

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

LIST OF TABLES

OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

FOR ALL MEDICAID BENEFICIARIES

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

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

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

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

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

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

FOR ALL NONDUAL BENEFICIARIES

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

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

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

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

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

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

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

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

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

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

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

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

FOR DUAL ELIGIBLE BENEFICIARIES

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

SUPPLEMENTAL TABLES

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

APPENDIX TABLE

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

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

Beneficiary Characteristics	No. of Benes							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown		
All	420,391	7,537	60,412	71,436	281,002	4	2,874,045	72,493	516,584	375,963	1,908,979	26		
Age														
5 and younger	125,831	0	2,682	0	123,149	0	811,045	0	18,745	0	792,300	0		
6-14	126,992	1	8,207	527	118,257	0	901,592	1	63,862	3,366	834,363	0		
15-20	55,666	1	5,523	10,736	39,406	0	378,256	5	45,037	52,038	281,176	0		
21-44	78,122	0	20,510	57,457	152	3	486,687	0	181,724	304,086	862	15		
45-64	25,787	37	23,035	2,713	1	1	219,461	184	202,809	16,454	3	11		
65-74	4,749	4,307	439	3	0	0	46,281	41,993	4,269	19	0	0		
75-84	2,374	2,362	12	0	0	0	22,792	22,691	101	0	0	0		
85 and older	834	829	4	0	1	0	7,660	7,619	37	0	4	0		
Unknown	36	0	0	0	36	0	271	0	0	0	271	0		
Gender														
Female	244,239	5,068	32,081	66,504	140,582	4	1,629,198	48,770	280,310	348,401	951,691	26		
Male	176,152	2,469	28,331	4,932	140,420	0	1,244,847	23,723	236,274	27,562	957,288	0		
Unknown	0	0	0	0	0	0	0	0	0	0	0	0		
Race														
White	203,534	2,868	36,468	35,518	128,679	1	1,533,739	27,683	342,742	205,119	958,184	11		
African American	176,962	1,502	21,600	32,704	121,154	2	1,050,638	13,448	153,012	154,899	729,276	3		
Other/unknown	39,895	3,167	2,344	3,214	31,169	1	289,668	31,362	20,830	15,945	221,519	12		
Use of Nursing Facilities^c														
Entire year	1,436	592	834	0	10	0	15,327	5,982	9,261	0	84	0		
Part year	1,079	309	752	6	12	0	9,602	2,721	6,760	39	82	0		
None	417,876	6,636	58,826	71,430	280,980	4	2,849,116	63,790	500,563	375,924	1,908,813	26		
Maintenance Assistance Status														
Cash	60,429	4,790	54,059	478	1,102	0	528,775	48,083	471,537	2,447	6,708	0		
Medically needy	5,247	1,694	3,122	68	363	0	36,858	15,733	19,059	276	1,790	0		
Poverty-related	263,924	187	1,083	29,358	233,293	3	1,725,836	1,371	6,518	134,650	1,583,272	25		
Other/unknown	90,791	866	2,148	41,532	46,244	1	582,576	7,306	19,470	238,590	317,209	1		
Managed Care Status														
FFS all year	238,994	5,155	38,766	38,984	156,086	3	1,788,176	49,494	362,307	219,521	1,156,830	24		
FFS part year, with Rx claims	96,756	2,088	16,121	20,405	58,142	0	711,672	20,754	128,741	113,619	448,558	0		
FFS part year, no Rx claims	84,641	294	5,525	12,047	66,774	1	374,197	2,245	25,536	42,823	303,591	2		

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

- a. Table ND.2 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
- c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.3

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a,b}
 NONDUAL BENEFICIARIES, VIRGINIA, 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	56.7 %	7.3	\$424	\$58	\$2,914	14.5 %	420,391
Age							
5 and younger	53.8	2.8	123	44	1,694	7.3	125,831
6-14	48.9	3.5	224	64	1,330	16.8	126,992
15-20	55.1	4.7	323	68	2,486	13.0	55,666
21-44	65.0	10.5	634	60	4,862	13.0	78,122
45-64	78.8	36.9	2,134	58	10,156	21.0	25,787
65-74	82.2	28.7	1,482	52	7,406	20.0	4,749
75-84	82.3	29.1	1,435	49	7,597	18.9	2,374
85 and older	82.3	34.6	1,504	44	11,815	12.7	834
Unknown	19.4	2.2	122	56	1,017	12.0	36
Basis of Eligibility^c							
Aged	81.8	28.9	1,442	50	7,779	18.5	7,537
Disabled	74.6	26.8	1,859	69	10,790	17.2	60,412
Adults	61.4	5.3	224	42	2,106	10.6	71,436
Children	50.9	3.0	139	46	1,296	10.7	281,002
Unknown	50.0	19.5	524	27	8,278	6.3	4
Gender							
Female	58.4	8.0	416	52	2,816	14.8	244,239
Male	54.3	6.3	435	69	3,051	14.2	176,152
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	66.0	10.5	591	56	3,386	17.5	203,534
African American	46.4	4.1	242	59	2,563	9.4	176,962
Other/unknown	54.7	5.4	378	70	2,065	18.3	39,895
Use of Nursing Facilities^d							
Entire year	92.4	76.0	3,541	47	46,830	7.6	1,436
Part year	94.3	63.9	3,373	53	41,927	8.0	1,079
None	56.4	6.9	405	59	2,663	15.2	417,876
Maintenance Assistance Status							
Cash	76.2	27.0	1,827	68	9,616	19.0	60,429
Medically needy	57.3	13.6	876	65	7,753	11.3	5,247
Poverty related	51.4	2.9	115	40	1,104	10.4	263,924
Other/unknown	58.7	6.8	363	53	3,437	10.5	90,791

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

- a. Table ND.3 includes beneficiaries represented by Cell K of Table 1.
 - b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
 - d. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 NONDUAL BENEFICIARIES, VIRGINIA, 2001

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:					Mean \$, All Services	Benes	Bene Mos	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less				More than 10
All	1.1	\$62	14.5 %	43.3 %	41.5 %	6.1 %	5.8 %	2.5 %	0.7 %	\$426	420,391	2,874,045
Age												
5 and younger	0.4	19	7.3	46.2	48.1	4.1	1.5	0.1	0.0	263	125,831	811,045
6-14	0.5	32	16.8	51.1	41.2	4.5	2.7	0.4	0.0	187	126,992	901,592
15-20	0.7	48	13.0	44.9	43.7	6.3	4.3	0.8	0.1	366	55,666	378,256
21-44	1.7	102	13.0	35.0	39.3	9.7	10.8	4.3	0.9	780	78,122	486,687
45-64	4.3	251	21.0	21.2	17.5	10.5	24.4	19.6	6.8	1,193	25,787	219,461
65-74	2.9	152	20.0	17.8	27.7	14.7	24.2	12.4	3.3	760	4,749	46,281
75-84	3.0	149	18.9	17.7	25.7	14.2	25.8	13.4	3.3	791	2,374	22,792
85 and older	3.8	164	12.7	17.7	17.9	10.4	29.7	19.4	4.8	1,286	834	7,660
Unknown	0.3	16	12.0	80.6	16.7	0.0	2.8	0.0	0.0	135	36	271
Basis of Eligibility^c												
Aged	3.0	150	18.5	18.2	26.5	14.0	24.7	13.1	3.4	809	7,537	72,493
Disabled	3.1	217	17.2	25.4	26.0	11.3	20.4	12.8	4.0	1,262	60,412	516,584
Adults	1.0	43	10.6	38.6	44.3	8.5	6.6	1.8	0.2	400	71,436	375,963
Children	0.4	20	10.7	49.1	44.5	4.2	2.0	0.2	0.0	191	281,002	1,908,979
Unknown	3.0	81	6.3	50.0	25.0	0.0	0.0	25.0	0.0	1,274	4	26
Gender												
Female	1.2	62	14.8	41.6	41.9	6.4	6.3	3.0	0.9	422	244,239	1,629,198
Male	0.9	62	14.2	45.7	41.0	5.8	5.2	1.9	0.4	432	176,152	1,244,847
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.4	79	17.5	34.0	45.6	7.6	7.8	3.8	1.1	449	203,534	1,533,739
African American	0.7	41	9.4	53.6	36.3	4.7	3.8	1.3	0.3	432	176,962	1,050,638
Other/unknown	0.7	52	18.3	45.3	43.7	5.3	4.4	1.3	0.2	284	39,895	289,668
Use of Nursing Facilities^d												
Entire year	7.1	332	7.6	7.6	3.4	5.6	25.4	35.9	22.1	4,388	1,436	15,327
Part year	7.2	379	8.0	5.7	5.7	8.1	25.8	35.2	19.6	4,711	1,079	9,602
None	1.0	60	15.2	43.6	41.7	6.1	5.7	2.3	0.6	391	417,876	2,849,116
Maintenance Assistance Status												
Cash	3.1	209	19.0	23.8	27.2	11.8	20.8	12.7	3.8	1,099	60,429	528,775
Medically needy	1.9	125	11.3	42.7	24.7	9.7	15.0	6.5	1.3	1,104	5,247	36,858
Poverty related	0.4	18	10.4	48.6	45.0	4.4	1.9	0.2	0.0	169	263,924	1,725,836
Other/unknown	1.1	57	10.5	41.3	41.8	7.3	6.8	2.3	0.5	536	90,791	582,576

Table ND4

Nondual Beneficiaries

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

- a. Table ND.4 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.5
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a,b,c}
 NONDUAL BENEFICIARIES, VIRGINIA, 2001

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	\$ per Rx	No. of Rx	Rx \$	No. of Rx	Rx \$
All	1.1	\$62	0.5	\$48	0.1	\$4	0.5	\$10
Age								
5 and younger	0.4	19	0.2	15	0.0	1	0.2	3
6-14	0.5	32	0.3	26	0.0	1	0.2	4
15-20	0.7	48	0.3	37	0.0	3	0.3	7
21-44	1.7	102	0.7	77	0.1	9	0.8	16
45-64	4.3	251	2.0	190	0.3	19	2.0	41
65-74	2.9	152	1.5	117	0.2	9	1.3	26
75-84	3.0	149	1.5	113	0.2	9	1.3	27
85 and older	3.8	164	1.6	116	0.3	12	1.8	34
Unknown	0.3	16	0.1	15	0.0	0	0.1	1
Basis of Eligibility^d								
Aged	3.0	150	1.5	114	0.2	9	1.3	26
Disabled	3.1	217	1.5	169	0.2	16	1.4	32
Adults	1.0	43	0.4	31	0.1	3	0.5	8
Children	0.4	20	0.2	16	0.0	1	0.2	3
Unknown	3.0	81	0.9	48	0.3	12	1.8	21
Gender								
Female	1.2	62	0.6	48	0.1	5	0.6	10
Male	0.9	62	0.4	49	0.1	4	0.4	9
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	1.4	79	0.6	60	0.1	6	0.6	13
African American	0.7	41	0.3	32	0.0	2	0.3	6
Other/unknown	0.7	52	0.4	44	0.0	2	0.3	6
Use of Nursing Facilities^e								
Entire year	7.1	332	2.8	232	0.7	31	3.5	64
Part year	7.2	379	3.0	284	0.5	26	3.5	67
None	1.0	60	0.5	46	0.1	4	0.5	9
Maintenance Assistance Status								
Cash	3.1	209	1.5	162	0.2	15	1.4	31
Medically needy	1.9	125	0.9	99	0.1	7	0.9	18
Poverty related	0.4	18	0.2	13	0.0	1	0.2	3
Other/unknown	1.1	57	0.5	44	0.1	4	0.5	9
\$ per Rx								
All		\$62		\$48		\$4		\$10
5 and younger		44		85		1		29
6-14		64		100		1		51
15-20		68		108		3		69
21-44		60		105		9		73
45-64		58		93		19		66
65-74		52		79		9		52
75-84		49		77		9		50
85 and older		44		72		12		40
Unknown		56		108		0		20
Aged		50		78		9		49
Disabled		69		115		16		73
Adults		42		77		3		52
Children		46		76		1		42
Unknown		27		52		12		44
Female		52		86		5		59
Male		69		116		4		66
Unknown		0		0		0		0
White		56		93		6		64
African American		59		102		2		56
Other/unknown		70		121		2		52
Entire year		47		83		31		44
Part year		53		94		26		47
None		59		97		4		63
Cash		68		111		15		72
Medically needy		65		106		7		60
Poverty related		40		68		1		38
Other/unknown		53		92		4		57

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

- a. Table ND.5 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Virginia, 1.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.6

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

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users							
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Generic	Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos		
																Brand-Name	Brand-Name
Anti-infective Agents	0.3	0.1	0.0	0.1	\$13	\$11	\$0	\$1	\$46	\$75	\$74	\$12	387,200	\$17,870,197	152,751	36.3 %	1,385,100
Biologicals	0.4	0.4	0.0	0.0	488	417	30	42	1197	1,084	3,444	2,773	3,095	3,703,195	1,035	0.2	7,584
Antineoplastic Agents	0.5	0.2	0.1	0.2	124	96	15	13	252	445	171	70	7,381	1,861,843	1,600	0.4	14,970
Endocrine/Metabolic Drugs	0.5	0.3	0.0	0.2	22	18	1	2	46	66	31	15	227,036	10,448,342	51,549	12.3	476,606
Cardiovascular Agents	1.1	0.5	0.1	0.6	44	30	2	11	39	62	42	19	347,008	13,428,125	31,940	7.6	305,750
Respiratory Agents	0.5	0.2	0.0	0.2	19	15	1	3	43	63	26	18	499,483	21,262,144	119,727	28.5	1,105,541
Gastrointestinal Agents	0.5	0.3	0.0	0.2	49	40	3	6	90	129	120	27	174,820	15,693,939	33,380	7.9	323,054
Genitourinary Agents	0.3	0.2	0.0	0.1	12	10	0	1	43	52	37	16	39,913	1,733,248	17,581	4.2	149,944
CNS Drugs	0.9	0.4	0.1	0.4	73	54	9	9	79	126	126	22	448,230	35,306,073	51,268	12.2	485,198
Stimulants/Anti-obesity/Anorexia	0.6	0.4	0.0	0.2	35	27	2	7	59	72	52	35	77,162	4,560,324	14,236	3.4	129,480
Miscellaneous Psychological/Neurological Agents	0.3	0.2	0.0	0.1	34	29	0	5	111	131	74	62	5,798	644,106	1,815	0.4	18,784
Analgesics and Anesthetics	0.5	0.1	0.0	0.3	23	16	2	5	44	109	72	15	340,279	15,055,508	71,127	16.9	653,549
Neuromuscular Agents	0.8	0.3	0.1	0.4	49	38	3	8	65	113	49	22	205,353	13,375,098	27,842	6.6	270,551
Nutritional Products	0.3	0.0	0.1	0.2	6	1	2	3	18	26	27	15	61,234	1,129,713	24,628	5.9	202,424
Hematological Agents	0.5	0.2	0.1	0.3	179	161	3	15	367	1,053	39	59	39,058	14,335,258	8,881	2.1	79,887
Topical Products	0.2	0.1	0.0	0.1	8	5	1	2	34	55	40	16	186,539	6,271,228	82,826	19.7	772,416
Miscellaneous Products	0.4	0.2	0.0	0.2	85	61	12	12	191	336	266	54	4,847	927,993	1,154	0.3	10,932
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	7	0	0	0	26	0	0	0	19,644	514,221	7,254	1.7	73,839
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	3,074,080	178,120,555	n.a.	n.a.	n.a.

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

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

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

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

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Virginia, 1.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, VIRGINIA, 2001

Top 10 Drug Groups	Users				Among Users		
	Total Medicaid Rx \$	No. As % of All Benes	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo	
ANTIPSYCHOTICS	\$17,745,448	17,399	4.1 %	172,201	0.6	\$161	\$103
ULCER DRUGS	13,595,080	33,255	7.9	329,940	0.4	102	41
ANTIDEPRESSANTS	13,402,491	41,560	9.9	402,561	0.5	71	33
MISC. HEMATOLOGICAL	11,863,889	1,855	0.4	18,940	0.5	1,212	626
ANTICONVULSANT	11,536,505	21,065	5.0	208,458	0.7	80	55
ANTIASTHMATIC	9,699,638	69,780	16.6	658,652	0.3	49	15
ANALGESICS - Narcotic	7,825,003	70,604	16.8	665,798	0.3	38	12
ANTIHISTAMINES	5,927,413	56,923	13.5	557,683	0.2	48	11
ANALGESICS - ANTI-INFLAMMATORY	5,638,470	44,814	10.7	435,873	0.2	53	13
ANTIDIABETIC	5,358,655	15,152	3.6	148,059	0.6	58	36
Total	102,592,592	372,407		3,598,165	n.a.	n.a.	n.a.

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

a. Table ND.7 includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2001. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE ND.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE^{a,b,c}
 NONDUAL BENEFICIARIES, VIRGINIA, 2001

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ULCER DRUGS			
	No. of Rx	Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	1,311,595	\$102,592,592	17,399	4.1 %	172,201	0.6	\$103	33,255	7.9 %	329,940	0.4	\$41
Female	838,726	56,128,509	9,370	3.8	92,892	0.6	91	22,439	9.2	222,374	0.4	42
Disabled	508,667	38,591,022	6,395	19.9	64,948	0.7	104	12,086	37.7	128,431	0.5	52
5 and younger	3,312	217,292	8	0.7	70	0.4	82	157	14.0	1,429	0.4	32
6-14	13,801	1,070,050	220	7.7	2,067	0.6	92	228	8.0	2,441	0.5	42
15-20	14,041	1,188,315	322	14.7	3,026	0.6	92	278	12.7	2,892	0.3	36
21-44	169,521	13,640,451	2,749	24.3	27,743	0.6	108	3,880	34.3	41,147	0.4	46
45-64	302,922	22,148,066	3,055	21.4	31,614	0.7	104	7,391	51.8	78,896	0.5	56
65-74	4,997	320,723	40	13.6	426	0.9	64	150	51.0	1,604	0.5	54
75-84	60	5,722	0	0.0	0	0.0	0	2	18.2	22	0.4	128
85 and older	13	403	1	33.3	2	0.5	39	0	0.0	0	0.0	0
Other Eligibles	330,035	17,534,370	2,975	1.4	27,944	0.5	61	10,353	4.9	93,943	0.3	28
5 and younger	29,778	1,058,834	29	0.0	249	0.3	32	1,134	1.9	8,817	0.2	10
6-14	54,929	3,139,329	707	1.2	6,995	0.5	65	1,084	1.8	10,922	0.2	12
15-20	50,016	2,623,289	738	2.3	7,175	0.5	70	1,434	4.5	13,105	0.2	15
21-44	126,739	6,146,885	900	1.7	7,479	0.3	41	4,176	7.8	35,000	0.3	28
45-64	12,892	799,154	67	3.2	558	0.4	49	532	25.4	4,549	0.4	39
65-74	32,916	2,273,611	273	9.3	2,903	0.7	85	1,160	39.4	12,670	0.4	44
75-84	16,225	1,094,893	155	10.0	1,534	0.7	67	638	41.3	6,842	0.4	48
85 and older	6,540	398,375	106	19.3	1,051	0.5	50	195	35.5	2,038	0.6	54
Male	472,869	46,464,083	8,029	4.6	79,309	0.7	117	10,816	6.1	107,566	0.4	41
Disabled	285,361	33,328,507	5,502	19.4	55,100	0.7	130	6,130	21.6	64,609	0.5	52
5 and younger	4,903	2,496,143	27	1.7	223	0.4	59	208	13.3	1,939	0.5	35
6-14	27,119	5,737,607	782	14.6	7,174	0.6	104	317	5.9	3,425	0.4	39
15-20	20,698	4,626,731	653	19.6	6,379	0.6	114	308	9.3	3,236	0.4	43
21-44	103,887	10,677,403	2,447	26.6	24,979	0.8	141	2,006	21.8	21,539	0.5	50
45-64	127,022	9,662,883	1,573	18.0	16,116	0.8	133	3,233	36.9	33,822	0.5	57
65-74	1,650	124,762	19	13.1	217	0.7	89	57	39.3	636	0.4	46
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	82	2,978	1	100.0	12	1.0	50	1	100.0	12	1.0	26
Other Eligibles	187,498	13,135,486	2,527	1.7	24,209	0.6	87	4,686	3.2	42,957	0.3	23
5 and younger	40,347	1,753,066	72	0.1	639	0.3	40	1,466	2.3	11,259	0.2	11
6-14	72,565	5,872,076	1,332	2.2	12,702	0.5	82	1,025	1.7	10,492	0.2	13
15-20	31,517	2,731,777	769	4.2	7,611	0.6	101	656	3.5	6,482	0.2	18
21-44	16,210	1,015,066	127	3.2	996	0.4	77	540	13.6	4,539	0.4	41
45-64	3,711	252,770	8	1.2	59	0.3	33	139	21.3	1,097	0.4	45
65-74	12,831	890,392	117	8.6	1,223	0.7	119	478	35.0	5,090	0.4	44
75-84	7,273	449,096	70	8.6	663	0.6	64	286	35.0	3,021	0.4	38
85 and older	3,044	171,243	32	11.4	316	0.7	48	96	34.2	977	0.5	48
Unknown	34	3,207	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table ND7A

Nondual Beneficiaries

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

a. Table ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2001. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BOE, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, VIRGINIA, 2001

Beneficiary Characteristics	ANTIDEPRESSANTS					MISC. HEMATOLOGICAL					ANTICONVULSANT				
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx
All	41,560	9.9 %	402,561	0.5	\$33	1,855	0.4 %	18,940	0.5	\$626	21,065	5.0 %	208,458	0.7	\$55
Female	28,702	11.8	275,796	0.5	33	1,150	0.5	11,861	0.5	43	12,402	5.1	122,446	0.7	52
Disabled	14,775	46.1	153,102	0.5	38	838	2.6	8,689	0.5	42	8,445	26.3	87,134	0.7	58
5 and younger	7	0.6	70	0.4	27	0	0.0	0	0.0	0	117	10.4	993	0.8	60
6-14	345	12.1	3,272	0.5	29	1	0.0	7	0.1	2	566	19.9	5,608	0.8	70
15-20	542	24.7	5,256	0.4	34	2	0.1	24	0.1	5	510	23.2	5,123	0.8	82
21-44	5,989	52.9	61,709	0.5	37	103	0.9	1,031	0.4	37	3,663	32.3	37,888	0.7	65
45-64	7,807	54.7	81,923	0.6	38	710	5.0	7,386	0.5	44	3,553	24.9	37,131	0.7	46
65-74	81	27.6	842	0.6	40	22	7.5	241	0.4	32	34	11.6	371	0.7	26
75-84	3	27.3	28	0.4	21	0	0.0	0	0.0	0	2	18.2	20	0.8	15
85 and older	1	33.3	2	0.5	37	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	13,926	6.6	122,682	0.4	27	312	0.1	3,172	0.5	46	3,956	1.9	35,300	0.5	35
5 and younger	66	0.1	607	0.3	14	0	0.0	0	0.0	0	169	0.3	1,522	0.5	32
6-14	1,913	3.2	18,792	0.4	27	0	0.0	0	0.0	0	618	1.0	5,896	0.6	46
15-20	2,845	9.0	26,541	0.4	29	5	0.0	49	0.2	6	761	2.4	7,068	0.6	46
21-44	7,495	14.0	61,306	0.3	26	35	0.1	296	0.3	33	1,828	3.4	15,010	0.4	28
45-64	631	30.1	5,062	0.4	30	15	0.7	131	0.3	20	153	7.3	1,294	0.5	26
65-74	531	18.0	5,827	0.6	34	117	4.0	1,214	0.5	48	271	9.2	2,926	0.7	34
75-84	290	18.8	2,970	0.6	34	92	6.0	967	0.6	48	118	7.6	1,200	0.6	29
85 and older	155	28.2	1,577	0.7	44	48	8.7	515	0.7	54	38	6.9	384	0.8	28
Male	12,858	7.3	126,765	0.5	34	705	0.4	7,079	0.5	1,603	8,663	4.9	86,012	0.7	61
Disabled	7,142	25.2	72,750	0.5	38	503	1.8	5,095	0.5	1,815	6,265	22.1	63,880	0.8	67
5 and younger	33	2.1	315	0.3	17	5	0.3	49	1.1	44,327	155	9.9	1,353	0.6	56
6-14	911	17.0	8,793	0.5	32	15	0.3	121	2.1	28,638	922	17.2	9,143	0.8	68
15-20	739	22.2	7,250	0.5	41	7	0.2	72	3.2	36,873	721	21.7	7,119	0.8	77
21-44	2,755	30.0	28,533	0.5	42	58	0.6	617	0.3	1,280	2,782	30.3	29,080	0.8	78
45-64	2,679	30.6	27,586	0.5	35	407	4.6	4,135	0.5	40	1,663	19.0	16,944	0.7	44
65-74	23	15.9	249	0.5	30	11	7.6	101	0.5	41	22	15.2	241	0.6	45
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	2	200.0	24	1.1	39	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	5,716	3.9	54,015	0.4	29	202	0.1	1,984	0.5	1,059	2,397	1.6	22,124	0.6	44
5 and younger	121	0.2	1,147	0.3	11	11	0.0	68	0.6	3,161	250	0.4	2,037	0.5	34
6-14	2,726	4.6	26,169	0.4	28	11	0.0	102	0.9	12,950	971	1.6	9,278	0.6	42
15-20	1,569	8.5	15,129	0.5	34	6	0.0	63	0.6	7,788	613	3.3	5,731	0.7	58
21-44	763	19.2	6,265	0.3	23	12	0.3	94	0.2	28	321	8.1	2,594	0.5	37
45-64	153	23.4	1,227	0.4	28	19	2.9	147	0.4	34	50	7.6	425	0.4	23
65-74	200	14.7	2,177	0.6	34	56	4.1	590	0.5	42	107	7.8	1,185	0.8	42
75-84	118	14.5	1,219	0.5	29	59	7.2	647	0.5	43	62	7.6	630	0.6	26
85 and older	66	23.5	682	0.8	41	28	10.0	273	0.6	51	23	8.2	244	0.8	26
Unknown	1	2.8	12	0.9	133	0	0.0	0	0.0	0	2	5.6	20	0.9	79

Table ND7B
 Nondual Beneficiaries

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

a. Table ND.7B includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2001. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BOE, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, VIRGINIA, 2001

Beneficiary Characteristics	ANTI-ASTHMATIC					ANALGESICS - Narcotic					ANTI-HISTAMINES				
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	69,780	16.6 %	658,652	0.3	\$15	70,604	16.8 %	665,798	0.3	\$12	56,923	13.5 %	557,683	0.2	\$11
Female	38,382	15.7	363,820	0.3	15	51,843	21.2	480,178	0.3	11	34,683	14.2	336,809	0.2	11
Disabled	13,241	41.3	139,511	0.4	23	18,969	59.1	200,519	0.4	18	9,392	29.3	101,987	0.3	14
5 and younger	471	42.0	4,564	0.3	21	60	5.4	588	0.1	1	145	12.9	1,501	0.2	6
6-14	693	24.3	7,078	0.4	25	262	9.2	2,821	0.1	3	555	19.5	5,867	0.3	14
15-20	391	17.8	3,977	0.3	19	482	21.9	5,082	0.2	5	452	20.6	4,821	0.3	14
21-44	3,836	33.9	40,539	0.4	18	7,685	67.8	80,829	0.4	18	3,410	30.1	37,135	0.3	12
45-64	7,701	53.9	81,758	0.5	25	10,339	72.4	109,717	0.4	19	4,759	33.3	51,802	0.3	16
65-74	144	49.0	1,546	0.5	32	140	47.6	1,470	0.4	9	69	23.5	741	0.3	15
75-84	5	45.5	49	0.4	31	0	0.0	0	0.0	0	1	9.1	8	0.1	7
85 and older	0	0.0	0	0.0	0	1	33.3	12	0.1	1	1	33.3	12	0.1	1
Other Eligibles	25,141	11.9	224,309	0.2	11	32,873	15.5	279,647	0.2	6	25,291	11.9	234,922	0.2	9
5 and younger	8,437	13.9	75,573	0.2	8	1,152	1.9	11,139	0.1	1	5,673	9.4	55,453	0.2	5
6-14	6,987	11.8	64,936	0.2	11	2,501	4.2	24,900	0.1	2	8,271	14.0	80,438	0.2	11
15-20	2,908	9.2	26,301	0.2	9	6,185	19.6	53,984	0.2	2	3,930	12.4	36,155	0.2	9
21-44	5,106	9.5	40,730	0.3	11	20,456	38.1	164,025	0.3	7	5,993	11.2	47,956	0.2	9
45-64	500	23.8	4,022	0.3	18	981	46.8	8,201	0.3	11	359	17.1	3,212	0.3	14
65-74	738	25.1	7,995	0.4	23	940	31.9	10,367	0.3	9	641	21.8	7,104	0.3	14
75-84	342	22.1	3,586	0.4	18	502	32.5	5,425	0.3	9	307	19.9	3,355	0.3	15
85 and older	123	22.4	1,166	0.4	19	156	28.4	1,606	0.4	9	117	21.3	1,249	0.3	13
Male	31,398	17.8	294,832	0.3	14	18,761	10.7	185,620	0.3	14	22,240	12.6	220,874	0.2	11
Disabled	7,255	25.6	74,235	0.4	22	9,398	33.2	97,005	0.4	22	4,678	16.5	49,825	0.3	15
5 and younger	679	43.5	6,479	0.3	21	109	7.0	1,114	0.1	2	266	17.0	2,740	0.2	8
6-14	1,439	26.9	14,335	0.4	20	430	8.0	4,659	0.1	4	1,058	19.8	10,921	0.2	14
15-20	557	16.7	5,658	0.4	19	548	16.5	5,763	0.2	5	439	13.2	4,659	0.3	16
21-44	1,397	15.2	14,493	0.4	19	3,648	39.7	37,669	0.4	22	1,428	15.6	15,425	0.3	15
45-64	3,136	35.8	32,767	0.5	26	4,610	52.6	47,203	0.5	25	1,464	16.7	15,809	0.3	16
65-74	47	32.4	503	0.5	31	51	35.2	573	0.3	17	22	15.2	259	0.3	13
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	2	200.0	24	1.0	35	1	100.0	12	0.1	0
Other Eligibles	24,141	16.3	220,578	0.2	11	9,362	6.3	88,611	0.2	6	17,561	11.9	171,038	0.2	9
5 and younger	11,855	19.0	106,251	0.2	9	1,490	2.4	14,490	0.1	1	6,438	10.3	62,804	0.2	5
6-14	9,352	15.7	86,538	0.3	13	2,717	4.6	27,334	0.1	2	8,561	14.4	83,165	0.2	12
15-20	1,866	10.1	17,605	0.3	11	2,180	11.8	21,431	0.1	2	1,781	9.6	17,370	0.2	11
21-44	352	8.8	2,954	0.3	15	1,995	50.1	16,003	0.4	18	314	7.9	2,706	0.2	10
45-64	105	16.1	836	0.4	21	326	49.8	2,487	0.5	26	60	9.2	537	0.2	11
65-74	345	25.3	3,589	0.5	27	343	25.1	3,655	0.3	6	208	15.2	2,333	0.3	16
75-84	207	25.4	2,180	0.5	27	234	28.7	2,469	0.3	7	156	19.1	1,668	0.3	13
85 and older	59	21.0	625	0.4	20	77	27.4	742	0.4	13	43	15.3	455	0.4	14
Unknown	2	5.6	19	0.1	1	2	5.6	16	0.1	1	1	2.8	11	0.1	1

Table ND7C
 Nondual Beneficiaries

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

a. Table ND.7C includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2001. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, VIRGINIA, 2001

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY				ANTIDIABETIC							
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Bene Mos	
All	44,814	10.7 %	435,873	0.2	\$13	15,152	3.6 %	148,059	0.6	\$36	420,391	2,874,045
Female	32,549	13.3	311,033	0.3	14	10,994	4.5	107,466	0.6	37	244,226	1,629,091
Disabled	11,899	37.1	127,505	0.3	23	7,263	22.6	74,326	0.6	39	32,081	280,310
5 and younger	32	2.9	318	0.2	2	0	0.0	0	0.0	0	1,121	7,879
6-14	185	6.5	1,973	0.2	6	28	1.0	298	0.8	46	2,851	22,120
15-20	362	16.5	3,699	0.2	6	57	2.6	515	0.7	39	2,197	17,779
21-44	4,397	38.8	47,067	0.3	16	1,375	12.1	14,271	0.6	37	11,328	100,365
45-64	6,774	47.5	72,791	0.4	28	5,664	39.7	57,729	0.6	40	14,276	129,140
65-74	147	50.0	1,634	0.3	22	138	46.9	1,501	0.6	31	294	2,907
75-84	2	18.2	23	0.2	19	0	0.0	0	0.0	0	11	95
85 and older	0	0.0	0	0.0	0	1	33.3	12	0.8	20	3	25
Other Eligibles	20,650	9.7	183,528	0.2	8	3,731	1.8	33,140	0.6	31	212,145	1,348,781
5 and younger	1,200	2.0	12,109	0.1	2	29	0.0	280	0.6	25	60,620	389,780
6-14	2,271	3.8	22,994	0.1	2	171	0.3	1,523	0.6	35	59,141	415,589
15-20	4,336	13.7	38,860	0.2	3	223	0.7	1,894	0.6	33	31,616	198,917
21-44	9,992	18.6	80,136	0.2	6	1,349	2.5	9,527	0.5	28	53,629	283,081
45-64	733	34.9	6,428	0.3	18	325	15.5	2,686	0.5	32	2,098	12,773
65-74	1,336	45.3	14,478	0.3	25	1,015	34.5	10,792	0.6	34	2,946	28,792
75-84	650	42.0	7,116	0.3	25	496	32.1	5,175	0.6	27	1,546	14,888
85 and older	132	24.0	1,407	0.4	30	123	22.4	1,263	0.7	27	549	4,961
Male	12,265	7.0	124,840	0.2	11	4,158	2.4	40,593	0.6	35	176,129	1,244,683
Disabled	5,033	17.8	53,402	0.3	18	2,960	10.4	29,412	0.6	37	28,331	236,274
5 and younger	41	2.6	441	0.2	3	5	0.3	55	0.2	10	1,561	10,866
6-14	258	4.8	2,715	0.2	4	52	1.0	496	0.8	45	5,356	41,742
15-20	383	11.5	3,993	0.2	5	53	1.6	546	0.8	48	3,326	27,258
21-44	1,761	19.2	18,690	0.2	14	649	7.1	6,639	0.6	35	9,182	81,359
45-64	2,546	29.1	27,076	0.4	25	2,169	24.8	21,329	0.6	36	8,759	73,669
65-74	43	29.7	475	0.3	20	32	22.1	347	0.7	46	145	1,362
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	6
85 and older	1	100.0	12	0.5	24	0	0.0	0	0.0	0	1	12
Other Eligibles	7,232	4.9	71,438	0.2	6	1,198	0.8	11,181	0.6	32	147,798	1,008,409
5 and younger	1,464	2.3	14,769	0.1	2	35	0.1	297	0.6	26	62,529	402,520
6-14	1,960	3.3	20,242	0.1	2	154	0.3	1,395	0.7	37	59,644	422,141
15-20	1,864	10.1	18,431	0.1	2	109	0.6	862	0.7	36	18,527	134,302
21-44	913	22.9	7,406	0.2	14	162	4.1	1,196	0.6	37	3,983	21,882
45-64	217	33.2	1,764	0.3	19	97	14.8	770	0.6	40	654	3,879
65-74	467	34.2	5,061	0.3	20	356	26.1	3,672	0.6	33	1,364	13,220
75-84	261	32.0	2,819	0.3	19	227	27.8	2,417	0.6	25	816	7,803
85 and older	86	30.6	946	0.4	21	58	20.6	572	0.7	22	281	2,662
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	36	271

Table ND7D

Nondual Beneficiaries

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

- a. Table ND.7D includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2001. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, VIRGINIA, 2001

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
All	\$332	7.1	1,436	15,327
Age				
0-64	371	7.5	820	9,077
65-74	294	6.7	193	2,108
75-84	288	6.7	203	1,980
85 and older	244	6.1	220	2,162
Unknown	0	0.0	0	0
Gender				
Female	329	7.2	858	9,183
Male	336	7.0	578	6,144
Unknown	0	0.0	0	0
Race				
White	336	7.3	822	8,694
African American	323	6.9	539	5,805
Other/unknown	353	7	75	828
Basis of Eligibility^c				
Aged	277	6.5	592	5,982
Disabled	363	7.4	834	9,261
Adults	0	0.0	0	0
Children	787	13.5	10	84
Unknown	0	0.0	0	0

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

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2001 Medicaid enrollment. A total of 1,079 beneficiaries who were in nursing facilities for part of their enrollment and their 9,602 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

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

TABLE ND.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 NONDUAL BENEFICIARIES, VIRGINIA, 2001

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users								
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total # of Rx	Total Rx \$	No.	As % of All-Year NF Residents						
												No.	Mos					
Anti-infective Agents	0.5	0.3	0.0	0.2	\$29	\$25	\$1	\$3	\$58	\$82	\$71	\$17	4,912	\$284,207	891	62.0	%	9,736
Biologicals	0.7	0.7	0.0	0.0	988	988	0	0	1476	1,476	0	0	85	125,439	12	0.8		127
Antineoplastic Agents	0.6	0.2	0.3	0.1	113	63	41	9	202	399	146	75	533	107,491	98	6.8		951
Endocrine/Metabolic Drugs	1.2	0.6	0.1	0.5	45	37	2	6	38	57	29	12	6,797	255,468	533	37.1		5,725
Cardiovascular Agents	2.0	0.7	0.2	1.1	63	36	7	20	31	50	36	18	17,854	554,599	833	58.0		8,865
Respiratory Agents	0.9	0.4	0.1	0.5	36	21	2	13	38	57	28	26	6,917	265,932	678	47.2		7,444
Gastrointestinal Agents	1.3	0.5	0.1	0.7	67	47	4	15	53	102	68	21	11,162	594,237	823	57.3		8,919
Genitourinary Agents	0.7	0.4	0.0	0.2	32	26	1	5	46	61	29	21	1,916	88,404	247	17.2		2,772
CNS Drugs	1.9	0.9	0.1	0.9	108	81	13	14	57	91	87	16	19,772	1,123,931	964	67.1		10,432
Stimulants/Anti-obesity/Anorexia	1.0	0.1	0.1	0.9	21	4	1	16	22	74	20	18	251	5,436	24	1.7		255
Miscellaneous Psychological/Neurological Agents	0.9	0.8	0.0	0.0	99	98	0	1	112	117	0	20	803	90,283	86	6.0		914
Analgesics and Anesthetics	1.1	0.5	0.1	0.5	45	36	4	6	42	78	39	11	7,869	328,288	667	46.4		7,275
Neuromuscular Agents	1.7	0.5	0.3	0.9	85	54	9	22	49	99	31	25	12,698	625,989	664	46.2		7,343
Nutritional Products	0.9	0.0	0.2	0.6	16	0	5	11	19	11	26	17	4,101	77,978	455	31.7		4,816
Hematological Agents	1.2	0.3	0.3	0.6	56	43	4	8	46	144	14	13	4,934	228,737	385	26.8		4,117
Topical Products	0.6	0.3	0.1	0.2	26	19	3	4	44	67	45	16	5,588	244,476	867	60.4		9,513
Miscellaneous Products	0.3	0.0	0.0	0.3	8	3	0	6	26	87	0	20	272	7,074	83	5.8		844
Unknown Therapeutic Category	0.8	0.0	0.0	0.0	24	0	0	0	29	0	0	0	2,635	76,807	282	19.6		3,158
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	109,099	5,084,776	n.a.	n.a.		n.a.

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

a. Table ND.9 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,079 beneficiaries who were in nursing facilities for part of their enrollment and their 9,602 benefit months were excluded from the analysis.

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

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

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

e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

In Virginia, 1.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

TABLE ND.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NONDUAL BENEFICIARIES, VIRGINIA, 2001

Top 10 Drug Groups in Nursing Facilities	Users				Among Users		
	Total Medicaid Rx \$	No. of Users	As % of All-Year NF Residents	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ULCER DRUGS	\$510,055	732	51.0 %	7,919	0.8	\$81	\$64
ANTICONVULSANT	502,964	672	46.8	7,458	1.3	52	67
ANTIDEPRESSANTS	486,940	791	55.1	8,666	0.9	63	56
ANTIPTYCHOTICS	478,698	528	36.8	5,727	0.8	104	84
DERMATOLOGICAL	225,463	2,358	164.2	26,411	0.3	31	9
ANTIDIABETIC	192,209	531	37.0	5,710	0.8	40	34
ANALGESICS - Narcotic	182,931	654	45.5	7,132	0.7	37	26
ANTIHYPERTENSIVE	178,012	522	36.4	5,631	0.9	37	32
ANTIASTHMATIC	168,483	582	40.5	6,196	0.6	42	27
CALCIUM BLOCKERS	136,494	275	19.2	3,067	0.9	47	45
Total	3,062,249	7,645		83,917	n.a.	n.a.	n.a.

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

a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,079 beneficiaries who were in nursing facilities for part of their enrollment and their 9,602 benefit months were excluded from the analysis.

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

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

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

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

TABLE ND.10A

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d} NONDUAL BENEFICIARIES, VIRGINIA, 2001

Beneficiary Characteristics	All Top 10 Drug Groups					ULCER DRUGS					ANTICONVULSANT						
	No. of Rx	Rx \$	No. of Users	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 \$	No. of Users	Users as % of All-Year Residents	No. of Bene Mos among NF	Mean No. of Rx	Mean Rx \$
All	56,994	\$3,062,249	732	51.0 %	7,919	0.8	\$64	672	46.8 %	7,458	1.3	\$67					
Female	34,057	1,768,672	432	50.3	4,706	0.8	64	385	44.9	4,221	1.3	65					
Disabled	20,191	1,084,554	230	51.8	2,571	0.8	66	280	63.1	3,125	1.3	71					
64 or younger	19,526	1,054,288	226	52.8	2,523	0.8	66	277	64.7	3,091	1.3	72					
65-74	608	28,536	4	28.6	48	0.8	64	2	14.3	22	1.4	39					
75-84	34	830	0	0.0	0	0.0	0	1	100.0	12	1.2	21					
85 and older	23	900	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Other Eligibles	13,866	684,118	202	48.8	2,135	0.8	63	105	25.4	1,096	1.2	47					
64 or younger	576	24,053	6	60.0	64	0.9	68	5	50.0	59	4.1	68					
65-74	4,546	233,116	57	52.8	636	0.8	63	50	46.3	558	1.1	47					
75-84	4,737	237,927	71	49.0	730	0.8	68	35	24.1	342	0.9	42					
85 and older	4,007	189,022	68	45.0	705	0.9	56	15	9.9	137	1.1	48					
Male	22,937	1,293,577	300	51.9	3,213	0.8	64	287	49.7	3,237	1.3	71					
Disabled	16,726	974,185	199	51.0	2,196	0.8	65	246	63.1	2,797	1.3	75					
64 or younger	16,374	952,579	196	51.6	2,160	0.8	66	241	63.4	2,744	1.3	75					
65-74	272	18,752	2	22.2	24	1.0	49	5	55.6	53	1.2	76					
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	80	2,854	1	100.0	12	1.0	26	0	0.0	0	0.0	0					
Other Eligibles	6,211	319,392	101	53.7	1,017	0.8	63	41	21.8	440	1.1	40					
64 or younger	52	2,655	4	200.0	26	1.5	83	0	0.0	0	0.0	0					
65-74	2,515	145,029	33	53.2	337	0.8	69	16	25.8	187	1.2	52					
75-84	1,750	88,772	34	59.6	351	0.7	55	14	24.6	130	1.0	31					
85 and older	1,894	82,936	30	44.8	303	0.8	64	11	16.4	123	1.2	33					
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					

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

a. Table ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,079 beneficiaries who were in nursing facilities for part of their enrollment and their 9,602 benefit months were excluded from the analysis.

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

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

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

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

TABLE ND.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a,b,c,d}
 NONDUAL BENEFICIARIES, VIRGINIA, 2001

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIPSYCHOTICS					DERMATOLOGICAL				
	Users as %			Mean		Users as %			Mean		Users as %			Mean	
	No. of Users	No. of Bene Mos among Users	No. of Bene NF Residents	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene Mos among Users	No. of Bene NF Residents	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene Mos among Users	No. of Bene NF Residents	Mean No. of Rx	Mean Rx \$
All	791	55.1 %	8,666	0.9	\$56	528	36.8 %	5,727	0.8	\$84	2,358	164.2 %	26,411	0.3	\$9
Female	502	58.5	5,514	0.9	57	322	37.5	3,538	0.8	74	1,381	161.0	15,551	0.3	6
Disabled	277	62.4	3,134	0.9	58	167	37.6	1,916	0.8	79	780	175.7	8,979	0.3	7
64 or younger	266	62.1	3,002	0.9	57	157	36.7	1,796	0.8	81	750	175.2	8,621	0.3	7
65-74	10	71.4	120	1.1	78	10	71.4	120	0.8	52	22	157.1	262	0.2	4
75-84	1	100.0	12	0.6	37	0	0.0	0	0.0	0	6	600.0	72	0.2	2
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	200.0	24	0.5	27
Other Eligibles	225	54.3	2,380	0.9	54	155	37.4	1,622	0.7	68	601	145.2	6,572	0.2	6
64 or younger	3	30.0	36	1.0	74	1	10.0	12	1.7	244	15	150.0	171	0.2	7
65-74	60	55.6	684	0.9	57	51	47.2	569	0.8	77	153	141.7	1,773	0.2	5
75-84	83	57.2	860	0.8	52	50	34.5	514	0.7	66	210	144.8	2,256	0.2	5
85 and older	79	52.3	800	0.9	54	53	35.1	527	0.7	57	223	147.7	2,372	0.3	6
Male	289	50.0	3,152	0.9	56	206	35.6	2,189	0.8	99	977	169.0	10,860	0.3	12
Disabled	184	47.2	2,047	0.9	58	128	32.8	1,417	0.8	105	658	168.7	7,437	0.3	14
64 or younger	181	47.6	2,022	0.9	59	123	32.4	1,364	0.8	106	644	169.5	7,269	0.3	14
65-74	1	11.1	1	1.0	120	4	44.4	41	1.4	114	12	133.3	144	0.3	4
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	2	200.0	24	1.1	39	1	100.0	12	1.0	50	2	200.0	24	0.2	7
Other Eligibles	105	55.9	1,105	0.9	51	78	41.5	772	0.8	88	319	169.7	3,423	0.3	7
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	12	0.1	3
65-74	41	66.1	440	0.8	56	28	45.2	289	0.8	113	101	162.9	1,057	0.3	14
75-84	29	50.9	289	0.8	42	30	52.6	284	0.9	82	103	180.7	1,116	0.2	5
85 and older	35	52.2	376	1.0	52	20	29.9	199	0.9	62	114	170.1	1,238	0.2	4
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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

- a. Table ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,079 beneficiaries who were in nursing facilities for part of their enrollment and their 9,602 benefit months were excluded from the analysis.
 - b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 - c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - d. The top 10 drug groups were determined based on total 2001 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, VIRGINIA, 2001

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - Narcotic					ANTIHYPERTENSIVE					
	Users as %					Users as %					Users as %					
	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	No. of Rx	Mean Rx \$
All	531	37.0 %	0.8	\$34	0.8	654	45.5 %	0.7	\$26	0.7	522	36.4 %	0.9	\$32	0.9	\$32
Female	331	38.6	0.9	34	0.9	412	48.0	0.7	25	0.7	308	35.9	0.9	30	0.9	30
Disabled	160	36.0	0.9	34	0.9	233	52.5	0.7	28	0.7	139	31.3	0.9	33	0.9	33
64 or younger	157	36.7	0.9	35	0.9	228	53.3	0.7	29	0.7	135	31.5	0.9	34	0.9	34
65-74	2	14.3	0.6	15	0.6	4	28.6	1.8	7	1.8	4	28.6	1.0	16	1.0	16
75-84	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
85 and older	1	100.0	0.8	20	0.8	1	100.0	0.1	1	0.1	0	0.0	0.0	0	0.0	0
Other Eligibles	171	41.3	0.8	33	0.8	179	43.2	0.6	20	0.6	169	40.8	0.8	27	0.8	27
64 or younger	2	20.0	0.5	25	0.5	2	20.0	1.9	46	1.9	2	20.0	0.6	19	0.6	19
65-74	61	56.5	0.8	32	0.8	47	43.5	0.7	25	0.7	51	47.2	0.9	30	0.9	30
75-84	66	45.5	0.8	29	0.8	72	49.7	0.6	23	0.6	67	46.2	0.9	29	0.9	29
85 and older	42	27.8	0.9	41	0.9	58	38.4	0.4	11	0.4	49	32.5	0.8	23	0.8	23
Male	200	34.6	0.8	34	0.8	242	41.9	0.7	27	0.7	214	37.0	0.9	34	0.9	34
Disabled	120	30.8	0.8	39	0.8	175	44.9	0.7	31	0.7	125	32.1	0.9	36	0.9	36
64 or younger	118	31.1	0.8	39	0.8	170	44.7	0.7	29	0.7	122	32.1	0.9	36	0.9	36
65-74	2	22.2	1.0	59	1.0	3	33.3	0.7	147	0.7	3	33.3	1.0	55	1.0	55
75-84	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
85 and older	0	0.0	0.0	0	0.0	2	200.0	1.0	35	1.0	0	0.0	0.0	0	0.0	0
Other Eligibles	80	42.6	0.8	26	0.8	67	35.6	0.6	15	0.6	89	47.3	0.8	31	0.8	31
64 or younger	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0
65-74	34	54.8	0.8	32	0.8	23	37.1	0.6	14	0.6	40	64.5	0.9	31	0.9	31
75-84	28	49.1	0.7	18	0.7	16	28.1	0.6	23	0.6	24	42.1	0.7	27	0.7	27
85 and older	18	26.9	0.9	25	0.9	28	41.8	0.5	10	0.5	25	37.3	0.9	34	0.9	34
Unknown	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0

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

- a. Table ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,079 beneficiaries who were in nursing facilities for part of their enrollment and their 9,602 benefit months were excluded from the analysis.
 - b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2001. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 - c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - d. The top 10 drug groups were determined based on total 2001 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, VIRGINIA, 2001

Beneficiary Characteristics	ANTI-ASTHMATIC					CALCIUM BLOCKERS						
	Users as %		Users as %		Mean Rx \$	Users as %		Users as %		Mean Rx \$		
	No. of Users	No. of Bene Mos among Users	No. of Bene Mos among Users	No. of Bene Mos among Users		No. of Rx	Mean No. of Rx	No. of Rx	Mean No. of Rx			
All	582	40.5 %	6,196	0.6	\$27	275	19.2 %	3,067	0.9	\$45	1,436	15,327
Female	366	42.7	3,921	0.6	27	178	20.7	1,965	0.9	43	858	9,183
Disabled	205	46.2	2,279	0.7	31	77	17.3	863	0.9	45	444	4,980
64 or younger	199	46.5	2,207	0.7	30	76	17.8	851	0.9	45	428	4,790
65-74	6	42.9	72	1.4	85	1	7.1	12	1.0	35	14	166
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	12
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	12
Other Eligibles	161	38.9	1,642	0.4	21	101	24.4	1,102	1.0	41	414	4,203
64 or younger	13	130.0	145	0.7	47	0	0.0	0	0.0	0	10	95
65-74	42	38.9	455	0.4	15	34	31.5	390	1.0	42	108	1,209
75-84	57	39.3	567	0.5	19	34	23.4	376	1.0	43	145	1,409
85 and older	49	32.5	475	0.4	19	33	21.9	336	1.0	38	151	1,490
Male	216	37.4	2,275	0.7	28	97	16.8	1,102	0.9	48	578	6,144
Disabled	156	40.0	1,687	0.8	32	60	15.4	692	0.9	49	390	4,281
64 or younger	153	40.3	1,665	0.8	32	58	15.3	668	0.9	50	380	4,179
65-74	3	33.3	22	0.4	39	2	22.2	24	1.0	25	9	90
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	12
Other Eligibles	60	31.9	588	0.4	17	37	19.7	410	1.0	46	188	1,863
64 or younger	2	100.0	24	0.5	19	0	0.0	0	0.0	0	2	13
65-74	21	33.9	203	0.4	15	14	22.6	159	1.0	45	62	643
75-84	15	26.3	148	0.5	20	10	17.5	116	0.8	55	57	559
85 and older	22	32.8	213	0.3	16	13	19.4	135	1.0	38	67	648
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

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

a. Table ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2001. A total of 1,079 beneficiaries who were in nursing facilities for part of their enrollment and their 9,602 benefit months were excluded from the analysis.

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

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

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

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

TABLE ND.11
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG NONDUALS
 BY BENEFICIARY CHARACTERISTIC^{a,b}
 VIRGINIA, 2001

Beneficiary Characteristics	No. of Benes with at Least One Part D Excl Rx	% Benes with at Least One Part D Excl Rx	No. of Part D Excl Rx per Bene	Total No. Part D Excl Rx	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx \$ as % of All Rx \$	Total No. of Benes
All	84,817	20.2 %	0.9	370,865	\$7,244,296	\$20	4.1 %	420,391
Age								
5 and younger	22,900	18.2	0.3	43,443	5	640,855	4.1	125,831
6-14	17,921	14.1	0.3	39,414	7	839,350	3.0	126,992
15-20	9,135	16.4	0.4	23,329	14	792,052	4.4	55,666
21-44	18,720	24.0	1.3	103,519	27	2,140,708	4.3	78,122
45-64	12,537	48.6	4.7	120,173	91	2,347,722	4.3	25,787
65-74	2,005	42.2	4.0	19,030	56	267,178	3.8	4,749
75-84	1,092	46.0	5.2	12,235	57	135,339	4.0	2,374
85 and older	504	60.4	11.7	9,717	97	81,025	6.5	834
Unknown	3	8.3	0.1	5	2	67	1.5	36
Basis of Eligibility^c								
Aged	3,374	44.8	5.1	38,623	60	450,998	4.1	7,537
Disabled	24,041	39.8	3.5	209,639	71	4,267,284	3.8	60,412
Adults	12,553	17.6	0.6	39,609	11	782,635	4.9	71,436
Children	44,848	16.0	0.3	82,980	6	1,743,259	4.5	281,002
Unknown	1	25.0	3.5	14	30	120	5.7	4
Gender								
Female	51,869	21.2	1.0	239,823	20	4,857,045	4.8	244,239
Male	32,948	18.7	0.7	131,042	14	2,387,251	3.1	176,152
Unknown	0	0.0	0.0	0	0	0	0.0	0
Race								
White	54,942	27.0	1.3	266,911	27	5,467,799	4.5	203,534
African American	21,452	12.1	0.4	79,414	8	1,332,264	3.1	176,962
Other/unknown	8,423	21.1	0.6	24,540	11	444,233	3.0	39,895
Use of Nursing Facilities^d								
Entire year	1,315	91.6	33.0	47,452	296	424,525	8.3	1,436
Part year	964	89.3	17.4	18,790	196	211,253	5.8	1,079
None	82,538	19.8	0.7	304,623	16	6,608,518	3.9	417,876
Maintenance Assistance Status								
Cash	24,218	40.1	3.3	201,131	69	4,155,037	3.8	60,429
Medically needy	1,370	26.1	1.6	8,402	25	131,826	2.9	5,247
Poverty related	41,803	15.8	0.3	77,242	6	1,577,742	5.2	263,924
Other/unknown	17,426	19.2	0.9	84,090	15	1,379,691	4.2	90,791

Table ND11

Nondual Beneficiaries

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

- a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2001.
- b. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.12
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS AMONG NONDUALS PER BENEFIT MONTH
 BY BENEFICIARY CHARACTERISTIC^{a,b}
 VIRGINIA, 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	\$3	\$20	\$0	\$1	2,874,045
Age						
5 and younger	0.1	1	15	0	0	811,045
6-14	0.0	1	21	0	0	901,592
15-20	0.1	2	34	0	0	378,256
21-44	0.2	4	21	0	2	486,687
45-64	0.5	11	20	0	4	219,461
65-74	0.4	6	14	0	1	46,281
75-84	0.5	6	11	0	1	22,792
85 and older	1.3	11	8	0	1	7,660
Unknown	0.0	0	13	0	0	271
Basis of Eligibility^c						
Aged	0.5	6	12	0	1	72,493
Disabled	0.4	8	20	0	4	516,584
Adults	0.1	2	20	0	1	375,963
Children	0.0	1	21	0	0	1,908,979
Unknown	0.5	5	9	0	4	26
Gender						
Female	0.1	3	20	0	1	1,629,198
Male	0.1	2	18	0	1	1,244,847
Unknown	0.0	0	0	0	0	0
Race						
White	0.2	4	20	0	1	1,533,739
African American	0.1	1	17	0	0	1,050,638
Other/unknown	0.1	2	18	0	0	289,668
Use of Nursing Facilities^d						
Entire year	3.1	28	9	0	5	15,327
Part year	2.0	22	11	0	5	9,602
None	0.1	2	22	0	1	2,849,116
Maintenance Assistance Status						
Cash	0.4	8	21	0	3	528,775
Medically needy	0.2	4	16	0	1	36,858
Poverty related	0.0	1	20	0	0	1,725,836
Other/unknown	0.1	2	16	0	1	582,576

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

- a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2001.
- b. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

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

TABLE ND.13
 USE OF AND REIMBURSEMENT FOR PART D EXCLUDED DRUGS FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
 VIRGINIA, 2001

Drug Category	No. Users	Rx \$ per User	Total Rx \$	Rx \$ as % of All Part D Excl Rx \$	Total No. Rx.	\$ per Rx	No. Rx as % of All Part D Excl Rx
All	107,926	\$67	\$7,244,296	100.0 %	370,865	\$20	100.0 %
Anorexia or weight loss/gain	15	66	986	0.0	32	31	0.0
Fertility drugs	7	230	1,610	0.0	16	101	0.0
Drugs for cosmetic purposes	28	14	379	0.0	30	13	0.0
Cough and cold medications	58,142	47	2,705,655	37.3	115,662	23	31.2
Vitamins and minerals	9,073	74	673,399	9.3	35,554	19	9.6
Non-prescription drugs	18,492	37	683,361	9.4	92,795	7	25.0
Barbiturates	1,184	47	56,233	0.8	8,783	6	2.4
Benzodiazepines	17,000	132	2,241,476	30.9	104,767	21	28.2
Other Part D Excl Rx Drugs	3,985	221	881,197	12.2	13,226	67	3.6

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

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all non-dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2001. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2001. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table ND11.

b. Includes OTC drugs as well as prescription drugs.

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

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

APPENDIX TABLE A.1

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

Beneficiary Characteristics	No. of Benefes					No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	551,407	8,540	80,754	88,264	373,845	4	4,847,908	88,290	823,314	650,338	3,285,934	32
Age												
5 and younger	163,490	0	3,268	0	160,222	0	1,381,602	0	29,475	0	1,352,127	0
6-14	171,898	1	12,088	640	159,169	0	1,585,541	3	122,676	5,352	1,457,510	0
15-20	74,112	1	8,004	11,849	54,258	0	634,126	6	80,798	78,282	475,040	0
21-44	98,741	0	26,561	72,022	155	3	811,426	0	274,841	535,635	929	21
45-64	33,881	39	30,094	3,746	1	1	338,676	244	307,405	31,013	3	11
65-74	5,717	4,992	718	7	0	0	60,790	52,805	7,929	56	0	0
75-84	2,647	2,630	17	0	0	0	27,035	26,883	152	0	0	0
85 and older	882	877	4	0	1	0	8,391	8,349	38	0	4	0
Unknown	39	0	0	0	39	0	321	0	0	0	321	0
Gender												
Female	319,692	5,804	43,370	82,737	187,777	4	2,773,635	60,269	450,459	612,833	1,650,042	32
Male	231,715	2,736	37,384	5,527	186,068	0	2,074,273	28,021	372,855	37,505	1,635,892	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	234,068	3,144	41,807	39,294	149,822	1	2,002,475	32,081	427,376	268,626	1,274,381	11
African American	273,118	1,893	36,235	45,333	189,655	2	2,480,494	19,190	368,801	359,006	1,733,488	9
Other/unknown	44,221	3,503	2,712	3,637	34,368	1	364,939	37,019	27,137	22,706	278,065	12
Use of Nursing Facilities^c												
Entire year	1,436	592	834	0	10	0	15,330	5,982	9,263	0	85	0
Part year	1,090	311	760	6	13	0	10,491	2,857	7,478	49	107	0
None	548,881	7,637	79,160	88,258	373,822	4	4,822,087	79,451	806,573	650,289	3,285,742	32
Maintenance Assistance Status												
Cash	85,397	5,771	74,294	1,435	3,897	0	884,613	63,500	775,783	11,284	34,046	0
Medically needy	5,329	1,694	3,123	68	444	0	38,266	15,748	19,286	284	2,948	0
Poverty related	340,993	187	1,086	32,729	306,988	3	2,956,108	1,407	6,956	191,795	2,755,919	31
Other/unknown	119,688	888	2,251	54,032	62,516	1	968,921	7,635	21,289	446,975	493,021	1
Managed Care Status												
FFS all year	238,994	5,155	38,766	38,984	156,086	3	1,788,176	49,494	362,307	219,521	1,156,830	24
FFS part year, with Rx claims	96,756	2,088	16,121	20,405	58,142	0	1,005,031	24,163	179,172	187,673	614,023	0
FFS part year, no Rx claims	84,641	294	5,525	12,047	66,774	1	806,455	3,116	55,489	103,098	644,744	8
MC all year, with Rx claims	50	1	7	0	42	0	286	2	64	0	220	0
MC all year, no Rx claims	130,966	1,002	20,335	16,828	92,801	0	1,247,960	11,515	226,282	140,046	870,117	0

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

a. Table A.1 includes the beneficiaries represented by Cell J of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

APPENDIX TABLE A.2
MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
NONDUAL BENEFICIARIES, VIRGINIA, 2001

	Bene Mos in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
All	551,407	4,847,908	420,391	2,874,045	0	1,973,863
FFS all year	238,994	1,788,176	238,994	1,788,176	0	0
FFS part year, with Rx claims	96,756	1,005,031	96,756	711,672	0	293,359
FFS part year, with no Rx claims	84,641	806,455	84,641	374,197	0	432,258
MC all year, with Rx claims	50	286	0	0	0	286
MC all year, with no Rx claims	130,966	1,247,960	0	0	0	1,247,960

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

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

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