



# American Academy of Addiction Psychiatry (AAAP)

## TREATMENT PARITY

### Introduction

Abuse of tobacco, alcohol, and other psychoactive substances is a major national problem that causes mental and physical illness and contributes to the social problems of violence, crime, homelessness, family disruption, decreased occupational performance, and legal difficulties. Addressing substance abuse should be a top priority in health care reform.

### Policy Statement

1. The nation needs universal access to a minimal benefits health care package that will provide treatment for alcoholism and substance-related disorders at all levels of care. Substance use disorder treatment benefits should be part of a basic package that also includes treatment for other psychiatric illnesses on an equal basis with treatment for medical and surgical illnesses in an organized system of care. Covered benefits must include screening, psychiatric assessment, and detoxification. Pharmacotherapy and follow-up treatment with psychiatric input must also be covered to ensure quality care. Treatment at inpatient, outpatient and in other practice settings should be supported.
2. Concerted efforts to eliminate the stigma associated with the diagnosis and treatment of substance use problems are essential. Substance abuse should be accorded health care coverage equal to that provided for other chronic, relapsing conditions insofar as access to care, treatment benefits, and clinical outcomes are concerned. AAAP opposes lifetime caps, co-payment requirements, and any other mechanisms that discriminate against behavioral health care as compared to the coverage provided for medical-surgical illnesses.
3. AAAP supports increased funding for clinical education and research on alcoholism and drug abuse, including new treatment development and treatment outcome research.

### Background

Substance-related disorders have a biological basis like other medical illnesses and require physician's care. The most effective current treatments require careful diagnosis and targeting of the right treatment to the right patient. Relapsing patients frequently fail because of lack of treatment for an additional psychiatric diagnosis and because of inadequate treatment targeting. A large number of patients with addictions also have additional psychiatric diagnoses that must be taken into account. Furthermore, substance use disorders are commonly co-morbid conditions in patients with primary psychiatric disorders. Physicians with specialty training and credentials in caring for patients with substance related disorders are best able to screen, diagnose and effectively integrate medications as part of treatments that address complex biological and psychosocial issues. AAAP supports the American Psychiatric Association's practice guidelines for the Treatment of Substance-Use Disorders as a guide to the minimal standards for quality treatment that should be accessed and supported by basic health care benefits.

**Approved by AAAP Board of Directors: October 2002**  
**Revises Previous Policy Endorsed: September 1999**

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