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ASAM Releases Public Policy Statements on Optimizing Telehealth Access to Addiction Care; Substance Use and Substance Use Disorder Among Pregnant and Postpartum People

Rockville, MD – The American Society of Addiction Medicine (ASAM) has released two new public policy statements with recommendations for improving addiction care in the United States. The first, "Optimizing Telehealth Access to Addiction Care," focuses on the role of telehealth in treating addiction. The second, "Substance Use and Substance Use Disorder Among Pregnant and Postpartum People," includes policy recommendations for improving health outcomes for pregnant and postpartum people who use substances or have substance use disorder (SUD).

"As science and research evolve, so must our approach to treating people with addiction," said Bill Haning, MD, president of ASAM. "The two public policy statements ASAM released today, with support from key medical societies, underscore the importance of expanding access to evidence-based addiction treatments and minimizing harms caused by existing policy—especially for the most vulnerable populations."

Public Policy Statement on Optimizing Telehealth Access to Addiction Care

In the first public policy statement on telehealth, ASAM recommends that the federal government extend critical telehealth flexibilities for addiction care that were introduced at the outset of the COVID-19 public health emergency. Included recommendations also provide that addiction medicine professionals offer telehealth options to optimize patients' access to addiction treatment. Additionally, ASAM recommends that payers cover telehealth-delivered addiction care on the same basis and, to the same extent, that they cover the provision of the same service through in-person care, and that health plans have adequate SUD provider networks that allow beneficiaries the option to access telehealth and in-person addiction care.

Telehealth is a useful tool that can effectively enhance patients' access to evidence-based addiction treatment. However, with the temporary telehealth flexibilities expected to expire soon and enduring questions surrounding privacy regulations, such as 42 CFR Part 2, it will be critical to enact policies that provide certainty for addiction medicine professionals and the vulnerable populations they treat.

Public Policy Statement on Substance Use and Substance Use Disorder Among Pregnant and Postpartum People

In this second public policy statement, ASAM highlights the negative consequences of punitive policies towards substance use and SUD during and after pregnancy. It calls for reforms to ensure pregnant and postpartum people can access ethical, equitable, and evidence-based care. Recognizing a growing body of research that suggests punitive approaches are harmful and counterproductive to the health of pregnant people, fetuses, and children, ASAM calls for lawmakers at all levels to eliminate policies and statutes that may deter pregnant people with SUD from seeking medical care, including state mandates to report pregnant or postpartum people to child protection systems on the sole basis of substance use or SUD. Additionally, the statement calls for eliminating prenatal substance exposure language in child abuse and neglect statutes and extending social services benefits and financial support to families in need.

ASAM also urges child protective services agencies to refrain from using evidence of substance use to implement sanctions on parents, especially child removal, and urges agencies to take such steps only when there is objective evidence of abuse, neglect, or other danger to the child. Not only is child removal associated with a parent's return to substance use, parental overdose, and higher rates of parental post-traumatic stress disorder, but it also often leads to worse long-term outcomes for children in terms of education, employment, income, housing, health, substance use, and involvement with the criminal legal system, compared to their peers in the general population.

The public policy statement also highlights data that show Black Indigenous People of Color (BIPOC) are disproportionately impacted by such punitive approaches to substance use and SUD—despite similar rates of substance use across racial and ethnic populations. These disparities mirror the ongoing disparities that BIPOC face in accessing evidence-based addiction treatment, which have been documented in previous public policy and racial justice statements published by ASAM.

Today's policy statements were endorsed by several medical groups with addiction specialist members. Specifically, the Public Policy Statement on Optimizing Telehealth Access to Addiction Care was endorsed by the American College of Academic Addiction Medicine, the

American College of Medical Toxicology, and the American Osteopathic Academy of Addiction Medicine.

The Public Policy Statement on Substance Use and Substance Use Disorder Among Pregnant and Postpartum People was endorsed by the American College of Academic Addiction Medicine and the American Osteopathic Academy of Addiction Medicine.

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About the American Society of Addiction Medicine

The American Society of Addiction Medicine (ASAM), founded in 1954, is a professional medical society representing over 7,000 physicians, clinicians, and associated professionals in the field of addiction medicine. ASAM is dedicated to increasing access and improving the quality of addiction treatment, educating physicians and the public, supporting research and prevention, and promoting the appropriate role of physicians in the care of patients with addiction. For more information, visit www.ASAM.org.