

PUBLIC NOTICE

HEALTH

THE COMMISSIONER

Notice of Receipt of Petition for Rulemaking

Standards For Licensure of Residential Substance Use Disorder Treatment

Facilities

Definitions and Qualifications

Definitions

Qualifications and Responsibilities of the Medical Director and Physicians

N.J.A.C. 8:111-1.3 and 1.4

Petitioners: Joseph A. Giaimo, DO, President, American Osteopathic Association, Chicago, IL; Kevin Klauer, DO, EJD, CEO, American Osteopathic Association, Chicago, IL; and Hetal Patel, DO, President, New Jersey Association of Osteopathic Physicians and Surgeons, Pennington, NJ.

Take notice that on February 11, 2022, the Department of Health (Department) received a petition for rulemaking from the petitioners.

Substance or Nature of the Requested Rulemaking Action

The petitioners request the Department to make certain amendments at N.J.A.C. 8:111-1.3, Definitions, and 1.4, Qualifications and responsibilities of the medical director and physicians. Existing N.J.A.C. 8:111-1.4 permits a New Jersey licensed physician who has been certified by the American Society of Addiction Medicine/American Board of Addiction Medicine (ASAM/ABAM) to serve as a medical director in a facility or hospital-based program that is providing services under the Standards for Licensure of

Residential Substance Use Disorders Treatment Facilities. N.J.A.C. 8:111-1.4 further provides that, if a New Jersey licensed physician has not been ASAM/ABAM certified by July 15, 2016, the physician must have been employed in a substance use disorders treatment facility for at least five years and have worked there for at least 20 hours each week and have completed the clinicians training course offered by the ASAM/ABAM/American Association for the Treatment of Opioid Dependence (AATOD).

The petitioners request that the Department add a definition of the American Osteopathic Association (AOA) at N.J.A.C. 8:111-1.3 and add the AOA as a certifying board at N.J.A.C. 8:111-1.4(a).

Problem or Purpose of the Request

N.J.A.C. 8:111 establishes the standards for licensure of residential substance use disorder treatment facilities and the standards with which hospitals that are providing medical detoxification services or residential substance use disorder treatment must comply. N.J.A.C. 8:111-1.3 establishes definitions for the words and terms that the chapter uses. N.J.A.C. 8:111-1.4 establishes the minimum qualifications and responsibilities of any individual serving as a medical director or a physician in a facility or hospital-based program that is providing services pursuant to the chapter.

The petitioners state that, in “2015, the Accreditation Council for Graduate Medical Education (ACGME), the AOA, and the American Association of Colleges of Osteopathic Medicine began a five-year transition into a single accreditation system for graduate medical education (GME) for all medical school graduates (DO and MD) in the [United States of America]. In 2018, the ACGME [recognized] AOA board certification as a valid and appropriate credential for employment as a program director or service

on the core faculty of GME training programs. The American Medical Association also recognizes the equivalency of DOs and MDs throughout its policy, including explicitly recognizing parity between AOA and American Board of Medical Specialties (ABMS) board certifications.”

The petitioners further state that in “New Jersey, DO-MD equivalency is codified in Chapter 9 of Title 45 of the New Jersey Statutes; however, there are a few legacy regulations that do not appropriately recognize the current, legitimate physician board certifications and certifying entities that are widely recognized as equivalent throughout the United States. As a result, qualified osteopathic physicians may be prevented from holding certain positions in New Jersey and the State may be disadvantaged in its ability to attract and select from the largest pool of qualified applicants.”

The petitioners note that several rules of the Department treat doctors of osteopathy who hold AOA board certification as equivalent to medical doctors who hold comparable certifications from other certifying boards, including N.J.A.C. 8:43A-1.14 and 24.5, and 8:43G-16.3.

The petitioners suggest changes at existing N.J.A.C. 8:111-1.3 and 1.4 to ensure that osteopathic doctors who hold AOA board certification in addiction medicine are treated as equivalent to medical doctors who hold ASAM/ABAM certification.

Full text of the petitioners’ suggested changes (with technical modifications to comport the text to New Jersey Register style and formatting conventions) follows (additions to existing text indicated in boldface **thus**; deletions from existing text indicated in brackets [thus]):

8:111-1.3 Definitions

The following words and terms, when used in this chapter, shall have the following meanings, unless the context clearly indicates otherwise:

...

“AOA” means the American Osteopathic Association, for which the contact information is 142 E. Ontario St., Chicago, IL 60611, telephone (312) 202-8000, and website www.osteopathic.org.

...

8:111-1.4 Qualifications and responsibilities of the medical director and physicians

(a) Facilities required under N.J.A.C. 10:161A-7 to hire a medical director shall ensure that the physician is currently licensed in accordance with the laws of this State to perform the scope of services set forth in this chapter. This physician must be certified by ASAM/ABAM, by July 15, 2016, **or by the AOA in Addiction Medicine**. This physician shall be a member in good standing in the medical community.

1. A physician currently licensed to practice in the State of New Jersey, who has not completed ASAM/ABAM **or AOA** certification by July 15, 2016, must have worked in a substance use disorders treatment facility a minimum of five years for at least 20 hours per week and have completed the ASAM/ABAM/American Association for the Treatment of Opioid Dependence (AATOD) clinicians training course, www.aatod.org/clinician.html.

(b)-(h) (No change.)