**OKLAHOMA STATE MEDICAL ASSOCIATION HOUSE OF DELEGATES**

**Resolution 8: A-2023**

**Introduced by:** Tulsa County Medical Society

**Subject:** National Board of Physician and Surgeons as “Board Equivalent”

**WHEREAS,** the Oklahoma State Board of Medical Licensure and Supervision grants medical licenses to practice medicine in Oklahoma independent of a physician’s certification status;

**WHEREAS,** only physicians who have presented to the Oklahoma State Board of Medical Licensure and Supervision evidence of successful completion of all requirements for certification by a member Board of the organization of American Board of Medical Specialties (ABMS) or by any other organization whose program for the certification requested has been found by the Board to be equivalent thereto may lawfully claim to be “Board Certified”, “Certified by”, a “Diplomat” or “Fellow”;

**WHEREAS,** in 2018, the Oklahoma State Medical Association adopted Resolution 21 which recommended the following changes to the Oklahoma State Board of Medical Licensure and Supervision adopted the Board Certification Equivalency Criteria (Oklahoma Administrative Code 435:10-7-2, June 6, 2012) used to determine which boards are equivalent to a member Board of the organization of American Board of Medical Specialties (ABMS).

1. The recognizing agency of the board in question must be a legally recognized not-for-profit independent 501-c entity that certifies members as having advanced qualifications in a particular allopathic medical specialty ~~through peer reviewed demonstrations of competence in the specialty being considered~~.
2. The board in question must ~~provide~~ **require** evidence of **member physician** having **successfully completed a** post-graduate training residency or fellowship that is accredited by the American Council of Graduate Medical Education (ACGME) and must provide substantial and identifiable training in the scope of the specialty presented.
3. Pathways other than #~~1~~ **2** such as apprenticeships, non-recognized fellowships not supported by a core ACGME program or “experience” in the field shall not be considered as satisfying this requirement.
4. There must be a psychometrically validated **or learning** exam required by the board **during or after training for initial board certification**.
5. ~~There must be periodic re-certification.~~ **Initial board certification by ABMS, NBPAS, ABPS or equivalent boards are lifetime achievements and are not subject to re-certification.**

**WHEREAS,** the ABMS continues to transition diplomates from lifetime certification (“grandfathers”) to Maintenance of Certification (MOC) without evidence of correlation in quality of care;

**WHEREAS,** many ABMS member boards have discontinued requiring a “high stakes” examination in exchange for alternative activities to fulfill MOC;

**WHEREAS,** the National Board of Physicians and Surgeons (NBPAS) is a nationally recognized physician board providing a competitive alternative to ABMS for Allopathic and Osteopathic physicians to maintain their certifications;

**WHEREAS,** the NBPAS requires initial board certification by a board fulfilling all the requirements of the Oklahoma State Board of Medical Licensure and Supervision’s Board Certification Equivalency Criteria;

**WHEREAS,** the NBPAS is accepted as a Designated Equivalent Source Agency in The Joint Commission’s Glossary for Ambulatory Care, Behavioral Health and Human Services, Critical Access Hospital, Hospital, and Office-based Surgery Accreditation Manuals;

**WHEREAS,** the Designated Equivalent Source Agencies may be used to verify certain credentials in lieu of using the primary source;

**WHEREAS,** the Designated Equivalent Sources listed by The Joint Commission include, but are not necessarily limited to: The National Board of Physicians and Surgeons, The AMA Physician Masterfile, The American Board of Medical Specialties, The American Osteopathic Physician Database, The Federation of State Medical Boards, and The Educational Commission on Foreign Medical Graduates;

**WHEREAS,** in addition to The Joint Commission, NBPAS also meets national accreditation standards for hospitals and health plans including Det Norske Veritas (DNV), The National Committee on Quality Assurance (NCQA), and the Utilization Review Accreditation Commission (URAC);

**WHEREAS,** Oklahoma hospitals employ The Joint Commission, Det Norske Veritas (DNV), The National Committee on Quality Assurance (NCQA), and the Utilization Review Accreditation Commission (URAC) when pursuing accreditation; therefore be it

**RESOLVED,** the Oklahoma State Medical Association urges that the Oklahoma State Board of Medical Licensure and Supervision follow the Joint Commission and other nationally recognized accreditation organizations and adopt the NBPAS as equivalent to the ABMS; and be it further

**RESOLVED,** the OSMA President and Chief Executive Officer will request a meeting with the Chairperson of the Oklahoma State Board of Medical Licensure and Supervision and Executive Director to communicate the passing of this resolution and request a timeline for bringing the issue of NBPAS equivalency to the board for consideration; and be it further

**RESOLVED,** that if the Oklahoma State Board of Medical Licensure and Supervision does not enact changes as specified above, then the Oklahoma State Medical Association lobby team is directed to pursue legislation to enact those changes.