



American Board
of Internal Medicine®

MOC ASSESSMENT RECOGNITION

Program Guide

Effective Date: **APRIL 11, 2017**

Overview

Since its founding in 1936, Certification by the [American Board of Internal Medicine](#) (ABIM) has stood for the highest standard in internal medicine and its 20 subspecialties and has meant that internists have demonstrated – to their peers and to the public – that they have the clinical judgment, skills, and attitudes essential for the delivery of excellent patient care. ABIM is not a membership society, but a non-profit, independent evaluation organization. Our accountability is both to the profession of medicine and to the public.

The ABIM Maintenance of Certification (MOC) program promotes lifelong learning and the enhancement of the clinical judgment and skills essential for high quality patient care. ABIM Board Certified physicians must earn 100 MOC points every 5 years, 20 of which must be in Medical Knowledge (i.e., “Part II”). ABIM has extended the decision not to require Practice Assessment in its MOC program through December 31, 2018. However, ABIM Board Certified physicians can still earn MOC points towards the 100 total by completing Practice Assessment activities.

The ABIM MOC Assessment Recognition Program is the process through which ABIM recognizes accredited Continuing Medical Education (CME) activities for MOC credit. Alignment of the ABIM MOC Assessment Recognition Program with the Accreditation Council for Continuing Medical Education’s (ACCME’s) accredited CME system allows ABIM Board Certified physicians to earn MOC credit for a wide range of CME activities that meet the requirements specified in this document.



ABIM MOC Assessment Recognition Program

Every activity registered for ABIM MOC recognition must meet the requirements defined below in ABIM1-5. Additionally, activities registered for:

- ABIM Medical Knowledge MOC points must meet the applicable format-specific requirements in ABIM6-8;
- ABIM Practice Assessment MOC points must meet all requirements defined in ABIM9-15; and
- ABIM Patient Safety MOC credit must meet ABIM16.

Activities may be registered for a single ABIM MOC credit type or combinations of credit types, including:

- Medical Knowledge only
- Medical Knowledge + Practice Assessment
- Medical Knowledge + Patient Safety
- Medical Knowledge + Practice Assessment + Patient Safety
- Practice Assessment only
- Practice Assessment + Patient Safety

An activity cannot be offered for ABIM Patient Safety MOC credit alone. Patient Safety MOC credit must be offered in combination with at least one other credit type (i.e., Medical Knowledge and/or Practice Assessment).

ABIM MOC Assessment Recognition Requirements

ABIM1: The activity is directly or jointly provided by a provider accredited within the ACCME system.

ABIM2: The activity is certified for *AMA PRA Category 1 Credit™* in one of the following activity types:

- Course
- Committee Learning
- Enduring Material
- Internet Activity (Enduring Material)
- Internet Live Course
- Internet Searching and Learning
- Journal Based CME
- Learning from Teaching
- Manuscript Review
- Performance Improvement
- Regularly Scheduled Series
- Test Item Writing

Providers may register sessions or modules that are part of a larger, accredited CME activity for ABIM MOC recognition.

ABIM3: The activity is relevant to physician learners certified by ABIM, as demonstrated by the professional practice gap(s) and content of the activity.

ABIM4: The [ABIM MOC Recognition Statement](#) is included in any activity materials that reference ABIM MOC credit with the exception of initial “save the date” or similar notices.

ABIM5: The activity is registered for ABIM MOC up to the maximum allowable *AMA PRA Category 1 Credits™* for which the activity is designated. The provider must select at least 1 ABIM MOC credit type for which points may be earned and must verify that the number of ABIM MOC points reported for physician learners is equivalent to the amount of CME claimed for the activity.

Medical Knowledge Requirements

ABIM6: The activity or its content is peer-reviewed by at least two reviewers who are not the author(s). The process of peer review means that the activity or educational materials are reviewed by other clinicians who are sufficiently familiar with the subject matter of the activity or material to be able to render an opinion as to whether the activity or materials align with the learning objectives and are fair, accurate, and free of commercial bias.

Required for: Enduring Material, Internet Activity (Enduring Material), Journal Based CME, Course, Committee Learning, Internet Live Course, Learning from Teaching, Manuscript Review, Regularly Scheduled Series

ABIM7: The physician learner participates in a committee process that includes a minimum of three members.

Required for: Test Item Writing

ABIM8: The activity includes:

- an **evaluation component** that measures the impact of the activity on the physician learners' knowledge, strategies/skills, performance, and/or patient outcomes;
- a minimum **participation threshold** demonstrating physician learners' meaningful engagement in the activity; and
- **feedback** to the physician learner.

See [Appendix A](#) for Evaluation Examples, including multiple-choice, fill-in-the-blank, or longer-form tests; written or shared responses; or other formative and summative content-relevant exercises that evaluate the effectiveness of the learning.

Required for: Course, Committee Learning, Internet Live Course, Learning from Teaching, Manuscript Review, Regularly Scheduled Series

Practice Assessment Requirements

ABIM9: The activity addresses a quality or safety gap that is supported by a needs assessment or problem analysis, or supports the completion of such a needs assessment as part of the activity.

ABIM10: The activity addresses care, care processes, or systems of care in one or more of the National Academy of Medicine's (formerly the Institute of Medicine) [quality dimensions](#) or one or more of the [three Aims or six Priorities](#) articulated in the National Quality Strategy.

ABIM11: The activity has specific, measurable aim(s) for improvement.

ABIM12: The activity uses measures appropriate to the aim(s) for improvement.

ABIM13: The activity includes interventions intended to result in improvement.

ABIM14: The activity includes appropriate data collection and analysis of performance data to assess the impact of the interventions.

ABIM15: The provider defines a minimum participation threshold for MOC, and describes how they will identify physician learners who meaningfully engage in the activity according to their defined requirements. Physician learners are likely to participate in one or more of the areas outlined in ABIM9-14, but participation in every step of the quality improvement process is not an ABIM requirement.

Patient Safety Requirements

ABIM16: The activity addresses at least one of the following topics:

- Foundational knowledge (must include *all* of the following):
 - Epidemiology of error: should prepare physicians to discuss the key definitions that underpin current patient safety efforts
 - Fundamentals of patient safety improvement (plan, do, study, act or PDSA): should engage physicians in a PDSA cycle focused on patient safety
 - Culture of safety: should identify the specific elements, (i.e., the beliefs, attitudes and values about work and risks) that contribute to safety culture
- Prevention of adverse events (examples include, but are not limited to):
 - Medication safety (e.g., medication reconciliation, safe use of analgesics and sedatives, identification and remediation of polypharmacy in the elderly)
 - Prevention of healthcare acquired infections
 - Falls prevention
 - Teamwork and care coordination

ABIM MOC Assessment Recognition Program Policies

Participant Completion Information

The provider must have systems, resources and processes in place to:

- collect the participant completion information described in Table 1;
- obtain permission from the physician learner to share the completion information with ACCME; and
- transmit the completion information to ACCME on behalf of the participant.

Table 1: Participant Completion Information

Field Name	Description
ABIM ID	Every ABIM Board Certified physician has a unique, six-digit ABIM ID number.
First Name	Physician learner’s first name
Last Name	Physicians learner’s last name
DOB	Physician learner’s date of birth (mm/dd)
Activity Completion Date	Date (mm/dd/yyyy) the physician learner completed the activity
MOC Points	MOC points are equivalent to the amount of CME credits claimed by the physician learner for the activity.

MOC Credit Type(s)	Indicate the credit type(s) for which the MOC points should be granted. Credit types include Medical Knowledge, Practice Assessment, and Patient Safety.
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Participant completion information is governed by [ABIM's Confidentiality Policy](#). Identifiable patient data shall not be provided to ACCME or ABIM by any organization or participant.

Use of Participant Data

If participant data will be shared with the funder of the activity or any other commercial entities, whether individually or in aggregate, this must be disclosed to participants prior to the beginning of the activity. This transparency allows participants to decide if they wish to participate in activities that provide their data and/or data about their clinical practice to commercial entities.

Program Fees/Participant Fees

ABIM will not charge a fee to providers that register activities for ABIM MOC recognition at this time. ABIM may revisit its fee structure in the future.

Providers are responsible for all costs associated with developing and operating the activity. ABIM has no policy that precludes the provider from charging a fee for participation in the activity; ABIM will not reimburse fees charged by the provider to physician learners.

Data Privacy and Security Compliance

Providers are responsible for ensuring that the appropriate data privacy and security safeguards are in place and conform to all relevant regulatory and industry requirements.

Public Information About Activities Registered for ABIM MOC Recognition

ACCME publishes information about accredited CME activities that have been registered for ABIM MOC via its [CME Finder](#). CME Finder is a publicly available, online search tool that provides a one-stop resource for physician learners seeking to earn MOC points by participating in accredited CME.

ABIM MOC Recognition Statement

Per [ABIM4](#), the following statement must be included in your activity materials:

"Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to [MOC point amount and credit type(s)] MOC points [and patient safety MOC credit] in the American Board of Internal Medicine's (ABIM) Maintenance of Certification (MOC) program. Participants will earn MOC points equivalent to the amount of CME credits claimed for the activity. It is the CME activity provider's responsibility to submit participant completion information to ACCME for the purpose of granting ABIM MOC credit."

Please note that CME providers offering MOC points for sessions or modules that are part of a larger, accredited CME activity may omit this sentence from the identification statement: "Participants will earn MOC points equivalent to the amount of CME credits claimed for the activity."

Audit

The ACCME will provide "Audit Services" on behalf of the ABIM MOC Assessment Recognition Program for the benefit of ABIM, its Board Certified physicians, and providers accredited by the ACCME system. As a requirement

of participating in the ABIM MOC Assessment Recognition Program, accredited providers agree to participate in an audit of their activity (ies), if selected, and to allow the ACCME to share the results of the audit with ABIM. The ACCME will select 40 activities for audit each year (July 1-June 30) from among those registered in the ACCME's Program and Activity Reporting System (PARS) as "ABIM MOC-compliant education." Providers will not be selected for an audit more than once per year unless they have an activity that previously failed some portion of the audit during that year. The accredited provider will be required to submit the materials described in [Table 2](#) for their activity(ies) selected for audit. Providers may also view the [ABIM MOC Structured Abstract](#) on ACCME's website.

The ACCME will produce an audit report on compliance with the applicable ABIM MOC Assessment Recognition Program requirements. ABIM will determine next steps for the accredited provider if ABIM's requirements are not met. Providers will receive a warning for the first violation, will not be permitted to submit participant completion information for an activity that fails the audit, and will be responsible for communicating with their learners about the MOC status of the activity. ABIM will not revoke MOC credit that has already been issued to physician learners who participated in an activity that fails the audit.

Continued failure to meet ABIM's policies and requirements could result in a change in the provider's status. ABIM may revisit this policy in the future.

Table 2: Description of the Elements of an Audit

ABIM Requirement		Materials to be Submitted by Accredited Provider
All Activities	ABIM1	None - only providers accredited within the ACCME system are eligible.
	ABIM2	None – only allowable activity types can be registered for ABIM MOC in PARS.
	ABIM3	A description of the professional practice gap and educational need for the activity.
	ABIM4	Evidence that physician learners were informed that their participation information would be shared with ABIM through PARS.
	ABIM5	Verification that the number of MOC points reported for the physician learner is equivalent to the amount of CME claimed for the activity.
Medical Knowledge	ABIM6	Verification that the content of the activity was peer-reviewed by two clinician reviewers who were not the original authors/presenters: <ol style="list-style-type: none"> a. The name, credentials, affiliations and qualification of the reviewers; b. The results/conclusions of the reviewers.
	ABIM7	A description of the committee process that was utilized, including the number of members of the committee.
	ABIM8	Information relevant to the method of evaluation that was utilized for the activity that measured learner change, including: <ul style="list-style-type: none"> • a copy of the evaluation tool (e.g., multiple-choice, fill-in-the-blank, or longer-form tests; written or shared responses; or other formative and summative content-relevant exercises); • a description of how the evaluation is conducted and the minimum participation threshold (e.g., score, correct written or shared response, etc.); • a description of the process by which feedback was provided to learners; and • verification that the learners successfully met the minimum participation threshold for the activity.
Practice Assessment	ABIM9	A description how the activity addresses a quality or safety gap that is supported by a needs assessment or problem analysis.
	ABIM10	A description of how the activity addresses care, care processes, or systems of care in one or more of the National Academy of Medicine’s quality dimensions or one or more of the three Aims or six Priorities articulated in the National Quality Strategy.
	ABIM11	A description of the specific, measurable aim(s) for improvement.
	ABIM12	A description of the measures used in the activity and how they address the gap in quality.
	ABIM13	A description of the interventions that were or are being implemented that directly relate to achieving the aim of the activity.
	ABIM14	A description of: <ul style="list-style-type: none"> • the method and frequency of data collection and performance analysis; and • how data are used to drive improvement throughout the activity.
	ABIM15	A description of: <ul style="list-style-type: none"> • the minimum participation threshold for the activity and how the provider identifies physicians who meet the threshold; and • verification that learners successfully met the minimum participation threshold for the activity.
Patient Safety	ABIM16	Demonstration that the activity addressed one of the required topics (e.g. Foundational Knowledge of Prevention of Adverse Events).

Appendix A: Evaluation Examples

ABIM and ACCME share the expectation that accredited providers evaluate the impact of their activities on learners' knowledge, strategies/skills, performance, and/or patient outcomes. The following examples of evaluation approaches have been compiled as a resource for accredited providers. These are only examples—and not an exhaustive list—of the methods that can be used by the accredited provider in CME that supports ABIM MOC.

ABIM's requirement for evaluation can be found in [ABIM8](#). ACCME requirements related to evaluation can be found in [Criterion 11](#) of its Accreditation Criteria.

Important Tips:

- The accredited provider may choose to evaluate the activity at the session level or at the activity level. As well, the provider does not need to be limited to a single method of evaluation per activity. Combinations of approaches to evaluation may produce rich information about learner change.
- The accredited provider must be able to demonstrate that the learner has participated in/completed the evaluation (i.e. via scenarios below or some other method the provider uses) for the educational activity in order to submit the learner's participation completion information for the activity.
- If the activity is selected for audit, the accredited provider will be asked to submit the evaluation mechanism, a description of how the evaluation was implemented and how feedback was provided to learners, and a list of the physician learners who met the minimum participation threshold.

Evaluation Mechanism	Evaluation Method	Participation Threshold	Feedback Method
Case Discussion	Learners asked to share with each other and group how they would approach the case at various stages.	Learner actively participates in the conversation as judged by a group leader or observer.	The outcome of the case is shared.
Written responses	Learners write down what they have learned and indicate commitment to change or maintain an element of practice.	Learner writes a reflective statement and makes a commitment to change or maintain an element of practice.	Leader/facilitator summarizes what was discussed and best next steps for learners.
Audience response system	Learners select answers to provocative questions using the ARS.	Learner attempts an acceptable number of questions. Threshold set by provider.	Answer to each question is shared in dialog or writing, including rationale for correct answers with relevant citations.
Quiz	Learners complete answers to a quiz during or after an activity.	Fraction of answers correct set by provider.	Best answer to each question is discussed or shared, including rationale for correct answers with relevant citations.
Table-top exercise	Learners write down next steps in an evolving case at various set points.	Learner writes a possible next step to each question.	Best practice at each step is discussed or shared after each set point.
Simulation	Learners demonstrate strategy/skill in a simulated setting – could be role-play or formal simulation lab.	Learner participates in simulation as judged by a facilitator or observer.	Best practice or technique is discussed and shared throughout, or at the conclusion of, the simulation.