

## **PHYSICIAN BOARD CERTIFICATION in HOSPICE AND PALLIATIVE MEDICINE (HPM)**

### **Board Certification for Physicians**

Certification is a rigorous, comprehensive program for evaluating physician knowledge, skills and attitudes to assure patients, employers and payers that a physician has achieved competence for practice in a given field. Certification obtained through a reputable board denotes that a physician has gone beyond the minimum requirement necessary for licensure and provides assurance that a physician is able to deliver optimum care in a specific area of medicine.

### **The First Decade of Physician Board Certification in HPM**

From 1996 through 2006 board certification for physicians practicing Hospice and Palliative Medicine was administered by the American Board of Hospice and Palliative Medicine (ABHPM.) Over 2,100 physicians obtained certification from ABHPM. A directory of physicians certified by ABHPM may be found at [www.abhpm.org](http://www.abhpm.org). The ABHPM was not recognized by the ABMS, but worked successfully over the course of the decade to persuade the ABMS to recognize Hospice and Palliative Medicine as a medical subspecialty.

### **The Importance of Recognition by the American Board of Medical Specialties (ABMS)**

The ABMS is the organization that formally recognizes specialties and subspecialties in allopathic medicine and confers specialty and subspecialty status. Although voluntary, this recognition is used by the government, health care systems, and insurers as evidence of high standards. There are currently 24 member boards of the ABMS (see [www.abms.org](http://www.abms.org)). These 24 member boards constitute the officially recognized allopathic specialties of medicine in the United States.

Accreditation is a parallel process to board certification. Accreditation is given to educational programs. Certification is awarded to individuals. The link is that successful completion of an accredited educational program is usually a prerequisite to admission to an ABMS board examination. Accreditation of graduate medical education is provided by the Accreditation Council of Graduate Medical Education (ACGME) [www.acgme.org](http://www.acgme.org).

### **2006 Brings Change: HPM Recognized as an Official Medical Subspecialty**

- In September 2006, the American Board of Medical Specialties (ABMS) approved the creation of **Hospice and Palliative Medicine (HPM)** as a subspecialty of ten participating boards (see list below). As a result of this approval, the first ABMS-recognized examination will be administered in 2008.
- In June 2006, the Accreditation Council for Graduate Medical Education (ACGME) made the decision to begin the process of ACGME accreditation for Hospice and Palliative Medicine fellowship programs. This decision influences future eligibility for the certification examination. Starting in 2013, only applicants who have completed an ACGME-accredited hospice and palliative medicine fellowship will be eligible to take the certification exam.
- Recognition by osteopathic medical organizations is expected to follow late in 2006 or early in 2007.

### **Impact of ABMS and ACGME on Physician Certification Exams:**

- ABHPM will discontinue its certification program after 2006. There will be no certification examination in 2007.
- Starting in 2008, a new certification exam will be available, administered by co-sponsoring member boards of the ABMS (see eligibility requirements listed below).
- Physicians will only be allowed to sit for the new board examination if they are certified by one of the ten participating specialty boards.
- Physicians who already hold ABHPM certification will need to take the new certification examination before the end of the grandfathering period (currently expected to run from 2008-2012).
- Starting in 2013, only Fellowship trained candidates will be eligible for the exam.

### **Eligibility Criteria for Admission to ABMS Sponsored Certification Examination**

Each sponsoring board shall apply the following criteria for admission to the examination:

1. Valid certification by the relevant board;
2. A continuously held, active, valid, and unrestricted license to practice in at least one of the states, possessions, or territories of the United States or a province of Canada and in each jurisdiction in which the physician practices. All licenses that the physician holds must be valid, unrestricted, and unqualified;
3. Verification of satisfactory completion of twelve months of ACGME-accredited training in Hospice and Palliative Medicine; and
4. Verification of clinical competence in Hospice and Palliative Medicine.

During the first five years of certification in Hospice and Palliative Medicine (2008-2012), candidates who have not had formal training in an ACGME-accredited Hospice and Palliative Medicine fellowship may be admitted to the examination if, before the application, they demonstrate at least 800 hours of clinical involvement during the last five years of subspecialty level practice of hospice and palliative medicine including:

1. At least two years and 100 hours of participation with a hospice or palliative care team, and
2. Active care of at least 50 terminally ill patients (25 for pediatrics.)
3. OR prior certification by the American Board of Hospice and Palliative Medicine and evidence of clinical activity in hospice and palliative medicine in the two years preceding the application.

### **Sponsoring ABMS boards as of September 19, 2006:**

- American Board of Anesthesiology
- American Board of Emergency Medicine
- American Board of Family Medicine
- American Board of Internal Medicine
- American Board of Pediatrics
- American Board of Physical Medicine and Rehabilitation
- American Board of Psychiatry and Neurology
- American Board of Radiology
- American Board of Surgery
- American Board of Obstetrics and Gynecology [pending approval of the ABOG]

**For more information, go to: [www.abhpm.org](http://www.abhpm.org)**

October 2006