Submitting Requests for Continuing Education Credit

As a service, continuing education (CE) offered by local societies may be submitted to the California Optometric Association (COA) for approval of CE credit. COA is authorized by the California State Board of Optometry to approve the courses it sponsors. This provider authority extends to COA’s review of local society education programs.

General Guidelines

1. CE requests for events sponsored by individuals, optometric practices or the Ophthalmic industry must be referred directly to the California State Board of Optometry for approval.

2. COA will not process local society CE requests offering more than two CE hours scheduled during these dates:

<table>
<thead>
<tr>
<th>Monterey Symposium</th>
<th>Blackout Dates - all of CA</th>
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<tbody>
<tr>
<td>November 16-18, 2018</td>
<td>November 2 - November 30</td>
</tr>
<tr>
<td>November 15-17, 2019</td>
<td>November 1 - November 29</td>
</tr>
<tr>
<td>November 6-8, 2020</td>
<td>October 23 - November 20</td>
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<table>
<thead>
<tr>
<th>Year</th>
<th>OptoWest</th>
<th>Event Date</th>
<th>Northern CA blackout</th>
<th>Southern CA blackout</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Santa Clara</td>
<td>3/4/2018</td>
<td>February 17 - March 17</td>
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<tr>
<td></td>
<td>Sacramento</td>
<td>4/15/2018</td>
<td>April 1 - April 30</td>
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<td></td>
<td>Southern CA</td>
<td>TBA</td>
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<tr>
<td></td>
<td>Sacramento</td>
<td>4/7/2019</td>
<td>March 24 - April 21</td>
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<tr>
<td></td>
<td>Northern CA</td>
<td>TBA</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Sacramento</td>
<td>4/26/2020</td>
<td>April 12 – May 10</td>
<td></td>
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</tbody>
</table>

If societies have events requiring more than two hours of CE approval during these time periods, please forward them directly to the State Board of Optometry.

3. Local societies must submit their CE approval requests to COA at least four (4) weeks prior to the program date. Retroactive CE approval is not permitted by the State Board of Optometry.

4. Review the CA State Board of Optometry Fact Sheet.
COA Four Step CE Approval Process

1. **Submit a CE Request**
   Forward the Request for Continuing Education Credit Form to COA at least four weeks prior to the local society program date with the following materials for review:

   a) Provide the following information to COA:
      - Specific course title(s) with accompanying comprehensive outline describing the course content (good example—speaker’s lecture notes). The outlines line must be more than the course title and a description.
        - For a one hour course the outline must include at least 1 ½ pages of content.
        - For a two hour course the outline must include at least 2 ½ pages of content.
        - The power point presentation is acceptable if available.
      - Duration of course (should be in increments of 1 hour—remember a credit hour is defined as one classroom hour – 50 minutes).
      - Updated curriculum vitae for each speaker.
      - A copy of the flyer or program being mailed, if available.

   b) Click [here](#) to add a CE event to the online COA calendar. Please complete the form and the event will be posted to the calendar within 24-48 hours of submission. Visit coavision.org and click on CE/Events to view the CE calendar.

2. **Confirmation**
   For your convenience, COA will offer suggested classifications of TPA, TPG, OTHER, PM for your course. When presenting more than one category in a lecture, it would be helpful to submit each topic individually to assist doctors with their record keeping. Once the course(s) is approved, the society will receive an approval letter confirming the date, name of the course, CE hours, and category.

3. **Provide Proof of Attendance for Attendees**
   Societies are responsible for providing attendees with a Proof of Attendance at their Continuing Education Programs. The State Board requires the following information for certification of attendance:
   - Name of the sponsoring organization
   - Name, signature, practice address, social security number, and license number of the attending licensee
   - Subject or title of the educational program
   - Number of hours in actual attendance
   - Date of the educational program
   - Location of the educational program
   - Name(s) of the course instructor(s)

4. **Submit Verification Form and Attendee List to COA**
   - Verification form: sign and return the verification form to COA within two weeks after your event has occurred.
   - Attendee list: list all of the doctors who participated and their license numbers.

**What COA Keeps On File**
As specified by the State Board of Optometry, COA will maintain the CE course documents submitted for up to three years. Responsibility lies with each individual doctor to maintain verification of the courses they have taken, and to track required hours needed for license renewal.
Request for Continuing Education Credit
California Local Optometric Societies

CONTACT INFORMATION

Sponsor Society: ________________________________________________

Education Director: ________________________________________________

Office or Society Address: __________________________________________

City/State/Zip: ____________________________________________________

Contact Telephone Number/Email: ________________________________

PROGRAM INFORMATION

Event Title: _______________________________________________________

Event Date/Time: __________________________________________________

Event Location: ___________________________________________________

Speaker(s): ______________________________________________________

How Will You Monitor Attendance: __________________________________

Total CE Hours Provided: _________

Category CE Hours (check one): ☐ Therapeutic ☐ Glaucoma ☐ Other

CE SUBMISSION REQUIREMENTS:

Please submit this form to the California Optometric Association four (4) weeks prior to the program date with the following requirements:

☐ All course title(s) and a detailed and descriptive outline for each course, including length of course.
☐ An updated curriculum vitae for each speaker.
☐ A copy of the printed program, if available.

COA OFFICE USE ONLY

Date Received: __________________________

Send application materials to:
California Optometric Association
Brenda Stewart
Education and Events Coordinator
P.O. Box 2591, Sacramento, CA 95812
Tel. (800) 877-5738 ext. 235 • Fax. (916) 448-1423
brendas@coavision.org • www.coavision.org

Date Approved/By: __________________________

Not Approved/Reason: __________________________
Verification Form for Continuing Education

Upon completion of your continuing education program, this form must be submitted to the California Optometric Association, along with a list of attendees with their license numbers.

EVENT VERIFICATION

Sponsor Society: __________________________________________________________

Event Title: ______________________________________________________________

Program Date: ___________________________________________________________

Actual CE Hours Provided: _________________________________________________

Number of Attendees: ____________________________________________________

SIGNATURE

I certify that the program listed above, which has previously been approved by the California Optometric Association for continuing education credit, was held and provided the noted hours of continuing education. Further, I certify that all attendees listed participated in the complete program.

Program Director (Please Print)          Telephone Number

Program Director (Signature)          Date

Submit the following:
☐ Signed verification form
☐ List of attendees with license numbers

Send materials to:

California Optometric Association
Brenda Stewart, Education & Conference Coordinator
2415 K Street Sacramento CA 95816
Tel. (800) 877-5738 • Fax. (916) 448-1423
Email brendas@coavision.org • Web Site www.coavision.org
General Business Liability Insurance Policy

When a venue requests a certificate of insurance, COA will provide you with a general business liability insurance certificate.

A general business liability insurance policy covers claims of damage and injury caused by the insured during the course of business. This insurance covers four categories: bodily injury, personal injury (which includes libel or slander), property damage, and advertising injury.

To process a Certificate of Insurance for your Society educational event, we will need the following information:

- Name of Society holding the event
- Address of Society
- Event Location (Name and Address)
- Contact name at event location
- Date of event
- Type of event

To request a certificate of insurance for your event email the above information to Louise McAtee, Financial Accounting Manager. Her email address is lmcatee@coavision.org.