



# Maintenance of Licensure: Frequently Asked Questions

## What is Maintenance of Licensure?

Maintenance of Licensure (MOL) is a process by which licensed physicians periodically provide, as a condition of license renewal, evidence that they are actively participating in a program of continuous professional development that is relevant to their areas of practice, measured against objective data sources and aimed at improving performance over time. MOL encourages and supports lifelong learning by all physicians and creates a system to confirm their practice improvement efforts.

The Federation of State Medical Boards (FSMB), the non-profit organization that represents the nation's 70 state medical boards, is working with its member boards to develop an MOL system for the United States.

While MOL is still several years away from being adopted by any state medical board, the FSMB is currently working to develop and implement various pilot projects to help states prepare for MOL and to determine best practices for its use.

## What is driving the need for MOL?

The U.S. health care system is in a period of flux and change, facing significant questions about its future. Among developments in recent years is a growing interest in the enhancement of patient safety, the measurement of quality outcomes, and improvements to systems and processes. In recent years, the medical profession – like many other professions in the United States – has become more aware of the need for, and the benefits of, continuous quality improvement.

The public, too, is increasing its focus and scrutiny on quality and safety issues in health care; consumers have become increasingly empowered and seek greater accountability and transparency in the health care system. In 1999, the Institute of Medicine (IOM) noted that consumers generally feel protected by medical licensure, but it called upon state medical boards to do more to gauge a physician's abilities after obtaining initial licensure.

As medicine continues to rapidly evolve and grows more complex, the need for lifelong learning and skills maintenance has also increased. Research suggests physicians may develop deficits in important skills and knowledge the further away they get from medical school and residency training.

All of these factors have contributed to a trend in the United States and internationally to improve health care quality, decrease medical errors and improve patient safety through continuous professional development.

## Are there research studies or other evidence supporting the need for MOL?

Substantial evidence exists to support the concepts of lifelong learning and continuous professional development embodied in MOL. This includes research that links competence and quality of care, and studies that show the need for physicians to update and maintain their knowledge base as their careers advance. The FSMB has created a full bibliography of these studies, and additional evidence, at its MOL website, found at [www.fsmb.org/MOL.html](http://www.fsmb.org/MOL.html).

## What is being proposed by FSMB?

Following seven years of study, in 2010 the FSMB House of Delegates adopted the following framework for MOL, which would require physicians to periodically provide evidence of participation in professional development and lifelong learning activities specific to their practice as a condition of license renewal:

As a condition of licensure renewal, physicians should provide evidence of participating in a program of professional development and lifelong learning that is based on the general competencies model:

- Medical knowledge
- Patient care
- Interpersonal and communication skills
- Practice-based learning and improvement
- Professionalism
- Systems based practice

The following requirements reflect the three major components of effective lifelong learning in medicine:

**1. Reflective Self Assessment** *(What improvements can I make?)*

Physicians should participate in an ongoing process of reflective self-evaluation, self assessment and practice assessment, with subsequent successful completion of tailored educational or improvement activities.

**2. Assessment of Knowledge and Skills** *(What do I need to know and be able to do?)*

Physicians should demonstrate the knowledge, skills and abilities necessary to provide safe, effective patient care within the framework of the six general competencies as they apply to their individual practice.

**3. Performance in Practice** *(How am I doing?)*

Physicians should demonstrate accountability for performance in their practice using a variety of methods that incorporate reference data to assess their performance in practice and guide improvement.

The FSMB House of Delegates also adopted five guiding principles for MOL:

- MOL should support physicians' commitment to lifelong learning and facilitate improvement in physician practice.
- MOL systems should be administratively feasible and should be developed in collaboration with other stakeholders. The authority for establishing MOL requirements should remain within the purview of state medical and osteopathic boards.
- MOL should not compromise patient care or create barriers to physician practice.
- The infrastructure to support physician compliance with MOL requirements must be flexible and offer a choice of options for meeting requirements.
- MOL processes should balance transparency with privacy protections.

### How would MOL requirements impact physicians?

The majority of physicians are already pursuing continuing medical education and training to keep their knowledge and skills current, and many do so through the maintenance of certification programs required by their specialty boards or other quality improvement activities. Many of these physicians will already be in substantial compliance with MOL, simply through the various accrediting, credentialing and quality improvement activities they are already engaged in. The FSMB is working with health care organizations to create a system that fairly evaluates the activities of all licensed physicians, including those who are not clinically active.

Since the American Board of Medical Specialties' Maintenance of Certification (MOC) program and the American Osteopathic Association Bureau of Osteopathic Specialists' Osteopathic Continuous Certification (OCC) program incorporate activities generally consistent with the intentions of MOL, state medical boards would likely qualify licensees engaged in these activities. The MOL framework recommends that physicians engaged in MOC or OCC be recognized as being in substantial compliance with the three major components of MOL.

The intent of MOL is to provide a verifiable system in which physicians can demonstrate their commitment to lifelong learning; it is not designed with the intent to identify and remove "bad" doctors from practice. By implementing MOL, state medical boards will encourage individual practice improvement efforts and serve as the foundation for a culture of continuous professional development encompassing the entire medical regulatory system.

### What are some ways physicians might meet requirements for MOL?

The FSMB is working to create a system that makes it easy for physicians already involved in MOL-equivalent activities to demonstrate their compliance. For physicians who are not specialty board certified, not participating in a process of ongoing specialty board certification, or engaged in non-clinical roles, the FSMB is investigating other options that could be used to demonstrate adherence to lifelong learning in their area of practice.

A wide variety of tools and resources are available that could be used by physicians for MOL purposes, ranging from CME to hospital credentialing processes to patient surveys. Evaluating these tools and developing the details of their use is part of the MOL pilot testing process, which is now under way.

### Will physicians be required to take an exam?

No. The MOL framework does not recommend a high-stakes examination for MOL.

## **Does the adoption of the MOL framework by the FSMB mean MOL requirements are now in effect in the states?**

No. MOL is still years away from implementation. Each state is free to develop and implement MOL guidelines in the manner and timeframe best suited for their individual jurisdiction. Although each state is free to adopt its own guidelines, the FSMB has expressed its commitment to encourage standardization of MOL requirements across all state medical boards. FSMB will also continue to work with the states to further develop and refine the MOL concepts.

## **Why is the FSMB involved in MOL?**

As the sole entities that regulate all physicians and that operate with a direct mandate to protect the public's safety, state medical boards have a unique responsibility to ensure physicians are actively engaged in ongoing professional development and maintaining their knowledge and skills. The FSMB's House of Delegates formally acknowledged this responsibility in 2004 by adopting a policy statement that "State medical boards have a responsibility to the public to ensure the ongoing competence of physicians seeking licensure."

## **Has FSMB sought input from external organizations within the healthcare community as it has developed the MOL framework and recommendations?**

One of FSMB's goals is to develop an MOL system that is carefully integrated and coordinated with the activities of other physician organizations. This is critically important to minimize burdens or overlap for physicians who are already involved in continuous professional development activities, such as MOC or OCC. From the beginning of its MOL development efforts in 2004, the FSMB has been in close contact with, and sought input from, organizations across the spectrum of physician education, training and practice, as well as the public. The FSMB is committed to ensuring that existing education, accrediting, credentialing and quality improvement systems are carefully considered as MOL is developed – again, to minimize overlap or additional burdens for physicians.

## **What are other organizations doing as a part of the trend towards continuous professional improvement?**

All 24 medical and surgical specialty boards that belong to the American Board of Medical Specialties are implementing programs that require physicians to demonstrate continuing competence in order to maintain their board certification in a specific specialty. The American Osteopathic Association-Bureau of Osteopathic Specialists has directed that its member boards implement continuous certification requirements by January 1, 2013.

The Joint Commission, which is the accreditation body for U.S. health care organizations and programs, has enacted standards that include quality improvement activities and performance-monitoring for physicians among its requirements for granting hospital privileges.

The Accreditation Council for Continuing Medical Education, the Accreditation Council for Graduate Medical Education, and the American Medical Association are other organizations that have placed continuous learning and practice improvement at the center of their principles for lifelong practice.

This trend is also being manifested on a global level. The United Kingdom, for example, has already begun implementing a system for its physicians, called "Revalidation," that is similar to MOL. Other countries, such as Australia, are taking similar steps.

## **To learn more about Maintenance of Licensure:**

For more information about the FSMB's MOL initiative, please visit [www.fsmb.org/mol.html](http://www.fsmb.org/mol.html).