



American Academy of  
Physical Medicine and Rehabilitation

## **Four Steps to Maintenance of Board Certification**

*Crack the certification code by completing these steps every 10 years*

When does your board certification expire? To determine when or if you must maintain your certificate, check the year the certificate was issued.

Since 1993, all certificates issued by the American Board of Physical Medicine and Rehabilitation (ABPMR) have been valid for ten years, at which point diplomates are required to “recertify.” In recent years, the recertification process has been elevated to a more involved process of Maintenance of Certification (MOC).

Prior to 1993, all certificates issued by the ABPMR had no expiration date and therefore are known as “lifetime certificates.” Diplomates who hold such certificates are encouraged, but not required, to participate in MOC. Many elements of the MOC program may be needed for local credentialing and/or to maintain state licensure.

So what is Maintenance of Certification (MOC)?

In 2000, the American Board of Medical Specialties’ 24 Member Boards, including the American Board of Physical Medicine and Rehabilitation (ABPMR), agreed to evolve their recertification programs to one of continuous professional development known as the ABMS Maintenance of Certification<sup>®</sup> (ABMS MOC<sup>®</sup>). MOC is a way to continually measure a physician’s competency. This includes the physician’s medical knowledge, patient care, interpersonal/communication skills, professionalism, practice-based learning/improvement, and systems-based practice. It is an ongoing process designed to foster excellence in patient care and support physiatrists’ commitment to lifelong learning and continual professional development over a lifetime of practice in PM&R. In addition, the process assures the public that board certified specialists remain current with evolving knowledge, their practices meet acceptable standards, and they are recognized and respected as specialists by their patients and peers.

ABMS MOC<sup>®</sup> assures that the physician is committed to lifelong learning and competency in a specialty and/or subspecialty by requiring ongoing measurement of six core competencies adopted by ABMS and ACGME in 1999. Measurement of these competencies happens in a variety of ways, some of which vary according to the specialty. This is carried out by all Member Boards using a four-part process that is designed to keep certification continuous.

Let’s take a closer look at the four parts of MOC: Professional Standing, Lifelong Learning and Self Assessment, Cognitive Expertise, and Practice Performance.

## **Part I. Professional Standing**

Professional standing involves a diplomate's license.

After completing PM&R training in a program accredited by the Accreditation Council for Graduate Medical Education (ACGME), physicians are required to complete a state licensure examination. They may then apply for optional board certification. In order to become board certified, physicians must hold a current, valid, and unrestricted license to practice medicine in the United States, its territories, or Canada. They must maintain a current, valid, and unrestricted license to keep their board certification.

The Academy does not have a hand in issuing licenses, administering exams, or managing requirements for MOC. Instead, **the Academy provides resources to help physicians meet requirements**. The Academy also maintains transcripts and reports CME and AAPM&R self-assessment information to the ABPMR to help members with what can be an overwhelming task of organizing and tracking CME hours (see *Which Credits Do I Need to Report* section below for more information about reporting credits).

### **Academy tools to help you meet part I:**

Residents can access the abridged version of the Self-Assessment Examination for Residents (SAE-R) via academe ([www.me.aapmr.org](http://www.me.aapmr.org)) to help prepare for their board exams; the SAE-R is not available for CME credit or to satisfy part II of MOC, but it is a helpful study tool.

## **Part II. Lifelong Learning and Self Assessment**

Lifelong learning includes continuing medical education (CME) and self-assessment examinations. All ABPMR diplomates (all psychiatrists board certified in PM&R) are required to complete and report a minimum of 300 *AMA PRA Category 1 Credits*<sup>TM</sup> by the end of their 10-year MOC cycle.

These 300 credits must be Category 1 credits, meaning CME credits offered by an accredited provider. Accredited providers include the Academy and other organizations, universities, hospitals, and institutions that provide CME activities in journals, presentations at conferences, CME enduring materials, and other CME opportunities.

At least fifty percent (50%) of these 300 credits must be within the physician's specialty area or practice in order to meet the ABPMR Part II CME requirement.

Diplomates with certificates expiring in 2010 and beyond must also participate in four self assessments during the 10-year MOC cycle. Professional organizations develop the Self-Assessment Examinations (SAEs). When physicians complete an Academy SAE, they help meet the self-assessment requirement and also receive 15 hours of Category 1 CME credit for each completed SAE.

### **Academy tools to help you meet part II:**

The Academy offers a variety of Category 1 CME opportunities including:

- Online CME through academe ([www.me.aapmr.org](http://www.me.aapmr.org)) via courses, case studies, slide lectures, and podcasts

- Live courses (i.e. Annual Assembly, Spinal Procedures Workshops, Sports Medicine Board Examination Review Course, etc.)
- Journal-based CME via *PM&R* ([www.pmrjournal.org](http://www.pmrjournal.org)) and *acadeME*
- And more on *acadeME*

Physicians can complete the following Self-Assessment Examinations for Practitioners (SAE-P) on *acadeME* to help meet part II:

- Industrial Medicine & Acute Musculoskeletal Rehabilitation (CME credit expires March 2010)
- Spinal Cord Injury Medicine (CME credit expires in March 2010)
- Congenital and Acquired Brain Injury
- Interventions in Chronic Pain Management
- Rehabilitation of Stroke and Neurodegenerative Disorders
- Sports and Performing Arts Medicine
- Inpatient Rehabilitation
- General Outpatient Physical Medicine & Rehabilitation
- Sports Medicine (Subspecialty Board Review)
- Coming in Spring 2010: Pediatric Rehabilitation

### **Part III. Cognitive Expertise**

Cognitive expertise is measured by the ABPMR MOC examination. This closed-book, computer-based exam includes 160 questions covering 16 content areas related to *PM&R*. It may be taken in years 7-10 of the MOC cycle. Note: Even if the diplomate takes the examination before the 10-year cycle is over, they must still complete the remaining requirements for MOC prior to the expiration date of their current certificate in order to be recertified.

#### **Academy tools to help you meet part III:**

Academy products such as the SAE-R and SAE-Ps can be used as practice exam tools to test knowledge and help identify knowledge gaps for exam preparation.

### **Part IV. Practice Performance**

Practice performance is ultimately quality improvement. Currently the Board offers Practice Improvement Projects (PIPs) as a way to fulfill the part IV requirement. For certificates expiring in 2010 and beyond, a minimum of one PIP must be completed during the 10-year MOC cycle.

The diplomate must select an appropriate area for self-improvement within his or her own practice setting and develop a specific project with a goal of improving an element of their clinical practice.

Currently, clinically inactive physicians participating in MOC will not be required to participate in Part IV of MOC (Practice Performance). The ABPMR must be notified of non-clinical status. If, during the MOC cycle, the diplomate returns to clinically active status, the diplomate must notify the ABPMR and he or she must fulfill the fourth component requirements of MOC.

#### **Academy tools to help you meet part IV:**

The Academy provides several courses related to PIPs at its Annual Assembly each fall. Visit the ABPMR Web site ([www.abpmr.org](http://www.abpmr.org)) for tools and resources for planning and carrying out PIPs and to learn more about MOC.

**Which credits do I need to report?**

Beginning January 1, 2008, the Academy automatically reports all CME activities completed with the Academy to ABPMR, saving members the time and effort of reporting it themselves.

**Members need to record third-party CME themselves.** Members may report the information directly to ABPMR on their own, or they may enter third-party CME credits earned since January 1, 2008, into the online transcript tool on academe ([www.me.aapmr.org](http://www.me.aapmr.org)). With the permission of the member, the Academy will then report to the Board those third-party CME credits (CME data earned through other organizations) that physician learners have entered.

This service is a members-only benefit. Response from those who have used this service has been overwhelming: The process simplifies lives and eases minds by storing all CME data in a single place. This single storage solution can help with reporting CME for hospital credentialing, state licensure, and MOC. You will want to keep original CME records issued by other organizations – but you will never need to sift through those documents again. Whenever you need to print an updated transcript, it will be waiting for you on academe. As soon as you obtain a CME certificate, log on to academe, enter the information, and mark the checkbox if you'd like your Academy to pass that information to the Board for you.