



ABR PQI Update

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Disclosures:

I am an ABR Trustee

Topics

1. MOC At-A-Glance
2. Practice Quality Improvement
3. Public Reporting and Continuous Certification



Topics

1. **MOC At-A-Glance**
2. Practice Quality Improvement
3. Public Reporting and Continuous Certification



The American Board of Medical Specialties

ABMS sets the standards for the certification process to enable the delivery of safe, quality patient care

ABMS is the authoritative resource and voice for issues surrounding physician/physicist certification

The public can visit certificationmatters.org to determine if their doctor is board certified by an ABMS Member Board

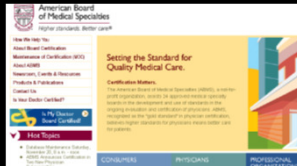
What is ABMS MOC™?

A process designed to document that physician specialists, certified by one of the Member Boards of ABMS, maintain the necessary competencies to provide quality patient care

ABMS MOC promotes continuous lifelong learning for better patient care

ABMS of the Future

- More robust
- More legislatively active
- Continuous MOC rather than 10 year cycles
- Involvement and promotion of institutional MOC
- Significant presence of primary care boards in ABMS governance
- Competition from rogue organizations for stature



MOC Components

Part I: Professional Standing

- ✓ State Medical Licensure

Part II: Lifelong Learning and Self-Assessment

- ✓ Category 1 CME and Self Assessment Modules (SAMs)

Part III: Cognitive Expertise

- ✓ Proctored, secure exam

Part IV: Practice Performance

- ✓ Practice Quality Improvement (PQI)

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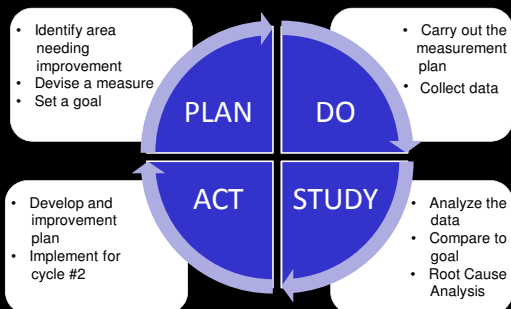
PQI Evolution

- ✓ ~~I don't understand what it is.~~
- ✓ ~~Explain to me why I am doing this.~~
- ✓ ~~Tell me what you want me to do.~~
- ✓ Show me how to do it.

PQI Essential Elements

- ✓ Select project, metric(s), and goal
- ✓ Collect baseline data
- ✓ Analyze data
- ✓ Create and implement improvement plan
- ✓ Re-measure
- ✓ Self-reflection

The Quality Improvement Process



ABR Individual and Group PQI Templates*

*Templates include all
essential elements needed
to comply with ABR
“meaningful participation”
requirements

American Board of Radiology
MOC Part 4: Practice Quality Improvement (PQI)
Individual Participant PQSA (Plan-Do-Study-Act) Checklist & Summary Record*

BASELINE PQSA CYCLE (Cycle #1)

(In Cycle #2, a topic is selected, and baseline data are gathered to compare with post-improvement plan data in Cycle #2.)

☐ **Step 1: PLAN: Identify and Describe the Project (Self-Designed)**

☐ Topic (area of interest). This should address a part of your practice that you would like to improve, or an observed gap in service or patient care: _____

☐ Define a measurement to be obtained: _____

☐ Establish a desired measurement target/goal. What do you want the measurement to be in order to achieve an appropriate standard of performance and/or patient care? _____

☐ Predicted baseline measurement result. What do you think the measurement will be? _____

☐ **Step 2: DO: Baseline Measurement Summary**

☐ Number of data points collected: _____

☐ Baseline measurement value calculated: _____

☐ **Step 3: STUDY: Data Analysis**

☐ How did the baseline measurement results compare to the predicted measurement results? _____

☐ How did the results compare to the desired target goal? _____

☐ If baseline results did not meet the target, the potential contributing factors and/or root causes: _____

Group PQI Criteria

- ✓ Group consists of 2 or more ABR diplomates
- ✓ Group Project Team Leader designated
 - Team organization, meetings and record keeping
 - Must document team participation
- ✓ Project may be group designed, society-sponsored, or involve a registry
- ✓ Requires at least 3 team meetings:
 - Project organization meeting
 - Data and root cause analysis meeting
 - Improvement plan development

Individual Participant: “Meaningful Participation”

- ✓ Individual diplomate MOC PQI credit requires:
 - Documented attendance at ≥ 3 team meetings
 - Preparation of a personal self-reflection statement describing the impact of the project on the group practice and patient care
 - Attestation on ABR Personal Database (PDB)
 - Access to project records in the event of an ABR MOC audit

Changes in PQI Attestation

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Home News About My Account

Home > My Status Summary > PQI Projects

Diplomate Menu

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Recent News

PQI Project Outline

Project: ARRS - Screening Patients
Back to All Projects

Type: Baseline
Project Type: Diagnostic

Project Status: 100%

Step 1 - Plan

Step 2 - Do

Step 3 - Study

Step 4 - Act

Go to where I left off.

Attestation continued...

Help Me Learn About PQI

Project Name: ACR - CT Colonography

Are you in the process of planning your PQI project?

How did you plan on completing your PQI project?

What type of project do you plan on completing?

Select one of the pre-approved in vivo projects:

Your project name

Project start date

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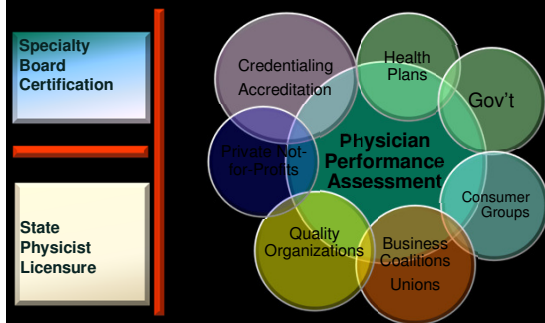
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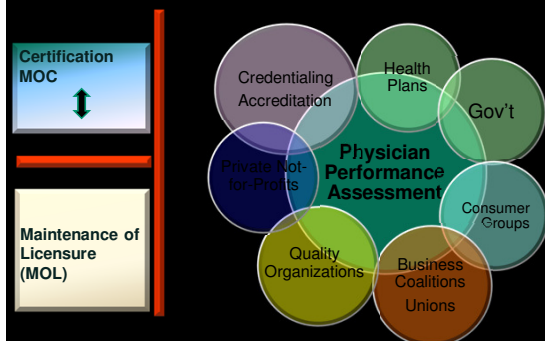
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TRADITIONAL ACCOUNTABILITY FRAMEWORK



EVOLVING ACCOUNTABILITY FRAMEWORK



Changing Landscape

✓ Relevance of ABMS/ABR certification must be demonstrated to the public, payers and the government

✓ Medicine is experiencing a fusion of economics, quality, safety and reimbursement, so we must work together to effectively project and promote our specialty for the benefit of our patients

✓ Accountability and transparency remain the watchwords for the new millennium

Timeline Leading to
ABMS Public Reporting

✓ March 2009: ABMS BOD adopted a standards document that included a call for ABMS to make info about certificate status dates and MOC participation status available to the public

✓ June of 2010: ABMS BOD approved a two-part resolution:

(1) approved public display of MOC participation by ABMS starting Aug 2011

(2) MOC participation status reported using three primary designations:

✓ "Meeting the Requirements" of MOC

✓ "Not Meeting the Requirements" of MOC

✓ "Not Required to Participate" in MOC (Lifetime Certificates)

ABMS Public Reporting cont...

✓ May 2011: ABMS MOC Meeting: National Credentialers appeared as guests and stated interest in some way to verify MOC participation through ABMS.

✓ It was recognized that the boards needed time to create communications and reach out to their diplomates, some of whom would likely want to enroll in MOC.

✓ June 2011: ABMS offered extensions of one year to boards who wanted more time to for communication

✓ ABR's request for the maximum one-year extension was granted.

About Public Reporting



ABR Response to ABMS Public Reporting Requirements

- ✓ ABR online verification of board eligibility and MOC participation statuses in coordination with ABMS reporting
- ✓ Link from ABMS site to ABR site for further clarification on various statuses
- ✓ Diplomate look-up tool
- ✓ Immediate, current verification status

Continuous Certification

- ✓ Certificate will no longer have “valid through” date – instead continuing certification will be contingent on meeting MOC requirements
- ✓ Annual look-back used to determine MOC participation status.
- ✓ No change in MOC requirements or fees

How does it work?

MOC Year	Look-back date	Element(s) Checked ¹
2013	3/15/2014	Licensure / professional attestation
2014	3/15/2015	Licensure / professional attestation
2015	3/15/2016	Licensure, CME, SAMs, Exam, and PQI
2016	3/15/2017	Licensure, CME, SAMs, Exam, and PQI
2017	3/15/2018	Licensure, CME, SAMs, Exam, and PQI
2018	3/15/2019	Licensure, CME, SAMs, Exam, and PQI
20XX	3/15/20XX	Licensure, CME, SAMs, Exam, and PQI

¹ Status Check for “Meeting Requirements”

Element	Compliance Requirement
Licensure	Valid state medical license or attestation
CME	At least 75 Category 1 CME in previous 3 years
SAMs	At least 6 SAMs in previous 3 years
Exam	Passed any ABR Certifying or MOC exam in previous 10 years
PQI	Completed at least 1 PQI project in previous 3 years

Advantages of Continuous Certification

- ✓ If you have two or more time-limited certificates, they are synchronized.
- ✓ The number of CME and SAMs you can count per year is unlimited
- ✓ You may take the MOC exam at any time, as long as the previous MOC exam was passed no more than 10 years ago
- ✓ Built-in “catch-up” period of one year – still certified
- ✓ Aligns reporting more closely with CMS, TJC, credentialing and state licensing boards

Thank You!

Questions?
