President's Message
Robert T. Brodell, MD, President

As a solo private practitioner for 25 years, I am exquisitely sensitive to the complex regulatory environment that impacts the practice of dermatology. I sometimes wonder if the benefits of regulation are worth the cost considering the limited resources of a private practice including physician time and money. These regulations include the Clinical Laboratory Improvement Act (CLIA); the Occupational Safety and Health Administration (OSHA); the Medical Privacy Act (1992); Medical Practice Regulation (1998); and Privacy Amendment: Private Sector Act (2000); The Americans with Disabilities Act of 1990; Local Hospital Regulations; Electronic Medical Record regulations and meaningful use criteria; Emergency Medical Treatment and Active Labor Act (EMTALA); malpractice insurance regulations; and the complexities of retirement and estate planning. Of course, Maintenance of Certification-Dermatology (MOC-D) has another set of requirements that must be met by dermatologists with time-limited certification. Recognizing the American Board of Dermatology's responsibility to enhance the provision of dermatology to the public, the Board has consistently made decisions that maximize the benefits of MOC-D to dermatologists while minimizing any unintended, negative consequences on dermatology practice.

Maintenance of certification is now an accepted part of the certification process with a decade of experience by all 24 member boards of the American Board of Medical Specialties. One third of all certified dermatologists are now enrolled in MOC-D. The positive impact of MOC-D is real. I have been approached by dozens of dermatologists who believe that analyzing the exposed questions have been approached by dozens of dermatologists who believe that analyzing the exposed questions. I am exquisitely sensitive to the complex regulatory environment that impacts the practice of dermatology. In some cases it is possible to “double-dip” and receive self-assessment credit for exercises that also provide CME credits. A password-protected, personalized digitized table (at www.abderm.org) is provided for each participant so that annual requirements are clearly delineated and attestation of completion can be efficiently performed. The Board has accepted the AAD survey tool for peer and patient assessments which is simple to use and provides information only to the dermatologist. The proposed regulations by the Centers for Medicare and Medicaid Services (CMS) based on provisions of the Affordable Care Act (ACA) allow dermatologists to receive bonus payments of 1.5% through MOC-D participation (see next column). With state medical boards committed to moving toward “Maintenance of Licensure” regulations over the next decade, it appears that MOC-D will provide a method that permits all dermatologists to demonstrate they are maintaining a level of competence to meet foreseeable relicensure requirements. Finally, Blue Cross Blue Shield is moving toward accepting MOC as a primary quality measure for their organization.

Of course, there are costs associated with the MOC-D program. A determined, organized effort is required to maintain certification. Time invested to selflessly benefit future patients is certainly a hallmark of professionalism. In addition, a fee of $150 per year is required for the Board to maintain the staff and programming required of this complex enterprise. This annual fee includes the cost of the examination at the end of the ten-year cycle for which there is no additional charge.

Dermatologists are among the best and brightest of all physicians based on medical school grades, recommendations, and USMLE board scores. MOC-D is an effort to insure that ALL dermatologists make investments in learning that allow them to perform at a high level throughout their careers. The Board would like to hear from diplomates who may have suggestions that maximize the value of MOC-D while minimizing costs and any possible unintended consequences. (abderm@hfhs.org).

ABD APPLICATION SUBMITTED TO CMS FOR PQRS LINKED TO MOC-D

The American Board of Dermatology has informed CMS (Centers for Medicare and Medicaid Services) that it wishes to offer its diplomates the opportunity for PQRS (Physician Quality Reporting System) bonus based on participation in Maintenance of Certification and registration in a national database. If approved, diplomates participating in the program may apply for PQRS bonus in 2011.

Diplomates participating in MOC will be able to voluntarily complete requirements for PQRS through the ABD. Notification of voluntary participation will be facilitated through the individual diplomate’s personal profile on the ABD website. Requirements are as follows:

1. Evidence of participation in MOC activities “more frequently” than required. The ABD application to CMS defines “more frequently” as follows:
   a. At least 10 additional CME hours per year above the required 25 hours.
   b. Attestation by the diplomate that he/she plans to take the MOC examination before the 10 year cycle limitation.

2. Completion of a patient experience survey (such as that offered by the AAD or the ABMS CAHPS survey).

3. Participation in an approved registry for one year (such as the CPAT, Clinical Performance Assessment Tools, in melanoma offered by the AAD)

Participation will earn diplomates a total 1.5% bonus from Medicare in 2011.

Some of these details may change with time.

There are currently 3,723 diplomates enrolled in MOC-D.

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The American Board of Medical Specialties (ABMS) launches a new public website, diplomate certification status prominent.
ABD Welcomes Public Member Consultant

At the December 2010 Interim Meeting, the Board of Directors voted to approve the addition of a public member consultant, following the lead of the ABMS (American Board of Medical Specialties) and other member boards (American Board of Ophthalmology, American Board of Orthopedic Surgery, American Board of Pediatrics, American Board of Plastic Surgery) who have public members. The public member consultant shall be a distinguished non-physician knowledgeable in health-related issues who will offer the public’s perspective on issues facing the Board. The public member consultant will attend official meetings of the ABD and vote on issues coming before the Board of Directors.

The ABD is pleased to introduce Susan G. Herrington, CAE, CMP, as its first public member consultant. Ms. Herrington is the national Vice President for Strategic Governance and Corporate Affairs for the national headquarters of the American Cancer Society, the largest voluntary health organization in the world. She is the senior most leader responsible for the governance operations of the national home office and the American Cancer Society, Cancer Action Network. Her duties include strategic agenda development, management of board development, orientation, new board member recruitment, and nominating processes as well as day to day management of the operations supporting the strategic governance.

Visit the ABD Booth(#3716) at the AAD Annual Meeting in New Orleans, February 5-7, 2011, to learn more about Maintenance of Certification.

VISIT THE ABD BOOTH(#3716) AT THE AAD ANNUAL MEETING IN NEW ORLEANS, FEBRUARY 5-7, 2011, to learn more about Maintenance of Certification.

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Beginning in 2011, the MOC/Recertification examination will be administered at a Pearson VUE testing center near you.

### 2010 Examination Pass Rates
#### 2010 ABP EXAMINATIONS

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<th>Certification</th>
<th># Candidates</th>
<th>Pass Rate</th>
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<tr>
<td>Certifying</td>
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<tr>
<td>Recertification</td>
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<td></td>
<td>82 (Aug. exam)</td>
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<tr>
<td>Dermatopathology</td>
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<td>Pediatric Derm</td>
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### 2011 Examination Dates
#### 2011 ABP EXAMINATIONS

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