



Quality of Care and Health Care Utilization Among Foster Children In Mississippi Medicaid

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BACKGROUND	METHODS
Children placed in foster care are among our nation's most vulnerable populations. Foster care children tend to have more serious mental and medical health conditions when compared to other children. ¹ Objective : The objective of this project was to compare the mental health status and treatment of mental health conditions among foster and non-foster children enrolled in Mississippi Medicaid.	A retrospective analysis was conducted using Mississippi Medicaid administrative claims for calendar years of 2013 and 2014. Beneficiaries were included if they were less than 21 years of age and eligible for services for at least one month during the observation year. Foster children were identified using Medicaid eligibility codes (003, 005, 026). All study variables were weighted based on age and race in order to provide the best comparison of health care utilization between foster and non-foster children.

RESULTS

The analyses included 440,290 children in 2013 and 463,263 children in 2014. The study population was approximately 49% male in both the foster and non-foster groups. African-Americans made up 46% of foster children and 60% of non-foster children. Caucasians made up 49% and 33% in foster and non-foster groups, respectively.

Prevalence of Mental Health Diagnoses Among Children in the Mississippi Medicaid Fee-For-Service Program (Weighted Rates ^a)						
	Beneficiaries With Diagnosis in Medical Claims During Reporting Year					
	20:		2014			
Diagnosis ^c	Foster Children ^b (n = 7,533)	All Other Children (n = 432,757)	Foster Children ^b (n = 8,694)	All Other Children (n = 454,569)		
Any mental heatlh diagnosis below*	45.2%	18.4%	45.7%	18.9%		
Autism*	1.4%	0.7%	1.3%	0.7%		
Alcohol Abuse Dependence* ⁽²⁰¹³⁾	0.1%	0.0%	0.1%	0.0%		
Adjustment reactions (other)*	12.0%	1.6%	10.8%	1.5%		
Attention deficit disorder (ADD)*	21.5%	8.4%	22.1%	8.6%		
Anxiety Disorders*	3.4%	1.8%	3.8%	2.0%		
Bipolar*	2.1%	0.4%	2.1%	0.4%		
Conduct disorder*	9.3%	2.6%	9.4%	2.5%		
Depression*	5.2%	1.4%	5.9%	1.5%		
Drug abuse / dependence*	2.6%	0.9%	3.1%	0.9%		
Eating Disorders*	0.2%	0.1%	0.2%	0.1%		
Developmental Disorders*	7.6%	3.4%	6.7%	3.5%		
Oppositional defiance disorder (ODD)*	11.1%	2.9%	11.5%	2.9%		
Personality Disorder*	1.5%	0.3%	1.2%	0.2%		
Stress Reactions*	4.0%	0.7%	4.6%	0.7%		
Schizophrenia / delusion*	1.3%	0.3%	1.6%	0.4%		
Sleeping disorder*	2.3%	1.1%	2.7%	1.1%		
Suicide / attempted suicide	0.1%	0.0%	0.2%	0.0%		
Special Symptoms or Syndromes*	0.3%	0.3%	0.4%	0.3%		
Miscellaneous other mental health diagnoses*	9.1%	1.8%	9.5%	1.9%		
Mental retardation ^{*(2008)} (not included in Any Mental Health Diagnosis)	0.8%	0.3%	0.9%	0.3%		

TABLE 1

a Annual rates weighted to age group and race distribution of "all other" children in 2011.

^b Includes children eligible for Medicaid as foster children (COE = 003, 007, 026) for at least one month during reporting year.

^c Beneficiary classified as having condition if diagnosis code appeared in medical claims during reporting year. (ICD-9 codes are listed in Appendices).

* Percentages ARE significantly different for two groups (p < 0.01).

45-46% of foster children had at least one mental health diagnosis, compared to 18-19% of non-foster children. Prevalence rates for mental health illnesses such as psychosis, bipolar-disorder, depression, ADHD were all higher in the foster children population. 20-21% of foster children received at least one mental health medication compared to 7% of non-foster children. A significantly higher proportion of foster children used each class of mental health drug but had similar utilization rates for narcotic analgesics.

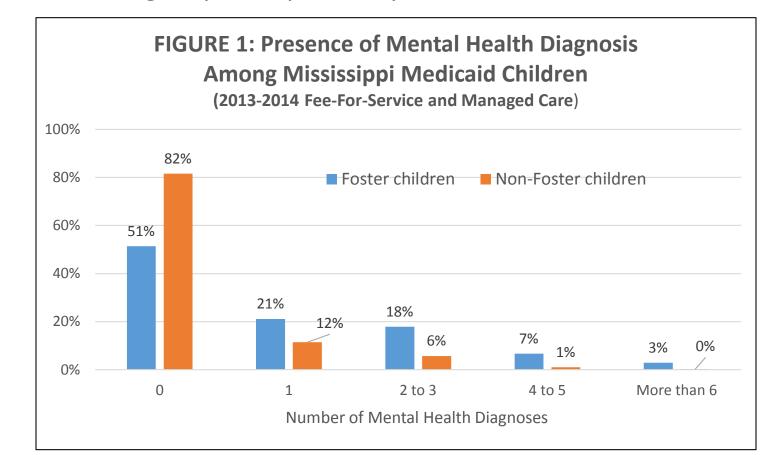


FIGURE 2: Number of Mental Health Drugs Taken For <u>>60 Days Among Mississippi Medicaid Children</u> (2013-2014 Fee-For-Service and Managed Care)

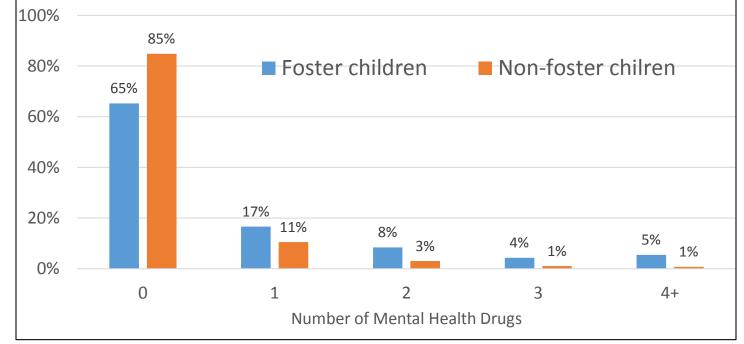


TABLE 2 Use of Mental Health Medications Among Children in the Mississippi Medicaid Fee-For-Service Program (Weighted Rates ^a)							
			otions During Observation Year				
	2008 Foster	All Other	2009 Foster All Other				
	Children ^b	Children	Children ^b	Children			
Drug Class ^c	(n = 5,777)	(n = 418,391)	(n = 6,076)	(n = 441,814)			
ANY of the mental heatlh drugs below*	20.7%	7.1%	20.3%	7.3%			
Mean # different MH drugs*	0.4	0.1	0.4	0.1			
Barbiturates	0.0%	0.0%	0.0%	0.0%			
Benzodiazepines	0.1%	0.1%	0.1%	0.1%			
Misc. anxiolytics, sedatives and							
hypnotics*	0.5%	0.2%	0.6%	0.2%			
Central nervous system stimulants*	17.8%	5.9%	17.6%	6.4%			
Antidepressants - ANY*	5.9%	1.5%	6.4%	1.6%			
Phenylpiperazine antidepressants*	1.2%	0.2%	1.3%	0.2%			
SSNRI antidepressants ^{*(2014)}	0.1%	0.0%	0.1%	0.0%			
SSRI antidepressants*	4.8%	1.2%	5.2%	1.4%			
Tetracyclic antidepressants*	0.3%	0.1%	0.2%	0.1%			
Tricyclic antidepressants*	0.7%	0.3%	0.5%	0.3%			
Miscellanious*	0.7%	0.1%	0.6%	0.1%			
Antipsychotics - ANY*	8.7%	1.6%	8.6%	1.6%			
Atypical antipsychotics*	8.6%	1.6%	8.6%	1.6%			
Conventinal (typical) antipsychotics*	0.9%	0.1%	1.2%	0.1%			
Anticonvulsants*	5.4%	1.7%	6.1%	2.0%			
Narcotic analgesics	8.0%	8.3%	7.6%	8.1%			

a Annual rates weighted to age group and race distribution of "all other" children in 2011.

^b Includes children eligible for Medicaid as foster children (COE = 003, 007, 026) for at least one month during reporting year.

^c Beneficiaries filling at least one prescription for drug class.

* Percentages ARE significantly different for two groups (p < 0.01).

DISCUSSION

Results indicate that although use of mental health drugs is higher in foster children, the increased use appears to be linked to increased morbidity rather than differences in treatment patterns for conditions existing in each population.

REFERENCES

 GAO, Foster Care: State Practices for Assessing Health Needs, Facilitating Service Delivery, and Monitoring Children's Care. GAO-09-26, (Washington, D.C.: February 6, 2009).

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