CMEs for MOC 101

Disclaimer: The following information is a summary of the MOC requirements. Individuals are encouraged to access each board’s program requirements from the ACCME or Specialty Board’s website.
ACCME Collaborations with the ABMS

Goal: To simplify and align the Maintenance of Certification (MOC)

• American Board of Anesthesiology (ABA) MOCA
• American Board of Internal Medicine (ABIM) MOC
• American Board of Ophthalmology (ABO) MOC
• American Board of Otolaryngology–Head and Neck Surgery (ABOHNS) Continuing Certification
• American Board of Pathology (ABPath) Continuing Certification
• American Board of Pediatrics (ABP) MOC
General Information

• All accredited CME providers may offer MOCs
• No application to the board is required
• Submit registration information through PARs
• Attest to:
  ✓ Comply with certifying board requirements
  ✓ Agree to collect/submit the required individual learner completion data and submit it via PARS
  ✓ Agree to abide by certifying board/ACCME requirements for use of the data
  ✓ Agree to allow ACCME to publish data about the activity on ACCME’s website
  ✓ Agree to comply with requests for information about the activity if the activity is selected for an audit by the ACCME
• Agree for the ACCME to share information with the specific boards
• Display activity in CME Finder
• Allowed to use the MOC board’s logo or badge
General Information Continued

• No fees due to the boards at this time
• May charge participant fees
• Accredited provider is responsible for activity costs and administration
• Topics must be relevant to the specific board’s diplomates
• May be designated for MOC points up to the maximum allowable AMA PRA Category 1 Credits or less
• Disclose to the learner if data will be shared with the funder or commercial entities prior to the beginning of the activity
• Disclose to the learner completion information will be shared with the ACCME and Specialty Board
Compliance

• Must follow all ACCME Criteria, Standards for Commercial Support, and Policies
• Must comply with privacy and security compliance
• Must conform to all relevant regulatory and industry requirements
<table>
<thead>
<tr>
<th>Activity Types</th>
<th>ABA*</th>
<th>ABIM</th>
<th>ABO</th>
<th>ABOHNS</th>
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*ABA honors activity types as listed in the AMA PRA Booklet*
Evaluation / Self-Assessment Requirements

• Develop evaluation measuring the impact of the activity on the physician learner’s knowledge, strategies/skills, performance, and/or patient outcomes through learner engagement

• Determine minimum participation threshold demonstrating learner’s meaningful engagement in the activity

• Provide feedback to the participant (correct answers, attainment of skills, and relevant citations)
PARS Submission Timeline

• ABP MOC learner completion data due by December 1st or within 30 days of activity completion

• ABP MOC activities conducted after December 1st submit data immediately after activity

• ABPath completion data due within 30 days of completion

• ABA, ABIM, ABO, and ABOHNS MOC and Continuing Certification due by December 31.
# Participant Completion Information

<table>
<thead>
<tr>
<th>Participant Information</th>
<th>ABA</th>
<th>ABIM</th>
<th>ABO</th>
<th>ABOHNS</th>
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ABA Diplomates require:
- 250 AMA PRA Category 1 Credits
- 20 AMA PRA Category 1 Credit in Patient Safety

May not be advertised as a board review or board preparation activity

May be designated as a patient safety activity (Refer to the requirements for more information.)
ABA Promotion Guidelines

• The first reference to “The American Board of Anesthesiology®, “Maintenance of Certification in Anesthesiology™ program” or “MOCA®” should include the “TM” trademark or “®” registration symbol in superscript. The following statement should also appear on the same page with the first usage:
  “Maintenance of Certification in Anesthesiology™ program and MOCA® are registered trademarks of The American Board of Anesthesiology®.

• The first reference to “MOCA 2.0®” should include the “®” registration symbol in superscript. On the same page with the first usage of MOCA 2.0®, the following language should appear:
  “MOCA 2.0® is a trademark of The American Board of Anesthesiology®.”
ABA Promotion Guidelines

• Category 1 CME Only:
  “This activity contributes to the CME component of the American Board of Anesthesiology’s redesigned Maintenance of Certification in Anesthesiology™ (MOCA®) program, known as MOCA 2.0®. Please consult the ABA website, www.theABA.org, for a list of all MOCA 2.0 requirements.”

• Category 1 CME and Patient Safety:
  “This activity offers up to xx CME credits, of which xx credits contribute the patient safety CME component of the American Board of Anesthesiology’s redesigned Maintenance of Certification in Anesthesiology™ (MOCA®) program, known as MOCA 2.0®. Please consult the ABA website, www.theABA.org, for a list of all MOCA 2.0 requirements.”

• Patient Safety Only:
  “This activity contributes to the patient safety CME requirement for the CME component of the American Board of Anesthesiology’s (ABA) redesigned Maintenance of Certification in Anesthesiology™ (MOCA®) program, known as MOCA 2.0®. Please consult the ABA website, www.theABA.org, for a list of all MOCA 2.0 requirements.”

• Approved Terms: ABA diplomates or ABA diplomates participating in MOCA
American Board of Internal Medicine (ABIM)

• ABIM diplomats require: 100 MOC points every 5 years
• Activities must meet the Requirements for all MOC Activities (1-5)
• Activities registered for ABIM Medical Knowledge MOC points must meet the applicable format-specific requirements (6-7)
• Activities registered for ABIM Patient Safety MOC points must meet ABIM 15
• Activities may be registered for one or a combination of credit types
• ABIM Patient Safety MOC cannot be offered alone
ABIM Requirements 1-5

• ABIM 1: Defines Activity Types Allowed
• ABIM 2: Relevant to ABIM physician learners as demonstrated by professional practice gap and content of the activity
• ABIM 3: Evaluation measures the impact of the activity on the physician learners’ knowledge, strategies/skills, performance, and/or patient outcomes
• ABIM 4: Includes minimum MOC participant threshold demonstrating physician learners meaningful engagement and provides feedback to the learners
• ABIM 5: The ABIM MOC Recognition Statement is provided to learners the start of the activity
ABIM Requirements 6-7: Medical Knowledge

• ABIM 6: Peer-reviewed (by clinicians who are sufficiently familiar with the subject matter) by at least 2 reviewers who are not authors and who can render an opinion as to whether the activity/materials align with learning objectives and are fair, accurate, and free of commercial bias – Required for all activity types except Internet Searching and Learning, Performance Improvement, and Test Item Writing

• ABIM 7: Physician Learner participates in the planning process that includes 3 members – Required for Test Item Writing Only
ABIM Requirements 8-13: Practice Assessment

• ABIM 8: Addresses quality or safety gap supported by a needs assessment or problem analysis

• ABIM 9: Addresses care, care processes, systems of care in one or more of the National Academy of Medicine’s quality dimensions or one or more of the 3 AIMS or 6 Priorities articulated in the National Quality Strategy

• ABIM 10: Has specific, measurable aims for improvement

• ABIM 11: Uses measures appropriate for the aims for improvement

• ABIM 12: Includes interventions intended to result in improvement

• ABIM 13: Includes appropriate data collection and analysis of performance data to assess the impact of the interventions
ABIM Requirements 14

• Defines the minimum participation threshold for MOC
• Describes how to identify physician learners that are meaningfully engaged in the activity
• Physician learners participate in one or more of the areas outlined in ABIM 8-13
ABIM Requirements 15

• Addresses at least one of the following topics:
  ✓ Foundational Knowledge
    ▪ Epidemiology of Error
    ▪ Fundamentals of patient safety improvement
    ▪ Culture of Safety
  ✓ Prevention of adverse events
    ▪ Medication Safety
    ▪ Prevention of healthcare acquired infections
    ▪ Falls prevention
    ▪ Teamwork and care coordination
ABIM Recognition Statement

• “Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to [MOC point amount and credit type(s)] MOC points [and patient safety MOC credit] in the American Board of Internal Medicine's (ABIM) Maintenance of Certification (MOC) program. Participants will earn MOC points equivalent to the amount of CME credits claimed for the activity. It is the CME activity provider's responsibility to submit participant completion information to ACCME for the purpose of granting ABIM MOC credit.”

• “Participants will earn MOC points equivalent to the amount of CME credits claimed for the activity.” may be omitted if part of a larger activity.
ABIM Resources Available Online

- Description of the Elements of Audit
- Evaluation Examples
- ABIM Abstract
American Board of Ophthalmology (ABO)

• ABO diplomate requires an average of 50 AMA PRA Category 1 Credits™, including:
  ✓ 16 credits that qualify as self-assessment
  ✓ 1 activity that qualifies as patient safety
  ✓ 2 activities from the Improvement in Medical Practice Menu

• Activities must be registered for the following credit types:
  ✓ Lifelong Learning (Part II)
  ✓ Self-Assessment
  ✓ Improvement in Medical Practice (Part IV)
  ✓ Patient Safety

• Activities cannot be registered for both Improvement in Medical Practice and Patient Safety
Improvement in Medical Practice (MOC Part IV) Requirements

• Address quality or safety gap supported by needs assessment/problem analysis
• Address care, care processes, or systems of care in one or more of the National Academy of Medicine’s quality dimensions or one or more of the 3 aims or 6 priorities articulated in the National Quality Strategy
• Have specific, measurable aims and use measures appropriate to the aims for improvement
• Include interventions intended to result in improvement
• Include appropriate data collection and analysis of performance data to assess the impact of the interventions
• Provider defines the minimum participant threshold and describes how the diplomates who meaningfully engage will be identified
Patient Safety Credit Requirements

• Must be registered for Lifelong Learning
• May be registered for Self-Assessment if it meets the requirements
• Meets at least one of the following topics
  ✓ Foundational knowledge:
    ▪ Epidemiology of error
    ▪ Fundamentals of patient safety information
    ▪ Culture of safety
  ✓ Prevention of adverse events:
    ▪ Prevention of healthcare acquired infections
    ▪ Falls prevention
    ▪ Teamwork and care coordination
    ▪ Medication Safety
“Successful completion of this CME activity, which includes participation in the evaluation component, enables the learner to satisfy the Lifelong Learning, Self-Assessment, Improvement in Medical Practice and/or Patient Safety requirements for the American Board of Ophthalmology’s Maintenance of Certification program. It is the CME activity provider's responsibility to submit learner completion information to ACCME for the purpose of granting MOC credit."
ABO Resources

• Descriptions of the elements of audit
• Evaluation Examples
The American Board of Otolaryngology-Head and Neck Surgery (ABOHNS)

- Diplomates must complete 25 hours of AMA category 1 CME credits and either successfully participate in CertLink or complete one ACCME PARS registered CME activity in the otolaryngology focused area of their choice
ABOHNS Requirements

• May be registered for Patient Safety, if it meets the requirements
• May be registered for Improvement in Medical Practice (Part 4) if it meets requirements and designed to assess/improve quality of practice
  ✓ Addresses quality or safety gap supported by needs assessment/problem analysis
  ✓ Addresses care, care processes, or systems of care in one or more of the National Academy of Medicine’s quality dimensions or one or more of the 3 Aims or 6 Priorities articulated by the National Quality Strategy
  ✓ Has specific, measurable aims for improvement
  ✓ Uses measures appropriate to the aims for improvement
  ✓ Includes interventions intended to result in improvement
  ✓ Includes appropriate data collection and analysis of performance data to assess the impact of the interventions
  ✓ Defines a minimum participation threshold for Continuing Certification and describes how physician meaningful engagement will be identified
  ✓ Physicians may participate in one or more areas, but not required to participate in every step of the quality improvement process
ABOHNS CC Recognition Statement

“Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn their required annual part II self-assessment credit in the American Board of Otolaryngology – Head and Neck Surgery’s Continuing Certification program (formerly known as MOC). It is the CME activity provider's responsibility to submit participant completion information to ACCME for the purpose of recognizing participation.”
American Board of Pathology (ABPath)

- ABPath diplomates require a minimum of 70 AMA PRA Category 1 CME credits for each two-year reporting period.
- At least 20 of the 70 CME credits must count as self-assessment (SAM) for ABPath’s CC Program.
- Eighty percent of required CME/SAM must be directly related to the diplomate’s scope of practice.
- Planned in context of one or more ABMS/ACGME Competencies.
ABPath Requirements

• Relevant to ABPath diplomates demonstrated by the professional practice gap and content of the activity

• Includes an evaluation designed to assess changes in learners’ competence, performance, or the impact on patient outcomes

• Be registered as a Self-Assessment Module, if it meets requirements 1-7 and:
  ✓ Evaluation component includes a passing standard and timely feedback to learners (Quiz or tests must comply with the Quiz Evaluation Guidelines. Examples of evaluation mechanisms available.)
  ✓ Activity is clearly denoted as a Self-Assessment Module in all activity materials
• May be registered for Improvement in Medical Practice (Part IV) for MOC if meets requirements 1-7 and
  ✓ Addresses a quality or safety gap supported by needs assessment or problem analysis
  ✓ Designed to assess / improve quality of practice
  ✓ Has specific, measurable aims for improvement
  ✓ Includes interventions intended to result in improvement
  ✓ Includes appropriate data collection and analysis to assess the impact of the interventions
  ✓ Defines meaningful participation and includes a mechanism for identifying participants who meet the requirement
ABPath Promotion Requirements

• Clearly indicate activity has been registered to offer credits in the ABPath MOC program
• Include credit types available
• Include the number of credits
ABPath Resources

- Evaluation Examples
- Quiz Evaluation Guidelines
The American Board of Pediatrics (ABP)

- Lifelong Learning and Self-Assessment (Part 2)
- ABP diplomates require 100 points every 5 years
  - 40 minimum in part 2
  - 40 minimum in part 4
• Must appear on all MOC activity materials and brochures

“Successful completion of this CME activity, which includes participation in the activity and individual assessment of and feedback to the learner, enables the learner to earn up to [XX] MOC points in the American Board of Pediatrics’ (ABP) Maintenance of Certification (MOC) program. It is the CME activity provider’s responsibility to submit learner completion information to ACCME for the purpose of granting ABP MOC credit.”
ABP Audits

Submit within 30 days of the initial request:

✓ Evaluation tools – description or copy of the learner assessment tool
✓ Assessment – description of how the learner assessment was conducted
✓ Feedback – description of the process by which feedback was provided and copy of the feedback tool or sample provided to learners
✓ Passing Standard – Description of passing standard and how active participation was verified and documented for skill / case based activities
✓ Documentation – Evidence that learners were informed their participation information would be shared with the ABP through PARs and an example of a completion certificate
✓ Audit checklist
Provide to the learner upon request:
• Name of the Activity and Activity Provider
• Learner Name
• Activity Completion Date
• PARs Activity Identifier
• MOC Points Awarded
• ABP MOC Part 2 Approval Statement
ABP Resources

• Evaluation / Assessment Examples
• A Guide to Using Reflective Statements as Assessment in Live Activities Offered for ABP MOC Part 2
• Audit Checklist
Questions?

Thank You!

Terri Neaderhisier
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Suburban Health Organization
317-295-5283