

# PA News: PA Certifying Body Pilots Alternative Recertification Testing



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What's happening in the PA profession related to recertification (aka Maintenance of Certification (MOC)) is a microcosm of the larger medical/nursing landscape. For decades, the model has been to take a high-stakes certification test when starting practice, and then repeating every X years. But a few years ago, there started to be a revolt in the medical/nursing world about this model. Many providers who are required to take some sort of recertification exam started to say enough is enough.

There are many effective arguments against high-stakes, expensive recertification exams. As always in medicine, everyone's got their own data, but there's precious little convincing data that high-stakes recertification tests are actually effective measures of a provider's ability to practice, and there is also a body of data that suggests standard CME is every bit as effective in skill-maintenance as studying for a gargantuan exam.

I've been a PA for over 19 years, and I have yet to spend one day in primary care, instead finding myself in addiction/pain medicine for most of my career. This has made the high-pressure, high-stakes recertification exams a nightmare for me and other specialty PAs. The last such exam I took was over six years ago, and after spending six months studying all the medicine that I have never practiced, I walked into the exam center practically hallucinating with pressure and information-overload, magnified by the knowledge that if I failed this exam, I might not be able to continue to work as a PA. It was not pretty.

As the test began, I tried to have my game face on, ready to rock and roll. This was until I had never heard of any of the conditions in the first five question. "I'm toast," I thought. "It's over." I must admit that this is the way I have felt for every certification-recertification test I have ever taken, and somehow (computer error?) I've managed to eke out passing scores on them all. Go figure.

There are many PAs/NPs/MDs who have faced the same predicament, and many have been standing up and saying "enough." There's been a year's long revolt from members of the American Board of Internal Medicine, with members calling foul over being required to take expensive and high-stakes recertification exams. A 2018 [Newsweek piece](#) noted: "Why should doctors be forced to keep ladling out cash and spending time away from their practices studying useless information..."

Based on ongoing concerns amongst PAs, the national PA association the American Academy of Physician Assistants

(AAPA) has undertaken a vigorous collaboration with the independent PA certifying body the [National Commission on Certification of Physician Assistants](#) (NCCPA) to look at possible alternative to the 200-question exam serial exams. While from the outside it appears that some of this collaboration has been a little rocky, the result has been for NCCPA to create a model [pilot project](#) that could significantly alter the PA recertification model. Rather than going to a testing center and taking a 200-question exam once every ten years, the model has PAs taking 25-question tests every quarter, with a total of eight such exams completed in two years. PAs can take the 25 question exam all at once or in chunks, since the exam can be taken on any computer with internet access. Test-takers are also allowed to use reference material to answer the question, although the time to answer the questions is not much, ranging from three to five minutes per question.

The pilot started in January of 2019, and will last through December 2020. Those who fail the exam will be given a year from that time to complete the standard 200 question recertification test.

More than [18,500 AAPA members](#) signed up for the pilot project, reflecting a clear desire by many PAs to move to more user-friendly recertification project. I'm one of them, and while we're just 3/8 of the way through the two year process, I have found the pilot model to be much less stressful, as well as more compatible with learning from such an exam.

Results from the first quarterly set of 25 questions showed interesting results, providing evidence of how this model may be a better way for PAs to integrate exam taking into their practice.

While there are many PAs who assert that the data does not support the usefulness of any ongoing recertification models, this is a big-step toward re-thinking the role and process of PA recertification. Once the pilot is completed, there will be consideration of making such a recertification option permanent, giving PAs who want an alternative to the 200-question testing model a choice that may better fit their learning and testing style.

I'd love to hear from APRNs about the how these issues are playing out in the nursing world. [Send the WMC an email](#) to comment.