



## **ACMT Position Statement on Maintenance of Certification During the Coronavirus Pandemic**

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### **Disclaimer**

While individual practitioners may differ, these are the positions of the American College of Medical Toxicology (ACMT) at the time written, after a review of the issue and pertinent literature.

The coronavirus disease 2019 (COVID-19) pandemic has required physicians to work more clinical time to manage the surge in critically ill patients. At the same time, physicians must continue to fulfill requirements for maintenance of licensure and medical staff privileges. Completion of these requirements, which can only be performed outside of clinical time, may not be feasible under the current situation. ACMT calls upon stakeholders to implement measures to ensure physicians are able to balance these requirements with their clinical and non-clinical obligations during the ongoing pandemic.

### **Background**

In order to practice medicine, physicians must maintain both medical licensure, which is administered by the state medical boards, and, when mandated by their practice site, medical staff privileges. Licensure renewal requirements vary by state, but typically require payment of a fee, documentation of 20 or more hours of continuing medical education (CME) annually, and in many instances, completion of additional state-specific courses [1]. Renewal of hospital privileges varies by institution, but may require documentation of state licensure, Drug Enforcement Agency registration, completion of courses such as Advanced Cardiac Life Support (ACLS) or Advanced Traumatic Life Support (ATLS), and documentation of CME. Many institutions encourage or require board certification, a certification from an accredited group of peers that the physician has met a set of standards and competencies unique to a

specific medical specialty. Maintaining board certification varies by specialty, but usually requires documentation of practice, completion of specified CME, and periodically taking a knowledge assessment. Eligibility for medical toxicology board certification requires initial board certification in another primary specialty, such as emergency medicine or pediatrics, so medical toxicologists typically maintain multiple board certifications. Physicians are expected to fulfill most of the above requirements outside of time when they are performing clinical duties or other professional responsibilities.

The COVID-19 pandemic has impacted nearly every physician, including medical toxicologists. Many clinicians have been asked to increase their clinical time in order to manage the surge in critically ill patients as well as cover for sick and quarantined colleagues. Financial pressures on medical systems from cancellation of lucrative procedures and outpatient visits have resulted in cuts in physicians compensation. Medical toxicologists who care for patients are at high risk for exposure and infection themselves. For physicians who are parents, the widespread closure of schools has increased child care demands during nonclinical time. Hospital employee travel restrictions along with questions about the safety of travel have limited the ability of physicians to attend remote exams or preparation courses. The net result of these changes is that physicians simultaneously have significantly increased clinical responsibilities, decreased financial resources, and decreased nonclinical time to complete CME and other activities.

Some entities have responded to these stressors by modifying or relaxing typical procedures. The United States Medical Licensing Examination is employing shorter examinations and regional testing centers to reach test takers [2]. The American College of Surgeons provided a 1-year grace period to providers whose Advanced Trauma Life Support certificate expires in 2020 [3]. The American Board of Emergency Medicine (ABEM) is delivering its emergency medicine recertification exam in an open-book format and extending recertification requirements by 6-months for those whose certification expires in 2020 [4].

ACMT calls upon stakeholders to implement measures to ensure that physicians can maintain their licensure and medical staff privileges in the setting of this unprecedented pandemic.

## **Methodology**

This document was reviewed and approved by the ACMT Position Statement and Guidelines Committee, was sent to the ACMT Board of Directors for final approval. [MA1]

## **Recommendations**

### *Government/Licensure Boards*[MA2]

- Allow physicians to complete renewal applications completely online.
- Postpone requirements for in-person fingerprinting.
- Waive in-person CME requirements, allowing all CME to be completed virtually.

- Extend deadlines for CME activities.
- Allow physicians with extenuating circumstances, such as severe, prolonged illness, to apply for license extensions on a case-by-case basis.

### *Specialty Certification Boards*

- Extend deadlines for board certification examinations.
- Extend deadlines for other MOC criteria such as CME and quality improvement projects.
- Allow for virtual exams when this can be done feasibly.
- Allow physicians with extenuating circumstances, such as severe, prolonged illness, to apply for additional extensions on a case-by-case basis.

### *Hospitals and Healthcare Systems*

- Extend the timeline required to pass board certification exams as a condition for employment.
- Allow additional time for CME requirements as well as other credentials, such as ACLS and institutional educational modules.

### *Professional Organizations*

- Allow for extension of expiration dates of credentials, such as ACLS.
- Provide remote options for board certification review courses and CME conferences.

## **References**

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2. Federation of State Medical Boards and National Board of Medical Examiners. Phased approach to expand USMLE testing: Event-based testing update. App<https://covid.usmle.org/announcements/phased-approach-to-expand-usmle-testing/>
3. American College of Surgeons. ACS Committee on Trauma guidance for ATLS course directors and participants. <https://www.facs.org/quality-programs/trauma/atls/guidance>
4. American Board of Emergency Medicine. ABEM messages regarding COVID-19 monitoring April 21, 2020. <https://www.abem.org/public/news-events/news/2020/04/21/abem-message-regarding-covid-19-monitoring>

