

Subject: Hospital Privileges and Certification Requirement

August 10, 2015

Jesse Adams, III, MD, FACC (jadams03@bluegrass.net)

I hope this finds everyone starting off their week with a good and productive Monday.

I was contacted by a cardiologist here in KY and I am interested in the thoughts of others on the BOG .

I know this physician well and she is a careful and conscientious cardiologist. She also expects physicians to hold themselves to the highest standards- and has at times been a passionate advocate for that.

She called me today as the hospital system where she works is looking at modifying the language in their hospital bylaws. Currently, those bylaws require that every physician on staff be board certified by the ABIM. The issues with MOC and the ABIM have led them to consider modifying that requirement (recognizing that it could take some time to implement a change in their bylaws, and they don't want something to "suddenly happen" that would lead to a physician availability crisis at their institutions).

Her questions:

1. Is there another certifying body other than ABIM that they should include as an additional option?
2. Conversely, should they simply alter the language to be more generic ("certified by a national organization")? If so, how do they guard against a certification from "Bob's Lube and MD Certification?"
3. Is there a way for their organization to assess physician competency across their organization using an alternative mechanism rather than board certification?

I'll wait for responses- then I'll share with you how I initially responded to her (letting her know that I would get back with her after gathering some more feedback).

August 10, 2015

Sunil Mankad, MD, FACC (Mankad.sunil@mayo.edu)

Jesse, I would not change anything but simply wait and see what happens in the next 1-2 years. There is just too much uncertainty of what will happen. MOC and ABIM may go away or it may be reinforced. I just don't think we know yet.

August 10, 2015

Michael Mansour, MD, FACC (mmansour@cvdocs.com)

Jesse

Several points.

The issue of initial board certification is unlikely to change in my opinion since this has not been a point of contention and so ABIM would likely continue in this context.

The issue of recertification has been excluded from some hospital bylaws. Recertification may well change to something consistent with lifelong learning and maintenance of competence. This is the area in transition as we all know and it's too soon to know how this will evolve.

Some hospitals tell me that some Medicare regulation prevents awarding hospital privileges based on board certification. I can't verify this and maybe someone knows what if any new or old Medicare policy exist on this topic.

August 12, 2015

Edward Fry, MD, FACC (fry5@comcast.net)

Jesse,

Agree with waiting and not changing anything right now:

- The ABIM 2 year (may be extended) moratorium buys time. Use it to see how things play out.
- If there is a new path or if there is a better ABIM path, the by-laws should be ammended later on to reflect
- Despite being red meat to the zealous, the NBPAS is not established enough to hang your hat on it in my opinion.
- Keep any reference to MOC and recertification as vague as possible, or better yet do not even mention it
- Many of the commercial payer contracts that stipulate Board Certification could be compromised by any change not mutually accepted by the payer.

Good luck!

August 12, 2015

William Bommer, MD, FACC (wjbommer@ucdavis.edu)

In California(CDPH), we will accept either ABIM or NBPAS certification maintenance.