

**Internal Medicine Education Advisory Board (IMEAB) Meeting**  
**Thursday, August 5, 2021**  
**9:00 a.m. - 12:00 p.m. EDT**  
**Virtual Meeting**

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***Participants***

John Andrews, MD	Leonard S. Feldman, MD, FAAP,	<i>AAIM Staff:</i> Hanan Abdulahi, MPP Margaret A. Breida, MS Michael Kisielewski, MA Valerie O Jordan Ortiz
Michael Barone, MD, MPH	FACP, SFHM	
Eric B. Bass, MD, MPH, FACP	G. Waldon Garriss, III, MD, MS,	
D. Craig Brater, MD	MBA, MHA, FAAP, MACP	
Aggie Butler, PhD	Eric Holmboe, MD, MACP, FRCP	
Davoren A. Chick, MD, FACP	Lisa Howley, PhD, MEd	
Antoinette Crockrell	Furman McDonald, MD, MPH	
Bergitta E. Cotroneo, FACMPE	Alex J. Mechaber, MD, FACP	
Sima Desai, MD	Vikesh I. Parekh, MD	
Laura Edgar, EdD, CAE	William W. Pinsky, MD	
Christopher A. Feddock, MD, MS	Laura K. Snyderman, MD, FACP	

**Welcome and Introductions**

D. Craig Brater, MD, welcomed participants and asked new advisory board members to briefly introduce themselves.

Any edits or comments regarding the draft minutes of the December 11, 2020 virtual meeting should be sent to Valerie O.

**Organizational Updates**

**National Board of Medical Examiners (NBME)**

- Step 1 score reporting will transition to pass/fail on or after January 26, 2022. Any modifications to the minimum passing score, if deemed appropriate by the USMLE Management Committee, will be effective for students who take Step 1 on or after January 26, 2022. To note, passing and failing outcome reports will only display the notification of “pass” or “fail”. However, the latter will provide a visual illustration showing the distance between the examinee’s overall score and the minimum passing standard. Further, [feedback](#) will be provided on each content area, indicating where in the “low pass” spectrum the learner is situated.
- The USMLE Composite Committee met to determine how the discontinuation of the Step 2 Clinical Skills examination (Step 2 CS) will impact certain USMLE policies. During the Step 2 CS suspension, the USMLE program announced temporary Step 3 eligibility requirements. Since the Step 2 CS exam has been discontinued, the temporary requirements are no longer needed. Step 3 eligibility requirements will conform with criteria established before Step 2 CS became part of the USMLE. Click [here](#) for more information on the requirements.
- Due to time constraints, Michael Barone, MD, MPH, encouraged the advisory board to review his slide deck regarding NBME’s aim of collaboratively developing and delivering competency-based assessments and services that address CoPA’s recommendation.

### Educational Commission for Foreign Medical Graduates (ECFMG)

- With the discontinuation of the USMLE Step 2 CS, travel to the US is no longer required to meet certification requirements.
- In 2022, ECFMG will continue to examine and expand the five pathways. To note, a few modifications have been implemented. A sixth pathway was added: applicant's clinical skills must be evaluated by a licensed physician using the Mini-Clinical Evaluation Exercise (Mini-CEX). A satisfactory score on the Occupational English Test (OET) Medicine remains a requirement.
- The US Immigration and Custom Enforcement (ICE) proposal to eliminate "duration of status" rule was not finalized by the Trump Administration. As such, the Department of Homeland Security withdrew the rule change.
- ECFMG continues its commitment to facilitate IMG entry into the US during the pandemic: advocacy with US Department of State (DoS), collaboration with partner organizations, working with DoS to secure National Interest Exceptions (NIEs), and outreach to GME programs and J-1 physicians.
- All non-standard disciplines must be endorsed by an appropriate ABMS Member Board to be considered for sponsorship through ECFMG's J-1 visa program.

### American College of Physicians (ACP)

- The [Resident Well-Being Curriculum](#) review strategies to foster well-being, mitigate burnout, and promote the value of collaborative learning environments. These three online modules align with the new ACGME requirements for resident training in well-being and is designed to be used in a flipped classroom model.
- The [Pain Management Learning Hub](#) consists of seven core modules and two sets of case studies. The core modules use evidence-based and patient-centered pain management principles, while the case studies provide opportunities to practice skills necessary for pain assessment, diagnostic differentials, and treatment plans. The series also addresses rational use of opioids and management of patients with opioid use disorder.
- The [Obesity Management Learning Series](#) includes three web-based, interactive learning activities that address lifestyle modification, pharmacologic therapy, and surgical interventions.
- The [ACP Board Prep Curriculum](#) has been updated, with learners having the ability to access slide decks for self-directed learning and reinforcement. It is recommended that senior residents prepare lectures for feedback on their teaching skills.

### Accreditation Council for Graduate Medical Education (ACGME)

- [Milestones 2.0](#) is formally posted, to include a supplemental guide. Additional Milestones resources can be accessed [here](#).
- Two new open-access assessment tools are available on [Learn at ACGME: Teamwork Effectiveness Assessment Module \(TEAM\)](#) and [Direct Observation of Clinical Care \(DOCC\)](#). Residents and fellows can use the TEAM module to gather and interpret feedback from their interprofessional team. DOCC is an app for faculty and evaluators to document direct observations of clinical activities performed by residents and fellows.
- The *Milestones 2021 Report* will be produced in two parts: box plots per sub-competency (September) and Predictive Probability Values (November).
- A few areas that ACGME is exploring to help inform its continuous examination of Milestones outcomes: Medicare, commercial claims, registries, and patient experience data. Further, some projects will explore what signals, if any, exist and how data synthesized at the program level might provide useful feedback information.

#### *Review Committee – Internal Medicine (RC-IM)*

- The [new IM PRs](#) were approved by the ACGME Board of Directors (BoD). Although approved as a whole, PRs related to dedicated time and FTE support are deferred because ACGME is planning to revise the CPRs related to these areas, within the context of program leadership (PDs, APDs, and core faculty) and personnel (coordinators).
- In summary, CPRs that provided FTE specificity on PD and coordinator support were removed, allowing RCs to recommend dedicated time for core faculty. The ACGME BoD directed the Committee on Requirements to develop a toolkit and templates providing guidance to RCs around the development of specialty-specific program requirements related to dedicated time for program leadership and personnel.
- In response to APDIM leadership's inquiry that sought clarification regarding the 10-months of outpatient experiences in the PRs, ACGME explained that programs should continue to account for outpatient experiences as-is. Patient management activities and didactics that relate to outpatient topics during ambulatory blocks count towards the PR.
- In response to feedback that the new items implemented into ADS was burdensome, ACGME retracted data elements and fields, resulting in fewer narratives with responses from the previous academic year auto-populating to assist in the process. Upon submitting the annual update, ADS triggers a message for the DIO to review and approve.
- ACGME is de-linking the Self-Study and 10-year Site Visits and is developing a process to review and provide feedback to programs that have completed the Self-Study. All Self-Study and 10-Year Site Visits have been postponed. No programs will be asked to begin a self-study before July 2022.

#### Association of American Medical Colleges (AAMC)

- A new strategic plan was developed, based on environment scan, needs assessment results, and stakeholder input. The vision statement was expanded to include community collaboration, and ten action plans were formulated.
- AAMC announced their partnership with the CDC as part its efforts to improve health care access, collaborate with communities, and advance health equity. It will also support efforts to engage and equip AAMC member institutions to build trust and promote confidence in COVID-19 vaccines in health care personnel and communities disproportionately impacted by the pandemic.
- In collaboration with the ACGME, the AAMC continues to pilot test a new process for providing feedback to medical schools about the performance of their graduates for CQI of the curricula. The goal is to reduce variability in how schools design and collect feedback from PDs, strengthen two-way communication between UME and GME, and support schools in assessing effectiveness in preparing their students for residency. The survey content includes items about feedback on the MSPE. Information is accessible to medical schools in a report within the Medical School Profile System (MSPS).
- AAMC is partnering with IM, Dermatology, and General Surgery to pilot a new ERAS Supplemental Application tool to help applicants share streamlined information with programs, including important work, volunteer and research experiences, and geographic preferences.
- Careers in Medicine (CiM) is a comprehensive career-planning program that provides students with the skills, information, and resources to choose a specialty and residency program that meets their career goals.

#### American Board of Internal Medicine (ABIM)

- ABIM's DEI strategy is to ensure that their programs and policies are transparent and reflect their commitment to mitigating disparities in healthcare. The ABIM Foundation, in collaboration

with the AAMC, held a two-day conference centered on trust, equity, and inclusion. AAMC will share its race/ethnicity data, allowing ABIM to conduct additional analyses to determine if there is bias within ABIM assessments at the individual item level and to consider additional research on fairness.

- ABIM is extending deadlines for all MoC requirements to December 31, 2022. The MoC program will include the Longitudinal Knowledge Assessment (LKA), which will be launched in 2022.

#### Society of General Internal Medicine (SGIM)

- SGIM continues to advocate for CMS to increase the number of GME slots and ensure reasonable allocation to IM and PC.
- The Education Committee submitted their recommendations for improving the UME – GME transition, noting the following areas of improvement:
  - More robust focus on the growth mindset.
  - Incorporate learners' role in assessment and transition.
  - Increased specificity on who is charged with building resources to implement recommendations.
- The above committee also submitted comments to ABMS regarding its proposed standards for continuing education, suggesting an aligned language and objectives to the goal of improving patient outcomes.

#### Society of Hospital Medicine (SHM)

- SHM developed several learning resources related to QI, safety, and critical care.

#### American Medical Association (AMA)

- AMA's [Accelerating Change in Medical Education](#) encourages innovations that address the education continuum, physician leadership, future directions in workforce needs and financing, etc.
- The goal of the [Reimagining Residency Initiative](#) is to transform residency training to best address the workforce needs of the current and future health care system. The program addresses competency-based medical education, UME – GME transition, the learning environment, health system science, and workforce.

#### Alliance for Academic Internal Medicine (AAIM)

- In response to the Coalition for Physician Accountability's (CoPA) recommendations to reform the UME – GME transitions, AAIM will establish several task forces to address the following:
  - Database development on verifiable GME program attributes.
  - Identifying a set of competencies that will be followed across the educational continuum, from medical student to residency and from residency to fellowship.
  - SEL development.
  - Developing filter options for sorting applicants that are meaningful.
  - Developing standards for the interview process.
  - Developing a robust hand-off and orientation from UME to GME, with individualized learning plans (ILPs).