ACGME Program Requirements for Graduate Medical Education in Addiction Medicine
Summary and Impact of New Specialty Requirements

1. Describe the scope of practice of the new specialty, as well as the process involved in development of the requirements (e.g., date of recognition of the specialty by the ACGME Board, involvement of specialty boards/organizations, etc.).

Addiction medicine is the medical subspecialty that deals with the prevention, screening, diagnosis, treatment, and recovery of unhealthy substance use and substance use disorders (SUDs). Care is provided to patients across the lifespan who have different degrees of disease severity, provided by physicians who work in diverse settings—including clinical medicine, public health, education, and research.

The Addiction Medicine Foundation (AMF) approved program requirements for addiction medicine fellowships in 2011 and has revised them several times since. Following recognition of the subspecialty by the American Board of Medical Specialties (ABMS) (October 2015) and the ACGME (June 2016), the Program Requirements Committee of the Addiction Medicine Fellowship Directors Association (AMFDA), representing the leadership of the 41 programs then accredited by the AMF, drafted an updated version of program requirements using the ACGME Common Program Requirements as a framework. Since then, leaders in the field of addiction medicine (including Anna Lembke, MD, President, AMFDA; Kevin Kunz, MD, MPH, Executive Vice President, AMF; Tim Brennan, MD, MPH, Vice President for Medical Affairs, American Board of Addiction Medicine (ABAM); and Andrew Danzo, Director of Fellowship Development, AMF National Center for Physician Training in Addiction Medicine) have been collaborating with staff members from the ACGME’s Department of Accreditation Services (including Mary Lieh-Lai, MD, Vice President, Medical Accreditation; Jerry Vasilias, PhD, Executive Director, Review Committee for Internal Medicine; and William Hart, Associate Executive Director, Review Committee for Internal Medicine) to further edit and develop these Program Requirements in accordance with the ACGME Requirement Development Team’s process for development of new requirements.

During this process, the draft Program Requirements were shared with the Review Committees of the eight “parent” specialties (anesthesiology, emergency medicine, family medicine, internal medicine, obstetrics and gynecology, pediatrics, preventive medicine, and psychiatry) for review. No substantive feedback was returned.

2. How will the proposed requirements improve resident/fellow education?

Compliance with these Program Requirements will ensure that fellows are provided with the curriculum and resources necessary to be educated to competently provide patient care, consistently and comprehensively, to the growing population of persons with SUDs and substance-related disorders.

3. How will the proposed requirements improve patient care and patient safety/quality?

Compliance with these Program Requirements will help to ensure that physicians are educated to competently provide patient care, consistently and comprehensively, to the growing population of persons with SUDs and substance-related disorders.
4. How will the proposed requirements impact continuity of patient care?

Compliance with these Program Requirements will ensure that programs provide fellows with opportunities to provide continuing care to patients with SUDs and substance-related disorders to patients through all stages from prevention and early detection to treatment and recovery.

5. Will the proposed requirements necessitate additional institutional resources (e.g., facilities, organization of other services, addition of faculty members, financial support; volume and variety of patients), if so, how?

It is anticipated that only an institution with the appropriate facilities and volume and variety of patients would apply for accreditation of such a program; therefore, no change in institutional resources would be required.

6. How will the proposed requirements impact other accredited programs?

It is anticipated that the presence of fellows in these programs will increase the educational opportunities for residents in the collaborating programs. No impact on other specialties is expected to be substantial or negative.