ASSESSMENT OF OVERALL DATA QUALITY AND COMPLETENESS LOUISIANA 1999 TABLES

Nine tables for each State show the use of mental health and other services by Medicaid beneficiaries with mental health diagnoses in 1999. Enrollment and claims data from the Medicaid Analytic eXtract (MAX) files from the Centers for Medicare & Medicaid Services (CMS) are the source for these analyses. Because Medicaid programs differ across the States, and because administrative data vary in completeness and quality, caveats about the State's data should be considered in interpreting the information contained in these tables.

Louisiana Data Comments

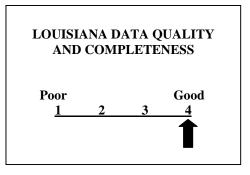
Dual Eligibles: According to MSIS (MAX) documentation, although states were supposed to report all dual eligibles, Louisiana did not include many dual eligibles with restricted benefits in its MAX data.

Diagnosis Codes: Diagnosis coding on claims was relatively complete, except on LT claims. Missing LT diagnoses are unlikely to have a significant impact on MH identification.

Race: Approximately 7 percent of enrollees are reported with unknown race.

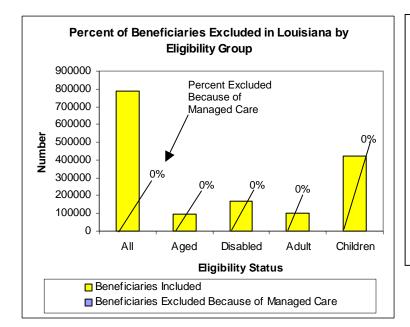
Restricted Benefits: Except in the case of dual eligibles, these tables do not distinguish beneficiaries with restricted benefit packages from those entitled to full Medicaid benefits. Each month, approximately 5,000 Louisiana enrollees were covered for a restricted set of benefits (only pregnancy-related services or only substance-abuse services). Because these individuals did not qualify for coverage of most mental health services, rates of identified mental health beneficiaries among the FFS population may appear low.

Inpatient Days: Louisiana's inpatient crossover claims rarely included covered days. This causes inpatient hospital stays for groups of Medicaid beneficiaries that include a high proportion of dual eligibles (most aged and many disabled beneficiaries) to average "0" days in length, and explains the other low numbers that appear for some groups on Table 4.



*The measure shown above reflects both managed care exclusions and other data issues noted to the left.

IMPACT OF MANAGED CARE EXCLUSIONS



Individuals who are enrolled in comprehensive or behavioral capitated programs for all months enrolled are *excluded* from Tables 2 - 9 in the attached set of tables; those enrolled in fee-for-service Medicaid for at least one month are *included* in Tables 2 - 9. The effects of these exclusions vary by state, and, within state, by eligibility group. Louisiana's managed care exclusions are shown in the graph on the left.

TABLE 1 MEDICAID BENEFICIARIES AND EXPENDITURES TOTAL AND FEE-FOR-SERVICE (FFS) LOUISIANA, CALENDAR YEAR 1999

		Benefi	iciaries			Expen	ditures	
Population Characteristics	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	786,601	100%	786,601	100%	\$2,514,396,738	100%	\$2,509,332,455	100%
Age								
0-3	140,043	18%	140,043	100%	\$199,299,570	8%	\$195,762,794	98%
4-5	52,759	7%	52,759	100%	\$43,050,797	2%	\$42,977,326	100%
6-12	163,332	21%	163,332	100%	\$143,845,862	6%	\$143,652,260	100%
13-18	101,931	13%	101,931	100%	\$151,279,727	6%	\$150,951,480	100%
19-21	34,323	4%	34,323	100%	\$100,118,005	4%	\$99,973,964	100%
22-44	133,867	17%	133,867	100%	\$623,024,067	25%	\$622,650,450	100%
45-64	66,298	8%	66,298	100%	\$529,080,736	21%	\$528,884,378	100%
65 and older	94,047	12%	94,047	100%	\$724,697,873	29%	\$724,479,702	100%
Gender	,		,		. , ,		, , ,	
Female	467,336	59%	467,336	100%	\$1,540,468,622	61%	\$1,537,797,558	100%
Male	319,217	41%	319,217	100%	\$973,779,518	39%	\$971,388,759	100%
Race								
White	255,887	33%	255,887	100%	\$1,176,220,146	47%	\$1,174,443,726	100%
Black	478,178	61%	478,178	100%	\$1,101,367,429	44%	\$1,098,298,185	100%
Hispanic	0	0%	0	0%	\$0	0%	\$0	0%
American Indian/Alaskan								
Native	0	0%	0	0%	\$0	0%	\$0	0%
Asian/Pacific Islander	0	0%	0	0%	\$0	0%	\$0	0%
Other/Unknown	52,536	7%	52,536	100%	\$236,809,163	9%	\$236,590,544	100%
Dual Status								
Aged Duals with Full								
Medicaid	75,329	10%	75,329	100%	\$672,005,831	27%	\$671,852,019	100%
Disabled Duals with Full								
Medicaid	36,649	5%	36,649	100%	\$371,852,502	15%	\$371,778,439	100%
Duals with Limited								
Medicaid	20,125	3%	20,125	100%	\$25,613,160	1%	\$25,600,651	100%
Other Duals	343	0%	343	100%	\$1,350,400	0%	\$1,343,131	99%
Disabled Non-Duals	123,924	16%	123,924	100%	\$836,440,605	33%	\$836,164,463	100%
All Other Non-Duals	530,231	67%		100%	\$607,134,240	24%	\$602,593,752	99%
Eligibility Group	,		,				•	
Aged	93,752	12%	93,752	100%	\$722,188,015	29%	\$721,987,822	100%
Disabled	166,855	21%	,	100%	\$1,219,207,036	48%	\$1,218,848,185	100%
Adults	103,135	13%	'	100%	\$214,507,824	9%	\$214,074,213	100%
Children	422,852	54%	,	100%	\$358,491,573	14%	\$354,419,945	99%

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 LOUISIANA, CALENDAR YEAR 1999

	Total Number of Beneficiaries	Beneficiaries			FFS Expenditures for Mental Health Population		
	in FFS Population	Number of Beneficiaries	Percent of Total FFS Beneficiaries	for FFS Population	Total Amount	Percent of Total FFS Expenditures	
All	786,601	67,009	9%	\$2,509,332,455	\$480,647,554	19%	
Age							
0-3	140,043	781	1%	\$195,762,794	\$3,338,423	2%	
4-5	52,759	1,497	3%	\$42,977,326	\$2,735,027	6%	
6-12	163,332	16,065	10%	\$143,652,260	\$35,202,146	25%	
13-18	101,931	9,727	10%	\$150,951,480	\$36,452,841	24%	
19-21	34,323	1,625	5%	\$99,973,964	\$12,818,322	13%	
22-44	133,867	16,909	13%	\$622,650,450	\$143,801,474	23%	
45-64	66,298	12,259	18%	\$528,884,378	\$134,926,753	26%	
65 and Older	94,047	8,146	9%	\$724,479,702	\$111,372,568	15%	
Gender							
Female	467,336	35,427	8%	\$1,537,797,558	\$281,212,746	18%	
Male	319,217	31,581	10%	\$971,388,759	\$199,434,303	21%	
Race							
White	255,887	26,412	10%	\$1,174,443,726	\$227,310,911	19%	
Black	478,178	34,635	7%	\$1,098,298,185	\$206,928,466	19%	
Hispanic	0	0	0%	\$0	\$0	0%	
American Indian/Alaskan							
Native	0	0	0%	\$0	\$0	0%	
Asian/Pacific Islander	0	0	0%	\$0	\$0	0%	
Other/Unknown	52,536	5,962	11%	\$236,590,544	\$46,408,177	20%	
Dual Status							
Aged Duals with Full							
Medicaid	75,329	6,963	9%	\$671,852,019	\$102,149,077	15%	
Disabled Duals with Full							
Medicaid	36,649	7,752	21%	\$371,778,439	\$84,361,129	23%	
Duals with Limited							
Medicaid	20,125	1,982	10%	. , ,	\$5,083,590	20%	
Other Duals	343	51	15%		\$317,744	24%	
Disabled Non-Duals	123,924	24,605	20%	\$836,164,463	\$222,168,027	27%	
All Other Non-Duals	530,231	25,656	5%	\$602,593,752	\$66,567,987	11%	
Eligibility Group							
Aged	93,752	8,132	9%	\$721,987,822	\$111,047,775	15%	
Disabled	166,855	33,533	20%	. , , ,	\$309,253,035	25%	
Adults	103,135	4,783	5%	\$214,074,213	\$18,750,976	9%	
Children	422,852	20,561	5%	\$354,419,945	\$41,595,768	12%	

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 LOUISIANA, CALENDAR YEAR 1999

		FFS Mental Health Population								
	All Ag	es	21 and U	21 and Under		64	65 and Older			
Diagnostic Category	Number	Percent	Number	Percent	Number	Percent	Number	Percent		
Schizophrenia	9,401	14%	336	1%	8,074	28%	991	12%		
Major depression and affective psychoses	12,814	19%	2,726	9%	8,071	28%	2,017	25%		
Other psychoses	3,904	6%	414	1%	1,890	6%	1,600	20%		
Childhood psychoses	758	1%	655	2%	83	0%	20	0%		
Neurotic & other depressive disorders	12,976	19%	2,988	10%	7,928	27%	2,060	25%		
Personality disorders	360	1%	100	0%	169	1%	91	1%		
Other mental disorders	1,729	3%	401	1%	503	2%	825	10%		
Special symptoms or syndromes	2,880	4%	1,466	5%	1,141	4%	273	3%		
Stress & adjustment reactions	2,319	3%	1,501	5%	682	2%	136	2%		
Conduct disorders	4,197	6%	3,750	13%	388	1%	59	1%		
Emotional disturbances	692	1%	684	2%	4	0%	4	0%		
Hyperkinetic syndrome	14,694	22%	14,660	49%	31	0%	3	0%		
No Diagnosis	285	0%	14	0%	204	1%	67	1%		
Total	67,009	100%	29,695	100%	29,168	100%	8,146	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 LOUISIANA, CALENDAR YEAR 1999

		Psychiatri	Psychiatric Hospital		Inpatient pital	Tota	I Inpatient Hos	spital		atient Hospital	
		. Sydinairi	o moophui	Mental Healt	Health Treatment Mental Health Treatment					Diagnoses	
Sex	Age Group	Number of Users	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	Number of Users	Percent of Total FFS Mental Health Beneficiaries	Average Annual Days Per User
Female	0-3	0	0	2	1	2	1%	1	45	14%	10
	4-5	10	8	2	2	12	3%	7	22	5%	4
	6-12	307	7	3	4	310	7%	7	159	4%	7
	13-18	728	9	21	3	742	19%	9	457	12%	4
	19-21	138	7	6	2	140	14%	7	340	35%	5
	22-44	1,777	9	439	1	2,068	19%	8	3,278	30%	5
	45-64	1,025	11	525	1	1,413	17%	8	3,269	40%	5
	65+	585	1	1,132	0	1,581	25%	0	4,531	73%	0
	All Ages	4,570	8	2,130	0	6,268	18%	6	12,101	34%	3
Male	0-3	0	0	2	2	2	0%	2	78		9
	4-5	38	6	2	4	40	4%	6	62	6%	4
	6-12	732	9		2	741	6%	8	368		4
	13-18	791	9	11	2	796	14%	9	219		7
	19-21	157	12	5	2	160	25%	12	56		12
	22-44	1,667	9		1	1,956	32%	8	1,920		4
	45-64	767	8		1	1,017	25%	6	1,571	39%	6
	65+	249	1	321	0	523	27%	1	1,317		1
	All Ages	4,401	8		0	5,235	17%	7	5,591	18%	4
Total	0-3	0	0	4	2	4	1%	2	123		9
	4-5	48	7	4	3	52	3%	6	84		4
	6-12	1,039	8		2	1,051	7%	8	527	3%	5
	13-18	1,519	9		3	1,538	16%	9	676		5
	19-21	295	10		2	300	18%	10	396		6
	22-44	3,444	9		1	4,024	24%	8	5,198		4
	45-64	1,792	10		1	2,430	20%	7	4,840		5
	65+	834	1	1,453	0	2,104	26%	0	5,848		0
	All Ages	8,971	8	3,433	0	11,503	17%	7	17,692	26%	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 LOUISIANA, CALENDAR YEAR 1999

		Mental H	lealth Beneficia	ries With Any	Emergency R	oom Use	Non- Menta	l Health Benefi	ciaries With
Sex	Age Group		Percent of	•	mber of Emer Users of Any	•	Any E	mergency Roo	m Use
Sex	Age Group	Number	Total FFS Mental Health Beneficiaries	For Mental Health Treatment	For Non- Mental Health Treatment	All ER Visits	Number	Percent of Total FFS Non-Mental Health Beneficiaries	Number of Emergency Room Visits for Users of Any ER Visits
Female	0-3	188		0.15	2.50		25,804	38%	
	4-5	221	46%	0.05	1.98	2.03	8,241	33%	1.76
	6-12	1,677	37%	0.15	1.70	1.85	18,582	25%	1.59
	13-18	2,048	53%	0.34	2.09	2.43	14,093	28%	1.74
	19-21	658	68%	0.40	2.74	3.13	9,470	35%	1.94
	22-44	6,641	62%	0.38	2.48	2.86	31,843	35%	1.99
	45-64	4,464	54%	0.30	2.34	2.64	12,209	37%	2.14
	65+	2,698	43%	0.15	2.05	2.20	15,815	24%	1.77
	All Ages	18,595	52%	0.30	2.28	2.57	136,057	32%	1.90
Male	0-3	292	64%	0.11	2.47	2.59	28,721	40%	2.16
	4-5	491	48%	0.05	2.00	2.05	9,382	36%	1.78
	6-12	4,287	37%	0.09	1.62	1.72	19,476	27%	1.60
	13-18	2,575	44%	0.22	1.72	1.94	11,212	26%	1.60
	19-21	334	51%	0.63	2.19	2.82	1,742	29%	1.95
	22-44	2,999	49%	0.58	2.31	2.89	8,385	32%	2.17
	45-64	1,830	46%	0.37	2.40	2.77	6,716	31%	2.14
	65+	821	43%	0.14	2.15	2.29	5,113	24%	1.85
	All Ages	13,629	43%	0.28	1.97	2.25	90,747	32%	1.91
Total	0-3	480	61%	0.13	2.48	2.61	54,526	39%	2.13
	4-5	712	48%	0.05	2.00	2.04	17,623	34%	1.77
	6-12	5,964	37%	0.11	1.64	1.75	38,059	26%	1.60
	13-18	4,623	48%	0.27	1.88	2.16	25,307	27%	1.68
	19-21	992	61%	0.47	2.55	3.03	11,212	34%	1.94
	22-44	9,640	57%	0.44	2.43	2.87	40,232	34%	2.03
	45-64	6,294	51%	0.32	2.36	2.68	18,926	35%	2.14
	65+	3,519		0.15	2.07	2.22	20,928	24%	1.79
	All Ages	32,224	48%	0.29	2.15	2.44	226,813	32%	1.90

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 PYSCHOTROPIC DRUG USE FOR MEDICAID FFS MENTAL HEALTH AND NON-MENTAL HEALTH BENEFICIARIES, BY AGE GROUP LOUISIANA, CALENDAR YEAR 1999

		eficiaries with opic Drug Use	Beneficiari	tal Health es with Any ic Drug Use	FFS <i>Non-Mental Health</i> Beneficiaries with Any Psychotropic Drug Use		
Age Group	Number	Percent of Total FFS Beneficiaries	Number	Percent of Total FFS MH Beneficiaries	Number	Percent of Total FFS Non-MH Beneficiaries	
0-3	10,560	8%	237	30%	10,323	7%	
4-5	5,573	11%	933	62%	4,640	9%	
6-12	23,403	14%	12,469	78%	10,934	7%	
13-18	12,723	12%	6,794	70%	5,929	6%	
19-21	3,551	10%	1,101	68%	2,450	7%	
22-44	34,136	26%	13,645	81%	20,491	18%	
45-64	31,343	31,343 47%		85%	20,973	39%	
65+	40,770	43%	6,319	78%	34,451	40%	
All Ages	162,059	21%	51,868	77%	110,191	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 LOUISIANA, CALENDAR YEAR 1999

			Type of Psychotropic Drug							
Diagnostic Category	Number of FFS MH Beneficiaries by Diagnostic Category	sants	Antipsycho- tics	Anti-Anxiety Agents	Mood Stabilizing Agents	Stimulants	More than One Psychotro- pic Drug Type	No Psychotro- pic Drug Use		
Schizophrenia	336	45%	75%	31%	10%	9%	57%	10%		
Major depression and affective psychoses	2,726	70%	29%	20%	9%	18%	46%	12%		
Other psychoses	414	38%	68%	26%	6%	14%	49%	10%		
Childhood psychoses	655	23%	29%	24%	3%	19%	28%	28%		
Neurotic & other depressive disorders	2,988	53%	10%	24%	1%	14%	29%	24%		
Personality disorders	100	22%	15%	13%	1%	28%	21%	31%		
Other mental disorders	401	8%	4%	12%	3%	5%	6%	72%		
Special symptoms or syndromes	1,466	14%	4%	12%	0%	4%	6%	63%		
Stress & adjustment reactions	1,501	28%	8%	13%	1%	11%	16%	40%		
Conduct disorders	3,750	20%	12%	12%	2%	19%	18%	36%		
Emotional disturbances	684	36%	14%	13%	4%	31%	29%	27%		
Hyperkinetic syndrome	14,660	20%	6%	13%	1%	84%	27%	7%		
No Diagnosis	14	21%	14%	21%	0%	7%	14%	43%		
Total	29,695	29%	12%	15%	2%	49%	27%	27%		

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 LOUISIANA, CALENDAR YEAR 1999

Diagnostic Category	Number of FFS MH Beneficiaries by Diagnostic Category	Antidepres- sants	Antipsycho- tics	Anti-Anxiety Agents	Mood Stabilizing Agents	Stimulants	More than One Psychotro- pic Drug Type	No Psychotro- pic Drug Use
Schizophrenia	8,074	43%	84%	41%	10%	0%	62%	4%
Major depression and affective psychoses	8,071	71%	43%	52%	12%	1%	65%	7%
Other psychoses	1,890	36%	66%	39%	4%	0%	48%	11%
Childhood psychoses	83	35%	48%	42%	7%	1%	42%	11%
Neurotic & other depressive disorders	7,928	63%	17%	60%	2%	1%	49%	11%
Personality disorders	169	53%	27%	42%	9%	0%	46%	22%
Other mental disorders	503	32%	28%	39%	3%	0%	31%	30%
Special symptoms or syndromes	1,141	40%	11%	40%	1%	1%	27%	35%
Stress & adjustment reactions	682	56%	22%	53%	2%	1%	44%	15%
Conduct disorders	388	40%	58%	43%	12%	2%	51%	14%
Emotional disturbances	4	50%	25%	50%	0%	0%	50%	0%
Hyperkinetic syndrome	31	48%	23%	26%	6%	39%	42%	6%
No Diagnosis	204	37%	11%	28%	1%	0%	25%	31%
Total	29,168	56%	47%	49%	7%	1%	55%	18%

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 LOUISIANA, CALENDAR YEAR 1999

Diagnostic Category	Number of FFS MH Beneficiaries by Diagnostic Category	Antidepres- sants	Antipsycho- tics	Anti-Anxiety Agents	Mood Stabilizing Agents	Stimulants	More than One Psychotro- pic Drug Type	No Psychotro- pic Drug Use
Schizophrenia	991	42%	85%	43%	6%	1%	62%	5%
Major depression and affective psychoses	2,017	74%	50%	55%	5%	3%	67%	4%
Other psychoses	1,600	41%	50%	42%	1%	2%	44%	19%
Childhood psychoses	20	30%	45%	45%	0%	0%	35%	40%
Neurotic & other depressive disorders	2,060	54%	24%	55%	0%	1%	45%	10%
Personality disorders	91	23%	37%	26%	1%	0%	23%	31%
Other mental disorders	825	31%	34%	38%	1%	1%	32%	32%
Special symptoms or syndromes	273	37%	31%	46%	0%	2%	40%	25%
Stress & adjustment reactions	136	49%	20%	46%	0%	1%	41%	15%
Conduct disorders	59	51%	73%	66%	0%	5%	69%	14%
Emotional disturbances	4	25%	25%	25%	0%	0%	25%	25%
Hyperkinetic syndrome	3	0%	0%	33%	0%	0%	0%	33%
No Diagnosis	67	57%	51%	40%	0%	3%	51%	13%
Total	8,146	52%	45%	48%	2%	2%	51%	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+).