

Guide to Maintenance of Certification in Anesthesiology (MOCA)

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What is MOCA?

Maintenance of Certification (MOC) is an active process of assessment and continuous professional development that allows participants to demonstrate ongoing competency with advances in the field of medicine throughout their entire careers. The MOC concept originated with the American Board of Medical Specialties (ABMS) in 1999. As a member board of the ABMS, the American Board of Anesthesiology (ABA) has been charged with implementing MOC activities that will assure the public that its diplomates:

- Are up-to-date with knowledge of their specialties
- Hold unrestricted medical licenses
- Are respected in their practices by peers and patients
- Demonstrate professionalism as physicians
- Continually evaluate and improve their practices

The ABA recognized the importance of such an initiative and developed the Maintenance of Certification in Anesthesiology (MOCA) program to help physicians demonstrate their commitment to quality clinical outcomes and patient safety. MOCA offers ABA-board-certified anesthesiologists the opportunity to participate in a four-part process for continuous learning, while advancing the standard of specialty medical care.

Each MOCA cycle is a 10-year period that includes ongoing Lifelong Learning and Self-Assessment; continual assessment of Professional Standing (medical licensure); periodic assessments of Practice Performance; and a decennial assessment of Cognitive Expertise. MOCA is an opportunity for physicians to improve their skills in six general competencies—Medical Knowledge; Patient Care; Practice-Based Learning and Improvement; Professionalism; Interpersonal and Communication Skills; and Systems-Based Practice.

ABA diplomates certified in 2000 or after hold a time-limited certificate and are automatically enrolled in MOCA after initial board certification. This allows them the full 10-year period to meet all requirements. To avoid expiration of certification, all MOCA requirements must be completed within the 10-year period. Participation in MOCA by non-time-limited diplomates, those certified before 2000, is voluntary and encouraged.

Who benefits from participation in MOCA?

The Public MOCA should benefit the public to the extent that participation requires assessment of clinical practices and pursuit of changes to improve them, and hence, patient quality. Medical specialists who participate in MOCA are using evidence-based guidelines, practice parameters, and standards in their specialty and are recognized as leaders in the national movement for health care quality.

Our Physicians From a professional perspective, MOCA is an indication to the public that their anesthesiologist has met—and is maintaining—a high standard of knowledge in the specialty. Through MOCA, physicians demonstrate that they can assess the quality of care they provide compared to peers and national

benchmarks, and then apply the best evidence or consensus recommendations to improve that care. MOCA also may help meet payer, regulatory and consumer demands for quality.

Health Systems and Medical Centers If MOCA participation is a driver of improved patient outcomes, then these may translate to increased efficiencies, reduced complications, and cost-effective care. As case-based payment plans proliferate, health systems and medical centers benefit greatly when their patients have fewer complications and undergo care more efficiently.

What are the MOCA requirements?

The MOCA requirements have changed over the past ten years in order to meet ABMS standards. Diplomates certified in years prior to 2010 (2000-2009) will have differing requirements based on the year they were certified. A full list of requirements by cohort is available on the ABA website at www.theABA.org.

The following requirements are valid for diplomates certified in 2010 or after.

Part 1: Professional Standing

ABA diplomates must hold an active, unrestricted license to practice medicine in at least one jurisdiction of the United States or Canada. Furthermore, all US and Canadian medical licenses that a diplomate holds must be unrestricted. To fulfill this requirement, diplomates should annually review and update their medical license information via their portal account at the ABA web site www.theABA.org.

Part 2: Lifelong Learning and Self-Assessment

ABA diplomates should continually seek to improve the quality of their clinical practice and patient care through self-directed professional development. This should be done through an assessment of current knowledge and participation in continuing medical education (CME) activities and other learning opportunities.

To fulfill this requirement, diplomates certified in 2010 and after must complete 350 CME credits during the 10-year cycle. Of that total, at least 250 credits must be Category 1 credits—that is ACCME (Accreditation Council for Continuing Medical Education)/AMA(American Medical Association) PRA (Physician’s Recognition Award)-approved. A maximum of 70 credits per calendar year will be applied toward the requirement.

Ninety of the 250 Category 1 credits must be evaluative CME. Accordingly, diplomates must complete 90 CME credits through the ASA’s Anesthesiology Continuing Education Program (ACE) and/or the ASA’s Self Education and Evaluation Program (SEE). Finally, 20 CME credits of patient safety education must be included in the diplomate’s CME portfolio. Both the ASA and the ABMS offer Patient Safety Modules that meet this requirement.

Diplomates should submit CME activities to the ABA via their portal accounts at www.theABA.org. Self-reported CME activities are subject to audit and verification by the ABA within three years of submission. CME activities reported to the ABA by qualified CME providers, such as the ASA, are not subject to audit.

Part 3: Cognitive Examination

Diplomates must demonstrate their cognitive expertise once every ten years by passing an ABA examination. The examination may be completed only in years 7 through 10 of the MOCA cycle.

Diplomates certified in 2010 and after must have satisfactory Professional Standing, one satisfactory Practice Performance Assessment and Improvement Activity, and at least 200 CME credits to be eligible for the examination.

Diplomates are allowed to take the examination up to twice a year. If the examination is not passed before the end of the 10-year MOCA cycle, then the diplomate's certification will expire.

Part 4: Practice Performance Assessment and Improvement

Diplomates certified in 2010 and after must complete three activities over their 10-year MOCA cycle to demonstrate that they are participating in evaluations of their clinical practice and are engaging in practice improvement activities.

They must complete one four-step case evaluation process to assess their practice and implement changes that improve patient outcomes. They must also complete one simulation course at an ASA-endorsed simulation center. One of these activities must be completed during the first five years of the MOCA cycle and the other activity must be completed during the last five years. Please note that diplomates will only receive credit for ONE simulation course per 10-year MOCA cycle.

Diplomates must also complete one attestation in year 9 of the MOCA cycle to verify their clinical activity.

Examples of case evaluations and a link to ASA-endorsed simulation centers can be found in the MOCA section of the ABA website at www.theABA.org.

The above MOCA requirements are valid for diplomates certified in 2010 or after. A full list of requirements by year certified is available on the ABA website at www.theABA.org. You may also contact the ABA Communications Center with any questions at (866) 999-7501.