



EDUCATION & TRAINING

Four Degrees of Fragmentation

YEARS OF CONFUSION LEAD TO FOUR DEGREES, ONLY FRACTURING OUR PROFESSION FURTHER.

A historic and urgently needed process [to implement](#) a "uniform degree structure and naming convention"¹ is now underway through the Accreditation Commission for Acupuncture and Oriental Medicine (ACAOM). Currently, more than 20 different institutional degree title variations are offered by the 51 accredited Asian medicine graduate programs in the U.S. They include various combinations of masters (of science) and (first professional / advanced practice) doctoral (of science) degrees in acupuncture, and traditional, herbal, Chinese, "Oriental" and integrative medicine.

To address this "longstanding confusion by the general public, patients, and other healthcare and insurance providers" about the "potpourri of degree titles," the commission initiated efforts in 2014 to clarify and bring consistency to its degree structure and titles. Consistent degree titles (e.g., MD, DC, DDS, ND, Pharm. D., DPT and DOT) are the common public and regulatory identification of a profession. To ensure consistent professional recognition and regulation, the vast majority of graduate medical degrees are specifically named by their accrediting agency.



However, within acupuncture and Asian medical graduate education, internal confusion over graduate medical degrees has led to an accreditation mandate to convert to *four* degrees, further fragmenting the field and endangering cohesive formation of the profession.

Background: The Lost Precedent

When the first Asian medicine graduate colleges were becoming accredited in the early '80s, a variety of degrees and titles were locally developed as a reflection of the wide variety of approvals available through various state educational agencies. The first consistent degree title mandated by accreditation for all institutions was the Doctor of Acupuncture and Oriental Medicine (DAOM) in 2005. The DAOM was originally conceived as a 1,200-hour "clinical doctorate," with research and specialization added to the 2,800-hour master's degree to form a single 4,000-hour doctorate.

As a symbol of that design, the DAOM remains the only AOM degree defined as hours, instead of units; and the only degree title specifically named by accreditation.

As the academic community developed and became more aware of the standards and structures in other health care professions, entry-level first professional degrees (PD) were determined to be the more appropriate degree model. To that end, the commission released several position papers to clarify that its scope of recognition from the U.S. Department of Education is for professional doctorates and not academic doctorates. The commission [now categorizes](#) both the PD and DAOM as professional doctoral degrees.²

These professional doctorates are not PhDs and do not require students to conduct research. They are not built on top of masters degrees and do not require clinical specialization. In addition, the precedent established with the DAOM to mandate one specific degree title was abandoned and each institution was again independently allowed to name its own individual degree title.

ACAOM Degree Structure and Naming Convention

In August 2017, a National Degree Title Survey was conducted and more than 1,700 responses were received. Based on survey results and other findings from the commission's five-year efforts, in February 2019 the commission mandated that all degree programs "convert" to some offering of the following four interlocking and embedded masters and doctoral degree combinations by December 2022:

- Master of Acupuncture (MAc or M.Ac.) (105 semester credits)
- Master of Chinese Herbal Medicine (MCHM) (only offered as a dual degree)
- Doctor of Acupuncture (DAc or D.Ac.) (121 semester credits, 13 percent more than MAc)
- Doctor of Acupuncture and Oriental Medicine (DAOM) ("Advanced Practice")

Among the most significant changes is the elimination of a single OM degree for combined acupuncture and herbal medicine. This curriculum is required in several large states including California, Florida and Texas, and is the most common degree offered by 49 of the 51 institutions.

Within two years, institutions "must separate the single entry-level Oriental medicine program into two entry-level degree programs." Only three institutions currently offer separate herbal medicine degree programs, but in this new structure, the most common program is eliminated and the least common program is implemented.

The new degree structure also has two (MAc and DAc) or three (MCHM) professional entry-level degrees, with two significantly different admissions standards and prerequisite requirements, despite a single entry level into the profession. Professional graduate degrees designed for licensure and entry into a health care profession in other fields are not commonly designed or split between masters and doctorates.

What's Missing: A Single, Standardized Doctoral Degree Title

For all six health care professions the commission identified in [its rationale](#) for the new degree structures,³ their professional graduate programs share a common model - a single, standardized doctoral degree and title:

- Medicine | Doctor of Medicine (MD) 1770
- Naturopathy | Doctor of Naturopathic Medicine (ND or NMD) 1901
- Chiropractor | Doctor of Chiropractic Medicine (DC) 1927
- Pharmacy | Doctor of Pharmacy (Pharm. D) 1950
- Physical Therapy | Doctor of Physical Therapy (DPT) 1992
- Occupational Therapy | Occupational Therapy Doctor (OTD) 2014

The U.S. health care system and federal government most commonly recognize and authorize specific health care professions such as those identified above to provide exclusive, privileged medical services. A single, cohesive profession is the most common entity that is allowed to participate in payer systems like governmental and private insurance systems.

As stated in the 2015 [Rand report](#), *Complementary and Alternative Medicine: Professions or Modalities?* even as acupuncturists "have achieved political legitimacy, that have attained all the characteristics associated with professions and are generally thought of as professions, [they] are still reduced to modalities within many aspects of health care policy." This reduction weakens the acupuncture profession and enables other professions, such as physical therapy, to seek to add our exclusive protected rights to their own scope.

We are all clearly aware of the increasing inclusion of acupuncture to fill the pain management vacuum created by reducing dependence on opioids. During this extraordinary opportunity for the profession to participate in urgently needed health care reforms, current accreditation and educational policies must be significantly reviewed to strengthen professional formation through one clear, common and consistent degree structure and title.

References

1. ACAOM *Degree Structure and Naming Convention*. Policy implemented Feb. 16, 2019; last updated July 26, 2019.
2. ACAOM *Accredible Doctoral Programs*. Position paper, last updated July 26, 2019.
3. ACAOM *Rationale for Degree Structure and Naming Convention*. Position paper, published Oct. 31, 2019.

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