



Maintenance of Certification for ABNM Diplomates

Maintenance of certification (MOC) is the generic term describing the process designed to promote and document continued physician competency and familiarity with changing science and techniques in individual specialties. In nuclear medicine, MOC is conducted under the guidance of the American Board of Nuclear Medicine (ABNM), with the goal of assisting physicians in identifying and maintaining necessary competencies in the continued provision of quality patient care. As requirements for MOC are implemented and a range of new educational programs are offered, many nuclear medicine practitioners are looking for clarification, specifically with questions about what will be required of whom and when.

Lifetime Certificate Diplomates

Although the ABNM has no plans to revoke or withdraw lifetime certificates from those individuals who choose not to participate, the board has clearly stated that such participation is “expected” from lifetime certificate diplomates. If a lifetime certificate holder chooses to participate in MOC, all 4 parts of the program must be fulfilled to receive ABNM. This effort includes:

- (1) Maintaining in good standing a license to practice medicine.
- (2) Earning 50 continuing medical education (CME) credits per year, of which 25 must be category I, with 17.5 of the 25 in nuclear medicine and 8 of the 17.5 being self-assessment modules (e.g., the SNM Lifelong Learning and Self-Assessment Program; www.snm.org/lfsap).
- (3) Passing an MOC exam. The MOC examination that has replaced the recertification examination must be taken to fulfill part 3 of the MOC requirements. Lifetime certificate holders who received their certification from 1972 through 1976 will take the MOC examination in 2015. Those who received their certification from 1977 through 1986 will take their examination in 2016, and those from 1987 through 1991 in 2017. The ABNM encourages diplomates to take the examination up to 2 years earlier than the dates specified.
- (4) Practice-specific continuous quality improvement. This component of MOC is still in development. More details will be provided in future issues of Newsline.

Submission of the annual \$150 administrative fee does not automatically enroll a lifetime certificate holder in the MOC program. All diplomates are required to enroll in the MY PROFILE section of the ABNM MOC Web site (www.abnm.org), which indicates to the ABNM an intention to participate in MOC. It should be noted that submission of the \$150 fee does not relinquish lifetime certification, nor does participation in MOC affect the certificate.

The question then arises, “If MOC is not yet explicitly required, why participate?” We are all busy—and many of us have significant experience and confidence in our abilities. The answers are both simple and challenging. First, it is the right thing to do. All aspects of our field are changing rapidly, and it is prudent for each of us to avail ourselves of the learning opportunities designed to assist in staying current with advancing science and techniques. This is an obligation we have to our patients, colleagues, and trainees. Moreover, the time is not far distant when all hospitals will require demonstration of MOC participation as a prerequisite of renewed staff privileges, and third-party payers will require such participation for provider credentialing and reimbursement. State licensing boards may also adopt the requirement for MOC participation for medical license renewal. Also looming large is the prospect of requirements for MOC participation and other compliance metrics as part of Centers for Medicare and Medicaid Services “pay for performance” initiatives.

Time-Limited Certificate Diplomates

A diplomate of the ABNM with a time-limited certificate will not be permitted to sit for the MOC examination (which, again, has replaced the recertification exam) unless he or she is participating and up to date in the MOC program as administered by the ABNM. When a credentialing body needs evidence that a diplomate is participating in MOC, the ABNM must determine that the diplomate is up to date for each of the 4 parts of MOC. It is critical, therefore, that each physician stay current with MOC.

Evidence of participation in MOC must be demonstrated every 10 years, beginning in 2007, and all ABNM diplomates will be on the same cycle. This 10-year cycle is not based on dates of examination. For example, even if an individual is scheduled to take the recertification exam in 2011, the MOC cycle will still begin in 2007. This means that the individual must still take the new MOC exam in

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medical schools, or research institutes. Students participate in both classroom activities and scientific experiments, working side-by-side with space scientists from research organizations and

universities. Experimental creativity and interdisciplinary approaches are emphasized. “This year’s crop of students is the most internationally diverse yet, with 11 different countries repre-

sented,” said Guida. “Even though the program is only in its 4th year, many of our graduates are already making contributions to the field.”

Brookhaven National Laboratory

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2011 but will also need to demonstrate active participation in MOC activities over the entire 10-year period extending from 2007 until 2017.

The ABNM is providing an online service (MY PROFILE under MAINTENANCE OF CERTIFICATION at www.abnm.org) so that each diplomate may document the components for his or her MOC, including CME and self-assessment module CME credits. The ABNM initiated a \$150 yearly administrative fee in 2006 for MOC documentation on its Web site as validation of candidates’ participation in the MOC program. For individuals who delay paying the yearly fee, the past year’s fee will be added to current charges when that diplomate requests participation in MOC.

A Tradition of Assuring Quality Care

Although this MOC program is new, organized medicine has long recognized the need to assure the public that physicians take active steps to provide quality care. In 1917, the general board certification program was first adopted in the United States. Today, 90% of practicing physicians are certified by 1 of the 24 boards accredited by the American Board of Medical Specialties (ABMS). It is the ABMS that has mandated that each discipline’s specialty board adopt an MOC program. As a result, the ABNM introduced its

program, with the requirement for participation from timed-certificate holders and the expectation of participation from lifetime certificate holders. If there is any doubt about the need for the program or the importance of reassuring the public, one has only to look at the frequent national news stories about medical errors and poor-quality practice. In 2004, the Institute of Medicine stated to Congress and the nation that: “44,000–98,000 Americans die each year as a result of preventable errors caused by faulty systems or processes used in their care. Health care systems fail to translate knowledge into practice.”

Each month, Newsline features additional information to help physicians understand the options in fulfilling each part of the MOC program. Those who are diplomates of the American Board of Radiology (ABR) or have Special Competence in Nuclear Medicine certification by the ABR should refer to the specific requirements of the ABR MOC Program (www.theabr.org), which differs from the ABNM MOC program.

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