Substance Use in Colorado

An Increasing Problem

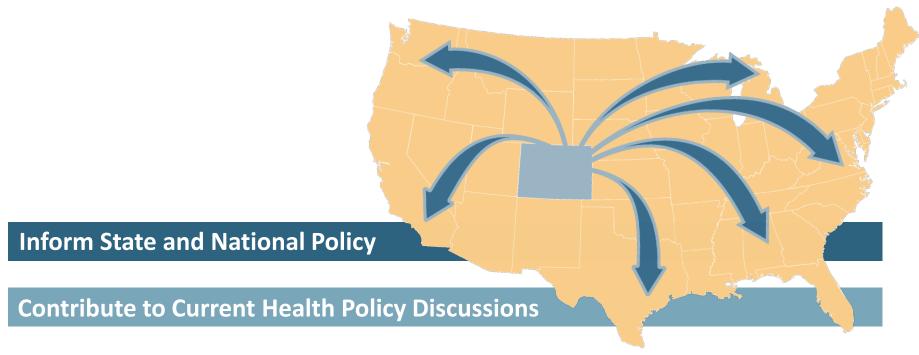


Opioid and Other Substance Use Disorders
Interim Study Committee



About Us:





Support Efforts to Improve Health





Our Work



COLORADO **HEALTH** INSTITUTE

Health Reform and Colorado

An Analysis of the Senate's Better Care Reconciliation Act by the Colorado Health Institute's Team of Experts



JUNE 23, 2017

A Series of Reports on Rebuilding Federal Health Policy

CHI's health reform "strike team," a group of analysts from across our organization with different areas of expertise, delved into the proposed Better Care Reconciliation Act (BCRA) to provide an early determination of its potential impact on Coloradans, Our estimates and predictions will be updated if, as expected, details of the proposal change between now and the vote of the full Senate,

The analysis found that the BCRA would have the biggest impact on the Medicald program, which now covers one of every four Coloradans. Colorado makers would be handed a bigger bill for Medicaid, acting to some tough choices. At the same time, the lw would give states more latitude in designing health

any case, CHI expects that the state's uninsured rate, ich fell to a historic low of 6.7 percent in 2015, will

Top Five Colorado Impacts of the BCRA

- 1. Colorado's 1.3 Million Medicald Enrollees: CHI projects that 628,000 fewer Coloradans would be covered by Medicaid by 2030 under a rollback of expansion funding.
- . Medicaid Funding: Colorado would see a loss of more than \$15 billion in federal money by 2030, according to CHI calculations.
- 3. Lower Middle Class Coloradans: Financial help for this group, often referred to as the "working poor," to pay for insurance would decline. And deductibles could head higher. Residents of the Western Slope and Eastern Plains, in particular, will struggle with affordability.
- Planned Parenthood: The bill would strip federal Medicaid funding for a year. Planned Parenthood in Colorado served about 25,000 people covered by Medicaid in 2016, costing about \$6 million in funding.
- Young Invincibles: The individual mandate is dropped without a replacement. Young adults between 19 and 29 were the target of this rule designed to widen the pool of enrollees and keep costs down. In Colorado, 12.9 percenof the uninsured still fall within this

The Opioid Epidemic and Medication-Assisted Treatment in Colorado

Legislation in Review

Analyzing Key Health Policy Trends



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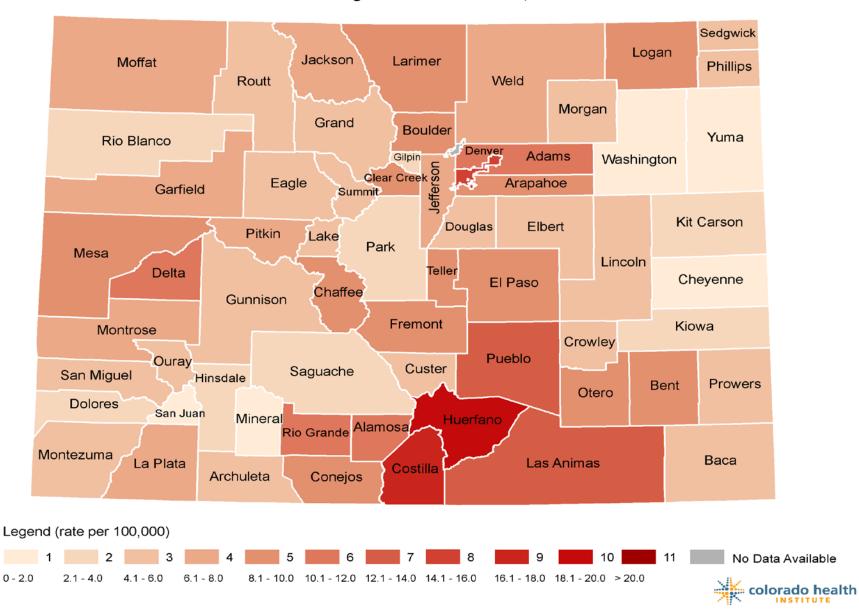


Takeaways

- Overdose deaths in Colorado are rising, driven by an increase in opioid-related deaths.
- 2. The biggest gaps in treatment are related to an insufficient workforce.
- 3. A small percentage of spending for substance use disorder is for treatment.



Colorado Drug Overdose Death Rate, 2002



Source: CHI analysis of CDC National Vital Statistics System Mortality Data

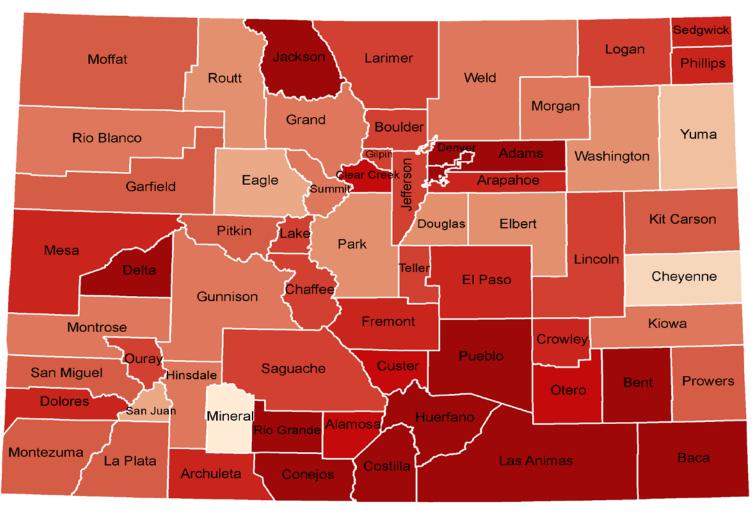




Colorado Drug Overdose Death Rate, By County 2002-2014

Source: Center for Disease Control and Prevention, National Centers for Health Statistics, National Vital Statistics System, Mortality Data

Colorado Drug Overdose Death Rate, 2014



Legend (rate per 100,000)

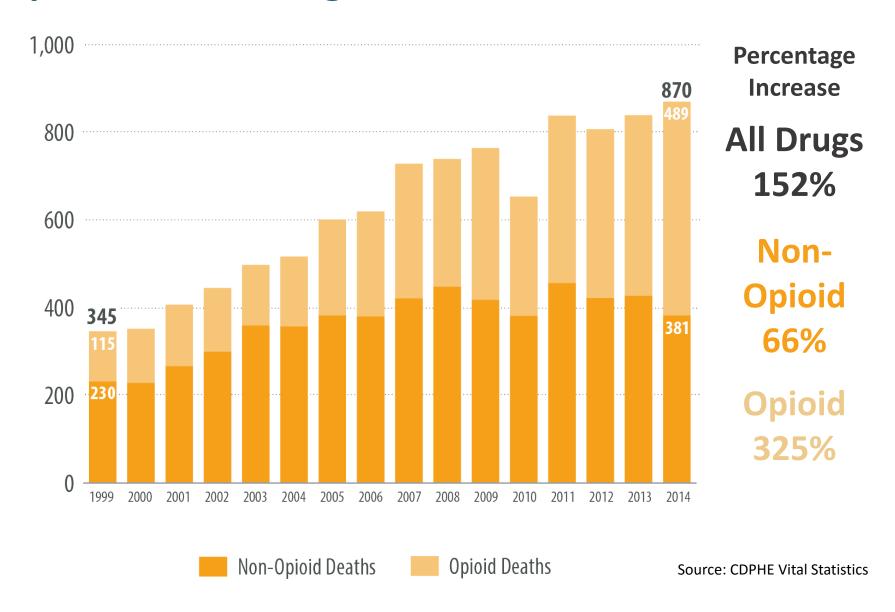




Source: CHI analysis of CDC National Vital Statistics System Mortality Data



Opioids Are Driving the Rise in Overdose Deaths







Demographics: Opioid Overdose Deaths



Males more likely to die of a heroin overdose than females.



Highest death rate for heroin in the 26 to 34 age group.



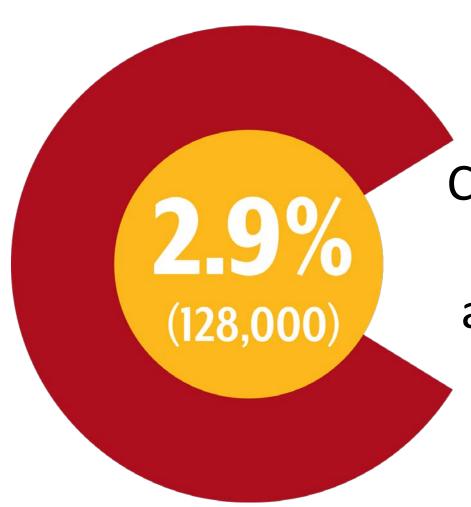
Rates for heroin and prescription drugs are highest for non-Hispanic white Coloradans.

Source: CDPHE Vital Statistics





Illicit Drug Dependence or Abuse

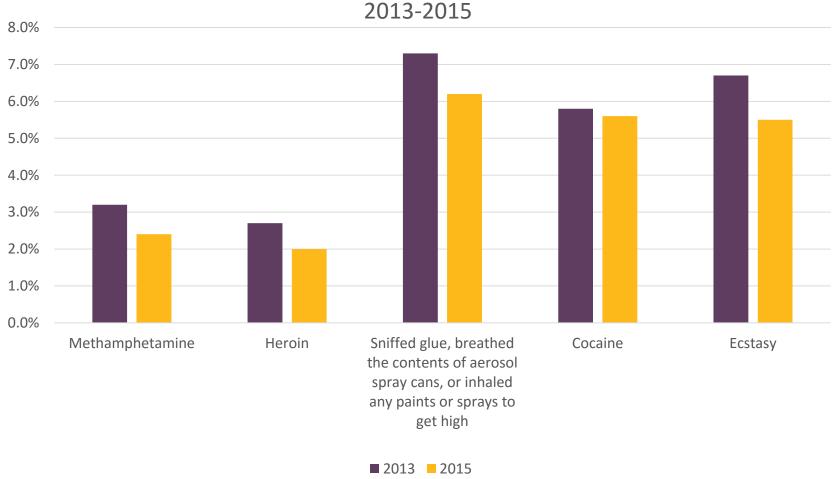


Coloradans who are dependent on or abused illicit drugs in the past year.



Youth Illicit Drug Use Remains Stable

Percentage who used illicit drugs one or more times in their life,

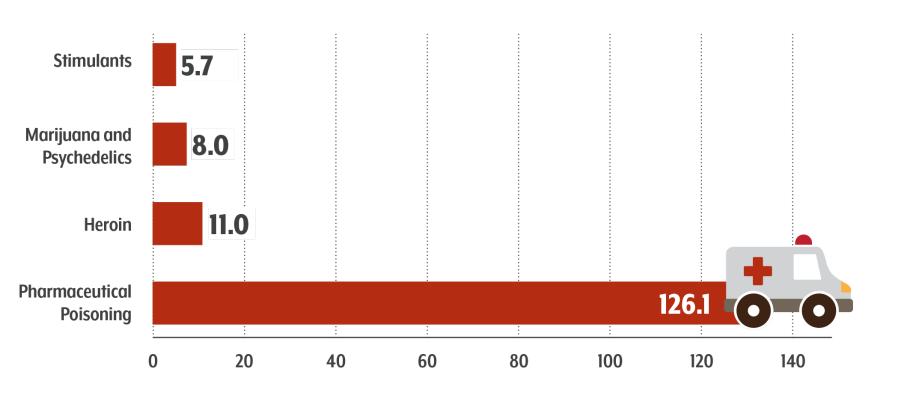






Emergency Department Visits by Drug Type, Age-Adjusted

Rates, 2015 (per 100,000)

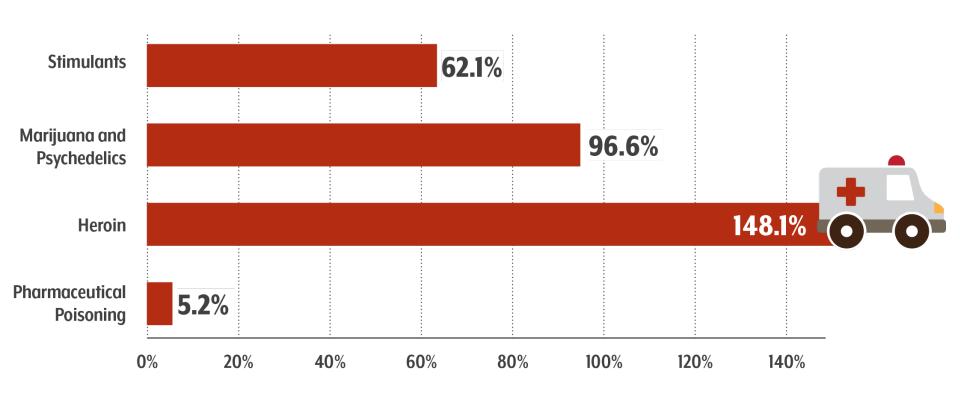






Emergency Department Visits by Drug Type

Percentage Increase, 2011 to 2015







Substance Use Care Continuum

Enhancing Health

Early Intervention

Recovery Support



Primary Prevention

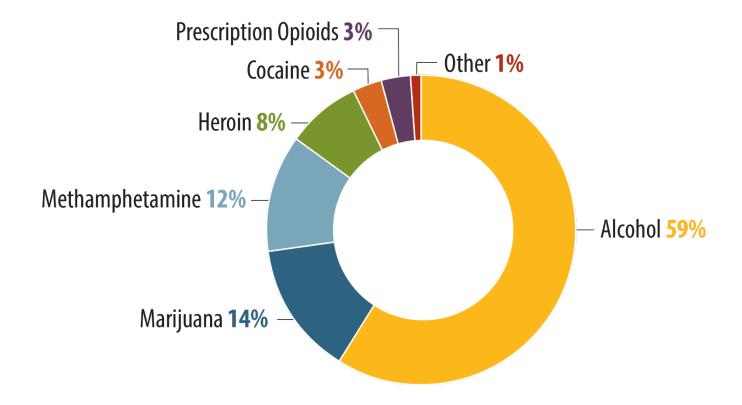
Treatment





Alcohol is the Most Common Reason for **Treatment**

2015 Treatment Admissions by Drug

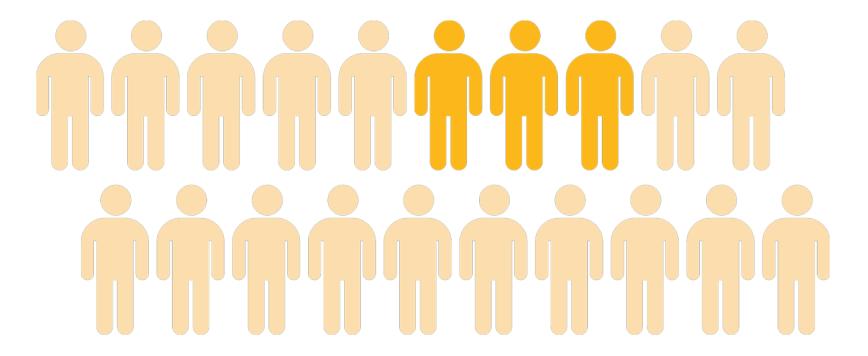


Source: Drug/Alcohol Coordinated Data Systems, Office of Behavioral Health, Colorado Department of Human Services





Colorado Has a Shortage of Treatment Services



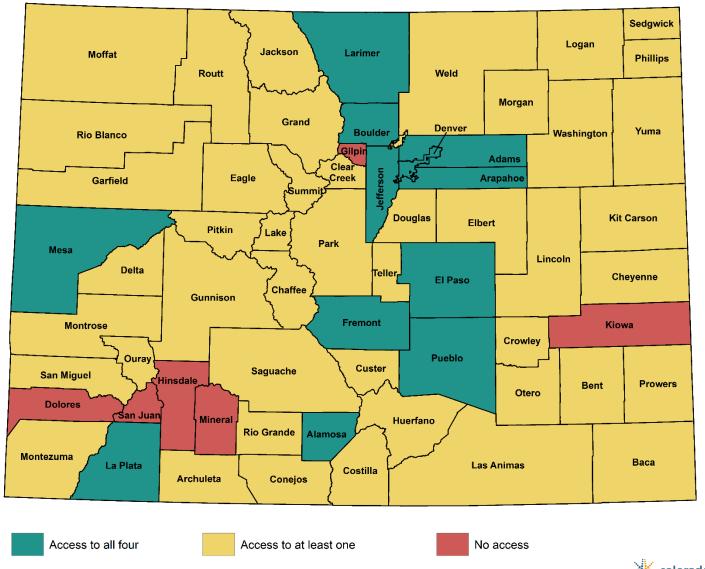
Coloradans in need of substance use treatment services who receive them.

Sources: NSDUH (2015), Jones (2015), Keystone Policy Center analysis of LinkingCare.org (2016)





Access to Detox, Residential Treatment, Outpatient Services and Methadone Clinics, 2016





Source: Keystone Policy Center analysis of LinkingCare.org

Medication-Assisted Treatment Works

- Medication-Assisted Treatment known as MAT – is an evidence-based approach to treating opioid dependence.
 - Combination of medication plus other social support services, such as counseling.
- Clinically effective by helping reduce the potential for relapse.
- Better adherence to programs than those without medication.

Source: Volkow, N. et al (2014)





Barriers to Medication-Assisted Treatment

• Patients:

- Stigma
- Awareness
- Insurance

• Providers:

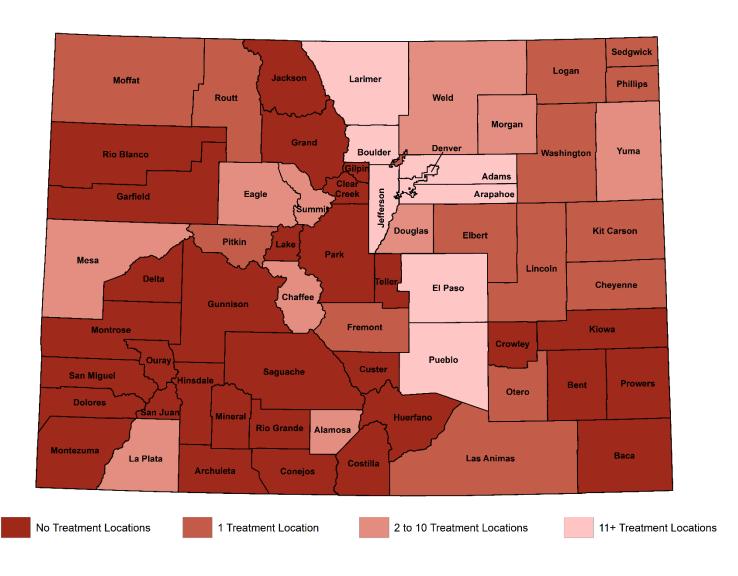
- Stigma
- Reimbursement
- Insufficient staff knowledge
- Lack of other services such as counseling
- Insufficient office/nursing support

Source: Volkow, N. et al (2014); Walley, A. et al (2008); Hutchinson, E. et al (2014); SAMHSA





Medication-Assisted Treatment Locations by County, April 2017



Source: SAMHSA treatment locator.





Ten Counties Have no Treatment Locations and High Drug Overdose Death Rates

County	Death Rate per 100,000
Baca	>20.0
Bent	>20.0
Clear Creek	18.1-20.0
Conejos	>20.0
Costilla	>20.0
Custer	18.1-20.0
Delta	>20.0
Huerfano	>20.0
Jackson	>20.0
Rio Grande	>20.0





Substance Use Has a Substantial Cost to the System

 Economic burden of substance use (2015) \$700 billion/year

	Health Care	Overall
Tobacco	\$130 billion	\$295 billion
Alcohol	\$125 billion	\$224 billion
Illicit Drugs	\$11 billion	\$193 billion

Source: NIDA (2015)





Research on Treatment is Strong

 Treatment of substance use disorders is effective in decreasing medical cost and substance use.

 When savings related to health care are added to savings to other systems, total savings can exceed costs by a ratio of 12:1.

Sources: Walter et al (2005); Mojabai and Zivin (2003) Health Services Research; NIDA (2012)





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References

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