

The opioid epidemic is increasing among Americans, with addiction to heroin, fentanyl, and prescription painkillers, such as oxycodone and hydrocodone, contributing to this public health crisis.

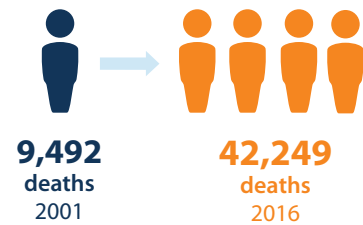
Medicaid plays a central role in the nation's efforts to address the opioid epidemic. By covering people who are struggling with opioid addiction and enhancing state capacity to provide access to early interventions and treatment, Medicaid is a key tool in the fight against the epidemic. State Medicaid programs have also implemented several measures to curb opioid prescribing. Although the epidemic began many years before the Medicaid expansion, the expansion has provided states with additional resources to cover many adults with addictions who were previously excluded from the program.

The Opioid Epidemic Continues to Escalate

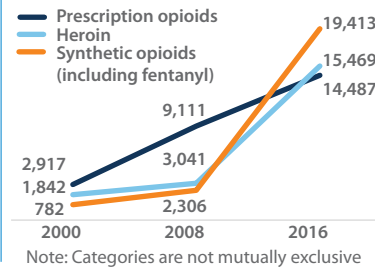
Over **1.7 million** people have a prescription opioid addiction and **626,000** have a heroin addiction as of 2016.



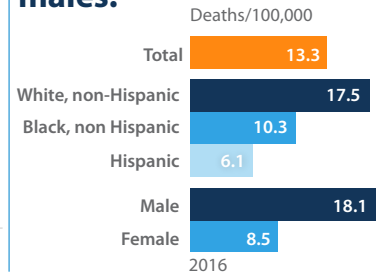
Overdose deaths nationwide more than **quadrupled** from 2001 to 2016.



Overdose deaths from heroin and synthetic opioids are surpassing those from prescription opioids.

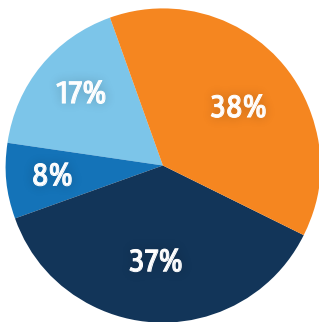


Opioid overdose death rates are highest among **whites** and **males**.



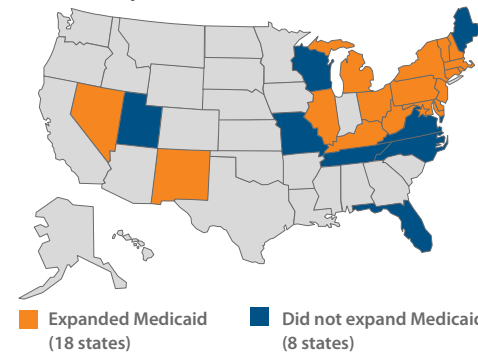
The ACA Broadened Medicaid Coverage for Adults and State Capacity to Address the Opioid Epidemic

Medicaid covers nearly **4 in 10** nonelderly adults with opioid addiction.



TOTAL: 2 MILLION IN 2016

States with above average opioid overdose death rates include both Medicaid expansion and non-expansion states as of 2016.



Over half of states have **increased** Medicaid enrollees' access to **naloxone**, a prescription drug that reverses the life-threatening effects of opioid overdoses.

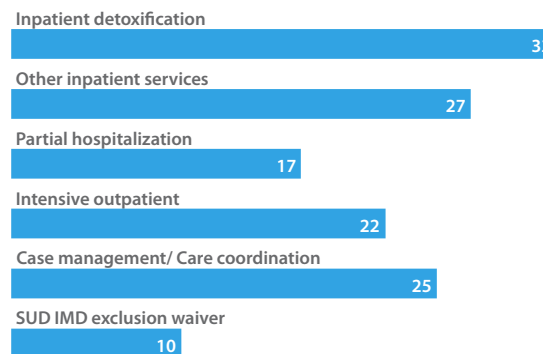
All state Medicaid programs cover at least 1 MAT medication, and most cover all 3.



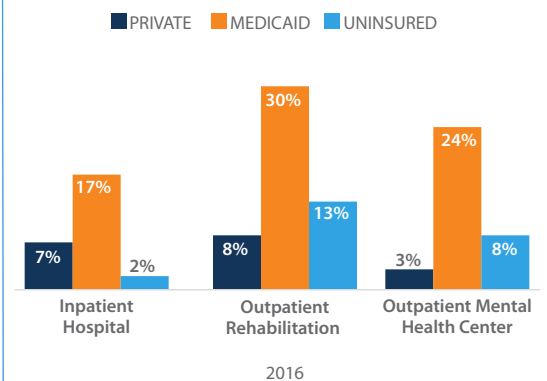
- Methadone** (36 states)
- Buprenorphine** (51 states)
- Naltrexone** (49 states)

State Medicaid programs cover a range of treatment services.

NUMBER OF STATES COVERING SERVICES, 2015



Adults with Medicaid are more likely than other adults to receive SUD treatment.



Sources for this document are available at: <http://kff.org/infographic/medicaids-role-in-addressing-opioid-epidemic>

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Filling the need for trusted information on national health issues, the Kaiser Family Foundation is a nonprofit organization based in Menlo Park, California.

Table 1: State Indicators of Medicaid's Role in Addressing the Opioid Epidemic

State	Opioid overdose death rate per 100,000 (2016)	Number of opioid-related overdose deaths (2016)			Medicaid coverage of MAT drugs (2017)	% of total buprenorphine spending financed by Medicaid (2016)	IMD exclusion waiver (2018)	% of adults age 19-64 with Medicaid (2016)
		Prescription opioids	Heroin	Synthetic opioids, such as fentanyl				
Alabama	7.5	94	126	157	B, N	6%	No	15%
Alaska	12.5	45	126	N/A	M, B, N	34%	No	18%
Arizona	11.4	326	299	123	M, B, N	15%	Pending	18%
Arkansas	5.9	114	13	38	B*	8%	No	15%
California	4.9	955	587	355	M, B, N	16%	Approved	22%
Colorado	9.5	212	234	72	M, B, N	25%	No	12%
Connecticut	24.5	206	450	500	M, B, N	44%	No	17%
Delaware	16.9	31	56	79	M, B, N	40%	No	20%
DC	30.0	52	122	129	M, B, N	45%	No	22%
Florida	14.4	1,030	669	1,566	M, B, N	5%	No	11%
Georgia	8.8	455	226	277	M, B, N	7%	No	8%
Hawaii	5.2	44	20	N/A	M, B, N	25%	No	13%
Idaho	7.4	64	25	20	B, N	13%	No	11%
Illinois	15.3	378	1,040	907	B*	15%	Pending	15%
Indiana	12.6	231	297	304	M, B, N	17%	Approved	17%
Iowa	6.2	82	47	58	B, N	18%	No	15%
Kansas	5.1	83	32	27	M, B, N	8%	Pending	9%
Kentucky	23.6	403	311	465	B, N	44%	Approved	17%
Louisiana	7.7	111	149	89	B, N	8%	Approved	19%
Maine	25.2	132	55	199	M, B, N	38%	No	17%
Maryland	29.7	666	650	1,091	M, B, N	39%	Approved	13%
Massachusetts	29.7	267	630	1,550	M, B, N	49%	Approved	21%
Michigan	18.5	560	727	921	M, B, N	13%	Pending	19%
Minnesota	7.4	137	149	99	M, B, N	32%	No	13%
Mississippi	6.2	97	33	45	M, B, N	4%	No	15%
Missouri	15.9	231	380	441	M, B, N	16%	No	10%
Montana	4.2	12	N/A	14	M, B, N	7%	No	17%
Nebraska	2.4	22	N/A	13	B, N	10%	No	8%
Nevada	13.3	235	86	53	M, B, N	12%	No	14%
New Hampshire	35.8	69	34	363	M, B, N	18%	No	8%
New Jersey	16.0	346	850	689	M, B, N	22%	Approved	14%
New Mexico	17.5	153	161	78	M, B, N	30%	Pending	28%
New York	15.1	892	1,307	1,641	M, B, N	38%	No	21%
North Carolina	15.4	611	544	601	M, B, N	21%	Pending	12%
North Dakota	7.6	17	12	15	B, N	17%	No	8%
Ohio	32.9	785	1,478	2,296	M, B, N	50%	No	19%
Oklahoma	11.2	285	53	98	M, B, N	7%	No	11%
Oregon	7.6	128	114	43	M, B, N	24%	No	21%
Pennsylvania	18.5	634	926	1,309	M, B, N	29%	No	16%
Rhode Island	26.7	89	25	182	M, B, N	50%	No	18%
South Carolina	13.1	342	115	237	B, N	12%	No	12%
South Dakota	5.0	25	N/A	10	M, B, N	11%	No	10%
Tennessee	18.1	679	260	395	B, N	10%	No	15%
Texas	4.9	501	530	250	B, N	6%	No	8%
Utah	16.4	322	166	72	M, B, N	4%	Approved	7%
Vermont	18.4	23	45	53	M, B, N	68%	No	17%
Virginia	13.5	343	450	648	M, B, N	13%	Approved	7%
Washington	9.4	292	283	93	M, B, N	26%	No	18%
West Virginia	43.4	322	235	435	B, N	45%	Approved	23%
Wisconsin	15.8	328	389	288	M, B, N	37%	Pending	11%
Wyoming	8.7	26	N/A	N/A	B, N	19%	No	8%

NOTES: The three prescriptions for opioid use disorder are methadone, buprenorphine, and naltrexone. Data on coverage of methadone and naltrexone were unavailable for Arkansas and Illinois. Indiana did not cover all three prescriptions in 2017, but reported plans to do so in 2018. Synthetic opioid deaths do not include deaths due to methadone. An IMD (institution for mental disease) is an inpatient facility with over 16 beds.