

Rapid rise in Medicaid expenditures for autism spectrum disorder treatment

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Autism was described as early as 1940, but a marked increase in the prevalence for the broader class of autism spectrum disorders (ASDs) during the past decade highlights the demand for treatment of affected individuals. The Centers for Disease Control and Prevention (CDC) reported that the prevalence of ASD was one in 110 children in 2006 and increased at an average annual rate of 57% between 2002 and 2006. The rising prevalence has heightened concern about the financial impact of treating ASDs in the private and public health care systems.[1]

The escalating health care expenditures associated with autism spectrum disorders (ASDs) in state Medicaid programs is the subject of a study by Penn State College of Medicine researchers in the November issue of the *Journal of the American Academy of Child and Adolescent Psychiatry (JAACAP)*. [2]

In the article titled "Health Care Expenditures for Children with [Autism Spectrum Disorders](#) in Medicaid," Drs. Li Wang and Douglas Leslie used Medicaid data from 42 states from 2000 to 2003, to evaluate costs for patients aged 17 years and under who were continuously enrolled in fee-for-service Medicaid. Total expenditures included Medicaid reimbursements from inpatient, outpatient, and long-term care, as well as prescription drugs, for each treated patient.

During the study period over two million children were diagnosed with some type of mental disorder. Of these children, nearly 70,000 had an ASD, with approximately 50,000 having autism. Researchers found that

total health care expenditures per child with ASD were \$22,079 in 2000 (in 2003 US dollars), and rose by 3.1% to \$22,772 in 2003.

Strikingly, the increase in the treated prevalence of autism was higher than in any other mental disorder, rising by 32.2% from 40.6 to 53.6 per 10,000 covered lives. Total health care expenditures for ASDs per 10,000 covered lives grew by 32.8% from \$1,270,435 in 2000 (in 2003 dollars) to a remarkable \$1,686,938 in 2003.

ASDs are known to occur in all ethnic and socioeconomic groups and are characterized by impaired social interaction. Symptoms can improve with age, although many individuals continue to need support into adulthood.[3]

This study is the first to use recent national Medicaid data to estimate ASD-related health care expenditures. Medicaid expenditures per ASD child are much higher than those reported for privately insured children.[4] The rapid rise in the [Medicaid](#) expenditures for ASDs is largely due to the increase of treated prevalence rather than an increase in per patient expenditures.

In conclusion, Wang and Leslie state, "Efforts should be made to ensure that adequate resources are in place to reduce barriers to care for this particularly vulnerable population."

More information: [1]Centers for Disease Control and Prevention. Available at: www.cdc.gov/ncbddd/features/counting-autism.html.

[2]. Wang L , Leslie DL. Health Care Expenditures for Children With Autism Spectrum Disorders in Medicaid. *Journal of the American Academy of Child and Adolescent Psychiatry*. 2010;49(11):1165.

[3]Autism Fact Sheet. [www.ninds.nih.gov/disorders/au ...](http://www.ninds.nih.gov/disorders/au...)

[sm/detail_autism.htm](#). Accessed October 9, 2010.

[4]Leslie DL, Martin A. Health Care Costs Associated with Autism-Spectrum Disorders. Archives of Pediatrics and Adolescent Medicine 2007;161(4):350-355.

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