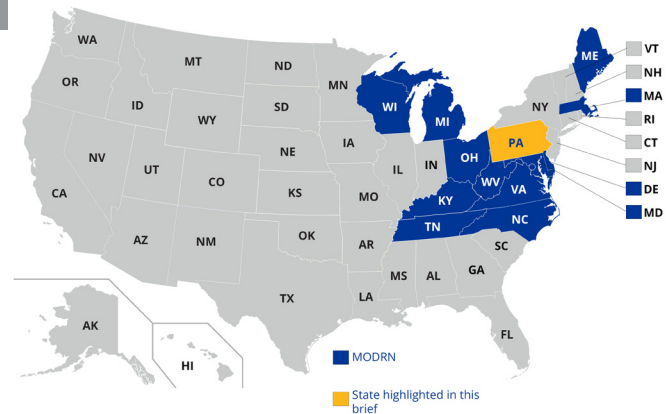


MODRN Issue Brief: Racial and Ethnic Disparities in Medications for Opioid Use Disorder in Pennsylvania and 11 states, February 2024

What is MODRN?

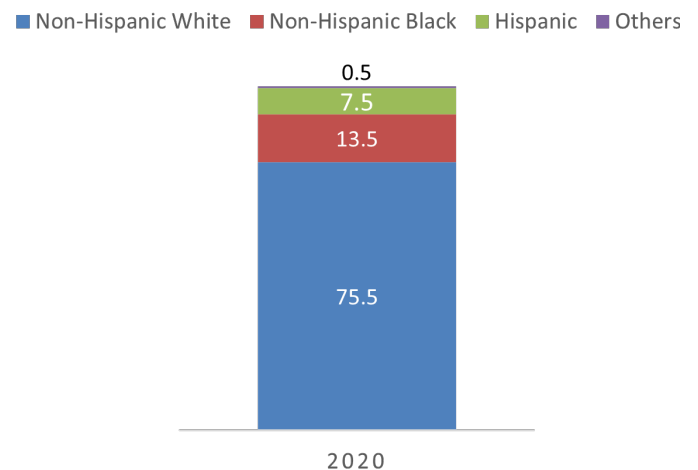
The Medicaid Outcomes Distributed Research Network (MODRN) is a network of 12 state-university partnerships that conducts multi-state analyses to inform state Medicaid programs. MODRN aims to improve quality and equity in health-care delivery to Medicaid members. MODRN is a collaborative effort between the State-University Partnership Learning Network and the Medicaid Medical Director Network both of which are supported by AcademyHealth. The Medicaid Research Center at the University of Pittsburgh participates in MODRN.



Background and Research Questions

- Medicaid finances approximately half of opioid use disorder (OUD) treatment episodes in the US.
- In recent years, overdose deaths have risen sharply among Black, American Indian and Alaska Native people.
- Research points to racial and ethnic disparities in receipt of medications for OUD and other evidence-based care.
- This MODRN issue brief describes racial and ethnic differences in the demographic characteristics and comorbidities of Pennsylvania Medicaid enrollees with OUD. It also examines trends in racial and ethnic disparities in medications for OUD from 2016-2020.
- Trends in Pennsylvania Medicaid were compared to 11 states in MODRN, many of which border Pennsylvania.

FIG. 1 RACE AND ETHNICITY OF PENNSYLVANIA MEDICAID ENROLLEES WITH OUD



Pennsylvania Medicaid enrollees with OUD in 2020

More than three-quarters (75.5%) of Pennsylvania Medicaid enrollees diagnosed with OUD are non-Hispanic white (Fig 1) whereas 13.5% are non-Hispanic Black, 7.5 are Hispanic, and, 0.5% are members of other racial or ethnic groups.

The characteristics of Medicaid enrollees with OUD differ by race and ethnicity (Table). Non-Hispanic Black and Hispanic enrollees with OUD are older, more likely to be male, and eligible for Medicaid due to disability compared to non-Hispanic white enrollees with OUD. Most Pennsylvania enrollees with OUD regardless of race and ethnicity live in urban areas.

Behavioral health comorbidities are highly prevalent among Pennsylvania Medicaid enrollees regardless of race or ethnicity. But there were differences across groups in specific diagnoses. Roughly half of Medicaid enrollees with OUD were diagnosed with another substance use disorder although the specific diagnoses varied by race and ethnicity.

MODRN also examined racial and ethnic differences in the setting in which OUD was diagnosed to inform interventions to narrow gaps in treatment. The most likely setting where an OUD diagnosis was recorded was outpatient for all groups although non-Hispanic Black enrollees were significantly less likely than Hispanic and non-Hispanic enrollees with OUD to be diagnosed in outpatient settings.

Table. Characteristics of Pennsylvania Enrollees with Opioid Use Disorder by Race and Ethnicity, 2020

% Enrollees	Non-Hispanic White	Non-Hispanic Black	Hispanic	Other Race/Ethnicity
Age				
12-20	0.8	1.1	1.1	1.0
21-34	40.8	33.8	31.6	44.3
35-44	35.2	24.2	31.2	33.3
45-54	14.8	22.4	23.8	13.5
55-64	8.4	18.5	12.3	7.9
Sex				
Female	49.2	39.0	28.8	43.1
Male	50.8	61.0	71.2	56.9
Eligibility Category				
Disabled	15.7	30.0	23.8	14.0
Children	0.7	0.8	0.9	0.8
Expansion adults	69.3	58.8	66.7	71.1
Non-disabled adults/Pregnancy	14.3	10.4	8.6	14.0
Area of enrollee residence				
Urban	81.7	97.3	97	93.6
Rural	18.3	2.7	3.0	6.4
Behavioral health comorbidities				
Anxiety disorder	47.9	39.0	40.6	43.1
Mood disorder	47.5	44.4	44.7	43.1
Schizophrenia and other psychotic disorder	6.0	15.1	10.9	9.1
Post-traumatic Stress Disorder	11.8	12.8	10.0	12.3
OUD only	51.4	41.5	47.0	48.3
OUD and alcohol use disorder	19.5	26.1	17.3	21.8
OUD and cannabis use disorder	16.8	28.1	21.9	17.9
OUD and cocaine use disorder	14.4	28.4	23.9	13.9
OUD and amphetamine use disorder	17.1	8.3	9.3	12.3
OUD and other psychoactive use disorder	22.2	26.8	27.4	27.2
OUD and any other substance use disorder	14.3	18.0	13.9	16.7
Location where was OUD diagnosed (not mutually exclusive)				
Inpatient setting	13.8	15.4	16.6	18.2
Emergency department setting	14.9	19.0	21.6	20.4
Outpatient setting	91.6	78.0	88.0	84.8

Medications for Opioid Use Disorder (MOUD) by Race/Ethnicity

Fig. 2 % Overall MOUD in PA and 11 MODRN states

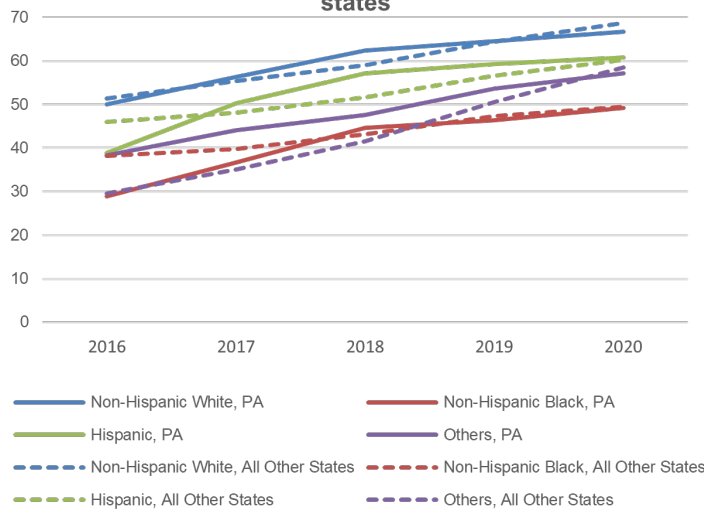
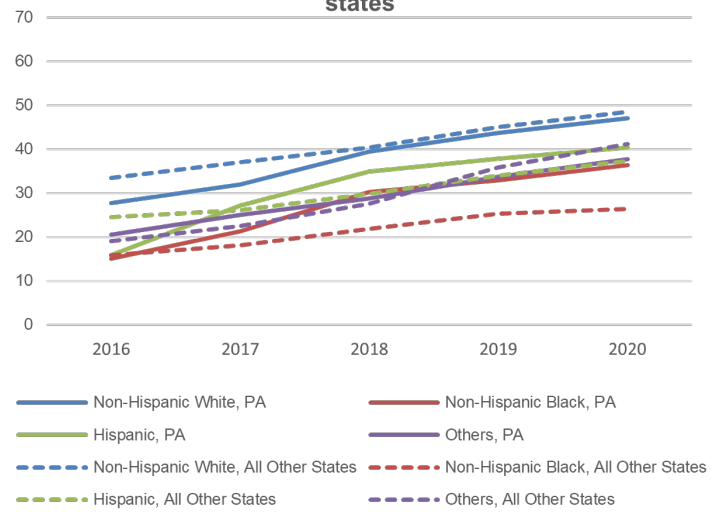


Fig. 3 % Buprenorphine in PA and 11 MODRN states



Findings and next steps

Medications for OUD – buprenorphine, methadone and naltrexone – are effective for preventing relapse, promoting recovery and lowering the risk of overdose.

Use of MOUD increased for all racial and ethnic groups from 2016-2020 in Pennsylvania and the other 11 states, driven by growth in buprenorphine. There were differences in receipt of medications for OUD by race and ethnicity, both in Pennsylvania and the 11 other states. Non-Hispanic White enrollees were most likely to receive medications, whereas Non-Hispanic Black enrollees were least likely to have any medications for OUD (66.6% vs. 49.2% in PA, 2020).

Type of MOUD received also varied by race and ethnicity. Non-Hispanic White enrollees in Pennsylvania were more likely to receive buprenorphine compared to Non-Hispanic Black enrollees (47.1% vs. 36.5% in 2020). Non-Hispanic White enrollees were more likely to receive methadone compared to Non-Hispanic Black enrollees in Pennsylvania (17.6% vs. 10.5% in 2020). However, in the 11 other states, non-Hispanic Black enrollees were more likely to receive methadone compared to Non-Hispanic white enrollees (19.2% vs. 23.4% in 2020).

MODRN is currently investigating several factors that may help to explain the racial and ethnic differences in OUD treatment.

For more information contact: Julie Donohue with the Medicaid Research Center at jdonohue@pitt.edu.

Fig. 4 % Methadone in PA and 11 MODRN states

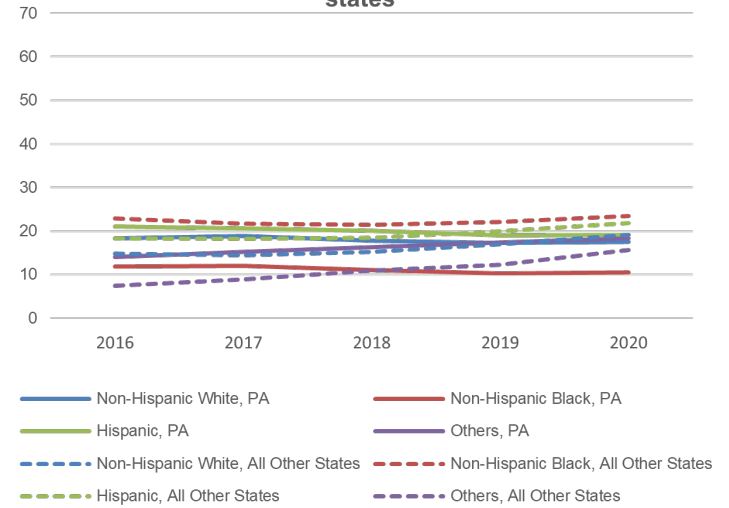


Fig. 5 % Naltrexone by Race/Ethnicity, 2016-2020

