

FAQ

Recognition of Addiction Medicine by the American Board of Medical Specialties (ABMS)

Version of March 14, 2016

1. When was formal recognition of Addiction Medicine announced?

The American Board of Medical Specialties (ABMS) announced the recognition of addiction medicine (ADM) as a multispecialty subspecialty, open to diplomates of all ABMS member boards, on March 14, 2016.

2. What has been the role of the American Board of Addiction Medicine (ABAM) in the recognition process?

ABAM is an independent, non-ABMS medical board. It has encouraged, facilitated and supported the recognition of ADM as an ABMS recognized subspecialty. ABAM and The Addiction Medicine Foundation (TAMF; formerly The ABAM Foundation) have provided information to ABMS and its 24 member boards on the field of ADM, including ADM certification and the ABAM Maintenance of Certification program. TAMF has encouraged, facilitated and supported the recognition of ADM fellowship training and provided ADM training information to the Accreditation Council for Graduate Medical Education (ACGME). ACGME is considering recognition of ADM and accreditation of ADM fellowship training. All decisions regarding ABMS recognition, eligibility for future ADM certification and decisions on ACGME accreditation of ADM training are made by ABMS, ACGME and the American Board of Preventive Medicine (ABPM).

3. What is the significance of ABMS recognition of Addiction Medicine (ADM)?

While ABAM functions as an independent certifying board, recognition of ADM by ABMS now identifies ADM as a specialized field of medical practice for which physicians may gain the highest level of certification and credentialing, commensurate with that of over 100 other medical specialties and subspecialties that are recognized by ABMS. By ADM officially entering the ABMS “House of Medicine,” opportunities for physicians to practice in this field, and for patients to receive care from them, will be integrated into medical education and training, health care systems, payment structures and the broad practice of medicine. Thus, the transition from independent board status to recognition of ADM within ABMS signals the integration of the prevention of and care for unhealthy substance use and addiction into mainstream medicine and health care. For more information about ABMS, visit their website: <http://www.abms.org/>

4. Since I already have board certification in Addiction Medicine, how does this new ABMS recognition affect me?

ABAM is an independent medical board, and not a member board of the ABMS. The certificate you hold is currently the highest credential in the field of addiction medicine. It will maintain validity and will be a professional asset, documenting your knowledge and status in the field, for as long as you are current with the ABAM Maintenance of Certification requirements. When an ABMS ADM examination and certification become available through the ABPM and other ABMS member boards, medicine and health care will use the new ABMS level examination and subsequent certification as the “gold standard” credential in the field. ABMS level certification is the standard for issues such as: credentialing for hospital or health system privileges; inclusion of covered benefits for patients under insurance plans; payment to physicians for patient services from private and public sources; and even for having physicians’ names and subspecialties in phone book listings and other public and professional listings and materials. Because of these differences, you may elect to seek ABMS ADM certification through the Practice Pathway, or a qualifying pathway that will become available to current ABAM diplomates. Five years after the first ABMS sanctioned certification examination in ADM is offered by the ABPM, the Practice Pathway will “close” and a fundamental requirement to sit for the examination thereafter will be the successful completion of a fellowship in ADM accredited by the Accreditation Council for Graduate Medical Education (ACGME), see FAQ 7. The detailed requirements to gain ABMS level ADM certification will be decided by the ABMS administrative sponsoring board for ADM, ABPM. It is expected that ABAM diplomates who are current in their ABAM MOC will have a special qualifying pathway.

5. What is the role of the American Board of Preventive Medicine (ABPM) in this new field?

ABPM is the ABMS member board that sponsored the application to ABMS for the recognition of ADM and the establishment of a certification program in ADM under the auspices of the ABMS. ABPM will serve as the administrative board for the new subspecialty. ABPM will play a major role in the certification and MOC processes for the new field. Preventive medicine and ADM are a great match, as unhealthy substance use and addiction are preventable and treatable public health problems. As noted below, ADM will be an ABMS multispecialty subspecialty. It is expected that multiple disciplines will be sponsoring ADM training programs at the local level. ABAM encouraged and supported ABPM in the effort to bring ADM into recognition as an ABMS subspecialty, and will be available to support ABPM to optimize a smooth transition of ADM into this new era. Updates will be posted on the ABAM website and addressed in future FAQs. For information about ABPM, visit their website: <https://www.theabpm.org/>

6. Do I have to be a diplomate of ABPM to become certified in the new subspecialty?

No. To become certified in the ABMS subspecialty of ADM, a physician does not need to have a primary certificate issued by the ABPM. ADM will be a multispecialty subspecialty, meaning that ADM will be a subspecialty open to diplomates from all 24 ABMS member specialty boards (internal medicine, family medicine, etc.). Diplomates from these boards may enter the new field after

completion of a primary residency in an ABMS specialty, or may gain certification through a Practice Pathway or other qualifying pathway.

7. Can you explain the term multispecialty subspecialty?

A multispecialty subspecialty is a field of medical practice that spans multiple primary specialties. Examples of other multispecialty subspecialties include hospice and palliative medicine, sports medicine, and clinical informatics. Hospice and palliative medicine, for example, is a subspecialty of anesthesiology, emergency medicine, family medicine, internal medicine, obstetrics and gynecology, pediatrics, physical medicine and rehabilitation, psychiatry and neurology, radiology and surgery. ADM will be a subspecialty of all primary specialty fields and diplomates from all 24 ABMS Member Boards may apply for certification. Additional information on ABMS specialty and subspecialty classifications can be found in the 2015 ABMS Guide to Medical Specialties (http://www.abmsdirectory.com/pdf/Resources_guide_physicians.pdf), and detailed information about specialty and subspecialty certificates can be found at: http://www.abms.org/media/84770/2013_2014_abmscertreport.pdf. Please note that information on the new ADM subspecialty may not yet be posted.

8. Will current ABAM diplomates have a credentialing pathway into the new subspecialty?

To become a certified ADM subspecialist with the new credential to be offered through the ABPM, a physician will need to apply to the ABPM at the appropriate time. Just as ABAM (and, before it, ASAM) had a credentialing process in which an applicant was required to apply to sit for examination and to meet the criteria established to be approved to sit for the exam, a physician will need to apply to ABPM and have his/her application approved. After the Practice Pathway is closed, completion of a fellowship will be a requirement to be able to sit for the certification exam. Until then, a physician will need to submit a detailed application providing documentation that he/she has met the criteria outlined in the Practice Pathway. Thus, a detailed plan for entry into the new subspecialty, without the necessity of completing a fellowship will be determined by ABPM. ABPM and ABMS have well-defined eligibility criteria for certification. A benefit for current ABAM diplomates is that the ABPM has indicated that there will be a pathway that recognizes current ABAM diplomates who apply for the new certification.

An important difference from ABAM certification eligibility is that ABMS candidate eligibility criteria will require current certification by one of the 24 ABMS member boards. Unfortunately, this ABMS rule makes certification in the new subspecialty unavailable to current ABAM diplomates who do not hold an ABMS specialty certification. These ABAM diplomates may retain their certification by ABAM. ABAM is committed to supporting current ABAM diplomates who do not hold an ABMS primary specialty certification (see FAQ 10).

9. I am a psychiatrist with ABAM certification, and there is already a subspecialty of Addiction Psychiatry offered by the American Board of Psychiatry and Neurology. Will I still be able to become certified in Addiction Medicine?

Yes. In the approved ABPM application to ABMS for the new subspecialty there was specific language that would allow diplomates of all ABMS member boards, including psychiatry, to be eligible for certification in ADM.

10. Will osteopathic physicians and Canadian physicians be eligible for certification in the new subspecialty?

Osteopathic and Canadian physicians will be eligible if they hold a current ABMS primary certificate.

Addiction medicine is a multispecialty subspecialty of the American Osteopathic Association (AOA). However, neither an initial certification exam nor a recertification exam is currently available. We are aware that the American Osteopathic Academy of Addiction Medicine (AOAAM) is pursuing a new certification in ADM with the American Osteopathic Association.

In addition, osteopathic medicine and allopathic medicine have recently entered into a merged residency and fellowship accreditation program: the Single GME Accreditation System. Thus, osteopathic physicians may eventually enter ADM fellowships and thereafter qualify to receive ADM certification.

Canadian physicians are usually certified in their field by one of the Canadian certifying entities. Canadian physicians who hold an ABMS certification will be able to certify in the new ADM ABMS subspecialty. Canadian physicians who do not hold a primary ABMS certification are not accepted for subspecialty certification by most ABMS boards. It is anticipated that the Canadian counterparts to ABMS and ACGME will consider changes that facilitate and recognize physician training and certification in ADM.

Additional information on AOAAM can be found at: www.aoaam.org

Additional information on AOA can be found at: www.osteopathic.org

11. I do not hold a primary, current ABMS certificate. What is my status?

There are ABAM diplomates who have never had, or do not now have an active ABMS certification. The ABAM Board is now reviewing a process which will allow these ABAM diplomates to retain ABAM certification through a program similar to the current ABAM MOC program. All ABMS member boards have procedures for renewal of certification for their diplomates whose certification has lapsed. Thus, it is possible to regain ABMS certification in your primary specialty is not current.

12. Now that ADM is an approved subspecialty, what does this mean for my ABAM MOC status?

We strongly urge all of our diplomates to stay up-to-date with the current ABAM MOC requirements. ABAM leadership is working with ABPM to plan a smooth transition for addiction medicine MOC activities. Maintaining your ABAM MOC will likely be an eligibility requirement for

ABAM diplomates who wish to utilize the qualifying pathway which ABPM is expected to offer to ABAM diplomates (consistent with past new subspecialty fields).

The ABAM Directors are reviewing details of a “Transitional Maintenance of Certification” (ABAM TMOC) program that will be in place in the coming months. It is being designed in response to the possible transition of the ABMS’s current MOC model to a continuing assessment system to replace the Part III 10 year periodic exam. The American Board of Anesthesiology is currently piloting such a system (<http://www.theaba.org/MOCA/MOCA-Minute>). In addition to a continuous testing cycle replacing the 10 year “re-certification” exam, this system is anticipated to be an improved self-assessment learning tool as well as more relevant and less expensive for the practicing physician. The ABAM MOC web portal is now being configured to reflect a new, less expensive ABAM MOC fee

13. What if I do not complete my MOC requirements?

You will lose your eligibility advantage for the ABAM diplomates’ qualifying pathway into the new certificate. ABAM will continue working to facilitate eligibility of ABAM diplomates who are current in ABAM MOC or the new ABAM TMOC program now under review.

14. Will an ADM certification exam be offered in 2016?

No. The timing of the next ADM certification exam will be determined by ABPM.

15. When will ADM fellowships accredited by the American Council for Graduate Medical Education (ACGME) be available?

Preparation for ACGME accreditation of ADM fellowships began in 2009. In December, 2015 a formal application was sent to ACGME by the ABPM, and the recognition of ADM and the processes for accreditation of ADM fellowships are now underway at ACGME. Using standard timelines, accreditation applications could be available in 18 months. The Addiction Medicine Foundation will be encouraging, supporting and facilitating current ADM fellowships in the transition to ACGME accreditation. TAMF will also continue its work to establish additional ADM fellowships to meet the need for a trained workforce of addiction medicine specialists.

16. Please define specialty, subspecialty and multispecialty subspecialty.

Specialty: A defined area of medical practice that connotes special knowledge and ability resulting from specialized effort and training.

Subspecialty: An identifiable component of a specialty, to which a physician may devote a significant portion of time.

Multispecialty Subspecialty: A subspecialty that is open to diplomates of more than one ABMS member board. Examples include hospice and palliative medicine, sleep medicine, medical toxicology and clinical informatics. ADM will be a multispecialty subspecialty field in which

physicians from all ABMS member boards will be eligible for certification. Additionally, physicians from any specialty will be eligible to enter and receive training in ADM fellowships.

16. Where can I obtain more information, and who can answer other questions regarding the future status of current diplomates?

ABPM and ABAM are working closely to optimize a smooth transition. As information becomes available, it will be posted on this site. Any information that is not on this or the ABPM website is simply not available at this time. ABAM will post all available official information as soon as possible. If you call or email requesting information you will first be thanked for your dedication and leadership in ADM, and then you will be directed back to the ABAM, ABPM and ABMS websites. These FAQs and other information will be updated whenever there is new information to share with you.

Thank you for all you do in advancing the care of patients and families.