



**TABLE 1  
MEDICAID BENEFICIARIES AND EXPENDITURES  
TOTAL AND FEE-FOR-SERVICE (FFS)  
WISCONSIN, 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>	575,138	100%	420,151	73%	\$2,705,571,551	100%	\$2,322,609,505	86%
<b>Age</b>								
0-3	88,884	15%	46,236	52%	\$119,307,711	4%	\$60,086,334	50%
4-5	36,508	6%	20,609	56%	\$51,735,626	2%	\$21,625,114	42%
6-12	104,842	18%	64,170	61%	\$162,731,678	6%	\$83,356,767	51%
13-18	65,768	11%	45,414	69%	\$130,677,638	5%	\$76,100,213	58%
19-21	22,564	4%	17,525	78%	\$63,613,065	2%	\$45,753,802	72%
22-44	129,068	22%	103,284	80%	\$617,967,177	23%	\$535,587,530	87%
45-64	48,960	9%	45,607	93%	\$505,195,640	19%	\$479,205,237	95%
65 and older	78,499	14%	77,262	98%	\$1,054,315,267	39%	\$1,020,866,759	97%
<b>Gender</b>								
Female	339,866	59%	249,819	74%	\$1,622,249,526	60%	\$1,382,312,006	85%
Male	235,271	41%	170,331	72%	\$1,083,322,025	40%	\$940,297,499	87%
<b>Race</b>								
White	217,792	38%	168,367	77%	\$1,244,890,663	46%	\$1,125,962,711	90%
Black	92,173	16%	47,059	51%	\$162,093,098	6%	\$67,041,810	41%
Hispanic	25,165	4%	15,331	61%	\$33,410,297	1%	\$14,001,368	42%
American Indian/Alaskan Native	7,310	1%	5,701	78%	\$13,058,832	0%	\$9,583,771	73%
Asian/Pacific Islander	17,086	3%	6,672	39%	\$18,941,239	1%	\$3,244,652	17%
Other/Unknown	215,612	37%	177,021	82%	\$1,233,177,422	46%	\$1,102,775,193	89%
<b>Dual Status</b>								
Aged Duals with Full Medicaid	70,842	12%	69,660	98%	\$1,020,183,306	38%	\$988,466,381	97%
Disabled Duals with Full Medicaid	40,398	7%	39,453	98%	\$550,310,784	20%	\$535,226,537	97%
Duals with Limited Medicaid	7,025	1%	7,025	100%	\$7,085,368	0%	\$6,614,021	93%
Other Duals	1,101	0%	1,073	97%	\$2,798,838	0%	\$2,562,322	92%
Disabled Non-Duals	73,889	13%	71,622	97%	\$670,747,234	25%	\$635,315,239	95%
All Other Non-Duals	381,883	66%	231,318	61%	\$454,446,021	17%	\$154,425,005	34%
<b>Eligibility Group</b>								
Aged	62,529	11%	62,322	100%	\$872,643,377	32%	\$864,527,734	99%
Disabled	131,425	23%	127,227	97%	\$1,398,507,949	52%	\$1,323,330,088	95%
Adults	112,453	20%	81,954	73%	\$142,607,176	5%	\$55,536,995	39%
Children	268,730	47%	148,647	55%	\$291,812,886	11%	\$79,214,525	27%

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**  
**WISCONSIN, 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>	420,151	55,245	13%	\$2,322,609,505	\$669,817,644	29%
<b>Age</b>						
0-3	46,236	352	1%	\$60,086,334	\$2,873,277	5%
4-5	20,609	978	5%	\$21,625,114	\$8,561,393	40%
6-12	64,170	7,492	12%	\$83,356,767	\$40,887,999	49%
13-18	45,414	6,742	15%	\$76,100,213	\$35,425,594	47%
19-21	17,525	1,427	8%	\$45,753,802	\$16,581,344	36%
22-44	103,284	17,853	17%	\$535,587,530	\$205,242,009	38%
45-64	45,607	11,545	25%	\$479,205,237	\$168,842,021	35%
65 and Older	77,262	8,856	11%	\$1,020,866,759	\$191,404,007	19%
<b>Gender</b>						
Female	249,819	30,989	12%	\$1,382,312,006	\$373,969,882	27%
Male	170,331	24,256	14%	\$940,297,499	\$295,847,762	31%
<b>Race</b>						
White	168,367	17,240	10%	\$1,125,962,711	\$250,522,036	22%
Black	47,059	2,346	5%	\$67,041,810	\$15,552,365	23%
Hispanic	15,331	422	3%	\$14,001,368	\$2,229,887	16%
American Indian/Alaskan Native	5,701	416	7%	\$9,583,771	\$2,187,405	23%
Asian/Pacific Islander	6,672	77	1%	\$3,244,652	\$438,270	14%
Other/Unknown	177,021	34,744	20%	\$1,102,775,193	\$398,887,681	36%
<b>Dual Status</b>						
Aged Duals with Full Medicaid	69,660	8,495	12%	\$988,466,381	\$184,036,873	19%
Disabled Duals with Full Medicaid	39,453	13,378	34%	\$535,226,537	\$189,792,349	35%
Duals with Limited Medicaid	7,025	417	6%	\$6,614,021	\$1,592,352	24%
Other Duals	1,073	226	21%	\$2,562,322	\$1,069,206	42%
Disabled Non-Duals	71,622	19,254	27%	\$635,315,239	\$248,319,088	39%
All Other Non-Duals	231,318	13,475	6%	\$154,425,005	\$45,007,776	29%
<b>Eligibility Group</b>						
Aged	62,322	6,900	11%	\$864,527,734	\$157,924,012	18%
Disabled	127,227	34,805	27%	\$1,323,330,088	\$470,778,189	36%
Adults	81,954	3,723	5%	\$55,536,995	\$8,485,894	15%
Children	148,647	9,817	7%	\$79,214,525	\$32,629,549	41%

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**  
**WISCONSIN, 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	9,247	17%	234	1%	7,476	25%	1,537	17%
Major depression and affective psychoses	9,993	18%	1,209	7%	7,419	25%	1,365	15%
Other psychoses	2,758	5%	154	1%	1,080	4%	1,524	17%
Childhood psychoses	1,380	3%	1,052	6%	310	1%	18	0%
Neurotic & other depressive disorders	12,168	22%	1,941	11%	7,521	26%	2,706	31%
Personality disorders	747	1%	67	0%	567	2%	113	1%
Other mental disorders	1,436	3%	105	1%	574	2%	757	9%
Special symptoms or syndromes	1,237	2%	309	2%	680	2%	248	3%
Stress & adjustment reactions	6,436	12%	3,159	19%	2,853	10%	424	5%
Conduct disorders	2,315	4%	1,535	9%	671	2%	109	1%
Emotional disturbances	1,791	3%	1,763	10%	27	0%	1	0%
Hyperkinetic syndrome	5,597	10%	5,369	32%	217	1%	11	0%
No Diagnosis	140	0%	94	1%	3	0%	43	0%
<b>Total</b>	<b>55,245</b>	<b>100%</b>	<b>16,991</b>	<b>100%</b>	<b>29,398</b>	<b>100%</b>	<b>8,856</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  
WISCONSIN, 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	7	0	0	1	1%	7	6	5%	11
	4-5	5	15	0	0	5	2%	15	12	4%	8
	6-12	101	37	32	11	130	5%	32	57	2%	6
	13-18	395	20	158	7	529	19%	17	208	7%	8
	19-21	73	26	66	11	125	17%	21	123	16%	6
	22-44	1	31	1,032	7	1,033	10%	7	1,556	15%	6
	45-64	0	0	525	7	525	7%	7	1,505	20%	6
	65+	100	118	183	2	280	4%	43	1,471	22%	0
All Ages	676	38	1,996	7	2,628	8%	15	4,938	16%	4	
Male	0-3	2	11	1	1	3	1%	7	15	6%	13
	4-5	13	27	4	5	17	3%	22	20	3%	10
	6-12	325	34	107	13	417	8%	30	130	3%	10
	13-18	424	26	140	9	537	14%	23	122	3%	10
	19-21	128	46	67	9	183	27%	35	41	6%	12
	22-44	4	174	717	7	721	10%	8	863	12%	7
	45-64	0	0	281	7	281	7%	7	801	19%	7
	65+	78	114	56	1	134	6%	67	554	24%	1
All Ages	974	39	1,373	7	2,293	9%	21	2,546	11%	6	
Total	0-3	3	9	1	1	4	1%	7	21	6%	12
	4-5	18	24	4	5	22	2%	20	32	3%	9
	6-12	426	35	139	12	547	7%	30	187	3%	9
	13-18	819	23	298	8	1,066	16%	20	330	5%	9
	19-21	201	39	133	10	308	22%	29	164	11%	8
	22-44	5	146	1,749	7	1,754	10%	7	2,419	14%	6
	45-64	0	0	806	7	806	7%	7	2,306	20%	6
	65+	178	116	239	1	414	5%	51	2,025	23%	0
All Ages	1,650	38	3,369	7	4,921	9%	18	7,484	14%	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  
WISCONSIN, 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	35	30%	0.06	2.11	2.17	3,765	17%	1.60
	4-5	78	24%	0.00	1.44	1.44	1,102	12%	1.39
	6-12	588	24%	0.11	1.52	1.62	2,569	9%	1.41
	13-18	1,014	36%	0.26	1.74	2.00	2,668	13%	1.59
	19-21	367	49%	0.44	2.79	3.23	2,649	21%	1.73
	22-44	5,192	49%	0.36	3.15	3.51	10,596	18%	1.94
	45-64	3,252	44%	0.25	2.56	2.81	5,150	27%	1.97
	65+	1,566	24%	0.14	1.59	1.73	7,417	15%	1.47
	All Ages	12,092	39%	0.28	2.57	2.85	35,916	16%	1.72
Male	0-3	81	34%	0.07	1.84	1.91	4,487	19%	1.61
	4-5	192	29%	0.03	1.71	1.74	1,307	13%	1.48
	6-12	1,275	25%	0.07	1.45	1.52	2,930	10%	1.42
	13-18	1,131	29%	0.16	1.57	1.73	2,195	12%	1.47
	19-21	258	38%	0.57	2.61	3.18	650	20%	2.03
	22-44	3,018	41%	0.46	2.72	3.19	5,532	20%	2.15
	45-64	1,597	39%	0.32	2.63	2.96	3,706	25%	2.15
	65+	552	24%	0.13	1.62	1.74	2,788	15%	1.59
	All Ages	8,104	33%	0.30	2.23	2.53	23,595	16%	1.79
Total	0-3	116	33%	0.07	1.92	1.99	8,252	18%	1.61
	4-5	270	28%	0.02	1.63	1.65	2,409	12%	1.44
	6-12	1,863	25%	0.08	1.47	1.55	5,499	10%	1.42
	13-18	2,145	32%	0.21	1.65	1.86	4,863	13%	1.53
	19-21	625	44%	0.49	2.72	3.21	3,299	20%	1.79
	22-44	8,210	46%	0.40	2.99	3.39	16,128	19%	2.01
	45-64	4,849	42%	0.27	2.59	2.86	8,856	26%	2.05
	65+	2,118	24%	0.14	1.60	1.73	10,205	15%	1.51
	All Ages	20,196	37%	0.29	2.43	2.72	59,511	16%	1.74

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**  
**WISCONSIN, 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	651	1%	77	22%	574	1%
4-5	764	4%	337	34%	427	2%
6-12	8,055	13%	4,754	63%	3,301	6%
13-18	6,547	14%	3,823	57%	2,724	7%
19-21	1,732	10%	866	61%	866	5%
22-44	26,148	25%	14,826	83%	11,322	13%
45-64	22,451	49%	10,463	91%	11,988	35%
65+	36,188	47%	7,333	83%	28,855	42%
All Ages	102,536	24%	42,479	77%	60,057	16%

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**  
**WISCONSIN, 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	234	45%	77%	22%	9%	6%	53%	4%
Major depression and affective psychoses	1,209	54%	25%	13%	10%	17%	36%	12%
Other psychoses	154	32%	61%	18%	3%	10%	44%	7%
Childhood psychoses	1,052	26%	22%	14%	2%	17%	24%	25%
Neurotic & other depressive disorders	1,941	43%	10%	10%	1%	13%	19%	23%
Personality disorders	67	43%	25%	10%	4%	16%	25%	16%
Other mental disorders	105	22%	13%	17%	0%	11%	14%	30%
Special symptoms or syndromes	309	20%	15%	11%	0%	10%	13%	38%
Stress & adjustment reactions	3,159	17%	6%	5%	1%	14%	10%	38%
Conduct disorders	1,535	23%	13%	7%	2%	21%	19%	30%
Emotional disturbances	1,763	27%	11%	6%	2%	28%	20%	29%
Hyperkinetic syndrome	5,369	30%	12%	7%	2%	77%	32%	7%
No Diagnosis	94	5%	1%	1%	0%	1%	2%	10%
<b>Total</b>	<b>16,991</b>	<b>29%</b>	<b>14%</b>	<b>8%</b>	<b>2%</b>	<b>36%</b>	<b>24%</b>	<b>42%</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**  
**WISCONSIN, 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	7,476	48%	93%	45%	12%	1%	68%	2%
Major depression and affective psychoses	7,419	78%	42%	55%	13%	4%	67%	6%
Other psychoses	1,080	45%	77%	44%	5%	1%	58%	9%
Childhood psychoses	310	50%	65%	50%	7%	2%	60%	8%
Neurotic & other depressive disorders	7,521	71%	20%	52%	2%	2%	50%	12%
Personality disorders	567	61%	47%	49%	7%	2%	56%	13%
Other mental disorders	574	40%	30%	37%	4%	2%	36%	25%
Special symptoms or syndromes	680	55%	20%	40%	1%	2%	37%	25%
Stress & adjustment reactions	2,853	52%	19%	37%	2%	3%	35%	24%
Conduct disorders	671	44%	51%	42%	7%	2%	50%	18%
Emotional disturbances	27	44%	37%	41%	4%	4%	44%	33%
Hyperkinetic syndrome	217	47%	16%	27%	4%	61%	47%	9%
No Diagnosis	3	33%	33%	0%	0%	0%	33%	0%
<b>Total</b>	<b>29,398</b>	<b>62%</b>	<b>48%</b>	<b>48%</b>	<b>8%</b>	<b>3%</b>	<b>57%</b>	<b>14%</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**  
**WISCONSIN, 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	1,537	39%	88%	39%	6%	0%	58%	5%
Major depression and affective psychoses	1,365	80%	46%	56%	9%	2%	70%	4%
Other psychoses	1,524	41%	42%	33%	1%	1%	37%	29%
Childhood psychoses	18	67%	61%	44%	0%	0%	56%	17%
Neurotic & other depressive disorders	2,706	73%	28%	54%	1%	2%	54%	9%
Personality disorders	113	60%	55%	47%	2%	2%	63%	12%
Other mental disorders	757	35%	33%	34%	1%	1%	31%	34%
Special symptoms or syndromes	248	51%	41%	45%	0%	1%	44%	20%
Stress & adjustment reactions	424	64%	25%	46%	0%	1%	45%	15%
Conduct disorders	109	51%	66%	46%	2%	0%	60%	10%
Emotional disturbances	1	100%	100%	100%	0%	0%	100%	0%
Hyperkinetic syndrome	11	36%	27%	45%	0%	27%	36%	9%
No Diagnosis	43	40%	51%	37%	0%	0%	47%	14%
<b>Total</b>	<b>8,856</b>	<b>58%</b>	<b>45%</b>	<b>46%</b>	<b>3%</b>	<b>1%</b>	<b>52%</b>	<b>17%</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+).