The Latest on PA Certification

About NCCPA

- Independent, not-for-profit organization
- Mission: To serve the public through exemplary programs that evaluate critical PA competencies and require the pursuit of life-long learning and improvement
- Committed to excellence in all we do
  - Received Georgia Oglethorpe Award in 2007
  - Accredited by the National Commission for Certifying Agencies
- Over 100,000 PAs have been certified since NCCPA was established in 1975

Our Board of Directors

2 public representatives, 4 PA directors-at-large and nominees from...

- American Hospital Association
- American Medical Association
- American Osteopathic Association
- Assoc of Amer Medical Colleges
- Federation of State Medical Boards
- PA Education Association
- US Department of Veterans Affairs
- American Academies of:
  - Family Physicians
  - Pediatrics
  - Physician Assistants
  - American Colleges of:
    - Emergency Physicians
    - Physicians
    - Surgeons

The Board currently includes 11 PAs, 8 physicians and 4 non-clinicians.

Presentation Outline

Topics to be Discussed

- About NCCPA
- Certification Maintenance Today
- Changes to the Certification Maintenance Process
- Specialty Certificate of Added Qualifications (CAQ) Program
- Call for Preceptors for PA students

Current Certification Maintenance

1. Continuing Medical Education (CME)
   - 100 credits every 2 years
     (at least 50 of which must be Category I)
   - Certification maintenance fee
     - Due December 31 = $130

2. Passage of the Physician Assistant National Recertifying Examination (PANRE)
   - Every 6 years
   - Fee = $350

Certification Maintenance Today
Recertification Decisions

1. Year 5 or year 6?
   - 2 opportunities in both 5th and 6th years to pass the PANRE
   - Taking the exam in year 5 gives you more opportunities to pass and doesn’t change your 6-year cycle.

2. Which version of PANRE to take?

Practice-Focused PANRE

- 60% of the exam is general medical knowledge
- Then choose a concentration of questions in one of three areas:
  - Adult Medicine
  - Surgery
  - Primary Care
- Content blueprint is the same regardless of the area chosen
- Available nearly year-round

Practice Exams

Available online for both PANCE and PANRE

- 3 exams available
- 120 questions taken from NCCPA test question bank
- Just $35!
- Great way to see how you should focus your preparation
- Get more details and register online at www.nccpa.net

Format of Practice Exam Feedback

Changes to the Certification Maintenance Process

Health Care Spending per Capita

Adjusted for Differences in Cost of Living
What is Performance Improvement (PI) CME?

- PI-CME is active learning and the application of learning to improve your practice.
- Three-step process:
  1. Compare some aspect of practice to national benchmarks, performance guidelines or other established evidence-based metric or standard.
  2. Based on the comparison, develop and implement a plan for improvement in that area.
  3. Evaluate the impact of the improvement effort by comparing the results of the original comparison with the new results or outcomes.

Why Self-Assessment (SA)?

- 2012 study concluded that more than 20% of core information guiding clinical practice is changed within one year based on new evidence or guidelines.
  
- Self-assessment makes CME more meaningful and practical to one's practice
- It requires active engagement in the learning process

Why Self-Assessment (SA)?

Self-assessment is the process of conducting a systematic review of one's own performance, knowledge base or skill set for the purpose of improving future performance, expanding knowledge, or honing skills.

Things you know

Things you know you don’t know

Things you don’t know you don’t know

Directed CME Defined

100 Credit CME Requirement (every 2 years)

Category 1
(50 credits)

Category 1 or 2
(50 credits)

20 Category 1 CME credits directed towards self-assessment and/or performance improvement

New Process

- 100 CME credits
  - 50 Category 1 credits must now include 20 credits of directed CME
  - PANRE every 10 years

Deaths Due to Surgical or Medical Mishaps per 100,000 Population (2006)
No, really… What is PI-CME?

- Real-life example
  - Family physician completed the METRIC module on diabetes
  - Completed an online questionnaire about her practice
  - Selected and entered clinical data from 10-15 of her diabetic patients
  - Received a report comparing her patients’ results to national norms
  - And she discovered a change she needed to make in her practice! Why?

About the Program in Our Example

- METRIC is offered by the American Academy of Family Physicians
- Cost to non-members: $75
- Each module = 20 PI-CME credits
- Modules available in
  - Diabetes
  - Asthma
  - Hypertension
  - Geriatrics
  - Childhood immunization
  - Adolescent immunization
  - High-risk adult immunization

More on Performance Improvement (PI) CME

- Can be done in partnership with your supervising physician and others in practice
  - Board-certified physicians are doing this now, too
- This concept has evolved since NCCPA first announced it was being considered.
  - Asked for and listened to feedback
  - Identified ways to make this less burdensome without sacrificing its effectiveness
- Can take different forms
  - An established PI CME activity (like METRIC or EQIPP)
  - A quality improvement project that is developed individually by the PA or institution

Certification Maintenance Illustrated

1st CME Cycle
2nd CME Cycle
3rd CME Cycle
4th CME Cycle
5th CME Cycle

By the end of the 4th CME cycle, you must have 40 Category 1 CME credits through SA activities and 40 Category 1 CME credits through PI activities.

During each cycle, earn 100 CME credits including 50 Category 1 credits with 20 earned through self-assessment and/or PI-CME activities.

Earn 100 CME credits including 50 Category 1 and pass PANRE

Transition Timeline

- New PAs and those regaining certification after a lapse who become certified in 2014 will start the new 10-year cycle.
- Beginning in 2014, certified PAs will transition to the new 10-year cycle at the end of their current 6-year cycle.
- Sign in to your record at www.nccpa.net to find out when you transition.
- Here’s what that looks like...
Positive Implications for PAs

- Proactively addresses elevated expectations
  - FSMB has recommended that states implement a "maintenance of licensure" process for physicians that requires just this sort of activity
  - Follows ABMS MOC process for physicians
- Elevates the relevance of CME activities
- Focus more on performance as related to patient and community health
- PI-CME aligns with Pay for Reporting (P4R) and Pay for Performance (P4P)
- Fewer exams

Certification Maintenance Changes Survey Highlights

55% are either
- Very Concerned (20.8%) or
- Concerned (34.4%) that the new CM requirements will be difficult to complete

Next Steps for Certification Maintenance Changes

- Identification of multiple SA and PI options in many specialties
- Identification of SA and PI options for non-practicing PAs
  - Focus on public health
- Rolling implementation beginning in 2014

Certification Maintenance Changes Survey Highlights

The biggest perceived barrier is that the process will require more time (60%)

Key Principles of the Specialty CAQ Program

- NCCPA (and many stakeholders) agree that the PA-C must maintain its position as the primary credential for all PAs.
- NCCPA has remained committed to developing a voluntary specialty program.
  - A CAQ is not required to maintain NCCPA certification
- The program has been developed to be as inclusive as possible, recognizing the individual differences among and within specialties.

Specialty Certificate of Added Qualifications (CAQ) Program
What Specialties?

- Emergency Medicine
- Cardiovascular & Thoracic Surgery
- Orthopaedic Surgery
- Nephrology
- Psychiatry

**Coming in 2014:**
- Pediatrics
- Hospital Medicine

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**Specialty CAQ Process**

- **Prerequisite:**
  - License
  - PA-C

- **Experience**
- **Cases and/or Procedures**

- **5 years to finish**
- **After completing requirements above:**
  - Pass Specialty Exam

- **Maintenance Process (10-yr CAQ cycle):**
  - 125 credits specialty CME
  - Specialty exam

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**Basic Prerequisites:**
**Unrestricted License and PA-C Certification**

- Obviously why PA-C is important
- The case for licensure as requirement:
  - It addresses the area of professionalism
    (one of the six core competencies as defined in Competencies for the Physician Assistant Profession).
  - It helps to pre-empt state boards from requiring our CAQ for PA licensure.

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**Variations Among Specialties in the Areas of...**

- CME requirements
- Experience (ranges from 1 year to 2 years of full-time practice equivalence)
- Specific procedures/cases that PAs should have experience with or knowledge of

*Details by specialty available at www.nccpa.net/SpecialtyCAQs.aspx.*

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**CAQ Exams**

- Content blueprints developed using data from practice analysis
  - Identifies set of knowledge, skills and abilities used by PAs in the specialty
  - Available online for each specialty
- Test committees include PAs and MDs working in the specialty
- Other resources available online
  - Disease and disorder lists
  - Sample test items

*To view content blueprints, disease and disorder lists, and sample items, visit: www.nccpa.net/SpecialtyCAQs.aspx.*

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**CAQ Exams**

- 120 questions
  - Targeted to certified PAs working in the specialty
  - All questions available for scoring if they meet our performance standards
- 2-hour exam – no breaks
- Specialty exams are administered **once** a year at Pearson VUE testing centers.
- Fees: $100 administrative fee and $250 exam fee
CAQ Recipients

- 413 PAs have been awarded the CAQs
  - 256 in emergency medicine
  - 73 in psychiatry
  - 54 in orthopaedic surgery
  - 24 in CVTS
  - 8 in nephrology

- Total of 415 CAQs issued; two PAs earned CAQs in two specialties.

- Pass rates among the five specialties ranged from 80% to 97%.

Call for Preceptors: Collaboration with PAEA and AAPA

Information on Being a Preceptor

- PAEA Clinical Education Committee administered a preceptor survey to all clinically-practicing PAs in 2011
  - Top benefits include: giving back to the profession, teaching is rewarding, and keeping up to date
- Distribution of Preceptor Volunteers
  - Linking volunteers to programs within 60 mile radius
- Preceptor Handbook – available through PAEA; compilation of best practices; designed as a template to be individualized by programs

Benefits of Being a Preceptor

- AAPA PAragon Award for Preceptor of the Year
  - Public recognition to reinforce the importance of precepting to the profession
- Category 1 CME credit for precepting
  - Process being finalized, but plans to award up to 20 hours of category 1 CME per 2 year cycle
  - Anticipated launch mid 2013
- Preceptor Recognition
  - Self nominated process designed to reward clinical preceptors

How Do I Sign Up?

- Contact PAEA:
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Thank you!