

FREQUENTLY ASKED QUESTIONS

The following are answers to frequently asked questions about:

1. **GRANDFATHERING: ASAM CERTIFICATION TO ABAM CERTIFICATION; AND ABAM CERTIFICATION TO ABMS CERTIFICATION** (pp. 1-2).
2. **THE MISSIONS OF THE AMERICAN BOARD OF ADDICTION MEDICINE AND THE ABAM FOUNDATION** (pp. 2-3).
3. **THE AMERICAN BOARD OF MEDICAL SPECIALTIES' (ABMS) RECOGNITION OF ADDICTION MEDICINE** (pp. 3-4), and
4. **THE RATIONALE FOR THE GRANDFATHERING AND CREDENTIALS VERIFICATION FEES** (pp. 4-5).

GRANDFATHERING

Q. What is “grandfathering,” and what are the grandfathering procedures?

Answer: Grandfathering is the inclusion and certification of physicians into a new specialty, or subspecialty, for those who have experience and expertise in the field. New medical specialties and subspecialties make provisions for “grandfathering” practicing physicians who meet certain criteria (experience, training, testing, etc.). There are two grandfathering stages for Addiction Medicine:

1. The immediate grandfathering from ASAM certified to ABAM certified: The objective in creating ABAM is to increase the number of qualified providers for patients suffering from addictive disorders. Therefore, the procedures for granting ABAM certification (ABAM Diplomate status) to ASAM certified physicians and to others who qualify will be as liberal as possible. Procedures for grandfathering ASAM certified physicians are described in the application form that will be sent to all ASAM certified physicians.

2. The future grandfathering from ABAM certified to ABMS board certified: Grandfathering is the pathway to acquire ABMS certification in a new specialty or subspecialty, without having to complete all of the training requirements that will eventually be established, such as completion of an ACGME-accredited residency program. It is expected that the ABMS grandfathering criteria for certification eligibility would include clinical experience, certification by ABAM, and Diplomate status with an established ABMS member board. The customary grandfathering period is usually about 5 years or 3 exam cycles, after the formal recognition of a new field. For ASAM and ABAM certified physicians who are not already Diplomates of an ABMS member board, ABAM will facilitate and advocate for the establishment of non-onerous pathways for eligibility for an ABMS-recognized Addiction Medicine examination.

Some ASAM certified physicians are not certified by an ABMS member Board. When ABAM makes application to the ABMS to recognize Addiction Medicine, ABAM will advocate that all physicians previously awarded ABAM Diplomate status should be recognized as having Diplomate status by an ABMS member board; and ABAM will advocate that non-onerous pathways be established to become eligible to be certified by an ABMS board.

Q. Why is grandfathering important?

Answer: Grandfathering creates a limited opportunity for physicians working in Addiction Medicine to gain ABAM certification, and to eventually sit for a new ABMS certifying examination in Addiction Medicine on the basis of experience. After this period is over, only those completing an ACGME approved residency would be eligible to be ABMS Diplomates in Addiction Medicine.

By becoming an ABAM-certified physician now, a physician enters the pool of physicians potentially eligible to be “grandfathered” into the envisioned ABMS specialty or sub-specialty certification program that ABAM and The ABAM Foundation were created to achieve.

Q. May ABAM diplomates refer to themselves as “Board certified?”

Answer: Yes. A physician certified by ABAM is board certified. However, ABAM is an independent board, and is not an ABMS member board. Therefore, ABAM certification is not ABMS board certification.

**THE AMERICAN BOARD OF ADDICTION MEDICINE
AND
THE ABAM FOUNDATION**

Q. Why must there be an independent American Board of Addiction Medicine (ABAM)? Why can't ASAM just continue to offer the ASAM certification examination and set up training programs, and then apply to the ABMS to recognize Addiction Medicine?

Answer: The creation of ABAM is the first official step toward seeking ABMS recognition of Addiction Medicine. The ABMS procedures for seeking recognition stipulate that “a medical specialty board must be a separately incorporated, financially independent body which determines its requirements and policies for certification, selects the members of its governing body in accordance with the procedures stipulated in its bylaws, accepts its candidates for certification from persons who fulfill its stated requirements, administers examinations, and issues certificates to those who submit to and pass its evaluations.” (*Approval of New Examining Boards in Medical Specialties: Twelfth Revision of Essentials for Approval of Examining Boards in Medical Specialties*, November 8, 2005; American Board of Medical Specialties.)

Q. What is ABAM’s Mission?

Answer: ABAM’s mission is to promote the public welfare by contributing to the improvement of the quality of care in the medical specialty of Addiction Medicine; establish and maintain standards and procedures for certification, re-certification and maintenance of certification: and evaluate and certify physician specialists in Addiction Medicine.

Q. What is the Mission of The ABAM Foundation?

Answer: The ABAM Foundation is to support ABAM’s work by defining the field (core content, core competencies and scope of practice); designing training; and informing the professions, policy makers and the public about addiction medicine as a specialty. The ABAM Foundation is authorized, as a not-for-profit 501 (c) (3), to receive tax-deductible contributions.

Q. Why is it called The ABAM Foundation, instead of The American Board of Addiction Medicine Foundation?

Answer: The state of Delaware, in which ABAM and The ABAM Foundation are incorporated, would not authorize the use of “The American Board of Addiction Medicine Foundation,” because that name was too similar to that of the American Board of Addiction Medicine.

Q. How do the ABAM and The ABAM Foundation roles differ from one another?

Answer: ABAM’s primary purpose is to offer examinations and grant certificates to individual physicians. ABAM will establish criteria for certification, develop an application and credentials verification process, and develop and administer the examination.

The role of The ABAM Foundation is complementary, but different. The Foundation will support steps leading up to a successful application by ABAM to the ABMS for a specialty or sub-specialty certification program to be created by one or more member boards of the ABMS. Specifically, the ABAM Foundation will define the core content, core competencies and scope of practice of Addiction Medicine; catalogue the currently available fellowships in Addiction Medicine that may be open for non-psychiatrists to enter; identify examples of “best practices” in such fellowships; review the curriculum content of the best programs and develop a model curriculum for Addiction Medicine training programs. The Foundation will then either begin accrediting training programs itself, or will apply to the Accreditation Council for Graduate Medical Education (ACGME) to accredit them. (To learn more about the ACGME and the ABMS, one can refer to the April, 2007 Report of the ASAM Medical Specialty Action Group: www.asam.org)

Q. Who serves on the ABAM and The ABAM Foundation Board of Directors?

Answer: ABAM and The ABAM Foundation are governed by two separate Boards, composed of the same fifteen (15) Directors, with distinct responsibilities for each organization. One (Specialty) Director is elected from each of the eight specialties that provide significant prevention of or treatment for addictive disorders: emergency medicine, family medicine, internal medicine, obstetrics and gynecology, pediatrics, psychiatry, preventive medicine and surgery. Seven At-Large Directors are elected without regard for their medical specialty, in order to provide special skills to ABAM and The ABAM Foundation and their Committees. Two of the At-Large Director seats are currently slotted for ASAM-certified physicians who are leaders within the American Society of Addiction Medicine.

AMERICAN BOARD OF MEDICAL SPECIALTIES RECOGNITION

Q. How long will it take to achieve ABMS recognition, either through a specialty, or a subspecialty certification program?

Answer: The process may take 5 to 8 years or longer, depending on how successful Addiction Medicine will be in establishing and filling ACGME accredited training programs, and how supportive the current ABMS boards will be of Addiction Medicine’s application. The key is to establish Addiction Medicine training programs (fellowships) that are rigorous, available at a sufficient number of locations, and capable of enrolling a significant number of trainees. Once the training programs are established, the next step is to have them accredited by the ACGME.

Q: Are there currently any ACGME-accredited fellowships in Addiction Medicine?

Answer: No. There are a number of Addiction Psychiatry fellowship programs that accept non-psychiatrists as trainees and provide a training process equivalent to the training received by the Addiction Psychiatry fellows. Upon completion of their fellowship, non-psychiatrists can receive a certificate from the institution that offers the fellowship, but this certificate is not recognized by the ACGME.

Q. How will ACGME-accredited fellowships in Addiction Medicine be established?

Answer: The ABAM Foundation Training Committee will first take an inventory of training programs in Addiction Medicine. The Committee will use the Core Content, Core Competencies and Scope of Practice of Addiction Medicine to design a model curriculum for Addiction Medicine training, so that training programs can produce graduates that have mastered the knowledge, skills and competencies of the field of Addiction Medicine. The ABAM Foundation may then accredit 10-20 Addiction Medicine training programs, using the Scope of Practice and Core Competencies criteria. Lastly, ABAM will submit the Scope of Practice and Core Competencies documents, along with the list of ABAM Foundation accredited programs, to the LCME as the first step on the path to the ABMS.

FEES FOR GRANDFATHERING AND CREDENTIALS VERIFICATION

Q. Why is ABAM charging credentials verification and grandfathering application fees?

Answer: ABAM asked ASAM to conduct the credentials verification for the inaugural diplomates of ABAM. ABAM will accept a letter from ASAM stating that the applicant for ABAM certification is an ASAM certified physician in good standing.

ABAM will compensate ASAM for verifying the applicants' credentials. The processing fee will be \$75 for ASAM members and \$475 for non members. Those non-members, who wish, can join ASAM and be eligible for the \$75 verification fee.

Q. How was the graduated fee structure developed for the inaugural group of ABAM diplomates?

Answer: The costs for sitting for the ABAM examination, beginning in 2010 may be in the \$2,000 – \$2,500 range, based on benchmarking ABAM has done in the “marketplace” of medical certification boards.

ASAM physicians certified in 1996 or prior have a lifelong credential not requiring re-certification. Physicians certified in that period should not be “disenfranchised” and lose the value of that certification. Hence, the current process for “grandfathering” of ASAM-certified physicians into ABAM-certified physicians will provide ABAM diplomates from that period with a credential that will not require re-certification.

Physicians certified in 1998 and after will recertify with the ABAM examination, at the fee structure charged by ABAM at the time.

The grandfathering graduated fee structure allows a physician to obtain an ABAM certificate and be recognized as “board certified” in Addiction Medicine, a diplomate of ABAM, prior to their date for re-certification.

This credential will provide the ABAM-certified physician with the opportunity to participate in the second phase of grandfathering, from certification by ABAM (a non-ABMS recognized board) into the new envisioned ABMS-recognized specialty board or sub-specialty certification program.

In developing the graduated fee schedule, ABAM and ASAM determined that physicians facing the re-certification requirement soonest (and, with that, the associated costs) should face the lowest financial burden now for obtaining inaugural ABAM diplomate status.

Q. How will ABAM use the credentials verification and grandfathering application fees?

Answer: Every certification board assesses fees to physicians who seek to become diplomates of that board. There is an application fee and an examination fee. The application fee is to cover the board's cost of reviewing applications and confirming that an applicant meets the minimum requirements for sitting for the examination. This includes a review of the individual's credentials, that the individual has completed the training requirements the board has set for certification, has a medical license in good standing, etc. This process is labor-intensive for the board.

There are also examination-related expenses, such as the costs of test sites, computers, and the administration and grading of the examination. The majority of the costs are incurred for the development of the test by the ABAM Examination Committee (who volunteer their time) with the National Board of Medical Examiners.

Finally, there are staff and governance costs, including the costs for the ongoing operations of the board itself. The Directors (who volunteer their time) meet several times a year to oversee the integrity of the certification process and the examination.

The annual operational costs for ABAM and The ABAM Foundation and their committees are estimated to run \$1.5 million per year. The ABAM Committees are: Credentialing, Examination, Nominating and Finance. The ABAM Foundation Committees are: Training and Accreditation, Education, Nominating and Finance.

All monies received by ABAM and The ABAM Foundation will be used to serve your patients and you by improving the quality of care, and by establishing and maintaining standards of excellence in the medical specialty of Addiction Medicine.

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