

Investing in Ohio

Medicaid and Access to Mental Health and Addiction Services

Addiction and mental illness in Ohio

- Over [4.5 percent](#)¹, or 530,000, people in Ohio have a serious mental illness, and these individuals are among our most vulnerable citizens.
- Tragically, Ohio has one of the highest rates of drug-related deaths and opioid addiction rates in the country: 3,310 Ohioans lost their lives to drug overdoses in 2015.²

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

Ohio is a Medicaid Expansion state, and currently receives a [62.32 percent](#)³ 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 **\$3.7 billion** in federal dollars into the state economy.⁴ Ohio's general fund revenue collections are lower than targeted both in FY 2016 and FY 2017 to date.⁵

- [665,900](#) Ohioans are enrolled in the Medicaid Expansion.
- [3,078,200](#) Ohioans are enrolled in Medicaid.⁶
- As a result of the Medicaid Expansion, Ohio has treated over 151,000 individuals for mental illness substance use disorders.⁷

The Medicaid expansion has made a difference

In May 2016, the Ohio Department of Medicaid presented its analysis of the Medicaid Expansion to the General Assembly. It found that among the individuals who gained coverage as of May 2016:

- 75 percent were uninsured before becoming eligible for Medicaid.
- About a third suffered from depression and anxiety disorders.
- 32 percent were diagnosed with substance abuse or dependence.
- 75 percent of the Group VIII enrollees who were unemployed but looking for work reported that Medicaid enrollment made it easier to seek employment.

According to a [March 2015 ASPE Study](#), Ohio has found that implementation of the Medicaid Expansion would secure as much as \$19.8 billion for the state and could create over 31,000 jobs by 2022.

Case Example: *Woman in her late 50s with mental health and medical illnesses was not able to receive medical services prior to the Medicaid Expansion. As a result of the expansion, she has been able to receive behavioral health and medical*

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

³ 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>

⁴ Families USA, <http://familiesusa.org/product/defending-health-care-2017-what-stake-ohio>

⁵ <https://higherlogicdownload.s3.amazonaws.com/NASBO/9d2d2db1-c943-4f1b-b750-0fca152d64c2/UploadedImages/Fiscal%20Survey/Fall%202016%20Fiscal%20Survey%20of%20States%20-%20S.pdf>

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

⁷ <https://www.hcp.med.harvard.edu/sites/default/files/Key%20state%20SMI-OD%20v3corrected.pdf>

health services all at one organization and her mental health, physical health, and quality of life has improved. –Behavioral health provider in Columbus, OH (National Council Medicaid Survey, 12/2016)

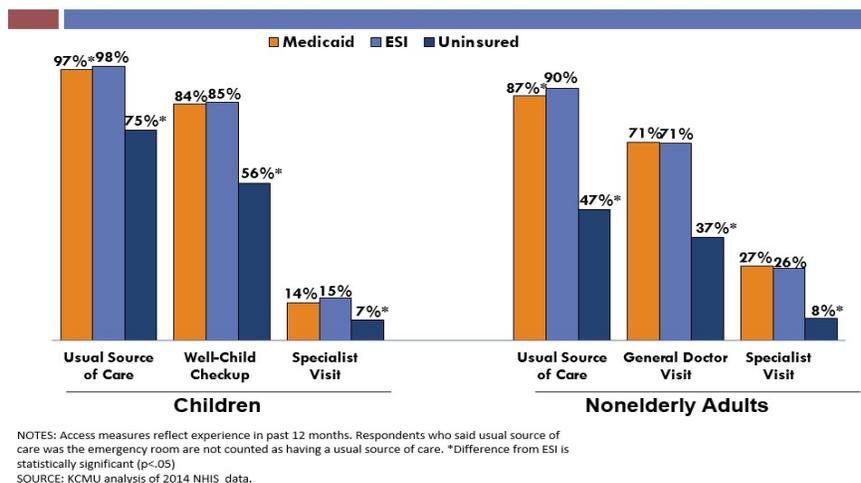
Opioid Epidemic and Overdose Deaths

State	Drug Overdose Deaths (rate/100,000)	Rx Opioid Use per 1000 population	Buprenorphine use per 1000 population	% Share of Bupe paid by Medicaid
Ohio	3,310 (29.9)	828	69	49.5
U.S.	52,404 (16.3)	695	39	24.2

Impact of Medicaid Coverage on Access to Care

Compared to non-expansion states, states that have expanded Medicaid have seen major 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.



“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)

Community Behavioral Health Services in Ohio

The Ohio Council of Behavioral Health and Family Services Providers, located in Columbus, represents 150 private, nonprofit organizations that provide alcohol and other drug addiction, mental health, and family services.

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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