



The Opioid Workforce Act of 2021 (S. 1438)

The Substance Use Disorder Workforce Act of 2021 (H.R. 3441)

Summary

- Introduced in the Senate by Sens. Maggie Hassan (D-N.H.) and Susan Collins (R-Maine) as the Opioid Workforce Act.
- Introduced in the House by Reps. Brad Schneider (D-Ill.), Annie Kuster (D-N.H.), and David McKinley (R-W.V.) as the Substance Use Disorder Workforce Act of 2021.
- Increases, by 1,000, the number of Medicare supported direct graduate medical education (DGME) and indirect medical education (IME) slots available to hospitals that have or are in the process of establishing approved residency programs in addiction medicine, addiction psychiatry, or pain medicine.

Distribution Methodology for Additional Slots

- Increases the number of residency slots available to qualifying hospitals nationally by 1,000 between fiscal year (FY) 2024 and FY 2028.
- In FY 2024, one-half of the new residency slots (500) are available only to teaching hospitals that have existing established approved programs in addiction medicine, addiction psychiatry, or pain medicine.
- Hospitals may receive slots for the associated number of residents training in a prerequisite program, such as internal medicine, necessary for the number of full-time residents that will ultimately train in the addiction medicine, addiction psychiatry, and/or pain medicine program.
- Between FY 2025 and 2028, one-half of the new residency slots (500) are available only to teaching hospitals that have demonstrated they are establishing a program in addiction medicine, addiction psychiatry, and/or pain medicine. Slots received under this provision must be used in an addiction medicine, addiction psychiatry, pain medicine, or a prerequisite residency program.
- A hospital may not receive more than 25 slots.
- Hospitals may apply for slots under both the new and existing categories (i.e., a hospital with an established pain medicine program that is also in the process of establishing an addiction psychiatry program may apply for slots under both the ‘new’ and ‘existing’ buckets.)

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