Maintenance of Certification by the American Board of Radiology

Geoffrey S. Ibbott
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Who is ABMS

- Comprised of 24 medical specialty Member Boards, ABMS sets the standards for the certification process to enable the delivery of safe, quality patient care
- ABMS is the authoritative resource and voice for issues surrounding physician certification
- The public can visit www.abms.org to determine if their doctor is board certified by an ABMS Member Board

ABMS 24 Member Boards

The American Boards of:
- Allergy and Immunology
- Anesthesiology
- Colon and Rectal Surgery
- Dermatology
- Emergency Medicine
- Family Medicine
- Internal Medicine
- Medical Genetics
- Neurological Surgery
- Nuclear Medicine
- Obstetrics and Gynecology
- Ophthalmology
- Orthopaedic Surgery
- Otolaryngology
- Pathology
- Pediatrics
- Physical Medicine and Rehabilitation
- Plastic Surgery
- Preventive Medicine
- Psychiatry and Neurology
- Radiology
- Surgery
- Thoracic Surgery
- Urology
What is ABMS MOC™

- A process designed to document that physician specialists, certified by one of the Member Boards of ABMS, maintain the necessary competencies to provide quality patient care
- ABMS MOC promotes continuous lifelong learning for better patient care

Who Developed ABMS MOC?

- ABMS and its 24 Member Boards
- Collaborative efforts with a spectrum of medical and surgical specialties, as well as other organizations involved in the healthcare quality arena

ABMS MOC is Supported By

- Accreditation Council for Graduate Medical Education (ACGME)
- American Hospital Association (AHA)
- American Medical Association (AMA)
- Association of American Medical Colleges (AAMC)
- Council of Medical Specialty Societies (CMSS)
- Educational Commission for Foreign Medical Graduates (ECFMG)
- Federation of State Medical Boards of the U.S. (FSMB)
- National Board of Medical Examiners (NBME)
- The Joint Commission (TJC)
- National Committee on Quality Assurance (NCQA)
- Malpractice plans and insurance carriers

ABMS MOC History

1998 – Task Force on Competence established
1999 – General Competencies established
2000 – Statement on Commitment to MOC issued
2000 – Four Components of MOC adopted by all ABMS Member Boards
2006 – All Member Boards received approval of their MOC programs
Six General Competencies

- Medical knowledge
- Patient care
- Interpersonal and communication skills
- Professionalism
- Practice-based learning and improvement
- Systems-based practice

Four Components

1) Professional standing (licensure)
   Hold a valid, unrestricted medical license

2) Lifelong learning and self-assessment
   Evidence of participation
   Diplomates are expected to conform to general and specialty-specific standards

3) Cognitive expertise (examination)
   Covers the scope and range of the discipline
   Is clinically relevant

4) Practice performance assessment
   Proven scientific, educational and assessment methodology
   Reflects patient care and should result in quality improvement
   Collaborative efforts with other organizations

Why ABMS MOC?

- Certification is necessary but not sufficient; acknowledges growth and complexity of medical science
- Knowledge is necessary but not sufficient; acknowledges growth and complexity of clinical care
- Professional response to transparency, accountability and quality clinical care

- Certification → ABMS MOC
  - Snap shot → Continuous
  - Knowledge → Practice
  - Quality Assessment → Quality Improvement
  - Boards → Collaboration
August 2003 Gallup Poll:
When asked:
If you knew your doctor’s board certification had expired, would you change doctors?

- 54% Very Likely
- 27% Somewhat Likely
- 9% Not Too Likely
- 8% Not at All Likely

August 2003 Gallup Poll:
When asked:
When given the choice between a board certified physician and a physician who was not board certified but was recommended by a trusted friend or family member:

- 75% opted for a board certified physician
- 23% opted for the physician recommended by a friend/family member

Why ABMS MOC?
- Certification and MOC by an ABMS Member Board is the “gold standard” of credentialing for physicians
- ABMS MOC extends this standard throughout one’s career

SIX COMPETENCIES OF MOC
- Professionalism
- Practice-Based Learning/Self Improvement
- Practice Knowledge
- Patient Care
- Interpersonal/Communication Skills
- System-Based Practice
Four Components of MOC

- Component 1: Professional Standing
  - Validity of the license to practice.
- Component 2: Lifelong Learning and Self-Assessment
  - The requirement to keep current in the field.
- Component 3: Cognitive Expertise
  - Examination process.
- Component 4: Assessment of Practice Performance
  - Practice Quality Improvement.

Radiology’s Perspective of MOC

- 1998: Concerted efforts initiated by the ABR toward the development of its MOC process.
- A committee of medical physicists was appointed to formulate the MOC program for Radiological Physics.
- Dec 2001: The ABR convened a meeting to engage each of its sponsoring organizations in planning MOC.
- Jan 2004: ABR convened a series of meetings of sponsors to discuss MOC implementation.
- The ABR is responsible for executing MOC in radiology.
- Establishing mechanisms for life long learning will be the responsibility of the other radiology societies.

The ABR – Current MOC Status for Radiological Physicists

- 2002: ABR physics certification now time limited to 10 years.
- For Radiological Physics this includes:
  - Diagnostic Radiologic Physics
  - Therapeutic Radiologic Physics
  - Medical Nuclear Physics
- The process is intended to be 100% web based.