

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2001 ILLINOIS

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TABLE D.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, ILLINOIS, 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	Aged	Disabled	Adults	Children
All	199,395	92,920	103,150	3,215	98	2	1,918,326	865,046	1,024,102	28,210	965	3					
Age																	
5 and younger	6	0	2	0	4	0	66	0	24	0	42	0					
6-14	29	0	10	0	19	0	307	0	120	0	187	0					
15-20	348	0	283	11	54	0	3,510	0	2,822	103	585	0					
21-44	34,684	0	32,485	2,179	20	0	342,126	0	322,403	19,584	139	0					
45-64	40,898	10	39,995	891	1	1	380,830	41	373,366	7,409	12	2					
65-74	44,837	22,663	22,046	128	0	0	436,599	202,010	233,540	1,049	0	0					
75-84	44,142	37,286	6,850	6	0	0	430,341	354,535	75,741	65	0	0					
85 and older	34,441	32,961	1,479	0	0	1	324,547	308,460	16,086	0	0	1					
Unknown	0	0	0	0	0	0		0	0	0	0	0					
Gender																	
Female	128,392	68,224	58,032	2,092	42	2	1,248,584	643,298	585,600	19,223	460	3					
Male	70,993	24,696	45,118	1,123	56	0	669,742	221,748	438,502	8,987	505	0					
Unknown	0	0	0	0	0	0		0	0	0	0	0					
Race																	
White	123,737	62,073	60,076	1,544	42	2	1,169,806	566,637	589,278	13,473	415	3					
African American	52,040	16,828	33,974	1,201	37	0	505,101	152,670	341,240	10,835	356	0					
Other/unknown	23,608	14,019	9,100	470	19	0	243,419	145,739	93,584	3,902	194	0					
Use of Nursing Facilities^c																	
Entire year	47,822	36,253	11,567	2	0	0	487,757	359,527	128,217	13	0	0					
Part year	17,684	10,907	6,760	16	1	0	164,292	91,696	72,427	157	12	0					
None	133,879	45,760	84,823	3,197	97	2	1,266,277	413,823	823,458	28,040	953	3					
Maintenance Assistance Status																	
Cash	35,221	16,569	18,543	109	0	0	404,441	190,549	213,045	847	0	0					
Medically needy	131,392	63,141	65,506	2,740	5	0	1,207,032	556,448	626,500	24,044	40	0					
Poverty-related	3,561	1,343	2,054	124	39	1	30,318	11,862	17,094	922	438	2					
Other/unknown	29,211	11,867	17,047	242	54	1	276,535	106,187	167,463	2,397	487	1					
Dual Medicare Status^d																	
Full dual, all year	190,564	89,462	98,240	2,762	98	2	1,842,231	834,945	983,015	23,303	965	3					
Full dual, part year	8,821	3,458	4,910	453	0	0	76,095	30,101	41,087	4,907	0	0					
Managed Care Status																	
FFS all year	199,141	92,812	103,064	3,165	98	2	1,917,014	864,530	1,023,612	27,904	965	3					
FFS part year, with Rx claims	162	62	63	37	0	0	955	317	398	240	0	0					
FFS part year, no Rx claims	82	46	23	13	0	0	357	199	92	66	0	0					

Table D2

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

- 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, ILLINOIS, 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	83.3 %	41.5	\$2,087	\$50	\$13,715	15.2 %	199,385
Age							
5 and younger	100.0	46.8	5,203	111	111,674	4.7	6
6-14	75.9	40.8	6,989	172	26,754	26.1	29
15-20	69.5	22.9	2,590	113	10,975	23.6	348
21-44	78.0	29.5	2,258	76	13,833	16.3	34,684
45-64	82.1	42.4	2,483	59	15,222	16.3	40,898
65-74	81.2	41.7	1,935	46	9,507	20.4	44,837
75-84	85.1	46.2	1,983	43	13,420	14.8	44,142
85 and older	90.6	46.4	1,763	38	17,662	10.0	34,441
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^c							
Aged	84.0	42.2	1,746	41	13,159	13.3	92,920
Disabled	82.9	41.5	2,410	58	14,486	16.6	103,150
Adults	75.1	23.3	1,519	65	4,790	31.7	3,215
Children	72.4	30.3	3,959	131	22,056	17.9	98
Unknown	0.0	0.0	0	0	864	0.0	2
Gender							
Female	85.8	44.7	2,082	47	13,071	15.9	128,392
Male	78.8	35.8	2,096	59	14,880	14.1	70,993
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	86.0	47.1	2,337	50	16,438	14.2	123,737
African American	77.5	32.1	1,676	52	10,509	15.9	52,040
Other/unknown	81.7	32.7	1,681	51	6,514	25.8	23,608
Use of Nursing Facilities^d							
Entire year	96.8	63.3	2,868	45	26,620	10.8	47,822
Part year	84.3	45.9	2,259	49	29,544	7.6	17,684
None	78.3	33.1	1,785	54	7,015	25.4	133,879
Maintenance Assistance Status							
Cash	90.8	49.7	2,473	50	9,891	25.0	35,221
Medically needy	81.0	39.0	1,945	50	14,795	13.1	131,392
Poverty related	61.3	16.4	952	58	3,795	25.1	3,561
Other/unknown	87.3	46.1	2,395	52	14,678	16.3	29,211

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

- 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, ILLINOIS, 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	4.3	\$217	15.2 %	16.7 %	15.2 %	10.1 %	27.3 %	23.4 %	7.3 %	\$1,426	199,385	1,918,326
Age												
5 and younger	4.3	473	4.7	0.0	0.0	0.0	83.3	16.7	0.0	10,152	6	66
6-14	3.9	660	26.1	24.1	6.9	10.3	27.6	27.6	3.4	2,527	29	307
15-20	2.3	257	23.6	30.5	32.5	9.8	15.5	9.8	2.0	1,088	348	3,510
21-44	3.0	229	16.3	22.0	24.9	11.7	23.0	14.4	4.0	1,402	34,684	342,126
45-64	4.6	267	16.3	17.9	14.0	9.9	25.7	23.7	8.8	1,635	40,898	380,830
65-74	4.3	199	20.4	18.8	15.3	9.9	26.4	22.3	7.3	976	44,837	436,599
75-84	4.7	203	14.8	14.9	11.9	9.5	28.6	26.5	8.6	1,377	44,142	430,341
85 and older	4.9	187	10.0	9.4	10.4	10.0	33.0	29.9	7.3	1,874	34,441	324,547
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	4.5	188	13.3	16.0	12.8	9.8	28.7	25.3	7.4	1,414	92,920	865,046
Disabled	4.2	243	16.6	17.1	16.8	10.3	26.2	22.2	7.3	1,459	103,150	1,024,102
Adults	2.7	173	31.7	24.9	28.5	12.1	20.6	11.0	2.9	546	3,215	28,210
Children	3.1	402	17.9	27.6	24.5	9.2	18.4	16.3	4.1	2,240	98	965
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	576	2	3
Gender												
Female	4.6	214	15.9	14.2	14.0	10.1	28.4	25.1	8.1	1,344	128,392	1,248,584
Male	3.8	222	14.1	21.2	17.2	10.1	25.3	20.4	5.8	1,577	70,993	669,742
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	5.0	247	14.2	14.0	12.0	9.2	27.7	27.6	9.6	1,739	123,737	1,169,806
African American	3.3	173	15.9	22.5	19.7	11.0	25.9	17.2	3.8	1,083	52,040	505,101
Other/unknown	3.2	163	25.8	18.3	21.8	13.2	28.4	15.3	3.0	632	23,608	243,419
use of nursing Facilities^d												
Entire year	6.2	281	10.8	3.2	6.7	8.0	31.5	37.4	13.3	2,610	47,822	487,757
Part year	4.9	243	7.6	15.7	8.1	8.5	28.5	29.1	10.1	3,180	17,684	164,292
None	3.5	189	25.4	21.7	19.1	11.1	25.6	17.7	4.8	742	133,879	1,266,277
Maintenance Assistance Status												
Cash	4.3	215	25.0	9.2	17.1	11.4	31.5	24.0	6.8	861	35,221	404,441
Medically needy	4.2	212	13.1	19.0	14.6	9.8	26.4	23.2	7.0	1,611	131,392	1,207,032
Poverty related	1.9	112	25.1	38.7	24.2	10.4	16.6	7.9	2.2	446	3,561	30,318
Other/unknown	4.9	253	16.3	12.7	14.0	10.0	27.6	26.0	9.7	1,551	29,211	276,535

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

- 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, ILLINOIS, 2001

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx
All	4.3	\$217	\$50	1.9	\$160	\$86	0.4	\$17	\$42	2.0	\$40	\$20
Age												
5 and younger	4.3	473	111	2.0	428	211	0.2	9	57	2.1	37	18
6-14	3.9	660	172	1.7	525	312	0.5	95	185	1.7	41	24
15-20	2.3	257	113	1.1	209	193	0.2	25	125	1.0	23	23
21-44	3.0	229	76	1.4	177	130	0.3	19	74	1.4	33	24
45-64	4.6	267	59	2.0	199	99	0.4	21	57	2.2	46	22
65-74	4.3	199	46	2.0	148	76	0.3	13	39	2.0	37	19
75-84	4.7	203	43	2.0	148	73	0.4	15	32	2.2	41	18
85 and older	4.9	187	38	1.9	129	69	0.5	16	29	2.5	42	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	4.5	188	41	1.9	135	71	0.4	14	31	2.2	38	18
Disabled	4.2	243	58	1.8	182	99	0.3	19	54	2.0	42	21
Adults	2.7	173	65	1.2	137	112	0.1	11	72	1.3	25	20
Children	3.1	402	131	1.5	340	223	0.3	40	123	1.2	23	19
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	4.6	214	47	2.0	158	79	0.4	16	38	2.2	40	19
Male	3.8	222	59	1.6	164	102	0.4	18	52	1.8	39	22
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	5.0	247	50	2.1	181	85	0.5	20	41	2.4	46	20
African American	3.3	173	52	1.4	127	93	0.3	13	48	1.7	33	20
Other/unknown	3.2	163	51	1.6	128	81	0.2	9	43	1.4	27	19
Use of Nursing Facilities^e												
Entire year	6.2	281	45	2.4	197	81	0.7	25	37	3.1	59	19
Part year	4.9	243	49	2.0	172	87	0.6	26	47	2.4	44	19
None	3.5	189	54	1.6	144	89	0.3	12	47	1.6	32	20
Maintenance Assistance Status												
Cash	4.3	215	50	2.0	163	80	0.3	15	43	1.9	37	19
Medically needy	4.2	212	50	1.8	154	87	0.4	17	43	2.1	40	20
Poverty related	1.9	112	58	0.9	87	98	0.1	7	48	0.9	18	20
Other/unknown	4.9	253	52	2.1	191	90	0.4	16	40	2.3	45	20

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

- 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 Illinois, 0.7 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (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, ILLINOIS, 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	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total No. of Rx	Total Rx \$	No. Dual Benes	As % of Benes	No. of Bene Mos
Anti-infective Agents	0.4	0.2	0.0	0.2	\$25	\$23	\$0	\$2	\$71	\$115	\$75	\$14	368,311	\$26,201,726	98,653	49.5 %	1,032,921
Biologics	0.1	0.0	0.0	0.1	8	3	0	5	81	244	1,829	55	2,837	228,547	2,627	1.3	28,127
Antineoplastic Agents	0.6	0.2	0.2	0.2	108	69	29	11	188	303	160	63	41,283	7,749,537	7,284	3.7	71,487
Endocrine/Metabolic Drugs	1.0	0.5	0.1	0.3	38	31	2	4	37	57	17	13	758,454	28,189,564	73,292	36.8	748,042
Cardiovascular Agents	1.8	0.7	0.1	1.0	57	34	4	19	32	52	26	19	2,082,046	65,705,989	113,001	56.7	1,146,622
Respiratory Agents	0.8	0.4	0.0	0.3	35	27	0	7	43	60	31	22	522,812	22,667,855	62,380	31.3	652,361
Gastrointestinal Agents	0.8	0.4	0.0	0.4	54	44	2	9	70	118	71	23	612,933	42,619,797	76,157	38.2	784,053
Genitourinary Agents	0.5	0.3	0.0	0.2	22	18	0	3	43	64	32	16	161,343	6,988,820	30,369	15.2	317,193
CNS Drugs	1.4	0.7	0.1	0.6	107	81	11	15	77	116	94	26	1,342,858	103,140,146	94,454	47.4	960,711
Stimulants/Anti-obesity/Anorexia	0.7	0.2	0.0	0.5	31	18	3	11	47	110	59	23	10,076	468,646	1,541	0.8	15,175
Miscellaneous Psychological/Neurological Agents	0.6	0.6	0.0	0.0	70	68	0	1	114	119	44	40	63,027	7,210,333	10,108	5.1	103,297
Analgesics and Anesthetics	0.7	0.3	0.0	0.4	34	25	2	6	46	86	73	15	648,318	29,838,148	85,564	42.9	884,396
Neuromuscular Agents	1.1	0.4	0.1	0.5	59	43	5	11	55	99	35	23	540,804	29,691,185	48,958	24.6	504,127
Nutritional Products	0.7	0.0	0.2	0.4	12	1	5	6	19	33	25	15	273,043	5,127,036	40,904	20.5	413,077
Hematological Agents	0.9	0.2	0.2	0.4	47	37	4	6	54	165	18	14	329,623	17,790,479	37,449	18.8	378,163
Topical Products	0.5	0.2	0.0	0.3	18	12	2	4	33	49	45	16	451,693	14,790,718	78,266	39.3	832,814
Miscellaneous Products	0.4	0.2	0.0	0.2	80	62	11	8	190	372	274	37	36,211	6,871,909	8,444	4.2	85,429
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	0	26	0	0	0	28,427	736,096	9,194	4.6	99,634
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.	8,274,099	416,016,531	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

- 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_mdmb.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 Illinois, 0.7 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mdmb.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, ILLINOIS, 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	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$63,551,421	56,785	28.5 %	602,188	0.8	\$128	\$106
ULCER DRUGS	36,616,285	72,845	36.5	768,361	0.6	84	48
ANTIDEPRESSANTS	29,591,269	69,064	34.6	715,538	0.7	61	41
ANTICONVULSANT	24,046,299	40,737	20.4	431,124	0.9	64	56
ANTIDIABETIC	20,256,856	56,941	28.6	595,838	0.7	47	34
ANTIHYPERTENSIVE	18,075,589	72,083	36.2	757,339	0.7	35	24
ANTIHYPERLIPIDEMIC	16,505,166	30,936	15.5	331,973	0.7	75	50
ANALGESICS - ANTI-INFLAMMATORY	16,190,985	64,540	32.4	704,804	0.4	56	23
ANTIASTHMATIC	14,510,955	62,215	31.2	650,468	0.5	43	22
CALCIUM BLOCKERS	14,275,705	39,206	19.7	414,439	0.8	46	34
Total	253,620,530	565,352		5,972,072	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

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, ILLINOIS, 2001

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ULCER DRUGS				
	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	3,897,661	\$253,620,530	56,785	0.8	28.5 %	602,188	0.8	\$106	72,845	36.5 %	768,361	0.6	\$48
Female	2,608,659	161,550,213	32,824	0.7	25.6	348,302	0.7	88	51,051	39.8	541,928	0.6	48
Disabled	1,361,357	92,409,677	17,774	0.8	30.6	193,458	0.8	111	23,586	40.6	256,764	0.5	49
5 and younger	4	213	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	63	3,128	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	931	73,641	27	0.4	22.0	313	0.4	71	27	22.0	311	0.4	31
21-44	238,675	19,710,791	5,729	0.8	41.1	61,985	0.8	118	3,855	27.6	41,777	0.5	45
45-64	538,795	37,662,436	7,031	0.9	31.5	74,837	0.9	121	9,075	40.7	95,399	0.6	53
65-74	412,177	25,059,767	3,163	0.8	21.3	35,536	0.8	91	7,326	49.3	82,313	0.5	48
75-84	145,418	8,528,890	1,487	0.8	27.0	17,010	0.8	85	2,728	49.6	30,652	0.6	47
85 and older	25,294	1,370,811	337	0.7	26.3	3,777	0.7	68	575	44.9	6,312	0.6	45
Other Eligibles	1,247,302	69,140,536	15,050	0.6	21.4	154,844	0.6	61	27,465	39.0	285,164	0.6	47
5 and younger	26	471	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	39	2,120	0	0.0	0.0	0	0.0	0	1	12.5	12	0.3	17
15-20	554	34,024	7	1.4	18.4	75	1.4	123	11	28.9	125	0.4	39
21-44	15,144	1,028,006	262	0.5	16.4	2,685	0.5	64	352	22.0	3,761	0.4	36
45-64	7,503	504,451	66	0.4	14.7	723	0.4	55	167	37.3	1,725	0.5	52
65-74	233,302	13,522,848	1,823	0.7	12.8	18,474	0.7	69	4,871	34.1	51,003	0.5	44
75-84	528,826	29,558,330	5,918	0.6	22.3	61,807	0.6	66	10,817	40.7	114,428	0.6	46
85 and older	461,908	24,490,286	6,974	0.6	25.4	71,080	0.6	54	11,246	41.0	114,110	0.7	48
Male	1,289,002	92,070,317	23,961	0.9	33.8	253,886	0.9	129	21,794	30.7	226,433	0.6	47
Disabled	862,167	68,411,815	18,281	1.0	40.5	198,088	1.0	147	12,342	27.4	130,924	0.6	48
5 and younger	6	51	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	75	4,102	1	0.1	12.5	12	0.1	1	2	25.0	24	0.9	36
15-20	1,451	114,523	31	0.5	19.4	336	0.5	79	20	12.5	230	0.6	52
21-44	293,128	27,482,446	8,564	1.0	46.2	92,700	1.0	153	3,709	20.0	39,602	0.5	47
45-64	359,655	28,296,226	7,320	1.1	41.4	78,370	1.1	156	4,992	28.2	50,963	0.6	51
65-74	172,005	10,363,407	1,782	0.9	24.8	20,140	0.9	104	2,916	40.6	32,439	0.5	45
75-84	31,603	1,912,303	503	0.9	37.4	5,684	0.9	93	594	44.1	6,507	0.6	49
85 and older	4,244	238,757	80	0.7	40.4	846	0.7	72	109	55.1	1,159	0.6	46
Other Eligibles	426,835	23,658,502	5,680	0.6	22.0	55,798	0.6	66	9,452	36.5	95,509	0.6	45
5 and younger	6	84	0	0.0	0.0	0	0.0	0	1	33.3	12	0.4	6
6-14	102	4,434	0	0.0	0.0	0	0.0	0	3	27.3	29	1.0	46
15-20	203	20,768	4	0.6	14.8	48	0.6	142	6	22.2	66	0.4	18
21-44	5,756	403,520	70	0.6	11.7	697	0.6	92	145	24.2	1,410	0.4	47
45-64	5,274	340,689	22	0.5	4.8	204	0.5	87	126	27.7	1,185	0.4	44
65-74	124,051	7,038,538	1,356	0.7	15.9	13,442	0.7	76	2,601	30.5	26,631	0.5	42
75-84	201,994	11,187,495	2,681	0.6	25.0	26,549	0.6	67	4,239	39.5	43,542	0.6	47
85 and older	89,449	4,662,974	1,547	0.6	28.0	14,858	0.6	54	2,331	42.3	22,634	0.6	46
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 Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

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, ILLINOIS, 2001

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTICONSULSANT					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	69,064	34.6 %	715,538	0.7	\$41	40,737	20.4 %	431,124	0.9	\$56	56,941	28.6 %	595,838	0.7	\$34
Female	48,280	37.6	502,791	0.7	41	23,268	18.1	246,214	0.8	50	40,525	31.6	427,309	0.7	34
Disabled	25,224	43.5	268,115	0.7	42	15,231	26.2	163,539	0.9	59	20,255	34.9	218,989	0.7	38
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	1	50.0	12	0.8	17	0	0.0	0	0.0	0
15-20	31	25.2	363	0.6	42	26	21.1	299	0.6	51	3	2.4	33	0.7	39
21-44	6,903	49.5	73,091	0.6	43	5,142	36.9	55,383	0.9	72	1,868	13.4	20,102	0.7	40
45-64	11,244	50.4	115,761	0.7	45	6,416	28.8	67,214	0.9	61	7,990	35.8	82,634	0.7	41
65-74	5,221	35.1	58,154	0.6	36	2,626	17.7	29,176	0.8	40	7,699	51.8	86,114	0.7	38
75-84	1,536	27.9	17,478	0.6	36	892	16.2	10,041	0.8	33	2,366	43.0	26,567	0.7	32
85 and older	289	22.6	3,268	0.6	34	128	10.0	1,414	0.8	26	329	25.7	3,539	0.7	25
Other Eligibles	23,056	32.8	234,676	0.7	41	8,037	11.4	82,675	0.8	31	20,270	28.8	208,320	0.7	30
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	11	28.9	119	0.7	49	10	26.3	117	1.0	55	3	7.9	29	0.7	31
21-44	748	46.7	7,751	0.5	33	361	22.5	3,776	0.5	40	180	11.2	1,894	0.6	38
45-64	239	53.3	2,502	0.5	36	88	19.6	900	0.5	32	182	40.6	1,751	0.6	34
65-74	3,552	24.9	35,518	0.6	36	1,570	11.0	15,840	0.8	35	5,202	36.5	53,507	0.7	34
75-84	8,932	33.6	92,379	0.7	41	3,457	13.0	36,289	0.8	31	9,079	34.2	94,553	0.7	30
85 and older	9,574	34.9	96,407	0.8	43	2,551	9.3	25,753	0.8	28	5,624	20.5	56,586	0.7	25
Male	20,784	29.3	212,747	0.7	42	17,469	24.6	184,910	0.9	64	16,416	23.1	168,529	0.7	34
Disabled	13,757	30.5	143,310	0.7	43	14,058	31.2	151,115	1.0	71	8,970	19.9	93,712	0.7	37
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	1	12.5	12	1.0	57	0	0.0	0	0.0	0
15-20	34	21.3	382	0.4	35	52	32.5	596	0.8	66	8	5.0	96	0.8	29
21-44	6,005	32.4	62,609	0.6	44	6,423	34.6	69,326	0.9	78	1,703	9.2	17,691	0.7	39
45-64	5,407	30.6	54,411	0.7	45	5,727	32.4	60,639	1.0	71	4,165	23.6	41,780	0.7	38
65-74	1,947	27.1	21,827	0.6	38	1,549	21.6	17,171	0.9	47	2,643	36.8	29,089	0.7	36
75-84	330	24.5	3,696	0.7	40	263	19.5	2,947	0.9	38	409	30.4	4,598	0.7	31
85 and older	34	17.2	385	0.9	48	43	21.7	424	0.9	35	42	21.2	458	0.7	22
Other Eligibles	7,027	27.2	69,437	0.7	39	3,411	13.2	33,795	0.8	34	7,446	28.8	74,817	0.7	30
5 and younger	0	0.0	0	0.0	0	1	33.3	12	0.1	1	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	2	7.4	23	0.6	34	5	18.5	60	0.9	143	0	0.0	0	0.0	0
21-44	232	38.8	2,258	0.5	30	110	18.4	1,114	0.6	60	102	17.1	1,062	0.6	35
45-64	159	34.9	1,491	0.5	29	57	12.5	526	0.5	46	184	40.4	1,757	0.6	34
65-74	1,820	21.4	18,324	0.6	37	1,020	12.0	10,186	0.8	37	2,571	30.2	25,945	0.7	31
75-84	3,156	29.4	31,483	0.7	40	1,550	14.4	15,501	0.8	31	3,402	31.7	34,540	0.7	30
85 and older	1,658	30.1	15,858	0.7	42	668	12.1	6,396	0.8	31	1,187	21.5	11,513	0.7	24
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 Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

- 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, ILLINOIS, 2001

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIHYPERLIPIDEMIC					ANALGESICS - ANTI-INFLAMMATORY				
	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	72,083	36.2 %	757,339	0.7	\$24	30,936	15.5 %	331,973	0.7	\$50	64,540	32.4 %	704,804	0.4	\$23
Female	49,258	38.4	520,515	0.7	24	21,564	16.8	233,356	0.7	50	46,921	36.5	514,102	0.4	25
Disabled	21,540	37.1	234,838	0.7	24	11,881	20.5	130,095	0.7	51	24,415	42.1	271,970	0.4	22
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	1	50.0	12	0.2	7	0	0.0	0	0.0	0	1	50.0	12	0.4	4
15-20	11	8.9	122	0.5	22	1	0.8	12	0.3	33	31	25.2	358	0.2	2
21-44	1,855	13.3	19,932	0.6	20	932	6.7	10,000	0.6	45	4,482	32.1	49,290	0.3	10
45-64	7,888	35.4	82,190	0.7	24	4,775	21.4	50,070	0.7	51	8,620	38.6	93,247	0.4	22
65-74	8,193	55.1	91,850	0.7	25	4,787	32.2	54,009	0.7	53	8,097	54.5	92,314	0.4	26
75-84	3,023	54.9	34,385	0.7	25	1,259	22.9	14,560	0.7	52	2,711	49.3	31,350	0.5	30
85 and older	569	44.4	6,347	0.7	23	127	9.9	1,444	0.6	39	473	36.9	5,399	0.4	28
Other Eligibles	27,718	39.4	285,677	0.7	24	9,683	13.8	103,261	0.7	48	22,506	32.0	242,132	0.5	29
5 and younger	4	400.0	48	0.4	4	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	2	25.0	24	0.7	18	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	12	31.6	144	0.5	15	1	2.6	12	0.5	57	9	23.7	106	0.2	2
21-44	219	13.7	2,327	0.5	17	78	4.9	839	0.4	31	579	36.2	6,244	0.3	9
45-64	166	37.1	1,665	0.6	21	74	16.5	752	0.5	40	173	38.6	1,823	0.3	28
65-74	5,935	41.6	60,934	0.6	23	3,300	23.1	34,712	0.6	48	5,192	36.4	55,974	0.4	25
75-84	11,626	43.8	122,377	0.7	24	4,633	17.5	50,072	0.7	50	9,272	34.9	101,250	0.5	29
85 and older	9,754	35.5	98,158	0.8	24	1,597	5.8	16,874	0.7	44	7,281	26.5	76,735	0.5	33
Male	22,825	32.2	236,824	0.7	24	9,372	13.2	98,617	0.7	49	17,619	24.8	190,702	0.4	17
Disabled	12,175	27.0	128,307	0.7	24	5,814	12.9	61,415	0.7	50	10,939	24.2	119,403	0.3	14
5 and younger	1	100.0	12	0.5	4	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	2	25.0	24	0.6	17	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	26	16.3	304	0.5	16	3	1.9	36	0.7	47	23	14.4	267	0.1	2
21-44	2,647	14.3	27,717	0.6	22	1,340	7.2	14,127	0.6	45	3,718	20.1	40,627	0.3	8
45-64	5,248	29.7	52,801	0.7	24	2,583	14.6	25,935	0.7	51	3,937	22.3	41,424	0.4	13
65-74	3,548	49.4	39,616	0.7	25	1,637	22.8	18,465	0.7	54	2,762	38.4	31,412	0.4	21
75-84	618	45.9	6,874	0.7	26	234	17.4	2,660	0.6	50	440	32.7	4,995	0.5	23
85 and older	85	42.9	959	0.8	29	17	8.6	192	0.7	49	59	29.8	678	0.5	25
Other Eligibles	10,650	41.2	108,517	0.7	23	3,558	13.8	37,202	0.7	48	6,680	25.8	71,299	0.4	23
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	4	36.4	48	0.5	10	1	9.1	12	0.1	3	1	9.1	12	1.0	18
15-20	5	18.5	58	0.3	10	2	7.4	21	0.2	10	2	7.4	24	0.1	1
21-44	124	20.7	1,180	0.6	20	52	8.7	482	0.5	38	161	26.9	1,623	0.2	7
45-64	159	34.9	1,505	0.5	21	101	22.2	909	0.6	47	116	25.5	1,129	0.3	23
65-74	3,307	38.8	33,567	0.6	22	1,434	16.8	14,845	0.6	47	2,272	26.7	24,323	0.4	19
75-84	4,821	44.9	50,241	0.7	24	1,647	15.3	17,587	0.7	49	2,872	26.7	31,179	0.4	24
85 and older	2,230	40.4	21,918	0.7	23	321	5.8	3,346	0.7	46	1,256	22.8	13,009	0.5	27
Unknown	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 Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

- 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, ILLINOIS, 2001

Beneficiary Characteristics	ANTI-ASTHMATIC				CALCIUM BLOCKERS				Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Bene Mos
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users							
All	62,215	31.2 %	650,468	0.5	\$22	39,206	19.7 %	414,439	0.8	\$34	199,385	1,918,326			
Female	42,382	33.0	447,056	0.5	22	28,607	22.3	303,715	0.8	34	128,392	1,248,584			
Disabled	23,606	40.7	255,434	0.5	24	12,207	21.0	133,876	0.7	36	58,032	585,600			
5 and younger	1	100.0	12	0.1	1	1	100.0	12	0.3	17	1	12			
6-14	5	250.0	60	0.8	47	0	0.0	0	0.0	0	2	24			
15-20	28	22.8	318	0.2	10	9	7.3	103	0.5	28	123	1,213			
21-44	4,243	30.4	46,021	0.4	19	908	6.5	9,882	0.7	33	13,947	140,405			
45-64	9,726	43.6	102,649	0.5	25	4,255	19.1	44,510	0.7	36	22,313	211,109			
65-74	6,977	46.9	77,056	0.5	24	4,739	31.9	53,244	0.8	37	14,861	157,815			
75-84	2,188	39.8	24,506	0.5	22	1,890	34.3	21,552	0.8	36	5,504	61,039			
85 and older	438	34.2	4,812	0.5	19	405	31.6	4,573	0.8	33	1,281	13,983			
Other Eligibles	18,776	26.7	191,622	0.5	20	16,400	23.3	169,839	0.8	33	70,360	662,984			
5 and younger	0	0.0	0	0.0	0	1	100.0	12	0.6	25	1	12			
6-14	2	25.0	24	0.1	1	4	50.0	48	0.4	31	8	87			
15-20	8	21.1	90	0.2	9	7	18.4	79	0.6	35	38	422			
21-44	517	32.3	5,577	0.4	17	111	6.9	1,136	0.5	24	1,601	14,835			
45-64	196	43.8	1,988	0.5	26	85	19.0	893	0.6	33	448	3,929			
65-74	3,688	25.8	37,005	0.5	23	3,175	22.2	32,665	0.7	33	14,271	128,783			
75-84	7,433	28.0	76,540	0.5	22	6,823	25.7	72,145	0.8	34	26,548	255,602			
85 and older	6,932	25.3	70,398	0.5	17	6,194	22.6	62,861	0.8	33	27,445	259,314			
Male	19,833	27.9	203,412	0.5	23	10,599	14.9	110,724	0.7	35	70,993	669,742			
Disabled	10,987	24.4	115,521	0.5	23	5,669	12.6	60,080	0.7	36	45,118	438,502			
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12			
6-14	0	0.0	0	0.0	0	3	37.5	36	0.7	60	8	96			
15-20	26	16.3	294	0.4	18	16	10.0	175	0.7	49	160	1,609			
21-44	2,977	16.1	31,829	0.5	20	1,160	6.3	12,264	0.7	37	18,538	181,998			
45-64	4,337	24.5	43,556	0.5	24	2,365	13.4	23,978	0.7	37	17,682	162,257			
65-74	3,026	42.1	33,010	0.6	25	1,807	25.1	20,106	0.7	35	7,185	75,725			
75-84	558	41.5	6,119	0.5	21	279	20.7	3,088	0.8	35	1,346	14,702			
85 and older	63	31.8	713	0.5	18	39	19.7	433	0.8	33	198	2,103			
Other Eligibles	8,846	34.2	87,891	0.6	23	4,930	19.1	50,644	0.7	32	25,875	231,240			
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	30			
6-14	1	9.1	10	0.1	2	4	36.4	41	0.8	58	11	100			
15-20	3	11.1	36	0.2	7	7	25.9	78	0.6	29	27	266			
21-44	131	21.9	1,398	0.4	20	65	10.9	618	0.6	34	598	4,888			
45-64	100	22.0	991	0.4	21	80	17.6	758	0.6	30	455	3,535			
65-74	2,598	30.5	25,770	0.6	25	1,484	17.4	15,233	0.7	32	8,520	74,276			
75-84	4,037	37.6	40,819	0.6	23	2,348	21.9	24,565	0.8	33	10,744	98,998			
85 and older	1,976	35.8	18,867	0.5	20	942	17.1	9,351	0.8	30	5,517	49,147			
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 Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

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, ILLINOIS, 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	\$281	6.2	47,822	487,757
Age				
0-64	481	7.3	6,014	66,395
65-74	329	6.9	6,631	68,837
75-84	270	6.4	14,938	150,724
85 and older	207	5.5	20,239	201,801
Unknown	0	0.0	0	0
Gender				
Female	263	6.2	33,415	342,956
Male	324	6.2	14,407	144,801
Unknown	0	0.0	0	0
Race				
White	284	6.4	39,519	402,777
African American	261	5.2	7,127	72,934
Other/unknown	310	6.1	1,176	12,046
Basis of Eligibility^c				
Aged	239	6.0	36,253	359,527
Disabled	400	6.9	11,567	128,217
Adults	298	8.4	2	13
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

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 17,684 beneficiaries who were in nursing facilities for part of their enrollment and their 164,292 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, ILLINOIS, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users					
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Generic	Total # of Rx	Total Rx \$	No. Residents	As % of Dual All-Year NF Residents	No. of Bene Mos
Anti-infective Agents	0.3	0.2	0.0	0.1	\$18	\$16	\$0	\$2	\$53	\$14	108,886	\$5,719,504	29,443	61.6 %	313,009
Biologicals	0.1	0.0	0.0	0.1	2	0	0	2	21	27	1,798	37,045	1,743	3.6	18,794
Antineoplastic Agents	0.6	0.2	0.3	0.2	94	43	40	11	155	247	18,476	2,862,742	3,020	6.3	30,357
Endocrine/Metabolic Drugs	1.1	0.5	0.2	0.4	34	27	2	5	31	53	234,526	7,278,075	20,211	42.3	211,815
Cardiovascular Agents	1.9	0.6	0.2	1.2	49	24	4	21	25	43	681,055	17,087,265	33,739	70.6	349,616
Respiratory Agents	0.8	0.4	0.0	0.4	30	20	0	9	37	56	141,917	5,214,931	16,315	34.1	173,259
Gastrointestinal Agents	1.0	0.4	0.0	0.6	53	38	1	14	56	105	235,322	13,174,692	23,577	49.3	247,136
Genitourinary Agents	0.6	0.3	0.0	0.3	23	18	0	5	39	64	81,047	3,141,002	12,984	27.2	138,077
CNS Drugs	1.7	0.9	0.2	0.6	133	102	13	18	78	111	572,962	44,432,035	31,695	66.3	334,472
Stimulants/Anti-obesity/Anorexia	0.8	0.1	0.0	0.7	19	8	1	10	25	91	4,258	105,841	533	1.1	5,451
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	82	82	0	0	113	114	39,360	4,446,710	5,205	10.9	54,348
Analgesics and Anesthetics	0.9	0.4	0.0	0.5	38	31	2	5	42	75	193,506	8,131,924	20,670	43.2	214,712
Neuromuscular Agents	1.3	0.5	0.2	0.7	64	41	6	17	48	88	213,463	10,300,820	14,827	31.0	160,451
Nutritional Products	0.8	0.0	0.3	0.5	14	0	6	7	18	22	129,705	2,343,967	16,546	34.6	170,679
Hematological Agents	1.1	0.2	0.3	0.5	46	35	4	7	42	144	164,971	6,857,386	14,580	30.5	150,244
Topical Products	0.6	0.2	0.1	0.3	18	11	3	4	30	44	184,411	5,442,837	27,819	58.2	299,531
Miscellaneous Products	0.3	0.0	0.0	0.2	8	3	1	4	28	79	10,400	292,214	3,604	7.5	37,258
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	0	25	0	10,777	265,693	3,513	7.3	37,973
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.	3,026,840	137,134,683	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

- 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 17,684 beneficiaries who were in nursing facilities for part of their enrollment and their 164,292 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 Illinois, 0.7 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Table D9

Dual Eligible Beneficiaries

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

TABLE 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, ILLINOIS, 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	\$29,300,227	25,382	53.1 %	278,427	0.9	\$119	\$105
ANTIDEPRESSANTS	11,831,331	22,713	47.5	242,400	0.8	60	49
ULCER DRUGS	11,684,325	21,709	45.4	229,800	0.7	73	51
ANTICONVULSANT	7,496,962	12,940	27.1	142,170	1.0	53	53
DERMATOLOGICAL	5,779,975	75,253	157.4	816,754	0.3	22	7
ANTIHYPERTENSIVE	4,812,544	17,855	37.3	186,858	0.8	32	26
ANTIDIABETIC	4,697,414	14,903	31.2	157,177	0.8	37	30
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	4,486,551	5,379	11.2	56,488	0.7	112	79
ANALGESICS - ANTI-INFLAMMATORY	4,304,948	12,579	26.3	137,363	0.6	55	31
CALCIUM BLOCKERS	3,702,546	10,025	21.0	105,758	0.8	41	35
Total	88,096,823	218,738		2,353,195	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

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 17,684 beneficiaries who were in nursing facilities for part of their enrollment and their 164,292 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, ILLINOIS, 2001

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS							
	No. of Rx	Rx \$	Users as %			Mean No. of Rx	Mean No. of Bene Mos among Users	Users as %	No. of Users	Residents	NF	No. of Bene Mos among Users	Users as %	No. of Users	Residents	NF	No. of Bene Mos among Users	Mean No. of Rx
			25,382	53.1 %	278,427													
All	1,488,370	\$88,096,823	25,382	53.1 %	278,427	0.9	\$105	22,713	47.5 %	242,400	0.8	\$49						
Female	1,004,779	55,884,077	15,616	46.7	171,197	0.8	90	16,163	48.4	173,302	0.8	49						
Disabled	256,459	17,737,984	5,364	90.9	61,945	1.1	132	3,256	55.2	37,027	0.8	53						
64 or younger	114,290	9,079,300	2,620	112.9	30,104	1.2	162	1,552	66.9	17,469	0.9	58						
65-74	77,251	4,907,564	1,513	86.9	17,621	1.0	113	963	55.3	11,083	0.8	52						
75-84	50,742	3,034,691	989	73.4	11,468	0.9	98	580	43.0	6,655	0.8	49						
85 and older	14,176	716,429	242	49.4	2,752	0.8	73	161	32.9	1,820	0.7	40						
Other Eligibles	748,320	38,146,093	10,252	37.3	109,252	0.7	66	12,907	46.9	136,275	0.8	47						
64 or younger	106	5,598	3	100.0	25	0.6	68	4	133.3	48	0.6	44						
65-74	67,834	3,686,691	1,035	55.1	10,872	0.8	82	1,187	63.1	12,310	0.8	49						
75-84	282,020	15,022,567	4,088	45.2	44,021	0.7	72	4,871	53.8	51,945	0.8	48						
85 and older	398,360	19,431,237	5,126	30.9	54,334	0.6	57	6,845	41.3	71,972	0.8	46						
Male	483,591	32,212,746	9,766	67.8	107,230	1.0	130	6,550	45.5	69,098	0.8	50						
Disabled	248,604	19,919,986	5,955	105.1	68,434	1.2	162	2,757	48.7	30,909	0.8	53						
64 or younger	175,286	15,316,208	4,534	122.9	52,061	1.3	176	1,939	52.6	21,683	0.8	53						
65-74	55,833	3,539,998	1,041	73.8	12,094	1.0	122	626	44.4	7,117	0.8	53						
75-84	14,682	906,616	321	69.6	3,649	0.9	108	169	36.7	1,845	0.8	47						
85 and older	2,803	157,164	59	55.7	630	0.7	81	23	21.7	264	0.9	48						
Other Eligibles	234,987	12,292,760	3,811	43.6	38,796	0.7	73	3,793	43.4	38,189	0.8	47						
64 or younger	23	1,236	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
65-74	48,165	2,703,246	834	52.2	8,625	0.8	87	830	51.9	8,478	0.8	47						
75-84	115,206	6,076,599	1,880	46.1	19,211	0.7	75	1,849	45.4	18,603	0.8	47						
85 and older	71,593	3,511,679	1,097	35.8	10,960	0.6	58	1,114	36.4	11,108	0.8	46						
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 Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

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 17,684 beneficiaries who were in nursing facilities for part of their enrollment and their 164,292 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, ILLINOIS, 2001

Beneficiary Characteristics	ULCER DRUGS						ANTICONVULSANT						DERMATOLOGICAL					
	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	21,709	45.4 %	0.7	12,940	27.1 %	1.0	75,253	157.4 %	0.3	816,754	157.4 %	0.3	\$7					
Female	15,354	45.9	0.7	7,325	21.9	1.0	52,953	158.5	0.3	577,263	158.5	0.3	7					
Disabled	2,902	49.2	0.7	3,097	52.5	1.0	9,662	163.7	0.3	109,721	163.7	0.3	7					
64 or younger	1,098	47.3	0.7	1,710	73.7	1.0	3,669	158.1	0.3	41,829	158.1	0.3	8					
65-74	862	49.5	0.7	855	49.1	1.0	2,904	166.7	0.3	33,336	166.7	0.3	7					
75-84	701	52.0	0.7	451	33.5	1.0	2,191	162.5	0.3	24,784	162.5	0.3	7					
85 and older	241	49.2	0.7	81	16.5	1.0	898	183.3	0.4	9,772	183.3	0.4	8					
Other Eligibles	12,452	45.3	0.7	4,228	15.4	0.9	43,291	157.3	0.3	467,542	157.3	0.3	7					
64 or younger	2	66.7	1.0	0	0.0	0.0	1	33.3	0.1	12	33.3	0.1	0					
65-74	931	49.5	0.7	644	34.3	1.0	3,060	162.8	0.3	33,028	162.8	0.3	8					
75-84	4,297	47.5	0.7	1,885	20.8	0.9	13,998	154.6	0.3	152,642	154.6	0.3	7					
85 and older	7,222	43.6	0.7	1,699	10.2	0.9	26,232	158.2	0.3	281,860	158.2	0.3	7					
Male	6,355	44.1	0.7	5,615	39.0	1.0	22,300	154.8	0.3	239,491	154.8	0.3	7					
Disabled	2,386	42.1	0.7	3,788	66.9	1.1	7,962	140.5	0.3	90,670	140.5	0.3	7					
64 or younger	1,480	40.1	0.7	2,907	78.8	1.1	4,774	129.4	0.3	54,393	129.4	0.3	7					
65-74	645	45.7	0.7	697	49.4	1.0	2,254	159.9	0.3	25,892	159.9	0.3	8					
75-84	215	46.6	0.7	157	34.1	1.0	744	161.4	0.3	8,352	161.4	0.3	7					
85 and older	46	43.4	0.7	27	25.5	1.0	190	179.2	0.3	2,033	179.2	0.3	9					
Other Eligibles	3,969	45.4	0.7	1,827	20.9	0.9	14,338	164.0	0.3	148,821	164.0	0.3	7					
64 or younger	0	0.0	0.0	0	0.0	0.0	1	100.0	0.2	12	100.0	0.2	6					
65-74	713	44.6	0.7	484	30.3	1.0	2,458	153.7	0.3	25,559	153.7	0.3	8					
75-84	1,859	45.6	0.7	916	22.5	0.9	6,597	161.8	0.3	68,523	161.8	0.3	7					
85 and older	1,397	45.6	0.7	427	13.9	0.9	5,282	172.4	0.3	54,727	172.4	0.3	7					
Unknown	0	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 Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

- 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 17,684 beneficiaries who were in nursing facilities for part of their enrollment and their 164,292 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 D10B

Dual Eligible Beneficiaries

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, ILLINOIS, 2001

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTI-DIABETIC					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Users as %					Users as %					Users as %				
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Residents	NF	No. of Users	No. of Bene Mos among Users	Mean No. of Rx
All	17,855	37.3 %	186,858	0.8	\$26	14,903	31.2 %	157,177	0.8	\$30	5,379	11.2 %	56,488	0.7	\$79
Female	12,341	36.9	129,416	0.8	26	10,412	31.2	110,384	0.8	30	3,774	11.3	39,943	0.7	81
Disabled	2,054	34.8	22,953	0.8	27	2,415	40.9	26,949	0.9	35	422	7.2	4,876	0.6	70
64 or younger	605	26.1	6,796	0.8	26	813	35.0	9,115	0.9	40	122	5.3	1,389	0.5	56
65-74	699	40.1	7,844	0.8	27	910	52.2	10,375	0.9	35	140	8.0	1,649	0.7	72
75-84	566	42.0	6,318	0.8	27	565	41.9	6,173	0.8	30	110	8.2	1,277	0.7	78
85 and older	184	37.6	1,995	0.8	26	127	25.9	1,286	0.6	22	50	10.2	561	0.7	81
Other Eligibles	10,287	37.4	106,463	0.8	26	7,997	29.1	83,435	0.8	28	3,352	12.2	35,067	0.7	82
64 or younger	1	33.3	12	0.8	27	2	66.7	24	0.9	36	0	0.0	0	0.0	0
65-74	896	47.7	9,127	0.8	26	992	52.8	10,325	0.8	34	256	13.6	2,646	0.7	76
75-84	3,679	40.6	38,361	0.8	27	3,523	38.9	36,818	0.8	30	1,395	15.4	14,598	0.7	84
85 and older	5,711	34.4	58,963	0.8	25	3,480	21.0	36,268	0.8	25	1,701	10.3	17,823	0.7	82
Male	5,514	38.3	57,442	0.8	26	4,491	31.2	46,793	0.8	30	1,605	11.1	16,545	0.7	76
Disabled	1,829	32.3	20,514	0.8	26	1,627	28.7	18,205	0.8	35	383	6.8	4,359	0.6	65
64 or younger	1,047	28.4	11,681	0.8	26	948	25.7	10,596	0.9	36	189	5.1	2,093	0.5	56
65-74	589	41.8	6,685	0.8	25	528	37.4	6,001	0.8	34	135	9.6	1,581	0.7	72
75-84	159	34.5	1,763	0.8	28	127	27.5	1,366	0.7	28	49	10.6	576	0.7	76
85 and older	34	32.1	385	0.8	29	24	22.6	242	0.7	20	10	9.4	109	0.7	77
Other Eligibles	3,685	42.2	36,928	0.8	25	2,864	32.8	28,588	0.8	27	1,222	14.0	12,186	0.7	80
64 or younger	0	0.0	0	0.0	0	1	100.0	12	0.3	5	1	100.0	12	0.7	81
65-74	695	43.5	6,871	0.8	25	668	41.8	6,679	0.8	30	203	12.7	2,054	0.7	75
75-84	1,793	44.0	18,071	0.8	26	1,481	36.3	14,912	0.8	27	621	15.2	6,192	0.7	81
85 and older	1,197	39.1	11,986	0.8	25	714	23.3	6,985	0.8	24	397	13.0	3,928	0.7	82
Unknown	0	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 Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

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 17,684 beneficiaries who were in nursing facilities for part of their enrollment and their 164,292 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, ILLINOIS, 2001

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY						CALCIUM BLOCKERS					
	Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Users	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean Rx \$
All	12,579	26.3 %	0.6	137,363	0.6	\$31	10,025	21.0 %	0.8	\$35	47,822	487,757
Female	9,460	28.3	0.6	103,465	0.6	34	7,462	22.3	0.9	35	33,415	342,956
Disabled	1,866	31.6	0.5	21,518	0.5	27	1,187	20.1	0.8	37	5,901	65,656
64 or younger	757	32.6	0.5	8,690	0.5	16	338	14.6	0.8	39	2,321	25,726
65-74	600	34.4	0.6	6,990	0.6	30	374	21.5	0.9	38	1,742	19,634
75-84	400	29.7	0.6	4,609	0.6	43	353	26.2	0.8	37	1,348	15,011
85 and older	109	22.2	0.6	1,229	0.6	32	122	24.9	0.8	32	490	5,285
Other Eligibles	7,594	27.6	0.6	81,947	0.6	35	6,275	22.8	0.9	34	27,514	277,300
64 or younger	2	66.7	0.6	24	0.6	11	1	33.3	1.0	65	3	25
65-74	581	30.9	0.6	6,231	0.6	31	462	24.6	0.9	37	1,880	18,491
75-84	2,733	30.2	0.6	29,725	0.6	35	2,178	24.1	0.9	35	9,052	91,989
85 and older	4,278	25.8	0.6	45,967	0.6	36	3,634	21.9	0.9	34	16,579	166,795
Male	3,119	21.6	0.5	33,898	0.5	25	2,563	17.8	0.8	36	14,407	144,801
Disabled	1,245	22.0	0.5	14,278	0.5	16	927	16.4	0.8	38	5,666	62,561
64 or younger	832	22.6	0.4	9,529	0.4	11	565	15.3	0.8	39	3,689	40,632
65-74	311	22.1	0.5	3,592	0.5	25	267	18.9	0.8	36	1,410	15,796
75-84	76	16.5	0.6	858	0.6	29	75	16.3	0.8	34	461	5,030
85 and older	26	24.5	0.6	299	0.6	26	20	18.9	0.8	34	106	1,103
Other Eligibles	1,874	21.4	0.5	19,620	0.5	31	1,636	18.7	0.8	34	8,741	82,240
64 or younger	2	200.0	0.4	24	0.4	5	0	0.0	0.0	0	1	12
65-74	350	21.9	0.5	3,710	0.5	29	327	20.5	0.8	36	1,599	14,916
75-84	891	21.9	0.5	9,346	0.5	31	828	20.3	0.8	35	4,077	38,694
85 and older	631	20.6	0.5	6,540	0.5	32	481	15.7	0.8	31	3,064	28,618
Unknown	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 Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

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 17,684 beneficiaries who were in nursing facilities for part of their enrollment and their 164,292 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}
 ILLINOIS, 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 Excl Rx per Bene		Total No. Part D Excl Rx	Total Part D Excl Rx \$		Part D Excl Rx as % of All Rx \$	Total No. of Benes
		64.6 %	10.0	1,999,312	\$110		\$22,009,416	\$11		
All	128,780	64.6 %	10.0	1,999,312	\$110	\$22,009,416	\$11	5.3 %	199,385	
Age										
5 and younger	5	83.3	21.7	130	438	2,626	20	8.4	6	
6-14	17	58.6	11.9	345	418	12,123	35	6.0	29	
15-20	152	43.7	4.5	1,561	125	43,360	28	4.8	348	
21-44	16,537	47.7	5.1	176,431	76	2,638,965	15	3.4	34,684	
45-64	24,914	60.9	8.6	351,142	113	4,606,943	13	4.5	40,898	
65-74	27,684	61.7	9.2	412,463	95	4,243,781	10	4.9	44,837	
75-84	31,070	70.4	12.2	536,324	120	5,313,570	10	6.1	44,142	
85 and older	28,401	82.5	15.1	520,916	149	5,148,048	10	8.5	34,441	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Basis of Eligibility^c										
Aged	65,033	70.0	11.9	1,104,195	118	10,990,053	10	6.8	92,920	
Disabled	62,334	60.4	8.6	884,828	105	10,835,837	12	4.4	103,150	
Adults	1,368	42.6	3.0	9,630	52	167,604	17	3.4	3,215	
Children	45	45.9	6.7	659	162	15,922	24	4.1	98	
Unknown	0	0.0	0.0	0	0	0	0	0.0	2	
Gender										
Female	87,779	68.4	11.0	1,411,314	118	15,133,622	11	5.7	128,392	
Male	41,001	57.8	8.3	587,998	97	6,875,794	12	4.6	70,993	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Race										
White	84,958	68.7	11.8	1,462,471	132	16,316,406	11	5.6	123,737	
African American	30,266	58.2	7.3	377,715	80	4,167,382	11	4.8	52,040	
Other/unknown	13,556	57.4	6.7	159,126	65	1,525,628	10	3.8	23,608	
Use of Nursing Facilities^d										
Entire year	43,998	92.0	19.6	937,534	205	9,790,427	10	7.1	47,822	
Part year	13,953	78.9	12.7	224,115	148	2,623,045	12	6.6	17,684	
None	70,829	52.9	6.3	837,663	72	9,595,944	11	4.0	133,879	
Maintenance Assistance Status										
Cash	24,670	70.0	11.3	396,786	104	3,677,821	9	4.2	35,221	
Medically needy	82,736	63.0	9.9	1,295,417	112	14,660,968	11	5.7	131,392	
Poverty related	1,229	34.5	2.8	9,990	40	141,518	14	4.2	3,561	
Other/unknown	20,145	69.0	10.2	297,119	121	3,529,109	12	5.0	29,211	

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

- 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}
 ILLINOIS, 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
	1.0	\$11	\$11	\$0	\$3	1,918,326
Age						
5 and younger	2.0	40	20	0	0	66
6-14	1.1	39	35	0	0	307
15-20	0.4	12	28	0	2	3,510
21-44	0.5	8	15	0	3	342,126
45-64	0.9	12	13	0	4	380,830
65-74	0.9	10	10	0	2	436,599
75-84	1.2	12	10	0	2	430,341
85 and older	1.6	16	10	0	2	324,547
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	1.3	13	10	0	2	865,046
Disabled	0.9	11	12	0	3	1,024,102
Adults	0.3	6	17	0	2	28,210
Children	0.7	16	24	0	1	965
Unknown	0.0	0	0	0	0	3
Gender						
Female	1.1	12	11	0	3	1,248,584
Male	0.9	10	12	0	3	669,742
Unknown	0.0	0	0	0	0	0
Race						
White	1.3	14	11	0	3	1,169,806
African American	0.7	8	11	0	1	505,101
Other/unknown	0.7	6	10	0	1	243,419
Use of Nursing Facilities^d						
Entire year	1.9	20	10	0	3	487,757
Part year	1.4	16	12	0	3	164,292
None	0.7	8	11	0	2	1,266,277
Maintenance Assistance Status						
Cash	1.0	9	9	0	2	404,441
Medically needy	1.1	12	11	0	3	1,207,032
Poverty related	0.3	5	14	0	2	30,318
Other/unknown	1.1	13	12	0	3	276,535

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

- 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}
 ILLINOIS, 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	209,408	\$105	\$22,009,416	100.0 %	1,999,312	\$11	100.0 %
Anorexia or weight loss/gain	310	148	45,884	0.2	666	69	0.0
Fertility drugs	162	27	4,300	0.0	175	25	0.0
Drugs for cosmetic purposes	377	749	282,325	1.3	1,907	148	0.1
Cough and cold medications	10,984	55	601,575	2.7	28,503	21	1.4
Vitamins and minerals	40,227	119	4,779,264	21.7	269,269	18	13.5
Non-prescription drugs	107,664	96	10,301,827	46.8	1,375,703	7	68.8
Barbiturates	2,540	68	172,340	0.8	26,066	7	1.3
Benzodiazepines	39,834	124	4,936,225	22.4	270,543	18	13.5
Other Part D Excl Rx Drugs	7,310	121	885,676	4.0	26,480	33	1.3

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

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}
 ILLINOIS, 2001

Total Number of Dual Eligible Beneficiaries, Age 85+ 34,441
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$60,713,763
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,763

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	3,222	9.4 %	0	0.0 %
1-500	6,761	19.6	1,583,390	2.6
501-1,000	5,004	14.5	3,694,700	6.1
1,001-1,500	4,157	12.1	5,173,348	8.5
1,501-2,000	3,408	9.9	5,944,716	9.8
2,001-2,500	2,796	8.1	6,281,975	10.3
2,501-3,000	2,217	6.4	6,071,463	10.0
3,001-3,500	1,753	5.1	5,674,618	9.3
3,501-4,000	1,324	3.8	4,948,020	8.1
4,001-4,500	1,020	3.0	4,324,943	7.1
4,501-5,000	725	2.1	3,439,033	5.7
5,001-5,500	552	1.6	2,893,921	4.8
5,501-6,000	418	1.2	2,398,867	4.0
6,001-6,500	312	0.9	1,944,484	3.2
6,501-7,000	211	0.6	1,417,588	2.3
7,001-7,500	150	0.4	1,083,909	1.8
7,501-8,000	117	0.3	903,825	1.5
8,001-8,500	69	0.2	567,356	0.9
8,501-9,000	64	0.2	556,734	0.9
9,001-9,500	36	0.1	333,729	0.5
9,501-10,000	23	0.1	224,207	0.4
10,001+	102	0.3	1,252,937	2.1

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

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, ILLINOIS, 2001

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	199,468	92,964	103,173	3,229	100	1,920,235	865,948	1,024,693	28,603	988	3
Age											
5 and younger	6	0	2	0	4	66	0	24	0	42	0
6-14	29	0	10	0	19	307	0	120	0	187	0
15-20	349	0	283	12	54	3,524	0	2,824	115	585	0
21-44	34,693	0	32,485	2,188	20	342,437	0	322,447	19,851	139	0
45-64	40,907	10	39,998	895	3	381,028	41	373,449	7,501	35	2
65-74	44,863	22,679	22,056	128	0	437,042	202,212	233,759	1,071	0	0
75-84	44,167	37,302	6,859	6	0	431,053	355,023	75,965	65	0	0
85 and older	34,454	32,973	1,480	0	0	324,778	308,672	16,105	0	0	1
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	128,456	68,255	58,051	2,104	44	1,250,123	643,990	586,087	19,560	483	3
Male	71,012	24,709	45,122	1,125	56	670,112	221,958	438,606	9,043	505	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	123,741	62,076	60,076	1,545	42	1,170,022	566,755	589,330	13,519	415	3
African American	52,104	16,862	33,992	1,211	39	506,478	153,301	341,683	11,115	379	0
Other/unknown	23,623	14,026	9,105	473	19	243,735	145,892	93,680	3,969	194	0
Use of Nursing Facilities^c											
Entire year	47,822	36,253	11,567	2	0	487,830	359,585	128,232	13	0	0
Part year	17,684	10,907	6,760	16	1	164,337	91,738	72,429	158	12	0
None	133,962	45,804	84,846	3,211	99	1,268,068	414,625	824,032	28,432	976	3
Maintenance Assistance Status											
Cash	35,236	16,575	18,549	112	0	404,779	190,686	213,178	915	0	0
Medically needy	131,445	63,169	65,520	2,751	5	1,208,234	556,990	626,849	24,355	40	0
Poverty related	3,563	1,343	2,054	124	41	30,370	11,883	17,098	926	461	2
Other/unknown	29,224	11,877	17,050	242	54	276,852	106,389	167,568	2,407	487	1
Dual Status^d											
Full dual, all year	190,647	89,506	98,263	2,776	100	1,844,096	835,828	983,598	23,679	988	3
Full dual, part year	8,821	3,458	4,910	453	0	76,139	30,120	41,095	4,924	0	0
Managed Care Status											
FFS all year	199,141	92,812	103,064	3,165	98	1,916,994	864,530	1,023,595	27,901	965	3
FFS part year, with Rx claims	162	62	63	37	0	1,729	628	693	408	0	0
FFS part year, no Rx claims	82	46	23	13	0	765	421	208	136	0	0
MC all year, with Rx claims	4	3	1	0	0	20	13	7	0	0	0
MC all year, no Rx claims	79	41	22	14	2	727	356	190	158	23	0

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

- 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, ILLINOIS, 2001

Beneficiary Characteristics	Benes and					
	Bene Mos in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G 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	199,468	1,920,235	199,385	1,918,306	0	1,929
FFS all year	199,141	1,916,994	199,141	1,916,994	0	0
FFS part year, with Rx claims	162	1,729	162	955	0	774
FFS part year, with no Rx claims	82	765	82	357	0	408
MC all year, with Rx claims	4	20	0	0	0	20
MC all year, with no Rx claims	79	727	0	0	0	727

Source: Data for this table are from the MAX 2001 file for Illinois, released by CMS in 07/2005. This table was produced on 09/19/2006.

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.