

RESOLUTION 01.2020-40 (A-20)
PROTECTING PATIENTS THROUGH TRANSPARENT CREDENTIALS

ISMS Board Action Taken on 01/25/2020

Adopted Substitute Resolution 01.2020-40 (A-20), as recommended by the Council on Education & Health Workforce.

Council on Education & Health Workforce Recommendation to
ISMS Board on 01/25/2020

The Council agreed that protecting the integrity of the term “board-certified” among physicians is a high priority, and that it is important to establish clear ISMS policy regarding transparency and truth in advertising of professional medical credentials.

The Council on Education & Health Workforce recommends that the ISMS Board of Trustees adopt Substitute Resolution 01.2020-40 (A-20) in lieu of Resolution 01.2020-40 (A-20), as follows:

RESOLVED, that the Illinois State Medical Society adopt the following as ISMS policy:

A medical doctor or doctor of osteopathic medicine may not hold oneself out to the public in any manner as being certified by a public or private board including but not limited to a multidisciplinary board or “board certified,” unless all of the following criteria are satisfied:

(a) The advertisement states the full name of the certifying board.

(b) The board either:

1. Is a member board of the American Board of Medical Specialties (ABMS) or the American Osteopathic Association (AOA); or

34 2. Is a non-ABMS or non-AOA board that requires as prerequisites for issuing
35 certification: (i) successful completion of a postgraduate training program
36 approved by the Accreditation Council for Graduate Medical Education (ACGME)
37 or the AOA that provides complete training in the specialty or subspecialty
38 certified by the non-ABMS or non-AOA board; and be it further
39

40 RESOLVED, that the Illinois State Medical Society will advocate in support of
41 maintaining the authority of medical licensing and regulatory boards to regulate the
42 practice of medicine through oversight of physicians, physician assistants and related
43 medical personnel; (2) oppose legislative efforts to establish autonomous regulatory
44 boards meant to license, regulate and discipline physician assistants outside of the
45 existing state medical licensing and regulatory bodies' authority and purview; and (3)
46 oppose efforts by organizations to board certify physician assistants in a manner that
47 misleads the public to believe such board certification is equivalent to medical specialty
48 board certification.