TESTIMONY IN SUPPORT OF S.764
AN ACT RELATIVE TO MAINTENANCE OF CERTIFICATION
BEFORE THE JOINT COMMITTEE ON HEALTH CARE FINANCING
OCTOBER 19, 2021

The Massachusetts Medical Society is a professional association of over 25,000 physicians, residents, and medical students across all clinical disciplines, organizations, and practice settings. The Medical Society is committed to advocating on behalf of patients, to give them a better health care system, and on behalf of physicians, to help them provide the best care possible.

The Massachusetts Medical Society (MMS) wishes to be recorded in support for Senate bill 764, An Act Relative to the Maintenance of Certification.

The MMS believes lifelong learning and continuing education are hallmarks of the medical profession. MMS supports the Board of Registration in Medicine’s approach of ensuring that all licensed physicians comply with rigorous biennial continuing education requirements. MMS also supports the role of initial “board certifications” which allow physicians an important avenue to establish their expertise and/or specialization. MMS has concern, however, about the system known as “maintenance of certification” (MOC) which has proliferated over the years by national medical specialty boards. These ongoing board certification programs have been established above and beyond the initial board certification. As currently constituted, they impose additional ongoing, costly, and often irrelevant requirements on physicians to “maintain their board certification.”

S.764 would prohibit the use of maintenance of certification as a basis for physician licensure, hospital employment or credentialing, or health plan reimbursement and/or credentialing. This bill does not limit the use of initial board certification for licensure or credentialing, nor is it in any way a statement in support of less learning by physicians or reduced quality of care. It is simply an important assurance that this currently imperfect system to maintain a board certification is not used inappropriately.

Maintenance of Certification is comprised of computer modules, formal testing, and other activities that many physicians contend have little or no perceived value with respect to quality improvement or competency among the provider community. There are no independent medical studies or evidence demonstrating the value of MOC in terms of improved patient outcomes. Instead, it is overly burdensome, costs physicians thousands of dollars, and ironically, requires significant time away from practicing medicine and taking care of patients. Until such time that this process becomes clinically relevant and is truly associated with improved practice of medicine and patient care, the use of this program must be limited.

The MOC program generates considerable costs and puts unreasonable demands on a physician’s time - with questionable value. S.764 will ensure that insurers and hospitals will not require MOC as a basis for credentialing or employment until more studies are done to weigh its impact on clinical and economic outcomes against the high costs required by MOC, or until the boards see through their announced initiatives to substantially remake the maintenance of certification programs to be more clinically relevant and less burdensome. The MMS urges the Committee on Health Care Financing to support S.764 and report the bill out of Committee favorably.