

**TABLE 1
MEDICAID BENEFICIARIES AND EXPENDITURES
TOTAL AND FEE-FOR-SERVICE (FFS)
OREGON, 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	543,964	100%	242,381	45%	\$1,668,193,402	100%	\$311,439,318	19%
Age								
0-3	75,308	14%	30,133	40%	\$135,087,866	8%	\$10,125,850	8%
4-5	29,167	5%	13,362	46%	\$34,489,613	2%	\$2,043,460	6%
6-12	81,339	15%	34,703	43%	\$133,896,828	8%	\$11,336,565	8%
13-18	52,998	10%	24,673	47%	\$115,103,757	7%	\$21,205,900	18%
19-21	27,064	5%	14,657	54%	\$57,285,624	3%	\$7,673,646	13%
22-44	166,662	31%	79,616	48%	\$453,284,150	27%	\$79,608,951	18%
45-64	69,433	13%	26,872	39%	\$336,981,882	20%	\$65,616,867	19%
65 and older	41,991	8%	18,365	44%	\$402,060,893	24%	\$113,828,079	28%
Gender								
Female	304,216	56%	134,993	44%	\$979,359,584	59%	\$170,702,222	17%
Male	239,740	44%	107,387	45%	\$688,821,627	41%	\$140,737,032	20%
Race								
White	429,108	79%	189,063	44%	\$1,398,740,284	84%	\$270,639,926	19%
Black	23,363	4%	8,764	38%	\$73,250,162	4%	\$7,711,014	11%
Hispanic	59,775	11%	30,195	51%	\$99,189,538	6%	\$16,728,979	17%
American Indian/Alaskan Native	11,114	2%	6,943	62%	\$31,492,736	2%	\$9,612,632	31%
Asian/Pacific Islander	15,019	3%	4,917	33%	\$42,131,764	3%	\$3,459,267	8%
Other/Unknown	5,585	1%	2,499	45%	\$23,388,918	1%	\$3,287,500	14%
Dual Status								
Aged Duals with Full Medicaid	36,278	7%	13,741	38%	\$383,737,612	23%	\$106,145,877	28%
Disabled Duals with Full Medicaid	21,989	4%	6,376	29%	\$221,669,024	13%	\$73,405,244	33%
Duals with Limited Medicaid	7,599	1%	7,571	100%	\$18,119,605	1%	\$14,552,177	80%
Other Duals	1,642	0%	610	37%	\$5,559,131	0%	\$520,793	9%
Disabled Non-Duals	32,748	6%	6,025	18%	\$304,386,936	18%	\$39,383,790	13%
All Other Non-Duals	443,708	82%	208,058	47%	\$734,721,094	44%	\$77,431,437	11%
Eligibility Group								
Aged	40,639	7%	17,610	43%	\$392,390,770	24%	\$110,124,754	28%
Disabled	59,189	11%	16,407	28%	\$546,406,071	33%	\$125,248,622	23%
Adults	211,262	39%	107,581	51%	\$371,465,206	22%	\$40,856,227	11%
Children	232,623	43%	100,532	43%	\$357,754,526	21%	\$35,041,892	10%

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
 OREGON, 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	242,381	26,882	11%	\$311,439,318	\$73,882,419	24%
Age						
0-3	30,133	301	1%	\$10,125,850	\$303,241	3%
4-5	13,362	692	5%	\$2,043,460	\$376,039	18%
6-12	34,703	3,856	11%	\$11,336,565	\$6,527,463	58%
13-18	24,673	3,553	14%	\$21,205,900	\$14,628,065	69%
19-21	14,657	1,350	9%	\$7,673,646	\$1,591,389	21%
22-44	79,616	11,688	15%	\$79,608,951	\$21,253,316	27%
45-64	26,872	4,408	16%	\$65,616,867	\$15,682,675	24%
65 and Older	18,365	1,034	6%	\$113,828,079	\$13,520,231	12%
Gender						
Female	134,993	15,312	11%	\$170,702,222	\$32,785,316	19%
Male	107,387	11,570	11%	\$140,737,032	\$41,097,103	29%
Race						
White	189,063	23,443	12%	\$270,639,926	\$66,122,403	24%
Black	8,764	861	10%	\$7,711,014	\$1,805,237	23%
Hispanic	30,195	1,049	3%	\$16,728,979	\$1,177,386	7%
American Indian/Alaskan Native	6,943	862	12%	\$9,612,632	\$3,071,222	32%
Asian/Pacific Islander	4,917	273	6%	\$3,459,267	\$617,533	18%
Other/Unknown	2,499	394	16%	\$3,287,500	\$1,088,638	33%
Dual Status						
Aged Duals with Full Medicaid	13,741	891	6%	\$106,145,877	\$13,025,020	12%
Disabled Duals with Full Medicaid	6,376	2,083	33%	\$73,405,244	\$19,176,015	26%
Duals with Limited Medicaid	7,571	997	13%	\$14,552,177	\$4,585,097	32%
Other Duals	610	176	29%	\$520,793	\$259,891	50%
Disabled Non-Duals	6,025	1,610	27%	\$39,383,790	\$10,131,446	26%
All Other Non-Duals	208,058	21,125	10%	\$77,431,437	\$26,704,950	34%
Eligibility Group						
Aged	17,610	998	6%	\$110,124,754	\$13,264,749	12%
Disabled	16,407	4,594	28%	\$125,248,622	\$33,802,281	27%
Adults	107,581	13,433	12%	\$40,856,227	\$7,767,528	19%
Children	100,532	7,857	8%	\$35,041,892	\$19,047,861	54%

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
OREGON, 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	1,800	7%	123	1%	1,580	10%	97	9%
Major depression and affective psychoses	5,125	19%	710	7%	4,224	26%	191	18%
Other psychoses	639	2%	72	1%	359	2%	208	20%
Childhood psychoses	293	1%	261	3%	29	0%	3	0%
Neurotic & other depressive disorders	7,765	29%	1,423	15%	6,007	37%	335	32%
Personality disorders	186	1%	28	0%	144	1%	14	1%
Other mental disorders	298	1%	57	1%	190	1%	51	5%
Special symptoms or syndromes	750	3%	267	3%	468	3%	15	1%
Stress & adjustment reactions	6,531	24%	3,647	37%	2,818	18%	66	6%
Conduct disorders	529	2%	473	5%	47	0%	9	1%
Emotional disturbances	781	3%	772	8%	8	0%	1	0%
Hyperkinetic syndrome	2,128	8%	1,905	20%	222	1%	1	0%
No Diagnosis	57	0%	14	0%	0	0%	43	4%
Total	26,882	100%	9,752	100%	16,096	100%	1,034	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
OREGON, 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	1	46	0	0	1	1%	46	4	3%	4
	4-5	0	0	0	0	0	0%	0	0	0%	0
	6-12	18	100	3	6	19	1%	96	3	0%	39
	13-18	118	103	49	9	150	9%	84	29	2%	4
	19-21	4	34	25	5	28	3%	9	42	4%	3
	22-44	0	0	151	7	151	2%	7	206	3%	5
	45-64	0	0	56	5	56	2%	5	124	5%	3
	65+	28	163	14	0	42	6%	109	54	7%	1
All Ages	169	111	298	6	447	3%	46	462	3%	4	
Male	0-3	0	0	0	0	0	0%	0	8	5%	4
	4-5	0	0	0	0	0	0%	0	2	0%	1
	6-12	80	103	11	11	87	4%	96	13	1%	4
	13-18	145	127	32	9	170	9%	110	8	0%	7
	19-21	11	93	35	12	45	11%	32	9	2%	4
	22-44	0	0	204	6	204	5%	6	137	3%	4
	45-64	0	0	65	3	65	4%	3	124	7%	4
	65+	38	161	2	7	39	13%	157	19	6%	0
All Ages	274	124	349	7	610	5%	59	320	3%	4	
Total	0-3	1	46	0	0	1	0%	46	12	4%	6
	4-5	0	0	0	0	0	0%	0	2	0%	1
	6-12	98	103	14	10	106	3%	96	16	0%	10
	13-18	263	116	81	9	320	9%	98	37	1%	5
	19-21	15	77	60	9	73	5%	23	51	4%	3
	22-44	0	0	355	7	355	3%	7	343	3%	5
	45-64	0	0	121	4	121	3%	4	248	6%	4
	65+	66	162	16	1	81	8%	132	73	7%	0
All Ages	443	119	647	7	1,057	4%	54	782	3%	4	

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
OREGON, 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	7	6%	0.00	1.14	1.14	820	6%	1.17
	4-5	16	6%	0.00	1.00	1.00	228	4%	1.12
	6-12	41	3%	0.10	1.05	1.15	379	2%	1.16
	13-18	180	10%	0.19	1.16	1.35	569	5%	1.21
	19-21	142	15%	0.22	1.24	1.46	742	8%	1.22
	22-44	1,086	14%	0.24	1.50	1.74	2,736	7%	1.32
	45-64	422	16%	0.30	1.68	1.98	858	8%	1.35
	65+	97	13%	0.15	1.54	1.69	896	7%	1.39
	All Ages	1,991	13%	0.24	1.48	1.71	7,228	6%	1.28
Male	0-3	22	12%	0.00	1.36	1.36	891	6%	1.21
	4-5	23	6%	0.00	1.22	1.22	240	4%	1.15
	6-12	107	4%	0.06	1.09	1.15	401	3%	1.11
	13-18	107	6%	0.14	1.13	1.27	354	4%	1.09
	19-21	49	12%	0.39	0.92	1.31	389	9%	1.21
	22-44	700	17%	0.37	1.42	1.79	2,323	8%	1.31
	45-64	284	15%	0.30	1.73	2.02	1,029	9%	1.38
	65+	29	10%	0.17	1.66	1.83	392	7%	1.38
	All Ages	1,321	11%	0.30	1.42	1.71	6,019	6%	1.27
Total	0-3	29	10%	0.00	1.31	1.31	1,711	6%	1.19
	4-5	39	6%	0.00	1.13	1.13	468	4%	1.14
	6-12	148	4%	0.07	1.08	1.15	780	3%	1.14
	13-18	287	8%	0.17	1.15	1.32	923	4%	1.16
	19-21	191	14%	0.26	1.16	1.42	1,131	9%	1.22
	22-44	1,786	15%	0.29	1.47	1.76	5,059	7%	1.31
	45-64	706	16%	0.30	1.70	2.00	1,887	8%	1.37
	65+	126	12%	0.16	1.56	1.72	1,288	7%	1.39
	All Ages	3,312	12%	0.26	1.45	1.71	13,247	6%	1.28

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
OREGON, 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	397	1%	13	4%	384	1%
4-5	309	2%	86	12%	223	2%
6-12	2,189	6%	1,291	33%	898	3%
13-18	2,626	11%	1,565	44%	1,061	5%
19-21	1,666	11%	769	57%	897	7%
22-44	18,032	23%	8,730	75%	9,302	14%
45-64	9,646	36%	3,647	83%	5,999	27%
65+	8,361	46%	825	80%	7,536	43%
All Ages	43,226	18%	16,926	63%	26,300	12%

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
OREGON, 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	123	44%	80%	20%	11%	4%	56%	2%
Major depression and affective psychoses	710	55%	20%	16%	11%	4%	27%	8%
Other psychoses	72	24%	49%	18%	3%	0%	32%	1%
Childhood psychoses	261	18%	15%	13%	1%	11%	14%	20%
Neurotic & other depressive disorders	1,423	48%	4%	11%	1%	3%	13%	14%
Personality disorders	28	29%	21%	25%	0%	7%	25%	4%
Other mental disorders	57	16%	5%	12%	0%	4%	9%	35%
Special symptoms or syndromes	267	15%	5%	9%	0%	2%	5%	27%
Stress & adjustment reactions	3,647	14%	3%	5%	0%	4%	5%	24%
Conduct disorders	473	17%	5%	6%	1%	9%	10%	18%
Emotional disturbances	772	22%	6%	6%	0%	15%	11%	18%
Hyperkinetic syndrome	1,905	20%	6%	6%	1%	44%	17%	7%
No Diagnosis	14	79%	71%	14%	0%	14%	64%	0%
Total	9,752	25%	7%	8%	1%	13%	12%	62%

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
OREGON, 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	1,580	48%	88%	39%	13%	1%	64%	1%
Major depression and affective psychoses	4,224	75%	25%	37%	12%	1%	47%	4%
Other psychoses	359	42%	57%	28%	4%	0%	45%	5%
Childhood psychoses	29	38%	28%	21%	7%	3%	28%	28%
Neurotic & other depressive disorders	6,007	73%	7%	35%	1%	1%	32%	5%
Personality disorders	144	56%	22%	35%	6%	0%	35%	9%
Other mental disorders	190	37%	10%	22%	1%	0%	19%	20%
Special symptoms or syndromes	468	55%	6%	28%	0%	1%	25%	16%
Stress & adjustment reactions	2,818	52%	7%	26%	1%	0%	23%	13%
Conduct disorders	47	40%	9%	19%	2%	0%	21%	11%
Emotional disturbances	8	50%	13%	38%	0%	0%	38%	0%
Hyperkinetic syndrome	222	65%	8%	19%	3%	24%	32%	6%
No Diagnosis	0	0%	0%	0%	0%	0%	0%	0%
Total	16,096	65%	21%	34%	5%	1%	38%	23%

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
OREGON, 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	97	41%	80%	37%	12%	1%	59%	1%
Major depression and affective psychoses	191	74%	42%	49%	12%	2%	63%	5%
Other psychoses	208	54%	51%	34%	1%	1%	49%	20%
Childhood psychoses	3	100%	67%	100%	0%	0%	100%	0%
Neurotic & other depressive disorders	335	72%	20%	50%	1%	1%	50%	7%
Personality disorders	14	93%	57%	50%	0%	0%	71%	0%
Other mental disorders	51	49%	43%	43%	2%	0%	43%	20%
Special symptoms or syndromes	15	47%	13%	53%	0%	0%	40%	0%
Stress & adjustment reactions	66	53%	20%	41%	0%	3%	39%	17%
Conduct disorders	9	44%	67%	67%	0%	0%	67%	22%
Emotional disturbances	1	100%	0%	0%	0%	0%	0%	0%
Hyperkinetic syndrome	1	0%	0%	0%	0%	0%	0%	0%
No Diagnosis	43	40%	40%	47%	0%	0%	51%	2%
Total	1,034	62%	39%	45%	4%	1%	52%	20%

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+).