



An In-Depth Look at Georgia County-Level Data on Mental Disorder Prevalence, Treatment, and Other Health-Related Factors

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22nd Annual Rosalynn Carter Georgia Mental Health Forum
May 12, 2017

Diving a Little Deeper into Georgia-Specific Data

- County-level prevalence of mental disorders among children with Medicaid
 - Types of treatment received
- Distribution of health care providers across the state
- Resources on county-level data for other indicators



Mental Disorder Prevalence and Treatment

Administrative Data

- Supplement information gained from national surveys
 - Characterize health care utilization among children with diagnosed mental disorders
 - Provide greater breadth of information
 - Provide opportunity for longitudinal examination
- Methodological differences
 - Differences in case ascertainment
 - Reliance on insurance status and health care utilization

Objective

- To provide estimates on the prevalence of mental disorders among children aged 2-8 years enrolled in Georgia Medicaid in 2012
 - Estimate the percentage of children with mental disorders receiving medication and psychological treatment services
 - State-wide and by county

Methods: Identifying Mental Disorders in Medicaid Claims

- Case definition: Child had 2+ outpatient claims at least 7 days apart or 1+ inpatient claims with an ICD-9 diagnosis code for these disorders:

	ICD-9 Code
Attention-Deficit/Hyperactivity Disorder (ADHD)	314.XX
Oppositional Defiant Disorder or Conduct Disorder	312.8X, 312.9, 313.81
Depression	300.4, 311
Anxiety, Obsessive Compulsive Disorder (OCD), or Post-Traumatic Stress Disorder (PTSD)	300.0X, 300.3, 301.4, 309.21, 309.81
Tic Disorder	307.2X

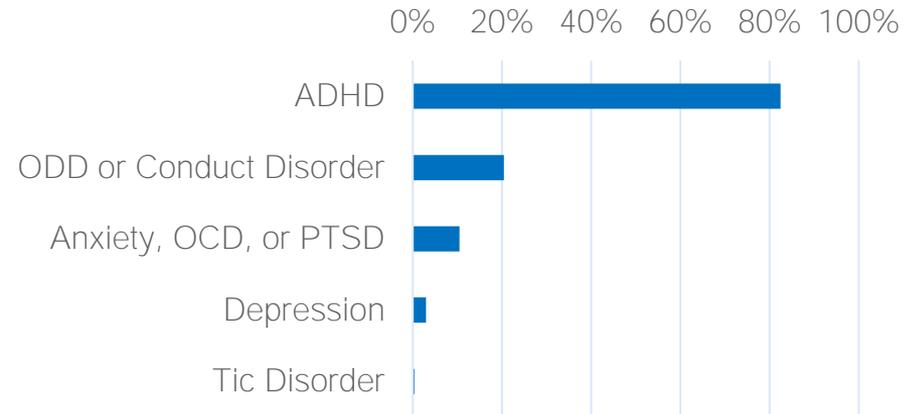
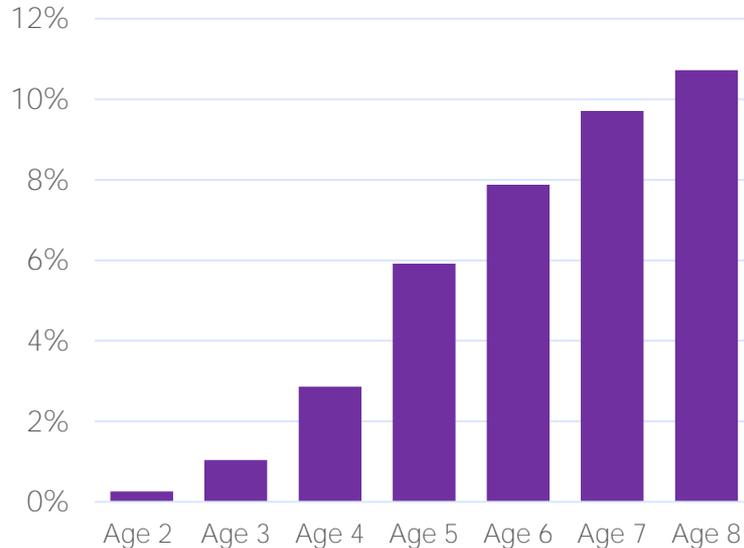
- Different set of conditions than included in previous presentation MMWRs

Methods: Identifying Treatment Received

- Among children identified as receiving clinical care for at least one of the included disorders
 - Medication: 1+ claims for a psychotropic prescription medication
 - Psychological treatment services: 1+ outpatient claims with a procedure code for a psychological treatment service
 - Included procedure codes
 - CPT:** 90804–90819, 90821–90824, 90826–90829, 90832–90834, 90836–90840, 90845–90847, 90849, 90853, 90857, 99354–99355, and 99510
 - HCPCS:** G0410, G0411, H0035–H0037, H2012–H2013, H2017–H2020, S9480, and T1027

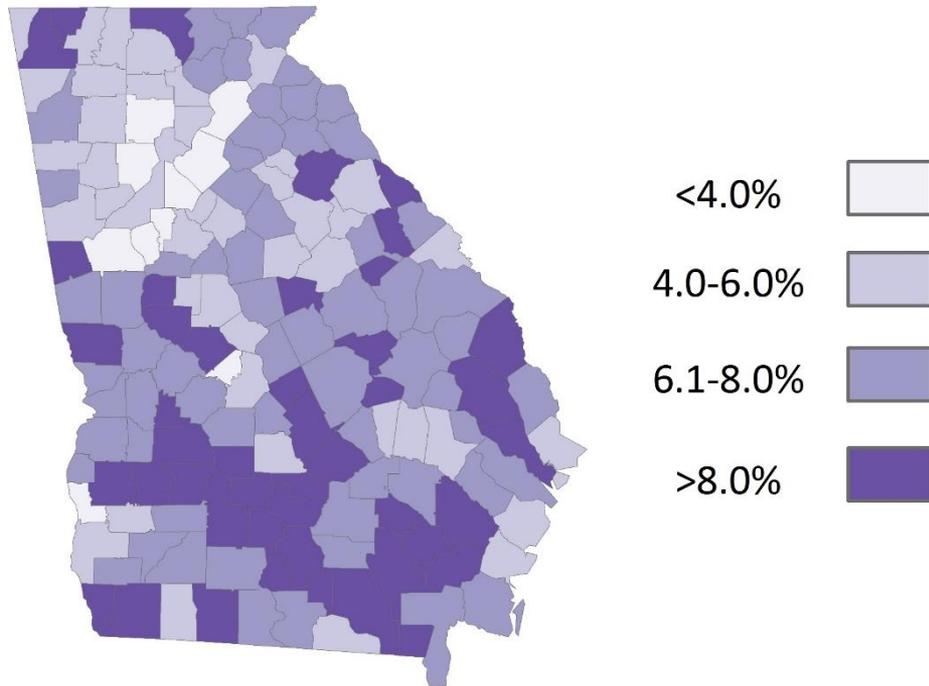
Results

- 500,668 children aged 2-8 years enrolled in Medicaid in 2012
- 5.2% met case definition for a mental disorder



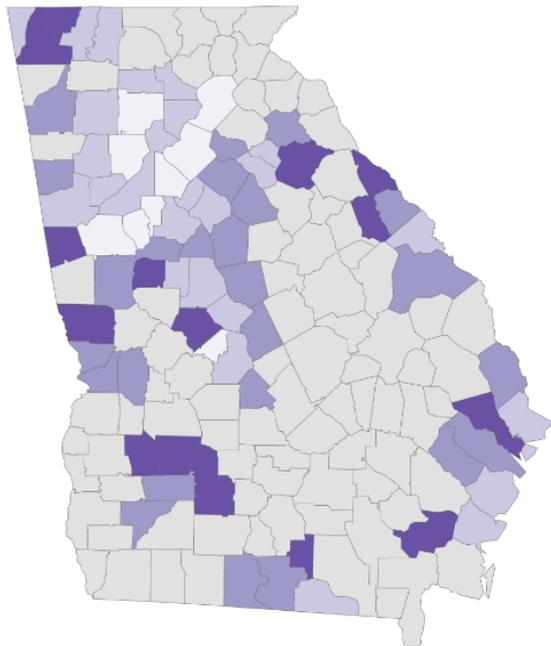
Percentage of children aged 2-8 years enrolled in Georgia Medicaid who met case definition for at least one mental disorder, 2012

Georgia: 5.2%

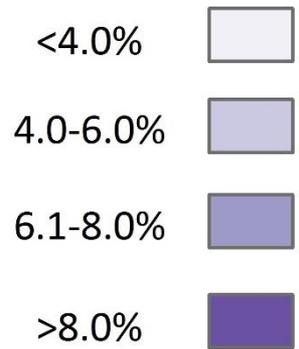
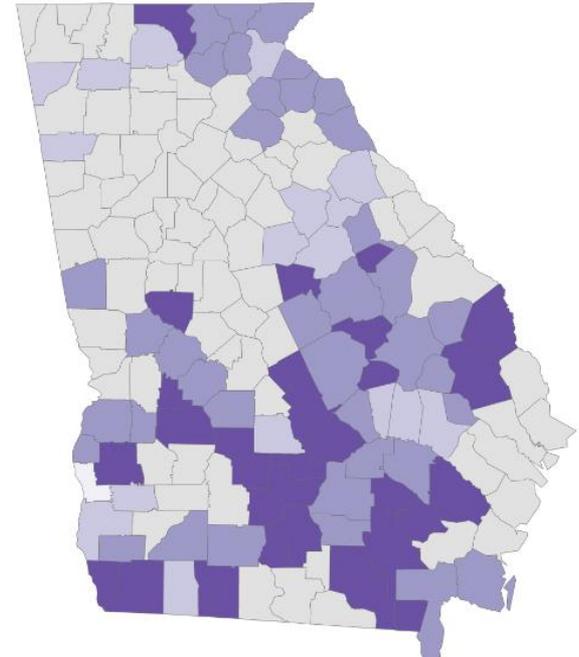


Percentage of children aged 2-8 years enrolled in Georgia Medicaid who met case definition for at least one mental disorder, 2012

Metropolitan counties

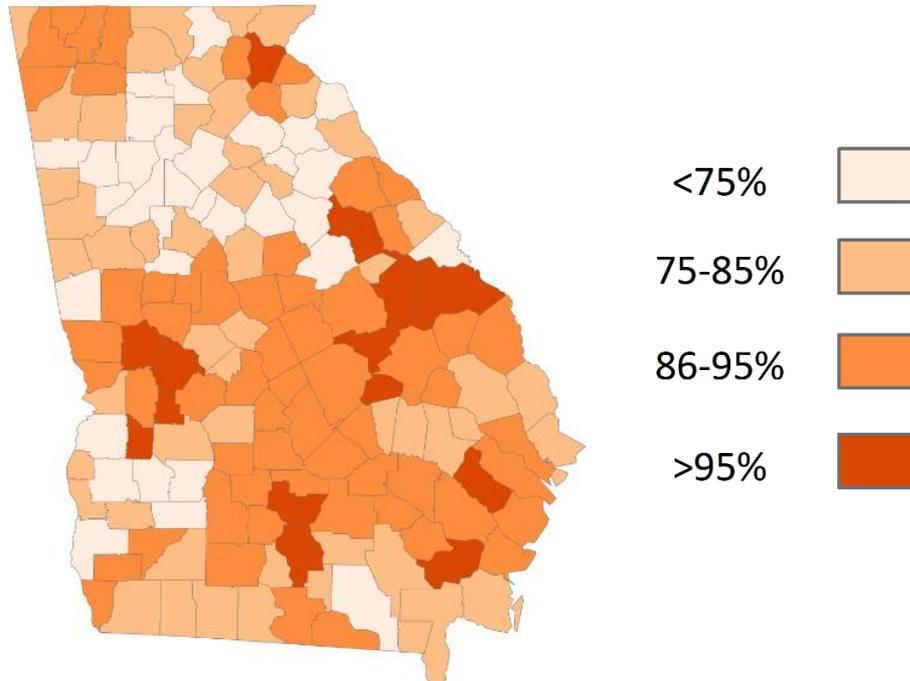


Non-metropolitan counties



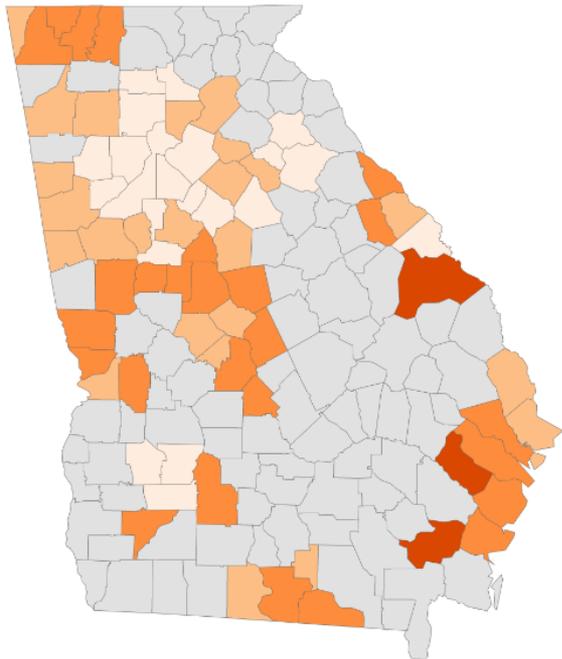
Percentage of children aged 2-8 years with a mental disorder and enrolled in Medicaid who received psychotropic medication, 2012

Georgia: 77.9%

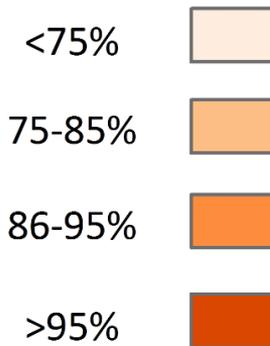
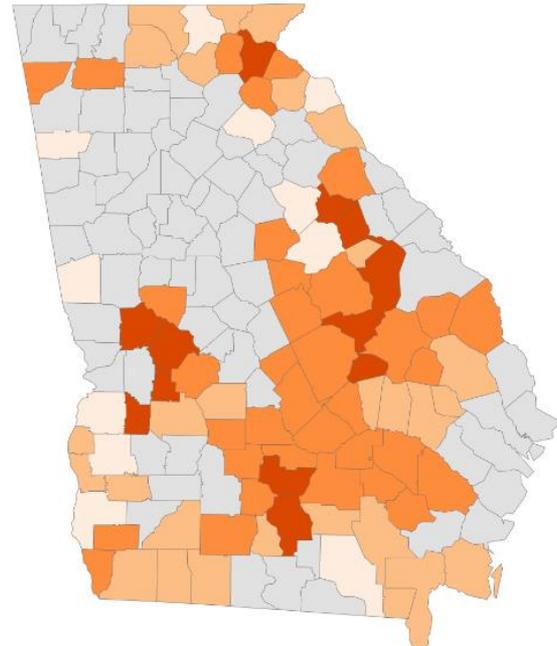


Percentage of children aged 2-8 years with a mental disorder and enrolled in Medicaid who received psychotropic medication, 2012

Metropolitan counties

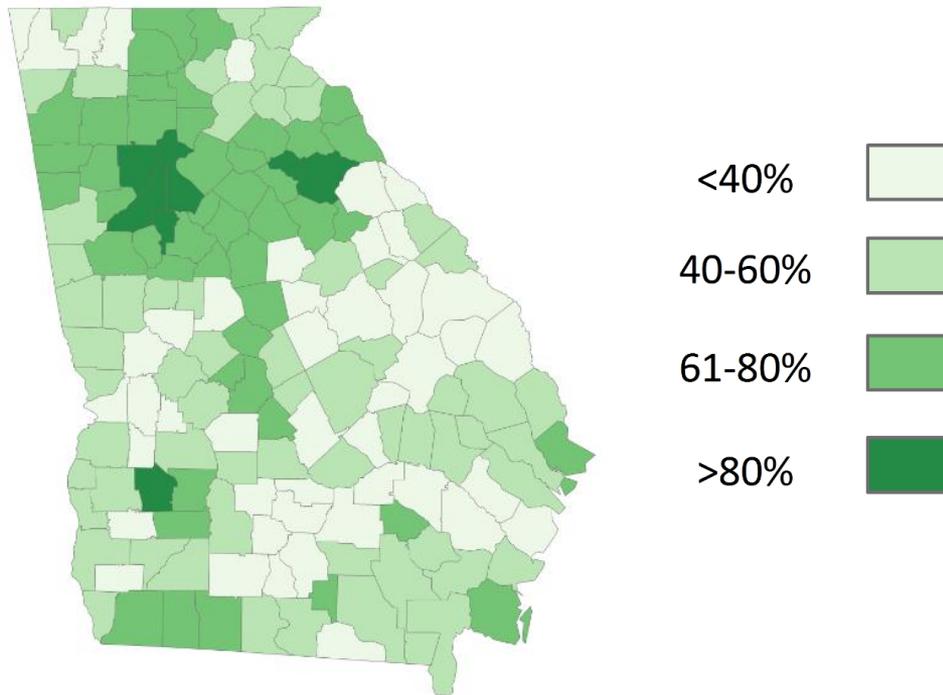


Non-metropolitan counties



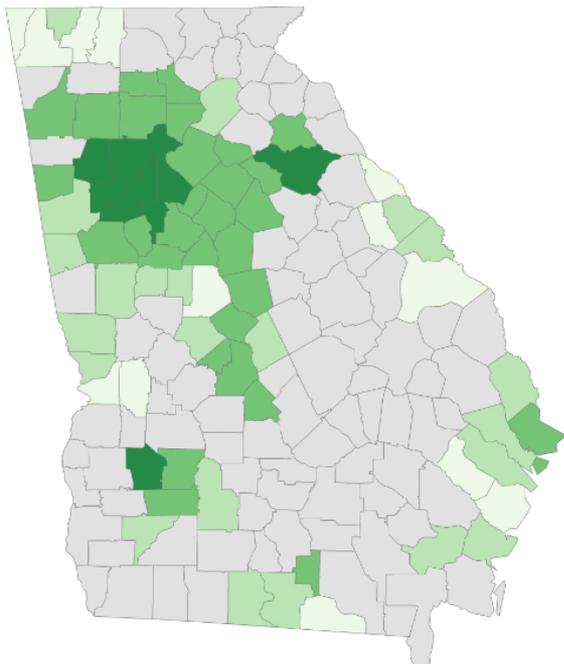
Percentage of children aged 2-8 years with a mental disorder and enrolled in Medicaid who received psychological treatment services, 2012

Georgia: 60.0%

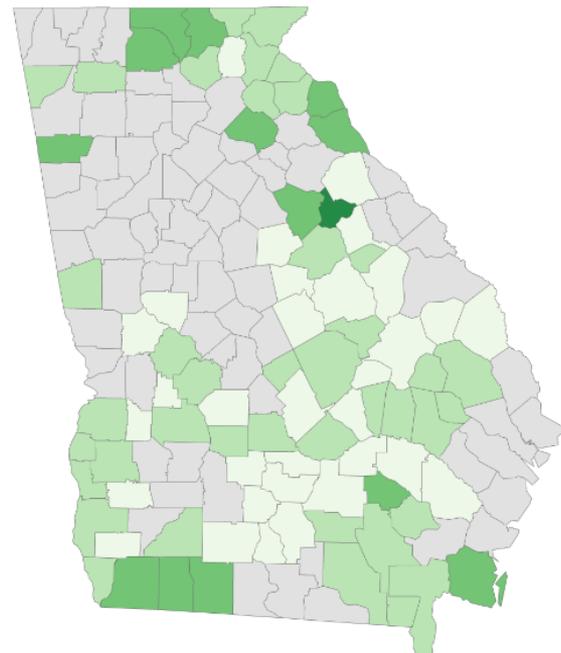


Percentage of children aged 2-8 years with a mental disorder and enrolled in Medicaid who received psychological treatment services, 2012

Metropolitan counties



Non-metropolitan counties



<40%



40-60%



61-80%



>80%



Unpublished analyses

Data source: Medicaid Analytic eXtract (MAX) 2012

Discussion

- 1 in 20 children aged 2-8 years enrolled in Medicaid in Georgia received clinical care for a mental disorder in 2012
 - Most of these children received psychotropic medication and more than half received psychological treatment services
 - There is substantial variation in both prevalence and treatment rates across counties in Georgia
- These rates focus on children receiving clinical care for a mental disorder
 - Unable to identify children who have not yet received a diagnosis or obtained enough clinical care to meet case definition

Health Care Provider Densities

Health Care Providers

- Understanding the distribution of health care providers throughout the state can be used
 - To identify infrastructure deficits
 - To target interventions to areas with service deficits
 - As a proxy for health care access in analyses that evaluate the impact of Medicaid policies on health care utilization and outcomes

Georgia Health Care Provider Density Maps

- Number of providers per 10,000 children aged 0-17 years by county
 - Pediatricians
 - Psychiatrists
 - Psychologists
 - Licensed social workers

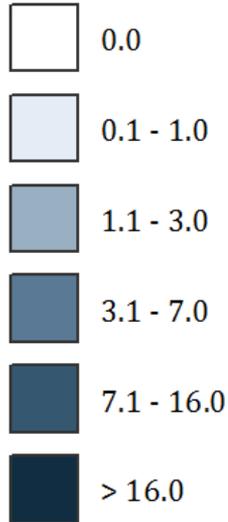
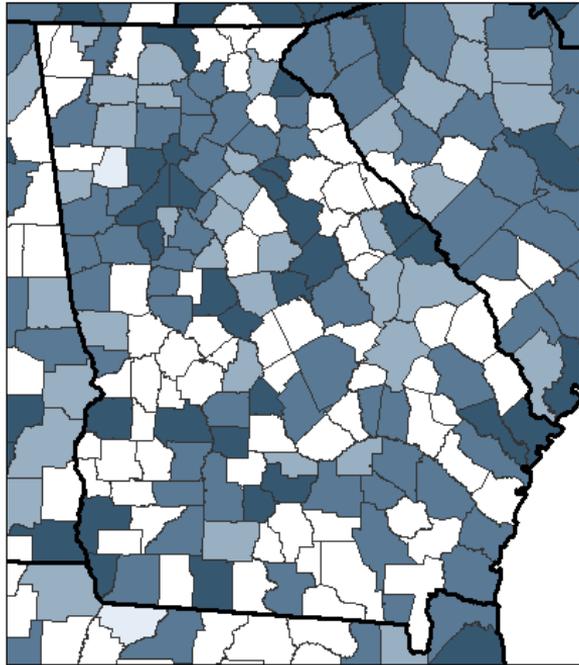
- Available on CDC website:

<http://www.cdc.gov/ncbddd/adhd/stateprofiles-providers/index.html>

Georgia Provider Densities - Physicians

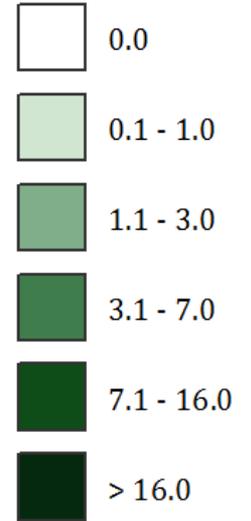
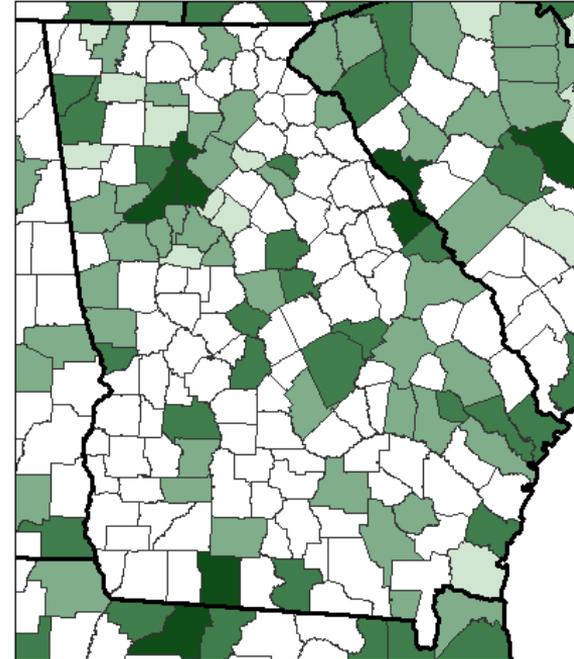
Pediatricians, 2015

Number per 10,000 children aged 0-17 years



Psychiatrists, 2015

Number per 10,000 children aged 0-17 years



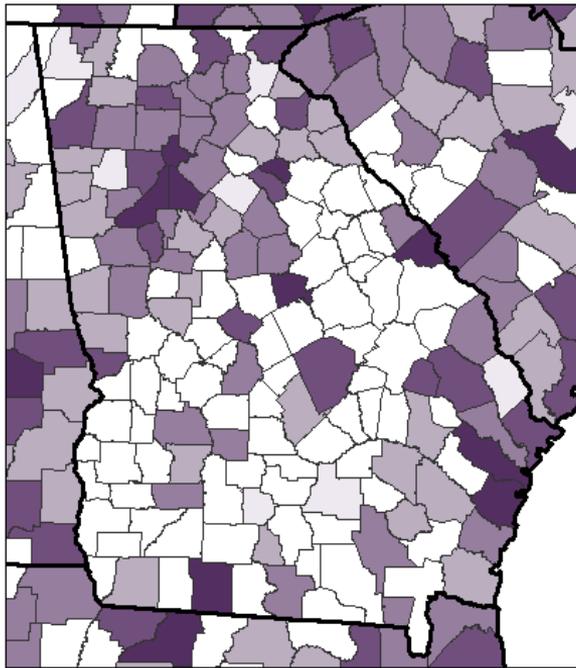
Data source: American Medical Association Masterfile

<http://www.cdc.gov/ncbddd/adhd/stateprofiles-providers/index.html>

Georgia Provider Densities – Other Providers

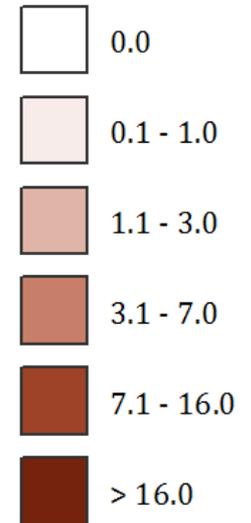
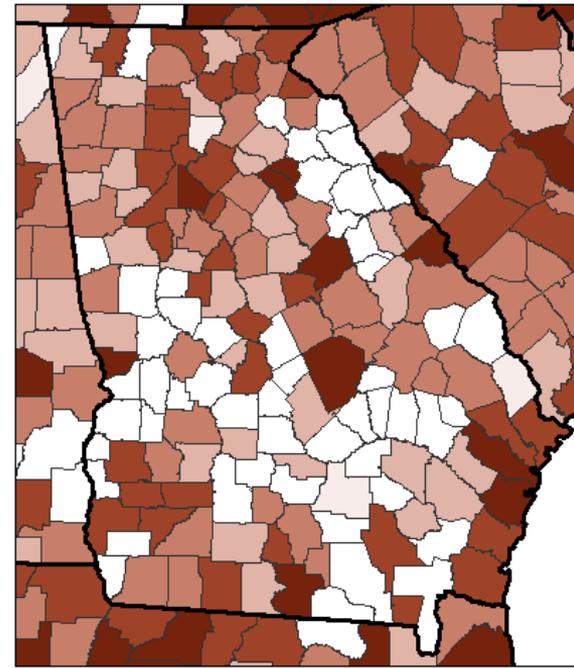
Psychologists, 2015

Number per 10,000 children aged 0-17 years



Licensed Social Workers, 2015

Number per 10,000 children aged 0-17 years

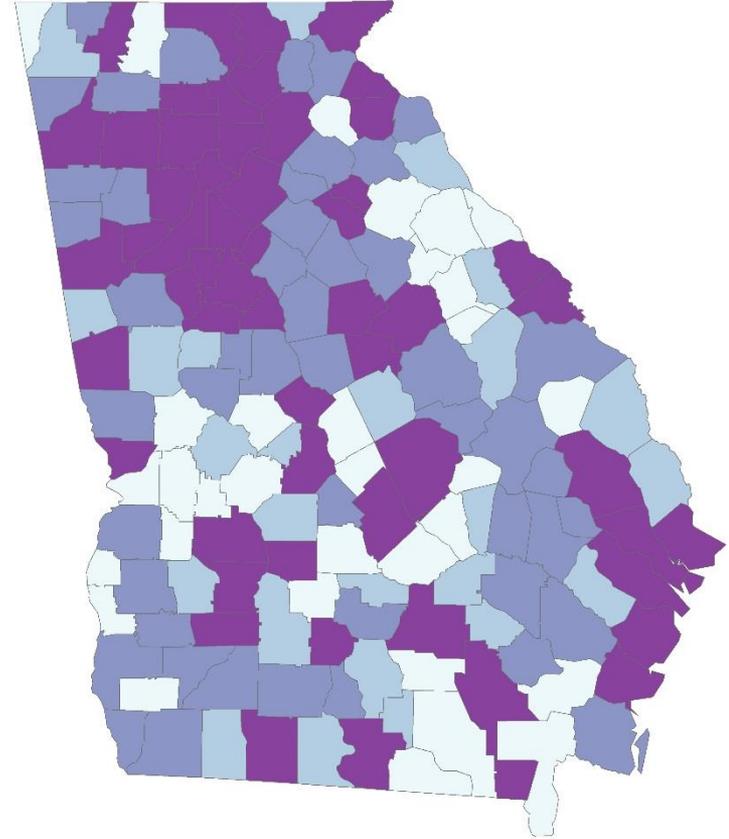


Data source: Hugo Dunhill

<http://www.cdc.gov/ncbddd/adhd/stateprofiles-providers/index.html>

Georgia Provider Densities

- Rough index of overall provider density
 - 32 counties that had none of any of the four types of providers (white)
 - Remaining counties color-coded by average provider density rank
 - Purple counties have greater provider density than blue counties



Other Data Sources

County Health Rankings & Roadmaps

- <http://www.countyhealthrankings.org>
- Sponsored by the Robert Wood Johnson Foundation
- Aggregated county data on health outcomes and related factors
 - Education and employment
 - Children in poverty or eligible for free/reduced price lunch, income inequality
 - Severe housing problems
 - Access to exercise opportunities
 - Frequent physical or mental distress
 - Food insecurity
- Data Sources: BRFSS, ACS, CMS, FBI, HRSA, NVSS, U.S. Census, etc.

Overview

Rankings

Measures

Downloads

Compare Counties

Select a county

Print

Help

Select a Measure:

HEALTH FACTORS
UNINSURED



Uninsured

Percentage of population under age 65 without health insurance. [Learn more about this measure.](#)

Ranking Methodology

Summary Measure: Health Factors - Clinical Care (Access to Care)

Weight in Health Factors: 5%

Years of Data Used: 2014

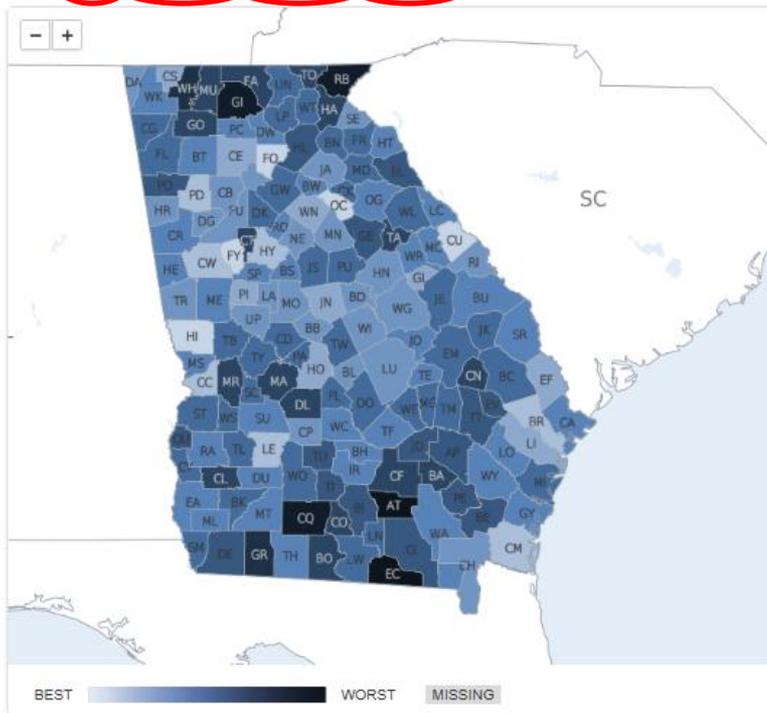
Summary Information

Range in Georgia (Min-Max): 12-31%

Overall in Georgia: 18%

Top U.S. Performers: 8% (10th percentile)

Map [Data](#) [Description](#) [Data Source](#) [Policies](#)



<http://www.countyhealthrankings.org>

Conclusion

- There are several sources of data that can be used to characterize mental health and other health-related factors in Georgia
- High level of variability in these indicators across counties
- Other sources of data are important to identifying specific barriers to related to mental health care access and utilization
 - Can be used to target community-specific interventions or develop policies to address these barriers at the state level

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For more information, contact CDC
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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

