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Continuing Board Certification: Vision for the Future Commission  
Co-Chairs Christopher Colenda, MD, MPH and William Scanlon, PhD  
Submitted Online

Dear Drs. Colenda and Scanlon:

On behalf of the American Academy of Sleep Medicine (AASM), I am submitting these comments in response to the draft report of the Continuing Board Certification: Vision for the Future Commission, which was launched by the American Board of Medical Specialties (ABMS).

The AASM firmly supports the importance of ongoing professional development for its members, with the overarching goal of providing the best possible sleep medicine care for all patients. We agree with the spirit of the recommendations made by the commission to create a more valuable, less burdensome, evidence-based, and meaningful way to support diplomates in their lifelong pursuit of continuing education and improvement.

We also support several aspects of the commission's recommendations. First, we applaud the commission for its clear statement that high-stakes examinations are neither the appropriate nor the optimal tool for ongoing assessment of diplomates. Such examinations increase administrative burden and stress, and they reduce a physician's time to spend with patients, all of which are major challenges facing physicians today. At the same time, these examinations fail to provide timely, meaningful feedback to allow targeted education.

Second, we appreciate the commission's emphasis on reducing the burden, of both time and money, of the certification process. The commission's repeated calls for member boards to find ways to use existing data sources from clinical practice to support certification will avoid duplication of effort, freeing up more time for physicians to spend in patient care. Third, we agree with the Commission that all continuing certification programs must be rigorously evaluated and researched, ensuring that they are meeting the stated goals of improving patient care and confirming that the value they provide to stakeholders is commensurate to their costs. We encourage the ABMS to work with member boards and all stakeholders to identify resources to meet this aim.

A question that is relevant to sleep medicine physicians is whether primary specialty certification need be maintained in order to maintain certification in a sub-specialty. Because of the multi-disciplinary nature of sleep medicine, different member boards have responded to this issue differently. For example, it is no longer necessary for American Board of Internal Medicine (ABIM)-certified sleep medicine physicians to maintain internal medicine certification, but it remains mandatory for American Board of Psychiatry and Neurology (ABPN) and American Board of Family Medicine (ABFM)-certified sleep medicine physicians to maintain specialty certification. We note that the commission has recommended that individual member boards be consistent on this issue. Our strong belief remains that, given the complexities of sleep medicine practice and the realities of our workforce, sleep medicine physicians should not be required to maintain underlying specialty certification in addition to sleep medicine sub-specialty certification. Furthermore, we extend this sentiment to other member board policies that affect sleep medicine physicians; specifically, the program for continuing education and improvement for sleep medicine physicians should be uniform regardless across the certifying boards.

The AASM does have concerns regarding two areas of the commission's recommendations. First, diplomates with lifelong certification should remain identified as certified. Second, while we agree with the spirit of supporting professionalism, this represents a broad set of competencies that is already a challenge to assess and report. Therefore, the AASM supports assessing the domain of professionalism only as it pertains to a diplomate's commitment to lifelong learning. The AASM is aligned with the ABMS in linking ongoing, meaningful professional development/lifelong learning to patient-related outcomes in sleep medicine.

The implementation of this ambitiously re-imagined certification program is likely to provide substantial challenges to be addressed. We look forward to our continued partnership with relevant ABMS member boards in support of our membership, as we work toward the shared goal of optimal patient care.

Sincerely,  
Douglas B. Kirsch, MD  
AASM President