

Rally for Recovery

February 20th, 2014



Utah Health Policy Project & Utah Support Advocates for Recovery Awareness

HOW MEDICAID EXPANSION WOULD BENEFIT THE RECOVERY COMMUNITY



Jeremy Allen

Born and raised in Utah, Jeremy has been both working toward his own recovery, and helping others recover as well. Over the last decade he has sought out medical care in emergency rooms for treatment of preventable services such as an abscess tooth. He has been homeless and stayed in shelters and on friends and families' couches. All in all Jeremy said the hardest part of maintaining his recovery is finding help for his medical concerns that would assist him in maintaining his addiction recovery.

Utah Substance Use Disorder Facts

- Approx. 6% of UT residents used illicit drugs within the last month¹
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- SLC has one of the highest prescription drug abuse rates in the country¹
- The use of Heroin in UT County has increased by 10% in treatment facility enrollments²
- Meth is still the most frequently used illicit drug in UT County by women who are admitted in to treatment centers²
- In UT about 17,000 youth per year from 2008-2012 reported using illicit drugs within the month prior to being surveyed by (NSDUH)³
- In UT, about 98,000 people in 2012 reported being dependent on alcohol to function⁴

Who Suffers from Substance Use Disorders

- Close to 91,000 adults in UT were in need of treatment for alcohol and/or drug dependence or abuse in 2013⁵
- The public substance abuse treatment system is currently only treating 16% of the current need⁵
- A combined total of approx. 86,500 adults and youth are in need of, but not receiving, substance abuse treatment services⁵
- Mental and substance use disorders lead to disability, disease (e.g., diabetes, cardiovascular problems, cancer, etc.), and higher healthcare and socio-economic costs⁵

How the Recovery Community will benefit from Medicaid Expansion

- Currently adults without children do not qualify for Medicaid
- If Utah expanded Medicaid, childless adults would have access to Medicaid if their incomes are below 138% FPL
- About 40% of the Medicaid expansion population (approx. 50,000 Utahns) have a behavioral health need, including substance use disorder treatment.
- Access to health insurance through Medicaid will provide access to mental health and substance abuse services that the recovery community often has a wait time of 3 months (for residential treatments)

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Tim Lecheminant

Tim is a Utah native. He has been in recovery since the beginning of 2013. In fact, Tim was homeless from 2007-2013. Through hard work and dedication, Tim beat his addiction and was able to earn grants to start working towards a Sociology degree at Salt Lake Community College. He is a full-time student taking a rigorous schedule each semester. Besides the grants he receives, Tim has no income. That being said, unless Medicaid is expanded he doesn't qualify for any sort of subsidy or health insurance. With a bad ankle that was severely fractured and never adequately rehabilitated, health insurance is a necessity. Tim is anxiously awaiting for the decision our lawmakers will make so he can have his medical needs taken care of.

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Benjamin Gerber

Benjamin Gerber is a hard-working Utah native. Ben is a 32 year old who has been in recovery since 2012. Ben worked for a general contractor from 2004 until 2009, when he was laid off. Currently, Ben has PCN that has covered a portion of the dental work he requires. However, PCN doesn't cover the root canal and crown that Ben so desperately needs. In fact, he has all of the required work up to these procedures, but he doesn't have the funds necessary to cover the actual operation. "It's tough to only eat soft foods. I enjoy eating different kinds of foods, but with my teeth my selection is kind of limited. I just want to take a bite into an apple." Now that he's recovering from his past addictions, Ben is pursuing a degree in Business Management. Medicaid is essential to him, with the cost of school and living he is unable to afford the cost of the surgeries needed to address his health issues.

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Jacqueline Gomez

Jacqueline Gomez is a 51 year old Utahn currently living with chronic arthritis and has had two hip replacements and over 15 surgeries since she was 35 years old. She works as a navigator for USARA currently. This last year she finally got healthcare coverage with her partner who works at the University Hospital. However, her 18 year old daughter is still uninsured and a senior at a local high school. Her daughter had a cold last week that cost Jacqueline over \$250 between the doctors' visits and medications. Like many others in her situation, Jacqueline is having trouble paying for the cost of her prior medical bills that have accumulated from all of the past troubles she has had with her arthritis. *"It is the ability to pursue ultimate happiness that makes this country great. Without health insurance we're unable to do that."*

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Christopher Soule

Christopher is a Utahn who has been in recovery for a couple years now. He worked for the same employer for over 20 years—only as part time—so was never offered health insurance. “After my father was killed in Vietnam my mother became emotionally detached. I was growing up alone in some sense.” Although he beat his addiction to alcohol, obstacles still remain for Christopher. He has high blood pressure and hasn’t seen a physician in over 5 years. When asked what health care coverage meant to him he replied, *“It’s stability. I don’t have a clue what’s going on with my body because I haven’t seen a doctor. And just because I might be healthy today doesn’t ensure that tomorrow everything will be alright.”*

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Richard Anderson

Richard is a 53 year old Utahn who has been in recovery since his mid-forties. He was in a car accident that required a dozen surgeries to save his leg from amputation. Richard also suffers from reflex sympathetic dystrophy. The only way he is able to cope with this intense chronic pain is by receiving shots in his leg on a monthly basis. Unfortunately the costs of those shots fall back on Richard and his loved ones. When asked what health care meant to him, he responded, "It would be a terrific financial burden off both my parents and my shoulders. It is too difficult for me to work with the pain right now because I'm not receiving adequate treatment on my leg." Richard's story is similar to others amongst the 60,000 uninsured Utahns who still fall in the coverage gap.

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