



ASAM American Society of
Addiction Medicine

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ASAM Urges Congress, Administration to Expand Access to Evidence-Based Addiction Treatment for Americans Who are Incarcerated

Nation's leading association of addiction specialist physicians and other clinicians issues new policy recommendations intended to save lives, support recovery, and address systemic health inequities in correctional settings

Rockville, MD – In a [new public policy statement on treatment of opioid use disorder \(OUD\) in correctional settings](#), the American Society of Addiction Medicine (ASAM) calls on policymakers to support measures that would expand access to evidence-based addiction treatment for Americans who are incarcerated. Individuals who are incarcerated are a vulnerable population and withholding evidence-based OUD treatment increases risk for death during detainment and upon release. The new policy statement describes the standard of care that ASAM believes all individuals with OUD who are detained and incarcerated should receive and outlines systemic changes to ensure universal access to such care within correctional institutions.

“For decades, America has tried to arrest and incarcerate away problems with drug use and addiction. As a result, millions of individuals with a preventable and treatable medical disease have been locked up – many of them Black and Latinx Americans – where they have not been offered evidence-based treatment for their disease. This must change,” said Paul H. Earley, MD, DFASAM, president of ASAM. “By following the recommendations we detail today, which call for systemic changes to ensure universal access to such care within correctional institutions, we can save lives and encourage long-term recovery — positive outcomes that reverberate well beyond prison walls.”

Access to OUD treatment in jails and prisons is a critical public health and ethical issue. Research suggests nearly two-thirds of individuals who are incarcerated have a history of substance use disorder (SUD), with up to 20 percent meeting criteria for opioid use disorder. Sadly, it has been estimated that individuals returning to the community after incarceration are 129 times more likely to die from an overdose than the general population.

Individuals who are incarcerated face significant obstacles to accessing addiction treatment. For example, under current law, Medicaid is prohibited from paying for health care in jails and prisons (“the inmate exclusion clause” of the 1965 Social Security Act). Meanwhile, Medicare regulations generally prevent payment for medical care furnished to a Medicare beneficiary who is incarcerated or in custody at the time the services are delivered, and many private insurers commonly exclude coverage and payment of medical care during incarceration. Such policies often prevent Americans who are incarcerated from accessing evidence-based OUD treatment, including all FDA-approved medications – which leaves individuals vulnerable to relapse, recidivism and overdose upon release.

Congress is currently considering legislation that would help address these issues. [The Medicaid Reentry Act \(H.R. 1329\)](#), introduced by Rep. Paul Tonko (D-NY), would partially remove the inmate exclusion by allowing states to restart Medicaid coverage for eligible individuals who are incarcerated for the 30 days prior to their release. The Medicaid Reentry Act was also included in [The Heroes Act \(H.R. 6800\)](#) along with a provision championed by Rep. Ann Kuster (D-NH) that would require the Medicaid and CHIP Payment and Access Commission to submit a report to Congress on the Medicaid inmate exclusion clause and how it impacts Americans who are incarcerated—a step towards understanding the impact of a full repeal in the future.

“Preventing overdose and treating addiction is a life or death issue for millions of Americans,” said Elizabeth Salisbury-Afshar, MD, MPH, member of ASAM’s public policy committee and chair of the writing committee responsible for this new public policy statement. “By passing pending federal legislation, Congress has the power to seize this moment and start in motion a societal impact that will improve the quality of life for Americans who have been marginalized for far too long.”

To read the Public Policy Statement on Treatment of Opioid Use Disorder in Correctional Settings, [CLICK HERE](#).

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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 6,000 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.