CREDENTIALING

The Academy gives HIV health care providers an opportunity to be nationally recognized as an AAHIVM HIV Specialist™. The Academy began its credentialing process in December of 2001 using the Academy’s definition of an HIV Specialist. Since then, more than 1,700 providers have obtained the AAHIVM HIV Specialist™ designation, establishing the Academy’s credentialing program as a proven and credible process.

The Academy’s credentialing process is independent of membership and is provided as a free service to both members and nonmembers alike. Credentialing requirements must be met every two years to ensure that applicants maintain up-to-date knowledge in HIV medicine. To assure that the credentialing process is accurate and supportable, approximately 10 percent of the applications are randomly selected for audit by the Academy.

*The Academy’s current definition of an AAHIVM HIV Specialist™ can be found at the end of this handout.

CREDENTIALED PROVIDERS (AS OF JANUARY 2004)

The majority of the AAHIVM credentialed providers care for fewer than 150 HIV patients. Only 15 percent care for 300 or more HIV patients. Providers credentialed by the Academy also are a professionally diverse group, including ID, IM, FP, GP, NP and PA providers.

![Credentialed Providers Chart](image-url)
AAHIVM CREDENTIALING: FREQUENTLY ASKED QUESTIONS

Will credentialing reduce the number of physicians providing HIV treatment in rural areas?
During the development of the Academy’s definition of an AAHIVM HIV Specialist™, rural physicians told the Academy that they are accustomed to practicing general medicine and co-managing many diseases with a specialist in a neighboring city. This is a common strategy for HIV treatment in rural areas and is consistent with many of the current definitions of an HIV Specialist – a rural physician usually does not see enough patients to qualify as a specialist. The Academy’s definition and credentialing of AAHIVM HIV Specialists™ will assist rural medical providers by identifying experienced HIV care providers in their geographic area. With the AAHIVM Referral Database available at the Academy Website (www.aahivm.org), a rural physician can quickly locate experienced HIV health care providers to co-manage specific cases.

Is the American Board of Medical Specialists (ABMS) intending to certify HIV specialists? If so, how would the Academy’s process differ?
Several organizations, including AAHIVM, have had discussions with ABMS concerning that organization’s possible development of a Certificate of Added Qualification (CAQ) in HIV medicine. In 2003, the American Board of Family Practice (ABFP) made a decision not to explore the issue any further.

The CAQ process will take several years at a minimum. As proposed, a CAQ in HIV medicine would require a one year fellowship program after completion of a three year accredited internal medicine program. It would also include passing a proctored certification board exam which would be retaken every ten years. This process would exclude many frontline HIV care providers who are NPs, PAs, FPs and non-board certified physicians.

AAHIVMs credentialing process is open to, and inclusive of, all current frontline HIV providers. AAHIVMs HIV specialist definition and its credentialing process are intended both to increase the quality of HIV medicine by recognizing qualified medical providers, and to increase access to quality HIV medicine by recognizing the broad range of medical providers on the front lines of HIV medicine today. Since the AAHIVMs credentialing exam is given every two years and emphasizes new material in this rapidly moving area of medicine, it ensures that credentialed clinicians’ knowledge base is up-to-date.

Do I have to be a member of the Academy to be credentialed as an AAHIVM HIV Specialist™?
No. You do not have to become a member of the Academy to be credentialed as an AAHIVM HIV Specialist™, nor do you have to earn a credential to become a member. Membership is open to anyone who is interested in assisting the Academy in reaching its mission of promoting excellence in HIV/AIDS care.

What are the benefits of credentialing as an AAHIVM HIV Specialist™?
A credential from the Academy on a practitioner’s wall will communicate to patients and health plans that the practitioner has gone the extra step to keep up-to-date in HIV treatment knowledge. It also demonstrates support for the development of appropriate national standards.
In addition, the Academy maintains a national listing of HIV care providers at its Website. Credentialed providers are listed to link patients and service providers to qualified specialists. This database is ever-growing and used by thousands of patients to locate qualified providers.

I’m an Infectious Diseases (ID) Specialist. Why should I credential with AAHIVM? Why should I have to use the same process as a General Internist or Family Practitioner?
The Academy requires all credential applicants to possess the same base knowledge and measures this knowledge through a one hour exam every two years. Many ID medical providers have voiced concern regarding this requirement. Following is the Academy’s reasoning for this requirement:

Given the rapid change in clinically relevant information, the Academy agrees with the position of the Infectious Diseases Society of America (IDSA) posted on its Website, “board certification in infectious diseases and pediatric infectious diseases does not guarantee sufficient knowledge to assure that an ID specialist will remain an expert in HIV disease over time.”

HIV patients have many noninfectious complications from their disease and from the medicines used to treat the virus. IDSA’s HIV Medicine Association (HIVMA) believes that ID doctors should have to satisfy different criteria to receive an HIV Specialist designation, regardless of a provider’s background (whether infectious disease, immunology, metabolic disorders, etc.), according to a July 26, 2002, open letter to the California Department of Managed Health Care. The Academy believes that each should be held to the same standard.

Taking care of the wide range of complications of HIV (infectious, immunologic, renal, neurological, pulmonary, etc.) requires a large fund of general knowledge from practitioners and the coordination of care across multiple subspecialties. The Academy has attempted to develop an appropriate credentialing process that helps providers identify and understand the necessary, specific HIV care knowledge. Accordingly, all providers active in providing HIV/AIDS treatment should consider obtaining the AAHIVM HIV Specialist™ credential, regardless of any other specialty or practice areas they may have.

I thought I had the option to just complete 30 hours of HIV-related CME credits to qualify as an AAHIVM HIV Specialist™? What happened?
In September 2002, the Academy chose to simplify the definition of an AAHIVM HIV Specialist™ to one that includes the three essential elements to demonstrate professional development: 1) experience, 2) education and 3) external validation. At that time, any options that did not include external validation were dropped.

As stated in the preceding answer, the Academy believes that passing the ID Boards should not alone qualify someone as an HIV Specialist. In addition, the Academy believes acquiring 30 hours of HIV CME does not meet the standards of external validation because the education may not include up-to-date changes in HIV care.

How do I become credentialed as an AAHIVM HIV Specialist™?
The Academy’s credentialing process is relatively simple and is offered without charge to encourage as many qualified practitioners as possible to seek and meet the current professional knowledge standards represented by the AAHIVM HIV Specialist™ credential. To apply, please call the Academy at 310-278-6380 or toll-free at 866-241-9601 to have a complete credentialing kit sent to you by mail.
ABOUT THE ACADEMY

The American Academy of HIV Medicine is an independent organization of AAHIVM HIV Specialists™ and others dedicated to promoting excellence in HIV/AIDS care. Through advocacy and education, the Academy is committed to supporting health care providers in HIV medicine and to ensuring better care for those living with AIDS and HIV disease.

As the largest independent organization of HIV frontline providers, our 1,800 members provide direct care to more than 315,000 HIV patients. This is more than two-thirds of the patients in active treatment for HIV disease. The Academy has a diverse membership composed of ID, IM, FP and GP specialists as well as NPs and PAs. Member distribution among these provider groups is proportionate to the specialty distribution of frontline providers nationwide. Nearly 50 percent of the Academy’s members receive Ryan White CARE Act funding, with 18 percent of the Academy’s members practicing in community clinics.

DEFINITION OF AN HIV SPECIALIST – EXPERIENCE, EDUCATION, & EXTERNAL VALIDATION

Over the years, several definitions of an HIV specialist have been proposed. Most of these definitions incorporate some combination of Continuing Medical Education (CME) units and clinical experience as the key criteria in evaluating knowledge and clinical competency. The Academy’s definition of the AAHIVM HIV Specialist™ incorporates both of these components and requires that frontline providers who wish to be considered AAHIVM HIV Specialists™ meet these qualifications on a recurrent basis.

In addition, the Academy’s definition uniquely incorporates a component for external validation through its HIV Medicine Credentialing Examination (HMCE). Fifty percent of this exam is based on the Recent Learning Objectives of the annually updated AAHIVM Core Curriculum and evaluates a provider’s up-to-date knowledge of HIV care.

The full credentialing requirements for an AAHIVM HIV Specialist™ must be met every two years and are as follows:

- Maintain current and valid MD, DO, PA or NP state licensure
- Provide direct, continuous, ongoing care for at least 20 HIV patients over the past two years
- Complete at least 30 hours of HIV-related CME Category 1 credits* over the past two years
- Successfully complete the AAHIVM HIV Medicine Credentialing Examination at time of application

* CEUs for NPs /Any accredited training program over the past year will substitute for CME.

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