Interested Party Testimony before the House Health and Aging Committee

Regarding House Bill 273

William J. Burke, DO, Dean of the Ohio University Heritage College of Osteopathic Medicine, Dublin Campus

Speaking on behalf of the Ohio and American Osteopathic Associations

October 25, 2017

Chair Huffman, Vice Chair Gavarone, Ranking Member Antonio and members of the House Health and Aging Committee, thank you for allowing me to speak today. My name is William J. Burke, DO. I am Dean of the Ohio University Heritage College of Osteopathic Medicine's Dublin Campus, a member of the Ohio Osteopathic Association (OOA), and a member of the Board of Trustees of the American Osteopathic Association (AOA). I am testifying on behalf of these organizations today as an interested party on House Bill 273.

The AOA is a national organization representing more than 130,000 osteopathic physicians and osteopathic medical students. The AOA promotes public health, encourages scientific research, serves as the primary certifying body for DOs, and is the accrediting agency for osteopathic medical schools. The OOA is a professional organization that represents more than 4,500 DOs who reside in Ohio, as well as institutional members that provide AOA-accredited postdoctoral training programs throughout the state. In addition, Ohio is home to the Ohio University Heritage College of Osteopathic Medicine in Athens, with two satellite campuses in Dublin and Cleveland.

The American and Ohio Osteopathic Associations have long embraced the concept of life-long learning. As a historical note, the osteopathic profession was the first medical profession in the state of Ohio to have an annual continuing medical education mandate in the Ohio Revised Code (ORC), which was self-imposed in 1943. It was not until 1975, that the ORC was amended to require all physicians – including DOs, MDs and DPMs – to complete 150 hours of CME over a three-year period. At the time, the AOA and the OOA were the only two physician organizations that required continuing medical education as a condition for membership in our organizations. In 2008 the AOA Board of Trustees approved the recommendation by its Bureau of Osteopathic Specialists (BOS) to implement an Osteopathic Continuous Certification (OCC) process, which was mandated to be fully operational and compliant for all AOA certifying boards by January 2013.

Osteopathic Continuous Certification embodies the principles of lifelong learning and continuous improvement designed for the benefit of the public and the osteopathic profession. The goal of OCC is to continually set the standards of excellence for the 18 specialty boards that are managed by the American Osteopathic Association. Core competencies integral to quality medical care include medical knowledge, patient care, interpersonal/communication skills, professionalism, practice based learning and improvement, and systems based practice.

The AOA and OOA are strongly committed to the value of board certification, lifelong learning, demonstration of competency, and continuous quality improvement. The purposes of osteopathic continuous certification are: (1) to assure the public that a physician is highly qualified in his/her specialty area (2) to demonstrate that a physician remains competent over the course of his/her career; and (3) ensure that board certification is a voluntary process, designed by physicians for physicians.

Research has demonstrated a clear relationship between lifelong learning and quality outcomes. OCC is designed to encourage practice review and performance improvement over the course of a physician's career. OCC aligns with quality improvement goals and the shift from fee-for-service payment to value-based payment. This process also assures patients that physicians are regularly reviewed by peers to ensure that current medical advances are fully integrated into the care being provided to patients.

Initial board certification following residency training ensures that new physicians in practice have met accepted training and medical education standards, while demonstrating that an individual physician is highly-qualified and competent in their specialty area of practice. Students, interns and residents are examined throughout their undergraduate and graduate medical education to ensure they have the basic medical knowledges and skills necessary to treat patients and protect the public. Board certification, on the other hand, is a voluntary process that physicians choose to partake in to demonstrate that they have achieved a mark of excellence in their ability to provide specialty and subspecialty care. OCC is designed to further develop the practicing physician's skills throughout his/her career including the unique representation of osteopathic practice and principles.

The AOA believes in the right of the osteopathic profession to set its own education, training and competency demonstration standards through evidence-based practices and peer evaluation. The AOA is continually reviewing the OCC process, responding to diplomate concerns, so as to make it more manageable and economically feasible, while ensuring that physicians who hold a specialty board certification remain highly qualified. Thank you for allowing me to testify. I will be happy to answer any questions the committee may have.