



**Advancing Graduate
Level Osteopathic
Training Summit**

MEETING PROCEEDINGS

Friday, November 15th, 2024
11:00 AM – 1:00 PM ET

Advancing Graduate Level Osteopathic Education Summit

ATTENDEES



Robert Cain, DO

President & CEO, American Association of Colleges of Osteopathic Medicine (AACOM)

Karen C. Caruth, MBA

Executive Director, American College of Osteopathic Internists (ACOI)

Millicent Channell, DO

President, American Academy of Osteopathy (AAO)

Senior Associate Dean of Academic Affairs and Student Services, Rowan-Virtua School of Osteopathic Medicine

Kathleen S. Creason, MBA

Chief Executive Officer, American Osteopathic Association (AOA)

Terri Donlin, MBA

President & CEO, Osteopathic Heritage Foundations (OHF)

Regina Fleming, DO

Chair, Educational Council on Osteopathic Principles (ECOP)

Assistant Dean of OPP/OMM, Baptist University College of Osteopathic Medicine

John Gimpel, DO

President & CEO, National Board of Osteopathic Medical Examiners (NBOME)

Jennifer Hauler, DO

Trustee, Education Chair, American Osteopathic Association (AOA)
Senior VP of Operations and Chief Medical Officer, Premier Health

Teresa A. Hubka, DO

President, American Osteopathic Association (AOA)

Eileen Hug, DO

Former Chair, Osteopathic Recognition Committee, Accreditation Council for Graduate Medical Education (ACGME)

Community Assistant Dean, Michigan State University College of Human Medicine

Brian Kessler, DO

Chair, AACOM UME-GME Task Force
Dean and Chief Academic Officer, Campbell University School of Osteopathic Medicine

Tim Kowalski, DO

AACOM Liaison, American Osteopathic Association (AOA)

Vice Dean for Professional & Public Relations, Edward Via College of Osteopathic Medicine, Carolinas

Richard LaBaere, DO

Board of Directors, National Board of Osteopathic Medical Examiners (NBOME)

Associate Dean, Graduate Medical Education, A.T. Still University School of Osteopathic Medicine, Kirksville

Bob Moore, MA, MS

Executive Director, American College of Osteopathic Family Physicians (ACOFPP)

Valerie Sheridan, DO

Chief Executive Officer, American College of Osteopathic Surgeons (ACOS)

Shane Speights, DO

Chair, Board of Deans, American Association of Colleges of Osteopathic Medicine (AACOM)

Dean, NYIT College of Osteopathic Medicine, Arkansas

Richard Terry, DO, MBA

Chair, Graduate Level Osteopathic Training Working Group, AACOM UME-GME Task Force

Associate Dean of Academic Affairs, Lake Erie College of Osteopathic Medicine, Elmira

FACILITATOR

Josh Mintz

President, CHP Mintz, LLC.

AACOM STAFF

Alegneta Long, MPP

Vice President, Graduate Medical Education Initiatives, American Association of Colleges of Osteopathic Medicine (AACOM)

Rance McClain, DO

Senior Vice President, Medical Education, American Association of Colleges of Osteopathic Medicine (AACOM)

Madhumita Napa

Project Manager, AACOM

Executive Summary

The Advancing Graduate Level Osteopathic Education Summit brought together a small group of leaders from select osteopathic medicine organizations for an initial conversation to align strategies for the future of graduate-level osteopathic training. A key outcome was agreement on a broader, more inclusive approach that supports not only programs within the Osteopathic Recognition (OR) system but also programs, individuals, institutions, and other stakeholders that embody osteopathic principles outside of OR.

While OR remains vital, administrative burdens and funding challenges have limited its growth even among programs with a deep commitment to the osteopathic learning environment. Participants emphasized the importance of nurturing a wider spectrum of stakeholders, ensuring their contributions are recognized and supported. This approach includes expanding mentorship and role modeling, increasing osteopathic exposure during clinical training, and strengthening the UME to GME Continuum.

The summit also highlighted the need for practical incentives and research to demonstrate the value of osteopathic training, including career opportunities, financial benefits, and improved patient outcomes. Centralizing resources, streamlining processes, and fostering collaboration across organizations will be critical to advancing a shared vision.

By supporting both OR and alternative pathways, the summit set an aligned direction to strengthen the osteopathic learning environment and ensure its growth and inclusivity. A follow-up summit will refine these strategies and build on this momentum.

KEY TAKEAWAYS AND ACTION ITEMS

The group emphasized starting with achievable goals within organizations by focusing on “low-hanging fruit” and building on existing efforts to advance graduate-level osteopathic training. Below are the refined key takeaways and action items:

Key Takeaways:

- Data collection is critical to inform strategies, including identifying OMM champions, analyzing OR program matching trends, and learning from high-performing institutions.
- UME identity formation and exposure to osteopathic role models during clinical years are essential for sustaining student interest.
- Addressing systemic challenges in billing and coding is necessary to support programs and learners.
- Expanding osteopathic training pathways beyond OR engages stakeholders outside formal accreditation.

Action Items:

- Leverage existing resources, such as ACOFP toolkits and COM workshops, to support stakeholders.
- Foster cross-organization collaboration to share insights and align strategies.
- Share outcomes with the AACOM Board of Deans and UME-GME Task Force to guide future initiatives.
- Plan a follow-up summit to refine the vision and further expand osteopathic training opportunities.

Open and Welcome

AACOM President and CEO, Robert Cain, DO, opened by thanking participants for their dedication to advancing graduate-level osteopathic medical education. Dr. Cain highlighted the significant work of the AACOM UME-GME Task Force in understanding this critical area and emphasized the importance of continuing professional identity development beyond medical school.

While Osteopathic Recognition (OR) was designed as a foundation for osteopathic GME under the single accreditation system, it was developed before the osteopathic community fully understood the ACGME's framework. Observations over the past decade suggest OR alone cannot meet the community's needs, necessitating both the advancement of OR and exploration of additional strategies for professional development during residency and fellowship.

The recent USUHS OR report, supported by the Osteopathic Heritage Foundations, offers unbiased insights to guide these discussions. The Advancing Graduate Level Osteopathic Education Summit aims to review the report, learn from others' efforts in osteopathic GME, and align strategies across organizations to optimize resources and serve the community effectively.



Goals for the Summit

The goals of the summit were to:

- Increase alignment among an initial small group of key osteopathic medical organizations on how to advance the osteopathic learning environment within GME
- Build a shared understanding of the key findings from the Uniformed Services University of the Health Sciences (USUHS) report and the implications for osteopathic medical education
- Begin a discussion of how to move forward, individually and collectively, to advance the osteopathic learning environment within GME

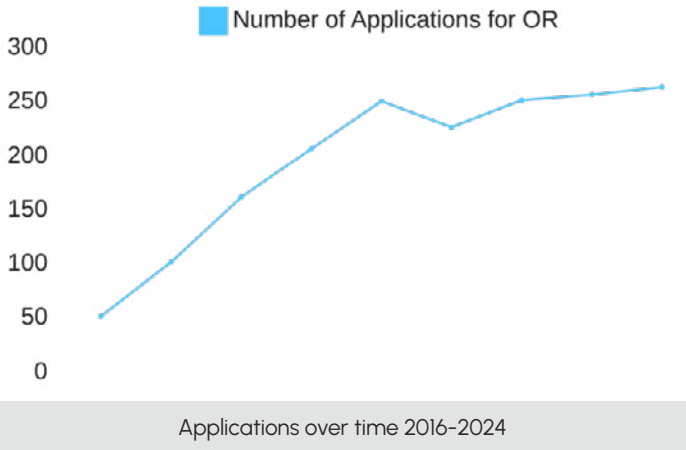
History and Context

Osteopathic Recognition (OR) emerged from the single accreditation system established through an agreement between the American Osteopathic Association (AOA), AACOM, and the Accreditation Council for Graduate Medical Education (ACGME). In 2014, the Osteopathic Principles Committee developed the foundational requirements for graduate-level osteopathic training. A decade later, it is time to evaluate and refine the system, considering whether the ACGME accreditation framework fully serves the needs of the osteopathic medical education community.

Most OR programs are in family medicine, concentrated in the North and Midwest, often in cities with former osteopathic hospital systems. Despite the rapid growth of osteopathic medical

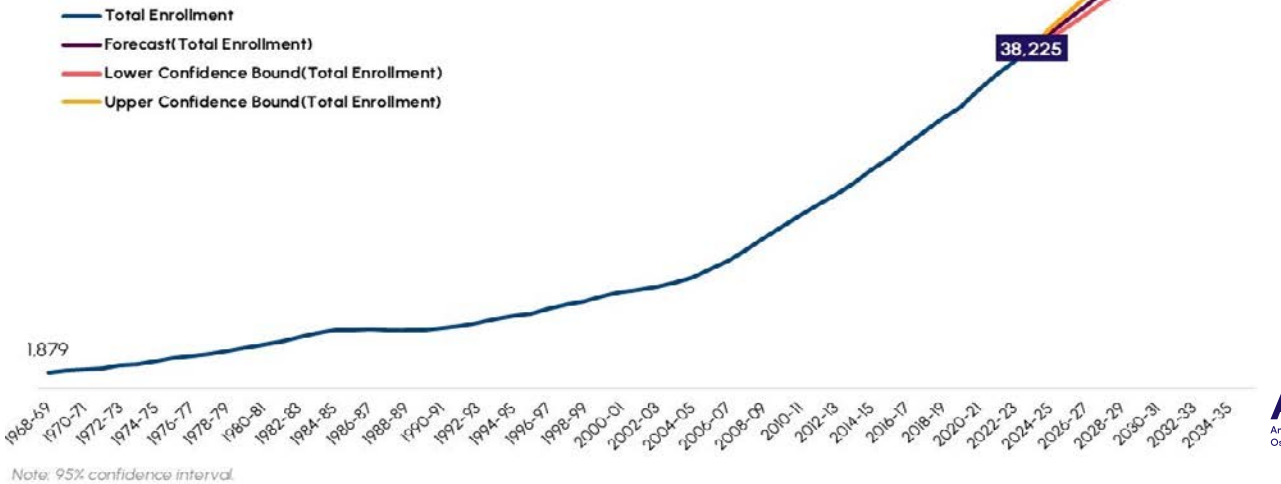
students and schools—bringing greater geographic representation nationwide—the number of OR programs has remained stagnant.

Trend in Osteopathic Recognition Applications 2016-2024



Forecasted Growth of U.S. Osteopathic Medical School

TOTAL ENROLLMENT BY 2030-31 & 2035-36



How AACOM is Responding

AACOM UME-GME TASK FORCE

The AACOM UME-GME Task Force, established in 2022 by the AACOM Board of Deans, addresses key issues in osteopathic medical education, including graduate-level osteopathic training and Osteopathic Recognition. A dedicated working group on graduate-level osteopathic training within the Task Force has launched regional preceptor training workshops and created a guide listing over 500 COM-affiliated programs potentially interested in incorporating osteopathic training.

USUHS STUDY ON OR

One of the key initiatives of the working group was overseeing an 18-month study to identify barriers for programs applying for OR and reasons why programs withdrew from OR. Conducted by USUHS and supported by the Osteopathic Heritage Foundations and AACOM, the study used a mixed-methods approach, including online surveys, semi-structured interviews, and focus groups. The online survey, sent to programs that had not applied for OR, had a 34% response rate. Among respondents, 37% expressed interest in pursuing OR, 20% were unsure, and 42% were not interested.

The study revealed several key barriers to pursuing OR, including the administrative burden of applying and maintaining OR, challenges in managing curricular and evaluative processes, faculty recruitment and retention issues, lack of funding and time for Osteopathic Principles

and Practice (OPP) training, insufficient colleague support, absence of a central organizational champion, and uncertainty about the osteopathic evaluation requirement. Programs not interested in OR cited similar barriers, with additional concerns such as a lack of osteopathic practice at their training site, insufficient physical space for OPP, difficulty integrating OPP into patient care, perceived irrelevance to their specialty, and uncertainties around billing and documentation.

The study also highlighted the perceived value of OR, such as advancing osteopathic medicine, providing residency positions for the growing undergraduate medical education (UME) population, extending OPP training beyond UME, promoting holistic patient care, ensuring osteopathic representation, and serving as a quality marker for integrating OPP in graduate medical education. However, the study faced limitations, including a low survey response rate, few responses from withdrawn programs, and limited geographic diversity, with most responses coming from the Northeast and Midwest.

Reactions to the USUHS Report

During the summit, representatives from each organization shared their reactions to the USUHS study, noting that its findings were not surprising. They shared their appreciation for the conversation and the potential impact of Osteopathic Recognition and continued training in GME on the broader osteopathic learning environment and the profession at large such as specialty college membership, board certification and practice. They also discussed how the study has influenced their current thinking about advancing graduate-level osteopathic education. While many initiatives predate the study, they demonstrate ongoing efforts to support osteopathic training. These include a working group and presentations on billing, coding, and financial strategies by the AOA; advocacy efforts by the ACOS; educational resources and OPP webinars from AOBNMM geared toward students; ECOP is working on glossary of terminology and preceptor training courses collaborating with COMs. ACOFP maintains an **osteopathic recognition toolkit** and instructional videos and billing information from ACOFP, and is developing a-day-in-a-life series focused on high school students to begin to explore osteopathic medicine. However, despite the availability of these long-standing resources, some are underutilized, suggesting the need for a centralized hub to house and promote resources from various organizations. A consolidated resource center would be helpful.

VALUE OF RESEARCH

The group highlighted the critical importance of existing and potential research in advancing osteopathic training and practice. Tracking and sharing osteopathic-focused research across organizations can help ensure alignment, scalability, and consistent communication. Collaborative efforts to explore the value of osteopathic medicine for patients, programs, and trainees were emphasized, along with the need to align research with practical outcomes that demonstrate the impact of osteopathic principles in patient care and GME.

Research can provide evidence of the tangible benefits of osteopathic practices, such as improved patient outcomes and better reimbursement opportunities for physicians incorporating OPP. Ensuring accurate documentation, coding, and billing for osteopathic care is essential to demonstrating its financial and clinical value, encouraging broader adoption.

Additionally, understanding why students choose osteopathic medical schools, existing incentives and their perceptions and relevance of Osteopathic Manipulative Treatment (OMT) and Osteopathic Principles and Practice (OPP) is crucial. Exploring student interest in continuing osteopathic training at the GME level is also important, especially considering that many students may prioritize matching over selecting programs with OR.

By prioritizing research and sharing findings across organizations, the osteopathic community can build a stronger case for the value of osteopathic medicine and better align curricula, policies, and practices to support its future growth and integration.

INCENTIVES FOR OSTEOPATHIC RECOGNITION AND GRADUATE-LEVEL OSTEOPATHIC TRAINING

The group emphasized the need to explore and enhance incentives for programs and individuals to pursue Osteopathic Recognition (OR) and incorporate osteopathic principles at the graduate level. While OR offers value to patients, programs, and trainees, its administrative burden and financial demands may deter participation. Addressing these barriers—such as improving documentation, coding, and reimbursement for osteopathic practices—could highlight tangible benefits and encourage broader adoption.

A key challenge is that many programs and individuals contributing to the osteopathic learning environment remain invisible to national organizations because they do not pursue OR. These programs may

still embody osteopathic principles and foster continued education but lack formal recognition. Supporting such programs through alternative pathways, such as a competency-based approach or supplemental resources for osteopathic education, could ensure broader engagement and sustainability within the osteopathic learning environment.

For students, incentives must clarify the value of osteopathic training beyond OR. Many prioritize matching into programs over choosing those with OR, often unaware of the career and financial benefits. Sharing data, such as salary information for Osteopathic Neuromusculoskeletal Medicine (ONMM) specialists and showcasing holistic care advantages, could inspire greater interest. Additionally, fostering a strong osteopathic environment in preclinical and clinical years, alongside exposure to osteopathic role models, can cultivate long-term passion for osteopathic practices.

As health systems face challenges like hospital consolidations and resource constraints, the group questioned whether OR is always the best vehicle for advancing osteopathic learning. Exploring alternative models and continuing support for osteopathic training outside of OR could maintain momentum and ensure that all contributors to osteopathic education—visible or not—are recognized and supported. By addressing both individual and systemic incentives, organizations can strengthen the integration of osteopathic medicine in graduate-level training and ensure its sustainability for future generations.

MENTORSHIP, CULTIVATING OSTEOPATHIC IDENTITY, AND INSPIRING FUTURE ADVOCATES

The group highlighted gaps in osteopathic education, particularly the significant drop in exposure to osteopathic principles and practices during the 3rd and

4th years of medical school as students transition to clinical training, often outside osteopathic learning environments or without DO mentors. Expanding OMM clerkships and providing consistent osteopathic education and role models throughout clinical years are essential to sustaining student interest and preparing them for GME.

Mentorship and role models, both MD and DO, play a critical role in fostering osteopathic identity. Even in programs without OR, nurturing champions can guide early-career physicians. Cultivating osteopathic identity must begin early and continue throughout a physician's career, supported by robust osteopathic learning environments. The group stressed the need to increase awareness among MD preceptors and explore a competency-based approach for programs incorporating osteopathic training without formal OR recognition.

Inspiring students to pursue OR or additional osteopathic training requires a consistent osteopathic environment and tangible incentives. While not all students are initially committed, many can be encouraged through exposure to role models and highlighting the value of osteopathic practices during preclinical and clinical years.

Generational trends also point to an opportunity for growth. An ACOFP survey revealed waning interest in OMM and OPP among middle-generation practitioners but growing enthusiasm among newer generations, fueled by the expansion of COMs. To sustain this momentum, the group emphasized the importance of cultivating interest in osteopathic medicine early—starting as early as high school—to create dedicated advocates and future leaders in the field.

A Shared Vision for Advancing the Osteopathic Learning Environment

The group emphasized the need for a shared vision to support the future of osteopathic learning at the GME level, accommodating varying levels of interest and engagement among stakeholders. While OR remains a valuable pathway, it is not the only solution. Many programs and individuals are committed to osteopathic principles but do not pursue OR due to administrative burdens or lack of resources. A broader approach is needed to support these stakeholders, foster flexibility, and avoid a rigid “OR or nothing” mindset.

The group emphasized the importance of a continuum approach to osteopathic education, aligning efforts to support individuals and programs at various stages of engagement. Using models of behavior change, resources should target those ready to act while nurturing interest among those in earlier stages of consideration. Advocacy efforts should maintain OR as an important option but also explore alternative ways to recognize and support osteopathic practices within the GME space.

Discussions included the need to reduce administrative barriers, align efforts across organizations, and explore innovative recognition methods. Current OR requirements focus on programs, but recognition could extend to program directors, individual learners, or institutions, highlighting their contributions to the osteopathic community. By supporting diverse pathways, the total number of programs incorporating osteopathic education could increase, even if fewer pursue formal OR accreditation.

Alignment across organizations is critical to avoid conflicting strategies. Efforts should focus on enhancing existing programs, reducing administrative burdens, and creating resources that highlight the value of osteopathic education for patients, systems, and communities. Expanding opportunities for coding, billing, and documentation of osteopathic practices can further demonstrate their impact and improve adoption.

As part of a broader reassessment, AACOM, AOA, and other organizations have proposed re-evaluating the single accreditation system, marking the 10-year anniversary of the transition. This reassessment could explore OR, address current challenges, and amplify the integration of osteopathic principles across GME.

By aligning efforts and expanding support for both OR and alternative pathways, the osteopathic community can ensure the growth of osteopathic education as an integrated component of GME, rather than an “add-on.” This approach supports the profession’s sustainability, benefits a growing number of students and programs, and reinforces the value of osteopathic principles in improving patient outcomes.

Focusing on Actions Within Organizational Control

The group discussed identifying and prioritizing actions within the control of their organizations to advance graduate-level osteopathic training. While there are external challenges, such as influencing ACGME policies, the group recognized the need to focus on areas where they can have direct impact.

Key starting points prioritize role modeling, the UME-GME connection, continued data collection and centralizing resources:

- Ensuring DO students, particularly during years 3 and 4, have access to osteopathic physicians actively practicing OMM and OPP to inspire continued engagement during GME years.
- Strengthening ties between UME and GME, as well as with the AOA, specialty colleges, and state societies, to maintain residents' involvement in osteopathic communities.

- Collaborating between AOA and AACOM to collect and share data, such as salaries for OMM specialists or physicians incorporating OMM significantly in their practice, to illustrate the tangible value of osteopathic training.
- Creating a centralized hub to consolidate and share osteopathic educational resources for easier access and broader use.

The group also recognized the need to address systemic challenges, including applicant recruitment, learning environment improvements, and reigniting passion for osteopathic principles within the community. By focusing on these actionable priorities, organizations can take meaningful steps toward achieving the shared vision for osteopathic training.

Next Steps and Actionable Priorities

The group emphasized starting with achievable goals within their organizations, identifying "low-hanging fruit," and building on existing efforts to advance graduate-level osteopathic training. Discussions highlighted the importance of gathering additional data, such as understanding schools that champion OMM, analyzing student matching trends in OR programs, and learning from institutions excelling beyond COCA minimums. These insights could inform strategies to ignite interest and support students in pursuing osteopathic-focused careers.

Specific areas of focus include:

- Supporting UME identity formation and osteopathic role models during clinical years, a collaboration between AACOM and professional organizations.
- Exploring billing and coding challenges, with organizations like the AOA taking the lead.
- Understanding and mapping the continuum of osteopathic training beyond OR, including

identifying programs offering osteopathic training without formal OR recognition.

- Addressing evaluation challenges highlighted in the USUHS study by developing straightforward tools and systems to support program success.

The group recognized the need to leverage content and resources already available, such as videos and workshops from ACOFP and COMs, and to foster collaboration across organizations. The outcomes of these discussions will be shared with the AACOM Board of Deans and the UME-GME Task Force to shape ongoing efforts and guide future strategies.

A follow-up summit with a broader audience will present the USUHS study findings, refine the shared vision, and explore collaborative strategies to expand and strengthen osteopathic training across the continuum.

