Engagement of Family Physicians Seven Years Into Maintenance of Certification

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Transitioning Family Physicians to continuous Maintenance of Certification (MOC) was intended to support the quality improvement movement nationally, but it also risked decreasing their engagement due to the increased requirements for retaining certification. However, after completing the transition of all family physicians into MOC in 2010, participation appears higher than ever. (J Am Board Fam Med 2011;24:483–484.)

Quality concerns in the US health care system led the American Board of Medical Specialties to introduce Maintenance of Certification (MOC) in 2000 and subsequently require implementation by all its 24 members. Numerous reports have suggested that resistance to participation in MOC by board certified physicians might impede the effort at improving the quality of health care.1,2 The American Board of Family Medicine (ABFM) began its transition to Maintenance of Certification for Family Physicians (MC-FP) for those family physicians certifying or recertifying in 2003. This new process required continuous demonstration of professionalism, regular self-assessment of knowledge, and measurement of quality improvement in practice in addition to the traditional assessment of cognitive expertise by examination.

Seven years later, Family Medicine is the first specialty in which all diplomates have faced the choice of either engaging in this process or allowing their certification to lapse.3 Using ABFM administrative data, we evaluated the MC-FP participation status of the first of seven cohorts to enter this process. We found that of the 11,260 family physicians who certified or recertified in 2003 and thus entered Stage 1 of MC-FP, 8589 (76%) successfully completed their first and second 3-year stages and extended their original 7-year certificates by 3 years, thereby earning a full 10-year MC-FP cycle. Of the remaining 2671 family physicians who either defaulted to, or chose to remain on, the traditional 7-year pathway, 1335 successfully completed the 7-year pathway requirements. Some 1148 of these physicians successfully maintained their certificates by passing the MC-FP examination in the 7th year of their MC-FP cycle (see Figure 1).

Therefore, 88% (9924/11,260) of family physicians who entered the initial MC-FP cohort in 2003 are actively engaged in maintenance of certification. Historical comparison data demonstrate that in the recertification paradigm that existed before 2003, approximately 75% to 80% of family physicians who certified or recertified in any given year would return to recertify within 7 years. These findings suggest a significant commitment to professionalism in the discipline of Family Medicine, which was the first specialty to require periodic recertification when it was established as a specialty in 1969. Even given this precedent, engagement in MC-FP may be viewed as higher than expected, given historical data from the preceding recertification model. This is an encouraging sign, particularly if anticipated links between MC-FP, improved quality, and lower cost of care are confirmed. In the coming years, demonstrating MC-FPs impact on quality
and cost, as well as reducing disparities in engagement, are essential challenges for the specialty.  

References