



May 2020

Study Finds Opioid Addiction Care is Hardest to Find in States Where It Is a Requirement for Medicaid Eligibility

Key Findings

Compared to states without Medicaid work requirements, states with approved work requirements had:

- Higher rates of opioid overdose deaths per 100,000
- Lower availability of treatment facilities with opioid treatment programs and opioid maintenance therapy per 100 opioid overdose deaths
- Lower number of buprenorphine prescribers per 100 opioid overdose deaths

The Question:

Are there differences in overdose rates and availability of treatment for opioid use disorder between states with approved Medicaid work requirements, compared to states that do not have work requirements?

Starting in 2018, the U.S. Department of Health and Human Services began inviting state Medicaid programs to apply for Section 1115 waivers requiring “able-bodied” enrollees to work as a condition of enrollment in the program. In some waivers, exemptions to this work requirement include individuals with substance use disorder (SUD) who participate in a SUD treatment program. Given this exception, the availability of treatment programs for individuals with SUD would have a substantial impact on their ability to maintain coverage in states pursuing work requirements. The study found that in states with approved Medicaid work requirements, addiction care was harder to find, pointing to important policy considerations about Medicaid eligibility and enrollment decisions.

Utilizing multiple data sources from 2017, Paul J Christine, M.D., Ph.D., and Renuka Tipirneni, M.D., M.Sc., at the University of Michigan, compared SUD prevalence, all overdose deaths, opioid overdose deaths, and SUD treatment availability across various work requirement categories in order to quantify treatment resource differences between states with and without work requirements.

Dr. Tipirneni is supported by a K08 Clinical Scientist Development Award from the National Institute on Aging (1K08AG056591) and by the University of Michigan Grace H. Elta MD Department of Internal Medicine Early Career Endowment Award.

The Implications:

States with Medicaid work requirements should consider taking into account the limited availability of SUD treatment when making decisions about Medicaid eligibility and enrollment.

Though many states exempt individuals with SUD from work requirement provisions, some states have made it conditional based on participation in a treatment program. While the findings of the study support more access to SUD treatment across the country, the need for treatment access in states pursuing work requirements is particularly important given that lack of access could lead to loss of coverage for enrollees with substance use disorder in these states. In order for Medicaid to continue to play an important role in providing affordable and life-saving health care coverage for vulnerable populations in the U.S., states must consider whether limited availability of SUD treatment programs, when participation in a program is a condition for eligibility, will have negative consequences on the health of their beneficiaries.

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