Communicating with The Physician Community

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ABMS Conference 2016
Objective: Launching MOCA 2.0®

Build buy-in for MOCA 2.0 among key stakeholders and position the ABA as a thought leader/innovator
Goals: Launching MOCA 2.0®

- Broadly communicate program changes
- Raise awareness of requirements
- Create bi-directional communications
- Generate feedback
Dear %%Last Name%%,

MOCA 2.0™ is here! Please register for MOCA 2.0 in your ABA portal account. To help prepare you for the registration process, we created a short video and a step-by-step instructional PDF with screenshots. Click here to view the MOCA 2.0 registration video and here to access the MOCA 2.0 Registration Guide PDF.

Please note that the ABA's websites are supported on Microsoft Internet Explorer Version 11 or later and Google Chrome Version 37 or later. Please use one of these browsers to ensure you can access all site functionality.

If you have any questions about MOCA 2.0 or registration, please contact the ABA Communications Center at (866) 999-7501 or coms@theaba.org Monday through Friday 8 a.m. to 5 p.m. ET.

Sincerely,

ABA MOCA Department

NOTICE: This message contains information from the American Board of Anesthesiology that may be confidential and/or privileged. If you are not an intended recipient, please notify the sender immediately, then destroy this email and refrain from any disclosure, copying, distribution or use of this information. We recommend that you add our domain (theaba.org) to your Safe Senders list in your email client. This will minimize the likelihood of you missing our emails.
Tactics: Face-to-Face Forums

MOCA 2.0 Users Group

ASA Forum
Tactics Online Forums

- Live director-led forums
- Targeted 2006 cohort
- Q&A format
**Tactics Website**

**MOCA 2.0® REGISTRATION GUIDE**

1. Click on the orange "Physician Login" button on the ABA website (www.theABA.org).

2. Log into your portal account with your ABA ID number, Social Security Number or email address on file with the ABA. If you do not know your password, you can reset it.

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**What is changing between MOCA and MOCA 2.0?**

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<tr>
<th>MOCA</th>
<th>MOCA 2.0 (Beginning in 2016)</th>
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<tr>
<td>PART 1: Professionalism and Professional Standing (PPS)</td>
<td>Hold an active, unrestricted license to practice medicine in at least one jurisdiction of the United States (U.S.) or Canada. Furthermore, all U.S. and Canadian medical licensees that a diplomate holds must be unrestricted.</td>
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<tr>
<td>PART 2: Lifelong Learning and Self-Assessment (LLS)</td>
<td>250 Category 1 CMEs of which 90 must be ABA-approved Self-Assessment CMEs, and 20 must be ABA-approved Patient Safety CMEs.</td>
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<tr>
<td>PART 3: Assessment of Knowledge, Judgment, and Skills (KJS)</td>
<td>Pass the MOCA Exam once every 10 years.</td>
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**MOCA 2.0™ REGISTRATION**

- 20% annual participation fee
- $210 annual participation fee

More options for activities with points awarded for each activity based on the time and effort associated with their completion. Diplomates must complete 25 points in Years 1-5 and 25 points in Years 6-10 for a total of 50 points per 10-year cycle. Click here for more details.
Tactics: Videos

Redesign rationale

MOCA Minute® Overview

Registration how-to

Part 4 point system

MOCA Minute app
We are halfway through Q3, so make sure to answer your MOCA Minute questions for the quarter by Sept. 30. More than 33 percent of participants have already completed their 90 questions.

**Tactics: Traditional & Social Media**

The Washington Post

Doctors’ group will scrap 10-year re-certification exam

By Tracy Tumerman • September 8, 2015

The professional group that represents anesthesiologists will become the first medical board to scrap a widely criticized test that most physicians take every 10 years to show they are up to date in their specialties, officials said Wednesday.

Beginning next year, the American Board of Anesthesiology instead will offer its elite “board certified” members the opportunity to show their mastery — and brush up if they fall short — through weekly online quizzes that they can take at will, coupled with educational material.

The move may portend a broader shift in the way doctors prove that they are keeping up with developments in their specialties.

The policy that represents physicians’ interest in the new approach, and the decision of the group that governs 56,000 internists and internists physicians in a statement that it is seeking alternatives.

Despite the program conducted in recent months, the anesthesiology board has not assessed whether the new effort resulted in better patient care, said its secretary, James P. Rathman. But the registration hopes the approach will improve care.

“This once-a-year-exam test, it’s easy to take in the exam, but it isn’t what helps anesthesiologists learn effectively. Most remains for the exam in the preceding weeks, be said.

About 85,000 physicians — 15 percent of the nation’s total — have received certification from one of the 29 boards that govern each medical specialty and anesthesiologists, according to Dr. Margaret Scita, president and chief executive of the American Board of Medical Specialties, the umbrella group for those boards.

The designation as a “specialist” in anesthesiology or another specialty signals a level of expertise beyond the possession of anesthesiologists, which is issued by each state. But hospitals, private practices and other health care providers are increasingly requiring that physicians be board-certified to practice. Some states now require certain medical specialties for certification.

About 50,000 of the 85,000 board-certified physicians have lifetime certification, but the rest must take the exam every 10 years. In its test of the program, the anesthesiology board will be sending weekly multiple-choice questions to members,
Results

• MOCA 2.0® Registration rates: Nearly 21,000
• Email open rate: Nearly 62%
• Forums: Attendance up (600% at ASA)
• Website clicks: “About MOCA 2.0” page clicks up 60%
  – Registration Page: 13,000 clicks
  – MOCA timeline: More than 6,000 clicks
• MOCA Feedback mailbox: 500 emails
Feedback/Lessons Learned

- **Email** is still most efficient & effective channel
  - April 23 MOCA 2.0® email generated 500+
- **Face-to-face forums** very helpful; **online forums** less so
- **Videos** promoted via email successful, those promoted via social media were less so
- **Programmatic social media posts** do not trend as well as fun facts, but are still worthwhile
- **Postcards** helped drive home key messages at critical points in campaign
  - Portal click rates & Com Center calls spiked one week after mailing
Questions?