

H-185.974 Parity for Mental Illness, Alcoholism, and Related Disorders in Medical Benefits Programs

The AMA supports parity of coverage for mental illness, alcoholism and substance abuse. (Res. 212, A-96)

H-185.992 Life-Threatening Emotional/Behavioral Disease

The AMA reaffirms its support of the availability of insurance for the appropriate treatment of substance abuse and serious emotional illness. (Res. 55, A-88)

H-30.956 Inclusion of Detoxification Coverage in Minimum Benefits Package for the Uninsured

The AMA endorses the position that coverage for detoxification should be included in any minimum health insurance benefits package. (Amended Res. 806, I-91)

H-30.977 Alcoholism as a Disease

The AMA urges change in federal laws and regulations to require that the Veterans Administration determine benefits eligibility on the basis that alcoholism is a disease. (Res. 112, A-88)

H-30.996 Alcoholism Insurance

The AMA supports:

- (1) continued efforts to stimulate provision of a broad continuum of alcoholism treatment benefits by insurers that follow the plan of the National Institute on Alcohol Abuse and Alcoholism;
- (2) continued encouragement for consideration by state legislatures of legislation providing for truth in benefits advertising and clarity of contract language; and
- (3) encouragement for the expansion of alcoholism treatment benefits under the Federal Employee Benefits Program to include more than detoxification.

(Sub. Res. 67, A-80; Reaffirmed: CLRPD Rep. B, I-90)

H-30.999 Admission of Alcoholics to General Hospitals

The AMA encourages insurance companies and prepayment plans to remove unrealistic limitations on the extent of coverage afforded for the treatment of alcoholism, recognizing that alcoholism is a chronic illness and that multiple hospital admissions under medical supervision may be essential to arresting the progress of the disease. (CMS Rep. G, I-66; Reaffirmed: CLRPD Rep. C, A-88)

H-95.973 Increased Funding for Drug Treatment

The AMA

- (1) urges Congress to substantially increase its funding for drug treatment programs;
- (2) urges Congress to increase funding for the expansion and creation of new staff training programs; and
- (3) urges state medical societies to press for greater commitment of funds by state and local government to expand the quantity and improve the quality of the drug treatment system. (Res. 116, I-89)

H-95.980 Increased Funding for Drug-Related Programs

The AMA supports the expansion of those drug rehabilitation programs which provide an environment for medical and other professional counseling, education and behavior change, and voluntary HIV testing for persons at risk for HIV. (Res. 35, I-88)

H-160.959 Health Care Access for the Inner-City Poor

(1) The AMA reaffirms the following statement from Policy H-140.975: "Physicians should continue their traditional assumption of a part of the responsibility for the medical care of those who cannot afford essential health care."

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(7) The AMA will stimulate more effective ways in which health education and preventive health services can be more effectively provided to and utilized by the inner-city underserved. Such services may include:

- a. Immunizations
- b. Nutritional guidance

- c. Family planning
 - d. Programs for prevention of sexually transmitted diseases
 - e. Substance abuse programs
 - f. Programs on domestic violence
 - g. Education in healthy lifestyles
 - h. Parenting assistance and education
- (Amended CMS/CME Rep., I-92)

H-160.963 Community-Based Treatment Centers

It is the policy of the AMA

- (1) to communicate to state and county medical societies its support of community-based treatment centers for substance abuse, emotional disorders and developmental disabilities;
- (2) to make available to state and county medical societies model liability legislation and scientific reports dealing with community-based services;
- (3) to alert American Medical Television and American Medical News to this policy and to explore the possibility of enhancing physician and public knowledge regarding community-based treatment centers. (Amended BOT Rep. F, I-91)

H-430.994 Prison-Based Treatment Programs for Drug Abuse

The AMA

- (1) encourages the increased application to the prison setting of the principles, precepts and processes derived from drug-free residential therapeutic community experience;
- (2) urges state health departments or other appropriate agencies to take the lead in working with correction and substance abuse agencies for the expansion of such prison-based drug-free treatment programs; and
- (4) urges the Alcohol, Drug Abuse and Mental Health Administration, the Department of Justice and the Office of Treatment Improvement to assist in the expansion of such programs. (Sub. Res. 124, I-89)