Exploring the Value of the ABMS Brand

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DISCLOSURES

John D. Mandelbaum is

• Chief Legal Officer of the American Board of Medical Specialties.

• Licensed to practice law in Illinois, Missouri and Kansas.
ABMS Brand Benefits

- State Advertising Limitations (21 states)
- Medical Board Licensure Waivers (13 jurisdictions)
- FSMB Interstate Medical Licensure Compact (18 jurisdiction, 8 pending)
- ACGME Residency Programs
- Health Care Organization Privileging Requirements
- Medicare & Medicaid Recognition
- Government & Private Employment Requirements
- Judicial Recognition & Expert Witness Statutes
- Health Insurance Recognition
- Malpractice Insurance Benefits
- International Recognition
STATE ADVERTISING LIMITATIONS

• 21 States limit advertising of “board certification” status
• Major states include California, Florida, Illinois, Texas
• Medical Board of California Rule:
  Business and Professions Code section 651(h)(5)(A)&(B) prohibits physicians from advertising that they are board certified unless they are certified by:
  (1) an ABMS member specialty board;
  (2) a specialty board with an ACGME accredited postgraduate training program; or
  (3) a specialty board with "equivalent" requirements approved by the Medical Board of California's Licensing Program
• Only Four (4) Non-ABMS Specialty Boards Approved by CA to Date
State Advertising Limitations

Texas Medical Board Rule §164.4. Board Certification.

“(a) A physician is authorized to use the term "board certified" in any advertising for his or her practice only if the specialty board that conferred the certification and the certifying organization is a member board of the American Board of Medical Specialties (ABMS), or the American Osteopathic Association Bureau of Osteopathic Specialists (BOS), or is the American Board of Oral and Maxillofacial Surgery.

(b) Physicians who are certified by a board that does not meet the criteria of subsection (a) of this section, shall be authorized to use the term "board certified" only if the medical board determines that the physician-based certifying organization that conferred the certification has certification requirements that are substantially equivalent to the requirements of the ABMS or the BOS existing at the time of application to the medical board. Physicians, or physician-based certifying organizations on behalf of their members, must submit an application to a committee of the medical board, and demonstrate that:

1. the organization requires all physicians who are seeking certification to successfully pass a written or an oral examination or both, which tests the applicant's knowledge and skills in the specialty or subspecialty area of medicine. All or part of the examination may be delegated to a testing organization. All examinations require a psychometric evaluation for validation;

2. the organization has written proof of a determination by the Internal Revenue Service that the certifying board is tax exempt under the Internal Revenue Code pursuant to Section 501(c);

3. the organization has a permanent headquarters and staff;

4. the organization has at least 100 duly licensed members, fellows, diplomates, or certificate holders from at least one-third of the states;

5. the organization requires all physicians who are seeking certification to have successfully completed postgraduate training that is accredited by the Accreditation Council for Graduate Medical Education (ACGME) or the American Osteopathic Association and that provides substantial and identifiable supervised training of comprehensive scope in the specialty or subspecialty certified, and the organization utilizes appropriate peer review;

6. the organization provides an online resource for the consumer to verify the board certification of its members; and

7. the organization has the ability to provide a full explanation of its certification process and membership upon request by the Texas Medical Board.”
**MEDICAL BOARD LICENSURE WAIVERS**

**Texas Medical Board Rule §163.7. Ten Year Rule.**

“An applicant who has not passed an examination listed in §163.6(a) of this title (relating to Examinations Accepted for Licensure) for licensure within the ten-year period prior to the filing date of the application must:

(1) present evidence from a member board of the American Board of Medical Specialties, Bureau of Osteopathic Specialists, American Board of Oral and Maxillofacial Surgery, or by the Royal College of Physicians and Surgeons of Canada of passage, within the ten years prior to date of applying for licensure, a monitored:

   (A) initial certification examination (passage of all parts required); or
   (B) subsequent specialty written certification examination.

(2) obtain through extraordinary circumstances, unique training equal to the training required for specialty certification as determined by a committee of the board and approved by the board, including but not limited to the practice of medicine for at least six months under a faculty temporary license or six months in a training program approved by the board within twelve months prior to the application for licensure; or

(3) pass the Special Purpose Examination (SPEX) within the preceding ten years. The applicant must score 75 or better within three attempts.”
Model Legislation.
To be eligible to receive an expedited license under the Interstate Medical Licensure Compact, a physician must:

“(4) Hold[] specialty certification or a time-unlimited specialty certificate recognized by the American Board of Medical Specialties or the American Osteopathic Association's Bureau of Osteopathic Specialists;”
ACGME Residency Programs

ACGME Common Program Requirements.

- Program Directors must have current board certification in the appropriate specialty by the relevant ABMS Member Board.
- Physician Faculty must have current board certification in the appropriate specialty by the relevant ABMS Member Board.
- An exception is allowed for Program Directors and Physician Faculty with specialty qualifications that are acceptable to the Review Committee.
Every Physician who applies for initial appointment to the Medical Staff or has an appointment, must, at the time of application and continuously thereafter...

“3.2.3 Board Certification: Be Board Certified (or an active candidate/board eligible candidate in the process of obtaining certification in) his/her specialty or related specialty, within the time frame as defined by each U.S. and Canadian Board. Board certification and/or active candidacy/eligibility must be with a member board of the American Board of Medical Specialties (ABMS) and/or American Osteopathic Boards (AOB), or other Boards as approved by [the Medical Center Medical Board] from time to time.”

Medical Staff Bylaws, Rules & Regulations and Policies and Procedures – Vanderbilt University Medical Center
MEDICARE & MEDICAID RECOGNITION

- Recognition of Specialties listed in ABMS Board Certification Report for Physician Payment
- Subsidies for Graduate Medical Education Programs Leading to ABMS Certification
- Physician Compare Website Only Lists ABMS and AOA Board Certifications
- Affordable Care Act Incentive Payment for Participation in MOC (2010-2015)
- Affordable Care Act Identified ABMS Member Boards as Reporting Agents for Federal Quality Programs
- Medicare Merit-Based Incentive Payment System (MIPS) Credit for MOC Participation
- Medicaid Primary Care and Specialty Enhanced Reimbursement under the Affordable Care Act
GOVERNMENT & PRIVATE EMPLOYMENT REQUIREMENTS

• U.S. Department of Veterans Affairs
  – Physician Service Chiefs must be certified by an appropriate specialty board or possess comparable competence.
  – All physician board certification must be verified by the Official ABMS Directory or the AOA Physician Database.

• U.S. Nuclear Regulatory Commission
  – NRC licensees must require those engaged in certain activities to be certified by a medical specialty board recognized by the commission (ABR, ABNM and ABOR).

• Private Employers: ABMS board certification in relevant specialty
  – “Required”
  – “Preferred”
  – “An Asset”
Judge Weinstein Commenting on ABMS and ABPS Certification.

Board certification can benefit patients because it provides strong evidence that a doctor has stayed up-to-date with medical standards, patient care, and medical ethics.

Board certified physicians must have demonstrated their ability to offer reasonable and safe treatment plans that comply with current clinical standards. This allows patients to make more informed choices when selecting healthcare providers. The required Maintenance of Certification program ensures that doctors keep up with ever-changing industry standards.

Because board certified doctors are also evaluated on grounds of professionalism, they instill confidence about their ethical values in their patients. Having physicians known to be highly trained may put a patient at ease during a time of stress, and help cultivate a stronger physician-patient relationship.
New Jersey Expert Witness Statute


• In a medical malpractice case, an expert witness testifying against an ABMS board certified physician on the appropriate standard of care must be “a specialist or subspecialist recognized by the American Board of Medical Specialties or the American Osteopathic Association who is board certified in the same specialty or subspecialty, recognized by the American Board of Medical Specialties or the American Osteopathic Association….”
HEALTH INSURANCE RECOGNITION

- ABMS Board Certification Used as HEDIS Quality Measure for Health Plans
- Preferential Health Plan Contracting for ABMS Board Certified Physicians
- Blue Cross Blue Shield Association Inclusion of ABMS Board Certification in Physician Directories
MALPRACTICE INSURANCE BENEFITS

- Preferential Underwriting (and some carriers will only insurer ABMS Board Certified physicians)
- Reduction in Premiums (Variable, but Typically 5%)
INTERNATIONAL RECOGNITION

- Israeli Medical Association Recognizes ABMS Board Certification for Licensure
- Canadian Reciprocity
- Singapore Certification System
- Middle East Certification System
- UK Recognition of ABMS Board Certification
ABMS BRAND BENEFITS UNDER THREAT

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