

SUBJECT: ADDICTION MEDICINE CAQ

SUBMITTED BY: American Osteopathic Academy of Addiction Medicine

REFERRED TO: < name of entity (please leave blank – staff will assign a reference committee)>

1 WHEREAS, the AOA approved the Addiction Medicine conjoint CAQ in 1995; and

2 WHEREAS, on April 12, 2016, the American Osteopathic Association (AOA) passed a
3 resolution that will provide DOs who are ABAM diplomats with a process to attain an
4 AOA subspecialty certification in Addiction Medicine; and

5 WHEREAS, there are many DOs who will not benefit from the 2016 AOA resolution and still
6 seek subspecialty certification in Addiction Medicine, including those who have
7 completed an AOA approved Addiction Medicine fellowship program; and

8 WHEREAS, the Centers for Disease Control and Prevention (CDC) anticipates that the
9 number of death for all drug overdoses will be 74,000 in 2017. Around 66% of the
10 more than 63,600 drug overdose deaths in 2016 involved an opioid. On average, 115
11 Americans die every day from an opioid overdose; and

12 WHEREAS, the Department of Health & Human Services, The White House Office of
13 National Drug Control Policy, and the Department of Substance Abuse and Mental
14 Health Services have acknowledged a severe shortage of Addiction Medicine specialists
15 to treat the epidemic of opioid and alcohol addictions and the AOA has committed to
16 assisting in training more physicians in substance use disorder (SUD). In October 2017
17 President Donald Trump formally declared the opioid crisis a public health emergency;
18 and

19 WHEREAS, more hospitals and insurance companies are requiring certification for the
20 treatment of addiction; those who are certified are also able to command more income
21 and opportunities; and

22 WHEREAS, there is a lack of parity among DOs and MDs now that allopathically boarded
23 physicians can become qualified to certify in addiction medicine as a subspecialty under
24 the American Board of Medical Specialties (ABMS) Preventive Medicine Certifying
25 Board, thereby making DOs who are not allopathically boarded ineligible; and therefor
26 be it

27 RESOLVED, that Osteopathic physicians who have completed AOA approved fellowships in
28 Addiction Medicine be allowed to take the primary CAQ examination in Addiction
29 Medicine; and, be it

30 RESOLVED, that clinical practice pathway previously approved by the AOA in Addiction
31 Medicine be reopened for six (6) years for all DOs who wish to become certified in the
32 subspecialty of Addiction Medicine.

Explanatory Statement:

FISCAL IMPACT: \$

Reminder, a resolution with fiscal impact must be sent to the Finance Committee for their review and action.>

ACTION TAKEN _____

DATE _____

WHEREAS, DO physicians have played critical and leadership roles in academic and federal addiction medicine activities; and