HHS Office of Inspector General

# REPORT HIGHLIGHTS

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# Availability of Surveyed Behavioral Health Providers to Treat New Patients Enrolled in Medicare and Medicaid

## Why OIG Did This Review

- Medicare and Medicaid play a significant role in providing access to care for millions of enrollees seeking behavioral health services for serious mental health challenges and substance use disorders.
- This review is part of a three-part series about access to behavioral health services in traditional Medicare, Medicare Advantage, and Medicaid managed care that OIG is conducting, in part, because of congressional interest in ensuring access to care. The first report in this series found that, overall, there were few behavioral health providers in the selected counties who actively served Medicare and Medicaid enrollees in 2021.
- This review assesses whether providers who actively served Medicare and Medicaid patients could make new patient appointments for enrollees in 2023. Without enough actively participating behavioral health providers willing to treat new patients in Medicare and Medicaid, enrollees may experience delays in care and even forgo treatment altogether.

## What OIG Found

Our findings illustrate that Medicare and Medicaid enrollee access to needed behavioral health care is hampered, not only by a lack of providers actively serving Medicare and Medicaid enrollees, but also by the inability of active providers to treat new patients.

Forty-five percent of surveyed behavioral health providers reported that they were not available to treat new patients enrolled in traditional Medicare, Medicare Advantage, and Medicaid managed care.

About three-quarters of behavioral health providers who were unavailable for new Medicare or Medicaid patients reported that they could not take on any new patients, many citing full caseloads.

Among the behavioral health providers who were available to treat new patients enrolled in Medicare or Medicaid, about a quarter reported wait times of more than 30 days for an appointment.

## What OIG Concludes

The findings of this report reiterate the importance of OIG's previous recommendations that were made in the first report of this series. Those recommendations could help address behavioral health provider shortages in Medicare and Medicaid, improve new patients' access to behavioral health care, and reduce wait times for new patient appointments.