- Questions submitted by attendees
- Reimagining continuing certification
- Research initiatives
- Assessment Changes
- Your questions and feedback
How do I know what I need to do for MOCA?
MOCA 2.0® REQUIREMENTS

- Medical License
  Unrestricted medical licensure

- CME
  250 Category 1 CME Credits
  (including 20 Patient Safety)

- MOCA Minute®
  Answer 120 questions each year
  and meet the standard

- Quality Improvement
  Collect 25 points every five years;
  Variety of options
MAINTAINING MULTIPLE CERTIFICATES

• Single set of MOCA 2.0 requirements for all certificates
  – Answer just 30 MOCA Minute questions per quarter (120/year by 11:59 p.m. EST on Dec. 31)
  – Pay $210 for the first certificate, $100 for each additional one

• Diplomates maintaining Sleep Medicine and/or Hospice and Palliative Medicine certificates:
  – Take the subspecialty recertification exam once every 10 years in lieu of answering MOCA Minute questions
BE ON THE LOOKOUT FOR YOUR OCTOBER MOCA PROGRESS REPORT

We’re sending quarterly MOCA 2.0 progress updates so you can see what you’ve accomplished and what’s left to do. The email will come from MOCA@theABA.org.
VISIT ABA BOOTH 1661

• Spend 10 minutes with our staff to make sure you're on track

• Review your progress in your portal

• Pick up your MOCA 2.0 end-of-year checklist
QUESTIONS?
What do I need to do to be “Participating in MOCA”? 
HOW TO MAINTAIN A “Participating in MOC” STATUS

EVERY YEAR

- Register for MOCA 2.0 in your portal
- Answer 120 MOCA Minute questions by 11:59 p.m. EST on Dec. 31
- You can answer up to 30 questions per day

- Have satisfactory medical licensure
- Have completed half of your CME (125 credits)
- Have completed half of your Quality Improvement activities (25 points)

END OF YEAR 5

- Have satisfactory medical licensure
- Have completed all of your CME (250 credits, 20 of which must be Patient Safety)
- Have completed all of your Quality Improvement activities (50 points)

END OF YEAR 10
Where can I find CME that I can complete online?
## 2018 MOCA Minute® Knowledge Assessment Report

Please click on a tab to view.

<table>
<thead>
<tr>
<th>Year</th>
<th>Performance by Topic Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>PHARMACOLOGY</td>
</tr>
<tr>
<td>2017</td>
<td>CLINICAL SCIENCES: ANESTHESIA PROCEDURES, METHODS AND TECHNIQUES</td>
</tr>
<tr>
<td>2016</td>
<td>ORGAN-BASED BASIC AND CLINICAL SCIENCES</td>
</tr>
</tbody>
</table>

This report provides details about the questions you answered incorrectly and CMEs related to the question topics.

**Question and Key point**

A 39-year-old woman is scheduled for a bilateral tubal ligation. Ove...(See More)

**Key point:** Cor pulmonale can result from a number of diseases affecting the function and/or structure of the lung. The presence of pulmonary arterial hypertension is associated with an increase in morbidity and mortality.

Peer Performance *(% Correct on First Attempt)*

<table>
<thead>
<tr>
<th>Key point</th>
<th>Peer Performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>During direct laryngoscopy in an otherwise healthy, 38-year-old woma...(See More)</td>
<td>64%</td>
</tr>
<tr>
<td>Key point: In patients with Wolff-Parkinson-White syndrome who present with atrial fibrillation, avoid drugs that block conduction through the atrioventricular (AV) node.</td>
<td>61%</td>
</tr>
<tr>
<td>A 42-year-old man presents with an incarcerated inguinal hernia and ...(See More)</td>
<td>53%</td>
</tr>
<tr>
<td>Key point: For patients with mitral regurgitation preload should be increased slightly, afterload reduced, and bradycardia avoided.</td>
<td></td>
</tr>
</tbody>
</table>
QUESTIONS?
Will the ABA offer a certification pathway for physicians who did their residencies abroad?
ALTERNATE ENTRY PATH (AEP)
Broadening the Pathway to Certification
## TWO AEP PATHWAYS

<table>
<thead>
<tr>
<th>RESEARCH &amp; FELLOWSHIP PATHWAY</th>
<th>CLINICIAN EDUCATOR PATHWAY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internationally-trained and certified</td>
<td>Internationally trained in an ABA-approved training program with 4+ years (3+ years of anesthesiology-specific training) of post-graduate education in anesthesiology</td>
</tr>
<tr>
<td>Practicing in U.S.</td>
<td>Letter of support from sponsoring program’s chair &amp; PD</td>
</tr>
<tr>
<td>Pre-existing track record of scholarship as represented by the scholarship of discovery, dissemination and application</td>
<td>Valid unrestricted medical license for scope of practice</td>
</tr>
<tr>
<td>Complete four years of continuous experience in one anesthesiology department</td>
<td>Board certification in anesthesiology from an ABA-approved certifying body</td>
</tr>
<tr>
<td>Approved four-year plan of fellowship training, research or faculty experience</td>
<td>Clinically active with a faculty appointment for four continuous years in an ACGME-accredited anesthesiology program</td>
</tr>
<tr>
<td>Funding for K or R grants from NIH, FAER, AHA, APSF, IARS, DOD, VA merit</td>
<td>Academic rank of assistant professor or higher at the time of application</td>
</tr>
<tr>
<td>Approved four-year mentoring plan for future academic development as a clinician educator</td>
<td></td>
</tr>
</tbody>
</table>
QUESTIONS?
Can I get MOCA credit for things I’m already doing?
Yes! You can earn credit for activities you're already doing.

New diplomate Chad Dean, M.D., recently received the Best Case Report recognition at the SOAP Annual Meeting for his poster: Successful Perinatal Management of a Woman with McArdle Disease. Dr. Dean can claim 15 QI points for reporting the Case Discussion activity type and time spent in his portal account.

Anya Raskin, M.D., D.ABA led a case discussion at her institution about succinylcholine after reading an article about its use. [Eligible for 15 points]

Pei-Shan Zhao, M.D., D.ABA developed a clinical pathway development care plan for a factor V deficiency case. [Eligible for 25 points]

Dipty Mangla, M.D., D.ABA implemented a new process to streamline patient referrals at her practice. She is eligible for 15 MOCA QI points for this case evaluation.
QI (PART 4) ACTIVITY OPTIONS

- MOCA simulation course
- Other on-site simulation course
- Online simulation
- Other ABMS Member Board Activity
- Institutional/departmental quality improvement project leader
- Quality improvement plan based on feedback
- Multicenter Perioperative Outcomes Group (MPOG): ASPIRE provider feedback emails
- Clinical pathway development leader or participant
- ABMS Multi-Specialty Portfolio Program leader or participant
- Case evaluation, M&M/case discussion or practice improvement CME
- Point-of-care learning
- AQI NACOR: Measure Review and Quality Improvement Action Plan
QUESTIONS?
I keep hearing about the future of continuing certification. What changes are coming?
REIMAGINING CONTINUING CERTIFICATION

PHASES

1. CUSTOMER EXPERIENCE
   - INCORPORATE NEXT GEN LEARNING
   - DEVELOP NEW ASSESSMENT PLATFORMS
   - ENHANCE QI/REGISTRY INTERFACE
MOCA USERS’ GROUP

• We’re redesigning the Physician’s Portal and developing an ABA mobile app with you in mind

• Over the past 18 months, a users’ group of 17 physicians has helped guide the redesign
  • Includes residents and diplomates, academic and private practitioners, and generalists and subspecialists

• The redesign and new app will launch next summer
INNOVATION SUMMIT

• Hosted Innovation Summit in April, bringing together leaders in technology, medical education and innovation to discuss trends in learning, professional development and medical education

• Designed to help inform the future direction of continuing certification

• White paper captures key insights, practical advice and aspirational implementation of emerging trends in technology and education
QUESTIONS?
RESEARCH INITIATIVES

**EVALUATION OF PRIMARY CERTIFICATION**

Adding the BASIC Exam increased knowledge at the end of residency as measured by written post-graduation exams.

Details on how we administer and score the oral exam.

**EVALUATION OF MOCA®**

Participation in MOCA, including MOCA Minute, is associated with fewer license actions taken by state medical licensing boards against physicians.

**PHYSICIAN WELL-BEING & WORKFORCE ANALYSIS**

Noted prevalence of burnout, distress, and depression among anesthesiology residents over past seven years.

Perceived institutional support and work-life balance impact well-being.
FUTURE VALIDATION RESEARCH
OBJECTIVE STRUCTURED CLINICAL EXAM (OSCE)

- OSCE description manuscript
- OSCE first-year results
- Analysis of OSCE and SOE measurement constructs
- Impact of OSCE on training programs
ASSESSMENT CHANGES
THREE-RESPONSE OPTIONS ON ASSESSMENTS

• In 2020, we’re transitioning some of our MOCA Minute multiple-choice questions from four- to three-response options
  • Diplomates will receive MOCA Minute questions with both three- and four-response options

• Also in 2020, we’ll pilot three-option questions with other assessments:
  • Pediatric Anesthesiology Exam, Critical Care Medicine Exam and In-Training Exams for Pediatrics and Critical Care Medicine

• We will consider transitioning other assessments to three-option questions based on the pilot results
COMBINING OSCE SKILLS STATIONS

COMMUNICATION & PROFESSIONALISM

- Combining informed consent and treatment options
- Peri-procedural complications
- Ethical issues
- Communication with other professionals
- Practice-based Learning and Improvement

TECHNICAL SKILLS

- Combining interpretation of monitors and interpretation of echocardiograms
- Application of ultrasonography
<table>
<thead>
<tr>
<th>Assessment</th>
<th>Increase</th>
<th>2020 Fee</th>
</tr>
</thead>
<tbody>
<tr>
<td>ITE-Anesthesiology</td>
<td>$75</td>
<td>$175</td>
</tr>
<tr>
<td>ITE-Subspecialties</td>
<td>$75</td>
<td>$175</td>
</tr>
<tr>
<td>BASIC</td>
<td>$100</td>
<td>$875</td>
</tr>
<tr>
<td>ADVANCED/Part 1</td>
<td>$100</td>
<td>$875</td>
</tr>
<tr>
<td>APPLIED/Part 2</td>
<td>$300</td>
<td>$2,400</td>
</tr>
<tr>
<td>Subspecialties</td>
<td>$200</td>
<td>$1,800</td>
</tr>
<tr>
<td>MOCA</td>
<td>No Change</td>
<td>$210; $100</td>
</tr>
</tbody>
</table>

*MOCA No Change (1st certificate; each additional one)*
NEW ABSENCE FROM TRAINING POLICY

Effective July 1, 2019
## ABSENCE FROM TRAINING POLICY

<table>
<thead>
<tr>
<th>OLD POLICY</th>
<th>NEW POLICY</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Up to 12 weeks (60 working days) of time away during CA1-3 years</td>
<td>• Up to 12 weeks (60 working days) of time away during CA1-3 years</td>
</tr>
<tr>
<td></td>
<td>• Up to 8 additional weeks of leave with ABA-approval (40 working days) during the CA1-3 years without extending training</td>
</tr>
<tr>
<td></td>
<td>• Additional leave must be approved by the program director and chair prior to submission</td>
</tr>
</tbody>
</table>

Absences in excess of policy will require lengthening total training time
WORKING TOGETHER WITH DIPLOMATES
WE WANT YOUR FEEDBACK
QUESTIONS?

COMMUNICATIONS CENTER
Phone: (866) 999-7501
Fax: (866) 999-7503
Email: coms@theABA.org

MAIL CORRESPONDENCE
ABA Secretary
4208 Six Forks Rd, Suite 1500
Raleigh, NC 27609-5765

FOLLOW US:
NEW NEUROCRITICAL CARE (NCC) SUBSPECIALTY CERTIFICATION

• New NCC certification exam will be administered by the American Board of Psychiatry and Neurology

• Also offered to eligible diplomates from the ABA, and the American Boards of Emergency Medicine and Neurological Surgery

• First exam will be in 2021; grandfathering criteria on ABA website