

CSAM Public Policy Platform

The following public policy platform represents what will be the focus and direction of the California Society of Addiction Medicine (CSAM) in evaluating and responding to legislative and regulatory measures. In addition, this platform will serve as a guide as CSAM prioritizes its initiatives and activities in 2020.

1. Inform the public and policy makers about effective and appropriate levels of evidence-based treatment for Substance Use Disorders (SUD).
2. Inform insurers regarding the efficacy of SUD treatment.
3. Create a regulatory environment to ensure that there can be an effective statewide Physician Health Program, including advocating for changes to the Uniform Standards that govern the operations of such a program.
4. Make recommendations for treatment programs to make sure that physicians can work in these programs and/or they have collaborative relationships, especially in rural areas; make sure these programs are licensed and/or meet ASAM Criteria.
5. Maximize reimbursement and access for treatment and integration of drug treatment, including tobacco treatment into drug treatment, into mental health, social welfare and court resources.
6. Advocate for SUD and Mental Health programs in California to be required to have tobacco-free policies and systematically assess clients for tobacco use and provide evidence based tobacco treatment.
7. Promote safe prescribing of controlled or scheduled medications including checking PDMP in conjunction with Overdose prevention methods including making Naloxone readily available.
8. Promote harm reduction by supporting legislation and local ordinances that encourage safe injection sites / safe consumption sites in communities, and other new and novel harm reduction strategies.
9. Advocate for parity / reimbursement for SUD treatment on par with reimbursement for other medical conditions and promote efforts to ensure compliance.
10. Improve licensing requirements for drug counselors.
11. Advocate for funding from cannabis taxation to support adolescent treatment.
12. Oppose the criminalization of addiction and work to promote the disease model of addiction.
13. Advocate for MAT access while in residential treatment.
14. Advocate for MAT/Treatment access in correctional settings.
15. Advocate for inpatient Hospital Setting Opioid Agonist Therapy (OAT).
16. Advocate to increase the availability of substance abuse treatment provided through Federally Qualified Health Centers (FQHC)

Approved by the CSAM Committee on Public Policy