The Single GME Accreditation System
The U.S. health care landscape is at a crossroads; the medical professions must evolve and adapt to meet changing expectations of our stakeholders.

The new era of health care reform is an opportunity to build and strengthen the osteopathic medical profession.

We can agree that it belongs at the forefront of health care, and we are committed to keeping it there.
The single GME accreditation system is a historic opportunity to **usher in a new age of the DO.**

It represents a shared vision on a new approach to health care delivery in the U.S. – One focused on enhancing consistency of process and strengthens the public trust.

It plays to our strengths in improving health and wellness, and taps into our expertise in addressing gaps and unmet needs in underserved communities.

It empowers young professionals with the power of choice and encourages them to embrace and practice our unique principles and practices throughout their careers.
- Benefits the public and patients
  - Have a responsibility to help patients improve health.
  - A single GME accreditation system moves the health care industry toward a consistent approach to training that encourages all physicians to deliver high quality care in a patient-centered, holistic fashion.
- Benefits our students, interns and residents
  - Aligns competency standards and expands access to training for all current and future physicians
- Benefits our profession
  - Preserves the unique dimensions of the osteopathic medical profession
  - Greatly increases visibility of osteopathic medicine in wider health care profession
  - Positions osteopathic medicine as integral to U.S. health care delivery system
  - Unified voice on GME access and funding issues strengthens physician advocacy in Washington, D.C., and at the state and local levels.
Overall, we are seeking to enhance quality, efficiency, relevance and innovation in post-graduate GME in the U.S.

Throughout, we’ve had four goals:

1. Act in the best interest of patients;
2. Ensure the perpetuation of the unique dimensions of osteopathic medicine;
3. Secure broad access to postdoctoral training for our future graduates; and
4. Affirm that DOs have an appropriate role and voice in governance and administration of the new system
The agreement on a single system meets all four of these important goals.
3. Under the agreement, all AOA-approved programs will transition to ACGME accreditation between July 1, 2015, and June 30, 2020. The AOA will stop accrediting GME programs as of July 1, 2020.
   
   a. Beginning July 1, 2015, AOA-accredited programs may apply for ACGME accreditation; applying gives them “pre-accreditation” status
   b. DOs who complete programs with pre-accreditation status will meet ACGME initial year and fellowship eligibility requirements

4. AOA-certified DOs will be eligible to be ACGME faculty; they will not automatically qualify as program directors, but may be recognized by the applicable RRC on a case-by-case basis.
   
   a. Some programs may require appointment of a program co-director certified by ABMS; programs seeking osteopathic recognition may require a program co-director certified by AOA
While the current GME environment will change regardless of our actions, there are other osteopathic entities that will not be affected.

Board Certification, CME, Predoctoral Education, COMLEX – All will continue to operate according to current procedures.

In short, the agreement streamlines the accreditation of GME programs but preserves and protects the structures within each medical profession.
Consequences of maintaining separate GME accreditation systems would put our profession at grave risk.

1. If ACGME Common Program Requirements go into effect without the unified system, DO graduates will have very limited opportunities to move from AOA postdoctoral programs to ACGME training in residencies and fellowships.

2. Osteopathic GME programs will be perceived as the “second choice,” which could spill over into perceptions of OGME’s overall quality.

3. The shortage of OGME slots will continue and likely get worse as the number of DO graduates continues to increase (in 2014, there were 2,988 funded 1st year slots for an estimated 5,153 DO graduates).

4. The separation in the osteopathic community between those who are AOA-trained and certified and the DOs who are ACGME trained and ABMS certified would be amplified.

5. With the number of MD and DO graduates increasing, some of the current dually accredited programs may choose to become ACGME-only.

6. The osteopathic community would be expected to develop and implement our own version of a competency based accreditation system as the ACGME promotes its Next Accreditation System.

7. Possibility that federal government will cease funding a dual system for GME, and that ACGME will become the preferred model or that the federal government will take control if we are not able to solve problems on our own.
We’ve heard many voices in support of the single GME accreditation system, both from within our profession and from others in the health care delivery system.
The osteopathic medical profession will become stronger in the single GME accreditation system by preserving, protecting, and enhancing the philosophies and practice of the distinctive care we provide to patients. Our voice becomes stronger as well, from advocating in state and federal governments for increased funding, to building the best model for postdoctoral education and being excellent stewards of resources entrusted to us.

- We ask for your patience and trust. This is a marathon, not a sprint.
- Now we begin the process of working through operational details.
- Committed to frequent, multi-directional and transparent communication throughout the process.
- Once in a lifetime opportunity for us to help increase the visibility of osteopathic medicine and share its benefits with the world.
Many details yet to be worked out in discussions with ACGME and AACOM.
While I can’t give you all the answers, I can promise that we are committed to transparently sharing what we do know.
Best source of facts will be updates from us as well as FAQs and other information posted on AOA’s and AACOM’s websites.
• Please direct all questions and concerns to the AOA to triage and manage responses.
• Together, a single GME system will prepare future generations of physicians with the highest quality GME and the broadest opportunities to serve the public.