Osteopathic Postdoctoral Training Institutions (OPTI):
Policy Issues for the 21st Century
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Abstract

Osteopathic Postdoctoral Training Institutions (OPTIs) were created in 1995 to improve osteopathic post-graduate training. OPTIs should be evaluated relative to their effectiveness and should be proactive in attempting to provide adequate numbers of quality osteopathic training opportunities along the educational continuum. However, the eighteen current OPTIs display an unacceptable wide range of variability in operational structure and effectiveness.

Major changes are occurring within medical education, including increased numbers of medical schools and graduates requiring post-graduate training. Residency training faces a shortage of AOA-accredited postgraduate training opportunities and an increasing number of osteopathic medical school graduates training in non-osteopathic programs. These changes affect where graduates of osteopathic medical schools receive their training and how they are certified. In order to assure OPTIs are supportive of producing physicians capable of providing high quality, patient-centered care, the AOA should

- Complete a comprehensive review of all OPTIs, focusing on governance and financing and whether or not osteopathic medical education is being improved;
- Enforce financing mechanisms promoting the equitable disbursement of federal and state payments for graduate medical education based on actual expenses incurred and shared operating costs;
- Develop standards to evaluate program quality that “go beyond structure and function” and commonly gathered data such as in-service exam scores, certifying board passage rates, and resident satisfaction; and
- Do not accredit residency programs that fail to meet OPTI standards or medical schools that do not actively engage OPTI implementation to insure adequate numbers of training slots and quality osteopathic training along the educational continuum.