



**TABLE 1  
MEDICAID BENEFICIARIES AND EXPENDITURES  
TOTAL AND FEE-FOR-SERVICE (FFS)  
KENTUCKY, 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>	687,437	100%	272,743	40%	\$2,625,229,464	100%	\$629,924,409	24%
<b>Age</b>								
0-3	96,798	14%	32,998	34%	\$169,625,386	6%	\$25,502,066	15%
4-5	40,115	6%	15,235	38%	\$56,947,164	2%	\$7,618,265	13%
6-12	126,411	18%	45,126	36%	\$228,809,945	9%	\$33,766,609	15%
13-18	82,920	12%	28,496	34%	\$237,848,263	9%	\$49,072,226	21%
19-21	25,845	4%	9,624	37%	\$72,212,428	3%	\$12,650,863	18%
22-44	141,216	21%	51,542	37%	\$570,542,235	22%	\$120,702,367	21%
45-64	81,449	12%	32,919	40%	\$534,776,134	20%	\$117,420,209	22%
65 and older	92,679	13%	56,803	61%	\$754,467,476	29%	\$263,191,804	35%
<b>Gender</b>								
Female	403,120	59%	163,737	41%	\$1,621,934,732	62%	\$399,965,313	25%
Male	284,306	41%	108,999	38%	\$1,003,266,094	38%	\$229,949,176	23%
<b>Race</b>								
White	562,356	82%	220,863	39%	\$2,145,678,878	82%	\$519,560,463	24%
Black	87,005	13%	38,219	44%	\$276,259,145	11%	\$70,345,215	25%
Hispanic	6,282	1%	2,553	41%	\$13,030,976	1%	\$2,400,410	18%
American Indian/Alaskan Native	213	0%	97	46%	\$337,527	0%	\$37,574	11%
Asian/Pacific Islander	1,454	0%	511	35%	\$2,361,742	0%	\$225,448	10%
Other/Unknown	30,127	4%	10,500	35%	\$187,561,196	7%	\$37,355,299	20%
<b>Dual Status</b>								
Aged Duals with Full Medicaid	67,136	10%	33,385	50%	\$702,918,027	27%	\$241,597,421	34%
Disabled Duals with Full Medicaid	37,829	6%	14,721	39%	\$262,375,525	10%	\$80,663,409	31%
Duals with Limited Medicaid	34,797	5%	34,769	100%	\$31,413,729	1%	\$21,689,078	69%
Other Duals	579	0%	178	31%	\$1,722,973	0%	\$324,805	19%
Disabled Non-Duals	126,862	18%	39,459	31%	\$908,997,862	35%	\$171,598,304	19%
All Other Non-Duals	420,234	61%	150,231	36%	\$717,801,348	27%	\$114,051,392	16%
<b>Eligibility Group</b>								
Aged	71,757	10%	49,000	68%	\$621,130,342	24%	\$231,285,358	37%
Disabled	197,913	29%	75,396	38%	\$1,303,267,663	50%	\$290,459,474	22%
Adults	100,854	15%	36,978	37%	\$209,241,869	8%	\$33,982,957	16%
Children	316,913	46%	111,369	35%	\$491,589,590	19%	\$74,196,620	15%

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**  
**KENTUCKY, 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>	272,743	40,461	15%	\$629,924,409	\$188,129,444	30%
<b>Age</b>						
0-3	32,998	439	1%	\$25,502,066	\$1,163,146	5%
4-5	15,235	1,084	7%	\$7,618,265	\$1,660,033	22%
6-12	45,126	8,199	18%	\$33,766,609	\$19,888,437	59%
13-18	28,496	7,104	25%	\$49,072,226	\$36,741,458	75%
19-21	9,624	1,055	11%	\$12,650,863	\$3,841,289	30%
22-44	51,542	10,942	21%	\$120,702,367	\$41,686,741	35%
45-64	32,919	6,564	20%	\$117,420,209	\$36,963,732	31%
65 and Older	56,803	5,074	9%	\$263,191,804	\$46,184,608	18%
<b>Gender</b>						
Female	163,737	23,325	14%	\$399,965,313	\$108,722,620	27%
Male	108,999	17,135	16%	\$229,949,176	\$79,406,273	35%
<b>Race</b>						
White	220,863	33,265	15%	\$519,560,463	\$152,843,165	29%
Black	38,219	4,373	11%	\$70,345,215	\$21,956,767	31%
Hispanic	2,553	229	9%	\$2,400,410	\$682,315	28%
American Indian/Alaskan Native	97	14	14%	\$37,574	\$21,665	58%
Asian/Pacific Islander	511	19	4%	\$225,448	\$74,678	33%
Other/Unknown	10,500	2,561	24%	\$37,355,299	\$12,550,854	34%
<b>Dual Status</b>						
Aged Duals with Full Medicaid	33,385	4,196	13%	\$241,597,421	\$42,661,722	18%
Disabled Duals with Full Medicaid	14,721	3,716	25%	\$80,663,409	\$20,927,406	26%
Duals with Limited Medicaid	34,769	2,012	6%	\$21,689,078	\$3,246,613	15%
Other Duals	178	45	25%	\$324,805	\$175,094	54%
Disabled Non-Duals	39,459	13,287	34%	\$171,598,304	\$75,439,144	44%
All Other Non-Duals	150,231	17,205	11%	\$114,051,392	\$45,679,465	40%
<b>Eligibility Group</b>						
Aged	49,000	4,022	8%	\$231,285,358	\$38,407,133	17%
Disabled	75,396	19,289	26%	\$290,459,474	\$105,235,077	36%
Adults	36,978	4,499	12%	\$33,982,957	\$7,780,888	23%
Children	111,369	12,651	11%	\$74,196,620	\$36,706,346	49%

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  
 KENTUCKY, 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	2,916	7%	106	1%	2,171	12%	639	13%
Major depression and affective psychoses	7,236	18%	1,652	9%	4,840	28%	744	15%
Other psychoses	1,664	4%	106	1%	572	3%	986	19%
Childhood psychoses	320	1%	261	1%	58	0%	1	0%
Neurotic & other depressive disorders	11,431	28%	2,298	13%	7,313	42%	1,820	36%
Personality disorders	278	1%	56	0%	196	1%	26	1%
Other mental disorders	963	2%	117	1%	292	2%	554	11%
Special symptoms or syndromes	1,468	4%	593	3%	751	4%	124	2%
Stress & adjustment reactions	4,043	10%	2,918	16%	1,040	6%	85	2%
Conduct disorders	3,222	8%	2,982	17%	201	1%	39	1%
Emotional disturbances	1,421	4%	1,397	8%	17	0%	7	0%
Hyperkinetic syndrome	5,455	13%	5,393	30%	55	0%	7	0%
No Diagnosis	44	0%	2	0%	0	0%	42	1%
<b>Total</b>	<b>40,461</b>	<b>100%</b>	<b>17,881</b>	<b>100%</b>	<b>17,506</b>	<b>100%</b>	<b>5,074</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  
KENTUCKY, 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	1	2	1	1%	2	17	10%	6
	4-5	3	16	1	6	4	1%	14	10	2%	3
	6-12	103	29	7	6	107	4%	28	21	1%	2
	13-18	317	31	75	7	377	12%	28	109	4%	3
	19-21	13	15	17	4	30	4%	9	93	13%	3
	22-44	0	0	339	5	339	4%	5	801	10%	4
	45-64	0	0	219	5	219	5%	5	729	16%	5
	65+	61	3	86	1	145	4%	2	803	21%	0
All Ages	497	27	745	5	1,222	5%	14	2,583	11%	3	
Male	0-3	1	36	1	5	2	1%	21	18	7%	8
	4-5	10	27	1	4	11	2%	24	17	2%	4
	6-12	268	39	18	10	282	5%	37	65	1%	4
	13-18	438	31	58	7	486	12%	29	57	1%	6
	19-21	17	15	28	6	42	12%	10	15	4%	5
	22-44	0	0	212	4	212	7%	4	272	9%	4
	45-64	0	0	134	3	134	7%	3	330	16%	4
	65+	48	4	25	1	73	6%	3	279	23%	0
All Ages	782	32	477	4	1,242	7%	22	1,053	6%	3	
Total	0-3	1	36	2	4	3	1%	14	35	8%	7
	4-5	13	24	2	5	15	1%	22	27	2%	3
	6-12	371	36	25	9	389	5%	35	86	1%	3
	13-18	755	31	133	7	863	12%	28	166	2%	4
	19-21	30	15	45	5	72	7%	9	108	10%	3
	22-44	0	0	551	4	551	5%	4	1,073	10%	4
	45-64	0	0	353	5	353	5%	5	1,059	16%	5
	65+	109	4	111	1	218	4%	2	1,082	21%	0
All Ages	1,279	30	1,222	5	2,464	6%	18	3,636	9%	3	

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**  
**KENTUCKY, 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	61	36%	0.02	1.79	1.80	3,927	25%	1.69
	4-5	92	23%	0.05	1.38	1.43	1,181	17%	1.40
	6-12	468	17%	0.06	1.46	1.52	2,376	13%	1.40
	13-18	842	27%	0.18	1.65	1.83	1,804	16%	1.51
	19-21	289	41%	0.23	2.08	2.30	1,380	20%	1.65
	22-44	2,765	35%	0.23	2.39	2.62	4,751	16%	1.70
	45-64	1,251	28%	0.23	2.54	2.77	1,900	13%	1.88
	65+	111	3%	0.09	1.68	1.77	409	1%	1.55
	All Ages	5,879	25%	0.20	2.19	2.39	17,728	13%	1.63
Male	0-3	94	35%	0.06	2.03	2.10	4,468	27%	1.69
	4-5	161	24%	0.02	1.48	1.50	1,259	17%	1.44
	6-12	958	18%	0.05	1.39	1.44	2,391	13%	1.39
	13-18	820	20%	0.16	1.52	1.68	1,382	14%	1.45
	19-21	130	37%	0.35	1.96	2.32	228	15%	1.72
	22-44	780	25%	0.37	2.50	2.87	1,401	12%	1.95
	45-64	410	20%	0.25	2.66	2.92	1,085	9%	1.93
	65+	54	4%	0.13	1.67	1.80	216	1%	1.56
	All Ages	3,407	20%	0.18	1.88	2.06	12,430	14%	1.63
Total	0-3	155	35%	0.05	1.94	1.98	8,395	26%	1.69
	4-5	253	23%	0.03	1.45	1.48	2,440	17%	1.42
	6-12	1,426	17%	0.05	1.41	1.46	4,767	13%	1.40
	13-18	1,662	23%	0.17	1.59	1.75	3,186	15%	1.48
	19-21	419	40%	0.27	2.04	2.31	1,608	19%	1.66
	22-44	3,545	32%	0.26	2.42	2.68	6,152	15%	1.75
	45-64	1,661	25%	0.24	2.57	2.81	2,986	11%	1.90
	65+	165	3%	0.10	1.68	1.78	625	1%	1.56
	All Ages	9,286	23%	0.19	2.08	2.27	30,159	13%	1.63

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**  
**KENTUCKY, 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	4,669	14%	143	33%	4,526	14%
4-5	2,228	15%	514	47%	1,714	12%
6-12	9,629	21%	5,396	66%	4,233	11%
13-18	6,314	22%	4,093	58%	2,221	10%
19-21	1,369	14%	650	62%	719	8%
22-44	16,134	31%	8,650	79%	7,484	18%
45-64	13,361	41%	5,342	81%	8,019	30%
65+	19,621	35%	3,691	73%	15,930	31%
All Ages	73,325	27%	28,479	70%	44,846	19%

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**  
**KENTUCKY, 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	106	55%	75%	23%	8%	2%	55%	9%
Major depression and affective psychoses	1,652	57%	29%	16%	11%	15%	39%	12%
Other psychoses	106	42%	63%	17%	6%	11%	44%	13%
Childhood psychoses	261	31%	26%	26%	3%	18%	30%	24%
Neurotic & other depressive disorders	2,298	44%	9%	20%	2%	10%	22%	27%
Personality disorders	56	20%	9%	16%	2%	7%	11%	52%
Other mental disorders	117	29%	14%	15%	5%	14%	18%	28%
Special symptoms or syndromes	593	19%	8%	23%	0%	7%	13%	46%
Stress & adjustment reactions	2,918	21%	9%	14%	1%	16%	15%	35%
Conduct disorders	2,982	24%	12%	13%	2%	16%	18%	35%
Emotional disturbances	1,397	26%	13%	14%	2%	22%	22%	30%
Hyperkinetic syndrome	5,393	25%	11%	17%	1%	76%	35%	9%
No Diagnosis	2	50%	50%	50%	0%	0%	50%	0%
<b>Total</b>	<b>17,881</b>	<b>30%</b>	<b>13%</b>	<b>16%</b>	<b>2%</b>	<b>33%</b>	<b>26%</b>	<b>40%</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**  
**KENTUCKY, 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	2,171	48%	85%	39%	8%	0%	63%	2%
Major depression and affective psychoses	4,840	78%	35%	46%	9%	1%	60%	5%
Other psychoses	572	47%	72%	40%	3%	0%	56%	7%
Childhood psychoses	58	29%	66%	40%	2%	5%	47%	12%
Neurotic & other depressive disorders	7,313	70%	14%	41%	1%	1%	39%	11%
Personality disorders	196	49%	34%	35%	3%	0%	39%	23%
Other mental disorders	292	38%	28%	34%	2%	1%	32%	23%
Special symptoms or syndromes	751	48%	8%	28%	0%	0%	23%	30%
Stress & adjustment reactions	1,040	58%	13%	32%	1%	1%	32%	18%
Conduct disorders	201	48%	52%	40%	2%	2%	49%	15%
Emotional disturbances	17	47%	47%	53%	0%	6%	47%	24%
Hyperkinetic syndrome	55	47%	16%	22%	0%	42%	36%	20%
No Diagnosis	0	0%	0%	0%	0%	0%	0%	0%
<b>Total</b>	<b>17,506</b>	<b>66%</b>	<b>31%</b>	<b>41%</b>	<b>4%</b>	<b>1%</b>	<b>47%</b>	<b>20%</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**  
**KENTUCKY, 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	639	40%	83%	40%	4%	0%	57%	7%
Major depression and affective psychoses	744	68%	46%	50%	6%	0%	61%	4%
Other psychoses	986	40%	45%	40%	0%	0%	41%	21%
Childhood psychoses	1	100%	100%	0%	0%	0%	100%	0%
Neurotic & other depressive disorders	1,820	56%	23%	42%	1%	0%	40%	11%
Personality disorders	26	31%	46%	54%	4%	0%	46%	23%
Other mental disorders	554	31%	32%	36%	0%	0%	30%	36%
Special symptoms or syndromes	124	46%	24%	38%	0%	0%	36%	21%
Stress & adjustment reactions	85	56%	18%	39%	0%	1%	36%	15%
Conduct disorders	39	62%	69%	62%	0%	0%	67%	3%
Emotional disturbances	7	14%	57%	29%	0%	0%	14%	14%
Hyperkinetic syndrome	7	14%	0%	29%	0%	0%	0%	29%
No Diagnosis	42	24%	60%	38%	0%	0%	45%	17%
<b>Total</b>	<b>5,074</b>	<b>49%</b>	<b>40%</b>	<b>42%</b>	<b>2%</b>	<b>0%</b>	<b>45%</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+).