



June 5, 2014

Dear ACP members,

As you may be aware, numerous concerns and complaints about the Maintenance of Certification (MOC) requirements from the American Board of Internal Medicine (ABIM) have been expressed by the internal medicine community over a number of months. Although ACP is a totally separate organization from ABIM and has no jurisdiction over the MOC program, the concerns have often been conveyed to ACP with a request that ACP advocate strongly for significant reform in the MOC program - and even potentially for ACP to develop a parallel pathway to MOC. I want to assure all our members that ACP has not only heard the concerns of our members, but is actively working to address these concerns and is exploring many options. In fact, this is currently ACP's #1 priority. I encourage you to read the editorial in *Annals of Internal Medicine* that was recently released as an early online publication (see <http://annals.org/article.aspx?articleid=1871129&resultClick=3>), co-authored by ACP's current Chair of the Board of Regents, the President, and the Chair of the Board of Governors. This editorial notes many of the issues that we have heard from members.

Our approach to date has been to work aggressively to achieve reform in the MOC program through active discussions with ABIM at many levels. We don't think MOC is going to disappear, and if we are going to be successful in effecting change in the program and the requirements, we believe it is critical for ACP to maintain a positive working relationship with ABIM. A collaborative rather than an adversarial relationship is much more likely to result in the changes and the outcome that our members would like to see.

Here are some details of ACP's current actions:

- 1) We assembled leadership from the internal medicine subspecialty societies in March so that we could gather important input from those societies and present a unified voice to ABIM.
- 2) In mid-May we convened a meeting of the elected leaders and the CEOs of both organizations to convey to ABIM the issues and stress how critical it is for the concerns to be rapidly addressed.
- 3) As a result of the meeting in mid-May, we are urgently working with ABIM to develop a process to tackle the issues effectively and as quickly as possible.
- 4) Besides frequent regular communication between the elected leadership of ABIM and ACP, between the CEOs of both organizations, and between educational staff from both organizations, the frequency of serious communication among ACP leaders and between ABIM and ACP has escalated now to be taking place on virtually a daily basis.

At the same time that ACP supports the concept of lifelong learning and the value of being certified, we want to be clear - in no uncertain terms - that we have heard your concerns. We will continue to work actively and aggressively to achieve the best outcome for our members and their patients that will be true to our stated mission: *To enhance the quality and effectiveness of health care by fostering excellence and professionalism in the practice of medicine.*

We will keep you informed about our progress.

Steven Weinberger, MD, FACP, Executive Vice President and CEO

Robert Centor, MD, FACP, Chair, Board of Regents

David Fleming, MD, FACP, President