

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

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TABLE ND.2  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 NONDUAL BENEFICIARIES, TENNESSEE, 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>12</b>	<b>0</b>	<b>2</b>	<b>4</b>	<b>6</b>	<b>0</b>	<b>27</b>	<b>0</b>	<b>5</b>	<b>6</b>	<b>16</b>	<b>0</b>
<b>Age</b>												
5 and younger	5	0	1	0	4	0	10	0	1	0	9	0
6-14	2	0	0	0	2	7		0	0	0	7	0
15-20	0	0	0	0	0	0		0	0	0	0	0
21-44	1	0	0	1	0	3		0	0	3	0	0
45-64	4	0	1	3	0	7		0	4	3	0	0
65-74	0	0	0	0	0	0		0	0	0	0	0
75-84	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
Unknown	0	0	0	0	0	0		0	0	0	0	0
<b>Gender</b>												
Female	8	0	2	2	4	0	18	0	5	4	9	0
Male	4	0	0	2	2	9		0	0	2	7	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
<b>Race</b>												
White	9	0	1	4	4	0	19	0	4	6	9	0
African American	0	0	0	0	0	0		0	0	0	0	0
Other/unknown	3	0	1	0	2	8		0	1	0	7	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	0	0	0	0	0	0		0	0	0	0	0
Part year	0	0	0	0	0	0		0	0	0	0	0
None	12	0	2	4	6	0	27	0	5	6	16	0
<b>Maintenance Assistance Status</b>												
Cash	2	0	2	0	0	5		0	5	0	0	0
Medically needy	0	0	0	0	0	0		0	0	0	0	0
Poverty-related	1	0	0	0	1	1		0	0	0	1	0
Other/unknown	9	0	0	4	5	0	21	0	0	6	15	0
<b>Managed Care Status</b>												
FFS all year	1	0	0	0	1	1		0	0	0	1	0
FFS part year, with Rx claims	0	0	0	0	0	0		0	0	0	0	0
FFS part year, no Rx claims	11	0	2	4	5	0	26	0	5	6	15	0

Source: Data for this table are from the MAX 2001 file for Tennessee, released by CMS in 07/2005. 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, TENNESSEE, 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 Beneficiaries
All	0.0 %	0.0	\$0	\$0	\$1,698	0.0 %	12
<b>Age</b>							
5 and younger	0.0	0.0	0	0	597	0.0	5
6-14	0.0	0.0	0	0	455	0.0	2
15-20	0.0	0.0	0	0	0	0.0	0
21-44	0.0	0.0	0	0	1,747	0.0	1
45-64	0.0	0.0	0	0	3,684	0.0	4
65-74	0.0	0.0	0	0	0	0.0	0
75-84	0.0	0.0	0	0	0	0.0	0
85 and older	0.0	0.0	0	0	0	0.0	0
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>							
Aged	0.0	0.0	0	0	0	0.0	0
Disabled	0.0	0.0	0	0	3,264	0.0	2
Adults	0.0	0.0	0	0	3,047	0.0	4
Children	0.0	0.0	0	0	276	0.0	6
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>							
Female	0.0	0.0	0	0	1,617	0.0	8
Male	0.0	0.0	0	0	1,860	0.0	4
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Race</b>							
White	0.0	0.0	0	0	1,945	0.0	9
African American	0.0	0.0	0	0	0	0.0	0
Other/unknown	0.0	0.0	0	0	957	0.0	3
<b>Use of Nursing Facilities<sup>d</sup></b>							
Entire year	0.0	0.0	0	0	0	0.0	0
Part year	0.0	0.0	0	0	0	0.0	0
None	0.0	0.0	0	0	1,698	0.0	12
<b>Maintenance Assistance Status</b>							
Cash	0.0	0.0	0	0	3,264	0.0	2
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	0.0	0.0	0	0	226	0.0	1
Other/unknown	0.0	0.0	0	0	1,513	0.0	9

Source: Data for this table are from the MAX 2001 file for Tennessee, released by CMS in 07/2005. 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, TENNESSEE, 2001

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:					Mean \$, All Services	Bene Mos	No.
				100.0 %	More than 0, 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	0.0 %			
<b>All</b>	<b>0.0</b>	<b>\$0</b>	<b>0.0 %</b>	<b>100.0 %</b>	<b>0.0 %</b>	<b>0.0 %</b>	<b>0.0 %</b>	<b>0.0 %</b>	<b>\$755</b>	<b>12</b>	<b>27</b>
<b>Age</b>											
5 and younger	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	298	5	10
6-14	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	130	2	7
15-20	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
21-44	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	582	1	3
45-64	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	2,105	4	7
65-74	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
85 and older	0.0	0	0.0	0.0	0.0	0.0	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
<b>Basis of Eligibility<sup>c</sup></b>											
Aged	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Disabled	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	1,305	2	5
Adults	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	2,031	4	6
Children	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	104	6	16
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>											
Female	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	718	8	18
Male	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	827	4	9
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>											
White	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	921	9	19
African American	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Other/unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	359	3	8
<b>Use of Nursing Facilities<sup>d</sup></b>											
Entire year	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Part year	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
None	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	755	12	27
<b>Maintenance Assistance Status</b>											
Cash	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	1,305	2	5
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	226	1	1
Other/unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	649	9	21

Source: Data for this table are from the MAX 2001 file for Tennessee, released by CMS in 07/2005. 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, TENNESSEE, 2001

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$ \$ per Rx	No. of Rx	Rx \$ \$ per Rx	No. of Rx	Rx \$ \$ per Rx	No. of Rx	Rx \$ \$ per Rx
All	0.0	\$0	0.0	\$0	0.0	\$0	0.0	\$0
<b>Age</b>								
5 and younger	0.0	0	0.0	0	0.0	0	0.0	0
6-14	0.0	0	0.0	0	0.0	0	0.0	0
15-20	0.0	0	0.0	0	0.0	0	0.0	0
21-44	0.0	0	0.0	0	0.0	0	0.0	0
45-64	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
75-84	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
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Basis of Eligibility<sup>d</sup></b>								
Aged	0.0	0	0.0	0	0.0	0	0.0	0
Disabled	0.0	0	0.0	0	0.0	0	0.0	0
Adults	0.0	0	0.0	0	0.0	0	0.0	0
Children	0.0	0	0.0	0	0.0	0	0.0	0
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Gender</b>								
Female	0.0	0	0.0	0	0.0	0	0.0	0
Male	0.0	0	0.0	0	0.0	0	0.0	0
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Race</b>								
White	0.0	0	0.0	0	0.0	0	0.0	0
African American	0.0	0	0.0	0	0.0	0	0.0	0
Other/unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Use of Nursing Facilities<sup>e</sup></b>								
Entire year	0.0	0	0.0	0	0.0	0	0.0	0
Part year	0.0	0	0.0	0	0.0	0	0.0	0
None	0.0	0	0.0	0	0.0	0	0.0	0
<b>Maintenance Assistance</b>								
<b>Status</b>								
Cash	0.0	0	0.0	0	0.0	0	0.0	0
Medically needy	0.0	0	0.0	0	0.0	0	0.0	0
Poverty related	0.0	0	0.0	0	0.0	0	0.0	0
Other/unknown	0.0	0	0.0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2001 file for Tennessee, released by CMS in 07/2005. 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 Tennessee, 1.8 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](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, TENNESSEE, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total Rx \$	Total No. of Rx	As % of All Benes	No. of Bene Mos
	Patented		Generic		Patented		Generic					
	Brand-Name	Off-Patent	Brand-Name	Off-Patent	Brand-Name	Off-Patent	Brand-Name	Off-Patent				
Anti-infective Agents	0.0	0.0	0.0	0.0	\$0	\$0	\$0	\$0	0	0	0.0 %	0
Biologics	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Endocrine/Metabolic Drugs	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Cardiovascular Agents	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Respiratory Agents	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Gastrointestinal Agents	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Genitourinary Agents	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
CNS Drugs	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Stimulants/Anti-obesity/Anorexia	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Miscellaneous Psychological/Neurological Agents	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Analgesics and Anesthetics	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Neuromuscular Agents	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Nutritional Products	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Hematological Agents	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Topical Products	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Miscellaneous Products	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
Unknown Therapeutic Category	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0.0	0
<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.	0	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Tennessee, released by CMS in 07/2005. 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 Tennessee, 1.8 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](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, TENNESSEE, 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	
PENICILLINS	\$0	0	0.0 %	0	0.0	\$0	\$0
CEPHALOSPORINS	0	0	0.0	0	0.0	0	0
MACROLIDE ANTIBIOTICS	0	0	0.0	0	0.0	0	0
TETRACYCLINES	0	0	0.0	0	0.0	0	0
FLUOROQUINOLONES	0	0	0.0	0	0.0	0	0
ANTIMYCOBACTERIAL AGENTS	0	0	0.0	0	0.0	0	0
ANTIFUNGALS	0	0	0.0	0	0.0	0	0
ANTIVIRAL	0	0	0.0	0	0.0	0	0
ANTIMALARIAL	0	0	0.0	0	0.0	0	0
ANTHELMINTIC	0	0	0.0	0	0.0	0	0
Total	0	0	0	0	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Tennessee, released by CMS in 07/2005. 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, TENNESSEE, 2001

Beneficiary Characteristics	All Top 10 Drug Groups				PENICILLINS				CEPHALOSPORINS			
	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 \$
	0	\$0	0	0.0 %	0	0.0	\$0	0	0.0 %	0	0.0	\$0
<b>All</b>	0	\$0	0	0.0 %	0	0.0	\$0	0	0.0 %	0	0.0	\$0
<b>Female</b>	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
<b>Disabled</b>	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
5 and younger	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
15-20	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
21-44	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
45-64	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
75-84	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
<b>Other Eligibles</b>	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
5 and younger	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
15-20	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
21-44	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
45-64	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
75-84	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
<b>Male</b>	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
<b>Disabled</b>	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
5 and younger	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
15-20	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
21-44	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
45-64	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
75-84	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
<b>Other Eligibles</b>	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
5 and younger	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
15-20	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
21-44	0	0	0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
45-64	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
75-84	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
<b>Unknown</b>	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 Tennessee, released by CMS in 07/2005. 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, TENNESSEE, 2001

Beneficiary Characteristics	MACROLIDE ANTIBIOTICS				TETRACYCLINES				FLUOROQUINOLONES					
	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 \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx \$	No. of Rx	Mean Rx \$
<b>All</b>	0	0.0 %	0	\$0	0	0.0 %	0	\$0	0	0.0 %	0	\$0	0	\$0
<b>Female</b>	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
<b>Disabled</b>	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
5 and younger	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
6-14	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
15-20	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
21-44	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
45-64	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
75-84	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
<b>Other Eligibles</b>	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
5 and younger	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
6-14	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
15-20	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
21-44	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
45-64	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
75-84	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
<b>Male</b>	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
<b>Disabled</b>	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
5 and younger	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
6-14	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
15-20	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
21-44	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
45-64	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
75-84	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
<b>Other Eligibles</b>	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
5 and younger	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
6-14	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
15-20	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
21-44	0	0.0	0	0	0	0.0	0	0	0	0.0	0	0	0	0
45-64	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
75-84	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
<b>Unknown</b>	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 Tennessee, released by CMS in 07/2005. 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, TENNESSEE, 2001

Beneficiary Characteristics	ANTIMYCOBACTERIAL AGENTS				ANTIFUNGALS				ANTIVIRAL						
	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>	0	0.0%	0	0.0	\$0	0	0.0%	0	0.0	\$0	0	0.0%	0	0.0	\$0
<b>Female</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Disabled</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
45-64	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	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>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
45-64	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	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>Male</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Disabled</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
45-64	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	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>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
45-64	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	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>Unknown</b>	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 Tennessee, released by CMS in 07/2005. 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, TENNESSEE, 2001

Beneficiary Characteristics	ANTIMALARIAL				ANTHELMINTIC				No. of Bene Mos			
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx		Mean Rx \$	No. of Bene Mos	
<b>All</b>	0	0.0%	0	0.0	\$0	0	0.0%	0	0.0	\$0	12	27
<b>Female</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	8	18
<b>Disabled</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	5
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
21-44	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
45-64	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	4
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>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	13
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	9
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
21-44	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	3
45-64	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
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>Male</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	9
<b>Disabled</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
21-44	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
45-64	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
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	0	0.0	0	0.0	0	4	9
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	7
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
21-44	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
45-64	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	2
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>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 Tennessee, released by CMS in 07/2005. 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, TENNESSEE, 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>\$0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>
<b>Age</b>				
0-64	0	0.0	0	0
65-74	0	0.0	0	0
75-84	0	0.0	0	0
85 and older	0	0.0	0	0
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	0	0.0	0	0
Male	0	0.0	0	0
Unknown	0	0.0	0	0
<b>Race</b>				
White	0	0	0	0
African American	0	0	0	0
Other/unknown	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	0	0.0	0	0
Disabled	0	0.0	0	0
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 Tennessee, released by CMS in 07/2005. 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 0 beneficiaries who were in nursing facilities for part of their enrollment and their 0 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, TENNESSEE, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total Rx \$	No. of Bene Mos	As % of All-Year NF Residents	
	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic				
Anti-infective Agents												
Biologicals												
Antineoplastic Agents												
Endocrine/Metabolic Drugs												
Cardiovascular Agents												
Respiratory Agents												
Gastrointestinal Agents												
Genitourinary Agents												
CNS Drugs												
Stimulants/Anti-obesity/Anorexia												
Miscellaneous Psychological/Neurological Agents												
Analgesics and Anesthetics												
Neuromuscular Agents												
Nutritional Products												
Hematological Agents												
Topical Products												
Miscellaneous Products												
Unknown Therapeutic Category												
<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.	0	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Tennessee, released by CMS in 07/2005. 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 0 beneficiaries who were in nursing facilities for part of their enrollment and their 0 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 Tennessee, 1.8 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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, TENNESSEE, 2001

Top 10 Drug Groups in Nursing Facilities	Users				Among Users		
	Total Medicaid Rx \$	No. of Users	As % of All-Year NF Residents	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$0	0	0.0 %	0	0.0	\$0	\$0
ANTICONVULSANT	0	0	0.0	0	0.0	0	0
ANTIDEPRESSANTS	0	0	0.0	0	0.0	0	0
ANTICOAGULANTS	0	0	0.0	0	0.0	0	0
ULCER DRUGS	0	0	0.0	0	0.0	0	0
ANTIDIABETIC	0	0	0.0	0	0.0	0	0
FLUOROQUINOLONES	0	0	0.0	0	0.0	0	0
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	0	0	0.0	0	0.0	0	0
MISC. HEMATOLOGICAL	0	0	0.0	0	0.0	0	0
ANALGESICS - Narcotic	0	0	0.0	0	0.0	0	0
<b>Total</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2001 file for Tennessee, released by CMS in 07/2005. 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 0 beneficiaries who were in nursing facilities for part of their enrollment and their 0 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, TENNESSEE, 2001

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTICONVULSANT						
	No. of Rx	Rx \$	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Users as % of All-Year Residents	No. of Users	No. of Bene Mos among Users	Users as % of All-Year Residents	No. of Users	No. of Bene Mos among Users	Users as % of All-Year Residents	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	0	\$0	0	0.0 %	0	0.0	0.0 %	0	0	0.0 %	0	0	0.0 %	0	0	0.0	\$0
<b>Female</b>	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
<b>Disabled</b>	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
64 or younger	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
65-74	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
85 and older	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
<b>Other Eligibles</b>	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
64 or younger	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
65-74	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
85 and older	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
<b>Male</b>	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
<b>Disabled</b>	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
64 or younger	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
65-74	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
85 and older	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
<b>Other Eligibles</b>	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
64 or younger	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
65-74	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
85 and older	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0
<b>Unknown</b>	0	0	0	0.0	0	0.0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0

Source: Data for this table are from the MAX 2001 file for Tennessee, released by CMS in 07/2005. 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 0 beneficiaries who were in nursing facilities for part of their enrollment and their 0 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, TENNESSEE, 2001

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTICOAGULANTS					ULCER DRUGS				
	Users as %		No. of Bene		Mean	Users as %		No. of Bene		Mean	Users as %		No. of Bene		Mean
	No. of Users	Residents	No. of Users	NF	Rx	No. of Users	Residents	NF	Mos among Users	Rx	No. of Users	Residents	NF	Mos among Users	Rx
<b>All</b>	0	0.0 %	0	0.0 %	\$0	0	0.0 %	0	0.0 %	\$0	0	0.0 %	0	0.0 %	\$0
<b>Female</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Disabled</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	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>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	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>Male</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Disabled</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	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>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	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>Unknown</b>	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 Tennessee, released by CMS in 07/2005. 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 0 beneficiaries who were in nursing facilities for part of their enrollment and their 0 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, TENNESSEE, 2001

Beneficiary Characteristics	ANTIDIABETIC					FLUOROQUINOLONES					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	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 \$
<b>All</b>	0	0.0 %	0	0.0	\$0	0	0.0 %	0	0.0	\$0	0	0.0 %	0	0.0	\$0
<b>Female</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
<b>Disabled</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
65-74	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>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
65-74	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>Male</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
<b>Disabled</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
65-74	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>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
65-74	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>Unknown</b>	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 Tennessee, released by CMS in 07/2005. 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 0 beneficiaries who were in nursing facilities for part of their enrollment and their 0 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, TENNESSEE, 2001

Beneficiary Characteristics	MISC. HEMATOLOGICAL				ANALGESICS - Narcotic				Mean Rx\$	Mean No. of Rx	All-Year NF Residents	Bene Mos among All-Year NF Residents
	Users as %		Users as %		Users as %		Users as %					
	No. of Users	No. of Bene Mos among Users	Mean Rx\$	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean Rx\$	Mean No. of Rx				
<b>All</b>	0	0.0 %	0	0.0 %	0	0.0 %	0	0.0 %	\$0	0.0	0	0
<b>Female</b>	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
<b>Disabled</b>	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
64 or younger	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
75-84	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
<b>Other Eligibles</b>	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
64 or younger	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
75-84	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
<b>Male</b>	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
<b>Disabled</b>	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
64 or younger	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
75-84	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
<b>Other Eligibles</b>	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0
64 or younger	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
75-84	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
<b>Unknown</b>	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 Tennessee, released by CMS in 07/2005. 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 0 beneficiaries who were in nursing facilities for part of their enrollment and their 0 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>  
 TENNESSEE, 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	Total Part D Excl Rx \$ as % of All Rx \$	Total No. of Benes
	0	0.0 %	0.0	0	\$0	\$0	0.0 %	12
<b>All</b>	0	0.0 %	0.0	0	\$0	\$0	0.0 %	12
<b>Age</b>								
5 and younger	0	0.0	0.0	0	0	0	0.0	5
6-14	0	0.0	0.0	0	0	0	0.0	2
15-20	0	0.0	0.0	0	0	0	0.0	0
21-44	0	0.0	0.0	0	0	0	0.0	1
45-64	0	0.0	0.0	0	0	0	0.0	4
65-74	0	0.0	0.0	0	0	0	0.0	0
75-84	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
Unknown	0	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>								
Aged	0	0.0	0.0	0	0	0	0.0	0
Disabled	0	0.0	0.0	0	0	0	0.0	2
Adults	0	0.0	0.0	0	0	0	0.0	4
Children	0	0.0	0.0	0	0	0	0.0	6
Unknown	0	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>								
Female	0	0.0	0.0	0	0	0	0.0	8
Male	0	0.0	0.0	0	0	0	0.0	4
Unknown	0	0.0	0.0	0	0	0	0.0	0
<b>Race</b>								
White	0	0.0	0.0	0	0	0	0.0	9
African American	0	0.0	0.0	0	0	0	0.0	0
Other/unknown	0	0.0	0.0	0	0	0	0.0	3
<b>Use of Nursing Facilities<sup>d</sup></b>								
Entire year	0	0.0	0.0	0	0	0	0.0	0
Part year	0	0.0	0.0	0	0	0	0.0	0
None	0	0.0	0.0	0	0	0	0.0	12
<b>Maintenance Assistance Status</b>								
Cash	0	0.0	0.0	0	0	0	0.0	2
Medically needy	0	0.0	0.0	0	0	0	0.0	0
Poverty related	0	0.0	0.0	0	0	0	0.0	1
Other/unknown	0	0.0	0.0	0	0	0	0.0	9

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Tennessee, released by CMS in 07/2005. 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>  
 TENNESSEE, 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	0.0	\$0	\$0	\$0	\$0	27
<b>Age</b>						
5 and younger	0.0	0	0	0	0	10
6-14	0.0	0	0	0	0	7
15-20	0.0	0	0	0	0	0
21-44	0.0	0	0	0	0	3
45-64	0.0	0	0	0	0	7
65-74	0.0	0	0	0	0	0
75-84	0.0	0	0	0	0	0
85 and older	0.0	0	0	0	0	0
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.0	0	0	0	0	0
Disabled	0.0	0	0	0	0	5
Adults	0.0	0	0	0	0	6
Children	0.0	0	0	0	0	16
Unknown	0.0	0	0	0	0	0
<b>Gender</b>						
Female	0.0	0	0	0	0	18
Male	0.0	0	0	0	0	9
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	0.0	0	0	0	0	19
African American	0.0	0	0	0	0	0
Other/unknown	0.0	0	0	0	0	8
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.0	0	0	0	0	0
Part year	0.0	0	0	0	0	0
None	0.0	0	0	0	0	27
<b>Maintenance Assistance Status</b>						
Cash	0.0	0	0	0	0	5
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	0	0	0	0	1
Other/unknown	0.0	0	0	0	0	21

Source: Data for this table are from the MAX 2001 file for Tennessee, released by CMS in 07/2005. 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>  
 TENNESSEE, 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>0</b>	<b>\$0</b>	<b>\$0</b>	<b>0.0 %</b>	<b>0</b>	<b>\$0</b>	<b>0.0 %</b>
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	0	0	0	0.0	0	0	0.0
Cough and cold medications	0	0	0	0.0	0	0	0.0
Vitamins and minerals	0	0	0	0.0	0	0	0.0
Non-prescription drugs	0	0	0	0.0	0	0	0.0
Barbiturates	0	0	0	0.0	0	0	0.0
Benzodiazepines	0	0	0	0.0	0	0	0.0
Other Part D Excl Rx Drugs	0	0	0	0.0	0	0	0.0

Source: Data for this table are from the MAX 2001 file for Tennessee, released by CMS in 07/2005. 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, TENNESSEE, 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>1,361,820</b>	<b>3,330</b>	<b>179,700</b>	<b>474,042</b>	<b>704,748</b>	<b>0</b>	<b>14,560,185</b>	<b>35,625</b>	<b>2,038,972</b>	<b>5,046,584</b>	<b>7,439,004</b>	<b>0</b>
<b>Age</b>												
5 and younger	248,670	2	7,751	3	240,914	0	2,497,043	15	84,418	10	2,412,600	0
6-14	325,138	1	21,038	7	304,092	0	3,567,907	5	245,369	17	3,322,516	0
15-20	176,005	2	16,675	665	158,663	0	1,894,879	24	194,223	1,699	1,698,933	0
21-44	419,265	15	65,895	352,276	1,079	0	4,489,249	127	751,808	3,732,359	4,955	0
45-64	187,466	113	66,310	121,043	0	0	2,053,304	1,045	739,966	1,312,293	0	0
65-74	3,349	1,696	1,625	28	0	0	37,263	18,590	18,522	151	0	0
75-84	1,351	991	351	9	0	0	14,618	10,548	4,044	26	0	0
85 and older	576	510	55	11	0	0	5,922	5,271	622	29	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	777,299	1,990	89,358	330,035	355,916	0	8,304,380	21,403	1,018,721	3,507,564	3,756,692	0
Male	584,521	1,340	90,342	144,007	348,832	0	6,255,805	14,222	1,020,251	1,539,020	3,682,312	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	879,656	1,660	104,870	341,924	431,202	0	9,370,947	17,434	1,183,753	3,642,581	4,527,179	0
African American	404,643	561	49,428	117,557	237,097	0	4,408,784	5,944	568,424	1,273,104	2,561,312	0
Other/unknown	77,521	1,109	25,402	14,561	36,449	0	780,454	12,247	286,795	130,899	350,513	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	1,455	256	1,199	0	0	0	15,104	2,450	12,654	0	0	0
Part year	1,113	118	975	18	2	0	11,039	1,090	9,749	176	24	0
None	1,359,252	2,956	177,526	474,024	704,746	0	14,534,042	32,085	2,016,569	5,046,408	7,438,980	0
<b>Maintenance Assistance Status</b>												
Cash	315,491	1,080	151,614	37,663	125,134	0	3,554,507	12,285	1,748,298	416,185	1,377,739	0
Medically needy	97,836	588	2,116	44,700	50,432	0	921,654	5,576	14,862	414,954	486,262	0
Poverty related	164,111	72	70	18,745	145,224	0	1,511,305	609	757	143,152	1,366,787	0
Other/unknown	784,382	1,590	25,900	372,934	383,958	0	8,572,719	17,155	275,055	4,072,293	4,208,216	0
<b>Managed Care Status</b>												
FFS all year	1	0	0	0	1	1	0	0	0	0	1	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	11	0	2	4	5	0	103	0	13	47	43	0
MC all year, with Rx claims	1,240	30	499	307	404	0	12,848	280	5,487	2,910	4,171	0
MC all year, no Rx claims	1,360,568	3,300	179,199	473,731	704,338	0	14,547,233	35,345	2,033,472	5,043,627	7,434,789	0

Source: Data for this table are from the MAX 2001 file for Tennessee, released by CMS in 07/2005. 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, TENNESSEE, 2001

	Bene(s) in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	No. of Bene(s)	No. of Bene Mos	No. of Bene(s)	No. of Bene Mos	No. of Bene(s)	No. of Bene Mos
<b>All</b>	<b>1,361,820</b>	<b>14,560,185</b>	<b>12</b>	<b>27</b>	<b>0</b>	<b>14,560,158</b>
FFS all year	1	1	1	1	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	11	103	11	26	0	77
MC all year, with Rx claims	1,240	12,848	0	0	0	12,848
MC all year, with no Rx claims	1,360,568	14,547,233	0	0	0	14,547,233

Source: Data for this table are from the MAX 2001 file for Tennessee, released by CMS in 07/2005. This table was produced on 09/19/2006.

a. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.