



South Carolina Chapter
American Academy of Pediatrics

MOC Part 4 Credit for South Carolina AAP Chapter Members

are offered through a partnership between the South Carolina AAP Chapter and the SC Department of Health and Human Services with the QTIP Program

Access
ADHD
Adolescent Health
Asthma
Behavioral Health
Breastfeeding
Developmental Screening
Emergency Department Usage
Family Centered Care
Obesity
Oral Health Disease
Pandemic Response
Smoke Exposure
Well Child Visits
Suicide Prevention
Safe Sleep (time limited)

The complete MOC manual can be found at <https://msp.scdhhs.gov/qtip/> under the MOC tab.

Participation in Quality Improvement Projects: For a pediatrician to earn MOC credit by working on an approved QI project, the ABP requires “meaningful participation”. Meaningful participation involves both an active role in the project and participation over an appropriate period.

Active Role: For MOC purposes, an “active role” means the pediatrician must:

- Provide direct or consultative care to patients as part of the QI project.
- Implement the project’s interventions (the changes designed to improve care).
- Collect, submit, and review data in keeping with the project’s measurement plan.
- Collaborate actively by attending at least four project meetings.

MOC Activity Completion When a practitioner has fulfilled the requirements for meaningful participation (i.e., met the project’s requirements for length of participation plus the “active role” criteria), you have “completed” the activity for purposes of MOC credit (activity completion). Note that your MOC activity completion date must be within the period that spans your current certificate period or MOC cycle. For example, if you hold a seven-year certificate, the completion date must be during the seven-year certificate period. If you are enrolled in a five-year MOC cycle, the completion date must be during the five-year MOC cycle.

Registration and documentation of Participation for Part 4 MOC Credit: In QTIP practices with a designated lead clinician for quality improvement, the applicant for MOC credit must provide the lead clinician with their ABP attestation statement and be certified as having participated in the activity. The lead clinician is responsible for letting the SC Project Leader know of all individuals receiving credit. Non QTIP physicians must contact a member of the oversight committee to participate or Kerry Sease.

Maintenance of Certification Credit for Design and Implementation of QI Projects In some cases, pediatricians play a major role in designing and leading the implementation of QI projects but do not actually care for patients through the project. You may be eligible to receive credit for design and leadership work on a MOC-approved project. For more information contact Ramkumar Jayagopalan, MD at ramkumarjayagopalan@gmail.com or Blakely Amati, MD at Blakely.Amati@prismahealth.org

Documentation of Participation After you fulfill all participation requirements, submit the ABP’s Physician Participation Attestation form describing your involvement in the quality improvement project. Your attestation must also be co-signed by the physician project leader of the quality improvement project. The physician project leader will subsequently forward notice of completion to the ABP, and you will receive credit for your participation.

Finding and Submitting Your Attestation Form Part 4 Established QI Projects NOTE An attestation form only needs to be submitted if you have completed an established QI Project for which you are applying to receive MOC credit. This does NOT pertain to any Web-based Part 4 activities.

Effective 1/18/2024

Sponsors will manage their attestation process. There will no longer be a 'locate your attestation form' in physicians' ABP Portfolios. QTIP and the SC AAP have created our own attestation form - see page 3.

To Submit the Attestation Form:

- Answer all questions on the Attestation Form
- **Sign and date** as the participant physician
- Submit the attestation form to Ramkumar Jayagopalan, MD ramkumarjayagopalan@gmail.com Blakely Amati, MD at blakely.amati@prismahealth.org for signature.
- Once the credit has been entered you will immediately receive an automated email stating you have received credit and to log in to your ABP Portfolio to view how the credit was applied.



South Carolina Chapter
American Academy of Pediatrics



The American Board of Pediatrics
Quality Improvement Project for MOC
Attestation Form

This form should be completed by American Board of Pediatrics certified physicians who seek Maintenance of Certification (MOC) credit for completing an approved quality Improvement Project.

ATTESTATION OF MEANINGFUL PARTICIPATION

Physician's Name:

Physician's Email Address:

ABP Diplomate ID#

Quality Improvement Project Title:

Sponsor Organization (circle one): QTIP SC Chapter of AAP

Indicate yes or No to the following questions:

1. I was engaged in the project Yes No

2. I participated in implementing the project's interventions: (the changes designed to improve care). Yes No

3. I regularly reviewed data in keeping with the project's measurement plan. Yes No

4. I collaborated in the activity by attending team meetings. Yes No

5. I met these requirements on: _____ (fill in the date mm/dd/yyyy) on which you met the minimum duration requirement, even if you continued working on the project beyond that date. In order to receive credit this date must be within your current cycle listed on your ABP Portfolio

PROJECT FEEDBACK

Please write a brief summary that describes how you participated in the project and summarizes the most important successes and difficulties encountered in this project:

Signature of Participant:

Date:

Signature of Project Leader:

Date:

By submitting this physician for MOC credit, the organization is indicating that the physician has successfully completed their participation within the named project, meeting all the requirements for meaningful participation.