

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

## LIST OF TABLES

### OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

### FOR ALL MEDICAID BENEFICIARIES

TABLE 2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE 3. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE 4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE 5. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE 6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE 7. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

### FOR ALL NONDUAL BENEFICIARIES

TABLE ND.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE ND.3. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE ND.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE ND.5. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE ND.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE ND.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

TABLE ND.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

TABLE ND.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE ND.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP

TABLE ND.11. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC

TABLE ND.12. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE ND.13. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS FOR SELECTED DRUG CATEGORIES AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC

**FOR DUAL ELIGIBLE BENEFICIARIES**

- TABLE D.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY
- TABLE D.3. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC
- TABLE D.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
- TABLE D.5. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC
- TABLE D.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY
- TABLE D.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP
- TABLE D.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC
- TABLE D.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY
- TABLE D.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP
- TABLE D.11. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG DUALS, BY BENEFICIARY CHARACTERISTIC
- TABLE D.12. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
- TABLE D.13. USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS FOR SELECTED DRUG CATEGORIES AMONG DUALS, BY BENEFICIARY CHARACTERISTIC

**SUPPLEMENTAL TABLES**

- SUPPLEMENTAL TABLE 1. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES
- SUPPLEMENTAL TABLE 1A. MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65
- SUPPLEMENTAL TABLE 1B. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER
- SUPPLEMENTAL TABLE 1C. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74
- SUPPLEMENTAL TABLE 1D. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84
- SUPPLEMENTAL TABLE 1E. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER

**APPENDIX TABLE**

- APPENDIX TABLE A.1. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, NONDUAL BENEFICIARIES
- APPENDIX TABLE A.2. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, NONDUAL BENEFICIARIES
- APPENDIX TABLE A.3. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, DUAL ELIGIBLE BENEFICIARIES
- APPENDIX TABLE A.4. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, DUAL ELIGIBLE BENEFICIARIES

TABLE ND.2

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
NONDUAL BENEFICIARIES, DELAWARE, 2001

Beneficiary Characteristics	No. of Benes							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown		
<b>All</b>	<b>35,859</b>	<b>279</b>	<b>2,201</b>	<b>14,919</b>	<b>18,460</b>	<b>0</b>	<b>105,775</b>	<b>1,592</b>	<b>13,098</b>	<b>48,831</b>	<b>42,254</b>	<b>0</b>		
<b>Age</b>														
5 and younger	7,801	0	180	0	7,621	0	17,048	0	596	0	16,452	0		
6-14	7,722	0	334	0	7,388	0	17,420	0	1,385	0	16,035	0		
15-20	4,968	0	267	1,251	3,450	0	14,789	0	1,324	3,701	9,764	0		
21-44	13,123	0	813	12,309	1	0	45,491	0	5,619	39,869	3	0		
45-64	1,953	0	604	1,349	0	0	9,369	0	4,138	5,231	0	0		
65-74	79	68	3	8	0	0	452	394	36	22	0	0		
75-84	78	76	0	2	0	0	441	433	0	8	0	0		
85 and older	135	135	0	0	0	0	765	765	0	0	0	0		
Unknown	0	0	0	0	0	0	0	0	0	0	0	0		
<b>Gender</b>														
Female	22,694	187	993	12,197	9,317	0	71,190	1,109	5,957	43,285	20,839	0		
Male	13,165	92	1,208	2,722	9,143	0	34,585	483	7,141	5,546	21,415	0		
Unknown	0	0	0	0	0	0	0	0	0	0	0	0		
<b>Race</b>														
White	15,907	152	1,065	7,224	7,466	0	47,974	882	6,625	23,298	17,169	0		
African American	14,849	67	953	5,947	7,882	0	43,459	430	5,744	19,536	17,749	0		
Other/unknown	5,103	60	183	1,748	3,112	0	14,342	280	729	5,997	7,336	0		
<b>Use of Nursing Facilities<sup>c</sup></b>														
Entire year	161	60	101	0	0	0	1,577	556	1,021	0	0	0		
Part year	79	20	58	1	0	0	591	157	428	6	0	0		
None	35,619	199	2,042	14,918	18,460	0	103,607	879	11,649	48,825	42,254	0		
<b>Maintenance Assistance Status</b>														
Cash	26,612	87	1,788	9,956	14,781	0	65,114	499	10,549	22,680	31,386	0		
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0		
Poverty-related	1,926	3	3	216	1,704	0	4,318	24	15	532	3,747	0		
Other/unknown	7,321	189	410	4,747	1,975	0	36,343	1,069	2,534	25,619	7,121	0		
<b>Managed Care Status</b>														
FFS all year	8,475	243	1,075	3,724	3,433	0	42,325	1,496	9,862	20,060	10,907	0		
FFS part year, with Rx claims	17,556	32	914	7,924	8,686	0	40,538	84	2,743	20,021	17,690	0		
FFS part year, no Rx claims	9,828	4	212	3,271	6,341	0	22,912	12	493	8,750	13,657	0		

Table ND2

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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<sup>a,b</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 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	53.9 %	5.4	\$307	\$57	\$3,357	9.2 %	35,859
<b>Age</b>							
5 and younger	54.7	2.7	105	39	1,685	6.2	7,801
6-14	44.8	2.7	129	47	1,716	7.5	7,722
15-20	52.3	3.8	182	48	3,880	4.7	4,968
21-44	58.8	6.8	416	61	3,755	11.1	13,123
45-64	59.3	18.8	1,325	71	10,641	12.4	1,953
65-74	60.8	22.2	1,009	45	25,484	4.0	79
75-84	43.6	24.4	1,153	47	13,486	8.6	78
85 and older	36.3	17.8	695	39	11,765	5.9	135
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>							
Aged	45.2	21.6	939	44	15,680	6.0	279
Disabled	76.6	27.4	2,365	86	25,916	9.1	2,201
Adults	57.0	5.4	245	45	1,863	13.1	14,919
Children	48.9	2.5	103	41	1,688	6.1	18,460
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>							
Female	57.0	5.7	293	51	2,989	9.8	22,694
Male	48.7	4.8	332	69	3,992	8.3	13,165
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Race</b>							
White	57.1	6.6	354	54	3,882	9.1	15,907
African American	52.7	4.9	306	63	3,224	9.5	14,849
Other/unknown	47.5	3.2	165	51	2,107	7.9	5,103
<b>Use of Nursing Facilities<sup>d</sup></b>							
Entire year	70.8	53.6	2,197	41	68,016	3.2	161
Part year	91.1	51.4	3,326	65	45,615	7.3	79
None	53.8	5.1	292	58	2,971	9.8	35,619
<b>Maintenance Assistance Status</b>							
Cash	56.0	5.3	306	58	3,301	9.3	26,612
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	47.3	2.1	84	39	1,456	5.8	1,926
Other/unknown	48.3	6.6	372	57	4,060	9.2	7,321

Table ND3

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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<sup>a,b</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 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				
All	1.8	\$104	9.2 %	46.1 %	20.4 %	8.8 %	12.0 %	6.9 %	5.9 %	\$1,138	35,859	105,775
<b>Age</b>												
5 and younger	1.2	48	6.2	45.3	24.0	9.8	12.4	5.7	2.8	771	7,801	17,048
6-14	1.2	57	7.5	55.2	20.1	7.9	9.5	4.4	2.9	760	7,722	17,420
15-20	1.3	61	4.7	47.7	21.3	9.4	12.0	5.5	4.1	1,303	4,968	14,789
21-44	2.0	120	11.1	41.2	19.7	9.1	13.2	8.7	8.2	1,083	13,123	45,491
45-64	3.9	276	12.4	40.7	11.7	6.3	11.2	11.7	18.5	2,218	1,953	9,369
65-74	3.9	176	4.0	39.2	11.4	8.9	13.9	21.5	5.1	4,454	79	452
75-84	4.3	204	8.6	56.4	5.1	1.3	11.5	11.5	14.1	2,385	78	441
85 and older	3.1	123	5.9	63.7	2.2	3.7	17.0	9.6	3.7	2,076	135	765
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>												
Aged	3.8	165	6.0	54.8	4.7	4.7	15.1	13.6	7.2	2,748	279	1,592
Disabled	4.6	397	9.1	23.4	15.6	10.1	18.3	16.2	16.4	4,355	2,201	13,098
Adults	1.7	75	13.1	43.0	19.6	8.8	12.4	7.9	8.2	569	14,919	48,831
Children	1.1	45	6.1	51.1	21.8	8.7	10.8	4.8	2.7	738	18,460	42,254
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>												
Female	1.8	94	9.8	43.0	21.3	9.0	12.6	7.4	6.7	953	22,694	71,190
Male	1.8	126	8.3	51.3	18.9	8.5	10.9	5.9	4.4	1,520	13,165	34,585
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	2.2	117	9.1	42.9	20.2	8.7	12.5	7.9	7.8	1,287	15,907	47,974
African American	1.7	105	9.5	47.3	20.1	9.1	12.3	6.5	4.7	1,102	14,849	43,459
Other/unknown	1.1	59	7.9	52.5	21.8	8.2	9.4	4.9	3.3	750	5,103	14,342
<b>Use of Nursing Facilities<sup>d</sup></b>												
Entire year	5.5	224	3.2	29.2	5.0	3.1	18.6	24.8	19.3	6,944	161	1,577
Part year	6.9	445	7.3	8.9	8.9	5.1	22.8	25.3	29.1	6,097	79	591
None	1.7	100	9.8	46.2	20.5	8.8	11.9	6.8	5.8	1,021	35,619	103,607
<b>Maintenance Assistance Status</b>												
Cash	2.2	125	9.3	44.0	20.1	9.5	12.8	7.5	6.1	1,349	26,612	65,114
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	1.0	38	5.8	52.7	23.8	8.5	8.9	3.9	2.3	650	1,926	4,318
Other/unknown	1.3	75	9.2	51.7	20.7	6.5	9.7	5.4	6.0	818	7,321	36,343

Table ND4

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 2001

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>1.8</b>	<b>\$104</b>	<b>\$57</b>	<b>0.9</b>	<b>\$85</b>	<b>\$93</b>	<b>0.1</b>	<b>\$5</b>	<b>\$55</b>	<b>0.8</b>	<b>\$14</b>	<b>\$17</b>
<b>Age</b>												
5 and younger	1.2	48	39	0.5	39	74	0.0	1	28	0.7	8	12
6-14	1.2	57	47	0.7	46	69	0.0	2	60	0.5	9	17
15-20	1.3	61	48	0.7	46	70	0.1	3	60	0.5	12	21
21-44	2.0	120	61	1.0	98	101	0.1	6	54	0.9	16	18
45-64	3.9	276	71	2.0	229	113	0.2	15	65	1.6	32	19
65-74	3.9	176	45	1.9	131	68	0.3	14	44	1.6	31	19
75-84	4.3	204	47	2.2	156	72	0.3	15	45	1.8	32	18
85 and older	3.1	123	39	1.3	91	70	0.3	8	29	1.6	24	15
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	3.8	165	44	1.8	124	70	0.3	12	38	1.7	29	17
Disabled	4.6	397	86	2.4	335	141	0.3	20	69	1.9	41	21
Adults	1.7	75	45	0.8	58	71	0.1	4	49	0.8	13	17
Children	1.1	45	41	0.5	37	67	0.0	1	38	0.5	7	14
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Gender</b>												
Female	1.8	94	51	0.9	74	82	0.1	5	54	0.8	14	17
Male	1.8	126	69	0.9	106	114	0.1	4	58	0.8	15	19
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	2.2	117	54	1.1	92	85	0.1	7	60	1.0	18	19
African American	1.7	105	63	0.9	89	104	0.1	4	52	0.7	12	16
Other/unknown	1.1	59	51	0.5	49	91	0.1	2	41	0.6	8	14
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	5.5	224	41	2.1	146	70	0.5	20	36	2.8	57	20
Part year	6.9	445	65	3.1	367	118	0.6	23	36	3.1	54	17
None	1.7	100	58	0.9	82	93	0.1	5	58	0.8	13	17
<b>Maintenance Assistance</b>												
<b>Status</b>												
Cash	2.2	125	58	1.1	102	95	0.1	6	58	1.0	17	17
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	1.0	38	39	0.4	30	74	0.0	1	31	0.5	6	12
Other/unknown	1.3	75	57	0.7	60	87	0.1	4	51	0.5	10	19

Table ND5

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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 Delaware, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users					
	Total	Patented	Off-Patent	Brand-Name	Generic	Total	Patented	Off-Patent	Brand-Name	Generic	Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos
Anti-infective Agents	1.0	0.6	0.0	0.4	\$5	\$94	\$89	\$1	\$5	\$12	32,371	\$3,064,678	11,650	32.5%	32,591
Biologics	0.9	0.9	0.0	0.0	0	771	770	1	0	27	317	276,934	120	0.3	359
Antineoplastic Agents	0.6	0.3	0.1	0.3	156	108	108	28	19	77	415	102,663	114	0.3	660
Endocrine/Metabolic Drugs	1.1	0.6	0.1	0.3	39	29	29	4	6	19	18,483	677,463	5,036	14.0	17,291
Cardiovascular Agents	1.9	0.8	0.1	1.0	65	46	46	2	17	34	14,171	492,361	1,895	5.3	7,590
Respiratory Agents	1.3	0.7	0.0	0.6	53	42	42	1	11	19	30,156	1,259,259	8,449	23.6	23,654
Gastrointestinal Agents	1.0	0.6	0.0	0.4	77	67	67	3	8	22	8,587	636,298	2,085	5.8	8,215
Genitourinary Agents	0.6	0.5	0.0	0.1	22	19	19	0	3	22	2,854	104,731	1,556	4.3	4,739
CNS Drugs	1.7	0.9	0.1	0.7	119	93	93	11	15	21	25,221	1,749,425	3,877	10.8	14,689
Stimulants/Anti-obesity/Anorexia	1.7	1.2	0.1	0.4	92	75	75	4	13	31	3,737	200,393	738	2.1	2,185
Miscellaneous Psychological/Neurological Agents	0.6	0.4	0.0	0.2	54	42	42	0	12	78	445	41,729	207	0.6	771
Analgesics and Anesthetics	1.2	0.3	0.1	0.8	48	33	33	5	10	13	23,350	942,777	6,484	18.1	19,517
Neuromuscular Agents	1.4	0.6	0.1	0.6	77	60	60	4	12	19	11,547	645,634	2,108	5.9	8,358
Nutritional Products	0.8	0.1	0.1	0.5	16	5	5	3	8	16	4,271	90,840	2,040	5.7	5,571
Hematological Agents	0.9	0.3	0.2	0.4	115	93	93	4	18	40	2,100	260,219	529	1.5	2,257
Topical Products	0.8	0.3	0.1	0.4	23	14	14	2	7	16	14,610	436,597	6,360	17.7	19,180
Miscellaneous Products	0.5	0.3	0.0	0.2	21	20	20	0	1	6	580	23,272	382	1.1	1,089
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	15	0	0	0	0	0	330	13,632	234	0.7	911
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	193,545	11,018,905	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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](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 Delaware, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE ND.7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 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	\$1,666,828	791 2.2 %	7,852	0.6	\$353	\$212	
ANTIPSYCHOTICS	473,315	530 1.5	4,232	0.8	144	112	
ANTICONVULSANT	373,845	593 1.7	5,046	1.0	76	74	
ANTIDEPRESSANTS	286,350	984 2.7	6,540	0.7	64	44	
ULCER DRUGS	240,322	607 1.7	4,448	0.6	87	54	
ANTIASTHMATIC	172,171	1,252 3.5	6,693	0.6	44	26	
ANALGESICS - Narcotic	165,817	1,153 3.2	6,903	0.5	51	24	
DERMATOLOGICAL	111,129	1,677 4.7	11,586	0.3	33	10	
CONTRACEPTIVES	109,125	811 2.3	5,278	0.6	36	21	
HEMATOPOIETIC AGENTS	103,746	188 0.5	1,162	0.6	153	89	
Total	3,702,648	8,586	59,740	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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](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<sup>a,b,c</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 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 \$
<b>All</b>	<b>34,372</b>	<b>\$3,702,648</b>	<b>791</b>	<b>2.2 %</b>	<b>7,852</b>	<b>0.6</b>	<b>\$212</b>	<b>530</b>	<b>1.5 %</b>	<b>4,232</b>	<b>0.8</b>	<b>\$112</b>
<b>Female</b>	18,701	1,711,072	341	1.5	3,257	0.6	197	234	1.0	1,899	0.7	101
<b>Disabled</b>	10,716	1,340,283	293	29.5	3,086	0.6	204	144	14.5	1,313	0.7	114
5 and younger	132	10,429	12	15.4	144	0.5	63	0	0.0	0	0.0	0
6-14	437	30,176	13	12.1	156	0.4	95	5	4.7	16	0.6	51
15-20	493	45,452	1	1.3	12	0.1	10	15	19.0	139	0.7	148
21-44	4,820	684,015	170	42.6	1,778	0.6	207	58	14.5	537	0.8	122
45-64	4,834	570,211	97	29.6	996	0.7	238	66	20.1	621	0.7	100
65-74	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
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	7,985	370,789	48	0.2	171	0.4	76	90	0.4	586	0.6	72
5 and younger	474	12,694	2	0.1	5	0.8	26	0	0.0	0	0.0	0
6-14	618	31,378	3	0.1	16	0.2	7	9	0.2	84	0.4	54
15-20	1,121	55,825	8	0.3	13	0.8	121	24	0.8	147	0.5	72
21-44	4,283	179,737	32	0.3	120	0.4	76	30	0.3	97	0.6	43
45-64	222	12,968	2	0.2	5	0.8	360	2	0.2	3	1.3	85
65-74	361	23,426	0	0.0	0	0.0	0	7	16.7	67	1.1	111
75-84	377	26,516	1	2.0	12	0.2	23	7	14.0	75	0.8	105
85 and older	529	28,245	0	0.0	0	0.0	0	11	11.1	113	0.6	64
<b>Male</b>	15,671	1,991,576	450	3.4	4,595	0.6	223	296	2.2	2,333	0.9	121
<b>Disabled</b>	11,925	1,763,496	436	36.1	4,552	0.6	225	191	15.8	1,606	0.9	132
5 and younger	93	6,771	4	3.9	48	0.6	95	0	0.0	0	0.0	0
6-14	771	69,365	8	3.5	96	0.3	105	25	11.0	148	1.4	138
15-20	874	68,855	0	0.0	0	0.0	0	40	21.3	286	0.6	105
21-44	6,757	1,113,065	276	66.7	2,779	0.6	227	81	19.6	765	0.9	164
45-64	3,426	525,424	148	53.6	1,629	0.6	232	45	16.3	407	0.8	88
65-74	4	16	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	3,746	208,080	14	0.1	43	0.4	54	105	0.9	727	0.8	97
5 and younger	493	15,127	2	0.1	5	0.4	8	2	0.1	18	0.4	17
6-14	1,044	54,180	0	0.0	0	0.0	0	29	0.8	183	1.4	127
15-20	1,122	79,181	4	0.2	20	0.3	11	60	3.6	452	0.6	78
21-44	556	36,479	7	0.3	15	0.7	138	6	0.3	22	1.1	349
45-64	79	4,209	1	0.3	3	0.3	4	2	0.7	3	2.3	286
65-74	122	5,209	0	0.0	0	0.0	0	1	2.9	12	0.6	68
75-84	97	5,369	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	233	8,326	0	0.0	0	0.0	0	5	13.9	37	0.6	65
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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](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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 2001

Beneficiary Characteristics	ANTICONVULSANT					ANTIDEPRESSANTS					ULCER DRUGS				
	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 \$
<b>All</b>	<b>593</b>	<b>1.7 %</b>	<b>5,046</b>	<b>1.0</b>	<b>\$74</b>	<b>984</b>	<b>2.7 %</b>	<b>6,540</b>	<b>0.7</b>	<b>\$44</b>	<b>607</b>	<b>1.7 %</b>	<b>4,448</b>	<b>0.6</b>	<b>\$54</b>
<b>Female</b>	269	1.2	2,143	1.0	66	610	2.7	3,764	0.7	43	361	1.6	2,571	0.6	54
<b>Disabled</b>	177	17.8	1,761	1.0	69	262	26.4	2,244	0.7	44	179	18.0	1,699	0.6	58
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	7.7	29	0.8	28
6-14	9	8.4	108	1.1	50	4	3.7	18	0.6	22	7	6.5	77	0.9	68
15-20	14	17.7	115	0.6	33	18	22.8	133	0.8	69	5	6.3	39	0.5	66
21-44	85	21.3	864	1.0	69	118	29.6	964	0.6	43	73	18.3	744	0.5	50
45-64	69	21.0	674	0.9	79	122	37.2	1,129	0.7	42	88	26.8	810	0.7	65
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
<b>Other Eligibles</b>	92	0.4	382	0.9	52	348	1.6	1,520	0.6	41	182	0.8	872	0.6	47
5 and younger	3	0.1	8	0.5	22	0	0.0	0	0.0	0	7	0.2	21	0.8	28
6-14	8	0.2	68	1.1	48	21	0.6	116	0.5	36	5	0.1	21	0.4	11
15-20	18	0.6	98	0.7	50	62	2.1	296	0.5	34	19	0.6	128	0.3	13
21-44	51	0.5	114	1.0	48	200	2.0	637	0.7	47	102	1.0	299	0.5	45
45-64	5	0.5	10	0.7	24	29	2.8	84	0.8	58	12	1.1	20	1.1	113
65-74	4	9.5	48	1.0	101	8	19.0	96	0.5	27	8	19.0	78	0.6	48
75-84	2	4.0	24	0.3	9	9	18.0	102	0.8	48	12	24.0	126	0.7	80
85 and older	1	1.0	12	1.1	50	19	19.2	189	0.7	32	17	17.2	179	0.7	48
<b>Male</b>	324	2.5	2,903	1.0	80	374	2.8	2,776	0.7	45	246	1.9	1,877	0.6	54
<b>Disabled</b>	250	20.7	2,490	1.0	86	192	15.9	1,796	0.7	45	164	13.6	1,548	0.6	57
5 and younger	2	2.0	4	1.8	116	0	0.0	0	0.0	0	8	7.8	36	0.6	26
6-14	21	9.3	154	0.7	99	16	7.0	98	1.2	79	9	4.0	57	0.6	53
15-20	30	16.0	254	1.0	65	31	16.5	204	0.7	49	17	9.0	127	0.9	43
21-44	153	37.0	1,623	1.1	99	100	24.2	1,041	0.6	40	73	17.6	781	0.6	67
45-64	44	15.9	455	0.9	48	45	16.3	453	0.7	48	57	20.7	547	0.6	49
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
<b>Other Eligibles</b>	74	0.6	413	0.8	42	182	1.5	980	0.9	45	82	0.7	329	0.6	39
5 and younger	3	0.1	12	0.3	9	3	0.1	14	0.4	15	17	0.4	51	0.5	19
6-14	20	0.5	100	1.3	37	47	1.3	239	1.1	51	5	0.1	26	0.4	11
15-20	32	1.9	224	0.6	44	67	4.0	433	0.7	41	13	0.8	76	0.4	20
21-44	12	0.5	34	1.0	77	37	1.6	82	1.0	66	32	1.4	68	0.8	69
45-64	3	1.0	6	0.8	36	8	2.7	19	0.7	38	4	1.3	6	0.8	113
65-74	3	8.8	25	1.1	29	6	17.6	55	0.6	17	2	5.9	24	0.6	71
75-84	1	3.6	12	0.2	4	7	25.0	77	0.8	61	2	7.1	17	0.2	11
85 and older	0	0.0	0	0.0	0	7	19.4	61	1.0	35	7	19.4	61	0.7	45
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table ND7B

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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](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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 2001

Beneficiary Characteristics	ANTI-ASTHMATIC				ANALGESICS - Narcotic				DERMATOLOGICAL						
	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 \$
<b>All</b>	<b>1,252</b>	<b>3.5 %</b>	<b>6,693</b>	<b>0.6</b>	<b>\$26</b>	<b>1,153</b>	<b>3.2 %</b>	<b>6,903</b>	<b>0.5</b>	<b>\$24</b>	<b>1,677</b>	<b>4.7 %</b>	<b>11,586</b>	<b>0.3</b>	<b>\$10</b>
<b>Female</b>	681	3.0	3,793	0.6	26	734	3.2	4,191	0.5	26	930	4.1	5,962	0.3	9
<b>Disabled</b>	189	19.0	1,787	0.6	29	249	25.1	2,380	0.5	38	367	37.0	3,807	0.3	9
5 and younger	12	15.4	107	0.2	3	1	1.3	12	0.1	1	8	10.3	49	0.2	2
6-14	11	10.3	109	0.9	23	2	1.9	24	0.1	1	16	15.0	142	0.2	6
15-20	18	22.8	182	0.6	33	4	5.1	43	0.2	12	13	16.5	140	0.3	8
21-44	62	15.5	593	0.7	34	109	27.3	1,044	0.4	27	170	42.6	1,843	0.2	8
45-64	86	26.2	796	0.6	30	133	40.5	1,257	0.5	50	160	48.8	1,633	0.3	10
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
<b>Other Eligibles</b>	492	2.3	2,006	0.5	23	485	2.2	1,811	0.5	10	563	2.6	2,155	0.4	11
5 and younger	125	3.4	460	0.4	16	4	0.1	12	0.3	3	184	4.9	533	0.5	8
6-14	99	2.7	340	0.7	40	16	0.4	46	0.4	3	88	2.9	337	0.5	15
15-20	72	2.4	308	0.4	19	73	2.4	232	0.4	4	88	2.9	350	0.3	13
21-44	140	1.4	447	0.6	25	330	3.3	1,107	0.5	11	125	1.2	409	0.4	14
45-64	14	1.3	35	0.8	33	28	2.7	71	0.7	17	12	1.1	29	0.7	22
65-74	6	14.3	68	1.4	52	6	14.3	61	0.5	15	11	26.2	122	0.2	4
75-84	16	32.0	132	0.5	13	11	22.0	111	0.3	6	14	28.0	134	0.2	5
85 and older	20	20.2	216	0.4	9	17	17.2	171	0.4	12	21	21.2	241	0.2	6
<b>Male</b>	571	4.3	2,900	0.6	25	419	3.2	2,712	0.5	21	747	5.7	5,624	0.3	10
<b>Disabled</b>	151	12.5	1,358	0.7	29	230	19.0	2,132	0.4	21	389	32.2	4,134	0.3	10
5 and younger	7	6.9	37	0.6	19	1	1.0	2	0.5	4	7	6.9	44	0.2	3
6-14	34	15.0	303	0.6	22	5	2.2	48	0.2	1	30	13.2	288	0.2	21
15-20	23	12.2	197	0.5	19	10	5.3	74	0.2	2	36	19.1	335	0.2	9
21-44	36	8.7	375	0.9	40	132	31.9	1,253	0.4	27	210	50.7	2,323	0.2	8
45-64	51	18.5	446	0.6	29	81	29.3	743	0.4	14	106	38.4	1,144	0.3	11
65-74	0	0.0	0	0.0	0	1	100.0	12	0.3	1	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
<b>Other Eligibles</b>	420	3.5	1,542	0.5	22	189	1.6	580	0.7	21	358	3.0	1,490	0.4	10
5 and younger	156	4.0	391	0.6	24	8	0.2	42	0.2	1	158	4.1	404	0.5	10
6-14	137	3.7	425	0.6	27	16	0.4	50	0.3	5	85	2.3	336	0.3	9
15-20	75	4.5	496	0.4	19	30	1.8	122	0.4	5	60	3.6	442	0.3	10
21-44	36	1.6	74	0.8	31	110	4.8	248	1.0	38	29	1.3	82	0.6	29
45-64	2	0.7	8	0.9	44	15	5.1	29	1.1	41	6	2.0	15	0.5	12
65-74	5	14.7	46	0.3	6	3	8.8	22	0.3	3	8	23.5	82	0.2	8
75-84	4	14.3	48	0.4	5	1	3.6	5	0.4	16	5	17.9	60	0.1	2
85 and older	5	13.9	54	0.2	3	6	16.7	62	0.5	6	7	19.4	69	0.3	4
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table ND7C  
 Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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](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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 2001

Beneficiary Characteristics	CONTRACEPTIVES				HEMATOPOIETIC AGENTS				Mean Rx \$	Mean Rx \$	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 \$				
<b>All</b>	<b>811</b>	<b>2.3 %</b>	<b>5,278</b>	<b>0.6</b>	<b>\$21</b>	<b>188</b>	<b>0.5 %</b>	<b>1,162</b>	<b>0.6</b>	<b>\$89</b>	<b>35,859</b>	<b>105,775</b>
<b>Female</b>	811	3.6	5,278	0.6	21	143	0.6	792	0.5	79	22,694	71,190
<b>Disabled</b>	47	4.7	455	0.5	17	40	4.0	390	0.7	152	993	5,957
5 and younger	0	0.0	0	0.0	0	1	1.3	2	0.5	4	78	286
6-14	2	1.9	16	0.2	9	2	1.9	14	1.1	5	107	474
15-20	9	11.4	76	0.6	20	0	0.0	0	0.0	0	79	427
21-44	33	8.3	327	0.6	17	18	4.5	179	0.7	249	399	2,539
45-64	3	0.9	36	0.2	9	19	5.8	195	0.6	75	328	2,207
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Other Eligibles</b>	764	3.5	4,823	0.6	21	103	0.5	402	0.4	9	21,701	65,233
5 and younger	0	0.0	0	0.0	0	4	0.1	9	0.6	4	3,726	8,045
6-14	7	0.2	35	0.3	12	1	0.0	2	0.5	3	3,698	8,008
15-20	166	5.5	763	0.5	20	28	0.9	112	0.3	4	3,016	8,218
21-44	586	5.8	3,999	0.6	21	58	0.6	195	0.4	14	10,018	35,193
45-64	5	0.5	26	0.5	19	4	0.4	14	0.4	4	1,052	4,647
65-74	0	0.0	0	0.0	0	1	2.4	2	1.5	6	42	253
75-84	0	0.0	0	0.0	0	5	10.0	51	0.2	3	50	289
85 and older	0	0.0	0	0.0	0	2	2.0	17	0.6	7	99	580
<b>Male</b>	0	0.0	0	0.0	0	45	0.3	370	0.7	111	13,165	34,585
<b>Disabled</b>	0	0.0	0	0.0	0	37	3.1	322	0.7	127	1,208	7,141
5 and younger	0	0.0	0	0.0	0	1	1.0	3	0.3	2	102	310
6-14	0	0.0	0	0.0	0	2	0.9	4	0.5	2	227	911
15-20	0	0.0	0	0.0	0	1	0.5	12	0.8	4	188	897
21-44	0	0.0	0	0.0	0	17	4.1	183	0.8	191	414	3,080
45-64	0	0.0	0	0.0	0	16	5.8	120	0.5	48	276	1,931
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Other Eligibles</b>	0	0.0	0	0.0	0	8	0.1	48	1.2	6	11,957	27,444
5 and younger	0	0.0	0	0.0	0	3	0.1	7	0.4	3	3,895	8,407
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3,690	8,027
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1,685	5,247
21-44	0	0.0	0	0.0	0	1	0.0	3	0.7	6	2,292	4,679
45-64	0	0.0	0	0.0	0	1	0.3	2	0.5	2	297	584
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	34	163
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	28	152
85 and older	0	0.0	0	0.0	0	3	8.3	36	1.4	6	36	185
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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](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<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 2001

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
<b>All</b>	<b>\$224</b>	<b>5.5</b>	<b>161</b>	<b>1,577</b>
<b>Age</b>				
0-64	237	5.5	98	985
65-74	184	4.8	16	170
75-84	221	5.6	18	150
85 and older	204	5.9	29	272
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	233	5.7	94	948
Male	212	5.2	67	629
Unknown	0	0.0	0	0
<b>Race</b>				
White	230	6.1	83	802
African American	232	4.9	67	657
Other/unknown	146	4.5	11	118
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	216	5.9	60	556
Disabled	229	5.3	101	1,021
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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 79 beneficiaries who were in nursing facilities for part of their enrollment and their 591 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<sup>a, b, c, d, e</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 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	0.5	0.3	0.0	0.2	\$38	\$34	\$0	\$3	\$71	\$102	\$28	\$18	402	\$28,697	71	44.1 %	756
Biologicals	0.2	0.1	0.0	0.1	5	3	0	2	32	41	0	26	5	159	3	1.9	32
Antineoplastic Agents	0.6	0.2	0.1	0.4	102	54	24	24	158	343	274	59	37	5,828	7	4.3	57
Endocrine/Metabolic Drugs	1.4	0.7	0.2	0.4	43	34	4	4	31	48	19	10	646	20,168	46	28.6	474
Cardiovascular Agents	2.3	0.7	0.1	1.5	66	34	4	28	28	47	31	19	1,749	49,690	77	47.8	748
Respiratory Agents	1.2	0.3	0.0	0.8	39	16	0	23	34	53	13	27	898	30,307	75	46.6	777
Gastrointestinal Agents	1.3	0.8	0.0	0.5	71	62	1	8	53	74	52	17	886	47,207	68	42.2	666
Genitourinary Agents	0.7	0.4	0.0	0.3	28	20	0	8	41	55	0	25	134	5,441	21	13.0	197
CNS Drugs	1.5	0.7	0.1	0.7	73	55	8	10	49	77	90	15	1,154	56,724	79	49.1	774
Stimulants/Anti-obesity/Anorexia	2.7	0.0	0.0	2.7	32	0	0	32	12	0	0	12	8	96	1	0.6	3
Miscellaneous Psychological/Neurological Agents	0.5	0.5	0.0	0.0	51	51	0	0	104	104	0	0	42	4,369	9	5.6	86
Analgesics and Anesthetics	1.0	0.4	0.1	0.5	53	27	6	20	50	64	59	38	543	27,294	54	33.5	518
Neuromuscular Agents	1.9	0.6	0.3	1.0	106	69	11	26	55	116	33	26	805	44,396	40	24.8	417
Nutritional Products	0.8	0.0	0.2	0.6	11	0	5	6	14	9	23	11	283	3,999	36	22.4	353
Hematological Agents	1.3	0.3	0.6	0.5	34	21	8	5	25	75	14	10	457	11,649	34	21.1	346
Topical Products	0.7	0.2	0.1	0.4	20	8	7	6	31	43	53	17	483	14,942	66	41.0	730
Miscellaneous Products	0.7	0.0	0.0	0.7	4	1	0	4	6	35	0	6	84	533	11	6.8	119
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	22	0	0	0	109	0	0	0	21	2,287	9	5.6	104
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	8,637	353,786	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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 79 beneficiaries who were in nursing facilities for part of their enrollment and their 591 benefit months were excluded from the analysis.

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

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

d. For information about these therapeutic categories, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003). In Delaware, 0.3 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 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
ULCER DRUGS	\$40,833	71	44.1 %	708	0.8	\$70	\$58
ANTICONVULSANT	35,370	42	26.1	414	1.3	66	85
ANTIDEPRESSANTS	25,952	59	36.6	589	0.9	52	44
ANTIPSYCHOTICS	23,923	34	21.1	324	0.8	95	74
ANTIASTHMATIC	22,828	80	49.7	795	0.9	33	29
ANTIHYPERTENSIVE	16,251	52	32.3	562	0.9	34	29
ANALGESICS - Narcotic	15,012	43	26.7	443	0.7	46	34
ANTIDIABETIC	12,240	36	22.4	397	0.8	37	31
DERMATOLOGICAL	12,193	110	68.3	1,242	0.3	36	10
ANALGESICS - ANTI-INFLAMMATORY	10,737	29	18.0	273	0.6	68	39
Total	215,339	556		5,747	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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 79 beneficiaries who were in nursing facilities for part of their enrollment and their 591 benefit months were excluded from the analysis.

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

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

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

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



TABLE 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<sup>a, b, c, d</sup> NONDUAL BENEFICIARIES, DELAWARE, 2001

Beneficiary Characteristics	All Top 10 Drug Groups					ULCER DRUGS					ANTICONVULSANT					
	No. of Rx	Rx \$	No. of Users	Users as % of All-Year NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All-Year NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All-Year NF Residents	No. of Bene Mos among Users	Mean No. of Rx
<b>All</b>	<b>4,204</b>	<b>\$215,339</b>	<b>71</b>	<b>44.1 %</b>	<b>708</b>	<b>0.8</b>	<b>\$58</b>	<b>42</b>	<b>26.1 %</b>	<b>414</b>	<b>1.3</b>	<b>\$85</b>				
<b>Female</b>	2,542	129,585	41	43.6	408	0.8	57	18	19.1	190	1.2	78				
<b>Disabled</b>	1,374	74,167	16	29.6	153	0.9	60	16	29.6	166	1.3	82				
64 or younger	1,374	74,167	16	30.8	153	0.9	60	16	30.8	166	1.3	82				
65-74	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				
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
<b>Other Eligibles</b>	1,168	55,418	25	62.5	255	0.7	55	2	5.0	24	1.0	49				
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
65-74	386	16,100	5	62.5	46	0.7	60	1	12.5	12	0.9	49				
75-84	312	16,718	5	45.5	54	0.7	63	0	0.0	0	0.0	0				
85 and older	470	22,600	15	71.4	155	0.7	50	1	4.8	12	1.1	50				
<b>Male</b>	1,662	85,754	30	44.8	300	0.9	59	24	35.8	224	1.3	92				
<b>Disabled</b>	1,352	72,963	23	48.9	232	0.9	63	22	46.8	200	1.4	101				
64 or younger	1,348	72,947	23	50.0	232	0.9	63	22	47.8	200	1.4	101				
65-74	4	16	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
<b>Other Eligibles</b>	310	12,791	7	35.0	68	0.7	47	2	10.0	24	0.6	21				
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
65-74	46	2,756	1	20.0	12	0.9	95	1	20.0	12	1.1	37				
75-84	107	3,484	2	28.6	17	0.2	11	1	14.3	12	0.2	4				
85 and older	157	6,551	4	50.0	39	0.8	48	0	0.0	0	0.0	0				
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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 79 beneficiaries who were in nursing facilities for part of their enrollment and their 591 benefit months were excluded from the analysis.

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

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

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

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

TABLE 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 2001

Beneficiary Characteristics	ANTIDEPRESSANTS						ANTIPSYCHOTICS						ANTI-ASTHMATIC					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx
<b>All</b>	<b>59</b>	<b>36.6 %</b>	<b>0.9</b>	<b>589</b>	<b>0.9</b>	<b>\$44</b>	<b>34</b>	<b>21.1 %</b>	<b>0.8</b>	<b>324</b>	<b>0.8</b>	<b>\$74</b>	<b>80</b>	<b>49.7 %</b>	<b>0.9</b>	<b>795</b>	<b>0.9</b>	<b>\$29</b>
<b>Female</b>	36	38.3	0.9	349	0.9	47	18	19.1	0.8	199	0.8	73	47	50.0	1.0	480	1.0	35
<b>Disabled</b>	17	31.5	1.0	146	1.0	63	7	13.0	0.6	73	0.6	77	21	38.9	1.2	225	1.2	51
64 or younger	17	32.7	1.0	146	1.0	63	7	13.5	0.6	73	0.6	77	21	40.4	1.2	225	1.2	51
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
<b>Other Eligibles</b>	19	47.5	0.8	203	0.8	35	11	27.5	0.9	126	0.9	71	26	65.0	0.7	255	0.7	21
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	4	50.0	0.6	48	0.6	31	3	37.5	1.4	36	1.4	80	5	62.5	1.4	60	1.4	52
75-84	5	45.5	1.1	54	1.1	55	3	27.3	1.4	30	1.4	125	10	90.9	0.6	66	0.6	14
85 and older	10	47.6	0.7	101	0.7	26	5	23.8	0.4	60	0.4	38	11	52.4	0.4	129	0.4	9
<b>Male</b>	23	34.3	0.8	240	0.8	40	16	23.9	0.7	125	0.7	75	33	49.3	0.7	315	0.7	19
<b>Disabled</b>	12	25.5	0.8	130	0.8	49	14	29.8	0.7	110	0.7	67	23	48.9	1.1	195	1.1	29
64 or younger	12	26.1	0.8	130	0.8	49	14	30.4	0.7	110	0.7	67	23	50.0	1.1	195	1.1	29
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
<b>Other Eligibles</b>	11	55.0	0.8	110	0.8	29	2	10.0	1.1	15	1.1	132	10	50.0	0.3	120	0.3	4
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	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0.0	0	2	40.0	0.1	24	0.1	2
75-84	6	85.7	0.5	65	0.5	25	0	0.0	1.1	15	1.1	132	4	57.1	0.4	48	0.4	5
85 and older	5	62.5	1.2	45	1.2	36	2	25.0	0.0	15	0.0	0	4	50.0	0.2	48	0.2	3
<b>Unknown</b>	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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 79 beneficiaries who were in nursing facilities for part of their enrollment and their 591 benefit months were excluded from the analysis.

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

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

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

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

TABLE 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 2001

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANALGESICS - Narcotic					ANTIDIABETIC							
	Users as %					Users as %					Users as %							
	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	52	562	0.9	\$29	0.7	43	443	0.7	\$34	0.7	36	397	0.8	\$31	36	397	0.8	\$31
<b>Female</b>	32	339	0.9	30	0.6	26	267	0.6	20	0.6	24	280	0.8	35	24	280	0.8	35
<b>Disabled</b>	17	172	0.9	28	0.6	12	120	0.6	21	0.6	10	120	0.8	52	10	120	0.8	52
64 or younger	17	172	0.9	28	0.6	12	120	0.6	21	0.6	10	120	0.8	52	10	120	0.8	52
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
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
<b>Other Eligibles</b>	15	167	1.0	33	0.6	14	147	0.6	19	0.6	14	160	0.8	23	14	160	0.8	23
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	4	48	1.0	26	1.1	2	24	1.1	36	1.1	8	90	0.9	26	2	24	0.9	26
75-84	7	72	1.0	42	0.6	3	30	0.6	11	0.6	1	12	1.3	32	3	30	1.3	32
85 and older	4	47	0.9	26	0.4	9	93	0.4	18	0.4	5	58	0.6	15	9	58	0.6	15
<b>Male</b>	20	223	0.8	27	1.0	17	176	1.0	55	1.0	12	117	0.9	21	17	117	0.9	21
<b>Disabled</b>	12	133	0.9	31	1.3	11	111	1.3	84	1.3	10	93	1.1	26	11	93	1.1	26
64 or younger	12	133	0.9	31	1.5	10	99	1.5	94	1.5	10	93	1.1	26	10	93	1.1	26
65-74	0	0	0.0	0	0.3	1	12	0.3	1	0.3	0	0	0.0	0	1	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
<b>Other Eligibles</b>	8	90	0.5	20	0.4	6	65	0.4	5	0.4	2	24	0.1	2	6	24	0.1	2
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	2	24	0.5	38	0.1	1	12	0.1	1	0.1	0	0	0.0	0	1	0	0.0	0
75-84	4	48	0.4	14	0.4	1	5	0.4	16	0.4	2	24	0.1	2	1	24	0.1	2
85 and older	2	18	0.8	13	0.5	4	48	0.5	6	0.5	0	0	0.0	0	4	0	0.0	0
<b>Unknown</b>	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0	0	0.0	0

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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 79 beneficiaries who were in nursing facilities for part of their enrollment and their 591 benefit months were excluded from the analysis.

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

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

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

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

TABLE 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 2001

Beneficiary Characteristics	DERMATOLOGICAL					ANALGESICS - ANTI-INFLAMMATORY						
	Users as %		Users as %		Mean Rx \$	Users as %		Users as %		Mean Rx \$		
	No. of Users	No. of Bene Users	No. of Bene Users	No. of Bene Users		No. of Users	No. of Bene Users	No. of Users	No. of Bene Users			
<b>All</b>	110	68.3 %	1,242	0.3	\$10	29	18.0 %	273	0.6	\$39	161	1,577
<b>Female</b>	70	74.5	772	0.3	12	22	23.4	207	0.6	45	94	948
<b>Disabled</b>	38	70.4	421	0.4	17	11	20.4	99	0.7	44	54	573
64 or younger	38	73.1	421	0.4	17	11	21.2	99	0.7	44	52	549
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Other Eligibles</b>	32	80.0	351	0.2	6	11	27.5	108	0.5	47	40	375
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	7	87.5	78	0.2	3	4	50.0	42	0.2	12	8	82
75-84	9	81.8	86	0.2	5	2	18.2	14	1.0	105	11	91
85 and older	16	76.2	187	0.2	7	5	23.8	52	0.6	59	21	202
<b>Male</b>	40	59.7	470	0.2	6	7	10.4	66	0.5	21	67	629
<b>Disabled</b>	29	61.7	340	0.3	8	2	4.3	24	0.5	21	47	448
64 or younger	29	63.0	340	0.3	8	2	4.3	24	0.5	21	46	436
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Other Eligibles</b>	11	55.0	130	0.1	3	5	25.0	42	0.5	20	20	181
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	2	40.0	24	0.2	8	1	20.0	12	0.1	0	5	52
75-84	5	71.4	60	0.1	2	1	14.3	12	1.2	43	7	59
85 and older	4	50.0	46	0.1	2	3	37.5	18	0.3	18	8	70
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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 79 beneficiaries who were in nursing facilities for part of their enrollment and their 591 benefit months were excluded from the analysis.

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

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

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

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

TABLE ND.11  
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG NONDUALS  
 BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 DELAWARE, 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	8,609	24.0 %	0.7	25,709	\$512,157	\$20	4.6 %	35,859
<b>Age</b>								
5 and younger	2,370	30.4	0.6	4,608	65,955	14	8.1	7,801
6-14	1,149	14.9	0.3	2,415	56,555	23	5.7	7,722
15-20	909	18.3	0.4	1,906	49,588	26	5.5	4,968
21-44	3,392	25.8	0.9	11,378	245,501	22	4.5	13,123
45-64	696	35.6	2.4	4,677	86,471	18	3.3	1,953
65-74	31	39.2	2.9	230	2,048	9	2.6	79
75-84	25	32.1	2.4	184	2,147	12	2.4	78
85 and older	37	27.4	2.3	311	3,892	13	4.2	135
Unknown	0	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>								
Aged	89	31.9	2.6	720	8,028	11	3.1	279
Disabled	1,056	48.0	3.8	8,425	152,950	18	2.9	2,201
Adults	3,593	24.1	0.6	9,481	228,086	24	6.2	14,919
Children	3,871	21.0	0.4	7,083	123,093	17	6.5	18,460
Unknown	0	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>								
Female	5,833	25.7	0.8	17,241	358,714	21	5.4	22,694
Male	2,776	21.1	0.6	8,468	153,443	18	3.5	13,165
Unknown	0	0.0	0.0	0	0	0	0.0	0
<b>Race</b>								
White	3,981	25.0	0.9	13,733	279,815	20	5.0	15,907
African American	3,438	23.2	0.6	9,171	188,653	21	4.1	14,849
Other/unknown	1,190	23.3	0.5	2,805	43,689	16	5.2	5,103
<b>Use of Nursing Facilities<sup>d</sup></b>								
Entire year	94	58.4	6.5	1,039	22,930	22	6.5	161
Part year	61	77.2	6.2	488	9,750	20	3.7	79
None	8,454	23.7	0.7	24,182	479,477	20	4.6	35,619
<b>Maintenance Assistance Status</b>								
Cash	6,657	25.0	0.7	19,427	372,510	19	4.6	26,612
Medically needy	0	0.0	0.0	0	0	0	0.0	0
Poverty related	430	22.3	0.4	864	12,687	15	7.8	1,926
Other/unknown	1,522	20.8	0.7	5,418	126,960	23	4.7	7,321

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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<sup>a,b</sup>  
 DELAWARE, 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	\$5	\$20	\$0	\$1	105,775
<b>Age</b>						
5 and younger	0.3	4	14	0	0	17,048
6-14	0.1	3	23	0	1	17,420
15-20	0.1	3	26	0	0	14,789
21-44	0.3	5	22	0	1	45,491
45-64	0.5	9	18	0	2	9,369
65-74	0.5	5	9	0	1	452
75-84	0.4	5	12	0	2	441
85 and older	0.4	5	13	0	1	765
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.5	5	11	0	1	1,592
Disabled	0.6	12	18	0	4	13,098
Adults	0.2	5	24	0	1	48,831
Children	0.2	3	17	0	0	42,254
Unknown	0.0	0	0	0	0	0
<b>Gender</b>						
Female	0.2	5	21	0	1	71,190
Male	0.2	4	18	0	1	34,585
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	0.3	6	20	0	1	47,974
African American	0.2	4	21	0	1	43,459
Other/unknown	0.2	3	16	0	0	14,342
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.7	15	22	1	9	1,577
Part year	0.8	16	20	0	7	591
None	0.2	5	20	0	1	103,607
<b>Maintenance Assistance Status</b>						
Cash	0.3	6	19	0	1	65,114
Medically needy	0.0	0	0	0	0	0
Poverty related	0.2	3	15	0	0	4,318
Other/unknown	0.1	3	23	0	1	36,343

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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<sup>a,b,c</sup>  
 DELAWARE, 2001

Drug Category	No. Users	Rx \$ per User	Total Rx \$	Rx \$ as % of All Part D Excl Rx \$	Total No. Rx.	\$ per Rx	No. Rx as % of All Part D Excl Rx
<b>All</b>	<b>10,540</b>	<b>\$49</b>	<b>\$512,157</b>	<b>100.0 %</b>	<b>25,709</b>	<b>\$20</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	57	110	6,293	1.2	91	69	0.4
Fertility drugs	14	174	2,432	0.5	17	143	0.1
Drugs for cosmetic purposes	31	90	2,793	0.5	74	38	0.3
Cough and cold medications	4,594	55	250,741	49.0	8,164	31	31.8
Vitamins and minerals	648	44	28,479	5.6	1,858	15	7.2
Non-prescription drugs	3,510	27	95,683	18.7	8,808	11	34.3
Barbiturates	70	76	5,319	1.0	706	8	2.7
Benzodiazepines	1,241	77	96,156	18.8	5,101	19	19.8
Other Part D Excl Rx Drugs	375	65	24,261	4.7	890	27	3.5

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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<sup>a, b</sup>  
NONDUAL BENEFICIARIES, DELAWARE, 2001

Beneficiary Characteristics	No. of Benes					No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>115,937</b>	<b>516</b>	<b>10,409</b>	<b>43,398</b>	<b>61,614</b>	<b>0</b>	<b>1,079,343</b>	<b>4,538</b>	<b>114,221</b>	<b>383,097</b>	<b>577,487</b>	<b>0</b>
<b>Age</b>												
5 and younger	26,772	0	851	0	25,921	0	244,491	0	9,320	0	235,171	0
6-14	28,914	0	2,657	0	26,257	0	286,651	0	29,816	0	256,835	0
15-20	14,051	0	1,471	3,146	9,434	0	129,068	0	16,068	27,530	85,470	0
21-44	36,052	0	2,865	33,185	2	0	325,476	0	30,927	294,538	11	0
45-64	9,453	0	2,538	6,915	0	0	87,447	0	27,777	59,670	0	0
65-74	323	184	27	112	0	0	3,158	1,866	313	979	0	0
75-84	208	174	0	34	0	0	1,923	1,599	0	324	0	0
85 and older	164	158	0	6	0	0	1,129	1,073	0	56	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	67,976	354	5,022	31,619	30,981	0	645,326	3,170	55,865	294,481	291,810	0
Male	47,961	162	5,387	11,779	30,633	0	434,017	1,368	58,356	88,616	285,677	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	48,399	223	5,018	20,071	23,087	0	441,665	1,796	55,279	175,811	208,779	0
African American	53,286	137	4,450	18,834	29,865	0	512,215	1,314	48,970	169,685	292,246	0
Other/unknown	14,252	156	941	4,493	8,662	0	125,463	1,428	9,972	37,601	76,462	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	161	60	101	0	0	0	1,587	556	1,031	0	0	0
Part year	83	20	59	3	1	0	813	186	583	32	12	0
None	115,693	436	10,249	43,395	61,613	0	1,076,943	3,796	112,607	383,065	577,475	0
<b>Maintenance Assistance Status</b>												
Cash	85,404	324	8,691	25,318	51,071	0	823,923	3,440	95,427	237,414	487,642	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	5,593	3	3	296	5,291	0	43,183	29	27	1,536	41,591	0
Other/unknown	24,940	189	1,715	17,784	5,252	0	212,237	1,069	18,767	144,147	48,254	0
<b>Managed Care Status</b>												
FFS all year	8,475	243	1,075	3,724	3,433	0	42,325	1,496	9,862	20,060	10,907	0
FFS part year, with Rx claims	17,556	32	914	7,924	8,686	0	164,253	279	8,496	75,094	80,384	0
FFS part year, no Rx claims	9,828	4	212	3,271	6,341	0	75,878	36	1,624	25,334	48,884	0
MC all year, with Rx claims	58,153	211	7,025	21,216	29,701	0	618,406	2,448	81,676	213,383	320,899	0
MC all year, no Rx claims	21,925	26	1,183	7,263	13,453	0	178,481	279	12,563	49,226	116,413	0

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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<sup>a</sup>  
 NONDUAL BENEFICIARIES, DELAWARE, 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
<b>All</b>	<b>115,937</b>	<b>1,079,343</b>	<b>35,859</b>	<b>105,775</b>	<b>0</b>	<b>973,568</b>
FFS all year	8,475	42,325	8,475	42,325	0	0
FFS part year, with Rx claims	17,556	164,253	17,556	40,538	0	123,715
FFS part year, with no Rx claims	9,828	75,878	9,828	22,912	0	52,966
MC all year, with Rx claims	58,153	618,406	0	0	0	618,406
MC all year, with no Rx claims	21,925	178,481	0	0	0	178,481

Source: Data for this table are from the MAX 2001 file for Delaware, released by CMS in 03/2005. 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.