Mental Comorbidity and Chronic Illness in the National Medicaid System

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Description
Rates of mental illness are more than twice as high among Medicaid recipients as among the general population, and nearly half of Medicaid recipients with a diagnosed disability have one or more co-occurring medical or mental health conditions. This study provided the first national estimate of the impact of mental illness comorbidity on quality of care for Medicaid recipients with diabetes across all 50 state Medicaid programs.

Specific Aims
1. Study the impact of different comorbid mental health conditions on quality of care for Medicaid recipients with diabetes.
2. Examine how the association between mental conditions and quality of care is moderated by patient, provider, regional, and Medicaid policy factors, and mediated by use of outpatient services.

Findings
- For Medicaid recipients who have diabetes, a coexisting mental health condition is an important risk factor for both underuse and overuse of medical care.
- A number of characteristics, such as living in a state with higher Medicaid reimbursement fees and higher spending on mental health conditions appeared to mitigate these problems in enrollees with comorbid conditions.

Implications
Mental health disorders are important risk factors for poor diabetes care among Medicaid recipients. As Medicaid expands under health care reform, it will be important to track the quality of care and develop clinical and policy-level strategies to improve the quality of care in this vulnerable, complex patient population.
Mental Comorbidity and Chronic Illness in the National Medicaid System (Continued)

Publications (as of September 2013)