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Medicaid and CHIP Payment and Access Commission



# Medicaid Behavioral Health Populations: Use, Need, and Concerns

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# Use, Expenditures, Diagnoses and Issues for Services with Behavioral Health Diagnoses

- Use, expenditures, and behavioral health diagnoses presented by age group and basis of eligibility
- Total Medicaid expenditure estimates include behavioral health and medical services, and long-term services and supports
- 2011 MSIS encounter and fee-for-service data used
- May underestimate true number of enrollees with service use associated with behavioral health diagnoses

# All Medicaid Enrollees

- **Approximately 18% (13 million enrollees) had a behavioral health diagnosis**
- **About \$170 billion spent on enrollees with a behavioral health diagnosis**
- **Spending on enrollees with a behavioral health diagnosis accounted for almost half of total Medicaid expenditures**
- **Total spending per enrollee with a behavioral health diagnosis four times as high as those without**

# Non-Disabled, Non-Foster Children

- Three-quarters of children with a behavioral health diagnosis (3.9 million) did not qualify for Medicaid on the basis of a disability or foster child status.
- The most common behavioral health diagnoses were hyperkinetic syndrome of childhood (ADD/ADHD) and learning disorders.
- However, there were more than 500,000 nondisabled children had episodic mood disorders and another 500,000 with anxiety, dissociative and somatoform disorders.
- Concerns for this group include providing appropriate psychotropic drug use (particularly ADHD and antipsychotic drugs), appropriate and timely screening for behavioral health problems, and providing appropriate referrals and treatment.

# Children Eligible on the Basis of a Disability

- Almost half of children enrolled in Medicaid on the basis of a disability had a behavioral health diagnosis (900,000).
- Disabled children with behavioral health diagnoses had the highest total Medicaid expenditures of all the child eligibility groups.
- Most common diagnoses are hyperkinetic syndrome of childhood, specific developmental delays, and pervasive developmental disorders including autism spectrum disorders.
- More than 5% had episodic mood disorders (including bipolar disorder) or anxiety, dissociative and somatoform disorders.
- Most of these children have substantial functional limitations and many are covered under waivers which provide case-management and HCBS. Many of these waivers integrate medical and long-term services and supports.

# Foster Children

- Two-fifths of foster children (400,000) had a behavioral health diagnosis, accounting for about three-quarters of total spending for all foster children.
- This population has a high percentage of traumatic and emotional disorders.
- The most common diagnoses were hyperkinetic syndrome of childhood and adjustment reaction.
- In addition, more than 5% of these children and youth had disturbance of emotions specific to childhood and adolescence, conduct disorders, or episodic mood disorders.
- Concerns have been raised about inappropriate use of psychotropic drugs and inadequate care in general for this group.

# Disabled Adults Age 21-64

- Two-fifths of disabled nonelderly adults had a behavioral health diagnosis (3.5 million), accounting for 58% of total expenditures for this group.
- The most common diagnoses were depression, anxiety, and episodic mood disorders (including bipolar disorders).
- This group had the highest prevalence of diagnosed psychotic and personality disorders.
- Concerns have been raised about lack of coordination of behavioral health and medical care, and possible inefficient use of both behavioral health and medical care resulting in suboptimal treatment and outcomes and high expenditures.

# Non-Disabled Adults Age 21-64

- About 16% of non-disabled adults (2.9 million) had a behavioral health diagnosis, accounting for one-third of total expenditures for this group.
- This group includes pregnant women, people in very low income families, and people eligible through other non-disability related pathways.
- The most common diagnoses were anxiety, dissociative and somatoform disorders, depressive disorders, and nondependent abuse of drugs.
- Concerns have been raised about inadequate screening and referral for behavioral health conditions in primary care, as well as the need to identify and treat behavioral health conditions in pregnant women to help improve perinatal outcomes.



# Adults age 65 and Older

- 20% of dual-eligible enrollees age 65 and over in 2010 had a diagnosis of depression; 11% had an anxiety disorder; 3% had a bipolar disorder; and 6% had a diagnosis of schizophrenia or other psychotic disorder.
- Several financial alignment demonstrations integrate behavioral health and medical care, and several states are integrating medical and behavioral health care services in managed care programs.
- Concerns have been raised about use of inappropriate psychotropic drugs in elderly people with dementia, and with the need to screen elderly people for depression and other behavioral health conditions in primary care settings to improve overall health outcomes.

# Summary

- All age and eligibility groups include a substantial number of enrollees with behavioral health diagnoses.
- For every age and eligibility group, enrollees with a behavioral health diagnosis have higher total expenditures per person than those with no behavioral health diagnosis.
- Age and eligibility groups differ in terms of behavioral health diagnoses, services provided, expenditures, treatment concerns and programs targeted to each group.