Insurance and Racial/Ethnic Disparities in Receipt of Medications for Alcohol Use Disorder

INTRODUCTION

- Complications from untreated alcohol use disorder are leading cause of preventable death, and their prevalence has increased in recent years

- Medications for AUD (MAUD) are efficacious for persons with moderate and severe forms of AUD but are underutilized

- AUD is overrepresented among persons with Medicaid insurance relative to those with commercial (private) insurance, yet the degree to which insurance type is related to likelihood of MAUD receipt is not well understood

- Primary objective of this project was to examine association between insurance type and receipt of MAUD

- Secondary objective was to examine association between race and ethnicity and receipt of MAUD

METHODS

- Data source: Merative™ MarketScan® Commercial Claims and Encounters and Medicaid databases from 2015-2019

- Participants: Persons aged 18-64 with an International Classification of Diseases (ICD)-9 or -10 code corresponding to moderate or severe AUD and an AUD treatment claim

- Unit of measurement: treatment episode, defined as consecutive treatment claims until 45-day gap in care

- AUD treatment claims defined by prescription of naltrexone, acamprosate, disulfiram or receipt of psychosocial treatment

- Analytic Plan: Logistic regression to measure likelihood of MAUD receipt as a function of insurance type (primary analysis) and of race/ethnicity (secondary analysis, limited to Medicaid database) while adjusting for co-variates including gender and age

RESULTS

Table 1. Characteristics of sample.

Characteristic	Total Sample		Receipt of Medication for Alcohol Use Disorder			
			No		Yes	
	n	%	n	%	n	%
All participants	216,687	100.0	169,694	78.3	46,998	21.7
Gender						
Male	123,842	60.5	97,812	79.0	26,030	21.0
Female	80,825	39.5	61,731	76.4	19,094	23.6
Age (years)						
18-34	78,325	38.3	64,313	82.1	14,012	17.9
35-44	49,873	24.4	38,189	76.6	11,684	23.4
45-54	46,297	22.6	34,491	74.5	11,806	25.5
55-64	30,172	14.7	22,550	74.7	7,622	25.3
Insurance type						
Commercial	98,120	47.9	62,089	63.3	36,031	36.7
Medicaid	106,547	52.1	97,454	91.5	9,093	8.5
Race/ethnicity (Medicaid only)						
White	63,817	65.2	57,317	89.8	6,500	10.2
Black	25,909	26.5	24,555	94.8	1354	5.2
Hispanic	1,449	1.5	1,355	93.5	94	6.5
Other	6,770	6.9	6,237	92.1	533	7.9

Table 2. Associations between treatment episode characteristics and MAUD receipt.

Number of treatment episodes	Received medication for alcohol use disorder (%)
318,576	**18.7**
Characteristic	**Adjusted risk ratio (95% CI)***
Gender	
Male	0.82 (0.81-0.83)
Female	reference
Age (years)	
18-34	reference
35-44	1.30 (1.27-1.32)
45-54	1.31 (1.28-1.33)
55-64	1.29 (1.26-1.32)
Insurance type	
Commercial	**4.95 (4.84-5.06)**
Medicaid	**reference**
Race/ethnicity (Medicaid only)	
White	**reference**
Black	**0.51 (0.44-0.58)**
Hispanic	**0.67 (0.51-0.89)**
Other	**0.74 (0.64-0.85)**

*Models also adjusted for year, co-occurring substance use disorders, psychiatric illness, & alcohol-related illnesses.

CONCLUSION

- Among persons with moderate or severe AUD, those with Medicaid insurance and who are Black or Hispanic are disproportionately less likely than those with commercial insurance and who are White to receive MAUD

- Only 20 percent of AUD treatment episodes were associated with MAUD, indicating the majority of persons with most severe forms of AUD do not receive evidence- and guideline-based treatment for this disease

- Future studies are needed to identify causes of observed inequities of MAUD receipt, as are improved implementation efforts to increase uptake of MAUD for persons with AUD

AUTHORS & DISCLOSURES

Carrie M. Mintz, MD,[1,2,A] Lisa A. Hayibor, MD, MPH,[1,A] Richard A. Grucza, PhD,[3,A] Kevin X. Yu, MD, MPH,[1,A] Laura J. Bierut, MD,[1,B] & Sarah M. Hartz, MD, PhD[1,A]

[1]Department of Psychiatry, Washington University School of Medicine
[2]Harris House Foundation, Saint Louis, Missouri
[3]Department of Family Medicine, Saint Louis University School of Medicine
[A]No conflicts of interest
[B]Dr. Bierut is listed as an inventor on Issued U.S. Patent 8,080,371, "Markers for Addiction" covering the use of certain SNPs in determining the diagnosis, prognosis, and treatment of addiction; Dr. Bierut is a Speaker Bureau member for Imedex.

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