

Study examines fees, finances of medical specialty boards

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Although many physicians have objected to high certification fees of the American Board of Medical Specialties member boards, which are nonprofit organizations and have a fiduciary responsibility to match revenue and expenditures, most of these boards had overall revenue that greatly exceeded expenditures in 2013, according to a study published by *JAMA*.

The process of board certification has a central role in the self-regulation of [physician](#) quality standards. However, many physicians have objected to programs by the American Board of Medical Specialties (ABMS), particularly maintenance of certification (MOC), citing a lack of clinical relevance and evidence to support efficacy as well as high fees to participants. Brian C. Drolet, M.D., of Vanderbilt University Medical Center, Nashville, and Vickram J. Tandon, M.D., of the University of Michigan, Ann Arbor, investigated fees charged to physicians for certification examinations and finances of the 24 ABMS member boards.

In 2017, the average fee for an initial written examination was \$1,846. In addition, 14 boards required an oral examination for initial certification at an average cost of \$1,694. Nineteen boards offered subspecialty verification (e.g., hand surgery within orthopedic or plastic surgery) with an average cost of \$2,060. Average fees for MOC were \$257 annually.

In FY 2013, member boards reported \$263 million in revenue and \$239 million in expenses; a difference of \$24 million in surplus. Examination

fees accounted for 88 percent of revenue and 21 percent of expenditures, whereas officer and employee compensation and benefits accounted for 42 percent of expenses. Between 2003 and 2013, the change in net balance (i.e., difference of assets and liabilities) of the ABMS member boards grew from \$237 million to \$635 million.

This study is limited primarily by the data source, IRS Form 990, which does not contain complete and specific financial accounting for the ABMS member boards.

"Board certification should have value as a meaningful educational and quality improvement process. Although some evidence suggests board certification may improve performance and outcomes, the costs to physicians are substantial. More research is needed to assess the cost-benefit balance and to demonstrate value in board [certification](#)," the authors write.

More information: *JAMA* (2017). jamanetwork.com/journals/jama/.../1001/jama.2017.7464

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