

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 1999 OHIO

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TABLE 1  
OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION  
OHIO, 1999

Inclusion Criteria (1999)	No. of Dual and Non-dual Eligible Benes (Cell)	No. of Dual Eligible Benes (Cell) <sup>g</sup>
1. Benes who were eligible for Medicaid during at least one month <sup>a</sup>	1,386,016 (A)	219,622 (E)
2. Benes who had Medicaid pharmacy benefits during at least one month <sup>b</sup>	1,365,939 (B)	200,307 (F)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month <sup>c, d, e</sup>	1,219,410 (C)	200,192 (G)
4. Benes who were all-year nursing facility residents <sup>f</sup>	60,806 (D)	56,550 (H)

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

- a. MAX data element "Eligible Months Count" was used to determine an individual's Medicaid eligibility. All individuals who had a value greater than zero were considered as beneficiaries and counted in Cell A.
- b. Counts in Cell B were obtained by excluding from Cell A beneficiaries who never had pharmacy benefit coverage during their Medicaid enrollment in 1999 (based on MAX data element "Eligible Restricted Benefits Flag"). Characteristics of beneficiaries represented by Cell B are shown in Appendix Table A.1.
- c. Cell C represents the study population for Tables 2 through 7D. Cell C was obtained by excluding from Cell B beneficiaries who were under MC plans during all months of Medicaid eligibility in 1999, because the MAX files would not include separate prescription drug claims for those beneficiaries. MC plans include HMOs, PHPs, or other MC organizations that provided pharmacy benefits under capitation arrangements. Beneficiaries included are those who were in fee-for-service, PCCM, or PHP plans in selected states. Beneficiaries in PHPs were included if they were in one of 18 states where no PHP in the state provided a pharmacy benefit (see footnote e). For all other states, beneficiaries in PHPs were excluded. For example, if a beneficiary was under fee-for-service, PCCM, or PHPs in one of the 18 states for three months of the year but enrolled in an MC plan for the remaining nine months, only the three months were counted toward the number of benefit months associated with the beneficiary. Therefore, benefit months included represent the benefit months with fee-for-service pharmacy benefits. Beneficiaries and their benefit months included and excluded based on this criterion are shown in Appendix Table A.2.
- d. The total Medicaid pharmacy reimbursement for Ohio in 1999 was \$783,450,293, of which \$1,223,705 was excluded from our analysis because those claims were made for beneficiaries who were outside the study population or took place during months that were excluded from the analysis.
- e. The 18 states where no PHP provided a pharmacy benefit in 1999 were AL, AR, CO, FL, GA, IA, IL, KY, MA, MI, MT, NE, NY, NC, OR, PA, UT, and WI. This list was constructed based on consultation with CMS staff and two CMS documents, which can be found at <http://www.cms.hhs.gov/medicaid/managedcare/mmcms699.asp> and at <http://www.cms.hhs.gov/medicaid/managedcare/mmcms99.asp>.
- f. Cell D represents the study population for Tables 8 through 10D. All-year nursing facility residents are the beneficiaries who resided in nursing facilities throughout their enrollment in 1999. These beneficiaries were identified by comparing the number of months during which the MAX files contained at least one claim from nursing facilities to the number of Medicaid eligible months. If the former is greater than or equal to the latter, the beneficiary was considered an all-year resident. If the former is less than the latter but not equal to zero, the beneficiary was considered a part-year resident. Part-year residents were excluded from the analysis because they are likely to be short-term residents and the level and pattern of their pharmacy benefit use may differ substantially from longer-term residents. The number of part-year residents and their benefit months are presented in footnotes to Tables 8 through 10D. Residents of mental hospitals for the aged, inpatient psychiatric facilities for individuals under age 21, or intermediate care facilities for the mentally retarded were excluded from the analysis.
- g. Pharmacy benefit use and reimbursement among full dual eligible beneficiaries are presented in Tables 11 through 18. To determine Medicaid-Medicare dual eligibility status, two MAX data elements ("Eligible Medicare Crossover Code -- Annual New Values" and "Eligible Restricted Benefits Flag") were used in combination. Beneficiaries represented in Cell G, the dual study population, include all dual eligible beneficiaries who had a fee-for-service pharmacy benefit at least during one month in 1999. All benefit months of such dual eligible beneficiaries, of which 3.9 percent were restricted benefit months without a pharmacy benefit in Ohio, were used in the dual tables. Characteristics of dual eligible beneficiaries represented by Cell F are shown in Appendix Table A.3, and characteristics of beneficiaries and their benefit months included in Cell F but excluded from Cell G are shown in Appendix Table A.4.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; HMO = health maintenance organization; MAX = Medicaid Analytic Extract; MC = managed care; PCCM = primary care case management; PHP = prepaid health plan.

TABLE 2  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 OHIO, 1999

Beneficiary Characteristics	No. of Benefes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/Unknown	All	Aged	Disabled	Adults	Children	Other/Unknown
<b>All</b>	<b>1,219,410</b>	<b>136,326</b>	<b>249,551</b>	<b>190,011</b>	<b>643,336</b>	<b>186</b>	<b>9,529,869</b>	<b>1,362,881</b>	<b>2,587,776</b>	<b>1,085,239</b>	<b>4,493,628</b>	<b>345</b>
<b>Age</b>												
5 and younger	258,722	0	6,290	0	252,329	103	1,737,410	0	60,195	0	1,677,112	103
6-14	296,427	0	23,336	0	273,091	0	2,220,176	0	236,725	0	1,983,451	0
15-20	139,801	0	14,783	11,256	113,761	1	1,013,185	0	147,422	62,692	803,070	1
21-44	273,117	0	99,428	169,519	4,150	20	2,033,220	0	1,037,916	965,291	29,981	32
45-64	113,178	0	103,952	9,194	0	32	1,146,231	0	1,089,087	57,036	0	108
65-74	47,730	46,050	1,628	32	0	20	494,906	479,648	15,015	173	0	70
75-84	47,529	47,415	100	6	0	8	474,486	473,395	1,037	28	0	26
85 and older	42,897	42,857	34	4	0	2	410,198	409,795	379	19	0	5
Unknown	9	4	0	0	5	0	57	43	0	0	14	0
<b>Gender</b>												
Female	725,787	103,222	134,074	159,293	329,106	92	5,669,483	1,047,494	1,414,897	914,916	2,292,013	163
Male	493,619	33,104	115,477	30,718	314,226	94	3,860,376	315,387	1,172,879	170,323	2,201,605	182
Unknown	4	0	0	0	4	0	10	0	0	0	10	0
<b>Race</b>												
White	802,295	106,335	170,520	127,514	397,802	124	6,586,798	1,048,804	1,774,248	777,495	2,986,013	238
African American	358,830	25,298	71,733	54,554	207,208	37	2,521,606	265,237	739,763	270,552	1,245,995	59
Other/unknown	58,285	4,693	7,298	7,943	38,326	25	421,465	48,840	73,765	37,192	261,620	48
<b>Use of Nursing Facilities</b>												
All year	60,806	53,813	6,991	0	2	0	607,643	533,420	74,219	0	4	0
Part year	20,430	15,470	4,906	37	11	6	183,568	135,365	47,804	253	100	46
None	1,138,174	67,043	237,654	189,974	643,323	180	8,738,658	694,096	2,465,753	1,084,986	4,493,524	299
<b>Maintenance Assistance Status</b>												
Cash	450,621	35,414	178,820	63,591	172,796	0	3,814,856	404,070	1,941,647	359,060	1,110,079	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	330,904	2,741	3,794	39,533	284,836	0	2,234,027	28,520	38,912	202,976	1,963,619	0
Other/unknown	437,885	98,171	66,937	86,887	185,704	186	3,480,986	930,291	607,217	523,203	1,419,930	345
<b>Dual Medicare Status<sup>c</sup></b>												
Full dual, all year	182,817	118,709	63,274	691	100	43	1,848,396	1,174,022	668,615	4,523	1,074	162
Full dual, part year	17,375	7,441	9,885	48	0	1	188,335	81,024	106,882	425	0	4
Non-dual, all year	1,019,218	10,176	176,392	189,272	643,236	142	7,493,138	107,835	1,812,279	1,080,291	4,492,554	179
<b>Managed Care Status</b>												
FFS all year	944,104	136,318	243,484	130,339	433,777	186	8,426,395	1,362,810	2,549,460	872,287	3,641,493	345
FFS part year, with Rx claims	108,556	7	4,284	31,142	73,123	0	548,670	60	29,619	135,021	383,970	0
FFS part year, no Rx claims	166,750	1	1,783	28,530	136,436	0	554,804	11	8,697	77,931	468,165	0

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

Table 2

All Medicaid Beneficiaries

a. Table 2 includes the beneficiaries represented by Cell C of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

c. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 1999. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. The "Non-dual, all year" group includes beneficiaries who were never dually eligible or dually eligible but never had Medicaid fee-for-service pharmacy benefits. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; Rx = pharmacy benefit.

TABLE 3  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 OHIO, 1999

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	Mean OTC Drug \$ <sup>c</sup>	No. of Benefes
All	62.0 %	15.8	\$642	\$41	\$5,202	12.3 %	\$21	1,219,410
<b>Age</b>								
5 and younger	53.4	2.8	60	21	1,594	3.7	2	258,722
6-14	46.5	3.1	115	37	1,174	9.8	3	296,427
15-20	52.8	4.1	172	42	2,050	8.4	3	139,801
21-44	67.8	15.4	761	49	5,396	14.1	13	273,117
45-64	87.0	50.4	2,248	45	12,435	18.1	64	113,178
65-74	86.8	52.1	2,002	38	12,348	16.2	79	47,730
75-84	89.9	53.8	1,851	34	18,168	10.2	90	47,529
85 and older	90.8	48.6	1,469	30	22,418	6.6	96	42,897
Unknown	33.3	15.9	426	27	7,679	5.6	58	9
<b>Basis of Eligibility</b>								
Aged	89.4	51.8	1,790	35	17,508	10.2	89	136,326
Disabled	84.4	38.1	1,852	49	11,807	15.7	43	249,551
Adults	59.0	5.3	166	31	1,819	9.1	4	190,011
Children	48.5	2.6	69	26	1,030	6.7	2	643,336
Unknown	19.4	6.2	284	46	5,873	4.8	21	186
<b>Gender</b>								
Female	65.4	18.4	701	38	5,513	12.7	25	725,787
Male	57.1	12.1	554	46	4,744	11.7	14	493,619
Unknown	0.0	0.0	0	0	0	0.0	0	4
<b>Race</b>								
White	68.0	18.9	764	41	5,981	12.8	24	802,295
African American	50.5	10.2	414	41	3,850	10.8	15	358,830
Other/unknown	52.1	8.0	353	44	2,791	12.7	10	58,285
<b>Use of Nursing Facilities</b>								
Entire year	97.1	68.0	2,312	34	33,095	7.0	146	60,806
Part year	95.1	57.6	2,106	37	24,056	8.8	97	20,430
None	59.6	12.3	526	43	3,373	15.6	12	1,138,174
<b>Maintenance Assistance Status</b>								
Cash	67.6	20.7	903	44	5,222	17.3	23	450,621
Medically needy	0.0	0.0	0	0	0	0.0	0	0
Poverty related	51.3	2.9	80	28	1,103	7.3	2	330,904
Other/unknown	64.5	20.6	796	39	8,277	9.6	32	437,885

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

Table 3

All Medicaid Beneficiaries

a. Table 3 includes beneficiaries represented by Cell C of Table 1.

b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. Information about OTC drugs appears in this column only. OTC drugs are not part of the reimbursement amount for prescription drugs.

Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 4  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 OHIO, 1999

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:						Mean \$, All Services	Benes	Bene Mos
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10			
All	2.0	\$82	12.3 %	38.0 %	36.4 %	6.5 %	9.6 %	6.9 %	2.6 %	\$666	1,219,410	9,529,869
<b>Age</b>												
5 and younger	0.4	9	3.7	46.6	48.4	3.6	1.2	0.1	0.0	237	258,722	1,737,410
6-14	0.4	15	9.8	53.5	40.4	3.7	2.1	0.2	0.0	157	296,427	2,220,176
15-20	0.6	24	8.4	47.2	44.2	5.1	3.0	0.5	0.1	283	139,801	1,013,185
21-44	2.1	102	14.1	32.2	37.7	9.9	12.4	5.9	2.0	725	273,117	2,033,220
45-64	5.0	222	18.1	13.0	16.2	10.2	26.5	23.8	10.3	1,228	113,178	1,146,231
65-74	5.0	193	16.2	13.2	14.0	9.4	26.5	25.9	11.0	1,191	47,730	494,906
75-84	5.4	185	10.2	10.1	10.6	8.9	28.7	30.2	11.6	1,820	47,529	474,486
85 and older	5.1	154	6.6	9.2	9.8	9.3	31.8	30.7	9.3	2,344	42,897	410,198
Unknown	2.5	67	5.6	66.7	11.1	0.0	0.0	22.2	0.0	1,213	9	57
<b>Basis of Eligibility</b>												
Aged	5.2	179	10.2	10.6	11.5	9.2	29.0	29.0	10.7	1,751	136,326	1,362,881
Disabled	3.7	179	15.7	15.6	27.5	11.1	22.5	16.6	6.8	1,139	249,551	2,587,776
Adults	0.9	29	9.1	41.0	42.1	8.3	6.6	1.7	0.3	319	190,011	1,085,239
Children	0.4	10	6.7	51.5	43.5	3.5	1.4	0.1	0.0	148	643,336	4,493,628
Unknown	3.3	153	4.8	80.6	3.8	1.6	5.9	5.9	2.2	3,166	186	345
<b>Gender</b>												
Female	2.4	90	12.7	34.6	36.2	6.9	10.8	8.3	3.2	706	725,787	5,669,483
Male	1.5	71	11.7	42.9	36.7	5.8	7.8	5.0	1.8	607	493,619	3,860,376
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	4	10
<b>Race</b>												
White	2.3	93	12.8	32.0	38.2	7.0	10.9	8.5	3.4	729	802,295	6,586,798
African American	1.5	59	10.8	49.5	32.4	5.3	7.3	4.2	1.3	548	358,830	2,521,606
Other/unknown	1.1	49	12.7	47.9	36.1	5.9	6.7	2.7	0.6	386	58,285	421,465
<b>Use of Nursing Facilities</b>												
Entire year	6.8	231	7.0	2.9	6.3	6.9	28.8	37.2	17.9	3,312	60,806	607,643
Part year	6.4	234	8.8	4.9	8.6	8.7	29.2	33.3	15.3	2,677	20,430	183,568
None	1.6	69	15.6	40.4	38.5	6.4	8.2	4.9	1.6	439	1,138,174	8,738,658
<b>Maintenance Assistance Status</b>												
Cash	2.4	107	17.3	32.4	34.7	8.2	13.1	8.5	3.0	617	450,621	3,814,856
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.4	12	7.3	48.7	45.6	3.8	1.6	0.2	0.0	163	330,904	2,234,027
Other/unknown	2.6	100	9.6	35.5	31.1	6.6	12.1	10.5	4.2	1,041	437,885	3,480,986

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

Table 4

All Medicaid Beneficiaries

- a. Table 4 includes the beneficiaries represented by Cell C of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE 5  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 OHIO, 1999

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	\$ per Rx	No. of Rx	Rx \$	No. of Rx	Rx \$
<b>All</b>	<b>2.0</b>	<b>\$82</b>	<b>0.7</b>	<b>\$54</b>	<b>0.3</b>	<b>\$13</b>	<b>1.0</b>	<b>\$12</b>
<b>Age</b>								
5 and younger	0.4	9	0.1	5	0.0	1	0.3	3
6-14	0.4	15	0.1	10	0.0	1	0.2	3
15-20	0.6	24	0.2	17	0.1	3	0.3	3
21-44	2.1	102	0.8	70	0.2	17	1.0	11
45-64	5.0	222	1.9	147	0.6	37	2.2	28
65-74	5.0	193	1.8	121	0.7	34	2.3	28
75-84	5.4	185	1.8	113	0.8	34	2.5	30
85 and older	5.1	154	1.5	90	0.8	29	2.5	28
Unknown	2.5	67	1.1	53	0.3	7	1.1	8
<b>Basis of Eligibility</b>								
Aged	5.2	179	1.7	109	0.8	32	2.4	29
Disabled	3.7	179	1.4	121	0.5	29	1.7	21
Adults	0.9	29	0.3	19	0.1	4	0.5	4
Children	0.4	10	0.1	6	0.0	1	0.2	3
Unknown	3.3	153	1.0	86	0.4	19	1.8	34
<b>Gender</b>								
Female	2.4	90	0.8	58	0.3	15	1.1	13
Male	1.5	71	0.5	47	0.2	11	0.7	10
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Race</b>								
White	2.3	93	0.8	61	0.3	15	1.1	13
African American	1.5	59	0.5	39	0.2	10	0.7	8
Other/unknown	1.1	49	0.4	34	0.1	7	0.5	6
<b>Use of Nursing Facilities</b>								
Entire year	6.8	231	2.1	142	1.0	40	3.3	40
Part year	6.4	234	2.1	147	0.9	38	3.1	38
None	1.6	69	0.6	45	0.2	11	0.7	9
<b>Maintenance Assistance Status</b>								
Cash	2.4	107	0.9	71	0.3	17	1.1	14
Medically needy	0.0	0	0.0	0	0.0	0	0.0	0
Poverty related	0.4	12	0.1	8	0.0	1	0.2	3
Other/unknown	2.6	100	0.9	64	0.4	17	1.2	15

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 5 includes the beneficiaries represented by Cell C of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

Table 5

All Medicaid Beneficiaries

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Ohio, 4.7 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
OHIO, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total Rx \$				Users				
	Total	Patented	Off-Patent	Brand-Name	Total	Patented	Off-Patent	Brand-Name	Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos	Users			
														Generic	Brand-Name	Patented	Off-Patent
Anti-infective Agents	0.3	0.2	0.0	0.2	\$13	\$11	\$0	\$2	\$42	\$75	\$62	\$10	1,526,643	\$64,175,079	500,481	41.0 %	4,837,086
Biologics	0.2	0.1	0.0	0.0	140	101	13	26	727	715	746	765	1,723	1,251,832	862	0.1	8,972
Antineoplastic Agents	0.5	0.2	0.1	0.2	80	53	21	6	152	267	143	34	63,224	9,579,896	11,715	1.0	119,410
Endocrine/Metabolic Drugs	0.7	0.3	0.1	0.3	21	16	3	2	30	49	22	10	1,448,904	43,797,176	205,331	16.8	2,078,364
Cardiovascular Agents	1.6	0.5	0.3	0.7	46	26	13	8	30	51	38	11	3,344,582	98,944,173	204,399	16.8	2,133,186
Respiratory Agents	0.6	0.3	0.0	0.3	18	14	0	4	31	53	26	13	2,045,617	63,526,788	364,043	29.9	3,597,825
Gastrointestinal Agents	0.7	0.3	0.1	0.3	41	31	6	5	60	102	80	15	1,190,520	71,411,571	165,318	13.6	1,735,118
Genitourinary Agents	0.3	0.2	0.0	0.2	11	8	0	2	32	46	29	15	257,089	8,217,935	75,713	6.2	762,792
CNS Drugs	1.2	0.5	0.2	0.6	74	50	16	7	60	100	99	12	3,110,965	185,878,073	244,412	20.0	2,525,633
Stimulants/Anti-obesity/Anorexia	0.6	0.1	0.0	0.5	20	4	3	14	34	36	62	31	170,916	5,769,849	28,739	2.4	283,594
Miscellaneous Psychological/Neurological Agents	0.5	0.4	0.0	0.1	46	45	0	1	93	109	48	12	69,967	6,497,509	13,636	1.1	142,763
Analgesics and Anesthetics	0.6	0.2	0.1	0.4	21	13	4	4	33	80	66	9	1,916,734	62,873,975	305,295	25.0	3,031,264
Neuromuscular Agents	0.9	0.3	0.1	0.5	41	28	6	7	44	84	41	16	1,265,599	55,971,207	129,511	10.6	1,370,292
Nutritional Products	0.5	0.0	0.2	0.3	8	0	4	3	16	13	25	11	537,343	8,470,908	107,089	8.8	1,042,339
Hematological Agents	0.7	0.1	0.2	0.5	42	29	6	7	57	332	33	16	422,601	24,259,775	56,053	4.6	578,398
Topical Products	0.3	0.1	0.1	0.2	10	6	2	2	28	45	34	11	989,522	27,705,716	284,897	23.4	2,872,101
Miscellaneous Products	0.5	0.1	0.1	0.3	63	36	23	5	122	290	255	15	76,204	9,321,940	14,754	1.2	148,682
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	17	0	0	0	41	0	0	0	851,245	34,573,186	200,824	16.5	2,085,611
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	19,289,398	782,226,588	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 6 includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. For information about these therapeutic categories, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Ohio, 4.7 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 OHIO, 1999

Top 10 Drug Groups	Users				Among Users		
	Total Medicaid Rx \$	No. As % of All Benes	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo	
ANTIPSYCHOTICS	\$90,622,895	104,023	8.5 %	1,125,819	0.8	\$106	\$80
ANTIDEPRESSANTS	72,615,144	208,616	17.1	2,186,320	0.6	57	33
ULCER DRUGS	56,947,134	162,977	13.4	1,735,854	0.5	71	33
ANTICONVULSANT	46,682,132	94,266	7.7	1,015,560	0.8	55	46
ANTIASTHMATIC	34,554,200	239,946	19.7	2,440,291	0.4	33	14
ANTIDIABETIC	31,371,626	99,074	8.1	1,054,077	0.7	41	30
ANALGESICS - Narcotic	29,400,485	297,473	24.4	3,044,299	0.4	27	10
ANALGESICS - ANTI-INFLAMMATORY	28,648,497	226,872	18.6	2,348,354	0.3	42	12
ANTIHYPERTENSIVE	28,142,984	119,317	9.8	1,264,689	0.7	34	22
ANTIHYPERLIPIDEMIC	24,476,690	47,873	3.9	527,474	0.6	72	46

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

- a. Table 7 includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE<sup>a,b,c</sup>  
 OHIO, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>8,546,578</b>	<b>\$443,461,787</b>	<b>104,023</b>	<b>8.5 %</b>	<b>1,125,819</b>	<b>0.8</b>	<b>\$81</b>	<b>208,616</b>	<b>17.1 %</b>	<b>2,186,320</b>	<b>0.6</b>	<b>\$33</b>					
<b>Female</b>	5,787,042	289,450,534	61,878	8.5	671,100	0.7	70	149,121	20.5	1,563,834	0.6	33					
<b>Disabled</b>	3,008,051	169,301,546	33,811	25.2	380,534	0.8	86	77,354	57.7	860,680	0.6	35					
5 and younger	10,546	431,467	25	1.0	295	0.5	39	31	1.2	338	0.4	14					
6-14	32,111	1,615,769	399	5.0	4,341	0.5	56	691	8.7	7,564	0.4	23					
15-20	35,178	1,990,445	627	10.4	6,848	0.5	64	1,244	20.7	13,555	0.4	27					
21-44	996,910	59,683,785	16,058	30.8	179,572	0.7	88	32,635	62.7	360,581	0.5	35					
45-64	1,914,690	104,633,456	16,523	25.7	187,543	0.8	86	42,425	65.9	475,485	0.6	37					
65-74	17,373	894,757	161	16.6	1,728	0.9	88	304	31.3	2,893	0.6	41					
75-84	1,073	45,531	16	23.5	186	0.6	54	21	30.9	231	0.6	26					
85 and older	170	6,336	2	7.4	21	0.1	21	3	11.1	33	0.8	52					
<b>Other Eligibles</b>	2,778,965	120,148,578	28,067	4.7	290,566	0.6	50	71,767	12.1	703,154	0.6	31					
5 and younger	40,432	761,057	65	0.1	632	0.3	23	166	0.1	1,625	0.3	12					
6-14	70,347	2,404,077	912	0.7	9,522	0.5	42	2,896	2.1	29,253	0.4	20					
15-20	81,691	2,788,559	1,203	1.6	11,753	0.4	39	4,853	6.3	46,359	0.3	21					
21-44	305,819	10,633,400	2,405	1.6	20,603	0.3	17	18,699	12.8	152,753	0.4	22					
45-64	34,441	1,600,298	124	2.1	1,086	0.3	22	1,557	26.3	13,006	0.5	29					
65-74	818,158	40,335,290	6,329	20.0	69,475	0.8	71	13,039	41.2	143,918	0.6	33					
75-84	814,544	36,650,744	8,743	24.5	92,627	0.7	54	15,794	44.3	166,361	0.7	36					
85 and older	613,533	24,975,153	8,286	23.1	84,868	0.6	40	14,763	41.1	149,879	0.7	36					
<b>Male</b>	2,759,536	154,011,253	42,145	8.5	454,719	0.8	95	59,495	12.1	622,486	0.6	33					
<b>Disabled</b>	1,814,712	113,412,988	29,822	25.8	330,836	0.9	110	37,129	32.2	404,519	0.6	35					
5 and younger	16,057	627,208	65	1.7	709	0.4	31	67	1.8	736	0.3	11					
6-14	71,585	3,554,545	1,655	10.8	17,640	0.6	59	2,002	13.0	21,615	0.5	23					
15-20	50,245	3,347,083	1,277	14.6	13,777	0.7	84	1,531	17.4	16,572	0.5	30					
21-44	756,902	53,555,151	16,433	34.7	182,957	0.9	120	17,711	37.4	193,024	0.6	37					
45-64	908,777	51,754,932	10,271	26.0	114,422	0.9	107	15,658	39.6	170,974	0.6	35					
65-74	10,361	545,233	113	17.2	1,235	0.9	102	150	22.8	1,504	0.7	37					
75-84	497	21,375	7	21.9	84	0.6	34	8	25.0	70	0.6	28					
85 and older	288	7,461	1	14.3	12	2.3	150	2	28.6	24	0.6	42					
<b>Other Eligibles</b>	944,786	40,597,274	12,323	3.3	123,883	0.7	56	22,365	5.9	217,958	0.6	30					
5 and younger	57,786	1,160,579	152	0.1	1,513	0.3	24	264	0.2	2,487	0.3	11					
6-14	113,613	4,388,032	2,278	1.7	23,492	0.5	51	5,114	3.7	51,332	0.4	20					
15-20	51,190	2,404,258	1,203	2.5	12,070	0.6	60	2,582	5.4	24,869	0.5	27					
21-44	53,415	2,220,135	401	1.4	3,228	0.3	36	2,225	8.0	17,187	0.4	21					
45-64	16,864	837,494	63	1.9	486	0.3	32	518	15.7	4,351	0.4	25					
65-74	309,175	14,855,097	3,073	21.3	32,932	0.8	71	4,420	30.7	47,225	0.7	36					
75-84	235,291	10,334,923	3,404	28.9	33,638	0.7	53	4,612	39.2	45,715	0.7	38					
85 and older	107,452	4,396,756	1,749	25.2	16,524	0.6	40	2,630	37.9	24,792	0.7	37					
<b>Unknown</b>	64	1,401	0	0.0	0	0.0	0	1	7.7	9	0.3	1					

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 7A includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mdmb.asp](http://www.Medi-Span.com/products/product_mdmb.asp) (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 OHIO, 1999

Beneficiary Characteristics	ULCER DRUGS					ANTICONVULSANT					ANTIASTHMATIC				
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>162,977</b>	<b>13.4 %</b>	<b>1,735,854</b>	<b>0.5</b>	<b>\$33</b>	<b>94,266</b>	<b>7.7 %</b>	<b>1,015,560</b>	<b>0.8</b>	<b>\$46</b>	<b>239,946</b>	<b>19.7 %</b>	<b>2,440,291</b>	<b>0.4</b>	<b>\$14</b>
<b>Female</b>	115,946	16.0	1,241,428	0.5	33	56,017	7.7	604,744	0.8	42	151,260	20.8	1,557,148	0.4	15
<b>Disabled</b>	53,574	40.0	604,743	0.4	33	35,863	26.7	400,883	0.8	48	64,595	48.2	721,480	0.5	18
5 and younger	368	14.4	3,894	0.4	22	320	12.5	3,419	0.7	43	1,318	51.5	14,059	0.3	11
6-14	480	6.0	5,472	0.4	30	1,124	14.1	12,154	0.9	55	1,955	24.5	21,592	0.4	13
15-20	682	11.4	7,658	0.3	22	1,011	16.8	11,017	0.9	58	1,398	23.3	15,471	0.3	12
21-44	18,015	34.6	203,231	0.4	29	16,685	32.0	186,296	0.8	52	20,570	39.5	230,063	0.4	15
45-64	33,657	52.3	380,690	0.5	36	16,559	25.7	186,317	0.8	44	38,998	60.6	436,884	0.5	20
65-74	351	36.2	3,563	0.5	38	161	16.6	1,646	0.9	35	331	34.1	3,122	0.7	24
75-84	18	26.5	199	0.5	36	3	4.4	34	0.4	16	18	26.5	215	1.2	36
85 and older	3	11.1	36	0.3	30	0	0.0	0	0.0	0	7	25.9	74	0.3	6
<b>Other Eligibles</b>	62,371	10.5	636,673	0.5	32	20,154	3.4	203,861	0.7	29	86,664	14.6	835,656	0.4	12
5 and younger	1,564	1.3	13,318	0.2	9	306	0.2	2,898	0.5	24	14,118	11.4	128,998	0.2	3
6-14	1,757	1.3	18,409	0.2	7	1,149	0.8	11,191	0.6	28	10,256	7.5	97,192	0.2	7
15-20	3,143	4.1	30,364	0.2	8	1,086	1.4	10,221	0.5	28	6,236	8.1	56,934	0.2	7
21-44	10,122	6.9	85,886	0.2	17	3,283	2.2	27,292	0.4	22	14,607	10.0	116,772	0.3	9
45-64	991	16.7	8,528	0.4	28	281	4.7	2,449	0.5	24	1,245	21.0	10,096	0.4	15
65-74	15,034	47.4	168,149	0.5	37	5,154	16.3	56,912	0.8	35	15,764	49.8	173,745	0.6	20
75-84	15,758	44.2	169,426	0.6	38	5,486	15.4	58,466	0.9	30	13,853	38.9	145,679	0.5	17
85 and older	14,002	39.0	142,593	0.7	38	3,409	9.5	34,432	0.8	25	10,585	29.5	106,240	0.4	13
<b>Male</b>	47,031	9.5	494,426	0.5	33	38,249	7.7	410,816	0.9	52	88,686	18.0	883,143	0.4	13
<b>Disabled</b>	27,648	23.9	303,991	0.5	35	28,384	24.6	313,358	0.9	58	33,807	29.3	367,046	0.5	18
5 and younger	501	13.4	5,348	0.4	24	443	11.9	4,702	0.7	44	1,998	53.6	21,276	0.3	11
6-14	663	4.3	7,461	0.3	26	2,056	13.4	22,207	0.8	47	4,144	27.0	45,649	0.3	13
15-20	646	7.4	7,182	0.3	27	1,537	17.5	16,834	0.9	63	1,677	19.1	18,321	0.4	13
21-44	10,947	23.1	121,404	0.4	33	14,689	31.0	162,836	0.9	63	8,782	18.6	96,014	0.5	15
45-64	14,689	37.1	160,598	0.5	38	9,544	24.1	105,621	0.9	52	16,971	42.9	183,490	0.6	21
65-74	194	29.5	1,902	0.6	43	111	16.9	1,121	1.2	53	221	33.6	2,128	0.7	23
75-84	4	12.5	48	0.7	37	4	12.5	37	1.2	50	8	25.0	96	0.9	42
85 and older	4	57.1	48	1.4	28	0	0.0	0	0.0	0	6	85.7	72	0.8	14
<b>Other Eligibles</b>	19,383	5.1	190,435	0.5	30	9,865	2.6	97,458	0.8	33	54,877	14.5	516,077	0.3	10
5 and younger	2,004	1.6	16,998	0.2	9	411	0.3	3,756	0.4	17	19,962	15.5	182,352	0.2	4
6-14	1,432	1.0	15,029	0.2	8	1,885	1.4	18,586	0.6	29	14,183	10.3	132,670	0.3	9
15-20	1,149	2.4	11,123	0.2	9	1,048	2.2	9,958	0.6	39	3,517	7.3	32,405	0.3	8
21-44	1,780	6.4	14,224	0.3	24	746	2.7	6,018	0.5	32	1,679	6.1	12,965	0.3	11
45-64	449	13.6	3,891	0.4	31	138	4.2	1,207	0.6	41	438	13.3	3,611	0.5	19
65-74	5,584	38.7	60,233	0.6	39	2,675	18.6	28,819	0.9	39	7,037	48.8	74,594	0.6	22
75-84	4,458	37.9	44,882	0.6	39	2,151	18.3	21,546	0.9	33	5,347	45.4	52,350	0.6	19
85 and older	2,527	36.4	24,055	0.7	38	811	11.7	7,568	0.8	25	2,714	39.1	25,130	0.5	15
<b>Unknown</b>	1	7.7	12	1.0	10	0	0.0	0	0.0	0	3	23.1	32	0.6	16

Table 7B  
 All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

- a. Table 7B includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE 7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 OHIO, 1999

Beneficiary Characteristics	ANTIDIABETIC				ANALGESICS - Narcotic				ANALGESICS - ANTI-INFLAMMATORY						
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>99,074</b>	<b>8.1 %</b>	<b>1,054,077</b>	<b>0.7</b>	<b>\$30</b>	<b>297,473</b>	<b>24.4 %</b>	<b>3,044,299</b>	<b>0.4</b>	<b>\$10</b>	<b>226,872</b>	<b>18.6 %</b>	<b>2,348,354</b>	<b>0.3</b>	<b>\$12</b>
<b>Female</b>	72,241	10.0	774,883	0.7	30	217,200	29.9	2,221,911	0.4	9	163,904	22.6	1,697,029	0.3	13
<b>Disabled</b>	33,863	25.3	376,504	0.7	34	93,783	69.5	1,046,137	0.4	11	68,758	51.3	778,358	0.3	15
5 and younger	6	0.2	72	0.9	59	176	6.9	1,944	0.1	1	273	10.7	2,978	0.2	4
6-14	44	0.6	505	0.8	24	599	7.5	6,741	0.1	2	918	11.5	10,281	0.2	3
15-20	125	2.1	1,317	0.7	29	1,606	26.7	17,734	0.2	3	1,596	26.6	17,497	0.2	4
21-44	6,853	13.2	76,445	0.7	31	39,597	76.0	442,505	0.3	10	26,042	50.0	292,733	0.3	10
45-64	26,482	41.1	294,823	0.7	35	50,766	78.8	572,947	0.4	13	39,633	61.6	451,803	0.4	19
65-74	331	34.1	3,082	0.7	29	414	42.7	3,984	0.5	11	280	28.9	2,874	0.4	20
75-84	16	23.5	190	0.8	27	17	25.0	190	0.3	5	14	20.6	168	0.5	26
85 and older	6	22.2	70	0.5	13	8	29.6	92	0.5	5	2	7.4	24	0.3	14
<b>Other Eligibles</b>	38,378	6.5	398,379	0.7	26	124,017	21.0	1,175,774	0.3	7	95,146	16.1	918,671	0.3	11
5 and younger	44	0.0	433	0.5	18	1,716	1.4	16,984	0.1	1	6,030	4.9	56,823	0.1	1
6-14	266	0.2	2,380	0.8	30	4,300	3.2	43,315	0.1	1	7,167	5.3	69,871	0.1	1
15-20	409	0.5	3,598	0.7	28	13,196	17.2	121,415	0.1	1	11,630	15.1	106,616	0.2	2
21-44	2,634	1.8	19,654	0.6	24	50,641	34.7	422,157	0.2	3	31,459	21.6	257,910	0.2	5
45-64	679	11.5	4,923	0.6	30	2,243	37.8	19,165	0.3	7	2,070	34.9	17,223	0.3	14
65-74	14,480	45.7	160,536	0.7	30	18,768	59.2	209,162	0.4	11	14,878	47.0	170,170	0.4	20
75-84	12,746	35.8	134,791	0.7	24	17,676	49.6	188,088	0.5	12	12,535	35.2	139,751	0.4	21
85 and older	7,120	19.8	72,064	0.7	20	15,477	43.1	155,488	0.5	11	9,377	26.1	100,507	0.5	21
<b>Male</b>	26,833	5.4	279,194	0.7	30	80,273	16.3	822,388	0.4	11	62,968	12.8	651,325	0.3	10
<b>Disabled</b>	16,011	13.9	172,055	0.7	32	47,560	41.2	515,162	0.4	14	31,777	27.5	351,940	0.3	12
5 and younger	6	0.2	36	0.3	10	257	6.9	2,835	0.1	1	409	11.0	4,517	0.2	1
6-14	58	0.4	613	0.9	29	1,025	6.7	11,441	0.1	2	1,487	9.7	16,662	0.1	1
15-20	125	1.4	1,336	0.7	29	1,388	15.8	15,060	0.2	5	1,405	16.0	15,507	0.2	2
21-44	4,267	9.0	46,218	0.7	31	22,275	47.1	241,426	0.4	14	13,542	28.6	149,163	0.3	9
45-64	11,399	28.8	122,313	0.7	33	22,398	56.6	242,364	0.5	16	14,785	37.4	164,557	0.3	17
65-74	147	22.3	1,434	0.8	30	208	31.6	1,931	0.4	10	142	21.6	1,450	0.4	19
75-84	4	12.5	48	1.1	50	9	28.1	105	0.3	2	7	21.9	84	0.5	23
85 and older	5	71.4	57	0.5	22	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	10,822	2.9	107,139	0.7	26	32,713	8.7	307,226	0.3	7	31,190	8.2	299,376	0.2	8
5 and younger	65	0.1	561	0.6	21	2,400	1.9	23,406	0.1	1	6,599	5.1	61,774	0.1	1
6-14	244	0.2	2,098	0.8	27	4,404	3.2	44,436	0.1	1	6,060	4.4	59,332	0.1	1
15-20	221	0.5	1,993	0.9	38	4,253	8.8	39,750	0.1	2	4,692	9.7	44,078	0.1	2
21-44	590	2.1	4,198	0.7	32	7,800	28.1	60,604	0.3	8	4,691	16.9	36,701	0.2	7
45-64	327	9.9	2,567	0.7	31	1,142	34.6	9,720	0.4	13	866	26.3	7,312	0.3	14
65-74	4,578	31.8	48,916	0.7	28	6,071	42.1	64,833	0.4	11	4,221	29.3	47,341	0.4	18
75-84	3,435	29.2	34,004	0.8	24	4,272	36.3	42,292	0.5	10	2,699	22.9	28,931	0.4	19
85 and older	1,362	19.6	12,802	0.7	19	2,371	34.2	22,185	0.5	10	1,362	19.6	13,907	0.5	19
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	7.7	9	0.2	4

Table 7C  
 All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

- a. Table 7C includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 OHIO, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE				ANTIHYPERLIPIDEMIC				Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Bene Mos among Users	No. of Bene Mos
	No. of Users	9.8 %	1,264,689	0.7	Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users										
<b>All</b>	<b>119,317</b>	<b>9.8 %</b>	<b>1,264,689</b>	<b>0.7</b>	<b>\$22</b>	<b>0.7</b>	<b>\$22</b>	<b>47,873</b>	<b>3.9 %</b>	<b>527,474</b>	<b>0.6</b>	<b>47</b>	<b>\$46</b>	<b>1,219,410</b>	<b>9,529,869</b>			
<b>Female</b>																		
<b>Disabled</b>																		
5 and younger	78,311	10.8	837,088	0.7	23	0.7	23	33,610	4.6	373,474	0.6	47	47	725,784	5,669,456			
6-14	31,081	23.2	345,348	0.6	23	0.6	23	18,575	13.9	209,061	0.6	46	46	134,074	1,414,897			
15-20	69	2.7	719	0.5	6	0.5	6	9	0.4	99	0.2	7	7	2,559	24,601			
21-44	445	5.6	4,863	0.6	7	0.6	7	4	0.1	47	0.1	8	8	7,968	81,015			
45-64	182	3.0	2,025	0.6	15	0.6	15	13	0.2	150	0.4	29	29	6,007	60,355			
65-74	6,032	11.6	67,008	0.6	19	0.6	19	3,063	5.9	34,609	0.6	38	38	52,086	550,869			
75-84	23,990	37.3	267,237	0.6	24	0.6	24	15,313	23.8	172,488	0.6	48	48	64,389	688,040			
85 and older	339	34.9	3,212	0.7	24	0.7	24	168	17.3	1,610	0.7	53	53	970	9,020			
<b>Other Eligibles</b>																		
5 and younger	20	29.4	237	0.5	11	0.5	11	3	4.4	36	0.5	28	28	68	697			
6-14	4	14.8	47	0.3	12	0.3	12	2	7.4	22	0.3	18	18	27	300			
15-20	47,229	8.0	491,728	0.7	23	0.7	23	15,035	2.5	164,413	0.7	48	48	591,710	4,254,559			
21-44	170	0.1	1,703	0.5	5	0.5	5	20	0.0	177	0.1	4	4	123,846	822,652			
45-64	987	0.7	9,810	0.6	6	0.6	6	21	0.0	228	0.3	20	20	135,931	985,722			
65-74	305	0.4	2,769	0.3	6	0.3	6	30	0.0	252	0.3	18	18	76,807	521,387			
75-84	2,488	1.7	19,748	0.4	14	0.4	14	763	0.5	6,222	0.4	32	32	145,938	840,494			
85 and older	822	13.9	6,146	0.6	21	0.6	21	348	5.9	2,780	0.5	40	40	5,927	36,662			
<b>Male</b>																		
<b>Disabled</b>																		
5 and younger	41,006	8.3	427,601	0.7	21	0.7	21	14,263	2.9	154,000	0.6	46	46	493,613	3,860,346			
6-14	22,631	19.6	244,418	0.6	22	0.6	22	10,146	8.8	111,394	0.6	45	45	115,477	1,172,879			
15-20	203	5.4	2,114	0.6	8	0.6	8	12	0.3	138	0.3	11	11	3,731	35,594			
21-44	1,760	11.5	19,007	0.6	7	0.6	7	9	0.1	102	0.4	42	42	15,368	155,710			
45-64	482	5.5	5,248	0.6	12	0.6	12	27	0.3	317	0.3	22	22	8,776	87,067			
65-74	6,199	13.1	67,945	0.6	22	0.6	22	2,854	6.0	31,853	0.6	39	39	47,342	487,047			
75-84	13,777	34.8	148,116	0.7	25	0.7	25	7,170	18.1	78,201	0.7	48	48	39,563	401,047			
85 and older	197	29.9	1,835	0.7	26	0.7	26	70	10.6	735	0.7	47	47	658	5,995			
<b>Other Eligibles</b>																		
5 and younger	8	25.0	96	0.9	26	0.9	26	4	12.5	48	0.7	39	39	32	340			
6-14	5	71.4	57	1.6	19	1.6	19	0	0.0	0	0.0	0	0	7	79			
15-20	18,374	4.9	183,173	0.7	21	0.7	21	4,117	1.1	42,606	0.7	47	47	378,136	2,687,467			
21-44	437	0.3	4,264	0.5	5	0.5	5	19	0.0	184	0.1	4	4	128,584	854,559			
45-64	3,159	2.3	30,737	0.6	5	0.6	5	26	0.0	279	0.2	13	13	137,159	997,726			
65-74	460	1.0	4,660	0.5	8	0.5	8	27	0.1	223	0.4	28	28	48,210	344,373			
75-84	738	2.7	5,599	0.5	20	0.5	20	351	1.3	2,727	0.5	36	36	27,751	154,810			
85 and older	441	13.4	3,276	0.6	22	0.6	22	273	8.3	2,122	0.6	46	46	3,299	20,482			
<b>Unknown</b>																		
5 and younger	5,998	41.6	64,451	0.7	25	0.7	25	2,341	16.2	25,689	0.7	49	49	14,417	143,726			
6-14	4,766	40.5	47,947	0.7	25	0.7	25	927	7.9	9,860	0.7	47	47	11,776	110,090			
15-20	2,375	34.2	22,239	0.7	24	0.7	24	153	2.2	1,522	0.7	43	43	6,940	61,701			
21-44	2	15.4	22	1.3	34	1.3	34	0	0.0	0	0.0	0	0	13	67			

Table 7D

All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

- a. Table 7D includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

TABLE 8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 OHIO, 1999

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
<b>All</b>	<b>\$231</b>	<b>6.8</b>	<b>60,806</b>	<b>607,643</b>
<b>Age</b>				
0-64	369	8.7	6,820	72,523
65-74	296	8.0	8,133	83,934
75-84	229	6.8	19,596	195,515
85 and older	173	5.8	26,256	255,659
Unknown	171	6.5	1	12
<b>Gender</b>				
Female	221	6.7	44,600	449,199
Male	262	7.0	16,206	158,444
Unknown	0	0.0	0	0
<b>Race</b>				
White	231	6.9	51,903	516,083
African American	234	6.2	8,322	85,685
Other/unknown	253	6.7	581	5,875
<b>Basis of Eligibility</b>				
Aged	213	6.5	53,813	533,420
Disabled	368	8.7	6,991	74,219
Adults	0	0.0	0	0
Children	0	0.0	2	4
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 8 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their 1999 Medicaid enrollment. A total of 20,430 beneficiaries who were in nursing facilities for part of their enrollment and their 183,568 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

TABLE 9  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>  
 OHIO, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx			Total Rx \$			Users				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	No.	As % of All-Year NF Residents	No. of Bene Mos
Anti-infective Agents	0.5	0.3	0.0	0.2	\$21	\$18	\$1	\$2	\$46	\$66	\$59	\$13	195,166	\$8,895,840	41,084	67.6 %	428,514
Biologicals	0.1	0.1	0.0	0.0	1	1	0	0	11	10	0	17	65	714	61	0.1	681
Antineoplastic Agents	0.6	0.1	0.3	0.2	65	21	38	6	112	172	141	31	22,318	2,508,490	3,857	6.3	38,316
Endocrine/Metabolic Drugs	1.1	0.4	0.2	0.5	24	18	2	4	22	44	14	8	270,163	6,070,882	24,135	39.7	249,269
Cardiovascular Agents	2.0	0.5	0.5	1.1	41	17	13	11	21	38	28	10	845,968	17,485,657	42,409	69.7	430,387
Respiratory Agents	0.8	0.3	0.0	0.5	21	12	0	9	28	46	25	18	225,316	6,206,852	28,142	46.3	293,261
Gastrointestinal Agents	1.0	0.4	0.1	0.6	49	35	6	8	47	91	64	14	331,719	15,746,274	30,876	50.8	319,294
Genitourinary Agents	0.5	0.2	0.0	0.3	16	11	0	5	29	51	29	15	79,369	2,333,162	13,637	22.4	145,241
CNS Drugs	1.7	0.8	0.2	0.8	90	67	15	8	52	86	75	11	746,783	38,993,118	41,711	68.6	431,641
Stimulants/Anti-obesity/Anorexia	0.8	0.0	0.1	0.8	12	0	2	10	14	8	26	13	3,186	44,735	363	0.6	3,786
Miscellaneous Psychological/Neurological Agents	0.8	0.7	0.0	0.0	81	80	0	0	106	110	100	14	30,740	3,251,226	3,955	6.5	40,332
Analgesics and Anesthetics	1.0	0.3	0.1	0.6	27	18	4	5	28	63	49	8	279,315	7,831,581	28,562	47.0	292,775
Neuromuscular Agents	1.4	0.4	0.3	0.7	49	25	12	12	36	69	42	17	280,769	10,101,153	19,478	32.0	207,735
Nutritional Products	0.8	0.0	0.2	0.5	12	0	6	6	15	13	23	12	172,599	2,623,884	21,655	35.6	219,441
Hematological Agents	1.0	0.1	0.2	0.7	26	12	6	8	26	133	26	12	170,651	4,441,514	16,545	27.2	168,771
Topical Products	0.6	0.2	0.2	0.2	19	11	5	2	30	46	34	11	250,544	7,601,772	37,223	61.2	398,183
Miscellaneous Products	0.4	0.0	0.0	0.3	6	2	1	3	18	91	150	10	22,736	403,230	6,447	10.6	64,506
Unknown Therapeutic Category	0.6	0.0	0.0	0.0	17	0	0	0	29	0	0	0	205,818	6,068,937	33,606	55.3	353,986
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	4,133,225	140,609,021	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 9 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 20,430 beneficiaries who were in nursing facilities for part of their enrollment and their 183,568 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. For information about these therapeutic categories, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

In Ohio, 4.7 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Table 9

All Medicaid Beneficiaries

Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup>  
 OHIO, 1999

Top 10 Drug Groups in Nursing Facilities	Users				Among Users		
	Total Medicaid Rx \$	No. of Users	As % of All-Year NF Residents	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$18,789,724	25,241	41.5 %	270,089	0.8	\$85	\$70
ANTIDEPRESSANTS	15,534,336	34,609	56.9	363,895	0.8	52	43
ULCER DRUGS	11,879,746	26,852	44.2	279,301	0.7	59	43
ANTICONVULSANT	7,194,115	15,918	26.2	171,774	1.1	40	42
DERMATOLOGICAL	7,087,012	81,490	134.0	885,022	0.3	26	8
ANTIHYPERTENSIVE	5,865,023	21,973	36.1	224,781	0.8	31	26
ANTIIDIABETIC	4,691,100	18,469	30.4	190,932	0.9	29	25
ANTIASTHMATIC	4,250,067	24,026	39.5	243,406	0.6	29	17
ANALGESICS - Narcotic	4,050,900	26,487	43.6	270,114	0.7	23	15
ANTIANSIETY AGENTS	3,939,748	22,703	37.3	237,679	0.8	22	17

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 10 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 20,430 beneficiaries who were in nursing facilities for part of their enrollment and their 183,568 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 1999 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE 10A

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE<sup>a, b, c, d</sup> OHIO, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS					
	No. of Rx	Rx \$	No. of Users	Residents	Mean No. of Mos among Users	Mean Rx	Mean Rx \$	No. of Users	Residents	Mean No. of Mos among Users	No. of Rx	Mean Rx \$	No. of Users	Residents	Mean No. of Mos among Users	Mean Rx \$
<b>All</b>	<b>2,032,234</b>	<b>\$83,281,771</b>	<b>25,241</b>	<b>41.5 %</b>	<b>270,089</b>	<b>0.8</b>	<b>\$70</b>	<b>34,609</b>	<b>56.9 %</b>	<b>363,895</b>	<b>0.8</b>	<b>\$43</b>				
<b>Female</b>	1,449,119	57,901,263	17,507	39.3	188,301	0.8	65	25,659	57.5	271,247	0.8	42				
<b>Disabled</b>	181,765	8,965,217	2,202	64.8	24,951	1.1	111	2,456	72.3	27,092	0.9	53				
64 or younger	177,443	8,764,004	2,134	64.7	24,249	1.1	112	2,389	72.4	26,483	0.9	52				
65-74	4,214	200,524	66	68.0	678	1.1	98	66	68.0	597	0.8	60				
75-84	102	552	2	200.0	24	0.2	2	1	100.0	12	1.0	7				
85 and older	6	137	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
<b>Other Eligibles</b>	1,267,297	48,935,005	15,305	37.1	163,350	0.8	58	23,203	56.3	244,155	0.8	41				
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
65-74	225,822	9,856,478	2,835	59.0	30,960	0.9	88	3,440	71.6	37,067	0.8	45				
75-84	491,526	19,384,079	6,029	42.3	64,946	0.8	60	8,811	61.9	93,339	0.8	42				
85 and older	549,949	19,694,448	6,441	29.1	67,444	0.7	42	10,952	49.4	113,749	0.8	39				
<b>Male</b>	583,115	25,380,508	7,734	47.7	81,788	0.9	80	8,950	55.2	92,648	0.8	44				
<b>Disabled</b>	180,540	9,207,192	2,182	60.7	24,475	1.1	123	2,212	61.6	24,219	0.9	49				
64 or younger	176,907	9,039,282	2,144	60.9	24,066	1.1	123	2,166	61.6	23,714	0.9	49				
65-74	3,633	167,910	38	51.4	409	0.8	106	46	62.2	505	0.9	41				
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
<b>Other Eligibles</b>	402,575	16,173,316	5,552	44.0	57,313	0.8	62	6,738	53.4	68,429	0.8	43				
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
65-74	133,794	5,908,655	1,809	57.3	19,739	0.9	79	1,897	60.1	20,459	0.8	45				
75-84	170,020	6,664,105	2,427	45.3	24,747	0.8	57	2,954	55.2	29,712	0.8	42				
85 and older	98,761	3,600,556	1,316	32.1	12,827	0.6	44	1,887	46.0	18,258	0.8	40				
<b>Unknown</b>	57	1,041	0	0.0	0	0.0	0	0	0.0	0	0.0	0				

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 10A includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 20,430 beneficiaries who were in nursing facilities for part of their enrollment and their 183,568 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 1999 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 10B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE<sup>a, b, c, d</sup>  
 OHIO, 1999

Beneficiary Characteristics	ULCER DRUGS					ANTICONVULSANT					DERMATOLOGICAL				
	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Users as % of All-Year NF	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Users as % of All-Year NF	No. of Bene Mos among Residents	Mean No. of Rx	Mean Rx \$	Mean No. of Rx
<b>All</b>	<b>26,852</b>	<b>44.2 %</b>	<b>0.7</b>	<b>\$43</b>	<b>1.1</b>	<b>26.2 %</b>	<b>171,774</b>	<b>1.1</b>	<b>\$42</b>	<b>1.1</b>	<b>81,490</b>	<b>134.0 %</b>	<b>885,022</b>	<b>0.3</b>	<b>\$8</b>
<b>Female</b>	19,644	44.0	0.7	42	1.0	22.8	109,700	1.0	39	1.0	57,947	129.9	631,819	0.3	8
<b>Disabled</b>	1,679	49.4	0.8	47	1.2	67.0	25,499	1.2	57	1.2	5,587	164.4	63,244	0.3	10
64 or younger	1,629	49.4	0.8	47	1.2	67.8	25,061	1.2	58	1.2	5,447	165.1	61,755	0.3	10
65-74	49	50.5	0.8	47	1.0	40.2	426	1.0	37	1.0	139	143.3	1,481	0.3	8
75-84	1	100.0	0.8	3	0.3	100.0	12	0.3	1	0.3	0	0.0	0	0.0	0
85 and older	0	0.0	0.0	0	0.0	0.0	0	0.0	0	0.0	1	100.0	8	0.4	9
<b>Other Eligibles</b>	17,964	43.6	0.7	42	1.0	19.1	84,201	1.0	33	1.0	52,357	127.1	568,539	0.3	8
64 or younger	0	0.0	0.0	0	0.0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
65-74	2,402	50.0	0.7	45	1.1	41.3	21,819	1.1	42	1.1	6,579	136.9	73,132	0.3	8
75-84	6,452	45.3	0.7	43	1.0	23.6	36,410	1.0	33	1.0	18,141	127.4	198,164	0.3	8
85 and older	9,110	41.1	0.7	40	0.9	11.4	25,972	0.9	26	0.9	27,637	124.7	297,243	0.3	7
<b>Male</b>	7,208	44.5	0.7	44	1.1	35.6	62,074	1.1	47	1.1	23,543	145.3	253,203	0.3	9
<b>Disabled</b>	1,801	50.1	0.8	50	1.3	65.2	26,243	1.3	60	1.3	5,807	161.6	64,874	0.3	11
64 or younger	1,764	50.1	0.8	50	1.3	65.5	25,840	1.3	60	1.3	5,692	161.8	63,565	0.3	11
65-74	37	50.0	0.9	59	1.2	50.0	403	1.2	50	1.2	115	155.4	1,309	0.4	8
75-84	0	0.0	0.0	0	0.0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
85 and older	0	0.0	0.0	0	0.0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	5,407	42.9	0.7	41	1.0	27.2	35,831	1.0	38	1.0	17,736	140.6	188,329	0.3	8
64 or younger	0	0.0	0.0	0	0.0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
65-74	1,525	48.3	0.7	46	1.1	44.5	15,379	1.1	45	1.1	4,650	147.2	51,156	0.3	9
75-84	2,256	42.1	0.7	40	1.0	26.9	14,864	1.0	35	1.0	7,445	139.0	79,040	0.3	8
85 and older	1,626	39.7	0.7	39	0.9	14.1	5,588	0.9	27	0.9	5,641	137.7	58,133	0.3	8
<b>Unknown</b>	1	100.0	1.0	10	0.0	0.0	0	0.0	0	0.0	3	300.0	36	0.9	18

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 10B includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 20,430 beneficiaries who were in nursing facilities for part of their enrollment and their 183,568 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 1999 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 10C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE<sup>a, b, c, d</sup>  
 OHIO, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIIDIABETIC					ANTIASTHMATIC				
	Users as %					Users as %					Users as %				
	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>21,973</b>	<b>36.1 %</b>	<b>224,781</b>	<b>0.8</b>	<b>\$26</b>	<b>18,469</b>	<b>30.4 %</b>	<b>190,932</b>	<b>0.9</b>	<b>\$25</b>	<b>24,026</b>	<b>39.5 %</b>	<b>243,406</b>	<b>0.6</b>	<b>\$18</b>
<b>Female</b>	15,775	35.4	162,343	0.8	25	13,650	30.6	142,119	0.9	25	16,642	37.3	170,493	0.6	16
<b>Disabled</b>	1,085	31.9	11,834	0.9	30	1,281	37.7	13,933	1.0	32	1,404	41.3	14,812	0.7	22
64 or younger	1,049	31.8	11,488	0.9	30	1,236	37.5	13,600	1.0	32	1,356	41.1	14,383	0.7	22
65-74	35	36.1	334	0.8	25	45	46.4	333	1.0	27	44	45.4	389	1.0	33
75-84	1	100.0	12	0.9	6	0	0.0	0	0.0	0	2	200.0	24	1.4	7
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	200.0	16	0.2	4
<b>Other Eligibles</b>	14,689	35.7	150,497	0.8	25	12,369	30.0	128,186	0.8	24	15,237	37.0	155,669	0.5	16
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,976	41.1	21,170	0.9	28	2,492	51.9	26,520	0.9	28	2,275	47.4	23,315	0.7	22
75-84	5,398	37.9	55,693	0.8	26	5,290	37.1	55,035	0.9	25	5,681	39.9	58,497	0.6	18
85 and older	7,315	33.0	73,634	0.8	24	4,587	20.7	46,631	0.8	20	7,281	32.9	73,857	0.5	13
<b>Male</b>	6,198	38.2	62,438	0.8	28	4,819	29.7	48,813	0.9	25	7,384	45.6	72,913	0.7	20
<b>Disabled</b>	1,238	34.5	13,285	0.9	30	1,101	30.6	11,753	0.9	30	1,511	42.1	15,618	0.8	22
64 or younger	1,216	34.6	13,040	0.9	30	1,075	30.5	11,449	0.9	30	1,472	41.8	15,228	0.8	22
65-74	22	29.7	245	1.0	29	26	35.1	304	1.0	37	39	52.7	390	1.1	41
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	4,960	39.3	49,153	0.8	27	3,718	29.5	37,060	0.8	23	5,873	46.6	57,295	0.7	19
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,375	43.5	14,426	0.9	29	1,136	36.0	11,859	0.9	26	1,553	49.2	15,976	0.8	24
75-84	2,152	40.2	21,219	0.8	27	1,691	31.6	16,569	0.8	22	2,551	47.6	24,715	0.6	19
85 and older	1,433	35.0	13,508	0.8	26	891	21.7	8,632	0.8	21	1,769	43.2	16,604	0.5	16
<b>Unknown</b>	1	100.0	12	1.0	21	0	0.0	0	0.0	0	1	100.0	12	0.2	4

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

- a. Table 10C includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 20,430 beneficiaries who were in nursing facilities for part of their enrollment and their 183,568 benefit months were excluded from the analysis.
- b. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- d. The top 10 drug groups were determined based on total 1999 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 10D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE<sup>a, b, c, d</sup>  
 OHIO, 1999

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTI-ANXIETY AGENTS						
	Users as %		Mean		No. of Rx	Users as %		Mean		No. of Rx		
	No. of Users	Residents	No. of Bene Mos among Users	Mean Rx-\$		No. of All-Year NF Residents	No. of Bene Mos among Users	Mean Rx-\$				
<b>All</b>	<b>26,487</b>	<b>43.6 %</b>	<b>270,114</b>	<b>0.7</b>	<b>\$15</b>	<b>22,703</b>	<b>37.3 %</b>	<b>237,679</b>	<b>0.8</b>	<b>\$17</b>	<b>60,806</b>	<b>607,643</b>
<b>Female</b>	20,349	45.6	209,198	0.7	15	16,747	37.6	176,086	0.8	16	44,599	449,187
<b>Disabled</b>	1,802	53.0	19,050	0.8	19	1,690	49.7	18,672	0.9	18	3,398	36,513
64 or younger	1,744	52.9	18,529	0.8	19	1,644	49.8	18,238	0.9	18	3,299	35,595
65-74	57	58.8	509	0.8	16	44	45.4	410	0.8	24	97	898
75-84	1	100.0	12	1.8	8	2	200.0	24	0.2	1	1	12
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	8
<b>Other Eligibles</b>	18,547	45.0	190,148	0.7	15	15,057	36.5	157,414	0.7	16	41,201	412,674
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	2,489	51.8	26,118	0.8	19	2,220	46.2	23,646	0.9	19	4,804	49,786
75-84	6,611	46.4	68,562	0.7	17	5,475	38.4	57,963	0.8	16	14,240	144,433
85 and older	9,447	42.6	95,468	0.6	12	7,362	33.2	75,805	0.7	15	22,157	218,455
<b>Male</b>	6,138	37.9	60,916	0.6	14	5,956	36.8	61,593	0.8	18	16,206	158,444
<b>Disabled</b>	1,535	42.7	15,873	0.7	19	1,603	44.6	17,390	1.0	21	3,593	37,706
64 or younger	1,498	42.6	15,471	0.8	19	1,561	44.4	16,956	1.0	21	3,519	36,924
65-74	37	50.0	402	0.4	8	42	56.8	434	0.9	31	74	782
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Other Eligibles</b>	4,603	36.5	45,043	0.6	12	4,353	34.5	44,203	0.7	16	12,613	120,738
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	4
65-74	1,227	38.9	12,724	0.6	14	1,233	39.0	13,268	0.8	20	3,158	32,468
75-84	1,888	35.3	18,270	0.6	13	1,849	34.5	18,618	0.7	16	5,355	51,070
85 and older	1,488	36.3	14,049	0.5	11	1,271	31.0	12,317	0.6	13	4,098	37,196
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 10D includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 20,430 beneficiaries who were in nursing facilities for part of their enrollment and their 183,568 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 1999 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

APPENDIX TABLE A.1

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
OHIO, 1999

Beneficiary Characteristics	No. of Beneficiaries					No. of Beneficiaries by Age					Children	Adults	Children	Unknown
	All	Aged	Disabled	Adults	Unknown	All	Aged	Disabled	Adults	Unknown				
<b>All</b>	<b>1,365,939</b>	<b>136,327</b>	<b>250,030</b>	<b>224,722</b>	<b>754,642</b>	<b>218</b>	<b>12,552,809</b>	<b>1,362,913</b>	<b>2,619,738</b>	<b>1,709,156</b>	<b>6,860,625</b>	<b>377</b>		
<b>Age</b>														
5 and younger	302,972	0	6,396	0	296,441	135	2,629,556	0	66,645	0	2,562,776	135		
6-14	347,198	0	23,589	0	323,609	0	3,357,986	0	250,025	0	3,107,961	0		
15-20	156,892	0	14,862	12,062	129,967	1	1,383,053	0	151,454	76,894	1,154,704	1		
21-44	305,056	0	99,459	200,957	4,620	20	2,616,662	0	1,043,503	1,537,957	35,170	32		
45-64	115,649	0	103,962	11,655	0	32	1,185,817	0	1,091,670	94,039	0	108		
65-74	47,735	46,051	1,628	36	0	20	494,987	479,680	15,025	212	0	70		
75-84	47,529	47,415	100	6	0	8	474,486	473,395	1,037	28	0	26		
85 and older	42,899	42,857	34	6	0	2	410,205	409,795	379	26	0	5		
Unknown	9	4	0	0	5	0	57	43	0	0	14	0		
<b>Gender</b>														
Female	813,498	103,222	134,253	190,042	385,872	109	7,475,223	1,047,510	1,430,187	1,483,947	3,513,399	180		
Male	552,437	33,105	115,777	34,680	368,766	109	5,077,576	315,403	1,189,551	225,209	3,347,216	197		
Unknown	4	0	0	0	4	0	10	0	0	0	10	0		
<b>Race</b>														
White	853,996	106,336	170,730	140,476	436,316	138	7,645,998	1,048,815	1,787,143	1,007,349	3,802,439	252		
African American	445,117	25,298	71,978	74,327	273,461	53	4,306,989	265,256	757,122	629,995	2,654,541	75		
Other/unknown	66,826	4,693	7,322	9,919	44,865	27	599,822	48,842	75,473	71,812	403,645	50		
<b>Use of Nursing Facilities</b>														
All year	60,806	53,813	6,991	0	2	0	607,643	533,420	74,219	0	4	0		
Part year	20,431	15,470	4,906	38	11	6	183,749	135,365	47,876	359	103	46		
None	1,284,702	67,044	238,133	224,684	754,629	212	11,761,417	694,128	2,497,643	1,708,797	6,860,518	331		
<b>Maintenance Assistance Status</b>														
Cash	522,885	35,415	179,291	80,542	227,637	0	5,329,554	404,102	1,968,902	693,324	2,263,226	0		
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0		
Poverty related	364,369	2,741	3,794	41,530	316,304	0	2,978,303	28,520	39,020	243,750	2,667,013	0		
Other/unknown	478,685	98,171	66,945	102,650	210,701	218	4,244,952	930,291	611,816	772,082	1,930,386	377		
<b>Dual Status<sup>c</sup></b>														
Full dual, all year	182,932	118,710	63,280	794	105	43	1,850,437	1,174,047	669,256	5,856	1,116	162		
Full dual, part year	17,375	7,441	9,885	48	0	1	188,533	81,024	107,025	480	0	4		
Non-dual, all year	1,165,632	10,176	176,865	223,880	754,537	174	10,513,839	107,842	1,843,457	1,702,820	6,859,509	211		
<b>Managed Care Status</b>														
FFS all year	944,104	136,318	243,484	130,339	433,777	186	8,426,395	1,362,810	2,549,460	872,287	3,641,493	345		
FFS part year, with Rx claims	108,556	7	4,284	31,142	73,123	0	1,125,281	84	47,842	300,794	776,561	0		
FFS part year, no Rx claims	166,750	1	1,783	28,530	136,436	0	1,636,809	12	18,131	252,614	1,366,052	0		
MC all year, with Rx claims	42	0	0	16	26	0	278	0	0	73	205	0		
MC all year, no Rx claims	146,487	1	479	34,695	111,280	32	1,364,046	7	4,305	283,388	1,076,314	32		

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table A.1 includes the beneficiaries represented by Cell B of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

c. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 1999. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. The "Non-dual, all year" group includes beneficiaries who were never dually eligible or dually eligible but never had pharmacy benefits. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.2  
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS  
 OHIO, 1999

	Benes and					
	Bene Mos in Cell B of Table 1		Included in Cell C of Table 1		Excluded from Cell C of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
<b>All</b>	<b>1,365,939</b>	<b>12,552,809</b>	<b>1,219,410</b>	<b>9,529,869</b>	<b>146,529</b>	<b>3,022,940</b>
FFS all year	944,104	8,426,395	944,104	8,426,395	0	0
FFS part year, with Rx claims	108,556	1,125,281	108,556	548,670	0	576,611
FFS part year, with no Rx claims	166,750	1,636,809	166,750	554,804	0	1,082,005
MC all year, with Rx claims	42	278	0	0	42	278
MC all year, with no Rx claims	146,487	1,364,046	0	0	146,487	1,364,046

Source: Data for this table are from the MAX 1999 file for Ohio, released by CMS in 10/2003. This table was produced on 06/25/2004.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.