MAINTENANCE OF CERTIFICATION
IN
THORACIC SURGERY

BOOKLET OF INFORMATION
2017

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STATEMENT OF PURPOSE

The American Board of Thoracic Surgery (ABTS) publishes this Booklet of Information for Diplomates and others who are interested in knowing the procedures and requirements for Maintenance of Certification (MOC) in thoracic surgery. The requirements listed in this MOC Booklet of Information apply only to Diplomates who plan to participate in the MOC process in 2017. The MOC Booklet is revised yearly.

BACKGROUND

The Board of Thoracic Surgery was established in 1948 as an affiliate board of the American Board of Surgery. In 1971, the Board of Thoracic Surgery was recognized by the American Board of Medical Specialties (ABMS) as a primary board and changed its name to the American Board of Thoracic Surgery. In 1973, the ABMS recommended to its member boards that they develop programs and procedures for recertification. The ABTS issued its first time-limited certificates in 1976. Since that time, all Diplomates have been required to "recertify" every 10 years. The process of recertification has consisted of documentation of license and hospital privileges, submission of a case list, confirmation of CME activities, and completion of the SESATS (Self-Examination, Self-Assessment in Thoracic Surgery) exercise.

In response to public demands for greater accountability from specialty boards and more transparency in the credentialing process, the 24 member boards of the ABMS embarked on a MOC program. The goal of MOC for the ABTS is to facilitate lifelong learning and practice improvement among our Diplomates and give the public assurance that certified thoracic surgeons are maintaining high standards of clinical care. MOC replaced the ABTS recertification process in January 2008; therefore, Diplomates are now required to participate in MOC instead of the former recertification process in order to maintain and renew their certificate. More information about the ABTS MOC process can be found on the Board's web site at www.abts.org.

CORRESPONDENCE WITH THE BOARD

Inquiries addressed to the ABTS may be referred to one or more committees of the Board. Replies to such letters of inquiry may, therefore, be delayed for several weeks. Please address all communications to the Board's Executive Director:

David A. Fullerton, M.D.
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MOC OVERVIEW

In order to maintain a valid certificate, **all** Diplomates (life-time and time-limited certificate holders) whose status is Active or Inactive, including those certified prior to 1976, are required to participate in MOC. The ABTS MOC cycle is 10 years in length, with a benchmark at the fifth year that must be fulfilled. A brief description of the 4 components of MOC that make up the 5-year and 10-year benchmarks can be found on the following pages.

Part I - Professional Standing
Diplomates must hold a valid, unrestricted medical license in at least one state or jurisdiction in the United States or its territories.

Part II - Lifelong Learning and Self-Assessment
Diplomates must participate in educational and self-assessment programs that meet specialty-specific standards that are set by the ABTS.

Part III - Cognitive Expertise
Diplomates must demonstrate, through formalized examination, that they have the fundamental, practice-related and practice environment-related knowledge to provide quality care in thoracic surgery.

Part IV - Practice Performance Assessment
Diplomates are evaluated in their clinical practice according to standards for patient care in thoracic surgery. Diplomates must 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 using follow-up assessments.

CERTIFICATION STATUS

The requirements for MOC depend on a Diplomate's certification status with the Board. The Board has the following four certification statuses for Diplomates:

Certified-Active – includes Diplomates who have successfully passed both Parts I and II examinations and who are actively practicing cardiothoracic surgery. It also includes those Diplomates who are involved in direct or supervised cardiothoracic patient care, but whose practice does not include operative thoracic surgery (e.g., critical care, clinic or office practice, clinical research involving direct patient contact). Diplomates in this category are required to participate in all parts of MOC (i.e., Parts I-IV). Diplomates who are Certified-Active are expected to pay the annual dues.

Certified-Inactive – includes Diplomates who have applied and been accepted for *inactive status*. This category includes Diplomates who have temporarily interrupted their clinical practice due to illness/injury, administrative positions, graduate studies, elected/appointed political office, etc. This category would include Diplomates who have direct or supervise patient care in a field other than thoracic surgery. Diplomates in this category are required to participate in all parts of MOC except Part IV (i.e., evaluation of performance in practice). For additional information, please refer to the Board's Inactive Status Policy. Diplomates who are Certified-Inactive are expected to pay the annual dues.

Retired and/or Disabled – includes Diplomates who are certified, but who have notified the Board of their retirement and/or disability and for whom return to active or inactive practice is unlikely. Retired and/or Disabled Diplomates are not required to participate in MOC. However, Diplomates in this category who anticipate return to medical practice should consider changing their status to Certified-Inactive and participate in MOC **before their certificate expires.** Diplomates who are Retired and/or Disabled do not need to pay annual dues.

Not Certified – includes Diplomates who have allowed their certificates to lapse and/or those whose certificates have been suspended or revoked. Diplomates with lapsed, suspended or revoked certificates will be referred to as "not certified" without further clarification. Diplomates who are no longer certified are not allowed to participate in MOC.

Diplomates who hold an invalid certificate from 2010 to the present must become compliant with Maintenance of Certification, including submitting an application, paying all dues and late fees, and taking and passing the MOC Exam. Diplomates then need to take and pass the Part II (Certifying) Exam.

This policy applies to Diplomates who did not successfully complete the former Recertification process and/or the current MOC process. Diplomates who hold an invalid certificate prior to 2010 must take and pass the Part I (Qualifying) and Part II (Certifying) Examinations in order to obtain a valid certificate.

Visit the Board's web site (www.abts.org) for a full description of these categories. If you are not sure of your current status with the ABTS, feel free to contact the Board office.

5-YEAR BENCHMARK

As part of MOC, the ABTS has implemented a 5-year benchmark or milestone for Diplomates. Therefore, Diplomates whose certificate will expire in 2022 will be required to meet a 5-year benchmark in 2017. The requirements are listed below.

Part I – Professional Standing

Diplomates must provide documentation of their currently valid, full and unrestricted license(s) to practice medicine. Diplomates must also have privileges from a hospital(s) accredited by the JCAHO or other institutions judged acceptable by the Board in order to be considered Certified-Active.

Diplomates must hold a valid certificate issued by the ABTS at the time of their application for MOC.

Diplomates must submit letters of reference documenting their level of clinical activity and stature within the surgical community from the VP of Medical Affairs and one other responsible member on staff at their principal hospital.

Part II - Lifelong Learning and Self-Assessment

Diplomates must earn an average of 30 AMA Category I CME credits per year, since January 2013. For the 2017 5-year milestone, Diplomates must have earned 150 Category I CME credits since January 1, 2013 through the date of their signed applications. Half of the CME credits (i.e., 75 hours) need to be in the broad category of cardiothoracic surgery. Diplomates will be randomly audited during the application process and copies of the CME certificates issued by the sponsoring organization(s) of the CME activities will be requested at this time.

The Board will accept CME credits for attending the annual meetings of the American Association for Thoracic Surgery, the Society of Thoracic Surgeons, the Southern Thoracic Surgical Association, the Western Thoracic Surgical Association, the Clinical Congress of the American College of Surgeons, and other national, regional or local meetings. Documentation of the CME from the respective organization earned from

these meeting(s) will need to be submitted with the application if the Diplomate is randomly audited.

The Board will also accept online courses provided they have been designated as Category I by an ACCME-accredited body and that there is appropriate documentation of the Diplomate's participation. In addition, the Annals of Thoracic Surgery and the Journal of Thoracic and Cardiovascular Surgery have at least one article per month online designated for CME credit.

The Board will only accept up to, but no more than, 12 hours annually of Morbidity & Mortality conferences from one institution and only if the awarding institution has ACCME-accreditation and has designated this activity as Category I.

Part III - Cognitive Expertise
Diplomates whose 5-year milestone is in 2017 must take and complete the Self-Education, Self-Assessment in Thoracic Surgery XII (SESATS 12) in 2017 after they have applied and been approved for MOC. Diplomates must complete all sections of SESATS XII regardless of their practice focus. Diplomates do not need to purchase or complete SESATS XII prior to making application for examination. SESATS will be made available to Diplomates after their application has been accepted. The deadline for completing SESATS XII is December 1, 2017.

If a Diplomate has already completed SESATS XII prior to making application with the Board, the Diplomate should submit documentation that he/she has completed SESATS XII and the Board will apply it towards Part III. The Diplomate cannot count CMEs earned from taking SESATS XII towards the Part II CME requirement. Essentially, completing SESATS XII early can only be applied towards Part III, and not Part II.

Part IV - Evaluation of Performance in Practice
Diplomates who want to maintain their Certified-Active Status must complete Part IV of MOC; however, Diplomates with Certified-Inactive Status do not need to complete this component.

A. Performance Improvement - The Board requires Diplomates to participate in a Practice Quality Improvement (PQI) project. A description of the process and examples of PQI projects can be found on the ABTS website.

B. Patient Safety Module – The Board requires Diplomates who are involved in the 5-year milestones for MOC to take a Patient Safety Module/Course. You can find examples on the ABTS website.

C. Peer Evaluation – The Board reserves the right to randomly audit Diplomates and request additional letters of references from referring physicians, colleagues, staff and patients.

Application Process for 5-Year Benchmark
Diplomates who are eligible to participate in the MOC 5-year milestone are automatically notified in early June. Applications will be available on the Board's web site at www.abts.org. The deadline for submitting the 5-year milestone application is August 1, 2017. Diplomates are expected to be current with the Annual Fee in order to go through the process.

A $500 application fee will be charged at the time of submission. An administrative fee of $50 will be charged if the application for the 5-year milestone contains errors or omissions. A $350 late fee will be charged for any 5-year milestone application received between August 2 and August 15. No application for the 5-year milestone will be accepted after August 15. All applications will need to be sent electronically to moc@abts.org. No paper applications will be accepted.

Following receipt of a completed application for the MOC 5-year milestone, including all the related information, the ABTS will notify the Diplomate that his/her application is complete and will inform him/her of the next steps in the process. Maintenance of Certification by the American Board of Surgery (ABS) is not a prerequisite for entrance into the ABTS MOC 5-year milestone process.

Once the Diplomate has completed the 5-year milestone requirements, which includes completing SESATS XII (12), the Board will mail a letter stating that he or she is meeting the requirements of MOC. The Board does not issue a new certificate upon completion of the 5-year milestone.

10-YEAR BENCHMARK

The following requirements must be fulfilled by those Diplomates seeking renewal of their certificate in 2017:

Part I - Professional Standing

Diplomates must provide documentation of their currently valid, full and unrestricted license(s) to practice medicine. Diplomates must also have privileges from a hospital(s) accredited by the JCAHO or other institutions judged acceptable by the Board in order to be considered Certified-Active.

Diplomates must hold a valid certificate issued by the ABTS at the time of their application for MOC.

Diplomates must submit letters of reference documenting their level of clinical activity and stature within the surgical community from the VP of Medical Affairs and one other responsible member on staff at their principal hospital.

Part II - Lifelong Learning and Self-Assessment

Diplomates must earn an average of 30 AMA Category 1 CME credits per year. For the 2017 MOC process, Diplomates must have earned 150 Category I CME credits since January 1, 2013 through the date of their signed applications. Half of the CME credits (i.e., 75 hours) need to be in the broad category of cardiothoracic surgery. Diplomates will be randomly audited during the application process and copies of the CME certificates issued by the sponsoring organization(s) of the CME activities will be requested at this time.

The Board will accept CME credits for attending the annual meetings of the American Association for Thoracic Surgery, the Society of Thoracic Surgeons, the Southern Thoracic Surgical Association, the Western Thoracic Surgical Association, the Clinical Congress of the American College of Surgeons, and other national, regional or local meetings. Documentation of the CME from the respective organization earned from

these meeting(s) will need to be submitted with the application if the Diplomate is randomly audited.

The Board will also accept online courses provided they have been designated as Category I by an ACCME-accredited body and that there is appropriate documentation of the Diplomate's participation. In addition, the Annals of Thoracic Surgery and the Journal of Thoracic and Cardiovascular Surgery have at least one article per month online designated for CME credit.

The Board will only accept up to, but no more than, 12 hours annually of Morbidity & Mortality conferences from one institution and only if the awarding institution has ACCME-accreditation and has designated this activity as Category I.

Part III - Cognitive Expertise

Diplomates whose certificates expire in 2017, 2018, or 2019 must take an online MOC examination that will test fundamental and practice-related knowledge in order to fulfill Part III. Diplomates may take the exam starting in the eighth year, but must pass it by their tenth year.

The Board's MOC Exam Committee has chosen 100 questions from SESATS for you to complete. Questions on the MOC exam will be modular, based on your specialty, and presented in a self-assessment format. The Board anticipates the Diplomate will work through the questions, similar to previous experiences with SESATS. This new tool replaces the multiple-choice MOC exam, used in previous years, when Diplomates were required to go to a Pearson Testing Center.

The online MOC exam, which can be taken on your home or office computer, must be completed during the time period of September 1, 2017 to October 31, 2017. If the exam is not completed within those parameters it will be considered incomplete. The fee for sitting for the MOC secure exam is $500.00. This fee covers the expenses associated with software needed to ensure the online exam is secure.

Diplomates can take the MOC exam two years prior to the expiration on their certificates, which means Diplomates can complete the exercise in any of the three years before expiration of the certificate. This means that if a certificate expires in 2019, a Diplomate may take the MOC exam in 2017, 2018 and/or 2019. Please note that the MOC exam must be completed in the same calendar year that the Diplomate applies for the 10-year milestone. If monitoring detects that the questions were not addressed in an orderly manner, the Diplomate will be required to repeat the process. If a Diplomate does not successfully pass and complete the exam before his/her certificate expires, the only way to renew the certificate is to become compliant with Maintenance of Certification, including submitting an application, paying all dues and late fees, and taking and passing the MOC Exam. Diplomates then need to take and pass the Part II (Certifying) Exam.

Part IV - Evaluation of Performance in Practice

Diplomates who want to maintain their Certified-Active Status must complete Part IV of MOC; however, Diplomates with Certified-Inactive Status do not need to complete this component.

a. Case Summary - Diplomates who are clinically active must complete a case summary of their major cases for the last year.

Diplomates who are not operating, but who still have direct patient contact (e.g., critical care, office practice), should submit a log of their most recent 100 patients, but not to exceed a one-year time period.

b. Performance Improvement - The Board requires Diplomates to participate in a Practice Quality Improvement (PQI) project. A description of the process and examples of PQI projects can be found on the ABTS website.

c. Patient Safety Module – The Board requires Diplomates who are involved in the 10-year milestones for MOC to take a Patient Safety Module/Course. You can find examples here.

d. Peer Evaluation Letters – The Board reserves the right to randomly audit Diplomates and request additional letters of references from referring physicians, colleagues, staff and patients.

Prerequisite Requirement
In order to go through the 10-year Milestone, Diplomates must first successfully complete the 5-year Milestone. Please note that the 5-year Milestone cannot be completed in the same year as the 10-year Milestone.

Application Process for 10-year Benchmark
Diplomates who are eligible to participate in MOC each year are automatically notified. Applications will be available on the Board's web site at www.abts.org. Completed applications must be received by the Board no later than May 1, 2017 for individuals wishing to register for the current year.

A $500 application fee will be charged at the time of submission. An administrative fee of $50 will be charged if the application for the 10-year milestone contains errors or omissions. A $350 late fee will be charged for any application received between May 2 and May 15. No application will be accepted after May 15. All applications must be submitted electronically to moc@abts.org.

Following receipt of a completed application for MOC, including all the related information, the ABTS will notify the Diplomate that his/her application is complete and will inform him/her of the next steps in the process. Maintenance of Certification by the American Board of Surgery (ABS) is not a prerequisite for entrance into the ABTS MOC process.

Certificate for 10-year Benchmark
The ABTS will issue MOC certificates valid for 10 years to Diplomates who have successfully completed the MOC process. Since Diplomates are allowed to participate in the 10-year benchmark up to 2 years before the expiration of their certificates, the new certificates will then be in force for 10 years from the date of the expiration of the previous certificates.

ANNUAL MAINTENANCE OF CERTIFICATION FEE

An annual MOC Fee of $300 is required of all Diplomates except those who are Retired and/or Disabled. The fee, which is cumulative, is not assessed to Diplomates in the year of their initial certification. Diplomates must be current with their MOC Fee in order to participate in MOC process.

PUBLICATION OF MOC PARTICIPATION

The ABTS will supply appropriate information to the ABMS for inclusion in the official Directory of Medical Specialists. The biographic entry will show MOC in thoracic surgery along with documentation of original certification(s).

APPEALS

Diplomates who receive an unfavorable ruling regarding their applications from a committee of the Board may appeal such determination by mailing a notice of appeal to the office of the ABTS within 45 days of the date such ruling was mailed. A copy of the appeals procedure will be mailed to the candidate.

Diplomates who are in the MOC online exam process may only request reconsideration regarding potential fraud, misconduct, or irregularities. There is no appeal regarding the content of the examination, the sufficiency or accuracy of the answers given, scoring of the examination, nor any other matter. Any Diplomate who wishes to seek reconsideration on the basis of fraud, misconduct or irregularities may do so immediately upon conclusion of the MOC online examination, and in any event no later than 7 days following the last MOC examination deadline, request that the Board allow him or her to retake the examination.

CHEMICAL DEPENDENCY

Diplomates who have a history of chemical dependency that has been reported to the Board and who submit documentation suitable to the Board that their dependency has been under control for a period of at least 2 years will be admitted to the MOC process.

For Diplomates who are already in the MOC process and develop a chemical dependency as reported to the Board, the process will be suspended until the Diplomate can provide documentation suitable to the Board that the condition has been under control for a period of 2 years. At that time, the Diplomate will be readmitted to the MOC process.

REVOCATION OF MAINTENANCE OF CERTIFICATION CERTIFICATE

A MOC certificate will not be issued, and any previously issued MOC certificate may be revoked by the Board if it shall determine that:

1. the candidate for MOC did not possess the required qualifications whether or not such deficiency was known to the Board or any Committee thereof prior to the issuance of the certificate,

2. the candidate for MOC made a material misstatement or withheld information in his/her application or any other misrepresentation to the Board or any Committee thereof, whether intentional or unintentional,

3. the candidate for MOC was convicted by a court of competent jurisdiction of any felony or misdemeanor involving moral turpitude and, in the opinion of the Board, having a material relationship to the practice of medicine.

4. the candidate for MOC had his/her license to practice medicine revoked or was disciplined or censured by any court or other body having proper jurisdiction and authority because of any act or omission arising from the practice of medicine, or

5. the candidate for MOC had a history of chemical dependency, or developed such during the MOC process, and failed to report the same to the Board.