

# COMP



California Opioid  
Maintenance Providers

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# CAPITOL WEEKLY

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## **Opinion: Eliminating Medi-Cal drug treatment costs much more than it saves**

By Jason Kletter | 07/08/10

The governor has proposed to eliminate all Medi-Cal funding for drug treatment. On a single day this fall, the governor's proposal would cut off methadone treatment for 35,000 heroin and prescription drug addicts. Intended to save state funds, the proposal would end up costing much more than it would save. California would immediately lose \$61 million in federal matching funds to save \$53 million in state funds. California would risk losing another \$100 million in federal Substance Abuse Prevention & Treatment block grant funds, due to our failure to "maintain effort."

Thirty-five thousand patients addicted to drugs will hit the streets the day after their treatment is withdrawn. Studies prove that 80 percent will relapse to drug use within 12 months. Most long-term heroin addicts are constantly involved in criminal behavior. Many of these individuals have already been to prison multiple times. While in treatment, their lives are stabilized but that stability will end with this cut. The governor's proposal will immediately increase crime and cause chaos in our hospitals and other social services.

Cities, counties and the State would face \$700 million to \$1 billion in increased

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costs for jail and prison costs, emergency room visits, court costs, children being returned to foster care, as the consequential cost of cutting off drug treatment for more than 35,000 patients. The proposed elimination would cause a public safety and public health crisis, as well as a humanitarian disaster.

The financial costs to California of untreated opiate addiction are about \$2 billion per year. These costs, combined with the social costs of destroyed families, destabilized communities, increased crime, increased disease transmission, and increased health care costs, mean that opiate addiction is a misery not only for affected addicts but for their communities as well.

Currently, these patients receive a daily dose of methadone at clinics in their communities. They then go to work, to college, and are able to maintain families, and be productive citizens. These patients include young people who became hooked on OxyContin and other prescription opiates, as well as individuals of every age, race and income level. Their health and lives would be endangered if they were forced to withdraw from methadone treatment.

Eliminating the Drug Medi-Cal program would have life-threatening medical consequences for hundreds of disabled patients. Withdrawal from opiate addiction causes severe health effects, and would throw these patients into immediate crisis. This is akin to cutting off insulin for diabetics. Heroin addicts often suffer from HIV, hepatitis, sexually transmitted disease (STDs), liver disease from alcohol abuse, and other physical and mental health problems. These patients would overwhelm our emergency rooms, intensive care units and psychiatric wards. Forced withdrawal would cause chaos in their families, jobs and communities, as their health and ability to function in their work and social life deteriorates. Most will relapse into addiction and seek opiates through illegal channels. Many are far too ill to survive. We know for certain that many of these patients will die – those who are elderly and frail are most likely to die.

Methadone treatment is so effective that the World Health Organization has identified it as an “essential medicine for the management of opioid dependence.” As such, even countries such as Chad and Afghanistan have methadone treatment programs. It is a sad day indeed if California, the eighth largest economy in the world, falls behind Chad and Afghanistan in our ability to deliver evidence-based, cost-effective health care services to our population.

Approximately 14,000 currently employed patients will have significant difficulty continuing to work without medication-assisted treatment. Many will likely lose

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their job shortly after relapsing; and many of their life/career paths will be disturbed, resulting in an increase in illicit drug use and crime. California will lose additional tax revenue when these individuals are no longer able to work.

Methadone treatment is one of the most effective investments the state can make. Drug Medi-Cal pays about \$400 per month per patient for treatment or about \$5,000 per year. One year in state prison costs about \$53,000. Studies have found treatment to yield an estimated \$7 return on investment for each \$1 spent. A National Institute on Drug Abuse (NIDA) study found that methadone treatment reduced participants' heroin use by 70 percent criminal activity by 57 percent and increased their full-time employment by 24 percent.

Loss of Medi-Cal funding will cause the closure of most of the community drug treatment programs. Thousands of self-paying, or health insurance-paying, patients will lose their access to drug treatment. Clinics cannot operate with only private patients, who make up fewer than 50 percent of the population of any clinic.

California Opioid Maintenance Providers (COMP), a coalition of community-based drug-treatment facilities, is joined in our opposition to this proposal by the California State Sheriffs Association; California Medical Association (CMA); California Nurses Association; California Narcotic Officers' Association; California Society of Addiction Medicine (CSAM); California Psychiatric Association; California State Association of Counties; and, California Association of Alcohol and Drug Abuse Counselors as well as the White House Office of National Drug Control Policy. It would do irreversible damage to individuals, businesses and communities. The costs are much greater than the savings.

For more information, please visit [www.savemedi-caldrugtreatment.org](http://www.savemedi-caldrugtreatment.org)

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