



ACA Enrollment: Reaching People with Substance Use Disorders

The Affordable Care Act (ACA) offers tremendous opportunities to expand insurance coverage for substance use disorders and improve treatment. On January 1, nearly 7 million uninsured people with behavioral health conditions became eligible for coverage through Medicaid or subsidized private insurance.¹ An estimated 5 million more people with insurance gained coverage for substance use disorder services for the first time.²

The ACA also expands the range of treatment options for substance use disorders, encourages integration of this treatment with physical health care, and bolsters prevention efforts. For example, more insurance plans must now comply with the federal law requiring parity in behavioral health and physical health benefits.

Barriers to Enrollment

To obtain these benefits, the uninsured must enroll in coverage. Reaching people with substance use disorders requires targeted outreach because the illness itself can create barriers to enrollment. Massachusetts' experience with implementing a near-universal health insurance law shows the need for targeted outreach: Within four years of reforming the state's health insurance law, 97 percent of Massachusetts residents were enrolled, but about 25 percent of those seeking treatment for substance use disorders remained uninsured.³

- **Impact of having a chronic illness.** Addiction to drugs or alcohol is a chronic illness with symptoms that can make enrollment challenging, such as an inability to concentrate or retain information. It can also create barriers to maintaining employment, securing reliable transportation, or interacting with others.⁴ Many people with a substance use disorder also have a mental and/or physical illness, further complicating access to care.
- **Daunting application process.** The length of time needed to process applications, complexity of the process, and requirements for documentation of income, citizenship, and residence can be challenging for anyone. Individuals with chronic substance use disorders are vulnerable to experiencing homelessness and have frequent changes to their mailing address or no address at all. These factors make it exceedingly difficult to get required documentation, and find a safe place to store these important papers.
- **Sporadic encounters with the health care system.** Many people are expected to learn about ACA enrollment through their health care providers. But a number of people with substance use disorders do not have a regular health care provider or avoid seeking care.
- **Lack of information on ACA benefits.** The ACA is a complicated law with numerous components applied differently across state lines. People with substance use disorders may not know about the range of treatment options available to them, including accountable care organizations and health homes that can help them navigate the new health care system.

- **Misinformation about eligibility.** Some formerly incarcerated people believe they are not eligible for coverage. In states where Medicaid eligibility is expanded, people leaving prison or jail who have low incomes will likely be eligible for Medicaid and subsidized private insurance plans. In all states, formerly incarcerated people who do not have health insurance coverage through a job and earn too much to qualify for traditional Medicaid can buy private insurance through the Marketplaces.⁵
- **Stigma.** While there is movement toward treating substance use disorders as a chronic condition, many people still blame those with substance use disorders for what they see as moral failings. Stigma contributes to people with this illness feeling shame, making it difficult to seek treatment for their illness.

Strategies for Reaching People with Substance Use Disorders

- **Create targeted outreach materials.** Create handouts that highlight the benefits of the ACA to the substance use disorders community.
- **Use trusted messengers.** Partner with substance use disorders advocacy organizations on outreach and enrollment. Create a meaningful partnership by integrating members of the substance use disorders community into all outreach activities or joining their efforts. Offer resource support and subject matter expertise to help with getting the word out. Groups that might be interested in partnering include state or local affiliates of:
 - [Community Anti-Drug Coalitions of America](#)
 - [Faces & Voices of Recovery](#)
 - [Harm Reduction Coalition](#)
 - [National Alliance on Mental Illness](#)
 - [National Council on Alcohol and Drug Dependence](#)
 - [Young People in Recovery](#)
- **Attend Recovery events.** Set up a table to distribute information. Recovery events are a celebration and are held across the country. They usually draw a large and diverse crowd. Each September, the Substance Abuse and Mental Health Services Administration (SAMHSA) sponsors [National Recovery Month](#). Being present to distribute information and answer questions will help make a connection to the ACA.
- **Go to community locations.** Have a presence in places people with substance use disorders may visit. Connect with treatment centers, mobile health vans, homeless shelters, hospital emergency rooms, drop-in centers and needle exchanges. Conduct trainings and information sessions in these locations, if possible, or leave materials that staff can distribute or people can pick up anonymously.
- **Partner with providers.** Build a partnership with substance use disorders providers, so they can be a resource for educating and enrolling people. Try to connect with your state affiliate of the [State Association of Addiction Services](#) and local affiliates of the [National Council for Behavioral Health](#) or other provider associations.

- **Educate Navigators and assisters about outreach to people with substance use disorders.** Offer information that can be incorporated into training programs. Information should include demographics about people with substance use disorders in the area being served, barriers to accessing insurance and treatment, descriptions of types of treatment, and a reminder that people may not feel comfortable disclosing their illness.
- **Connect with federally sponsored efforts.** SAMHSA is supporting enrollment coalitions to encourage uninsured individuals to enroll in coverage.
- **Reach out to prison and jail officials, pre-release case managers, probation officers and parole boards.** Many people in prisons and jails have histories of substance use disorders. Ensuring that they have access to health insurance at the time of release is an important part of integration back into the community. Partner with criminal justice workers to help people sign up for insurance as they leave prisons and jails.

Outreach and Enrollment Resources

From the Alcohol Drug Council of North Carolina (ADCNC):

- [“Increase Your Chance For Recovery” Enrollment Flyer](#)
- [Special Enrollments FAQs](#)
- [Young Adults Health Coverage FAQs](#)

From the Arkansas Health Connector

- [How to Use Health Insurance Guide](#)
- [Health Insurance Special Enrollment Guide](#)

From HealthCare Access Maryland:

- [Enrollment Flyer \(with a focus on mental health and substance use disorder services\)](#)

From MNSure:

- [Enrollment Flyer \(with a focus on mental health and substance use disorder services\)](#)

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¹ Miller JE, Lentz C, Maududi N, Harding J. 2013. The Waterfall Effect: Transformative Impacts of Medicaid Expansion on States. National Association of State Mental Health Program Directors (NASMHPD). <http://www.nasmhpd.org/docs/publications/NASMHPDMedicaidExpansionReportFinal.pdf>

² ASPE Research Brief. Affordable Care Act Will Expand Mental Health and Substance Use Disorder Benefits and Parity Protections for 62 Million Americans. http://aspe.hhs.gov/health/reports/2013/mental/rb_mental.pdf

³ Victor A. Capoccia, Kyle L. Grazier, Christopher Toal, James H. Ford II and David H. Gustafson, Massachusetts's Experience Suggests Coverage Alone Is Insufficient To Increase Addition Disorders Treatment. *Health Affairs*. 2012; 31(5): 1000-1008.

⁴ National Coalition for the Homeless: Substance Abuse and Homelessness. <http://www.nationalhomeless.org/factsheets/addiction.pdf>

⁵ Open Society Foundation, "Affordable Care Act (ACA) 101" http://facesandvoicesofrecovery.org/pdf/arco/affordable_care_act_101.pdf