



## Policy on Required ABEM Continuing Certification for Emergency Medical Services

### BACKGROUND

The American Board of Emergency Medicine (ABEM) Emergency Medical Services (EMS) continuing certification process is required for ABEM EMS-certified physicians to maintain certification.

### POLICY

ABEM EMS-certified physicians must participate in and meet the following ABEM continuing certification process requirements to maintain certification.

#### **Professionalism and Professional Standing**

ABEM EMS-certified physicians must continually comply with the ABEM Policy on Medical Licensure and ABEM Code of Professionalism.

#### **Assessment of Knowledge, Judgement, and Skills (MyEMSCert Modules)**

ABEM EMS-certified physicians must take and pass four MyEMSCert modules during every five-year certification cycle. ABEM is phasing in this requirement for physicians transitioning from a ten-year certification to a five-year certification. See “Phase-in of Policy” (below) for the MyEMSCert requirement phase-in schedule details. Passing MyEMSCert modules is a required component of continuing certification but does not singularly renew certification. Certification is renewed on January 1, after the expiration of the current certificate, if all ABEM continuing certification requirements have been met.

#### **Improvement in Medical Practice (IMP)**

ABEM EMS-certified clinically active physicians must attest to completing Improvement in Medical Practice (IMP) activities to maintain certification. Physicians must complete one IMP activity every five years during the certification cycle.

Physicians who are still in a ten-year certification cycle who do not complete their first five-year requirements on time will not lose certification but will be reported as “not participating in continuing certification.” IMP activities must follow ABEM IMP Activity Guidelines, as described below.

Physicians may report IMP activities they complete within their practice. Alternatively, they may complete any ABEM-approved, third-party IMP activity.

Physicians who inform ABEM that they are clinically inactive do not have IMP requirements. Clinically inactive physicians change their clinical activity status by contacting the ABEM office. If they become clinically active again, physicians will have IMP requirements again.

IMP Activity Guidelines

ABEM guidelines for completion of IMP activities require that the physician follow the following four steps:

- Review patient clinical care data from ten of the physician's patients. The data must be related to a single presentation, disease, or clinical care process that is part of *The Model of the Clinical Practice of Emergency Medicine* (EM Model) or *The Core Content of EMS Medicine*. Group data is acceptable if the individual physician's data is included. Measuring fewer than ten patients is acceptable if the activity is focused on a high-acuity, low-volume clinical issue.
- Compare the data to evidence-based guidelines. Physicians may use expert consensus or comparable peer data if such guidelines are unavailable.
- Develop and implement a practice improvement plan, an individual or group effort.
- Review patient clinical care data from ten additional patients with the same presentation, disease, or clinical process as the first patient data review. Group data can be used if the physician's patients are included, and measuring fewer than ten patients is acceptable if the activity is focused on a high-acuity, low-volume clinical issue. Use the new data to evaluate whether clinical performance has positively changed or if acceptable performance has been maintained.

Reporting IMP Activities to ABEM

Physicians complete IMP activities by attesting to ABEM that they have completed the activities following the ABEM IMP Activity Guidelines described above.

When physicians attest to the completion of IMP activities, they are required to specify an independent verifier of their activities. The verifier must be someone who oversees or has knowledge of the physician's activity completion.

Five percent of reported IMP activities will be randomly selected for verification. ABEM will ask verifiers to affirm that all ABEM's activity completion guidelines were met. Any activity that is not verifiable will not meet the requirement.

Annual Fee

Physicians with certificates issued in 2021 and after are charged an annual fee. Payment of the fee is required to access continuing certification activities. Physicians who do not pay the annual fee by the end of the grace period will be decertified. Please refer to the ABEM Policy on Fees.

Renewal of Certification

ABEM EMS-certified physicians who have met all their ABEM EMS continuing certification requirements will renew their certification on January 1, immediately following the expiration of their previous certificate.

Nonrenewal of Certification

Physicians who do not meet all their ABEM EMS requirements to renew certification by their certification expiration date are no longer certified. ABEM provides options for formerly certified physicians to regain certification, as defined in the applicable Policy on Regaining Certification. The options for regaining certification are based on the following:

- The number of required ABEM activities to renew certification a physician completed prior to certification expiration
- Whether more than five years have elapsed since the physician's certification expired

## **PHASE-IN OF POLICY**

The MyEMSCert requirement of the EMS continuing certification process is being phased in for physicians transitioning from a ten-year to a five-year certification cycle. This is based on the year a physician's certification expires, whether by ABEM or another medical board. Certain certification activities are equivalent to completing one MyEMSCert module (e.g., two EMS LLSA tests are equivalent to one MyEMSCert module).

## **APPEALS**

ABEM maintains an appeal process for ABEM-certified physicians and formerly certified physicians who do not fulfill the requirements described in this policy.

## **EXCEPTION**

None