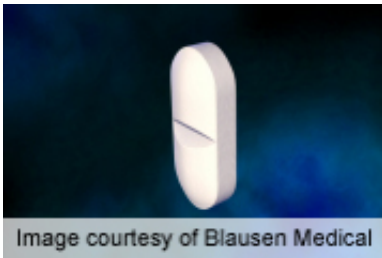


Medicaid-insured children have higher prescription use

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(HealthDay)—Regional variation exceeds payer-related differences in prescription use among children, according to a study published online Aug. 11 in *Pediatrics*.

Shelsey J. Weinstein, from the Geisel School of Medicine at Dartmouth in Hanover, N.H., and colleagues quantified overall and drug group-specific prescription use among 949,821 children aged 0 to 17 years. Northern New England all-payer administrative data (2007 to 2010) enabled the evaluation of prescription use by payer type and within payer type across 69 hospital service areas (HSAs).

The researchers found the 54 percent of children were covered by Medicaid and 46 percent by commercial payers. Mean annual [prescriptions](#) were 3.4 per person-year for commercial patients and 5.5 for Medicaid patients. Payer type differences were smaller than HSA-

level variation within payer type. There were two-fold variations in HSA-level rates of attention-deficit/hyperactivity disorder drug use (fifth to 95th percentile) in Medicaid patients and more than two-fold variation in commercially-insured children. Similarly, within each payer type, HSA-level antidepressant use varied more than two-fold. The variation was three-fold for antacid use across HSAs and was highest in infants where commercial use exceeded Medicaid use.

"Efforts should advance best pediatric prescribing discussions and shared decision-making," the authors write.

More information: [Abstract](#)
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