

**TABLE 1
MEDICAID BENEFICIARIES AND EXPENDITURES
TOTAL AND FEE-FOR-SERVICE (FFS)
MISSISSIPPI, 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	552,951	100%	551,185	100%	\$1,619,690,309	100%	\$1,598,316,189	99%
Age								
0-3	99,025	18%	98,553	100%	\$143,759,872	9%	\$137,519,234	96%
4-5	33,668	6%	33,565	100%	\$25,366,382	2%	\$24,483,291	97%
6-12	104,172	19%	103,890	100%	\$89,628,781	6%	\$87,585,868	98%
13-18	66,973	12%	66,755	100%	\$105,786,936	7%	\$104,020,960	98%
19-21	21,826	4%	21,673	99%	\$64,272,041	4%	\$63,435,773	99%
22-44	86,995	16%	86,561	100%	\$323,839,565	20%	\$319,458,103	99%
45-64	54,956	10%	54,889	100%	\$306,467,395	19%	\$302,754,409	99%
65 and older	85,336	15%	85,299	100%	\$560,569,337	35%	\$559,058,551	100%
Gender								
Female	331,952	60%	330,815	100%	\$1,058,486,709	65%	\$1,046,002,101	99%
Male	220,977	40%	220,348	100%	\$561,117,771	35%	\$552,228,259	98%
Race								
White	171,762	31%	170,929	100%	\$696,953,723	43%	\$687,964,271	99%
Black	344,218	62%	343,360	100%	\$755,164,991	47%	\$745,209,474	99%
Hispanic	2,352	0%	2,338	99%	\$3,118,002	0%	\$2,981,535	96%
American Indian/Alaskan Native	2,034	0%	2,034	100%	\$6,961,368	0%	\$6,947,581	100%
Asian/Pacific Islander	2,000	0%	1,968	98%	\$3,073,810	0%	\$2,744,404	89%
Other/Unknown	30,585	6%	30,556	100%	\$154,418,415	10%	\$152,468,924	99%
Dual Status								
Aged Duals with Full Medicaid	75,259	14%	75,228	100%	\$538,564,141	33%	\$537,167,484	100%
Disabled Duals with Full Medicaid	38,347	7%	38,295	100%	\$212,740,993	13%	\$210,299,301	99%
Duals with Limited Medicaid	11,576	2%	11,576	100%	\$11,792,953	1%	\$11,745,838	100%
Other Duals	192	0%	191	99%	\$1,259,704	0%	\$1,256,001	100%
Disabled Non-Duals	91,424	17%	91,291	100%	\$469,833,415	29%	\$463,467,547	99%
All Other Non-Duals	336,153	61%	334,604	100%	\$385,499,103	24%	\$374,380,018	97%
Eligibility Group								
Aged	66,019	12%	65,995	100%	\$467,708,414	29%	\$466,654,104	100%
Disabled	151,638	27%	151,444	100%	\$772,705,642	48%	\$763,462,506	99%
Adults	57,170	10%	56,680	99%	\$128,756,515	8%	\$126,759,834	98%
Children	278,122	50%	277,064	100%	\$250,519,631	15%	\$241,439,638	96%

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
MISSISSIPPI, 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	551,185	52,057	9%	\$1,598,316,189	\$338,167,505	21%
Age						
0-3	98,553	510	1%	\$137,519,234	\$1,742,897	1%
4-5	33,565	1,221	4%	\$24,483,291	\$2,885,008	12%
6-12	103,890	11,925	11%	\$87,585,868	\$39,715,484	45%
13-18	66,755	8,437	13%	\$104,020,960	\$43,457,407	42%
19-21	21,673	1,342	6%	\$63,435,773	\$9,382,894	15%
22-44	86,561	13,412	15%	\$319,458,103	\$79,393,815	25%
45-64	54,889	9,511	17%	\$302,754,409	\$75,820,430	25%
65 and Older	85,299	5,699	7%	\$559,058,551	\$85,769,570	15%
Gender						
Female	330,815	29,283	9%	\$1,046,002,101	\$207,776,082	20%
Male	220,348	22,774	10%	\$552,228,259	\$130,391,423	24%
Race						
White	170,929	19,133	11%	\$687,964,271	\$145,449,571	21%
Black	343,360	27,769	8%	\$745,209,474	\$156,434,244	21%
Hispanic	2,338	120	5%	\$2,981,535	\$669,236	22%
American Indian/Alaskan Native	2,034	136	7%	\$6,947,581	\$1,092,979	16%
Asian/Pacific Islander	1,968	63	3%	\$2,744,404	\$293,959	11%
Other/Unknown	30,556	4,836	16%	\$152,468,924	\$34,227,516	22%
Dual Status						
Aged Duals with Full Medicaid	75,228	5,380	7%	\$537,167,484	\$81,930,814	15%
Disabled Duals with Full Medicaid	38,295	7,720	20%	\$210,299,301	\$46,170,127	22%
Duals with Limited Medicaid	11,576	347	3%	\$11,745,838	\$1,706,756	15%
Other Duals	191	24	13%	\$1,256,001	\$148,561	12%
Disabled Non-Duals	91,291	21,021	23%	\$463,467,547	\$153,665,594	33%
All Other Non-Duals	334,604	17,565	5%	\$374,380,018	\$54,545,653	15%
Eligibility Group						
Aged	65,995	4,108	6%	\$466,654,104	\$71,596,215	15%
Disabled	151,444	30,440	20%	\$763,462,506	\$213,540,290	28%
Adults	56,680	2,728	5%	\$126,759,834	\$10,174,837	8%
Children	277,064	14,781	5%	\$241,439,638	\$42,856,163	18%

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
MISSISSIPPI, 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	7,476	14%	340	1%	6,364	28%	772	14%
Major depression and affective psychoses	7,652	15%	1,500	6%	5,368	23%	784	14%
Other psychoses	2,584	5%	339	1%	1,525	7%	720	13%
Childhood psychoses	395	1%	348	1%	42	0%	5	0%
Neurotic & other depressive disorders	12,013	23%	2,527	11%	7,280	32%	2,206	39%
Personality disorders	322	1%	44	0%	246	1%	32	1%
Other mental disorders	1,293	2%	163	1%	272	1%	858	15%
Special symptoms or syndromes	2,083	4%	929	4%	984	4%	170	3%
Stress & adjustment reactions	4,113	8%	3,342	14%	665	3%	106	2%
Conduct disorders	1,952	4%	1,771	8%	155	1%	26	0%
Emotional disturbances	4,473	9%	4,472	19%	0	0%	1	0%
Hyperkinetic syndrome	7,656	15%	7,652	33%	2	0%	2	0%
No Diagnosis	45	0%	8	0%	20	0%	17	0%
Total	52,057	100%	23,435	100%	22,923	100%	5,699	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
MISSISSIPPI, 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	3	1	2	2	1%	3	38	17%	10
	4-5	5	17	5	14	10	2%	16	24	5%	5
	6-12	122	17	104	34	203	5%	28	97	2%	5
	13-18	338	19	284	36	553	16%	30	391	11%	7
	19-21	21	11	64	11	78	10%	12	276	34%	5
	22-44	41	0	910	9	944	11%	8	1,859	21%	6
	45-64	39	0	493	9	530	8%	8	1,620	24%	6
	65+	23	0	327	1	349	8%	1	1,624	36%	0
All Ages	590	15	2,188	12	2,669	9%	14	5,929	20%	4	
Male	0-3	3	9	0	0	3	1%	9	41	14%	12
	4-5	10	15	20	17	30	4%	16	30	4%	6
	6-12	429	19	312	38	650	8%	31	191	2%	7
	13-18	480	19	394	44	769	16%	34	239	5%	9
	19-21	30	19	72	14	90	17%	18	58	11%	13
	22-44	58	0	567	8	622	14%	7	609	14%	7
	45-64	36	0	225	6	257	10%	5	609	23%	7
	65+	12	0	83	1	95	8%	0	436	38%	0
All Ages	1,058	17	1,673	22	2,516	11%	22	2,213	10%	6	
Total	0-3	4	8	1	2	5	1%	7	79	15%	11
	4-5	15	16	25	16	40	3%	16	54	4%	6
	6-12	551	19	416	37	853	7%	30	288	2%	7
	13-18	818	19	678	41	1,322	16%	33	630	7%	8
	19-21	51	15	136	13	168	13%	15	334	25%	6
	22-44	99	0	1,477	8	1,566	12%	8	2,468	18%	6
	45-64	75	0	718	8	787	8%	7	2,229	23%	6
	65+	35	0	410	1	444	8%	1	2,060	36%	0
All Ages	1,648	16	3,861	16	5,185	10%	17	8,142	16%	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
MISSISSIPPI, 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	127	56%	0.13	2.13	2.26	16,832	35%	1.88
	4-5	160	35%	0.03	1.65	1.68	3,943	25%	1.53
	6-12	1,131	29%	0.05	1.48	1.53	8,536	18%	1.44
	13-18	1,425	41%	0.17	1.89	2.06	7,328	23%	1.65
	19-21	491	61%	0.32	2.31	2.63	5,547	33%	1.91
	22-44	4,779	53%	0.24	2.44	2.68	16,927	31%	2.01
	45-64	3,192	47%	0.17	2.29	2.46	8,963	33%	1.99
	65+	2,038	45%	0.03	2.06	2.09	17,210	29%	1.73
	All Ages	13,343	46%	0.17	2.19	2.36	85,286	28%	1.81
Male	0-3	139	49%	0.12	2.33	2.45	18,439	37%	1.93
	4-5	269	35%	0.03	1.68	1.71	4,430	27%	1.58
	6-12	2,274	29%	0.03	1.48	1.51	8,800	20%	1.45
	13-18	1,582	32%	0.10	1.57	1.67	5,050	19%	1.45
	19-21	213	40%	0.34	2.08	2.42	729	21%	1.74
	22-44	1,852	41%	0.24	2.25	2.49	5,193	29%	2.16
	45-64	1,026	38%	0.11	2.27	2.38	5,307	29%	2.04
	65+	475	42%	0.03	1.99	2.01	5,572	27%	1.82
	All Ages	7,830	34%	0.11	1.85	1.97	53,520	27%	1.80
Total	0-3	266	52%	0.12	2.24	2.36	35,274	36%	1.90
	4-5	429	35%	0.03	1.67	1.70	8,373	26%	1.56
	6-12	3,405	29%	0.04	1.48	1.52	17,336	19%	1.44
	13-18	3,007	36%	0.13	1.72	1.85	12,378	21%	1.57
	19-21	704	52%	0.32	2.24	2.57	6,276	31%	1.89
	22-44	6,631	49%	0.24	2.39	2.63	22,120	30%	2.04
	45-64	4,218	44%	0.16	2.29	2.44	14,270	31%	2.01
	65+	2,513	44%	0.03	2.05	2.07	22,782	29%	1.75
	All Ages	21,173	41%	0.15	2.07	2.21	138,809	28%	1.80

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
MISSISSIPPI, 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	7,023	7%	111	22%	6,912	7%
4-5	2,741	8%	444	36%	2,297	7%
6-12	12,282	12%	6,954	58%	5,328	6%
13-18	6,926	10%	4,216	50%	2,710	5%
19-21	2,023	9%	814	61%	1,209	6%
22-44	23,319	27%	10,955	82%	12,364	17%
45-64	24,077	44%	8,403	88%	15,674	35%
65+	32,351	38%	4,540	80%	27,811	35%
All Ages	110,742	20%	36,437	70%	74,305	15%

Notes: FFS mental health beneficiaries include all FFS beneficiaries who had one or more of the mental health diagnoses shown in Table 3 as a primary diagnosis on at least one Medicaid claim during 1999, or who received a clearly identifiable mental health service during 1999 (inpatient psychiatric service for age 65+ or under age 22, or nursing facility mental health service for age 65+).

Psychotropic drugs are defined as drugs in any of the categories shown on Table 7, as grouped by Multum prescription drug grouping software.

Non-mental health beneficiaries who are dual eligibles may have received mental health treatment under Medicare that is not seen in Medicaid coinsurance claims.

TABLE 7
PERCENT OF MEDICAID FFS MENTAL HEALTH BENEFICIARIES AGE 21 AND UNDER WHO
USED PRESCRIPTION PSYCHOTROPIC DRUGS,
BY DIAGNOSTIC CATEGORY AND DRUG TYPE
MISSISSIPPI, 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	340	47%	82%	19%	7%	3%	53%	6%
Major depression and affective psychoses	1,500	56%	38%	15%	10%	14%	43%	19%
Other psychoses	339	38%	67%	12%	4%	10%	43%	12%
Childhood psychoses	348	26%	37%	22%	3%	20%	34%	26%
Neurotic & other depressive disorders	2,527	37%	12%	16%	1%	8%	19%	37%
Personality disorders	44	20%	16%	11%	2%	5%	14%	43%
Other mental disorders	163	13%	10%	20%	1%	5%	11%	55%
Special symptoms or syndromes	929	13%	4%	10%	0%	4%	6%	64%
Stress & adjustment reactions	3,342	17%	6%	8%	1%	11%	10%	48%
Conduct disorders	1,771	20%	19%	9%	2%	19%	19%	37%
Emotional disturbances	4,472	17%	10%	6%	1%	17%	13%	41%
Hyperkinetic syndrome	7,652	21%	11%	8%	1%	66%	25%	15%
No Diagnosis	8	25%	0%	0%	0%	0%	0%	50%
Total	23,435	24%	14%	10%	2%	31%	20%	46%

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
MISSISSIPPI, 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	6,364	37%	90%	28%	8%	0%	53%	4%	
Major depression and affective psychoses	5,368	74%	44%	43%	8%	1%	59%	9%	
Other psychoses	1,525	39%	77%	27%	3%	0%	47%	7%	
Childhood psychoses	42	31%	64%	31%	2%	0%	36%	17%	
Neurotic & other depressive disorders	7,280	64%	20%	46%	1%	0%	42%	15%	
Personality disorders	246	54%	35%	39%	4%	1%	45%	15%	
Other mental disorders	272	38%	17%	32%	2%	0%	26%	40%	
Special symptoms or syndromes	984	34%	9%	31%	1%	0%	19%	44%	
Stress & adjustment reactions	665	56%	17%	43%	1%	0%	37%	22%	
Conduct disorders	155	34%	41%	30%	3%	3%	32%	22%	
Emotional disturbances	0	0%	0%	0%	0%	0%	0%	0%	
Hyperkinetic syndrome	2	0%	0%	50%	0%	0%	0%	50%	
No Diagnosis	20	35%	0%	20%	0%	0%	15%	45%	
Total	22,923	55%	48%	38%	5%	0%	48%	16%	

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
MISSISSIPPI, 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	772	33%	88%	31%	3%	0%	49%	5%
Major depression and affective psychoses	784	77%	52%	48%	4%	1%	65%	7%
Other psychoses	720	43%	59%	39%	1%	0%	48%	20%
Childhood psychoses	5	60%	20%	40%	0%	0%	20%	0%
Neurotic & other depressive disorders	2,206	57%	31%	48%	0%	1%	44%	18%
Personality disorders	32	50%	53%	28%	0%	0%	47%	22%
Other mental disorders	858	31%	31%	31%	0%	1%	28%	41%
Special symptoms or syndromes	170	39%	22%	39%	0%	0%	32%	36%
Stress & adjustment reactions	106	53%	25%	48%	0%	0%	40%	23%
Conduct disorders	26	42%	54%	50%	0%	4%	50%	19%
Emotional disturbances	1	0%	100%	0%	0%	0%	0%	0%
Hyperkinetic syndrome	2	100%	0%	50%	0%	0%	50%	0%
No Diagnosis	17	65%	76%	59%	0%	0%	71%	12%
Total	5,699	50%	45%	42%	1%	1%	45%	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+).