

IOWA MEDICAL SOCIETY HOUSE OF DELEGATES

Resolution 13-01

Introduced by: James Amos, MD, and Iowa Psychiatric Society
Subject: Opposition to Maintenance of Licensure (MOL)
Referred to: Reports of Officers/Bylaws/Miscellaneous Business

1 Whereas, In 2010 the Federation of State Medical Boards, Inc. (FSMB) House of Delegates adopted
2 the Maintenance of Licensure (MOL) framework, a process by which physicians periodically
3 provide, as a condition of license renewal, evidence that they are actively participating in a program
4 of continuous professional development that is relevant to their areas of practice, measured against
5 objective data sources and aimed at improving performance over time; and
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7 Whereas, The FSMB website states that, in lieu of MOL, the American Board of Medical Specialties
8 Maintenance of Certification (MOC) program and the American Osteopathic Association Bureau of
9 Osteopathic Specialists' Osteopathic Continuous Certification (OCC) program incorporate activities
10 generally consistent with the intentions of MOL, state licensing boards may elect to substantially or
11 fully qualify licensees engaged in these activities; and
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13 Whereas, Medical organizations have for years opposed any effort to mandate the content of
14 continuing medical education (CME) required for licensure because physicians themselves are in the
15 best position to determine what educational opportunities will be most helpful in improving their
16 practice, based on the type of patients that they see and the procedures that they perform; and
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18 Whereas, There is no evidence that physicians who have completed the maintenance of board
19 certification procedure make more accurate diagnoses or are more skillful at performing their
20 treatments; and
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22 Whereas, Maintenance of board certification is extremely costly and time consuming, requiring time
23 away from patient care or from more relevant study, and greatly exceeds the level of knowledge
24 needed for basic medical licensure; and
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26 Whereas, The materials that physicians are forced to study to meet maintenance of board certification
27 requirements may be biased, outdated, or irrelevant to the physician's actual practice; and
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29 Whereas, Granting certain organizations the equivalent of monopoly power over maintenance of
30 board certification, and thus licensing and medical practice itself, will tend to increase costs,
31 potentially violate federal antitrust and interstate commerce legislation, and hamper innovation; and
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33 Whereas, The reasons to oppose maintenance of board certification apply to MOL; and

1 Whereas, State licensing boards are free to adopt or reject the FSMB MOL program; and
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3 Whereas, Highly variable licensure requirements, including lack of mandatory continuing medical
4 education (CME), have existed in different jurisdictions for decades, without noticeable difference in
5 quality of medicine related to these varying requirements; and
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7 Whereas, There is no evidence to indicate that the vast majority of physicians have any need for
8 mandatory, government-prescribed CME to maintain excellent levels of ongoing education and
9 competency; and
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11 Whereas, As many as 25% of all physicians currently practicing medicine in the U.S. have never
12 been board certified and are thus actively excluded from entry into MOC programs, creating hardship
13 if imposed; and
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15 Whereas, 50% of all board-certified physicians in the U.S. currently have lifelong certificates, have
16 been and continue to practice as board-certified physicians and are also similarly non-eligible for
17 MOC programs; and
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19 Whereas, Legislation has greatly expanded the scope of practice of care to lesser educated “midlevel
20 providers” (i.e. nurse practitioners, physician assistants, CRNAs, etc.); and
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22 Whereas, Driving experienced physicians out of practice because of onerous, costly requirements
23 will result in still more patients being forced to turn to non-physicians for care; and
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25 Whereas, there is no existing Iowa Medical Society policy calling for opposition to maintenance of
26 licensure (MOL); therefore be it
27
28 RESOLVED, that the Iowa Medical Society oppose any efforts by the Iowa Board of Medicine to
29 require the Federation of State Medical Boards’ “Maintenance of Licensure (MOL)” program as a
30 condition of licensure.