

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

## 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<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 2001

Beneficiary Characteristics	No. of Benes							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown		
<b>All</b>	<b>34,945</b>	<b>20,766</b>	<b>14,035</b>	<b>128</b>	<b>16</b>	<b>0</b>	<b>361,023</b>	<b>208,316</b>	<b>151,482</b>	<b>1,064</b>	<b>161</b>	<b>0</b>		
<b>Age</b>														
5 and younger	2	0	1	0	1	0	24	0	12	0	12	0		
6-14	6	0	5	0	1	0	72	0	60	0	12	0		
15-20	73	0	65	0	8	0	743	0	673	0	70	0		
21-44	6,417	0	6,322	89	6	0	69,513	0	68,687	759	67	0		
45-64	7,460	1	7,426	33	0	0	80,131	4	79,862	265	0	0		
65-74	6,473	6,254	215	4	0	0	67,392	65,190	2,186	16	0	0		
75-84	7,206	7,204	0	2	0	0	72,790	72,766	0	24	0	0		
85 and older	7,308	7,307	1	0	0	0	70,358	70,356	2	0	0	0		
Unknown	0	0	0	0	0	0	0	0	0	0	0	0		
<b>Gender</b>														
Female	22,896	15,497	7,316	79	4	0	237,646	157,593	79,312	696	45	0		
Male	12,048	5,269	6,718	49	12	0	123,376	50,723	72,169	368	116	0		
Unknown	1	0	1	0	0	1	0	0	1	0	0	0		
<b>Race</b>														
White	30,434	18,634	11,686	100	14	0	313,886	185,982	126,969	798	137	0		
African American	2,539	1,117	1,411	11	0	0	26,777	11,843	14,822	112	0	0		
Other/unknown	1,972	1,015	938	17	2	0	20,360	10,491	9,691	154	24	0		
<b>Use of Nursing Facilities<sup>c</sup></b>														
Entire year	2,416	2,251	165	0	0	0	17,634	16,192	1,442	0	0	0		
Part year	8,442	7,628	812	2	0	0	87,710	78,641	9,045	24	0	0		
None	24,087	10,887	13,058	126	16	0	255,679	113,483	140,995	1,040	161	0		
<b>Maintenance Assistance Status</b>														
Cash	9,284	3,418	5,827	39	0	0	102,038	37,733	63,965	340	0	0		
Medically needy	12,042	10,314	1,647	73	8	0	113,926	96,161	17,131	558	76	0		
Poverty-related	13,182	7,009	6,167	0	6	0	140,056	74,147	65,848	0	61	0		
Other/unknown	437	25	394	16	2	0	5,003	275	4,538	166	24	0		
<b>Dual Medicare Status<sup>d</sup></b>														
Full dual, all year	34,348	20,424	13,780	128	16	0	355,639	205,208	149,206	1,064	161	0		
Full dual, part year	597	342	255	0	0	0	5,384	3,108	2,276	0	0	0		
<b>Managed Care Status</b>														
FFS all year	34,581	20,734	13,716	116	15	0	358,804	208,109	149,548	987	160	0		
FFS part year, with Rx claims	334	30	293	11	0	0	2,075	195	1,813	67	0	0		
FFS part year, no Rx claims	29	2	25	1	1	0	140	12	117	10	1	0		

Source: Data for this table are from the MAX 2001 file for Nebraska, 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<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 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	91.2 %	52.6	\$2,646	\$50	\$14,447	18.3 %	34,945
<b>Age</b>							
5 and younger	100.0	25.5	1,857	73	2,745	67.6	2
6-14	100.0	38.8	4,496	116	12,680	35.5	6
15-20	75.3	21.7	1,654	76	15,318	10.8	73
21-44	88.6	39.8	2,959	74	13,968	21.2	6,417
45-64	90.0	58.0	3,407	59	14,780	23.1	7,460
65-74	88.8	53.5	2,488	47	10,346	24.0	6,473
75-84	92.4	56.4	2,368	42	13,491	17.5	7,206
85 and older	95.8	54.0	2,016	37	19,099	10.6	7,308
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>							
Aged	92.5	54.7	2,280	42	14,500	15.7	20,766
Disabled	89.4	49.6	3,194	64	14,458	22.1	14,035
Adults	82.8	34.6	2,020	59	5,457	37.0	128
Children	75.0	19.8	1,565	79	8,028	19.5	16
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>							
Female	93.8	57.5	2,742	48	14,350	19.1	22,896
Male	86.2	43.3	2,463	57	14,634	16.8	12,048
Unknown	0.0	0.0	0	0	0	0.0	1
<b>Race</b>							
White	91.6	53.9	2,712	50	15,207	17.8	30,434
African American	90.2	46.1	2,269	49	9,680	23.4	2,539
Other/unknown	86.8	39.7	2,116	53	8,855	23.9	1,972
<b>Use of Nursing Facilities<sup>d</sup></b>							
Entire year	93.6	50.7	2,061	41	23,402	8.8	2,416
Part year	98.4	71.0	3,007	42	27,481	10.9	8,442
None	88.4	46.3	2,578	56	8,981	28.7	24,087
<b>Maintenance Assistance Status</b>							
Cash	90.7	48.2	2,846	59	10,099	28.2	9,284
Medically needy	92.6	61.6	2,616	43	26,621	9.8	12,042
Poverty related	90.3	47.9	2,538	53	6,570	38.6	13,182
Other/unknown	90.4	36.9	2,479	67	9,000	27.5	437

Source: Data for this table are from the MAX 2001 file for Nebraska, 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<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 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
<b>All</b>	<b>5.1</b>	<b>\$256</b>	<b>18.3 %</b>	<b>8.8 %</b>	<b>13.8 %</b>	<b>9.9 %</b>	<b>28.5 %</b>	<b>28.8 %</b>	<b>10.3 %</b>	<b>\$1,398</b>	<b>34,945</b>	<b>361,023</b>
<b>Age</b>												
5 and younger	2.1	155	67.6	0.0	0.0	100.0	0.0	0.0	0.0	229	2	24
6-14	3.2	375	35.5	0.0	0.0	33.3	50.0	16.7	0.0	1,057	6	72
15-20	2.1	163	10.8	24.7	32.9	8.2	21.9	11.0	1.4	1,505	73	743
21-44	3.7	273	21.2	11.4	25.3	12.1	26.9	18.3	6.0	1,290	6,417	69,513
45-64	5.4	317	23.1	10.0	13.0	9.3	26.7	28.6	12.5	1,376	7,460	80,131
65-74	5.1	239	24.0	11.2	13.5	9.9	26.7	28.1	10.6	994	6,473	67,392
75-84	5.6	234	17.5	7.6	10.0	9.6	28.8	32.0	12.1	1,336	7,206	72,790
85 and older	5.6	209	10.6	4.2	8.3	8.9	33.0	35.8	9.9	1,984	7,308	70,358
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>												
Aged	5.5	227	15.7	7.5	10.4	9.4	29.6	32.2	10.9	1,446	20,766	208,316
Disabled	4.6	296	22.1	10.6	18.7	10.6	26.8	23.8	9.4	1,340	14,035	151,482
Adults	4.2	243	37.0	17.2	18.0	10.9	27.3	16.4	10.2	656	128	1,064
Children	2.0	156	19.5	25.0	31.3	18.8	25.0	0.0	0.0	798	16	161
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>												
Female	5.5	264	19.1	6.2	11.4	9.9	29.3	31.7	11.6	1,383	22,896	237,646
Male	4.2	241	16.8	13.8	18.4	9.9	27.0	23.2	7.8	1,429	12,048	123,376
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	1
<b>Race</b>												
White	5.2	263	17.8	8.4	12.8	9.6	28.6	29.8	10.8	1,475	30,434	313,886
African American	4.4	215	23.4	9.8	19.5	10.8	28.7	23.5	7.7	918	2,539	26,777
Other/unknown	3.8	205	23.9	13.2	21.5	13.0	26.7	19.3	6.3	858	1,972	20,360
<b>use of nursing Facilities<sup>d</sup></b>												
Entire year	7.0	282	8.8	6.4	5.4	7.0	26.5	37.1	17.6	3,206	2,416	17,634
Part year	6.8	289	10.9	1.6	5.5	6.6	29.2	40.2	16.9	2,645	8,442	87,710
None	4.4	243	28.7	11.6	17.5	11.4	28.4	23.9	7.2	846	24,087	255,679
<b>Maintenance Assistance Status</b>												
Cash	4.4	259	28.2	9.3	19.3	11.2	28.4	23.5	8.2	919	9,284	102,038
Medically needy	6.5	277	9.8	7.4	5.8	6.6	27.4	37.2	15.7	2,814	12,042	113,926
Poverty related	4.5	239	38.6	9.7	16.7	11.8	29.7	25.1	7.0	618	13,182	140,056
Other/unknown	3.2	217	27.5	9.6	28.6	16.2	23.6	17.4	4.6	786	437	5,003

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Nebraska, 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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 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
<b>All</b>	<b>5.1</b>	<b>\$256</b>	<b>2.3</b>	<b>\$197</b>	<b>0.5</b>	<b>\$19</b>	<b>2.3</b>	<b>\$40</b>
<b>Age</b>								
5 and younger	2.1	155	1.0	139	0.4	9	0.8	6
6-14	3.2	375	1.9	299	0.4	63	0.9	13
15-20	2.1	163	1.2	141	0.1	7	0.8	15
21-44	3.7	273	1.8	215	0.3	23	1.6	35
45-64	5.4	317	2.6	247	0.4	24	2.4	46
65-74	5.1	239	2.4	185	0.4	16	2.3	37
75-84	5.6	234	2.5	178	0.5	17	2.6	40
85 and older	5.6	209	2.3	153	0.6	16	2.7	40
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Basis of Eligibility<sup>d</sup></b>								
Aged	5.5	227	2.4	172	0.5	17	2.5	39
Disabled	4.6	296	2.2	232	0.4	23	2.0	41
Adults	4.2	243	2.1	186	0.3	27	1.7	30
Children	2.0	156	1.0	137	0.1	6	0.8	12
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Gender</b>								
Female	5.5	264	2.6	204	0.5	20	2.5	41
Male	4.2	241	1.9	183	0.4	19	2.0	38
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Race</b>								
White	5.2	263	2.4	202	0.5	20	2.4	41
African American	4.4	215	2.0	167	0.4	17	2.0	31
Other/unknown	3.8	205	1.9	162	0.3	14	1.7	29
<b>Use of Nursing Facilities<sup>e</sup></b>								
Entire year	7.0	282	2.9	209	0.7	20	3.4	54
Part year	6.8	289	2.9	217	0.7	22	3.2	51
None	4.4	243	2.1	189	0.4	19	1.9	35
<b>Maintenance Assistance Status</b>								
Cash	4.4	259	2.1	201	0.4	20	1.9	38
Medically needy	6.5	277	2.8	207	0.7	21	3.1	49
Poverty related	4.5	239	2.2	187	0.4	18	2.0	34
Other/unknown	3.2	217	1.7	170	0.3	21	1.3	26

Source: Data for this table are from the MAX 2001 file for Nebraska, 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 Nebraska, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE D.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 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	0.4	0.2	0.0	0.2	\$20	\$18	\$0	\$2	\$56	\$94	\$64	\$11	79,515	\$4,481,014	20,677	59.2 %	224,534
Biologics	0.2	0.1	0.0	0.0	98	1	59	38	654	15	1,345	2,521	130	85,049	79	0.2	865
Antineoplastic Agents	0.7	0.4	0.1	0.2	131	113	10	8	198	315	123	35	7,347	1,457,553	1,080	3.1	11,138
Endocrine/Metabolic Drugs	1.1	0.6	0.2	0.3	38	31	3	4	36	54	17	12	181,172	6,492,904	16,093	46.1	172,051
Cardiovascular Agents	1.9	0.7	0.2	1.0	54	36	4	14	29	53	25	14	428,962	12,560,550	21,888	62.6	230,697
Respiratory Agents	0.8	0.5	0.0	0.3	39	31	0	8	47	65	29	22	142,199	6,634,384	15,667	44.8	170,579
Gastrointestinal Agents	0.8	0.5	0.0	0.3	63	55	3	5	75	122	71	14	140,253	10,460,202	15,482	44.3	165,802
Genitourinary Agents	0.6	0.4	0.0	0.1	31	29	0	2	56	68	40	14	38,784	2,159,130	6,359	18.2	68,803
CNS Drugs	1.5	0.8	0.1	0.6	113	85	11	17	77	113	108	27	301,212	23,158,135	19,286	55.2	204,610
Stimulants/Anti-obesity/Anorexia	0.7	0.2	0.0	0.4	43	28	3	11	60	115	62	27	4,186	250,800	550	1.6	5,857
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.1	88	87	0	1	120	128	23	22	10,351	1,237,934	1,360	3.9	14,050
Analgesics and Anesthetics	0.9	0.4	0.0	0.5	48	38	3	7	51	92	72	14	195,685	10,016,852	19,581	56.0	209,372
Neuromuscular Agents	1.1	0.4	0.1	0.5	61	46	5	11	58	105	41	21	116,860	6,755,246	10,159	29.1	110,585
Nutritional Products	0.7	0.0	0.2	0.5	15	1	6	8	21	24	31	17	55,671	1,188,189	7,731	22.1	80,444
Hematological Agents	0.8	0.2	0.3	0.4	34	23	4	6	40	146	16	15	57,332	2,316,709	6,580	18.8	68,785
Topical Products	0.4	0.2	0.0	0.2	16	11	1	3	37	55	38	17	73,476	2,694,533	15,174	43.4	166,264
Miscellaneous Products	0.4	0.1	0.1	0.2	63	37	18	7	167	267	257	44	2,995	500,194	741	2.1	7,915
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	3	0	0	0	19	0	0	0	577	10,730	298	0.9	3,284
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	1,836,707	92,460,108	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Nebraska, 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\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Nebraska, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE D.7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 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	\$12,166,824	10,076	28.8 %	108,955	0.8	\$139	\$112
ULCER DRUGS	9,222,919	15,409	44.1	167,018	0.6	88	55
ANTIDEPRESSANTS	8,227,805	17,511	50.1	188,768	0.7	63	44
ANTICONVULSANT	5,177,805	8,501	24.3	93,462	0.8	68	55
ANALGESICS - ANTI-INFLAMMATORY	4,722,021	13,956	39.9	155,181	0.5	65	30
ANALGESICS - Narcotic	4,506,178	21,239	60.8	228,870	0.5	42	20
ANTI-DIABETIC	4,292,208	10,515	30.1	112,862	0.8	51	38
ANTI-ASTHMATIC	3,673,371	13,169	37.7	142,279	0.5	51	26
ANTI-HYPERLIPIDEMIC	3,424,042	6,023	17.2	66,802	0.7	76	51
ANTI-HYPERTENSIVE	3,101,064	13,288	38.0	142,514	0.7	30	22
Total	58,514,237	129,687		1,406,711	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Nebraska, 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 2001

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ULCER DRUGS			
	No. of Rx	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 \$
<b>All</b>	<b>883,015</b>	<b>\$58,514,237</b>	<b>10,076</b>	<b>28.8 %</b>	<b>108,955</b>	<b>0.8</b>	<b>\$112</b>	<b>15,409</b>	<b>44.1 %</b>	<b>167,018</b>	<b>0.6</b>	<b>\$55</b>
<b>Female</b>	610,028	38,708,120	6,125	26.8	65,920	0.7	93	11,004	48.1	119,768	0.6	56
<b>Disabled</b>	220,879	16,829,447	2,846	38.9	32,185	0.8	116	3,655	50.0	41,360	0.6	57
5 and younger	25	3,260	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	17	381	0	0.0	0	0.0	0	3	150.0	36	0.1	1
15-20	200	15,970	10	38.5	112	0.5	71	3	11.5	32	0.3	6
21-44	74,559	6,244,175	1,367	45.1	15,396	0.7	115	1,283	42.3	14,570	0.5	49
45-64	142,281	10,315,057	1,443	35.0	16,368	0.8	118	2,309	56.0	26,082	0.6	61
65-74	3,785	249,918	26	20.2	309	0.7	103	55	42.6	636	0.6	63
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	12	686	0	0.0	0	0.0	0	2	200.0	4	0.8	42
<b>Other Eligibles</b>	389,149	21,878,673	3,279	21.0	33,735	0.7	72	7,349	47.2	78,408	0.7	55
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	0.0	0	0	0.0	0	0.0	0
15-20	16	1,465	0	0.0	0	0.0	0	1	100.0	12	0.6	71
21-44	1,325	84,538	26	44.8	246	0.4	42	23	39.7	224	0.4	39
45-64	363	21,746	3	15.0	36	0.3	6	7	35.0	50	0.5	59
65-74	117,621	7,168,182	779	18.8	8,433	0.7	86	2,076	50.1	23,207	0.6	57
75-84	139,624	7,854,720	1,091	20.6	11,298	0.7	77	2,553	48.3	27,601	0.7	55
85 and older	130,200	6,748,022	1,380	22.7	13,722	0.6	59	2,689	44.3	27,314	0.7	53
<b>Male</b>	272,987	19,806,117	3,951	32.8	43,035	0.9	140	4,405	36.6	47,250	0.6	55
<b>Disabled</b>	156,387	13,429,631	2,846	42.4	32,127	1.0	161	2,228	33.2	25,187	0.6	56
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	27	2,429	0	0.0	0	0.0	0	2	66.7	24	0.6	50
15-20	413	33,353	5	12.8	60	0.8	103	6	15.4	69	0.6	23
21-44	66,773	6,434,445	1,579	48.0	17,877	1.0	161	946	28.8	10,769	0.6	54
45-64	87,357	6,854,985	1,247	37.8	14,026	1.0	161	1,252	37.9	14,082	0.6	58
65-74	1,817	104,419	15	17.4	164	0.8	109	22	25.6	243	0.8	82
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	116,600	6,376,486	1,105	20.7	10,908	0.7	78	2,177	40.8	22,063	0.7	53
5 and younger	2	12	0	0.0	0	0.0	0	1	100.0	12	0.1	1
6-14	2	11	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	45	5,319	2	28.6	24	0.6	43	1	14.3	12	0.3	39
21-44	400	30,012	7	18.9	48	0.6	58	4	10.8	38	0.7	95
45-64	236	21,130	1	7.1	6	0.2	2	11	78.6	86	0.5	63
65-74	48,420	2,773,461	396	18.7	4,151	0.8	91	771	36.4	8,212	0.6	54
75-84	42,946	2,294,783	411	21.5	3,968	0.7	75	824	43.0	8,250	0.7	54
85 and older	24,549	1,251,758	288	23.3	2,711	0.6	64	565	45.7	5,453	0.7	48
<b>Unknown</b>	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 Nebraska, 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 2001

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTICONSULSANT					ANALGESICS - ANTI-INFLAMMATORY				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean Rx \$
<b>All</b>	17,511	50.1 %	188,768	0.7	\$44	8,501	24.3 %	93,462	0.8	\$55	13,956	39.9 %	155,181	0.5	\$30
<b>Female</b>	12,554	54.8	135,743	0.7	43	5,178	22.6	57,072	0.8	52	10,189	44.5	113,599	0.5	33
<b>Disabled</b>	5,388	73.6	60,596	0.6	47	2,973	40.6	33,599	0.8	64	3,932	53.7	44,913	0.4	30
5 and younger	0	0.0	0	0.0	0	2	200.0	24	1.0	132	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	9	34.6	108	0.5	39	5	19.2	60	0.3	21	8	30.8	88	0.1	1
21-44	2,302	75.9	25,977	0.6	47	1,366	45.0	15,476	0.8	70	1,490	49.1	16,993	0.3	22
45-64	3,020	73.2	33,859	0.7	48	1,564	37.9	17,654	0.8	58	2,375	57.6	27,190	0.5	35
65-74	57	44.2	652	0.8	48	36	27.9	385	0.8	55	58	45.0	640	0.5	34
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	2	1.0	57
<b>Other Eligibles</b>	7,166	46.0	75,147	0.7	39	2,205	14.2	23,473	0.8	36	6,257	40.2	68,686	0.5	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	100.0	12	0.6	45	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	53	91.4	560	0.5	38	24	41.4	212	0.7	41	28	48.3	305	0.3	23
45-64	14	70.0	122	0.6	45	6	30.0	68	0.5	38	6	30.0	54	0.3	20
65-74	1,872	45.2	20,689	0.7	38	739	17.9	8,190	0.8	41	1,883	45.5	21,362	0.5	33
75-84	2,444	46.2	25,614	0.7	39	827	15.6	8,811	0.8	36	2,209	41.8	24,377	0.5	34
85 and older	2,782	45.8	28,150	0.8	41	609	10.0	6,192	0.8	28	2,131	35.1	22,588	0.6	35
<b>Male</b>	4,957	41.1	53,025	0.7	46	3,323	27.6	36,390	0.9	61	3,767	31.3	41,582	0.4	25
<b>Disabled</b>	2,940	43.8	33,004	0.7	49	2,514	37.4	28,191	0.9	68	2,178	32.4	24,636	0.4	20
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	2	66.7	24	0.5	45	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	8	20.5	95	0.5	47	13	33.3	149	1.1	112	8	20.5	96	0.3	13
21-44	1,509	45.9	17,021	0.6	50	1,305	39.7	14,726	0.9	73	953	29.0	10,826	0.3	15
45-64	1,397	42.3	15,621	0.7	47	1,176	35.6	13,107	0.8	61	1,192	36.1	13,423	0.4	24
65-74	24	27.9	243	0.6	26	20	23.3	209	0.9	53	25	29.1	291	0.4	19
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	2,017	37.8	20,021	0.7	40	809	15.2	8,199	0.9	36	1,589	29.8	16,946	0.5	32
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	14.3	12	0.9	11	0	0.0	0	0.0	0	1	14.3	12	0.3	269
21-44	16	43.2	162	0.3	19	10	27.0	99	0.5	64	9	24.3	96	0.4	28
45-64	5	35.7	31	0.7	46	2	14.3	18	0.6	36	2	14.3	24	0.1	2
65-74	693	32.7	7,303	0.7	40	377	17.8	4,035	0.8	39	638	30.1	7,074	0.5	31
75-84	764	39.9	7,460	0.8	41	278	14.5	2,793	0.9	32	556	29.0	5,975	0.5	31
85 and older	538	43.5	5,053	0.7	42	142	11.5	1,254	0.8	32	383	31.0	3,765	0.6	35
<b>Unknown</b>	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 Nebraska, 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 2001

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTI-DIABETIC					ANTI-ASTHMATIC				
	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 \$
<b>All</b>	<b>21,239</b>	<b>60.8 %</b>	<b>228,870</b>	<b>0.5</b>	<b>\$20</b>	<b>10,515</b>	<b>30.1 %</b>	<b>112,862</b>	<b>0.8</b>	<b>\$38</b>	<b>13,169</b>	<b>37.7 %</b>	<b>142,279</b>	<b>0.5</b>	<b>\$26</b>
<b>Female</b>	15,418	67.3	166,811	0.5	20	7,412	32.4	79,941	0.8	37	9,060	39.6	98,729	0.5	25
<b>Disabled</b>	5,691	77.8	63,947	0.5	18	2,157	29.5	24,215	0.7	42	3,422	46.8	38,892	0.4	25
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	3	150.0	36	0.1	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	5	19.2	52	0.1	1	0	0.0	0	0.0	0	7	26.9	84	0.5	25
21-44	2,264	74.6	25,461	0.4	17	432	14.2	4,883	0.7	38	1,192	39.3	13,462	0.4	20
45-64	3,342	81.0	37,542	0.5	19	1,661	40.3	18,620	0.7	43	2,173	52.7	24,801	0.5	27
65-74	76	58.9	854	0.5	22	62	48.1	708	0.9	47	50	38.8	545	0.6	35
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	1	100.0	2	0.5	5	2	200.0	4	1.0	62	0	0.0	0	0.0	0
<b>Other Eligibles</b>	9,727	62.4	102,864	0.5	21	5,255	33.7	55,726	0.8	35	5,638	36.2	59,837	0.5	26
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	100.0	12	0.1	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	53	91.4	559	0.6	25	6	10.3	72	0.5	40	32	55.2	336	0.5	22
45-64	15	75.0	141	0.3	6	9	45.0	78	0.8	52	11	55.0	113	0.3	18
65-74	2,708	65.4	30,135	0.5	18	1,927	46.5	21,210	0.7	39	1,992	48.1	21,888	0.5	28
75-84	3,274	61.9	34,953	0.5	21	1,985	37.5	21,005	0.8	35	1,932	36.5	20,572	0.5	26
85 and older	3,676	60.6	37,064	0.5	23	1,328	21.9	13,361	0.8	28	1,671	27.5	16,928	0.5	23
<b>Male</b>	5,821	48.3	62,059	0.4	20	3,103	25.8	32,921	0.8	40	4,109	34.1	43,550	0.5	27
<b>Disabled</b>	3,316	49.4	36,895	0.4	21	1,359	20.2	15,123	0.7	46	1,755	26.1	19,513	0.5	25
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	1	33.3	12	0.1	12
15-20	14	35.9	159	0.2	2	1	2.6	12	0.3	30	8	20.5	85	0.3	20
21-44	1,467	44.6	16,370	0.4	22	315	9.6	3,536	0.7	41	607	18.5	6,779	0.4	21
45-64	1,788	54.1	19,845	0.4	21	1,017	30.8	11,325	0.7	47	1,097	33.2	12,223	0.5	27
65-74	47	54.7	521	0.4	9	26	30.2	250	0.8	38	42	48.8	414	0.5	28
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	2,505	47.0	25,164	0.4	18	1,744	32.7	17,798	0.8	36	2,354	44.2	24,037	0.6	29
5 and younger	1	100.0	12	0.1	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	100.0	12	0.1	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	3	42.9	36	0.1	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	15	40.5	149	0.5	37	1	2.7	8	2.8	71	7	18.9	82	0.5	33
45-64	12	85.7	111	0.6	83	5	35.7	51	0.5	39	9	64.3	59	0.3	14
65-74	952	44.9	10,251	0.4	17	790	37.3	8,434	0.8	38	966	45.6	10,439	0.6	30
75-84	934	48.7	9,237	0.5	18	626	32.7	6,129	0.8	34	874	45.6	8,725	0.6	29
85 and older	587	47.5	5,356	0.5	16	322	26.1	3,176	0.8	34	498	40.3	4,732	0.5	25
<b>Unknown</b>	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 Nebraska, 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 2001

Beneficiary Characteristics	ANTIHYPERLIPEMIC				ANTIHYPERTENSIVE				No. of Bene Mos			
	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 Bene Mos
<b>All</b>	<b>6,023</b>	<b>17.2 %</b>	<b>66,802</b>	<b>0.7</b>	<b>\$51</b>	<b>13,288</b>	<b>38.0 %</b>	<b>142,514</b>	<b>0.7</b>	<b>\$22</b>	<b>34,945</b>	<b>361,023</b>
<b>Female</b>	4,145	18.1	46,299	0.7	52	9,278	40.5	100,046	0.7	23	22,896	237,646
<b>Disabled</b>	1,370	18.7	15,485	0.6	49	1,996	27.3	22,477	0.6	22	7,316	79,312
5 and younger	1	100.0	12	0.1	9	0	0.0	0	0.0	0	1	12
6-14	0	0.0	0	0.0	0	2	100.0	24	0.3	13	2	24
15-20	0	0.0	0	0.0	0	1	3.8	12	0.6	5	26	281
21-44	266	8.8	3,020	0.6	42	422	13.9	4,716	0.6	17	3,033	32,880
45-64	1,076	26.1	12,149	0.7	50	1,512	36.7	17,076	0.7	23	4,124	44,773
65-74	27	20.9	304	0.8	55	58	45.0	647	0.7	24	129	1,340
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	1	100.0	2	1.0	74	1	2
<b>Other Eligibles</b>	2,775	17.8	30,814	0.7	53	7,282	46.7	77,569	0.7	23	15,580	158,334
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	0	0.0	0	0.0	0	0	0
15-20	0	0.0	0	0.0	0	1	100.0	12	0.1	6	1	12
21-44	3	5.2	31	0.6	93	10	17.2	112	0.4	13	58	521
45-64	2	10.0	18	1.0	71	6	30.0	61	0.7	21	20	174
65-74	1,224	29.6	13,687	0.7	56	2,121	51.2	23,472	0.7	24	4,140	43,790
75-84	1,163	22.0	12,939	0.7	52	2,596	49.1	28,132	0.7	23	5,290	54,512
85 and older	383	6.3	4,139	0.7	48	2,548	42.0	25,780	0.8	22	6,071	59,325
<b>Male</b>	1,878	15.6	20,503	0.7	50	4,010	33.3	42,468	0.7	20	12,048	123,376
<b>Disabled</b>	1,023	15.2	11,489	0.6	49	1,617	24.1	17,853	0.7	20	6,718	72,169
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	0	0.0	0	0.0	0	3	36
15-20	1	2.6	12	0.2	13	3	7.7	33	0.5	19	39	392
21-44	274	8.3	3,115	0.6	45	454	13.8	5,054	0.6	18	3,288	35,806
45-64	728	22.0	8,147	0.7	50	1,125	34.1	12,396	0.7	20	3,302	35,089
65-74	20	23.3	215	0.7	53	35	40.7	370	0.7	18	86	846
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Other Eligibles</b>	855	16.0	9,014	0.7	52	2,393	44.9	24,615	0.7	19	5,330	51,207
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	1	100.0	12	0.1	0	1	12
15-20	0	0.0	0	0.0	0	3	42.9	36	0.3	12	7	58
21-44	3	8.1	26	0.9	82	7	18.9	65	0.5	11	37	305
45-64	1	7.1	9	0.7	44	6	42.9	50	0.7	26	14	95
65-74	471	22.2	5,113	0.7	53	963	45.5	10,414	0.7	20	2,118	21,416
75-84	315	16.4	3,213	0.7	51	893	46.6	9,139	0.8	20	1,916	18,278
85 and older	65	5.3	653	0.7	50	520	42.1	4,899	0.8	18	1,236	11,031
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1

Table D7D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Nebraska, 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](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<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 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
<b>All</b>	<b>\$282</b>	<b>7.0</b>	<b>2,416</b>	<b>17,634</b>
<b>Age</b>				
0-64	453	8.1	158	1,396
65-74	367	8.7	330	2,686
75-84	290	7.2	783	5,661
85 and older	218	6.0	1,145	7,891
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	271	6.9	1,670	12,277
Male	308	7.1	746	5,357
Unknown	0	0.0	0	0
<b>Race</b>				
White	282	7	2,275	16,436
African American	277	6.6	94	852
Other/unknown	325	6.7	47	346
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	268	6.8	2,251	16,192
Disabled	450	8.2	165	1,442
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 Nebraska, 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 8,442 beneficiaries who were in nursing facilities for part of their enrollment and their 87,710 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<sup>a, b, c, d, e</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx	Total Rx \$	No. Residents	As % of Dual All-Year NF Residents	No. of Bene Mos						
	Total	Patented	Off-Patent	Total	Patented	Off-Patent											
	Brand-Name	Brand-Name	Generic	Brand-Name	Brand-Name	Generic											
Anti-infective Agents	0.4	0.2	0.0	0.2	\$21	\$18	\$0	\$2	\$52	\$81	\$52	\$13	4,880	\$255,731	1,446	59.9 %	12,318
Biologics	0.1	0.1	0.0	0.0	2	2	0	0	15	15	0	19	10	152	9	0.4	74
Antineoplastic Agents	0.7	0.4	0.1	0.3	99	78	10	11	137	206	121	42	482	66,055	93	3.8	668
Endocrine/Metabolic Drugs	1.2	0.6	0.3	0.4	37	29	4	4	30	50	15	10	11,027	329,131	1,134	46.9	9,009
Cardiovascular Agents	2.1	0.6	0.2	1.3	46	26	4	17	22	42	16	13	28,752	620,289	1,740	72.0	13,461
Respiratory Agents	0.9	0.4	0.0	0.5	36	22	0	14	40	59	23	27	7,663	306,769	995	41.2	8,520
Gastrointestinal Agents	1.1	0.5	0.1	0.6	59	49	3	7	54	101	51	13	10,415	563,058	1,185	49.0	9,572
Genitourinary Agents	0.7	0.5	0.0	0.2	32	30	0	2	50	63	28	14	3,269	162,691	588	24.3	5,029
CNS Drugs	1.6	0.9	0.1	0.6	99	80	7	12	63	86	81	22	19,667	1,245,247	1,577	65.3	12,542
Stimulants/Anti-obesity/Anorexia	1.0	0.1	0.0	0.9	21	7	0	13	21	93	28	15	330	7,058	43	1.8	344
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	87	87	0	0	104	107	0	17	1,424	148,186	217	9.0	1,699
Analgesics and Anesthetics	1.1	0.5	0.1	0.5	43	35	2	6	41	73	41	11	10,727	440,622	1,292	53.5	10,171
Neuromuscular Agents	1.3	0.4	0.2	0.6	60	36	8	17	47	82	35	27	6,391	300,639	602	24.9	4,981
Nutritional Products	0.8	0.0	0.2	0.6	17	1	7	10	20	22	29	17	5,386	108,675	806	33.4	6,403
Hematological Agents	1.1	0.2	0.4	0.5	39	27	4	7	35	137	12	13	5,770	204,087	648	26.8	5,281
Topical Products	0.5	0.2	0.0	0.3	19	13	1	4	35	56	37	17	5,923	209,519	1,263	52.3	11,067
Miscellaneous Products	0.3	0.0	0.0	0.2	8	2	0	5	27	58	59	21	418	11,144	143	5.9	1,459
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	3	0	0	0	19	0	0	0	62	1,162	36	1.5	382
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.	122,596	4,980,215	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Nebraska, 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 8,442 beneficiaries who were in nursing facilities for part of their enrollment and their 87,710 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](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003). In Nebraska, 0.5 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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 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	\$602,674	902	37.3 %	7,694	0.7	\$106	\$78
ANTIDEPRESSANTS	503,941	1,349	55.8	11,087	0.8	56	45
ULCER DRUGS	487,095	1,082	44.8	8,863	0.8	72	55
ANALGESICS - Narcotic	234,002	1,372	56.8	11,051	0.6	36	21
ANTIDIABETIC	217,579	777	32.2	6,503	0.9	39	33
ANTIASTHMATIC	213,189	894	37.0	7,598	0.6	43	28
ANALGESICS - ANTI-INFLAMMATORY	197,458	682	28.2	5,934	0.6	54	33
ANTICONVULSANT	182,144	476	19.7	4,129	1.0	46	44
ANTIHYPERTENSIVE	161,726	925	38.3	7,426	0.9	26	22
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	148,186	218	9.0	1,711	0.8	104	87
<b>Total</b>	<b>2,947,994</b>	<b>8,677</b>		<b>71,996</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2001 file for Nebraska, 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 8,442 beneficiaries who were in nursing facilities for part of their enrollment and their 87,710 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](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<sup>a, b, c, d</sup>  
DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 2001

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	No. of Users	Users as % of All-Year NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All-Year NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All-Year NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>53,897</b>	<b>\$2,947,994</b>	<b>902</b>	<b>37.3 %</b>	<b>7,694</b>	<b>0.7</b>	<b>\$78</b>	<b>1,349</b>	<b>55.8 %</b>	<b>11,087</b>	<b>0.8</b>	<b>\$46</b>					
<b>Female</b>	36,153	1,957,866	604	36.2	4,990	0.7	74	931	55.7	7,661	0.8	46					
<b>Disabled</b>	2,305	151,530	44	65.7	401	0.8	111	40	59.7	329	1.0	74					
64 or younger	2,256	147,024	44	68.8	401	0.8	111	39	60.9	322	1.0	75					
65-74	37	3,820	0	0.0	0	0.0	0	1	50.0	7	0.6	36					
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	12	686	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
<b>Other Eligibles</b>	33,848	1,806,336	560	34.9	4,589	0.7	71	891	55.6	7,332	0.8	44					
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	6,324	345,891	87	50.6	747	0.7	75	130	75.6	1,214	0.8	49					
75-84	12,213	663,142	200	38.2	1,638	0.8	85	339	64.8	2,762	0.8	43					
85 and older	15,311	797,303	273	30.1	2,204	0.6	59	422	46.5	3,356	0.8	43					
<b>Male</b>	17,744	990,128	298	39.9	2,704	0.8	86	418	56.0	3,426	0.8	45					
<b>Disabled</b>	3,346	235,987	64	65.3	716	0.9	114	60	61.2	580	0.9	54					
64 or younger	3,152	227,727	61	65.6	689	0.9	116	56	60.2	550	0.8	54					
65-74	194	8,260	3	60.0	27	1.2	67	4	80.0	30	1.2	61					
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
<b>Other Eligibles</b>	14,398	754,141	234	36.1	1,988	0.8	76	358	55.2	2,846	0.8	43					
64 or younger	8	688	0	0.0	0	0.0	0	1	100.0	4	0.5	43					
65-74	4,974	256,045	89	58.9	836	0.8	82	109	72.2	950	0.7	43					
75-84	5,862	314,286	92	35.4	732	0.9	82	145	55.8	1,107	0.9	44					
85 and older	3,554	183,122	53	22.5	420	0.5	54	103	43.6	785	0.8	43					
<b>Unknown</b>	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 Nebraska, 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 8,442 beneficiaries who were in nursing facilities for part of their enrollment and their 87,710 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](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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 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
<b>All</b>	<b>1,082</b>	<b>44.8 %</b>	<b>0.8</b>	<b>8,863</b>	<b>0.8</b>	<b>\$55</b>	<b>1,372</b>	<b>56.8 %</b>	<b>11,051</b>	<b>0.6</b>	<b>\$21</b>	<b>777</b>	<b>32.2 %</b>	<b>6,503</b>	<b>0.9</b>	<b>\$34</b>		
<b>Female</b>	715	42.8	0.8	5,912	0.8	56	989	58.0	7,800	0.6	20	540	32.3	4,497	0.9	36		
<b>Disabled</b>	41	61.2	0.7	389	0.7	56	43	64.2	378	0.7	27	26	38.8	230	0.9	53		
64 or younger	38	59.4	0.7	378	0.7	57	39	60.9	355	0.6	19	23	35.9	225	0.9	53		
65-74	1	50.0	0.1	7	0.1	5	3	150.0	21	1.3	164	1	50.0	1	1.0	7		
75-84	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
85 and older	2	200.0	0.8	4	0.8	42	1	100.0	2	0.5	5	2	200.0	4	1.0	62		
<b>Other Eligibles</b>	674	42.0	0.8	5,523	0.8	56	926	57.8	7,422	0.6	20	514	32.1	4,267	0.9	35		
64 or younger	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
65-74	105	61.0	0.7	969	0.7	60	132	76.7	1,215	0.7	23	111	64.5	999	0.9	37		
75-84	218	41.7	0.8	1,810	0.8	57	310	59.3	2,516	0.6	16	199	38.0	1,703	0.9	35		
85 and older	351	38.7	0.8	2,744	0.8	53	484	53.3	3,691	0.6	21	204	22.5	1,565	0.9	33		
<b>Male</b>	367	49.2	0.8	2,951	0.8	54	403	54.0	3,251	0.6	24	237	31.8	2,006	0.8	28		
<b>Disabled</b>	50	51.0	0.7	484	0.7	54	49	50.0	459	0.6	20	25	25.5	213	0.6	20		
64 or younger	48	51.6	0.7	471	0.7	52	46	49.5	423	0.6	22	22	23.7	199	0.6	17		
65-74	2	40.0	1.1	13	1.1	120	3	60.0	36	0.4	5	3	60.0	14	1.1	60		
75-84	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
85 and older	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
<b>Other Eligibles</b>	317	48.9	0.8	2,467	0.8	53	354	54.6	2,792	0.6	25	212	32.7	1,793	0.8	29		
64 or younger	1	100.0	1.0	4	1.0	120	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
65-74	78	51.7	0.8	681	0.8	52	87	57.6	729	0.7	27	89	58.9	822	0.8	25		
75-84	145	55.8	0.7	1,103	0.7	55	149	57.3	1,182	0.5	24	79	30.4	588	0.8	31		
85 and older	93	39.4	0.7	679	0.7	52	118	50.0	881	0.5	23	44	18.6	383	0.8	34		
<b>Unknown</b>	0	0.0	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 Nebraska, 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 8,442 beneficiaries who were in nursing facilities for part of their enrollment and their 87,710 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](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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 2001

Beneficiary Characteristics	ANTI-ASTHMATIC						ANALGESICS - ANTI-INFLAMMATORY						ANTICONVULSANT								
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %					
	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean No. of Rx
<b>All</b>	<b>894</b>	<b>37.0 %</b>	<b>0.6</b>	<b>\$28</b>	<b>0.6</b>	<b>\$28</b>	<b>662</b>	<b>28.2 %</b>	<b>0.6</b>	<b>\$33</b>	<b>0.6</b>	<b>\$33</b>	<b>476</b>	<b>19.7 %</b>	<b>0.6</b>	<b>\$44</b>	<b>4129</b>	<b>1.0</b>	<b>\$44</b>	<b>1.0</b>	<b>\$44</b>
<b>Female</b>	543	32.5	0.6	28	0.6	28	494	29.6	0.6	34	0.6	34	281	16.8	0.6	38	2,408	0.9	38	0.9	38
<b>Disabled</b>	39	58.2	0.7	36	0.7	36	19	28.4	0.7	29	0.7	29	32	47.8	0.7	48	289	1.3	48	1.3	48
64 or younger	39	60.9	0.7	36	0.7	36	17	26.6	0.7	30	0.7	30	32	50.0	0.7	48	289	1.3	48	1.3	48
65-74	0	0.0	0.0	0	0.0	0	1	50.0	0.4	13	0.4	13	0	0.0	0.4	0	0	0.0	0	0.0	0
75-84	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0.0	0	0.0	0	1	100.0	1.0	57	1.0	57	0	0.0	1.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	504	31.4	0.6	27	0.6	27	475	29.6	0.6	34	0.6	34	249	15.5	0.6	37	2,119	0.9	37	0.9	37
64 or younger	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0.0	0	0.0	0
65-74	88	51.2	0.8	33	0.8	33	64	37.2	0.6	31	0.6	31	60	34.9	0.6	51	540	0.9	51	0.9	51
75-84	166	31.7	0.7	29	0.7	29	153	29.3	0.6	35	0.6	35	95	18.2	0.6	36	820	0.9	36	0.9	36
85 and older	250	27.5	0.5	23	0.5	23	258	28.4	0.6	34	0.6	34	94	10.4	0.6	28	759	0.8	28	0.8	28
<b>Male</b>	351	47.1	0.7	29	0.7	29	188	25.2	0.6	33	0.6	33	195	26.1	0.6	52	1,721	1.0	52	1.0	52
<b>Disabled</b>	48	49.0	0.6	34	0.6	34	25	25.5	0.6	31	0.6	31	69	70.4	0.6	77	688	1.2	77	1.2	77
64 or younger	42	45.2	0.6	34	0.6	34	24	25.8	0.6	32	0.6	32	66	71.0	0.6	78	672	1.2	78	1.2	78
65-74	6	120.0	1.0	29	1.0	29	1	20.0	1.0	7	1.0	7	3	60.0	1.0	31	16	1.2	31	1.2	31
75-84	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	303	46.8	0.7	28	0.7	28	163	25.2	0.6	33	0.6	33	126	19.4	0.6	36	1,033	0.9	36	0.9	36
64 or younger	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0.0	0	0.0	0
65-74	93	61.6	0.7	32	0.7	32	41	27.2	0.6	25	0.6	25	55	36.4	0.6	38	511	0.9	38	0.9	38
75-84	130	50.0	0.7	27	0.7	27	64	24.6	0.7	34	0.7	34	38	14.6	0.7	37	305	1.0	37	1.0	37
85 and older	80	33.9	0.6	23	0.6	23	58	24.6	0.6	39	0.6	39	33	14.0	0.6	28	217	0.8	28	0.8	28
<b>Unknown</b>	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

Source: Data for this table are from the MAX 2001 file for Nebraska, 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 8,442 beneficiaries who were in nursing facilities for part of their enrollment and their 87,710 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](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 2001

Beneficiary Characteristics	ANTIHYPERTENSIVE				MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				Mean Rx \$	Mean No. of Rx	Mean No. of Bene Users	Mean No. of Bene Users	Mean No. of Bene Users	Mean No. of Bene Users	Mean Rx \$	Mean No. of Rx	All-Year NF Residents	All-Year NF Residents	Bene Mos among All-Year NF Residents
	Users as %		Users as %		Users as %		Users as %												
	No. of Users	%	No. of Users	%	No. of Users	%	No. of Users	%											
<b>All</b>	925	38.3 %	7,426	0.9	\$22	218	9.0 %	1,711	0.8	\$87	2,416	17,634							
<b>Female</b>	615	36.8	4,999	0.8	23	156	9.3	1,299	0.8	83	1,670	12,277							
<b>Disabled</b>	19	28.4	180	0.9	21	1	1.5	6	0.2	155	67	570							
64 or younger	18	28.1	178	0.9	20	1	1.6	6	0.2	155	64	560							
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	8							
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0							
85 and older	1	100.0	2	1.0	74	0	0.0	0	0.0	0	1	2							
<b>Other Eligibles</b>	596	37.2	4,819	0.8	23	155	9.7	1,293	0.8	82	1,603	11,707							
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0							
65-74	92	53.5	848	0.8	22	15	8.7	151	0.8	95	172	1,423							
75-84	192	36.7	1,646	0.9	24	57	10.9	466	0.8	86	523	3,898							
85 and older	312	34.4	2,325	0.8	23	83	9.1	676	0.8	77	908	6,386							
<b>Male</b>	310	41.6	2,427	0.9	19	62	8.3	412	1.0	99	746	5,357							
<b>Disabled</b>	28	28.6	260	0.8	20	4	4.1	32	1.0	98	98	872							
64 or younger	26	28.0	236	0.7	20	4	4.3	32	1.0	98	93	832							
65-74	2	40.0	24	1.0	28	0	0.0	0	0.0	0	5	40							
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0							
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0							
<b>Other Eligibles</b>	282	43.5	2,167	0.9	19	58	9.0	380	1.0	99	648	4,485							
64 or younger	1	100.0	4	0.5	9	0	0.0	0	0.0	0	1	4							
65-74	86	57.0	740	0.8	19	6	4.0	29	1.0	127	151	1,215							
75-84	97	37.3	789	0.9	19	35	13.5	258	1.1	102	260	1,763							
85 and older	98	41.5	634	0.9	19	17	7.2	93	0.8	82	236	1,503							
<b>Unknown</b>	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 Nebraska, 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 8,442 beneficiaries who were in nursing facilities for part of their enrollment and their 87,710 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](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<sup>a,b</sup>  
 NEBRASKA, 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 \$	\$ per Part D Excl Rx	Part D Excl Rx as % of All Rx \$	Total No. of Benes
	<b>25,293</b>	<b>72.4 %</b>	<b>12.5</b>	<b>437,027</b>	<b>\$4,285,924</b>	<b>\$10</b>	<b>4.6 %</b>	<b>34,945</b>
<b>Age</b>								
5 and younger	2	100.0	2.5	5	25	5	0.7	2
6-14	5	83.3	11.8	71	573	8	2.1	6
15-20	35	47.9	4.2	305	4,113	13	3.4	73
21-44	3,899	60.8	6.8	43,637	692,066	16	3.6	6,417
45-64	5,178	69.4	10.8	80,484	1,082,317	13	4.3	7,460
65-74	4,349	67.2	10.5	68,168	717,039	11	4.5	6,473
75-84	5,404	75.0	14.1	101,306	813,590	8	4.8	7,206
85 and older	6,421	87.9	19.6	143,051	976,201	7	6.6	7,308
Unknown	0	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>								
Aged	16,028	77.2	14.9	310,336	2,484,591	8	5.2	20,766
Disabled	9,188	65.5	9.0	126,115	1,791,675	14	4.0	14,035
Adults	68	53.1	4.0	513	9,124	18	3.5	128
Children	9	56.3	3.9	63	534	8	2.1	16
Unknown	0	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>								
Female	17,708	77.3	14.0	319,637	3,123,232	10	5.0	22,896
Male	7,585	63.0	9.7	117,390	1,162,692	10	3.9	12,048
Unknown	0	0.0	0.0	0	0	0	0.0	1
<b>Race</b>								
White	22,345	73.4	13.2	401,318	3,887,636	10	4.7	30,434
African American	1,731	68.2	8.6	21,873	249,513	11	4.3	2,539
Other/unknown	1,217	61.7	7.0	13,836	148,775	11	3.6	1,972
<b>Use of Nursing Facilities<sup>d</sup></b>								
Entire year	2,176	90.1	18.5	44,635	315,269	7	6.3	2,416
Part year	8,080	95.7	25.5	215,496	1,510,194	7	5.9	8,442
None	15,037	62.4	7.3	176,896	2,460,461	14	4.0	24,087
<b>Maintenance Assistance Status</b>								
Cash	6,151	66.3	8.2	76,241	1,029,830	14	3.9	9,284
Medically needy	10,672	88.6	22.2	267,280	1,874,201	7	5.9	12,042
Poverty related	8,211	62.3	6.9	91,121	1,338,269	15	4.0	13,182
Other/unknown	259	59.3	5.5	2,385	43,624	18	4.0	437

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Nebraska, 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<sup>a,b</sup>  
 NEBRASKA, 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
	1.2	\$12	\$10	\$0	\$3	361,023
<b>All</b>						
<b>Age</b>						
5 and younger	0.2	1	5	0	0	24
6-14	1.0	8	8	0	0	72
15-20	0.4	6	13	0	0	743
21-44	0.6	10	16	0	3	69,513
45-64	1.0	14	13	0	4	80,131
65-74	1.0	11	11	0	2	67,392
75-84	1.4	11	8	0	2	72,790
85 and older	2.0	14	7	0	2	70,358
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	1.5	12	8	0	2	208,316
Disabled	0.8	12	14	0	4	151,482
Adults	0.5	9	18	0	4	1,064
Children	0.4	3	8	0	1	161
Unknown	0.0	0	0	0	0	0
<b>Gender</b>						
Female	1.3	13	10	0	3	237,646
Male	1.0	9	10	0	3	123,376
Unknown	0.0	0	0	0	0	1
<b>Race</b>						
White	1.3	12	10	0	3	313,886
African American	0.8	9	11	0	2	26,777
Other/unknown	0.7	7	11	0	2	20,360
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	2.5	18	7	0	3	17,634
Part year	2.5	17	7	0	2	87,710
None	0.7	10	14	0	3	255,679
<b>Maintenance Assistance Status</b>						
Cash	0.7	10	14	0	3	102,038
Medically needy	2.3	16	7	0	2	113,926
Poverty related	0.7	10	15	0	3	140,056
Other/unknown	0.5	9	18	0	3	5,003

Source: Data for this table are from the MAX 2001 file for Nebraska, 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<sup>a,b,c</sup>  
 NEBRASKA, 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
<b>All</b>	<b>44,274</b>	<b>\$97</b>	<b>\$4,265,924</b>	<b>100.0 %</b>	<b>437,027</b>	<b>\$10</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	21	18	380	0.0	35	11	0.0
Cough and cold medications	8,156	97	789,359	18.4	28,363	28	6.5
Vitamins and minerals	7,388	155	1,144,819	26.7	53,240	22	12.2
Non-prescription drugs	19,802	60	1,195,403	27.9	291,616	4	66.7
Barbiturates	396	52	20,529	0.5	3,679	6	0.8
Benzodiazepines	7,736	123	951,009	22.2	56,528	17	12.9
Other Part D Excl Rx Drugs	775	238	184,425	4.3	3,566	52	0.8

Source: Data for this table are from the MAX 2001 file for Nebraska, 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 1D  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84<sup>a, b</sup>  
 NEBRASKA, 2001

Total Number of Dual Eligible Beneficiaries, Age 75-84 7,206  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$17,061,066  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$2,368

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	549	7.6 %	0	0.0 %
1-500	1,019	14.1	231,674	1.4
501-1,000	927	12.9	692,235	4.1
1,001-1,500	760	10.5	944,257	5.5
1,501-2,000	653	9.1	1,141,647	6.7
2,001-2,500	596	8.3	1,337,546	7.8
2,501-3,000	516	7.2	1,418,711	8.3
3,001-3,500	413	5.7	1,345,469	7.9
3,501-4,000	362	5.0	1,355,145	7.9
4,001-4,500	278	3.9	1,179,580	6.9
4,501-5,000	256	3.6	1,210,749	7.1
5,001-5,500	184	2.6	962,694	5.6
5,501-6,000	153	2.1	876,395	5.1
6,001-6,500	123	1.7	765,282	4.5
6,501-7,000	85	1.2	571,404	3.3
7,001-7,500	60	0.8	435,188	2.6
7,501-8,000	62	0.9	482,467	2.8
8,001-8,500	53	0.7	437,286	2.6
8,501-9,000	34	0.5	296,781	1.7
9,001-9,500	27	0.4	249,010	1.5
9,501-10,000	25	0.3	242,627	1.4
10,001+	71	1.0	884,919	5.2

Source: Data for this table are from the MAX 2001 file for Nebraska, 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.

SUPPLEMENTAL TABLE 1E  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER<sup>a, b</sup>  
 NEBRASKA, 2001

Total Number of Dual Eligible Beneficiaries, Age 85+ 7,308  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$14,734,021  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$2,016

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	306	4.2 %	0	0.0 %
1-500	1,288	17.6	317,507	2.2
501-1,000	1,096	15.0	814,609	5.5
1,001-1,500	891	12.2	1,109,168	7.5
1,501-2,000	815	11.2	1,420,631	9.6
2,001-2,500	621	8.5	1,388,894	9.4
2,501-3,000	551	7.5	1,508,513	10.2
3,001-3,500	422	5.8	1,367,494	9.3
3,501-4,000	346	4.7	1,292,760	8.8
4,001-4,500	244	3.3	1,033,518	7.0
4,501-5,000	186	2.5	881,531	6.0
5,001-5,500	152	2.1	795,696	5.4
5,501-6,000	102	1.4	585,991	4.0
6,001-6,500	78	1.1	485,229	3.3
6,501-7,000	62	0.8	416,439	2.8
7,001-7,500	43	0.6	311,644	2.1
7,501-8,000	27	0.4	207,230	1.4
8,001-8,500	16	0.2	131,852	0.9
8,501-9,000	15	0.2	131,273	0.9
9,001-9,500	15	0.2	138,994	0.9
9,501-10,000	8	0.1	77,695	0.5
10,001+	24	0.3	317,353	2.2

Source: Data for this table are from the MAX 2001 file for Nebraska, 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<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 2001

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>35,012</b>	<b>20,772</b>	<b>14,088</b>	<b>135</b>	<b>17</b>	<b>362,321</b>	<b>207,870</b>	<b>153,096</b>	<b>1,181</b>	<b>174</b>	<b>0</b>
<b>Age</b>											
5 and younger	2	0	1	0	1	24	0	12	0	12	0
6-14	6	0	5	0	1	72	0	60	0	12	0
15-20	74	0	65	0	9	793	0	710	0	83	0
21-44	6,457	0	6,356	95	6	70,488	0	69,563	858	67	0
45-64	7,478	1	7,443	34	0	80,777	4	80,490	283	0	0
65-74	6,480	6,259	217	4	0	67,501	65,226	2,259	16	0	0
75-84	7,207	7,205	0	2	0	72,623	72,599	0	24	0	0
85 and older	7,308	7,307	1	0	0	70,043	70,041	2	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>											
Female	22,931	15,501	7,341	85	4	238,431	157,231	80,366	789	45	0
Male	12,080	5,271	6,746	50	13	123,889	50,639	72,729	392	129	0
Unknown	1	0	1	0	0	1	0	1	0	0	0
<b>Race</b>											
White	30,471	18,636	11,716	104	15	314,233	185,485	127,710	888	150	0
African American	2,563	1,118	1,431	14	0	27,535	11,866	15,530	139	0	0
Other/unknown	1,978	1,018	941	17	2	20,553	10,519	9,856	154	24	0
<b>Use of Nursing Facilities<sup>c</sup></b>											
Entire year	2,416	2,251	165	0	0	17,287	15,856	1,431	0	0	0
Part year	8,442	7,628	812	2	0	87,653	78,589	9,040	24	0	0
None	24,154	10,893	13,111	133	17	257,381	113,425	142,625	1,157	174	0
<b>Maintenance Assistance Status</b>											
Cash	9,333	3,423	5,866	44	0	103,346	37,810	65,150	386	0	0
Medically needy	12,044	10,314	1,647	74	9	113,605	95,788	17,123	606	88	0
Poverty related	13,197	7,010	6,181	0	6	140,346	74,002	66,282	0	62	0
Other/unknown	438	25	394	17	2	5,024	270	4,541	189	24	0
<b>Dual Status<sup>d</sup></b>											
Full dual, all year	34,415	20,430	13,833	135	17	356,960	204,780	150,825	1,181	174	0
Full dual, part year	597	342	255	0	0	5,361	3,090	2,271	0	0	0
<b>Managed Care Status</b>											
FFS all year	34,581	20,734	13,716	116	15	357,501	207,444	148,924	973	160	0
FFS part year, with Rx claims	334	30	293	11	0	3,847	340	3,375	132	0	0
FFS part year, no Rx claims	29	2	25	1	1	298	21	263	12	2	0
MC all year, with Rx claims	62	5	50	6	1	632	53	504	63	12	0
MC all year, no Rx claims	6	1	4	1	0	43	12	30	1	0	0



Source: Data for this table are from the MAX 2001 file for Nebraska, 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<sup>a</sup>  
 DUAL ELIGIBLE BENEFICIARIES, NEBRASKA, 2001

Beneficiary Characteristics	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
<b>All</b>	<b>35,012</b>	<b>362,321</b>	<b>34,945</b>	<b>359,720</b>	<b>61</b>	<b>2,601</b>
FFS all year	34,581	357,501	34,581	357,501	0	0
FFS part year, with Rx claims	334	3,847	334	2,075	0	1,772
FFS part year, with no Rx claims	29	298	29	140	0	158
MC all year, with Rx claims	62	632	1	4	61	628
MC all year, with no Rx claims	6	43	0	0	0	43

Source: Data for this table are from the MAX 2001 file for Nebraska, 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.