



**TABLE 1  
 MEDICAID BENEFICIARIES AND EXPENDITURES  
 TOTAL AND FEE-FOR-SERVICE (FFS)  
 MONTANA, 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
<b>All</b>	96,453	100%	95,042	99%	\$383,490,390	100%	\$359,242,897	94%
<b>Age</b>								
0-3	15,136	16%	15,114	100%	\$29,053,237	8%	\$28,654,465	99%
4-5	6,054	6%	6,028	100%	\$5,370,976	1%	\$5,131,858	96%
6-12	18,110	19%	18,025	100%	\$24,632,728	6%	\$20,735,435	84%
13-18	11,069	11%	11,018	100%	\$30,215,163	8%	\$24,218,428	80%
19-21	3,766	4%	3,754	100%	\$11,046,309	3%	\$9,852,485	89%
22-44	22,820	24%	21,744	95%	\$81,601,526	21%	\$73,710,144	90%
45-64	8,826	9%	8,688	98%	\$70,616,978	18%	\$68,014,209	96%
65 and older	10,668	11%	10,667	100%	\$130,950,068	34%	\$128,922,493	98%
<b>Gender</b>								
Female	55,746	58%	54,703	98%	\$236,482,992	62%	\$222,355,083	94%
Male	40,707	42%	40,339	99%	\$147,007,398	38%	\$136,887,814	93%
<b>Race</b>								
White	71,738	74%	70,677	99%	\$313,680,760	82%	\$295,239,527	94%
Black	631	1%	614	97%	\$1,699,863	0%	\$1,515,809	89%
Hispanic	1,311	1%	1,267	97%	\$3,045,455	1%	\$2,635,294	87%
American Indian/Alaskan Native	21,769	23%	21,517	99%	\$62,930,662	16%	\$57,976,804	92%
Asian/Pacific Islander	407	0%	402	99%	\$1,020,724	0%	\$940,928	92%
Other/Unknown	597	1%	565	95%	\$1,112,926	0%	\$934,535	84%
<b>Dual Status</b>								
Aged Duals with Full Medicaid	9,928	10%	9,927	100%	\$128,475,918	34%	\$126,490,391	98%
Disabled Duals with Full Medicaid	5,907	6%	5,906	100%	\$49,006,675	13%	\$47,099,474	96%
Duals with Limited Medicaid	607	1%	607	100%	\$56,628	0%	\$56,628	100%
Other Duals	567	1%	561	99%	\$3,528,033	1%	\$3,321,853	94%
Disabled Non-Duals	10,208	11%	10,120	99%	\$88,599,057	23%	\$82,422,351	93%
All Other Non-Duals	69,236	72%	67,921	98%	\$113,824,079	30%	\$99,852,200	88%
<b>Eligibility Group</b>								
Aged	9,751	10%	9,750	100%	\$124,456,939	32%	\$122,603,663	99%
Disabled	17,072	18%	16,983	99%	\$143,684,375	37%	\$135,440,013	94%
Adults	20,294	21%	19,155	94%	\$43,730,077	11%	\$37,584,272	86%
Children	49,335	51%	49,153	100%	\$71,618,836	19%	\$63,614,786	89%

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**  
**MONTANA, 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
<b>All</b>	95,042	14,292	15%	\$359,242,897	\$102,067,277	28%
<b>Age</b>						
0-3	15,114	197	1%	\$28,654,465	\$965,285	3%
4-5	6,028	476	8%	\$5,131,858	\$944,341	18%
6-12	18,025	3,079	17%	\$20,735,435	\$10,904,685	53%
13-18	11,018	2,607	24%	\$24,218,428	\$14,361,305	59%
19-21	3,754	469	12%	\$9,852,485	\$2,238,433	23%
22-44	21,744	4,452	20%	\$73,710,144	\$29,904,812	41%
45-64	8,688	1,994	23%	\$68,014,209	\$22,139,831	33%
65 and Older	10,667	1,018	10%	\$128,922,493	\$20,608,585	16%
<b>Gender</b>						
Female	54,703	8,014	15%	\$222,355,083	\$56,946,551	26%
Male	40,339	6,278	16%	\$136,887,814	\$45,120,726	33%
<b>Race</b>						
White	70,677	11,527	16%	\$295,239,527	\$84,535,923	29%
Black	614	80	13%	\$1,515,809	\$412,945	27%
Hispanic	1,267	167	13%	\$2,635,294	\$923,628	35%
American Indian/Alaskan Native	21,517	2,430	11%	\$57,976,804	\$15,731,533	27%
Asian/Pacific Islander	402	31	8%	\$940,928	\$159,083	17%
Other/Unknown	565	57	10%	\$934,535	\$304,165	33%
<b>Dual Status</b>						
Aged Duals with Full Medicaid	9,927	1,000	10%	\$126,490,391	\$20,171,722	16%
Disabled Duals with Full Medicaid	5,906	1,800	30%	\$47,099,474	\$18,694,598	40%
Duals with Limited Medicaid	607	1	0%	\$56,628	\$66	0%
Other Duals	561	175	31%	\$3,321,853	\$1,494,686	45%
Disabled Non-Duals	10,120	2,991	30%	\$82,422,351	\$31,073,399	38%
All Other Non-Duals	67,921	8,325	12%	\$99,852,200	\$30,632,806	31%
<b>Eligibility Group</b>						
Aged	9,750	919	9%	\$122,603,663	\$18,983,416	15%
Disabled	16,983	4,880	29%	\$135,440,013	\$51,341,524	38%
Adults	19,155	2,694	14%	\$37,584,272	\$10,172,315	27%
Children	49,153	5,799	12%	\$63,614,786	\$21,570,022	34%

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  
MONTANA, 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	1,122	8%	37	1%	924	14%	161	16%
Major depression and affective psychoses	3,065	21%	722	11%	2,166	34%	177	17%
Other psychoses	366	3%	27	0%	155	2%	184	18%
Childhood psychoses	161	1%	123	2%	36	1%	2	0%
Neurotic & other depressive disorders	2,916	20%	960	14%	1,691	26%	265	26%
Personality disorders	287	2%	35	1%	236	4%	16	2%
Other mental disorders	254	2%	28	0%	159	2%	67	7%
Special symptoms or syndromes	305	2%	116	2%	168	3%	21	2%
Stress & adjustment reactions	2,647	19%	1,845	27%	755	12%	47	5%
Conduct disorders	376	3%	287	4%	79	1%	10	1%
Emotional disturbances	845	6%	842	12%	3	0%	0	0%
Hyperkinetic syndrome	1,881	13%	1,806	26%	74	1%	1	0%
No Diagnosis	67	0%	0	0%	0	0%	67	7%
<b>Total</b>	<b>14,292</b>	<b>100%</b>	<b>6,828</b>	<b>100%</b>	<b>6,446</b>	<b>100%</b>	<b>1,018</b>	<b>100%</b>

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  
MONTANA, 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	0	0	0	0%	0	9	11%	25
	4-5	2	18	1	5	2	1%	20	9	5%	3
	6-12	16	106	20	7	26	2%	71	14	1%	4
	13-18	42	72	75	11	94	8%	41	97	8%	5
	19-21	0	0	5	2	5	2%	2	99	30%	4
	22-44	0	0	134	5	134	4%	5	554	18%	5
	45-64	0	0	59	7	59	4%	7	248	19%	5
	65+	65	172	14	4	79	11%	142	154	21%	1
All Ages	125	127	308	7	399	5%	45	1,184	15%	4	
Male	0-3	0	0	0	0	0	0%	0	6	5%	5
	4-5	0	0	1	2	1	0%	2	4	1%	1
	6-12	54	78	45	10	80	4%	58	27	1%	3
	13-18	61	89	63	12	100	7%	62	44	3%	4
	19-21	0	0	6	4	6	4%	4	6	4%	25
	22-44	0	0	90	5	90	7%	5	147	11%	5
	45-64	0	0	26	4	26	4%	4	126	19%	8
	65+	62	172	4	1	66	22%	161	63	21%	0
All Ages	177	114	235	7	369	6%	60	423	7%	5	
Total	0-3	0	0	0	0	0	0%	0	15	8%	17
	4-5	2	18	2	4	3	1%	14	13	3%	3
	6-12	70	84	65	9	106	3%	61	41	1%	3
	13-18	103	82	138	12	194	7%	52	141	5%	5
	19-21	0	0	11	3	11	2%	3	105	22%	5
	22-44	0	0	224	5	224	5%	5	701	16%	5
	45-64	0	0	85	6	85	4%	6	374	19%	6
	65+	127	172	18	3	145	14%	151	217	21%	1
All Ages	302	120	543	7	768	5%	52	1,607	11%	5	

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  
MONTANA, 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	36	42%	0.03	2.36	2.39	2,257	32%	1.85
	4-5	63	33%	0.02	1.46	1.48	609	22%	1.58
	6-12	292	25%	0.13	1.35	1.48	1,239	16%	1.45
	13-18	448	39%	0.23	1.82	2.05	928	21%	1.65
	19-21	190	58%	0.18	2.91	3.09	893	34%	2.03
	22-44	1,481	48%	0.24	3.16	3.41	3,168	27%	2.06
	45-64	573	44%	0.21	2.78	2.99	1,107	30%	2.37
	65+	236	33%	0.13	2.14	2.26	1,414	20%	1.82
	All Ages	3,319	41%	0.21	2.63	2.83	11,616	25%	1.90
Male	0-3	53	47%	0.02	2.57	2.58	2,704	35%	1.94
	4-5	91	32%	0.04	1.40	1.44	665	24%	1.46
	6-12	511	26%	0.09	1.30	1.40	1,269	17%	1.46
	13-18	438	30%	0.17	1.51	1.68	710	18%	1.53
	19-21	52	37%	0.21	2.40	2.62	137	20%	1.64
	22-44	572	42%	0.31	2.83	3.14	1,350	24%	2.28
	45-64	269	40%	0.19	3.35	3.54	882	29%	2.35
	65+	100	34%	0.09	1.89	1.98	611	22%	1.91
	All Ages	2,086	33%	0.18	2.12	2.30	8,328	24%	1.88
Total	0-3	89	45%	0.02	2.48	2.51	4,961	33%	1.90
	4-5	154	32%	0.03	1.42	1.45	1,274	23%	1.52
	6-12	803	26%	0.11	1.32	1.43	2,508	17%	1.45
	13-18	886	34%	0.20	1.67	1.86	1,638	19%	1.60
	19-21	242	52%	0.19	2.80	2.99	1,030	31%	1.98
	22-44	2,053	46%	0.26	3.07	3.33	4,518	26%	2.13
	45-64	842	42%	0.20	2.96	3.16	1,989	30%	2.36
	65+	336	33%	0.12	2.06	2.18	2,025	21%	1.85
	All Ages	5,405	38%	0.20	2.43	2.63	19,944	25%	1.89

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**  
**MONTANA, 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	276	2%	31	16%	245	2%
4-5	267	4%	125	26%	142	3%
6-12	2,137	12%	1,538	50%	599	4%
13-18	1,929	18%	1,369	53%	560	7%
19-21	635	17%	272	58%	363	11%
22-44	6,243	29%	3,076	69%	3,167	18%
45-64	4,197	48%	1,620	81%	2,577	39%
65+	5,048	47%	831	82%	4,217	44%
All Ages	20,732	22%	8,862	62%	11,870	15%

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**  
**MONTANA, 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	37	35%	51%	11%	0%	5%	35%	8%
Major depression and affective psychoses	722	50%	15%	12%	6%	12%	26%	24%
Other psychoses	27	37%	63%	30%	7%	15%	48%	11%
Childhood psychoses	123	35%	30%	20%	2%	21%	31%	24%
Neurotic & other depressive disorders	960	35%	7%	8%	1%	11%	14%	32%
Personality disorders	35	20%	11%	11%	6%	17%	26%	40%
Other mental disorders	28	29%	7%	18%	0%	0%	14%	25%
Special symptoms or syndromes	116	18%	8%	16%	2%	4%	12%	53%
Stress & adjustment reactions	1,845	18%	5%	6%	1%	12%	11%	47%
Conduct disorders	287	26%	10%	7%	1%	15%	17%	33%
Emotional disturbances	842	22%	6%	6%	1%	19%	14%	37%
Hyperkinetic syndrome	1,806	27%	7%	6%	1%	70%	26%	10%
No Diagnosis	0	0%	0%	0%	0%	0%	0%	0%
<b>Total</b>	<b>6,828</b>	<b>28%</b>	<b>8%</b>	<b>8%</b>	<b>2%</b>	<b>28%</b>	<b>18%</b>	<b>51%</b>

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**  
**MONTANA, 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	924	45%	85%	39%	10%	0%	61%	4%
Major depression and affective psychoses	2,166	69%	29%	44%	12%	4%	51%	13%
Other psychoses	155	47%	65%	43%	3%	2%	54%	11%
Childhood psychoses	36	36%	61%	28%	0%	0%	42%	17%
Neurotic & other depressive disorders	1,691	57%	11%	36%	1%	2%	34%	16%
Personality disorders	236	46%	25%	33%	5%	2%	33%	30%
Other mental disorders	159	48%	28%	36%	1%	3%	38%	28%
Special symptoms or syndromes	168	49%	7%	37%	1%	3%	32%	24%
Stress & adjustment reactions	755	43%	11%	26%	1%	3%	25%	32%
Conduct disorders	79	46%	39%	29%	6%	1%	38%	28%
Emotional disturbances	3	33%	0%	33%	0%	0%	33%	67%
Hyperkinetic syndrome	74	39%	7%	26%	1%	50%	35%	12%
No Diagnosis	0	0%	0%	0%	0%	0%	0%	0%
<b>Total</b>	<b>6,446</b>	<b>56%</b>	<b>30%</b>	<b>38%</b>	<b>6%</b>	<b>3%</b>	<b>43%</b>	<b>27%</b>

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**  
**MONTANA, 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	161	22%	83%	47%	8%	0%	53%	7%
Major depression and affective psychoses	177	73%	44%	55%	13%	1%	66%	6%
Other psychoses	184	33%	27%	32%	1%	0%	29%	40%
Childhood psychoses	2	0%	50%	50%	0%	0%	50%	50%
Neurotic & other depressive disorders	265	78%	28%	51%	0%	3%	53%	5%
Personality disorders	16	69%	25%	56%	0%	6%	56%	19%
Other mental disorders	67	37%	36%	43%	0%	0%	36%	31%
Special symptoms or syndromes	21	52%	43%	57%	0%	0%	52%	14%
Stress & adjustment reactions	47	60%	19%	49%	0%	0%	45%	17%
Conduct disorders	10	70%	50%	50%	10%	0%	70%	10%
Emotional disturbances	0	0%	0%	0%	0%	0%	0%	0%
Hyperkinetic syndrome	1	0%	100%	0%	0%	0%	0%	0%
No Diagnosis	67	54%	85%	75%	3%	0%	79%	1%
<b>Total</b>	<b>1,018</b>	<b>54%</b>	<b>44%</b>	<b>49%</b>	<b>4%</b>	<b>1%</b>	<b>51%</b>	<b>18%</b>

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+).