

Investing in California

Medicaid and Access to Mental Health and Addiction Services

Addiction and mental illness in California

- Over [3.61 percent](#)¹, or more than 1.4 million people in California² have a serious mental illness, and these individuals are among our most vulnerable citizens.
- Tragically, [4,659 Californians](#) lost their lives to drug overdoses in 2015.³

Medicaid is an essential source of funding for behavioral health services in California

California is a Medicaid Expansion state, and currently receives a [50 percent](#)⁴ matching rate from the federal government for regular funding for Medicaid services. Along with the enhanced match rate for expansion populations, these federal funds provide important support to the state in a time of increasing pressure on the state budget. Over the course of a year and a half alone, Medicaid expansion brought **\$21.3 billion** in federal dollars into the state economy.⁵

- [3,466,100](#) Californians are enrolled in the Medicaid Expansion.
- [12,381,700](#) Californians are enrolled in Medicaid.⁶

The Medicaid expansion has made a difference

- According to a [March 2015 ASPE Study](#), California anticipated that implementation of the Medicaid Expansion would secure as much as 100,000 jobs annually.
- According to the UCLA Health Policy Center, California's low income health program found a significant decrease in emergency room visits and inpatient care after the first year of enrollment.⁷
- Over 90 percent of respondents to the December 2016 National Council Medicaid Survey reported that Medicaid Expansion in their state has increased the number of people able to access care. Nearly 70 percent reported an increased ability to access support services that were not covered previously under Medicaid.
- The National Council Survey pointed to the real economic benefits of the Medicaid Expansion, with 33 percent of respondents from 13 states reporting increased hiring of health professionals.
- Compared to non-expansion states, states that have expanded Medicaid have seen major

¹ State Estimates of Adult Mental Illness from the 2011 and 2012 National Surveys on Drug Use and Health (Feb 2014). <http://archive.samhsa.gov/data/2k14/NSDUH170/sr170-mental-illness-state-estimates-2014.htm>

² <http://worldpopulationreview.com/states/>

³ Centers for Disease Control and Prevention, <https://www.cdc.gov/drugoverdose/data/statedeaths.html>

⁴ Federal Medical Assistance Percentage (FMAP) for Medicaid and Multiplier (2017). Kaiser Family Foundation. <http://kff.org/medicaid/state-indicator/federal-matching-rate-and-multiplier/?currentTimeframe=0>

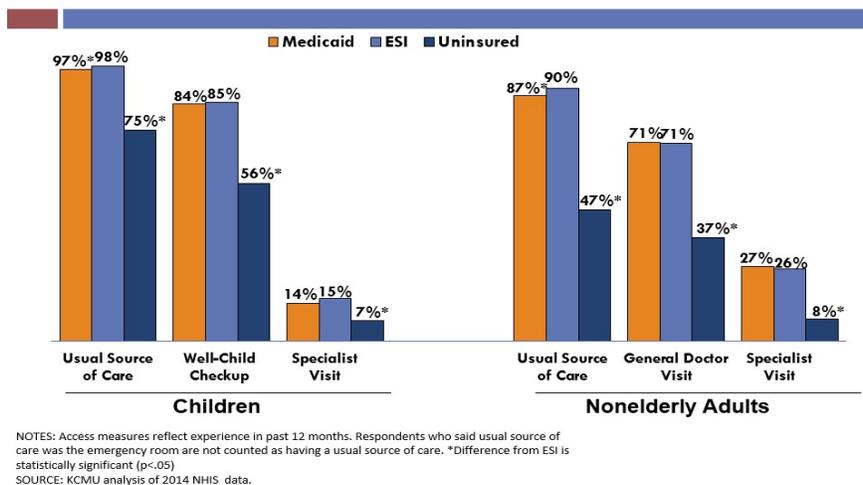
⁵ Families USA, <http://familiesusa.org/product/defending-health-care-2017-what-stake-California>

⁶ Kaiser Family Foundation. <http://kff.org/health-reform/state-indicator/medicaid-expansion-enrollment/?currentTimeframe=0>

⁷ Increased Service Use Following Medicaid Expansion Is Mostly Temporary: Evidence from California's Low Income Health Program (Oct 2014). UCLA Center for Health Policy Research. http://healthpolicy.ucla.edu/publications/Documents/PDF/2014/Demand_PB_FINAL_10-8-14.pdf

reductions in uncompensated care delivered by safety net institutions, significant drops in the number of uninsured, and budget savings for hospitals and community health clinics.⁸

Medicaid and private insurance provide similar access to care – the uninsured fare far less well.



According to the Centers for Disease Control and Prevention, the national uninsured rate for people with serious psychological disorders declined from 28.1 percent in 2012 to 19.5 percent in 2015.⁹ This translates to healthier and more productive citizens.

“The costs do not go away if you don’t fund the service. They show up in uncompensated care, increased costs to the corrections and legal system and increased disruption in the lives of individuals, families and organizations who are interacting with individuals with a mental illness or substance use disorder who are unable to access what they need to live successfully in their community of choice” -- Mental health provider in New Hampshire (National Council Medicaid Survey, 12/2016)

⁸ [Beyond the Reduction in Uncompensated Care: Medicaid Expansion Is Having a Positive Impact on Safety Net Hospitals and Clinics](#)

by Adam Searing, Georgetown University Center for Children and Families and Jack Hoadley, Georgetown University Health Policy Institute, June 2016

⁹ [Access to Care Among Adults Aged 18–64 With Serious Psychological Distress: Early Release of Estimates From the National Health Interview Survey, 2012–September 2015](#). National Health Interview Survey Early Release Program, Centers for Disease Control, 5/2016