

2016

SUBSPECIALTY

MAINTENANCE OF CERTIFICATION

BULLETIN

*The American Board of
Obstetrics and Gynecology, Inc.*



The American Board of
Obstetrics & Gynecology

2915 Vine Street

Dallas, TX 75204

First in Women's Health

This Bulletin, issued in the January 2016, represents the official statement of the requirements in effect for the MOC process from January 1, 2016 to December 31, 2016.

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IMPORTANT INFORMATION FOR THE 2016 MOC PROCESS

Those Diplomates who completed the MOC 6-year cycle in 2015 will enter a new 6-year MOC cycle in 2016. This year, they will be in MOC cycle 2 and, they will be designated as in MOC 2.1. Those Diplomates who completed their MOC 6-year cycle in year 2014 will now be in MOC cycle 2, year 2, designated as MOC 2.2.

Subspecialists will have fewer Lifelong Learning and Self-Assessment articles to read and fewer questions to answer annually. The number of articles will be reduced to 30, with 10 from Obstetrics, Gynecology and Office Practice and 20 from the subspecialty. There will be 4 questions per article, and the total number of questions will be reduced from 150 to 120. The CME hours earned will be reduced from 30 to 25, and the MOC fee will drop from \$305 to \$265. This will better align Specialist and Subspecialist MOC fees, requirements and CME hours earned.

At the time of application or after completion of the LLSA requirement, physicians can purchase an additional ten CME credit hours for an additional \$60 fee, reading 15 more articles, and answering 60 more questions.

The ABOG will begin a pilot program in 2016 that will enhance and streamline the current MOC program. The pilot proposes to integrate the self-assessment and external assessment MOC requirements to allow diplomates to continuously demonstrate their knowledge of the specialty. The pilot will allow diplomates to earn an exemption from the current MOC Examination in Year 6 of the MOC cycle, if the physician exceeds a threshold of performance during the first five years of the self-assessment program.

Some Diplomates in Year 6 will be eligible to participate in the MOC pilot program. Eligible participants must have a full Diplomate certification status, have answered at least 86% or more of the Lifelong Learning and Self-Assessment questions correctly in MOC Years 1-5 of this MOC cycle and have unrestricted licenses to practice. These physicians will be offered a choice to be exempt from the current MOC Examination or to take the examination. Year 6 Diplomates who are not eligible for the pilot program must apply for the required MOC Examination no later than November 15, 2016 and pass the examination no later than December 15, 2016.

There is now more flexibility in the Improvement in Medical Practice (IMP) Part IV requirements. Please see page 20 for more details.

Many physicians already participate in quality improvement efforts in their local practice. The Multi-specialty MOC Portfolio Approval Program (Portfolio Program) is an alternative pathway for healthcare organizations to allow their physicians' quality improvement efforts to be approved for IMP credit. To find out more about the Portfolio Program, visit www.mocportfolioprogram.org.

TABLE OF CONTENTS

Important Information for the 2016 MOC Process	2
Table of Contents	3
Time-limited Subspecialty Certificates	5
Board Certification: General Information	7
The MOC Process: General Information	8
MOC Application	8
Requirements for Applicants to Enter the MOC Process	8
Applicants Ineligible to Participate in MOC	11
Description of MOC Parts I-IV	12
Part I: Professionalism and Professional Standing	12
Part II: Lifelong Learning & Self-Assessment	14
Part III: Assessment of Knowledge, Judgment & Skills	17
2016 Pilot Program	18
Part IV: Improvement in Medical Practice	20
Diplomates in Non-Clinical Positions	26
Temporarily Clinically Inactive or Retired from Clinical Practice	26
MOC Deadlines and Fees	28
Failure to Complete MOC Process / Loss of Certification	29
Re-Entry Process / Re-Establish Diplomate Status	29
Expired Certificates	29
Certificate expired fewer than 6 years	29

TABLE OF CONTENTS (continued)

Certificate expired 6 years or longer	30
MOC for Physicians with Non-time-limited Subspecialty ABOG Certification	31
General Information	31
MOC Application	31
Appendix 1: Outline of Yearly MOC Assignments for 2016	32
Appendix 2: MOC Part III Assessment of Knowledge, Judgment & Skills	34
Appendix 3: Diplomate Disability: MOC Part III Examination	37

IMPORTANT INFORMATION

for

DIPLOMATES

with

TIME-LIMITED SUBSPECIALTY CERTIFICATES

1. Diplomates who passed the 2015 Senior FPMRS written examination or the subspecialty oral examination in April 2015, gained initial certification that will expire on December 31, 2016 unless they successfully complete all of the 2016 MOC assignments.
2. It is a Diplomate's responsibility to be familiar with the information in each year's *MOC Subspecialty Bulletin*, as changes are made to the process each year.
3. It is a Diplomate's responsibility to update their Profile on their ABOG Personal Page or to notify ABOG immediately of any change in address, email address, or telephone numbers.
4. ABOG is under no obligation to notify a Diplomate of impending loss of certification, deadlines, or changes in their certification status. However, ABOG will attempt to email reminders to those who may be in jeopardy of losing certification using the email address provided at the time of their most recent MOC application. ABOG is not responsible for a Diplomate not receiving such emails due to change of email address, loss of the notice due to spam or other filters, or any other email problem.
5. Diplomates must enroll in MOC no later than November 15 of the year their certificate expires. All assignments for the MOC year must be completed and submitted by December 15. Failure to complete and submit all MOC assignments by the deadline will result in loss of Board-certification.
6. Each Diplomate enrolled in MOC has a personal webpage showing their progress in the process. The website is accessed at www.abog.org using an ABOG ID number and password.
7. Diplomates will have access to all MOC assignments when the application process has been completed, and the Diplomate has been approved to participate. The application process includes completing the professionalism application form and paying the appropriate fees. For Diplomates without hospital privileges, an attestation of professional standing must be completed by another Diplomate and faxed to the ABOG office each MOC Year 1 (Fax: 214-871-1943) or emailed to moc@abog.org.

8. Diplomates in MOC Year 6 taking the MOC Examination must apply for the examination no later than November 15, 2016 and successfully pass the examination no later than December 15, 2016. Detailed information about the application process, fee, and test content can be found in the section on MOC Part III, Assessment of Knowledge, Judgment and Skills, page 17 of this bulletin. Appendix 2 contains detailed information about the content and format of the test.
9. Diplomates who retire from practice or temporarily are inactive (e.g. not involved in the provision, supervision or administration of patient care) may request to participate in MOC activities. Further information can be found on page 26 of this bulletin.
10. Diplomates whose certification has expired less than 6 years may regain certification through the Re-Entry process. This requires both passing a computer-based examination and completing the MOC Year 1 requirements in the same year.

BOARD CERTIFICATION: GENERAL INFORMATION

Board certification is a voluntary process. It is the Diplomate's responsibility to complete all applications and submit required materials to maintain their certification status.

All ABOG Diplomates certified in 1987 and thereafter hold time-limited subspecialty certificates. To maintain their status as Board certified physicians, they must enter the MOC process in the year that their certificate expires and successfully complete all assignments. For example, if a certificate is valid through December 31, 2016, that Diplomate must complete the 2016 MOC process.

If an individual has basic certification in obstetrics and gynecology dated before November 1986, and a subspecialty certificate dated on or after November 1987, the only time-limit is that placed on the subspecialty certificate.

Subspecialists who no longer practice in their subspecialty and have a non-time-limited certificate in general Obstetrics and Gynecology may retain their general certification without participating in MOC. They will no longer be certified in their subspecialty or designated as meeting MOC requirements.

Diplomates who were in the MOC process for general Obstetrics and Gynecology before passing the subspecialty oral examination will start a six-year subspecialty MOC cycle the following January after passing the subspecialty oral examination.

The 2016 ABOG MOC process deadlines are:

- a. Applications must be submitted no later than November 15, 2016, and
- b. All assignments must be completed by December 15, 2016.

Diplomates who fail to complete all of the assignments for the year by the deadline will have an expired certificate. That is, they will no longer be listed as board-certified by ABOG and ABMS, and they may not advertise themselves as being board-certified. A Diplomate with an expired certificate can regain full certification only through the re-entry process (See Expired Certificates).

THE MOC PROCESS

General Information

The MOC program is a continuing professional development process to assure that ABOG-certified physicians maintain a high level of knowledge, judgment and skills in Obstetrics, Gynecology, and Women's Health throughout their careers.

The ABOG MOC is a continuous process based on annual participation and a 6-year cycle. During the 6-year cycle, the Diplomate will be required to complete a number of tasks that vary depending on the year of the cycle. After completion of one 6-year cycle, the process restarts the next year.

There are 4 parts to the MOC process, but not all parts are active each year. The parts of the ABOG MOC program include:

- I. Professionalism & Professional Standing
- II. Lifelong Learning & Self-Assessment
- III. Assessment of Knowledge, Judgment & Skills
- IV. Improvement in Medical Practice Performance (IMP)

Some MOC assignments are still evolving. It is important that the Diplomate read the *MOC Subspecialty Bulletin* each year.

MOC Application

The Diplomate must apply for admission to the MOC process each year. The application is available on the ABOG website at www.abog.org.

Applications for 2016 will be accepted starting in January 2016, and must be submitted with the proper fee no later than November 15, 2016. Failure to submit an application by this date will result in loss of certification. There are no late deadlines and no late fees.

Requirements for All Applicants for Entry into the MOC Process

Each MOC applicant must meet all of the following requirements to be admitted into the MOC process:

1. Hold an active, unrestricted license to practice medicine in any and all states or territories (United States or a Province of Canada) in which the physician holds a current medical license.

The ABOG may, in its discretion, allow a physician practicing medicine exclusively outside the United States, its territories, and Canada, to be certified or maintain certification, without a full and unrestricted license in at

least one jurisdiction in the United States, its territories, or Canada, provided that all of the following requirements are met:

- (a) The physician has complied with all legal and regulatory requirements governing the practice of medicine in the country where the physician is practicing, and has an unrestricted license to practice medicine in that country; and
 - (b) Any prior license to practice medicine in the United States, its territories, or Canada, has not been revoked or suspended, voluntarily surrendered, or allowed to expire to avoid disciplinary action(s).
2. Be of good moral and ethical character.
 3. For physicians with hospital staff membership: If a physician has unsupervised hospital privileges, those privileges must be unrestricted in each of the hospitals in which patient care has been conducted for the past 12 months. Physicians who must have their practice monitored in Focused Professional Practice Evaluation (FPPE) identified by Ongoing Professional Practice Evaluations (OPPE) processes will be reviewed by ABOG to determine if the required monitoring or proctoring represents restrictions to clinical practice.
 4. If a physician has resigned from a hospital staff or other healthcare organization, including all membership organizations (e.g. ACOG), while under investigation for ethical, moral, professional or other alleged misbehavior, or substandard patient care, a letter from that hospital or other organization stating that they are no longer pursuing the investigation of the physician must accompany the MOC application. The application will not be approved until and unless such documentation is received from the healthcare organization. If the information is not received by November 15, 2016 regardless of the reason for non-receipt, the physician will not be entered into the MOC process and will lose Board certification on December 31, 2016.
 5. For clinically active physicians without medical staff membership: If a physician has no hospital practice (outpatient care only) or is clinically inactive, an explanation must be submitted with the application. Another ABOG Diplomate in good standing, excluding a spouse or other family member, must attest each year that the applicant is of good moral and ethical character and has elected to have limited or no inpatient hospital practice.
 6. For clinically inactive physicians: If a physician is not actively involved in the clinical practice of medicine but chooses to participate in the MOC process (e.g., Dean, hospital administrator, health plan administrator, researcher or sabbatical), a letter of explanation must be submitted with the application.

Another ABOG diplomate in good standing, excluding a spouse or other family member, must attest in a letter that the applicant is of good moral and ethical character and that the applicant has elected not to have a clinical practice.

Such individuals will continue to be board-certified physicians, but their certification status will indicate that they are not in clinical practice. If the physician returns to clinical practice, a letter must be sent to ABOG indicating that fact.

7. For physicians in international practice settings: In Year 1 of each MOC 6-year cycle, physicians practicing in a country other than the United States and its Territories or Canada must submit a letter with the application from a responsible senior official in the hospital or clinical setting where the applicant practices. The letter must attest that they have independent, unsupervised privileges for the practice of Obstetrics and Gynecology, and that the Diplomate's practice of medicine meets all local standards.
8. ABOG requires documented evidence concerning the applicant's professional standing, moral and ethical character and hospital privileges (if applicable). This evidence may be collected by ABOG confidentially from administrative officers of organizations and hospitals where the physician is known and practices, from state and local medical boards, from medical societies, and other appropriate sources of information.
9. In agreeing with the Terms of the Application, the physician must also attest online that in the last 12 months there have been no:
 - a. Disciplinary or non-disciplinary actions (for example, reprimand, warning, admonishment, restriction, condition, suspension, probation, surrender, denial of renewal or revocation) on any medical license held in any state or province,
 - b. Felony convictions, plea or plea agreements.
 - c. Controlled substance, drug or alcohol-related offense, and
 - d. Limitations, restrictions, suspensions or loss of hospital privileges.

Diplomates who are unable to attest to these statements online may not be admitted into the MOC process.

10. Physicians who apply for MOC must also attest that they agree to adhere to all ABOG rules and policies.

Applicants Not Eligible to Participate in MOC

Physicians who fail to meet the MOC requirements are ineligible to participate in the MOC process and will lose their ABOG certification upon expiration. To reinstate ABOG certification, they must apply to take the re-entry examination through the Re-entry Process (See Expired Certificates). Documentation that the cause for the initial disapproval has been resolved, dismissed or expired must be submitted with the application.

A physician not admitted to the MOC process may appeal the decision by writing to the ABOG Executive Director within 90 days of notification of the action that is being appealed. The letter must set forth in detail the specific grounds on which the appeal is based. If it is determined by the Executive Director that the complaint is not an appealable issue, the appellant shall be so notified by certified mail within 30 working days. If the Executive Director determines that the appeal does involve an appealable issue the Appellant will be notified by certified mail within 30 working days. The process for consideration of the appeal is outlined in ABOG Policy for Appeals.

If the physician's certification expires during the appeal process, that physician will hold an expired certificate and must pass the re-entry examination to reinstate certification. If the appeal is successful, Diplomate status will be reinstated, and the Diplomate must complete any incomplete yearly MOC assignments.

Description of MOC Parts I – IV

Part I: Professionalism and Professional Standing

A physician's professionalism and professional standing contribute to better patient care and improved medical practice by helping to assure the Public that Diplomates exhibit professionalism in their medical practice. This includes:

1. acting in patients' best interests;
2. behaving professionally with patients, families, and colleagues across health professions;
3. taking appropriate care of themselves; and
4. representing their board certification and MOC status in a professional manner.

The ABOG requires an active, unrestricted license in each state in which a Diplomate is licensed as one measure of professionalism and professional standing. ABOG will query each state licensing board through the Federation of State Medical Boards (FSMB) for lists of physicians who hold an active license. In addition, ABOG is informed through the American Board of Medical Specialties and other appropriate sources about medical board disciplinary and non-disciplinary actions that are taken about Diplomates' licenses to practice.

For clinically inactive or retired diplomates: Some states require physicians with active medical licenses to carry medical liability insurance. Diplomates who are clinically inactive and considering changing from full or active licenses to inactive, exempt, volunteer, retired or other statuses must contact the MOC office to request the Credentials Committee approval for such licenses. Expired inactive licenses will not be approved.

The ABOG requires unrestricted privileges in Obstetrics and Gynecology currently and during the last 12 months at each institution, facility or hospital where a diplomate practices as another measure of professionalism and professional standing.

Diplomates must submit a written explanation of any of the following circumstances that occurred since the last MOC application to ABOG:

1. any disciplinary or non-disciplinary action taken by a state medical board including reprimands, restrictions, conditions, suspensions, probations, surrenders or revocations;
2. any hospital privileges restrictions, denials of renewal or revocation;
3. any disciplinary actions taken by a hospital, institution or other agency; and

4. any evidence of mental or physical impairment including any monitoring by a state physician health program (PHP).

ABOG will review the material to determine whether the physician will be allowed to enter the MOC process. In most cases, ABOG will require that the applicant clear any and all restrictions and/or conditions before entry into the MOC process will be allowed.

Each physician must present evidence of good moral and ethical character and an untarnished professional reputation. The method of demonstrating professionalism and professional standing is different for practice settings.

For physicians with hospital staff membership: For those with a hospital practice, if requested by ABOG, a release of information form must be signed by the Diplomate. This allows ABOG to make confidential inquiries to any hospital; other medical facility; other healthcare organizations including membership organizations, physicians, nurses, trainees; and patients as needed to document that the physician fulfills all moral and ethical requirements.

For clinically active physicians without medical staff membership: If the physician has only an office practice or is clinically inactive, an attestation form must be completed by an ABOG Diplomate in good standing, excluding a spouse or family member, in Year 1 of each 6-year MOC cycle.

For clinically inactive physicians: If the physician is clinically inactive or retired, an attestation form must be completed by an ABOG Diplomate in good standing, excluding a spouse or family member in Year 1 of each 6-year MOC cycle.

For physicians in international practice settings: Physicians practicing in a country other than the United States and its Territories or Canada must submit a letter with the application from a responsible senior official in the hospital or clinical setting where the applicant practices. The letter must attest that they have independent, unsupervised privileges for the practice of Obstetrics and Gynecology and that the Diplomate's practice of medicine meets all local standards. The letter must be submitted in Year 1 of each 6-year MOC cycle.

If the applicant has had a license restricted, suspended, placed on probation, surrendered or revoked by any licensing board or has had any negative action taken by a hospital, medical facility, or healthcare organization, that physician will not be allowed to participate in the MOC process until all such restrictions are removed. Conditions placed on medical licenses or hospital privileges are considered to be restrictions of practice.

Falsification of data submitted to ABOG or evidence of other egregious ethical, moral or professional misbehavior may result in deferral of a physician's application to MOC for at least 3 years. Such physicians will lose certification during this deferral period and must apply for re-entry to reinstate Board-certification.

It is each Diplomate's responsibility to inform ABOG of any and all actions against a medical license, hospital or other privileges, and credentials, including having their practice monitored.

Physicians with medical licenses on probation for a specified length of time may request admission to or be assigned to the MOC process in a probationary status, if the reason for probation is not associated with a criminal conviction. Each request or situation will be reviewed by the appropriate ABOG committee. The decision of the committee is final and cannot be appealed. Physicians requiring more information about the probationary certification status should contact the ABOG MOC office.

Part II: Lifelong Learning and Self-Assessment

Lifelong Learning and Self-Assessment contribute to better patient care by requiring ongoing participation in high-quality learning and self-assessment activities relevant to Obstetrics and Gynecology and its subspecialties.

ABOG will deliver 3 reading assignments to Diplomates' personal ABOG webpage, usually during the second full week of January, May and August.

After the reading assignment has been completed successfully, the Diplomate will receive 25 Category 1 CME credit hours from the American College of Obstetricians and Gynecologists (ACOG).

The reading assignment for subspecialists has two parts:

- a. articles in general obstetrics, gynecology and office practice, and
- b. articles in the Diplomate's subspecialty.

Each subspecialist must complete an assignment from each group of articles, as follows:

Articles in general Obstetrics, Gynecology and Office Practice

Each reading assignment will contain the titles of at least 15 articles: 5 in Obstetrics, 5 in Gynecology and 5 in Office Practice & Women's Health. Additional articles in areas such as, but not limited to, patient safety, communication, professionalism and ethics may also be listed in some reading lists.

Each article will be accompanied by 4 questions. Three of the questions will deal with core content of article, and one question will cover detailed information in the article. Some of the questions may assess the application of the conclusions of the article to patient care.

The ABOG will track the initial answers submitted to each question as well as any changes made after the first submission. Only first-answer submissions will be tracked for qualification for the MOC pilot program eligibility. Subsequent submissions of originally incorrect answers will be tracked to meet the LLSA requirement threshold (see below).

Diplomates are responsible for obtaining the copies of the articles, reading them, and answering the questions accompanying the article. *Obstetrics & Gynecology* has added a feature that will help Diplomates obtain access to these articles, many at no cost. Articles published in the *American Journal of Obstetrics & Gynecology* are made available without charge for 18 months after publication date. ABOG is not allowed to supply copies of the actual articles due to U.S. copyright laws.

In order to complete the annual Lifelong Learning assignment in MOC Years 1, 2, 4, 5 and 6, the Diplomate must read a total of 10 general articles and answer all 40 questions pertaining to each article. The Diplomate should choose the 10 articles that are most appropriate to their practice.

MOC Year 3 is different as only 5 general articles must be read, and 20 questions submitted from the general articles.

Articles in the subspecialties

During the second full week of January, May and August, the subspecialist will receive a list of articles specific to their subspecialty area. Twenty subspecialty articles will be released annually, and the subspecialist must answer a total of 80 questions, and 80% of the answers must be correct.

Each article will be accompanied by 4 questions. Three of the questions will deal with core content of article, and one question will cover detailed information in the article. Some of the questions may assess the application of the conclusions of the article to patient care.

The ABOG will track the initial answers submitted to each question as well as any changes made after the first submission. Only first-answer submissions will be tracked for qualification for the MOC pilot program eligibility. Subsequent submissions of originally incorrect answers will be tracked to meet the LLSA requirement threshold (see below).

At the time of application or after completion of the initial 25 CME hours, physicians can purchase an additional ten CME credit hours for an additional \$60 fee, reading 15 more articles, and answering 60 more questions. At least 80% of the questions must be correct and submitted by the deadline of December 15, 2016 to receive the additional CME (See MOC Deadlines & Fees). Diplomates should be aware that completing the additional articles will likely entail additional fees for the diplomate to access some of the articles from the journals. Subspecialists should be aware that any additional

articles will be in obstetrics, gynecology, office practice or another subspecialty. There will be no additional articles in their subspecialty.

Some of the listed articles have been approved by American Institute of Ultrasound in Medicine (AIUM) or the American Association of Gynecologic Laparoscopists (AAGL) for credit toward their continuing education requirements. Those who would like to receive such credit should contact AIUM or the AAGL for more details.

In MOC Year 3, only 10 subspecialty articles must be selected from the reading assignment with 40 questions from the subspecialty articles are required.

Summary of subspecialty Lifelong Learning and Self-Assessment assignment:

Each MOC year except MOC Year 3 (see below), the subspecialist must answer a total of read 30 articles and answer 120 questions, as follows:

- 10 articles and 40 questions in general Ob, Gyn and/or Office Practice
and
- 20 articles and 80 questions in FPMRS, GO, MFM or REI

After the reading assignments have been completed successfully, the subspecialist will be awarded 25 Category 1 CME hours by the ACOG. Diplomates who are not ACOG members will be charged a fee of \$390 each year to cover the cost of administration of the CME credit.

If a Diplomate fails to answer 80% of the Lifelong Learning and Self-Assessment questions correctly, the Diplomate may re-enter answers for the questions for any article where one or more answers were incorrect. All answers must be submitted to ABOG no later than December 15, 2016 to avoid having an incomplete assignment.

EXAMPLES:

1. *In January, May and August an MFM subspecialist reads a total of 10 Obstetrics articles and submits the 40 answers. The Diplomate also reads 20 MFM articles and submits 80 answers. If 80% of the 120 submitted answers are correct, the requirement is met.*
2. *A Diplomate submits all 80 answers in Gynecologic Oncology, but none from the general articles. The assignment is incomplete.*
3. *A Diplomate submits the 40 general and 80 REI answers, but only 65% are correct. The assignment is incomplete.*

MOC Year 3

In Year 3 in the first MOC Cycle, LLSA is different. This year some of the LLSA requirement is replaced by a Patient Safety and Communication course.

The Diplomate must read only 5 general articles and 10 subspecialty articles. The physician must submit a total of 20 answers from general articles and 40 answers from the subspecialty articles and answer a minimum of 80% correct. As soon as this threshold has been met, the Safety and Communication course will be accessible on the Diplomate's webpage.

The Safety and Communication course must be completed in by Diplomates in Year 3 by December 15, 2016. This assignment includes a pretest and educational chapters. There is a set of questions at the end of each chapter. Eighty percent of the questions at the end of each chapter must be answered correctly before the next chapter will open. There are 60 questions in the Safety and Communication course.

When the required 80% correct answers are submitted and the course is completed the Diplomate will be awarded 25 Category 1 CME credits by ACOG. No additional fee will be charged for the additional CME credits or the Safety and Communication course.

All three of the reading assignments will appear on the Diplomate's webpage, as many Diplomates have requested that they be able to see all of the articles for the year. However, it is only possible to answer 60 questions in MOC Year 3. While these 60 may be from any of the article sets, Diplomates are strongly encouraged to complete the 60 questions from the January and May sets to allow sufficient time to complete the Safety and Communication course.

Part III: Assessment of Knowledge, Judgment & Skills

Assessment of Knowledge, Judgment and Skills builds upon and links to the continuous learning and self-assessment requirements of MOC Part II. These standards contribute to better patient care by incorporating an external objective assessment to provide an assurance that there has been the necessary commitment to lifelong learning and to remain current in core content of Obstetrics and Gynecology and its subspecialties.

Each Diplomate must pass a secure, computer-based examination in MOC Year 6. The test is administered at Pearson VUE testing centers throughout the United States and will be available most days except Sundays and holidays.

2016 MOC Pilot Program

The ABOG will begin a 2-year pilot program in 2016 that will enhance and streamline the current Maintenance of Certification (MOC) program. The pilot proposes to integrate the self-assessment and external assessment MOC requirements to allow diplomates to continuously demonstrate their knowledge of the specialty. The pilot will allow diplomates in Year 6 in 2016 and 2017 to earn an exemption from the current MOC Examination, if they reach a threshold of performance during the first five years of the self-assessment program.

The LLSA MOC requirement is focused on maintaining knowledge of new and important advancements in Obstetrics, Gynecology and Women's Healthcare. The current MOC examination offers diplomates an assessment in a modular format that is most relevant to their practice.

The pilot program maintains a rigorous and relevant continuous professional development process that is critical to providing high quality patient care. The pilot puts additional emphasis on demonstration of knowledge throughout the entire MOC cycle. It allows those who demonstrate this achievement through study and self-assessment testing of LLSA to earn exemption from the added external assessment of the current MOC examination. The ABOG believes that the pilot will help to assure that diplomates are maintaining a high level of current medical knowledge and are able to apply that information in their practices.

Pilot Program Eligibility

Diplomates' personal MOC dashboards will display LLSA performance in real-time in early 2016. The ABOG will use a threshold of at least 86% correct on the initial answers submitted in LLSA required activity from 2011 to 2015 as one of the eligibility criteria to be invited to participate in the pilot in 2016. The performance will be based on the total required LLSA responses in aggregate for the 5 years. In addition, diplomates in MOC Year 6 are not eligible to participate if they have:

1. a Probationary certification status,
2. any current state board disciplinary actions on their licenses, such as a revocation, suspension, probation, denial of renewal or surrender, or
3. any felony criminal charges, convictions or pleadings.

In 2016 and 2017, only Diplomates in MOC Year 6 will be eligible to participate in the pilot. When they apply for MOC, they will be notified if they are eligible to participate in the pilot. Eligible diplomates must choose whether to take part in the pilot or to decline and take the MOC Examination.

If a diplomate declines to participate, they must pay the MOC Examination fee with their MOC fee (See below). They must take and pass the current MOC Examination in MOC Year 6.

If a diplomate chooses to participate, they will not pay any additional MOC examination fee. They must meet all the 2016 Professionalism and Professional Standing requirements. They must maintain LLSA performance at least at the 86% threshold during the MOC year 6 and have completed the Improvement in Practice (MOC Part IV) requirements for the cycle.

If a diplomate is ineligible to participate, they must pay the MOC Examination fee with their MOC fee. They must take and pass the current MOC Examination in MOC Year 6.

Pilot Program Evaluation

The ABOG will study the pilot in 2016 and 2017, review the data and make a decision about applying to the ABMS to permanently adopt the changes to its MOC program in 2018.

Diplomates who are not in MOC Year 6 in 2016 or 2017

Diplomates in MOC Years 1-5 in 2016 and 2017 should be aware of the initial answer threshold used in the pilot program to try to assure their eligibility to earn an exemption from the current MOC Examination in future years.

The ABOG may choose to use different eligibility criteria for exemption from the MOC examination in the future. The eligibility criteria for 2018 will be determined by the results of the pilot program.

For Diplomates taking the MOC Examination

When a Diplomate applies for MOC Year 6, they will be notified if they are eligible to participate in the pilot program. Those that do not qualify for or select participation must pass a secure, computer-based examination by December 15, 2016. They will also be required to pay an additional fee of \$175 to cover the administrative costs of preparing the examination and the test center fee. This fee will be in addition to the \$265 fee for MOC Parts I, II and IV.

When such a Diplomate's application has been approved (usually fewer than 4 weeks), information will be sent by email explaining the process to schedule a test at a Pearson VUE test center. Reservations at each test center are scheduled on a "first-come, first-served" basis. Physicians are encouraged to schedule their examinations as soon as possible after receiving the notice of approval.

If a physician does not pass the computer-based examination, it may be retaken up to four more times during the same year. The original test fee will cover the costs of all

repeat examinations. The last day a repeat examination can be taken is December 15, 2016.

If a physician fails to pass the MOC Part III examination by December 15, 2016, their certificate will expire. If they wish to regain certification, they must apply through the re-entry process to reinstate their Board certification.

In addition to passing the secure, computer-based MOC examination, Diplomates in MOC Year 6 must also complete the Part I Professionalism and Professional Standing, Part II Lifelong Learning and Self-Assessment and Part IV Improvement in Medical Practice assignments.

A practice test is available on the ABOG website. The structure of the test can be found in this Bulletin in Appendix 2. The ABOG policy about MOC examinations of diplomates with disabilities is in Appendix 3.

Part IV: Improvement in Medical Practice

Improvement in Medical Practice contributes to improved patient care through ongoing assessment and improvement in the quality of care in practices, in hospitals, health systems and/or community settings. This may include activities that result in improved patient or population health outcomes, improved access to health care, improved patient experience (including patient satisfaction), and increased value in the health care system.

There is now more flexibility in meeting this MOC standard. Diplomates may choose the activity most relevant to their own practice and practice setting. Diplomates must participate in one of the available Improvement in Medical Practice alternatives yearly in MOC years 1-5. Options that are available include:

1. ABOG Improvement in Medical Practice Modules
2. Multi-specialty MOC Portfolio Approval Program
3. ABOG-approved Quality Improvement (QI) Efforts
4. ABOG-approved Simulation
5. Quality Improvement (QI) Publications

Improvement in Medical Practice Modules

ABOG Improvement in Medical Practice Modules can be accessed through the ABOG website (see below). Each Diplomate chooses topics that are most relevant to their practice from a list of modules.

There are two phases to each module. Phase 1 of the module typically involves an evidence-based review, review of up to 10 of the Diplomate's patient records, and answering some pertinent questions. Some topics do not involve patient record review. Phase 2 of the module process is entitled Impact on Practice and occurs 1 month later. The Diplomate will receive an email from ABOG and must complete an Impact on Practice question(s) to complete the module. Three Category 1 CME credits will be awarded by ACOG for each module after Phase 2 is complete.

Diplomates choosing modules must open and complete Phase 1 of a module each year for the first 5 years in each 6-year cycle. Phase 2 will be available after 1 month. All modules must be completed before the end of MOC Year 6. Completion of duplicate modules is not allowed. Diplomates holding basic certification may choose any module appropriate to their practice from either the basic or subspecialty lists.

Diplomates will not be allowed to start any assignments in the next MOC year unless the previous year's required module has been opened or and at least phase 1 has been completed.

There is no charge for MOC Part IV for ACOG Fellows. Those physicians who are not ACOG Fellows will be charged a \$390 fee per year to cover the cost of administration of the CME credit.

Modules are accessed through the ABOG website. The Personal Page has a Part IV Improvement in Medical Practice section. A module may be selected, and the physician's progress in completing the module will be tracked. The only information retained after the module has been completed is that the physician successfully completed the module. This information will be automatically submitted to ACOG.

Multi-specialty MOC Portfolio Approval Program

Many physicians already participate in quality improvement efforts in their local practice. The Multi-specialty MOC Portfolio Approval Program (Portfolio Program) is an alternative pathway for healthcare organizations that support physician involvement in quality improvement and MOC to allow their physicians' their quality improvement efforts to be approved for ABOG MOC Part IV credit.

Most Portfolio Program QI activities are sponsored by the institution or hospital Quality Improvement department. QI projects may be multi-disciplinary or specialty-specific in Obstetrics and Gynecology. The projects must meet Portfolio Program standards and be approved by ABOG through the program. Diplomates who meaningfully participate

in the QI efforts will meet MOC requirements for a year. An individual project participation and MOC credit may extend for up to 2 MOC years. Longitudinal projects may be renewed for longer QI activities.

To find out more about the Portfolio Program, visit www.mocportfolioprogram.org.

ABOG-approved QI Efforts

The ABOG approves for MOC credit, structured, well-designed QI projects that have demonstrated improvements in care and are based on accepted improvement science and methodology. Newly developed QI projects from organizations with a history of successful quality improvement projects are also eligible for approval.

The process for having activities approved includes:

1. Submission of an application to the MOC division with detailed information about activity and the sponsor organization.
2. Review of the application by the ABOG staff. During the review period, applicants may be asked to clarify information about their activity. Please allow up to 12 weeks for review.

Quality Improvement efforts in Obstetrics and Gynecology that qualify for MOC credit must meet the following standards:

1. Have leadership and management at the project level capable of ensuring adherence to the participation criteria. This means that the project must track who is participating, their dates of participation, and their role with respect to the definition of meaningful participation.
2. Address care the physician can influence in one or more of the six Institute of Medicine quality dimensions (safety, effectiveness, timeliness, equity, efficiency, and/or patient-centeredness).
3. Have a specific, measurable, relevant, and time-appropriate aim for improvement.
4. Use appropriate, relevant, and evidence-based performance measures that include measurement related to patient care at the appropriate unit of analysis (physician, clinic, care team, etc.).
5. Include appropriate interventions to be tested for improvement.
6. Include appropriate prospective and repetitive data collection and reporting of performance data to support effective assessment of the impact of the interventions over 2 or more improvement cycles.

7. Represent an attempt at translation or implementation of an improvement into routine care, or the dissemination or spread of an existing improvement into practice.
8. Possess sufficient and appropriate resources to support the successful conclusion of the activity without introducing a conflict of interest

In order to earn MOC credit for participating in approved QI efforts, physicians must:

1. Attest to that they have meaningfully participated in the approved QI effort;
2. Have their attestation cosigned or reported to ABOG by the project leader; and
3. Reflect on the QI effort.

Physician participation in an approved QI effort is considered meaningful when:

1. The QI effort is intended to provide clear benefit to the physician's patients and is directly related to the physician's clinical practice of Obstetrics and Gynecology.
2. The physician is actively involved in the simulation and QI effort, including, at a minimum, working with care team members to plan and implement interventions, interpreting performance data to assess the impact of the interventions, and making appropriate course corrections in the improvement effort.
3. The physician is able to personally reflect on the activity, describing the change that was performed in their practice and how it affected the way care is delivered.

Proposed QI projects should be submitted in writing to the MOC division by mail or email. Activities that meet ABOG standards will receive approval for two years or the length of the project, whichever is shorter and must be submitted for re-approval by the ABOG every two years. Physicians can claim credit each time they meet meaningful participation requirements as long as they are implementing new interventions.

ABOG-approved Simulation

The ABOG recognizes simulation training as an innovative approach to assess a physician's technical, clinical and teamwork skills in obstetrics, gynecology and office practice. Diplomates may participate in CME that involve simulation activities provided that the CME is approved in advance by the MOC division of ABOG. After reviewing the CME content and simulation activity, ABOG will approve CME that meets MOC standards (has relevant and meaningful simulation and self-assessment).

Simulation activity must provide advanced, hands-on, clinical education experiences for participants from a wide scope of practices. It may integrate task-trainers, low- and high-

fidelity simulators, computer-based simulations, and actual medical devices to provide optimal learning opportunities.

To ensure high-quality learning experiences that meet the simulation requirements of MOC, ABOG has established standards and approves activities and CME courses that meet those standards. The following core curricular components for simulation courses must be present:

- A minimum of six hours of total course instruction
- Active participation in realistic simulation procedures or scenarios
- Post-scenario or post-task debriefing
- Management of relevant patient-care scenarios with an emphasis on teamwork and communication, if appropriate
- Assessment of technical skills, if appropriate
- One instructor must be an ABOG Diplomate
- The instructor-to-student ratio must be no greater than 1:5

Proposed simulation activities or courses should be submitted in writing to the MOC division by mail or email.

To receive MOC credit, the Diplomate must actively participate in the entire simulation course and complete a course evaluation. After the activity, the physician will receive email instructions to reflect on the simulation and to answer web-based questions about the impact on their practice. Diplomates may obtain MOC credit for participation in an approved simulation activity up to 2 years in each MOC cycle.

The ABOG MOC credit is independent of CME credit. Some activities and courses may provide CME credit. Contact the site or sponsor for specific CME information about their courses.

Quality Improvement Publications, Presentations and Posters

The ABOG awards MOC credit for authorship or co-authorship of published articles relating to QI activities in health care. To be considered for MOC credit, articles must:

- Be published in a peer-reviewed journal,
- Adhere to SQUIRE guidelines for published QI articles (<http://squire-statement.org>),
- Be published during the Diplomate's current MOC cycle, and
- Be approved by the ABOG.

The ABOG also recognizes authorship and co-authorship of peer-reviewed oral presentations and posters presented at national scientific meetings that describe the implementation and outcomes of a QI project. The project's ultimate success will not affect the credit, but it should address a recognized gap in care, be prospective, and involve more than one QI cycle.

To be considered for MOC credit, abstracts or posters must include:

- The specific aim of the QI project
- The process for improvement
- The progress toward or results of achieving the specific aim
- A discussion of whether the aim was achieved, factors that affected success, and next steps.
- Be approved by the ABOG

To earn MOC credit:

1. Submit the publication, abstract and poster to MOC department by mail or email.
2. Provide the date of the publication or presentation.
3. Staff will review and approve completed submissions. Diplomates may be asked to clarify information during the review process.
4. Please allow up to 12 weeks for the review and notification.

Clinical research is valuable but different than QI. Typically, the following won't earn credit:

- Research publications, including comparative trials, before-and-after studies, and other studies intended to answer a clinical or scientific question
- Descriptions of studies to assess whether an intervention is effective
- Development and validation of tools that could be used for QI
- Quality measure development
- Retrospective studies of administrative claims data

DIPLOMATES IN NON-CLINICAL POSITIONS

Diplomates in non-clinical positions, (e.g., Deans, administrators, researchers, individuals on sabbaticals, etc.) may maintain certification by completion of MOC Parts I, II, III and IV. ABOG must be notified of the Diplomate's status and approve any requests for exemption from Part IV requirements.

Diplomates with exemptions from Part IV requirements may be designated as ABOG-certified but currently not in the active practice of medicine. If the Diplomate returns to active clinical practice, ABOG may be petitioned to remove the designation.

DIPLOMATES WHO ARE TEMPORARILY CLINICALLY INACTIVE OR RETIRED FROM CLINICAL PRACTICE

Diplomates with non-time-limited subspecialty certification

A Diplomate with a non-time-limited subspecialty certificate who retires from active clinical practice must notify ABOG of this transition. The Diplomate will then be listed as an inactive board-certified physician who will be designated as not required to meet MOC requirements.

An inactive, retired Diplomate may request to participate in MOC. Such physicians must pay the appropriate MOC fees and complete MOC Parts I, II and III assignments each year, as appropriate for a 6-year MOC cycle. Such Diplomates will be designated as meeting MOC requirements. Beginning in 2015, these Diplomates will be considered to be in MOC Year 1. In MOC Year 6, Diplomates in MOC will be required to pass the Part III MOC examination.

Inactive, retired physicians who only wish to participate in MOC Part II to gain CME credit hours must contact ABOG for approval. Starting in 2015, participation in Part II alone will not meet the criteria for designation as meeting MOC requirements.

Diplomates with time-limited subspecialty certification

A Diplomate who is clinically inactive temporarily or takes leave from their practice for medical, family or personal reasons may request to participate in MOC without hospital privileges or an outpatient practice. Such physicians must pay the appropriate MOC fees, request approval for an exemption from MOC Part IV, and complete MOC Parts I, II and III assignments each year. These Diplomates must have an active medical license to practice in at least one state. They will be designated as meeting MOC requirements. Failure to complete the yearly MOC requirements during the temporary inactivity will result in expiration of certification. When these Diplomates re-enter clinical practice, they must notify ABOG, meet the MOC eligibility requirements, and resume participation in MOC Part IV.

A Diplomate with a time-limited subspecialty certificate who retires from clinical practice must notify ABOG of this transition. The Diplomate will then be listed as an inactive, retired physician. Such physicians will be designated as not required to participate in MOC. Failure to notify ABOG at retirement and/or failure to continue the MOC process will result in expiration of certification.

All inactive physicians who re-enter practice must notify ABOG of that transition. Inactive physicians with prior time-limited subspecialty certification who have not participated in MOC will be required to regain certification through the re-entry process. That physician will then be eligible to re-enter the process in MOC Year 1.

A retired Diplomate may request to participate in MOC. Such physicians must pay the appropriate MOC fees and complete MOC Parts I, II and III assignments each year, as appropriate for a 6-year MOC cycle. These Diplomates must have an active medical license to practice in at least one state. Such Diplomates will be designated as meeting MOC requirements. The first year of participation in voluntary MOC will be designated as MOC Year 1. In MOC Year 6, Diplomates in MOC will be required to pass the Part III MOC examination.

Inactive, retired physicians who wish to participate in Part II to gain CME credit hours must contact ABOG for approval. Starting in 2015, participation in Part II alone will not meet the criteria for designation as meeting MOC requirements.

MOC DEADLINES AND FEES

MOC Deadlines

November 15, 2016: Deadline for applications to be submitted.

December 15, 2016: Deadline for assignments to be completed.

MOC Fees: Years 1-5 and 6 not taking MOC Examination

ACOG Fellows and Junior Fellows (25 CME credits for Part II) \$265

Non-ACOG Fellows (25 CME credits for Part II) \$265 + \$390 = \$655

MOC Fees: Year 6 taking MOC Examination

ACOG Fellows and Junior Fellows (25 CME credits for Part II) \$265 + \$175 = \$440

Non-ACOG Fellows (25 CME credits for Part II) \$265 + \$390 + \$175 = \$830

Additional CME credit hours Years 1-6

Ten additional CME credit hours may be obtained for an additional \$60 fee each year. Information about this extra CME is available on each Diplomate's ABOG personal page.

Diplomates should be aware that completing the additional articles will likely entail additional fees for the diplomate to access some of the articles from the journals. Subspecialists should be aware that any additional articles will be in obstetrics, gynecology, office practice or another subspecialty. There will be no additional articles in their subspecialty.

Fees for MOC have been computed to cover the administrative expenses associated with the process and cannot be refunded or credited to a future year. Fees are quoted in U.S. dollars and must be paid by credit card through the ABOG website (www.abog.org).

Access to the MOC assignments will not be allowed until the MOC application is approved and payment is received.

FAILURE TO COMPLETE MOC PROCESS AND LOSS OF BOARD CERTIFICATION

A Diplomate who fails to enter into or to successfully complete all of the required assignments in any given MOC year will lose their Diplomate status. That is, they will no longer be board-certified.

***Example:** A Diplomate was required to be enrolled in the MOC Year 1 process in 2015 to maintain certification. An application was completed and the proper fee paid, but the physician did not complete the FPMRS Lifelong Learning and Assessment assignment by submitting the answers to 120 answers by the deadline. That physician will no longer be Board certified as of January 1, 2016.*

Diplomate status may be regained by completing the re-entry process described below. However, during the interval between January 1 and the completion of the re-entry process, the physician is not board-certified and may not advertise or assert Diplomate status.

Re-Entry Process / Re-Establishment of Diplomate Status

A physician who loses Diplomate status by failure to complete the MOC process in any year must apply for, take and pass a secure, computer-based re-entry subspecialty examination, unless their certificate has been expired for 6 or more years. The physician is also required to complete their MOC assignments the same year that certification is regained. There will be a combined fee for the re-entry process that includes the examination and MOC.

A physician holding a subspecialty certificate that has been expired for 6 or more years should contact the MOC department to learn the process to re-establish their Diplomate status. See the section on Expired Certificates for further details.

Expired Certificates

The following section applies to previously-certified physicians who have lost ABOG certification due to lack of participation in or failure to complete the MOC process. Such physicians are no longer Diplomates of the ABOG, and may not advertise or otherwise designate that they are ABOG certified. Any designation or advertisement of expired ABOG certification must accurately communicate the dates that the certification commenced and ended.

Certification Expired fewer than 6 years

Physicians seeking to regain subspecialty certification must pass a secure, computer-based re-entry subspecialty examination and then complete the MOC Year 1 assignments in the year. Re-entry examinations will be given January 9th through June 30th, 2016. All examinations will be administered at Pearson VUE testing centers throughout the United States. Candidates may take the re-entry examination up to 3 times in a year to pass the examination. There is no additional charge for the additional examinations.

A. Application process

Applications for the re-entry subspecialty examination will be available on-line at www.abog.org beginning January, 2016, but the physician must call the ABOG MOC office for access to the on-line application. The final date to apply for the examination is June 17, 2016. No application will be accepted after this date. A non-refundable examination and MOC fee of \$765 must be paid at the time of application. No application will be processed without payment of the application fee and submission of all required documents.

B. Testing sites

Each applicant will be sent an email after their application has been approved and the appropriate fee has been paid. The email will be sent to the email address provided as part of the application process.

After the email is received, the candidate should contact Pearson VUE to obtain a reservation for the examination. Instructions for contacting the testing company will be included in the email. Reservations at the testing centers are limited and are assigned on a first-come, first-served basis. Thus, there is no guarantee that a specific city site will be available. Applicants are encouraged to complete the application process as soon as possible.

C. Re-entry Certification Limits

Candidates who successfully pass the subspecialty re-entry examination in 2016 will have their Diplomate status re-instated for the remainder of 2016, provided that the Diplomate enters the MOC process in 2016 and completes the assignments. Diplomate status will be renewed annually provided that the MOC process is completed successfully each year.

Certification Expired for 6 or more years

Diplomates who hold a certificate that has been expired for six or more years are not eligible to apply for the re-entry examination. They may re-establish basic Ob/Gyn Diplomate status only by taking and passing the basic written and oral examinations. If they wish to re-establish their subspecialty certification, they should contact the MOC department to learn the process.

MOC for Physicians with Non-time-limited Subspecialty ABOG Certification

GENERAL INFORMATION

Physicians who achieved subspecialty certification by ABOG prior to 1987 hold certificates that are not time-limited. That is, their certificates do not expire. However, those physicians may elect to participate in some or all of the parts of the MOC process. Such participation does not change their certification status in any manner. The duration of their certification remains non-time-limited.

Non-time-limited MOC

Diplomates holding non-time-limited subspecialty certificates who wish to participate in MOC must contact the ABOG MOC office for access. They may participate in MOC Parts I, II, III and IV.

The Diplomate must submit the appropriate additional materials and pay the application fees. Please read the sections describing the application process in this Subspecialty Bulletin for those with time-limited certificates. The instructions for application and the fees are identical to those described for Diplomates with time-limited certification.

To be designated as meeting MOC requirements, Diplomates must participate in all parts of MOC applicable to their practice. In most cases this will require participation in Parts I, II, III and IV. In MOC Year 6, Diplomates in MOC will be required to pass the Part III MOC examination. Diplomates with non-time-limited certification are eligible to participate in the MOC pilot.

Diplomates with non-time-limited certification who prefer to participate only in Part II to gain CME credit hours must contact ABOG for approval. Participation in Lifelong Learning and Self-Assessment alone will not meet the criteria to be designated as meeting MOC requirements.

Appendix 1: Outline of Yearly MOC Assignments for 2016

Determine your MOC Cycle (1 or 2) and Year (1-6) for 2016 on your personal website and complete the appropriate assignments for that year.

MOC Year 1

Apply at www.abog.org; pay fees by November 15, 2016, and complete requirements by December 15, 2016.

- Part I: Professionalism & Professional Standing: If requested, submit medical license(s) and outpatient attestation.
- Part II: Lifelong Learning & Self-Assessment: Complete 120 questions.
- Part III: Assessment of Knowledge, Judgment & Skills: Not required.
- Part IV: Improvement in Medical Practice: Open and complete Phase 1 of one MOC module or select another QI or simulation activity option.

MOC Year 2

Apply at www.abog.org; pay fees by November 15, 2016, and complete requirements by December 15, 2016.

- Part I: Professionalism & Professional Standing: If requested, submit medical license(s) and outpatient attestation.
- Part II: Lifelong Learning & Self-Assessment: Complete 120 questions.
- Part III: Assessment of Knowledge, Judgment & Skills: Not required.
- Part IV: Improvement in Medical Practice: Complete Phase 2 of module started in Year 1, if unfinished. Open and complete at least Phase 1 of a second MOC module or select another QI or simulation activity option.

MOC Year 3

Apply at www.abog.org; pay fees by November 15, 2016, and complete requirements by December 15, 2016.

- Part I: Professionalism & Professional Standing: If requested, submit medical license(s) and outpatient attestation.
- Part II: Lifelong Learning & Self-Assessment: Complete 60 questions. Complete Safety and Communication course.
- Part III: Assessment of Knowledge, Judgment & Skills: Not required.
- Part IV: Improvement in Medical Practice: Complete Phase 2 of Year 2 module, if unfinished. Open and complete at least Phase 1 of a third MOC module or select another QI or simulation activity option.

MOC Year 4

Apply at www.abog.org; pay fees by November 15, 2016, and complete requirements by December 15, 2016.

The assignments are the same as MOC Year 2. In Part IV, complete Phase 2 of module opened in Year 3, if unfinished, and open and complete at least Phase 1 of a fourth MOC module or select another QI or simulation activity option.

MOC Year 5

Apply at www.abog.org; pay fees by November 15, 2016, and complete requirements by December 15, 2016.

The assignments are the same as MOC Year 2, except in Part IV to complete Phase 2 of module opened in Year 4, if unfinished, and open and complete at least Phase 1 of a fifth MOC module or select another QI or simulation activity option.

MOC Year 6

Apply at www.abog.org; pay fees by November 15, 2016, and complete requirements by December 15, 2016.

- Part I: Professionalism & Professional Standing: If requested, submit medical license(s) and outpatient attestation.
- Part II: Lifelong Learning & Self-Assessment: Complete 120 questions.
- Part III: Assessment of Knowledge, Judgment & Skills: If eligible for pilot, choose to participate in pilot program or pass the computer-based examination. If ineligible for pilot, pass the computer-based examination
- Part IV: Improvement in Medical Practice: Complete Phase 2 of module started in Year 5 if unfinished. No other QI or simulation activity required.

Appendix 2: MOC Part III Assessment of Knowledge, Judgment & Skills

A. Examination Content and Grading

The subspecialty examinations are secure, computer-based examinations. Each consists of two 50-question selectives. One selective is in the subspecialty, and one is chosen by the Diplomate (See below). The examination will last 105 minutes and will be administered at Pearson VUE testing centers throughout the United States.

1. The questions will be multiple-choice, one-best-answer type and will be based on common clinical problems.
2. A Diplomate must answer a minimum of 75 of the 100 questions (75%) correctly to pass the MOC test.

In most cases, Diplomates will receive their test result within 72 hours of completion of the test.

3. We cannot provide feedback on the subspecialty selectives in 2016.
4. ABOG cannot provide a copy of the questions on the test that were answered incorrectly.
5. Each examination is graded independently of any prior examinations. Answers or scores on prior examinations cannot be applied to or graded as part of a repeat examination.

B. Test Selectives

Each Diplomate will have a subspecialty selective and must choose one selective in General Obstetrics and Gynecology at the time of application. The list of choices is shown below:

Subspecialties (50 questions)

1. Maternal-Fetal Medicine
2. Gynecologic Oncology
3. Reproductive Endocrinology and Infertility
4. Female Pelvic Medicine and Reconstructive Surgery

General Obstetrics and Gynecology (50 questions)

1. Obstetrics, Gynecology, Office Practice, and Women's Health
2. Obstetrics only
3. Gynecology only
4. Office Practice and Women's Health only

C. MOC Examination Blueprint

The following is the breakdown of the approximate proportion of questions for each of the 50 question selectives in General Obstetrics and Gynecology offered in the 2016 MOC examination. Blueprints for the subspecialty examination selectives are not available in 2016.

Obstetrics, Gynecology and Office Practice & Women's Health

Obstetrics: 30%

- Antenatal Care
- Intrapartum Care
- Postpartum Care
- Miscellaneous (genetics, preconception, etc.)

Gynecology: 30%

- Diagnosis and Preoperative Evaluation
- Surgical Decision Making
- Surgical Technique
- Postoperative Care and Complications
- Miscellaneous (neoplasia, emergency care, etc.)

Office Practice and Women's Health: 30%

- Age-appropriate Routine Care
- Medical Problems
- Gynecologic-specific Disorders
- Office Procedures
- Miscellaneous (psychological problems, domestic violence, etc.)

Obstetrics Only

- Preconception/Antenatal Care
- Intrapartum Care
- Postpartum Care
- Miscellaneous (genetics, preconception, etc.)

Gynecology Only

- Diagnosis and Preoperative Evaluation
- Surgical Decision Making
- Surgical Technique
- Postoperative Care and Complications
- Miscellaneous (neoplasia, emergency care, etc.)

Office Practice and Women's Health

- Age-appropriate Routine Care
- Medical Problems
- Gynecologic-specific Disorders
- Office Procedures
- Miscellaneous (psychological problems, domestic violence, etc.)

D. Fees

The fee for the secure, computer-based examination is \$175 and was determined based on the costs associated with test preparation and the use of the testing centers. The fee must be paid at the time of MOC application.

If the examination is not passed, the physician may re-take the examination up to 4 more times before December 15, 2016. There will be no additional charge each time the test is taken in the same year.

E. Practice Test

ABOG has posted a practice test of general Obstetrics and Gynecology at www.abog.org. The questions on the practice test are representative of the type of questions that will be asked on the actual examination, but are not meant to be interpreted as the actual questions that will be on the examination. Practice subspecialty questions are not available.

F. Study Materials

There is no single source which will serve as the basis for all questions on the examination. Diplomates are advised to be familiar with the material in the *ACOG Compendium of Selected Publications* and publications from the appropriate subspecialty societies. General textbooks in Obstetrics and Gynecology, Female Pelvic Medicine and Reconstructive Surgery, Gynecologic Oncology, Maternal-Fetal Medicine and Reproductive Endocrinology and Infertility are also good resources for study for examinations.

Appendix 3: Diplomate Disability: MOC Part III Examination

ABOG shall not exclude any Diplomate from the MOC Part III examination solely because of a disability if the ABOG is provided with notice of the disability in time to permit the ABOG to make such adjustments in the examination as are reasonably necessary to accommodate the disability. The physician must provide sufficient documentation to permit the ABOG to verify the existence, nature and extent of the disability no fewer than 90 days prior to the date of the examination. The documentation must specify the requirements or accommodations deemed necessary to overcome or compensate for the disability. In addition, the Diplomate must supply any additional information the ABOG may subsequently request.

If any of the requirements cannot reasonably be provided, ABOG will notify the Diplomate and will indicate those alternative accommodations which it deems appropriate in consideration of the disability claimed and documented, and the integrity of the examination.

If the Diplomate fails to notify ABOG of a disability 90 days before the examination and fails to achieve a passing grade, that candidate may not appeal the results of the examination, however, the Diplomate shall be entitled to take the next available examination.

If a Diplomate claims that their MOC Part III examination results were adversely affected by illness, injury or other temporary physical impairment at the time of the examination, that Diplomate may not appeal the results of the examination. However, if the Diplomate provides sufficient evidence of such illness, injury or impairment, they shall be entitled to re-schedule and repeat the examination during the same MOC year without another examination fee.