





444 East Algonquin Road • Arlington Heights, IL 60005-4664 847-228-9900 • Fax: 847-228-9131 • www.plasticsurgery.org

March 7, 2019

The Honorable Jack Ladyman Arkansas State Capitol 500 Woodlane St., Suite 350 Little Rock, AR 72201 The Honorable Deborah Ferguson Arkansas State Capitol 500 Woodlane St., Suite 350 Little Rock, AR 72201

RE: In opposition to S.B. 339

Dear Chair Ladyman and Vice-Chair Ferguson:

I am writing on behalf of the American Society of Plastic Surgeons (ASPS) in opposition to S.B. 339. ASPS is the largest association of plastic surgeons in the world, representing more than 93 percent of all board-certified plastic surgeons in the United States. Our mission is to advance quality care for plastic surgery patients and promote public policy that serves patients.

ASPS is committed to ensuring our patients have the best care possible, and we believe that, across the practice of medicine, such a commitment requires physicians to: (1) stay abreast of the latest clinical research and standards of care; (2) demonstrate their mastery of the latest knowledge through objective and reliable assessment methods; and (3) integrate this knowledge into their practice. We believe that American Board of Medical Specialties (ABMS) boards in general, and the American Board of Plastic Surgery (ABPS) specifically, are critical to our members meeting these commitments.

ASPS believes the commitment to lifelong learning and clinical practice improvement that board certification and maintenance of certification (MOC) represent are appropriate criteria for hospitals, insurers and state regulators undergoing credentialing. While we do not necessarily think MOC should be a mandated requirement in every state and facility, we do think that S.B. 339 undercuts the rights of state regulators, hospitals and insurance carriers to determine what standards are required for participation. The government should not dictate standards to experts on credentialing and privileging committees, as these determinations are made through highly-specialized evaluations. This bill takes decisions that should be in the hands of doctors and places them in the hands of policymakers. Board certification is unquestionably an appropriate criterion to consider in licensure and for credentialing a physician to a hospital staff or an insurance network, and legislative efforts to undermine its relevance are unwise.

The duration, breadth, and scope of training required by ABMS member-boards is the best validation of physician knowledge. ASPS applauds the ABMS, and particularly the ABPS, for maintaining standards that reflect the need for patient safety and the highest level of physician practice. While there has been displeasure in the physician community with the MOC requirements of certain ABMS member boards, this dissatisfaction has been recognized and is being acted upon. The ABMS is committed to ensuring that its member boards are identifying and implementing user-friendly, cost-effective, and educationally-valuable methods of continuing education as the means of maintaining certification. The American Board of Plastic

Surgery has worked with its members to identify member-requested changes, some of which have already taken effect and others that will be implemented in the very near future.

Most importantly, the lifelong learning inherent in MOC is based on academic and practical training that will ultimately improve the care received by patients throughout Arkansas. Patients rely on the fact that their doctor is board certified and has maintained board certification. If you undermine these credentials, patients can no longer rely on a nationally-recognized standard that confirms the highest quality of care and assures that physicians have the current knowledge and skills necessary to perform surgeries successfully.

Moreover, as currently written, the language would allow physicians who are certified by substandard boards to advertise their certification in a misleading way. It would allow physicians practicing outside the specialty or subspecialty they trained in to present themselves to the public in a manner suggesting otherwise. As with maintenance of certification, this is a matter of patient safety. Patients deserve to know that the board certification claimed by a physician is a true indicator of his or her training and skill. Lowering the bar for use of the term "board certified" muddles those choices and puts patients at risk for negative consequences.

ABMS-board certification is a valuable tool in the ongoing effort to maximize patient safety, and considering such certification is well within the prerogative of state regulators, hospitals and health plans. For the reasons listed above, we urge you to oppose S.B. 339. Thank you for your consideration of ASPS's comments. Please do not hesitate to contact Patrick Hermes, Director of Advocacy and Government Relations, at phermes@plasticsurgery.org or (847) 228-3331 with any questions.

Sincerely,

Alan Matarasso, MD, FACS

President, American Society of Plastic Surgeons

cc: Members, Public Health, Welfare and Labor Committee