2020
ASAM ADVOCACY
YEAR IN REVIEW
JANUARY 2021
In February 2020, the American Society of Addiction Medicine (ASAM) released its Advocacy Roadmap urging bold, swift, and comprehensive action for addressing the human and societal costs of addiction in the United States. That document, which outlined specific policy recommendations and activities for improving America’s addiction prevention and treatment infrastructure, has served as ASAM’s strategic advocacy plan for preventing and treating addiction and saving lives in 2020 and will continue to do so throughout 2021.

This 2020 ASAM Advocacy Year in Review provides an overview of some of the new policies and resources that ASAM and its State Chapters helped advance in 2020, by working closely with federal and state policymakers and other key stakeholders. With the Advocacy Roadmap as their guide, ASAM members continue to help bring about a future when addiction prevention, treatment, remission, and recovery are accessible to all, and the health of people with addiction is profoundly improved.
NATIONAL ADVOCACY

STRENGTHENING THE ADDICTION TREATMENT WORKFORCE

- Congressional appropriations totaling $16 million for FY 2021 – a $4 million increase over the FY 2020 level - for the Loan Repayment Program for Substance Use Disorder Treatment Workforce, which will address workforce shortages by providing for the repayment of education loans for individuals working in full-time addiction treatment jobs that involve direct patient care in either a Mental Health Professional Shortage Area or a county where the overdose death rate exceeds the national average.

- Congressional appropriations totaling $29.7 million for FY 2021 – a $3 million increase over the FY 2020 level - for the Mental and Substance Use Disorder Workforce Training Demonstration program, which will make grants to institutions to support training for medical fellows in addiction psychiatry and addiction medicine, as well as nurse practitioners, physician assistants, and others, to provide addiction treatment in underserved communities.

- Enactment of federal legislation that includes 1,000 new Medicare-supported GME positions – the first increase in nearly 25 years. Slots will be prioritized for training programs in rural areas, hospitals training residents over their cap, states with new medical schools, and providers that care for underserved communities in the distribution of these new residency positions. These new positions may help support addiction medicine fellowships and prerequisite programs.
STANDARDIZING THE DELIVERY OF INDIVIDUALIZED ADDICTION TREATMENT

• Through advocacy and Congressional testimony, continued advancement of two pieces of federal legislation that, together, would eliminate the separate DEA waiver requirement for prescribing certain medications for addiction treatment, like buprenorphine, and establish a requirement that prescribers of controlled medications complete a specified amount of addiction training.

• Enactment of the Coronavirus Aid, Relief, and Economic Security (CARES) Act of 2020, which includes the Protecting Jessica Grubb’s Legacy Act, which makes substantial changes to the statute underlying the substance use disorder (SUD) treatment record confidentiality regulations at 42 CFR Part 2. Implementation regulations are expected in 2021.

ENSURING EQUITABLE ACCESS AND COVERAGE FOR COMPREHENSIVE, HIGH-QUALITY ADDICTION CARE

• Enactment of federal legislation that will require (1) group health plans and health insurance issuers offering coverage in the individual or group markets to conduct comparative analyses of the nonquantitative treatment limitations used for medical and surgical benefits as compared to mental health and SUD benefits; (2) federal regulators to make requests for comparative analyses of at least 20 plans per year that involve potential violations of mental health parity and complaints regarding noncompliance with mental health parity, and (3) the publication of an annual report with a summary of the comparative analyses.

• Enactment of Section 2601 of the Continuing Appropriations Act, 2021 and Other Extensions Act to ensure that medications for addiction treatment, which were mandated to be covered by state Medicaid programs for the period beginning October 1, 2020, and ending September 30, 2025, under the SUPPORT Act of 2018, can be included in the Medicaid Drug Rebate Program (MDRP). Read more.

STATE CHAPTER ADVOCACY

• California - On September 25, 2020, Governor Newsom signed SB855 which requires all private insurers to cover medically necessary mental health and substance use disorder services. When deciding whether a treatment is medically necessary, those insurers must follow the most recent criteria and guidelines developed by nonprofit professional associations, like ASAM. The California Society of Addiction Medicine and ASAM endorsed the legislation.

• Colorado - On July 13, 2020, Colorado Governor Jared Polis signed SB20-007 into law. The act requires that certain health benefit plans provide coverage for the treatment of substance use disorder in accordance with The ASAM Criteria for placement, medical necessity, and utilization management determinations. The Colorado Society of Addiction Medicine endorsed the bill while it was under consideration in the Colorado Senate, and sent a letter to Governor Polis urging the bill’s passage.
• **Colorado** – On July 13, 2020, Colorado Governor Jared Polis signed SB20-1065 into law. The act implemented a broad array of harm reduction measures, such as requiring that insurance carriers reimburse hospitals for providing naloxone, allowing pharmacists and pharmacy technicians to sell nonprescription syringes and needles, and securing funding for Colorado's harm reduction grant program. The Colorado Society of Addiction medicine endorsed the bill while it was under consideration in the Colorado Senate.

• **Colorado** – On June 30, 2020, Colorado Governor Jared Polis signed SB20-028 into law. The act required research into Colorado's SUD treatment and recovery services to better inform policymaking on the addiction crisis in the state. It also secured funding for important wraparound services, such as peer mentoring and housing assistance. The Colorado Society of Addiction medicine endorsed the bill while it was under consideration in the Colorado Senate.

• **Utah** – On March 28, 2020, Utah Governor Gary Herbert signed HB38 into law. The act incentivizes the delivery of addiction treatment in correctional facilities and requires the state to pursue a state plan amendment to allow Medicaid pre-enrollment for certain inmates. The Utah Society of Addiction Medicine endorsed the bill while it was under consideration in the Utah House of Representatives.

• **Virginia** – On April 7, 2020, Virginia Governor Ralph Northam signed HB791 into law. The act repeals the sunset on the authority of the Commissioner of Health to establish and operate comprehensive harm reduction programs, such as needle exchange programs. The Virginia Society of Addiction Medicine endorsed the legislation while it was under consideration in the Virginia House of Delegate.

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**Public Policy Statements**

ASAM's public policy statements guide its advocacy on legislative and regulatory issues. In 2020, ASAM issued the following, five public policy statements to help advance addiction medicine:

- Cannabis
- Treatment of Opioid Use Disorder in Correctional Settings
- Third-Party Payment for Addiction Treatment
- E-Cigarettes
- Physicians and Other Healthcare Professionals with Addiction
PRACTICE MANAGEMENT & REGULATORY AFFAIRS WORK

- Publication of an [Utilization Management for Medications for Addiction Treatment Toolkit](#)
- Promulgation of SAMHSA’s [new rule](#) to advance the integration of healthcare for individuals with substance use disorders while maintaining critical privacy and confidentiality protections.
- Billions of dollars in emergency relief made available for behavioral health providers from the [CARES Act Provider Relief Fund](#).
- SAMHSA, DEA, and CMS allowed for extensive flexibilities for health care professionals treating addiction during the COVID-19 public health emergency, particularly related to the delivery of opioid use disorder treatment and coverage of telehealth services.
  - [SAMHSA](#)
  - [DEA](#)
  - [CMS](#)

OTHER ADVOCACY ACTIVITIES

- Gave Congressional testimony before House E&C, Health Subcommittee
- Co-led 2 Congressional Roundtables via Coalition to Stop Opioid Overdose
- Led and joined dozens of letters to Capitol Hill and various federal agencies
- 1,243 grassroots emails sent by ASAM members to Capitol Hill on issues ranging from COVID relief and the TREATS Act - prioritizing mental health and addiction treatment.
- Generated millions of social media impressions of media stories highlighting ASAM policy positions
- Drove media narrative through high-profile media coverage in NPR, Bloomberg, USA Today and other national outlets

ASAM's Chief Advocacy Officer, Kelly Corredor, Representative David Trone, and APA's Laurel Stine, prepare for a Coalition to Stop Opioid Overdose and Mental Health Liaison Group roundtable discussion.