

ABMS Takes MOC Back to the Drawing Board

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Maintenance of certification (MOC), one of the most bitterly debated topics in medicine, will undergo yet another overhaul, the American Board of Medical Specialties (ABMS) announced last week.

The umbrella group for 24 specialty boards is forming a commission to "ensure a continuing board certification program that remains relevant and meaningful to physicians and the patients they serve," said John Moorhead, MD, who chairs the ABMS board of directors, in a news release.

Dr Moorhead's comment makes an oblique reference to widespread complaints by physicians that MOC is not relevant or meaningful to them. And how widespread a complaint? In August, 33 national medical societies and 41 state medical societies sent a letter to the ABMS proposing a meeting with the certifying medical boards to address the MOC "crisis."

"Concerns regarding the usefulness of high-stakes exams, the exorbitant costs of the MOC process, and the lack of transparent communication from the certifying boards have led to damaging the MOC brand, and creating state-level attacks on the MOC process," the societies stated.

ABMS President and CEO Lois Nora, MD, said that her group did not launch the MOC commission in response to the August letter from organized medicine. The commission concept has been brewing since spring, Dr Nora said in an email to *Medscape Medical News*, although "the concerns expressed by many in our medical profession certainly stimulated our thinking about the commission and recognition of the importance of engaging a broad group of stakeholders."

The commission will consist of 21 to 25 members chosen by a planning committee. This committee will include public members as well as representatives from the following groups:

- ABMS
- Accreditation Council for Continuing Medical Education
- Accreditation Council for Graduate Medical Education
- Council of Medical Specialty Societies
- Council of Medical Education of the American Medical Association
- The Coalition for Physician Accountability

The planning committee will conduct a national survey as part of a comprehensive assessment of the current system for MOC. On the basis of the findings, the planning committee and the commission will identify key questions to answer. The commission will hold hearings, provide public updates, and "test and seek feedback on concepts and ideas."

For the finale, the commission will submit its recommendations to the ABMS and constituent boards for consideration and implementation. This process should take 12 to 15 months, the ABMS estimates.

Foxes Guarding the Henhouse?

The ABMS touts MOC as a way for physicians to demonstrate to patients, hospitals, and the healthcare world at large that they're staying abreast of their specialty and sharpening their clinical skills. However, specialty boards in recent years have encountered a grassroots rebellion among physicians who say MOC requirements have become too time-consuming, expensive, and clinically irrelevant. Furthermore, hospital privileges and employment hinge on passing a recertification exam conducted every 10 years, they say, making it an unfair nail-biter. One outcome of this rebellion was the creation 2 years ago of a competing recertification process under the aegis of the new National Board of Physicians and Surgeons (NBPAS).

ABMS specialty boards have attempted to quell the furor with a number of reforms, some already instituted, others in the works. They include replacing the 10-year exam at a test center with more frequent online exams that can be taken at home, and giving physicians MOC credits for routine continuing medical education and participation in quality improvement projects where they work. In so many words, the boards are trying to streamline and lighten MOC.

However, these accommodations apparently did not go far enough to placate the 74 medical societies that asked the ABMS this summer to "discuss this crisis and plan a solution." They noted that "professional self-regulation is under attack" as various state legislatures have enacted, or considered, measures that would prevent MOC from being required for employment, hospital privileges, and participation in health insurance provider panels.

In interviews with *Medscape Medical News*, MOC dissidents expressed skepticism about the new commission that the ABMS plans to create. Westby Fisher, MD, author of the "Dr Wes" blog, said the members of the planning committee are long-time MOC supporters who amount to "foxes guarding the...henhouse." Dr Fisher, a cardiac electrophysiologist in Evanston, Illinois, asked whether the commission will include NBPAS board members.

The ABMS' Dr Nora responded to that question. She said the organizations represented on the planning committee include MOC critics who have "inspired many of the changes" by member boards. "I anticipate that the planning committee will develop a commission and a process that will present all sides." Whether an NBPAS board member makes it onto the commission is a planning-committee decision, Dr Nora added.

To MOC critics, whatever changes come from the new commission matter little if recertification by an ABMS specialty board remains a virtual requirement to work as a physician.

"I don't really care what they revamp [MOC] into," said pediatrician Meg Edison, MD, in Wyoming, Michigan, who, like Dr Fisher, belongs to a group called Practicing Physicians of America. "We should always have a choice to participate or not. Right now, if you don't participate, you are unable to practice medicine. Unless we get a guarantee to practice freely, they can tinker all they want."

Dr Edison said she's willing to serve on the commission.

Jane Orient, MD, a spokesperson for the Association of American Physicians and Surgeons, decried the notion that the ABMS is "the only authorized organization for determining whether physicians are qualified to continue practicing medicine.

"The best step the ABMS can take is to assure us that MOC is voluntary," said Dr Orient. "I don't think the ABMS is entitled to any special consideration. We need options."

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