



Data Brief

Current Sources of Medication Assisted Treatment (MAT) for Medi-Cal Beneficiaries with Opioid Use Disorder

October 2024

Executive Summary:

This Data Brief offers a comparison of the number of Medi-Cal beneficiaries with opioid use disorder (OUD) who received various types of medication assisted treatment for their condition during 2022.

Recently published data from the Medi-Cal program offers counts of beneficiaries receiving MAT but there are no direct estimates of the number of beneficiaries who might need this kind of treatment. Based on national survey data that estimate the prevalence of OUD in California, this paper establishes a range of estimates of Medi-Cal beneficiaries with OUD and to compare that to the share actually receiving MAT. We estimate that between 203,000 and 353,000 Medi-Cal beneficiaries experienced OUD in 2022 and about 94,000 received some form of MAT. That means that current MAT access reaches somewhere between 27 to 46 percent of the Medi-Cal population who could benefit from this treatment.

Findings

Recently published data from the Department of Health Care Services¹ provides a multiyear picture of the number of Medi-Cal beneficiaries who are receiving medications most often used for treatment of opioid use disorder.

To arrive at an estimate for how many beneficiaries received MAT for OUD during the year, we make some assumptions about how these forms of treatment are used. We will not include naloxone counts because we will assume that most of the naloxone is obtained to provide emergency interventions for individuals who overdose, many of the users of the other medications are likely to have also purchased naloxone.

¹ [Medication-Assisted Treatment in Medi-Cal for Opioid Use Disorders, by County - Medication-Assisted Treatment in Medi-Cal for Opioid Use Disorders, Annually - California Health and Human Services Open Data Portal](#)

Because naltrexone has other uses than for treating OUD, we will assume that only half of the prescriptions are for OUD. This leads to a count for OUD users of medication assisted treatment by adding the counts for buprenorphine, methadone, and half of the naltrexone users to arrive at an estimate of Medi-Cal beneficiaries who received MAT in 2022 of 94,000 individuals.

Table 1. Counts of Medi-Cal Beneficiaries Receiving MAT Medications in 2022

Medication Received	
Buprenorphine	44,365
Methadone Program	37,178
50% of Naltrexone	12,797
Naloxone	--
Total	94,340

This paper will compare this total estimated number of Medi-Cal beneficiaries receiving MAT with both of the following:

- The total number of beneficiaries estimated to suffer from opioid use disorder and
- The estimated sources of MAT serving these beneficiaries.

Estimating the Number of Medi-Cal Beneficiaries with Opioid Use Disorder

There are no direct measures of the prevalence of OUD among California’s Medi-Cal population. The federal SAMHSA conducts national surveys to estimate use of drugs and alcohol nationally and publishes state estimates for the responses.² Individuals are classified as having OUD if their responses to the survey indicate they meet at least two of the criteria for OUD specified in the Diagnostic and Statistical Manual of Mental Disorders, 5th edition. In 2022 the survey estimated that about of 3 percent of Californian’s over 12 reported use of opioids in the prior year, and 1.75 percent were identifies as having opioid use disorder.

Table 2. Estimated Opioid Use in California Among the Population over 12, 2022

Opioid use	
Opioid misuse	3.09%
Opioid use disorder	1.75%

Using the estimate for the share of the population with OUD and a 2022 under 12 population in California (33,174,941), the estimate for persons in California with OUD is 579,000. It is uncertain what share of this group are Medi-Cal beneficiaries. On one hand, about 35 percent of the population over 12 in California is enrolled in Medi-Cal. However, estimates of the share of individual presenting at emergency rooms in California in 2022 with OUD enrolled in Medi-Cal is 61 percent³. This could be higher because the share

² SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2021 and 2022

³ Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project (HCUP), State Emergency Department Databases (SEDD) 2021-2021 (all available data as of 5/10/2023). Emergency department

experiencing OUD is higher in the Medi-Cal population than in the overall population. But it could also be the result of the availability of presumptive eligibility for Medi-Cal for individuals treated in emergency rooms when no other form of coverage is known. Taking these two statistics as maximum and minimum estimates, we can establish a range for the number of Medi-Cal beneficiaries with OUD as shown in Table 3.

Then based on the number of Medi-Cal beneficiaries with OUD who are receiving some form of MAT, somewhere between 27 to 46 percent of Medi-Cal beneficiaries with OUD have access to medication assisted treatment.

Table 3. Range for the Number of Medi-Cal Beneficiaries Experiencing Opioid Use Disorder and Share Receiving MAT

Range	Number of Beneficiaries	Share Receiving MAT
Maximum at 61%	353,000	27%
Minimum at 35%	203,000	46%

Estimating the Sources of MAT for Medi-Cal Beneficiaries

The following chart shows the estimated sources for MAT for the Medi-Cal beneficiaries estimated to have received it during 2022. The sources are the following:

- CA Bridge program sites in emergency rooms throughout the state
- County methadone programs
- Other county-provided MAT
- Other unknown sources

To estimate the number of Medi-Cal beneficiaries served by CA Bridge sites we start with reported visits during 2022 that resulted in Buprenorphine being prescribed. This number is adjusted to limit it to Medi-Cal beneficiary visits and then adjusted to convert the number of visits into the number of associated individuals.

visits exclude those for patients admitted to the hospital. Kaiser Family Foundation, State Indicators – Health Insurance Coverage and Uninsured.

Table 4: Estimated Medi-Cal Beneficiaries Served by CA Bridge in 2022

2023 CA Bridge visits providing Buprenorphine ⁴	28,000
Share of ED SUD visits from Medi-Cal beneficiaries	61%
Bridge visits from Medi-Cal beneficiaries	17,000
Adjustment to estimate number of individuals generating the visits ⁵	0.53
Number of Medi-Cal Beneficiaries provided with Buprenorphine	9,050

The estimates for County programs, both methadone and other forms of MAT are reported in the annual EQRO report reviewing the quality of the County operated Organized Drug System published by the Department of Health Care Services. For 2022 the report shows the following:

Table 5: Individuals Receiving MAT from County ODS Programs

County ODS MAT Services	
Individuals receiving Methadone	39,464
Individuals receiving other forms of MAT ⁶	8,039

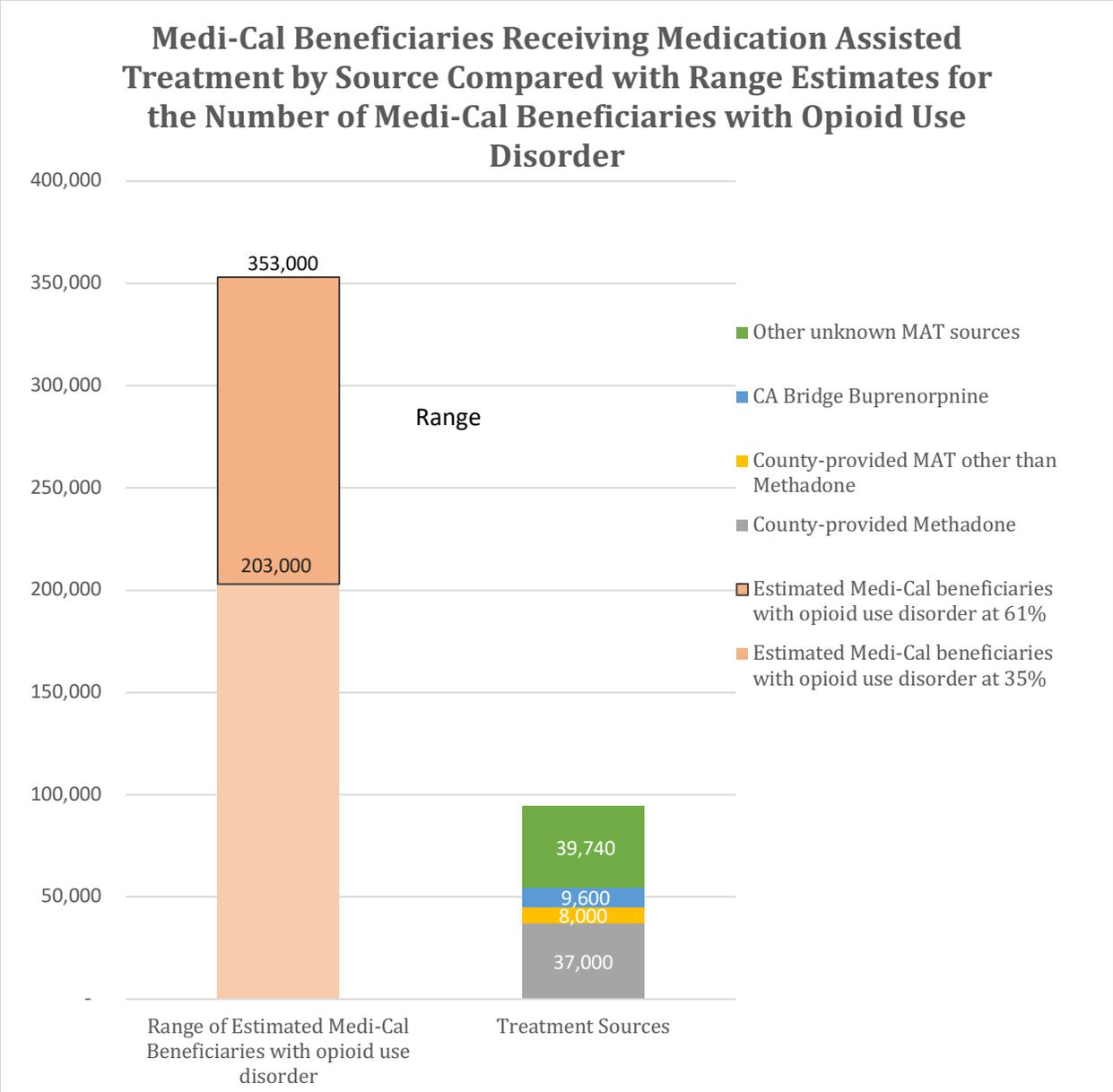
The count for other forms of MAT may include individuals other than those with Medi-Cal coverage, although the methadone numbers seem to indicate that about 37,000 of the 39,000 methadone clients in County programs are covered by Medi-Cal.

The following chart summarized the data assembled from the various sources described above. The first bar shows the range in estimates for the Medi-Cal population that experienced opioid use disorder in 2022 based on the share of the total population with OUD that is enrolled in Medi-Cal. The second bar shows the various sources for MAT that were used that year by Medi-Cal beneficiaries. The fourth category in this bar is the difference between the total of the identified sources and the total count of Medi-Cal beneficiaries receiving some form of MAT. The chart shows the significant gap between the treatment resources available to these individuals and the number who could benefit from these services.

⁴ Data provided by CA Bridge Program.

⁵ Data provided by UC Davis Bridge site. It should be noted that this ratio indicates a repeated visit rate among these patients receiving Buprenorphine that is almost identical to the repeat visit for all ED patients, whereas recent studies of ED visits in California show that repeat rates among individuals with SUD are substantially higher (see Shannon McConville, et al., Frequent Emergency Department Users: A Statewide Comparison Before And After Affordable Care Act Implementation, Health Affairs Vol. 37, No. 6: Hospitals, Primary Care

⁶ The count for other forms of MAT may include individuals other than those with Medi-Cal coverage. The methadone numbers indicate that about 37,000 of the 39,000 methadone clients in County programs are covered by Medi-Cal, so it is likely that some of the 8,000 individuals receiving other forms of MAT includes some individuals that have coverage other than from Medi-Cal or are uninsured. We will use the 8,000 figure here understanding that it may be an overestimate.



There is a mismatch between the sources of treatment and the number of individuals who could benefit from that treatment. There has been significant expansion in the use of MAT among the Medi-Cal population over the course of the last 5 years. Buprenorphine use among Medi-Cal beneficiaries has doubled over since 2017 (from 22,000 to 44,000 beneficiaries while methadone use has declined (from 46,000 to 37,000 beneficiaries). Buprenorphine availability has increased through the CA Bridge program as well as increased access to treatment as through the county ODS system. However, the current level of MAT access reaches only somewhere from 27 to 46 percent of the Medi-Cal population likely to suffer from OUD.

Finally, more needs to be understood about the unknown sources of MAT. There are a growing number of primary care providers who are expanding their ability to provide this

kind of treatment. A deeper analysis of these sources of care and their potential to expand would provide important information in initiating efforts to expand adds to MAT in California.

About the Author

- **David Maxwell-Jolly** has held a variety of executive state government positions including Chief Deputy Executive Director at Covered California, Undersecretary and Deputy Secretary at the Health and Human Services Agency, and Director of the Department of Health Care Services. He is a CalHPS Senior Advisor.

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