

June 8, 2018

Dear members of the rheumatology community:

I am writing you with an important message about certification in rheumatology. This has been a significant area of concern for our members and the ACR has undertaken many efforts to address issues related to ongoing certification with the American Board of Internal Medicine (ABIM). These efforts have now led us once again ask you to contribute your voice on this issue.

Certification in specialty training by an independent board is a cornerstone of professional medical practice and plays an important role in establishing our professional medical standing and public trust in our work. Maintenance of Certification (MOC) has also been established as an important mechanism for certifying that practitioners are remaining current. As ACR leaders have traveled around the country and listened to our members talking about issues affecting our profession, few issues have engendered as much impassioned debate as MOC. In the setting of the most recent changes to MOC by ABIM and the groundswell of concerns that have been voiced by [ACR members](#), the ACR has been actively advocating for MOC reform. The [ABIM](#) has worked to revise its MOC program through collaboration with the internal medicine community and the ACR has been a regular participant in these discussions.

To further address this issue, the ACR formed a taskforce in December 2016 to further analyze the impact of the changes on rheumatologists and their patients. As part of its work, the task force examined approaches to MOC being taken by other certification boards within the American Board of Medical Specialties (ABMS). The ACR thus learned of a [pilot MOC program](#) being tested by the American Board of Allergy and Immunology (ABAI). Given our shared interest in immunologically mediated diseases, the task force recommended further evaluation of the ABAI program and this approach was approved by the ACR Board of Directors. We learned that the ABAI MOC program primarily tests knowledge of recently published articles in the medical literature, replaces ABAI's 10-year secure MOC exam and appears to address many of the learning goals and [key issues](#) identified by ACR members. This approach could also provide a meaningful model for rheumatologists to demonstrate continuing professional development with the application of evidence-based standards.

Many ACR members have voiced the opinion that MOC should be linked to activities that advance ongoing learning as the best and most realistic way to ensure that physicians are keeping up with the newest improvements in rheumatologic care. During a recent meeting with ABIM leadership, we discussed the feasibility of piloting a similar program with the ABIM and learned that a model based on literature review does not align with ABIM's MOC principles. The goals that are at the core of the ABIM principles of physician certification are meritorious insofar as they help document that physicians have achieved sufficient competence in the care of patients. However, the fact that other ABMS certification boards have developed alternative approaches to maintenance of certification underscores the fact that there are other ways to align with the spirit of those principles. The ACR Board of Directors has been committed to addressing concerns of the rheumatology community by working to facilitate discussions to identify the best possible option for the future. Thus we have started more detailed discussions with the ABAI to determine the feasibility, advantages and disadvantages of forming a new combined board of Allergy, Immunology and Rheumatology.

Were we to pursue this potential option, the new board would remain as a conjoint board with ABIM in that ABIM would still provide initial certification in Internal Medicine. However, initial certification in Rheumatology would no longer be obtained through ABIM, but rather through this newly formed board. While there has been no concern raised from the community about the initial ABIM rheumatology certification and there continues to be significant confidence in the value and validity of this exam, ABMS requires that initial certification and MOC be done by a single board. Thus, formation of a combined allergy, immunology and rheumatology board would require development of a new initial certification exam.

### **Should Rheumatology Initial Certification and MOC Change?**

We are dedicated to remain in alignment with the foundational assumptions of the ABMS [Vision for the Future](#) that affirms the role of continuing board certification as part of the professional self-regulatory system and requires that participants are committed to professional self-regulation as both a privilege and a responsibility. While exercising due diligence in exploring this option, the ACR Board of Directors feels that it is critically important to solicit the views of those that would be impacted by such a change. The views of the rheumatology community are an important part of the consideration of a change in the certification program for our specialty. Thus we will soon be launching a survey of the community about this very important issue. The validity and utility of the survey depends on the community of rheumatologists being well informed about the details of the issues related to certification and recertification and this potential change. Over the next two weeks you will receive a series of communications from the ACR detailing the MOC Taskforce findings including the changes the ABIM is implementing and the feasibility, process and implications of moving rheumatology certification and recertification to a combined board with ABAI.

To help facilitate this discussion all information will be posted on our [website](#). To get started, please review the [initial overview](#) and the [Rheumatology Certification FAQ's](#) we have prepared. Throughout this process there will be multiple opportunities for you to provide feedback. **Please read further and add your views to this discussion.** A formal survey will be distributed in June; please keep an eye out for it!

**We are listening, and we are here for you, so that you can be there for your patients.**

Thank you in advance for your participation,



David Daikh, MD, PhD  
ACR President