

## ABA UPDATE

SOCIETY OF ACADEMIC ANESTHESIOLOGY ASSOCIATIONS (SAAA)



**James P. Rathmell, M.D.**  
Secretary, ABA

Massachusetts General Hospital  
Boston, Mass.

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## DISCUSSION OVERVIEW

- Upgrades to the Record of Training Information Database (RTID) & Physician's Portal
- Primary Certification Changes; Staged Exams
- Subspecialty Certification
- Alternate Entry Pathway (AEP) – pilot to program
- MOCA/MOCA re-design
- Changes to primary certification process
- ACCM update

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## RTID/PORTAL UPGRADE

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## RECORD OF TRAINING INFORMATION DATABASE (RTID)

- The ABA redesigned the RTID to:
  - make it easier to navigate
  - better suit the needs of training programs
- The ABA developed a training manual to walk Program Directors and administrators through the changes



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## NEW RTID

Changes likely to have the greatest impact on your reporting:

- **Real-time posting:** Once training records are approved by Program Directors, the information is posted immediately to the residents'/fellows' record.
- **Date-driven Training:** The new RTID requires start and end dates for reporting all training rotation types.
- **Programs Information Page:** The Programs Information page is the new home page of RTID. It provides a dashboard program administrators may use to monitor training period activity.
- **Program Director Reference Form (PDIR Form):** RTR/CCC Reports **MUST** be completed and approved before the PDIR Form can be submitted and approved.

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## RTID REPORTING REQUIREMENTS

- Programs should:
  - Complete new Resident Enrollment Forms every 6 months – by **Jan. 31** and **July 31**
  - Assess and report clinical competence every 6 months – by **Jan. 31** and **July 31**
    - Assessment of residents' clinical competence to align with **ACGME Anesthesiology Milestones**
    - Attestation of **7 Essential Attributes**
  - Assess whether resident can **perform independently** the entire scope of practice in the specialty or subspecialty without accommodation or with reasonable accommodation, at end of training program



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## PRIMARY CERTIFICATION



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## 2015 CHANGES

- The ABA will implement a new registration system to replace the traditional payment process, which included separate application and exam fees.
  - Candidates who register **on or after March 1, 2015** will pay one registration fee in the same year as the exam
  - Candidates who applied to take an exam **prior to June 30, 2014** as part of the traditional process will pay only the exam fee since they previously paid only the application fee
  - **The total standard fee for the Part 1 Exam is the same (\$1,550) whether you pay via the traditional process or the new registration system**



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## TRANSITION TO STAGED EXAMINATIONS

- Staged examinations
  - Complement ACGME movement toward competency based training and promotion
  - Designed to encourage residents to engage in more sustained study over the course of residency training
- Residents who complete their four-year CA training **on or after June 30, 2016** will take the staged exams
- Residents who complete training before June 30, 2016 will take the traditional Part 1 and Part 2 Exams



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## 2015 PART 2 EXAMINATION ABA ASSESSMENT CENTER

- All Part 2 Examinations held in new Assessment Center in Raleigh, N.C., beginning in 2015
- Starting in 2017, the APPLIED Examination, including the oral and the OSCE, will be administered in the Center
- ABA Director Cynthia Lien will share more information about the exams and the new Assessment Center during her presentation



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## 2015 PART 2 EXAMINATIONS

- Nine administration weeks
  - About 250 candidates per week
  - Seven spring exam weeks (February to May)
  - Two fall exam weeks (August to October)



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## SUBSPECIALTY CERTIFICATION



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## SUBSPECIALTY CERTIFICATION

- The ABA currently offers subspecialty certification in:
  - Critical Care Medicine
  - Pain Medicine
  - Hospice & Palliative Medicine
  - Sleep Medicine
  - Pediatric Anesthesiology
- **2015 is last year** to register with “Grandfathering Criteria” for Pediatric Anesthesiology Examination




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## SUBSPECIALTY PROGRAM DIRECTORS' MEETINGS

- The ABA will host Subspecialty Program Directors' Meetings in 2015 to share information about the significant changes to our assessment programs
- Topics the Board will focus on include:
  - Newly redesigned Record of Training Information Database (RTID)
  - Fellowship enrollment and assessment process
  - Substance use disorder amongst residents
  - Maintenance of Certification in Anesthesiology Program for Subspecialties (MOCA-SUBS)




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## ALTERNATE ENTRY PATHWAY



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## ALTERNATE ENTRY PATHWAY (AEP)

- The seven-year pilot program was approved to continue as a program as of July 2014
- **Purpose:** To encourage **outstanding** internationally trained and certified anesthesiologists, who come to the United States, to become productive research members of U.S. academic anesthesiology programs




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## AEP STATISTICS

| JULY 2007 – DEC. 2013                       |     |
|---|-----|
| # of Individuals Nominated                  | 113 |
| # of Programs Approved                      | 30  |
| # of Individuals Approved                   | 56  |
| # of Individuals Eligible for Certification | 29  |
| # of Individuals Now Certified              | 20  |



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# MOCA<sup>®</sup>

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## PURPOSE OF MOCA<sup>®</sup>



- Maintenance of Certification in Anesthesiology Program (MOCA) is about:
  - Advancing lifelong learning throughout your career
  - Emphasizing quality of practice and patient care
- The emphasis is on **Maintenance** of Certification, rather than Recertification

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## FOUR COMPONENTS OF MOCA<sup>®</sup>

|  |   |
|--|---|
| <b>Part 1:</b><br>Professional Standing<br>(Medical License) | <b>Part 2:</b><br>Lifelong Learning and<br>Self-Assessment<br>(CME)     |
| <b>Part 3:</b><br>Cognitive<br>Examination                   | <b>Part 4:</b><br>Practice Performance<br>Assessment and<br>Improvement |

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## MOCA: EXPIRED TIME-LIMITED CERTIFICATES

- All diplomates who are not able to complete the requirements within 10 years will be allowed to continue in MOCA for up to three additional years
- Time-limited certificates will expire
- The ABA will move 10-year cycle forward, one year at a time
- Any activities completed in original Year 1 are removed and must be redone
- All other requirements must also be met



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## NEW: REINSTATEMENT FEE FOR INCOMPLETE MOCA REQUIREMENTS

- **Effective Jan. 1, 2014**, all diplomates (including non-time limited certificate holders) who wish to complete the MOCA program in Years 11, 12 and 13 will pay a \$525 fee for each year they continue in the MOCA program.

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# MOCA<sup>®</sup> RE-DESIGN

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## MOCA® PERCEPTION SURVEY

INVITED  
**29,000**  
DIPLOMATES TO PARTICIPATE

- Gain a better understanding of perceptions
- What should be done to improve MOCA

- Most reported that they believe the Part 2 component (CME) is the most useful
- Majority found Part 3 (Exam) and Part 4 (Practice Improvement) the most challenging components

28%

responded

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## REDESIGNING MOCA®

- Reimagining MOCA® (MOCA 2.0™) based on diplomate feedback
- Ensure that MOCA remains relevant
- Provide a more personalized approach to maintaining medical knowledge
- Identify and address knowledge gaps and patient safety needs

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## GOALS OF MOCA 2.0

|   |
|---|
| Promote continuous lifelong learning            |
| Relevant to diplomates' practices               |
| Professionally and publicly credible            |
| Ongoing continuous assessment                   |
| Encourage group discussion                      |
| Incorporate principles of adult learning theory |
| Facilitate Quality Improvement and Safety       |
| Integrate Parts II, III, IV                     |

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## MOCA MINUTE™ PILOT

- Free pilot program to help diplomates achieve better understanding of topics answered incorrectly on the MOCA® exam

### GOALS

Help them be successful on the exam

Determine if this interactive learning model is more effective and relevant

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## MOCA MINUTE™ PILOT

- Engage busy physicians through a **continuous, dynamic assessment** of knowledge
- Focused content that can be accessed and reviewed later to refresh knowledge
- Allows diplomates to quickly assess their knowledge and then guides them to resources to strengthen their expertise

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## MOCA MINUTE™

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## MOCA MINUTE™ RESULTS

- First phase of the pilot complete
- Diplomate feedback shows very positive experience
- Diplomates who actively participated in MOCA Minute scored **higher** than diplomates who did not participate
- Pilot to expand in 2016 to all diplomates

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## MOCA FOR SUBSPECIALTIES (MOCA-SUBS)

- The ABA transitioned from Subspecialty Recertification to MOCA-SUBS in 2010. The last subspecialty recertification examination will be in 2016, and the first MOCA-SUBS examination will be in 2017
- Overlapping MOCA requirements for primary and subspecialty certification will count toward both if completed during 10-year cycle
- The MOCA-SUBS program requirements mirror those of the MOCA program requirements, with the following exceptions:
  - Some of the required MOCA Part II CME activities must be related to the subspecialty certification being maintained
  - A separate MOCA Part III Cognitive Examination is required for each certificate being maintained
  - The ABA will verify diplomates' clinical activity in the subspecialty  
(The ABA defines "clinically active" as spending, on average, at least one day per week during 12 consecutive months over the previous three years in the clinical practice of anesthesiology and/or related subspecialties.)

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## ACCM CERTIFICATION

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## ACCM CERTIFICATION APPROVED FOR EMERGENCY PHYSICIANS

- On June 26, 2013, the ABMS Board of Directors unanimously approved joint sponsorship between the ABA and the American Board of Emergency Medicine (ABEM) of certification in Anesthesiology Critical Care Medicine (ACCM).
- Emergency physicians can now apply for ACGME-accredited ACCM fellowship training after their Emergency Medicine residency training, and when qualified by completing a 24-month ABA-approved CCM fellowship, be able to seek Board certification.



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## ACCM CERTIFICATION APPROVED FOR EMERGENCY PHYSICIANS

Visit [www.theABA.org](http://www.theABA.org) for information about the ACCM:

- General eligibility criteria
- Program standards
- Program applications
- Fellowship training pathway
- Practice pathway

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## ACCM CERTIFICATION APPROVED FOR EMERGENCY PHYSICIANS

Approved Two-Year ACCM Training Programs

- Case Western Reserve University/University Hospital Case Medical Center Program
- Washington University/B-JH/SLCH Consortium Program
- University of Michigan Program
- Jackson Memorial Hospital/Jackson Health System Program
- University of Florida Program
- University of Alabama Medical Center Program
- University of Chicago Program
- Emory University Program
- Stanford University Program
- University of Washington Program
- UCLA Medical Center Program
- University of Iowa Hospitals & Clinics
- New York Presbyterian Hospital – Columbia Campus Program
- McGaw Medical Center of Northwestern University Program
- University of Nebraska Medical Center College of Medicine
- University of Cincinnati Medical Center/College of Medicine Program

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## COMMUNICATING WITH THE ABA

### MAIL CORRESPONDENCE:

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Raleigh, NC 27609-5765

### COMMUNICATIONS CENTER: (866) 999-7501

Email: [coms@theABA.org](mailto:coms@theABA.org)  
Fax: (866) 999-7503

### FEEDBACK VIA RTID:

Click the Feedback Icon



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## QUESTIONS?



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