Exploring the Value of the ABMS Brand
An Addiction Medicine Perspective

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Addiction Medicine: How we got here

1805 - 2006

Dr. Benjamin Rush: Addiction is a Disease

CSAM donates exam to ASAM

ASAM votes for independent ADM board

1805

1954

1986

1989-1998

2007

Dr. Ruth Fox forms ASAM forerunner

ASAM Goals: ABMS recognition and fellowships

The Addiction Medicine Foundation
Multidisciplinary Approach to the Treatment of Alcoholism

Abstract
Treatment of the alcoholic, to be successful, must be multidisciplinary. The use of psychotherapy or counseling, disulfiram (Antabuse), Alcoholics Anonymous, group therapy, psychodrama, occasionally LSD, sometimes hypnosis, and treatment of the families
ASAM Board Approves Plan to Seek Specialty Recognition of Addiction Medicine

Meeting in Miami during the Society’s 38th Annual Medical-Scientific Conference, ASAM’s Board of Directors approved a recommendation from the Medical Specialty Action Group (MSAG) that ASAM proceed with the steps necessary to achieve uncertain as to how to identify a physician who can help them with such a disorder. Thus, the pursuit of ABMS recognition of Addiction Medicine serves not only ASAM members, but their patients, and also the public health.

Through a process of consultation with...
Incorporated August, 2007

(Previously named The ABAM Foundation)
Certification Matters™

American Board of Medical Specialties

24 Member Boards 37 Primary Specialties and 86 Subspecialties
ADM Timeline 2007-2016

- ABAM & TAMF Incorporated
- First accredited ADM Fellowships Projection: 125 by 2025
- ADM certification up 330%
- ABPM seeks ADM ABMS recognition
- First ABAM & TAMF Annual Meeting
- ASAM Exam Transfers To ABAM
- MOC Portal Launched
- ACGME ADM accreditation process begins
- March 14th ABMS recognizes ADM
- 40th ADM Fellowship accredited
Operational Success

– 3,900 ABAM diplomates

– Exam applicants increase 330% in 10 years

– ABAM MOC; Parts I, II and III: 85% enrollment

– 47 fellowships designed, established, TAMF accredited

– Fellowship goal of 125 by 2025 on track
Strategic Success

– ABMS ADM recognition achieved

– ACGME accreditation process underway

– Linkages Built
  • House of Medicine, House of Addiction Medicine
  • Government
  • Philanthropy
  • Other sectors
New ADM Certificants, Annualized, 1993 - Present

ABAM, TAMF
Incorporated

ACGME residency required

The Addiction Medicine Foundation
ABAM Tmoc: State of the Art

Meets ABMS Guidance

Benefited from others’ trials

User friendly, practical

Responsive

Enrollment rate: 85%

Web portal based

Evolving
Impact of ADM ABMS Recognition
Impact on Medicine and Health Care

• Addresses stigma and ignorance by the medical profession

• Addiction is recognized as preventable and treatable

• Inclusion of ADM in GME and thus into medical education

• Improved quality and access to care

• True parity for patients and physicians
Impact of Recognition upon ABAM

• Unified ADM Field: One Board, One Exam
• ABAM ceases new certifications, dissolves
• Active ABAM diplomates can remain certified
• ADM Fellowships transition to ACGME
Medicine Responds to Addiction
ADM Fellowships
Fellowships are Essential for ADM

• Fellowships : Life Blood of subspecialty

• No Fellowship Development = No Field

• Responsibility & Cost of Development?
  – Training is not a board function
  – Specialized non-profit required
ADM Fellowships: Faculty and Fellows

Faculty
- Psychiatry, 31%
- Internal Medicine, 31%
- Family Medicine, 26%
- Pediatrics, 5%
- Emergency Medicine, 3%
- Anesthesiology, 3%

Fellows
- Family Medicine, 44%
- Internal Medicine, 24%
- Other, 8%
- Preventive Medicine, 2%
- Psychiatry, 2%
- General Surgery, 3%
- OB-GYN, 3%
- Emergency Medicine, 5%
- Anesthesiology, 8%

Graduates

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Immediate Priorities - ABAM

• Messaging on ABMS recognition
• Bring diplomates into ABMS ADM
• Bring other physicians into ABMS ADM
• Evolve the best ADM MOC system
• Support ABPM certification
Benefits of the ABMS Brand to Addiction Medicine

1. Legitimacy!
2. Workforce Expansion
3. Transition to the ACGME
4. Collaboration
Legitimacy

- Increased exposure to potential ADM trainees
- We are now "listed" with all other specialties
- Improvement in billing and documentation.
Legitimacy (Cont’d)

• We can now state clearly who we are and what we are doing.
• Increased interest of medical schools & institutions
• Now that we are a "real" specialty, the schools/institutions are responding
Workforce Expansion

• Massive and overwhelming response among physicians applying for the 2017 Addiction Medicine Board Exam

• Get in now via ABPM, or get left out later
Transition to the ACGME

• Without ABMS, there is no ACGME for Addiction Medicine Fellowships
• Without ACGME, there can be no expansion of fellowships (or the funding that comes from ACGME accreditation)
Collaboration

• Now that we are “in the house of medicine”, we have instant credibility
• Ease of collaboration across specialties as we are a known entity
Our Gratitude and Appreciation
THANK YOU!