

Advancing Addiction Recovery

Empowering patients and communities to succeed

INNOVATION

We support policies that foster innovative approaches to addiction medicine research and development, treatment delivery, and protection of community health.

Boost Adoption of Evidence-Based Psychosocial Treatments

ASAM supports:

- Facilitating patient incentives as part of evidence-based contingency management (CM) programs; CM is an evidence-based behavioral treatment for addiction in which a patient receives a reward for adhering to protocols.
- Encouraging care coordination between primary care and behavioral health providers.

Accelerate Addiction Medicine Research and Development (R&D)

ASAM promotes select policies that would incentivize R&D efforts that may yield new treatments for substance use disorder (SUD).

Support Integration of Useful Technologies

ASAM calls for:

- Investments to expand the use and sharing of electronic health records (EHRs), while protecting patient privacy.
- Policies that refocus prescription drug monitoring programs to serve public health.

Champion Smart Drug Policy Reforms

To make communities safer and healthier, ASAM advocates for:

- Increasing federal alcohol excise taxes.
- Rescheduling marijuana with lower THC potency to Schedule III.
- Eliminating menthol cigarettes & flavored cigars.

INDIVIDUALIZED PATHWAYS

We champion policies that empower the addiction specialty workforce and patients to make personalized treatment decisions that are right for them.

Make Methadone Treatment Accessible

Methadone, an FDA-approved medication to treat opioid use disorder (OUD), is highly effective but difficult for many patients to access; it's currently restricted to heavily regulated opioid treatment programs. To expand access, ASAM supports policies that would allow different types of programs to dispense methadone for OUD and for the careful prescribing of methadone that can be picked up at a local pharmacy.



Optimize Telemedicine for Addiction Care

When a patient is in a crisis and unable to physically reach a clinic, telemedicine is a lifeline. ASAM supports preserving telemedicine initiation flexibility for Schedule III-V controlled medications approved for OUD.

Improve Treatment Engagement and Retention for Nonabstinent Patients

ASAM advocates for policies that allow addiction professionals to provide quality care for patients who may continue substance use.

Eliminate Pharmacy Access Barriers

Congress should exempt FDA-approved addiction medications from suspicious order reporting (SOR). The fear of triggering an SOR may lead pharmacies to insufficiently stock critical medications.

Promote Access to Quality Recovery Residences

ASAM supports efforts to improve quality of and access to recovery residences by requiring credentialing, increasing funding for recovery support services at these residences, and more.

STRONG CONTINUUM OF CARE FOR ALL

We advocate for critical investments to grow the addiction specialty workforce and ensure all patients can access quality care.

Close Residential Addiction Treatment Gaps in Medicare and Medicaid

- ASAM calls for Medicare to cover evidencebased residential addiction treatment programs.
- ASAM supports repealing Medicaid's Institution for Mental Diseases exclusion for evidencebased addiction treatment programs. Today, with limited exceptions, states can't use federal Medicaid funds to cover care provided to individuals aged 21-64 within such facilities with 16+ beds.

Promote Addiction Care Continuity for Individuals in the Criminal Legal System

ASAM supports expanding addiction treatment to people who are incarcerated or under community correctional control, and for strengthening Good Samaritan laws.

Ensure Addiction Care for All in Need

- ASAM opposes cuts to Medicaid, which would disproportionately impact people with addiction.
- ASAM calls for enforcement of addiction parity requirements in all health insurance plans and for parity to be applied to Medicare and Medicare Advantage plans.

Grow the Addiction Workforce

ASAM urges Congress to:

- Reauthorize & fund the SUD and Recovery Loan Repayment Program (STAR-LRP) and fund the Addiction Medicine Fellowship program.
- Protect the longevity of the addiction medicine field by appropriately reimbursing the addiction specialty workforce.