

Overview

Over 1,100 Virginians died from opioid overdoses in 2016, nearly doubling since 2011.¹ Nationally, Medicaid members are four times more likely than people with private insurance to have ever used heroin or had pain reliever dependence.²

Virginia implemented the Addiction and Recovery Treatment Services (ARTS) program in April, 2017 to increase access to treatment for Medicaid members with opioid or other substance use disorders. ARTS benefits cover a wide range of addiction treatment services which are based on American Society of Addiction Medicine criteria.³ ARTS services include the following: inpatient detoxification, residential treatment, partial hospitalization, intensive outpatient programs, opioid treatment and case management. ARTS services are carved into existing Medicaid managed care plans to support full integration of behavioral and physical health.

ARTS Evaluation

The Department of Medical Assistance Services contracted with Virginia Commonwealth University to conduct an independent evaluation of the ARTS program. This brief highlights developments across the first three months of the evaluation period, from April 1st, 2017 to July 1st, 2017.

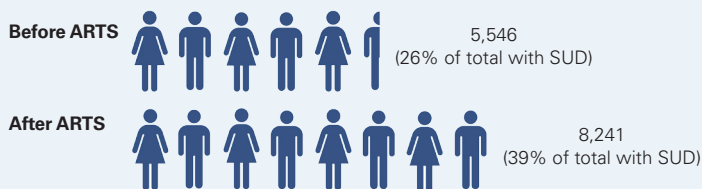
Key Findings

- Treatment rates among Medicaid members with substance use disorders (SUD) increased by 50% in the first 3 months of ARTS compared to a similar time period in 2016.
- Rates of pharmacotherapy for members with an opioid use disorder (OUD) vary by region. The Eastern region experienced the largest improvement with a 79% increase in the number of members treated.
- The number of outpatient practitioners providing OUD services to Medicaid members more than doubled, from 300 practitioners to 691 during the first 3 months of ARTS.

ARTS Narrows the Treatment Gap

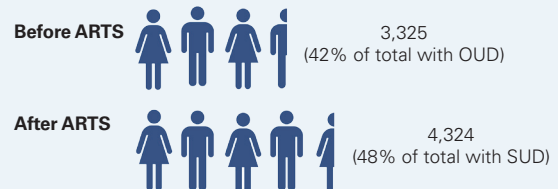
Members receiving treatment for any substance use disorder (SUD)

Each person represents 1,000 members



Members receiving pharmacotherapy for opioid use disorder (OUD)

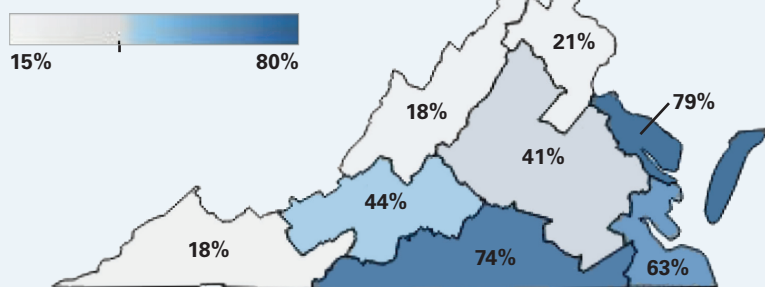
Each person represents 1,000 members



Over 8,000 Medicaid members received some kind of treatment for a substance use disorder (SUD) during April through June, 2017 (the first three months of ARTS).^a This means 39% of Medicaid members with a SUD diagnosis were receiving treatment for their addiction after ARTS was implemented, a 50% increase from April through June, 2016. Among Medicaid members with an opioid use disorder (OUD), 48% received pharmacotherapy during the first three months of ARTS (4,324 members), a 30% increase compared to a year earlier. Treatment for alcohol use disorders also increased substantially, more than doubling during the first three months of ARTS (see Appendix A for more details).

Pharmacotherapy for Opioid Use Disorders is Increasing

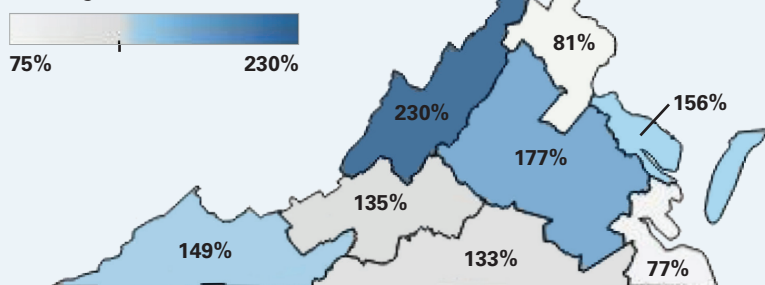
Percent increase in pharmacotherapy for OUD treatment after ARTS



Pharmacotherapy for OUD treatment increased in all regions of Virginia after ARTS implementation. The largest increase in the number of members receiving pharmacotherapy for OUD was 79% in the Eastern region. Rates of receiving any treatment among members with SUD varies by region, from a low of 25% in Hampton Roads to a high of 63% in Southwest (see Appendix B for details).

Number of OUD Outpatient Practitioners More than Doubled

Percent increase in practitioners treating OUD after ARTS



The total number of outpatient practitioners providing SUD services to Medicaid members more than doubled, from 667 to 1,603 after ARTS implementation. Similarly, the number of OUD practitioners increased from 300 practitioners before ARTS to 691 practitioners during the first three months of ARTS. All regions in Virginia experienced an increase in the number of providers, ranging from a 77% increase in the Hampton Roads region to a 230% increase in the Valley region (see Appendix C for more details).

Conclusions

During the first three months, ARTS has reduced the treatment gap for SUD by increasing the number of practitioners providing services for SUD, and by increasing the number of Medicaid members receiving pharmacotherapy for an OUD. Future reports will examine whether the treatment gap for SUD narrows even further, and provide more detail on the types of services being received.^b

This report was prepared by the ARTS evaluation team at the Virginia Commonwealth University (VCU) Department of Health Behavior and Policy and the Department of Family Medicine and Population Health. VCU staff include **Peter Cunningham**, Ph.D., **Andrew Barnes**, Ph.D., **Heather Saunders**, MSW, **Lauryn Saxe Walker**, RN, MPH, **Yaou Sheng**, MPH, **Sebastian Tong**, M.D. MPH, **E. Marshall Brooks**, Ph.D., and **Rebecca A. Aycocock**, Ph.D. The evaluation team would like to thank the Department of Medical Assistance Services for providing their technical expertise on the Medicaid claims data and the ARTS program.

¹Virginia Department of Health. Fatal Drug Overdose Quarterly Report: 1st Quarter 2017.; 2017. http://www.vdh.virginia.gov/content/uploads/sites/18/2016/04/Fatal-Drug-Overdoses-Quarterly-Report-Q1-2017_Updated.pdf. ²Medicaid and CHIP Payment and Access Commission (MACPAC). Report to Congress on Medicaid and CHIP June 2017: Chapter 2- Medicaid and the Opioid Epidemic. 2017. ³American Society of Addiction Medicine (ASAM). What is the ASAM Criteria. Resources. <https://www.asam.org/resources/the-asam-criteria/about.2017>

^aMedicaid members with SUD are defined as having any diagnosis of opioid, alcohol, or other addiction disorder (other than tobacco) for any medical encounter or prescription drug paid for by Medicaid. Estimates reported include members covered by GAP and FAMIS programs, although these members do not receive the full spectrum of ARTS services. Treatment is defined as any level of service as defined by the American Society of Addiction Medicine guidelines, pharmacotherapy, case management and office-based outpatient treatment. ^bThese results are based on claims submitted between April and June, 2017. As some claims may not have been submitted or paid for at the time of analysis, actual utilization may be higher than the estimates shown. The total numbers of Medicaid members with SUD and OUD are likely higher than those reported here. The claims data used in this report relies on providers coding that a member has a SUD including OUD. Providers have not always screened and then coded for SUD diagnoses in the past, especially before ARTS, when treatment was not available. The conclusions in this report are the authors, and no official endorsement by the VCU School of Medicine or Virginia Department of Medical Assistance Services is intended or should be inferred.



Appendix A1

Change in treatment gap for Medicaid members with substance use disorders

	Before ARTS Apr-June, 2016	First Three Months of ARTS Apr-June, 2017	Percent Change
All Substance Use Disorders (SUD)			
Total Medicaid members with SUD	21,121	21,117	0
Receiving any treatment	5,546	8,241	+49
Receiving pharmacotherapy	3,426	4,433	+29
Percent receiving any treatment	26%	39%	+50
Opioid Use Disorders (OUD)			
Total Medicaid members with OUD	7,883	8,992	+14
Receiving any treatment	4,030	5,539	+37
Receiving pharmacotherapy	3,325	4,324	+30
Percent receiving any treatment	51%	62%	+22
Alcohol Use Disorders (AUD)			
Total Medicaid members with AUD	7,426	6,590	-11
Receiving any treatment	749	1,539	+102
Receiving pharmacotherapy	120	133	+11
Percent receiving treatment	10%	23%	+130

¹Members with both OUD and AUD are included in OUD.

Appendix A2

Change in treatment gap for **GAP** members with substance use disorders

	Before ARTS Apr-June, 2016	First Three Months of ARTS Apr-June, 2017	Percent Change
All Substance Use Disorders (SUD)			
Total Medicaid members with SUD	1,120	1,570	+40
Receiving any treatment	490	886	+81
Receiving pharmacotherapy	234	614	+162
Percent receiving any treatment	44%	56%	+29
Opioid Use Disorders (OUD)			
Total Medicaid members with OUD	450	895	+99
Receiving any treatment	261	702	+169
Receiving pharmacotherapy	200	578	+189
Percent receiving any treatment	58%	78%	+34
Alcohol Use Disorders (AUD)			
Total Medicaid members with AUD	433	467	+8
Receiving any treatment	151	142	-6
Receiving pharmacotherapy	37	40	+8
Percent receiving treatment	35%	30%	-13

¹GAP refers to the Governor's Access Plan. ²Members with both OUD and AUD are included in OUD.



Appendix A3

Change in treatment gap for **FAMIS** members with substance use disorders

	Before ARTS Apr-June, 2016	First Three Months of ARTS Apr-June, 2017	Percent Change
All Substance Use Disorders (SUD)			
Total Medicaid members with SUD	127	137	+8
Receiving any treatment	24	44	+83
Receiving pharmacotherapy	9	10	+11
Percent receiving any treatment	19%	32%	+68
Opioid Use Disorders (OUD)			
Total Medicaid members with OUD	18	14	-22
Receiving any treatment	9	12	+33
Receiving pharmacotherapy	9	10	+11
Percent receiving any treatment	50%	86%	+72
Alcohol Use Disorders (AUD)			
Total Medicaid members with AUD	22	23	+5
Receiving any treatment	1	2	+100
Receiving pharmacotherapy	0	0	0
Percent receiving treatment	5%	9%	+80

¹FAMIS refers to the Family Access to Medical Insurance Security program. ²Members with both OUD and AUD are included in OUD.



Appendix B

Change in treatment gap for Medicaid members by Virginia region

	Members with disorder (n) Apr-June, 2016	Members receiving treatment (n) Apr-June, 2016	Percent receiving treatment (%) Apr-June, 2016	Members with disorder (n) Apr-June, 2017	Members receiving treatment (n) Apr-June, 2017	Percent receiving treatment (%) Apr-June, 2017
Members with SUD who received any type of treatment						
Total for state	21,121	5,546	26	21,117	8,241	39
Central	4,765	1,116	23	4,751	1,638	34
Eastern	343	78	23	361	146	40
Hampton Roads	4,659	601	13	4,069	1,032	25
Northern	2,698	606	22	2,520	823	33
Southside	1,361	249	18	1,537	466	30
Southwest	3,164	1,745	55	3,443	2,164	63
Valley	1,227	325	26	1,254	515	41
West Central	2,887	816	28	3,169	1,445	46
Members with OUD who received any type of treatment						
Total for state	7,883	4,030	51	8,992	5,539	62
Central	1,588	701	44	1,749	925	53
Eastern	112	51	46	145	93	64
Hampton Roads	1,274	296	23	1,211	552	46
Northern	854	409	48	836	520	62
Southside	367	131	36	558	253	45
Southwest	2,137	1,609	75	2,485	1,927	78
Valley	460	214	47	479	287	60
West Central	1,081	610	56	1,517	970	64
Members with OUD who received Pharmacotherapy						
Total for state	7,883	3,325	42	8,992	4,324	48
Central	1,588	409	26	1,749	576	33
Eastern	112	39	35	145	70	48
Hampton Roads	1,274	170	13	1,211	277	23
Northern	854	346	41	836	417	50
Southside	367	102	28	558	177	32
Southwest	2,137	1,539	72	2,485	1,820	73
Valley	460	187	41	479	220	46
West Central	1,081	525	49	1,517	755	50



Appendix C

Change in number of practitioners by Virginia region

	Before ARTS Apr-June, 2016	First Three Months of ARTS Apr-June, 2017	Percent Change
Outpatient practitioners providing SUD services			
Total for state	667	1,603	+140
Central	137	337	+146
Eastern	19	41	+116
Hampton Roads	142	318	+124
Northern	113	193	+71
Southside	53	155	+193
Southwest	62	172	+177
Valley	57	135	+137
West Central	82	252	+207
Outpatient practitioners providing OUD services			
Total for state	300	691	+130
Central	57	158	+177
Eastern	9	23	+156
Hampton Roads	57	101	+77
Northern	48	87	+81
Southside	24	56	+133
Southwest	35	87	+149
Valley	20	66	+230
West Central	48	113	+135

