Delegates seek more alignment of MOC, quality improvement work

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After extensive reference-committee discussion at the 2017 AMA Annual Meeting, the AMA House of Delegates adopted new policy on maintenance of certification (MOC) aimed at making the process less burdensome for physicians.

For the eighth consecutive year, the AMA’s Council on Medical Education presented a report to the House of Delegates (HOD) at the Annual Meeting. Much of it focused on steps the American Board of Medical Specialties (ABMS) member boards have taken to make the Assessment of Knowledge, Judgment and Skills (MOC Part III) more constructive and less onerous for physicians. The report also focused on the broadened range of acceptable activities that now meet Improvement in Medical Practice (MOC Part IV) activities.

Delegates adopted the report’s recommendation directing the AMA to advocate “that physicians who participate in programs related to quality improvement and/or patient safety receive credit for MOC Part IV.”

The report cited the ABMS Multi-Specialty Portfolio Program as one effective vehicle for accomplishing that. Formed in 2010, the program was developed to align MOC Part IV activities with physician and organizational quality improvement (QI) needs.

Essentially, the aim of the program is to give physicians MOC credit for the QI work they complete in tandem with their health care organization. Upwards of 1,800 different QI projects have been approved by the portfolio program, which has also engaged more than 9,300 physicians in practice improvement initiatives at hospitals and health systems across the country.
Listing MOC status online

In a move aimed at properly informing the public of a physician’s board-certification achievements, the HOD approved a resolution regarding online patient access to certification data.

Currently, physicians who pass their initial board certifications could see their names disappear from some ABMS member boards’ websites if they opt out of any of the four-part MOC process, according to the authors of a resolution the HOD considered. Delegates voted to challenge this practice, adopting the resolution’s proposed language that “the names and initial certification status of time-limited diplomates shall not be removed from ABMS and ABMS member boards’ websites or physician certification databases even if the diplomate chooses not to participate in MOC.”

The new policy seeks to apply the same protections to time-limited physicians—those who are required to recertify every 10 years—as it does to “grandfathered” physicians, who received their initial certification prior to the era in which recertification was requisite.

The HOD also took action to recognize that lifelong learning among physicians is “best achieved by ongoing participation in a program of high quality continuing medical education (CME) appropriate to that physician’s medical practice as determined by the relevant specialty society.”

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