

# Impact of the Coronavirus Pandemic on Substance Use Disorder Treatment: Findings from a Survey of Specialty Providers in California



RTI International and the University of California, Los Angeles (UCLA) conducted a survey of specialty substance use disorder (SUD) providers in California to understand the impact of the coronavirus pandemic on Medicaid patients' access to treatment and the role of telehealth in providing SUD services.

The coronavirus pandemic presents unique challenges for individuals with substance use disorders (SUDs). This population has a greater prevalence of chronic conditions that put them at risk for contracting COVID-19. Also, social isolation can exacerbate substance use. A recent survey conducted by the Centers for Disease Control and Prevention found that 13% of adults had started using substances or increasing their use to cope with pandemic-related stress and emotions.<sup>1</sup> Additionally, data from the Overdose Detection Mapping Application Program (ODMAP) shows a 17% increase in suspected overdose submissions when comparing the weeks prior to and following the commencement of state-mandated stay-at-home orders among participating counties.<sup>2</sup>

We conducted a survey of specialty SUD treatment providers in California to answer the following questions:

- **Is the pandemic limiting initiation of addiction treatment for Medicaid beneficiaries, particularly vulnerable populations, and among those who need higher levels of care?**
- **Is telehealth mitigating the impact of the coronavirus pandemic on access to addiction treatment? Is it mitigating access barriers for vulnerable populations?**

This survey is funded by the Patient-Centered Outcomes Research Institute (PCORI) as part of a larger study that is researching ways to improve addiction treatment intake processes. PCORI supports research to help patients and people who care for them make better-informed decisions about their health care.



## Methods

We conducted an online survey of specialty SUD providers in California during June and July 2020. We identified providers using the Behavioral Health Treatment Locator. To be eligible, providers had to accept patients enrolled in Medicaid. We sent the survey to 437 providers and received 133 completed or partially completed surveys; a response rate of 30.4%.

The survey asked about changes in the number of Medicaid patients attending SUD services since the stay-at-home order issued by the governor of California on March 20, 2020. We asked about the pandemic's impact on intake of new patients and other specific treatment services and on different vulnerable populations. We also asked about the use of telemedicine to provide SUD services and whether telemedicine had been able to mitigate patient barriers to accessing addiction treatment, the financial impact on treatment programs, the availability of personal protective equipment (PPE) and testing for COVID-19, and what policy and other actions can be taken to keep Medicaid beneficiaries engaged in treatment during the pandemic.

## Findings

### Organization Treatment and Services Characteristics

Among the survey respondents' organizations, 64% provide outpatient SUD treatment and 38% provide residential treatment. Fewer organizations provide detoxification/withdrawal management services (22%), an opioid treatment program (9%), or transitional housing (9%), as shown in **Table 1**.

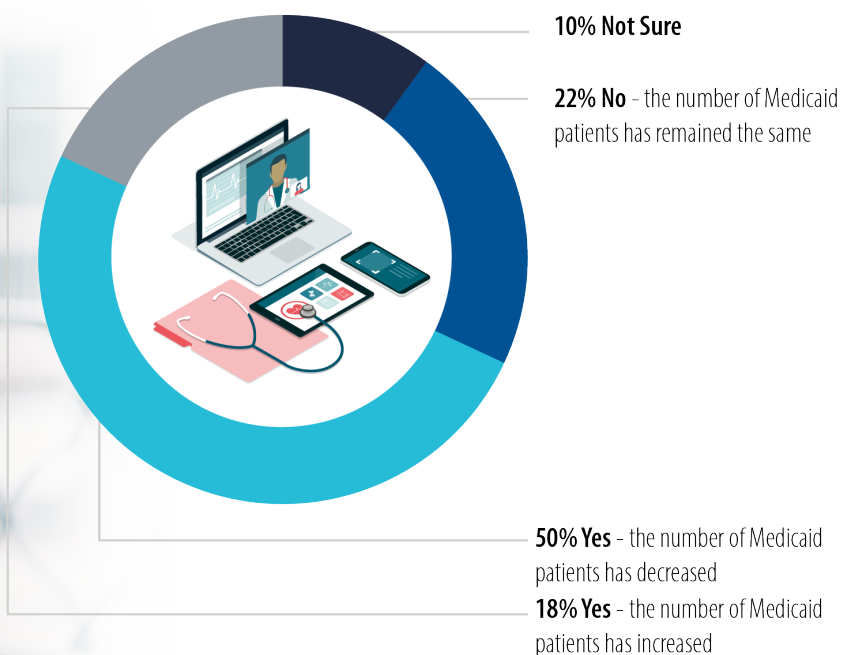
**Table 1. Characteristics of Specialty Substance Use Disorder Providers Who Responded to the Survey**

Characteristic	%
Provides outpatient treatment	64
Provides residential treatment	38
Provides detoxification/withdrawal management services	22
Provides an opioid treatment program	9
Provides transitional housing	9
Accepts private health insurance	51

### About 50% of Providers Reported a Decline in New Medicaid Patients as a Result of the Pandemic

Half of survey respondents said their organization had experienced a decrease in Medicaid patient attendance (either in person or virtual), 22% said the number had remained the same, 18% said there had been an increase, and 10% were not sure (**Figure 1**).

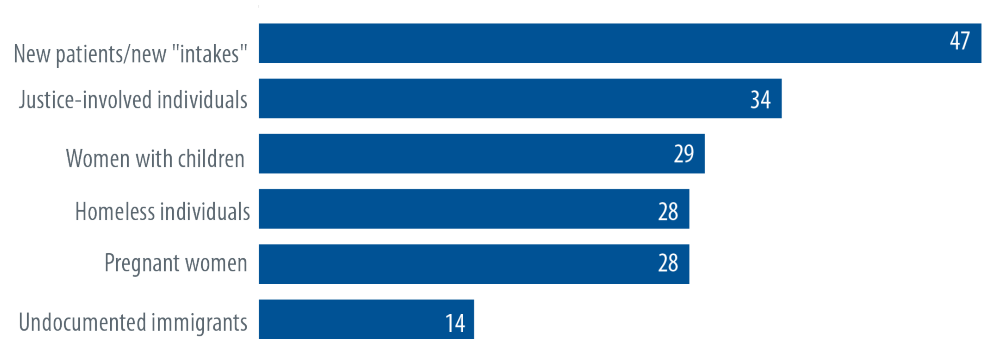
**Figure 1. Percentage of Organizations Experiencing a Change in Medicaid Patient Attendance, Either in Person or Virtual**



Almost 50% of Providers Report a Decline in New Patients as a Result of the Pandemic

Almost half (47%) of survey respondents reported a decrease in new Medicaid patients. Respondents also reported decreases in patient attendance for vulnerable populations: justice-involved individuals (34%), women with children (29%), homeless individuals (28%), pregnant women (28%), and undocumented immigrants (14%) (Figure 2).

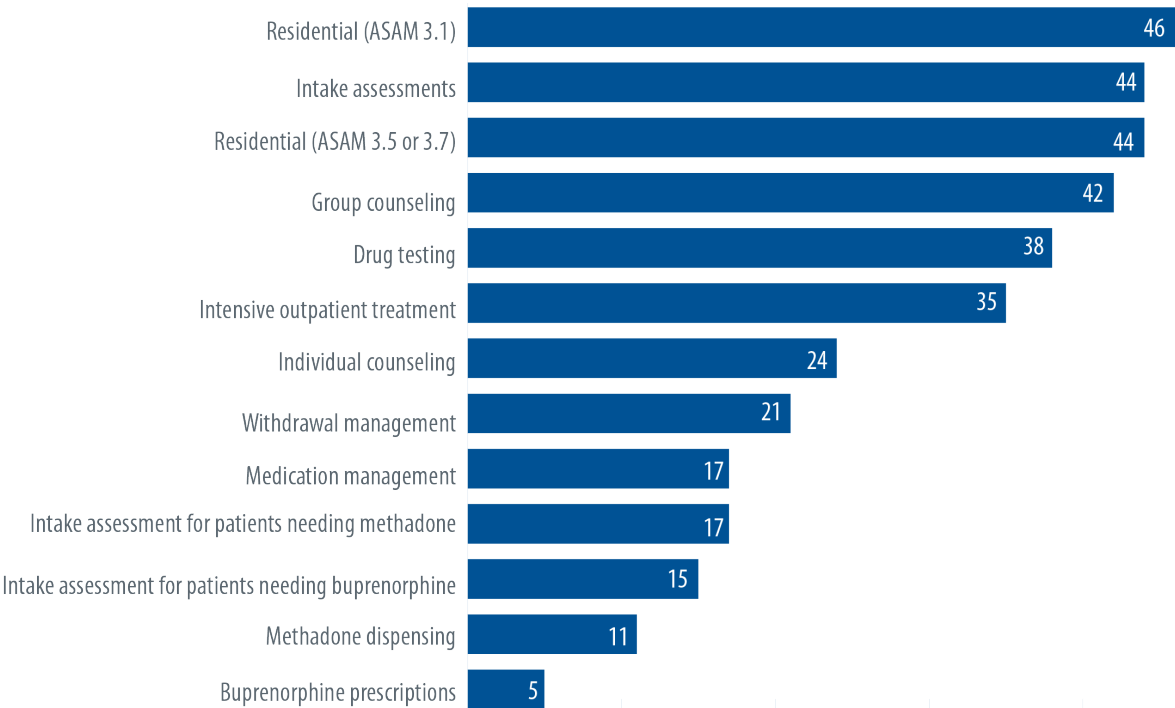
Figure 2. Percentage of Organizations Reporting a Decrease in Medicaid Patients, by Characteristic



Residential Treatment, Intake Assessments, and group Counseling Were the Services That Providers Reported Experienced the Greatest Decline as a Result of the Pandemic

Residential treatment (44–46%, depending on treatment level), intake assessments (44%), and group counseling (42%) were the services that experienced the greatest decline as a result of the pandemic. Respondents were less likely to report decreases in drug testing (38%), intensive outpatient treatment (35%), individual counseling (24%), and other services (Figure 3).

Figure 3. Percentage of Organizations Reporting a Decrease in Services, by Type of Service

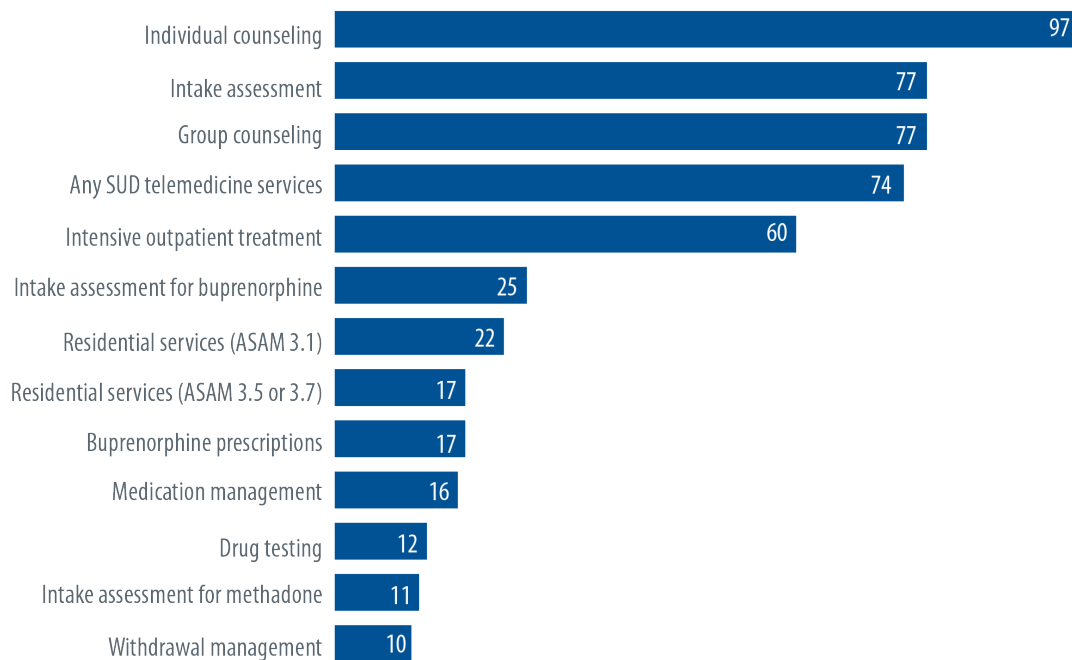


Note: ASAM = American Society of Addiction Medicine

## Telemedicine Was Used Most Commonly for Individual Counseling, Intake Assessments, and Group Counseling, and Less Commonly for Intake for Buprenorphine or Methadone Services, Drug Testing, and Medication Management

Almost all survey respondents (97%) said their organization uses telemedicine to provide individual counseling, 77% for intake assessment and group counseling, and 60% for intensive outpatient treatment. Fewer providers use telemedicine for intake assessment for buprenorphine (25%), residential services (17–22%, depending on treatment level), and other services (**Figure 4**). Overall, about three-quarters of respondents reported that their organization uses telemedicine to provide at least one SUD service.

**Figure 4. Percentage of Organizations Providing Telemedicine, by Type of Service**



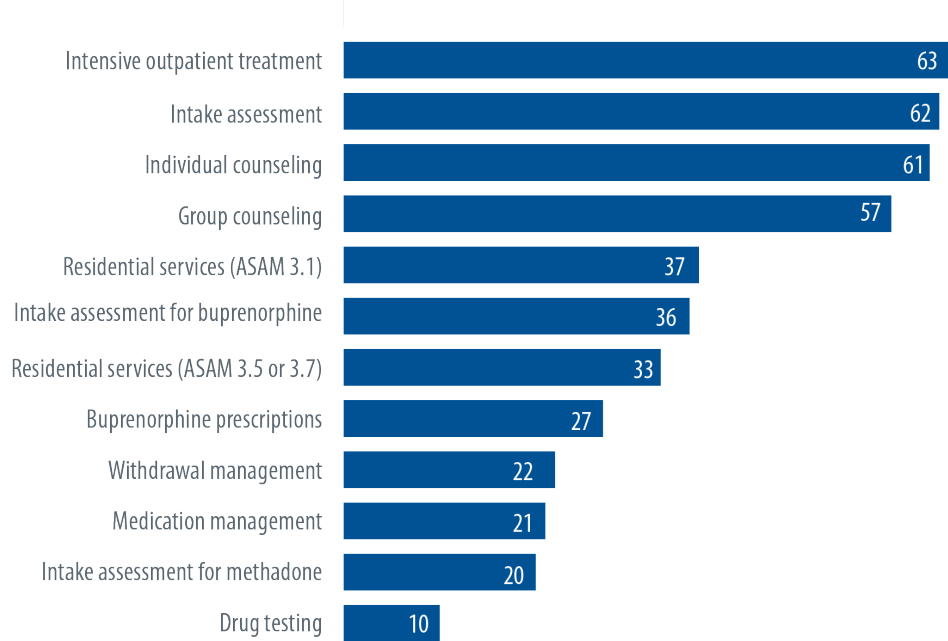
Note: ASAM = American Society of Addiction Medicine;  
SUD = substance use disorder



## Telemedicine Use Increased Dramatically After the COVID-19 Stay-at-Home Order

More than half of survey respondents said that the use of telemedicine had increased for intensive outpatient treatment (63%), intake assessment (62%), individual counseling (61%), and group counseling (57%) after the COVID-19 stay-at-home order was issued. Fewer respondents reported increases in the use of telemedicine for residential services (33–37%, depending on the level of treatment), intake assessment for buprenorphine (36%), and other services (**Figure 5**).

Figure 5. Percentage of Organizations Experiencing an Increase in the Use of Telemedicine, by Type of Service



Note: ASAM = American Society of Addiction Medicine



## Telemedicine Mitigated Access Barriers Created by the Pandemic

Most survey respondents said that telemedicine had moderately (48%) or completely (30%) addressed access barriers. However, 21% of respondents said telemedicine had helped only a little. Notably, none of the respondents said that telemedicine has not been at all effective in mitigating access barriers.

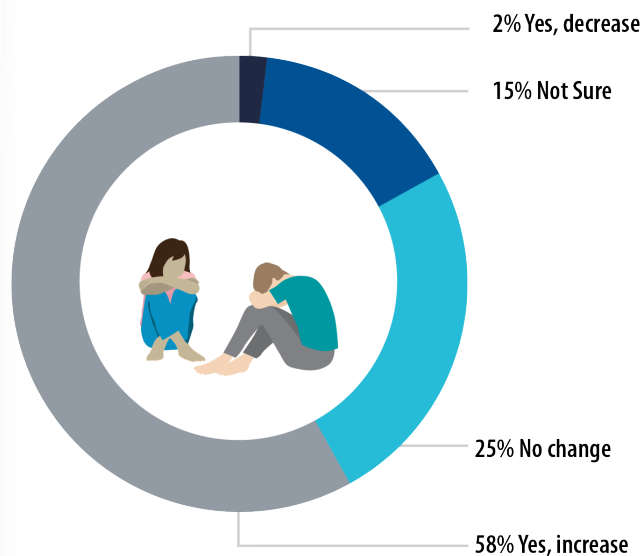
## To Further Improve Access to Addiction Services Via Telemedicine, Providers Recommend Increases in Medicaid Reimbursement, Providing Equipment and Access Points for Medicaid Patients, and Providing Additional Regulatory Flexibilities

Among survey respondents, 63% said that increases in Medicaid reimbursement would help improve access to addiction treatment services via telemedicine. Other measures they said would be helpful include providing telemedicine access equipment and access points for Medicaid patients (52%) and providing additional regulatory flexibility (46%). Also, 22% of respondents mentioned other ways to improve access to addiction services via telemedicine, such as providing equipment and ensuring reliable broadband access in patients' homes.

## Providers Report an Increase in the Number of Patients Relapsing Since the Stay-at-Home Order

About 58% of survey respondents said they have seen an increase in the number of patients who are relapsing. One-quarter (25%) of respondents reported no change in the number of patients relapsing, 2% reported a decrease, and 15% said they were not sure (Figure 6).

Figure 6. Percentage of Organizations Seeing a Change in Number of Patients Who Are Relapsing





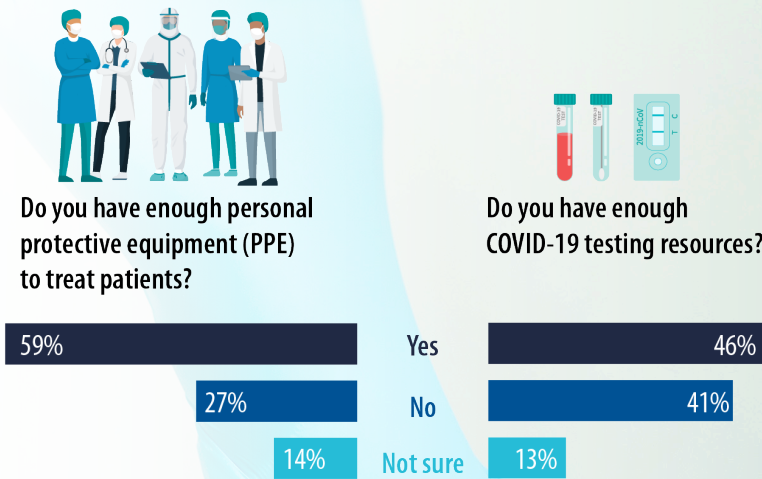
# The Coronavirus Pandemic Has Negatively Affected Organizations' Finances

Most survey respondents reported that the pandemic has had a moderate (43%) or large (25%) negative effect on their organization's finances. Another 16% of respondents reported little or no effect, 5% reported a moderate or large positive effect, and others (11%) were not sure.

## Many Providers Do Not Have Access to Enough Personal Protective Equipment (PPE) or COVID-19 Testing Resources

About 27% of survey respondents reported not having enough PPE to treat patients and 41% reported not having enough COVID-19 testing resources (Figure 7).

Figure 7. Percentage of Organizations That Have Enough Personal Protective Equipment and COVID-19 Testing Resources



## Keeping Medicaid Beneficiaries Engaged in Treatment During the Pandemic

We asked providers what actions can organizations take to keep Medicaid beneficiaries engaged in treatment during the pandemic? Respondents were most likely to select improving their ability to deliver telemedicine and providing bridge financing:

- Improve ability to deliver telemedicine (28%)
- Provide bridge financing to providers to sustain their services (27%)
- Improve access to PPE, testing, and other tools to deliver care in person safely (16%)
- Reduce client fear/avoidance of delivering treatment (15%)
- Reduce staff fear/avoidance of delivering treatment (8%)
- Other (6%)

## Informing Policy to Improve Access to Treatment

This survey was the first of three that will be conducted with California specialty SUD providers over the next few months. The findings can help inform policy and efforts to maintain access to treatment services during the coronavirus pandemic.

## References

1. Czeisler ME, Lane RI, Petrosky E, et al. Mental health, substance use, and suicidal ideation during the COVID-19 pandemic — United States, June 24–30, 2020. *MMWR Morb Mortal Wkly Rep.* 2020;69:1049–1057. <http://dx.doi.org/10.15585/mmwr.mm6932a1>
2. Alter A, Yaeger C. *COVID-19 Impact on US National Overdose Crisis.* 2020. Overdose Detection Mapping Application Program Report – June 2020. Accessed August 19, 2020. <http://www.odmap.org/Content/docs/news/2020/ODMAP-Report-June-2020.pdf>

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### More Information

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