American Board of Emergency Medicine

ABEM Improvement in Medical Practice
Frequently Asked Questions (FAQs)

1. **What is Improvement in Medical Practice (IMP)?** Improvement in Medical Practice (IMP) is a component of the ABEM continuing certification process. It is required for diplomates who are clinically active. IMP focuses on practice-based learning and improvement related to patient care.

2. **What are my IMP requirements?** The general requirements are that clinically active diplomates must complete and attest to a Patient Care Practice Improvement activity every five years as follows:
   - one Patient Care Practice Improvement (PI) activity in years one through five of certification for those with a ten-year certificate
   - one PI activity in years six through ten for those with a ten-year certificate
   - one PI activity in each certification cycle for those with a five-year certificate

   You should review your individual requirements and status in the ABEM secure portal. You will need your ABEM User ID and password to sign in.

3. **How do I complete a Patient Care Practice Improvement (PI) activity?**
   You may already be participating in measures and improvement efforts in your Emergency Department that meet ABEM requirements. See the list of acceptable PI activities. Activities that improve patient care and follow the four steps of improvement required by ABEM usually meet ABEM requirements. The four steps are:
   - measure
   - compare to standard
   - implement an improvement
   - re-measure

   The ABEM Practice Improvement Guide provides more detailed information.

4. **Must I use my own patients’ data?** Yes, data must be from your own patients. A group dataset that contains data from your patients is acceptable. You should have around ten patients in both your first and second measurement sample. Inclusion of fewer patients is acceptable for important clinical issues of lower prevalence and higher acuity. Performance feedback can be from pooled or aggregate data and does not have to be specific to your own patients.

5. **How do I know if my IMP activities will meet ABEM requirements?** If you have followed the four steps listed in FAQ 3, *How do I complete a Patient Care Practice Improvement (PI) activity?*, your IMP activity should meet ABEM requirements. A list of activities that can meet the PI requirement is available on the ABEM website.

6. **How do I attest to completion of IMP activities?** ABEM-certified physicians who have IMP requirements attest to completion of an IMP activity through the ABEM secure portal. When you sign into portal, click on the Improvement in Medical Practice link, which will take you to a grid that displays the Improvement in Medical Practice activities that you have completed so far and how many you need to complete for
certification Click the green Attest to Activity button and select the activity you completed from the drop-down menu. After clicking the appropriate “Attest” button on the next screen, you will be able to complete an online form describing the activity you completed, and then attest to completion of the activity according to ABEM requirements. Forms must contain all required information before they can be submitted as complete.

7. **The online IMP attestation form requests verifier information. How does verification work?** ABEM randomly selects five percent of attestations for independent verification. When you attest to completing an IMP activity online, you must provide the name of and contact information for an individual who can independently confirm that you performed the IMP activity according to ABEM requirements. This verifier must have oversight or knowledge of practice performance. This could be a Department Chair, the Chief of Staff, a Medical Director, or a practice administrator in a non-hospital setting.

8. **Am I required to submit my data to ABEM?** You should not submit any data to ABEM. The individual you select to verify your IMP activity may request to see your data to verify that the activity meets ABEM requirements. You may wish to clarify this with your verifier before you begin your IMP activity. See FAQ 7, How does verification work?, and FAQ 19 What happens if my verifier does not completely confirm my IMP activities?, for more information about verifiers.

9. **Is there a fee for participating in IMP?** There is no ABEM fee for IMP.

10. **I am already very busy. Will IMP add to my workload?** ABEM understands that Emergency Medicine is a demanding specialty. ABEM designed its IMP program to recognize and credit most quality improvement activities that you are already doing. ABEM thinks that there will be minimal workload increase for most diplomates already engaged in quality activities.

11. **Do I have to complete IMP activities to take MyEMCert modules?** No, you can take MyEMCert modules at any time. However, physicians who are clinically active must complete their IMP requirements to renew certification when their current certification expires. This means that your certification will expire if you do not meet your IMP requirements, even though you have taken the required number of MyEMCert modules prior to your certification expiration date. Also, if you have not already done so, you must pay the annual fee to be able to attest to IMP activities.

12. **What standards are available to me for data comparison?** Evidence-based guidelines are usually published in peer-reviewed journals. Other standards or measures are established by national quality organizations, major payors (e.g., core measures), and the Centers for Medicaid and Medicare Services (CMS), such as the Physician Quality Reporting System (PQRS) described in FAQ 13.

13. **I submit data to the national Physician Quality Reporting System (PQRS). May I use that data for my PI activity?** Possibly. PI activities must follow all four steps, only two of which are measurement steps. The other two steps involve comparing your PQRS performance to regional, state, or national performance benchmarks and implementing a plan to improve the performance.
14. **I submit data to CEDR (Clinical Emergency Data Registry). May I use that data for my PI activity?** Reviewing your own CEDR data could count as your first measurement. If you then implement an improvement and review the same CEDR measurement afterwards to see if you made improvement, the activity can count for ABEM IMP credit. To do so, follow these steps:
   - Sign in to the ACEP website and 'opt-in' to share your CEDR participation activity with ABEM (you do not need to be an ACEP member to participate in CEDR).
   - Allow six months to ensure any substantive changes in clinical practice have been accounted for in CEDR reporting and re-review your performance on the CEDR dashboard a second time to compare your performance.
   - ABEM will receive notification each time you review your data but will not have access to any performance data on any CEDR measure.

15. **Does each physician need to have a different PI project, or can we all do the same one?** Each physician does not need to have a different PI project. Group projects are encouraged. If you work on a group project that meets ABEM guidelines during a time when you have a current PI requirement, you will be able to count the project toward fulfillment of your requirement.

16. **May I do extra IMP activities now and report them later?** You will only receive credit for activities that occur during the five-year requirement time periods described in FAQ 2, *What are my IMP requirements?* You must attest to completion of an activity you begin in or after the first year of the requirement time period for that activity, because the IMP component emphasizes continuous improvement.

   *For example, if you have one PI requirement to complete before your current certificate expires in 2023, you know that you will have another PI requirement to meet during the first five years after you renew certification. If you complete two PI activities now, one of them can count toward your current requirement. The other PI you complete now cannot count toward your requirement that begins after you renew certification. You will need to start and complete a different PI during the first five years after you renew certification.*

17. **What if I work in three different EDs. Do I have to do this for each of them?** You do not have to complete separate IMP activities in each ED in which you work. You can focus all your IMP activities in one of the three EDs, you can complete distinct activities in different cycles in any of the three EDs, or you can pool data if necessary to acquire a sufficient number of patients. There must be an appropriate person to verify your IMP activity within each ED in which activity occurred. See FAQ 7, *How does verification work?*, for more information about verification.

18. **How will I know when I have met my IMP requirement?** When you click the submit button on an IMP attestation form online, the secure portal will show whether you have met a requirement. A requirement status of “met” means that you have met the requirement, either with no need for ABEM to independently verify your attestation, or your attestation was randomly selected for verification and has been verified successfully. If you see a status of “pending verification,” your attestation was randomly selected for verification and verification is still in progress.

19. **What happens if my verifier does not completely confirm my IMP activities?** If ABEM does not receive independent verification of your IMP activities, ABEM will work with you to find another verifier. If ABEM issues you a new certificate before your activity has been verified and verification is ultimately unsuccessful, your
certification will be rescinded. In that case, you may regain certification by making up the missed IMP requirement within five years.

20. **What if I don’t improve my performance?** As long as you follow the steps ABEM requires for performance improvement, you have met your ABEM IMP requirement.

21. **What happens if I fail to meet all IMP requirements on time?** If you miss an attestation deadline or an IMP attestation cannot be verified, you will be designated as “not participating in continuing certification” until you meet the requirement. If you fail to meet your IMP requirements by your certification expiration date, your certificate will expire and you will no longer be certified. In that case, you will have options for regaining certification.

22. **Who is considered to be clinically inactive?** ABEM-certified physicians who cannot participate in IMP because they do not see enough patients to complete the measurements required for an IMP activity should declare themselves to be clinically inactive. This means that you see fewer than 20 patients in a five-year span. Clinically inactive physicians do not have IMP requirements. If you see 20 patients or more over the five-year span, you cannot declare yourself to be clinically inactive. If you wish to declare yourself clinically inactive, please contact the ABEM office.

23. **Is a clinically inactive diplomate still certified?** Yes. Clinically inactive diplomates can maintain ABEM certification by meeting their requirements in the Professionalism and Professional Standing, Lifelong Learning and Self-Assessment, and Assessment of Knowledge, Skills, and Judgment components of ABEM continuing certification.

24. **What are the consequences of being designated “clinically inactive?”** ABEM will report the physician’s clinical activity status publicly.

25. **I am clinically inactive now, but if I start seeing patients again, how can I change my status to clinically active?** Contact the ABEM office to update your status, complete one required IMP activity, and attest to its completion. If you wish to declare yourself clinically inactive, please contact the ABEM office.

26. **I am clinically active, but not practicing Emergency Medicine. Am I required to participate in IMP?** If the work you do is included in the EM Model and if you see a sufficient number of patients to perform the measures ABEM requires, you may participate in IMP and maintain your clinically active status. If the work you do is not listed in the EM Model, or if you see too few patients to perform the measures required, you may change your status to clinically inactive and you will not have any IMP requirements. You should continue to participate in the other three components of ABEM continuing certification to maintain your certification.

27. **I am clinically active, but do not work in a hospital emergency department. How do I participate in IMP?** You may need to create and conduct your own IMP activities. The activity you select can be a simple one, provided you follow the steps ABEM requires.

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