

## Lifestyle Medicine (LM) Program Certification

The LM Program Certification is a designation that can be awarded to structured programs that use a consistent protocol. While these programs may nest within clinics, departments, individual practices, or health systems, the designation is specific to the program and not a surrounding entity.

The Program Certification designation is not for clinics, departments, individual practices, or health systems.

Practices or health systems that wish to grow their LM knowledge and alignment should consider having staff join as individual [members of ACLM](#), as well as pursuing [individual Certification of staff](#) in LM through the American College of Lifestyle Medicine or the American Board of Lifestyle Medicine, as appropriate.

The Program Certification is divided into two tracks – **LM Treatment Programs** and **LM Education Programs**. The requirements for each are similar but slightly different, and are presented below.

### Fees

The cost of Program Certification is a one-time fee of \$2500. Application fees can be paid by check addressed to: The American College of Lifestyle Medicine, PO Box 6432 Chesterfield, MO 63006. Application fees should only be sent once an application is submitted.

### Program Updates

If programs change delivery platforms (from in-person to virtual for example) or other meaningful aspects of their structure that might render previous research published on the program irrelevant, a new application must be submitted but can be reviewed without additional fees.

If you would like to ask more questions about the requirements, please email ACLM Sr. Dir. of Research Dr. Micaela Karlsen at [mkarlsen@lifestylemedicine.org](mailto:mkarlsen@lifestylemedicine.org).

### Minimum Requirements

Requirement	Treatment	Education
<b>Time since launch</b>	Active for at least one year	Active for at least one year
<b>Evidence-based foundation</b>	Program design is strongly informed by existing scientific evidence in terms of both content and mode of delivery	Program design is strongly informed by existing scientific evidence in terms of both content and mode of delivery
<b>Program description and alignment with Pillars of LM</b>	In alignment with the six pillars of Lifestyle Medicine, for those pillars which are a focus of the	In alignment with the six pillars of Lifestyle Medicine, for those pillars which are a focus of the

	program (focus on all six pillars is not required).	program (focus on all six pillars is not required)
<b>Adverse side effects</b>	Program has no known adverse side effects or anticipated/resulting increased need for medications for chronic disease as a result of program participation	Program has no known adverse side effects or anticipated/resulting increased need for medications for chronic disease as a result of program participation
<b>Minimum number of completed participants</b>	100 completed participants to date	300 completed participants to date
<b>Treatment supervision and medication management</b>	<p>Program staff supervise health metrics, lab work, and medication management, or communicate directly with prescribing providers (specialists or PCPs) of enrolled participants</p> <p>Participants should also be in contact with their PCP as needed</p>	Participants are asked to agree to work closely with their PCP and/or prescribing provider for supervision of health metrics, lab work, and medication management
<b>Evaluation</b>	Health outcomes should be evaluated by appropriately trained program staff and should be directly relevant to program goals.	Pre-post program assessments, at minimum a survey and preferably one or more validated survey(s) are included in program structure to evaluate changes in health behaviors and knowledge relevant to program goals
<b>Evaluation schedule</b>	Health outcomes must be assessed at baseline and again upon treatment program completion for all participants	Self-reported health behaviors and relevant knowledge must be assessed at baseline and again upon program completion for all participants
<b>Research</b>	A minimum of two peer-reviewed publications demonstrating improvements in health outcomes relevant to program goals following program completion, with a minimum sample size of 30	A minimum of one peer-reviewed publication demonstrating improvements in outcomes of knowledge or health behavior changes relevant to program goals

		following program completion, with a minimum sample of 30
<b>Scalability</b>	Not required for LM Treatment Programs, but if program is scalable or has been replicated or scaled, this information should be included	It must be feasible to replicate the education program at multiple sites or to disseminate it broadly

### Additional Requested Lifestyle Medicine Program Certification Application Information

In addition to questions on the minimum requirements presented above, the following information will be asked for context but not scored

- Contact information and geographic area served
- Program overview of program development, history, structure and goals, content, growth, and current level of implementation
- Professional expertise/profiles of founders/developers
- Additional details intervention/education product (some of these details are logically added to the question on alignment with the pillars of LM). The following information is asked over several questions:
  - Objectives and expected outcomes
  - Content delivered
  - Format, including:
    - Setting (in-person/virtual/self-paced content)
  - Type of interactions/live sessions (live, automated, self-paced curriculum, etc.)
  - Facilitators/teachers and qualifications
  - Duration, timepoints, and expected contact hours
- Follow-up resources, including required or optional follow-up after active intervention or educational product concludes
- Implementation history should provide an overview of the use or potential use of the program in various settings, including:
  - Setting of origin
  - Implementation with external partners/collaborators
  - Scalability in various settings
  - List of external settings or partners in which program has been used
- At least one professional reference letter from a collaborating partner or healthcare professional familiar with the program
- Patient testimonials
- Support to facilitators
- Efforts to address health equity
- Costs to participants and financial impact