

FAQ
Recognition of Addiction Medicine by the
American Board of Medical Specialties
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The Basics: Recognition of Addiction Medicine by ABMS

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 on March 14, 2016.

2. What are the answers to the 12 most common inquiries that ABAM has received regarding this news?

a. The recognition of ADM by ABMS is a game changer. It is the most significant event for the field since Dr. Benjamin Rush declared addiction a disease in 1805 and Dr. Ruth Fox organized the first meeting of ADM physicians in 1954 - marking the birth of ASAM.

b. The American Board of Addiction Medicine (ABAM) will not offer a certification exam in 2016. In March of 2016, ABAM transferred the exam and the testing process to the American Board of Preventive Medicine (ABPM). For the field of ADM to be unified, there can be only one certifying board. For this reason, when the transition to ABAM-ABMS ADM certification is complete, ABAM will cease to function as a certifying board. ABAM Tmoc operational support will continue and be managed by TAMF.

c. ABAM diplomates will not have any change in their ABAM diplomate status, or the benefits of their certificate, as long as they remain current in the ABAM MOC program. When the ABMS Practice Pathway ends, in 2022 or later, ABAM diplomates will have several ADM certification options.

d. ABAM diplomates who hold an ABMS primary certificate will be eligible for ADM certification at the ABMS level when the ABPM opens that certification process. ABPM will manage the timing of this process, including the schedule for future ADM exams.

e. The new ABMS ADM certificate will be available to any physician, regardless of specialty, who holds an active ABMS certification.

f. The American Osteopathic Academy of Addiction Medicine (AOAAM) is working with the American Osteopathic Association (AOA) to secure a method to offer AOA ADM certification status to osteopathic ABAM diplomates.

g. Canadian physicians are eligible for the new ABMS certification if they hold an ABMS primary certificate.

h. ABAM diplomates who are current in their ABAM MOC, now being replaced with ABAM Tmoc, will have no change in the status of their ABAM certificate.

i. The ABAM MOC Program is evolving to accommodate changes that are impacting MOC across all medical fields. The ABAM MOC Part III cognitive examination is being eliminated and will be replaced with a modern, more practical and educationally effective model. There will be no Part III examination in 2016: diplomates who were due to take it will remain certified. ABAM MOC will be replaced with a Transitional MOC program (Tmoc) in 2016-2017. ABAM Tmoc will evolve the friendliness and practicality of ADM lifelong learning.

j. More information will be posted as available. Specific inquiries can be addressed to abaminquiry@abam.net and will be answered as soon as possible. ABAM, ASAM and ABPM leadership will be presenting on topics covered in this FAQ at the ASAM Annual Conference in Baltimore, April 14.

l. Yes, it is time to celebrate the advance of ADM! Please join us in doing so at this year's ASAM Annual Conference!

3. What is a multispecialty subspecialty?

This means that any ABMS specialist certified by any one of the 24 ABMS member boards may become certified by ABMS in ADM.

Thus, ADM will be an ABMS recognized field of medical practice that spans multiple primary specialties, and includes physician certification and training by more than one ABMS primary specialty. Examples of multispecialty subspecialties include hospice and palliative medicine, sports medicine, and clinical informatics. Hospice and palliative medicine, as an 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. This is a relatively new ABMS model, designed to efficiently allow the dissemination of specific knowledge, certification and training across all medical fields, to all physicians and into all health

care venues. 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.

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

This official “acceptance” of addiction medicine is the most significant event in the field since Dr. Benjamin Rush declared addiction a disease in 1805 and Dr. Ruth Fox organized the first group of ADM physicians 150 years later. While ABAM has functioned as an independent certifying board, recognition of ADM by ABMS now identifies ADM as an ABMS specialized field of medical practice. A new ABMS field of practice in which physicians may gain a new level of certification, credentialing and training, commensurate with that of over 120 other primary and subspecialty medical fields that are recognized by ABMS. As ADM officially enters the “House of Medicine,” opportunities for physicians to practice in this field and for patients to receive evidenced based 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 recognition to recognition of ADM within ABMS signals the integration of the prevention and care for substance use disorders and addiction into mainstream medicine and health care. It signals the beginning of a new area in addiction medicine and American medical practice and health care.

This is a “game changer”. An example of the future benefits of this recognition can be gleaned from the trajectory of the subspecialty of Hospice and Palliative Medicine (HPM). When ABMS recognized the subspecialty of HPM in 2006, there were a limited number of physicians, training programs, departments or integrated care teams providing HPM services. Just ten years later there are 6,600 physicians certified in the subspecialty (the first ABMS certifying exam was given in 2008), thousands of hospice interdisciplinary care teams, 100 HPM fellowships, an HPM department or program accessible at virtually every hospital, more persons dying at home comfortably and with their family present, and affordable, available access to evidenced based care for families seeking end-of-life care for their loved ones. Parallel with these changes, the public understanding of death and dying has undergone a fundamental cultural change: from ignorance, denial and regret to acceptance and the expectation of high quality medical care. So imagine where ADM can be in 10 years.

With a certification process under the ABMS umbrella established, accreditation of training programs in ADM by the ACGME will soon follow, and with that, every medical school and teaching hospital will know that, among the credible specialties and subspecialties for which accredited training programs exist, ADM will “be there” as part of graduate medical education. This, in turn, will have the attention of medical school deans and faculty, and it is expected that more academic departments of ADM and professorships in ADM will appear in medical schools, and that the medical education “establishment” will incorporate ADM into GME physician training and medical school curricula in ways commensurate with the scope of this major clinical and public health problem.

ABAM Diplomates: Current and Future Status of ABAM Certification

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

If you are certified by an ABMS Member Board and are 64 years of age or younger on July 1, 2016, your ABAM certificate will expire at the end of the Practice Pathway (this will be set by ABPM with an end date of 2022 or later). Therefore, it is recommended that you sit for the ABMS level ADM exam offered by ABPM before the Practice Pathway ends. We recommend that you remain current in the ABAM Tmoc program until you enter ABMS ADM certification: you must do so to maintain an active ABAM certificate, to continue to have the benefits of ABAM certification and to be eligible for the Qualifying Pathway ABPM will offer to ABAM diplomates eligible to take the ABMS level ADM exam.

If you are not certified by an ABMS Member Board there will be no change in your diplomate status as long as you are up to date in the ABAM Tmoc program. When the Practice Pathway ends, you will receive a Time-Unlimited ABAM certificate.

6. What is the difference between my ABAM certificate and any new certificate offered by ABMS?

The ABAM certificate you hold is a valid credential in the field of addiction medicine, and will be a legitimate verification of your knowledge and specialty status in the future. It will be a valid professional asset for as long as you are current with the ABAM Tmoc requirements, or until you move into ABMS ADM certification or receive an ABAM Time Unlimited certificate.

When an ABMS ADM examination and certification become available through ABPM, medicine and health care will use the new ABMS level examination and subsequent certification as the national “gold standard”: the highest credential in the field. ABMS level certification is the highest national 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, if you are already an ABMS diplomate, you may elect to seek ABMS ADM certification through the Practice Pathway, or a Qualifying Pathway that will become available to current ABAM diplomates. The Practice Pathway, covered below, is expected to be available for 5 years after the first ABMS sanctioned exam is administered, following which a fellowship in ADM accredited by the Accreditation Council for Graduate Medical Education (ACGME) would be required to sit for the certifying exam. As noted below, the detailed eligibility requirements to seek ABMS level ADM certification will be delineated by the ABMS administrative sponsoring board, the ABPM. It is expected that ABAM diplomates who are current in their ABAM MOC will have a special Qualifying Pathway in addition to the Practice Pathway.

Current and Future Status of Your ABAM Certification

	Current Primary Board Certificate	ABAM Diplomate Status Until End of Practice Pathway (PP)	ABAM Diplomate Status After End of Practice Pathway (PP)	Recommended Action	Comments
A	Any ABMS Member Board, and age 64 or under on July 1, 2016	Active, contingent on participation in ABAM Tmoc	Inactive	Stay current in ABAM Tmoc; seek ABMS ADM	Use the Qualifying Pathway
B	Any ABMS Member Board, and age 65 or over on July 1, 2016	Active, contingent on participation in ABAM Tmoc	New Time-Unlimited ABAM certificate	Stay current in ABAM Tmoc	Age 72 or over by 2022
C	Any AOA Specialty	Active, contingent on participation in ABAM Tmoc	New Time-Unlimited certificate (unless a pathway for AOA ADM re-opens)	Stay current in ABAM Tmoc and encourage AOA to re-open ADM certification	Contact AOAAM or AOA, give your support to ADM recognition
D	Canadian Certification: CFPC or RCPC	Active, contingent on participation in ABAM Tmoc	New Time-Unlimited certificate	Stay current in ABAM Tmoc and pursue ADM for CFPC and RCPS	TAMF can assist.
E	Neither A, B or C	Active, contingent on participation in ABAM Tmoc	New Time-Unlimited certificate	Stay current in ABAM Tmoc	Stay ADM current.
F	Physicians in Training	No future availability	No future availability	Take the ABMS ADM exam	

Notes:

1. Practice Pathway (PP): standard 5 year period after the first ABMS level exam is given in a new subspecialty, during which ABMS Member Board diplomates are eligible for certification without completing a fellowship. This pathway will end in 2022 or later, depending on the timing of the initial administration of the ABMS level ADM exam by ABPM.
2. Qualifying Pathway: Open to active ABMS diplomates who hold certification from a non-ABMS board (i.e. ABAM) when a new ABMS certificate becomes available in that field. These ABAM diplomates, who must be current in ABAM Tmoc, receive an expedited credentialing review – the practice experience requirement in ADM is considered fulfilled and a detailed documentation and supervisor’s confirmation of ADM practice waived. Attestation to active practice and confirmation of status from ABAM are required.

ABAM Diplomates with active ABMS Member Board certification

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

A detailed plan for entry into the new subspecialty, without the necessity of completing a fellowship, will be announced by ABPM, when available, on their website. ABPM and ABMS have well-defined eligibility criteria for certification. ABPM has indicated that there will be a special Qualifying Pathway that recognizes current ABAM diplomates who apply for the new certification. This will be in addition to the Practice Pathway offered for every new ABMS subspecialty. An important difference from ABAM certification eligibility is that ABMS ADM 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. The future status of the ABAM certificate for these diplomates is outlined in the table below. The Practice Pathway and any special Qualifying Pathway into ABPM ABMS level certification are both anticipated to be open for 5 years past the administration of the first ABMS level examination.

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

No, 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, and may gain certification through a Practice Pathway or other Qualifying Pathway without having to complete an ADM fellowship. ABMS does require active ABMS certification status as an eligibility requirement.

9. I hold a current ABMS certification from one of the 24 primary ABMS boards. Is this new ABMS certification available to me?

Yes. The new ABMS certification in ADM will be available to any physician who holds a current ABMS certificate from any ABMS Member Board.

10. 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.

11. Will ABAM diplomates who are also ABMS Member Board diplomates have to take another certifying exam to gain the new ABMS subspecialty certification?

Yes. This is an ABMS and ABPM requirement. The new ABMS level exam can be taken any time before the Practice Pathway ends – 5 years after the first administration of the ABMS ADM exam. After that, completion of an ADM fellowship will be a certification eligibility requirement. Thus, since there is not an ADM exam in 2016, ABAM diplomates will have at least until 2022 to take the ABMS ADM certification exam

12. How long will an ABMS diplomate have to take the new ABMS ADM exam?

The Practice Pathway to become certified by ABMS in ADM, and the Qualifying Pathway open to ABAM diplomates, will be open for 5 years after the first ABMS ADM exam is administered by ABPM.

13. I was certified by ABMS in the past, but my certification has lapsed or otherwise become inactive. Will I be eligible for the new ABMS ADM certification?

No. A physician must hold an active ABMS certificate to apply for certification in the new subspecialty.

14. If I regain my ABMS certification, will I be eligible to certify in the new ABMS ADM subspecialty?

Yes.

15. What is the difference between the Practice Pathway and the Qualifying Pathway?

Practice Pathway (PP): standard 5 year period after the first ABMS level exam is given in a new subspecialty, during which ABMS Member Board diplomates are eligible for certification without completing a fellowship. This pathway will end in 2022 or later, depending on the timing of the initial administration of the ABMS level ADM exam by ABPM.

Qualifying Pathway: Open to diplomates of non-ABMS subspecialty boards (such as ABAM) when a new ABMS certificate becomes available. ABAM diplomates current in Tmoc will very likely receive an expedited credentialing review –the practice experience requirement in ADM is considered fulfilled and a detailed documentation and supervisor’s confirmation of ADM practice waived.

As noted, physicians entering ABMS ADM through either pathway will be required to take and pass the new ABMS level ADM examination to gain the new certification.

Osteopathic, Canadian and other ABAM diplomates who are not ABMS eligible.

16. I am certified by the American Osteopathic Association (AOA). Is this new ABMS certification available to me?

No. A physician must hold an active ABMS certificate to apply for certification in the new ABMS ADM subspecialty.

17. Is there a route through which I can gain AOA certification in ADM?

Not at the present time. AOA has had an ADM certification in the past. Re-opening this path is a possibility for which osteopathic physicians may wish to lend their support. Please contact the American Osteopathic Academy of Addiction Medicine or the AOA for further information.

18. I do not hold a current ABMS certificate. What is my status?

There are ABAM diplomates who have never had, or do not now have an active ABMS certification. All ABAM diplomates who are current in their ABAM Tmoc activities will retain active status as ABAM diplomates. See also FAQ 21 below.

19. I hold a certification from one of the Canadian physician certifying organizations. Is this new ABMS ADM subspecialty certification available to me?

Yes, yet only if you hold an ABMS primary certificate. A physician must hold an active ABMS certificate to apply for certification in the new ABMS ADM subspecialty.

20. Please elaborate: will osteopathic physicians and Canadian physicians be eligible for certification in the new subspecialty?

Osteopathic and Canadian physicians will be eligible only 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 re-certification exam is currently available. We are aware that the American Osteopathic Academy of Addiction Medicine (AOAM) is interested in a new certification in ADM offered by 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. Contact AOA or AOAAM for more details.

Canadian physicians are usually certified in their field by one of the Canadian certifying entities: the College of Family Physicians of Canada or the Royal Society of Physicians and Surgeons of Canada. 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 eligible for ABMS subspecialty certification. It is anticipated that the Canadian counterparts to ABMS and ACGME will consider changes that facilitate and recognize physician training and certification in ADM.

21. I have never held an ABMS certificate. Will I be eligible for the new ABMS ADM certification?

No. A physician must hold an active ABMS certificate to apply for certification in the new ABMS ADM subspecialty.

When ABAM initiated the independent ADM certification and MOC processes to bring ADM into ABMS recognition in 2008, it made a pledge to future ABAM diplomates. The pledge: "For ASAM and ABAM certified physicians who are not already Diplomates of an ABMS member board, ABAM will facilitate and

advocate for eligibility for an ABMS-recognized Addiction Medicine examination”. Despite the consistent strong efforts and advocacy of the ABAM leadership to do so, ABMS and its member boards did not open this path.

ADM Involved Organizations: Current and Future Roles

22. Please identify the relevant different organizations involved with this new recognition.

a. The American Board of Addiction Medicine (ABAM) is an independent medical board (not an ABMS or AOA member board). It is not a membership organization.

b. The Addiction Medicine Foundation (TAMF) is an independent non-profit entity advancing medical practice in addiction prevention and treatment. Its primary mission is to support the establishment of sustainable ADM fellowships.

c. The American Society of Addiction Medicine (ASAM) is an independent membership organization of physicians in the field of addiction medicine.

d. The American Board of Medical Specialties (ABMS) is the federation of which 24 independent medical specialty boards are members.

e. The American Board of Preventive Medicine (ABPM) is one of the 24 ABMS member boards, and the ABMS member board that is the administrative sponsor for ADM within the ABMS structure.

f. The Accreditation Council for Graduate Medical Education (ACGME) is an independent entity that accredits all graduate physician training in the United States (all residencies and fellowships).

g. Boards, foundations and other organizations are not the field or specialty of ADM; they are units of structure and administrative function. The field of ADM belongs to all physicians who set and implement best practices and do other things necessary to advance the science and art of addiction medicine.

23. What is the mission of ABMS, ABPM, ASAM and ACGME?

Please link to their website, listed at the end of this FAQ.

24. How is ABAM related to ABMS?

ABAM is an independent medical board. It is not one of the 24 ABMS Member Boards. There is no official relationship or organizational affiliation between ABAM and ABMS: these are completely independent organizations. For the field of ADM to be unified, there can only be one certifying board. For this reason, when the transition to ABAM-ABMS ADM certification is complete, ABAM will cease to function as a certifying board. ABAM Tmoc operational support will continue and be managed by TAMF.

25. What is ABAM’s relationship to ASAM?

ASAM encouraged and facilitated the establishment of ABAM in 2006 to assure that the field of ADM would have a focused effort to bring ADM into ABMS recognition. ASAM had long held the goal of obtaining ABMS recognition of ADM, as codified in the ASAM strategic plan of 1989. Many ADM physicians are both ABAM diplomates and ASAM members. A number of past and present directors of both organizations have served on both boards. ABAM and ASAM communicate regularly on issues of mutual interest, such as MOC, CME, advocacy for fellowship development, and other matters relative to advancing the practice of ADM and promoting the best interest of patients and the public health. The positive and collaborative relationship of ABAM, TAMF and ASAM has been and will remain essential for the continued advancement of ADM.

26. 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 formal recognition of ADM as an ABMS multispecialty subspecialty. ABPM will serve as the administrative sponsoring 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 good match, as unhealthy substance use and addiction are preventable and treatable public health problems. As noted, ADM will be an ABMS multispecialty subspecialty – physicians from any ABMS medical field may become certified or trained in ADM. It is expected that multiple primary 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 multispecialty subspecialty, and ABAM will be available to support ABPM to optimize a smooth transition of ADM into this new era. ABPM and ABAM are independent organizations and there is no official relationship or affiliation between them.

27. What do you mean by the “House of Medicine”?

This is a term that can be used for the group of organizations that have national influence over the medical practice, medical education, graduate medical education (training), certification of physician specialists and subspecialists and for the payment for physician services and training from private and public sources. Entities in this grouping include; ABMS, the 24 ABMS Member Boards, the Association of American Medical Colleges, the Accreditation Council of Graduate Medical Education, Center for Medicare and Medicaid Services, the Federation of State Medical Boards, the American Medical Association, the American Osteopathic Association, the American Hospital Association, and governmental offices and agencies such as ONDCP, NIAAA, NIDA, CDC, NCI, HRSA, SAMSHA and the VHA, all major health insurance organizations, etc.

28. What do you mean by the “House of Addiction Medicine”?

There are a number of organizations and individuals that represent the most significant and influential leadership of the field of ADM. These can be divided into 2 groups: as immediate family members having direct influence over the field - internal organizations, and extended family members - external organizations - having oversight or collateral influence on the field.

The internal ADM organizations include ABAM, The Addiction Medicine Foundation, ASAM, state ASAM chapters, the 40 current ADM fellowships, the ADM Fellowship Directors group, AMERSA, AOAAM and other groups such as the Research Society on Alcoholism and the College of Problems of Drug Dependence.

The external ADM organizations include: ABMS, ABPM, all ABMS member boards, ACGME, the ACGME Review Committee for ADM, AOA, AMA, the administration and leadership of addiction medicine programs and departments at hospitals, clinics, health systems and other institutions, as well as the addiction basic research community, state and federal agencies focused on advancing the science of addiction prevention and care such as NIAAA and NIDA, and philanthropy. The energy of these groups has been essential in bringing ADM to its current standing, and they will be critical in guiding and supporting ADM in this new era.

All medical boards have an interaction with the membership, academic, economic and philanthropic groups interested in the subject field. It is this relationship – sometimes the tension - that entities and individual physicians use to shape the field. For instance, the positive recent changes within the American Board of Internal Medicine are the direct result of pressure by the “House of Internal Medicine” to improve the specialty. The ADM field belongs to its practitioners. Practitioners participate, influence and run the organizations that shape the field.

29. What is the mission of The Addiction Medicine Foundation (TAMF)?

TAMF is an independent 501(c) 3 non-profit organization, formerly named The ABAM Foundation. It was incorporated for the purpose of supporting ABAM’s mission. It does so, and has been involved, in the following ways:

- A. Defining the field of addiction medicine, in collaboration with expert physicians from medical specialties whose members play a significant role in prevention or treatment of addiction.
- B. Educating various groups on addiction medicine and on its importance for health care and the training of physicians.

These groups include: the leadership of the eight medical specialty societies and accrediting boards that have a significant role in prevention or treatment of addictive diseases; the major organizational components of organized medicine: the Accreditation Council for Graduate Medical Education, the American Medical Association, the American Hospital Association, the Association of American Medical Colleges, ABMS, ABMS member boards, medical specialty societies, the Council of Medical Specialty Societies, the Federation of State Medical Boards, the National Board of Medical Examiners and others; and federal and state policy makers.

- C. Supporting the development of Fellowship training programs in addiction medicine.

This includes: a. conducting surveys to determine what training is available in addiction medicine in current residency programs of the major medical specialties, in academic medical centers, in the Department of Veterans Affairs and the Department of Defense programs, in addiction prevention and

treatment facilities, and elsewhere; b. establishing educational objectives to guide the curriculum and program design for fellowship training programs in ADM; c. Developing guidelines for accreditation and re-accreditation of Addiction Medicine training programs at the medical education graduate level; d. accrediting Addiction Medicine training programs at the graduate medical education level that meet the accreditation guidelines established by the Directors; e. Designing fellowship training programs; f. recruiting fellowship candidates; g. supporting existing fellowships and entities aspiring to establish fellowships through the TAMF national Center for Physician Training in Addiction Medicine; h. supporting fellowship program directors and assisting and encouraging the creation of a professional independent organization for those directors.

30. Is the leadership of the field of ADM transferring from ABAM to ABPM?

No. The responsibilities of ABPM are important, yet very circumscribed. Like all ABMS member boards, ABPM will be responsible for physician credentialing, the management and administration of the certification exam, and the ABMS MOC process in ADM. The leadership of the field of ADM belongs to and will remain with the House of Addiction Medicine: the physicians who practice in the specialized field of ADM are the essential members and leaders of this House.

31. Please compare specialty, subspecialty and multispecialty subspecialty.

Specialty: A defined area of medical practice that connotes special knowledge and ability resulting from specialized effort and training. There are 24 ABMS medical specialty boards.

Subspecialty: An identifiable component of a specialty, to which a physician may devote a significant portion of time. There are approximately 120 ABMS subspecialties.

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.

The ADM Certification Examination

32. How many organizations offer or have offered certification in the field of ADM?

There are 4, with a 5th in the process:

- ASAM offered a certificate in ADM from 1986 through 2008, and it was awarded to about 4,000 physicians. A data base exists but is not kept current (retired, deceased, license status, lifelong learning, etc.). ASAM certified physicians still enjoy many benefits of ASAM certification.

- The American Board of Neurology and Psychiatry (ABPN), a member board of the ABMS, began offering a subspecialty certificate in Addiction Psychiatry (ADP) in 1992. It is available only to psychiatrists. About 2,000 physicians have been granted this certification.
- The American Osteopathic Association had a certification in ADM, now closed. Seven physicians hold this certificate. There is a possibility this certification pathway will be re-opened.
- ABAM offered ADM certification from 2009 through 2015. In 2009, about 1,500 physicians holding ASAM certification were “grandfathered” into ABAM diplomate status. Others were certified through the ABAM examination, and to date over 3,900 physicians have been certified by ABAM. Active certification is dependent on enrollment and currency in the ABAM MOC program.
- The new ABMS multispecialty subspecialty ADM certificate is expected to become available after the ABMS administrative sponsoring board, ABPM administers the first ABMS ADM examination.

33. Will there be an ADM certification examination in 2016?

No, there will not be an ADM certification exam in 2016. ABAM will no longer be giving this exam. The next ADM certification exam will be administered by ABPM, the administrative sponsoring board of the new ABMS ADM multispecialty subspecialty.

34. Why has ABAM stopped offering the ADM certification exam?

For the ADM field to move forward, it is important that there be only one ongoing examination recognizing specialized cognitive knowledge in the field. This examination will be administered by ABPM.

ABAM MOC and the new ABAM Tmoc

35. Why should I stay up to date with my ABAM Tmoc?

As noted elsewhere, the ABAM MOC program has evolved and is renamed ABMA Tmoc. We strongly urge all of our diplomates to stay up-to-date with the current ABAM Tmoc requirements. Maintaining your ABAM Tmoc will very likely be an eligibility requirement for ABAM diplomates who wish to utilize the Qualifying Pathway which ABPM is expected to offer to ABAM diplomates who hold a current ABMS certificate. As previously noted, this will be conditioned on your maintaining your ABAM Tmoc. For ABAM diplomates not ABMS eligible, your ABAM certificate has value and benefit which will endure and remain important to you, your patients and the health care institutions and agencies with which you interact. It will be many years before a sufficient workforce of credentialed ABMS ADM subspecialists exist to serve the demand. ABAM diplomates who are not up to date in the Tmoc program will lose their certification.

36. What if I do not complete my ABAM MOC or Tmoc requirements?

You will lose your ABAM active certification status, and its existing benefits. If you hold a certificate from an ABMS Member Board, you will lose the anticipated eligibility advantage for the ABAM diplomates' Qualifying Pathway into the new certificate.

37. My ABAM MOC has lapsed. How can I regain active ABAM certification status?

ABAM follows similar guidance as that offered to ABMS member boards in this regard: a re-entry path that makes sense and keeps diplomates engaged in maintaining standards. If your ABAM MOC is not up to date, you will receive specific instructions for re-entry to ABAM certification shortly. You can also send an email request for information to abaminquiry@abam.net.

38. I am due to take the ABAM MOC Part III "re-certification" exam in 2016. What is the status of that exam and my continuing certification by ABAM?

If your Part III exam was due this year, you do not need to do anything at this time: you will be continually listed as credentialed as an ABAM diplomate fully compliant in ABAM MOC, and entities seeking verification of your ABAM status will be informed that you are current with all requirements.

There is a movement away from the high-stakes 7-10 year re-certification exam. It is of increasingly questionable usefulness and in view of other available educational and assessment options, ABMS and its member boards are considering more continuous and practical processes. ABAM is evolving its MOC program in this direction, and has eliminated the MOC Part III "re-certification" exam requirement. The ABAM MOC Committee is reviewing less onerous and more practical self-assessment and testing options, which will be announced soon. If you are a diplomate due for this examination in 2016, you will receive a letter from the ABAM MOC program soon, if you have not received it already.

39. What are the changes being instituted for ABAM MOC?

The name is changed, and is now the ABAM Tmoc program. ABAM has continuously evolved the ABAM MOC program to keep current or ahead of ABMS MOC guidelines, to be increasingly user friendly and educationally practical. New changes are: a) the MOC Part III "re-certification" exam has been eliminated (one ABMS member board has already done this), b) a more continuous, less onerous and more practical assessment of cognitive knowledge is under development. c) a set of Part IV Practice Improvement Modules are under development; d) the annual ABAM MOC fee has been reduced to \$225. There is no change in the requirement for enrollment and currency in the ABAM Tmoc program in order to maintain your ABAM certification.

40. Can you compare the old ABAM MOC requirements with the new ABAM Tmoc requirements?

Yes, see the chart below.

	Old ABAM MOC	New ABAM Tmoc	Comments
Part I: Licensure	Unrestricted, active medical license, verified with FSMB	Unrestricted, active medical license, verified with FSMB	No change
Part II: Lifelong Learning and Self-Assessment	26 ADM related CME credits annually; to include 9 SAMs	26 ADM related CME credits annually; to include 9 SAMs	Beginning in 2017: 8 questions per SAM (4 on the paper and 4 on the general subject area of the topic).
Part III: Cognitive Examination	Take and pass every 10 years	This requirement is eliminated. No Part III exam in 2016 is required	36 questions per year added to Part II in 2017
Part IV: Practice Performance Assessment	Practice Improvement Modules being developed	Performance Improvement Activities will be launched in 2016	Expect a practical, clinically relevant, user friendly Part IV. First two PIMs: Comprehensive Assessment, Withdrawal Management (2 per 10 years)
Cost	\$425 annual fee	\$225 annual fee	

Notes:

Unrestricted Medical License: Each license held must be valid and unrestricted and contain no restrictions on the physician's privilege to practice professionally

FSMB: Federation of State Medical Boards

SAMs: ADM Self-Assessment Modules. Diplomates select 9 articles from 2-3 dozen offered by a committee of ADM experts. A score of 75% or higher must be attained on the self-assessment exam for each article to receive credit. Each exam can be retaken one time if a passing score is not initially received. It is an “open book” format examination.

Ten Year Cognitive Examination: Previously a mainstay of all medical boards, its usefulness as a practical learning and assessment instrument is being questioned. One ABMS Member Board has already eliminated this examination, and alternatives are being considered by other boards. ABAM has a evolved Tmoc based on these and other considerations.

Part IV: Will utilize the ASAM Standards of Care: Standard I. 1: Comprehensive Assessment to develop a Practice Improvement Module (PIM). A second PIM will assess Standards II. Withdrawal Management using ASAM Performance Standard #3: 7-Day Follow-up After Withdrawal. Diplomates will be required to complete 2 PIMs every 10 years in alignment with the American Board of Preventive Medicine’s (ABPM) Part IV requirements.

ADM Fellowships and Fellows

41. 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, 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 within 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.

42. What is the exam eligibility status of physicians who have completed or are currently matriculating in an ADM fellowship?

You will be eligible to take the new ABMS ADM certification exam if you meet eligibility requirements. Time spent in an ADM fellowship will count as time to be applied for Practice Pathway eligibility.

Become Involved

43. As an ABAM diplomate, how can I engage or be involved in the ABPM, ABMS or ACGME process for ADM certification and training?

These processes are managed entirely by ABPM, ABMS and ACGME. ABAM has offered and will respond to requests from these entities through already identified experts in the ABAM certification examination and fellowship accreditation processes and programs. However, we urge you to remain an ABAM diplomate, to become an ASAM member, and to help spread the word about the field of ADM and encouraging and supporting advancement in all aspects of our field: science, research, clinical practice,

organizational capacity, leadership, workforce development, education and training, etc. You will also find that most of the organizations mentioned here have committees, subcommittees and other work groups that benefit by member or diplomate participation. In fact, your participation as a practicing addiction medicine physician in these organizations is essential in our field is to continue to advance the science and practice of ADM.

Questions and Communications

44. 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 information as soon as possible. If you call 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. You can send your inquiries to inguey@abam.net and a response will be sent as soon as possible. Please read these FAQs before sending an inquiry. If you have a question that might be useful to include in this FAQ, please let us know. These FAQs will be updated whenever there is new information to share with you.

Websites which contain general, specific and contact information for key organizations mentioned in this FAQ are listed below.

45. How does ABAM communicate with its diplomates?

ABAM uses email, USPS mail, the ABAM website and a presence at convenings of addiction medicine physicians to communicate with ABAM diplomates. Please make sure we have your current email and postal address, and please update it when you move or get a new email. If we do not have your current contact information, you are at risk of missing important news that could affect your ABAM certification.

Abbreviations and Links

ABAM= American Board of Addiction medicine: www.abam.net

ABMS = American Board of Medical Specialties: www.abms.org

ABPM= American Board of Preventive Medicine: www.theabpm.org

ACGME= American Council for Graduate Medical Education: www.acgme.org

AMA= American Medical Association: www.ama-assn.org

AMERSA=Association for Medical Education and Research in Substance Abuse: www.amersa.org

AOA= American Osteopathic Association: www.osteopathic.org

AOAAM = American Osteopathic Academy of Addiction Medicine: www.aoaam.org

ASAM = American Society of Addiction Medicine: www.asam.org

CFPC= College of Family Physicians of Canada: www.cfpc.ca

FSMB= Federation of State Medical Boards: www.fsmb.org

NIAAA= National Institute of Alcohol Abuse and Alcoholism: www.niaaa.nih.gov

NIDA= National Institute of Drug Abuse: www.drugabuse.gov

RCFSC=Royal College of Physicians and Surgeons of Canada: www.royalcollege.ca

TAMF= The Addiction Medicine Foundation: abamfoundation.org

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

Previous Versions

March 14, 2016

April 8, 2016