## **Board News**

Paul R. Young, M.D.

## **Specialty Certification Concerns**

Specialty certifying boards are currently going through a period of serious self-examination and philosophic re-evaluation. The role of specialty certification in the profession and in society as a whole is under scrutiny. This has been precipitated by several factors, including technical advances, increased subspecialization, economics, and changes in the standing and role of physicians in society.

The original intent of certification was to offer assistance to the profession and the public by establishing and maintaining standards for the identification of physicians who possessed special knowledge and skills in definable subsets of medicine and surgery. The American Board of Ophthalmology was the first certifying board chartered in 1917. There are now 24 primary certifying boards recognized by the AMA and the ABMS. These boards offer 45 certificates of special qualifications and 28 certificates of added qualifications.

Most of these certificates have been developed during the past 10 years. The reasons for the explosion of certificates are not entirely clear and probably are different in each case. Whatever the reason, legitimate questions must be raised to determine whether specialty certification is serving its original purposes.

Another problem is that external agencies, such as hospitals, managed care systems, insurance plans, and licensing agencies, have utilized the specialty certificate in ways for which it was never intended. Hospital privileges should not be based solely on the specialty certification. Reimbursement levels should be based on the quality of the service rather than on the specialty certificate. If licensing agencies in the several states use specialty certification as the standard for licensure, then the process of certification must change — otherwise licenses would need to be provided by specialty, i.e., specialists would be licensed only to practice their specialty. This would likely create even worse access and availability problems and increase costs.

Federal laws governing discrimination and antitrust activity are forming the basis for legal challenges to the current processes of specialty certification. It is a rather complex legal issue, but it is likely to be addressed in the court system in the near future. If the current system of voluntary certification is struck down, there will be a void that surely will be filled by government agencies. This will shift the standard-setting and evaluation functions to the political arena — a chilling prospect.

It will be the object of the American Board of Family Practice to assess carefully its role in the profession and society and to try to develop policies that, in the long run, will benefit the health and welfare of the public. At times these policies might appear to be contrary to the best interests of the physician or the Board. It is believed that the establishment and maintenance of high standards will benefit the public and bring credit to the profession.