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# Alternatives to-and skepticism about-MOC

**I**n his opinion piece regarding maintenance of certification, ("Maintenance of certification exams have dubious value," February 10, 2016), James Merino, MD listed major concerns of a wide number of physicians regarding the whole process of board certification. He stated that "The secure examination needs to be a thing of the past, and I hope that others will continue to protest until our voices have been heard."

In 2011, the National Board of Clinical Medicine, Inc. (NBCM) was established, in part, to address similar concerns. The NBCM offers an option for physicians with regard to board certification, recertification and maintenance of certification. The format of the NBCM is a one-time, open book, at-home exam whose sources of questions are clearly listed for the physician to review. Questions are based upon published practice parameters and guidelines that relate to the clinical aspects of medicine.

So far, this has been established for allergist/immunologists. We have received overwhelmingly positive and enthusiastic support from physicians nationwide. The NBCM is recognized as a positive move with regard to board certification. Specialties other than Allergy and Immunology are welcome to be part of this process.

The NBCM strongly believes that board certification should be a positive process where learning occurs, and it should be voluntary. Physicians should have options regarding board certifica-

tion. Board certification should be a voluntary process that offers value to the physician. It should not be used to discriminate against physicians with regard to hiring, insurance network participation or hospital staff privileges.

Medical Economics has been a leader in covering this topic. I am grateful that this magazine continues to offer insight and open discussion with regard to this very important and controversial topic.

### **Martin S. Dubravec, MD**

CADILLAC, MICHIGAN

*The writer is the founder and chief executive officer of the National Board of Clinical Medicine, Inc.*

I have followed the entire ABIM MOC controversy from its inception and eventually joined the National Board of Physicians and Surgeons, applauding Dr. Teirstein and others for their dedication to a reasonable board certification process. I wonder when member boards will follow suit. Why the silence?

I am involved in the ABOG MOC process, which is very similar. I passed boards in 1994 with flying colors, promised board certification for life, then presto, MOC each year along with its \$600-plus price tag this year. Simple math reveals tens of millions of dollars a year to fund an organization that lends little to no contribution to professional development for practicing clinicians.

### **Roger Brecheen, MD**

FORT BRAGG, CALIFORNIA



BY FRANK SAVORETTI, MD, JD

# Eliminate MOC's cumbersome process and physicians will get on board

**B**elow is a mildly edited version of an email I sent a few months ago to my only child, a partner in our practice of primary care internal medicine.

My Dear Alberto,

I originally got certified by the American Board of Internal Medicine (ABIM) in 1990. I recertified in 2000 and told myself and a few others it would be my last recertification because by 2010, I would be 58 years old, my son would be through with his training and any patient who insisted on a "board certified" doctor could see him.

I was sure that by 2000 I could retire any time I wanted, since the practice of medicine has been so good to us and we've been very frugal all these years. Then and now I work principally for the love of medicine and my patients. If "the system" wants to give me a hard time, I can go concierge or retire completely. The "fat cats" can go to hell. But will they take care of my patients? Of course not. They're too busy being ivory tower administrators, far away from the trenches in the front lines of medicine, not actually taking care of patients.

In 30 years of private practice, only one telephone caller inquired about my board certification status. I was certified at the time but told the secretary to tell the patient we were not

accepting any new patients for several months.

My real objections to the whole certification and recertification process go back a long way. The general practitioner who saved my life in 1975 when I had pneumonia and also inspired me to change career paths was not board certified by the ABIM either.

**"In 30 years of private practice, only one telephone caller inquired about my board certification status."**

I only bothered with the whole certification process the first time because in the 1980s the hospitals and insurers were threatening to disaffiliate doctors who were not certified and the literature was saying there was a doctor surplus. Little did they know then and now about the topic of doctor shortage.

The second time I re-certified, I just had to pass the all-day exam, so I reviewed the then-current MKSAP and took the exam. After that, the ABIM changed the whole process to a very cumbersome, expensive, Rube Goldberg-esque experience I had no interest or time to deal with.

Reality then intervened: supply

and demand; not enough primary care doctors. The insurers and hospitals backed off their threats in the ensuing years and I breathed a sigh of relief.

Now we have nurse practitioners and physician assistants practicing "primary care." Nice people I'm sure, but not doctors of medicine. They're certainly not board certified. So the insurers are going to pay the doctors' helpers and not the real doctors? I don't think so!

I'm 63 years old now. The system knows where I'll tell them to go if they harass me about board certification. Age, saving and investing in very low-cost indexed mutual funds and municipal bonds has its rewards!

What's all this got to do with you, my son? You hopefully have another 40 years or more in medicine and it certainly doesn't hurt to be board certified. If they do change the process to what [the ABIM has suggested in reforms] I'll probably do it too. Continuous quality improvement is more than a slogan or motto. I try to live by it every day.

Dad

**Frank Savoretti, MD, JD**, completed his residency in internal medicine at the Bronx-Lebanon Hospital Center, Bronx, New York, after which he opened up his private practice in Johnston, Rhode Island. Do you agree with the author on MOC? Tell us at [medec@advanstar.com](mailto:medec@advanstar.com)

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