

# Investing in Kentucky

## Medicaid and Access to Mental Health and Addiction Services

### Addiction and Mental Illness in Kentucky

- Over [4.7 percent](#)<sup>1</sup>, or over 209,000 people in Kentucky, have a serious mental illness, and these individuals are among our most vulnerable citizens.
- In 2015, there were over [1,273](#) drug-related deaths in Kentucky, which marked a 21 percent increase over 2014, one the highest increases in the nation. To prevent these tragedies, Kentuckians need high quality health care and access to affordable services.

### Opioid Epidemic and Overdose Deaths (2014)<sup>2</sup>

State	Drug Overdose Deaths (rate/100,000)	Rx Opioid Use per 1000 population	Buprenorphine use per 1000 population	% Share of Bupe paid by Medicaid
Kentucky	1,273 (29.9)	987	126	44.2
U.S.	52,404 (16.3)	695	39	24.2

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

Kentucky is a Medicaid Expansion state, and currently receives a [70.4](#) percent 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.

- As of September 1, 2016, nearly 440,000 Kentuckians were enrolled in the Medicaid Expansion.<sup>3</sup> Over 40,000 people with a serious mental illness or substance use disorders were enrolled in the Medicaid Expansion.<sup>4</sup>
- [1,283,800](#) Kentuckians were enrolled in Medicaid.<sup>5</sup>
- In the last quarter of 2016, over 78 percent of adults enrolled in Medicaid were enrolled through the Medicaid Expansion<sup>6</sup>

### Expanding Medicaid has helped save lives and money

- The expanded Medicaid program in the Commonwealth under the Affordable Care Act (ACA) covered approximately 11,000 substance-use treatment services in the second quarter of 2016,

<sup>1</sup> State Estimates of Adult Mental Illness from the 2011 and 2012 National Surveys on Drug Use and Health (Feb 2014).

<sup>2</sup> <https://www.hcp.med.harvard.edu/background-information-richard-frank-article>

<sup>3</sup> Kentucky Medicaid expansion: 10 things John Bel Edwards wants you to know (Sept 2016). Times-Picayune.

[http://www.nola.com/politics/index.ssf/2016/09/Kentucky\\_medicaid\\_expansion\\_2.html](http://www.nola.com/politics/index.ssf/2016/09/Kentucky_medicaid_expansion_2.html)

<sup>4</sup> <https://www.hcp.med.harvard.edu/background-information-richard-frank-article>

<sup>5</sup> Kaiser Family Foundation. <http://kff.org/health-reform/state-indicator/medicaid-expansion-enrollment/?currentTimeframe=0>

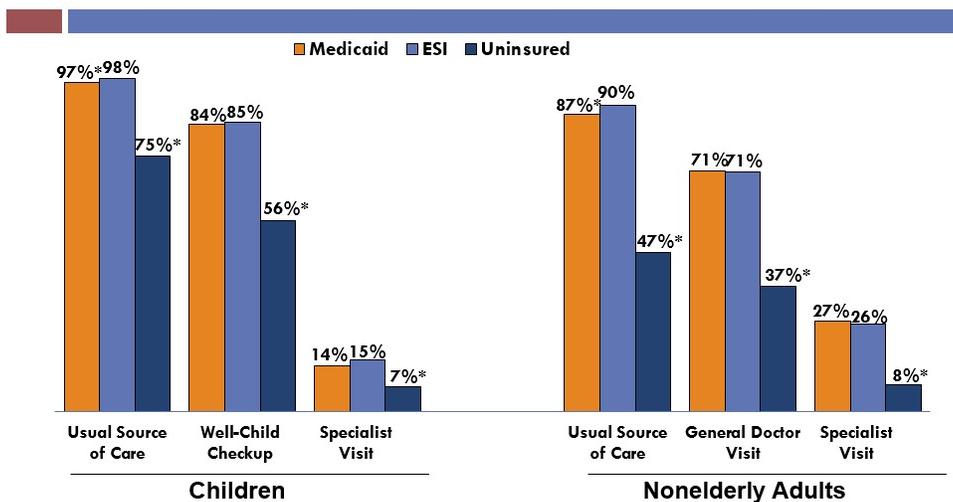
<sup>6</sup> More than 650,000 adults enrolled in Medicaid in Third Quarter of 2016 (Feb 9, 2017). Foundation for Healthy Kentucky.

<https://www.healthy-ky.org/newsroom/news-releases/article/70/medicaid-covered-more-than-650-000-adult-kentuckians-in-third-quarter-2016?>

compared to about 1,500 in the first quarter of 2014 — a 740 percent increase — according to a report from the Foundation for a Healthy Kentucky.<sup>7</sup>

- According to a March 2015 ASPE Study, a Kentucky study has found that implementation of the Medicaid Expansion would secure \$1.7 billion for the state and could create over 14,700 jobs between 2014 and 2016 alone.
- 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.
- A National Council survey of community-based behavioral health providers in December 2016 pointed to the real economic benefits of the Medicaid Expansion, with 33 percent of respondents from 13 states reporting increased hiring of health professionals.

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



NOTES: Access measures reflect experience in past 12 months. Respondents who said usual source of care was the emergency room are not counted as having a usual source of care. \*Difference from ESI is statistically significant (p<.05)  
 SOURCE: KCMU analysis of 2014 NHIS data.

*“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)*

<sup>7</sup>Report: Substance use treatment increases greatly with Medicaid expansion (Dec 28, 2016). [http://www.richmondregister.com/news/report-substance-use-treatment-increases-greatly-with-medicaid-expansion/article\\_276c2c96-cd6c-11e6-9b7b-37fd94736692.html](http://www.richmondregister.com/news/report-substance-use-treatment-increases-greatly-with-medicaid-expansion/article_276c2c96-cd6c-11e6-9b7b-37fd94736692.html)