

**STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2001
IOWA**

LIST OF TABLES

OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

FOR ALL MEDICAID BENEFICIARIES

TABLE 2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE 3. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE 4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE 5. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE 6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE 7. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

FOR ALL NONDUAL BENEFICIARIES

TABLE ND.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE ND.3. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE ND.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE ND.5. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE ND.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE ND.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

TABLE ND.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

TABLE ND.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE ND.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP

TABLE ND.11. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC

TABLE ND.12. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE ND.13. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS FOR SELECTED DRUG CATEGORIES AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC

FOR DUAL ELIGIBLE BENEFICIARIES

- TABLE D.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY
- TABLE D.3. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC
- TABLE D.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
- TABLE D.5. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC
- TABLE D.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY
- TABLE D.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP
- TABLE D.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC
- TABLE D.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY
- TABLE D.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP
- TABLE D.11. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG DUALS, BY BENEFICIARY CHARACTERISTIC
- TABLE D.12. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
- TABLE D.13. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS FOR SELECTED DRUG CATEGORIES AMONG DUALS, BY BENEFICIARY CHARACTERISTIC

SUPPLEMENTAL TABLES

- SUPPLEMENTAL TABLE 1. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES
- SUPPLEMENTAL TABLE 1A. MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65
- SUPPLEMENTAL TABLE 1B. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER
- SUPPLEMENTAL TABLE 1C. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74
- SUPPLEMENTAL TABLE 1D. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84
- SUPPLEMENTAL TABLE 1E. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER

APPENDIX TABLE

- APPENDIX TABLE A.1. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, NONDUAL BENEFICIARIES
- APPENDIX TABLE A.2. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, NONDUAL BENEFICIARIES
- APPENDIX TABLE A.3. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, DUAL ELIGIBLE BENEFICIARIES
- APPENDIX TABLE A.4. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, DUAL ELIGIBLE BENEFICIARIES

TABLE D.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	57,349	31,523	25,471	335	20	0	609,943	323,650	283,591	2,541	161	0
Age												
5 and younger	6	0	5	0	1	0	50	0	45	0	5	0
6-14	9	0	8	0	1	0	96	0	84	0	12	0
15-20	137	0	128	1	8	0	1,500	0	1,423	1	76	0
21-44	11,640	0	11,379	251	10	0	130,347	0	128,335	1,944	68	0
45-64	12,021	0	11,953	68	0	0	133,409	0	132,913	496	0	0
65-74	9,144	7,905	1,227	12	0	0	97,570	84,711	12,788	71	0	0
75-84	11,641	11,065	574	2	0	0	120,521	114,367	6,137	17	0	0
85 and older	12,751	12,553	197	1	0	0	126,450	124,572	1,866	12	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	36,825	23,455	13,178	182	10	0	392,404	243,849	147,024	1,459	72	0
Male	20,524	8,068	12,293	153	10	0	217,539	79,801	136,567	1,082	89	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	50,865	27,901	22,679	267	18	0	554,301	295,470	256,635	2,059	137	0
African American	1,670	531	1,112	26	1	0	18,111	5,822	12,089	188	12	0
Other/unknown	4,814	3,091	1,680	42	1	0	37,531	22,358	14,867	294	12	0
Use of Nursing Facilities^c												
Entire year	12,303	11,535	768	0	0	0	133,631	124,785	8,846	0	0	0
Part year	6,859	6,242	617	0	0	0	59,971	53,596	6,375	0	0	0
None	38,187	13,746	24,086	335	20	0	416,341	145,269	268,370	2,541	161	0
Maintenance Assistance Status												
Cash	19,447	5,867	13,449	130	1	0	219,066	66,892	151,307	862	5	0
Medically needy	4,320	2,478	1,710	125	7	0	44,315	25,472	17,742	1,042	59	0
Poverty-related	2,146	1,022	1,064	57	3	0	22,562	10,880	11,198	450	34	0
Other/unknown	31,436	22,156	9,248	23	9	0	324,000	220,406	103,344	187	63	0
Dual Medicare Status^d												
Full dual, all year	53,383	29,415	23,625	323	20	0	567,387	301,113	263,701	2,412	161	0
Full dual, part year	3,966	2,108	1,846	12	0	0	42,556	22,537	19,890	129	0	0
Managed Care Status												
FFS all year	57,279	31,523	25,429	310	17	0	609,485	323,650	283,275	2,414	146	0
FFS part year, with Rx claims	65	0	41	21	3	0	429	0	305	109	15	0
FFS part year, no Rx claims	5	0	1	4	0	0	29	0	11	18	0	0

Table D2

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

- a. Table D.2 includes the beneficiaries represented by Cell G 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. 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 D.3
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 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 Benes
All	90.6 %	48.9	\$2,330	\$48	\$14,438	16.1 %	57,349
Age							
5 and younger	83.3	49.0	7,252	148	12,528	57.9	6
6-14	100.0	78.0	6,245	80	14,329	43.6	9
15-20	82.5	28.2	3,311	118	15,994	20.7	137
21-44	87.1	35.5	2,549	72	13,453	18.9	11,640
45-64	89.6	52.6	2,994	57	14,874	20.1	12,021
65-74	87.8	50.9	2,209	43	10,944	20.2	9,144
75-84	92.1	55.0	2,146	39	14,322	15.0	11,641
85 and older	95.4	50.9	1,745	34	17,520	10.0	12,751
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^c							
Aged	92.8	53.3	2,043	38	14,981	13.6	31,523
Disabled	88.1	43.9	2,703	62	13,909	19.4	25,471
Adults	72.2	17.1	1,125	66	3,991	28.2	335
Children	75.0	15.6	1,304	84	6,705	19.4	20
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	93.6	53.7	2,372	44	14,105	16.8	36,825
Male	85.2	40.3	2,255	56	15,034	15.0	20,524
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	91.6	51.3	2,452	48	15,281	16.0	50,865
African American	85.2	37.2	1,829	49	9,540	19.2	1,670
Other/unknown	81.4	27.2	1,217	45	7,227	16.8	4,814
Use of Nursing Facilities^d							
Entire year	95.9	65.1	2,512	39	26,514	9.5	12,303
Part year	96.2	54.6	2,136	39	15,843	13.5	6,859
None	87.8	42.6	2,307	54	10,295	22.4	38,187
Maintenance Assistance Status							
Cash	89.4	44.8	2,440	55	6,583	37.1	19,447
Medically needy	86.2	41.6	2,145	52	4,154	51.6	4,320
Poverty related	71.8	12.7	621	49	2,098	29.6	2,146
Other/unknown	93.2	54.9	2,405	44	21,553	11.2	31,436

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

- a. Table D.3 includes beneficiaries represented by Cell G 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 D.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

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	4.6	\$219	16.1 %	9.4 %	16.3 %	10.2 %	29.5 %	26.8 %	7.8 %	\$1,358	57,349	609,943
Age												
5 and younger	5.9	870	57.9	16.7	16.7	0.0	33.3	16.7	16.7	1,503	6	50
6-14	7.3	586	43.6	0.0	11.1	0.0	33.3	44.4	11.1	1,343	9	96
15-20	2.6	302	20.7	17.5	36.5	9.5	23.4	10.2	2.9	1,461	137	1,500
21-44	3.2	228	18.9	12.9	29.0	13.0	26.2	14.9	4.0	1,201	11,640	130,347
45-64	4.7	270	20.1	10.4	16.2	10.1	28.1	25.8	9.2	1,340	12,021	133,409
65-74	4.8	207	20.2	12.2	15.2	9.8	26.2	27.6	9.0	1,026	9,144	97,570
75-84	5.3	207	15.0	7.9	11.1	8.4	30.2	32.6	9.8	1,383	11,641	120,521
85 and older	5.1	176	10.0	4.6	10.2	9.6	35.5	32.7	7.4	1,767	12,751	126,450
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^c												
Aged	5.2	199	13.6	7.2	11.4	9.1	31.3	32.0	9.0	1,459	31,523	323,650
Disabled	3.9	243	19.4	11.9	22.3	11.4	27.4	20.6	6.4	1,249	25,471	283,591
Adults	2.3	148	28.2	27.8	27.5	14.6	19.4	9.0	1.8	526	335	2,541
Children	1.9	162	19.4	25.0	30.0	15.0	25.0	0.0	5.0	833	20	161
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	5.0	223	16.8	6.4	14.0	10.0	30.8	29.7	9.1	1,324	36,825	392,404
Male	3.8	213	15.0	14.8	20.5	10.5	27.2	21.5	5.6	1,418	20,524	217,539
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	4.7	225	16.0	8.4	15.9	10.1	29.9	27.6	8.2	1,402	50,865	554,301
African American	3.4	169	19.2	14.8	26.0	11.4	24.8	18.7	4.3	880	1,670	18,111
Other/unknown	3.5	156	16.8	18.6	18.0	10.4	27.1	20.7	5.1	927	4,814	37,531
use of nursing Facilities^d												
Entire year	6.0	231	9.5	4.1	7.4	7.3	31.5	37.1	12.6	2,441	12,303	133,631
Part year	6.2	244	13.5	3.8	7.0	7.6	32.0	37.0	12.6	1,812	6,859	59,971
None	3.9	212	22.4	12.2	20.9	11.6	28.4	21.6	5.4	944	38,187	416,341
Maintenance Assistance Status												
Cash	4.0	217	37.1	10.6	21.8	12.0	28.2	21.4	6.0	584	19,447	219,066
Medically needy	4.1	209	51.6	13.8	15.0	12.2	32.3	22.1	4.6	405	4,320	44,315
Poverty related	1.2	59	29.6	28.2	45.0	10.3	12.2	3.8	0.5	200	2,146	22,562
Other/unknown	5.3	233	11.2	6.8	11.2	8.8	31.1	32.3	9.8	2,091	31,436	324,000

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

- a. Table D.4 includes the beneficiaries represented by Cell G 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 D.5
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

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	\$ per Rx	No. of Rx	\$ per Rx
All	4.6	\$219	1.8	\$150	0.5	\$20	2.3	\$48
Age								
5 and younger	5.9	870	2.2	643	0.5	8	3.1	219
6-14	7.3	586	2.9	453	0.8	52	3.6	80
15-20	2.6	302	1.2	242	0.2	23	1.2	38
21-44	3.2	228	1.4	163	0.3	25	1.5	40
45-64	4.7	270	2.0	192	0.4	25	2.3	52
65-74	4.8	207	1.9	140	0.4	16	2.4	50
75-84	5.3	207	2.0	138	0.5	17	2.7	52
85 and older	5.1	176	1.7	111	0.6	16	2.8	49
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Basis of Eligibility^d								
Aged	5.2	199	1.9	130	0.5	17	2.7	51
Disabled	3.9	243	1.7	173	0.4	24	1.9	45
Adults	2.3	148	0.9	92	0.1	12	1.2	45
Children	1.9	162	0.7	111	0.2	27	1.0	23
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Gender								
Female	5.0	223	2.0	152	0.5	20	2.6	50
Male	3.8	213	1.5	147	0.4	21	1.9	45
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	4.7	225	1.8	154	0.5	21	2.4	50
African American	3.4	169	1.4	121	0.2	12	1.8	36
Other/unknown	3.5	156	1.4	109	0.3	12	1.8	35
Use of Nursing Facilities^e								
Entire year	6.0	231	2.1	150	0.6	20	3.2	60
Part year	6.2	244	2.3	161	0.6	20	3.3	63
None	3.9	212	1.6	148	0.4	21	1.9	43
Maintenance Assistance Status								
Cash	4.0	217	1.6	152	0.4	22	2.0	42
Medically needy	4.1	209	1.7	149	0.4	19	1.9	41
Poverty related	1.2	59	0.5	43	0.1	5	0.6	11
Other/unknown	5.3	233	2.0	156	0.5	21	2.8	56

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

- a. Table D.5 includes the beneficiaries represented by Cell G 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 Iowa, 0.4 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 (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 D.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 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. Dual Benes	As % of Bene Mos				
														Generic	Generic	Generic	Generic
Anti-infective Agents	0.3	0.2	0.0	0.2	\$18	\$15	\$0	\$2	\$51	\$90	\$54	\$13	128,915	\$6,589,642	33,552	58.5 %	370,244
Biologics	0.1	0.1	0.0	0.0	29	2	1	26	273	20	1,743	883	3,138	856,333	2,603	4.5	29,832
Antineoplastic Agents	0.6	0.3	0.1	0.2	104	80	11	14	167	258	136	59	10,502	1,754,733	1,581	2.8	16,795
Endocrine/Metabolic Drugs	1.0	0.5	0.2	0.3	36	28	4	4	35	54	17	14	276,921	9,571,534	24,529	42.8	266,567
Cardiovascular Agents	1.8	0.6	0.2	1.1	53	30	4	19	29	50	25	18	671,312	19,420,129	34,058	59.4	364,819
Respiratory Agents	0.7	0.4	0.0	0.4	34	23	1	11	46	65	29	29	174,330	7,995,293	21,025	36.7	232,964
Gastrointestinal Agents	0.8	0.2	0.0	0.5	37	26	1	10	47	109	78	18	190,116	8,945,774	22,446	39.1	243,714
Genitourinary Agents	0.6	0.4	0.0	0.2	28	24	0	3	49	66	38	17	55,982	2,766,049	9,083	15.8	99,991
CNS Drugs	1.5	0.7	0.1	0.7	116	82	15	19	76	113	115	29	531,702	40,403,223	32,057	55.9	347,327
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.0	0.3	40	26	4	11	69	109	82	35	4,731	326,083	717	1.3	8,078
Miscellaneous Psychological/Neurological Agents	0.7	0.6	0.0	0.1	83	82	0	1	118	129	32	20	14,608	1,717,389	1,951	3.4	20,594
Analgesics and Anesthetics	0.8	0.2	0.0	0.5	33	22	3	8	42	101	76	16	237,648	9,998,000	27,574	48.1	300,027
Neuromuscular Agents	1.1	0.4	0.1	0.5	64	46	6	12	58	102	42	24	196,668	11,362,593	15,939	27.8	177,294
Nutritional Products	0.7	0.0	0.2	0.5	15	0	7	8	22	19	31	18	86,064	1,874,195	11,397	19.9	121,032
Hematological Agents	0.9	0.2	0.3	0.4	39	27	6	6	45	149	19	17	87,111	3,963,243	9,608	16.8	102,020
Topical Products	0.4	0.2	0.0	0.2	14	9	1	4	34	53	38	17	116,769	3,928,304	24,458	42.6	272,530
Miscellaneous Products	0.4	0.2	0.1	0.2	95	66	20	9	223	359	261	52	8,839	1,969,438	1,896	3.3	20,687
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	0	22	0	0	0	9,183	201,774	2,538	4.4	27,989
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.	2,804,539	133,643,729	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

- a. Table D.6 includes the beneficiaries represented by Cell G 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 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. For information about these therapeutic categories, see Wolters Kluwer Health, 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 Iowa, 0.4 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 (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 D.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

Top 10 Drug Groups	Users			Among Users		
	Total Medicaid Rx \$	No.	As % of Dual Benes	No. of Bene Mos	No. of Rx per Bene Mo	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$22,168,584	17,564	30.6 %	194,559	0.8	\$135
ANTIDEPRESSANTS	13,919,047	29,715	51.8	325,289	0.7	60
ANTICONVULSANT	8,867,210	13,237	23.1	148,839	0.9	67
ULCER DRUGS	7,283,821	22,838	39.8	250,121	0.5	54
ANTI-DIABETIC	6,434,958	16,273	28.4	176,444	0.8	49
ANTI-ASTHMATIC	5,923,189	20,288	35.4	223,066	0.5	52
ANALGESICS - Narcotic	5,882,624	29,045	50.6	316,332	0.4	42
ANTI-HYPERTENSIVE	5,083,752	18,799	32.8	203,606	0.7	35
ANTI-HYPERLIPIDEMIC	4,728,668	8,571	14.9	96,313	0.7	72
CALCIUM BLOCKERS	3,717,764	9,953	17.4	107,811	0.8	45
Total	84,009,617	186,283		2,042,380	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

a. Table D.7 includes the beneficiaries represented by Cell G 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_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; n.a. = not applicable.

TABLE D.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^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS				
	No. of Rx	Rx \$	No. of Users	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	1,345,704	\$84,009,617	17,564	0.8	30.6 %	194,559	0.8	\$114	29,715	51.8 %	325,289	0.7	\$43
Female	911,069	53,152,932	10,135	0.8	27.5	111,882	0.8	97	20,838	56.6	228,579	0.7	42
Disabled	339,807	24,633,105	4,821	0.9	36.6	55,834	0.9	124	9,098	69.0	104,189	0.7	46
5 and younger	27	640	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	38	2,031	0	0.0	0.0	0	0.0	0	2	100.0	24	0.6	9
15-20	656	55,009	8	0.7	15.4	96	0.7	159	24	46.2	282	0.5	30
21-44	111,326	9,055,702	2,208	0.9	43.2	25,624	0.9	125	3,590	70.2	41,292	0.7	48
45-64	201,753	14,138,965	2,429	0.8	36.6	28,178	0.8	127	5,039	75.9	57,714	0.7	46
65-74	15,522	874,127	107	0.8	13.8	1,208	0.8	97	271	35.0	3,017	0.6	35
75-84	8,015	388,183	50	0.7	11.8	556	0.7	46	123	29.0	1,384	0.6	31
85 and older	2,470	118,448	19	0.6	11.2	172	0.6	38	49	29.0	476	0.7	36
Other Eligibles	571,262	28,519,827	5,314	0.7	22.5	56,048	0.7	71	11,740	49.6	124,390	0.7	39
5 and younger	0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	3	172	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	32	2,413	0	0.0	0.0	0	0.0	0	3	100.0	36	0.6	31
21-44	1,551	93,085	23	0.5	13.9	208	0.5	59	91	55.2	836	0.5	34
45-64	233	14,659	5	0.3	27.8	33	0.3	22	7	38.9	78	0.7	56
65-74	149,046	8,188,739	1,174	0.8	22.7	12,964	0.8	88	2,642	51.0	29,469	0.7	37
75-84	212,331	10,715,675	1,884	0.7	23.7	20,214	0.7	76	4,105	51.6	43,645	0.8	39
85 and older	208,066	9,505,084	2,228	0.6	21.6	22,629	0.6	56	4,892	47.4	50,326	0.8	40
Male	434,635	30,856,685	7,429	0.9	36.2	82,677	0.9	136	8,877	43.3	96,710	0.7	44
Disabled	259,577	21,913,131	5,313	1.0	43.2	61,287	1.0	159	5,431	44.2	61,813	0.7	47
5 and younger	23	577	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	176	8,130	0	0.0	0.0	0	0.0	0	2	33.3	24	0.8	37
15-20	1,188	113,316	32	0.9	42.1	374	0.9	150	33	43.4	384	0.8	66
21-44	116,788	11,070,612	2,859	1.0	45.6	33,119	1.0	167	2,851	45.5	32,681	0.7	48
45-64	131,886	10,163,804	2,327	0.8	43.8	26,798	0.8	151	2,418	45.5	27,345	0.7	46
65-74	6,873	423,284	58	1.0	12.8	626	1.0	146	94	20.8	1,063	0.6	38
75-84	2,349	122,574	32	0.7	21.3	338	0.7	66	26	17.3	271	0.6	30
85 and older	294	10,834	5	0.9	17.9	32	0.9	13	7	25.0	45	0.5	24
Other Eligibles	175,058	8,943,554	2,116	0.7	25.7	21,390	0.7	72	3,446	41.9	34,897	0.7	40
5 and younger	1	4	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	22	852	0	0.0	0.0	0	0.0	0	1	16.7	3	0.3	12
21-44	808	48,470	13	0.6	13.5	118	0.6	83	34	35.4	327	0.5	37
45-64	440	21,779	3	0.3	6.0	22	0.3	15	10	20.0	91	0.3	13
65-74	63,325	3,514,463	640	0.8	23.4	6,834	0.8	91	1,023	37.3	10,828	0.7	40
75-84	67,626	3,393,455	848	0.8	27.3	8,464	0.8	73	1,333	42.9	13,483	0.8	40
85 and older	42,836	1,964,531	612	0.6	27.4	5,952	0.6	50	1,045	46.8	10,165	0.8	40
Unknown	0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

- a. Table D.7A includes the beneficiaries represented by Cell G 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 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 2001. For information about these drug groups, see Wolters Kluwer Health, 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 D.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					ANTIDIABETIC				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	13,237	23.1 %	148,839	0.9	\$60	22,838	39.8 %	250,121	0.5	\$29	16,273	28.4 %	176,444	0.8	\$37
Female	7,848	21.3	88,071	0.9	55	16,077	43.7	176,557	0.5	29	11,481	31.2	125,147	0.8	36
Disabled	4,695	35.6	54,186	0.9	65	5,285	40.1	60,651	0.5	31	3,435	26.1	38,790	0.7	40
5 and younger	0	0.0	0	0.0	0	3	150.0	36	0.3	4	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	2	100.0	24	0.4	48	0	0.0	0	0.0	0
15-20	17	32.7	203	0.7	67	20	38.5	236	0.3	23	11	21.2	123	0.4	19
21-44	2,063	40.4	23,975	0.9	70	1,696	33.2	19,611	0.4	30	680	13.3	7,795	0.7	40
45-64	2,458	37.0	28,243	0.9	62	3,056	46.0	35,095	0.5	33	2,334	35.1	26,414	0.7	41
65-74	111	14.3	1,238	0.8	41	290	37.4	3,240	0.5	26	268	34.6	2,916	0.7	38
75-84	39	9.2	443	0.8	24	161	38.0	1,786	0.5	28	114	26.9	1,250	0.8	46
85 and older	7	4.1	84	0.9	48	57	33.7	623	0.6	30	28	16.6	292	0.7	31
Other Eligibles	3,153	13.3	33,885	0.9	39	10,792	45.6	115,906	0.6	28	8,046	34.0	86,357	0.8	34
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	33.3	12	0.6	103	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	27	16.4	259	0.6	53	26	15.8	255	0.3	18	20	12.1	174	0.7	46
45-64	4	22.2	41	0.4	17	5	27.8	60	0.3	25	4	22.2	48	0.8	58
65-74	1,057	20.4	11,835	0.9	47	2,410	46.6	27,042	0.5	30	2,560	49.4	28,549	0.7	37
75-84	1,174	14.7	12,688	0.9	39	3,837	48.2	41,775	0.6	28	3,221	40.5	34,818	0.8	35
85 and older	890	8.6	9,050	0.8	29	4,514	43.7	46,774	0.6	27	2,241	21.7	22,768	0.8	31
Male	5,389	26.3	60,768	0.9	66	6,761	32.9	73,564	0.5	29	4,792	23.3	51,297	0.7	37
Disabled	4,120	33.5	47,511	1.0	74	3,409	27.7	38,947	0.5	32	2,142	17.4	23,860	0.7	40
5 and younger	0	0.0	0	0.0	0	1	33.3	12	1.0	28	0	0.0	0	0.0	0
6-14	2	33.3	24	1.0	108	5	83.3	57	0.3	14	0	0.0	0	0.0	0
15-20	21	27.6	244	0.7	64	14	18.4	167	0.5	23	7	9.2	84	0.8	50
21-44	2,194	35.0	25,351	1.0	78	1,441	23.0	16,676	0.5	33	638	10.2	7,201	0.7	41
45-64	1,839	34.6	21,152	1.0	70	1,753	33.0	19,998	0.5	31	1,344	25.3	14,936	0.7	40
65-74	50	11.1	580	1.0	49	128	28.3	1,402	0.5	27	105	23.2	1,154	0.7	35
75-84	13	8.7	148	0.8	16	55	36.7	529	0.6	33	37	24.7	389	0.7	36
85 and older	1	3.6	12	1.1	21	12	42.9	106	0.5	28	11	39.3	96	0.4	15
Other Eligibles	1,269	15.4	13,257	0.8	40	3,352	40.7	34,617	0.6	26	2,650	32.2	27,437	0.8	35
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	1	16.7	10	0.2	3	0	0.0	0	0.0	0
21-44	20	20.8	161	0.3	17	21	21.9	200	0.3	24	4	4.2	28	0.3	15
45-64	7	14.0	49	0.7	38	10	20.0	92	0.2	11	11	22.0	111	0.4	23
65-74	543	19.8	5,916	0.9	46	1,024	37.4	11,109	0.5	27	984	35.9	10,654	0.8	39
75-84	455	14.6	4,676	0.8	37	1,282	41.3	13,148	0.5	27	1,070	34.4	10,936	0.8	32
85 and older	244	10.9	2,455	0.8	33	1,014	45.4	10,058	0.6	26	581	26.0	5,708	0.8	31
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

- a. Table D.7B includes the beneficiaries represented by Cell G 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 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 2001. For information about these drug groups, see Wolters Kluwer Health, 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 D.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

Beneficiary Characteristics	ANTI-ASTHMATIC					ANALGESICS - Narcotic					ANTI-HYPERTENSIVE				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	20,288	35.4 %	223,066	0.5	\$27	29,045	50.6 %	316,332	0.4	\$19	18,799	32.8 %	203,606	0.7	\$25
Female															
Disabled	13,717	37.2	152,195	0.5	26	21,152	57.4	231,198	0.5	19	12,971	35.2	141,197	0.7	25
5 and younger	5,597	42.5	64,034	0.5	24	8,014	60.8	91,857	0.4	18	3,062	23.2	34,875	0.7	24
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	200.0	48	0.3	5
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	15	0.9	43
21-44	19	36.5	218	0.4	21	27	51.9	314	0.2	2	7	13.5	76	0.6	31
45-64	1,809	35.4	20,940	0.4	21	2,923	57.2	33,731	0.3	13	532	10.4	6,077	0.6	22
65-74	3,328	50.1	37,993	0.5	26	4,476	67.4	51,422	0.4	22	1,966	29.6	22,526	0.7	24
75-84	307	39.6	3,422	0.5	26	331	42.7	3,653	0.4	15	284	36.6	3,118	0.7	27
85 and older	115	27.1	1,263	0.5	21	188	44.3	2,076	0.4	10	202	47.6	2,308	0.7	26
Other Eligibles	19	11.2	198	0.4	13	69	40.8	661	0.6	37	65	38.5	707	0.8	26
5 and younger	8,120	34.3	88,161	0.5	27	13,138	55.6	139,341	0.5	20	9,909	41.9	106,322	0.7	26
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	1	100.0	12	0.1	1	0	0.0	0	0.0	0
21-44	46	27.9	413	0.4	18	117	70.9	1,074	0.4	12	16	9.7	133	0.5	19
45-64	5	27.8	43	0.4	20	4	22.2	48	0.6	16	4	22.2	41	0.4	19
65-74	2,571	49.7	28,874	0.5	30	3,055	59.0	34,035	0.5	20	2,382	46.0	26,547	0.7	25
75-84	2,965	37.2	32,233	0.5	28	4,528	56.9	48,758	0.5	20	3,683	46.3	40,084	0.7	26
85 and older	2,533	24.5	26,598	0.5	25	5,430	52.6	55,385	0.5	21	3,824	37.0	39,517	0.8	26
Male															
Disabled	6,571	32.0	70,871	0.5	28	7,893	38.5	85,134	0.4	17	5,828	28.4	62,409	0.7	24
5 and younger	2,940	23.9	33,406	0.5	25	4,474	36.4	50,444	0.4	17	2,501	20.3	28,160	0.7	24
6-14	1	33.3	8	0.3	11	0	0.0	0	0.0	0	2	66.7	20	0.5	8
15-20	6	100.0	72	0.4	14	3	50.0	30	0.1	1	8	133.3	93	0.7	17
21-44	11	14.5	130	0.3	10	21	27.6	229	0.2	8	11	14.5	131	0.7	17
45-64	1,100	17.6	12,617	0.4	19	2,130	34.0	24,328	0.3	15	827	13.2	9,375	0.6	23
65-74	1,627	30.6	18,454	0.5	28	2,153	40.5	24,159	0.4	20	1,436	27.0	16,163	0.7	25
75-84	141	31.2	1,521	0.7	35	111	24.6	1,185	0.3	14	145	32.1	1,615	0.6	21
85 and older	45	30.0	497	0.5	26	44	29.3	448	0.2	5	64	42.7	694	0.7	26
Other Eligibles	9	32.1	107	0.3	14	12	42.9	65	0.7	13	8	28.6	69	0.8	20
5 and younger	3,631	44.1	37,465	0.6	31	3,419	41.5	34,690	0.4	16	3,327	40.4	34,249	0.7	25
6-14	1	100.0	5	0.2	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	0	0.0	0	0.0	0	2	33.3	20	0.1	2	2	33.3	20	0.5	15
45-64	16	16.7	169	0.7	29	61	63.5	549	0.4	15	16	16.7	135	0.4	13
65-74	13	26.0	148	0.3	8	27	54.0	236	0.5	24	21	42.0	186	0.6	28
75-84	1,348	49.2	14,789	0.6	33	1,120	40.9	12,165	0.4	17	1,091	39.8	11,771	0.7	25
85 and older	1,403	45.2	14,169	0.6	29	1,225	39.4	12,257	0.4	15	1,372	44.2	14,139	0.7	25
Unknown	850	38.1	8,185	0.6	30	984	44.1	9,463	0.4	15	825	37.0	7,998	0.8	25
	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

- a. Table D.7C includes the beneficiaries represented by Cell G 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 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 2001. For information about these drug groups, see Wolters Kluwer Health, 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 D.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC				CALCIUM BLOCKERS				Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	No. of Bene Mos
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$									
All	8,571	14.9 %	96,313	0.7	\$49	9,953	17.4 %	107,811	0.8	\$35	57,349	609,943					
Female	5,994	16.3	67,792	0.7	49	7,452	20.2	80,850	0.8	35	36,825	392,404					
Disabled	2,300	17.5	26,311	0.7	48	1,576	12.0	17,802	0.7	32	13,178	147,024					
5 and younger	0	0.0	0	0.0	0	1	50.0	12	0.3	20	2	24					
6-14	0	0.0	0	0.0	0	1	50.0	3	0.3	6	2	15					
15-20	2	3.8	24	0.6	51	2	3.8	24	0.5	55	52	556					
21-44	342	6.7	4,012	0.6	43	255	5.0	2,936	0.6	28	5,112	57,712					
45-64	1,613	24.3	18,425	0.7	50	1,018	15.3	11,574	0.7	33	6,642	74,339					
65-74	232	29.9	2,581	0.7	48	159	20.5	1,712	0.7	33	775	8,091					
75-84	97	22.9	1,120	0.7	48	104	24.5	1,144	0.8	36	424	4,642					
85 and older	14	8.3	149	0.6	38	36	21.3	397	0.8	31	169	1,645					
Other Eligibles	3,694	15.6	41,481	0.7	50	5,876	24.8	63,048	0.8	35	23,647	245,380					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
6-14	0	0.0	0	0.0	0	1	100.0	12	0.2	13	1	12					
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	29					
21-44	6	3.6	58	0.6	34	7	4.2	66	0.4	12	165	1,303					
45-64	2	11.1	24	0.5	38	3	16.7	33	0.5	38	18	148					
65-74	1,493	28.8	17,002	0.7	52	1,284	24.8	14,306	0.7	35	5,177	56,330					
75-84	1,624	20.4	18,226	0.7	49	2,172	27.3	23,643	0.8	35	7,961	83,753					
85 and older	569	5.5	6,171	0.7	46	2,409	23.3	24,988	0.8	36	10,322	103,805					
Male	2,577	12.6	28,521	0.7	49	2,501	12.2	26,961	0.7	35	20,524	217,539					
Disabled	1,558	12.7	17,690	0.7	48	1,042	8.5	11,752	0.7	35	12,293	136,567					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	21					
6-14	0	0.0	0	0.0	0	4	66.7	45	0.6	27	6	69					
15-20	2	2.6	24	0.4	26	4	5.3	47	0.8	45	76	867					
21-44	470	7.5	5,380	0.6	44	326	5.2	3,671	0.6	33	6,267	70,623					
45-64	963	18.1	10,885	0.7	50	620	11.7	6,988	0.7	35	5,311	58,574					
65-74	95	21.0	1,087	0.7	52	61	13.5	698	0.7	36	452	4,697					
75-84	27	18.0	302	0.6	42	25	16.7	285	0.7	42	150	1,495					
85 and older	1	3.6	12	0.8	31	2	7.1	18	0.6	31	28	221					
Other Eligibles	1,019	12.4	10,831	0.7	50	1,459	17.7	15,209	0.8	34	8,231	80,972					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	5					
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
15-20	0	0.0	0	0.0	0	1	16.7	10	0.7	46	6	48					
21-44	3	3.1	31	0.8	68	7	7.3	62	0.5	27	96	709					
45-64	4	8.0	37	0.4	32	9	18.0	72	0.4	24	50	348					
65-74	525	19.2	5,732	0.7	51	500	18.2	5,447	0.7	36	2,740	28,452					
75-84	389	12.5	4,041	0.7	50	587	18.9	6,067	0.8	35	3,106	30,631					
85 and older	98	4.4	990	0.7	44	355	15.9	3,551	0.8	32	2,232	20,779					
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					

Table D7D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

a. Table D.7D includes the beneficiaries represented by Cell G 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 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 2001. For information about these drug groups, see Wolters Kluwer Health, 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 D.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

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
All	\$231	6.0	12,303	133,631
Age				
0-64	308	6.4	748	8,644
65-74	303	6.8	1,350	14,955
75-84	260	6.5	3,717	40,037
85 and older	190	5.5	6,488	69,995
Unknown	0	0.0	0	0
Gender				
Female	228	6.1	9,141	100,098
Male	241	5.8	3,162	33,533
Unknown	0	0.0	0	0
Race				
White	232	6	11,350	126,779
African American	234	5.5	93	1,036
Other/unknown	215	5.6	860	5,816
Basis of Eligibility^c				
Aged	226	6.0	11,535	124,785
Disabled	306	6.4	768	8,846
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2001 Medicaid enrollment. A total of 6,859 beneficiaries who were in nursing facilities for part of their enrollment and their 59,971 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.

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.

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 D.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users						
	Total	Patented	Off-Patent	Brand-Name	Off-Patent	Brand-Name	Total	Patented	Off-Patent	Brand-Name	Generic	Total # of Rx	Total Rx \$	No. Residents	As % of Dual All-Year NF Residents	No. of Bene Mos
Anti-infective Agents	0.4	0.2	0.0	0.2	\$0	\$12	\$42	\$69	\$49	\$12	Generic	33,224	\$1,382,026	8,447	68.7 %	94,660
Biologicals	0.1	0.1	0.0	0.0	1	0	16	14	0	22	Generic	1,147	18,863	1,071	8.7	12,271
Antineoplastic Agents	0.7	0.3	0.1	0.3	49	14	118	167	139	60	Generic	2,866	337,233	383	3.1	4,170
Endocrine/Metabolic Drugs	1.2	0.5	0.3	0.4	27	5	31	53	16	14	Generic	71,331	2,231,595	5,425	44.1	59,546
Cardiovascular Agents	2.1	0.5	0.2	1.4	22	5	23	43	20	16	Generic	205,307	4,779,697	8,860	72.0	96,875
Respiratory Agents	0.7	0.3	0.0	0.4	16	0	43	60	28	33	Generic	35,758	1,540,525	4,404	35.8	49,424
Gastrointestinal Agents	1.0	0.2	0.0	0.7	33	19	35	92	64	19	Generic	61,996	2,150,212	5,825	47.3	64,643
Genitourinary Agents	0.7	0.4	0.0	0.2	32	28	49	66	39	18	Generic	21,286	1,049,098	2,883	23.4	32,404
CNS Drugs	1.6	0.9	0.1	0.6	98	75	61	87	84	22	Generic	138,965	8,511,833	7,927	64.4	87,056
Stimulants/Anti-obesity/Anorexia	0.7	0.1	0.0	0.6	8	1	31	134	47	20	Generic	822	25,382	105	0.9	1,161
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	93	92	115	119	0	22	Generic	7,379	851,705	849	6.9	9,180
Analgesics and Anesthetics	0.9	0.3	0.0	0.6	36	26	38	84	48	14	Generic	61,804	2,348,025	5,979	48.6	65,883
Neuromuscular Agents	1.3	0.4	0.2	0.7	69	37	51	84	43	33	Generic	46,474	2,387,530	3,112	25.3	34,770
Nutritional Products	0.9	0.0	0.3	0.6	18	0	21	16	30	17	Generic	34,123	717,608	3,586	29.1	39,604
Hematological Agents	1.1	0.2	0.4	0.5	38	25	34	113	15	14	Generic	33,931	1,167,930	2,819	22.9	30,814
Topical Products	0.5	0.2	0.0	0.3	16	10	32	50	39	18	Generic	40,511	1,284,977	7,112	57.8	80,432
Miscellaneous Products	0.2	0.1	0.0	0.1	8	4	40	67	145	22	Generic	1,229	48,753	567	4.6	6,390
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	20	0	0	0	Generic	3,331	66,764	854	6.9	9,669
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.	801,464	30,899,756	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

- a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 6,859 beneficiaries who were in nursing facilities for part of their enrollment and their 59,971 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 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.
- 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 (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 (May 13 2003). In Iowa, 0.4 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.

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 D.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

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	\$3,846,109	4,271	34.7 %	47,614	0.8	\$102	\$81
ANTIDEPRESSANTS	3,692,481	7,118	57.9	78,900	0.9	55	47
ULCER DRUGS	1,761,975	5,620	45.7	62,571	0.7	42	28
ANALGESICS - Narcotic	1,617,314	5,802	47.2	63,839	0.6	41	25
ANTIDIABETIC	1,496,688	3,675	29.9	40,383	0.9	41	37
ANTIHYPERTENSIVE	1,363,683	4,262	34.6	46,856	0.9	33	29
ANTICONVULSANT	1,348,732	2,382	19.4	26,903	1.1	48	50
ANTIASTHMATIC	1,250,921	3,770	30.6	42,074	0.6	51	30
CALCIUM BLOCKERS	985,199	2,315	18.8	25,489	0.9	42	39
ANTIPARKINSONIAN	905,075	1,389	11.3	15,326	0.9	63	59
Total	18,268,177	40,604		449,955	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 6,859 beneficiaries who were in nursing facilities for part of their enrollment and their 59,971 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 2001. 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 2001 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 (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 D.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^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

Beneficiary Characteristics	All Top 10 Drug Groups										ANTIPSYCHOTICS										ANTIDEPRESSANTS									
	No. of Rx	Rx \$	No. of Users	Users as %			Mean No. of Rx	Mean Rx \$	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as %			Mean No. of Rx	Mean Rx \$	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$										
				Residents	NF	All-Year							Residents	NF	All-Year															
All	355,793	\$18,268,177	4,271	34.7 %	47,614	0.8	\$81	47,614	0.8	\$81	7,118	57.9 %	78,900	0.9	\$47															
Female	262,350	13,246,325	3,021	33.0	33,996	0.8	80	33,996	0.8	80	5,395	59.0	60,231	0.9	46															
Disabled	14,318	871,812	175	45.6	2,060	0.9	117	2,060	0.9	117	265	69.0	3,098	0.9	57															
64 or younger	13,952	853,818	165	44.8	1,940	0.9	120	1,940	0.9	120	258	70.1	3,014	0.9	58															
65-74	92	6,003	2	50.0	24	1.0	94	24	1.0	94	2	50.0	24	1.0	65															
75-84	206	9,650	6	100.0	72	0.6	57	72	0.6	57	4	66.7	48	0.8	18															
85 and older	68	2,341	2	33.3	24	0.9	59	24	0.9	59	1	16.7	12	1.2	10															
Other Eligibles	248,032	12,374,513	2,846	32.5	31,936	0.8	78	31,936	0.8	78	5,130	58.6	57,133	0.8	46															
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0															
65-74	32,988	1,899,303	424	54.4	4,879	0.9	109	4,879	0.9	109	561	72.0	6,374	0.9	49															
75-84	88,143	4,584,271	1,052	41.3	11,830	0.8	85	11,830	0.8	85	1,726	67.7	19,193	0.9	47															
85 and older	126,901	5,890,939	1,370	25.2	15,227	0.7	62	15,227	0.7	62	2,843	52.4	31,566	0.8	44															
Male	93,443	5,021,852	1,250	39.5	13,618	0.8	83	13,618	0.8	83	1,723	54.5	18,669	0.9	48															
Disabled	13,367	828,113	178	46.4	2,087	0.9	106	2,087	0.9	106	212	55.2	2,422	0.9	56															
64 or younger	13,183	818,885	176	46.3	2,063	0.9	107	2,063	0.9	107	210	55.3	2,398	0.9	56															
65-74	184	9,228	2	50.0	24	1.2	20	24	1.2	20	2	50.0	24	0.6	44															
75-84	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															
Other Eligibles	80,076	4,193,739	1,072	38.6	11,531	0.8	79	11,531	0.8	79	1,511	54.4	16,247	0.8	47															
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0															
65-74	19,673	1,126,897	243	43.2	2,730	0.8	97	2,730	0.8	97	334	59.3	3,641	0.9	52															
75-84	34,903	1,841,627	472	40.6	5,016	0.9	85	5,016	0.9	85	637	54.8	6,802	0.9	47															
85 and older	25,500	1,225,215	357	33.9	3,785	0.7	57	3,785	0.7	57	540	51.3	5,804	0.8	45															
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0	0.0	0	0.0	0															

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 6,859 beneficiaries who were in nursing facilities for part of their enrollment and their 59,971 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 2001. 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 2001 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 (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 D.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^{a,b,c,d}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

Beneficiary Characteristics	ULCER DRUGS						ANALGESICS - Narcotic						ANTIDIABETIC					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx
All	5,620	45.7 %	\$28	5,802	47.2 %	\$25	3,675	29.9 %	\$37	40,383	0.9	\$37						
Female	4,185	45.8	28	4,615	50.5	27	2,676	29.3	37	29,588	0.9	37						
Disabled	167	43.5	36	172	44.8	23	98	25.5	43	1,114	1.0	43						
64 or younger	158	42.9	36	165	44.8	23	97	26.4	43	1,112	1.0	43						
65-74	0	0.0	0	2	50.0	2	0	0.0	0	0	0.0	0						
75-84	6	100.0	33	3	50.0	6	36	0.0	0	0	0.0	0						
85 and older	3	50.0	20	2	33.3	7	18	0.8	13	2	0.5	13						
Other Eligibles	4,018	45.9	28	4,443	50.7	27	49,073	0.6	37	28,474	0.9	37						
64 or younger	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0						
65-74	374	48.0	30	396	50.8	37	4,424	0.8	42	4,669	0.9	42						
75-84	1,284	50.4	28	1,388	54.5	28	15,384	0.7	28	11,414	0.9	28						
85 and older	2,360	43.5	27	2,659	49.0	25	29,265	0.6	25	12,391	0.9	25						
Male	1,435	45.4	29	1,187	37.5	20	12,758	0.5	20	10,795	0.9	20						
Disabled	157	40.9	42	129	33.6	21	1,466	0.5	21	966	0.9	21						
64 or younger	154	40.5	42	128	33.7	21	1,454	0.5	21	966	0.9	21						
65-74	3	75.0	48	1	25.0	6	12	1.1	6	0	0.0	6						
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						
Other Eligibles	1,278	46.0	28	1,058	38.1	19	11,292	0.5	19	9,829	0.9	19						
64 or younger	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0						
65-74	256	45.5	28	212	37.7	25	2,361	0.6	25	2,265	0.9	25						
75-84	505	43.4	28	420	36.1	17	4,399	0.5	17	4,561	0.9	17						
85 and older	517	49.1	27	426	40.5	19	4,532	0.5	19	3,003	0.9	19						
Unknown	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0						

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 6,859 beneficiaries who were in nursing facilities for part of their enrollment and their 59,971 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 2001. 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 2001 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 (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 D.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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

Beneficiary Characteristics	ANTIHYPERTENSIVE						ANTICONVULSANT						ANTIASTHMATIC						
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %			
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Mean No. of Rx	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Mean No. of Rx	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Mean No. of Rx	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	4,262	34.6 %	0.9	\$29	2,382	19.4 %	26,903	1.1	\$50	3,770	30.6 %	42,074	0.6	\$30					
Female																			
Disabled																			
64 or younger	69	18.0	0.9	33	236	61.5	2,786	1.2	64	111	28.9	1,303	0.7	35					
65-74	66	17.9	0.9	34	233	63.3	2,750	1.1	64	108	29.3	1,267	0.7	36					
75-84	0	0.0	0.0	0	2	50.0	24	1.5	87	1	25.0	12	0.3	7					
85 and older	3	50.0	0.4	17	1	16.7	12	0.8	21	1	16.7	12	0.2	3					
0	0	0.0	0.0	0	0	0.0	0	0.0	0	1	16.7	12	0.1	6					
Other Eligibles																			
64 or younger	3,047	34.8	0.9	29	1,362	15.6	15,316	1.0	45	2,416	27.6	27,357	0.5	26					
65-74	0	0.0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
75-84	300	38.5	0.9	30	317	40.7	3,667	1.1	59	291	37.4	3,348	0.6	30					
85 and older	976	38.3	0.9	29	547	21.5	6,129	1.1	49	835	32.8	9,416	0.6	29					
0	1,771	32.6	0.9	28	498	9.2	5,520	0.9	32	1,290	23.8	14,593	0.5	24					
Male																			
Disabled																			
64 or younger	105	27.3	0.9	31	222	57.8	2,609	1.3	78	109	28.4	1,262	0.7	40					
65-74	104	27.4	0.9	31	221	58.2	2,597	1.3	78	103	27.1	1,210	0.7	37					
75-84	1	25.0	1.1	34	1	25.0	12	0.6	13	6	150.0	52	1.7	109					
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	0.0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Other Eligibles																			
64 or younger	1,041	37.5	0.9	29	562	20.2	6,192	1.0	45	1,134	40.8	12,152	0.7	36					
65-74	199	35.3	0.9	31	207	36.8	2,358	1.1	53	270	48.0	3,076	0.8	41					
75-84	488	42.0	0.9	30	222	19.1	2,370	1.0	43	470	40.4	4,897	0.7	34					
85 and older	354	33.7	0.9	28	133	12.6	1,464	0.8	34	394	37.5	4,179	0.7	33					
0	0	0.0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Unknown																			

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 6,859 beneficiaries who were in nursing facilities for part of their enrollment and their 59,971 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 2001. 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 2001 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 (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 D.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^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

Beneficiary Characteristics	CALCIUM BLOCKERS					ANTIPARKINSONIAN					Bene Mos among All-Year NF Residents	
	Users as %		Users as %		Mean Rx \$	Users as %		Users as %		Mean Rx \$		
	No. of Users	%	No. of Users	%		No. of Users	%	No. of Users	%			
All	2,315	18.8 %	25,489	0.9	\$39	1,389	11.3 %	15,326	0.9	\$59	12,303	133,631
Female	1,838	20.1	20,306	0.9	39	891	9.7	9,942	0.9	55	9,141	100,098
Disabled	40	10.4	464	0.9	37	44	11.5	511	0.9	44	384	4,442
64 or younger	37	10.1	428	0.9	37	43	11.7	499	0.9	45	368	4,277
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	37
75-84	3	50.0	36	0.9	33	1	16.7	12	0.5	3	6	72
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	56
Other Eligibles	1,798	20.5	19,842	0.9	39	847	9.7	9,431	0.9	55	8,757	95,656
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	148	19.0	1,671	0.9	42	140	18.0	1,606	0.9	51	779	8,751
75-84	542	21.3	5,996	0.9	40	398	15.6	4,405	0.9	60	2,548	27,781
85 and older	1,108	20.4	12,175	0.9	38	309	5.7	3,420	0.9	51	5,430	59,124
Male	477	15.1	5,183	0.9	37	498	15.7	5,384	1.0	67	3,162	33,533
Disabled	41	10.7	451	1.0	47	36	9.4	419	0.9	34	384	4,404
64 or younger	40	10.5	449	1.0	47	35	9.2	407	0.9	35	380	4,367
65-74	1	25.0	2	1.5	47	1	25.0	12	0.2	4	4	37
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
Other Eligibles	436	15.7	4,732	0.9	36	462	16.6	4,965	1.0	70	2,778	29,129
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	95	16.9	1,043	0.9	39	98	17.4	1,092	1.0	70	563	6,130
75-84	193	16.6	2,078	0.9	36	272	23.4	2,902	1.0	71	1,163	12,184
85 and older	148	14.1	1,611	0.9	35	92	8.7	971	0.9	66	1,052	10,815
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 6,859 beneficiaries who were in nursing facilities for part of their enrollment and their 59,971 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 2001. 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 2001 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 (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 D.11
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG DUALS
 BY BENEFICIARY CHARACTERISTIC^{a,b}
 IOWA, 2001

Beneficiary Characteristics	No. of Benes with at Least One Part D Excl Rx	% Benes with at Least One Part D Excl Rx	No. of Part D		Total No. Part D Excl Rx	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx as % of All Rx \$	Total No. of Benes
			Bene	Excl Rx per Bene					
All	35,990	62.8 %	6.2	\$110	\$6,309,338	\$18	4.7 %	57,349	
Age									
5 and younger	4	66.7	19.7	2,147	12,882	109	29.6	6	
6-14	7	77.8	6.9	67	606	10	1.1	9	
15-20	61	44.5	2.4	323	5,894	18	1.3	137	
21-44	5,541	47.6	3.3	38,778	1,295,521	33	4.4	11,640	
45-64	7,031	58.5	5.3	64,004	1,425,629	22	4.0	12,021	
65-74	5,313	58.1	5.7	51,857	1,053,560	20	5.2	9,144	
75-84	7,959	68.4	7.4	85,845	1,152,191	13	4.6	11,641	
85 and older	10,074	79.0	9.2	117,285	1,363,055	12	6.1	12,751	
Unknown	0	0.0	0.0	0	0	0	0.0	0	
Basis of Eligibility^c									
Aged	22,403	71.1	7.8	247,117	3,446,745	14	5.4	31,523	
Disabled	13,459	52.8	4.3	110,644	2,796,960	25	4.1	25,471	
Adults	125	37.3	1.5	497	65,374	132	17.4	335	
Children	3	15.0	0.7	14	259	19	1.0	20	
Unknown	0	0.0	0.0	0	0	0	0.0	0	
Gender									
Female	25,186	68.4	7.1	261,628	4,425,837	17	5.1	36,825	
Male	10,804	52.6	4.7	96,644	1,883,501	19	4.1	20,524	
Unknown	0	0.0	0.0	0	0	0	0.0	0	
Race									
White	32,643	64.2	6.6	334,722	5,891,013	18	4.7	50,865	
African American	873	52.3	3.9	6,532	117,297	18	3.8	1,670	
Other/unknown	2,474	51.4	3.5	17,018	301,028	18	5.1	4,814	
Use of Nursing Facilities^d									
Entire year	10,423	84.7	11.8	145,186	1,693,248	12	5.5	12,303	
Part year	5,854	85.3	8.3	56,960	791,663	14	5.4	6,859	
None	19,713	51.6	4.1	156,126	3,824,427	24	4.3	38,187	
Maintenance Assistance Status									
Cash	10,263	52.8	4.4	86,210	1,844,083	21	3.9	19,447	
Medically needy	2,193	50.8	3.8	16,549	423,997	26	4.6	4,320	
Poverty related	665	31.0	1.2	2,681	71,203	27	5.3	2,146	
Other/unknown	22,869	72.7	8.0	252,832	3,970,055	16	5.3	31,436	

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

- a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2001.
 - b. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
 - 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 on Table 1 for methodology used to determine use of nursing facilities.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.12
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG DUALS PER BENEFIT MONTH
 BY BENEFICIARY CHARACTERISTIC^{a,b}
 IOWA, 2001

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazapine \$ per Bene Mo.	No. of Bene Mos
	0.6	\$10	\$18	\$0	\$3	609,943
Age						
5 and younger	2.4	258	109	0	0	50
6-14	0.6	6	10	0	3	96
15-20	0.2	4	18	0	1	1,500
21-44	0.3	10	33	0	3	130,347
45-64	0.5	11	22	0	4	133,409
65-74	0.5	11	20	0	3	97,570
75-84	0.7	10	13	0	2	120,521
85 and older	0.9	11	12	0	2	126,450
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.8	11	14	0	2	323,650
Disabled	0.4	10	25	0	4	283,591
Adults	0.2	26	132	0	1	2,541
Children	0.1	2	19	0	0	161
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.7	11	17	0	3	392,404
Male	0.4	9	19	0	3	217,539
Unknown	0.0	0	0	0	0	0
Race						
White	0.6	11	18	0	3	554,301
African American	0.4	6	18	0	2	18,111
Other/unknown	0.5	8	18	0	2	37,531
Use of Nursing Facilities^d						
Entire year	1.1	13	12	0	3	133,631
Part year	0.9	13	14	0	3	59,971
None	0.4	9	24	0	3	416,341
Maintenance Assistance Status						
Cash	0.4	8	21	0	3	219,066
Medically needy	0.4	10	26	0	3	44,315
Poverty related	0.1	3	27	0	1	22,562
Other/unknown	0.8	12	16	0	3	324,000

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

- a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2001.
- b. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- 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 on Table 1 for methodology used to determine use of nursing facilities.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.13
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
 IOWA, 2001

Drug Category	No. Users	Rx \$ per User	Total Rx \$	Rx \$ as % of All Part D Excl Rx \$	Total No. Rx.	\$ per Rx	No. Rx as % of All Part D Excl Rx
All	55,854	\$113	\$6,309,338	100.0 %	358,272	\$18	100.0 %
Anorexia or weight loss/gain	315	182	57,433	0.9	576	100	0.2
Fertility drugs	158	19	2,934	0.0	165	18	0.0
Drugs for cosmetic purposes	198	672	132,996	2.1	1,066	125	0.3
Cough and cold medications	9,348	53	497,058	7.9	25,145	20	7.0
Vitamins and minerals	11,090	164	1,817,666	28.8	83,218	22	23.2
Non-prescription drugs	20,753	53	1,105,813	17.5	148,989	7	41.6
Barbiturates	658	82	53,835	0.9	6,825	8	1.9
Benzodiazepines	12,436	140	1,745,282	27.7	89,158	20	24.9
Other Part D Excl Rx Drugs	898	998	896,321	14.2	3,130	286	0.9

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2001. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2001. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table D11.

b. Includes OTC drugs as well as prescription drugs.

c. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

SUPPLEMENTAL TABLE 1E
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b}
 IOWA, 2001

Total Number of Dual Eligible Beneficiaries, Age 85+ 12,751
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$22,248,375
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,745

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	589	4.6 %	0	0.0 %
1-500	2,686	21.1	642,876	2.9
501-1,000	2,132	16.7	1,583,071	7.1
1,001-1,500	1,712	13.4	2,126,382	9.6
1,501-2,000	1,342	10.5	2,332,298	10.5
2,001-2,500	1,084	8.5	2,423,974	10.9
2,501-3,000	830	6.5	2,266,750	10.2
3,001-3,500	653	5.1	2,113,611	9.5
3,501-4,000	460	3.6	1,716,165	7.7
4,001-4,500	352	2.8	1,492,337	6.7
4,501-5,000	264	2.1	1,250,287	5.6
5,001-5,500	178	1.4	929,604	4.2
5,501-6,000	133	1.0	763,841	3.4
6,001-6,500	97	0.8	604,599	2.7
6,501-7,000	59	0.5	396,970	1.8
7,001-7,500	52	0.4	376,217	1.7
7,501-8,000	30	0.2	232,165	1.0
8,001-8,500	22	0.2	181,416	0.8
8,501-9,000	19	0.1	165,382	0.7
9,001-9,500	14	0.1	129,355	0.6
9,501-10,000	13	0.1	126,856	0.6
10,001+	30	0.2	394,219	1.8

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2001.

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

APPENDIX TABLE A.3

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	57,372	31,523	25,471	356	22	610,371	323,650	283,738	2,785	198	0
Age											
5 and younger	6	0	5	0	1	50	0	45	0	5	0
6-14	9	0	8	0	1	98	0	86	0	12	0
15-20	139	0	128	1	10	1,524	0	1,427	1	96	0
21-44	11,654	0	11,379	265	10	130,634	0	128,431	2,118	85	0
45-64	12,028	0	11,953	75	0	133,524	0	132,958	566	0	0
65-74	9,144	7,905	1,227	12	0	97,570	84,711	12,788	71	0	0
75-84	11,641	11,065	574	2	0	120,521	114,367	6,137	17	0	0
85 and older	12,751	12,553	197	1	0	126,450	124,572	1,866	12	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	36,837	23,455	13,178	194	10	392,678	243,849	147,130	1,610	89	0
Male	20,535	8,068	12,293	162	12	217,693	79,801	136,608	1,175	109	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	50,885	27,901	22,679	287	18	554,626	295,470	256,748	2,254	154	0
African American	1,673	531	1,112	27	3	18,170	5,822	12,099	217	32	0
Other/unknown	4,814	3,091	1,680	42	1	37,575	22,358	14,891	314	12	0
Use of Nursing Facilities^c											
Entire year	12,303	11,535	768	0	0	133,631	124,785	8,846	0	0	0
Part year	6,859	6,242	617	0	0	59,971	53,596	6,375	0	0	0
None	38,210	13,746	24,086	356	22	416,769	145,269	268,517	2,785	198	0
Maintenance Assistance Status											
Cash	19,465	5,867	13,449	148	1	219,371	66,892	151,401	1,073	5	0
Medically needy	4,320	2,478	1,710	125	7	44,341	25,472	17,755	1,043	71	0
Poverty related	2,148	1,022	1,064	59	3	22,606	10,880	11,222	470	34	0
Other/unknown	31,439	22,156	9,248	24	11	324,053	220,406	103,360	199	88	0
Dual Status^d											
Full dual, all year	53,406	29,415	23,625	344	22	567,787	301,113	263,820	2,656	198	0
Full dual, part year	3,966	2,108	1,846	12	0	42,584	22,537	19,918	129	0	0
Managed Care Status											
FFS all year	57,279	31,523	25,429	310	17	609,485	323,650	283,275	2,414	146	0
FFS part year, with Rx claims	65	0	41	21	3	654	0	451	171	32	0
FFS part year, no Rx claims	5	0	1	4	0	37	0	12	25	0	0
MC all year, with Rx claims	23	0	0	21	2	195	0	0	175	20	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

a. Table A.3 includes the beneficiaries represented by Cell F of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

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 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. 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; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.4
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2001

Beneficiary Characteristics	Bene Mos in Cell F of Table 1		Bene Mos in Cell G of Table 1		Bene Mos in Cell H of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
All	57,372	610,371	57,349	609,943	23	428
FFS all year	57,279	609,485	57,279	609,485	0	0
FFS part year, with Rx claims	65	654	65	429	0	225
FFS part year, with no Rx claims	5	37	5	29	0	8
MC all year, with Rx claims	23	195	0	0	23	195
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2001 file for Iowa, released by CMS in 06/2005. This table was produced on 09/12/2006.

a. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

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.