

**STATISTICAL COMPENDIUM:  
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2001  
UTAH**

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TABLE ND.2  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, UTAH, 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>123,992</b>	<b>456</b>	<b>8,311</b>	<b>34,720</b>	<b>80,474</b>	<b>31</b>	<b>632,330</b>	<b>3,256</b>	<b>60,707</b>	<b>149,039</b>	<b>419,226</b>	<b>102</b>
<b>Age</b>												
5 and younger	47,705	0	604	3	47,098	0	237,859	0	4,013	13	233,833	0
6-14	26,637	0	906	11	25,720	0	149,441	0	6,998	41	142,402	0
15-20	13,573	0	798	5,125	7,650	0	69,871	0	6,054	20,838	42,979	0
21-44	31,054	0	3,110	27,926	6	12	143,552	0	23,243	120,242	12	55
45-64	4,525	0	2,855	1,651	0	19	28,028	0	20,083	7,898	0	47
65-74	319	280	37	2	0	0	2,405	2,089	313	3	0	0
75-84	114	112	1	1	0	0	714	709	3	2	0	0
85 and older	64	64	0	0	0	0	458	458	0	0	0	0
Unknown	1	0	0	1	0	2	0	0	0	2	0	0
<b>Gender</b>												
Female	72,723	303	4,326	29,322	38,741	31	364,687	2,173	32,425	127,585	202,402	102
Male	50,960	153	3,985	5,397	41,425	0	266,888	1,083	28,282	21,452	216,071	0
Unknown	309	0	0	1	308	0	755	0	0	2	753	0
<b>Race</b>												
White	87,588	182	6,819	25,378	55,184	25	459,799	1,465	50,413	113,885	293,950	86
African American	2,288	5	140	536	1,607	0	9,908	42	710	1,989	7,167	0
Other/unknown	34,116	269	1,352	8,806	23,683	6	162,623	1,749	9,584	33,165	118,109	16
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	336	98	236	0	2	0	3,433	968	2,441	0	24	0
Part year	314	42	258	11	3	0	2,405	340	1,978	76	11	0
None	123,342	316	7,817	34,709	80,469	31	626,492	1,948	56,288	148,963	419,191	102
<b>Maintenance Assistance Status</b>												
Cash	45,303	223	4,843	17,096	23,141	0	245,005	1,875	38,512	72,363	132,255	0
Medically needy	3,342	22	539	1,592	1,189	0	11,476	119	2,594	4,448	4,315	0
Poverty-related	47,107	127	1,877	10,552	34,520	31	218,043	611	10,104	41,935	165,291	102
Other/unknown	28,240	84	1,052	5,480	21,624	0	157,806	651	9,497	30,293	117,365	0
<b>Managed Care Status</b>												
FFS all year	76,270	315	5,822	23,837	46,277	19	475,610	2,823	50,302	115,997	306,415	73
FFS part year, with Rx claims	32,781	112	2,141	8,777	21,739	12	114,243	361	9,225	27,887	76,741	29
FFS part year, no Rx claims	14,941	29	348	2,106	12,458	0	42,477	72	1,180	5,155	36,070	0

Table ND2

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Utah, 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, UTAH, 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	58.5 %	5.6	\$251	\$45	\$2,747	9.1 %	123,992
<b>Age</b>							
5 and younger	58.7	2.7	62	23	1,734	3.6	47,705
6-14	48.4	3.0	138	47	1,711	8.1	26,637
15-20	59.7	5.1	255	50	3,847	6.6	13,573
21-44	64.2	8.8	418	47	3,567	11.7	31,054
45-64	71.6	28.8	1,610	56	9,462	17.0	4,525
65-74	76.8	30.7	1,544	50	14,020	11.0	319
75-84	74.6	28.9	1,232	43	10,448	11.8	114
85 and older	82.8	34.3	1,307	38	14,137	9.2	64
Unknown	0.0	0.0	0	0	0	0.0	1
<b>Basis of Eligibility<sup>c</sup></b>							
Aged	77.4	30.5	1,422	47	12,296	11.6	456
Disabled	75.3	27.9	1,820	65	15,374	11.8	8,311
Adults	63.3	6.6	243	37	2,031	12.0	34,720
Children	54.6	2.8	85	31	1,697	5.0	80,474
Unknown	74.2	8.3	481	58	5,369	8.9	31
<b>Gender</b>							
Female	61.3	6.3	258	41	2,461	10.5	72,723
Male	55.0	4.7	241	52	3,172	7.6	50,960
Unknown	3.9	0.1	1	15	154	0.9	309
<b>Race</b>							
White	61.9	6.6	307	46	3,018	10.2	87,588
African American	54.9	4.8	213	44	2,572	8.3	2,288
Other/unknown	50.2	3.1	109	35	2,064	5.3	34,116
<b>Use of Nursing Facilities<sup>d</sup></b>							
Entire year	98.2	87.3	4,493	52	44,741	10.0	336
Part year	96.5	71.4	3,701	52	44,734	8.3	314
None	58.3	5.2	230	44	2,526	9.1	123,342
<b>Maintenance Assistance Status</b>							
Cash	60.9	7.9	381	49	2,950	12.9	45,303
Medically needy	34.0	5.4	317	59	3,381	9.4	3,342
Poverty related	54.2	3.3	115	35	1,521	7.5	47,107
Other/unknown	64.8	6.1	260	43	4,392	5.9	28,240

Source: Data for this table are from the MAX 2001 file for Utah, 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, UTAH, 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	Less than 5, but 10 or More	More than 10			
All	1.1	\$49	9.1 %	41.5 %	38.6 %	7.5 %	7.5 %	3.0 %	2.0 %	\$539	123,992	632,330
<b>Age</b>												
5 and younger	0.6	13	3.6	41.3	45.1	6.6	5.2	1.4	0.4	348	47,705	237,859
6-14	0.5	25	8.1	51.6	37.3	5.0	4.2	1.3	0.6	305	26,637	149,441
15-20	1.0	50	6.6	40.3	38.8	8.4	8.3	2.8	1.4	747	13,573	69,871
21-44	1.9	90	11.7	35.8	32.9	10.4	11.6	5.4	3.9	772	31,054	143,552
45-64	4.7	260	17.0	28.4	18.4	9.1	17.3	13.5	13.3	1,528	4,525	28,028
65-74	4.1	205	11.0	23.2	19.7	8.8	20.1	16.9	11.3	1,860	319	2,405
75-84	4.6	197	11.8	25.4	21.1	6.1	12.3	21.9	13.2	1,668	114	714
85 and older	4.8	183	9.2	17.2	7.8	14.1	25.0	25.0	10.9	1,976	64	458
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	2
<b>Basis of Eligibility<sup>c</sup></b>												
Aged	4.3	199	11.6	22.6	17.8	9.2	18.9	19.5	12.1	1,722	456	3,256
Disabled	3.8	249	11.8	24.7	23.3	10.1	17.9	12.7	11.4	2,105	8,311	60,707
Adults	1.5	57	12.0	36.7	34.9	10.3	10.8	4.4	2.9	473	34,720	149,039
Children	0.5	16	5.0	45.4	41.9	6.0	4.9	1.4	0.5	326	80,474	419,226
Unknown	2.5	146	8.9	25.8	22.6	12.9	22.6	6.5	9.7	1,632	31	102
<b>Gender</b>												
Female	1.3	52	10.5	38.7	39.0	8.2	8.2	3.4	2.4	491	72,723	364,687
Male	0.9	46	7.6	45.0	38.2	6.5	6.4	2.5	1.4	606	50,960	266,888
Unknown	0.0	1	0.9	96.1	3.6	0.0	0.3	0.0	0.0	63	309	755
<b>Race</b>												
White	1.3	59	10.2	38.1	39.5	8.1	8.4	3.5	2.3	575	87,588	459,799
African American	1.1	49	8.3	45.1	34.0	7.6	7.8	3.1	2.4	594	2,288	9,908
Other/unknown	0.7	23	5.3	49.8	36.6	5.9	5.1	1.7	0.9	433	34,116	162,623
<b>Use of Nursing Facilities<sup>d</sup></b>												
Entire year	8.5	440	10.0	1.8	5.4	5.4	23.2	35.1	29.2	4,379	336	3,433
Part year	9.3	483	8.3	3.5	9.9	6.4	19.4	26.4	34.4	5,841	314	2,405
None	1.0	45	9.1	41.7	38.8	7.5	7.4	2.9	1.8	497	123,342	626,492
<b>Maintenance Assistance Status</b>												
Cash	1.5	71	12.9	39.1	37.3	8.0	8.7	3.9	3.0	546	45,303	245,005
Medically needy	1.6	92	9.4	66.0	16.5	4.4	6.6	4.2	2.3	985	3,342	11,476
Poverty related	0.7	25	7.5	45.8	39.1	6.7	5.7	1.8	0.9	329	47,107	218,043
Other/unknown	1.1	47	5.9	35.2	42.5	8.4	8.4	3.5	1.9	786	28,240	157,806

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





Source: Data for this table are from the MAX 2001 file for Utah, 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 Utah, 2.7 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).
- 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, UTAH, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos				
	Patented		Off-Patent		Patented		Off-Patent										
	Total	Brand-Name	Generic	Total	Brand-Name	Generic	Total	Brand-Name						Generic			
Anti-infective Agents	0.4	0.2	0.0	0.2	\$14	\$11	\$0	\$2	\$37	\$62	\$52	\$12	110,678	\$4,129,747	46,109	37.2 %	302,125
Biologics	0.2	0.1	0.0	0.0	27	4	21	2	166	30	1,574	232	579	96,030	337	0.3	3,517
Antineoplastic Agents	0.7	0.4	0.0	0.2	208	187	9	13	311	478	208	54	1,411	439,038	277	0.2	2,107
Endocrine/Metabolic Drugs	0.6	0.3	0.1	0.2	20	15	2	3	35	53	26	13	48,742	1,719,327	12,831	10.3	86,567
Cardiovascular Agents	1.2	0.5	0.0	0.6	39	28	1	10	34	53	25	18	36,456	1,231,296	4,296	3.5	31,474
Respiratory Agents	0.5	0.2	0.0	0.2	17	13	0	4	37	63	24	15	84,739	3,106,779	26,945	21.7	187,857
Gastrointestinal Agents	0.6	0.3	0.0	0.2	39	32	2	5	71	102	123	23	30,783	2,186,977	8,256	6.7	55,646
Genitourinary Agents	0.3	0.2	0.0	0.1	11	9	0	1	35	43	31	17	9,376	332,251	4,883	3.9	30,277
CNS Drugs	1.1	0.6	0.1	0.4	77	59	7	11	72	105	110	24	108,062	7,777,685	14,882	12.0	100,569
Stimulants/Anti-obesity/Anorexia	0.8	0.5	0.0	0.2	45	35	2	8	54	65	40	34	12,781	694,919	2,215	1.8	15,590
Miscellaneous Psychological/Neurological Agents	0.5	0.4	0.0	0.1	71	68	0	3	152	168	30	48	527	80,217	149	0.1	1,135
Analgesics and Anesthetics	0.7	0.1	0.0	0.5	19	12	1	6	29	95	48	12	111,381	3,188,172	26,691	21.5	171,215
Neuromuscular Agents	1.0	0.4	0.1	0.5	56	46	2	8	58	102	39	18	45,066	2,635,051	6,464	5.2	47,192
Nutritional Products	0.3	0.0	0.0	0.3	4	0	1	3	13	17	21	11	39,668	497,625	20,252	16.3	116,075
Hematological Agents	0.7	0.1	0.1	0.5	158	110	6	41	225	904	51	90	6,494	1,458,084	1,293	1.0	9,253
Topical Products	0.3	0.1	0.0	0.2	8	5	1	3	26	51	32	13	48,394	1,272,524	24,487	19.7	160,525
Miscellaneous Products	0.3	0.2	0.0	0.2	27	22	1	4	78	123	270	22	2,838	221,057	1,207	1.0	8,187
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	4	0	0	0	22	0	0	0	983	21,225	670	0.5	4,983
<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.	698,958	31,088,004	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Utah, 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 Utah, 2.7 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, UTAH, 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	
ANTIDEPRESSANTS	\$2,843,168	10,229	8.2 %	85,195	0.5	\$67	\$33
ANTIPSYCHOTICS	2,382,423	2,892	2.3	26,361	0.6	145	90
ANTICONVULSANT	1,804,175	3,348	2.7	30,562	0.8	78	59
ULCER DRUGS	1,412,080	5,551	4.5	47,404	0.4	83	30
ANALGESICS - Narcotic	1,373,842	19,135	15.4	153,511	0.3	27	9
ANTIASTHMATIC	960,047	8,879	7.2	75,830	0.3	42	13
MISC. HEMATOLOGICAL	817,193	154	0.1	1,495	0.5	994	547
PENICILLINS	800,678	24,591	19.8	205,436	0.2	24	4
ANALGESICS - ANTI-INFLAMMATORY	748,159	12,115	9.8	100,631	0.2	30	7
DERMATOLOGICAL	617,361	13,449	10.8	116,949	0.2	31	5
Total	13,759,126	100,343		843,374	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Utah, 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, UTAH, 2001

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIDEPRESSANTS					ANTIPSYCHOTICS				
	No. of Rx	Rx \$	No. of Users	Users as % of All Benes	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	Mean No. of Rx	Mean Rx \$	
<b>All</b>	<b>252,285</b>	<b>\$13,759,126</b>	<b>10,229</b>	<b>8.2 %</b>	<b>0.5</b>	<b>\$33</b>	<b>2,892</b>	<b>2.3 %</b>	<b>0.6</b>	<b>\$90</b>					
<b>Female</b>															
<b>Disabled</b>	162,500	7,983,340	7,422	10.2	0.5	34	1,597	2.2	0.6	80					
5 and younger	57,318	4,059,843	1,881	43.5	0.6	42	801	18.5	0.7	107					
6-14	869	47,762	2	0.8	0.5	27	3	1.2	0.4	41					
15-20	1,836	119,439	53	15.8	0.6	29	17	5.1	0.7	113					
21-44	2,837	226,554	113	31.2	0.5	33	45	12.4	0.5	81					
45-64	23,041	1,672,427	818	50.2	0.6	41	385	23.6	0.6	100					
65-74	28,432	1,973,326	885	51.1	0.7	45	345	19.9	0.8	120					
75-84	303	20,335	10	47.6	0.9	57	6	28.6	1.0	93					
85 and older	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					
5 and younger	105,182	3,923,497	5,541	8.1	0.4	30	796	1.2	0.4	47					
6-14	16,811	335,029	37	0.2	0.2	13	6	0.0	0.1	2					
15-20	10,542	425,699	393	3.1	0.4	24	104	0.8	0.6	83					
21-44	13,219	480,339	868	10.1	0.4	25	122	1.4	0.3	30					
45-64	56,636	2,204,535	3,862	16.5	0.4	30	479	2.0	0.3	29					
65-74	5,126	274,930	318	31.3	0.6	41	35	3.4	0.4	50					
75-84	1,917	139,620	35	19.0	0.8	57	31	16.8	1.0	176					
85 and older	459	34,698	14	18.9	0.8	56	8	10.8	0.4	119					
<b>Male</b>															
<b>Disabled</b>	89,774	5,775,603	2,807	5.5	0.5	33	1,295	2.5	0.7	103					
5 and younger	36,508	3,521,127	972	24.4	0.6	41	719	18.0	0.8	122					
6-14	1,138	71,786	6	1.7	0.2	3	1	0.3	0.4	51					
15-20	3,319	288,866	112	19.6	0.6	30	94	16.5	0.6	104					
21-44	4,092	395,584	123	28.2	0.6	44	108	24.8	0.7	113					
45-64	15,057	1,489,704	407	27.5	0.6	43	353	23.8	0.8	123					
65-74	12,610	1,255,771	321	28.6	0.7	41	158	14.1	0.8	137					
75-84	292	19,416	3	18.8	0.9	52	5	31.3	0.8	77					
85 and older	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					
5 and younger	53,266	2,254,476	1,835	3.9	0.5	29	576	1.2	0.6	77					
6-14	20,071	434,973	37	0.2	0.4	14	11	0.0	0.1	8					
15-20	12,504	620,852	672	5.1	0.5	25	233	1.8	0.6	74					
21-44	7,292	478,207	493	11.7	0.5	33	189	4.5	0.7	96					
45-64	9,409	476,734	504	11.1	0.4	28	85	1.9	0.4	50					
65-74	2,069	117,236	89	13.6	0.5	34	14	2.1	0.3	21					
75-84	1,111	81,066	18	18.4	0.7	41	27	27.6	0.5	119					
85 and older	553	33,980	13	33.3	0.8	49	9	23.1	0.6	88					
<b>Unknown</b>	257	11,428	9	50.0	0.6	22	8	44.4	0.3	33					
	11	183	0	0.0	0.0	0	0	0.0	0.0	0					

Nondual Beneficiaries

Table ND7A

Source: Data for this table are from the MAX 2001 file for Utah, 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, UTAH, 2001

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					ANALGESICS - Narcotic				
	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean Rx	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean Rx \$	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean Rx \$	Mean No. of Rx
<b>All</b>	<b>3,348</b>	<b>2.7 %</b>	<b>30,562</b>	<b>0.8</b>	<b>\$59</b>	<b>5,551</b>	<b>4.5 %</b>	<b>47,404</b>	<b>0.4</b>	<b>\$30</b>	<b>19,135</b>	<b>15.4 %</b>	<b>153,511</b>	<b>0.3</b>	<b>\$9</b>
<b>Female</b>	2,001	2.8	18,193	0.7	55	3,723	5.1	32,038	0.4	30	14,342	19.7	113,989	0.3	8
<b>Disabled</b>	1,098	25.4	11,064	0.9	69	1,095	25.3	11,022	0.5	48	2,134	49.3	21,160	0.5	20
5 and younger	28	11.4	291	0.6	84	33	13.4	323	0.4	23	22	8.9	235	0.1	2
6-14	71	21.2	762	0.9	74	15	4.5	153	0.5	45	37	11.0	380	0.1	2
15-20	95	26.2	973	0.9	84	51	14.1	500	0.4	36	102	28.2	1,062	0.2	5
21-44	509	31.2	5,147	0.9	75	383	23.5	3,903	0.5	45	944	57.9	9,355	0.5	18
45-64	392	22.6	3,859	0.8	55	607	35.0	6,075	0.6	53	1,018	58.7	10,007	0.6	26
65-74	3	14.3	32	0.7	56	6	28.6	68	0.5	22	11	52.4	121	0.4	17
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>	903	1.3	7,129	0.5	33	2,628	3.8	21,016	0.3	21	12,208	17.8	92,829	0.3	5
5 and younger	21	0.1	167	0.6	27	486	2.2	3,529	0.2	8	629	2.8	5,381	0.1	1
6-14	104	0.8	931	0.7	57	177	1.4	1,625	0.2	10	696	5.5	6,095	0.2	2
15-20	97	1.1	834	0.5	44	361	4.2	3,067	0.2	16	2,137	24.9	16,018	0.2	2
21-44	603	2.6	4,560	0.5	27	1,361	5.8	10,765	0.3	24	8,262	35.3	61,456	0.3	6
45-64	50	4.9	384	0.5	30	180	17.7	1,454	0.4	36	386	38.0	2,937	0.4	11
65-74	20	10.9	182	0.8	44	39	21.2	369	0.5	42	61	33.2	635	0.4	7
75-84	5	6.8	41	0.8	24	11	14.9	102	0.8	88	14	18.9	147	0.5	11
85 and older	3	6.5	30	1.2	20	13	28.3	105	0.6	64	23	50.0	160	0.5	12
<b>Male</b>	1,347	2.6	12,369	0.8	65	1,826	3.6	15,358	0.4	29	4,793	9.4	39,522	0.3	13
<b>Disabled</b>	853	21.4	8,314	0.9	78	656	16.5	6,378	0.5	44	1,238	31.1	11,503	0.5	22
5 and younger	20	5.6	188	0.6	41	42	11.7	431	0.4	26	38	10.6	390	0.1	1
6-14	118	20.7	1,159	0.8	71	34	6.0	371	0.5	40	75	13.1	768	0.1	3
15-20	120	27.5	1,223	0.9	78	54	12.4	555	0.5	41	85	19.5	888	0.2	6
21-44	401	27.1	3,853	1.0	91	257	17.4	2,558	0.5	45	511	34.5	4,626	0.5	29
45-64	191	17.0	1,855	0.8	57	263	23.4	2,391	0.5	47	521	46.4	4,735	0.5	23
65-74	3	18.8	36	1.7	93	6	37.5	72	0.5	31	8	50.0	96	0.6	50
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>	494	1.1	4,055	0.6	40	1,170	2.5	8,980	0.3	19	3,555	7.6	28,019	0.3	9
5 and younger	27	0.1	208	0.4	24	589	2.4	4,238	0.2	9	830	3.4	7,159	0.1	1
6-14	163	1.2	1,484	0.6	41	140	1.1	1,328	0.2	15	724	5.5	6,148	0.2	2
15-20	111	2.6	932	0.7	55	98	2.3	859	0.3	22	503	12.0	4,158	0.2	2
21-44	149	3.3	1,022	0.5	30	241	5.3	1,658	0.4	36	1,231	27.1	8,618	0.5	19
45-64	22	3.4	161	0.4	41	62	9.5	502	0.4	35	205	31.3	1,342	0.6	28
65-74	12	12.2	129	0.7	32	26	26.5	269	0.5	33	39	39.8	360	0.5	20
75-84	7	17.9	83	0.4	17	13	33.3	120	0.6	44	11	28.2	115	0.7	18
85 and older	3	16.7	36	1.0	21	1	5.6	6	0.7	76	12	66.7	119	0.6	10
<b>Unknown</b>	0	0.0	0	0.0	0	2	0.6	8	0.3	5	0	0.0	0	0.0	0

Table ND7B Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Utah, 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, UTAH, 2001

Beneficiary Characteristics	ANTI-ASTHMATIC				MISC. HEMATOLOGICAL				PENICILLINS			
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx
<b>All</b>	<b>8,879</b>	<b>7.2 %</b>	<b>75,830</b>	<b>0.3</b>	<b>154</b>	<b>0.1 %</b>	<b>1,495</b>	<b>0.5</b>	<b>24,591</b>	<b>19.8 %</b>	<b>205,436</b>	<b>0.2</b>
<b>Female</b>	4,848	6.7	41,047	0.3	72	0.1	746	0.5	13,960	19.2	115,675	0.2
<b>Disabled</b>	1,063	24.6	10,476	0.5	58	1.3	614	0.5	1,043	24.1	10,770	0.2
5 and younger	54	22.0	523	0.4	0	0.0	0	0.0	113	45.9	1,117	0.2
6-14	66	19.7	742	0.3	0	0.0	0	0.0	111	33.1	1,174	0.2
15-20	51	14.1	511	0.3	2	0.6	15	0.8	84	23.2	862	0.2
21-44	363	22.3	3,510	0.5	12	0.7	133	0.4	367	22.5	3,743	0.1
45-64	526	30.4	5,154	0.5	44	2.5	466	0.5	367	21.2	3,862	0.2
65-74	3	14.3	36	0.3	0	0.0	0	0.0	1	4.8	12	0.2
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
<b>Other Eligibles</b>	3,785	5.5	30,571	0.2	14	0.0	132	0.6	12,917	18.9	104,905	0.2
5 and younger	1,152	5.1	9,622	0.2	0	0.0	0	0.0	5,721	25.4	46,903	0.2
6-14	586	4.7	4,928	0.2	0	0.0	0	0.0	2,224	17.7	19,227	0.1
15-20	533	6.2	4,236	0.3	0	0.0	0	0.0	1,278	14.9	10,227	0.2
21-44	1,345	5.7	10,327	0.3	2	0.0	14	0.8	3,471	14.8	26,676	0.2
45-64	119	11.7	953	0.4	0	0.0	0	0.0	180	17.7	1,451	0.2
65-74	32	17.4	334	0.3	8	4.3	87	0.6	30	16.3	318	0.1
75-84	11	14.9	109	0.1	3	4.1	26	0.4	8	10.8	69	0.1
85 and older	7	15.2	62	0.5	1	2.2	5	1.4	5	10.9	34	0.3
<b>Male</b>	4,031	7.9	34,783	0.3	82	0.2	749	0.6	10,629	20.9	89,758	0.2
<b>Disabled</b>	699	17.5	6,948	0.5	59	1.5	554	0.6	834	20.9	8,442	0.2
5 and younger	81	22.6	834	0.4	1	0.3	12	0.6	152	42.5	1,537	0.2
6-14	104	18.2	1,049	0.4	0	0.0	0	0.0	183	32.0	1,891	0.1
15-20	70	16.1	716	0.7	2	0.5	12	1.1	92	21.1	939	0.2
21-44	145	9.8	1,453	0.6	13	0.9	146	0.5	254	17.2	2,578	0.1
45-64	295	26.3	2,848	0.6	43	3.8	384	0.6	150	13.4	1,461	0.2
65-74	4	25.0	48	0.4	0	0.0	0	0.0	3	18.8	36	0.1
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
<b>Other Eligibles</b>	3,332	7.1	27,835	0.2	23	0.0	195	0.5	9,795	20.9	81,316	0.2
5 and younger	1,941	8.0	16,032	0.2	2	0.0	9	0.4	6,732	27.8	55,353	0.2
6-14	861	6.5	7,287	0.3	1	0.0	4	1.3	1,987	15.1	17,376	0.1
15-20	255	6.1	2,278	0.2	1	0.0	5	1.0	506	12.0	4,432	0.1
21-44	177	3.9	1,385	0.4	2	0.0	13	0.5	482	10.6	3,457	0.2
45-64	50	7.6	388	0.4	6	0.9	38	0.3	71	10.8	538	0.2
65-74	19	19.4	206	1.0	5	5.1	60	0.5	13	13.3	126	0.1
75-84	21	53.8	180	0.3	5	12.8	54	0.6	3	7.7	30	0.2
85 and older	8	44.4	79	0.2	1	5.6	12	0.2	1	5.6	4	0.3
<b>Unknown</b>	0	0.0	0	0.0	0	0.0	0	0.0	2	0.6	3	1.0

Table ND7C  
 Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Utah, 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, UTAH, 2001

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY					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 Bene Mos	
<b>All</b>	<b>12,115</b>	<b>9.8 %</b>	<b>100,631</b>	<b>0.2</b>	<b>\$7</b>	<b>13,449</b>	<b>10.8 %</b>	<b>116,949</b>	<b>0.2</b>	<b>\$5</b>	<b>123,992</b>	<b>632,330</b>
<b>Female</b>	8,749	12.0	71,456	0.3	8	8,037	11.1	69,684	0.2	5	72,722	364,685
<b>Disabled</b>	1,322	30.6	13,438	0.4	20	1,154	26.7	12,287	0.2	9	4,326	32,425
5 and younger	18	7.3	184	0.2	3	54	22.0	586	0.1	4	246	1,624
6-14	29	8.7	293	0.3	3	78	23.3	866	0.1	5	335	2,565
15-20	70	19.3	729	0.2	8	92	25.4	988	0.2	28	362	2,776
21-44	548	33.6	5,535	0.3	16	399	24.5	4,241	0.2	8	1,629	12,539
45-64	650	37.5	6,621	0.4	26	525	30.3	5,546	0.2	7	1,733	12,739
65-74	7	33.3	76	0.3	22	6	28.6	60	0.1	2	21	182
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>	7,427	10.9	58,018	0.2	5	6,883	10.1	57,397	0.2	4	68,396	332,260
5 and younger	904	4.0	7,517	0.2	2	2,972	13.2	24,713	0.2	3	22,554	112,107
6-14	579	4.6	5,291	0.2	2	1,211	9.7	10,858	0.2	5	12,543	69,812
15-20	1,299	15.1	9,903	0.2	3	759	8.9	6,207	0.2	7	8,575	40,584
21-44	4,270	18.2	32,082	0.2	5	1,703	7.3	13,397	0.2	6	23,405	102,434
45-64	273	26.9	2,208	0.3	16	141	13.9	1,203	0.2	6	1,015	5,148
65-74	79	42.9	814	0.5	21	66	35.9	717	0.2	4	184	1,405
75-84	12	16.2	103	0.7	52	16	21.6	158	0.2	5	74	442
85 and older	11	23.9	100	0.5	37	15	32.6	144	0.2	4	46	328
<b>Male</b>	3,366	6.6	29,175	0.2	7	5,407	10.6	47,244	0.2	6	50,960	266,888
<b>Disabled</b>	674	16.9	6,704	0.3	15	805	20.2	8,613	0.2	8	3,985	28,282
5 and younger	27	7.5	275	0.2	2	72	20.1	714	0.2	10	358	2,389
6-14	47	8.2	517	0.2	2	96	16.8	1,048	0.1	4	571	4,433
15-20	62	14.2	675	0.2	5	132	30.3	1,442	0.2	8	436	3,278
21-44	280	18.9	2,693	0.3	14	277	18.7	2,984	0.2	8	1,481	10,704
45-64	255	22.7	2,508	0.5	23	222	19.8	2,353	0.3	9	1,122	7,344
65-74	3	18.8	36	0.5	23	6	37.5	72	0.3	8	16	131
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	3
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Other Eligibles</b>	2,692	5.7	22,471	0.2	4	4,602	9.8	38,631	0.2	5	46,975	238,606
5 and younger	995	4.1	8,513	0.2	2	2,953	12.2	24,161	0.2	3	24,239	120,986
6-14	504	3.8	4,623	0.2	2	904	6.9	8,019	0.1	5	13,188	72,631
15-20	443	10.5	3,838	0.2	3	473	11.3	4,283	0.2	15	4,200	23,233
21-44	598	13.2	4,288	0.3	8	181	4.0	1,315	0.2	8	4,538	17,873
45-64	115	17.6	855	0.3	14	46	7.0	361	0.2	7	655	2,797
65-74	19	19.4	184	0.6	26	26	26.5	284	0.2	6	98	687
75-84	11	28.2	115	0.6	41	17	43.6	184	0.1	3	39	269
85 and older	7	38.9	55	0.9	66	2	11.1	24	0.3	10	18	130
<b>Unknown</b>	0	0.0	0	0.0	0	5	1.6	21	0.3	6	310	757

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Utah, 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, UTAH, 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>\$440</b>	<b>8.5</b>	<b>336</b>	<b>3,433</b>
<b>Age</b>				
0-64	487	9.4	229	2,379
65-74	425	7.5	53	548
75-84	247	5.5	27	270
85 and older	225	5.6	27	236
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	478	8.9	191	2,012
Male	386	8.0	145	1,421
Unknown	0	0.0	0	0
<b>Race</b>				
White	437	8.5	278	2,826
African American	660	13.1	8	93
Other/unknown	414	8.2	50	514
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	336	6.6	98	968
Disabled	482	9.3	236	2,441
Adults	0	0.0	0	0
Children	324	10.6	2	24
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2001 file for Utah, 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 314 beneficiaries who were in nursing facilities for part of their enrollment and their 2,405 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, UTAH, 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	Generic	Brand-Name	Brand-Name	Generic											
Anti-infective Agents	0.8	0.4	0.1	0.3	\$46	\$36	\$4	\$6	\$60	\$82	\$63	\$23	1,848	\$110,056	228	67.9 %	2,386
Biologicals	0.1	0.1	0.0	0.0	2	1	0	0	16	14	0	25	89	1,428	79	23.5	909
Antineoplastic Agents	0.6	0.3	0.1	0.2	61	28	21	12	98	102	144	58	56	5,468	8	2.4	90
Endocrine/Metabolic Drugs	1.4	0.8	0.1	0.5	55	47	2	6	40	58	17	13	2,624	104,118	176	52.4	1,881
Cardiovascular Agents	1.9	0.8	0.1	0.9	59	41	2	16	31	49	22	17	3,556	111,996	184	54.8	1,900
Respiratory Agents	1.4	0.6	0.0	0.8	48	34	0	14	36	59	22	18	2,115	75,600	147	43.8	1,564
Gastrointestinal Agents	1.2	0.4	0.0	0.7	70	45	3	22	60	104	87	31	2,221	132,198	179	53.3	1,889
Genitourinary Agents	0.8	0.4	0.0	0.4	33	25	0	8	41	70	26	18	737	30,232	79	23.5	910
CNS Drugs	2.0	1.2	0.1	0.7	189	161	8	20	94	137	100	27	5,651	533,384	270	80.4	2,827
Stimulants/Anti-obesity/Anorexia	0.7	0.6	0.0	0.2	72	70	0	2	101	125	0	13	47	4,747	6	1.8	66
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	93	93	0	0	117	117	0	0	152	17,743	17	5.1	190
Analgesics and Anesthetics	1.3	0.6	0.0	0.7	51	41	2	8	38	71	41	11	3,134	118,764	224	66.7	2,333
Neuromuscular Agents	1.7	0.7	0.1	0.9	82	62	2	19	49	92	29	20	3,146	153,942	175	52.1	1,866
Nutritional Products	1.0	0.0	0.1	0.9	16	1	2	13	16	105	20	15	1,301	20,536	129	38.4	1,280
Hematological Agents	1.1	0.2	0.2	0.7	36	26	3	7	33	150	14	10	1,201	39,972	111	33.0	1,109
Topical Products	0.5	0.1	0.1	0.3	13	6	3	4	27	41	39	16	1,070	28,554	195	58.0	2,173
Miscellaneous Products	0.7	0.1	0.0	0.6	37	31	1	5	54	233	407	10	376	20,319	56	16.7	543
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	5	0	0	0	36	0	0	0	20	720	13	3.9	148
<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.	29,344	1,509,777	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Utah, 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 314 beneficiaries who were in nursing facilities for part of their enrollment and their 2,405 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 Utah, 2.7 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, UTAH, 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	\$349,927	207	61.6 %	2,282	0.9	\$176	\$153
ANTIDEPRESSANTS	147,009	249	74.1	2,688	0.9	63	55
ULCER DRUGS	118,704	190	56.5	2,029	0.7	80	59
ANTICONVULSANT	114,586	178	53.0	1,954	1.0	58	59
ANTIDIABETIC	68,439	154	45.8	1,636	0.8	50	42
ANALGESICS - Narcotic	59,310	242	72.0	2,452	0.8	31	24
ANALGESICS - ANTI-INFLAMMATORY	57,723	148	44.0	1,630	0.7	52	35
ANTIASTHMATIC	50,134	149	44.3	1,604	0.9	35	31
ANTIHYPERTENSIVE	37,957	119	35.4	1,272	0.9	34	30
ANTIHYPERLIPIDEMIC	32,831	45	13.4	517	0.8	79	64
Total	1,036,620	1,681		18,064	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2001 file for Utah, 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 314 beneficiaries who were in nursing facilities for part of their enrollment and their 2,405 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, UTAH, 2001

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS				
	No. of Rx	Rx-\$	No. of Users	Mean No. of Rx	Users as % of All-Year Residents	No. of Bene Mos among NF	Mean No. of Rx	Mean Rx-\$	No. of Users	Users as % of All-Year Residents	No. of Bene Mos among NF	Mean No. of Rx	Mean Rx-\$
<b>All</b>	<b>15,128</b>	<b>\$1,036,620</b>	<b>207</b>	<b>0.9</b>	<b>61.6 %</b>	<b>2,282</b>	<b>0.9</b>	<b>\$153</b>	<b>249</b>	<b>74.1 %</b>	<b>2,688</b>	<b>0.9</b>	<b>\$55</b>
<b>Female</b>	9,103	686,980	145	0.9	75.9	1,610	0.9	160	151	79.1	1,693	0.9	61
<b>Disabled</b>	7,240	532,986	113	0.9	88.3	1,268	0.9	152	117	91.4	1,344	0.9	59
64 or younger	6,969	513,231	110	0.9	90.2	1,235	0.9	151	112	91.8	1,284	0.9	58
65-74	271	19,755	3	1.3	50.0	33	1.3	174	5	83.3	60	1.1	85
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
<b>Other Eligibles</b>	1,863	153,994	32	1.0	50.8	342	1.0	191	34	54.0	349	0.9	66
64 or younger	0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,187	106,545	21	1.1	75.0	229	1.1	233	20	71.4	207	0.9	75
75-84	280	22,867	4	0.4	28.6	40	0.4	159	6	42.9	61	0.9	58
85 and older	396	24,582	7	0.9	33.3	73	0.9	75	8	38.1	81	0.7	50
<b>Male</b>	6,025	349,640	62	0.8	42.8	672	0.8	137	98	67.6	995	0.8	44
<b>Disabled</b>	4,445	259,431	41	0.9	38.0	422	0.9	158	76	70.4	739	0.8	44
64 or younger	4,405	257,605	40	0.9	38.1	410	0.9	163	75	71.4	727	0.8	44
65-74	40	1,826	1	0.1	33.3	12	0.1	4	1	33.3	12	1.0	67
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
<b>Other Eligibles</b>	1,580	90,209	21	0.5	56.8	250	0.5	100	22	59.5	256	0.8	45
64 or younger	162	6,216	1	1.0	50.0	12	1.0	134	1	50.0	12	1.0	10
65-74	781	51,648	10	0.6	62.5	119	0.6	156	8	50.0	94	0.8	46
75-84	447	24,651	6	0.5	46.2	72	0.5	51	9	69.2	102	0.8	57
85 and older	190	7,694	4	0.2	66.7	47	0.2	28	4	66.7	48	0.8	26
<b>Unknown</b>	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 Utah, 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 314 beneficiaries who were in nursing facilities for part of their enrollment and their 2,405 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, UTAH, 2001

Beneficiary Characteristics	ULCER DRUGS						ANTICONVULSANT						ANTIDIABETIC					
	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	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx	Mean No. of Rx
<b>All</b>	190	2,029	0.7	\$59	178	53.0 %	1,954	1.0	\$59	154	45.8 %	1,636	0.8	\$42				
<b>Female</b>	109	1,194	0.7	61	111	58.1	1,239	1.0	62	95	49.7	1,034	0.8	43				
<b>Disabled</b>	89	1,001	0.7	59	97	75.8	1,107	1.0	63	67	52.3	743	0.8	41				
64 or younger	86	969	0.7	60	94	77.0	1,075	1.0	63	59	48.4	659	0.8	44				
65-74	3	32	0.5	27	3	50.0	32	0.7	56	8	133.3	84	0.5	22				
75-84	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				
<b>Other Eligibles</b>	20	193	0.8	72	14	22.2	132	0.9	55	28	44.4	291	0.9	46				
64 or younger	0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
65-74	7	72	0.8	53	12	42.9	114	0.9	61	14	50.0	160	1.0	47				
75-84	6	60	0.9	95	0	0.0	0	0.0	0	8	57.1	81	0.6	28				
85 and older	7	61	0.7	72	2	9.5	18	0.7	17	6	28.6	50	0.9	70				
<b>Male</b>	81	835	0.7	55	67	46.2	715	1.0	53	59	40.7	602	0.9	41				
<b>Disabled</b>	65	659	0.7	56	51	47.2	523	1.1	64	39	36.1	386	0.9	44				
64 or younger	65	659	0.7	56	51	48.6	523	1.1	64	38	36.2	378	0.9	44				
65-74	0	0	0.0	0	0	0.0	0	0.0	0	1	33.3	8	1.1	25				
75-84	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				
<b>Other Eligibles</b>	16	176	0.8	50	16	43.2	192	0.6	24	20	54.1	216	0.9	35				
64 or younger	3	36	1.1	81	1	50.0	12	1.2	29	0	0.0	0	0.0	0				
65-74	7	84	0.8	33	6	37.5	72	0.7	37	12	75.0	138	0.9	44				
75-84	6	56	0.7	54	6	46.2	72	0.3	13	8	61.5	78	0.8	19				
85 and older	0	0	0.0	0	3	50.0	36	1.0	21	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				

Source: Data for this table are from the MAX 2001 file for Utah, 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 314 beneficiaries who were in nursing facilities for part of their enrollment and their 2,405 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, UTAH, 2001

Beneficiary Characteristics	ANALGESICS - Narcotic					ANALGESICS - ANTI-INFLAMMATORY					ANTI-ASTHMATIC							
	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>	<b>242</b>	<b>2,452</b>	<b>0.8</b>	<b>\$24</b>	<b>0.7</b>	<b>148</b>	<b>1,630</b>	<b>0.7</b>	<b>\$35</b>	<b>0.7</b>	<b>149</b>	<b>1,604</b>	<b>0.9</b>	<b>\$31</b>				
<b>Female</b>																		
<b>Disabled</b>	145	1,490	0.7	23	0.6	94	1,048	0.6	33	0.6	66	748	0.5	23				
64 or younger	107	1,161	0.8	28	0.6	66	761	0.6	29	0.6	48	552	0.6	25				
65-74	104	1,128	0.9	29	0.6	62	713	0.6	29	0.6	45	516	0.6	25				
75-84	3	33	0.2	1	0.4	4	48	0.4	27	0.4	3	36	0.3	25				
85 and older	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0				
<b>Other Eligibles</b>	38	329	0.4	6	0.8	28	287	0.8	45	0.8	18	196	0.3	15				
64 or younger	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0				
65-74	18	163	0.4	6	0.8	17	171	0.8	41	0.8	11	124	0.3	20				
75-84	6	68	0.5	10	0.8	5	50	0.8	56	0.8	5	48	0.1	7				
85 and older	14	98	0.4	4	0.6	6	66	0.6	46	0.6	2	24	0.2	6				
<b>Male</b>																		
<b>Disabled</b>	97	962	0.8	26	0.8	54	582	0.8	40	0.8	83	856	1.2	39				
64 or younger	76	728	0.9	27	0.7	39	429	0.7	33	0.7	52	554	1.4	43				
65-74	76	728	0.9	27	0.7	39	429	0.7	33	0.7	52	554	1.4	43				
75-84	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				
<b>Other Eligibles</b>	21	234	0.7	21	0.9	15	153	0.9	59	0.9	31	302	0.9	32				
64 or younger	0	0	0.0	0	1.1	2	24	1.1	19	1.1	1	12	4.9	64				
65-74	6	72	1.0	37	0.8	3	36	0.8	57	0.8	11	113	1.5	60				
75-84	8	80	0.8	23	0.7	7	68	0.7	52	0.7	17	154	0.3	14				
85 and older	7	82	0.4	5	1.6	3	25	1.6	120	1.6	2	23	0.1	2				
<b>Unknown</b>	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 Utah, 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 314 beneficiaries who were in nursing facilities for part of their enrollment and their 2,405 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).
- Benefit Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 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, UTAH, 2001

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTHYPERLIPIDEMIC					Mean Rx \$	All-Year NF Residents	Bene Mos among All-Year NF Residents
	Users as %		No. of Bene		Mean No. of Rx	Users as %		No. of Bene		Mean No. of Rx			
	No. of Users	Residents	NF Residents	All-Year NF Residents		Users	Mos among Users	Users	Mos among Users				
<b>All</b>	119	35.4 %	1,272	0.9	\$30	45	13.4 %	517	0.8	\$64	336	3,433	
<b>Female</b>	70	36.6	758	0.9	33	28	14.7	330	0.8	64	191	2,012	
<b>Disabled</b>	45	35.2	522	0.9	34	21	16.4	248	0.8	60	128	1,424	
64 or younger	41	33.6	474	0.9	35	19	15.6	228	0.8	61	122	1,359	
65-74	4	66.7	48	0.7	25	2	33.3	20	0.7	49	6	65	
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>	25	39.7	236	0.9	30	7	11.1	82	1.0	76	63	588	
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	
65-74	12	42.9	129	0.9	32	5	17.9	60	1.0	80	28	282	
75-84	4	28.6	22	1.0	29	1	7.1	10	0.9	52	14	130	
85 and older	9	42.9	85	0.9	29	1	4.8	12	1.3	71	21	176	
<b>Male</b>	49	33.8	514	0.8	25	17	11.7	187	0.7	62	145	1,421	
<b>Disabled</b>	31	28.7	325	0.8	25	11	10.2	121	0.8	59	108	1,017	
64 or younger	30	28.6	317	0.8	25	10	9.5	109	0.7	61	105	996	
65-74	1	33.3	8	1.0	31	1	33.3	12	0.8	44	3	21	
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>	18	48.6	189	0.8	25	6	16.2	66	0.7	68	37	404	
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24	
65-74	10	62.5	114	0.9	26	4	25.0	48	0.6	60	16	180	
75-84	5	38.5	50	0.6	16	2	15.4	18	0.8	91	13	140	
85 and older	3	50.0	25	1.3	38	0	0.0	0	0.0	0	6	60	
<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 Utah, 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 314 beneficiaries who were in nursing facilities for part of their enrollment and their 2,405 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>  
 UTAH, 2001

Beneficiary Characteristics	No. of Beneficiaries at Least One Part D Excl Rx	% Beneficiaries with at Least One Part D Excl Rx	No. of Part D Excl Rx per Beneficiary	Total No. of 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 Beneficiaries
<b>Age</b>								
5 and younger	13,009	27.3	0.6	26,352	264,542	10	8.9	47,705
6-14	4,182	15.7	0.3	8,609	153,545	18	4.2	26,637
15-20	2,649	19.5	0.5	6,679	179,307	27	5.2	13,573
21-44	7,729	24.9	1.0	31,796	559,746	18	4.3	31,054
45-64	1,880	41.5	3.7	16,744	256,199	15	3.5	4,525
65-74	160	50.2	6.4	2,038	15,955	8	3.2	319
75-84	58	50.9	6.9	781	6,761	9	4.8	114
85 and older	43	67.2	9.8	627	5,266	8	6.3	64
Unknown	0	0.0	0.0	0	0	0	0.0	1
<b>Basis of Eligibility<sup>c</sup></b>								
Aged	243	53.3	6.9	3,160	25,679	8	4.0	456
Disabled	3,570	43.0	3.8	31,537	614,794	19	4.1	8,311
Adults	7,838	22.6	0.7	23,606	390,076	17	4.6	34,720
Children	18,052	22.4	0.4	35,307	410,545	12	6.0	80,474
Unknown	7	22.6	0.5	16	227	14	1.5	31
<b>Gender</b>								
Female	18,222	25.1	0.8	59,966	966,466	16	5.1	72,723
Male	11,482	22.5	0.7	33,651	474,801	14	3.9	50,960
Unknown	6	1.9	0.0	9	54	6	12.4	309
<b>Race</b>								
White	21,748	24.8	0.8	73,381	1,227,439	17	4.6	87,588
African American	471	20.6	0.6	1,457	16,490	11	3.4	2,288
Other/unknown	7,491	22.0	0.6	18,788	197,392	11	5.3	34,116
<b>Use of Nursing Facilities<sup>d</sup></b>								
Entire year	311	92.6	22.5	7,554	63,790	8	4.2	336
Part year	274	87.3	13.0	4,069	48,386	12	4.2	314
None	29,125	23.6	0.7	82,003	1,329,145	16	4.7	123,342
<b>Maintenance Assistance Status</b>								
Cash	12,005	26.5	1.1	48,512	799,917	16	4.6	45,303
Medically needy	519	15.5	0.6	2,074	36,864	18	3.5	3,342
Poverty related	9,206	19.5	0.4	19,933	262,487	13	4.9	47,107
Other/unknown	7,980	28.3	0.8	23,107	342,053	15	4.7	28,240

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2001 file for Utah, 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>  
 UTAH, 2001

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazepine \$ per Bene Mo.	No. of Bene Mos
All	0.1	\$2	\$15	\$0	\$1	632,330
<b>Age</b>						
5 and younger	0.1	1	10	0	0	237,859
6-14	0.1	1	18	0	0	149,441
15-20	0.1	3	27	0	0	69,871
21-44	0.2	4	18	0	2	143,552
45-64	0.6	9	15	0	3	28,028
65-74	0.8	7	8	0	1	2,405
75-84	1.1	9	9	0	3	714
85 and older	1.4	11	8	0	2	458
Unknown	0.0	0	0	0	0	2
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	1.0	8	8	0	2	3,256
Disabled	0.5	10	19	0	4	60,707
Adults	0.2	3	17	0	1	149,039
Children	0.1	1	12	0	0	419,226
Unknown	0.2	2	14	0	1	102
<b>Gender</b>						
Female	0.2	3	16	0	1	364,687
Male	0.1	2	14	0	1	266,888
Unknown	0.0	0	6	0	0	755
<b>Race</b>						
White	0.2	3	17	0	1	459,799
African American	0.1	2	11	0	0	9,908
Other/unknown	0.1	1	11	0	0	162,623
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	2.2	19	8	0	6	3,433
Part year	1.7	20	12	0	7	2,405
None	0.1	2	16	0	1	626,492
<b>Maintenance Assistance Status</b>						
Cash	0.2	3	16	0	1	245,005
Medically needy	0.2	3	18	0	1	11,476
Poverty related	0.1	1	13	0	0	218,043
Other/unknown	0.1	2	15	0	1	157,806

Source: Data for this table are from the MAX 2001 file for Utah, 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>  
 UTAH, 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>38,273</b>	<b>\$38</b>	<b>\$1,441,321</b>	<b>100.0 %</b>	<b>93,626</b>	<b>\$15</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	9	132	1,189	0.1	10	119	0.0
Drugs for cosmetic purposes	51	12	603	0.0	59	10	0.1
Cough and cold medications	14,508	40	582,937	40.4	25,894	23	27.7
Vitamins and minerals	6,476	31	199,513	13.8	14,449	14	15.4
Non-prescription drugs	11,912	11	128,973	8.9	29,089	4	31.1
Barbiturates	343	40	13,887	1.0	1,887	7	2.0
Benzodiazepines	3,968	102	405,335	28.1	19,087	21	20.4
Other Part D Excl Rx Drugs	1,006	108	108,884	7.6	3,151	35	3.4

Source: Data for this table are from the MAX 2001 file for Utah, 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 nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2001. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2001. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table ND11.

b. Includes OTC drugs as well as prescription drugs.

c. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility, those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

APPENDIX TABLE A.1  
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
NONDUAL BENEFICIARIES, UTAH, 2001

Beneficiary Characteristics	No. of Beneficiaries					No. of Beneficiaries					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>192,786</b>	<b>1,396</b>	<b>15,880</b>	<b>48,024</b>	<b>127,447</b>	<b>1,464,285</b>	<b>14,766</b>	<b>159,563</b>	<b>297,924</b>	<b>991,853</b>	<b>179</b>
<b>Age</b>											
5 and younger	73,127	0	1,116	3	72,008	561,511	0	11,013	13	550,485	0
6-14	44,762	0	1,910	13	42,839	364,421	0	19,993	56	344,372	0
15-20	20,442	0	1,498	6,353	12,591	148,326	0	15,171	36,197	96,958	0
21-44	45,091	0	5,899	39,166	9	304,818	0	60,002	244,692	38	86
45-64	7,789	2	5,282	2,483	0	68,579	24	51,529	16,933	0	93
65-74	1,033	873	157	3	0	11,034	9,373	1,640	21	0	0
75-84	412	397	13	2	0	4,308	4,143	155	10	0	0
85 and older	129	124	5	0	0	1,286	1,226	60	0	0	0
Unknown	1	0	0	1	0	2	0	0	2	0	0
<b>Gender</b>											
Female	111,851	951	8,513	40,791	61,557	836,660	10,120	87,304	256,829	482,228	179
Male	80,625	445	7,367	7,232	65,581	626,867	4,646	72,259	41,093	508,869	0
Unknown	310	0	0	1	309	758	0	0	2	756	0
<b>Race</b>											
White	135,269	462	12,860	35,437	86,479	1,035,572	4,825	129,326	226,797	674,482	142
African American	4,446	15	375	895	3,161	36,948	177	3,561	6,231	26,979	0
Other/unknown	53,071	919	2,645	11,692	37,807	391,765	9,764	26,676	64,896	290,392	37
<b>Use of Nursing Facilities<sup>c</sup></b>											
Entire year	336	98	236	0	2	3,448	974	2,450	0	24	0
Part year	356	51	289	13	3	3,456	529	2,799	111	17	0
None	192,094	1,247	15,355	48,011	127,442	1,457,381	13,263	154,314	297,813	991,812	179
<b>Maintenance Assistance Status</b>											
Cash	71,195	972	10,664	22,784	36,775	587,269	11,034	113,034	144,458	318,743	0
Medically needy	3,807	37	579	1,726	1,465	16,468	287	3,533	6,087	6,561	0
Poverty related	70,786	288	2,337	14,231	53,891	474,394	2,634	17,376	76,753	377,452	179
Other/unknown	46,998	99	2,300	9,283	35,316	386,154	811	25,620	70,626	289,097	0
<b>Managed Care Status</b>											
FFS all year	76,270	315	5,822	23,837	46,277	475,610	2,823	50,302	115,997	306,415	73
FFS part year, with Rx claims	32,781	112	2,141	8,777	21,739	297,067	1,118	21,922	73,288	200,672	67
FFS part year, no Rx claims	14,941	29	348	2,106	12,458	107,162	242	3,033	13,543	90,344	0
MC all year, with Rx claims	48,453	834	6,687	10,258	30,667	459,017	9,640	76,215	81,090	292,036	36
MC all year, no Rx claims	20,341	106	882	3,046	16,306	125,429	943	8,091	14,006	102,386	3

Source: Data for this table are from the MAX 2001 file for Utah, 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, UTAH, 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>192,786</b>	<b>1,464,285</b>	<b>123,992</b>	<b>632,330</b>	<b>0</b>	<b>831,955</b>
FFS all year	76,270	475,610	76,270	475,610	0	0
FFS part year, with Rx claims	32,781	297,067	32,781	114,243	0	182,824
FFS part year, with no Rx claims	14,941	107,162	14,941	42,477	0	64,685
MC all year, with Rx claims	48,453	459,017	0	0	0	459,017
MC all year, with no Rx claims	20,341	125,429	0	0	0	125,429

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