

ACGME Program Requirements for Combined Programs

Summary and Impact of New 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.).

Background:

Combined programs are designed to provide residents with education in two or more specialties/subspecialties. There are currently 210 programs listed in the ACGME Accreditation Data System (ADS) as having combined specialty tracks. Of these programs, 78 are combined internal medicine-pediatrics programs, which is the only combined program format for which ACGME accreditation is currently available. The remaining 132 programs, across 22 combined program formats, are not accredited but have been approved by the relevant certifying boards, allowing graduates of combined programs to take the exams in each of the specialties included in the combined format. These unaccredited combined programs are required to provide data to the ACGME annually, including Resident/Fellow and Faculty Surveys, Milestones, and Case Log data, if applicable for the specialties/subspecialties. In addition, some certifying boards provide pass rate data for residents/fellows in unaccredited combined programs. However, until now there has been no specific review process for the unaccredited programs, and therefore no defined oversight of the education of residents/fellows enrolled in a combined program.

Accreditation process for combined programs:

At its February 2024 meeting, the ACGME Board of Directors approved the following plan to initiate accreditation of combined programs:

- (1) Existing unaccredited combined programs listed on the ACGME website will be offered the opportunity to opt in to the accreditation process without having to apply for accreditation. Programs that opt in, and any future applications, will be assigned to one of the participating specialty Review Committees. It is anticipated that the opt-in window will open on October 1, 2024 and close on January 2, 2025. Details regarding the opt-in process will be shared prior to October 1. Programs that opt in will receive a status of initial accreditation effective July 1, 2025.
- (2) Combined programs will be assigned a stand-alone program identification number, which will be linked to the participating programs.
 - The core faculty rosters for each of the participating programs will be linked to the combined program, and the program director will designate which of those core faculty members will be assigned to the combined program core faculty.
 - Residents will be listed in the roster of the combined program and will no longer be listed in the rosters for the participating programs.
- (3) Residents/fellows in a combined program will:
 - Take the Resident/Fellow Survey for the combined program, not the respective program Surveys.
 - Be evaluated using the Milestones for each specialty/subspecialty participating in the combined program.

- Enter Case Log data, as applicable for participating specialties/subspecialties. Board pass rate data for graduates of combined programs will be reported for the combined program and the participating programs as applicable.
- (4) Combined programs will be expected to comply with the Program Requirements for each participating specialty/subspecialty in addition to the new Program Requirements for Combined Programs.
 - (5) Combined programs will be assigned to a Review Committee for one of the specialties/subspecialties participating in the combined format. If one of the specialty/subspecialty programs participating in the combined program only intends to appoint residents/fellows to the combined program and not to one of the specialty/subspecialty programs, the combined program will be assigned to the Review Committee in the specialty of the program that does not appoint residents/fellows. For example, if a combined medical genetics and genomics/pediatrics program only intends to appoint residents to the combined program and not the medical genetics and genomics program, the Review Committee for Medical Genetics and Genomics will be assigned the combined program. A list of combined formats and the corresponding Review Committee assignments appears at the end of this document. However, the accreditation process is designed to ensure that the other specialty Review Committee(s) will provide the assigned Committee input on the program's compliance with Program Requirements specific to their specialty, and other accreditation-related matters.

Proposed Program Requirements:

The ACGME invites comments on the proposed Program Requirements for Combined Programs. Prior to finalizing the draft requirements, the ACGME convened a focus group of experienced program directors for combined programs in a variety of specialties to review the draft and provide feedback. The ACGME extends its gratitude to these individuals for lending their time and expertise to help us refine the requirements before the public comment period.

As stated above, a combined program will be expected to comply with the Program Requirements for each participating specialty/subspecialty. The additional proposed Program Requirements for Combined Programs address expectations unique to the combined program.

It is anticipated that the requirements will be reviewed and approved at the September 2024 ACGME Board meeting.

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

Accredited combined programs will be subject to the same review process as the programs that participate in the combined format, allowing the ACGME to assess the quality of education for residents/fellows in these combined programs. Accreditation of these programs will also allow the Review Committees to identify areas of needed program improvement and share with programs data that can be used for program improvement, including Resident/Fellow and Faculty Survey data.

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

Physicians who have been trained in multiple specialties/subspecialties serve an important role in meeting the health care needs of patients in the communities they serve through leveraging the unique opportunities for innovation that these combined programs provide. The goal of accrediting combined programs is to ensure that physicians who complete these programs are well prepared to meet the needs of their future patients.

4. How will the proposed requirements impact continuity of patient care?

No direct impact on continuity of care is anticipated.

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?

Combined programs will be required to pay the ACGME's annual program accreditation fee. In addition, new combined programs that apply for accreditation will be assessed an application fee. Combined programs that opt in to the accreditation process will not be required to apply for accreditation and will not pay an application fee. Information regarding the fee structure is available [here](#). The ACGME periodically reviews the accreditation fee structure and plans to conduct such a review over the next several months. If needed, updated information regarding the accreditation fee structure will be shared as it becomes available.

The proposed requirements specify minimum dedicated time for the program director and the program coordinator. While it is recognized that this will require additional financial resources for most programs, it is essential that the program director and coordinator are provided with sufficient time and support to effectively administer the educational program.

Additionally, there must be a Clinical Competency Committee and a Program Evaluation Committee specific to the combined program. This will require additional administrative time for the faculty members who serve on those committees.

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

Combined educational programs require collaboration and cooperation between the combined program and its participating programs. The Review Committees will monitor the educational experience of residents/fellows in each of these programs to ensure that all residents are provided with the required experiences and resources.

Review Committee Assignments by Specialty

Combined Program Specialties	Assigned Review Committee
Internal Medicine / Emergency Medicine	Emergency Medicine
Internal Medicine / Psychiatry	Psychiatry
Psychiatry / Family Medicine	Family Medicine
Pediatrics / Emergency Medicine	Emergency Medicine
Pediatrics / Anesthesiology	Anesthesiology
Pediatrics / Psychiatry / Child and Adolescent Psychiatry	Psychiatry
Pediatrics / Physical Medicine and Rehabilitation	Physical Medicine and Rehabilitation
Internal Medicine / Anesthesiology	Anesthesiology
Internal Medicine / Preventive Medicine	Preventive Medicine
Family Medicine / Preventive Medicine	Preventive Medicine
Family Medicine / Osteopathic Neuromusculoskeletal Medicine	Family Medicine
Medical Genetics and Genomics / Maternal-Fetal Medicine	Medical Genetics and Genomics
Psychiatry / Neurology	Psychiatry
Reproductive Endocrinology and Infertility / Medical Genetics and Genomics	Medical Genetics and Genomics
Pediatrics / Medical Genetics and Genomics	Medical Genetics and Genomics
Internal Medicine / Medical Genetics and Genomics	Medical Genetics and Genomics
Diagnostic Radiology / Nuclear Medicine	Radiology
Internal Medicine / Emergency Medicine / Critical Care Medicine	Emergency Medicine
Internal Medicine / Dermatology	Dermatology
Emergency Medicine / Family Medicine	Emergency Medicine
Emergency Medicine / Anesthesiology	Anesthesiology
Emergency Medicine / Aerospace Medicine	Emergency Medicine