Update from NCCPA: Positive Changes to Certification Maintenance

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Faculty Disclosure

· Contractor with NCCPA
· No other financial relationships to disclose

Presentation Outline

· About NCCPA
· The Latest on PANRE
  · Transition to core medical knowledge
  · Piloting an alternative to PANRE
· The Certification Maintenance Process
· NCCPA and OTP
· Certificates of Added Qualifications (CAQ)
· NCCPA Celebrates the PA Profession
Brief Overview of NCCPA

It is critical to our mission to provide a certification/recertification program that is:
- Meaningful and relevant; and
- Provides assurance for patients, employers, state licensing boards, and others regarding PAs' knowledge and skills.

To do this, we must continuously monitor and evolve the certification process because things change:
- Advances in technology
- Rapid changes in medicine
- Changes in the PA profession

Our Underpinning Principles

1. The first concern must be to serve the public's interest as we work to determine how we most effectively can deliver a recertification exam process that supports delivery of high quality, affordable, accessible health care.
2. To support the flexibility PAs have to change specialties during their career span and to work in multiple specialties concurrently, it is important to maintain the generalist nature of the PA-C credential.
Our Mission is More than Creating Exams

NCCPA is committed to helping maximize the safe, productive, and competent practice of medicine by certified PAs

About NCCPA

- Only national certifying body for PAs
- Certifying PAs since 1975
- Passionate about PAs and the patients you serve
  - Rely on PA practice data to inform our certification programs
  - Publish statistical reports to inform employers, policy makers, the media, patients and others
  - Promote qualifications and roles of certified PAs to various audiences (physicians, employers, state medical boards, public, etc.)
  - Engage in significant communications/PR efforts on your behalf: www.PAsDoThat.net

Certified
#PAsDoThat!

Our Stakeholders

NCCPA, Students, PA Programs & Faculty, Third party payers, State licensing agencies, PA Practice Organizations, PA PA PA Students, Physicians, Employers, Public, etc.
**2018 Board of Directors Composition**

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<th>11 PAs, 5 physicians and 2 public members</th>
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<tr>
<td><strong>11 PA Members</strong></td>
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<td>- 7 PA Directors-at-Large</td>
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<td>- 1 nominee from AAPA</td>
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*But that’s only part of the story...*

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**In 2017...**

- 70 PA item writers serve on item writing committees, writing questions that appear on PANCE, PANRE and the CAQ exams.
- NCCPA hosted 12 PA team meetings to develop and validate exam questions, review exam forms, set passing standards, and explore advancements to the question generation process.
- 54 PAs met in groups to identify content that represents core medical knowledge.
- Over 20,000 PAs completed a profession-wide survey about what constitutes core-medical knowledge that is the basis for future assessments.

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**Additionally...**

- 82 PAs served on 2015 Practice Analysis workgroups, helping identify the knowledge, skills and abilities that were included on that survey.
- Approximately 26,000 PAs responded to the Practice Analysis survey.
- Over 100,000 PAs have completed the PA Professional Profile.
PA Involvement in Exam Development Process

Exam Development Cycle
- Item Development
- Exam Administration
- Exam Review
- Statistical Analysis
- Key Validation
- Form Review
- Form Development
- Scoring and Reporting
- Standard Setting
- PA Roles
- Exam Blueprint
- Practice Analysis

The Latest on PANRE

Data Supporting Periodic Assessment
- More than 20% of core information guiding clinical practice changes within one year
- Performance on assessments of medical knowledge declines over time
- Assessment provides an important mechanism for identifying the small number of health care providers who are unable to demonstrate an adequate level of medical knowledge for safe practice

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To make a well informed decision, NCCPA:

- Conducted research
- Held focus groups
- Elicited feedback from PAs and other key stakeholder groups
- Consulted with many physician certifying organizations and the American Board of Medical Specialties to tap into their similar lines of inquiry and research

What We've Heard

- PAs were very concerned about maintaining their ability to change specialties and did not want to see that threatened
- PAs were very concerned about the cost and time required to maintain certification (CME and exam requirements)
- If they must take an exam, PAs would prefer one that is more relevant to their practice than today’s PANRE
- Exams matter to the public, employers and to state medical boards
- Physician certifying boards are piloting alternative approaches to assessment (more later)

Decisions to Date -- #1

- Decided in 2016, PANRE content will shift from "General Knowledge" to "Core Knowledge," gradually but steadily over the next several years
Working Definition of Core Medical Knowledge

...the essential, foundational knowledge and cognitive skills required for PAs to provide safe and effective care for patients across the lifespan and across the spectrum of medicine, regardless of the specialty or area of practice.

The Process of Identifying “Core Medical Knowledge”

- June 2016:
  - Rank all of the diseases, disorders and medical conditions from the PANRE content blueprint from most core to least core
  - Draw the dividing line: which of these should be covered on PANRE?
- Series of subsequent meetings:
  - Looking only at those “above the line,” what aspects of each topic are “core medical knowledge”
- October 2017:
  - Profession wide survey to validate or further refine the work above -- > 20,000 responses
- December 2017:
  - Core Content Review meeting was conducted to review the survey results and make recommendations on the Blueprint for the Pilot & PANRE

Decision #2:
Pilot Alternative to PANRE Coming Sooner Than Expected

- Decided in May 2017, NCCPA will pilot alternatives to the high stakes recertification exam no later than 2020
- Announced October 2017, pilot will be available in 2019-2020
- All PAs due to take PANRE in 2018 or 2019 are eligible
- Current certification will be extended through the pilot for those PAs who participate
- Sign-up window is January 2018 through June 2018
Pilot Design

- Longitudinal assessment of core medical knowledge
- During each quarter, questions can be answered over time, from any device, anywhere

2019
Jan - Mar 15 questions
Apr - Jun 25 questions
Jul - Sep 25 questions
Oct - Dec 35 questions

2020
Jan - Mar 15 questions
Apr - Jun 25 questions
Jul - Sep 25 questions
Oct - Dec 35 questions

2 Years, 200 Questions

Also Facilitates Learning and Maintenance of Current Knowledge

- More frequent assessment = more effective process for gaining and maintaining knowledge
- Immediate feedback on whether the question was answered correctly
- Item critiques will explain why the correct answer was best and why the others were not
- List of references for those who want to learn more about the topic

More On the Pilot

- No travel to test center, no preparation, can be done on computer or mobile device
- Follows models being piloted by physician specialty boards
- Participants will be required to provide feedback throughout the process
- Same cost as PANRE ($350)
- All the details on NCCPA website: http://www.nccpa.net/alternative-to-panre
A Larger Movement

- A number of physician certification boards are piloting or introducing similar assessment programs
- Our discussions were informed by meetings with some of them:
  - American Board of Anesthesiologists
  - American Board of Pediatrics
  - American Board of Medical Specialties (umbrella organization)

PA-C Certification Maintenance Process

- 100 CME credits every two years
  - 50 Category 1 credits
  - Self-assessment CME and PI-CME are now optional
- PANRE every 10 years
NCCPA Heard You!

- NCCPA heard concerns from PAs about the burdens of the certification maintenance process.
- Conducted an in-depth review of existing SA/PI activities with particular emphasis on the gaps in availability of practice-relevant options for so many PAs.
  - Found inadequate coverage of self-assessment in 31 specialty areas and of PI-CME in 13 specialty areas.
  - That means we ran the risk of PAs pursuing CME activities with little or no relevance for them just to meet this NCCPA requirement – never what we intended.

The Specifics

- All approved self-assessment CME activities will be awarded 50% bonus credits by NCCPA.
- In each 2-year CME cycle, the first 20 PI-CME credits logged will be doubled.
- The weighting is applied by NCCPA.
- Weighting will apply to all PAs – whether on the 6-year cycle or the 10-year cycle.

Finding Self-Assessment and PI-CME

- Lists of approved self-assessment and PI-CME activities now available on our website.
  - Organized by specialty with details on the number of credits offered and cost.
- To access that list: http://www.nccpa.net/finding-sa-and-pi-cme
- Navigate there through the "Maintain Certification" link at the top of our home page.
NCCPA and Optimal Team Practice (OTP)

NCCPA's Position

- NCCPA supports the modernization of PA practice acts to allow PAs to practice to the full extent of their education and licensure.
- NCCPA supports the concept of team-based care inherent to the PA profession.
- NCCPA remains committed to certification maintenance and does not support the unlinking of current certification to license renewal in states that require it.
- NCCPA can provide credible and persuasive descriptive data about PAs by state that can be useful for advocacy efforts.
- NCCPA has committed to working with AAPA and state PA organizations to help meet the goals of OTP.

Certificates of Added Qualifications (CAQ)
**Key Principles of the CAQ Program**

- PA-C is the **primary credential for all PAs**, giving PAs the credibility and flexibility to change specialties.
- The CAQ program is **voluntary** and well suited for PAs committed to a particular specialty.
- The program has been developed to be **inclusive**, recognizing differences among and within specialties.
- The CAQ is an **added** credential that does not replace the PA-C, hence the name.

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**What Specialties?**

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

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**CAQ Process**

**New flexibility!**

- **Prerequisites:**
  - License
  - PA-C
- **Specialty-related CME**
- **Experience**
- **Pass Specialty Exam**
- **Physician Attestation re: Cases/Procedures**

6 years to complete if needed
CAQ Exams

- 120 questions targeted to certified PAs working in the specialty
- 2-hour exam
- Specialty exams are administered nationwide during 2 time windows at Pearson VUE testing centers.
  - 2018 opportunities: April 2-3 and September 10-15
- Cost $250 plus a $100 administrative fee paid when you start the CAQ process

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
- Test committees include PAs and physicians working in the specialty
- Other resources available online
  - Disease and disorder lists
  - Sample test items
  - Practice exam

To view the content blueprint, disease and disorder list, sample items and practice exam, visit www.nccpa.net

CAQ Recipients

1,236 CAQs have been awarded 2011 - 2017

- 685 in emergency medicine
- 211 in psychiatry
- 131 in orthopaedic surgery
- 92 in hospital medicine
- 48 in CVTS
- 47 in pediatrics
- 22 in nephrology
NCCPA Celebrates the PA Profession

Telling the World about Certified PAs

- Ongoing effort to publish articles and garner positive media attention for Certified PAs
- Online hub: www.PAsDoThat.net

• Ongoing effort to publish articles and garner positive media attention for Certified PAs
• Working to get the word out about PAs nationally and in individual states
• Looking for stories focusing on:
  - Compelling patient experiences
  - Patient outcomes
  - PAs in leadership positions
• If interested, contact Mary Rittle at maryr@nccpa.net
Help Spread the Word!

- Share articles on social media with #PAsDoThat
- Share and retweet ours and others' posts with #PAsDoThat
- Use tools available in the Resources section of the NCCPA website:
  - Presentations
  - Press releases
  - Videos
  - Articles

Connecting with Employers

- Search hundreds of jobs for Certified PAs
- Upload your résumé
- Set up alerts for new jobs

Click "Career Center" link at www.nccpa.net

PA-C Emeritus

- New recognition for PAs retiring from clinical practice
- Eligibility requirements:
  - At least 60 years old or unable to practice due to permanent disability
  - Retired from clinical practice
  - Have been NCCPA-certified at least 20 cumulative years during the PA career
  - No reportable actions in NCCPA disciplinary history
- Proceeds from the one-time $50 application fee will benefit the PA Foundation to expand the NCCPA Endowed Scholarship awarded to PA students
Mission: to advance the role of certified PAs in improving health.
Launched initiatives in health equity, oral health and mental health, including videos and educational tools.

Grants are available for PAs making a difference in their community.
22 grants issued last year.
For more information, visit www.nccpahealthfoundation.org

The PA History Society shares the history of the development of the PA profession and illustrates how PAs continue to make a difference in our society.
Visit: www.pahx.org
For more information, visit www.pahx.org

For More Information from NCCPA

- Read NCCPA News, our monthly e-newsletter
- Visit www.nccpa.net
- Follow us on social media

Thank you!

Contact: gregt@nccpa.net