Behavioral health conditions, which include both mental illnesses and addictions, affect a substantial portion of the US population, including many people with Medicaid. Many behavioral health providers do not take any type of insurance, restricting access to treatment for a large number of people.

Medicaid coverage and financing facilitate access to a variety of behavioral health services, including psychiatric care, counseling, prescription medications, inpatient treatment, case management, and supportive housing.

The Medicaid expansion provides states with additional resources to cover behavioral health services for many adults who were previously excluded from the program. Medicaid restructuring as proposed in the American Health Care Act could limit states’ ability to care for people with behavioral health conditions.

**Behavioral Health Conditions Affect Many Americans, but Access to Treatment is Limited**

Over 43 million adults have a mental illness such as depression, anxiety, or schizophrenia, as of 2015.

Over 19 million adults have an addiction.

In 2015, millions of people with behavioral health needs did not receive treatment.

Behavioral health provider shortages are significant throughout the country, particularly in rural areas.

**Medicaid Enables Many People with Behavioral Health Needs to Access Care**

Medicaid covers a substantial portion of adults with behavioral conditions, as of 2015.

<table>
<thead>
<tr>
<th>Serious Mental Illness</th>
<th>26%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any Mental Illness</td>
<td>21%</td>
</tr>
<tr>
<td>Addiction</td>
<td>17%</td>
</tr>
</tbody>
</table>

Some people with behavioral health conditions qualify for Medicaid because of a disability, while others gained coverage through Medicaid Expansion.

Adults with Medicaid are more likely than uninsured adults to receive behavioral health treatment.

In 10 expansion states, there was a 44% average decline in uninsured mental health hospital stays as of 2014, a decline not seen in non-expansion states.

**Reduced Federal Medicaid Financing Could Limit Behavioral Health Coverage and Services**

Average Medicaid spending for people with mental health conditions is nearly 4 times as much as it was for other enrollees.

Nearly half of Medicaid spending is for enrollees with behavioral health conditions as of 2011.

Medicaid funded 25% of all mental health spending and 21% of all addiction spending by any payer in 2014. Limits on Medicaid coverage could set back efforts to treat individuals with behavioral health conditions.

**Sources for this document are available at:** [http://kff.org/infographic/medicaids-role-in-behavioral-health](http://kff.org/infographic/medicaids-role-in-behavioral-health).

Filling the need for trusted information on national health issues, the Kaiser Family Foundation is a nonprofit organization based in Menlo Park, California.