years**, 25 must be Category 1. (MBP Guidance) Effective October 1, 2018, when applying for a CDS registration, physicians must attest to the completion of 2 hours of continuing medical education related to the prescribing or dispensing of controlled substances (HB 1452 of 2018) Effective October 1, 2021, applicants for renewal must attest to completion of an approved implicit bias training program the first time they renew a license or certificate after April 1, 2022 (Health Occupations Article §1–225). The applicant shall be considered to have met the CME requirements if the applicant currently holds an active time-limited certification issued by: a member of the American Board of Medical Specialties; an American Osteopathic Association Certifying Board; the Royal College of Physicians and Surgeons of Canada; or the College of Family Physicians of Canada; and provides proof of maintenance of a time-limited Board certification that is dated no longer than 5 years prior to the renewal date. (COMAR 10.32.01.10)
MA	YES	NO	**50 credits every 2 years**, either Category 1 or 2. (BORIM Guidance) 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. 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 (Board of Registration in Medicine, Policy 2017-05, "A CME Pilot Program"). Physicians who serve adult populations are required to complete a one-time-only training on Alzheimer's Disease and dementia (CME Requirements Based on License) The Board has expanded experiences that will support Risk Management CMEs to include many topics dealing with physician burnout and wellness (Board of Registration in Medicine, Policy 2019-06, "Risk Management CME Credits and Physician Burnout."). Beginning June 1, 2022, BORIM will require that applicants for initial physician licensure and licensees renewing physician licensure complete a continuing medical education requirement of 2.00 credits on the topic of implicit bias in healthcare. The 2.00 credits may be applied towards a physician's biennially required 10 hours of risk management credits pursuant to 243 CMR 2.06(a)3 (Policy 2021-04).
MI-M	YES	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 (LARA MD Licensing Guide) Effective June 1, 2022, new applicants for licensure will need to complete a minimum of two hours of training on implicit bias, and applicants for renewal will need to complete a minimum of one hour of training annually (Public Health Code 338.7004).

SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
			Successfully completing an activity that is required for maintenance of a specialty certification for a board recognized by the American Board of Medical Specialties that does not meet the requirements of other CME activities counts for a maximum of 30 Category 1 CME hours (Mich. Admin. Code r. 338.2441).
MI-O	YES	NO	**150 hours every 3 years**; 60 must be Category 1. Licensees must complete a one-time human trafficking training, and one hour related to medical ethics. Effective December 6, 2017, a minimum of 3 hours of continuing education must be earned in pain and symptom management, one hour of which must cover controlled substances prescribing (LARA DO Licensing Guide) Effective June 1, 2022, new applicants for licensure will need to complete a minimum of two hours of training on implicit bias, and applicants for renewal will need to complete a minimum of one hour of training annually (Public Health Code 338.7004).
MN	YES	YES	**75 hours every 3 years**; all must be Category 1 (BMP Guidance; Minnesota Rules, part 5605.0100-.1200). The board may accept certification or recertification by a member of the American Board of Medical Specialties, the American Osteopathic Association Bureau of Professional Education, or the Royal College of Physicians and Surgeons of Canada in lieu of compliance with the continuing education requirements during the cycle in which certification or recertification is granted (Minnesota Rules, part 5605.0700).
MS	YES	YES	**40 hours every 2 years**; all must be Category 1 (MSBML Guidance) For licenses with DEA certificates, 5 hours must be related to prescribing medications with an emphasis on controlled substances (MS Rules Part 2610 Ch. 2). Instead of maintaining an account with a Board-approved CME tracking organization, licensees may maintain active certification with a board recognized by the American Board of Medical Specialties (ABMS). Lifetime certification, without ongoing maintenance of certification, does not satisfy this requirement (MSBML CME Requirements).
MO	YES	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. A licensee who has obtained American Specialty Board certification or recertification during the reporting period shall be deemed to have obtained the required hours of continuing medical education. The licensee shall provide the board with documentation evidencing the certification or recertification upon request. (20 CSR 2150-2.125)
MP	YES	NO	**50 hours every 2 years**; all must be Category 1 (Title 185-10-4215).
MT	NO	NO	Montana **does not have a set number of required CME credit hours** for physician license renewal. (AMA Ed Hub)
NE	YES	NO	**50 hours every 2 years**; all must be Category 1. (DHHS Guidance) In lieu of CME credit, licensees may also have been given the AMA's Physician's Recognition Award or the AOA's CME Certification earned within the 24 months immediately preceding the date of expiration. Licensees who earn more than 50 hours in a two-year period may carry over up to 25 hours for the next biennial period (Neb. Admin. R. & Regs. Tit. 172, Ch. 88, § 008) 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 the Nebraska PDMP (AMA Ed Hub).

SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
NV-M	YES	NO	**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; 18 may be in other medical education, including 2 in misuse and abuse of controlled substances, prescribing of opioids, or addiction if licensed to prescribe controlled substances, 2 hours in Cultural Competency and Diversity, Equity, and Inclusion if a psychiatrist or a PA working with a psychiatrist as a supervising physician, 2 hours every 4 years on suicide detection, intervention, and prevention, and 2 hours: Screening, Brief Intervention, and Referral to Treatment (SBIRT) one time. ~~New licensees must complete 4 hours in WMD/ bioterrorism within the first 2 years of licensure.~~(AB 56 (2025) removed this requirement). For MDs/PAs who provide or supervise emergency medical services in a hospital or primary care facility: 2 hours one time: Stigma, Discrimination and Unrecognized Bias related to HIV. (NRS § 630.253) Licensees can receive up to 4 hours double credit for courses taken in the following areas: Geriatrics and Gerontology, Effective Management of Medications, Diagnosis of Rare Diseases, including Pediatric Cancer (NV Medical Board CME Requirements Summary). 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 (NRS § 630.198).
NV-O	YES	NO	**35 hours every year.** (NV BOM Guidance) AB 56 (2025), which will go into effect in 2027, will increase the threshold to 40 hours per year. 10 must be AOA or AMA Category 1A, and 2 must be on misuse and abuse of controlled substances, the prescribing of opioids or addiction. 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, and addiction care or SBRIT, and 2 hours in Cultural Competency and Diversity, Equity, and Inclusion if a psychiatrist or a PA working with a psychiatrist as a supervising physician. Only for MDs and PAs who provide or supervise emergency medical services in a hospital or primary care 2 hours one time: Stigma, Discrimination and Unrecognized Bias related to HIV (Nev. Rev. Stat. 633.471).
NH	YES	YES	**100 hours 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). Passage of an American Specialty Board examination, whether for initial eligibility or for recertification, shall be accepted as the equivalent of 100 category I CME credit hours (N.H. Admin. Code § Med 402.01).
NJ	YES	NO	**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) (N.J. Admin. Code 13:35-6.25.; SMNJ Guidance) Two (2) of the required Category 1 Credits must be in End-of-Life-Care (N.J. Admin. Code 13:35-6.15.) 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. P.L. 2017, c. 28.) Beginning on July 1, 2025, two (2) of the required Category 1 credit hours shall be in programs or topics related to sexual misconduct prevention. In addition, licensees providing perinatal treatment and care to pregnant persons must take one (1) Category 1 credit in explicit and implicit bias. (N.J.A.C. 13:35-6.15)

SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
			For newly licensed physicians, the Board requires attendance at an orientation program with no CME credit (N.J. Admin. Code 13:35-6.15.). Licensees who completed an accredited graduate medical education program within 12 months prior to licensure shall be exempt from CME requirements for the initial biennial period of licensure.
NM	YES	YES	**75 hours every 3 years**; all must be Category 1 All licensees holding a federal drug enforcement administration registration and a New Mexico controlled substances registration shall complete five (5) CME hours in pain management during the first year of licensure. If it is the licensee's first period of licensure, those hours must be completed during their first year. (N.M. Admin. Code § 16.10.14.11). The Board will accept any of the following as fulfillment of CME requirements: the physician's recognition award of the AMA PRA Category 1 Credit; certificate of CME issued by any board or sub-board of the ABMS; or certification or re-certification by an ABMS approved specialty board during the renewal period (N.M. Admin. Code § 16.10.4.10).
NY	NO	NO	New York **does not have a set number of required CME credit hours** for physician license renewal. (AMA Ed Hub) 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	YES	**60 hours every 3 years**; all must be Category 1 relevant to the physician's current or intended specialty or area of practice (NCMB Guidance; NCMB CME FAQ) 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. A physician who attests that he or she is engaged in a program of recertification or maintenance of certification from an ABMS, AOA or RCPSC specialty board shall be deemed to have satisfied his or her entire CME requirement for that three year cycle. N.C. Admin. Code tit. 21, r. 32R.0101.
ND	YES	YES	**40 hours every 2 years**; all must be Category 1 (NDBOM Guidance) Physicians who hold a current certification, maintenance of certification, or recertification by a member of the American board of medical specialties, the American osteopathic association, or the royal college of physician and surgeons of Canada at the time of the CME audit are exempt from CME requirements (N.D. Admin. Code 50-04-01-02).
OH	YES	NO	**50 hours every 2 years**; all must be Category 1 (SMBO Requirements; OSMA Guidance) Physicians must complete one hour of CME on the topic of a licensee's duty to report (Ohio Admin. Code §§ 4731-10-02) Physician owner/operators of pain management clinics must complete at least twenty hours of Category 1 CME 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 be accepted toward meeting the Category 1 requirement for certificate of registration renewal for the physician (Ohio Admin. Code § 4731-29-01)

SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
OK-M	YES	YES	**60 hours every 3 years**; all must be Category 1 (OMB Guidance) Licensees must complete one (1) hour of education in pain management or one (1) hours 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 (59 O.S. § 495a.1). Every two years, licensees must watch a one-hour training on the responsibilities and rights of health care providers (63 O.S. § 3162). The Board shall accept as verification: current American Medical Association Physician Recognition Award (AMAPRA); and Specialty board certification or recertification that was obtained during the three year reporting period, by an American Board of Medical Specialties (ABMS) specialty board (OK Admin Code 435:10-15-1) Continuing Medical Education for OK Licensed Physicians
OK-O	YES	NO	**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. Osteopathic physicians who do not possess the State Bureau of Narcotics and DEA authority to handle CDS are exempt from the controlled substance CME hour requirement (OK Admin Code 510:10-3-8)
OR	YES	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 (OMB Guidance) All licenses of the Oregon Medical Board (except licensees holding Lapsed, Teleradiology, and Telemonitoring licenses) must complete 1 hour of continuing education provided by the Pain Management Commission in pain management at initial licensure and every 24 months thereafter (OAR 847-008-0075). Participation in cultural competency, suicide risk assessment, and Alzheimer's education may be counted toward the mandatory continuing education required of all Board licensees (OAR 847-008-0070). All Board licensees (except licensees in residency training and Volunteer Camp licensees), must complete 1 hour of cultural competency continuing education each year (OAR § 847-008-0077). Licensees must demonstrate ongoing competency to practice medicine by completing CME OR through ongoing participation in a program of recertification or maintenance of certification by an American Board of Medical Specialties (ABMS) board, or the American Osteopathic Association's Bureau of Osteopathic Specialists (AOA-BOS) (Or. Admin. R § 847-008-0070).
PA-M	YES	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, § 16.19; PA SBM Guidance). 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 (AMA Ed Hub) Acceptable documentation for Category 1 CME includes AMA PRA certificates, the completion of a Category 1 activity sponsored by an organization accredited by ACCME or designee of the ACCME, and certificates from a medical professional society or specialty certification by a member organization of the American Board of Medical Specialties (Pa. Code tit. 49, § 16.19).

SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
PA-O	YES	NO	**100 hours every 2 years**; 20 hours must be Category 1-A; 12 hours of patient safety or risk management (either Category 1 or 2); 2 hours must be in child abuse recognition and reporting requirements; remaining hours either Category 1 or 2 (Penns. Med. Soc. DO License Renewal) 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. (AMA Ed Hub; Pa. Code tit. 49, § 25.271)
PR	YES	NO	**60 hours every 3 years**; 50% must be earned in areas related to the licensee's specialty, subspecialty, or certification in question. 2 hours must be earned on treatment of Dengue, Chikungunya, and Zika; one (1) hour on diabetes; one (1) hour on vaccination; one (1) hour on obesity prevention; one (1) hour on cardiovascular health; three (3) hours on pain management; three (3) hours on antibiotics; and four (4) hours on bioethics and professionalism. The remaining 44 hours may be earned in any topic. Physicians who work with individuals with autism must earn fifteen (15) CME hours related to autism and all pediatricians must complete six (6) hours of CME related to the condition. For physicians providing direct or indirect hospital emergency room services, 20 hours must address Emergency Medicine, including courses in life support (CPR, ACLS, and PALS), emergency management, and the study of emergency medicine (Reglamento General de la Junta de Licenciamiento y Disciplina Medica de Puerto Rico 9.1).
RI	YES	YES	**40 hours every 2 years**; all must be AMA Category 1 or AOA Category 1A (AMA Ed Hub). For the 2024 medical license renewal cycle, continuing medical education requirements may be met by 40 hours of ACCME-accredited training in any topic areas over a two-year period. There are no specific topics required by the Board for this license renewal cycle. (RI Dept. of Health) Effective August 1, 2019, every physician has to complete one hour (per career) of CME training regarding Alzheimer's disease.(RI Dept. of Health). A physician's participation in an American Board of Medical Specialty's (ABMS) Maintenance of Certification program will be considered equivalent to meeting CME requirement (216-RICR-40-05-1.5.5)
SC	YES	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 LSR CE Guidance) Applicants may instead demonstrate to the Board certification of added qualifications or recertification after examination by a national specialty board recognized by the American Board of Medical Specialties or American Osteopathic Association or another approved specialty board certification. (SC Code § 40-47-40) Physicians and PAs must complete a one-hour course on human trafficking awareness and prevention. Practitioners licensed before January 1, 2026, must complete the course by January 1, 2028 and then every six years thereafter, while those licensed on or after January 1, 2026, must complete it within two years of initial licensure and every six years thereafter (2026 H 4343).
SD	NO	N/A	South Dakota **does not have a set number of required CME credit hours** for physician license renewal. (AMA Ed Hub)
TN-M	YES	NO	**40 hours every 2 years**; all must be Category 1 (TN BME CME FAQ) 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.;)

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SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
TN-O	YES	NO	**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; TN DOH Guidance).
TX	YES	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 (Tex. Admin. Code tit. 22, § 161.35.; TMB Guidance). 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 (Tex. Admin Code tit 3 § 156.055.). For licensees practicing in pain management clinics, licensees must complete 10 hours of CME annually in pain management (Texas Medical Board Rule 172.3). Physicians are exempted from CME requirements if in the preceding 36 months the physician becomes board certified or recertified by a specialty board approved by the American Board of Medical Specialties (ABMS) (Tex. Admin Code tit 3 § 156.052.) Effective September 1, 2025, the Medical Board must establish rules requiring licensees to complete a Board-determined number of hours on nutrition training based on the guidelines of the Texas Nutrition Advisory Committee (2025 SB 25).
UT	YES	NO	**40 hours every 2 years**; 34 must be Category 1; 6 hours maximum may come from the Division of Occupational & Professional Licensing. Up to 15% may come from providing volunteer health care services with one CME credit for every four hours of documented service and participation in an AOA- or ACCME residency program (Utah Admin. Code R156-67-304; UT DOPL Guidance) A controlled substance prescriber shall complete at least 3.5 hours of CE in one or more controlled substance prescribing classes (Utah Code 58-37-6.5.). Physicians must also complete at least 1 online suicide prevention training course from a list provided by the Utah Department of Commerce Division of Occupational and Professional Licensing (DOPL) (Utah Admin. Code r. 156-67-303.)
VT-M	YES	NO	**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. § 200:22.1; VMS Guidance)
VT-O	YES	NO	**30 hours every 2 years**; (Code Vt. R. 04 030 220) The 30 hours of continuing medical education shall meet the requirements established by the Board by rule (26 V.S.A § 1836).
VI	YES	NO	**50 hours every 2 years**; all must be AMA Category 1.
VA	YES	NO	**60 hours every 2 years**; 30 of which must be Category 1. Up to 15 Category 2 hours may be satisfied through the provision of voluntary services to low-income individuals through a local health department or free clinic. (18 Va. Admin. Code 85-20-235; DHP Guidance)
WA-M	YES	YES	**200 hours every 4 years**. Physicians may earn all 200 CME hours in Category 1, but may earn a maximum of 80 hours each of Category 2, 3, 4, and 5. (WAC 246-919-460; WMC Guidance) Every physician must take a one-time, six (6) hour CE course in suicide assessment, treatment, and management (RCW 43.70.442).

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SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
			Physicians must complete a minimum of two hours of CME related to health equity every licensure cycle (WAC 246-12-820). 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 246-919-875) In lieu of CME hours, physicians may also obtain a current Physician's Recognition Award from the American Medical Association in at least two of the four years preceding the renewal due date; become certified by a member board of the American Board of Medical Specialties in the four years preceding the renewal due date; and meet the requirements for participation in maintenance of certification of a member board of the American Board of Medical Specialties at the time of renewal (WAC 246-919-430).
WA-O	YES	YES	**150 hours every 3 years** (WA Osteopathic Medical Assoc. & WAC 246-853-080); 60 must be Category 1 (WAC 246-853-070). Every osteopathic physician must take a one-time, six (6) hour CE course in suicide assessment, treatment, and management (WAC 246-853-065) 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 246-853-685) Osteopathic physicians must complete a minimum of two hours of CME related to health equity every licensure cycle (WAC 246-12-820). The Board may accept certification or recertification with the American Board of Osteopathic Medical Specialties (ABOMS) or the American Board of Medical Specialties (ABMS) within the last six years, among other CME equivalents (WAC 246-853-080)
WV-M	YES	YES	**50 hours every 2 years**; all of which must be Category1. 30 hours of CME must be in the physician's area(s) of specialty. Physicians may count up to 20 hours of medical student teaching/preceptorship in the 50-hour total. The 3-hour Board-approved Risk Assessment and Responsible Prescribing of Controlled Substances Training / Drug Diversion Training and Best Practice Prescribing of Controlled Substances Training CME can be used for 3 of the 50 CME hours (WV BOM Guidance). Effective July 1, 2026, physicians must complete an unspecified number of CME hours in nutrition (2026 HB 4951). Physicians may satisfy all CME requirements except the 3-hour Board-approved Risk Assessment requirement by: sitting for and passing a certification or recertification examination of an ABMS member board and receiving certification or recertification during the relevant reporting period; successful involvement in maintenance of certification (MOC) through an ABMS member board during the relevant reporting period; or successfully completing of one full year of ACGME approved postgraduate training during the reporting period. (W. Va. Code, § 30-3-12)
WV-O	YES	NO	**32 hours every 2 years**; 16 of which must be AOA Category 1A or 1B. 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 (American College of Surgeons: WV Chapter). Effective July 1, 2026, osteopathic physicians must complete an unspecified number of CME hours in nutrition (2026 HB 4951). 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 (W. Va. Code R. § 24-1-15).
WI	YES	NO	**30 hours every 2 years**; all must be Category 1; 2 must be on the prescribing opioids and other controlled substances. These courses must be AMA or AOA Category 1, but no longer require specific approval from the MEB. This 30 hour requirement is separate from the 8 hour requirement

SMB	Substantial CME required?	CME equivalent accepted?	Statute/Regulation/Citation
			from the DEA, but courses taken for the DEA requirement can be used to fulfill the CME requirement. (Wisconsin Dept. of Safety and Professional Services & Wis. Admin. Code MED § 13.02).
WY	YES	YES	**60 hours every 3 years**; all must be Category 1 or 2. Licensees with a controlled substance registration must complete one (1) hour of CME related to responsible prescribing of controlled substances or the treatment of substance abuse disorders every two (2) years. (Wyoming Board of Medicine Rules and Regulations, Ch. 3, § 7 (2021)) Licensees may earn CME in any combination of the following during the previous three (3) years: AMA-approved Category I or II continuing medical education; AOA-approved continuing medical education; a current AMA Physician's Recognition Award; or a current certificate from a specialty board approved by the A.B.M.S. considered by the specialty board to be equivalent to the hours claimed to be attributable to such certificate by the licensee (052-3 Wyo. Code R. §§ 3-7)