

## **Resolution 15-37**

### **MAINTENANCE OF CERTIFICATION**

Introduced by Scott Sanders, MD

Whereas, Maintenance of Certification (MOC) was purportedly developed to help physicians keep abreast of advances in their fields, develop better practice systems, and demonstrate a commitment to lifelong learning.

Whereas, prior to 1990, board certification was a lifelong certificate and physicians committed to lifelong learning through Accreditation Council for Continuing Medical Education (ACCME) - approved Continuing Medical Education (CME) credits on a yearly basis.

Whereas, after 1990, physicians must also pass a re-certification examination every 10 years.

Whereas, beginning in 2014, the newly established MOC requirements have added CMEs that must be approved by specialty societies (rather than any ACCME-approved product) as well as special CMEs that include self-assessment CME (SA-CME), and Performance in Practice (PIP) modules every 2-3 years. Failure to do so will result in revocation of board certification.

Whereas, MOC participation could be used as a requirement for hospital employment, hospital privileges, insurance reimbursements and licensure, so those who fail to participate will be unable to continue practicing medicine.

Whereas, many physicians feel that MOC is an expensive, burdensome, clinically irrelevant and of little benefit to physicians, patients, or society, according to a November 3, 2014 article in the Journal of the American Medical Association (JAMA).

Whereas, no data are currently available (as of 6-2-15) to study the impact of MOC requirements on the physician workforce, practice costs, outcomes, patient safety and access to care.

Whereas, there is no evidence that physicians who have completed the MOC requirements provide better care or produce better clinical outcomes.

Whereas, whether or not the MOC program accomplishes any of its goals is in doubt, with no proof of any benefit to physicians or patients, but does require annual payments by physicians to certifying agencies and requires physicians to spend time away from their families and/or medical practices to meet MOC requirements.

Whereas, physicians are currently burdened by other bureaucratic tasks to avoid pay cuts and practice disruptions, including Meaningful Use (MU), Physician Quality Reporting System (PQRS), ICD-10 implementation, and others.

RESOLVED, that the Indiana State Medical Association (ISMA) oppose further requirements for physician board certification of Indiana physicians beyond the 10-year board re-certification exams, placing on hold any additional Maintenance of Certification (MOC) requirements until objective study of the validity and cost-effectiveness of such additional requirements are complete; and be it further

RESOLVED, that this resolution be forwarded to the AMA House Of Delegates.

**STATUS:** Resolution 15-37 was introduced at the November AMA interim meeting and became Resolution 903, and it was referred to the AMA Board of Trustees.