American Board
of Internal Medicine®

MOC ASSESSMENT RECOGNITION

Program Guide

Overview

Since its founding in 1936, Certification by the [American Board of Internal Medicine](#) (ABIM) has stood for the highest standard in internal medicine and its 20 subspecialties and has meant that internists have demonstrated – to their peers and to the public – that they have the clinical judgment, skills, and attitudes essential for the delivery of excellent patient care. ABIM is not a membership society, but a physician-led, non-profit, independent evaluation organization. Our accountability is both to the profession of medicine and to the public.

The ABIM Maintenance of Certification (MOC) program was created with input from thousands of physicians across the country. It provides doctors with a pathway to know that they are staying current in the medical knowledge they use to treat patients and make important care decisions daily. ABIM Board Certified physicians must earn 100 MOC points every 5 years.

The ABIM MOC Assessment Recognition Program is the process through which ABIM recognizes accredited Continuing Medical Education (CME) activities for MOC credit. Alignment of the ABIM MOC Assessment Recognition Program with the Accreditation Council for Continuing Medical Education's (ACCME's) accredited CME system allows ABIM Board Certified physicians to earn MOC credit for a wide range of CME activities that meet the requirements specified in this document.

ABIM MOC Assessment Recognition Program

Every activity registered for ABIM MOC recognition must meet the "Requirements for all MOC Activities" defined below in ABIM1-5. Additionally, activities registered for:

- ABIM Medical Knowledge MOC points must meet the applicable format-specific requirements in ABIM6-7;
- ABIM Practice Assessment MOC points must meet all requirements defined in ABIM8-14; and
- ABIM Patient Safety MOC credit must meet ABIM15.

Activities may be registered for a single ABIM MOC credit type or combinations of credit types, including:

- Medical Knowledge only
- Medical Knowledge + Practice Assessment
- Medical Knowledge + Patient Safety
- Medical Knowledge + Practice Assessment + Patient Safety
- Practice Assessment only
- Practice Assessment + Patient Safety

An activity cannot be offered for ABIM Patient Safety MOC credit alone. Patient Safety MOC credit must be offered in combination with at least one other credit type (i.e., Medical Knowledge and/or Practice Assessment).

Requirements For All MOC Activities

ABIM1: The activity is directly or jointly provided by a provider accredited within the ACCME system and certified for *AMA PRA Category 1 Credit*[TM] in one of the following activity types:

- Course
- Committee Learning
- Enduring Material
- Internet Activity (Enduring Material)
- Internet Live Course
- Internet Searching and Learning
- Journal Based CME
- Learning from Teaching
- Manuscript Review
- Other
- Performance Improvement
- Regularly Scheduled Series
- Test Item Writing

Providers may register sessions or modules that are part of a larger, accredited CME activity for ABIM MOC recognition.

ABIM2: The activity is relevant to physician learners certified by ABIM, as demonstrated by the professional practice gap(s) and content of the activity.

ABIM3: The activity includes an **evaluation component** that measures the impact of the activity on the physician learners' knowledge, strategies/skills, performance, and/or patient outcomes. This requirement is aligned with

both the ACCME and AMA expectations that the accredited provider evaluates changes in learners achieved as a result of the activity.

See Appendix A for Evaluation Examples, including multiple-choice, fill-in-the-blank, or longer-form tests; written or shared responses; or other formative and summative content-relevant exercises that evaluate the effectiveness of the learning.

ABIM4: The activity includes a minimum MOC **participation threshold** demonstrating physician learners' meaningful engagement in the activity and provides **feedback** to learners.

ABIM5: The ABIM MOC Recognition Statement is provided to learners prior to the start of the activity.

Medical Knowledge Requirements

ABIM6: The activity or its content is peer-reviewed by at least two reviewers who are not the author(s). The process of peer review means that the activity or educational materials are reviewed by other clinicians who are sufficiently familiar with the subject matter of the activity or material to be able to render an opinion as to whether the activity or materials align with the learning objectives and are fair, accurate, and free of commercial bias.
Required for all activity types except Internet Searching and Learning, Performance Improvement and Test Item Writing.

ABIM7: The physician learner participates in a committee process that includes a minimum of three members.
Required for Test Item Writing only

Practice Assessment Requirements

ABIM8: The activity addresses a quality or safety gap that is supported by a needs assessment or problem analysis, or supports the completion of such a needs assessment as part of the activity.

ABIM9: The activity addresses care, care processes, or systems of care in one or more of the National Academy of Medicine's (formerly the Institute of Medicine) quality dimensions or one or more of the three Aims or six Priorities articulated in the National Quality Strategy.

ABIM10: The activity has specific, measurable aim(s) for improvement.

ABIM11: The activity uses measures appropriate to the aim(s) for improvement.

ABIM12: The activity includes interventions intended to result in improvement.

ABIM13: The activity includes appropriate data collection and analysis of performance data to assess the impact of the interventions.

ABIM14: Per ABIM4, the provider defines a minimum participation threshold for MOC, and describes how they will identify physician learners who meaningfully engage in the activity according to their defined requirements. Physician learners are likely to participate in one or more of the areas outlined in ABIM8-13, but participation in every step of the quality improvement process is not an ABIM requirement.

ABIM15: The activity addresses at least one of the following topics:

- Foundational knowledge (must include *all* of the following):
    - Epidemiology of error: should prepare physicians to discuss the key definitions that underpin current patient safety efforts
    - Fundamentals of patient safety improvement (plan, do, study, act or PDSA): should engage physicians in a PDSA cycle focused on patient safety
    - Culture of safety: should identify the specific elements, (i.e., the beliefs, attitudes and values about work and risks) that contribute to safety culture
- Prevention of adverse events (examples include, but are not limited to):
    - Medication safety (e.g., medication reconciliation, safe use of analgesics and sedatives, identification and remediation of polypharmacy in the elderly)
    - Prevention of healthcare acquired infections
    - Falls prevention
    - Teamwork and care coordination

ABIM MOC Assessment Recognition Program Policies

Designating MOC Points

The activity may be registered for ABIM MOC points up to the maximum allowable *AMA PRA Category 1 Credits*[TM] for which the activity is designated. The provider must select at least one ABIM MOC credit type for which points may be earned.

Learner Completion Information

The provider must have systems, resources and processes in place to:

- collect the learner completion information described in Table 1;
- obtain permission from the physician learner to share the completion information with ACCME; and
- transmit the completion information to ACCME on behalf of the learner.

Please note: Providers are encouraged to submit learner completion information as soon as possible after the activity is completed so that MOC points can be applied to physicians' records. MOC points earned for activities completed by December 31 will count towards any MOC requirements that are due by the end of the year.

Table 1: Learner Completion Information

Field Name	Description
ABIM ID	Every ABIM Board Certified physician has a unique, six-digit ABIM ID number.
First Name	Physician learner's first name
Last Name	Physicians learner's last name
DOB	Physician learner's date of birth (mm/dd)
Activity Completion Date	Date (mm/dd/yyyy) the physician learner completed the activity

MOC Points	MOC points are equivalent to the amount of CME credits claimed by the physician learner for the activity.
MOC Credit Type(s)	Indicate the credit type(s) for which the MOC points should be granted. Credit types include Medical Knowledge, Practice Assessment, and Patient Safety.

Learner completion information is governed by ABIM's Confidentiality Policy. Identifiable patient data shall not be provided to ACCME or ABIM by any organization or learner.

Submitting Learner Completion Information from Prior Years
ABIM does not have any restrictions that preclude learners from earning MOC credit for registered activities completed in prior years, as long as the learner meaningfully engaged in the education, including the evaluation component. The purpose of this provision is to accommodate learners who inadvertently failed to claim MOC points for a past activity.

Providers can submit learner completion information in PARS for the current and immediate past reporting years (e.g., 2018 learner completion information can be submitted through 3/31/2020; 2019 learner completion information can be submitted through 3/31/2021). On the rare occasion that the provider needs to submit learner completion information older than 2 years, please contact ABIM at mocprograms@abim.org.

Use of Learner Data
If learner data will be shared with the funder of the activity or any other commercial entities, whether individually or in aggregate, this must be disclosed to learners prior to the beginning of the activity. This transparency allows learners to decide if they wish to participate in activities that provide their data and/or data about their clinical practice to commercial entities.

Program Fees/Learner Fees
ABIM will not charge a fee to providers that register activities for ABIM MOC recognition at this time. ABIM may revisit its fee structure in the future.

Providers are responsible for all costs associated with developing and operating the activity. ABIM has no policy that precludes the provider from charging a fee for participation in the activity. ABIM will not reimburse fees charged by the provider to physician learners.

Data Privacy and Security Compliance
Providers are responsible for ensuring that the appropriate data privacy and security safeguards are in place and conform to all relevant regulatory and industry requirements.

Public Information About Activities Registered for ABIM MOC Recognition
ACCME publishes information about accredited CME activities that have been registered for ABIM MOC via its CME Finder. CME Finder is a publicly available, online search tool that provides a one-stop resource for physician learners seeking to earn MOC points by participating in accredited CME.

ABIM MOC Recognition Statement
Per ABIM5, the following statement must be provided to learners prior to the start of the activity:

"Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to [MOC point amount and credit type(s)] MOC points [and patient safety MOC credit]

in the American Board of Internal Medicine's (ABIM) Maintenance of Certification (MOC) program. Participants will earn MOC points equivalent to the amount of CME credits claimed for the activity. It is the CME activity provider's responsibility to submit participant completion information to ACCME for the purpose of granting ABIM MOC credit."

Please note that CME providers offering MOC points for sessions or modules that are part of a larger, accredited CME activity may omit this sentence from the identification statement: "Participants will earn MOC points equivalent to the amount of CME credits claimed for the activity."

Audit

The ACCME will provide "Audit Services" on behalf of the ABIM MOC Assessment Recognition Program for the benefit of ABIM, its Board Certified physicians, and providers accredited by the ACCME system. As a requirement of participating in the ABIM MOC Assessment Recognition Program, accredited providers agree to participate in an audit of their activity(ies), if selected, and to allow the ACCME to share the results of the audit with ABIM. The ACCME will select 40 activities for audit each year (July 1-June 30) from among those registered in the ACCME's Program and Activity Reporting System (PARS) as "ABIM MOC-compliant education." Providers will not be selected for an audit more than once per year unless they have an activity that previously failed some portion of the audit during that year. The accredited provider will be required to submit the materials described in Table 2 for their activity(ies) selected for audit. Providers may also view the ABIM MOC Structured Abstract on ACCME's website.

The ACCME will produce an audit report on compliance with the applicable ABIM MOC Assessment Recognition Program requirements. ABIM will determine next steps for the accredited provider if ABIM's requirements are not met. Providers will receive a warning for the first violation, will not be permitted to submit learner completion information for an activity that fails the audit, and will be responsible for communicating with their learners about the MOC status of the activity. ABIM will not revoke MOC credit that has already been issued to physician learners who participated in an activity that fails the audit.

Continued failure to meet ABIM's policies and requirements could result in a change in the provider's status. ABIM may revisit this policy in the future.

Table 2: Description of the Elements of an Audit

	ABIM Requirement	Materials to be Submitted by Accredited Provider
Requirements for all MOC Activities	ABIM1	None - only providers accredited within the ACCME system are eligible to register activities in PARS for ABIM MOC.
	ABIM2	A description of the professional practice gap and educational need for the activity.
	ABIM3	Information relevant to the method of evaluation that was utilized for the activity that measured learner change, including: • a description of how the evaluation is conducted; and • a copy of the evaluation tool (e.g., multiple–choice, fill-in-the-blank, or longer-form tests; written or shared responses; or other formative and summative content-relevant exercises).
	ABIM4	• a description of the minimum participation threshold (e.g., score, correct written or shared response, etc.); • verification that the learners successfully met the minimum participation threshold for the activity; and • a description of the process by which feedback was provided to learners.
	ABIM5	Evidence that physician learners were informed that their participation information would be shared with ABIM through PARS prior to the start of the activity.
Medical Knowledge	ABIM6	Verification that the content of the activity was peer-reviewed by two clinician reviewers who were not the original authors/presenters: a. The name, credentials, affiliations and qualification of the reviewers; b. The results/conclusions of the reviewers.
	ABIM7	A description of the committee process that was utilized, including the number of members of the committee.
Practice Assessment	ABIM8	A description of how the activity addresses a quality or safety gap that is supported by a needs assessment or problem analysis.
	ABIM9	A description of how the activity addresses care, care processes, or systems of care in one or more of the National Academy of Medicine's quality dimensions or one or more of the three Aims or six Priorities articulated in the National Quality Strategy.
	ABIM10	A description of the specific, measurable aim(s) for improvement.
	ABIM11	A description of the measures used in the activity and how they address the gap in quality.
	ABIM12	A description of the interventions that were or are being implemented that directly relate to achieving the aim of the activity.
	ABIM13	A description of: • the method and frequency of data collection and performance analysis; and • how data are used to drive improvement throughout the activity.
	ABIM14	A description of: • the minimum participation threshold for the activity and how the provider identifies physicians who meet the threshold; and • verification that learners successfully met the minimum participation threshold for the activity.
Patient Safety	ABIM15	Demonstration that the activity addressed one of the required topics (e.g. Foundational Knowledge of Prevention of Adverse Events).

Appendix A: Evaluation Examples

ABIM and ACCME share the expectation that accredited providers evaluate the impact of their activities on learners' knowledge, strategies/skills, performance, and/or patient outcomes. The following examples of evaluation approaches have been compiled as a resource for accredited providers. These are only examples—and not an exhaustive list—of the methods that can be used by the accredited provider in CME that supports ABIM MOC.

ABIM's requirement for evaluation can be found in ABIM3. The AMA requirements for evaluation can be found in Core Requirement 6 of its AMA PRA Booklet. ACCME requirements related to evaluation can be found in Criterion 11 of its Accreditation Criteria.

Important Tips:
- The accredited provider may choose to evaluate an activity at the session level or at the activity level. As well, the provider does not need to be limited to a single method of evaluation per activity. Combinations of approaches to evaluation may produce rich information about learner change.
- The accredited provider must be able to demonstrate that the learner has participated in/completed the evaluation (i.e. via scenarios below or some other method the provider uses) for the educational activity in order to submit the learner's participation completion information for the activity.
- If the activity is selected for audit, the accredited provider will be asked to submit the evaluation mechanism, a description of how the evaluation was implemented and how feedback was provided to learners, and a list of the physician learners who met the minimum participation threshold.

Evaluation Mechanism	Evaluation Method	Participation Threshold	Feedback Method
Case Discussion	Learners asked to share with each other and group how they would approach the case at various stages.	Learner actively participates in the conversation as judged by a group leader or observer.	The outcome of the case is shared.
Written responses	Learners write down what they have learned and indicate commitment to change or maintain an element of practice.	Learner writes a reflective statement and makes a commitment to change or maintain an element of practice.	Leader/facilitator summarizes what was discussed and best next steps for learners.
Audience response system	Learners select answers to provocative questions using the ARS.	Learner attempts an acceptable number of questions. Threshold set by provider.	Answer to each question is shared in dialog or writing, including rationale for correct answers with relevant citations.
Quiz	Learners complete answers to a quiz during or after an activity.	Fraction of answers correct set by provider.	Best answer to each question is discussed or shared, including rationale for correct answers with relevant citations.
Table-top exercise	Learners write down next steps in an evolving case at various set points.	Learner writes a possible next step to each question.	Best practice at each step is discussed or shared after each set point.
Simulation	Learners demonstrate strategy/skill in a simulated setting – could be role-play or formal simulation lab.	Learner participates in simulation as judged by a facilitator or observer.	Best practice or technique is discussed/shared throughout or at the conclusion of the simulation.