

**TABLE 1
MEDICAID BENEFICIARIES AND EXPENDITURES
TOTAL AND FEE-FOR-SERVICE (FFS)
CONNECTICUT, 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	417,767	100%	198,710	48%	\$2,673,605,051	100%	\$2,235,962,012	84%
Age								
0-3	54,498	13%	15,122	28%	\$124,958,855	5%	\$16,862,700	13%
4-5	24,556	6%	6,047	25%	\$26,464,022	1%	\$2,355,795	9%
6-12	83,616	20%	19,105	23%	\$101,589,968	4%	\$10,308,865	10%
13-18	52,273	13%	14,103	27%	\$82,558,089	3%	\$11,497,622	14%
19-21	18,737	4%	8,962	48%	\$39,491,761	1%	\$17,207,796	44%
22-44	92,240	22%	47,633	52%	\$606,172,291	23%	\$496,934,281	82%
45-64	35,479	8%	31,388	88%	\$521,928,575	20%	\$510,750,735	98%
65 and older	56,359	13%	56,342	100%	\$1,170,440,883	44%	\$1,170,044,218	100%
Gender								
Female	252,174	60%	122,744	49%	\$1,658,491,064	62%	\$1,382,779,603	83%
Male	165,592	40%	75,965	46%	\$1,015,112,638	38%	\$853,181,945	84%
Race								
White	186,962	45%	110,549	59%	\$1,959,532,401	73%	\$1,805,429,527	92%
Black	101,256	24%	36,737	36%	\$370,381,421	14%	\$244,458,606	66%
Hispanic	120,572	29%	45,939	38%	\$319,714,602	12%	\$169,159,557	53%
American Indian/Alaskan Native	750	0%	400	53%	\$3,881,716	0%	\$3,129,394	81%
Asian/Pacific Islander	6,826	2%	3,728	55%	\$19,723,172	1%	\$13,509,225	68%
Other/Unknown	1,401	0%	1,357	97%	\$371,739	0%	\$275,703	74%
Dual Status								
Aged Duals with Full Medicaid	47,029	11%	47,022	100%	\$1,107,770,774	41%	\$1,107,425,132	100%
Disabled Duals with Full Medicaid	24,441	6%	24,441	100%	\$583,613,403	22%	\$583,078,656	100%
Duals with Limited Medicaid	8,092	2%	8,092	100%	\$19,567,880	1%	\$19,465,186	99%
Other Duals	474	0%	375	79%	\$1,833,491	0%	\$1,543,884	84%
Disabled Non-Duals	28,207	7%	28,184	100%	\$412,045,241	15%	\$410,893,989	100%
All Other Non-Duals	309,524	74%	90,596	29%	\$548,774,262	21%	\$113,555,165	21%
Eligibility Group								
Aged	55,813	13%	55,813	100%	\$1,165,409,570	44%	\$1,165,069,166	100%
Disabled	56,544	14%	56,521	100%	\$1,010,484,380	38%	\$1,008,702,270	100%
Adults	73,046	17%	24,887	34%	\$136,899,254	5%	\$18,006,399	13%
Children	232,364	56%	61,489	26%	\$360,811,847	14%	\$44,184,177	12%

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
 CONNECTICUT, 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	198,710	22,830	11%	\$2,235,962,012	\$420,064,397	19%
Age						
0-3	15,122	35	0%	\$16,862,700	\$26,763	0%
4-5	6,047	69	1%	\$2,355,795	\$104,904	4%
6-12	19,105	599	3%	\$10,308,865	\$2,309,421	22%
13-18	14,103	671	5%	\$11,497,622	\$3,337,566	29%
19-21	8,962	584	7%	\$17,207,796	\$6,119,517	36%
22-44	47,633	9,095	19%	\$496,934,281	\$153,975,235	31%
45-64	31,388	7,676	24%	\$510,750,735	\$128,587,828	25%
65 and Older	56,342	4,101	7%	\$1,170,044,218	\$125,603,163	11%
Gender						
Female	122,744	13,736	11%	\$1,382,779,603	\$249,763,258	18%
Male	75,965	9,094	12%	\$853,181,945	\$170,301,139	20%
Race						
White	110,549	14,526	13%	\$1,805,429,527	\$310,150,962	17%
Black	36,737	3,494	10%	\$244,458,606	\$59,584,493	24%
Hispanic	45,939	4,569	10%	\$169,159,557	\$47,881,191	28%
American Indian/Alaskan Native	400	38	10%	\$3,129,394	\$343,175	11%
Asian/Pacific Islander	3,728	201	5%	\$13,509,225	\$2,055,466	15%
Other/Unknown	1,357	2	0%	\$275,703	\$49,110	18%
Dual Status						
Aged Duals with Full Medicaid	47,022	3,527	8%	\$1,107,425,132	\$110,412,512	10%
Disabled Duals with Full Medicaid	24,441	5,138	21%	\$583,078,656	\$95,043,349	16%
Duals with Limited Medicaid	8,092	459	6%	\$19,465,186	\$3,910,659	20%
Other Duals	375	42	11%	\$1,543,884	\$246,828	16%
Disabled Non-Duals	28,184	10,715	38%	\$410,893,989	\$187,474,363	46%
All Other Non-Duals	90,596	2,949	3%	\$113,555,165	\$22,976,686	20%
Eligibility Group						
Aged	55,813	4,060	7%	\$1,165,069,166	\$124,770,064	11%
Disabled	56,521	16,280	29%	\$1,008,702,270	\$286,068,634	28%
Adults	24,887	847	3%	\$18,006,399	\$2,112,974	12%
Children	61,489	1,643	3%	\$44,184,177	\$7,112,725	16%

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
CONNECTICUT, 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	6,933	30%	125	6%	5,827	35%	981	24%
Major depression and affective psychoses	5,749	25%	239	12%	4,860	29%	650	16%
Other psychoses	1,383	6%	43	2%	510	3%	830	20%
Childhood psychoses	230	1%	108	6%	114	1%	8	0%
Neurotic & other depressive disorders	4,763	21%	343	18%	3,432	20%	988	24%
Personality disorders	262	1%	36	2%	194	1%	32	1%
Other mental disorders	661	3%	17	1%	205	1%	439	11%
Special symptoms or syndromes	224	1%	30	2%	163	1%	31	1%
Stress & adjustment reactions	1,761	8%	416	21%	1,229	7%	116	3%
Conduct disorders	348	2%	144	7%	187	1%	17	0%
Emotional disturbances	230	1%	221	11%	6	0%	3	0%
Hyperkinetic syndrome	281	1%	235	12%	44	0%	2	0%
No Diagnosis	5	0%	1	0%	0	0%	4	0%
Total	22,830	100%	1,958	100%	16,771	100%	4,101	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
CONNECTICUT, 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	3	20%	3
	4-5	0	0	0	0	0	0%	0	0	0%	0
	6-12	2	9	6	42	8	4%	34	5	3%	8
	13-18	23	48	23	12	44	15%	31	4	1%	6
	19-21	19	19	40	10	53	18%	14	42	15%	9
	22-44	0	0	569	14	569	12%	14	555	11%	9
	45-64	0	0	301	15	301	6%	15	612	13%	10
	65+	21	305	27	30	48	2%	150	118	4%	12
All Ages	65	121	966	14	1,023	7%	21	1,339	10%	10	
Male	0-3	0	0	1	2	1	5%	2	2	10%	3
	4-5	0	0	0	0	0	0%	0	0	0%	0
	6-12	14	53	12	42	23	6%	54	6	1%	14
	13-18	29	47	22	8	50	14%	31	9	2%	5
	19-21	26	53	52	12	71	24%	28	25	8%	13
	22-44	0	0	427	14	427	10%	14	341	8%	11
	45-64	0	0	162	15	162	6%	15	351	13%	13
	65+	8	284	13	215	21	2%	241	44	5%	19
All Ages	77	75	689	18	755	8%	24	778	9%	13	
Total	0-3	0	0	1	2	1	3%	2	5	14%	3
	4-5	0	0	0	0	0	0%	0	0	0%	0
	6-12	16	48	18	42	31	5%	49	11	2%	11
	13-18	52	48	45	10	94	14%	31	13	2%	6
	19-21	45	38	92	11	124	21%	22	67	11%	10
	22-44	0	0	996	14	996	11%	14	896	10%	10
	45-64	0	0	463	15	463	6%	15	963	13%	11
	65+	29	299	40	90	69	2%	178	162	4%	14
All Ages	142	96	1,655	16	1,778	8%	23	2,117	9%	11	

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
CONNECTICUT, 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	47%	0.29	1.29	1.57	759	10%	1.24
	4-5	1	6%	1.00	1.00	2.00	155	5%	1.26
	6-12	24	13%	0.25	1.00	1.25	391	4%	1.15
	13-18	99	33%	0.55	1.03	1.58	503	7%	1.26
	19-21	139	48%	0.65	2.53	3.18	817	14%	1.49
	22-44	2,142	44%	0.48	2.92	3.40	3,265	13%	1.78
	45-64	1,800	37%	0.27	2.37	2.63	2,077	16%	1.86
	65+	178	6%	0.24	1.69	1.92	676	2%	1.54
	All Ages	4,390	32%	0.39	2.58	2.96	8,643	8%	1.64
Male	0-3	2	10%	0.00	1.00	1.00	782	10%	1.25
	4-5	6	12%	0.00	1.00	1.00	214	7%	1.17
	6-12	74	18%	0.51	1.03	1.54	498	5%	1.19
	13-18	83	23%	0.57	0.96	1.53	340	5%	1.15
	19-21	142	48%	0.69	1.70	2.39	301	12%	1.61
	22-44	1,301	31%	0.62	2.55	3.18	1,571	12%	2.10
	45-64	813	29%	0.29	2.59	2.88	1,422	13%	2.14
	65+	71	7%	0.08	1.48	1.56	328	2%	1.70
	All Ages	2,492	27%	0.50	2.38	2.88	5,456	8%	1.76
Total	0-3	9	26%	0.22	1.22	1.44	1,541	10%	1.24
	4-5	7	10%	0.14	1.00	1.14	369	6%	1.21
	6-12	98	16%	0.45	1.02	1.47	889	5%	1.17
	13-18	182	27%	0.55	1.00	1.55	843	6%	1.21
	19-21	281	48%	0.67	2.11	2.78	1,118	13%	1.53
	22-44	3,443	38%	0.53	2.78	3.31	4,836	13%	1.88
	45-64	2,613	34%	0.27	2.44	2.71	3,499	15%	1.97
	65+	249	6%	0.19	1.63	1.82	1,004	2%	1.59
	All Ages	6,882	30%	0.43	2.51	2.93	14,099	8%	1.68

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
CONNECTICUT, 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	85	1%	3	9%	82	1%
4-5	90	1%	16	23%	74	1%
6-12	679	4%	228	38%	451	2%
13-18	663	5%	258	38%	405	3%
19-21	610	7%	334	57%	276	3%
22-44	15,710	33%	7,690	85%	8,020	21%
45-64	16,723	53%	6,939	90%	9,784	41%
65+	26,726	47%	3,179	78%	23,547	45%
All Ages	61,286	31%	18,647	82%	42,639	24%

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
CONNECTICUT, 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	125	42%	66%	24%	3%	3%	46%	6%
Major depression and affective psychoses	239	50%	31%	21%	8%	6%	39%	10%
Other psychoses	43	21%	60%	21%	12%	7%	42%	12%
Childhood psychoses	108	21%	44%	29%	2%	6%	32%	20%
Neurotic & other depressive disorders	343	25%	13%	10%	1%	4%	15%	19%
Personality disorders	36	11%	6%	0%	0%	6%	0%	19%
Other mental disorders	17	6%	41%	24%	0%	6%	29%	12%
Special symptoms or syndromes	30	13%	10%	10%	0%	7%	13%	33%
Stress & adjustment reactions	416	11%	11%	6%	1%	6%	11%	19%
Conduct disorders	144	27%	30%	19%	4%	14%	29%	16%
Emotional disturbances	221	10%	9%	2%	1%	10%	10%	15%
Hyperkinetic syndrome	235	12%	12%	5%	1%	57%	17%	7%
No Diagnosis	1	100%	100%	100%	0%	0%	100%	0%
Total	1,958	22%	22%	12%	2%	13%	21%	57%

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
CONNECTICUT, 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	5,827	47%	87%	47%	11%	1%	67%	3%
Major depression and affective psychoses	4,860	78%	51%	61%	11%	2%	73%	4%
Other psychoses	510	48%	73%	45%	3%	1%	58%	8%
Childhood psychoses	114	38%	50%	49%	7%	3%	47%	14%
Neurotic & other depressive disorders	3,432	69%	28%	59%	2%	1%	57%	11%
Personality disorders	194	57%	50%	52%	9%	4%	53%	14%
Other mental disorders	205	44%	35%	42%	2%	2%	43%	23%
Special symptoms or syndromes	163	44%	29%	36%	2%	0%	32%	26%
Stress & adjustment reactions	1,229	55%	25%	48%	2%	1%	45%	21%
Conduct disorders	187	43%	47%	43%	4%	2%	45%	18%
Emotional disturbances	6	17%	33%	50%	0%	0%	17%	0%
Hyperkinetic syndrome	44	59%	27%	45%	2%	48%	55%	0%
No Diagnosis	0	0%	0%	0%	0%	0%	0%	0%
Total	16,771	61%	57%	54%	8%	2%	63%	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
CONNECTICUT, 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	981	34%	83%	46%	8%	0%	58%	6%
Major depression and affective psychoses	650	65%	51%	53%	13%	3%	65%	6%
Other psychoses	830	32%	43%	34%	1%	0%	35%	28%
Childhood psychoses	8	25%	38%	63%	0%	0%	38%	38%
Neurotic & other depressive disorders	988	67%	37%	56%	2%	1%	57%	12%
Personality disorders	32	59%	66%	41%	3%	0%	59%	9%
Other mental disorders	439	27%	31%	31%	1%	0%	26%	36%
Special symptoms or syndromes	31	39%	29%	58%	0%	3%	42%	26%
Stress & adjustment reactions	116	45%	21%	53%	1%	0%	42%	29%
Conduct disorders	17	47%	59%	29%	6%	0%	47%	6%
Emotional disturbances	3	33%	33%	0%	0%	0%	33%	67%
Hyperkinetic syndrome	2	50%	50%	50%	0%	0%	50%	0%
No Diagnosis	4	0%	25%	25%	0%	0%	25%	0%
Total	4,101	46%	50%	45%	5%	1%	50%	22%

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+).