

**TABLE 1
MEDICAID BENEFICIARIES AND EXPENDITURES
TOTAL AND FEE-FOR-SERVICE (FFS)
GEORGIA, CALENDAR YEAR 1999**

Population Characteristics	Beneficiaries				Expenditures			
	Total Number	Percent of Total Beneficiaries	Number in Fee-for-Service (FFS) One or More Months	Percent in FFS One or More Months	Total Expenditures	Percent of Total Expenditures	Total for FFS	Percent for FFS
All	1,249,063	100%	1,238,378	99%	\$3,225,350,439	100%	\$3,132,065,157	97%
Age								
0-3	264,163	21%	263,074	100%	\$423,534,879	13%	\$405,872,654	96%
4-5	86,003	7%	85,071	99%	\$66,989,037	2%	\$64,432,538	96%
6-12	250,373	20%	247,397	99%	\$195,979,992	6%	\$189,245,549	97%
13-18	149,411	12%	147,931	99%	\$186,562,700	6%	\$180,504,263	97%
19-21	56,401	5%	56,151	100%	\$127,975,996	4%	\$124,742,519	97%
22-44	213,844	17%	211,861	99%	\$694,958,121	22%	\$672,670,149	97%
45-64	90,954	7%	89,650	99%	\$568,696,817	18%	\$544,383,251	96%
65 and older	137,898	11%	137,227	100%	\$960,652,897	30%	\$950,214,234	99%
Gender								
Female	762,047	61%	755,478	99%	\$2,101,775,350	65%	\$2,046,540,581	97%
Male	487,011	39%	482,895	99%	\$1,123,575,089	35%	\$1,085,524,576	97%
Race								
White	436,755	35%	436,269	100%	\$1,523,151,500	47%	\$1,497,702,513	98%
Black	653,560	52%	644,023	99%	\$1,299,129,667	40%	\$1,247,280,004	96%
Hispanic	49,431	4%	49,257	100%	\$63,450,440	2%	\$58,786,643	93%
American Indian/Alaskan Native	575	0%	575	100%	\$830,446	0%	\$786,063	95%
Asian/Pacific Islander	9,721	1%	9,690	100%	\$11,772,604	0%	\$11,416,412	97%
Other/Unknown	99,021	8%	98,564	100%	\$327,015,782	10%	\$316,093,522	97%
Dual Status								
Aged Duals with Full Medicaid	102,877	8%	102,283	99%	\$888,062,217	28%	\$879,029,429	99%
Disabled Duals with Full Medicaid	48,275	4%	47,773	99%	\$326,285,547	10%	\$320,692,473	98%
Duals with Limited Medicaid	43,766	4%	43,766	100%	\$61,736,053	2%	\$60,551,329	98%
Other Duals	769	0%	670	87%	\$3,049,254	0%	\$2,718,397	89%
Disabled Non-Duals	130,241	10%	128,391	99%	\$809,890,719	25%	\$775,980,020	96%
All Other Non-Duals	923,135	74%	915,495	99%	\$1,136,326,649	35%	\$1,093,093,509	96%
Eligibility Group								
Aged	111,375	9%	111,115	100%	\$827,517,808	26%	\$818,225,883	99%
Disabled	219,533	18%	216,962	99%	\$1,292,661,492	40%	\$1,251,443,525	97%
Adults	207,780	17%	206,476	99%	\$430,216,536	13%	\$417,413,294	97%
Children	709,892	57%	703,825	99%	\$673,414,997	21%	\$644,982,455	96%

Notes: Months are defined as fee-for-service (FFS) if they are months when an individual is enrolled in Medicaid but not in a Medicaid capitated comprehensive managed care or behavioral managed care plan. For subsequent tables, only FFS months are included.

Beneficiaries are all individuals enrolled in Medicaid, including children in Medicaid-SCHIP, for at least one month in the calendar year.

Expenditures are claims-based Medicaid payments, including both federal and state share.

Expenditures for FFS months are defined as expenditures for services during FFS months minus expenditures for capitation premium payments.

Eligibility Groups are mutually exclusive. All individuals age 65 or over are in the Aged group; all remaining individuals who are in Medicaid due to disability are in the Disabled group; remaining individuals are classified as Adults or Children according to whether they are classified as Adults or Children in state enrollment files.

TABLE 2
MEDICAID FFS MENTAL HEALTH BENEFICIARIES AND EXPENDITURES
COMPARED TO TOTAL FFS BENEFICIARIES AND EXPENDITURES
GEORGIA, CALENDAR YEAR 1999

	Total Number of Beneficiaries in FFS Population	FFS Mental Health Population		Total Expenditures for FFS Population	FFS Expenditures for Mental Health Population	
		Number of Beneficiaries	Percent of Total FFS Beneficiaries		Total Amount	Percent of Total FFS Expenditures
All	1,238,378	93,289	8%	\$3,132,065,157	\$441,171,332	14%
Age						
0-3	263,074	2,040	1%	\$405,872,654	\$7,677,538	2%
4-5	85,071	4,133	5%	\$64,432,538	\$8,629,603	13%
6-12	247,397	30,450	12%	\$189,245,549	\$72,600,696	38%
13-18	147,931	16,609	11%	\$180,504,263	\$58,455,664	32%
19-21	56,151	2,713	5%	\$124,742,519	\$14,398,406	12%
22-44	211,861	22,048	10%	\$672,670,149	\$143,061,256	21%
45-64	89,650	12,853	14%	\$544,383,251	\$112,463,945	21%
65 and Older	137,227	2,443	2%	\$950,214,234	\$23,884,224	3%
Gender						
Female	755,478	48,912	6%	\$2,046,540,581	\$257,314,447	13%
Male	482,895	44,377	9%	\$1,085,524,576	\$183,856,885	17%
Race						
White	436,269	43,070	10%	\$1,497,702,513	\$212,422,914	14%
Black	644,023	42,376	7%	\$1,247,280,004	\$178,552,732	14%
Hispanic	49,257	753	2%	\$58,786,643	\$2,204,186	4%
American Indian/Alaskan Native	575	23	4%	\$786,063	\$149,304	19%
Asian/Pacific Islander	9,690	164	2%	\$11,416,412	\$584,267	5%
Other/Unknown	98,564	6,903	7%	\$316,093,522	\$47,257,929	15%
Dual Status						
Aged Duals with Full Medicaid	102,283	1,995	2%	\$879,029,429	\$18,675,199	2%
Disabled Duals with Full Medicaid	47,773	6,679	14%	\$320,692,473	\$47,675,803	15%
Duals with Limited Medicaid	43,766	458	1%	\$60,551,329	\$1,883,740	3%
Other Duals	670	134	20%	\$2,718,397	\$737,426	27%
Disabled Non-Duals	128,391	29,565	23%	\$775,980,020	\$231,648,016	30%
All Other Non-Duals	915,495	54,458	6%	\$1,093,093,509	\$140,551,148	13%
Eligibility Group						
Aged	111,115	1,105	1%	\$818,225,883	\$11,921,043	1%
Disabled	216,962	37,783	17%	\$1,251,443,525	\$290,593,917	23%
Adults	206,476	10,757	5%	\$417,413,294	\$42,744,681	10%
Children	703,825	43,644	6%	\$644,982,455	\$95,911,691	15%

Note: The FFS mental health population includes all FFS beneficiaries who had one or more of the mental health diagnoses shown in Table 3 as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

Expenditures are claims-based Medicaid payments, including both federal and state share.

Expenditures for FFS months are defined as expenditures for services during FFS months minus expenditures for capitation premium payments.

Eligibility Groups are mutually exclusive. All individuals age 65 or over are in the Aged group; all remaining individuals who are in Medicaid due to disability are in the Disabled group; remaining individuals are classified as Adults or Children according to whether they are classified as Adults or Children in state enrollment files.

**TABLE 3
MEDICAID FFS MENTAL HEALTH POPULATION
BY DIAGNOSTIC CATEGORY AND AGE GROUP
GEORGIA, CALENDAR YEAR 1999**

Diagnostic Category	FFS Mental Health Population							
	All Ages		21 and Under		22-64		65 and Older	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Schizophrenia	9,658	10%	433	1%	8,522	24%	703	29%
Major depression and affective psychoses	13,157	14%	2,837	5%	9,804	28%	516	21%
Other psychoses	2,622	3%	446	1%	1,827	5%	349	14%
Childhood psychoses	1,299	1%	1,193	2%	105	0%	1	0%
Neurotic & other depressive disorders	15,826	17%	5,428	10%	9,813	28%	585	24%
Personality disorders	367	0%	99	0%	255	1%	13	1%
Other mental disorders	954	1%	370	1%	491	1%	93	4%
Special symptoms or syndromes	3,879	4%	2,340	4%	1,473	4%	66	3%
Stress & adjustment reactions	12,678	14%	10,558	19%	2,037	6%	83	3%
Conduct disorders	3,863	4%	3,430	6%	402	1%	31	1%
Emotional disturbances	5,013	5%	4,990	9%	22	0%	1	0%
Hyperkinetic syndrome	23,973	26%	23,821	43%	150	0%	2	0%
No Diagnosis								
Total	93,289	100%	55,945	100%	34,901	100%	2,443	100%

Notes: The FFS mental health population includes all FFS beneficiaries who had one or more of the mental health diagnoses shown in this table as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

The diagnostic category for each user is the one that occurred most frequently among primary diagnoses on claims during the year.

Schizophrenia (ICD-9 CM diagnosis codes beginning with 295) includes both chronic and acute schizophrenic disorders.

Major depression and affective psychoses (ICD-9 CM diagnosis codes beginning with 296) includes manic, depressive, and bipolar disorders.

Other psychoses (ICD-9 CM diagnosis codes beginning with 297 or 298) includes paranoid states, delusional disorders, depressive psychosis, and reactive psychoses.

Childhood psychoses (ICD-9 CM diagnosis codes beginning with 299) includes infantile autism, disintegrative disorders, and childhood type schizophrenia.

Neurotic & other depressive disorders (ICD-9 CM diagnosis codes beginning with 300 or 311) includes anxiety states; phobic, obsessive compulsive, and other neurotic disorders; and unspecified depressive disorders.

Personality disorders (ICD-9 CM diagnosis codes beginning with 301) includes affective, schizoid, explosive, histrionic, antisocial, dependent, and other personality disorders.

Other mental disorders (ICD-9 CM diagnosis codes beginning with 302, 306, or 310) includes sexual deviations, physiological malfunction arising from mental factors, and nonpsychotic mental disorders due to organic brain damage.

Special symptoms or syndromes (ICD-9 CM diagnosis codes beginning with 307) includes eating disorders, tics and repetitive movement disorders, sleep disorders, and enuresis.

Stress & adjustment reactions (ICD-9 CM diagnosis codes beginning with 308 or 309) includes acute reaction to stress; depressive reaction, and separation disorders, and conduct disturbance.

Conduct disorders (ICD-9 CM diagnosis codes beginning with 312) includes aggressive outbursts, truancy, delinquency, kleptomania, impulse control disorder, and other conduct disorders.

Emotional disturbances (ICD-9 CM diagnosis codes beginning with 313) includes overanxious disorder, shyness, relationship problems and other mixed emotional disturbances of childhood or adolescence such as oppositional disorder.

Hyperkinetic syndrome (ICD-9 CM diagnosis codes beginning with 314) includes attention deficit with and without hyperactivity and hyperkinesis with or without developmental delay.

**TABLE 4
PSYCHIATRIC AND GENERAL INPATIENT HOSPITAL USE AND AVERAGE ANNUAL HOSPITAL DAYS PER USER
FOR MEDICAID FFS MENTAL HEALTH POPULATION, BY SEX AND AGE GROUP
GEORGIA, CALENDAR YEAR 1999**

Sex	Age Group	Psychiatric Hospital		General Inpatient Hospital		Total Inpatient Hospital			General Inpatient Hospital Use by FFS MH Population for Non-Mental Health Diagnoses		
		Number of Users	Average Annual Days Per User	Mental Health Treatment		Mental Health Treatment			Number of Users	Percent of Total FFS Mental Health Beneficiaries	Average Annual Days Per User
				Number of Users	Average Annual Days Per User	Number of Users	Percent of Total FFS Mental Health Beneficiaries	Average Annual Days Per User			
Female	0-3	0	0	5	3	5	1%	3	131	15%	7
	4-5	0	0	5	10	5	0%	10	41	3%	5
	6-12	0	0	89	9	89	1%	9	185	2%	7
	13-18	0	0	401	7	401	5%	7	629	9%	5
	19-21	0	0	93	7	93	5%	7	652	34%	4
	22-44	0	0	1,222	8	1,222	8%	8	2,785	18%	6
	45-64	0	0	714	8	714	8%	8	1,739	18%	8
	65+	0	0	197	2	197	10%	2	497	26%	3
All Ages	0	0	2,726	7	2,726	6%	7	6,659	14%	6	
Male	0-3	0	0	4	4	4	0%	4	162	14%	8
	4-5	0	0	17	6	17	1%	6	66	2%	5
	6-12	0	0	203	11	203	1%	11	322	2%	6
	13-18	0	0	318	8	318	3%	8	211	2%	8
	19-21	0	0	74	8	74	9%	8	37	5%	11
	22-44	0	0	660	7	660	11%	7	646	10%	9
	45-64	0	0	235	8	235	7%	8	697	21%	9
	65+	0	0	48	3	48	10%	3	124	25%	6
All Ages	0	0	1,559	8	1,559	4%	8	2,265	5%	8	
Total	0-3	0	0	9	3	9	0%	3	293	14%	8
	4-5	0	0	22	7	22	1%	7	107	3%	5
	6-12	0	0	292	10	292	1%	10	507	2%	6
	13-18	0	0	719	7	719	4%	7	840	5%	6
	19-21	0	0	167	8	167	6%	8	689	25%	5
	22-44	0	0	1,882	7	1,882	9%	7	3,431	16%	6
	45-64	0	0	949	8	949	7%	8	2,436	19%	8
	65+	0	0	245	3	245	10%	3	621	25%	4
All Ages	0	0	4,285	7	4,285	5%	7	8,924	10%	7	

Notes: All beneficiaries in this table had a mental health diagnosis as the primary diagnosis on a FFS Medicaid claim during 1999, or received a clearly identifiable mental health service (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

Those who received inpatient hospital services for which the primary diagnosis on the hospital claim was a mental health diagnosis are shown in the "General Inpatient Hospital – Mental Health Treatment" column. Those who received inpatient hospital services for which the primary diagnosis on the claim was not a mental health diagnosis are shown in the "General Inpatient Hospital Use by FFS MH Population for Non-Mental Health Diagnoses" column.

When a dually eligible beneficiary's inpatient stay is primarily covered by Medicare, Medicaid often pays a deductible. Some states interpret their payment of the deductible as Medicaid coverage for one day of the stay. Other states interpret "Medicaid covered days" as including only days covered in full by Medicaid, and thus report zero covered days on a crossover stay. Another group of states reports the number of days covered by Medicare as covered days. Finally, many states do not retain any details about lengths of stay on crossover claims. For any one or combination of these reasons, average lengths of stay for beneficiaries who are dually eligible (most aged and some adults) are inaccurately reduced because of the presence of individual claims with "1" or "0" covered days. In some circumstances this even causes inpatient hospital stays to average "0" days in length, and it explains more generally the low numbers that appear for some groups on Table 4.

Individuals may appear in more than one column on this table.

**TABLE 5
EMERGENCY ROOM USE FOR MEDICAID FFS MENTAL HEALTH AND NON-MENTAL
HEALTH BENEFICIARIES, BY SEX AND AGE GROUP
GEORGIA, CALENDAR YEAR 1999**

Sex	Age Group	Mental Health Beneficiaries With Any Emergency Room Use					Non- Mental Health Beneficiaries With Any Emergency Room Use		
		Number	Percent of Total FFS Mental Health Beneficiaries	Average Number of Emergency Room Visits for Users of Any ER Visits			Number	Percent of Total FFS Non-Mental Health Beneficiaries	Number of Emergency Room Visits for Users of Any ER Visits
				For Mental Health Treatment	For Non-Mental Health Treatment	All ER Visits			
Female	0-3	442	51%	0.10	2.26	2.35	42,862	33%	2.08
	4-5	538	37%	0.05	1.80	1.85	9,645	24%	1.62
	6-12	2,912	29%	0.13	1.66	1.79	20,114	18%	1.48
	13-18	3,122	42%	0.33	1.95	2.28	16,622	23%	1.70
	19-21	1,162	61%	0.47	2.70	3.17	13,976	31%	1.96
	22-44	8,466	53%	0.63	3.14	3.78	42,249	27%	2.03
	45-64	4,135	44%	0.62	3.11	3.73	10,419	22%	2.51
	65+	231	12%	0.55	3.16	3.71	1,277	1%	2.08
	All Ages	21,008	43%	0.48	2.68	3.16	157,164	22%	1.94
Male	0-3	629	54%	0.08	2.20	2.28	47,772	36%	2.17
	4-5	1,066	40%	0.05	1.83	1.88	10,595	26%	1.65
	6-12	6,100	30%	0.13	1.55	1.68	20,403	19%	1.50
	13-18	3,148	34%	0.27	1.58	1.85	11,401	19%	1.48
	19-21	345	42%	0.72	1.80	2.52	1,449	17%	1.85
	22-44	2,196	35%	1.14	2.85	3.99	5,563	18%	2.51
	45-64	1,263	37%	0.90	3.86	4.76	5,396	18%	2.59
	65+	76	15%	0.37	3.32	3.68	540	2%	2.20
	All Ages	14,823	33%	0.38	2.01	2.39	103,119	24%	1.95
Total	0-3	1,071	53%	0.09	2.23	2.31	90,634	35%	2.13
	4-5	1,604	39%	0.05	1.82	1.87	20,240	25%	1.64
	6-12	9,012	30%	0.13	1.59	1.72	40,517	19%	1.49
	13-18	6,270	38%	0.30	1.77	2.07	28,023	21%	1.61
	19-21	1,507	56%	0.53	2.50	3.02	15,425	29%	1.95
	22-44	10,662	48%	0.74	3.08	3.82	47,812	25%	2.09
	45-64	5,398	42%	0.68	3.29	3.97	15,815	21%	2.54
	65+	307	13%	0.50	3.20	3.71	1,817	1%	2.12
	All Ages	35,831	38%	0.44	2.40	2.84	260,283	23%	1.94

Notes: An emergency room visit is classified as "for mental health treatment" if one of the mental health diagnoses in Table 3 is shown as the primary diagnosis on the emergency room claim. If any other diagnosis is shown as the primary diagnosis on the claim, the emergency room visit is classified as being for non-mental health treatment. Visits are defined by unique dates of service.

FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in Table 3 as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

TABLE 6
PRESCRIPTION PSYCHOTROPIC DRUG USE FOR MEDICAID FFS MENTAL HEALTH
AND NON-MENTAL HEALTH BENEFICIARIES, BY AGE GROUP
GEORGIA, CALENDAR YEAR 1999

Age Group	Total FFS Beneficiaries with Any Psychotropic Drug Use		FFS Mental Health Beneficiaries with Any Psychotropic Drug Use		FFS Non-Mental Health Beneficiaries with Any Psychotropic Drug Use	
	Number	Percent of Total FFS Beneficiaries	Number	Percent of Total FFS MH Beneficiaries	Number	Percent of Total FFS Non-MH Beneficiaries
0-3	13,292	5%	431	21%	12,861	5%
4-5	6,261	7%	1,753	42%	4,508	6%
6-12	31,646	13%	19,966	66%	11,680	5%
13-18	15,083	10%	9,115	55%	5,968	5%
19-21	4,791	9%	1,705	63%	3,086	6%
22-44	47,096	22%	18,526	84%	28,570	15%
45-64	40,520	45%	11,744	91%	28,776	37%
65+	52,446	38%	2,154	88%	50,292	37%
All Ages	211,135	17%	65,394	70%	145,741	13%

Notes: FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in Table 3 as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during 1999 (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

Psychotropic drugs are defined as drugs in any of the categories shown on Table 7, as grouped by Multum prescription drug grouping software.

Non-mental health beneficiaries who are dual eligibles may have received mental health treatment under Medicare that is not seen in Medicaid coinsurance claims.

TABLE 7
PERCENT OF MEDICAID FFS MENTAL HEALTH BENEFICIARIES AGE 21 AND UNDER WHO
USED PRESCRIPTION PSYCHOTROPIC DRUGS,
BY DIAGNOSTIC CATEGORY AND DRUG TYPE
GEORGIA, CALENDAR YEAR 1999

Diagnostic Category	Number of FFS MH Beneficiaries by Diagnostic Category	Type of Psychotropic Drug						No Psychotropic Drug Use
		Antidepressants	Antipsychotics	Anti-Anxiety Agents	Mood Stabilizing Agents	Stimulants	More than One Psychotropic Drug Type	
Schizophrenia	433	44%	79%	26%	8%	6%	56%	8%
Major depression and affective psychoses	2,837	60%	24%	17%	5%	18%	37%	20%
Other psychoses	446	35%	68%	19%	3%	14%	44%	14%
Childhood psychoses	1,193	23%	31%	20%	1%	22%	28%	27%
Neurotic & other depressive disorders	5,428	37%	8%	15%	1%	14%	20%	36%
Personality disorders	99	24%	17%	10%	2%	11%	21%	47%
Other mental disorders	370	9%	5%	10%	0%	3%	5%	67%
Special symptoms or syndromes	2,340	10%	4%	12%	0%	5%	5%	63%
Stress & adjustment reactions	10,558	16%	4%	8%	0%	16%	10%	46%
Conduct disorders	3,430	19%	13%	9%	1%	21%	17%	38%
Emotional disturbances	4,990	18%	9%	7%	1%	20%	14%	41%
Hyperkinetic syndrome	23,821	18%	9%	9%	0%	77%	25%	12%
No Diagnosis	0	0%	0%	0%	0%	0%	0%	0%
Total	55,945	22%	10%	10%	1%	42%	20%	41%

Notes: The percentages shown do not add to 100 percent because service users with a specific diagnosis may use more than one type of drug. Psychotropic drugs are defined and grouped according to Multum prescription drug grouping software.

The diagnostic category for each user was the beneficiary's most frequent diagnosis category in the year.

FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in this table as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

TABLE 8
PERCENT OF MEDICAID FFS MENTAL HEALTH BENEFICIARIES AGE 22 TO 64 WHO
USED PRESCRIPTION PSYCHOTROPIC DRUGS,
BY DIAGNOSTIC CATEGORY AND DRUG TYPE
GEORGIA, CALENDAR YEAR 1999

Diagnostic Category	Number of FFS MH Beneficiaries by Diagnostic Category	Type of Psychotropic Drug					More than One Psychotropic Drug Type	No Psychotropic Drug Use
		Antidepressants	Antipsychotics	Anti-Anxiety Agents	Mood Stabilizing Agents	Stimulants		
Schizophrenia	8,522	45%	90%	36%	8%	0%	62%	3%
Major depression and affective psychoses	9,804	80%	42%	51%	9%	1%	66%	7%
Other psychoses	1,827	45%	79%	35%	4%	1%	55%	7%
Childhood psychoses	105	42%	74%	44%	6%	2%	53%	5%
Neurotic & other depressive disorders	9,813	69%	17%	55%	1%	1%	48%	12%
Personality disorders	255	58%	54%	47%	6%	1%	55%	11%
Other mental disorders	491	39%	26%	36%	1%	1%	31%	34%
Special symptoms or syndromes	1,473	38%	7%	32%	0%	0%	21%	43%
Stress & adjustment reactions	2,037	63%	22%	42%	2%	1%	43%	19%
Conduct disorders	402	46%	57%	43%	5%	2%	52%	14%
Emotional disturbances	22	64%	36%	36%	5%	0%	50%	14%
Hyperkinetic syndrome	150	46%	22%	35%	2%	47%	48%	12%
No Diagnosis	0	0%	0%	0%	0%	0%	0%	0%
Total	34,901	62%	46%	46%	5%	1%	55%	13%

Notes: The percentages shown do not add to 100 percent because service users with a specific diagnosis may use more than one type of drug. Psychotropic drugs are defined and grouped according to Multum prescription drug grouping software.

The diagnostic category for each user was the beneficiary's most frequent diagnosis category in the year.

FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in this table as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

TABLE 9
PERCENT OF MEDICAID FFS MENTAL HEALTH BENEFICIARIES AGE 65 AND OLDER WHO
USED PRESCRIPTION PSYCHOTROPIC DRUGS,
BY DIAGNOSTIC CATEGORY AND DRUG TYPE
GEORGIA, CALENDAR YEAR 1999

Diagnostic Category	Number of FFS MH Beneficiaries by Diagnostic Category	Type of Psychotropic Drug						No Psychotropic Drug Use
		Antidepressants	Antipsychotics	Anti-Anxiety Agents	Mood Stabilizing Agents	Stimulants	More than One Psychotropic Drug Type	
Schizophrenia	703	39%	92%	39%	3%	0%	59%	3%
Major depression and affective psychoses	516	75%	50%	53%	8%	0%	68%	3%
Other psychoses	349	41%	60%	42%	1%	1%	46%	15%
Childhood psychoses	1	100%	100%	0%	0%	0%	100%	0%
Neurotic & other depressive disorders	585	69%	27%	55%	1%	1%	53%	9%
Personality disorders	13	54%	85%	46%	8%	0%	62%	0%
Other mental disorders	93	35%	32%	35%	0%	0%	31%	25%
Special symptoms or syndromes	66	29%	26%	33%	2%	0%	21%	35%
Stress & adjustment reactions	83	59%	35%	43%	0%	0%	46%	18%
Conduct disorders	31	35%	48%	45%	0%	0%	39%	23%
Emotional disturbances	1	0%	0%	0%	0%	0%	0%	100%
Hyperkinetic syndrome	2	0%	0%	0%	0%	0%	0%	100%
No Diagnosis	0	0%	0%	0%	0%	0%	0%	0%
Total	2,443	54%	56%	46%	3%	0%	55%	12%

Notes: The percentages shown do not add to 100 percent because service users with a specific diagnosis may use more than one type of drug. Psychotropic drugs are defined and grouped according to Multum prescription drug grouping software.

The diagnostic category for each user was the beneficiary's most frequent diagnosis category in the year.

FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in this table as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during the year (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).