



August 12, 2016

Dear ACP Members,

I am writing to provide one of my regular updates relating to ACP's advocacy and other efforts to reform the Maintenance of Certification (MOC) process of the American Board of Internal Medicine (ABIM). As I have stated in previous updates, ACP's desired goal is to assure that the process for physician accountability during a professional career is relevant and provides value to the physician. At the same time, the process should be designed to reduce burden as much as possible, yet remain credible to the public.

As I mentioned in the last email update in March 2016, ACP sent a letter to ABIM expressing our concerns and urging them to develop a plan as quickly as possible about the future of knowledge assessment and the secure examination, and to communicate more frequently about timelines and plans. We also shared a summary of the results of the MOC survey with ABIM to inform them of the feedback we received, and to underscore the need for them to accelerate the momentum for reform and communicate additional changes.

Since then, ABIM has committed to developing an alternative to the secure examination, to working with the internal medicine community in a process of "co-creation," and to announcing a definite plan by December 31. ACP wants to assure that the alternative plan meets clinicians' needs and our desired goal as well as possible. Recognizing that MOC affects the entire internal medicine community – general internal medicine specialists, hospitalists, and internal medicine subspecialists – ACP is working with the Alliance for Academic Internal Medicine (AAIM) to convene representatives from the subspecialty societies as well as the Society of General Internal Medicine (SGIM) and the Society of Hospital Medicine (SHM) to develop a specific proposal for this alternative to the secure examination. Dr. Craig Brater (AAIM's President and CEO) and I have developed a two-step process for generating an alternative proposal:

1. A working meeting of a small number of societal representatives to develop an initial "straw man" proposal. This meeting, which was held on July 22, included representatives from 4 internal medicine subspecialty societies plus SGIM and SHM.
2. A meeting planned for September 15 that will include a representative from each of the internal medicine subspecialty societies to review, critique, and refine the straw man proposal. This final proposal will then be presented to ABIM to represent the physician community's input to the co-creation process.

Many questions still need to be answered before we finalize our joint proposal to ABIM, and as a work in progress, it is premature to go into more details at this time. However, we are encouraged by the outcome of the July 22 meeting and optimistic about the larger September 15 meeting. We will continue to update you as things progress.

We're aware that serious concerns remain about issues related to MOC, expressed most recently in a statement of no confidence in ABIM by the Pennsylvania Medical Society. ACP, along with others, was asked to sign on to the statement. We chose not to because we believe ACP should continue to press ABIM to improve the MOC process as quickly as possible to make it more relevant, efficient, valuable, and affordable for internal medicine specialists and subspecialists. Although we understand and respect the concerns of the PA Medical Society and others, ACP's priority is improving the process by which physicians demonstrate ongoing competence, and we believe we can have the greatest impact by taking a collaborative approach to making change rather than getting involved in other aspects about ABIM as an organization.

As many of you know, I am retiring from my position as ACP's Executive Vice President and CEO after Labor Day. At that time, I am delighted to turn over this responsibility to ACP's new EVP/CEO, Dr. Darilyn Moyer. As Dr. Moyer takes over her new position, I know she is as committed as I have been to seeing this process proceed to a successful conclusion. Future updates about MOC will be coming from Dr. Moyer, but I will continue to assist her as needed over the coming year as part of my interest and responsibility in assuring a smooth and seamless transition process.

Best wishes to all of you for an enjoyable remainder of the summer.

Steven Weinberger, MD, MACP, FRCP