



# MOC Now More Efficient and Effective

The American Board of Pediatrics (ABP) has made significant changes to its Maintenance of Certification Program (MOC) over the past several years. Many changes were prompted by pediatricians who believe in the benefits of certification and ongoing assessment and want to help improve the process.

The ABP is striving to make the MOC process more efficient and effective for pediatricians who want to provide excellent care for children. MOC offers tools for life-long learning, knowledge assessment, and quality improvement, and verifies to the public that pediatricians are staying current and improving their practice.

The ABP realizes that pediatricians engage in a wide variety of learning and improvement activities that meet ABP standards, and the board has implemented more ways for pediatricians to *claim credit for activities they already are doing*.

For example, Life-Long Learning and Self-Assessment (Part 2) credit may be claimed for many CME activities that meet ABP standards through a collaboration between the ABP and the Accreditation Council for Continuing Medical Education (ACCME). To date, more than 4,500 CME activities registered with ACCME now offer ABP MOC Part 2 credit, with more than 17,000 pediatricians receiving credit through this pathway. In January 2019, the ABP implemented variable and repeatable credit to align the way MOC Part 2 points are awarded with CME hours, making it easier for CME providers to expand the activities available for credit.

Until this year, the only option pediatricians had for demonstrating the currency of their knowledge was the MOC exam (Part 3) taken at a secure testing center once every 10 years, sitting for hours answering 200 questions. In 2017, the ABP pilot-tested a new method for assessing the knowledge of general pediatricians who wish to maintain certification. MOCA-Peds (Maintenance of Certification Assessment for Pediatrics) delivers up to 20 questions each quarter directly to participating ABP-certified pediatricians via their computers or mobile devices, to be answered at any time during the quarter. MOCA-Peds combines assessment with learning as pediatricians find out immediately whether their answer was right or wrong. They also get an explanation of the correct answer. MOCA-Peds is now available to pediatricians in General Pediatrics, Child Abuse Pediatrics, Pediatric Gastroenterology, and Pediatric Infectious Diseases who enrolled in an MOC cycle in 2018. The remaining subspecialties will “go live” over the following 3 years. MOC exam requirements have been deferred for all ABP subspecialties during this process.

Other significant changes have been made to the Improving Professional Practice requirement (Part 4), which supports pediatricians’ efforts to measure the quality of their care, adopt improvements in practice that have been proven successful by their peers, and then measure their success in their own practice. The ABP encourages pediatricians to create quality improvement (QI) projects applicable to their own practices. They can then use a short (improved) form to apply to the ABP to claim MOC credit. Working to improve any process that is intended to support the health of children (including improvements in medical education and in research), can earn Part 4 credit. For example:

- Being meaningfully involved in QI projects as part of earning NCQA PCMH/PCSP certification.
- Engaging in QI to address areas that were identified during a training program’s annual Accreditation Council for Graduate Medical Education (ACGME) evaluation or self-study.
- Contributing to improved health care quality through institutional leadership in quality improvement.
- Participating in an institution’s approved QI projects and in many improvement networks and collaboratives.
- Meeting the MOC requirements of other certifying boards.

In addition, more than 150 institutions and organizations, such as the AAP, are designated as [Portfolio Sponsors](#) by the ABP or the American Board of Medical Specialties (ABMS). Portfolio Sponsors award Part 4 credit to pediatricians who participate in the portfolio’s approved QI projects.

The ABP requires pediatricians to demonstrate meaningful involvement in quality improvement activities in order to maintain certification. The ABP expects the same of its employees. The MOC department recently launched several improvement events in order to examine and streamline processes and reduce the “application burden” for the pediatrician. The results of these workshops have eliminated redundancy in administrative processes and shortened the application time for pediatricians when applying for MOC credit.

The ABP also is working to improve enrollment and payment processes. The MOC exam cycle has been aligned with other activities. Pediatricians who are re-enrolling in MOC also now have the choice of paying the all-inclusive MOC fee on an annual basis (\$275 for a single certification area) or in a lump sum every five years (\$1,304). The annual MOC re-enrollment fee compares favorably with other professional fees (e.g., society dues or CME activities). The ABP has not raised fees for the past 4 years.

The work of the ABP is done by more than 350 pediatricians, all of whom are meeting MOC requirements. Pediatricians are invited to [volunteer](#) with the ABP as a member of a committee, subboard, focus groups, or practice analysis panel.

MOC changes since 2012 include:

2012	2018
<b>Requirements:</b> <ul style="list-style-type: none"> <li>• 40 points Lifelong Learning and Self-Assessment (Part 2)</li> <li>• 40 points Practice Improvement (Part 4)</li> <li>• 20 additional points from either category</li> <li>• Pass the MOC exam in a secure testing center once every 10 years</li> </ul>	<b>Requirements:</b> <ul style="list-style-type: none"> <li>• 40 points Lifelong Learning and Self-Assessment (Part 2)</li> <li>• 40 points Practice Improvement (Part 4)</li> <li>• 20 additional points from either category</li> <li>• Participate in MOCA-Peds quarterly web-based assessment (with a passing score) OR pass the MOC exam at a secure testing center once every 5 years</li> </ul>
<b>Resources for Lifelong Learning and Self-Assessment:</b> <ul style="list-style-type: none"> <li>• ABP-provided activities</li> <li>• AAP PREP</li> <li>• Limited other choices</li> </ul>	<b>Resources for Lifelong Learning and Self-Assessment:</b> <ul style="list-style-type: none"> <li>• ABP-provided activities</li> <li>• Online activities from AAP and other organizations</li> <li>• More than 4,500 qualifying CME activities registered through ACCME that earn MOC credit automatically upon successful completion</li> <li>• Variable credit for CME activities</li> </ul>
<b>Resources for Quality Improvement Activities:</b> <ul style="list-style-type: none"> <li>• ABP PIMs</li> <li>• AAP EQIPP</li> <li>• Web-based activities from other organizations</li> <li>• AAP Quality Improvement Innovation Networks (QuIIN)</li> <li>• AAP’s Chapter Alliance for Quality Improvement (CAQI), specifically the Chapter Quality Network (CQN)</li> <li>• Small number of collaborative networks</li> </ul>	<b>Resources for Quality Improvement Activities:</b> <ul style="list-style-type: none"> <li>• ABP PIMs</li> <li>• AAP EQIPP</li> <li>• AAP Pedialink QI</li> <li>• Web-based activities from other organizations</li> <li>• Collaborative networks</li> <li>• Application process for practice improvement projects undertaken by solo or small groups of pediatricians. Guidance from ABP staff is available to help structure the project to be eligible for MOC credit</li> <li>• Similar application process for larger projects, often sponsored by health care organizations</li> </ul>

	<ul style="list-style-type: none"> <li>• AAP Quality Improvement Innovation Networks (QuIIN)</li> <li>• AAP's Chapter Alliance for Quality Improvement (CAQI), specifically the Chapter Quality Network (CQN)</li> <li>• Growing number of institutions (including the AAP) who sponsor their own portfolios of MOC-eligible quality improvement activities</li> <li>• Part 4 credit offered to program directors, faculty, residents and fellows who engage in quality improvement to address areas that were identified during the program's annual program evaluation or the self-study</li> <li>• Institutional leaders, including department chairs, chief quality officers or directors of public health departments, who develop and lead substantial health care quality initiatives in an organization, may apply for Part 4 credit</li> <li>• Residents can "bank" MOC Part 4 points they earn during training</li> </ul>
<ul style="list-style-type: none"> <li>• Information available on the website and through generalized emails timed to coincide with yearly deadlines</li> </ul>	<ul style="list-style-type: none"> <li>• Redesigned website with improved access to information</li> <li>• Redesigned portfolio landing page</li> <li>• Improved search function</li> <li>• MOCAM site for more in-depth information and applications for available activities</li> <li>• Personalized emails detailing individual progress toward meeting requirements</li> <li>• Social media presence, including ABP Blog</li> <li>• Video guides/instructions</li> <li>• Use of ABP logo encouraged to recognize certified pediatricians</li> </ul>
<ul style="list-style-type: none"> <li>• Pay all fees up front at the time of enrollment in a 5-year MOC cycle</li> </ul>	<ul style="list-style-type: none"> <li>• Choose to pay all fees at the beginning of an MOC cycle, or choose a prorated annual payment option, launched January 2018</li> </ul>