

Opinion

Maintenance of Certification: Are We Halfway There Yet?

Recently, I have been obsessed with the middle. Last month's Opinion was all about middle stuff, and since I am still obsessed, I have to ask your indulgence for yet another month. One of the most predictable questions that kids persist in asking on trips is "Are we there yet?" It's only after we become adults that we realize the ridiculousness of the question: Of course we aren't there yet—or we would be there. As an adult, I have modified the question to "Are we halfway there yet?" The best way to illustrate the usefulness of the question is by example. I am a long-term symphony subscriber, and like most, I enjoy a lot of things, tolerate a few, and detest fewer. Since the symphony began printing the duration of each piece in the program—say 20 minutes—if I don't like the selection, I can tell myself that all I have to endure is 10 minutes, and then we're on the downhill slope to being done. It's much easier than wondering the whole time. I've put this to good use in many situations, but it doesn't work for activities with no defined ending, such as open-ended projects, journeys, and self-improvement. And Maintenance of Certification (MOC).

Now that MOC has been around for a while, it might be time for a midterm evaluation, to see how it is doing. Since it is still being gradually phased in at most medical specialties, it's hard to pick either a start date or an ending

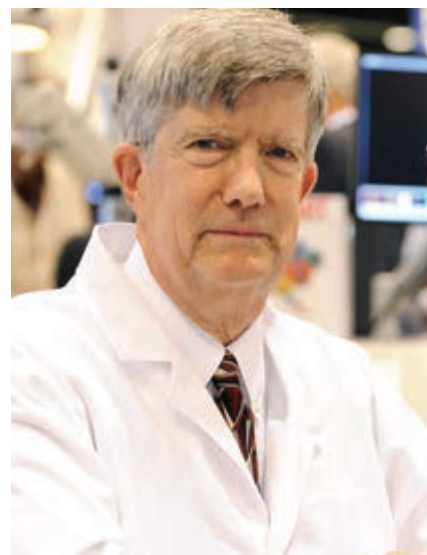
date. But we are a little past halfway in terms of the percentage of American Board of Ophthalmology diplomates to whom the requirements of MOC apply (the others are lifetime certificate holders): Of more than 19,000 active ABO diplomates as of 2012, 47 percent were subject to MOC. The next year the balance shifted so that by 2015, fully 53 percent of ABO diplomates will need to participate in MOC to maintain board certification. So I guess that passing the midline is enough justification for a midterm evaluation.

The Jan. 8, 2015, issue of the *New England Journal of Medicine* featured two contrasting perspectives on MOC, both passionately written and reflective of the opinions of substantial numbers of certified diplomates. I've included the full titles here in hopes of stirring your interest in reading the original articles: "Maintenance of Certification 2.0—Strong Start, Continued Evolution" and "Boarded to Death—Why Maintenance of Certification Is Bad for Doctors and Patients." While these articles are directed primarily toward the American Board of Internal Medicine—which, in some respects, differed significantly from the ABO in its approach to MOC—the arguments apply to all medical boards and MOC programs.

To be sure, the requirements of MOC have added a burden of time and expense spread over several years. In return for that, the diplomates receive

report cards on how they are doing at meeting the requirements of MOC—which sometimes seem to have little relevance to quality patient care, at least in their own practices. For some physicians, the promise of continuous improvement in patient care is enough to make them overlook the bumps and irrelevancies that characterize programs in evolution. For others, it makes the blood boil that yet another regulatory hurdle has been inserted between the doctor and the patient.

So at nearly the midpoint, what is the verdict on the ABO MOC? Are we halfway there yet? Should we throw in the towel or hang in there until MOC matures?



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