INTRODUCED BY: Wicomico County Medical Society
Talbot County Medical Society

SUBJECT: Maintenance of Certification (MOC), Osteopathic Continuous Certification (OCC), and Maintenance of Licensure (MOL) vs. Board Certification, CME and Lifelong Commitment to Learning

Whereas, Physicians are among the nation’s most rigorously trained professionals; and

Whereas, Requirements for maintaining the skills needed to serve their patients vary greatly depending upon the medical specialty, the patient population, facilities, and treatments available; and

Whereas, The individual Physician, rather than nonmedical testing and psychometrics officials within Maintenance of Certification (MOC/OCC) Corporations, is in a better position to determine how best to maintain the needed practice skills; and

Whereas, Annual externally imposed study requirements enforce conformity rather than encourage the independence of thought, research, and investigational pursuits essential for innovative professional careers and creative medical scientists; and

Whereas, Physicians prefer independent lifelong learning through and in collaboration with universities and specialty societies to define medical excellence within their profession rather than MOC/OCC test scores; and

Whereas, Specialty Boards statisticians and (MOC/OCC) test designers have applied an industrial-based modified Angoff Standard for determining the minimum level of subspecialty competence while this standard is known to fail in medicine, science, and clinical issues of high complexity; and

Whereas, Many believe the direct and indirect costs of mandatory recertification are unprecedented in other businesses or health care professions; and

Whereas, High cost MOC/OCC programs divert Physician funds and require significant Physician time commitments away from their practices and patient care services, empowering nonmedical regulators and insurers while disenfranchising patients and Physicians; and

Whereas, Mandatory recertification has already reduced patient access to care by encouraging early retirement of Physicians who are providing excellent, much needed care; and

Whereas, MOC/OCC revenues finance generous executive salaries and private, tax-exempt, high revenue professional testing industry and a corporate testing monopoly; and

Whereas, Linkage of a Physician’s hospital staff privileges solely to MOC recertification violates Code of Federal Regulations &The Joint Commission (formerly JCAHO) medical staff credentialing recommendations (Section 482.22 a2); and

Whereas, Alternate (other than ABMS) certification and recertification agents and programs (NBPAS.org and ABPSUS.org) are available in the United States; and

Whereas, There is no current Maryland State Medical Society (MedChi) policy calling for opposition to mandatory MOC requirements for Physicians and Physicians already board-certified; and

Whereas, The Maryland State Medical Society (MedChi) is resolved to oppose interference with the Patient–Physician relationship including the opposition to and pursuit of actively defeating efforts by The American Board of Medical Specialties (ABMS), The Federation of State Medical Boards, Inc. (FSMB), The American Osteopathic Association (AOA), in their efforts to impose effective mandatory Maintenance of Certification (MOC) and/or Maintenance of Licensure (MOL) and or Osteopathic Continuous Certification (OCC) in Maryland as such efforts have no evidence of improving patient care, have and will continue to decrease access to Physician care by excluding non-certified licensed Physicians, encourage early retirement of Physicians, place an undue time and financial burden on Physicians; and

Whereas, The Maryland State Medical Society (MedChi) joins other medical associations to oppose and actively defeat efforts by ABMS, AOA, and the FSMB that suggest the use of MOC/OCC as a condition of employment, licensure or reimbursement (such as occurred in Ohio in 2012 by the Ohio State Medical Association); and

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Whereas, The American Board of Medical Specialties (ABMS), American Osteopathic Association (AOA), and The Federation of State Medical Boards, Inc. (FSMB) have pressed and continue to press legislation coupling insurance payments, hospital privileges and other employment opportunities to active enrollment in “time limited” Board Certification and the associated MOC/OCC program(s) in a nationwide fashion, imposing this upon the practice of medicine in Maryland; and

Whereas, The MOC/OCC program(s) is(are) expensive, unproven, directed toward bureaucratic compliance and entry level medical knowledge, waste(s) resources by requiring participation in time limited MOC/OCC-CME (Continuing Medical Education) programs directly and selectively benefiting the ABMS/AOA only; and

Whereas, The ABMS and AOA have changed the actual concept of Board Certification for life from representing quality of specialty training (just as a diploma bestows the lifelong medical degree to Physicians) to a business model of “time limited” and further implemented yearly participation enrollment (MOC/OCC) to further corporate profits in the 100’s of millions of dollars and against active Physician opposition; and

Whereas, The American Medical Association’s Physician Recognition Award and CME program (with osteopathic equivalencies) was successfully formed in the late 1960’s and meets all needs of documenting lifelong commitment to learning to include individual Physician’s choice and competitive offerings of educational materials in CME, that experience and reason is an accepted and important aspect to excellent care, and that licensing of Maryland Physicians to practice medicine does not, and should never require certification; and

Whereas, These ABMS, AOA, and FSMB national efforts continue to impose on the Physicians of Maryland in an adverse manner, imposing the regulatory capture of medical care at the national level and have resulted in active AMA/AOA opposition on a national level; therefore be it

Resolved, that MedChi, The Maryland State Medical Society, pursues to uphold and maintain the importance of the Patient-Physician relationship independent of outside interference as the key to excellent medical care, that Physicians are bound by generally accepted professional and ethical values in pursuit of best care for patients, and reaffirms the value of continuing medical education; and be it further

Resolved, that MedChi, The Maryland State Medical Society, continues to support, advocate, and affirm the professionalism of the Physician to pursue the best means and methods for maintenance and development of their knowledge and skills, to advocate against time-limited specialty medical board certificates, and advocate against discrimination against Physicians who are not certified or are certified and choose not to engage in re-certification programs labeled as "voluntary" or otherwise by the specialty medical boards; and be it further

Resolved, that MedChi, The Maryland State Medical Society, maintains that imposition of Board Certification shall not be allowed by corporate insurance, hospitals, employers restricting any ability to practice medicine beyond that afforded by a state license; and be it further

Resolved, that MedChi, The Maryland State Medical Society, promote and/or implement a policy forbidding discrimination by hospitals or employers, the Maryland State Board of Physicians, insurers, Medicare, Medicaid, and other entities, which might restrict a Physician's right to practice medicine without interference (including economic discrimination by varying fee schedules) due to lack of certification or participation in ABMS/AOA/FSMB prescribed corporate programs including Maintenance of Licensure or time limited board certification; and be it further
Resolved, that MedChi, The Maryland State Medical Society, seek legislation in Maryland that will prohibit discrimination by hospitals and any employer, the Maryland State Board of Physicians, insurers, Medicare, Medicaid, and any other entities, which might restrict a Physician's right to practice medicine without interference (including economic discrimination by varying fee schedules) due to lack of certification, lack of participation in ABMS/AOA/FSMB prescribed corporate programs including Maintenance of Licensure or expiration of time limited certificate of Board Certification, and to insure that all corporate certifications from every national agency (ABMS, NBPAS.org and ABPSUS.org) be accepted as equally viable documents for any and all credentialing and payment requirements and be regarded without time limits to thus abolish the regulatory capture of medicine by any American certification corporations; and be it further

Resolved, that MedChi, The Maryland State Medical Society, urge our AMA and AOA to adopt as policy this resolution forbidding discrimination by hospitals or employers, by any state board of medical licensure and supervision, insurers, Medicare, Medicaid, and any other entities, which might restrict a Physician’s right to practice medicine without interference (including economic discrimination by varying fee schedules) due to lack of certification or participation in ABMS/AOA/FSMB prescribed corporate programs including Maintenance of Licensure or time limited Board certification as was suggested by the AMA Young Physicians Section Governing Council in 2007.

Fiscal Note: Included in existing legislative and AMA delegation budgets.