ABR Update: Maintenance of Certification (MOC)

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ABR Executive Director
Disclosure

• I am an employee of the ABR
Note

• The information given in this presentation is accurate as of March 25, 2017
• For the latest information, please visit the ABR website at

www.theabr.org
Why MOC?

• Public expectation
• Evidence of skill erosion over time
• Rapid changes in medicine
• CPR/BLS/ACLS
Why MOC?

- Many other professions require recertification:
  - pilots
  - nurses
  - paralegals
  - engineers
  - pharmacy techs
  - dental assistants
  - architects
  - hairdressers
  - ballroom dance instructors
  - child life specialists
  - nurse anesthetists
  - ecologists
  - professional massage therapists
MOC Components

• Part 1: Professional standing
  - State license

• Part 2: Lifelong learning and self-assessment
  - Cat 1 CME and SA-CME

• Part 3: Cognitive expertise
  - MOC exam
  - ABR Online Longitudinal Assessment (ABR-OLA)

• Part 4: Practice performance
  - Practice Quality Improvement (PQI) projects or participatory activities
Meeting MOC Requirements

10-Year Cycle System

Part 1: Valid licensure
Part 2: 250 CME and 20 SAMs every 10 years
Part 3: Exam every 10 years
Part 4: 3 projects every 10 years

Continuous Certification

Part 1: Valid licensure
Part 2: 75 CME, including 25 SA-CME in previous 3 years
Part 3: Pass OLA summative decision at the most recent annual review or have passed a traditional exam in previous 5 years
Part 4: 1 PQI project/activity every 3 years
Continuous Certification Basics

• All diplomates who are participating in MOC follow the continuous certification requirements.
• MOC participation evaluation is completed annually.
• Major MOC requirements are unchanged
• Fees are unchanged
• All ABR certificates issued 2012 and beyond are continuous.
• Ongoing validity of continuous certificates depends on meeting MOC requirements.
MOC Program Enhancements

• Activities that count as SA-CME expanded (2012)
• MOC Team Tracker Program launched (2013)
• PQI Participatory Activities added for fulfilling Part 4 requirements (2015)
• ABR Connections Customer Service Center launched (2015)
• Simplified MOC Annual Attestation implemented (2016)
• Updated ABR website launch (Fall 2017)
• ABR Online Longitudinal Assessment (ABR OLA) launch (2019)
Previous MOC process

- Required submission of information for Parts 1, 2, and 4 to ABR
- Submitted material was archived, but reviewed only if audited.
MOC Annual Review

<table>
<thead>
<tr>
<th>MOC Element</th>
<th>Compliance Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Standing</td>
<td>Valid, unrestricted state medical licenses in current state(s) of practice</td>
</tr>
<tr>
<td>CME</td>
<td>At least 75 Category 1 CME credits in previous 3 years</td>
</tr>
<tr>
<td>Self-Assessment CME (SA-CME)</td>
<td>At least 25 of the 75 Category 1 CME credits must be SA-CME.</td>
</tr>
<tr>
<td>Assessment</td>
<td>Pass most recent OLA summative decision or have passed a traditional exam in previous 5 years</td>
</tr>
<tr>
<td>PQI</td>
<td>Completed at least 1 PQI project or Participatory Activity in previous 3 years</td>
</tr>
<tr>
<td>Fees</td>
<td>Current with MOC fees</td>
</tr>
</tbody>
</table>
MOC Annual Attestation

• MOC annual attestation must be completed between Jan 1 and Mar 1 of each year

• Attestation can be completed quickly
  - no need to enter detailed data
  - save documentation in event of MOC audit

• MOC Team Tracker Group Practice Administrator (GPA) can complete attestation for participating diplomates

• Third party data feeds to myABR may automatically complete attestation for:
  • Part 1: data feed from Federation of State Medical Boards (FSMB)
  • Part 2: data feed from CME Gateway
  • Part 4: data feed from ABMS Multi-specialty Portfolio Program
Self-Assessment CME (SA-CME)

• SAMs (Self-Assessment Modules):
  - In-person Category 1 CME activities
  - Must have questions/feedback
  - Society-offered SAMs count as SA-CME

• SA-CME:
  - Enduring Category 1 CME activities

• 1 CME credit = 1 SA-CME credit
SA-CME

- No need to travel to earn SA-CME credits
- All SA-CMEs required can be obtained online
- Free to members of many organizations
MOC Annual Attestation

Dr. Jane Doe
Practice Locations: Highland Park, NJ
Participating in MOC

Certificate: Diagnostic Radiology
Status: Valid
Valid Through: 03/02/2017
Maintenance: Maintained
MOC Requirements: Certified, Meeting MOC Requirements

*Validity of certification is contingent upon participation in Maintenance of Certification. The ABR recommends verification of certification be repeated annually, three business days after the ABR’s March 2nd annual review.

MOC Attestations

Need help? Watch a how-to video regarding MOC Attestations

Continuing Education and Self-Assessment

Part 2 requires that you acquire a minimum of 75 AMA Category I continuing medical education (CME) credits, at least 25 of which are self-assessment CME (SA-CME) credits, during the period from 2014 to the present.

I have acquired 75 CME credits, at least 25 of which are SA-CME credits, during the period from 2014 to the present.

I Attest
MOC Annual Attestation – Part 1

State Licensure and Professional Standing

Part 1 requires unrestricted licensure to practice medicine in all states which you hold an active license.

Attested by state medical licensing board data on 01/01/2017
MOC Annual Attestation – Part 2

Continuing Education and Self-Assessment

Part 2 requires that you acquire a minimum of 75 AMA Category I continuing medical education (CME) credits, at least 25 of which are self-assessment CME (SA-CME) credits, during the period from 2014 to the present.

Attested by Jane Doe on 1/11/2017
MOC Annual Attestation – Part 3

MOC Attestations

MOC Examination

<table>
<thead>
<tr>
<th>Exam</th>
<th>Content</th>
<th>Location</th>
<th>Exam Required by:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnostic Radiology</td>
<td>Diagnostic Radiology</td>
<td>Online</td>
<td>When online assessment is available</td>
</tr>
</tbody>
</table>

Online Assessment FAQs
MOC Annual Attestation – Part 4

MOC Attestations

Need help? Watch a how-to video regarding MOC Attestations.

Part 1 Complete
Part 2 Complete
Part 3 Complete
Part 4 Complete

Practice Quality Improvement

Part 4 requires that you complete a PQI Project or Participatory Activity, as defined by the ABR, during the period from 2014 to the present.

Attested by Jane Doe on 1/11/2017
MOC Annual Attestation

You have an important notification.

- You are not required to take an exam before the online assessment is released. See your part 3 tab for details (Dismiss)

Public Reporting

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Practice Locations: Highland Park, NJ
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MOC Attestations

Need help? Watch a how-to video regarding MOC Attestations.

- All MOC requirements complete for 2017.
MOC Annual Attestation

• Overall feedback from diplomates has been very positive.
• Audits must be part of attestation.
• Balances the needs for self-regulation and professionalism
  - We trust our diplomates.
ABR Optional Programs

MOC Team Tracker

• For group practices
• Assists with attestation ‘bookkeeping’
• Authorized administrator can sign on to myABR and attest on your behalf
Future Focus: Part 3

• Requirement to pass a secure, proctored exam every 10 years.
• ABMS member boards are piloting alternatives:
  - Remote proctoring
  - Continuous assessment
    ABA: MOCA Minute™
    ABMS: CertLink™
• ABR Task Force assessed options with diplomate input.
Part 3 Alternatives Explored

- Distributed exam at test centers
- Real-time streamed exam
- Remote proctoring
- Distributed open book testing
- ABA MOCA Minute™ model
MOCA Minute™ Model

• Random question sent to device/email
• Opt in or out
• One minute to answer question
• Testing “walk-around knowledge”
• Beta tested by ABA in 2015
• General release January 2016
ABR Online Longitudinal Assessment (ABR-OLA)
ABR-OLA

- One item set for each certificate - or for DR + 1 subspecialty
- DR subspecialty content will be dual purposed.
- 104 opportunities (items) provided per year.
- 52 required item attempts per year
- Up to 10 “declines” per item set per year
- Opportunities administered weekly with opportunities having a 4-week shelf life.
- Opportunities are not converted to specific content until the diplomat chooses to answer an item.
ABR-OLA

• First passing decision based on 200-item summative decision threshold.

• Rolling summative decisions after the 200 item threshold.

• Must pass the most recent summative decision at annual review,
  OR

• Must pass a traditional exam taken in the previous 5 years
• No MOC exam required until OLA launch if meeting Part 3 in 2017
OLA is not an exam

• “Walking around knowledge”
• Not to be studied for
• Practice profiled for DR
ABR-OLA Benefits

• No travel needed to complete Part 3 requirement
• Little impact on workday
• Immediate feedback after question is answered
• Supplemental information provided (i.e. answer rationale)
• Option to “decline” up to 10 questions in each item set per year
• Flexibility – options for how frequently questions are answered
• Literature proven educational model
• Potential for retesting in areas of weakness
Traditional MOC Exams

• Will continue to be administered for:
  - those not meeting requirement in 2017
  - those who fail exam
  - those who don’t participate in OLA
  - those with inadequate performance on OLA
Do you have to take an MOC exam?

YES, if your certificate(s) expired in 2016 or earlier
NO, if you are meeting Part 3 requirements in 2017

Remember:
• No matter when you took your MOC exam, this does not “buy” you 10 years.
• 10-year cycles are gone – now we use Continuous Certification.
PQI: Part 4

• Most confusing part of MOC for many
• Societies provide many project templates.
• Group PQI projects encouraged.
• ABR changed Part 4 requirements in 2015 to:
  - Give radiologists credit for routine QI activities
  - Decrease burden of MOC
Expanded PQI Options

• PQI projects
  - More accepted methodologies
• Participatory Quality Improvement activities
  - Requires active participation, leadership, or management
PQI Projects

• Use any standard QI methodology
  • PDSA
  • Six Sigma, Lean, etc.
• Can be developed by an individual, group, department, healthcare system, or society
• ABMS Multi-Specialty Portfolio Program
• Remain the gold standard
Participatory Quality Improvement Activities

• Many categories of participatory activities
  • Documentation required if audited
• Requires active participation, leadership, or management
Participatory Quality Improvement Activities

- Clinical quality/safety review committee
- Peer review/OPPE
- RCA team
- 25 prospective chart rounds/yr (RO/MP)
- National registry
- Peer-reviewed QI/safety publication or presentation
Participatory Quality Improvement Activities

- Participation in 10 patient safety conferences per year
- Safety/QI program (scorecard/huddle)
- Peer or patient survey
- Leadership in QI program such Image Wisely, Image Gently, etc.
- National accreditation programs
- MQSA
- NCI cooperative group clinical trial
PQI: Part 4

http://www.theabr.org/moc-dr-comp4
The Storm over MOC

• Complaints about MOC from diplomates of many ABMS boards
• Biggest issue: ABIM
• ABR’s MOC process has always been very different from ABIM and other boards
# How did ABR MOC compare with ABIM (2015)

<table>
<thead>
<tr>
<th>MOC</th>
<th>ABR</th>
<th>ABIM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Part I: Licensure</td>
<td>Valid License</td>
<td>Valid License</td>
</tr>
<tr>
<td>Part II: CME</td>
<td>- Diplomate chooses content</td>
<td>Diplomate must use ABIM Modules for Self-Assessment</td>
</tr>
<tr>
<td></td>
<td>- Many choices:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- All AMA Cat 1 CMEs</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Live SAM Modules</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- SA-CMEs</td>
<td></td>
</tr>
<tr>
<td>Part III: Exam/Assessment</td>
<td>- Diplomate chooses content based on practice</td>
<td>ABIM-specified IM content regardless of practice focus</td>
</tr>
<tr>
<td></td>
<td>- New MOC Online Longitudinal Assessment (OLA) in development</td>
<td>Two Exams or choose one (IM or Subspecialty)</td>
</tr>
</tbody>
</table>
### How did ABR MOC compare with ABIM (2015)

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<thead>
<tr>
<th>MOC</th>
<th>ABR</th>
<th>ABIM</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PART IV: Quality Improvement (PQI)</strong></td>
<td>Diplomate chooses a project or department activity:</td>
<td>Complex point system with points coming from various ABIM-specified content areas (PIMs)</td>
</tr>
<tr>
<td></td>
<td>- Diplomate-designed</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Society-designed</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Department &amp; institutional projects &amp; activities</td>
<td></td>
</tr>
<tr>
<td><strong>Process Validation</strong></td>
<td>Collaboration/external validation</td>
<td>Board-developed Internally</td>
</tr>
<tr>
<td></td>
<td>- Advisory committees</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Surveys</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Professional society input</td>
<td></td>
</tr>
<tr>
<td><strong>Online Tools</strong></td>
<td>- MOC Team Tracker to ease diplomate busywork</td>
<td>None</td>
</tr>
<tr>
<td></td>
<td>- Simplified Attestation</td>
<td></td>
</tr>
</tbody>
</table>
Boards under fire . . .

• Onerous processes
• Excessive costs
• Lack of relevance
• Lack of effectiveness evidence
Maintenance of Certification Requirements

Acceptability vs. Difficulty
ABR MOC fee

• $340 per year = $0.93 per day
## Coffee

<table>
<thead>
<tr>
<th>Drink</th>
<th>Size</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>White Chocolate Mocha</td>
<td>Venti</td>
<td>$4.75</td>
</tr>
<tr>
<td>Freshly Brewed Coffee</td>
<td>Tall</td>
<td>$1.85</td>
</tr>
<tr>
<td>Freshly Brewed Coffee</td>
<td>Grande</td>
<td>$2.10</td>
</tr>
<tr>
<td>Freshly Brewed Coffee</td>
<td>Venti</td>
<td>$2.45</td>
</tr>
</tbody>
</table>
Donuts

• $0.99 - $1.29
Wine

**BevMo!**
- Rombauer chardonnay – $34.99
- Silverado cab - $44.99

**Trader Joe’s**
- Trader Joe’s Two Buck Chuck - $1.99
The message . . .

• In many ways, the value of board certification is proportional to the rigor of the process.
• The opportunity we (as radiologists) have to be a self-regulating profession is at risk if we don’t do it well.
• The ABR is ever-evolving to be relevant and reasonable.
Volunteer Opportunities with the ABR

• Eligible one year after certified
• Item writers – Core, Cert, OLA
• Angoff committee members
• SAM reviewers
• Advisory committee members
• Board members

www.theabr.org/abr-volunteering
Questions?

Please contact ABR Connections Customer Service at
information@theabr.org

Or 520) 519-2152