MYTHS AND FACTS

Research Findings from the ABMS Evidence Library
Access the ABMS Evidence Library at

www.abms.org/EvidenceLibrary
ABOUT ABMS

A primary mission of the American Board of Medical Specialties (ABMS) is to maintain and improve the quality of care by assisting the 24 Member Boards in their efforts to develop and utilize professional and educational standards for the certification of physicians. The intent of both the ABMS Member Board Certification process and the ABMS Maintenance of Certification® (ABMS MOC®) program is to help assure the public that a physician certified by an ABMS Member Board has successfully completed an approved educational program and rigorous evaluation process. These efforts contribute to lifelong learning and a higher quality of care.

ABMS AT A GLANCE

- 800,000-plus Board Certified physicians in the U.S.
- 450,000-plus physicians participate in an ABMS MOC program*
- 80-85% of all U.S. licensed physicians are Board Certified

*As of Dec. 31, 2012
The ABMS Evidence Library highlights research studies and articles supporting the value of the Board Certification process and MOC program. It reflects an effort to systematically present the empirical evidence in the current peer-reviewed literature.

Article annotations have been placed into one or more categories based on study characteristics and relevance to specific aspects of Board Certification and/or MOC. The categories include articles that

• Point to the value of Board Certification
• Support the conceptual framework and initial structure of MOC (Parts I – IV)
• Validate MOC programs

References and annotations will be added to the library over time as new evidence supporting Board Certification and MOC emerges.
ABMS MOC
SIX CORE COMPETENCIES*

• Professionalism
• Patient Care and Procedural Skills
• Medical Knowledge
• Practice-based Learning and Improvement
• Interpersonal and Communication Skills
• Systems-based Practice

*Adopted by ABMS and ACGME in 1999
MYTH
The benefits of the MOC program are not based in evidence.

FACT
ABMS provides independent research findings housed in the ABMS Evidence Library that highlight research studies and articles supporting the value of Board Certification and MOC.

The ABMS Member Boards’ MOC requirements are anchored in evidence-based guidelines, national clinical and quality standards and specialty best practices. Although the ABMS MOC program is relatively new, early studies show a link between MOC and improved clinical performance and outcomes by participating physicians. Physician engagement in MOC activities has been associated with enhancement in clinical competence, improvement in care processes and the gathering of valuable patient feedback. (See articles in List 1.)

Furthermore, the latest principles in adult learning are incorporated into MOC activities such as self-directed practice improvement modules, simulations and interactive workshops. Most of the Member Boards use these approaches in their performance improvement activities. (See articles in List 2.)

These studies reinforce prior research that has shown a positive link between initial ABMS Member Board Certification and quality of care. (See articles in List 3.)
Physicians who participate in the ABMS MOC program make a commitment to their patients and a professional investment in themselves. Fees charged by the 24 ABMS Member Boards for MOC participation, are on average, approximately $300 per year*.

ABMS acknowledges that participation in MOC places expectations on physicians. Representing oneself as an ABMS Member Board Certified physician to the public and the health care community is a privilege that is associated with time and effort. However, the investment in MOC activities is expected to yield tangible dividends for patients – better health care, fewer medical errors and improved patient safety. For physicians, it means improvement in the six competency domains targeted and developed throughout their training. There is financial cost, as well. Fees charged by the 24 ABMS Member Boards for MOC participation are, on average, approximately $300 per year. These fees are determined at the discretion of each Member Board, based on the needs of their physician specialists. ABMS and the Member Boards strive to provide rigorous and relevant MOC programs that offer value to the physicians engaged in the process.

*As of Jan. 2013
Participation in the MOC program is voluntary and there is no intent to make it part of MOL.

**MYTH**

MOC is not voluntary and will be a mandatory part of Maintenance of Licensure (MOL).

**FACT**

Participation in the MOC program is voluntary and there is no intent to make it part of MOL.

While both MOL and MOC value the concept of lifelong learning and continued professional development, they are separate and distinct initiatives. The Federation of State Medical Boards (FSMB) has recommended that physicians seeking licensure have other options, outside of MOC, that they can use to comply with MOL.

physicians participating in MOC activities be recognized by state medical boards as being in substantial compliance with MOL. This would make the MOC program one option, but not the only one, for participating physicians to fulfill their MOL requirements. However, it is ultimately up to each state licensing board’s discretion to make that determination.

Moreover, FSMB does not, and will not, require specialty certification or recertification for licensure or license renewal. Physicians seeking licensure have other options, outside of MOC, that they can use to comply with MOL. Of course, the benefit of having MOC recognized as being in compliance with MOL is that it reduces regulatory burden for ABMS Member Board physician diplomates, since they can use the same continuous professional development activities to meet both MOC and MOL requirements.
ABMS recognizes that no certification guarantees performance or positive outcomes. However, evidence that shows physicians who keep current do provide better quality care and have improved outcomes as measured by Board Certification and engagement in MOC activities continues to grow.

**MYTH**

Participation in the MOC program does not mean physicians are qualified nor does it ensure patients will have better outcomes.

**FACT**

ABMS recognizes that no certification guarantees performance or positive outcomes. However, evidence that shows physicians who keep current do provide better quality care and have improved outcomes as measured by Board Certification and engagement in MOC activities, according to preliminary studies, and the evidence is mounting. (See articles in Lists 1 and 3.)

After achieving initial Board Certification, a significant threshold in demonstrating competence and knowledge, the ABMS MOC program requires physicians to participate in ongoing activities that demonstrate a commitment to lifelong learning. The ABMS MOC process measures six core competencies: professionalism, patient care and procedural skills, medical knowledge, practice-based learning and improvement, interpersonal and communication skills and systems-based practice. Physicians who keep up-to-date do provide better quality care and show improved outcomes as measured by Board Certification and engagement in MOC activities, according to preliminary studies, and the evidence is mounting. (See articles in Lists 1 and 3.)

**physicians who keep up-to-date do provide better quality care and show improved outcomes**

Board Certification by an ABMS Member Board is a reliable indicator of a physician’s training and competence, and the MOC program is a lifelong learning extension of that.
MYTH
No lifetime certificate holders (“grandfathers”) are participating in ABMS Member Board MOC programs.

FACT
Most physician diplomates who are lifetime certificate holders are not required to participate in an ABMS MOC program, but that doesn’t mean they aren’t. In fact, many are.

More than 450,000 physicians are actively involved in ABMS Member Board MOC programs*, including a significant number of lifetime certificate holders. For example,

it is projected that by 2020, 93% of Board Certified physicians will hold time-limited certificates

nearly two-thirds of physicians holding lifetime certificates from the American Board of Obstetrics and Gynecology and nearly 30 percent of those from the American Board of Allergy and Immunology are participating in MOC activities. More than 3,000 American Board of Pediatrics lifetime certificate holders are meeting MOC requirements.

It is projected that by 2020, 93 percent of Board Certified physicians will hold time-limited certificates and be engaged in ongoing MOC activities. Many senior physicians who hold lifetime certificates are serving in administrative roles and are not involved in direct patient care, while others are nearing retirement.

ABMS and its Member Boards encourage all Board Certified physicians to take advantage of their Boards’ MOC programs demonstrating to patients their commitment to quality care.

*As of Dec. 31, 2012
MYTH
Patients and physicians don’t care about MOC; only ABMS does.

FACT
For 80 years, ABMS has been a reliable and trusted resource for consumers and health care professionals seeking information about physician qualifications. These key constituencies look to ABMS to uphold the high standards of Board Certification and the ABMS MOC program.

With regard to patients, an overwhelming majority believe that it is important for physicians to maintain certification, according to consumer surveys. Additionally, if respondents found out that their physician does not maintain certification, most would look for a new one or cease referring that physician. Patients and family members routinely check their physicians’ certification status free at www.CertificationMatters.org or by calling 1-866-ASK-ABMS; more than 1.5 million searches were conducted in 2012 alone. (See articles in List 4.)

Regarding physicians, studies show that specialists believe in the value of MOC. They believe that physicians providing patient care should maintain certification. Many participate in MOC to update their knowledge and report positive experiences with its components, such as practice improvement modules and examinations. Among the cited benefits are identifying areas for improvement in practice, providing valuable patient feedback and generating high quality performance data. (See articles in List 5.)
Major health care organizations do recognize the value of the ABMS MOC program. Moreover, they have developed relationships, and engaged in collaborations, with ABMS to facilitate the growth and acceptance of Board Certification and the ABMS MOC program as a leading indicator of quality and efficacy for health care delivered in this country.

- Accreditation Council for Continuing Medical Education
- Accreditation Council for Graduate Medical Education
- American Hospital Association
- American Medical Association
- Association of American Medical Colleges
- Council of Medical Specialty Societies
- Educational Commission for Foreign Medical Graduates
- Federation of State Medical Boards
- The Joint Commission
- National Board of Medical Examiners

In addition,
- Working with the U.S. Congress led to the inclusion of MOC participation as one way physicians can meet requirements of the Centers for Medicare & Medicaid Services Physician Quality Reporting System.
- The Blue Cross Blue Shield Association and ABMS collaborated to raise consumer awareness regarding the importance of ABMS Member Board Certification and the MOC program.
- In partnership with the American Medical Association, ABMS supports the Physician Consortium for Performance Improvement with a focus on developing practice measures for MOC quality improvement.
ABMS MOC FOUR-PART PROGRAM ACTIVITIES

• **PART I**: Licensure and Professional Standing
• **PART II**: Lifelong Learning and Self-Assessment
• **PART III**: Cognitive Expertise
• **PART IV**: Practice Performance Assessment
LIST 1
ARTICLES THAT SUPPORT MOC, CITING IMPROVED CARE


LIST 2
STUDIES THAT SUPPORT LEARNING METHODS USED IN MOC PROGRAM ACTIVITIES


LIST 3
ARTICLES THAT SUPPORT BOARD CERTIFICATION (PUBLISHED AFTER 2000*)


* For articles published before 2000, visit www.abms.org/EvidenceLibrary
LIST 4
THE PUBLIC SUPPORTS MOC


LIST 5
PHYSICIANS SUPPORT MOC


**ABMS MEMBER BOARDS**

The 24 Member Boards that comprise ABMS are the American Board of:

**Allergy & Immunology**
- www.abai.org

**Anesthesiology**
- www.theaba.org

**Colon & Rectal Surgery**
- www.abcrs.org

**Dermatology**
- www.abderm.org

**Emergency Medicine**
- www.abem.org

**Family Medicine**
- www.theabfm.org

**Internal Medicine**
- www.abim.org

**Medical Genetics**
- www.abmg.org

**Neurological Surgery**
- www.abns.org

**Nuclear Medicine**
- www.abnm.org

**Obstetrics & Gynecology**
- www.abog.org

**Ophthalmology**
- www.abop.org

**Orthopaedic Surgery**
- www.abos.org

**Otolaryngology**
- www.aboto.org

**Pathology**
- www.abpath.org

**Pediatrics**
- www.abp.org

**Physical Medicine & Rehabilitation**
- www.abpmr.org

**Plastic Surgery**
- www.abplulsurg.org

**Preventive Medicine**
- www.theabpm.org

**Psychiatry & Neurology**
- www.abp.com

**Radiology**
- www.theabr.org

**Surgery**
- www.absurgery.org

**Thoracic Surgery**
- www.abts.org

**Urology**
- www.abu.org

**ABMS ASSOCIATE MEMBERS**

**Accreditation Council for Continuing Medical Education**

**Accreditation Council for Graduate Medical Education**

**American Hospital Association**

**American Medical Association**

**Association of American Medical Colleges**

**Council of Medical Specialty Societies**

**Educational Commission for Foreign Medical Graduates**

**Federation of State Medical Boards of the United States**

**National Board of Medical Examiners**