Leveraging Electronic Health Records to Improve Care of Patients with CKD, Other Long-Term Conditions

By Tracy Hampton

While numerous research articles provide valuable insights on the potential of electronic health records (EHRs) to improve patient care, there continues to be a need to identify methods for more effectively designing and using EHRs, especially in the management of patients with chronic conditions. A new feature in the *Clinical Journal of the American Society of Nephrology (CJASN)* indicates that chronic kidney disease (CKD) may be an ideal model for identifying and evaluating such methods.

“CKD is common and its care is suboptimal, allowing significant room to show improvement as EHRs are optimized, and because CKD is defined by objective data, the disease is an ideal example of a condition that can be easily identified by information commonly found in EHRs,” said co-author Uptal Patel, MD, of the Duke University School of Medicine. “CKD care also requires collaboration between diverse professionals across numerous health care settings, which could be facilitated by EHRs. Furthermore, CKD often heralds increased risk for hospitalizations, cardiovascular events, and all-cause mortality, so EHR-based improvements in CKD management may in turn improve care for these related conditions.”

The potential of EHRs

Under the 2009 Health Information Technology for Economic and Clinical Health (HITECH) Act, the US Department of Health and Human Services is spending billions of dollars to promote and expand the adoption of health information technology, with specific incentives designed to accelerate the adoption of EHR systems among providers.

EHRs can help clinicians monitor and care for patients with chronic conditions, increase the continuity of services patients receive, facilitate collaboration among providers, and support patient self-management. EHRs can also provide data for observational studies, help identify potential patients for research, and provide detailed information to national surveillance systems.

Several years ago, the US Centers for Disease Control and Prevention (CDC)

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Board Games: NBPAS, ABIM, and Maintenance of Certification

By Kurtis Pivert

The American Board of Internal Medicine (ABIM) maintenance of certification (MOC) program has generated controversy since its introduction in 2014. Physicians have expressed frustration with a process many find burdensome, costly, and irrelevant to their everyday practice.

Disatisfaction with the new certification requirements led ABIM to suspend and revise parts of the initiative in February, but not before several leading physicians introduced an alternative to MOC. The National Board of Physicians and Surgeons (NBPAS) offers American Board of Medical Specialties (ABMS) board-certified physicians a choice for ongoing certification and lifelong learning. These developments have altered the landscape physicians must navigate to maintain their board certification and consequently their ability to practice.

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No MOC and NBAPS

Designed to improve upon continuing medical education (CME), MOC was adopted by ABMS and their member boards in 2000. The program focuses on six core competencies—medical knowledge, patient care, professionalism, interpersonal communication, and personal and system improvement. In addition to the 10-year recertification exam requirement, ABMS’s implementing board added patient survey and patient safety modules, and public reporting of physician participation in MOC activities.

“Many physicians are upset about the recent changes to the MOC process, which we believe are onerous, time consuming, and expensive,” NBPSA President Paul Teirstein, MD, told ASN Kidney News. “The main reason why doctors care about certification is because hospitals, and some payers, require it for them to practice.”

The road ahead

During the recent changes to the MOC process, nephrologists had only two choices for maintaining specialty certification. “We’re looking to organizations such as ASN to help propel the movement to take back some control over the onerous requirements physicians have had to comply with,” Teirstein said. ASN will host a Board Certification Forum special session on Friday, November 6, at 10:30 am PST at ASN Kidney Week 2015 in San Diego, CA. Teirstein will address the forum, which will be chaired by ASN leadership and give ASN members another opportunity to voice their concerns and opinions about the controversies in board certification and recertification.

Listen to the ASN Kidney News Pod- cast with Dr. Teirstein and ASN Executive Director Ted Black at https://www.asn-online.org/media/podcast.aspx. For more information, visit ASN’s comparison of certifying bodies (https://www.asn-online.org/education/moc/ certifying_Bodies.pdf), and visit the ASN (https://www.asn-online.org/education/moc/), NBPSA (https://nbpsa.org), and ABIM (http://www.abim.org/) websites.

References