Standards and Guidelines for Program Sponsorship

Updated
December 2017
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COMMENTS
We welcome comments from our users by email at the address shown below.

REVISION HISTORY
November 2017
December 2016
May 2016
July 2014
April 2014
March 2014
December 2013

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PORTFOLIO PROGRAM SCHEDULE 2017
1/1 New Year’s Day
1/16 Martin Luther King Day
5/29 Memorial Day
7/4 Independence Day
9/4 Labor Day
11/23 and 11/24 Thanksgiving Holiday
12/24 and 12/25 Christmas Holiday
12/30 New Year’s Holiday

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Section 1. Overview

The ABMS Multi-Specialty Portfolio Program™ (Portfolio Program) works with all types of health care organizations to recognize the work that physicians are already doing to improve patient care in their practices. Physician participation in initiatives approved by the Portfolio Program can earn them Improvement in Medical Practice (Part IV) credit from their ABMS Member Board for the American Board of Medical Specialties Program for Maintenance of Certification (ABMS MOC®).

Relevant Activities, Unified Process

Through the Portfolio Program, organizations that develop and oversee the execution of quality/performance improvement (QI/PI) initiatives involving physicians across multiple specialties have a unified process to working with the ABMS Member Boards and helping their physicians earn program credit. Activities in priority QI/PI areas such as communication, efficiency, patient safety, and transition of care, can be submitted directly to the Portfolio Program for consideration. The Portfolio Program will review the activities according to the standards and guidelines outlined in this document and related to the MOC requirements of the ABMS Member Boards. Once approved, the initiatives become part of a portfolio of activities offered through the organization (Program Sponsor).

Physician Participation that Counts for ABMS MOC Part IV

Physicians participating in an approved QI/PI activity through a Program Sponsor can have their completed efforts recognized to meet the Part IV MOC requirements of their Member Board. Physician participants are responsible for enrolling in their boards’ MOC program, including payment of any MOC fees. To meet Portfolio Program participation requirements, physicians are expected to:

- Verify and attest that they have participated throughout the entire specified QI/PI activity;
- Meet with others involved in the improvement activity;
- Review personal performance data;
- Help develop and/or implement changes to the activity; and
- Personally reflect on the impact of the activity on their practice or organizational role.

Start Dates and Deadlines for 2018

<table>
<thead>
<tr>
<th>Report</th>
<th>Start date</th>
<th>End date</th>
</tr>
</thead>
<tbody>
<tr>
<td>New QI activity</td>
<td>January 8, 2018</td>
<td>November 9, 2018</td>
</tr>
<tr>
<td>Physician completions</td>
<td>January 8, 2018</td>
<td>December 7, 2018</td>
</tr>
</tbody>
</table>
Section 2. Applying for Sponsorship

The application materials mentioned in this section are accessible through the Portfolio Program MOCAM. Organizations interested in becoming a Program Sponsor must register with MOCAM. It is the primary means for exchanging information with the Portfolio Program.

A. Organizational Readiness Checklist

To determine participation eligibility in the Portfolio Program, organizations must review and complete the Organizational Readiness Checklist. The Organizational Readiness Checklist helps organizations determine if they can meet the Standards and Guidelines for participation in the Portfolio Program outlined in Section 4 of this document. Organizations that cannot confidently answer “yes” to all of the items below are unlikely to be approved for participation.

1. My organization is committed to QI/PI at the senior level (CEO, senior management team, Board of Directors).
2. My organization has a senior leader for quality and safety.
3. My organization has demonstrated competence in sponsoring QI/PI initiatives that utilize rigorous quality improvement methodologies.
4. My organization will not use pharmaceutical or device manufacturer funding for the development of content of QI/PI initiatives eligible for Part IV MOC.
5. My organization is committed to supporting meaningful physician participation in strategically aligned QI/PI initiatives; including a willingness to commit necessary resources and consider MOC a requirement for medical staff privileges for eligible physicians.
6. My organization is willing to adjudicate any disputes relative to meaningful physician participation in a QI/PI activity eligible for Part IV MOC.
7. My organization provides QI/PI education and training to physicians.
8. My organization is willing to form an internal review committee (or adapt an existing committee) to approve QI/PI activities for Part IV MOC using the standards and guidelines of the Portfolio Program.
9. My organization is willing to share lessons learned and best practices in QI/PI and organizational support of quality improvement with other Portfolio Sponsors.
10. My organization is willing to submit ongoing physician completion data and periodic progress reports required as a participant in the Portfolio Program.
11. My organization will allocate personnel and resources to oversee, administer, and document meeting Portfolio Program Standards and Guidelines.

B. Application Process

Organizational Profile

The first step in the application process is completion of the Organizational Profile. The Organizational Profile captures information about the organization’s infrastructure and governance related to program sponsorship, as well as its plan to implement and monitor quality improvement initiatives and ensures meaningful physician participation. This includes how an adjudication process will be supported in the event there is a dispute between a physician requesting Part IV MOC credit and those monitoring physician participation for the completion of a QI/PI activity.

QI/PI Examples

Organizations also must submit three QI/PI activities that exemplify the planning, implementation, and monitoring process described in the Organizational Profile. These examples may cross specialties or be specialty-specific. They do not need to cover all participating ABMS Member Boards.
C. Reviewer Feedback and Comments

The evaluation of applications to the Portfolio Program follows a systematic process that is based on the Portfolio Program Standards and Guidelines.

Responses to the application questions are submitted through MOCAM. Supplemental materials may be included with the application to help illustrate a response, but not in lieu of a response.

All applications are reviewed by a multi-specialty committee (Program Reviewers). Program Reviewers may ask for more information, clarification, or general questions about either section of the application. The timeframe for review and approval is approximately eight weeks. Once a decision has been made regarding the approval status of an application, the submitter will be notified electronically via MOCAM. If the decision is an approval, a new Program Sponsor invoice will sent electronically through MOCAM. A Program Sponsor will not be able to submit QI/PI activities or physician completions until the new sponsor fee has been received.

Questions about the application review process can be directed to Ann Williamson, Associate Program Manager at: ann@mocportfolioprogram.org
### Section 3. ABMS Member Board Recognition for MOC Part IV

ABMS Member Boards participating in the Portfolio Program offer an established option for recognizing valid QI/PI activities which their board certified physicians are engaged in. The table below shows what each Member Board awards to a physician who completes an approved Portfolio Program activity for MOC Part IV.

#### Relationship of Portfolio Program Participation and Member Board Recognition for MOC Part IV Improvement in Medical Practice

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Award Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allergy and Immunology</td>
<td>I practice assessment module</td>
</tr>
<tr>
<td>Anesthesiology</td>
<td>Traditional MOCA: I Part IV Case Evaluation MOCA 2.0: Up to 20 Part IV Points for Participants MOCA 2.0: Up to 25 Part IV Points for Leaders</td>
</tr>
<tr>
<td>Dermatology</td>
<td>I Part IV practice assessment QI module</td>
</tr>
<tr>
<td>Emergency Medicine</td>
<td>I patient care practice improvement activity</td>
</tr>
<tr>
<td>Family Medicine</td>
<td>20 points</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>30 Practice Assessment points</td>
</tr>
<tr>
<td>Medical Genetics and Genomics</td>
<td>I clinical practice module</td>
</tr>
<tr>
<td>Obstetrics and Gynecology</td>
<td>I Part IV assignment (max allowed per calendar year)</td>
</tr>
<tr>
<td>Ophthalmology</td>
<td>I practice performance module</td>
</tr>
<tr>
<td>Orthopaedic Surgery</td>
<td>I Performance in Practice (PIP) Clinical Module (10 SAE credits). I PIP feedback module for QI activities involving a patient or peer survey (10 SAE credits)</td>
</tr>
<tr>
<td>Otolaryngology</td>
<td>I performance improvement module</td>
</tr>
<tr>
<td>Pathology</td>
<td>I Part IV activity</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>I Part IV activity or 25 points depending on certification year</td>
</tr>
<tr>
<td>Physical Medicine and Rehabilitation</td>
<td>I practice improvement project</td>
</tr>
<tr>
<td>Plastic Surgery</td>
<td>I Practice Assessment in Plastic Surgery (PA-PS) Tracer Procedure module</td>
</tr>
<tr>
<td>Preventive Medicine</td>
<td>I practice performance assessment</td>
</tr>
<tr>
<td>Psychiatry and Neurology</td>
<td>I Improvement in Medical Practice (PIP) Clinical Module</td>
</tr>
<tr>
<td>Radiology</td>
<td>I Practice Quality Improvement (PQI) project</td>
</tr>
<tr>
<td>Surgery</td>
<td>I quality assessment program or participation in a national, regional, or local outcomes database</td>
</tr>
<tr>
<td>Thoracic Surgery</td>
<td>I activity or quality assessment program</td>
</tr>
<tr>
<td>Urology</td>
<td>I MOC-PS activity</td>
</tr>
</tbody>
</table>
Section 4. Portfolio Program Standards and Guidelines

The Portfolio Program Standards and Guidelines help organizations address a dynamic environment and workforce engagement in quality improvement utilizing ABMS MOC.

A. Standards and Guidelines for Organizational Sponsors

Organizations that have made a serious commitment to quality and patient safety, to the use of quality improvement science, and that support physician development are eligible to participate in the Portfolio Program. To be considered, organizations must:

A1. Have the infrastructure and capability to support physician involvement in ABMS MOC.
A3. Make training and educational opportunities on quality and/or performance improvement available.
A4. Have the infrastructure to meet the standards, guidelines and processes of the Portfolio Program.
A5. Comply with all Federal, state, and local laws, rules and regulations, including without limitation, the Health Insurance Portability and Accountability Act of 1996, as amended (HIPPA), but only to the extent such laws, rules and regulations are applicable.

B. Standards and Guidelines for MOC Qualifying QI Initiatives

Competency in QI/PI methods and the ability to measure and improve care is required of each ABMS Member Board certified physician participating in ABMS MOC. Qualifying initiatives are those which:

B1. Have leadership and management at the initiative level that will ensure adherence to the participation criteria.
B2. 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) and one or more of the ACGME/ABMS competencies (Practice-based Learning and Improvement; Patient Care and Procedural Skills; Systems-based Practice; Medical Knowledge; Interpersonal and Communication Skills; Professionalism).
B3. Have specific, measurable, relevant, and time-appropriate aims for improvement.
B4. Use appropriate, relevant, and evidence-based (when available) performance measures that include measurement at the appropriate unit of analysis (physician, clinic, care team, etc.) Use national measures when available.
B5. Use a recognized, valid, established quality or performance improvement methodology.
B6. Include appropriate prospective and repetitive data collection and reporting of performance data so that diplomates access, reflect on, and act upon the data at least three times (including at baseline and at the conclusion of the activity) during the course of their meaningful participation in a quality initiative designated for MOC Part IV.
B7. Attempt or plan to translate or implement an improvement into routine care, or disseminate or spread and sustain an existing improvement into practice.
B8. Possess sufficient and appropriate resources to develop, support and conclude the activity without real or perceived conflict of interest.

a) Industry funding, as defined by the Accreditation Council for Continuing Medical Education, support, or input cannot be used to suggest, determine or support content or content development.
   i. Industry funding or support may not be used for portfolio initiatives designed to increase the use of a single product produced by that industry entity.

b) Activities may not be advertised, disseminated on, or linked to industry websites or other industry promotional materials.

c) Portfolio QI initiative data (aggregate, de-identified, or diplomate level) must remain with the organizational portfolio sponsor. Diplomate level data, even if de-identified) may not be shared with an industry entity.

d) If all the conditions in items a-c are met, funding from industry may be used to support the development, deployment and maintenance of registries used in Portfolio Program improvement activities.
   i. The organization must provide a statement on any materials that are used in association with or to promote the activity that clearly delineates industry support of the registry, clearly states that no support has been provided for the development of content, and clearly states that industry does not have access to registry data.
   ii. Additionally, the name and logo of the company that has supported the activity may not be used on the registry or on any materials related to the activity.

e) If all the conditions in items a-c (and d, as appropriate) are met, funding from industry may be used to support implementation of a portfolio QI activity that has been developed by the organizational sponsor independent of industry input. In instances where industry support (e.g., marketing, publicity, IT support, etc.) has been used by a sponsoring organization to support the delivery of a project:
   i. The organization must provide a statement on any materials that are used in association with or to promote the activity that clearly delineates what specifically has been supported and clearly states that no support has been provided for the development of content. (Suggested statement: "[Name of Company] has provided support for the [the specific activity supported {e.g., marketing, publicity, IT support, etc.}] of this program. No support has been received for the development of the content.")
   ii. Additionally, the name and logo of the company that has sponsored the delivery of the activity may not be used on any materials related to the activity.
   iii. Portfolio QI initiatives receiving industry support in accordance with the above must adhere to the ACCME Standards for Commercial Support ™.

C. Standards and Guidelines for Meaningful Participation in Qualifying QI/PI Initiatives

Physician participation in an approved QI/PI initiative is considered meaningful when:

C1. The activities within initiatives are directly related to the physician’s clinical practice or organizational/leadership role in improving care.

C2. The physician is actively involved throughout the entire specified activity (as noted in Portfolio Program Standards and Guidelines in Section 4 of this document) in order to understand and experience basic QI/PI principles. Involvement MAY include at least one of the following:

   a. Provision of direct patient care as an individual or a member of the care delivery team.
b. Being involved from the conceptualization, design, oversight of implementation, overall assessment/evaluation and evolution of the QI/PI initiative.

c. Supervised residents or fellows throughout the entire initiative as noted in the Standards and Guidelines for MOC Qualifying Initiatives.

C3. The physician is able to verify and will attest that they have participated throughout the entire specified QI/PI initiative, met with others involved in the improvement activities, reviewed their performance data, helped develop and/or implement changes to the activities, and personally reflected on the impact of the initiative on their practice or organizational role. Reflection on further improvements, barriers to improvement, and sustaining achieved improvement is strongly encouraged.
Section 5. Portfolio Program Information Exchange

A group of forms, available through MOCAM, help the Program Sponsor and Portfolio Program staff with periodic exchanges of information related to new activities, program progress, and physician completion of an activity. Portfolio Program staff review the completed forms for accuracy, alignment with standards, and completeness. The forms are then sent to the appropriate ABMS Member Board(s) for review. Program Sponsors will be contacted to rectify or clarify any identified discrepancies.

Additionally, Program Sponsors are required to notify the Portfolio Program if there are:
- substantial changes in organizational structure or governance;
- changes that affect the ability to continue to meet the Portfolio Program requirements;
- changes in the Program Sponsors’ main contact; or
- changes to individual QI/PI activities already submitted.

The available forms include:

1. New QI Effort Notification is used to describe new QI/PI activities that a Program Sponsor has approved for MOC Part IV.

2. Physician Completion Notification captures basic physician and demographic information related to a particular initiative once it is completed.

4. Sponsor Renewals
   The Sponsor Renewal form is completed at the end of the Program Sponsor approval. This document helps assess if the initiative has changed over the approval period and if so, how it has maintained alignment with the Portfolio Program Standards and Guidelines.
Section 6. Policies for Participation

The following guidelines help the Portfolio Program direct its activities toward the achievement of its operating goals.

A. Affiliate Organization and Physician Policy – Implemented Draft Policy (January 2016)

This policy offers guidelines for Program Sponsors in their decision to formally recognize an organization or physician for participation in and completion of an improvement initiative designed to meet the MOC Part IV requirements of a particular ABMS Member Board(s).

Affiliate Organizations

1. A formal agreement must exist between the Program Sponsor and the additional organization(s).
2. The organizations must share a commitment to QI/PI and support of MOC.
3. An identified person or team from the approved Program Sponsor must be responsible for overseeing the approved initiative(s) and the attestation process.
4. A process must be agreed upon for identification and prioritization of organizational quality improvement activities across the affiliated entities that would qualify for MOC credit.
5. The requirements for meaningful participation in an approved initiative must be the same across the involved organizations.
6. The affiliate organization must agree that final adjudication of disputes rests with the sponsor organization.

Affiliate Physicians

1. A documented relationship must exist between the physician and the Program Sponsor.
2. Participation is only valid in an initiative that is under the supervision of an approved Program Sponsor.
3. The physician must grant the Program Sponsor the authority to resolve disputes regarding meaningful participation.
4. A physician in an affiliated organization can participate in an initiative led by someone within the Program Sponsor organization or co-lead an activity with someone within the Program Sponsor organization.

B. Privacy Policy

The purpose of this Multi-Specialty Portfolio Program (the “Portfolio Program”) Privacy Policy is to be transparent with the various stakeholders about the information that the Portfolio Program collects and the manner in which the information is used. It also is recognized and understood that this Privacy Policy may be revised or amended by the Portfolio Program at any time and that any such revisions or amendments may be made without advanced written notice to any stakeholders. The Portfolio Program has created and implemented this policy which governs the collection, use, and disclosure of certain information provided to the Portfolio Program and also explains the Portfolio Programs’ policies and practices regarding the Portfolio Program’s recognition of the sensitivity surrounding that information.

In the course of working with Program Sponsor organizations in the Portfolio Program, the participating ABMS Member Boards (the “Member Boards”) collect, utilize, and in some cases share with third parties, various forms of information. This includes information from and regarding participating diplomates and the quality/performance improvement (QI/PI) initiatives submitted by Program Sponsors to the Portfolio Program. This Privacy Policy governs only the data and information not currently in the public domain collected by the Member Boards through the Portfolio Program and does not govern the individual privacy policies of each of the individual Member Boards. The Portfolio Program’s goal in establishing this Privacy Policy is to assure each person and Program Sponsor organization that discloses information to the Portfolio Program and the Member Boards that we understand the sensitivity of the information and the care that needs to be utilized.
by the Portfolio Program and the Member Boards in protecting the confidential nature of the information and material.

**Information Collected**

In order to identify diplomates and assign correct completion information, the participating Member Boards require that Program Sponsor organizations provide personal and identifying information about diplomates participating in their QI/PI initiatives who wish to receive MOC Part IV recognition for their participation. Diplomate data is governed by the privacy policies of the appropriate Member Board. Each Member Board has its own policies about the use of personal information and the diplomate can request a copy of the applicable Member Board’s privacy policy. Identifiable patient data shall not be provided to the Portfolio Program by any organization or diplomate.

**Disclosure of Information to Third Parties**

The Member Boards will not disclose any Program Sponsor organization’s specifically identifiable organizational structure, processes, documents, forms, financial information, or content that was provided in confidence as part of the Portfolio Program with any person or organization outside of the Member Boards unless previously approved by the Portfolio Sponsor organization or as required to operate the Portfolio Program.

The Portfolio Program will disclose a Program Sponsor organization’s participation in the Portfolio Program. Aggregate data, such as approval rates, may additionally be disclosed. Any research, if published, will be based on information and analyses of the Portfolio Program and will not contain specifically identifiable information from the Program Sponsor organization’s work in QI/PI.

The Portfolio Program will inform the Program Sponsor organization immediately upon learning of any disclosure of confidential information not in compliance with this Privacy Policy. Neither the Portfolio Program nor the Program Sponsor organization will directly or indirectly acquire any interest in or design, create, sell, or otherwise deal with, any item or product containing or based on confidential information from the other party, except as necessary to perform services for the other party.

**Confidentiality**

The Portfolio Program will not disclose confidential or sensitive Program Sponsor information or data without the written approval of the Program Sponsor organization. The Portfolio Program reserves the right to use de-identified aggregated data supplied by Program Sponsors for purposes of evaluating the effectiveness of the Portfolio Program and for research on the effectiveness of MOC Part IV in improving patient care.

The Portfolio Program will identify Program Sponsors by name on the Portfolio Program website and will provide a link to the Program Sponsors’ MOC program as well as a contact person unless the Program Sponsor requests not to be identified.

**Waiver of Privacy Policy**

There may be limited instances where a person or organization may desire to waive the application of the Privacy Policy. In order to do this, the organization must contact the Portfolio Program and provide written acknowledgement of its intent to waive the privacy policy. Any organization waiver of the privacy policy does not override the individual privacy policies governed by the participating Member Boards.