



OFFICERS

President

Kelly J. Clark, MD, MBA, DFAPA, DFASAM

President-Elect

Paul H. Earley, MD, DFASAM

Vice President

Margaret Jarvis, MD, DFASAM

Secretary

Yngvild Olsen, MD, MPH, DFASAM

Treasurer

Brian Hurley, MD, MBA, FASAM

Immediate Past President

R. Jeffrey Goldsmith, MD, DLFAPA, DFASAM

BOARD OF DIRECTORS

Directors-at-Large

Anthony Albanese, MD, DFASAM

Marc Galanter, MD, DFASAM

William F. Haning, III, MD, DFAPA, DFASAM

Petros Levounis, MD, MA, DFASAM

John C. Tanner, DO, DFASAM

Regional Directors

Region I Director

Jeff Selzer, MD, DFASAM

Region II Director

Murtuza Ghadiali, MD

Region III Director

Kenneth Freedman, MD, MS, MBA, FACP, AGAF,
DFASAM

Region IV Director

Michael Shore, MD, DFASAM, DLFAPA

Region V Director

Anika Alvanzo, MD, MS, FACP, FASAM

Region VI Director

Gavin Bart, MD, PhD, DFASAM

Region VII Director

A. Kenison Roy, III, MD, DLFAPA, DFASAM

Region VIII Director

Miriam Komaromy, MD, FACP, DFASAM

Region IX Director

Peter Selby, MBBS, CCFP, FCFP, MHSc,
DFASAM

Region X Director

Scott Teitelbaum, MD, DFASAM

Ex-Officio

Stuart Gitlow, MD, MPH, MBA, DFAPA, DFASAM

Randolph P. Holmes, MD, FASAM

Michelle Lofwall, MD, FASAM

Penny S. Mills, MBA

Aleksandra Zgierska, MD, PhD

FOUNDING PRESIDENT

Ruth Fox, MD

1895-1989

Dear _____,

On behalf of the American Society of Addiction Medicine (ASAM), I am writing to request that _____ immediately review all policies that bar, limit and/or restrict non-psychiatrist addiction medicine physicians from inclusion in your in-network provider panel. Despite having earned board certification in addiction medicine that identify such physicians as the most trained and experienced physicians in their field, we have heard from non-psychiatrist addiction specialists that they have been excluded from _____ provider networks. In light of these troubling revelations, ASAM's Board of Directors adopted policy recommending that insurers include appropriately credentialed addiction medicine physicians in their in-network provider panels. Accordingly, we urge _____ to reconsider and appropriately revise all policies that inappropriately exclude non-psychiatrist addiction medicine physicians from in-network participation.

Non-psychiatrist physicians certified by ASAM, the American Board of Addiction Medicine (ABAM), the American Osteopathic Association (AOA), and/or the American Board of Preventive Medicine (ABPM) have earned board certifications that designate them as the most trained and experienced specialists available to provide quality treatment to patients diagnosed with an addiction. These addiction specialist physicians have undergone a rigorous certification process and devote a significant portion of their clinical activity providing treatment to patients with an addiction.

The aforementioned certifications are widely recognized by stakeholders in the medical community. The American Medical Association (AMA) has recognized the expertise of addiction specialists and has also resolved to support all physician specialties providing addiction treatment. Several states also recognize these certifications as a measure of physician knowledge and skills to treat patients with an addiction. Non-psychiatrist physicians with board certification in addiction medicine are eligible to treat patients and hold clinical leadership positions in treatment centers and programs in several states, including in New Jersey, Ohio, Tennessee and Virginia.

Furthermore, the U.S. Drug Addiction Treatment Act (DATA) of 2000 recognized certification in addiction medicine as a credential that allows physicians to prescribe "narcotic drugs in Schedule III, IV, or V or combinations of such drugs to patients for maintenance or detoxification. The rule states in § 8.610(b)(1) that practitioners who

hold additional credentialing as defined in § 8.2 (“...**board certification in addiction medicine or addiction psychiatry by the American Board of Addiction Medicine or the American Board of Medical Specialties or certification by the American Osteopathic Academy of Addiction Medicine, the American Board of Addiction Medicine, or the American Society of Addiction Medicine**”) qualify by nature of their board certifications to treat the maximum number of patients (275) as provided in the final rule. Provided that the federal government has recognized these certification pathways for addiction specialists, it is imperative that promptly proceed to do the same.

By providing addiction treatment benefits, insurers obligate themselves to facilitate high quality and readily available addiction treatment. Many mission statements state the guiding principle of ensuring the right treatment at the right time in the right place, all while using resources efficiently, potentially lowering overall health care costs. Excluding non-psychiatrist addiction medicine physicians and limiting provider panels significantly undermines this principle and risks the lives of millions who need treatment.

Given the rapid evolution and transition of the addiction medicine field, we recognize that may be unaware of the recognition of addiction medicine as a medical subspecialty by the American Board of Medical Specialties (ABMS) under the American Board of Preventive Medicine. While the pathway to addiction medicine board certification for non-psychiatrist physicians is now through ABPM, all physicians previously certified by ASAM, ABAM, and AOA should be recognized for their extensive education and experience demonstrated by a rigorous board examination process. Additionally, these highly accomplished physicians are required to maintain continuous certification to promote lifelong learning in their fields. We believe that it is in the best interest of access to quality patient care that payers invite non-psychiatrist board-certified addiction medicine physicians to their in-network provider panels.

Stakeholders in the medical community, hospitals, state governments, and payers alike have all recognized the aforementioned board certifications as the appropriate qualifications for identifying physicians recognized for their expertise in the diagnosis and treatment of addiction and related health conditions. As millions in the United States struggle with an opioid addiction, limiting in-network provider panels to psychiatrists only aggravates the dramatic increase in the number of drug overdose deaths, the number of individuals with an addiction, and the already limited number of qualified physicians available to provide treatment. To ensure that the treatment needs are met for those struggling with an addiction, ASAM recommends that promptly provide for the inclusion in provider networks of non-psychiatrist physicians certified by the ABPM, ASAM, ABAM, or AOA in addiction medicine, as well as physicians who have completed an accredited residency or fellowship in addiction medicine.

To further the dialogue about our concerns, we request a face-to-face meeting as soon as possible with the appropriate individuals from your organization. Corey Barton, Manager, Private Sector Relations for ASAM will follow-up with your office to schedule a meeting to further discuss this request.

Sincerely,



Kelly J. Clark, MD, MBA, DFASAM
President, American Society of Addiction Medicine