

# Elevance Health's Comprehensive Approach to Treating Alcohol Use Disorder

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#### **Key Takeaways**

- Alcohol is the most commonly misused substance. It can cause a variety of negative biological, psychological, and social outcomes.
- Effective treatment for alcohol use disorder (AUD) includes a range of interventions like provider screening and referrals, medication-assisted treatment, behavioral health interventions, and peer support.
- Elevance Health's comprehensive approach to supporting individuals with AUD is aimed at improving member health outcomes and quality of life, increasing rates of abstinence or reduced alcohol consumption, and lowering unwanted healthcare utilization and costs.

### Overview

Deaths from excessive alcohol use are a leading cause of preventable mortality in the U.S. During the years 2015-2019, one in eight total deaths among American adults aged 20 to 64 years was attributable to excessive alcohol use, including one in five deaths among adults 20 to 49 years old.<sup>1</sup>

Alcohol consumption is linked to many health and social consequences, including interference with personal relationships, heart and liver diseases, mental health conditions, cancers, motor vehicle collisions and other accidents, alcohol overdose, violence, homicide, and suicide.<sup>23</sup>

Alcohol misuse impacts more than the affected individual. Approximately 10.5 percent of U.S. children ages 17 and younger live with a parent who has alcohol use disorder (AUD), according to a 2017 report by the Substance Abuse and Mental Health Services Administration (SAMHSA).<sup>4</sup>

This paper provides an overview of Elevance Health's comprehensive efforts to support affiliated health plan members with AUD. The organization uses an evidence-based approach that integrates personalized care plans, medication-assisted treatment (MAT), and behavioral interventions along with accessible services like telehealth, peer supports, and home- and community-based programs.

## Background

Alcohol is one of the most frequently misused drugs in the U.S.,<sup>5</sup> with AUD affecting over 10 percent of Americans over age 12.<sup>6</sup> AUD is a chronic, relapsing brain disorder characterized by an impaired ability to stop or control alcohol use despite adverse social, occupational, or health consequences. AUD can range from mild to severe, and recovery is possible regardless of severity.<sup>7</sup>

Substance use disorders including AUD are increasingly viewed as chronic medical conditions, similar to diabetes or heart disease, which involve changes in brain structure and function. This perspective emphasizes the need for medical treatment and ongoing management rather than viewing AUD solely as a behavioral issue. AUD is characterized by both psychological and physiological symptoms and necessitates tailored treatment approaches.<sup>8</sup>

Many individual and societal factors contribute to the development of AUD. About 50 percent of the risk for developing AUD is due to genetics. Drinking alcohol at an early age, having a family history of alcohol misuse, mental health conditions such as anxiety and depression, exposure to alcohol prenatally, or a history of trauma also increase the risk of developing AUD. Social acceptability, and the ability to purchase alcohol legally, also eliminate barriers that exist to using other addictive but illegal substances.



AUD has both psychological and physiological symptoms, necessitating a tailored treatment approach.

The approach to AUD treatment has evolved over time. Traditionally, abstinence has been the primary treatment objective. While this continues to be the goal for most individuals, a focus on complete sobriety can discourage others attempting to reduce, rather than completely stop, their alcohol consumption from seeking treatment.<sup>10</sup> Reducing alcohol consumption is an effective harm reduction approach associated with improved physical health, mental health, and psychosocial outcomes.<sup>11,12</sup>

A holistic approach to treating AUD that recognizes the continuum of treatment goals can increase engagement and reduce stigma to support overall recovery. These approaches can be implemented across different settings, ranging from the community to outpatient and inpatient healthcare facilities, and increasingly, at home through virtual care.

# Effective AUD Treatments Are Underutilized

Although AUD is treatable, uptake of treatment is generally low. Less than 8 percent of individuals over age 12 with AUD alone and less than 14 percent with both AUD and other substance use disorders (SUD) received treatment in the past year.<sup>13</sup>

Many factors can impede seeking and engaging in treatment for AUD.<sup>14</sup> Individual and social barriers include the lack of recognition of alcohol misuse or the desire to seek treatment, along with shame and stigma. Structural barriers to treatment may include complexity of accessing care and the treatment pathway, high financial cost, long wait times, geographically inaccessible treatment, inconvenient appointment hours, lack of anonymity/privacy, and difficulty finding services that treat concurrent AUD and mental health conditions.<sup>15</sup>

Administrative barriers can also reduce access to treatment, such as policies that require abstinence to participate in programs, requiring specific treatment approaches (such as providing medication only if patients attend specific types of therapy), and requirements to receive numerous tests or screenings before treatment initiation.



A holistic approach to treating AUD can increase engagement and support recovery.

## Elevance Health's Approach to AUD

Elevance Health, alongside Carelon Behavioral Health, the company's behavioral health solutions provider, takes a comprehensive approach to treating AUD.

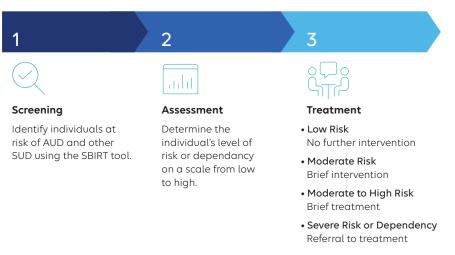
This includes reimbursement for provider screening and referrals to treatment, evidence-based medical and behavioral therapies and interventions, and access to tools and support to encourage sustained, long-term recovery. These strategies focus on helping individuals reduce or stop alcohol consumption, improve their mental health, and enhance their overall quality of life.

#### **Screening and Referral**

Through its affiliated health plans, Elevance Health offers an extensive library of training and continuing education opportunities to encourage providers to use AUD screening and treatment referral tools. For instance, the Screening Brief Intervention and Referral to Treatment (SBIRT) tool equips providers to identify individuals at risk of AUD and other SUD, supporting early intervention and harm reduction. (Figure 1)

SBIRT is an evidence-based approach that is unique in that it screens for risk of all substance misuse, not just substance dependence. It also forges connections between primary care and behavioral health providers by encouraging a warm hand-off for treatment. Studies indicate that SBIRT can reduce harmful alcohol use by 39 percent. In addition to offering SBIRT training and outreach, Elevance Health reimburses providers for use of SBIRT across all lines of business (commercial, Medicare, and Medicaid).

Figure 1
SBIRT Process Flow



**Source.** Hargraves, D., et al. (2017). Implementing SBIRT (Screening, Brief Intervention and Referral to Treatment) in Primary Care: Lessons Learned from a Multi-practice Evaluation Portfolio. *Public Health Review 28*(31).

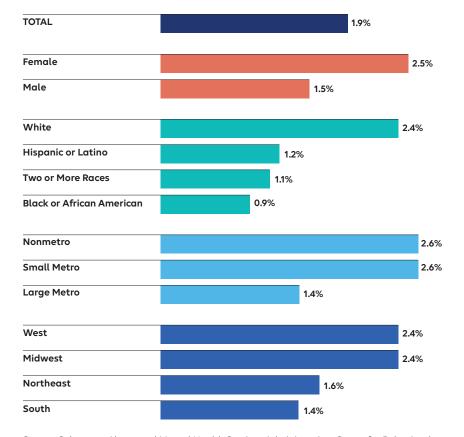
#### **Engagement and Treatment**

Elevance Health supports access to evidence-based MAT and behavioral health services through conventional community and institution-based programs, as well as through virtual and home-based treatment modalities.

MAT involves the use of FDA-approved prescription medications in combination with behavioral health counseling to treat AUD and related withdrawal symptoms. MAT has been shown to reduce alcohol consumption,<sup>18</sup> decrease alcohol craving,<sup>19</sup> and reduce rates of return to drinking.<sup>20</sup> Despite its effectiveness for treatment of AUD, only 1.9 percent of those with AUD received MAT in 2023.<sup>21</sup> (Figure 2)

To support more widespread use of MAT for AUD, Elevance Health covers MAT treatment, offers provider education and outreach programs, and includes indicators in its affiliated health plan provider directories to help members more easily locate MAT providers.

Figure 2
Percent of Individuals Age 12
and Older with Past-Year AUD
Who Received MAT in 2023



**Source.** Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. (n.d.). Results from the 2023 National Survey on Drug Use and Health: Tables 5.21B and 5.23B.

#### **Behavioral Health Services**

Evidence shows that behavioral health interventions for AUD are most effective when they include patient-defined goals, promote shared decision making with patients and providers, encourage the development of alternate coping mechanisms, and simultaneously address any other co-occurring mental health conditions.<sup>22</sup>

Elevance Health-affiliated plans include benefits for behavioral therapy services that can be accessed in person, through virtual visits, or via digital mental health apps and technologies. For instance, cognitive behavioral therapy (CBT) can be used as a freestanding treatment or as part of a care plan that includes medications for the treatment of AUD.<sup>23</sup> CBT typically involves sessions with licensed therapists, psychologists, or psychiatrists who specialize in CBT.

Connections is an Elevance Health initiative that promptly links members who are hospitalized with AUD treatment programs to increase the likelihood that they engage in behavioral health case management and AUD treatment upon discharge. Connections identifies members who might benefit from the program based on diagnoses of alcohol dependence, intoxication, and withdrawal, and then follows up with the member to offer support. Engaged members are connected to a case management program for three to six months as they begin treatment and may attend recovery support groups. This program has yielded significant clinical and behavioral health improvements for participants, including reduced suicidal events and inpatient admissions. (Figure 3)

Figure 3
Clinical Outcomes
for Connections Participants
(April 1, 2023–December 31, 2024)

	Pre-Participation	Post-Participation
Proportion of Members with One or More Suicidal Events, per Year	10.3%	6.3%
Average Number of Inpatient Admissions, PMPY	2.08	1.12
Average Number of High Intensity ED Visits, PMPY	3.28	2.55
Proportion of Total BH Spending on Outpatient Care, per Year	14.4%	41.9%

Source. Elevance Health internal program data.

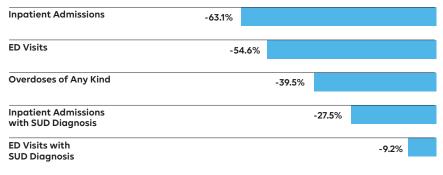
**Note.** PMPY=per member per year; High intensity ED visits are those requiring more extensive hospital resources and extended monitoring or treatment time in the ED.

#### **Outpatient Programs**

Elevance Health partners with in-home SUD recovery programs that include treatment for AUD by integrating care coordination and weekly peer support sessions. These programs can contribute to significant clinical improvements and reduced healthcare utilization. A study involving 835 Elevance Health-affiliated plan members participating in a home-based program in Connecticut and New Hampshire showed completion rates of 26 and 47 percent, respectively, and 45 percent fewer emergency department visits post-program among those who completed the program.

Elevance Health's Resilience through Information, Support, and Education (RISE) Program identifies members with co-occurring physical health and behavioral health conditions who are at risk of adverse health outcomes due to alcohol or opioid use and connects them with a case manager. The program also connects members to specialized staff to serve as the single point of contact to assist in care coordination and resource identification. This approach has increased member engagement and has led to reductions in inpatient admissions, emergency department visits, and overdoses. Elevance Health-affiliated plan members who engaged in RISE showed improved outcomes relative to a nonparticipant control group. (Figure 4)

Figure 4
Percent Change in
Health Outcomes Among
RISE Participants Compared
to Nonparticipants
2021–2024



Source. Elevance Health internal program data.

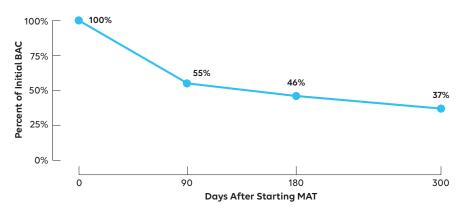
**Note.** ED=emergency department; SUD=substance use disorder.

#### **Virtual Treatment Providers**

Telehealth can expand access to care and mitigate barriers related to stigma, geography, and cost. Elevance Health partners with online providers of AUD services, whose services and supports include virtual meetings with coaching and medical teams, educational content, medication prescriptions and refills, and peer group sessions to help individuals meet their unique treatment goals, whether to drink less or stop drinking altogether.

At treatment initiation, 48 percent of Elevance Health-affiliated plan members participating in one online program reported a desire to reduce drinking, rather than completely stop. Members further showed significant improvements in blood alcohol content (BAC) after initiating MAT. (Figure 5) Engagement rates remain high with 60 percent remaining active at six months.

Figure 5
Participants' BAC After Starting
MAT through Online Provider,
as a Percent of Initial BAC
2019–2024



Source. Elevance Health internal program data.

**Note.** N=2,092 members. Members' individual BAC baselines vary. BAC=blood alcohol content; MAT=medication-assisted treatment...

#### **Ongoing Support**

Continuous support for individuals with AUD is critical to their successful and sustained recovery. This is achieved through a whole person approach that considers the importance of one's environment for lasting positive change. This is where peer support and community engagement can have powerful impact.

Elevance Health partners with community and national organizations to address alcohol use-related stigma and offer harm reduction strategies that meet members where they are in their recovery journey. The company also partners with outreach organizations that facilitate community meetings, trainings, and educational forums, with an emphasis on conducting these events where individuals are most likely to be found in their communities.

Peers also play an important role in contributing to sustained recovery, and Elevance Health supports a multifaceted peer strategy. Peer supporters are people who have been successful in their recovery who help others experiencing similar situations.<sup>24</sup> Peers share lived experiences, which can build trust and reduce the stigma associated with seeking help. They can serve several roles, including mentors, care navigators, and recovery coaches. Organizations offering peer services go through the process of credentialing to become part of Elevance Health's affiliated plans' provider networks. These programs provide a wide range of in-person, telephone, and virtual guidance and advocacy services to individuals and their families.

## Considerations

Support for AUD should be individualized, taking into consideration biological, psychological, and social needs to help members reach their personal goals for recovery.

Ways in which health plans, payers, providers, and other stakeholders can promote greater engagement and uptake of treatment among individuals with AUD include:

Reduce stigma to increase engagement among people with AUD. Stigma and shame are routinely cited as a primary reason for not seeking treatment for AUD. One way to address this is to avoid an "all or nothing" approach to recovery and support individuals who wish to reduce, rather than completely abstain from, using alcohol. Payers should support programs that do not require complete abstinence during treatment and through recovery.<sup>25-27</sup>

Encourage provider use of evidence-based tools for early intervention and harm reduction. Plans should encourage provider screening and intervention for unhealthy alcohol use through training and education and reimbursement for the use of validated screening tools. By covering preventive services such as screening and brief interventions, insurers can facilitate provider identification of individuals at risk for AUD early on.

#### Support telehealth flexibilities and cross-state licensure for AUD providers.

Expanding access to telehealth for AUD, including treatment and support groups, can promote uptake. Pelemedicine for AUD treatment can address individuals' desire for privacy and convenience and can eliminate geographical barriers to care—especially for those in rural areas. In addition to providing virtual AUD treatment and support, digital support tools aid recovery by providing daily tracking and medication reminders.

Cultivate the peer workforce by elevating the profession and bringing attention to the services they provide. Policymakers should support the development, implementation, and recognition of certification requirements for peers that align with the skills of the peer workforce and the needs of the people they serve.

#### Support coordinated, whole person care across the healthcare ecosystem.

Payers, policymakers, and providers should collaborate to increase integration of AUD treatment into physical and mental health care for individuals with co-occurring conditions and promote policies that expand access to care.<sup>30</sup> This includes the promotion of the use of MAT as an evidence-based solution for those with AUD.

## Conclusion

Elevance Health employs a comprehensive and evidence-based approach to treating AUD, recognizing that individuals may have differing treatment goals, whether the aim is to stop drinking altogether or simply reduce alcohol misuse.

Elevance Health's strategy includes personalized care plans, MAT, behavioral health interventions, and peer support. By utilizing tools like SBIRT and supporting telehealth services, Elevance Health facilitates early identification and treatment, making care more accessible. This holistic approach expands across traditional, home, and community-based programs, addressing barriers such as stigma and geographical access, in turn promoting better health outcomes and quality of life for members.

## **Endnotes**

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