

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

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TABLE ND.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

Beneficiary Characteristics	No. of Benefes							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown		
All	152,902	4,714	28,841	42,936	76,364	47	624,626	48,859	296,871	90,659	188,028	209		
Age														
5 and younger	27,072	0	0	3	27,069	0	62,000	0	0	5	61,995	0		
6-14	30,625	0	5	7	30,613	0	78,018	0	57	14	77,947	0		
15-20	18,472	1	752	1,404	16,314	1	52,398	6	6,477	3,251	42,661	3		
21-44	52,042	0	12,596	37,116	2,318	12	211,881	0	128,780	77,716	5,339	46		
45-64	19,865	2	15,392	4,393	45	33	170,429	12	160,552	9,630	79	156		
65-74	2,771	2,663	96	11	0	1	28,953	27,906	1,005	38	0	4		
75-84	1,480	1,479	0	1	0	0	15,384	15,383	0	1	0	0		
85 and older	570	569	0	1	0	0	5,556	5,552	0	4	0	0		
Unknown	5	0	0	0	5	7	0	0	0	0	7	0		
Gender														
Female	91,165	3,416	16,269	32,802	38,631	47	370,651	35,764	171,398	69,321	93,959	209		
Male	61,737	1,298	12,572	10,134	37,733	0	253,975	13,095	125,473	21,338	94,069	0		
Unknown	0	0	0	0	0	0	0	0	0	0	0	0		
Race														
White	67,082	2,026	13,323	20,437	31,259	37	283,311	20,787	137,866	43,888	80,600	170		
African American	33,360	793	6,459	8,505	17,598	5	134,947	8,134	65,819	18,253	42,719	22		
Other/unknown	52,460	1,895	9,059	13,994	27,507	5	206,368	19,938	93,186	28,518	64,709	17		
Use of Nursing Facilities^c														
Entire year	1,305	496	804	0	5	0	13,628	5,079	8,495	0	54	0		
Part year	1,219	241	955	15	8	0	12,311	2,408	9,795	59	49	0		
None	150,378	3,977	27,082	42,921	76,351	47	598,687	41,372	278,581	90,600	187,925	209		
Maintenance Assistance Status														
Cash	34,260	981	10,263	8,312	14,704	0	174,639	11,243	112,959	17,891	32,546	0		
Medically needy	13,108	1,062	9,995	689	1,362	0	119,864	10,968	101,729	2,238	4,929	0		
Poverty-related	26,280	29	27	4,992	21,185	47	61,212	246	169	9,803	50,785	209		
Other/unknown	79,254	2,642	8,556	28,943	39,113	0	268,911	26,402	82,014	60,727	99,768	0		
Managed Care Status														
FFS all year	55,326	4,707	28,044	8,668	13,860	47	408,282	48,810	292,043	19,299	47,921	209		
FFS part year, with Rx claims	17,253	6	641	7,352	9,254	0	45,345	43	4,101	17,654	23,547	0		
FFS part year, no Rx claims	80,323	1	156	26,916	53,250	0	170,999	6	727	53,706	116,560	0		

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

- a. Table ND.2 includes the beneficiaries represented by Cell K 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.

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 ND.3

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a,b}
 NONDUAL BENEFICIARIES, CONNECTICUT, 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 Benefes
All	31.5 %	9.0	\$620	\$69	\$4,825	12.8 %	152,902
Age							
5 and younger	14.1	0.4	19	46	1,961	1.0	27,072
6-14	13.1	0.7	44	60	1,228	3.6	30,625
15-20	20.6	1.6	106	64	2,182	4.8	18,472
21-44	34.3	8.9	689	77	5,892	11.7	52,042
45-64	74.3	35.3	2,395	68	11,904	20.1	19,865
65-74	82.4	29.3	1,625	55	11,121	14.6	2,771
75-84	82.0	28.9	1,499	52	13,411	11.2	1,480
85 and older	80.0	29.9	1,326	44	22,781	5.8	570
Unknown	0.0	0.0	0	0	710	0.0	5
Basis of Eligibility^c							
Aged	82.0	29.3	1,546	53	13,257	11.7	4,714
Disabled	85.9	39.8	2,876	72	16,968	16.9	28,841
Adults	19.3	0.7	34	49	1,466	2.3	42,936
Children	14.7	0.7	40	57	1,607	2.5	76,364
Unknown	55.3	5.0	339	68	5,743	5.9	47
Gender							
Female	33.1	9.7	629	65	4,579	13.7	91,165
Male	29.1	7.8	607	78	5,189	11.7	61,737
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	33.0	10.7	719	67	5,931	12.1	67,082
African American	30.6	8.3	618	74	4,624	13.4	33,360
Other/unknown	30.2	7.1	493	69	3,539	13.9	52,460
Use of Nursing Facilities^d							
Entire year	93.6	73.7	4,685	64	67,946	6.9	1,305
Part year	96.6	75.5	5,569	74	54,431	10.2	1,219
None	30.4	7.9	544	69	3,875	14.0	150,378
Maintenance Assistance Status							
Cash	42.8	14.6	1,031	71	6,301	16.4	34,260
Medically needy	76.7	31.8	2,216	70	9,623	23.0	13,108
Poverty related	14.0	0.6	31	54	1,885	1.6	26,280
Other/unknown	24.9	5.5	373	67	4,368	8.5	79,254

Table ND3

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

- a. Table ND.3 includes beneficiaries represented by Cell K 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 ND.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:					Mean \$, All Services	Benes	Bene Mos	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less				More than 10
All	2.2	\$152	12.8 %	68.5 %	14.4 %	4.8 %	7.2 %	3.9 %	1.3 %	\$1,181	152,902	624,626
Age												
5 and younger	0.2	8	1.0	85.9	11.4	1.7	0.8	0.1	0.0	856	27,072	62,000
6-14	0.3	17	3.6	86.9	9.6	1.9	1.4	0.2	0.0	482	30,625	78,018
15-20	0.6	37	4.8	79.4	14.3	3.1	2.4	0.6	0.2	769	18,472	52,398
21-44	2.2	169	11.7	65.7	16.1	5.5	7.5	3.8	1.4	1,447	52,042	211,881
45-64	4.1	279	20.1	25.7	17.9	10.8	24.4	15.8	5.4	1,388	19,865	170,429
65-74	2.8	156	14.6	17.6	28.9	13.8	25.7	11.3	2.7	1,064	2,771	28,953
75-84	2.8	144	11.2	18.0	27.7	14.7	24.9	12.6	2.2	1,290	1,480	15,384
85 and older	3.1	136	5.8	20.0	20.9	12.1	29.3	15.3	2.5	2,337	570	5,556
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	507	5	7
Basis of Eligibility^c												
Aged	2.8	149	11.7	18.0	27.6	13.9	25.8	12.2	2.5	1,279	4,714	48,859
Disabled	3.9	279	16.9	14.1	23.6	12.6	26.8	16.9	6.0	1,648	28,841	296,871
Adults	0.3	16	2.3	80.7	12.5	3.4	2.6	0.6	0.1	694	42,936	90,659
Children	0.3	16	2.5	85.3	11.1	2.0	1.3	0.3	0.0	653	76,364	188,028
Unknown	1.1	76	5.9	44.7	29.8	8.5	14.9	0.0	2.1	1,291	47	209
Gender												
Female	2.4	155	13.7	66.9	14.8	5.1	7.7	4.2	1.4	1,126	91,165	370,651
Male	1.9	147	11.7	70.9	13.8	4.4	6.6	3.3	1.1	1,261	61,737	253,975
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	2.5	170	12.1	67.0	14.1	4.8	7.6	4.7	1.9	1,404	67,082	283,311
African American	2.1	153	13.4	69.4	14.4	4.6	6.8	3.6	1.1	1,143	33,360	134,947
Other/unknown	1.8	125	13.9	69.8	14.7	4.9	7.0	3.0	0.6	900	52,460	206,368
Use of Nursing Facilities^d												
Entire year	7.1	449	6.9	6.4	5.1	5.4	26.8	36.5	19.7	6,506	1,305	13,628
Part year	7.5	551	10.2	3.4	8.2	7.5	26.2	33.4	21.3	5,390	1,219	12,311
None	2.0	137	14.0	69.6	14.5	4.7	6.9	3.3	1.0	973	150,378	598,687
Maintenance Assistance Status												
Cash	2.9	202	16.4	57.2	17.6	6.6	10.5	6.1	2.1	1,236	34,260	174,639
Medically needy	3.5	242	23.0	23.3	23.1	11.7	24.0	13.6	4.2	1,052	13,108	119,864
Poverty related	0.2	13	1.6	86.0	10.9	1.8	1.2	0.2	0.0	809	26,280	61,212
Other/unknown	1.6	110	8.5	75.1	12.7	3.8	5.1	2.5	0.8	1,288	79,254	268,911

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

- a. Table ND.4 includes the beneficiaries represented by Cell K 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 ND.5

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$
All	2.2	\$152	1.1	\$120	0.1	\$9	1.0	\$22
		\$ per Rx		\$ per Rx		\$ per Rx		\$ per Rx
Age								
5 and younger	0.2	8	0.1	7	0.0	0	0.1	2
6-14	0.3	17	0.1	14	0.0	1	0.1	3
15-20	0.6	37	0.3	29	0.0	3	0.2	6
21-44	2.2	169	1.1	135	0.1	11	1.0	23
45-64	4.1	279	2.1	221	0.3	17	1.8	41
65-74	2.8	156	1.5	123	0.1	7	1.2	26
75-84	2.8	144	1.4	109	0.2	7	1.2	28
85 and older	3.1	136	1.3	97	0.3	8	1.5	30
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Basis of Eligibility^d								
Aged	2.8	149	1.4	115	0.2	7	1.2	27
Disabled	3.9	279	1.9	222	0.2	18	1.7	40
Adults	0.3	16	0.1	12	0.0	1	0.2	3
Children	0.3	16	0.1	13	0.0	1	0.1	3
Unknown	1.1	76	0.5	65	0.0	1	0.6	10
Gender								
Female	2.4	155	1.2	122	0.1	10	1.0	23
Male	1.9	147	0.9	117	0.1	9	0.8	21
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	2.5	170	1.2	130	0.2	13	1.1	27
African American	2.1	153	1.0	125	0.1	8	0.9	20
Other/unknown	1.8	125	1.0	102	0.1	6	0.8	17
Use of Nursing Facilities^e								
Entire year	7.1	449	3.1	337	0.6	31	3.4	81
Part year	7.5	551	3.4	443	0.5	27	3.5	81
None	2.0	137	1.0	108	0.1	9	0.9	20
Maintenance Assistance								
Status								
Cash	2.9	202	1.4	160	0.2	14	1.3	29
Medically needy	3.5	242	1.8	193	0.2	14	1.5	35
Poverty related	0.2	13	0.1	10	0.0	1	0.1	2
Other/unknown	1.6	110	0.8	87	0.1	7	0.7	17

Table ND5

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

- a. Table ND.5 includes the beneficiaries represented by Cell K 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 Connecticut, 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 (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 ND.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users						
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	No.	As % of All Benes	No. of Bene Mos			
														Generic	Brand-Name	Generic
Anti-infective Agents	0.5	0.3	0.0	0.2	\$68	\$1	\$3	\$146	\$219	\$104	\$18	95,467	\$13,923,174	23,847	15.6 %	205,931
Biologicals	0.1	0.1	0.0	0.0	32	32	0	220	250	0	22	531	116,605	365	0.2	3,595
Antineoplastic Agents	0.5	0.2	0.1	0.2	121	87	18	250	393	212	92	4,166	1,039,627	860	0.6	8,605
Endocrine/Metabolic Drugs	0.8	0.5	0.1	0.2	40	34	2	51	72	24	17	107,458	5,499,660	14,352	9.4	136,490
Cardiovascular Agents	1.3	0.6	0.0	0.6	57	40	2	44	64	47	23	214,467	9,356,968	15,896	10.4	163,974
Respiratory Agents	0.7	0.4	0.0	0.3	33	26	0	47	65	38	24	112,961	5,316,176	18,007	11.8	159,318
Gastrointestinal Agents	0.6	0.4	0.0	0.2	57	50	1	93	135	83	24	71,642	6,660,303	11,295	7.4	117,366
Genitourinary Agents	0.3	0.2	0.0	0.1	16	15	0	48	60	39	18	13,176	630,675	3,984	2.6	38,297
CNS Drugs	1.6	0.8	0.1	0.7	130	96	14	80	115	113	30	340,619	27,183,937	21,178	13.9	208,736
Stimulants/Anti-obesity/Anorexia	0.6	0.3	0.0	0.2	38	28	2	64	86	48	36	4,899	312,757	1,211	0.8	8,295
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	0.1	91	88	0	155	178	66	30	2,054	318,772	322	0.2	3,498
Analgesics and Anesthetics	0.7	0.3	0.1	0.4	45	34	4	64	124	74	17	138,744	8,841,296	20,994	13.7	198,237
Neuromuscular Agents	1.1	0.5	0.1	0.5	59	45	4	53	93	48	18	149,285	7,922,099	13,036	8.5	133,617
Nutritional Products	0.6	0.0	0.2	0.4	17	3	4	29	85	29	24	22,805	666,433	4,949	3.2	40,373
Hematological Agents	0.7	0.2	0.1	0.4	102	89	3	154	494	26	27	25,448	3,918,192	3,774	2.5	38,586
Topical Products	0.4	0.2	0.0	0.2	15	10	1	38	58	41	20	61,455	2,342,369	16,183	10.6	152,922
Miscellaneous Products	0.3	0.2	0.0	0.1	53	39	8	65	229	322	45	3,903	642,925	1,376	0.9	12,185
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	27	0	0	0	1,606	43,791	564	0.4	6,070
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.	1,370,686	94,735,759	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2001. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (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 Connecticut, 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 (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 ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

Top 10 Drug Groups	Users				Among Users		
	Total Medicaid Rx \$	No. As % of All Benes	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo	
ANTIPSYCHOTICS	\$16,150,576	12,605	8.2 %	134,153	0.9	\$130	\$120
ANTIVIRAL	10,005,618	5,254	3.4	54,122	0.5	354	185
ANTIDEPRESSANTS	8,126,369	20,328	13.3	205,537	0.7	60	40
ANTICONVULSANT	7,056,569	11,900	7.8	124,342	0.9	65	57
ULCER DRUGS	5,585,965	11,669	7.6	123,585	0.4	101	45
ANALGESICS - Narcotic	5,178,218	19,388	12.7	193,769	0.4	66	27
ANTIDIABETIC	4,028,725	10,319	6.7	109,130	0.6	58	37
ANTIASTHMATIC	3,138,354	16,143	10.6	150,670	0.4	49	21
ANTHYPERLIPIDEMIC	2,970,034	5,912	3.9	64,615	0.5	84	46
ANALGESICS - ANTI-INFLAMMATORY	2,870,000	16,777	11.0	169,781	0.3	58	17
Total	65,110,428	130,295		1,329,704	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

a. Table ND.7 includes the beneficiaries represented by Cell K 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.

TABLE ND.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}
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIVIRAL						
	No. of Rx	Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	748,052	\$65,110,428	12,605	8.2 %	134,153	0.9	\$120	5,254	3.4 %	54,122	0.5	\$185					
Female																	
Disabled	477,753	38,544,073	7,231	7.9	77,832	0.9	108	2,714	3.0	27,689	0.5	168					
5 and younger	412,161	34,086,212	6,252	38.4	69,918	0.9	111	2,398	14.7	26,378	0.5	169					
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
15-20	13	1,914	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
21-44	2,921	204,360	64	19.0	597	1.0	101	10	3.0	103	0.1	16					
45-64	156,403	13,803,857	3,048	46.2	33,636	0.9	109	1,479	22.4	16,121	0.5	164					
65-74	251,736	19,979,127	3,129	33.8	35,553	0.9	112	907	9.8	10,130	0.5	178					
75-84	1,088	96,954	11	14.1	132	1.0	177	2	2.6	24	0.8	451					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Other Eligibles	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
5 and younger	65,592	4,457,861	979	1.3	7,914	0.7	85	316	0.4	1,311	0.4	135					
6-14	1,295	69,420	1	0.0	3	0.8	76	10	0.1	20	0.6	100					
15-20	3,897	276,467	85	0.6	640	0.7	114	14	0.1	102	0.5	122					
21-44	5,233	309,890	149	1.4	907	1.2	122	29	0.3	88	0.4	79					
45-64	9,559	568,580	215	0.7	802	0.6	63	210	0.7	644	0.5	178					
65-74	1,990	134,852	40	1.5	142	0.5	52	16	0.6	54	0.4	242					
75-84	26,912	1,960,806	253	13.0	2,861	0.8	98	25	1.3	260	0.3	102					
85 and older	12,289	845,049	151	14.7	1,630	0.6	67	8	0.8	95	0.1	10					
	4,417	292,797	85	19.0	929	0.5	50	4	0.9	48	0.1	5					
Male																	
Disabled	270,299	26,566,355	5,374	8.7	56,321	1.0	138	2,540	4.1	26,433	0.6	203					
5 and younger	241,606	24,420,302	4,708	37.4	51,383	1.0	141	2,446	19.5	26,004	0.6	205					
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
15-20	97	8,049	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
21-44	4,212	399,501	141	33.9	1,360	1.2	162	0	0.0	0	0.0	0					
45-64	112,180	11,582,709	2,711	45.2	29,415	1.1	143	1,161	19.4	12,048	0.5	198					
65-74	124,908	12,416,872	1,853	30.2	20,580	0.9	137	1,285	20.9	13,956	0.6	210					
75-84	209	13,171	3	16.7	28	0.9	72	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	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
5 and younger	28,693	2,146,053	666	1.4	4,938	0.7	103	94	0.2	429	0.4	107					
6-14	2,090	114,529	3	0.0	6	0.8	195	3	0.0	16	0.3	9					
15-20	6,051	494,414	211	1.3	1,435	0.7	111	14	0.1	46	0.8	186					
21-44	4,522	407,201	208	2.9	1,409	0.9	131	11	0.2	65	0.2	77					
45-64	2,356	150,118	69	0.8	230	0.8	96	43	0.5	123	0.5	167					
65-74	782	58,328	10	0.6	38	0.6	107	8	0.5	16	0.6	281					
75-84	7,486	543,823	77	10.5	889	0.8	100	9	1.2	99	0.2	70					
85 and older	4,215	304,533	56	12.4	611	0.5	61	2	0.4	24	0.1	5					
	1,191	73,107	32	26.0	320	0.6	37	4	3.3	40	0.1	7					
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					

Table ND7A

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

a. Table ND.7A includes the beneficiaries represented by Cell K 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 ND.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}
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTICONVULSANT					ULCER DRUGS				
	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean No. of Rx	Mean Rx \$
All	20,328	13.3 %	205,537	0.7	\$40	11,900	7.8 %	124,342	0.9	\$57	11,669	7.6 %	123,585	0.4	\$45
Female	13,866	15.2	140,524	0.7	40	7,039	7.7	73,620	0.9	54	7,832	8.6	83,567	0.4	44
Disabled	11,399	70.1	126,050	0.7	40	5,867	36.1	65,191	0.9	55	6,001	36.9	67,596	0.4	44
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	2	100.0	18	0.4	58	1	50.0	9	0.7	98
15-20	89	26.5	812	0.7	41	113	33.6	1,129	1.1	76	27	8.0	270	0.3	22
21-44	4,788	72.6	52,036	0.7	41	2,875	43.6	31,440	0.9	60	1,869	28.3	20,899	0.4	41
45-64	6,501	70.2	72,973	0.7	40	2,864	30.9	32,458	0.8	49	4,071	44.0	46,035	0.4	46
65-74	21	26.9	229	0.6	39	13	16.7	146	0.7	49	33	42.3	383	0.4	31
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	2,467	3.3	14,474	0.6	36	1,172	1.6	8,429	0.8	45	1,831	2.4	15,971	0.4	45
5 and younger	4	0.0	32	0.3	5	39	0.3	353	0.7	57	71	0.5	457	0.5	45
6-14	98	0.7	600	0.9	45	183	1.2	1,602	0.8	53	81	0.5	676	0.5	47
15-20	253	2.4	1,281	0.8	42	156	1.5	1,242	1.2	67	82	0.8	482	0.4	36
21-44	1,153	3.8	3,521	0.5	37	399	1.3	1,308	0.7	38	343	1.1	1,113	0.4	43
45-64	195	7.1	611	0.6	40	74	2.7	289	0.6	31	101	3.7	335	0.5	51
65-74	439	22.6	4,963	0.6	33	211	10.8	2,404	0.7	39	670	34.4	7,519	0.4	41
75-84	203	19.7	2,222	0.6	34	76	7.4	865	0.7	32	340	33.0	3,856	0.5	47
85 and older	122	27.3	1,244	0.6	33	34	7.6	366	0.7	22	143	32.0	1,533	0.6	58
Male	6,462	10.5	65,013	0.7	39	4,861	7.9	50,722	0.9	61	3,837	6.2	40,018	0.5	48
Disabled	5,557	44.2	59,515	0.7	39	4,076	32.4	44,363	0.9	62	3,085	24.5	33,699	0.5	48
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	3	100.0	36	0.8	33	2	66.7	24	0.8	120
15-20	99	23.8	991	0.8	44	122	29.3	1,170	0.9	82	36	8.7	397	0.4	37
21-44	2,608	43.5	27,700	0.7	41	2,257	37.6	24,591	1.0	69	1,122	18.7	12,288	0.5	50
45-64	2,848	46.4	30,800	0.6	37	1,691	27.6	18,540	0.8	50	1,921	31.3	20,946	0.5	48
65-74	2	11.1	24	0.5	22	3	16.7	26	1.0	143	4	22.2	44	0.5	47
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	905	1.8	5,498	0.6	35	785	1.6	6,359	0.8	60	752	1.5	6,319	0.4	44
5 and younger	9	0.1	65	0.3	8	63	0.5	538	0.7	52	108	0.8	748	0.5	39
6-14	178	1.1	1,034	0.6	35	260	1.6	2,245	0.9	67	85	0.5	830	0.6	59
15-20	223	3.1	1,279	0.6	38	203	2.8	1,642	0.9	78	54	0.7	353	0.4	34
21-44	213	2.3	631	0.5	31	95	1.0	318	0.8	45	104	1.1	299	0.4	48
45-64	75	4.3	260	0.5	30	29	1.7	88	0.6	39	43	2.5	172	0.4	37
65-74	97	13.3	1,129	0.6	31	78	10.7	909	0.7	42	186	25.5	2,084	0.4	44
75-84	75	16.7	753	0.6	40	48	10.7	532	0.7	34	130	28.9	1,400	0.4	40
85 and older	35	28.5	347	0.7	39	9	7.3	87	0.8	27	42	34.1	433	0.5	50
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table ND7B

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

- a. Table ND.7B includes the beneficiaries represented by Cell K 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 ND.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}
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTI-DIABETIC					ANTI-ASTHMATIC				
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	19,388	12.7 %	193,769	0.4	\$27	10,319	6.7 %	109,130	0.6	\$37	16,143	10.6 %	150,670	0.4	\$21
Female	13,001	14.3	130,393	0.4	23	7,082	7.8	76,035	0.6	37	11,217	12.3	109,395	0.4	21
Disabled	9,892	60.8	111,117	0.4	25	5,351	32.9	60,253	0.6	38	8,171	50.2	92,050	0.4	21
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	54	16.1	539	0.2	3	3	0.9	30	0.7	16	76	22.6	785	0.3	14
21-44	3,979	60.3	44,330	0.4	27	928	14.1	10,407	0.7	37	2,767	41.9	30,979	0.4	17
45-64	5,819	62.9	65,787	0.4	25	4,392	47.5	49,510	0.6	39	5,308	57.3	60,070	0.4	23
65-74	40	51.3	461	0.2	6	28	35.9	306	0.6	40	20	25.6	216	0.2	9
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	3,109	4.2	19,276	0.4	12	1,731	2.3	15,782	0.6	33	3,046	4.1	17,345	0.4	21
5 and younger	20	0.2	141	0.2	2	4	0.0	13	0.8	29	392	3.0	1,364	0.5	18
6-14	82	0.6	473	0.2	6	15	0.1	67	0.6	32	518	3.5	2,121	0.4	19
15-20	262	2.5	993	0.3	3	31	0.3	129	0.6	36	363	3.5	1,556	0.4	17
21-44	1,444	4.8	4,376	0.5	14	231	0.8	674	0.6	32	796	2.6	2,488	0.5	22
45-64	180	6.6	620	0.6	21	172	6.3	539	0.6	40	133	4.9	374	0.5	25
65-74	665	34.2	7,585	0.3	12	852	43.8	9,642	0.6	34	547	28.1	6,131	0.4	21
75-84	332	32.2	3,835	0.3	13	348	33.8	3,920	0.6	29	219	21.3	2,462	0.5	25
85 and older	124	27.7	1,253	0.4	16	78	17.4	798	0.7	27	78	17.4	849	0.5	21
Male	6,387	10.3	63,376	0.4	34	3,237	5.2	33,095	0.6	36	4,926	8.0	41,275	0.4	21
Disabled	5,324	42.3	57,234	0.4	36	2,627	20.9	28,226	0.6	37	2,839	22.6	30,874	0.4	21
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	7	233.3	84	0.6	48
15-20	69	16.6	631	0.2	7	6	1.4	63	1.3	71	57	13.7	590	0.3	16
21-44	2,186	36.4	23,501	0.4	33	642	10.7	7,054	0.6	36	1,011	16.9	11,002	0.4	17
45-64	3,064	49.9	33,054	0.5	38	1,970	32.1	21,006	0.6	37	1,763	28.7	19,186	0.5	23
65-74	5	27.8	48	0.5	16	9	50.0	103	0.7	29	1	5.6	12	0.2	3
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	1,063	2.2	6,142	0.3	14	610	1.2	4,869	0.6	32	2,087	4.2	10,401	0.5	23
5 and younger	36	0.3	179	0.2	4	0	0.0	0	0.0	0	602	4.3	2,191	0.5	25
6-14	96	0.6	621	0.3	22	22	0.1	81	1.0	53	767	4.9	3,177	0.5	22
15-20	150	2.1	696	0.3	7	23	0.3	82	0.8	41	215	2.9	970	0.4	20
21-44	397	4.4	1,160	0.6	24	105	1.2	298	0.6	30	150	1.7	394	0.5	24
45-64	83	4.8	243	0.6	45	85	4.9	308	0.5	29	30	1.7	134	0.4	20
65-74	165	22.6	1,808	0.2	10	231	31.6	2,535	0.6	34	158	21.6	1,733	0.5	24
75-84	108	24.0	1,172	0.2	6	133	29.6	1,462	0.5	29	123	27.3	1,378	0.4	24
85 and older	28	22.8	263	0.3	5	11	8.9	103	0.5	14	42	34.1	424	0.4	21
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table ND7C
 Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

a. Table ND.7C includes the beneficiaries represented by Cell K 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 ND.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}
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

Beneficiary Characteristics	ANTIHYPERTENSIVE				ANALGESICS - ANTI-INFLAMMATORY				No. of Bene Mos		
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx \$			
All	5,912	3.9 %	64,615	0.5	16,777	11.0 %	169,781	0.3	\$17	152,902	624,626
Female	3,906	4.3	43,176	0.5	11,905	13.1	120,657	0.3	18	91,162	370,648
Disabled	2,942	18.1	33,249	0.5	8,783	54.0	99,483	0.3	18	16,269	171,398
5 and younger	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	2	21
15-20	1	0.3	4	0.3	49	14.6	532	0.2	7	336	2,920
21-44	360	5.5	4,022	0.5	3,133	47.5	34,992	0.2	12	6,597	68,644
45-64	2,556	27.6	28,935	0.5	5,566	60.1	63,550	0.3	21	9,256	98,962
65-74	25	32.1	288	0.4	35	44.9	409	0.2	18	78	851
75-84	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
Other Eligibles	964	1.3	9,927	0.5	3,122	4.2	21,174	0.3	19	74,893	199,250
5 and younger	1	0.0	12	0.5	63	0.5	204	0.3	5	13,109	29,966
6-14	0	0.0	0	0.0	123	0.8	495	0.3	5	14,831	37,254
15-20	1	0.0	12	1.3	258	2.5	1,017	0.3	5	10,424	26,164
21-44	56	0.2	182	0.5	1,157	3.8	3,533	0.4	10	30,371	64,013
45-64	68	2.5	215	0.5	184	6.7	636	0.4	18	2,736	6,070
65-74	577	29.7	6,528	0.5	884	45.4	10,133	0.3	22	1,945	20,511
75-84	236	22.9	2,701	0.5	349	33.9	4,023	0.3	23	1,030	10,876
85 and older	25	5.6	277	0.5	104	23.3	1,133	0.4	33	447	4,396
Male	2,006	3.2	21,439	0.6	4,872	7.9	49,124	0.3	15	61,735	253,971
Disabled	1,632	13.0	17,979	0.6	3,904	31.1	42,854	0.3	15	12,572	125,473
5 and younger	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	3	36
15-20	5	1.2	44	1.2	63	15.1	611	0.2	10	416	3,557
21-44	358	6.0	3,965	0.6	1,525	25.4	16,601	0.2	11	5,999	60,136
45-64	1,267	20.6	13,946	0.6	2,313	37.7	25,614	0.3	17	6,136	61,590
65-74	2	11.1	24	0.5	3	16.7	28	0.2	4	18	154
75-84	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
Other Eligibles	374	0.8	3,460	0.5	968	2.0	6,270	0.3	15	49,163	128,498
5 and younger	0	0.0	0	0.0	79	0.6	255	0.4	5	13,963	32,034
6-14	1	0.0	12	0.8	100	0.6	428	0.3	4	15,789	40,707
15-20	0	0.0	0	0.0	131	1.8	505	0.3	3	7,296	19,757
21-44	45	0.5	131	0.5	225	2.5	639	0.4	13	9,075	19,088
45-64	49	2.8	151	0.5	57	3.3	191	0.4	13	1,737	3,807
65-74	174	23.8	1,975	0.6	217	29.7	2,437	0.3	16	730	7,437
75-84	97	21.6	1,101	0.5	128	28.4	1,455	0.3	20	450	4,508
85 and older	8	6.5	90	0.3	31	25.2	360	0.4	25	123	1,160
Unknown	0	0.0	0	0.0	0	0.0	0	0.0	0	5	7

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

- a. Table ND.7D includes the beneficiaries represented by Cell K 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 ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, CONNECTICUT, 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	\$449	7.1	1,305	13,628
Age				
0-64	547	7.9	804	8,502
65-74	400	6.6	147	1,612
75-84	290	6.1	157	1,598
85 and older	185	4.5	197	1,916
Unknown	0	0.0	0	0
Gender				
Female	428	7.1	805	8,535
Male	483	7.0	500	5,093
Unknown	0	0.0	0	0
Race				
White	395	6.9	863	9,052
African American	582	7.6	254	2,623
Other/unknown	519	7.1	188	1,953
Basis of Eligibility^c				
Aged	283	5.6	496	5,079
Disabled	550	8.0	804	8,495
Adults	0	0.0	0	0
Children	0	0.0	5	54
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2001 Medicaid enrollment. A total of 1,219 beneficiaries who were in nursing facilities for part of their enrollment and their 12,311 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 ND.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx	Total Rx \$	No.	As % of All-Year NF Residents	No. of Bene Mos						
	Patented			Patented								Generic	Generic				
	Total	Off-Patent	Brand-Name	Total	Off-Patent	Brand-Name											
Anti-infective Agents	0.7	0.4	0.0	0.2	\$93	\$84	\$2	\$7	\$135	\$191	\$156	\$29	5,446	\$737,422	753	57.7 %	7,944
Biologicals	0.1	0.0	0.0	0.1	2	1	0	1	24	23	0	24	25	599	24	1.8	272
Antineoplastic Agents	0.6	0.2	0.2	0.2	141	86	36	19	223	364	188	93	534	118,915	87	6.7	843
Endocrine/Metabolic Drugs	1.3	0.6	0.2	0.5	53	42	4	8	41	66	19	17	6,509	268,924	484	37.1	5,027
Cardiovascular Agents	1.9	0.7	0.1	1.1	56	32	3	21	29	47	23	19	15,379	452,764	777	59.5	8,082
Respiratory Agents	0.9	0.4	0.0	0.4	40	24	1	15	45	55	32	35	4,129	184,404	433	33.2	4,647
Gastrointestinal Agents	1.1	0.5	0.0	0.6	83	62	2	19	74	128	68	31	7,420	552,012	641	49.1	6,686
Genitourinary Agents	0.7	0.4	0.0	0.3	33	28	0	5	49	68	21	19	1,391	68,519	189	14.5	2,061
CNS Drugs	2.2	1.1	0.2	0.9	192	145	18	29	87	132	116	31	23,463	2,045,242	1,000	76.6	10,651
Stimulants/Anti-obesity/Anorexia	0.7	0.2	0.0	0.5	34	22	0	12	46	98	0	23	130	5,987	20	1.5	177
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	71	71	0	0	108	108	0	0	349	37,644	50	3.8	527
Analgesics and Anesthetics	1.2	0.6	0.1	0.5	69	57	5	7	56	98	40	13	6,677	374,123	529	40.5	5,452
Neuromuscular Agents	1.6	0.6	0.2	0.8	82	57	6	19	51	88	33	25	12,154	624,737	692	53.0	7,653
Nutritional Products	1.0	0.0	0.2	0.7	20	1	6	14	21	26	25	19	2,866	59,566	300	23.0	2,984
Hematological Agents	1.1	0.2	0.3	0.6	96	85	3	7	85	385	12	11	4,678	398,731	412	31.6	4,173
Topical Products	0.6	0.2	0.1	0.3	22	13	2	6	35	54	46	19	4,797	169,496	719	55.1	7,878
Miscellaneous Products	0.3	0.1	0.0	0.2	25	16	0	8	89	143	0	52	155	13,724	54	4.1	559
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	5	0	0	0	17	0	0	0	94	1,607	34	2.6	356
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.	96,196	6,114,416	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

- a. Table ND.9 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,219 beneficiaries who were in nursing facilities for part of their enrollment and their 12,311 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 Connecticut, 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 ND.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}
 NONDUAL BENEFICIARIES, CONNECTICUT, 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	\$1,360,590	903	69.2 %	10,069	1.0	\$136	\$135
ANTICONVULSANT	530,209	753	57.7	8,432	1.1	58	63
ANTIDEPRESSANTS	528,389	881	67.5	9,475	0.9	64	56
ULCER DRUGS	407,757	588	45.1	6,161	0.7	88	66
ANTIVIRAL	371,796	153	11.7	1,576	0.8	314	236
HEMATOPOIETIC AGENTS	288,514	238	18.2	2,390	0.6	188	121
ANALGESICS - Narcotic	275,796	516	39.5	5,251	0.9	56	53
ANTI-DIABETIC	209,228	540	41.4	5,617	0.9	42	37
ASTHMA	131,799	479	36.7	4,895	0.6	47	27
ANTI-HYPERTENSIVE	125,972	395	30.3	4,199	0.8	35	30
Total	4,230,050	5,446		58,065	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,219 beneficiaries who were in nursing facilities for part of their enrollment and their 12,311 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 ND.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}
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTICONVULSANT						
	No. of Rx	Rx \$	No. of Users	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	Mean Rx \$	No. of Users	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	50,845	\$4,230,050	903	69.2 %	10,069	1.0	\$135	753	57.7 %	8,432	1.1	\$63					
Female	31,831	2,504,522	565	70.2	6,349	1.0	132	447	55.5	5,060	1.1	61					
Disabled	21,244	1,774,079	352	81.5	4,049	1.1	147	324	75.0	3,705	1.1	65					
64 or younger	21,094	1,761,182	350	81.6	4,025	1.1	147	322	75.1	3,681	1.1	65					
65-74	150	12,897	2	66.7	24	1.6	188	2	66.7	24	0.8	56					
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	10,587	730,443	213	57.1	2,300	0.8	105	123	33.0	1,355	1.0	51					
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	4,314	354,704	90	91.8	988	1.0	140	71	72.4	798	1.0	59					
75-84	3,618	221,826	80	70.2	844	0.7	84	34	29.8	372	1.1	46					
85 and older	2,655	153,913	43	27.0	468	0.6	68	18	11.3	185	0.7	27					
Male	19,014	1,725,528	338	67.6	3,720	1.0	141	306	61.2	3,372	1.0	65					
Disabled	15,711	1,512,776	264	71.0	2,894	1.1	157	260	69.9	2,837	1.0	69					
64 or younger	15,688	1,507,912	263	71.1	2,890	1.1	157	258	69.7	2,823	1.0	68					
65-74	23	4,864	1	50.0	4	0.3	54	2	100.0	14	1.2	181					
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	3,303	212,752	74	57.8	826	0.7	83	46	35.9	535	1.0	48					
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	1,375	98,653	32	72.7	375	0.9	109	19	43.2	221	1.0	50					
75-84	1,148	75,802	28	65.1	309	0.5	67	23	53.5	266	0.9	46					
85 and older	780	38,297	14	36.8	142	0.8	53	4	10.5	48	1.1	43					
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 Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

a. Table ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,219 beneficiaries who were in nursing facilities for part of their enrollment and their 12,311 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 ND.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}
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

Beneficiary Characteristics	ANTIDEPRESSANTS						ULCER DRUGS						ANTIVIRAL					
	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	881	67.5 %	0.9	9,475	0.9	\$56	588	45.1 %	0.7	6,161	0.7	\$66	153	11.7 %	0.8	1,576	0.8	\$236
Female	562	69.8	0.9	6,140	0.9	55	351	43.6	0.8	3,748	0.8	65	74	9.2	0.7	828	0.7	179
Disabled	338	78.2	0.9	3,797	0.9	59	193	44.7	0.8	2,066	0.8	62	66	15.3	0.7	732	0.7	185
64 or younger	336	78.3	0.9	3,773	0.9	59	191	44.5	0.8	2,042	0.8	62	66	15.4	0.7	732	0.7	185
65-74	2	66.7	0.8	24	0.8	43	2	66.7	0.8	24	0.8	45	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	0.0	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
Other Eligibles	224	60.1	0.8	2,343	0.8	48	158	42.4	0.8	1,682	0.8	69	8	2.1	0.4	96	0.4	131
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
65-74	73	74.5	0.8	816	0.8	52	44	44.9	0.8	467	0.8	80	3	3.1	1.0	36	1.0	336
75-84	72	63.2	0.9	747	0.9	53	51	44.7	0.8	548	0.8	63	2	1.8	0.1	24	0.1	14
85 and older	79	49.7	0.7	780	0.7	39	63	39.6	0.8	667	0.8	67	3	1.9	0.1	36	0.1	4
Male	319	63.8	0.9	3,335	0.9	58	237	47.4	0.7	2,413	0.7	68	79	15.8	0.9	748	0.9	299
Disabled	245	65.9	0.9	2,554	0.9	60	185	49.7	0.7	1,914	0.7	66	77	20.7	0.9	732	0.9	305
64 or younger	245	66.2	0.9	2,554	0.9	60	185	50.0	0.7	1,914	0.7	66	77	20.8	0.9	732	0.9	305
65-74	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
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
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
Other Eligibles	74	57.8	0.8	781	0.8	49	52	40.6	0.7	499	0.7	72	2	1.6	0.1	16	0.1	10
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
65-74	28	63.6	0.7	327	0.7	43	16	36.4	0.7	172	0.7	84	0	0.0	0.0	0	0.0	0
75-84	20	46.5	0.8	207	0.8	63	19	44.2	0.7	185	0.7	69	0	0.0	0.0	0	0.0	0
85 and older	26	68.4	0.8	247	0.8	43	17	44.7	0.8	142	0.8	60	2	5.3	0.1	16	0.1	10
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	0.0	0

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

a. Table ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,219 beneficiaries who were in nursing facilities for part of their enrollment and their 12,311 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 ND.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}
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

Beneficiary Characteristics	HEMATOPOIETIC AGENTS						ANALGESICS - Narcotic						ANTIDIABETIC					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx
All	238	18.2 %	0.6	516	39.5 %	0.9	5251	5.251 %	0.9	540	41.4 %	0.9	5,617	5.617 %	0.9	\$37		
Female	132	16.4	0.6	1,340	38.4	0.9	3,245	3.245	0.9	354	44.0	0.9	3,782	3.782	0.9	37		
Disabled	86	19.9	0.6	851	42.6	1.1	1,944	1.944	1.1	210	48.6	1.1	2,275	2.275	0.9	43		
64 or younger	85	19.8	0.6	839	42.9	1.1	1,944	1.944	1.1	207	48.3	1.1	2,239	2.239	0.9	43		
65-74	1	33.3	1.3	12	0.0	0.0	0	0	0.0	3	100.0	0.0	36	36	0.7	38		
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		
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		
Other Eligibles	46	12.3	0.6	489	33.5	0.7	1,301	1.301	0.7	144	38.6	0.7	1,507	1.507	0.8	28		
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		
65-74	17	17.3	0.5	170	32.7	0.9	348	3.48	0.9	61	62.2	0.9	683	6.83	0.7	26		
75-84	16	14.0	0.6	173	47.4	0.6	588	5.88	0.6	56	49.1	0.6	589	5.89	0.8	29		
85 and older	13	8.2	0.6	146	24.5	0.6	365	3.65	0.6	27	17.0	0.6	235	2.35	0.8	30		
Male	106	21.2	0.7	1,050	41.4	0.9	2,006	2.006	0.9	186	37.2	0.9	1,835	1.835	0.9	38		
Disabled	93	25.0	0.7	916	47.8	1.0	1,738	1.738	1.0	145	39.0	1.0	1,419	1.419	0.9	40		
64 or younger	92	24.9	0.7	912	47.8	1.0	1,734	1.734	1.0	145	39.2	1.0	1,419	1.419	0.9	40		
65-74	1	50.0	0.3	499	50.0	1.0	4	4	1.0	0	0.0	1.0	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		
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		
Other Eligibles	13	10.2	0.6	134	22.7	0.5	268	2.68	0.5	41	32.0	0.5	416	4.16	0.8	31		
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		
65-74	5	11.4	0.7	49	20.5	0.4	88	8.8	0.4	21	47.7	0.4	225	2.25	0.8	37		
75-84	4	9.3	0.8	48	23.3	0.6	95	9.5	0.6	15	34.9	0.6	153	1.53	0.9	25		
85 and older	4	10.5	0.2	37	26.3	0.4	85	8.5	0.4	5	13.2	0.4	38	3.8	0.7	14		
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		

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

a. Table ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,219 beneficiaries who were in nursing facilities for part of their enrollment and their 12,311 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 ND.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}
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

Beneficiary Characteristics	ANTI-ASTHMATIC					ANTI-HYPERTENSIVE					Bene Mos among All-Year NF Residents	
	Users as %		No. of Bene		Mean Rx	Users as %		No. of Bene		Mean Rx		
	No. of Users	Residents	NF Residents	Users		NF Residents	Users	No. of Rx				
All	479	36.7 %	4,895	0.6	\$27	395	30.3 %	4,199	0.8	\$30	1,305	13,628
Female	297	36.9	3,116	0.6	30	229	28.4	2,473	0.9	28	805	8,535
Disabled	173	40.0	1,879	0.7	32	118	27.3	1,295	0.8	28	432	4,705
64 or younger	173	40.3	1,879	0.7	32	116	27.0	1,271	0.8	28	429	4,669
65-74	0	0.0	0	0.0	0	2	66.7	24	0.7	28	3	36
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	124	33.2	1,237	0.6	26	111	29.8	1,178	0.9	29	373	3,830
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	18
65-74	51	52.0	467	0.5	25	34	34.7	383	0.9	31	98	1,077
75-84	39	34.2	390	0.6	23	34	29.8	368	0.9	26	114	1,166
85 and older	34	21.4	380	0.7	29	43	27.0	427	0.9	29	159	1,569
Male	182	36.4	1,779	0.5	22	166	33.2	1,726	0.8	33	500	5,093
Disabled	128	34.4	1,235	0.5	25	117	31.5	1,204	0.8	36	372	3,790
64 or younger	128	34.6	1,235	0.5	25	117	31.6	1,204	0.8	36	370	3,779
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	11
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	54	42.2	544	0.4	15	49	38.3	522	0.8	25	128	1,303
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	36
65-74	17	38.6	197	0.3	11	19	43.2	221	0.7	20	44	488
75-84	16	37.2	171	0.3	11	15	34.9	149	1.0	30	43	432
85 and older	21	55.3	176	0.5	23	15	39.5	152	0.8	25	38	347
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 Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

- Table ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,219 beneficiaries who were in nursing facilities for part of their enrollment and their 12,311 benefit months were excluded from the analysis.
 - 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.
 - Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - 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 ND.11
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG NONDUALS
 BY BENEFICIARY CHARACTERISTIC^{a,b}
 CONNECTICUT, 2001

Beneficiary Characteristics	No. of Benes with at Least One Part D Excl Rx	% Benes with at Least One Part D Excl Rx	No. of Part D		Total No. Part D Excl Rx	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx \$ as % of All Rx \$	Total No. of Benes
			Excl Rx per Bene	Bene					
All	21,371	14.0 %	1.0	146,091	\$30	\$4,556,807	\$31	4.8 %	152,902
Age									
5 and younger	1,262	4.7	0.1	2,575	5	129,937	50	24.8	27,072
6-14	972	3.2	0.1	3,584	9	264,274	74	19.7	30,625
15-20	876	4.7	0.2	3,090	10	183,384	59	9.4	18,472
21-44	7,594	14.6	1.0	51,819	30	1,551,168	30	4.3	52,042
45-64	8,708	43.8	3.7	73,452	108	2,147,634	29	4.5	19,865
65-74	1,106	39.9	2.4	6,702	57	157,390	23	3.5	2,771
75-84	598	40.4	2.3	3,338	62	92,121	28	4.2	1,480
85 and older	255	44.7	2.7	1,531	54	30,899	20	4.1	570
Unknown	0	0.0	0.0	0	0	0	0	0.0	5
Basis of Eligibility^c									
Aged	1,911	40.5	2.4	11,203	58	272,812	24	3.7	4,714
Disabled	14,511	50.3	4.3	123,327	128	3,694,861	30	4.5	28,841
Adults	1,970	4.6	0.1	3,407	2	79,875	23	5.5	42,936
Children	2,972	3.9	0.1	8,136	7	508,605	63	16.8	76,364
Unknown	7	14.9	0.4	18	14	654	36	4.1	47
Gender									
Female	14,066	15.4	1.1	96,314	29	2,667,654	28	4.7	91,165
Male	7,305	11.8	0.8	49,777	31	1,889,153	38	5.0	61,737
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	9,919	14.8	1.2	81,337	37	2,502,264	31	5.2	67,082
African American	4,321	13.0	0.8	26,450	28	920,432	35	4.5	33,360
Other/unknown	7,131	13.6	0.7	38,304	22	1,134,111	30	4.4	52,460
Use of Nursing Facilities^d									
Entire year	761	58.3	5.9	7,656	131	170,321	22	2.8	1,305
Part year	912	74.8	8.0	9,737	226	275,403	28	4.1	1,219
None	19,698	13.1	0.9	128,698	27	4,111,083	32	5.0	150,378
Maintenance Assistance Status									
Cash	7,110	20.8	1.6	54,842	48	1,638,949	30	4.6	34,260
Medically needy	5,673	43.3	3.4	44,140	103	1,344,705	30	4.6	13,108
Poverty related	833	3.2	0.1	2,194	5	118,674	54	14.7	26,280
Other/unknown	7,755	9.8	0.6	44,915	18	1,454,479	32	4.9	79,254

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

- a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual 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 ND.12
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG NONDUALS PER BENEFIT MONTH
 BY BENEFICIARY CHARACTERISTIC^{a,b}
 CONNECTICUT, 2001

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazepine \$ per Bene Mo.	No. of Bene Mos
All	0.2	\$7	\$31	\$0	\$3	624,626
Age						
5 and younger	0.0	2	50	0	0	62,000
6-14	0.0	3	74	0	0	78,018
15-20	0.1	3	59	0	1	52,398
21-44	0.2	7	30	0	3	211,881
45-64	0.4	13	29	0	5	170,429
65-74	0.2	5	23	0	2	28,953
75-84	0.2	6	28	0	1	15,384
85 and older	0.3	6	20	0	2	5,556
Unknown	0.0	0	0	0	0	7
Basis of Eligibility^c						
Aged	0.2	6	24	0	2	48,859
Disabled	0.4	12	30	0	5	296,871
Adults	0.0	1	23	0	0	90,659
Children	0.0	3	63	0	0	188,028
Unknown	0.1	3	36	0	1	209
Gender						
Female	0.3	7	28	0	3	370,651
Male	0.2	7	38	0	2	253,975
Unknown	0.0	0	0	0	0	0
Race						
White	0.3	9	31	0	4	283,311
African American	0.2	7	35	0	1	134,947
Other/unknown	0.2	5	30	0	2	206,368
Use of Nursing Facilities^d						
Entire year	0.6	12	22	0	6	13,628
Part year	0.8	22	28	0	7	12,311
None	0.2	7	32	0	2	598,687
Maintenance Assistance Status						
Cash	0.3	9	30	0	4	174,639
Medically needy	0.4	11	30	0	4	119,864
Poverty related	0.0	2	54	0	0	61,212
Other/unknown	0.2	5	32	0	2	268,911

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

- a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual 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 ND.13
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
 CONNECTICUT, 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	30,261	\$151	\$4,556,807	100.0 %	146,091	\$31	100.0 %
Anorexia or weight loss/gain	141	208	29,259	0.6	319	92	0.2
Fertility drugs	64	69	4,390	0.1	79	56	0.1
Drugs for cosmetic purposes	123	691	85,023	1.9	472	180	0.3
Cough and cold medications	7,533	74	561,136	12.3	17,726	32	12.1
Vitamins and minerals	3,220	168	540,287	11.9	18,551	29	12.7
Non-prescription drugs	8,985	156	1,402,003	30.8	33,743	42	23.1
Barbiturates	519	65	33,814	0.7	4,754	7	3.3
Benzodiazepines	8,476	188	1,593,499	35.0	65,325	24	44.7
Other Part D Excl Rx Drugs	1,200	256	307,396	6.7	5,122	60	3.5

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all non-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 ND11.

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.

APPENDIX TABLE A.1

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

Beneficiary Characteristics	No. of Beneficiaries				No. of Beneficiaries					
	All	Aged	Disabled	Unknown	All	Aged	Disabled	Unknown		
All	374,014	4,714	28,854	47	3,554,242	48,893	301,022	769,932	2,434,186	209
Age										
5 and younger	84,670	0	0	0	791,099	0	0	75	791,024	0
6-14	110,801	0	5	0	1,129,264	0	57	108	1,129,099	0
15-20	51,913	1	758	1	486,733	12	7,477	9,311	469,930	3
21-44	97,439	0	12,601	12	860,609	0	130,913	686,076	43,574	46
45-64	24,355	2	15,394	33	236,448	17	161,570	74,179	526	156
65-74	2,779	2,663	96	1	29,111	27,929	1,005	173	0	4
75-84	1,480	1,479	0	0	15,384	15,383	0	1	0	0
85 and older	570	569	0	0	5,561	5,552	0	9	0	0
Unknown	7	0	0	0	33	0	0	0	33	0
Gender										
Female	219,664	3,416	16,278	47	2,087,848	35,791	174,675	650,103	1,227,070	209
Male	154,350	1,298	12,576	0	1,466,394	13,102	126,347	119,829	1,207,116	0
Unknown	0	0	0	0	0	0	0	0	0	0
Race										
White	146,537	2,026	13,327	37	1,351,937	20,800	139,181	311,841	879,945	170
African American	94,804	793	6,463	5	933,794	8,152	66,902	190,737	667,981	22
Other/unknown	132,673	1,895	9,064	5	1,268,511	19,941	94,939	267,354	886,260	17
Use of Nursing Facilities^c										
Entire year	1,305	496	804	0	13,634	5,079	8,495	0	60	0
Part year	1,220	241	955	0	12,473	2,408	9,872	130	63	0
None	371,489	3,977	27,095	47	3,528,135	41,406	282,655	769,802	2,434,063	209
Maintenance Assistance Status										
Cash	85,667	981	10,264	0	863,891	11,259	113,525	176,937	562,170	0
Medically needy	13,853	1,062	10,004	0	133,214	10,971	103,832	5,649	12,762	0
Poverty related	63,689	29	27	47	545,228	246	169	25,314	519,290	209
Other/unknown	210,805	2,642	8,559	0	2,011,909	26,417	83,496	562,032	1,339,964	0
Managed Care Status										
FFS all year	55,326	4,707	28,044	47	408,282	48,810	292,043	19,299	47,921	209
FFS part year, with Rx claims	17,253	6	641	0	150,411	71	7,205	60,890	82,245	0
FFS part year, no Rx claims	80,323	1	156	0	672,699	12	1,618	216,554	454,515	0
MC all year, with Rx claims	1,196	0	1	0	13,645	0	12	5,137	8,496	0
MC all year, no Rx claims	219,916	0	12	0	2,309,205	0	144	468,052	1,841,009	0

Source: Data for this table are from the MAX 2001 file for Connecticut, released by CMS in 06/2005. This table was produced on 09/19/2006.

- a. Table A.1 includes the beneficiaries represented by Cell J 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.
- 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.2
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 NONDUAL BENEFICIARIES, CONNECTICUT, 2001

	Bene Mos in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K 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	374,014	3,554,242	152,902	624,626	0	2,929,616
FFS all year	55,326	408,282	55,326	408,282	0	0
FFS part year, with Rx claims	17,253	150,411	17,253	45,345	0	105,066
FFS part year, with no Rx claims	80,323	672,699	80,323	170,999	0	501,700
MC all year, with Rx claims	1,196	13,645	0	0	0	13,645
MC all year, with no Rx claims	219,916	2,309,205	0	0	0	2,309,205

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