

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2001 D.C.

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TABLE ND.2

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
 NONDUAL BENEFICIARIES, D.C., 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	59,769	1,530	19,917	12,142	26,180	0	356,265	12,414	184,773	42,836	116,242	0
Age												
5 and younger	10,524	3	697	35	9,789	0	40,790	21	4,781	105	35,883	0
6-14	13,376	2	1,797	42	11,535	0	67,379	14	14,334	151	52,880	0
15-20	6,532	0	868	1,039	4,625	0	37,118	0	7,562	3,319	26,237	0
21-44	16,577	3	6,772	9,575	227	0	99,274	12	63,969	34,065	1,228	0
45-64	10,423	10	8,980	1,429	4	0	92,047	90	86,861	5,082	14	0
65-74	1,137	486	632	19	0	0	10,400	4,523	5,774	103	0	0
75-84	734	590	142	2	0	0	6,128	4,865	1,255	8	0	0
85 and older	466	436	29	1	0	0	3,129	2,889	237	3	0	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Gender												
Female	33,303	1,021	9,201	10,303	12,778	0	188,818	8,277	88,652	35,992	55,897	0
Male	26,399	509	10,715	1,839	13,336	0	167,055	4,137	96,113	6,844	59,961	0
Unknown	67	0	1	0	66	0	392	0	8	0	384	0
Race												
White	1,401	111	937	167	186	0	10,530	913	8,324	562	731	0
African American	50,733	1,022	16,361	10,955	22,395	0	300,453	7,960	151,310	39,015	102,168	0
Other/unknown	7,635	397	2,619	1,020	3,599	0	45,282	3,541	25,139	3,259	13,343	0
Use of Nursing Facilities^c												
Entire year	476	209	250	17	0	0	5,018	2,173	2,708	137	0	0
Part year	360	68	271	21	0	0	3,462	623	2,664	175	0	0
None	58,933	1,253	19,396	12,104	26,180	0	347,785	9,618	179,401	42,524	116,242	0
Maintenance Assistance Status												
Cash	33,641	619	16,022	8,824	8,176	0	219,288	5,629	154,943	30,361	28,355	0
Medically needy	11,220	533	3,350	2,741	4,596	0	54,585	3,673	25,438	10,647	14,827	0
Poverty-related	9,793	181	536	479	8,597	0	32,291	1,402	4,314	1,499	25,076	0
Other/unknown	5,115	197	9	98	4,811	0	50,101	1,710	78	329	47,984	0
Managed Care Status												
FFS all year	31,965	1,528	18,680	3,236	8,521	0	275,444	12,400	178,857	18,644	65,543	0
FFS part year, with Rx claims	5,302	2	553	2,109	2,638	0	19,097	14	3,072	6,452	9,559	0
FFS part year, no Rx claims	22,502	0	684	6,797	15,021	0	61,724	0	2,844	17,740	41,140	0

Table ND2

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for D.C., 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, D.C., 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	33.6 %	7.4	\$535	\$72	\$7,220	7.4 %	59,769
Age							
5 and younger	21.0	0.9	50	58	2,661	1.9	10,524
6-14	20.6	1.7	131	75	3,518	3.7	13,376
15-20	27.5	2.1	125	59	6,045	2.1	6,532
21-44	37.6	7.4	687	93	8,155	8.4	16,577
45-64	58.9	23.3	1,536	66	14,805	10.4	10,423
65-74	49.9	19.5	919	47	12,817	7.2	1,137
75-84	37.9	13.0	547	42	12,320	4.4	734
85 and older	14.4	3.8	167	44	8,295	2.0	466
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^c							
Aged	33.9	10.7	473	44	13,255	3.6	1,530
Disabled	56.3	19.1	1,414	74	14,996	9.4	19,917
Adults	25.2	1.5	96	65	2,284	4.2	12,142
Children	20.1	1.2	75	63	3,240	2.3	26,180
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	35.2	8.0	516	64	6,289	8.2	33,303
Male	31.6	6.7	561	84	8,412	6.7	26,399
Unknown	0.0	0.0	0	0	28	0.0	67
Race							
White	35.3	11.7	867	74	11,092	7.8	1,401
African American	34.1	7.4	539	72	7,326	7.4	50,733
Other/unknown	29.5	6.7	451	68	5,800	7.8	7,635
Use of Nursing Facilities^d							
Entire year	28.8	19.6	1,048	53	64,860	1.6	476
Part year	68.3	30.9	2,282	74	79,200	2.9	360
None	33.4	7.2	521	72	6,314	8.2	58,933
Maintenance Assistance Status							
Cash	38.6	10.2	756	74	7,399	10.2	33,641
Medically needy	26.9	5.3	365	68	9,685	3.8	11,220
Poverty related	17.3	1.6	93	58	1,838	5.1	9,793
Other/unknown	46.3	4.9	308	62	10,936	2.8	5,115

Source: Data for this table are from the MAX 2001 file for D.C., 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, D.C., 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	1.2	\$90	7.4 %	66.4 %	19.0 %	4.4 %	6.5 %	3.1 %	0.6 %	\$1,211	59,769	356,265
Age												
5 and younger	0.2	13	1.9	79.0	17.9	1.9	1.0	0.1	0.0	686	10,524	40,790
6-14	0.3	26	3.7	79.4	16.2	2.4	1.6	0.4	0.0	699	13,376	67,379
15-20	0.4	22	2.1	72.5	22.6	2.6	1.8	0.5	0.1	1,064	6,532	37,118
21-44	1.2	115	8.4	62.4	21.9	5.2	7.1	2.9	0.6	1,362	16,577	99,274
45-64	2.6	174	10.4	41.1	17.9	9.0	18.5	11.0	2.5	1,676	10,423	92,047
65-74	2.1	101	7.2	50.1	14.9	6.2	18.3	9.9	0.5	1,401	1,137	10,400
75-84	1.6	66	4.4	62.1	12.9	6.8	11.0	6.7	0.4	1,476	734	6,128
85 and older	0.6	25	2.0	85.6	6.4	1.7	4.7	1.3	0.2	1,235	466	3,129
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	1.3	58	3.6	66.1	13.1	5.5	9.7	5.2	0.3	1,634	1,530	12,414
Disabled	2.1	152	9.4	43.7	22.3	8.2	15.7	8.3	1.8	1,616	19,917	184,773
Adults	0.4	27	4.2	74.8	18.8	3.1	2.6	0.6	0.1	648	12,142	42,836
Children	0.3	17	2.3	79.9	16.8	2.0	1.1	0.2	0.0	730	26,180	116,242
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	1.4	91	8.2	64.8	19.8	4.4	6.8	3.5	0.7	1,109	33,303	188,818
Male	1.1	89	6.7	68.4	18.0	4.4	6.1	2.7	0.5	1,329	26,399	167,055
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	5	67	392
Race												
White	1.6	115	7.8	64.7	13.8	5.1	9.5	5.4	1.4	1,476	1,401	10,530
African American	1.3	91	7.4	65.9	19.5	4.4	6.4	3.2	0.6	1,237	50,733	300,453
Other/unknown	1.1	76	7.8	70.5	16.5	3.7	6.3	2.5	0.4	978	7,635	45,282
Use of Nursing Facilities^d												
Entire year	1.9	99	1.6	71.2	2.9	2.1	7.1	12.0	4.6	6,153	476	5,018
Part year	3.2	237	2.9	31.7	14.7	11.7	20.6	15.8	5.6	8,236	360	3,462
None	1.2	88	8.2	66.6	19.1	4.3	6.4	3.0	0.6	1,070	58,933	347,785
Maintenance Assistance Status												
Cash	1.6	116	10.2	61.4	19.6	5.1	8.5	4.4	1.0	1,135	33,641	219,288
Medically needy	1.1	75	3.8	73.1	14.4	3.9	5.6	2.6	0.4	1,991	11,220	54,585
Poverty related	0.5	28	5.1	82.7	12.9	1.8	1.9	0.6	0.1	557	9,793	32,291
Other/unknown	0.5	32	2.8	53.7	36.6	5.2	3.6	1.0	0.0	1,117	5,115	50,101

Table ND4

Nondual Beneficiaries

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

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	\$ per Rx	No. of Rx	Rx \$	No. of Rx	Rx \$
All	1.2	\$90	0.6	\$72	0.1	\$5	0.6	\$11
Age								
5 and younger	0.2	13	0.1	58	0.0	0	0.1	2
6-14	0.3	26	0.2	75	0.0	1	0.1	3
15-20	0.4	22	0.2	59	0.0	1	0.1	2
21-44	1.2	115	0.6	93	0.1	5	0.6	12
45-64	2.6	174	1.2	66	0.2	10	1.3	24
65-74	2.1	101	1.0	47	0.1	8	1.0	19
75-84	1.6	66	0.7	42	0.1	6	0.8	15
85 and older	0.6	25	0.3	44	0.0	3	0.3	5
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Basis of Eligibility^d								
Aged	1.3	58	0.6	44	0.1	6	0.6	12
Disabled	2.1	152	0.9	74	0.1	8	1.0	19
Adults	0.4	27	0.2	65	0.0	1	0.2	3
Children	0.3	17	0.1	63	0.0	1	0.1	2
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Gender								
Female	1.4	91	0.6	64	0.1	5	0.7	13
Male	1.1	89	0.5	84	0.1	5	0.5	10
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	1.6	115	0.7	74	0.1	8	0.7	15
African American	1.3	91	0.6	72	0.1	5	0.6	11
Other/unknown	1.1	76	0.5	68	0.1	5	0.5	11
Use of Nursing Facilities^e								
Entire year	1.9	99	0.7	53	0.2	9	0.9	19
Part year	3.2	237	1.3	74	0.3	22	1.6	29
None	1.2	88	0.6	72	0.1	5	0.6	11
Maintenance Assistance Status								
Cash	1.6	116	0.7	74	0.1	6	0.7	14
Medically needy	1.1	75	0.5	68	0.1	5	0.5	10
Poverty related	0.5	28	0.2	58	0.0	2	0.2	4
Other/unknown	0.5	32	0.3	62	0.0	1	0.2	3

Table ND5

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for D.C., 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 D.C., 1.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.6

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

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos				
	Patented		Off-Patent		Patented		Off-Patent										
	Total	Brand-Name	Generic	Total	Brand-Name	Generic	Total	Brand-Name						Generic			
Anti-infective Agents	0.5	0.4	0.0	0.2	\$103	\$100	\$0	\$2	\$192	\$268	\$87	\$13	53,761	\$10,326,855	10,583	17.7 %	100,474
Biologics	0.2	0.2	0.0	0.0	187	176	11	0	773	792	1,093	22	223	172,468	112	0.2	924
Antineoplastic Agents	0.4	0.1	0.2	0.1	95	40	42	13	223	361	237	94	2,506	559,217	552	0.9	5,877
Endocrine/Metabolic Drugs	0.7	0.4	0.0	0.2	35	29	1	4	52	72	27	19	31,278	1,638,051	4,683	7.8	47,278
Cardiovascular Agents	1.3	0.6	0.1	0.7	50	33	3	14	37	55	44	21	90,117	3,342,762	6,331	10.6	66,956
Respiratory Agents	0.6	0.3	0.0	0.2	27	22	1	4	46	65	40	19	43,442	1,997,798	7,792	13.0	74,702
Gastrointestinal Agents	0.4	0.2	0.0	0.2	27	19	3	6	65	118	74	27	16,467	1,062,820	3,628	6.1	38,713
Genitourinary Agents	0.3	0.2	0.0	0.0	13	12	0	1	48	55	49	17	4,656	223,936	1,788	3.0	17,695
CNS Drugs	1.0	0.5	0.1	0.4	94	77	7	10	97	159	121	23	64,072	6,223,724	6,186	10.3	66,523
Stimulants/Anti-obesity/Anorexia	0.6	0.4	0.0	0.2	33	26	1	6	53	65	31	30	4,527	238,256	715	1.2	7,250
Miscellaneous Psychological/Neurological Agents	0.2	0.2	0.0	0.0	25	21	1	4	107	114	123	78	678	72,708	258	0.4	2,852
Analgesics and Anesthetics	0.5	0.1	0.0	0.4	18	10	2	6	35	147	79	14	40,057	1,393,403	7,437	12.4	76,402
Neuromuscular Agents	0.8	0.3	0.1	0.4	40	31	3	7	52	100	33	18	35,144	1,827,106	4,146	6.9	45,209
Nutritional Products	0.4	0.0	0.1	0.3	5	0	2	3	13	14	24	9	14,792	185,405	3,443	5.8	35,107
Hematological Agents	0.5	0.1	0.0	0.3	57	53	1	4	117	376	19	12	9,488	1,105,605	1,806	3.0	19,297
Topical Products	0.4	0.2	0.0	0.2	17	11	2	4	45	62	52	26	27,577	1,248,960	7,237	12.1	71,462
Miscellaneous Products	0.3	0.2	0.0	0.1	65	51	4	9	215	274	228	96	1,063	228,204	353	0.6	3,527
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	10	0	0	0	30	0	0	0	5,197	155,923	1,379	2.3	15,150
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.	445,045	32,003,201	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for D.C., 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 D.C., 1.2 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, D.C., 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	
ANTIVIRAL	\$8,455,165	4,165	44,276	0.5	\$371	\$191	
ANTIPSYCHOTICS	4,466,686	3,485	39,276	0.6	176	114	
ANTICONVULSANT	1,638,324	3,395	37,514	0.7	64	44	
ANTIDEPRESSANTS	1,354,581	4,238	46,101	0.5	64	29	
ANTIDIABETIC	1,140,176	3,650	39,691	0.6	51	29	
ANTIASTHMATIC	1,055,055	5,772	58,573	0.4	49	18	
ANTIHYPERTENSIVE	989,858	4,898	53,092	0.5	34	19	
ANALGESICS - Narcotic	911,757	6,013	64,033	0.4	40	14	
CALCIUM BLOCKERS	892,581	2,560	27,759	0.6	53	32	
DERMATOLOGICAL	860,811	8,239	85,819	0.2	46	10	
Total	21,764,994	46,415	496,134	n.a.	n.a.	n.a.	

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

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIVIRAL				ANTIPSYCHOTICS			
	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 \$
All	225,771	\$21,764,994	4,165	7.0 %	44,276	0.5	\$191	3,485	5.8 %	39,276	0.6	\$114
Female	131,921	11,430,422	2,066	6.2	22,081	0.5	180	1,763	5.3	19,963	0.6	106
Disabled	114,701	9,973,131	1,570	17.1	17,430	0.5	187	1,526	16.6	17,526	0.6	112
5 and younger	358	32,794	14	4.3	138	0.5	110	0	0.0	0	0.0	0
6-14	1,347	130,830	29	4.8	297	0.7	194	16	2.7	159	0.8	91
15-20	954	78,912	8	2.3	74	0.3	75	26	7.6	303	0.7	97
21-44	32,179	3,747,321	870	28.7	9,654	0.5	177	644	21.2	7,400	0.6	114
45-64	73,815	5,652,443	632	14.4	7,081	0.5	205	793	18.1	9,100	0.6	114
65-74	4,928	280,557	14	3.7	150	0.3	157	36	9.5	432	0.5	94
75-84	1,063	49,356	2	1.8	24	0.2	16	9	8.3	108	0.4	70
85 and older	57	918	1	5.0	12	0.1	8	2	10.0	24	0.5	3
Other Eligibles	17,220	1,457,291	496	2.1	4,651	0.4	151	237	1.0	2,437	0.4	60
5 and younger	949	43,237	18	0.4	147	0.4	82	7	0.1	75	0.3	49
6-14	2,910	297,715	73	1.3	784	0.6	181	86	1.5	966	0.4	65
15-20	2,524	199,634	63	2.0	622	0.2	66	70	2.2	758	0.4	61
21-44	4,328	571,157	298	3.6	2,665	0.4	167	37	0.4	287	0.2	23
45-64	1,840	129,094	34	3.3	324	0.5	180	10	1.0	74	0.9	51
65-74	2,121	104,843	7	2.4	82	0.2	47	12	4.1	141	0.8	115
75-84	2,072	91,209	2	0.5	24	0.1	10	11	2.8	97	0.4	45
85 and older	476	20,402	1	0.3	3	1.0	70	4	1.2	39	1.0	81
Male	93,850	10,334,572	2,099	8.0	22,195	0.5	202	1,722	6.5	19,313	0.7	122
Disabled	81,866	9,453,526	1,970	18.4	20,947	0.5	205	1,410	13.2	15,944	0.7	132
5 and younger	533	30,850	4	1.1	48	0.8	161	2	0.5	10	0.5	35
6-14	2,549	264,121	59	4.9	633	0.7	194	67	5.6	669	0.6	89
15-20	1,382	120,846	12	2.3	109	0.5	244	38	7.2	440	0.7	86
21-44	28,177	3,921,181	1,007	26.9	10,460	0.5	180	651	17.4	7,408	0.7	135
45-64	47,077	4,973,273	877	19.1	9,565	0.6	231	641	14.0	7,290	0.7	134
65-74	1,960	135,864	11	4.3	132	0.9	350	9	3.5	103	1.3	191
75-84	135	5,259	0	0.0	0	0.0	0	1	3.0	12	1.1	9
85 and older	53	2,132	0	0.0	0	0.0	0	1	11.1	12	0.2	4
Other Eligibles	11,984	881,046	129	0.8	1,248	0.6	160	312	2.0	3,369	0.6	76
5 and younger	1,573	93,168	19	0.4	196	0.6	141	3	0.1	27	0.3	28
6-14	4,971	439,031	60	1.0	643	0.7	188	184	3.2	2,017	0.6	83
15-20	2,158	167,103	15	0.6	125	0.3	99	99	4.0	1,045	0.5	71
21-44	414	38,994	21	1.4	145	0.4	164	2	0.1	5	0.8	230
45-64	507	31,217	9	2.2	79	0.6	184	2	0.5	14	0.4	19
65-74	1,384	67,553	3	1.4	36	0.3	16	16	7.4	189	0.5	56
75-84	848	37,454	2	1.0	24	0.1	8	2	1.0	24	0.5	35
85 and older	129	6,526	0	0.0	0	0.0	0	4	4.2	48	0.1	9
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 D.C., 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, D.C., 2001

Beneficiary Characteristics	ANTICONVULSANT					ANTIDEPRESSANTS					ANTIDIABETIC				
	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	3,395	5.7 %	37,514	0.7	\$44	4,238	7.1 %	46,101	0.5	\$29	3,650	6.1 %	39,691	0.6	\$29
Female	1,794	5.4	19,900	0.6	39	2,720	8.2	29,597	0.4	28	2,428	7.3	26,480	0.6	29
Disabled	1,588	17.3	18,013	0.6	40	2,191	23.8	24,699	0.5	29	2,078	22.6	23,575	0.6	29
5 and younger	8	2.5	42	0.4	86	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	36	6.0	375	0.8	58	31	5.1	303	0.3	22	0	0.0	0	0.0	0
15-20	21	6.2	250	0.8	82	18	5.3	201	0.5	30	2	0.6	17	0.6	33
21-44	640	21.1	7,225	0.6	43	791	26.1	8,794	0.4	29	338	11.1	3,812	0.5	25
45-64	830	18.9	9,505	0.6	36	1,288	29.3	14,648	0.5	29	1,573	35.8	17,826	0.6	31
65-74	44	11.6	514	0.5	27	55	14.6	657	0.4	22	146	38.6	1,704	0.6	25
75-84	9	8.3	102	0.6	27	7	6.4	84	0.2	13	18	16.5	204	0.7	36
85 and older	0	0.0	0	0.0	0	1	5.0	12	0.1	0	1	5.0	12	0.2	2
Other Eligibles	206	0.9	1,887	0.6	34	529	2.2	4,898	0.4	24	350	1.5	2,905	0.5	25
5 and younger	6	0.1	44	0.3	17	3	0.1	32	0.2	11	2	0.0	20	0.2	7
6-14	32	0.6	306	0.5	23	135	2.3	1,441	0.4	26	5	0.1	39	0.7	36
15-20	60	1.9	671	0.6	48	140	4.4	1,462	0.4	25	15	0.5	148	0.5	35
21-44	60	0.7	393	0.4	25	156	1.9	1,131	0.3	16	107	1.3	636	0.4	19
45-64	16	1.5	136	0.4	26	50	4.8	344	0.4	23	84	8.1	488	0.6	31
65-74	13	4.5	142	0.7	21	24	8.3	265	0.6	37	69	23.8	800	0.6	25
75-84	12	3.1	137	0.7	30	13	3.3	144	0.5	25	63	16.1	727	0.6	25
85 and older	7	2.0	58	1.0	36	8	2.3	79	0.6	28	5	1.5	47	0.5	10
Male	1,601	6.1	17,614	0.8	49	1,518	5.8	16,504	0.5	32	1,222	4.6	13,211	0.6	28
Disabled	1,420	13.3	15,789	0.8	50	1,164	10.9	12,833	0.5	33	1,085	10.1	11,999	0.6	29
5 and younger	15	4.0	112	0.5	21	2	0.5	10	0.7	20	0	0.0	0	0.0	0
6-14	63	5.3	648	0.5	30	65	5.4	601	0.5	35	2	0.2	24	0.4	18
15-20	36	6.8	378	1.0	58	34	6.5	370	0.5	37	1	0.2	3	0.7	17
21-44	612	16.4	6,861	0.8	61	439	11.7	4,882	0.5	40	221	5.9	2,410	0.5	25
45-64	672	14.6	7,544	0.7	42	600	13.1	6,694	0.5	28	821	17.9	9,107	0.6	30
65-74	21	8.3	234	0.7	21	23	9.1	264	0.5	22	33	13.0	371	0.6	32
75-84	1	3.0	12	0.1	1	1	3.0	12	0.1	6	6	18.2	72	0.8	35
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	11.1	12	0.4	9
Other Eligibles	181	1.2	1,825	0.7	42	354	2.3	3,671	0.5	27	137	0.9	1,212	0.5	23
5 and younger	10	0.2	101	0.8	58	6	0.1	52	0.4	25	2	0.0	6	0.5	27
6-14	75	1.3	773	0.7	45	190	3.3	2,032	0.5	27	12	0.2	95	0.5	31
15-20	59	2.4	599	0.7	43	112	4.6	1,133	0.5	28	2	0.1	16	0.8	47
21-44	8	0.5	50	1.0	53	6	0.4	39	0.3	18	20	1.3	99	0.5	19
45-64	6	1.5	50	0.5	26	10	2.5	69	0.3	13	23	5.7	138	0.5	21
65-74	13	6.0	151	1.0	36	17	7.9	190	0.5	25	49	22.8	540	0.5	25
75-84	8	4.0	77	0.5	14	9	4.5	108	0.5	26	26	13.0	282	0.5	17
85 and older	2	2.1	24	0.3	11	4	4.2	48	0.4	25	3	3.2	36	0.5	31
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

Table ND7B

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

Beneficiary Characteristics	ANTI-ASTHMATIC				ANTI-HYPERTENSIVE				ANALGESICS - Narcotic						
	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	5,772	9.7 %	58,573	0.4	\$18	4,898	8.2 %	53,092	0.5	\$19	6,013	10.1 %	64,033	0.4	\$14
Female	3,648	11.0	38,039	0.4	19	3,018	9.1	32,772	0.6	19	3,962	11.9	42,114	0.4	13
Disabled	2,653	28.8	30,158	0.4	20	2,582	28.1	29,035	0.6	19	3,148	34.2	35,633	0.4	15
5 and younger	65	19.9	629	0.3	20	0	0.0	0	0.0	0	3	0.9	36	0.1	1
6-14	99	16.4	987	0.3	21	7	1.2	68	0.5	8	27	4.5	274	0.2	3
15-20	41	12.0	442	0.3	23	9	2.6	108	0.6	9	25	7.3	278	0.2	1
21-44	678	22.4	7,839	0.3	18	413	13.6	4,478	0.5	16	967	31.9	10,806	0.3	14
45-64	1,657	37.7	18,950	0.4	21	1,925	43.8	21,720	0.6	20	1,988	45.3	22,637	0.4	16
65-74	89	23.5	1,038	0.4	17	182	48.1	2,115	0.6	24	114	30.2	1,332	0.3	10
75-84	24	22.0	273	0.5	19	42	38.5	498	0.6	20	21	19.3	234	0.4	5
85 and older	0	0.0	0	0.0	0	4	20.0	48	0.5	11	3	15.0	36	0.2	1
Other Eligibles	995	4.1	7,881	0.3	12	436	1.8	3,737	0.5	17	814	3.4	6,481	0.2	4
5 and younger	203	4.3	1,432	0.2	10	3	0.1	31	0.4	2	7	0.1	61	0.1	1
6-14	233	4.0	2,126	0.3	12	31	0.5	352	0.5	4	31	0.5	229	0.2	2
15-20	156	4.9	1,390	0.2	10	2	0.1	21	0.3	8	77	2.4	694	0.1	1
21-44	257	3.1	1,657	0.3	12	116	1.4	629	0.4	12	501	6.0	3,668	0.2	4
45-64	65	6.2	396	0.5	21	95	9.1	560	0.5	17	110	10.6	859	0.3	7
65-74	40	13.8	443	0.3	14	81	27.9	916	0.6	21	41	14.1	465	0.2	2
75-84	29	7.4	345	0.6	24	84	21.4	989	0.6	23	31	7.9	365	0.2	8
85 and older	12	3.5	92	0.3	11	24	7.0	239	0.5	16	16	4.7	140	0.2	4
Male	2,124	8.0	20,534	0.4	17	1,880	7.1	20,320	0.5	18	2,051	7.8	21,919	0.4	16
Disabled	1,258	11.7	13,753	0.4	19	1,654	15.4	18,122	0.5	18	1,833	17.1	20,031	0.4	17
5 and younger	99	26.7	912	0.3	18	4	1.1	35	0.3	10	4	1.1	31	0.2	1
6-14	172	14.4	1,819	0.3	16	32	2.7	296	0.5	7	21	1.8	213	0.1	1
15-20	50	9.5	549	0.3	14	9	1.7	103	0.5	13	21	4.0	237	0.3	12
21-44	267	7.1	2,950	0.4	18	349	9.3	3,758	0.5	17	632	16.9	6,869	0.3	14
45-64	615	13.4	6,863	0.4	20	1,197	26.1	13,220	0.5	19	1,111	24.2	12,170	0.4	20
65-74	51	20.1	612	0.5	20	53	20.9	597	0.6	20	38	15.0	439	0.3	6
75-84	4	12.1	48	0.1	6	7	21.2	77	0.4	16	4	12.1	48	0.1	5
85 and older	0	0.0	0	0.0	0	3	33.3	36	0.5	19	2	22.2	24	0.1	2
Other Eligibles	866	5.5	6,781	0.3	14	226	1.4	2,198	0.6	16	218	1.4	1,888	0.2	4
5 and younger	337	6.7	2,420	0.3	16	4	0.1	27	0.6	13	23	0.5	167	0.1	1
6-14	360	6.2	2,933	0.3	13	75	1.3	826	0.6	6	21	0.4	180	0.1	1
15-20	106	4.3	864	0.2	10	10	0.4	94	0.6	8	52	2.1	519	0.1	1
21-44	22	1.5	153	0.3	12	20	1.3	100	0.4	8	41	2.7	237	0.3	10
45-64	9	2.2	65	0.2	7	29	7.2	188	0.8	21	25	6.2	167	0.3	8
65-74	9	4.2	99	0.3	9	50	23.3	534	0.6	23	42	19.5	460	0.2	7
75-84	21	10.5	223	0.4	23	33	16.5	369	0.7	27	12	6.0	134	0.2	2
85 and older	2	2.1	24	0.2	7	5	5.3	60	0.8	39	2	2.1	24	0.1	1
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 D.C., 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, D.C., 2001

Beneficiary Characteristics	CALCIUM BLOCKERS				DERMATOLOGICAL				Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Bene Mos among Users	No. of Bene Mos
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of All Benes	No. of Users	No. of Bene Mos among Users										
All	2,560	4.3 %	27,759	0.6	\$32	8,239	13.8 %	85,819	0.2	\$10	59,769	356,265						
Female	1,643	4.9	17,906	0.6	33	4,893	14.7	51,024	0.2	10	33,303	188,818						
Disabled	1,397	15.2	15,883	0.6	33	3,205	34.8	36,851	0.2	11	9,201	88,652						
5 and younger	1	0.3	12	0.8	34	30	9.2	277	0.1	3	326	2,179						
6-14	1	0.2	12	1.0	51	115	19.1	1,215	0.2	6	603	4,823						
15-20	2	0.6	24	0.1	5	78	22.9	853	0.2	6	341	3,064						
21-44	198	6.5	2,164	0.5	28	1,089	35.9	12,468	0.2	10	3,032	29,653						
45-64	1,049	23.9	11,970	0.6	33	1,800	41.0	20,946	0.2	12	4,392	44,137						
65-74	115	30.4	1,334	0.7	41	78	20.6	918	0.2	9	378	3,657						
75-84	30	27.5	355	0.7	37	12	11.0	138	0.1	6	109	982						
85 and older	1	5.0	12	0.3	10	3	15.0	36	0.1	1	20	157						
Other Eligibles	246	1.0	2,023	0.6	29	1,688	7.0	14,173	0.2	8	24,102	100,166						
5 and younger	0	0.0	0	0.0	0	372	7.9	2,313	0.2	5	4,722	17,348						
6-14	0	0.0	0	0.0	0	341	5.9	3,012	0.2	7	5,797	25,949						
15-20	5	0.2	35	0.2	8	343	10.7	3,460	0.2	7	3,208	15,423						
21-44	67	0.8	367	0.5	24	409	4.9	3,074	0.2	9	8,310	29,421						
45-64	57	5.5	342	0.5	24	79	7.6	683	0.3	13	1,041	3,755						
65-74	50	17.2	545	0.6	31	65	22.4	741	0.2	11	290	2,764						
75-84	53	13.5	593	0.7	35	54	13.8	611	0.2	10	392	3,263						
85 and older	14	4.1	141	0.5	27	25	7.3	279	0.2	11	342	2,243						
Male	917	3.5	9,853	0.6	31	3,346	12.7	34,795	0.2	10	26,399	167,055						
Disabled	835	7.8	9,075	0.6	31	2,385	22.3	26,892	0.2	11	10,715	96,113						
5 and younger	2	0.5	13	0.2	10	69	18.6	666	0.2	5	371	2,602						
6-14	2	0.2	24	0.1	5	139	11.6	1,520	0.2	6	1,194	9,511						
15-20	3	0.6	19	0.8	54	86	16.3	948	0.2	8	527	4,498						
21-44	162	4.3	1,741	0.5	27	915	24.5	10,418	0.2	11	3,739	34,308						
45-64	618	13.5	6,736	0.6	32	1,126	24.5	12,770	0.2	13	4,588	42,724						
65-74	41	16.1	465	0.6	29	45	17.7	517	0.3	14	254	2,117						
75-84	4	12.1	41	0.4	13	5	15.2	53	0.2	5	33	273						
85 and older	3	33.3	36	0.7	35	0	0.0	0	0.0	0	9	80						
Other Eligibles	82	0.5	778	0.7	36	961	6.1	7,903	0.2	7	15,684	70,942						
5 and younger	0	0.0	0	0.0	0	399	7.9	2,729	0.2	6	5,060	18,471						
6-14	0	0.0	0	0.0	0	287	5.0	2,515	0.2	7	5,761	26,902						
15-20	1	0.0	5	0.4	16	149	6.1	1,465	0.2	8	2,456	14,133						
21-44	9	0.6	48	0.7	41	33	2.2	212	0.3	9	1,495	5,884						
45-64	16	4.0	97	0.8	32	20	5.0	152	0.4	17	402	1,431						
65-74	31	14.4	349	0.7	40	34	15.8	380	0.2	7	215	1,862						
75-84	22	11.0	245	0.6	34	34	17.0	400	0.2	10	200	1,610						
85 and older	3	3.2	34	0.6	24	5	5.3	50	0.2	4	95	649						
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	67	392						

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for D.C., 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, D.C., 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	\$99	1.9	476	5,018
Age				
0-64	146	2.5	258	2,774
65-74	57	1.5	78	825
75-84	31	0.7	83	859
85 and older	35	0.8	57	560
Unknown	0	0.0	0	0
Gender				
Female	94	1.8	255	2,694
Male	105	2.0	221	2,324
Unknown	0	0.0	0	0
Race				
White	112	2.4	33	335
African American	98	1.7	398	4,187
Other/unknown	106	2.5	45	496
Basis of Eligibility^c				
Aged	45	1.1	209	2,173
Disabled	142	2.4	250	2,708
Adults	119	3.6	17	137
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2001 file for D.C., 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 360 beneficiaries who were in nursing facilities for part of their enrollment and their 3,462 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, D.C., 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							
	Total	Patented	Off-Patent	Total	Patented	Off-Patent												
	Brand-Name	Brand-Name	Brand-Name	Brand-Name	Brand-Name	Brand-Name												
Anti-infective Agents	0.8	0.6	0.0	0.2	###	\$115	\$0	\$11	\$156	\$203	\$26	\$47	707	\$110,227	83	17.4 %	873	
Biologicals	0.1	0.0	0.0	0.1	2	0	0	2	27	0	0	27	5	137	5	1.1	60	
Antineoplastic Agents	0.7	0.0	0.3	0.4	87	0	44	43	130	0	144	118	103	13,376	15	3.2	154	
Endocrine/Metabolic Drugs	1.1	0.6	0.2	0.2	35	30	3	2	33	51	12	7	430	14,127	38	8.0	409	
Cardiovascular Agents	2.0	0.6	0.2	1.3	63	32	7	25	31	51	40	20	1,659	50,930	80	16.8	810	
Respiratory Agents	0.6	0.3	0.0	0.4	19	13	1	6	30	50	31	15	291	8,704	40	8.4	451	
Gastrointestinal Agents	1.2	0.4	0.1	0.7	44	22	6	16	37	63	61	21	972	35,663	78	16.4	809	
Genitourinary Agents	0.8	0.5	0.0	0.4	39	35	0	5	46	73	0	13	147	6,827	16	3.4	173	
CNS Drugs	1.8	0.9	0.1	0.8	108	84	10	14	61	96	86	18	1,645	100,965	87	18.3	937	
Stimulants/Anti-obesity/Anorexia	0.2	0.0	0.0	0.2	4	0	0	4	22	0	0	22	2	44	1	0.2	12	
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	72	72	0	0	102	102	0	0	28	2,862	4	0.8	40	
Analgesics and Anesthetics	0.8	0.2	0.1	0.5	20	8	5	7	25	51	38	14	355	9,043	46	9.7	447	
Neuromuscular Agents	1.8	0.6	0.5	0.7	71	45	13	13	39	72	28	17	1,372	53,399	71	14.9	749	
Nutritional Products	0.7	0.0	0.2	0.5	9	0	4	5	14	10	22	11	266	3,619	38	8.0	386	
Hematological Agents	1.2	0.5	0.3	0.5	99	90	4	5	83	200	13	11	501	41,417	46	9.7	420	
Topical Products	0.8	0.4	0.1	0.3	31	22	3	5	38	52	54	16	668	25,095	75	15.8	814	
Miscellaneous Products	0.7	0.3	0.0	0.4	170	64	7	99	259	237	663	263	61	15,791	8	1.7	93	
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	26	0	0	0	51	0	0	0	127	6,495	23	4.8	254	
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.	9,339	498,721	n.a.	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for D.C., 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 360 beneficiaries who were in nursing facilities for part of their enrollment and their 3,462 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 D.C., 1.2 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, D.C., 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
ANTIVIRAL	\$78,365	34	7.1 %	339	0.8	\$290	\$231
ANTIPSYCHOTICS	59,163	63	13.2	693	0.8	105	85
ANTICONVULSANT	43,455	79	16.6	820	1.2	43	53
ANTIDEPRESSANTS	31,387	65	13.7	702	0.8	53	45
ULCER DRUGS	25,692	68	14.3	725	0.7	54	35
ANTICOAGULANTS	23,305	22	4.6	213	1.2	93	109
ANTIDIABETIC	18,993	61	12.8	641	0.8	36	30
DERMATOLOGICAL	18,574	118	24.8	1,291	0.3	43	14
ANTIHYPERTENSIVE	16,953	62	13.0	621	1.0	27	27
ASSORTED CLASSES	15,563	6	1.3	72	0.7	299	216
Total	331,450	578		6,117	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for D.C., 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 360 beneficiaries who were in nursing facilities for part of their enrollment and their 3,462 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, D.C., 2001

Beneficiary Characteristics	All Top 10 Drug Groups										ANTIVIRAL					ANTIPSYCHOTICS				
	No. of Rx	Rx \$	Users as %			Mean Rx \$	Mean No. of Rx	Users as %			Mean Rx \$	Mean No. of Rx	Users as %			Mean Rx \$	Mean No. of Rx			
			No. of Users	No. of Bene Mos among Users	NF Residents			No. of Users	No. of Bene Mos among Users	NF Residents			No. of Users	No. of Bene Mos among Users	NF Residents					
All	4,804	\$331,450	34	7.1 %	339	0.8	\$231	63	13.2 %	693	0.8	\$65	63	13.2 %	693	0.8	\$65			
Female	2,497	167,020	16	6.3	156	0.8	198	30	11.8	333	0.8	69	30	11.8	333	0.8	69			
Disabled	1,533	122,611	10	9.3	120	1.0	251	14	13.1	168	0.8	80	14	13.1	168	0.8	80			
64 or younger	1,394	117,805	10	10.1	120	1.0	251	13	13.1	156	0.8	85	13	13.1	156	0.8	85			
65-74	139	4,806	0	0.0	0	0.0	0	1	14.3	12	0.1	9	1	14.3	12	0.1	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			
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			
Other Eligibles	964	44,409	6	4.1	36	0.4	24	16	10.8	165	0.8	58	16	10.8	165	0.8	58			
64 or younger	241	10,452	3	30.0	9	0.8	65	3	30.0	36	1.4	77	3	30.0	36	1.4	77			
65-74	288	13,487	2	5.0	24	0.2	3	4	10.0	45	0.5	35	4	10.0	45	0.5	35			
75-84	248	11,169	0	0.0	0	0.0	0	7	11.9	60	0.5	42	7	11.9	60	0.5	42			
85 and older	187	9,301	1	2.6	3	1.0	70	2	5.1	24	1.2	116	2	5.1	24	1.2	116			
Male	2,307	164,430	18	8.1	183	0.8	259	33	14.9	360	0.8	100	33	14.9	360	0.8	100			
Disabled	1,713	139,245	17	11.9	171	0.8	277	26	18.2	276	0.9	112	26	18.2	276	0.9	112			
64 or younger	1,700	138,891	17	12.3	171	0.8	277	26	18.8	276	0.9	112	26	18.8	276	0.9	112			
65-74	13	354	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			
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			
Other Eligibles	594	25,185	1	1.3	12	0.2	3	7	9.0	84	0.6	64	7	9.0	84	0.6	64			
64 or younger	165	5,962	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	324	13,842	1	3.8	12	0.2	3	5	19.2	60	0.7	76	5	19.2	60	0.7	76			
75-84	84	4,353	0	0.0	0	0.0	0	1	4.2	12	0.8	65	1	4.2	12	0.8	65			
85 and older	21	1,028	0	0.0	0	0.0	0	1	5.9	12	0.1	3	1	5.9	12	0.1	3			
Unknown	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 D.C., 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 360 beneficiaries who were in nursing facilities for part of their enrollment and their 3,462 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, D.C., 2001

Beneficiary Characteristics	ANTICONVULSANT						ANTIDEPRESSANTS						ULCER DRUGS					
	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	79	16.6 %	1.2	\$53	65	13.7 %	702	0.8	\$45	68	14.3 %	725	0.7	\$35				
Female																		
Disabled																		
64 or younger	19	17.8	1.1	39	19	17.8	214	0.9	47	21	19.6	239	0.6	33				
65-74	3	42.9	1.4	43	0	0.0	0	0.0	0	3	42.9	31	0.3	7				
75-84	0	0.0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
85 and older	0	0.0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
Other Eligibles																		
64 or younger	18	12.2	1.0	41	14	9.5	139	0.9	47	17	11.5	188	0.8	40				
65-74	4	40.0	0.9	35	5	50.0	51	1.0	40	4	40.0	48	0.6	35				
75-84	4	10.0	0.9	42	6	15.0	64	1.0	56	3	7.5	36	0.8	39				
85 and older	4	6.8	1.1	51	2	3.4	12	0.8	56	5	8.5	50	0.8	38				
Male																		
Disabled																		
64 or younger	32	22.4	1.3	67	27	18.9	289	0.7	39	25	17.5	270	0.6	34				
65-74	1	20.0	1.1	30	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				
85 and older	0	0.0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
Other Eligibles																		
64 or younger	10	12.8	1.6	62	5	6.4	60	0.9	58	5	6.4	28	0.7	31				
65-74	2	18.2	2.3	158	0	0.0	0	0.0	0	4	36.4	19	0.7	38				
75-84	6	23.1	1.8	54	2	7.7	24	1.2	45	1	3.8	9	0.7	16				
85 and older	2	8.3	0.8	23	1	4.2	12	1.1	122	0	0.0	0	0.0	0				
Unknown																		
	0	0.0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				

Source: Data for this table are from the MAX 2001 file for D.C., 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 360 beneficiaries who were in nursing facilities for part of their enrollment and their 3,462 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, D.C., 2001

Beneficiary Characteristics	ANTICOAGULANTS					ANTIIDIABETIC					DERMATOLOGICAL				
	Users as %					Users as %					Users as %				
	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	22	4.6 %	213	1.2	\$109	61	12.8 %	641	0.8	\$30	118	24.8 %	1,291	0.3	\$14
Female	14	5.5	163	1.1	131	36	14.1	405	0.8	30	55	21.6	616	0.3	15
Disabled	8	7.5	91	1.2	207	23	21.5	266	0.8	32	29	27.1	340	0.3	17
64 or younger	6	6.1	72	1.2	259	20	20.2	235	0.9	33	26	26.3	304	0.3	14
65-74	2	28.6	19	1.4	11	3	42.9	31	0.3	22	3	42.9	36	0.6	43
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	6	4.1	72	1.0	34	13	8.8	139	0.7	25	26	17.6	276	0.3	13
64 or younger	1	10.0	12	1.4	19	2	20.0	24	0.9	38	3	30.0	36	0.4	13
65-74	2	5.0	24	1.4	47	3	7.5	28	0.8	40	11	27.5	112	0.4	18
75-84	3	5.1	36	0.6	29	7	11.9	75	0.7	16	1	1.7	11	0.1	3
85 and older	0	0.0	0	0.0	0	1	2.6	12	0.8	22	11	28.2	117	0.3	9
Male	8	3.6	50	1.3	40	25	11.3	236	0.8	30	63	28.5	675	0.3	14
Disabled	6	4.2	31	1.1	52	17	11.9	182	0.8	24	46	32.2	506	0.3	15
64 or younger	6	4.3	31	1.1	52	17	12.3	182	0.8	24	46	33.3	506	0.3	15
65-74	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
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	2.6	19	1.7	21	8	10.3	54	1.1	51	17	21.8	169	0.3	9
64 or younger	1	9.1	10	0.8	8	4	36.4	9	0.7	33	9	81.8	76	0.4	11
65-74	1	3.8	9	2.8	36	3	11.5	33	0.9	54	5	19.2	57	0.4	10
75-84	0	0.0	0	0.0	0	1	4.2	12	2.0	53	2	8.3	24	0.2	4
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	5.9	12	0.5	4
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 D.C., 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 360 beneficiaries who were in nursing facilities for part of their enrollment and their 3,462 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, D.C., 2001

Beneficiary Characteristics	ANTIHYPERTENSIVE										ASSORTED CLASSES									
	Users as %					Users as %					Users as %					Users as %				
	No. of Users	No. of All-Year Residents	NF Residents	No. of Bene Users	Mean Rx	No. of Users	No. of All-Year Residents	NF Residents	No. of Bene Users	Mean Rx	No. of Users	No. of All-Year Residents	NF Residents	No. of Bene Users	Mean Rx	No. of Users	No. of All-Year Residents	NF Residents	No. of Bene Users	Mean Rx
All	62	13.0 %		621	1.0	6	1.3 %		72	0.7	6	1.3 %		72	0.7	6	1.3 %		476	\$216
Female	32	12.5		333	1.0	6	2.4		72	0.7	6	2.4		72	0.7	6	2.4		255	216
Disabled	21	19.6		218	1.0	4	3.7		48	1.0	4	3.7		48	1.0	4	3.7		107	324
64 or younger	18	18.2		187	1.1	4	4.0		48	1.0	4	4.0		48	1.0	4	4.0		99	324
65-74	3	42.9		31	0.9	0	0.0		0	0.0	0	0.0		0	0.0	0	0.0		7	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
85 and older	0	0.0		0	0.0	0	0.0		0	0.0	0	0.0		0	0.0	0	0.0		1	0
Other Eligibles	11	7.4		115	0.8	2	1.4		24	0.1	2	1.4		24	0.1	2	1.4		148	1
64 or younger	1	10.0		12	1.2	0	0.0		0	0.0	0	0.0		0	0.0	0	0.0		10	0
65-74	3	7.5		28	1.0	0	0.0		0	0.0	0	0.0		0	0.0	0	0.0		40	0
75-84	4	6.8		48	1.0	1	1.7		12	0.1	1	1.7		12	0.1	1	1.7		59	0
85 and older	3	7.7		27	0.3	1	2.6		12	0.1	1	2.6		12	0.1	1	2.6		39	1
Male	30	13.6		288	1.1	0	0.0		0	0.0	0	0.0		0	0.0	0	0.0		221	0
Disabled	18	12.6		177	1.0	0	0.0		0	0.0	0	0.0		0	0.0	0	0.0		143	0
64 or younger	18	13.0		177	1.0	0	0.0		0	0.0	0	0.0		0	0.0	0	0.0		138	0
65-74	0	0.0		0	0.0	0	0.0		0	0.0	0	0.0		0	0.0	0	0.0		5	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
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
Other Eligibles	12	15.4		111	1.2	0	0.0		0	0.0	0	0.0		0	0.0	0	0.0		78	0
64 or younger	7	63.6		54	1.4	0	0.0		0	0.0	0	0.0		0	0.0	0	0.0		11	0
65-74	4	15.4		45	1.0	0	0.0		0	0.0	0	0.0		0	0.0	0	0.0		26	0
75-84	1	4.2		12	1.3	0	0.0		0	0.0	0	0.0		0	0.0	0	0.0		24	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		17	0
Unknown	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 D.C., released by CMS in 06/2005. This table was produced on 09/19/2006.

a. 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 360 beneficiaries who were in nursing facilities for part of their enrollment and their 3,462 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 ND10D

Nondual Beneficiaries

TABLE ND.11
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG NONDUALS
 BY BENEFICIARY CHARACTERISTIC^{a,b}
 D.C., 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
All	7,968	13.3 %	0.7	42,955	\$805,771	\$19	2.5 %	59,769
Age								
5 and younger	737	7.0	0.1	1,330	28,346	21	5.4	10,524
6-14	536	4.0	0.1	1,176	38,411	33	2.2	13,376
15-20	436	6.7	0.1	877	26,528	30	3.3	6,532
21-44	2,332	14.1	0.7	11,331	238,001	21	2.1	16,577
45-64	3,430	32.9	2.4	24,630	427,888	17	2.7	10,423
65-74	318	28.0	2.1	2,334	26,363	11	2.5	1,137
75-84	146	19.9	1.4	1,056	17,422	16	4.3	734
85 and older	33	7.1	0.5	221	2,812	13	3.6	466
Unknown	0	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^c								
Aged	250	16.3	1.1	1,637	23,745	15	3.3	1,530
Disabled	5,740	28.8	1.9	37,541	688,848	18	2.4	19,917
Adults	689	5.7	0.1	1,508	34,202	23	2.9	12,142
Children	1,289	4.9	0.1	2,269	58,976	26	3.0	26,180
Unknown	0	0.0	0.0	0	0	0	0.0	0
Gender								
Female	4,794	14.4	0.8	26,539	480,096	18	2.8	33,303
Male	3,174	12.0	0.6	16,416	325,675	20	2.2	26,399
Unknown	0	0.0	0.0	0	0	0	0.0	67
Race								
White	242	17.3	1.5	2,071	47,531	23	3.9	1,401
African American	6,802	13.4	0.7	35,726	658,690	18	2.4	50,733
Other/unknown	924	12.1	0.7	5,158	99,550	19	2.9	7,635
Use of Nursing Facilities^d								
Entire year	82	17.2	1.8	840	11,526	14	2.3	476
Part year	168	46.7	3.2	1,144	21,103	18	2.6	360
None	7,718	13.1	0.7	40,971	773,142	19	2.5	58,933
Maintenance Assistance Status								
Cash	5,653	16.8	1.0	33,885	588,848	17	2.3	33,641
Medically needy	1,167	10.4	0.5	5,972	144,473	24	3.5	11,220
Poverty related	464	4.7	0.2	1,476	24,489	17	2.7	9,793
Other/unknown	684	13.4	0.3	1,622	47,961	30	3.0	5,115

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for D.C., 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}
 D.C., 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	0.1	\$2	\$19	\$0	\$1	356,265
Age						
5 and younger	0.0	1	21	0	0	40,790
6-14	0.0	1	33	0	0	67,379
15-20	0.0	1	30	0	0	37,118
21-44	0.1	2	21	0	1	99,274
45-64	0.3	5	17	0	1	92,047
65-74	0.2	3	11	0	1	10,400
75-84	0.2	3	16	0	0	6,128
85 and older	0.1	1	13	0	0	3,129
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.1	2	15	0	0	12,414
Disabled	0.2	4	18	0	1	184,773
Adults	0.0	1	23	0	0	42,836
Children	0.0	1	26	0	0	116,242
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.1	3	18	0	1	188,818
Male	0.1	2	20	0	0	167,055
Unknown	0.0	0	0	0	0	392
Race						
White	0.2	5	23	0	2	10,530
African American	0.1	2	18	0	1	300,453
Other/unknown	0.1	2	19	0	1	45,282
Use of Nursing Facilities^d						
Entire year	0.2	2	14	0	1	5,018
Part year	0.3	6	18	0	1	3,462
None	0.1	2	19	0	1	347,785
Maintenance Assistance Status						
Cash	0.2	3	17	0	1	219,288
Medically needy	0.1	3	24	0	0	54,585
Poverty related	0.0	1	17	0	0	32,291
Other/unknown	0.0	1	30	0	0	50,101

Source: Data for this table are from the MAX 2001 file for D.C., 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}
 D.C., 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	10,859	\$74	\$805,771	100.0 %	42,955	\$19	100.0 %
Anorexia or weight loss/gain	122	123	14,993	1.9	240	62	0.6
Fertility drugs	11	71	784	0.1	17	46	0.0
Drugs for cosmetic purposes	39	1,606	62,635	7.8	243	258	0.6
Cough and cold medications	2,911	87	253,729	31.5	6,466	39	15.1
Vitamins and minerals	2,588	62	159,984	19.9	12,075	13	28.1
Non-prescription drugs	2,722	28	75,131	9.3	9,174	8	21.4
Barbiturates	282	59	16,605	2.1	2,734	6	6.4
Benzodiazepines	1,992	99	197,985	24.6	11,502	17	26.8
Other Part D Excl Rx Drugs	192	125	23,925	3.0	504	47	1.2

Source: Data for this table are from the MAX 2001 file for D.C., 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 nondual 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, D.C., 2001

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	133,370	1,531	21,945	33,455	76,439	1,323,632	12,429	215,724	326,680	768,799	0
Age											
5 and younger	28,538	3	919	86	27,530	0	21	8,589	696	264,488	0
6-14	39,141	2	2,864	147	36,128	0	14	30,496	1,417	377,175	0
15-20	15,704	0	1,508	2,001	12,195	0	0	15,908	19,447	123,081	0
21-44	34,600	3	6,860	27,157	580	0	14	66,019	265,801	4,014	0
45-64	13,040	10	8,991	4,033	6	0	90	87,446	39,065	41	0
65-74	1,146	487	632	27	0	0	4,536	5,774	226	0	0
75-84	734	590	142	2	0	0	4,865	1,255	16	0	0
85 and older	467	436	29	2	0	0	2,889	237	12	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	78,544	1,022	9,907	29,538	38,077	0	8,285	100,217	293,335	384,537	0
Male	54,752	509	12,036	3,917	38,290	0	4,144	115,492	33,345	383,815	0
Unknown	74	0	2	0	72	0	0	15	0	447	0
Race											
White	1,673	111	942	303	317	0	913	8,395	2,405	2,617	0
African American	118,147	1,023	18,206	30,794	68,124	0	7,975	179,667	301,992	690,513	0
Other/unknown	13,550	397	2,797	2,358	7,998	0	3,541	27,662	22,283	75,669	0
Use of Nursing Facilities^c											
Entire year	476	209	250	17	0	0	2,173	2,708	137	0	0
Part year	361	68	271	22	0	0	623	2,691	200	0	0
None	132,533	1,254	21,424	33,416	76,439	0	9,633	210,325	326,343	768,799	0
Maintenance Assistance Status											
Cash	81,683	620	18,034	25,347	37,682	0	5,635	185,494	254,725	397,789	0
Medically needy	23,345	533	3,362	6,948	12,502	0	3,675	25,751	62,642	111,340	0
Poverty related	22,468	181	540	784	20,963	0	1,402	4,401	6,007	203,000	0
Other/unknown	5,874	197	9	376	5,292	0	1,717	78	3,306	56,670	0
Managed Care Status											
FFS all year	31,965	1,528	18,680	3,236	8,521	0	12,400	178,857	18,644	65,543	0
FFS part year, with Rx claims	5,302	2	553	2,109	2,638	0	23	6,437	20,242	26,127	0
FFS part year, no Rx claims	22,502	0	684	6,797	15,021	0	0	7,707	63,362	144,139	0
MC all year, with Rx claims	2,030	0	505	658	867	0	0	5,854	7,129	9,534	0
MC all year, no Rx claims	71,571	1	1,523	20,655	49,392	0	6	16,869	217,303	523,456	0

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

	Bene Mos in Cell J of Table 1		Benes and		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	No. of Benes	No. of Bene Mos
All	133,370	1,323,632	59,769	356,265	0	967,367		
FFS all year	31,965	275,444	31,965	275,444	0	0		
FFS part year, with Rx claims	5,302	52,829	5,302	19,097	0	33,732		
FFS part year, with no Rx claims	22,502	215,208	22,502	61,724	0	153,484		
MC all year, with Rx claims	2,030	22,517	0	0	0	22,517		
MC all year, with no Rx claims	71,571	757,634	0	0	0	757,634		

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