



Addiction Medicine Fellowship (AMF) and Integrated Substance Use Disorder Training Programs

Advisory Committee on Interdisciplinary
Community-Based Linkages
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Vision: Healthy Communities, Healthy People



Agenda

- Overview of the Addiction Medicine Fellowship (AMF)Program
- Overview of the Integrated Substance Use Disorder Training (ISTP)
- Q & A Session
- Contact Information









• Legislative Authority: Title VII, Section 760(a)(1) of the Public Health Service Act (42 U.S.C. § 294k(a)(1)), Training Demonstration Program







Purpose: To expand the number of fellows at accredited AMF and Addiction Psychiatry Fellowship (APF) programs trained as addiction medicine specialists who work in underserved, community-based settings that integrate primary care with mental health disorder and substance use disorder (SUD) prevention and treatment services.

Goal: Program is designed to **foster robust community-based clinical training** of **addiction medicine or addiction psychiatry physicians** in underserved, community-based settings who see patients at various access points of care and provide addiction prevention, treatment, and recovery services across healthcare sectors.





Program Objectives:

- Increase the number of board certified addiction medicine or addiction psychiatry subspecialists produced per program annually by providing stipends for new addiction medicine or addiction psychiatry fellowship slots and additional program support to sponsoring institutions.
- 2. Collaborate and establish formal relationships with underserved, community-based settings (such as HRSA-supported health centers, integrated behavioral health community health centers, Medication Assisted Treatment (MAT) facilities, and affiliated evidence-based substance use treatment centers) to provide training of AMF Program fellows at these sites.
- Develop or enhance training for faculty from collaborating programs to create an infrastructure of skills and expertise that supports training fellows to provide opioid use disorder (OUD) and other SUD prevention, treatment and recovery services on integrated, interprofessional teams.

FY 2022
Appropriation

Ceiling
Amount

Number of
Awards

\$23,209,795

July 1, 2020 to June 30, 2025



Project Period



Budget

- Over the 5-year period of performance, no less than 50 percent of the total funding must be dedicated to stipends for fellows (direct cost stipend support only).
- Stipend levels may not exceed \$100,000 per fellow.
- Match is only required, where applicable, to cover any fellows stipend costs beyond \$100,000 per geographic reimbursement requirements set by the applicable educational institution or association.
- No more than one year or 12 consecutive months of stipend support is allowed per fulltime fellow. Part-time fellows are allowed to receive a stipend prorated at one-half of the requested amount for no more than 24 consecutive months.





| Number of Awards | Addiction Medicine Fellowship | Addiction Psychiatry Fellowship | Both Programs |
|------------------|-------------------------------------|---------------------------------------|------------------|
| 43 | 33 | 4 | 6 |

^{*} Initially 44 awards were made. One grantee relinquished grant without expending funds.





| Academic Year (AY) 2020-2021 | | | |
|------------------------------|-----------------|-------------------------------------|---------------------------------------|
| Number of | Total Number | Addiction Medicine Fellowship | Addiction Psychiatry Fellowship |
| Trainees | 98 | 84 | 14 |
| Graduates | 63 | 53 | 10 |

*NOTE: The trainees represented the following specialties: internal medicine (27), family medicine (24), psychiatry (20), and other medical disciplines (27) such as preventive medicine and pediatrics.



| Academic Year (AY) 2020-2021 | Trainees (98) | | Graduates (63) | |
|--|------------------|-----|----------------|-----|
| Number of Trainees from Unrepresented Minority Backgrounds | 21 | 21% | 17 | 27% |
| Number of Trainees from Disadvantaged Backgrounds | 9 | 9% | | |
| Number of Trainees from Rural Backgrounds | 10 | 10% | - | - |
| Number of Trainees Receiving Training in Primary Care Settings | 60 | 61% | - | - |
| Number of Trainees Receiving Training in Medically Underserved Communities | 79 | 81% | - | - |
| Number of Trainees Receiving Training in Rural Areas | 19 | 19% | - | - |







| Academic Year (AY) 2020-2021 | Training Sites (N=234) | |
|--|------------------------|-----|
| Type of Training Site | N | % |
| Site Provided Interprofessional Education | 89 | 38% |
| Medically Underserved Community (MUC) or Rural Setting | 167 | 71% |
| Primary Care Setting | 65 | 28% |
| Health Center | 47 | 20% |

*NOTE: 62% of the 234 sites offered telehealth services.









• Legislative Authority: Title VII, Section 760(a)(2) of the Public Health Service Act, (42 U.S.C. § 294k(a)(2)), Training Demonstration Program







Purpose: to expand the number of nurse practitioners, physician assistants, health service psychologists, and/or social workers trained to provide mental health and substance use disorder (SUD), including opioid use disorder (OUD) services in underserved community-based settings that integrate primary care, mental health, and SUD services.

Goal: The ISTP program is designed to foster robust clinical training and augment expertise among clinicians who will see patients at access points of care and provide addiction prevention, treatment, and recovery services. Participants will be practicing professionals from the following disciplines: nurse practitioners, physician assistants, health service psychologists, and/or social workers.





Program Objectives:

- 1. Increase the number of practicing nurse practitioners, physician assistants, health service psychologists, and/or social workers who are trained to provide integrated mental health and SUD/OUD services in a primary care underserved community-based setting.
- 2. Plan, develop, and operate a training program to provide mental health and SUD/OUD services in underserved, community-based settings that integrate primary care, mental health, and SUD/OUD prevention, treatment, and recovery services.



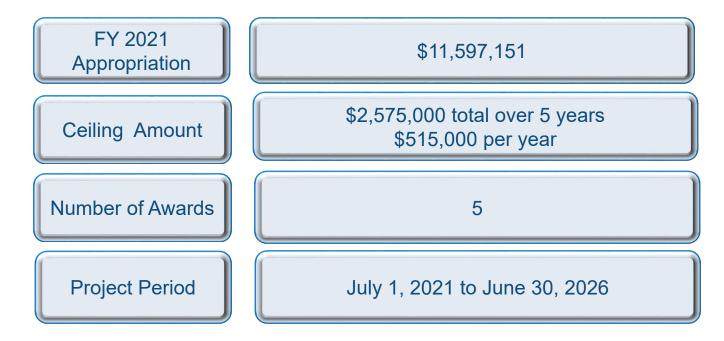


Program Objectives Cont'd:

- 3. Increase the number of physician assistants and nurse practitioners that are trained in Medication Assisted Treatment (MAT) with a clinical training component and obtain a data-2000 waiver.
- 4. Establish a foundation of skills and expertise for the community-based program that supports training nurse practitioners, physician assistants, health service psychologists, and/or social workers to provide mental health and SUD/OUD prevention, treatment, and recovery services utilizing a team-based care model.







*NOTE: Grants are forwarded funded at the onset.





| Program | Discipline(s) Trained | Proposed Number Of Trainees Over 5 Year Project Period |
|---|--|--|
| Denver Health and Hospitals Authority | Physician Assistants | 18 |
| Managabusatta Canaral | Nurse Practitioners, | |
| Massachusetts General Hospital | Social Workers, and | 15 |
| Tiospital | Health Psychologists | |
| | Physician Assistants | |
| Rutgers, The State | Nurse Practitioners, | 20 |
| Rutgers, The State University of New Jersey | Social Workers, and | 20 |
| | Health Psychologists | |
| University of Illinois | Nurse Practitioners | 20 |
| Western University of Health Sciences | Physician Assistants and Nurse Practitioners | 20 |





Program Requirements:

- 1. Applicants must propose to plan, develop, and operate a 12 months full-time (24 months half-time) training program for nurse practitioners, physician assistants, health service psychologists, and/or social workers that trains practitioners to provide care for individuals in need of mental health and SUD/OUD prevention, treatment, and recovery services.
- 2. Provide training to practicing nurse practitioners, physician assistants, health service psychologists, and/or social workers, either by developing or enhancing a program, clinical rotation or training track in underserved community-based settings to provide integrated mental health and SUD/OUD services.
- 3. Collaborate and establish formal relationships between one or more clinical community based training sites and an academic institution to create a foundation of skills and expertise to provide mental health and SUD/OUD prevention, treatment, and recovery services on integrated, interprofessional teams.

Program Requirements Cont'd:

- 4. Develop and implement trainings for nurse practitioners, physician assistants, health service psychologists, and/or social workers to provide mental health and SUD/OUD treatment services, remotely via telehealth and other distance learning modalities.
- Design team based training approaches for participants to improve digital literacy for patients and their families impacted by mental health and OUD/SUD. The team based training approaches to improve digital literacy may be carried out through teams that incorporate paraprofessionals.
- 6. Provide MAT Waiver training for physician assistants and nurse practitioners in community based settings along with an additional clinical training beyond the didactic component.
- 7 Support faculty/instructor/interprofessional training team development activities to support the ISTP program goals and objectives listed on page one of the NOFO.

Program Requirements Cont'd:

- 8. Collect National Provider Identifier (NPI) numbers of participants who participate in the programs.
- 9. Provide information to participants throughout their training program about the National Health Service Corps (NHSC) programs, particularly the Loan Repayment Program, (https://nhsc.hrsa.gov/loan-repayment/index.html) as well as the Indian Health Service (IHS) Loan Repayment Program (https://www.ihs.gov/loanrepayment/) and provide guidance and resources to help them locate employment in NHSC approved sites after they complete the program.





Outcome Data and Accomplishments:

- Annual Progress Reports Due in April 2022.
- Performance Data due July 2022.





Questions







Contact Us

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