

The CBHSQ Report

Short Report February 11, 2016

PATIENTS WHO ARE PRIVATELY INSURED RECEIVE LIMITED FOLLOW-UP SERVICES AFTER OPIOID-RELATED HOSPITALIZATIONS

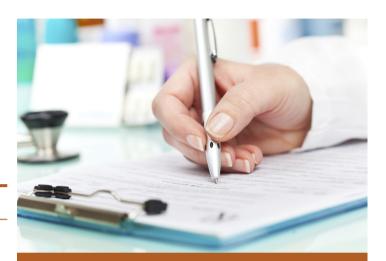
AUTHORS

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INTRODUCTION

Opioid misuse is a growing public health concern.¹ Nearly 2.4 million people in the United States have a substance use disorder (SUD) related to prescription opioids. Approximately a half million people have an SUD related to heroin.² There has been a significant increase in hospitalizations for opioid misuse.^{3,4} The U.S. Food and Drug Administration has approved three different medications to treat opioid addiction: methadone, naltrexone, and buprenorphine.⁵ Research shows a combination of medications and therapy is often the most successful approach to treating opioid addiction.^{6,7}

The Truven Health Analytics MarketScan® Commercial Claims and Encounters Database includes insurance claims from employees and their dependents covered by large, self-insured employers and by regional health plans. The MarketScan Database captures all billed services, including prescription drugs, outpatient services, and inpatient services. This report uses data from 2010 to 2014. Information on MarketScan is available online at http://truvenhealth.com/your-healthcare-focus/analytic-research/marketscan-research-databases

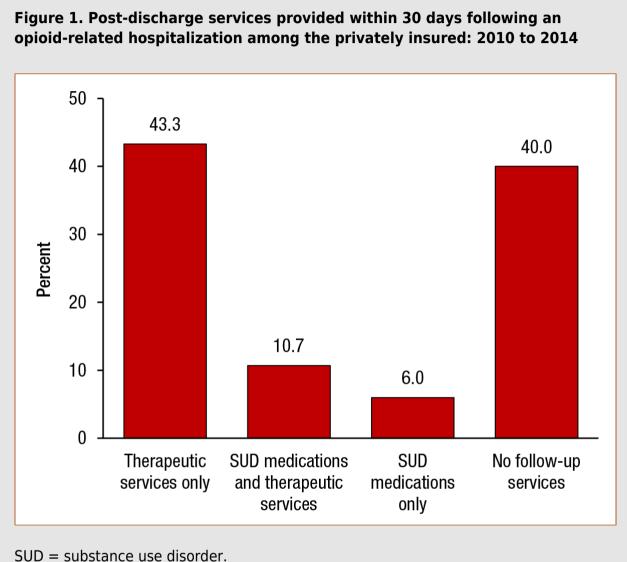


In Brief

- Data on privately insured individuals aged 18 to 64 from the 2010 to 2014 Truven Health Analytics MarketScan® Commercial Claims and Encounters Database show that 40.0 percent of patients did not receive any follow-up services within 30 days following an opioid-related hospitalization.
- Only 10.7 percent of patients received the recommended combination of both medication and a therapeutic service within 30 days following an opioid-related hospitalization.
- Within 30 days of discharge for an opioid-related hospitalization, 6.0 percent of patients received medications only, and slightly more than 43.3 percent received therapy only.

USE OF FOLLOW-UP SERVICES FOLLOWING AN OPIOID-RELATED HOSPITALIZATION

In 2014, more than 67 percent of Americans aged 18 to 64 had private insurance, making it the most common form of health care coverage in the United States.8 Data on privately insured individuals aged 18 to 64 from the 2010 to 2014 Truven Health Analytics MarketScan8 Commercial Claims and Encounters Database show that 40.0 percent of patients did not receive any follow-up services within 30 days following an opioidrelated hospitalization (Figure 1). Within 30 days of discharge for an opioid-related hospitalization, 6.0 percent of patients received medications only, and 43.3 percent received therapy only. A small percentage (10.7 percent) of patients received the recommended combination of both medication and a therapeutic service.



Source: Truven Health Analytics MarketScan® Commercial Claims and Encounters Database, 2010-2014

DISCUSSION

Given the increasing rates of hospitalization for opioid misuse, identifying patterns of post-discharge treatment is an important step in developing targeted prevention, intervention, and treatment options for patients with an SUD related to prescription opioids. More research is needed to understand the barriers that patients with an SUD related to prescription opioids have in trying to access services after hospitalization, as well as the barriers that health care providers have in making the optimal referral.

END NOTES

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SUGGESTED CITATION

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SUMMARY

Background: There has been a significant increase in hospitalizations for opioid misuse in recent years. Identifying patterns of post-discharge treatment is an important step in helping patients receive appropriate care following an opioid-related hospitalization. **Methods:** Using 2010–2014 data from the Truven Health Analytics MarketScan® Commercial Claims and Encounters Database, this report identifies the types of services individuals with private insurance receive following hospitalization for opioid misuse. **Results:** Forty percent of patients do not receive any follow-up services within 30 days after an opioid-related hospitalization. Only 10.7 percent of patients received the recommended combination of both medication and a therapeutic service. **Conclusion:** Developing strategies to link patients to resources that can provide the recommended treatment options is an important goal in supporting treatment and recovery efforts.

Keywords: substance use disorder treatment, opioid

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KEYWORDS

Short Report, Client-Level Data, Emergency Department Data, 2010, 2011, 2012, 2013, 2014, Educators, Employers, HHS Staff, Media, People with Substance Use or Abuse Problems as Audience, Policymakers, Public Officials, All US States Only

The Substance Abuse and Mental Health Services Administration (SAMHSA) is the agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

The CBHSQ Report is prepared by the Center for Behavioral Health Statistics and Quality (CBHSQ), SAMHSA, and by RTI International in Research Triangle Park, North Carolina. (RTI International is a trade name of Research Triangle Institute.)

Other substance abuse reports: http://www.samhsa.gov/data



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