

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2001 UNITED STATES

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TABLE 1  
OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION  
UNITED STATES, 2001

Inclusion Criteria (2001)	No. of Dual and Non-dual Eligible Benes (Cell)	No. of Dual Eligible Benes (Cell) <sup>g</sup>	No. of Non-dual Eligible Benes (Cell)
1. Benes who were eligible for Medicaid during at least one month <sup>a</sup>	48,491,219 (A)	7,347,115 (E)	41,144,104 (I)
2. Benes who had Medicaid pharmacy benefits during at least one month <sup>b</sup>	46,166,665 (B)	6,363,555 (F)	39,803,110 (J)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month <sup>c, d, e</sup>	34,377,326 (C)	5,693,212 (G)	28,684,114 (K)
4. Benes who were all-year nursing facility residents <sup>f</sup>	928,724 (D)	855,393 (H)	73,331 (L)

Source: Data for this table are from the MAX 2001 file for the U.S., released by CMS in 09/2005. This table was produced on 11/01/2006.

- 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 2001 (based on MAX data element "Eligible Restricted Benefits Flag").
- 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 2001, 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 21 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 21 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.
- d. The total Medicaid pharmacy reimbursement for the U.S. in 2001 was \$24,352,195,690, of which \$1,441,874,661 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 21 states where no PHP provided a pharmacy benefit in 2001 were AL, AR, CA, CO, FL, GA, IA, KY, MA, MI, NE, NY, OR, PA, SC, SD, TN, TX, UT, WA, and WI. This list was constructed based on consultation with CMS staff and on the CMS 2001 Medicaid Managed Care Enrollment Report, which can be found at: <https://www.cms.hhs.gov/MedicaidDataSourcesGenInfo/Downloads/mmc01.pdf>.
- f. Cell H represents the study population for Tables D.8 through D.10D. Cell L represents the study population for Tables ND.8 through ND.10D. All-year nursing facility residents are the beneficiaries who resided in nursing facilities throughout their enrollment in 2001. 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 D.8 through D.10D and ND.8 through ND.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 D.2 through D.7D, Tables D.11 through D.13, and Supplemental Tables 1 through 1E corresponding to the sample of beneficiaries in Cell G. 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. Pharmacy benefit use and reimbursement among non-dual eligibles are presented in Tables ND.2 through ND.7D and Tables ND.11 through ND.13, corresponding to the sample of beneficiaries in Cell K.
- 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 2001. All benefit months of such dual eligible beneficiaries, of which 1.6 percent were restricted benefit months without a pharmacy benefit in the U.S., were used in the dual tables.
- Characteristics of non-dual eligible beneficiaries represented by Cell J are shown in Appendix Table A.1 and characteristics of non-dual eligible beneficiaries and their benefit months included in Cell J but excluded from Cell K are shown in Appendix Table A.2. Characteristics of dual eligible beneficiaries represented by Cell F are shown in Appendix Table A.3, and characteristics of dual eligible 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>  
 UNITED STATES, 2001

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>34,377,326</b>	<b>3,448,939</b>	<b>6,134,899</b>	<b>8,553,196</b>	<b>16,238,701</b>	<b>1,591</b>	<b>275,501,525</b>	<b>35,050,932</b>	<b>63,902,093</b>	<b>56,285,973</b>	<b>120,255,798</b>	<b>6,729</b>
<b>Age</b>												
5 and younger	6,985,305	66	175,361	2,096	6,807,641	141	49,529,577	446	1,676,489	8,943	47,843,303	396
6-14	7,100,969	59	472,186	4,515	6,624,145	64	56,887,701	354	4,970,122	20,593	51,896,266	366
15-20	3,967,979	52	344,807	994,211	2,628,691	218	29,623,864	402	3,540,751	6,564,163	19,517,366	1,182
21-44	8,913,380	444	2,047,186	6,818,493	46,684	573	66,679,362	4,087	21,329,632	45,131,868	211,430	2,345
45-64	3,234,630	3,698	2,512,086	7,18,010	280	556	30,481,378	32,631	25,969,850	4,475,282	1,320	2,295
65-74	1,600,784	1,183,955	412,214	4,570	18	27	16,806,637	12,196,567	4,582,173	27,690	120	87
75-84	1,419,082	1,291,213	126,946	911	5	7	14,766,065	13,369,912	1,390,470	5,607	36	40
85 and older	1,014,136	969,428	44,097	454	152	5	9,892,143	9,446,388	442,496	2,373	868	18
Unknown	141,061	24	16	9,936	131,085	0	834,798	145	110	49,454	785,089	0
<b>Gender</b>												
Female	20,851,871	2,478,532	3,213,371	7,070,401	8,088,317	1,250	167,247,613	25,458,358	33,931,025	47,919,219	59,934,035	4,976
Male	13,412,342	970,290	2,921,189	1,479,600	8,040,922	341	107,518,224	9,591,841	29,969,064	8,355,622	59,599,944	1,753
Unknown	113,113	117	339	3,195	109,462	0	735,688	733	2,004	11,132	721,819	0
<b>Race</b>												
White	15,685,868	1,974,422	3,210,703	3,449,570	7,050,228	945	129,722,482	19,592,360	33,370,045	22,809,145	53,946,675	4,257
African American	8,261,390	528,670	1,478,020	1,776,419	4,477,913	368	68,102,029	5,525,806	15,333,455	12,174,777	35,066,483	1,508
Other/unknown	10,430,068	945,847	1,446,176	3,327,207	4,710,560	278	77,677,014	9,932,766	15,198,593	21,302,051	31,242,640	964
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	928,724	774,726	153,386	351	261	0	9,396,374	7,754,621	1,637,248	2,562	1,943	0
Part year	504,023	371,955	127,742	2,690	1,632	4	4,671,203	3,358,277	1,280,017	20,202	12,689	18
None	32,944,579	2,302,258	5,853,771	8,550,155	16,236,808	1,587	261,433,948	23,938,034	60,984,828	56,263,209	120,241,166	6,711
<b>Maintenance Assistance Status</b>												
Cash	12,884,228	1,486,651	4,658,119	2,398,628	4,340,829	1	113,380,130	16,446,615	49,838,660	15,168,656	31,926,198	1
Medically needy	2,281,782	588,141	434,098	642,791	616,739	13	17,253,395	5,450,799	3,975,192	4,169,089	3,658,227	88
Poverty-related	10,283,563	360,570	390,565	1,057,790	8,473,762	876	76,425,721	3,612,653	3,754,157	5,586,514	63,468,651	3,746
Other/unknown	8,927,753	1,013,577	652,117	4,453,987	2,807,371	701	68,442,279	9,540,865	6,334,084	31,361,714	21,202,722	2,894
<b>Dual Medicare Status<sup>d</sup></b>												
Full dual, all year	5,506,383	3,089,920	2,365,720	49,732	954	57	57,717,325	31,733,332	25,597,652	378,376	7,718	247
Full dual, part year	186,829	100,046	85,283	1,497	3	0	1,861,330	995,847	850,499	14,948	36	0
Non-dual, all year	28,684,114	258,973	3,683,896	8,501,967	16,237,744	1,534	215,922,870	2,321,753	37,453,942	55,892,649	120,248,044	6,482
<b>Managed Care Status</b>												
FFS all year	28,161,132	3,367,856	5,786,850	6,896,981	12,107,876	1,569	252,645,041	34,628,670	62,140,924	50,488,846	105,379,935	6,666
FFS part year, with Rx claims	2,578,160	57,494	242,418	781,535	1,496,697	16	11,576,819	334,607	1,361,321	3,235,304	6,645,537	50
FFS part year, no Rx claims	3,637,837	23,589	105,601	874,602	2,634,039	6	11,279,273	87,655	399,791	2,561,664	8,230,150	13

Source: Data for this table are from the MAX 2001 file for the U.S., released by CMS in 09/2005. This table was produced on 11/01/2006.

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. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

d. 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 2001. 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 Mo(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>  
 UNITED STATES, 2001

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	No. of Beneficiaries
<b>All</b>	<b>57.9 %</b>	<b>11.9</b>	<b>\$666</b>	<b>\$56</b>	<b>\$4,531</b>	<b>14.7 %</b>	<b>34,377,326</b>
<b>Age</b>							
5 and younger	56.1	3.5	115	33	1,784	6.4	6,985,305
6-14	48.7	3.5	191	55	1,575	12.1	7,100,969
15-20	46.8	3.7	206	56	2,298	9.0	3,967,979
21-44	53.3	9.1	634	70	4,188	15.1	8,913,380
45-64	77.4	33.8	2,130	63	10,385	20.5	3,234,630
65-74	82.9	36.3	1,879	52	8,567	21.9	1,600,784
75-84	85.3	40.3	1,910	47	13,033	14.7	1,419,082
85 and older	85.1	39.8	1,649	41	19,381	8.5	1,014,136
Unknown	17.1	0.6	24	39	1,404	1.7	141,061
<b>Basis of Eligibility<sup>c</sup></b>							
Aged	83.7	37.9	1,772	47	13,279	13.3	3,448,939
Disabled	80.8	31.7	2,165	68	12,033	18.0	6,134,899
Adults	45.8	4.0	186	47	1,679	11.1	8,553,196
Children	50.2	3.1	119	39	1,340	8.9	16,238,701
Unknown	45.1	4.8	288	60	4,465	6.4	1,591
<b>Gender</b>							
Female	59.3	13.1	677	52	4,467	15.1	20,851,871
Male	56.1	10.1	656	65	4,652	14.1	13,412,342
Unknown	21.8	0.8	36	43	1,734	2.0	113,113
<b>Race</b>							
White	64.7	16.1	883	55	5,803	15.2	15,685,868
African American	55.6	9.0	501	55	3,677	13.6	8,261,390
Other/unknown	49.5	7.9	472	60	3,293	14.3	10,430,068
<b>Use of Nursing Facilities<sup>d</sup></b>							
Entire year	88.7	57.1	2,594	45	35,206	7.4	928,724
Part year	90.4	47.7	2,368	50	25,299	9.4	504,023
None	56.6	10.1	586	58	3,348	17.5	32,944,579

Maintenance Assistance Status	66.2	17.1	1,039	61	5,398	19.3	12,884,228
Cash	66.2	17.1	1,039	61	5,398	19.3	12,884,228
Medically needy	56.9	15.0	859	57	9,876	8.7	2,281,782
Poverty related	55.3	5.3	242	46	1,812	13.4	10,283,563
Other/unknown	49.3	11.3	568	50	5,044	11.3	8,927,753

Source: Data for this table are from the MAX 2001 file for the U.S., released by CMS in 09/2005. This table was produced on 11/01/2006.

- 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. 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.
  - d. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- 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>  
 UNITED STATES, 2001

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:					Mean \$, All Services	Bene Mos	Benes	No.
				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				
<b>All</b>	<b>1.5</b>	<b>\$83</b>	<b>14.7 %</b>	<b>42.1 %</b>	<b>35.6 %</b>	<b>6.7 %</b>	<b>9.3 %</b>	<b>4.9 %</b>	<b>1.4 %</b>	<b>\$565</b>	<b>34,377,326</b>	<b>275,501,525</b>
<b>Age</b>												
5 and younger	0.5	16	6.4	43.9	48.3	4.9	2.3	0.4	0.2	252	6,985,305	49,529,577
6-14	0.4	24	12.1	51.3	41.5	3.9	2.6	0.5	0.1	197	7,100,969	56,887,701
15-20	0.5	28	9.0	53.2	38.5	4.5	3.0	0.6	0.2	308	3,967,979	29,623,864
21-44	1.2	85	15.1	46.7	33.6	7.2	8.3	3.3	0.9	560	8,913,380	66,679,362
45-64	3.6	226	20.5	22.6	19.9	11.6	25.0	15.9	5.0	1,102	3,234,630	30,481,378
65-74	3.5	179	21.9	17.1	20.4	13.3	27.9	16.8	4.5	816	1,600,784	16,806,637
75-84	3.9	184	14.7	14.7	16.9	12.4	29.8	20.7	5.5	1,253	1,419,082	14,766,065
85 and older	4.1	169	8.5	14.9	14.1	11.2	30.7	23.7	5.4	1,987	1,014,136	9,892,143
Unknown	0.1	4	1.7	82.9	16.0	0.8	0.3	0.0	0.0	237	141,061	834,798
<b>Basis of Eligibility<sup>c</sup></b>												
Aged	3.7	174	13.3	16.3	17.8	12.5	28.7	19.6	5.2	1,307	3,448,939	35,050,932
Disabled	3.0	208	18.0	19.2	26.4	12.2	24.1	14.0	4.0	1,155	6,134,899	63,902,093
Adults	0.6	28	11.1	54.2	34.1	5.6	4.5	1.2	0.4	255	8,553,196	56,285,973
Children	0.4	16	8.9	49.8	43.5	4.0	2.1	0.4	0.1	181	16,238,701	120,255,798
Unknown	1.1	68	6.4	54.9	24.9	7.4	9.1	3.0	0.8	1,056	1,591	6,729
<b>Gender</b>												
Female	1.6	84	15.1	40.7	35.1	6.9	10.0	5.6	1.6	557	20,851,871	167,247,613
Male	1.3	82	14.1	43.9	36.4	6.6	8.3	3.9	1.0	580	13,412,342	107,518,224
Unknown	0.1	6	2.0	78.2	20.1	1.1	0.5	0.1	0.0	267	113,113	735,688
<b>Race</b>												
White	1.9	107	15.2	35.3	36.1	7.6	11.5	7.2	2.3	702	15,685,868	129,722,482
African American	1.1	61	13.6	44.4	38.0	6.0	7.6	3.3	0.7	446	8,261,390	68,102,029
Other/unknown	1.1	63	14.3	50.5	32.8	6.0	7.3	2.8	0.6	442	10,430,068	77,677,014
<b>Use of Nursing Facilities<sup>d</sup></b>												
Entire year	5.6	256	7.4	11.3	8.5	7.2	27.3	32.9	12.9	3,480	928,724	9,396,374
Part year	5.1	256	9.4	9.6	11.8	10.0	30.4	28.4	9.7	2,730	504,023	4,671,203
None	1.3	74	17.5	43.4	36.7	6.7	8.5	3.8	0.9	422	32,944,579	261,433,948

**Maintenance**

**Assistance Status**

Cash	1.9	118	19.3	33.8	34.4	9.1	14.1	6.8	1.7	613	12,884,228	113,380,130
Medically needy	2.0	114	8.7	43.1	28.0	7.3	11.9	7.4	2.1	1,306	2,281,782	17,253,395
Poverty related	0.7	33	13.4	44.7	44.1	5.1	4.2	1.5	0.4	244	10,283,563	76,425,721
Other/unknown	1.5	74	11.3	50.7	29.3	5.0	7.6	5.5	1.9	658	8,927,753	68,442,279

Source: Data for this table are from the MAX 2001 file for the U.S., released by CMS in 09/2005. This table was produced on 11/01/2006.

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.

c. 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.

d. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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>  
 UNITED STATES, 2001

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs				
	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$			
<b>All</b>	<b>1.5</b>	<b>\$83</b>	<b>0.7</b>	<b>\$64</b>	<b>0.1</b>	<b>\$93</b>	<b>0.1</b>	<b>\$55</b>	<b>0.7</b>	<b>\$14</b>	<b>\$20</b>
<b>Age</b>											
5 and younger	0.5	16	0.2	12	0.0	62	0.0	23	0.3	3	13
6-14	0.4	24	0.2	19	0.0	86	0.0	48	0.2	4	19
15-20	0.5	28	0.2	22	0.0	93	0.0	59	0.2	4	18
21-44	1.2	85	0.6	66	0.1	121	0.1	77	0.6	12	21
45-64	3.6	226	1.7	175	0.2	102	0.2	68	1.6	35	21
65-74	3.5	179	1.7	136	0.2	81	0.2	48	1.5	31	20
75-84	3.9	184	1.8	136	0.3	77	0.3	41	1.8	34	19
85 and older	4.1	169	1.7	120	0.4	72	0.4	35	2.0	35	17
Unknown	0.1	4	0.0	3	0.0	103	0.0	27	0.1	1	12
<b>Basis of Eligibility<sup>d</sup></b>											
Aged	3.7	174	1.7	130	0.3	77	0.3	40	1.7	32	19
Disabled	3.0	208	1.4	162	0.2	112	0.2	71	1.4	31	22
Adults	0.6	28	0.3	22	0.0	81	0.0	55	0.3	5	16
Children	0.4	16	0.2	12	0.0	66	0.0	31	0.2	3	14
Unknown	1.1	68	0.5	56	0.0	123	0.0	49	0.6	10	16
<b>Gender</b>											
Female	1.6	84	0.8	64	0.1	85	0.1	51	0.8	14	19
Male	1.3	82	0.6	64	0.1	109	0.1	62	0.6	13	22
Unknown	0.1	6	0.0	4	0.0	107	0.0	27	0.1	1	12
<b>Race</b>											
White	1.9	107	0.9	81	0.1	91	0.1	55	0.9	18	20
African American	1.1	61	0.5	47	0.1	95	0.1	50	0.5	10	19
Other/unknown	1.1	63	0.5	49	0.1	97	0.1	59	0.5	10	20
<b>Use of Nursing Facilities<sup>e</sup></b>											
Entire year	5.6	256	2.3	186	0.5	79	0.5	38	2.7	50	18
Part year	5.1	256	2.2	188	0.5	86	0.5	44	2.5	47	19
None	1.3	74	0.6	57	0.1	96	0.1	59	0.6	12	20

**Maintenance Assistance**

Status	1.9	118	61	0.9	91	100	0.1	8	63	0.9	19	21
Cash												
Medically needy	2.0	114	57	0.9	86	96	0.2	9	52	0.9	19	20
Poverty related	0.7	33	46	0.3	25	77	0.0	2	41	0.3	6	17
Other/unknown	1.5	74	50	0.7	56	85	0.1	5	46	0.7	13	18

Source: Data for this table are from the MAX 2001 file for the U.S., released by CMS in 09/2005. This table was produced on 11/01/2006.

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.

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 the U.S., 44.4 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 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).

d. 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.

e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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>  
 UNITED STATES, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per 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	Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos	
		Generic	Generic		Generic	Generic		Generic	Generic						
Anti-infective Agents	0.3	0.2	0.0	0.1	\$18	\$17	\$0	\$2	\$63	\$106	\$64	\$12	\$12,791,502	37.2%	126,552,205
Biologics	0.2	0.1	0.0	0.0	128	88	11	30	731	646	2,217	854	202,584,744	0.4	1,583,606
Antineoplastic Agents	0.5	0.2	0.1	0.2	107	73	22	13	212	349	178	73	356,540,941	0.9	3,320,028
Endocrine/Metabolic Drugs	0.6	0.4	0.1	0.2	30	25	2	3	47	69	25	16	1,742,462,957	16.8	58,792,884
Cardiovascular Agents	1.4	0.6	0.1	0.7	52	34	3	14	37	60	35	20	2,893,697,852	15.3	55,768,236
Respiratory Agents	0.5	0.3	0.0	0.2	21	16	1	4	44	62	24	22	1,888,429,397	25.9	89,636,809
Gastrointestinal Agents	0.6	0.3	0.0	0.2	45	37	3	6	79	124	95	22	1,961,810,289	12.0	43,616,758
Genitourinary Agents	0.3	0.2	0.0	0.1	15	13	0	2	48	58	37	19	290,035,997	5.6	19,227,506
CNS Drugs	1.0	0.5	0.1	0.4	84	64	9	11	81	123	119	24	5,057,413,928	16.8	59,988,221
Stimulants/Anti-obesity/Anorexia	0.6	0.4	0.0	0.2	33	25	2	7	58	72	51	34	234,385,667	2.0	7,033,492
Miscellaneous Psychological/Neurological Agents	0.5	0.4	0.0	0.1	58	55	0	3	116	129	54	42	216,814,427	1.0	3,753,466
Analgesics and Anesthetics	0.5	0.2	0.0	0.3	25	18	2	5	48	108	74	14	2,024,248,756	23.6	82,069,952
Neuromuscular Agents	0.8	0.3	0.1	0.4	48	36	3	8	59	105	43	21	1,523,222,390	8.8	31,945,382
Nutritional Products	0.4	0.0	0.1	0.3	7	1	3	4	18	26	27	15	186,505,726	7.6	24,944,072
Hematological Agents	0.6	0.2	0.1	0.3	62	52	3	7	100	284	22	24	949,817,862	4.3	15,296,060
Topical Products	0.3	0.1	0.0	0.2	10	7	1	3	34	53	40	16	803,900,336	22.1	77,603,985
Miscellaneous Products	0.4	0.1	0.0	0.2	61	43	10	8	174	292	264	48	201,263,358	0.9	3,288,295
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	7	0	0	0	28	0	0	0	42,068,781	1.7	6,415,217
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	409,588,485	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for the U.S., released by CMS in 09/2005. This table was produced on 11/01/2006.

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 2001. 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 the U.S., 44.4 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>  
 UNITED STATES, 2001

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	\$2,704,716,025	2,419,693	7.0 %	26,445,311	0.7	\$151		\$102
ANTIDEPRESSANTS	1,739,637,723	4,714,408	13.7	50,154,991	0.5	66		35
ULCER DRUGS	1,663,350,748	4,089,369	11.9	44,098,672	0.4	90		38
ANTICONVULSANT	1,260,453,015	2,283,826	6.6	24,930,989	0.7	72		51
ANTI-DIABETIC	1,011,182,137	2,696,590	7.8	29,252,934	0.6	57		35
ANTIVIRAL	1,010,559,542	725,457	2.1	7,769,350	0.4	326		130
ANTI-ASTHMATIC	1,010,413,825	5,825,386	16.9	61,250,899	0.3	50		16
ANALGESICS - ANTI-INFLAMMATORY	952,528,160	5,721,118	16.6	60,995,153	0.3	57		16
ANALGESICS - Narcotic	892,766,025	6,651,695	19.3	69,444,753	0.3	41		13
ANTI-HYPERLIPIDEMIC	837,520,532	1,617,429	4.7	18,003,126	0.5	85		47
Total	13,083,127,732	36,744,971		392,346,178	n.a.	n.a.		n.a.

Source: Data for this table are from the MAX 2001 file for the U.S., released by CMS in 09/2005. This table was produced on 11/01/2006.

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 2001. 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 2001. 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); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement; n.a. = not applicable.

NATIONAL COMPARISON TABLE N.1a  
OVERVIEW OF MEDICAID PHARMACY REIMBURSEMENT, ALL STATES COMBINED AND BY STATE  
ALL MEDICAID BENEFICIARIES, 2001<sup>a</sup>

	Total Rx \$ for Benes Included in this Study (TOTAL) <sup>c</sup>		Rx \$ Excluded from this Study By Reason		Rx \$ for Dual Eligible Benes Included in this Study <sup>d</sup>		As % of GRAND TOTAL	As % of GRAND TOTAL	Rx \$ for All-Year NF Residents Included in this Study <sup>e</sup>	Rx \$ for Part-Year NF Residents Excluded from this Study <sup>f</sup>	Rx \$ for Dual Eligible All-Year NF Residents Included in this Study <sup>g</sup>	Rx \$ for Dual Eligible Part-Year NF Residents Excluded from this Study <sup>h</sup>		
	Total Rx \$ for All Benes in MAX 2001 (GRAND TOTAL) <sup>b</sup>	\$	94.1 %	\$	\$	51.5 %							\$	\$
<b>All States</b>	<b>\$24,352,195,690</b>	<b>\$22,910,321,029</b>	<b>94.1 %</b>	<b>\$623,023,666</b>	<b>\$818,850,995</b>	<b>\$12,540,692,452</b>	<b>51.5 %</b>	<b>\$2,409,018,191</b>	<b>\$1,193,486,598</b>	<b>\$2,144,595,730</b>	<b>\$951,722,806</b>			
Alabama	402,696,547	397,803,965	98.8	1,524,268	3,368,314	190,977,927	47.4	44,543,310	14,070,831	41,805,504	12,573,784			
Alaska	70,934,208	68,306,035	96.3	2,628,173	0	31,003,542	43.7	2,232,331	1,006,412	1,849,461	665,940			
Arizona	4,580,329	4,543,033	99.2	37,296	0	269,880	5.9	17,281	145,891	7,121	48,926			
Arkansas	256,157,998	253,056,961	98.8	3,101,037	0	121,728,361	47.5	39,114,321	9,576,278	34,778,393	8,405,590			
California	2,801,343,067	2,684,988,184	95.8	26,354,414	90,000,469	1,620,312,073	57.8	135,776,621	113,272,086	113,376,203	85,940,074			
Colorado	185,413,733	184,856,305	99.7	515,555	41,873	116,327,370	62.7	25,227,541	14,198,869	22,964,200	12,353,423			
Connecticut	307,163,199	306,863,882	99.9	195,674	103,643	212,128,123	69.1	59,730,614	27,402,872	53,616,198	20,614,034			
Delaware	83,979,577	36,931,856	44.0	724,772	46,322,949	25,912,951	30.9	5,316,646	1,938,865	4,962,860	1,676,138			
D.C.	61,222,599	60,398,489	98.7	407,135	416,975	28,395,288	46.4	1,448,533	1,646,170	949,812	824,639			
Florida	1,519,301,624	1,432,509,286	94.3	86,776,830	15,508	793,664,225	52.2	125,933,551	62,162,891	114,308,130	49,559,184			
Georgia	726,795,659	686,288,400	94.4	40,507,259	0	319,374,664	43.9	72,822,328	28,841,606	65,962,445	25,357,587			
Hawaii	71,463,657	65,114,552	91.1	5,868,991	480,114	39,075,905	54.7	3,174,459	2,442,308	2,728,849	1,126,554			
Idaho	109,039,742	108,972,671	99.9	67,071	0	52,210,815	47.9	8,898,483	5,203,539	8,163,110	4,133,292			
Illinois	1,001,813,090	945,237,070	94.4	56,548,918	27,102	416,016,531	41.5	170,112,138	62,963,552	137,134,683	39,947,411			
Indiana	586,453,842	585,705,894	99.9	535,990	211,958	323,544,954	55.2	100,536,124	45,441,210	92,038,034	37,111,585			
Iowa	239,709,875	232,084,593	96.8	402,952	7,222,330	133,643,729	55.8	32,947,574	16,275,841	30,899,756	14,652,966			
Kansas	193,076,295	178,414,008	92.4	3,049,765	11,612,522	106,475,567	55.1	30,421,353	11,831,809	27,865,665	10,283,384			
Kentucky	616,106,960	595,426,915	96.6	6,490,391	14,189,654	265,169,313	43.0	59,609,417	23,845,889	55,006,516	20,203,931			
Louisiana	583,485,951	570,855,790	97.8	12,630,161	0	260,710,853	44.7	84,686,553	27,229,981	72,974,124	22,598,719			
Maine	209,087,193	191,939,051	91.8	17,148,142	0	105,543,429	50.5	13,110,977	8,821,132	12,300,352	7,487,201			
Maryland	277,682,630	193,457,014	69.7	25,335,598	58,890,018	153,913,822	55.4	46,800,662	17,784,867	40,095,967	13,430,894			
Massachusetts	822,564,361	789,679,140	96.0	30,895,147	1,990,074	450,690,963	54.8	77,127,052	44,868,591	70,212,673	34,260,249			
Michigan	603,305,056	534,801,492	88.6	9,544,302	58,959,262	418,741,913	69.4	58,546,808	31,966,805	54,377,443	28,735,449			
Minnesota	272,010,738	271,444,537	99.8	314,049	252,152	157,732,273	58.0	25,326,595	18,264,025	21,801,807	12,255,615			
Mississippi	524,319,979	517,357,728	98.7	4,394,067	2,568,184	312,032,716	59.5	46,369,667	14,258,614	43,449,903	12,850,945			
Missouri	690,694,518	683,732,267	99.0	4,394,067	2,568,184	405,623,247	58.7	72,767,813	40,410,505	65,575,696	34,637,421			
Montana	71,916,452	67,233,373	93.5	4,682,668	411	38,613,764	53.7	8,830,441	3,716,160	8,153,532	3,037,847			
Nebraska	172,690,860	162,823,725	94.3	565,536	9,301,599	92,460,108	53.5	5,484,582	28,161,314	4,980,215	25,385,523			
Nevada	69,157,545	66,314,642	95.9	2,770,337	72,566	33,407,877	48.3	6,291,055	3,305,397	5,377,173	2,403,608			
New Hampshire	90,630,729	89,520,746	98.8	130,954	979,029	53,424,575	58.9	13,103,647	5,591,906	12,488,730	4,858,687			
New Jersey	641,998,970	578,355,596	90.1	58,111,854	5,531,520	384,458,674	59.9	82,163,155	36,651,139	72,692,598	28,549,678			
New Mexico	60,800,794	60,718,741	99.9	76,834	5,219	51,855,600	85.3	10,380,106	3,740,836	9,401,165	3,252,623			

Table N.1a

All Medicaid Beneficiaries

	Total Rx \$ for Benes Included in this Study (TOTAL) <sup>c</sup>		Rx \$ Excluded from this Study By Reason		Rx \$ for Dual Eligible Benes Included in this Study <sup>d</sup>		As % of GRAND TOTAL	As % of GRAND TOTAL	Rx \$ for All-Year NF Residents Included in this Study <sup>e</sup>	Rx \$ for Part-Year NF Residents Excluded from this Study <sup>f</sup>	Rx \$ for Dual Eligible All-Year NF Residents Included in this Study <sup>g</sup>	Rx \$ for Dual Eligible Part-Year NF Residents Excluded from this Study <sup>h</sup>			
	Total Rx \$ for All Benes in MAX 2001 (GRAND TOTAL) <sup>b</sup>	\$	As % of GRAND TOTAL	Benes Not Eligible for Medicaid or Not Having Rx Benefits <sup>d</sup>	Benes Not Having FFS Rx Benefits <sup>e</sup>	Rx \$ for All-Year NF Residents Included in this Study <sup>e</sup>							Rx \$ for Part-Year NF Residents Excluded from this Study <sup>f</sup>	Rx \$ for Dual Eligible All-Year NF Residents Included in this Study <sup>g</sup>	Rx \$ for Dual Eligible Part-Year NF Residents Excluded from this Study <sup>h</sup>
New York	2,884,671,306	2,605,751,766	90.3	64,756,448	214,163,092	1,187,963,115	41.2	79,269,180	83,083,309	58,150,400	51,439,598				
North Carolina	997,489,568	944,460,765	94.7	49,162,219	3,866,584	528,438,193	53.0	49,728,734	42,401,887	46,502,575	37,567,459				
North Dakota	45,248,874	45,134,453	99.7	51,927	62,494	28,677,528	63.4	10,088,129	3,025,843	9,678,762	2,597,128				
Ohio	1,164,049,634	1,159,073,473	99.6	4,933,618	42,543	564,970,614	48.5	181,540,109	60,092,611	160,483,186	43,789,300				
Oklahoma	231,026,273	196,419,115	85.0	566,630	34,040,528	146,234,936	63.3	42,643,069	22,557,518	38,373,059	19,629,999				
Oregon	234,954,434	152,441,936	64.9	31,890,832	50,621,666	84,230,485	35.8	11,665,157	8,560,702	10,884,096	7,162,965				
Pennsylvania	707,971,969	695,108,083	98.2	3,989,215	8,874,671	424,588,097	60.0	150,931,244	63,459,561	140,109,987	56,910,723				
Rhode Island	108,522,041	89,836,832	82.8	8,410,162	10,275,047	60,984,013	56.2	14,612,468	6,692,723	13,191,710	5,594,835				
South Carolina	410,355,193	408,801,658	99.6	946,284	607,251	207,391,954	50.5	6,440,106	5,913,798	5,951,083	5,300,574				
South Dakota	53,930,245	53,897,842	99.9	32,403	0	31,023,198	57.5	11,988,540	3,295,400	11,266,146	2,866,798				
Tennessee	781,134	0	0.0	77,592	703,542	0	0.0	0	0	0	0				
Texas	1,360,566,731	1,240,880,874	91.2	3,806,995	115,878,862	617,480,429	45.4	191,497,694	74,178,046	174,016,461	64,328,718				
Utah	117,527,298	58,253,734	49.6	2,232,217	57,041,347	27,165,730	23.1	10,237,617	5,159,517	8,727,840	3,997,322				
Vermont	107,195,228	86,279,742	80.5	20,915,486	0	45,959,776	42.9	5,968,523	3,359,010	5,592,422	3,065,379				
Virginia	426,318,359	425,956,399	99.9	330,018	31,972	247,835,814	58.1	50,552,332	24,957,380	45,467,556	21,317,711				
Washington	482,552,120	463,786,807	96.1	17,668,649	1,096,664	245,710,130	50.9	32,733,146	25,942,832	29,330,313	18,292,649				
West Virginia	263,310,223	250,652,215	95.2	6,253,406	6,404,602	97,832,771	37.2	19,406,026	7,662,819	17,518,618	6,286,948				
Wisconsin	396,092,639	395,959,657	100.0	124,481	8,501	263,072,648	66.4	65,944,272	24,220,746	62,419,045	20,704,055				
Wyoming	32,034,644	31,889,767	99.5	144,877	0	15,691,989	49.0	4,920,107	1,884,705	4,634,153	1,647,744				

Source: Data for this table are from the MAX 2001 file for the U.S., released by CMS in 09/2005. This table was produced on 11/01/2006.

a. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to states.

b. This column represents the amount of Medicaid pharmacy benefit reimbursement for all pharmacy claims contained in the MAX 2001 files, some of which were excluded from this study because those claims were made for beneficiaries who did not meet the inclusion criteria (see Table 1) or took place during months that were excluded from the analysis (see footnote c of Table 1).

c. These columns include beneficiaries represented by Cell C of Table 1.

d. These columns include beneficiaries who did not meet either of the first two inclusion criteria (see Table 1).

e. These columns include beneficiaries who satisfied the first two inclusion criteria but failed to meet the third criterion (see Table 1).

f, g, h. These columns include beneficiaries represented by Cells G, D, and H of Table 1, respectively.

i. Refer to footnote f of Table 1 for information about how we determined part-year nursing facility residents.

Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; D.C. = District of Columbia; FFS = fee-for-service; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx \$ = pharmacy reimbursement.



NATIONAL COMPARISON TABLE N.1b  
 OVERVIEW OF MEDICAID PHARMACY REIMBURSEMENT, ALL STATES COMBINED AND BY STATE  
 PERCENTAGE COMPARISONS, ALL MEDICAID BENEFICIARIES, 2001<sup>f</sup>

	Total Rx \$ for All Beneficiaries in MAX 2001 (GRAND TOTAL) <sup>b</sup>		Total Rx \$ for Benes Included in this Study (TOTAL) <sup>c</sup>		Rx \$ Excluded from this Study By Reason as % of GRAND TOTAL		Benes Not Having FFS Rx Benefits <sup>e</sup>		Benes Not Eligible for Medicaid or Not Having Rx Benefits <sup>d</sup>		Rx \$ for Dual Eligible Benes Included in this Study as % of TOTAL <sup>f</sup>		Rx \$ for All-Year NF Residents Included in this Study as % of TOTAL <sup>g</sup>		Rx \$ for Part- Year NF Residents Excluded from this Study as % of TOTAL <sup>i</sup>		Rx \$ for Dual Eligible All-Year NF Residents Included in this Study as % of TOTAL <sup>h</sup>		Rx \$ for Dual Eligible Part-Year NF Residents Excluded from this Study as % of TOTAL <sup>j</sup>		
<b>All States</b>	<b>\$24,352,195,690</b>	<b>\$22,910,321,029</b>	<b>2.6 %</b>	<b>3.4 %</b>	<b>54.7 %</b>	<b>10.5 %</b>	<b>5.2 %</b>	<b>9.4 %</b>	<b>4.2 %</b>												
Alabama	402,696,547	397,803,965	0.4	0.8	48.0	11.2	3.5	10.5	3.2												
Alaska	70,934,208	68,306,035	3.7	0.0	45.4	3.3	1.5	2.7	1.0												
Arizona	4,580,329	4,543,033	0.8	0.0	5.9	0.4	3.2	0.2	1.1												
Arkansas	256,157,998	253,056,961	1.2	0.0	48.1	15.5	3.8	13.7	3.3												
California	2,801,343,067	2,684,988,184	0.9	3.2	60.3	5.1	4.2	4.2	3.2												
Colorado	185,413,733	184,856,305	0.3	0.0	62.9	13.6	7.7	12.4	6.7												
Connecticut	307,163,199	306,863,882	0.1	0.0	69.1	19.5	8.9	17.5	6.7												
Delaware	83,979,577	36,931,856	0.9	55.2	70.2	14.4	5.2	13.4	4.5												
D.C.	61,222,599	60,398,489	0.7	0.7	47.0	2.4	2.7	1.6	1.4												
Florida	1,519,301,624	1,432,509,286	5.7	0.0	55.4	8.8	4.3	8.0	3.5												
Georgia	726,795,659	686,288,400	5.6	0.0	46.5	10.6	4.2	9.6	3.7												
Hawaii	71,463,657	65,114,552	8.2	0.7	60.0	4.9	3.8	4.2	1.7												
Idaho	109,039,742	108,972,671	0.1	0.0	47.9	8.2	4.8	7.5	3.8												
Illinois	1,001,813,090	945,237,070	5.6	0.0	44.0	18.0	6.7	14.5	4.2												
Indiana	586,453,842	585,705,894	0.1	0.0	55.2	17.2	7.8	15.7	6.3												
Iowa	239,709,875	232,084,593	0.2	3.0	57.6	14.2	7.0	13.3	6.3												
Kansas	193,076,295	178,414,008	1.6	6.0	59.7	17.1	6.6	15.6	5.8												
Kentucky	616,106,960	595,426,915	1.1	2.3	44.5	10.0	4.0	9.2	3.4												
Louisiana	583,485,951	570,855,790	2.2	0.0	45.7	14.8	4.8	12.8	4.0												
Maine	209,087,193	191,939,051	8.2	0.0	55.0	6.8	4.6	6.4	3.9												
Maryland	277,682,630	193,457,014	9.1	21.2	79.6	24.2	9.2	20.7	6.9												
Massachusetts	822,564,361	789,679,140	3.8	0.2	57.1	9.8	5.7	8.9	4.3												
Michigan	603,305,056	534,801,492	1.6	9.8	78.3	10.9	6.0	10.2	5.4												
Minnesota	272,010,738	271,444,537	0.1	0.1	58.1	9.3	6.7	8.0	4.5												
Mississippi	524,319,979	517,357,728	0.8	0.5	60.3	9.0	2.8	8.4	2.5												
Missouri	690,694,518	683,732,267	0.6	0.4	59.3	10.6	5.9	9.6	5.1												
Montana	71,916,452	67,233,373	6.5	0.0	57.4	13.1	5.5	12.1	4.5												
Nebraska	172,690,860	162,823,725	0.3	5.4	56.8	3.4	17.3	3.1	15.6												
Nevada	69,157,545	66,314,642	4.0	0.1	50.4	9.5	5.0	8.1	3.6												
New Hampshire	90,630,729	89,520,746	0.1	1.1	59.7	14.6	6.2	14.0	5.4												
New Jersey	641,998,970	578,355,596	9.1	0.9	66.5	14.2	6.3	12.6	4.9												
New Mexico	60,800,794	60,718,741	0.1	0.0	85.4	17.1	6.2	15.5	5.4												

Table N.1b

	Total Rx \$ for All Beneficiaries in MAX 2001 (GRAND TOTAL) <sup>b</sup>		Total Rx \$ for Beneficiaries Included in this Study (TOTAL) <sup>c</sup>		Rx \$ Excluded from this Study By Reason as % of GRAND TOTAL		Benes Not Having FFS Rx Benefits <sup>d</sup>	Benes Not Having FFS Rx Benefits <sup>e</sup>	Rx \$ for Dual Eligible Benes Included in this Study as % of TOTAL <sup>f</sup>	Rx \$ for All-Year NF Residents Included in this Study as % of TOTAL <sup>g</sup>	Rx \$ for Part-Year NF Residents Excluded from this Study as % of TOTAL <sup>h</sup>	Rx \$ for Dual Eligible All-Year NF Residents Included in this Study as % of TOTAL <sup>i</sup>	Rx \$ for Dual Eligible Part-Year NF Residents Excluded from this Study as % of TOTAL <sup>j</sup>
	Benes in MAX 2001 (GRAND TOTAL) <sup>b</sup>	Total Rx \$ for All Beneficiaries in MAX 2001 (GRAND TOTAL) <sup>b</sup>	Total Rx \$ for Beneficiaries Included in this Study (TOTAL) <sup>c</sup>	Total Rx \$ for Beneficiaries Included in this Study (TOTAL) <sup>c</sup>	Benes Not Eligible for Medicaid or Not Having Rx Benefits <sup>d</sup>	Benes Not Having FFS Rx Benefits <sup>e</sup>							
New York	2,884,671,306	2,884,671,306	2,605,751,766	2.2	7.4	45.6	3.0	3.2	2.2	2.0			
North Carolina	997,489,568	944,460,765	944,460,765	4.9	0.4	56.0	5.3	4.5	4.9	4.0			
North Dakota	45,248,874	45,134,453	45,134,453	0.1	0.1	63.5	22.4	6.7	21.4	5.8			
Ohio	1,164,049,634	1,159,073,473	1,159,073,473	0.4	0.0	48.7	15.7	5.2	13.8	3.8			
Oklahoma	231,026,273	196,419,115	196,419,115	0.2	14.7	74.5	21.7	11.5	19.5	10.0			
Oregon	234,954,434	152,441,936	152,441,936	13.6	21.5	55.3	7.7	5.6	7.1	4.7			
Pennsylvania	707,971,969	695,108,083	695,108,083	0.6	1.3	61.1	21.7	9.1	20.2	8.2			
Rhode Island	108,522,041	89,836,832	89,836,832	7.7	9.5	67.9	16.3	7.4	14.7	6.2			
South Carolina	410,355,193	408,801,658	408,801,658	0.2	0.1	50.7	1.6	1.4	1.5	1.3			
South Dakota	53,930,245	53,897,842	53,897,842	0.1	0.0	57.6	22.2	6.1	20.9	5.3			
Tennessee	781,134	0	0	9.9	90.1	n.a.	n.a.	n.a.	n.a.	n.a.			
Texas	1,360,566,731	1,240,880,874	1,240,880,874	0.3	8.5	49.8	15.4	6.0	14.0	5.2			
Utah	117,527,298	58,253,734	58,253,734	1.9	48.5	46.6	17.6	8.9	15.0	6.9			
Vermont	107,195,228	86,279,742	86,279,742	19.5	0.0	53.3	6.9	3.9	6.5	3.6			
Virginia	426,318,359	425,956,369	425,956,369	0.1	0.0	58.2	11.9	5.9	10.7	5.0			
Washington	482,552,120	463,786,807	463,786,807	3.7	0.2	53.0	7.1	5.6	6.3	3.9			
West Virginia	263,310,223	250,652,215	250,652,215	2.4	2.4	39.0	7.7	3.1	7.0	2.5			
Wisconsin	396,092,639	395,959,657	395,959,657	0.0	0.0	66.4	16.7	6.1	15.8	5.2			
Wyoming	32,034,644	31,889,767	31,889,767	0.5	0.0	49.2	15.4	5.9	14.5	5.2			

Source: Data for this table are from the MAX 2001 file for the U.S., released by CMS in 09/2005. This table was produced on 08/09/2006.

- a. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to states.
  - b. This column represents the amount of Medicaid pharmacy benefit reimbursement for all pharmacy claims contained in the MAX 2001 files, some of which were excluded from this study because those claims were made for beneficiaries who did not meet the inclusion criteria (see Table 1) or took place during months that were excluded from the analysis (see footnote c of Table 1).
  - c. These columns include beneficiaries represented by Cell C of Table 1.
  - d. These columns include beneficiaries who did not meet either of the first two inclusion criteria (see Table 1).
  - e. These columns include beneficiaries who satisfied the first two inclusion criteria but failed to meet the third criterion (see Table 1).
  - f, g, h. These columns include beneficiaries represented by Cells G, D, and H of Table 1, respectively.
  - i. Refer to footnote f of Table 1 for information about how we determined part-year nursing facility residents.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; D.C. = District of Columbia; FFS = fee-for-service; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx \$ = pharmacy reimbursement; n.a. = not applicable.

NATIONAL COMPARISON TABLE N.2  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, ALL STATES COMBINED AND BY STATE  
 NONDUAL BENEFICIARIES, 2001<sup>a,b</sup>

	% of All Rx										Among All-Year NF Residents <sup>d</sup>	
	No. of Benes	No. of Bene Mos	% of Benes with One or More Rx	No. of Rx Paid per Bene Mo	Rx \$ per Bene Mo	Patented Brand-Name <sup>c</sup>	Off-Patent Brand-Name	Generic	Rx \$ as % of Total Medicaid \$	No. of Rx per Bene Mo	Rx \$ per Bene Mo	
<b>All States</b>	<b>28,684,114</b>	<b>215,922,870</b>	<b>52.4 %</b>	<b>0.9</b>	<b>\$48</b>	<b>46.2 %</b>	<b>6.3 %</b>	<b>47.2 %</b>	<b>12.9 %</b>	<b>6.1</b>	<b>\$345</b>	
Alabama	621,853	5,939,128	60.8	0.8	35	43.3	7.5	49.0	16.4	6.0	272	
Alaska	107,802	900,492	52.2	0.7	41	45.9	8.0	45.6	8.4	6.6	469	
Arizona	128,161	862,997	5.7	0.0	5	29.6	5.9	64.1	1.1	13.2	508	
Arkansas	475,589	4,488,502	56.1	0.6	29	45.7	7.2	46.8	12.6	5.9	307	
California	4,550,310	31,388,162	32.3	0.5	34	41.2	6.0	52.3	13.3	5.5	331	
Colorado	252,612	1,490,741	40.5	0.8	46	43.6	6.6	49.6	8.4	7.0	398	
Connecticut	152,902	624,626	31.5	2.2	152	49.8	6.3	43.8	12.8	7.1	449	
Delaware	35,859	105,775	53.9	1.8	104	50.0	4.9	44.9	9.2	5.5	224	
D.C.	59,769	356,265	33.6	1.2	90	45.8	6.2	46.8	7.4	1.9	99	
Florida	1,692,737	12,456,971	49.4	0.8	51	46.2	5.6	47.9	15.8	7.2	369	
Georgia	1,212,916	9,894,227	61.7	0.8	37	45.9	7.8	46.1	14.4	5.7	298	
Hawaii	70,004	232,757	19.3	1.7	112	41.1	6.3	52.5	13.3	4.4	219	
Idaho	162,542	1,457,483	61.2	0.7	39	45.6	4.7	49.3	13.3	8.6	451	
Illinois	1,526,941	14,064,485	59.5	0.8	38	42.2	5.6	51.8	11.5	6.8	427	
Indiana	608,303	5,199,910	62.2	0.9	50	44.9	5.3	49.6	16.1	8.7	484	
Iowa	228,277	1,643,498	64.3	1.1	60	42.2	6.7	50.8	12.8	7.1	325	
Kansas	205,811	1,422,530	53.6	1.0	51	50.7	5.8	43.3	12.2	8.0	507	
Kentucky	497,270	4,579,904	73.9	1.4	72	48.4	6.7	44.4	19.8	9.9	416	
Louisiana	748,649	7,318,685	67.7	0.9	42	47.6	6.8	45.3	17.8	7.5	424	
Maine	177,367	1,708,789	67.6	1.0	51	46.4	5.8	47.5	9.5	7.3	386	
Maryland	245,919	1,095,797	21.8	0.6	36	49.0	7.7	43.1	4.3	7.7	408	
Massachusetts	656,423	6,016,197	63.1	1.0	56	46.6	4.9	48.0	14.5	5.7	287	
Michigan	622,998	2,985,502	42.8	0.8	39	44.8	4.2	50.9	9.6	6.3	275	
Minnesota	272,844	1,544,808	44.5	1.1	74	47.5	7.1	45.2	8.4	7.5	437	
Mississippi	551,671	5,185,794	66.6	0.8	40	48.7	7.4	43.4	16.6	6.7	372	
Missouri	577,481	4,414,786	57.4	1.2	63	46.6	6.5	46.5	19.0	7.6	386	
Montana	71,932	625,357	58.6	0.8	46	42.7	6.0	51.0	11.5	6.9	349	
Nebraska	194,950	1,658,154	68.1	0.9	42	48.3	6.4	45.3	13.6	8.2	379	
Nevada	97,876	608,274	36.7	0.8	54	44.7	6.5	48.6	9.2	6.8	337	
New Hampshire	87,872	736,509	60.8	0.9	49	46.1	5.6	48.1	12.2	7.2	346	
New Jersey	387,315	1,924,799	37.0	1.4	101	50.0	7.6	42.3	11.6	7.6	402	
New Mexico	220,851	1,072,359	23.0	0.2	8	35.4	9.0	55.4	2.1	5.6	264	

Table N.2

Nondual Beneficiaries

	% of All Rx										Among All-Year NF Residents <sup>d</sup>	
	No. of Benes	No. of Benes with Mos	% of Benes One or More Rx	No. of Rx Paid per Bene Mo	Rx \$ per Bene Mo	Patented Brand-Name <sup>c</sup>	Off-Patent Brand-Name	Generic	Rx \$ as % of Total Medicaid \$	No. of Rx per Bene Mo	No. of Rx per Rx \$ per Bene Mo	
New York	2,562,113	19,845,345	53.9	1.0	71	52.3	6.7	40.1	10.9	1.5	183	
North Carolina	1,087,370	9,236,491	63.5	0.8	45	47.9	5.8	46.0	13.7	6.1	363	
North Dakota	51,625	419,057	57.1	0.8	39	46.0	7.7	46.0	11.2	6.4	288	
Ohio	1,298,899	10,029,406	59.1	1.2	59	46.6	5.0	48.1	15.1	8.9	438	
Oklahoma	316,982	1,024,733	38.3	0.9	49	45.5	5.9	48.5	6.9	6.7	374	
Oregon	291,148	1,363,576	42.8	1.0	50	39.5	4.8	55.5	10.5	7.2	347	
Pennsylvania	609,964	4,241,845	50.7	1.1	64	49.1	5.9	44.9	15.5	8.7	415	
Rhode Island	28,674	210,802	51.4	2.2	137	49.2	5.3	45.3	10.8	4.0	249	
South Carolina	758,690	7,205,943	58.5	0.5	28	47.9	7.4	44.7	13.4	0.9	69	
South Dakota	92,307	829,804	52.0	0.5	28	47.9	6.4	45.4	9.6	7.7	386	
Tennessee	12	27	0.0	0.0	0	0.0	0.0	0.0	0.0	0.0	0	
Texas	2,094,719	14,439,521	68.5	0.9	43	43.7	8.5	47.6	11.9	7.0	391	
Utah	123,992	632,330	58.5	1.1	49	41.2	5.1	53.6	9.1	8.5	440	
Vermont	120,445	1,157,155	65.0	0.8	35	45.7	6.7	47.3	12.7	7.0	395	
Virginia	420,391	2,874,045	56.7	1.1	62	46.4	6.4	46.5	14.5	7.1	332	
Washington	648,138	3,879,350	42.0	1.1	56	42.6	4.6	52.5	14.1	7.1	400	
West Virginia	265,056	2,054,578	75.7	1.7	74	44.1	5.0	50.7	19.2	7.8	366	
Wisconsin	358,728	2,055,332	44.6	1.2	65	45.9	6.6	47.3	10.4	7.2	354	
Wyoming	51,055	419,267	63.2	0.7	39	45.3	6.5	47.9	11.7	7.3	384	

Source: Data for this table are from the MAX 2001 file for the U.S., released by CMS in 09/2005. This table was produced on 11/01/2006.

a. Table N.2, except for the last two columns, includes beneficiaries represented by Cell K of Table 1 in the national table set and the table set for each state. The last two columns include beneficiaries represented by Cell L 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 states.

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. For information about this classification method, 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).

d. All-year nursing facility residents are beneficiaries who resided in nursing facilities throughout their Medicaid enrollment in 2001. Part-year residents were excluded from the analysis. See footnote f of Table 1 for more information about how we determined all-year nursing facility residents.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; D.C. = District of Columbia; MAX = Medicaid Analytic Extract; NF = nursing facility.

Table N.2

Nondual Beneficiaries

NATIONAL COMPARISON TABLE N.3  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT BY BASIS OF ELIGIBILITY, ALL STATES COMBINED AND BY STATE  
 NONDUAL BENEFICIARIES, 2001<sup>a,b,c</sup>

	Share of Bene Mos (percent)				Rx \$ per Bene Mo. (dollars)				Share of Total Medicaid Rx \$ (percent)				
	All	Aged	Disabled	Children	All	Aged	Disabled	Children	All	Aged	Disabled	Children	
	100	1.1	17.3	25.9	55.7	48	114	178	27	16	64.3	14.6	18.6
<b>All States</b>	100	1.1	17.3	25.9	55.7	48	114	178	27	16	64.3	14.6	18.6
Alabama	100	0.2	19.1	19.4	61.3	35	107	120	9	16	65.9	5.1	28.5
Alaska	100	0.6	7.8	18.7	72.9	41	123	276	52	13	51.7	23.5	22.7
Arizona	100	0.6	9.3	40.3	49.8	5	17	22	1	5	42.1	5.9	50.1
Arkansas	100	0.7	14.4	26.6	58.3	29	104	119	9	16	58.4	8.2	30.9
California	100	1.6	15.0	55.4	27.9	34	89	170	8	9	75.2	13.0	7.4
Colorado	100	1.5	14.8	19.3	64.3	46	126	195	27	15	62.9	11.5	21.4
Connecticut	100	7.8	47.5	14.5	30.1	152	149	279	16	16	87.6	1.5	3.2
Delaware	100	1.5	12.4	46.2	39.9	104	165	397	75	45	47.2	33.2	17.2
D.C.	100	3.5	51.9	12.0	32.6	90	58	152	27	17	88.0	3.6	6.1
Florida	100	1.0	16.3	26.2	56.5	51	126	213	22	17	67.9	11.4	18.3
Georgia	100	0.5	14.5	19.2	65.8	37	134	148	27	15	57.8	13.8	26.7
Hawaii	100	6.9	51.4	20.6	21.1	112	94	202	6	1	92.7	1.2	0.2
Idaho	100	0.2	11.7	12.8	75.3	39	158	205	46	12	61.3	15.1	22.9
Illinois	100	0.9	13.4	19.6	66.1	38	110	169	30	12	60.1	15.8	21.5
Indiana	100	0.6	12.0	15.3	72.1	50	188	232	41	21	55.3	12.3	30.2
Iowa	100	0.8	20.2	19.0	60.0	60	135	189	42	21	63.6	13.3	21.3
Kansas	100	0.3	18.9	12.9	67.8	51	156	172	30	20	64.4	7.6	26.9
Kentucky	100	0.3	25.7	13.7	60.3	72	198	201	56	20	71.5	10.7	17.0
Louisiana	100	0.5	18.3	10.3	71.0	42	185	138	32	18	59.3	7.8	30.6
Maine	100	0.3	19.4	27.1	53.1	51	131	153	41	18	58.7	21.8	18.7
Maryland	100	4.5	12.1	60.2	23.3	36	116	174	7	25	58.2	11.2	16.3
Massachusetts	100	1.5	20.5	26.4	51.7	56	82	182	42	13	66.1	19.4	12.3
Michigan	100	0.7	13.6	22.2	63.5	39	111	165	29	15	57.6	16.6	23.7
Minnesota	100	0.3	32.9	19.0	47.7	74	109	181	31	17	81.0	7.9	10.7
Mississippi	100	0.3	18.6	11.3	69.8	40	151	134	36	15	62.9	10.2	26.0
Missouri	100	1.1	18.7	25.4	54.7	63	129	224	29	22	66.6	11.8	19.3
Montana	100	0.3	16.9	6.4	76.3	46	182	187	40	14	69.1	5.7	24.0
Nebraska	100	0.6	7.3	18.1	74.1	42	184	225	49	22	38.5	20.7	38.3
Nevada	100	1.6	28.2	20.9	49.3	54	118	151	16	13	78.5	6.2	11.8
New Hampshire	100	1.1	8.4	14.8	75.7	49	158	263	61	21	45.0	18.3	33.1
New Jersey	100	4.7	38.1	18.6	38.5	101	126	223	17	17	84.3	3.1	6.6
New Mexico	100	0.3	6.6	36.7	56.3	8	90	57	6	4	45.7	26.1	25.0

Table N.3

Nondual Beneficiaries

	Share of Bene Mos (percent)					Rx \$ per Bene Mo (dollars)					Share of Total Medicaid Rx \$ (percent)				
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children
	100	2.1	21.4	27.6	48.9	71	89	211	65	14	100	2.7	63.2	24.9	9.2
New York	100	0.2	15.0	19.3	65.4	45	135	169	44	17	100	0.7	56.2	19.0	24.2
North Carolina	100	0.7	11.2	25.1	63.0	39	148	177	36	15	100	2.6	50.7	23.3	23.5
North Dakota	100	1.1	18.5	20.4	60.0	59	165	216	40	16	100	3.1	67.4	13.8	15.8
Ohio	100	1.3	10.1	14.7	73.8	49	128	239	28	26	100	3.4	49.6	8.4	38.6
Oklahoma	100	0.2	9.4	39.9	50.4	50	149	217	60	11	100	0.7	40.7	47.8	10.7
Oregon	100	1.0	23.4	14.5	61.2	64	172	186	52	18	100	2.6	68.3	11.8	17.3
Pennsylvania	100	3.3	78.8	2.8	14.9	137	114	165	13	20	100	2.7	94.7	0.3	2.1
Rhode Island	100	0.5	11.4	27.4	60.6	28	102	118	18	15	100	1.9	48.4	17.6	32.1
South Carolina	100	0.3	10.8	15.4	73.6	28	157	134	23	12	100	1.5	52.4	13.1	33.0
South Dakota	100	0.0	18.5	22.2	59.3	0	0	0	0	0	0	0.0	0.0	0.0	0.0
Tennessee	100	0.3	15.0	14.8	70.0	43	176	137	40	23	100	1.1	47.7	13.6	37.6
Texas	100	0.5	9.6	23.6	66.3	49	199	249	57	16	100	2.1	48.7	27.1	22.1
Utah	100	0.2	7.8	34.1	57.9	35	145	195	31	15	100	1.0	43.7	30.5	24.7
Vermont	100	2.5	18.0	13.1	66.4	62	150	217	43	20	100	6.1	63.0	9.0	21.9
Virginia	100	2.5	23.4	25.9	48.3	56	106	191	19	9	100	4.7	79.3	8.6	7.4
Washington	100	0.4	30.7	14.4	54.5	74	134	168	62	25	100	0.8	69.3	11.9	18.0
West Virginia	100	0.8	37.7	19.5	42.0	65	123	137	31	15	100	1.6	79.8	9.2	9.4
Wisconsin	100	0.1	11.9	16.8	71.2	39	186	168	38	17	100	0.6	51.8	16.4	31.2
Wyoming	100	0.1	11.9	16.8	71.2	39	186	168	38	17	100	0.6	51.8	16.4	31.2

Source: Data for this table are from the MAX 2001 file for the U.S., released by CMS in 09/2005. This table was produced on 11/01/2006.

- a. Table N.3 includes beneficiaries represented by Cell K of Table 1 in the national table set and the table set for each state. 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 states.
- c. 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.

Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; D.C. = District of Columbia; MAX = Medicaid Analytic Extract.

NATIONAL COMPARISON TABLE N.4  
 TOP 10 DRUG GROUPS RANKED BY TOTAL MEDICAID PHARMACY REIMBURSEMENT, ALL STATES COMBINED AND BY STATE  
 NONDUAL BENEFICIARIES, 2001<sup>a,b,c</sup>

	ANTI- PSYCHOTIC	ANTI- DEPRESSANTS	ANTI- CONVULSANT	ANTI- ANTIVIRAL	ULCER DRUGS	ASTHMATIC	ANTI- ASTHMATIC	ANALGESICS NARCOTIC	ANTIDIABETIC	INFLAMMATORY	ANTI- HISTAMINES
<b>All States</b>	1	2	3	4	5	6	7	8	9	10	
Alabama	1	3	4	n.a.	6	2	7	5	n.a.	8	
Alaska	1	3	5	n.a.	6	7	2	n.a.	8	n.a.	
Arizona	n.a.	7	n.a.	n.a.	6	9	8	4	n.a.	5	
Arkansas	1	2	3	n.a.	5	4	8	n.a.	n.a.	9	
California	1	2	3	4	5	9	10	8	n.a.	7	
Colorado	1	2	3	10	4	6	5	8	7	9	
Connecticut	1	3	4	2	5	8	6	7	10	n.a.	
Delaware	2	4	3	1	n.a.	6	8	5	n.a.	n.a.	
D.C.	2	4	3	1	5	6	7	n.a.	n.a.	10	
Florida	2	4	5	1	7	3	9	n.a.	n.a.	n.a.	
Georgia	1	3	4	6	5	2	7	8	n.a.	n.a.	
Hawaii	1	5	3	7	n.a.	8	2	6	n.a.	n.a.	
Idaho	1	2	3	n.a.	4	6	5	10	n.a.	9	
Illinois	1	2	5	6	4	3	n.a.	8	n.a.	7	
Indiana	1	2	4	n.a.	5	6	7	n.a.	9	10	
Iowa	1	2	3	n.a.	7	5	8	9	n.a.	n.a.	
Kansas	1	2	3	n.a.	7	5	6	10	n.a.	7	
Kentucky	4	2	5	n.a.	1	3	n.a.	7	6	9	
Louisiana	1	4	6	n.a.	5	2	8	n.a.	9	3	
Maine	2	1	3	n.a.	5	6	4	7	10	n.a.	
Maryland	1	4	3	2	5	n.a.	8	9	n.a.	n.a.	
Massachusetts	1	2	3	4	5	7	6	8	10	n.a.	
Michigan	1	2	3	n.a.	7	4	6	10	n.a.	n.a.	
Minnesota	1	2	3	n.a.	4	6	7	9	n.a.	n.a.	
Mississippi	1	3	5	n.a.	2	4	8	7	9	6	
Missouri	1	2	3	n.a.	7	4	5	9	10	10	
Montana	1	2	3	n.a.	5	6	4	9	n.a.	n.a.	
Nebraska	1	2	3	n.a.	5	4	n.a.	n.a.	7	7	
Nevada	1	3	4	7	5	6	2	9	n.a.	n.a.	
New Hampshire	2	1	3	10	4	6	5	n.a.	9	9	
New Jersey	2	5	3	1	4	6	8	10	n.a.	n.a.	
New Mexico	2	3	4	n.a.	6	5	10	8	n.a.	7	
New York	2	3	6	1	4	5	n.a.	9	8	n.a.	
North Carolina	1	3	5	8	2	4	6	n.a.	10	7	
North Dakota	2	1	3	n.a.	5	4	6	9	8	n.a.	
Ohio	1	2	4	n.a.	3	5	6	8	7	10	

Table N.4

Nondual Beneficiaries

