

**Brian Hurley, MD, MBA, DFASAM** – Submission Date: 1/23/2020

**1) List any business or any organization that you or an immediate family member have an interest in that has provided goods or services to ASAM within the last 3 years, or that you expect to provide within the next 1 year, describe the relationship and the level of interest.**

Have you any interest to disclose?  
For whom are you disclosing?  
Name the Business/Organization for which you are disclosing.  
Level of Interest  
*Refer to definitions above*

No  
Self

Please describe the Interest  
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For whom are you disclosing?  
Name the Business/Organization for which you are disclosing.  
Level of Interest  
*Refer to definitions above*

Please describe the Interest  
-----  
For whom are you disclosing?  
Name the Business/Organization for which you are disclosing  
Level of Interest  
*Refer to definitions above*

Please describe the Interest  
Please list any additional business or any organization that you or an immediate family member have an interest in that has provided goods or services to ASAM within the last 3 years, or that you expect to provide within the next 1 year, describe the relationship and level of interest in the text box below:

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**2) List any business or organization that you or an immediate family member have an interest that competes with ASAM's products or services, describe the relationship and the level of interest.**

Have you any interest to disclose?

No

**For whom are you disclosing?**

**Name the Business/Organization for which you are disclosing.**

**Level of Interest**

*Refer to definitions above*

**Please describe the Interest**

**For whom are you disclosing?**

**Name the Business/Organization for which you are disclosing.**

**Level of Interest**

*Refer to definitions above*

**Please describe the Interest**

**For whom are you disclosing?**

**Name the Business/Organization for which you are disclosing**

**Level of interest**

*Refer to definitions above*

**Please describe the Interest**

**Please list any additional business or organization that you or an immediate family member have an interest that competes with ASAM's products or services, describe the relationship and the level of interest in the text box below:**

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**3) List organizations and your role for which you serve as an officer, trustee or director of, or are involved in public representation and advocacy (including lobbying) on behalf of any organization other than ASAM or an ASAM Chapter.**

**Name of Organization**

American  
Medical  
Association

**Role**Member (attend  
advocacy events)

**Name of Organization**

**Name of Organization**

**Role**

**Role**

**Please list any additional organizations and your role for which you serve as an officer, trustee or director of, or are involved in public representation and advocacy (including lobbying) on behalf of any organization other than ASAM or an ASAM Chapter in the text box below:**

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**4) Please indicate below if you or an immediate family member have any interest(s) that derives from service/status as an officer, trustee, director, proprietor, partner, (full or part-time) employee, grant recipient, or consultant for any health care or health-related**

**business or organization.**

For whom are you disclosing?  
Indicate Position  
Name of Organization:

Self  
Proprietor  
Brian Hurley,  
M.D.

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For whom are you disclosing?  
Indicate Position

Self  
Employee (Full  
or Part-time)  
Los Angeles  
County

Name of Organization:

Please list any additional information if you or an immediate family member have any interest(s) that derives from service/status as an officer, trustee, director, proprietor, partner, (full or part-time) employee, grant recipient, or consultant for any health care or health-related business or organization in the text box below:

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**5) Please list below any interests, affiliations, arrangements or relationships that you or your immediate family members have that could lead to questions about your motives in connection with your work on behalf of ASAM if such interest were made public.**

For whom are you disclosing?  
Provide details  
For whom are you disclosing?  
Provide Details

Please list any additional interests, affiliations, arrangements or relationships that you or your immediate family members have that could lead to questions about your motives in connection with your work on behalf of ASAM if such interest were made public in the text box below:

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**6) List all sources of your professional income (e.g., private practice; consultation; employment by a clinic, HMO, hospital, medical school, etc.). For each source, list the entity, briefly describe the work you do and the percentage of your income.**

**Select Sources (hold CTRL key to multi-select)**

*If "Other" is selected, indicate the sources on next question*

**For each source, list the entity, briefly describe the work you do and the percentage of your income.**

Clinical and Administrative work at the Los Angeles County Department of Mental Health (60%) Clinical work: Private Practice (15%) Consulting work: Centers for Care Innovation, PsyBAR, Orange County, STR-TA Opioid Response Network, APA-Friends Research Institute (14%) Clinical work as a contracted psychiatrist: Cedar Sinai Health System (5%) Senior Scientist: Friends Research Institute (4%) Co-Investigator at the RAND Corporation Financial Director: Annenberg Physician Training Program in Addictive Disease (<1%)

**Please list any additional sources of your professional income (e.g., private practice; consultation; employment by a clinic, HMO, hospital, medical school, etc.). For each source, list the entity, briefly describe the work you do and the percentage of income in the text box below:**

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**7) Please indicate below any relationships within the last 12 months that could be relevant to the topics or issues addressed in or implicated by ASAM's policy statements.**

**Provide details of such relationship  
Who are you disclosing for?**

I am affiliated with the Camden Center (in Los Angeles), and although this is not a significant source of income, they are a private treatment program in Los Angeles with which I am affiliated.

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**8) Indicate financial relationship(s) you or your spouse have with a commercial interest [review definition above] within the past 12 months.**

**For whom are you disclosing?**

**Level of Interest**

*Refer to definitions above*

**List company, what was received, and for what role.**

*(Example: ABC company, received modest honoraria for speaking at conference)*

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**For whom are you disclosing?**

**Level of Interest**

*Refer to definitions above*

**List company, what was received, and for what role.**

*(Example: ABC company, received modest honoraria for speaking at conference)*

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**For whom are you disclosing?**

**Level of Interest**

*Refer to definitions above*

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**For whom are you disclosing?**

**Level of Interest**

*Refer to definitions above*

**List company, what was received, and for what role.**

*(Example: ABC company, received modest honoraria for speaking at conference)*

**Please list any additional financial relationship(s) you or your spouse have with a commercial interest [review definition above] within in the past 12 months in the text below:**

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**9) Please indicate below any a) civil judgments (excluding medical malpractice), b) licensure revocations or suspensions, c) arrests, indictments, or convictions for any criminal offenses, or d) disciplinary actions by any medical board or medical society currently pending against you or on record within the past ten years.**

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**Indicate  
Pending  
Actions**

On December 3, 2013 I was arrested in New York, NY by a plain clothed police officer working for the New York Police Department because I was wearing a pedometer that the officer erroneously believed was contraband, and I was booked for resisting arrest. The New York District Attorney declined to prosecute the arrest, and so there are no criminal charges on my record. The New York City Civilian Complaint Review Board conducted an investigation, and in April 2016 the officers involved pled guilty to misconduct without legal justification before a disciplinary hearing prosecuted by the New York City Civilian Complaint Review Board Administrative Prosecution Unit.

**10) Please describe any other information you believe is important to disclose.**

**Provide details**

None at this time.

**Statement of Compliance**

**I have reviewed, and agree to comply with, ASAM's Universal Disclosure Policy and Procedures. I have identified all interests and affiliations about which information has been requested. I certify that the answers that I have provided to these questions are truthful and I agree to update this statement within 30 days to reflect any changes.**

**I understand that I am required to disclose any potential conflict of interest to ASAM before engaging in any ASAM related activities. Any perceived conflicts not addressed by self-disclosure or recusal will be managed by ASAM. If requested, the Ethics Committee will assist in evaluating potential conflicts of interest.**

**I attest that all the answers above are correct**