

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

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TABLE D.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 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	103,511	60,550	42,371	575	15	0	1,068,044	609,401	454,544	3,965	134	0
Age												
5 and younger	7	0	7	0	0	0	74	0	74	0	0	0
6-14	18	0	15	0	3	0	193	0	157	0	36	0
15-20	169	0	157	1	11	0	1,690	0	1,602	2	86	0
21-44	19,629	2	19,216	410	1	0	210,546	22	207,577	2,935	12	0
45-64	22,998	88	22,767	143	0	0	245,367	930	243,521	916	0	0
65-74	22,014	21,790	204	20	0	0	230,592	228,933	1,556	103	0	0
75-84	21,603	21,597	5	1	0	0	217,246	217,180	57	9	0	0
85 and older	17,073	17,073	0	0	0	0	162,336	162,336	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	64,235	42,971	20,926	332	6	0	668,265	437,764	228,095	2,346	60	0
Male	39,274	17,579	21,443	243	9	0	399,755	171,637	226,425	1,619	74	0
Unknown	2	0	2	0	0	0	24	0	24	0	0	0
Race												
White	82,065	46,219	35,417	418	11	0	842,843	458,010	381,861	2,873	99	0
African American	4,625	1,856	2,727	42	0	0	47,843	19,276	28,254	313	0	0
Other/unknown	16,821	12,475	4,227	115	4	0	177,358	132,115	44,429	779	35	0
Use of Nursing Facilities^c												
Entire year	12,195	11,294	901	0	0	0	118,831	109,126	9,705	0	0	0
Part year	7,439	6,619	820	0	0	0	67,400	59,143	8,257	0	0	0
None	83,877	42,637	40,650	575	15	0	881,813	441,132	436,582	3,965	134	0
Maintenance Assistance Status												
Cash	45,339	21,081	24,118	140	0	0	494,727	233,965	259,886	876	0	0
Medically needy	11,563	5,784	5,778	1	0	0	107,874	51,932	55,937	5	0	0
Poverty-related	3,576	1,525	1,940	105	6	0	36,750	15,225	20,579	906	40	0
Other/unknown	43,033	32,160	10,535	329	9	0	428,693	308,279	118,142	2,178	94	0
Dual Medicare Status^d												
Full dual, all year	96,942	57,688	38,683	556	15	0	996,232	578,472	413,863	3,763	134	0
Full dual, part year	6,569	2,862	3,688	19	0	0	71,812	30,929	40,681	202	0	0
Managed Care Status												
FFS all year	103,085	60,476	42,181	414	14	0	1,065,581	608,985	453,304	3,165	127	0
FFS part year, with Rx claims	314	27	169	117	1	0	1,967	169	1,134	657	7	0
FFS part year, no Rx claims	112	47	21	44	0	0	496	247	106	143	0	0

Table D2

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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, WASHINGTON, 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	88.6 %	46.0	\$2,374	\$52	\$8,202	28.9 %	103,511
Age							
5 and younger	85.7	30.0	4,437	148	25,998	17.1	7
6-14	83.3	37.8	7,884	208	22,785	34.6	18
15-20	76.3	22.8	2,145	94	8,249	26.0	169
21-44	84.1	35.1	2,764	79	4,823	57.3	19,629
45-64	89.0	54.3	3,247	60	6,617	49.1	22,998
65-74	87.7	47.1	2,125	45	6,167	34.5	22,014
75-84	90.1	48.0	1,955	41	10,020	19.5	21,603
85 and older	92.4	43.4	1,597	37	14,523	11.0	17,073
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^c							
Aged	90.0	46.5	1,920	41	9,909	19.4	60,550
Disabled	86.8	45.6	3,042	67	5,835	52.1	42,371
Adults	67.8	16.7	912	55	3,068	29.7	575
Children	86.7	27.1	2,571	95	3,603	71.4	15
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	91.2	51.3	2,428	47	8,881	27.3	64,235
Male	84.1	37.2	2,286	61	7,092	32.2	39,274
Unknown	100.0	30.5	1,888	62	6,355	29.7	2
Race							
White	88.9	48.0	2,503	52	8,852	28.3	82,065
African American	86.7	41.6	2,168	52	6,812	31.8	4,625
Other/unknown	87.4	37.3	1,801	48	5,416	33.3	16,821
Use of Nursing Facilities^d							
Entire year	96.4	55.5	2,405	43	32,536	7.4	12,195
Part year	97.6	56.8	2,459	43	17,417	14.1	7,439
None	86.6	43.6	2,362	54	3,847	61.4	83,877
Maintenance Assistance Status							
Cash	86.8	40.8	2,249	55	4,150	54.2	45,339
Medically needy	89.9	45.4	2,781	61	7,359	37.8	11,563
Poverty related	74.1	27.3	1,632	60	3,044	53.6	3,576
Other/unknown	91.2	53.1	2,457	46	13,126	18.7	43,033

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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, WASHINGTON, 2001

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	No. of Rx, % with:						Mean \$, All Services	Benes	Bene Mos	
			Rx \$ as % of All Services	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	4.5	\$230	28.9 %	11.4 %	17.6 %	11.2 %	28.5 %	23.3 %	8.0 %	\$795	103,511	1,068,044
Age												
5 and younger	2.8	420	17.1	14.3	0.0	14.3	71.4	0.0	0.0	2,459	7	74
6-14	3.5	735	34.6	16.7	0.0	22.2	44.4	16.7	0.0	2,125	18	193
15-20	2.3	215	26.0	23.7	34.3	13.6	16.0	10.1	2.4	825	169	1,690
21-44	3.3	258	57.3	15.9	26.7	12.5	24.8	15.3	4.7	450	19,629	210,546
45-64	5.1	304	49.1	11.0	15.0	10.1	26.7	25.7	11.4	620	22,998	245,367
65-74	4.5	203	34.5	12.3	17.1	10.8	28.6	22.7	8.5	589	22,014	230,592
75-84	4.8	194	19.5	9.9	14.4	10.8	30.0	26.7	8.2	996	21,603	217,246
85 and older	4.6	168	11.0	7.6	15.3	11.9	33.3	25.7	6.2	1,527	17,073	162,336
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	4.6	191	19.4	10.0	15.7	11.1	30.4	25.0	7.8	985	60,550	609,401
Disabled	4.3	284	52.1	13.2	20.3	11.3	25.9	21.0	8.4	544	42,371	454,544
Adults	2.4	132	29.7	32.2	28.5	10.4	17.0	9.2	2.6	445	575	3,965
Children	3.0	288	71.4	13.3	40.0	6.7	26.7	13.3	0.0	403	15	134
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	4.9	233	27.3	8.8	15.4	10.8	29.3	26.1	9.6	854	64,235	668,265
Male	3.7	225	32.2	15.9	21.3	11.7	27.1	18.7	5.3	697	39,274	399,755
Unknown	2.5	157	29.7	0.0	0.0	50.0	50.0	0.0	0.0	530	2	24
Race												
White	4.7	244	28.3	11.1	16.6	10.7	28.1	24.6	8.9	862	82,065	842,843
African American	4.0	210	31.8	13.3	20.1	11.8	28.3	20.4	6.2	659	4,625	47,843
Other/unknown	3.5	171	33.3	12.6	22.1	13.4	30.3	17.4	4.1	514	16,821	177,358
use of nursing Facilities^d												
Entire year	5.7	247	7.4	3.6	10.6	9.7	32.8	31.5	11.8	3,339	12,195	118,831
Part year	6.3	271	14.1	2.4	10.9	10.1	30.8	32.5	13.3	1,922	7,439	67,400
None	4.1	225	61.4	13.4	19.3	11.5	27.7	21.3	6.9	366	83,877	881,813
Maintenance Assistance Status												
Cash	3.7	206	54.2	13.2	22.1	12.4	27.9	19.0	5.4	380	45,339	494,727
Medically needy	4.9	298	37.8	10.1	15.9	10.8	29.4	25.1	8.7	789	11,563	107,874
Poverty related	2.7	159	53.6	25.9	27.3	11.4	21.0	11.4	3.0	296	3,576	36,750
Other/unknown	5.3	247	18.7	8.8	12.6	9.9	29.5	28.2	10.9	1,318	43,033	428,693

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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, WASHINGTON, 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	4.5	\$230	\$52	2.0	\$178	\$89	0.2	\$12	\$49	2.2	\$40	\$18
Age												
5 and younger	2.8	420	148	1.2	390	328	0.3	11	34	1.3	12	9
6-14	3.5	735	208	1.4	617	428	0.6	43	71	1.5	66	45
15-20	2.3	215	94	1.1	171	161	0.2	26	112	1.0	18	18
21-44	3.3	258	79	1.5	206	136	0.2	14	84	1.6	37	23
45-64	5.1	304	60	2.3	237	102	0.3	16	65	2.5	50	20
65-74	4.5	203	45	2.1	156	75	0.2	10	43	2.2	37	17
75-84	4.8	194	41	2.1	146	70	0.3	10	35	2.4	38	16
85 and older	4.6	168	37	1.8	123	67	0.3	9	29	2.4	36	15
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	4.6	191	41	2.0	144	71	0.3	10	36	2.3	37	16
Disabled	4.3	284	67	2.0	223	114	0.2	15	72	2.1	44	21
Adults	2.4	132	55	1.0	103	102	0.1	5	59	1.3	24	18
Children	3.0	288	95	0.9	179	194	0.5	21	42	1.6	87	55
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	4.9	233	47	2.2	179	81	0.3	12	46	2.4	42	17
Male	3.7	225	61	1.6	176	107	0.2	11	57	1.8	37	20
Unknown	2.5	157	62	1.2	103	88	0.0	0	0	1.4	54	39
Race												
White	4.7	244	52	2.1	187	90	0.3	13	50	2.3	43	18
African American	4.0	210	52	1.8	166	94	0.2	9	44	2.0	34	17
Other/unknown	3.5	171	48	1.7	134	80	0.2	8	48	1.7	28	17
Use of Nursing Facilities^e												
Entire year	5.7	247	43	2.4	183	76	0.3	13	39	2.9	51	17
Part year	6.3	271	43	2.7	204	76	0.4	14	38	3.2	54	17
None	4.1	225	54	1.9	175	93	0.2	12	53	2.0	37	18
Maintenance Assistance Status												
Cash	3.7	206	55	1.7	161	93	0.2	10	59	1.8	34	19
Medically needy	4.9	298	61	2.3	238	104	0.3	15	57	2.3	44	19
Poverty related	2.7	159	60	1.2	124	100	0.1	10	76	1.3	24	19
Other/unknown	5.3	247	46	2.3	186	81	0.3	13	41	2.7	47	17

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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 Washington, 0.8 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 (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, WASHINGTON, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total No. of Rx			Total Rx \$			Users				
	Total	Patented		Total	Patented		Total	Off-Patent	Generic	Total No. of Rx	Total Rx \$	No. Dual Benes	As % of Dual Benes	No. of Bene Mos			
		Off-Patent	Brand-Name		Generic	Brand-Name									Generic		
Anti-infective Agents	0.4	0.2	0.0	0.2	\$27	\$24	\$0	\$2	\$69	\$123	\$70	\$12	234,216	\$16,201,193	55,517	53.6 %	604,636
Biologics	0.1	0.1	0.0	0.0	9	2	5	2	87	22	3,453	74	3,634	315,439	3,113	3.0	34,966
Antineoplastic Agents	0.6	0.3	0.1	0.2	111	85	15	12	189	313	145	54	19,407	3,669,121	3,126	3.0	32,922
Endocrine/Metabolic Drugs	1.1	0.6	0.1	0.5	38	31	1	5	34	52	21	11	525,991	17,802,117	43,443	42.0	474,687
Cardiovascular Agents	1.8	0.7	0.1	1.0	55	37	3	15	31	52	26	16	1,080,585	33,263,716	56,380	54.5	608,180
Respiratory Agents	0.8	0.5	0.0	0.3	36	30	0	5	46	64	30	19	320,046	14,850,315	37,305	36.0	412,278
Gastrointestinal Agents	0.7	0.4	0.0	0.4	53	44	2	7	71	122	81	19	327,491	23,198,443	40,179	38.8	440,241
Genitourinary Agents	0.5	0.4	0.0	0.2	26	23	0	3	50	66	30	17	83,176	4,181,855	14,364	13.9	159,043
CNS Drugs	1.4	0.7	0.1	0.6	103	80	5	17	76	117	109	28	808,784	61,274,901	55,495	53.6	596,651
Stimulants/Anti-obesity/Anorexia	0.7	0.2	0.0	0.5	40	18	3	19	61	118	59	42	6,076	368,201	852	0.8	9,209
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	101	100	0	1	142	148	31	18	17,417	2,471,666	2,344	2.3	24,540
Analgesics and Anesthetics	0.9	0.3	0.0	0.5	48	36	4	8	55	115	89	16	522,764	28,647,625	55,414	53.5	594,716
Neuromuscular Agents	1.0	0.4	0.1	0.5	61	47	3	10	61	110	39	21	326,441	19,828,594	29,604	28.6	325,178
Nutritional Products	0.7	0.0	0.1	0.5	10	0	3	7	15	21	25	13	133,245	2,007,325	18,710	18.1	199,633
Hematological Agents	0.8	0.2	0.2	0.4	44	32	5	6	53	178	23	15	125,210	6,692,435	14,492	14.0	153,565
Topical Products	0.4	0.2	0.0	0.2	15	10	1	4	34	56	37	17	193,530	6,642,884	40,757	39.4	452,711
Miscellaneous Products	0.6	0.3	0.1	0.2	145	103	25	16	242	384	283	67	15,099	3,657,007	2,419	2.3	25,288
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	10	0	0	0	42	0	0	0	15,319	637,293	5,606	5.4	62,933
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.	4,758,431	245,710,130	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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 (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 Washington, 0.8 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 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	\$32,010,159	25,606	24.7 %	280,376	0.8	\$143	\$114
ANTIDEPRESSANTS	23,562,126	52,764	51.0	578,571	0.7	59	41
ULCER DRUGS	18,915,023	39,619	38.3	440,246	0.6	77	43
ANALGESICS - Narcotic	16,741,514	64,766	62.6	699,873	0.5	51	24
ANTICONVULSANT	15,865,355	22,806	22.0	252,288	0.8	77	63
ANTIDIABETIC	11,193,888	27,065	26.1	298,919	0.8	49	37
ANALGESICS - ANTI-INFLAMMATORY	10,021,816	31,727	30.7	358,116	0.4	66	28
ANTIHYPERTENSIVE	9,812,148	16,265	15.7	183,224	0.7	72	54
ANTIHYPERTENSIVE	9,584,458	32,328	31.2	357,313	0.7	36	27
ANTIASTHMATIC	8,829,136	34,053	32.9	375,047	0.5	50	24
Total	156,535,623	346,999		3,823,973	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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, WASHINGTON, 2001

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	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 \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	2,365,277	\$156,535,623	25,606	24.7 %	280,376	0.8	\$114	52,764	51.0 %	578,571	0.7	\$41					
Female	1,572,552	98,814,764	14,594	22.7	160,435	0.7	93	36,189	56.3	399,349	0.7	41					
Disabled	616,725	45,648,198	7,050	33.7	80,240	0.8	113	16,372	78.2	185,140	0.7	45					
5 and younger	10	327	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
6-14	41	874	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
15-20	619	43,409	12	17.9	134	0.5	60	25	37.3	264	0.6	25					
21-44	188,113	15,261,045	3,243	40.2	36,772	0.8	114	5,807	72.0	65,464	0.6	44					
45-64	426,458	30,256,173	3,788	29.9	43,265	0.8	112	10,497	82.8	119,047	0.7	46					
65-74	1,447	84,478	7	6.1	69	0.6	61	43	37.7	365	0.5	27					
75-84	37	1,892	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Other Eligibles	955,827	53,166,566	7,544	17.4	80,195	0.7	74	19,817	45.8	214,209	0.7	37					
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
6-14	5	75	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
15-20	3	15	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
21-44	2,649	184,051	38	14.2	378	0.5	41	127	47.4	1,187	0.5	36					
45-64	2,178	141,198	14	11.1	154	0.6	63	48	38.1	504	0.6	35					
65-74	360,615	21,072,252	1,909	13.6	21,165	0.7	89	6,452	45.8	72,342	0.7	36					
75-84	348,158	19,137,124	2,863	18.8	30,540	0.7	75	6,970	45.7	75,291	0.7	37					
85 and older	242,219	12,631,851	2,720	20.0	27,958	0.6	62	6,220	45.8	64,885	0.8	38					
Male	792,697	57,718,405	11,012	28.0	119,941	0.9	142	16,575	42.2	179,222	0.7	41					
Disabled	458,249	39,412,797	8,166	38.1	91,534	0.9	161	10,404	48.5	115,300	0.7	44					
5 and younger	11	416	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
6-14	4	27	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
15-20	677	70,746	16	17.8	177	0.8	156	16	17.8	177	0.6	46					
21-44	207,530	20,048,532	4,986	44.7	56,128	0.9	163	5,196	46.6	58,043	0.6	43					
45-64	249,184	19,255,363	3,159	31.3	35,199	1.0	159	5,179	51.3	56,977	0.7	44					
65-74	808	36,202	5	5.6	30	0.6	12	12	13.3	91	0.5	22					
75-84	35	1,511	0	0.0	0	0.0	0	1	50.0	12	0.1	0					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Other Eligibles	334,448	18,305,608	2,846	16.0	28,407	0.7	80	6,171	34.6	63,922	0.7	36					
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
6-14	21	585	0	0.0	0	0.0	0	1	50.0	12	0.9	43					
15-20	10	385	0	0.0	0	0.0	0	1	16.7	1	1.0	133					
21-44	1,396	92,602	17	11.7	138	0.7	99	48	33.1	426	0.6	35					
45-64	1,188	61,848	5	4.8	41	0.3	23	26	24.8	202	0.5	38					
65-74	157,171	9,039,840	941	12.2	9,914	0.8	101	2,374	30.7	25,863	0.7	35					
75-84	120,581	6,378,343	1,145	18.1	11,326	0.7	70	2,326	36.7	23,834	0.7	37					
85 and older	54,081	2,732,005	738	21.1	6,988	0.7	66	1,395	39.8	13,584	0.7	35					
Unknown	28	2,454	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 Washington, released by CMS in 06/2005. 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, WASHINGTON, 2001

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					ANTICONVULSANT				
	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	39,619	38.3 %	440,246	0.6	\$43	64,766	62.6 %	699,873	0.5	\$24	22,806	22.0 %	252,288	0.8	\$63
Female	27,124	42.2	303,233	0.6	44	44,030	68.5	478,969	0.5	24	13,740	21.4	152,900	0.8	59
Disabled	9,084	43.4	103,782	0.5	45	18,112	86.6	204,482	0.5	27	7,837	37.5	89,030	0.8	72
5 and younger	3	100.0	29	0.2	5	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	2	33.3	19	0.1	4	5	83.3	55	0.1	1	0	0.0	0	0.0	0
15-20	11	16.4	130	0.5	42	26	38.8	296	0.3	22	15	22.4	158	0.5	51
21-44	2,779	34.5	31,785	0.5	40	6,431	79.8	72,734	0.4	24	3,418	42.4	38,847	0.8	77
45-64	6,254	49.4	71,523	0.6	47	11,587	91.4	130,903	0.5	29	4,395	34.7	49,957	0.8	68
65-74	34	29.8	284	0.5	36	63	55.3	494	0.5	33	9	7.9	68	0.6	48
75-84	1	33.3	12	0.1	9	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
Other Eligibles	18,040	41.7	199,451	0.6	43	25,918	59.8	274,487	0.5	21	5,903	13.6	63,870	0.8	40
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	200.0	24	0.2	3	1	100.0	12	0.1	1	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	1	16.7	5	0.2	1	0	0.0	0	0.0	0
21-44	42	15.7	388	0.4	37	170	63.4	1,557	0.5	26	57	21.3	555	0.6	68
45-64	34	27.0	382	0.5	37	60	47.6	588	0.5	36	20	15.9	218	0.7	59
65-74	6,717	47.7	76,313	0.5	41	8,920	63.4	99,488	0.4	19	2,191	15.6	24,399	0.8	47
75-84	6,426	42.1	70,763	0.6	43	9,092	59.6	96,643	0.5	20	2,212	14.5	23,809	0.8	37
85 and older	4,819	35.5	51,581	0.7	44	7,674	56.6	76,194	0.5	23	1,423	10.5	14,889	0.8	31
Male	12,495	31.8	137,013	0.6	42	20,735	52.8	220,892	0.4	25	9,065	23.1	99,376	0.9	70
Disabled	5,954	27.8	66,659	0.5	43	12,251	57.1	134,871	0.5	30	6,737	31.4	75,237	0.9	77
5 and younger	4	100.0	48	0.2	8	3	75.0	36	0.1	2	0	0.0	0	0.0	0
6-14	1	11.1	12	0.2	1	2	22.2	12	0.2	1	0	0.0	0	0.0	0
15-20	17	18.9	176	0.5	36	27	30.0	288	0.1	1	16	17.8	177	0.9	50
21-44	2,576	23.1	29,279	0.5	40	5,997	53.8	66,902	0.4	28	3,615	32.4	40,502	0.8	80
45-64	3,334	33.0	36,943	0.6	46	6,182	61.2	67,342	0.5	32	3,102	30.7	34,535	0.9	75
65-74	21	23.3	189	0.3	24	40	44.4	291	0.5	16	4	4.4	23	0.3	13
75-84	1	50.0	12	0.6	5	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
Other Eligibles	6,541	36.7	70,354	0.6	41	8,484	47.6	86,021	0.4	17	2,328	13.1	24,139	0.8	46
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	0.8	5	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	3	50.0	25	0.2	4	1	16.7	1	2.0	88
21-44	27	18.6	238	0.5	50	93	64.1	841	0.5	27	18	12.4	158	0.7	61
45-64	21	20.0	200	0.5	38	66	62.9	550	0.4	18	12	11.4	93	0.5	60
65-74	2,895	37.5	32,151	0.5	40	3,693	47.8	39,461	0.4	18	1,062	13.7	11,374	0.8	52
75-84	2,414	38.1	25,805	0.6	40	2,988	47.1	29,981	0.4	16	879	13.9	8,989	0.8	41
85 and older	1,183	33.8	11,948	0.6	43	1,641	46.8	15,163	0.4	15	356	10.2	3,524	0.8	37
Unknown	0	0.0	0	0.0	0	1	50.0	12	0.1	0	1	50.0	12	0.7	41

Table D7B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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, WASHINGTON, 2001

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - ANTI-INFLAMMATORY					ANTIHYPERLIPIDEMIC				
	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	27,065	26.1 %	298,919	0.8	\$37	31,727	30.7 %	358,116	0.4	\$28	16,265	15.7 %	183,224	0.7	\$54
Female	18,171	28.3	202,208	0.8	37	21,829	34.0	247,868	0.5	31	10,612	16.5	120,153	0.7	54
Disabled	5,417	25.9	61,597	0.8	45	9,036	43.2	103,572	0.4	28	3,327	15.9	38,001	0.7	54
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	3	4.5	36	0.7	59	10	14.9	120	0.2	1	2	3.0	24	0.6	57
21-44	1,012	12.6	11,589	0.7	40	3,155	39.1	36,015	0.3	19	491	6.1	5,565	0.7	46
45-64	4,373	34.5	49,718	0.8	46	5,838	46.1	67,132	0.5	33	2,816	22.2	32,252	0.7	55
65-74	28	24.6	242	0.7	36	32	28.1	293	0.4	29	18	15.8	160	0.7	51
75-84	1	33.3	12	0.8	22	1	33.3	12	0.9	68	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
Other Eligibles	12,754	29.4	140,611	0.8	34	12,793	29.5	144,296	0.5	33	7,285	16.8	82,152	0.7	54
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	13	4.9	117	0.5	31	71	26.5	706	0.3	18	7	2.6	72	0.8	64
45-64	44	34.9	457	0.8	48	37	29.4	397	0.4	32	20	15.9	225	0.8	45
65-74	5,609	39.8	63,310	0.8	39	5,399	38.3	62,190	0.4	32	3,875	27.5	44,202	0.7	54
75-84	4,780	31.3	52,610	0.8	32	4,448	29.2	50,353	0.5	35	2,633	17.3	29,574	0.8	54
85 and older	2,308	17.0	24,117	0.8	26	2,838	20.9	30,650	0.6	35	750	5.5	8,079	0.7	51
Male	8,894	22.6	96,711	0.8	38	9,897	25.2	110,236	0.4	21	5,653	14.4	63,071	0.7	53
Disabled	3,727	17.4	41,412	0.8	44	5,632	26.3	63,258	0.3	19	2,628	12.3	29,633	0.7	53
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	12	13.3	126	0.3	100	2	2.2	24	0.5	56
21-44	1,016	9.1	11,490	0.8	45	2,734	24.5	30,923	0.3	14	807	7.2	9,289	0.7	48
45-64	2,692	26.7	29,753	0.8	43	2,864	28.4	32,010	0.4	23	1,802	17.9	20,144	0.8	55
65-74	19	21.1	169	0.8	41	22	24.4	199	0.4	17	16	17.8	164	0.6	37
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	12	1.1	74
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	5,167	29.0	55,299	0.7	34	4,265	23.9	46,978	0.4	24	3,025	17.0	33,438	0.7	54
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	1	16.7	3	0.3	3	0	0.0	0	0.0	0
21-44	18	12.4	141	0.5	28	32	22.1	297	0.3	14	14	9.7	118	0.8	38
45-64	24	22.9	246	0.7	30	23	21.9	231	0.3	16	16	15.2	153	0.7	49
65-74	2,653	34.3	29,324	0.8	38	2,193	28.4	24,641	0.4	20	1,788	23.1	20,204	0.8	55
75-84	1,826	28.8	19,182	0.7	31	1,409	22.2	15,474	0.4	26	998	15.7	10,909	0.8	53
85 and older	646	18.4	6,406	0.8	26	607	17.3	6,332	0.5	32	209	6.0	2,154	0.7	43
Unknown	0	0.0	0	0.0	0	1	50.0	12	1.0	146	0	0.0	0	0.0	0

Table D7C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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, WASHINGTON, 2001

Beneficiary Characteristics	ANTIHYPERTENSIVE				ANTIASTHMATIC							
	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 Benes	No. of Bene Mos
All	32,328	31.2 %	357,313	0.7	\$27	34,053	32.9 %	375,047	0.5	\$24	103,511	1,068,044
Female	21,329	33.2	236,850	0.7	27	22,986	35.8	255,747	0.5	23	64,235	668,265
Disabled	4,719	22.6	53,682	0.7	26	9,310	44.5	106,008	0.5	23	20,926	228,095
5 and younger	0	0.0	0	0.0	0	3	100.0	36	0.1	5	3	29
6-14	6	100.0	67	0.5	11	1	16.7	12	0.1	2	6	56
15-20	8	11.9	90	0.7	41	17	25.4	176	0.3	9	67	682
21-44	883	11.0	9,949	0.6	21	2,749	34.1	31,290	0.4	18	8,062	88,050
45-64	3,792	29.9	43,271	0.7	28	6,499	51.3	74,142	0.5	25	12,671	138,313
65-74	28	24.6	284	0.6	26	41	36.0	352	0.6	22	114	932
75-84	2	66.7	21	0.7	34	0	0.0	0	0.0	0	3	33
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	16,610	38.4	183,168	0.8	28	13,676	31.6	149,739	0.5	24	43,309	440,170
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	1	12
15-20	1	16.7	5	0.4	2	0	0.0	0	0.0	0	6	50
21-44	7	2.6	59	0.7	24	51	19.0	511	0.5	23	268	1,980
45-64	36	28.6	382	0.8	31	34	27.0	344	0.6	26	126	1,083
65-74	5,938	42.2	67,209	0.7	28	5,691	40.4	63,985	0.5	27	14,080	149,805
75-84	6,193	40.6	68,432	0.8	28	4,907	32.2	53,420	0.5	23	15,258	155,831
85 and older	4,435	32.7	47,081	0.8	27	2,993	22.1	31,479	0.4	18	13,570	131,409
Male	10,998	28.0	120,451	0.7	26	11,067	28.2	119,300	0.5	24	39,274	399,755
Disabled	4,187	19.5	46,662	0.7	25	4,843	22.6	53,689	0.5	22	21,443	226,425
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	45
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	9	101
15-20	8	8.9	84	0.4	12	9	10.0	100	0.6	47	90	920
21-44	1,337	12.0	15,190	0.7	24	1,823	16.3	20,650	0.4	18	11,153	119,515
45-64	2,818	27.9	31,159	0.7	26	2,989	29.6	32,794	0.5	25	10,095	105,196
65-74	22	24.4	205	0.7	27	22	24.4	145	0.5	18	90	624
75-84	2	100.0	24	0.6	23	0	0.0	0	0.0	0	2	24
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	6,811	38.2	73,789	0.8	26	6,224	34.9	65,611	0.5	25	17,831	173,330
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	1	50.0	12	0.1	1	2	24
15-20	1	16.7	12	0.2	5	0	0.0	0	0.0	0	6	38
21-44	21	14.5	186	0.8	33	10	6.9	58	0.4	22	145	989
45-64	26	24.8	246	0.7	26	37	35.2	296	0.5	17	105	763
65-74	3,170	41.0	35,338	0.7	27	2,834	36.7	31,090	0.5	28	7,730	79,231
75-84	2,501	39.4	26,885	0.8	26	2,287	36.1	23,775	0.5	24	6,340	61,358
85 and older	1,092	31.2	11,122	0.8	25	1,055	30.1	10,380	0.4	20	3,503	30,927
Unknown	1	50.0	12	0.6	17	0	0.0	0	0.0	0	2	24

Table D7D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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, WASHINGTON, 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	\$247	5.7	12,195	118,831
Age				
0-64	414	7.1	898	9,743
65-74	344	6.9	1,423	14,159
75-84	247	5.9	4,045	38,952
85 and older	193	5.0	5,829	55,977
Unknown	0	0.0	0	0
Gender				
Female	237	5.7	8,570	85,017
Male	271	5.7	3,625	33,814
Unknown	0	0.0	0	0
Race				
White	247	5.7	11,119	108,250
African American	284	6	259	2,683
Other/unknown	238	5.3	817	7,898
Basis of Eligibility^c				
Aged	232	5.6	11,294	109,126
Disabled	416	7.1	901	9,705
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 Washington, released by CMS in 06/2005. 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 7,439 beneficiaries who were in nursing facilities for part of their enrollment and their 67,400 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, WASHINGTON, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total # of Rx				Total Rx \$		Users		
	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	No.	As % of Dual All-Year NF Residents	No. of Bene Mos		
Anti-infective Agents	0.4	0.2	0.0	0.2	\$18	\$16	\$0	\$2	\$40	\$66	\$65	\$10	36,350	\$1,448,310	8,047	66.0 %	82,339
Biologics	0.1	0.0	0.0	0.1	5	1	0	4	45	16	0	66	1,021	45,837	875	7.2	9,600
Antineoplastic Agents	0.6	0.2	0.2	0.2	103	54	37	12	169	264	158	70	3,142	532,241	529	4.3	5,176
Endocrine/Metabolic Drugs	1.2	0.5	0.1	0.6	33	25	1	7	27	47	17	11	67,171	1,800,179	5,308	43.5	55,179
Cardiovascular Agents	1.9	0.6	0.1	1.2	41	23	2	16	22	40	20	14	138,699	3,091,475	7,313	60.0	74,816
Respiratory Agents	0.7	0.3	0.0	0.4	32	19	0	13	47	58	21	37	25,056	1,171,832	3,505	28.7	36,207
Gastrointestinal Agents	0.9	0.4	0.0	0.5	51	40	1	11	55	104	56	20	49,312	2,705,192	5,031	41.3	52,634
Genitourinary Agents	0.6	0.4	0.0	0.2	28	23	0	5	46	61	39	22	16,329	751,343	2,498	20.5	26,554
CNS Drugs	1.5	0.9	0.0	0.5	100	84	4	12	68	93	82	23	121,855	8,319,917	8,146	66.8	83,365
Stimulants/Anti-obesity/Anorexia	0.8	0.0	0.0	0.8	21	2	0	19	25	59	15	24	696	17,712	83	0.7	836
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	104	104	0	0	126	126	0	18	4,379	551,322	524	4.3	5,277
Analgesics and Anesthetics	1.1	0.6	0.1	0.5	57	47	4	6	52	85	56	12	70,080	3,617,076	6,537	53.6	63,820
Neuromuscular Agents	1.3	0.5	0.1	0.7	65	42	5	18	52	84	45	28	50,124	2,584,508	3,753	30.8	39,918
Nutritional Products	0.7	0.0	0.1	0.6	11	0	2	9	14	16	20	13	25,955	367,616	3,394	27.8	34,631
Hematological Agents	1.1	0.2	0.2	0.7	41	30	4	8	39	164	17	12	28,311	1,102,499	2,662	21.8	26,782
Topical Products	0.5	0.2	0.0	0.3	16	9	1	5	31	54	34	18	35,841	1,120,951	6,644	54.5	71,056
Miscellaneous Products	0.3	0.1	0.0	0.2	14	8	0	7	54	128	73	32	1,422	77,099	554	4.5	5,388
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	4	0	0	0	15	0	0	0	1,650	25,204	642	5.3	6,700
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.	677,393	29,330,313	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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 7,439 beneficiaries who were in nursing facilities for part of their enrollment and their 67,400 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 Washington, 0.8 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, WASHINGTON, 2001

Top 10 Drug Groups in Nursing Facilities	Users				Among Users		
	Total Medicaid Rx \$	No. of Users	As % of All-Year NF Residents	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$3,981,989	3,981	32.6 %	42,017	0.8	\$116	\$95
ANTIDEPRESSANTS	3,648,755	7,332	60.1	77,340	0.8	56	47
ANALGESICS - Narcotic	2,605,097	6,771	55.5	66,209	0.8	51	39
ULCER DRUGS	2,421,108	4,448	36.5	47,422	0.8	66	51
ANTICONVULSANT	1,753,513	2,983	24.5	32,207	1.0	55	54
ANTIHYPERTENSIVE	1,001,283	3,376	27.7	35,524	0.9	32	28
ANTIDIABETIC	984,321	3,061	25.1	31,908	0.9	35	31
ANALGESICS - ANTI-INFLAMMATORY	954,596	2,027	16.6	21,631	0.7	66	44
ANTIASTHMATIC	839,627	3,574	29.3	36,898	0.5	50	23
DERMATOLOGICAL	736,356	8,325	68.3	91,492	0.3	31	8
Total	18,926,645	45,878		482,648	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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 7,439 beneficiaries who were in nursing facilities for part of their enrollment and their 67,400 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, WASHINGTON, 2001

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS			
	No. of Rx	Rx-\$	No. of Users	Mean No. of Rx	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx-\$	No. of Users	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx
All	334,100	\$18,926,645	3,981	32.6 %	42,017	0.8	\$95	7,332	60.1 %	77,340	0.8	\$47
Female	232,077	13,016,678	2,734	31.9	29,251	0.8	91	5,235	61.1	55,789	0.8	47
Disabled	16,673	1,138,566	143	34.3	1,632	0.9	144	292	70.0	3,271	0.9	59
64 or younger	16,637	1,137,154	142	34.4	1,629	0.9	144	290	70.2	3,265	0.9	60
65-74	36	1,412	1	25.0	3	1.0	6	2	50.0	6	1.0	43
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	215,404	11,878,112	2,591	31.8	27,619	0.8	88	4,943	60.6	52,518	0.8	46
64 or younger	28	3,051	1	33.3	12	1.2	171	1	33.3	12	1.1	83
65-74	31,507	1,968,706	337	42.6	3,661	1.0	132	568	71.7	6,148	0.9	56
75-84	78,771	4,357,720	985	36.4	10,587	0.8	90	1,706	63.1	18,104	0.8	46
85 and older	105,098	5,548,635	1,268	27.2	13,359	0.7	75	2,668	57.3	28,254	0.8	44
Male	102,023	5,909,967	1,247	34.4	12,766	0.9	103	2,097	57.8	21,551	0.9	48
Disabled	20,193	1,493,237	213	44.0	2,353	1.0	161	325	67.1	3,577	1.0	63
64 or younger	20,185	1,493,009	213	44.3	2,353	1.0	161	325	67.6	3,577	1.0	63
65-74	8	228	0	0.0	0	0.0	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
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	81,830	4,416,730	1,034	32.9	10,413	0.8	90	1,772	56.4	17,974	0.8	45
64 or younger	13	820	0	0.0	0	0.0	0	1	100.0	12	1.0	68
65-74	21,596	1,310,025	257	41.2	2,706	0.9	114	402	64.4	4,213	0.8	48
75-84	36,790	1,876,613	449	33.5	4,522	0.8	80	786	58.6	8,097	0.9	45
85 and older	23,431	1,229,272	328	27.9	3,185	0.8	83	583	49.7	5,652	0.8	44
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 Washington, released by CMS in 06/2005. 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 7,439 beneficiaries who were in nursing facilities for part of their enrollment and their 67,400 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, WASHINGTON, 2001

Beneficiary Characteristics	ANALGESICS - Narcotic						ULCER DRUGS						ANTICONVULSANT					
	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	6,771	55.5 %	0.8	66,209	0.8	\$39	4,448	36.5 %	0.8	47,422	0.8	\$51	2,983	24.5 %	1.0	32,207	1.0	\$54
Female	4,885	57.0	0.8	48,330	0.8	42	3,050	35.6	0.8	32,801	0.8	50	1,892	22.1	20,484	1.0	48	
Disabled	235	56.4	1.0	2,587	1.0	62	165	39.6	0.8	1,890	0.8	60	244	58.5	2,848	1.0	70	
64 or younger	232	56.2	1.0	2,582	1.0	62	163	39.5	0.8	1,887	0.8	60	242	58.6	2,845	1.0	70	
65-74	3	75.0	1.4	5	1.4	17	2	50.0	1.0	3	1.0	52	2	50.0	3	0.7	43	
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	
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	
Other Eligibles	4,650	57.0	0.8	45,743	0.8	40	2,885	35.4	0.8	30,911	0.8	50	1,648	20.2	17,636	0.9	45	
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	
65-74	463	58.5	0.9	4,779	0.9	53	329	41.5	0.8	3,614	0.8	53	333	42.0	3,693	1.1	65	
75-84	1,586	58.7	0.8	15,745	0.8	40	979	36.2	0.8	10,425	0.8	50	690	25.5	7,358	0.9	43	
85 and older	2,601	55.9	0.7	25,219	0.7	38	1,577	33.9	0.8	16,872	0.8	49	625	13.4	6,585	0.9	36	
Male	1,886	52.0	0.7	17,879	0.7	34	1,398	38.6	0.8	14,621	0.8	53	1,091	30.1	11,723	1.0	65	
Disabled	250	51.7	1.0	2,670	1.0	53	217	44.8	0.8	2,399	0.8	66	347	71.7	3,962	1.1	91	
64 or younger	247	51.4	1.0	2,667	1.0	53	217	45.1	0.8	2,399	0.8	66	346	71.9	3,961	1.1	91	
65-74	3	100.0	1.7	3	1.7	49	0	0.0	0.0	0	0.0	0	1	33.3	1	1.0	9	
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	
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	
Other Eligibles	1,636	52.1	0.7	15,209	0.7	30	1,181	37.6	0.8	12,222	0.8	50	744	23.7	7,761	1.0	52	
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	
65-74	321	51.4	0.9	3,075	0.9	48	272	43.6	0.8	2,837	0.8	57	261	41.8	2,820	1.1	62	
75-84	704	52.5	0.7	6,720	0.7	30	521	38.8	0.8	5,407	0.8	50	309	23.0	3,188	1.0	48	
85 and older	611	52.0	0.6	5,414	0.6	22	388	33.0	0.7	3,978	0.7	47	174	14.8	1,753	0.9	44	
Unknown	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 Washington, released by CMS in 06/2005. 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 7,439 beneficiaries who were in nursing facilities for part of their enrollment and their 67,400 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

d. The top 10 drug groups were determined based on total 2001 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE D.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2001

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTI-DIABETIC					ANALGESICS - ANTI-INFLAMMATORY						
	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	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean No. of Rx
All	3,376	35,524	0.9	\$28	0.9	3,061	25.1 %	31,908	0.9	\$31	2,027	16.6 %	21,631	0.7	\$44		
Female	2,306	24,405	0.9	28	0.9	2,084	24.3	22,015	0.9	31	1,509	17.6	16,277	0.7	45		
Disabled	79	873	0.9	31	0.9	128	30.7	1,440	0.9	44	81	19.4	924	0.5	44		
64 or younger	77	870	0.9	31	0.9	127	30.8	1,438	0.9	44	80	19.4	921	0.5	44		
65-74	2	3	0.7	39	1.0	1	25.0	2	1.0	26	1	25.0	3	1.0	82		
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		
Other Eligibles	2,227	23,532	0.9	28	0.9	1,956	24.0	20,575	0.9	30	1,428	17.5	15,353	0.7	46		
64 or younger	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
65-74	265	2,890	0.9	31	0.9	318	40.2	3,478	1.0	37	156	19.7	1,755	0.7	47		
75-84	784	8,263	0.9	28	0.9	821	30.4	8,650	0.9	30	485	17.9	5,220	0.7	51		
85 and older	1,178	12,379	0.9	27	0.9	817	17.6	8,447	0.8	26	787	16.9	8,378	0.7	42		
Male	1,070	11,119	0.9	28	0.9	977	27.0	9,893	0.9	31	518	14.3	5,354	0.7	40		
Disabled	135	1,535	0.9	29	0.9	101	20.9	1,069	0.9	40	62	12.8	663	0.7	47		
64 or younger	135	1,535	0.9	29	0.9	100	20.8	1,068	0.9	40	62	12.9	663	0.7	47		
65-74	0	0	0.0	0	0.0	1	33.3	1	2.0	73	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		
85 and older	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
Other Eligibles	935	9,584	0.9	28	0.9	876	27.9	8,824	0.9	30	456	14.5	4,691	0.7	39		
64 or younger	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
65-74	201	2,085	0.9	31	0.9	227	36.4	2,252	0.9	35	92	14.7	940	0.7	39		
75-84	433	4,509	0.9	28	0.9	423	31.5	4,307	0.9	29	197	14.7	2,049	0.7	38		
85 and older	301	2,990	0.8	27	0.8	226	19.3	2,265	0.9	28	167	14.2	1,702	0.6	41		
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 Washington, released by CMS in 06/2005. 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 7,439 beneficiaries who were in nursing facilities for part of their enrollment and their 67,400 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).
- Benefit 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, WASHINGTON, 2001

Beneficiary Characteristics	ANTI-ASTHMATIC					DERMATOLOGICAL						
	Users as %		Users as %		Mean Rx \$	Users as %		Users as %		Mean Rx \$		
	No. of Users	Residents	No. of Users	Residents		No. of Users	Residents	No. of Users	Residents			
All	3,574	29.3 %	36,998	0.5	\$23	8,325	68.3 %	91,492	0.3	\$8	12,195	118,831
Female	2,350	27.4	24,673	0.4	21	5,556	64.8	61,540	0.3	8	8,570	85,017
Disabled	120	28.8	1,326	0.5	29	462	110.8	5,303	0.3	12	417	4,579
64 or younger	117	28.3	1,320	0.5	29	459	111.1	5,295	0.3	12	413	4,572
65-74	3	75.0	6	0.7	30	3	75.0	8	0.5	22	4	7
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	2,230	27.4	23,347	0.4	21	5,094	62.5	56,237	0.3	7	8,153	80,438
64 or younger	0	0.0	0	0.0	0	1	33.3	12	0.1	1	3	36
65-74	300	37.9	3,231	0.5	28	653	82.4	7,306	0.3	10	792	8,142
75-84	834	30.9	8,700	0.5	23	1,690	62.5	18,713	0.3	8	2,703	26,603
85 and older	1,096	23.5	11,416	0.4	17	2,750	59.1	30,206	0.2	6	4,655	45,657
Male	1,224	33.8	12,225	0.5	26	2,769	76.4	29,952	0.3	9	3,625	33,814
Disabled	152	31.4	1,650	0.5	24	527	108.9	6,122	0.3	12	484	5,126
64 or younger	152	31.6	1,650	0.5	24	527	109.6	6,122	0.3	12	481	5,123
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	3
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	1,072	34.1	10,575	0.5	26	2,242	71.4	23,830	0.3	8	3,141	28,688
64 or younger	0	0.0	0	0.0	0	1	100.0	12	0.1	1	1	12
65-74	253	40.5	2,513	0.6	38	511	81.9	5,488	0.3	8	624	6,007
75-84	475	35.4	4,662	0.5	25	1,006	75.0	10,723	0.3	8	1,342	12,349
85 and older	344	29.3	3,400	0.4	19	724	61.7	7,607	0.3	8	1,174	10,320
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 Washington, released by CMS in 06/2005. 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 7,439 beneficiaries who were in nursing facilities for part of their enrollment and their 67,400 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}
 WASHINGTON, 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
			6.2	6.2					
All	60,401	58.4 %	6.2	6.2	642,304	\$7,633,314	\$12	3.1 %	103,511
Age									
5 and younger	7	100.0	16.4	115	220	1,541	13	5.0	7
6-14	14	77.8	16.4	295	288	5,178	18	3.6	18
15-20	70	41.4	4.1	693	81	13,611	20	3.8	169
21-44	9,192	46.8	4.1	80,160	68	1,327,084	17	2.4	19,629
45-64	13,623	59.2	6.6	151,432	92	2,107,855	14	2.8	22,998
65-74	13,215	60.0	6.5	142,474	70	1,545,802	11	3.3	22,014
75-84	13,500	62.5	7.0	151,304	70	1,517,879	10	3.6	21,603
85 and older	10,780	63.1	6.8	115,831	65	1,114,364	10	4.1	17,073
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	37,467	61.9	6.8	409,666	69	4,174,778	10	3.6	60,550
Disabled	22,730	53.6	5.5	231,577	81	3,445,387	15	2.7	42,371
Adults	196	34.1	1.7	966	19	11,140	12	2.1	575
Children	8	53.3	6.3	95	134	2,009	21	5.2	15
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Gender									
Female	40,359	62.8	7.0	447,227	82	5,299,200	12	3.4	64,235
Male	20,042	51.0	5.0	195,077	59	2,334,114	12	2.6	39,274
Unknown	0	0.0	0.0	0	0	0	0	0.0	2
Race									
White	47,247	57.6	6.2	506,852	76	6,275,880	12	3.1	82,065
African American	2,686	58.1	5.9	27,297	63	292,680	11	2.9	4,625
Other/unknown	10,468	62.2	6.4	108,155	63	1,064,754	10	3.5	16,821
Use of Nursing Facilities^d									
Entire year	7,471	61.3	5.0	60,389	68	825,909	14	2.8	12,195
Part year	5,409	72.7	7.3	54,477	85	635,620	12	3.5	7,439
None	47,521	56.7	6.3	527,438	74	6,171,785	12	3.1	83,877
Maintenance Assistance Status									
Cash	24,827	54.8	5.3	240,893	63	2,878,434	12	2.8	45,339
Medically needy	6,272	54.2	4.7	54,183	61	701,209	13	2.2	11,563
Poverty related	1,422	39.8	2.8	9,836	70	249,819	25	4.3	3,576
Other/unknown	27,880	64.8	7.8	337,392	88	3,803,852	11	3.6	43,033

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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}
 WASHINGTON, 2001

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazapine \$ per Bene Mo.	No. of Bene Mos
	0.6	\$7	\$12	\$0	\$2	1,068,044
Age						
5 and younger	1.6	21	13	0	1	74
6-14	1.5	27	18	0	0	193
15-20	0.4	8	20	0	2	1,690
21-44	0.4	6	17	0	3	210,546
45-64	0.6	9	14	0	3	245,367
65-74	0.6	7	11	0	2	230,592
75-84	0.7	7	10	0	2	217,246
85 and older	0.7	7	10	0	1	162,336
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.7	7	10	0	2	609,401
Disabled	0.5	8	15	0	3	454,544
Adults	0.2	3	12	0	1	3,965
Children	0.7	15	21	0	0	134
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.7	8	12	0	2	668,265
Male	0.5	6	12	0	2	399,755
Unknown	0.0	0	0	0	0	24
Race						
White	0.6	7	12	0	2	842,843
African American	0.6	6	11	0	1	47,843
Other/unknown	0.6	6	10	0	1	177,358
Use of Nursing Facilities^d						
Entire year	0.5	7	14	0	2	118,831
Part year	0.8	9	12	0	3	67,400
None	0.6	7	12	0	2	881,813
Maintenance Assistance Status						
Cash	0.5	6	12	0	2	494,727
Medically needy	0.5	7	13	0	2	107,874
Poverty related	0.3	7	25	0	2	36,750
Other/unknown	0.8	9	11	0	2	428,693

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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}
 WASHINGTON, 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	94,957	\$80	\$7,633,314	100.0 %	642,304	\$12	100.0 %
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	46	40	1,836	0.0	107	17	0.0
Cough and cold medications	12,065	64	777,654	10.2	35,220	22	5.5
Vitamins and minerals	17,910	109	1,943,686	25.5	127,204	15	19.8
Non-prescription drugs	40,933	55	2,252,212	29.5	337,533	7	52.6
Barbiturates	864	62	53,939	0.7	8,269	7	1.3
Benzodiazepines	20,051	112	2,249,046	29.5	123,890	18	19.3
Other Part D Excl Rx Drugs	3,088	115	354,941	4.6	10,081	35	1.6

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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 1
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES^{a, b}
 WASHINGTON, 2001

Total Number of Dual Eligible Beneficiaries 103,511
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$245,710,130
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$2,374

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	11,850	11.4 %	\$0	0.0 %
1-500	22,315	21.6	4,475,754	1.8
501-1,000	12,423	12.0	9,178,551	3.7
1,001-1,500	9,537	9.2	11,842,644	4.8
1,501-2,000	7,727	7.5	13,468,545	5.5
2,001-2,500	6,426	6.2	14,406,876	5.9
2,501-3,000	5,314	5.1	14,575,225	5.9
3,001-3,500	4,475	4.3	14,502,853	5.9
3,501-4,000	3,683	3.6	13,777,062	5.6
4,001-4,500	3,099	3.0	13,163,362	5.4
4,501-5,000	2,534	2.4	12,017,074	4.9
5,001-5,500	2,099	2.0	11,003,876	4.5
5,501-6,000	1,712	1.7	9,827,672	4.0
6,001-6,500	1,481	1.4	9,251,089	3.8
6,501-7,000	1,218	1.2	8,222,961	3.3
7,001-7,500	1,054	1.0	7,630,763	3.1
7,501-8,000	915	0.9	7,079,175	2.9
8,001-8,500	785	0.8	6,476,758	2.6
8,501-9,000	608	0.6	5,315,985	2.2
9,001-9,500	493	0.5	4,554,406	1.9
9,501-10,000	447	0.4	4,356,724	1.8
10,001+	3,316	3.2	50,582,775	20.6

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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 1A
MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65^{a, b, c}
WASHINGTON, 2001

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65 42,162
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65 \$128,662,661
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65 \$3,052

Annual Pharmacy Reimbursement per Beneficiary	Percent of Disabled Dual Beneficiaries, Age < 65		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
	Number of Beneficiaries	Age < 65		
\$0	5,527	13.1 %	0	0.0 %
1-500	8,578	20.3	1,603,245	1.2
501-1,000	4,053	9.6	2,986,694	2.3
1,001-1,500	3,040	7.2	3,772,141	2.9
1,501-2,000	2,521	6.0	4,400,337	3.4
2,001-2,500	2,225	5.3	4,993,785	3.9
2,501-3,000	1,927	4.6	5,289,639	4.1
3,001-3,500	1,702	4.0	5,522,139	4.3
3,501-4,000	1,454	3.4	5,439,365	4.2
4,001-4,500	1,364	3.2	5,794,648	4.5
4,501-5,000	1,158	2.7	5,493,603	4.3
5,001-5,500	973	2.3	5,103,214	4.0
5,501-6,000	871	2.1	5,001,361	3.9
6,001-6,500	788	1.9	4,923,551	3.8
6,501-7,000	660	1.6	4,456,928	3.5
7,001-7,500	586	1.4	4,246,144	3.3
7,501-8,000	567	1.3	4,388,185	3.4
8,001-8,500	481	1.1	3,970,620	3.1
8,501-9,000	399	0.9	3,487,380	2.7
9,001-9,500	326	0.8	3,013,004	2.3
9,501-10,000	318	0.8	3,099,134	2.4
10,001+	2,644	6.3	41,677,544	32.4

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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.

c. This table is limited to dual eligible beneficiaries who were under age 65 and also indicated as disabled in the MAX files. Therefore, dual eligible beneficiaries under age 65 in "adults" or "children" basis-of-eligibility categories in Table D.2 are excluded because they were not classified as disabled in the MAX files. Disabled dual eligible beneficiaries age 65 and older are included in Supplemental Tables 1B through 1E, depending on their age.

SUPPLEMENTAL TABLE 1B
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER^{a, b}
 WASHINGTON, 2001

Total Number of Dual Eligible Beneficiaries, Age 65+ 60,690
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+ \$116,262,963
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+ \$1,916

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	6,142	10.1%	0	0.0%
1-500	13,523	22.3	2,837,674	2.4
501-1,000	8,285	13.7	6,133,326	5.3
1,001-1,500	6,457	10.6	8,021,901	6.9
1,501-2,000	5,192	8.6	9,043,253	7.8
2,001-2,500	4,179	6.9	9,364,242	8.1
2,501-3,000	3,369	5.6	9,235,355	7.9
3,001-3,500	2,757	4.5	8,928,737	7.7
3,501-4,000	2,218	3.7	8,296,066	7.1
4,001-4,500	1,727	2.8	7,334,707	6.3
4,501-5,000	1,367	2.3	6,481,350	5.6
5,001-5,500	1,122	1.8	5,879,351	5.1
5,501-6,000	837	1.4	4,803,549	4.1
6,001-6,500	686	1.1	4,284,194	3.7
6,501-7,000	556	0.9	3,752,488	3.2
7,001-7,500	465	0.8	3,362,914	2.9
7,501-8,000	344	0.6	2,660,087	2.3
8,001-8,500	302	0.5	2,489,406	2.1
8,501-9,000	206	0.3	1,802,113	1.6
9,001-9,500	166	0.3	1,532,046	1.3
9,501-10,000	128	0.2	1,247,839	1.1
10,001+	662	1.1	8,772,365	7.5

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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 1C
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74 ^{a, b}
 WASHINGTON, 2001

Total Number of Dual Eligible Beneficiaries, Age 65-74 22,014
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74 \$46,775,410
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74 \$2,125

Annual Pharmacy Reimbursement per Beneficiary \$0	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74 12.3 %	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement 0.0 %
1-500	2,715		0	
501-1,000	4,408	20.0	895,644	1.9
1,001-1,500	2,749	12.5	2,035,223	4.4
1,501-2,000	2,177	9.9	2,702,348	5.8
2,001-2,500	1,750	7.9	3,044,937	6.5
2,501-3,000	1,446	6.6	3,248,887	6.9
3,001-3,500	1,153	5.2	3,157,224	6.7
3,501-4,000	1,019	4.6	3,299,588	7.1
4,001-4,500	812	3.7	3,033,828	6.5
4,501-5,000	655	3.0	2,777,412	5.9
5,001-5,500	573	2.6	2,719,682	5.8
5,501-6,000	486	2.2	2,545,452	5.4
6,001-6,500	355	1.6	2,037,587	4.4
6,501-7,000	307	1.4	1,919,568	4.1
7,001-7,500	244	1.1	1,644,703	3.5
7,501-8,000	211	1.0	1,525,017	3.3
8,001-8,500	150	0.7	1,161,455	2.5
8,501-9,000	136	0.6	1,119,862	2.4
9,001-9,500	112	0.5	979,500	2.1
9,501-10,000	94	0.4	866,295	1.9
10,001+	64	0.3	623,648	1.3
	398	1.8	5,437,550	11.6

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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 1D

MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84^{a, b}
WASHINGTON, 2001

Total Number of Dual Eligible Beneficiaries, Age 75-84 21,603
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$42,229,997
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$1,955

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	2,134	9.9 %	0	0.0 %
1-500	4,454	20.6	942,415	2.2
501-1,000	2,903	13.4	2,151,448	5.1
1,001-1,500	2,300	10.6	2,862,396	6.8
1,501-2,000	1,969	9.1	3,438,570	8.1
2,001-2,500	1,526	7.1	3,414,208	8.1
2,501-3,000	1,315	6.1	3,610,338	8.5
3,001-3,500	1,060	4.9	3,433,889	8.1
3,501-4,000	839	3.9	3,137,147	7.4
4,001-4,500	676	3.1	2,874,861	6.8
4,501-5,000	497	2.3	2,356,235	5.6
5,001-5,500	384	1.8	2,011,339	4.8
5,501-6,000	322	1.5	1,848,103	4.4
6,001-6,500	244	1.1	1,522,042	3.6
6,501-7,000	195	0.9	1,316,527	3.1
7,001-7,500	158	0.7	1,141,698	2.7
7,501-8,000	140	0.6	1,082,042	2.6
8,001-8,500	127	0.6	1,046,835	2.5
8,501-9,000	62	0.3	542,855	1.3
9,001-9,500	49	0.2	455,048	1.1
9,501-10,000	51	0.2	496,995	1.2
10,001+	198	0.9	2,545,006	6.0

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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^{a, b}
 WASHINGTON, 2001

Total Number of Dual Eligible Beneficiaries, Age 85+ 17,073
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$27,257,556
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,597

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,293	7.6 %	0	0.0 %
1-500	4,661	27.3	999,615	3.7
501-1,000	2,633	15.4	1,946,655	7.1
1,001-1,500	1,980	11.6	2,457,157	9.0
1,501-2,000	1,473	8.6	2,559,746	9.4
2,001-2,500	1,207	7.1	2,701,147	9.9
2,501-3,000	901	5.3	2,467,793	9.1
3,001-3,500	678	4.0	2,195,260	8.1
3,501-4,000	567	3.3	2,125,091	7.8
4,001-4,500	396	2.3	1,682,434	6.2
4,501-5,000	297	1.7	1,405,433	5.2
5,001-5,500	252	1.5	1,322,560	4.9
5,501-6,000	160	0.9	917,859	3.4
6,001-6,500	135	0.8	842,584	3.1
6,501-7,000	117	0.7	791,258	2.9
7,001-7,500	96	0.6	696,199	2.6
7,501-8,000	54	0.3	416,590	1.5
8,001-8,500	39	0.2	322,709	1.2
8,501-9,000	32	0.2	279,758	1.0
9,001-9,500	23	0.1	210,703	0.8
9,501-10,000	13	0.1	127,196	0.5
10,001+	66	0.4	789,809	2.9

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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, WASHINGTON, 2001

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	103,684	60,588	42,382	699	15	1,071,872	610,246	455,481	6,006	139	0
Age											
5 and younger	8	0	8	0	0	79	0	79	0	0	0
6-14	18	0	15	0	3	204	0	168	0	36	0
15-20	169	0	157	1	11	1,701	0	1,608	2	91	0
21-44	19,710	2	19,222	485	1	212,531	22	208,226	4,271	12	0
45-64	23,050	88	22,771	191	0	246,320	936	243,785	1,599	0	0
65-74	22,022	21,797	204	21	0	230,787	229,107	1,558	122	0	0
75-84	21,621	21,615	5	1	0	217,646	217,577	57	12	0	0
85 and older	17,086	17,086	0	0	0	162,604	162,604	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	64,343	42,996	20,936	405	6	670,707	438,353	228,757	3,532	65	0
Male	39,339	17,592	21,444	294	9	401,141	171,893	226,700	2,474	74	0
Unknown	2	0	2	0	0	24	0	24	0	0	0
Race											
White	82,200	46,246	35,426	517	11	845,874	458,564	382,657	4,554	99	0
African American	4,649	1,867	2,729	53	0	48,284	19,525	28,314	445	0	0
Other/unknown	16,835	12,475	4,227	129	4	177,714	132,157	44,510	1,007	40	0
Use of Nursing Facilities^c											
Entire year	12,195	11,294	901	0	0	118,831	109,126	9,705	0	0	0
Part year	7,440	6,619	821	0	0	67,471	59,198	8,273	0	0	0
None	84,049	42,675	40,660	699	15	885,570	441,922	437,503	6,006	139	0
Maintenance Assistance Status											
Cash	45,398	21,083	24,127	188	0	496,380	234,009	260,610	1,761	0	0
Medically needy	11,563	5,784	5,778	1	0	107,974	51,938	56,031	5	0	0
Poverty related	3,576	1,525	1,940	105	6	36,845	15,225	20,640	940	40	0
Other/unknown	43,147	32,196	10,537	405	9	430,673	309,074	118,200	3,300	99	0
Dual Status^d											
Full dual, all year	97,115	57,726	38,694	680	15	1,000,007	579,312	414,752	5,804	139	0
Full dual, part year	6,569	2,862	3,688	19	0	71,865	30,934	40,729	202	0	0
Managed Care Status											
FFS all year	103,085	60,476	42,181	414	14	1,065,581	608,985	453,304	3,165	127	0
FFS part year, with Rx claims	314	27	169	117	1	3,362	314	1,851	1,185	12	0
FFS part year, no Rx claims	112	47	21	44	0	1,136	513	211	412	0	0
MC all year, with Rx claims	35	2	6	27	0	372	24	72	276	0	0
MC all year, no Rx claims	138	36	5	97	0	1,421	410	43	968	0	0

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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, WASHINGTON, 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
All	103,684	1,071,872	103,511	1,068,044	0	3,828
FFS all year	103,085	1,065,581	103,085	1,065,581	0	0
FFS part year, with Rx claims	314	3,362	314	1,967	0	1,395
FFS part year, with no Rx claims	112	1,136	112	496	0	640
MC all year, with Rx claims	35	372	0	0	0	372
MC all year, with no Rx claims	138	1,421	0	0	0	1,421

Source: Data for this table are from the MAX 2001 file for Washington, released by CMS in 06/2005. 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.