

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2002 UNITED STATES

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TABLE 1
OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION
UNITED STATES, 2002

Inclusion Criteria (2002)	No. of Dual and Non-dual Eligible Benes (Cell)	No. of Dual Eligible Benes (Cell) ^g	No. of Non-dual Eligible Benes (Cell)
1. Benes who were eligible for Medicaid during at least one month ^a	53,249,193 (A)	8,028,524 (E)	45,220,669 (I)
2. Benes who had Medicaid pharmacy benefits during at least one month ^b	50,193,157 (B)	6,696,061 (F)	43,497,096 (J)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month ^{c, d, e}	38,157,187 (C)	6,185,849 (G)	31,971,338 (K)
4. Benes who were all-year nursing facility residents ^f	946,066 (D)	869,744 (H)	76,322 (L)

Source: Data for this table are from the MAX 2002 file for the U.S., released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. MAX data element "Eligible Months Count" was used to determine an individual's Medicaid eligibility. All individuals who had a value greater than zero were considered as beneficiaries and counted in Cell A.
- b. Counts in Cell B were obtained by excluding from Cell A beneficiaries who never had pharmacy benefit coverage during their Medicaid enrollment in 2002 (based on MAX data element "Eligible Restricted Benefits Flag").
- c. Cell C represents the study population for Tables 2 through 7D. Cell C was obtained by excluding from Cell B beneficiaries who were under MC plans during all months of Medicaid eligibility in 2002, because the MAX files would not include separate prescription drug claims for those beneficiaries. MC plans include HMOs, PHPs, or other MC organizations that provided pharmacy benefits under capitation arrangements. Beneficiaries included are those who were in fee-for-service, PCCM, or PHP plans in selected states. Beneficiaries in PHPs were included if they were in one of 19 states where no PHP in the state provided a pharmacy benefit (see footnote e). For all other states, beneficiaries in PHPs were excluded. For example, if a beneficiary was under fee-for-service, PCCM, or PHPs in one of the 19 states for three months of the year but enrolled in an MC plan for the remaining nine months, only the three months were counted toward the number of benefit months associated with the beneficiary. Therefore, benefit months included represent the benefit months with fee-for-service pharmacy benefits.
- d. The total Medicaid pharmacy reimbursement for the U.S. in 2002 was \$28,817,241,020, of which \$1,752,828,932 was excluded from our analysis because those claims were made for beneficiaries who were outside the study population or took place during months that were excluded from the analysis.
- e. Enrollees in prepaid health plans (PHP) that did not provide a pharmacy benefit are treated as having fee-for-service pharmacy benefit coverage. There were 19 states in 2002 that had PHPs that did not include a pharmacy benefit: AL, AR, CA, CO, FL, GA, IA, KY, MA, MI, NY, OR, PA, SD, TN, TX, UT, WA, and WI. This list was constructed from the CMS 2002 Medicaid Managed Care Enrollment Report [<http://www.cms.hhs.gov/MedicaidDataSourcesGenInfo/Downloads/mmcer02.pdf>] and by checking PHP pharmacy coverage as necessary through state and PHP web sites.
- f. Cell H represents the study population for Tables D.8 through D.10D. Cell L represents the study population for Tables ND.8 through ND.10D. All-year nursing facility residents are the beneficiaries who resided in nursing facilities throughout their enrollment in 2002. These beneficiaries were identified by comparing the number of months during which the MAX files contained at least one claim from nursing facilities to the number of Medicaid eligible months. If the former is greater than or equal to the latter, the beneficiary was considered an all-year resident. If the former is less than the latter but not equal to zero, the beneficiary was considered a part-year resident. Part-year residents were excluded from the analysis because they are likely to be short-term residents and the level and pattern of their pharmacy benefit use may differ substantially from longer-term residents. The number of part-year residents and their benefit months are presented in footnotes to Tables D.8 through D.10D and ND.8 through ND.10D. Residents of mental hospitals for the aged, inpatient psychiatric facilities for individuals under age 21, or intermediate care facilities for the mentally retarded were excluded from the analysis.
- g. Pharmacy benefit use and reimbursement among full dual eligible beneficiaries are presented in Tables D.2 through D.7D, Tables D.11 through D.13, and Supplemental Tables 1 through 1E corresponding to the sample of beneficiaries in Cell G. To determine Medicaid-Medicare dual eligibility status, two MAX data elements ("Eligible Medicare Crossover Code -- Annual New Values" and "Eligible Restricted Benefits Flag") were used in combination. Pharmacy benefit use and reimbursement among non-dual eligibles are presented in Tables ND.2 through ND.7D and Tables ND.11 through ND.13, corresponding to the sample of beneficiaries in Cell K.
- Beneficiaries represented in Cell G, the dual study population, include all dual eligible beneficiaries who had a fee-for-service pharmacy benefit at least during one month in 2002. All benefit months of such dual eligible beneficiaries, of which 2.2 percent were restricted benefit months without a pharmacy benefit in the U.S., were used in the dual tables.
- Characteristics of non-dual eligible beneficiaries represented by Cell J are shown in Appendix Table A.1 and characteristics of non-dual eligible beneficiaries and their benefit months included in Cell J but excluded from Cell K are shown in Appendix Table A.2. Characteristics of dual eligible beneficiaries represented by Cell F are shown in Appendix Table A.3, and characteristics of dual eligible beneficiaries and their benefit months included in Cell F but excluded from Cell G are shown in Appendix Table A.4.

Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; HMO = health maintenance organization; MAX = Medicaid Analytic Extract; MC = managed care; PCCM = primary care case management; PHP = prepaid health plan.

TABLE 2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 UNITED STATES, 2002

Beneficiary Characteristics	No. of Benes										Other/ Unknown	
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults		Children
All	38,157,187	3,628,929	6,709,504	9,861,439	17,949,132	8,183	297,997,693	36,157,764	67,567,956	64,738,681	129,478,637	54,655
Age												
5 and younger	7,639,081	31	187,804	4,403	7,446,842	1	52,628,867	192	1,733,917	20,766	50,873,990	2
6-14	7,761,975	23	496,419	6,029	7,259,501	3	60,520,859	112	5,043,022	30,671	55,447,034	20
15-20	4,429,423	40	364,739	1,000,216	3,064,235	193	32,513,977	300	3,632,035	6,660,540	22,220,119	983
21-44	10,020,218	334	2,186,025	7,778,463	52,548	2,848	73,729,720	2,392	22,003,809	51,479,439	226,115	17,965
45-64	3,886,186	2,944	2,822,734	1,054,630	826	5,052	34,721,518	20,636	28,183,638	6,477,861	4,416	34,967
65-74	1,739,287	1,284,871	447,225	7,072	36	83	17,731,180	12,851,304	4,841,663	37,294	219	700
75-84	1,507,298	1,359,841	146,537	911	6	3	15,426,320	13,860,629	1,560,069	5,547	57	18
85 and older	1,038,806	980,349	57,999	363	95	0	9,992,762	9,420,510	569,683	2,012	557	0
Unknown	134,913	496	22	9,352	125,043	0	732,490	1,689	120	24,551	706,130	0
Gender												
Female	22,916,991	2,589,705	3,506,686	7,856,522	8,955,913	8,165	179,786,537	26,079,982	35,853,701	53,152,676	64,645,703	54,475
Male	15,137,347	1,039,011	3,202,700	2,000,563	8,895,055	18	117,571,754	10,076,531	31,713,349	11,575,221	64,206,473	180
Unknown	102,849	213	118	4,354	98,164	0	639,402	1,251	906	10,784	626,461	0
Race												
White	17,636,404	2,071,211	3,583,275	4,031,565	7,946,259	4,094	141,392,469	20,104,503	35,804,222	26,305,742	59,150,024	27,978
African American	9,004,835	565,757	1,616,744	1,941,951	4,879,283	1,100	72,713,489	5,779,555	16,265,204	13,252,352	37,408,217	8,161
Other/unknown	11,515,948	991,961	1,509,485	3,887,923	5,123,590	2,989	83,891,735	10,273,706	15,498,530	25,180,587	32,920,396	18,516
Use of Nursing Facilities^c												
Entire year	946,066	768,272	177,130	372	292	0	9,452,665	7,588,452	1,859,132	2,894	2,187	0
Part year	525,986	380,907	140,566	3,035	1,461	17	4,840,669	3,423,138	1,383,980	22,473	10,924	154
None	36,685,135	2,479,750	6,391,808	9,858,032	17,947,379	8,166	283,704,359	25,146,174	64,324,844	64,713,314	129,465,526	54,501
Maintenance Assistance Status												
Cash	13,496,765	1,499,437	4,990,218	2,517,244	4,489,866	0	116,300,931	16,372,979	51,503,019	16,086,735	32,338,198	0
Medically needy	2,468,612	618,956	459,991	741,410	648,255	0	17,911,437	5,712,616	4,197,116	4,506,515	3,495,190	0
Poverty-related	11,648,280	418,123	493,341	1,117,573	9,611,094	8,149	85,049,718	4,138,078	4,701,454	5,787,185	70,368,613	54,388
Other/unknown	10,543,530	1,092,413	765,954	5,485,212	3,199,917	34	78,735,607	9,934,091	7,166,367	38,358,246	23,276,636	267
Dual Medicare Status^d												
Full dual, all year	5,924,841	3,212,369	2,642,057	69,115	1,105	195	60,844,885	32,497,525	27,830,128	506,196	9,329	1,707
Full dual, part year	261,008	138,682	118,623	3,665	36	2	2,408,457	1,256,773	1,122,045	29,250	372	17
Non-dual, all year	31,971,338	277,878	3,948,824	9,788,659	17,947,991	7,986	234,744,351	2,403,466	38,615,783	64,203,235	129,468,936	52,931
Managed Care Status												
FFS all year	29,451,624	3,435,480	6,017,422	7,458,686	12,532,041	7,995	264,592,870	35,138,076	64,047,092	55,481,625	109,872,286	53,791
FFS part year, with Rx claims	3,958,027	140,480	483,924	1,248,958	2,084,529	136	17,826,619	769,606	2,585,980	5,532,019	8,938,365	649
FFS part year, no Rx claims	4,747,528	52,966	208,156	1,153,792	3,332,562	52	15,578,185	250,079	934,880	3,725,025	10,667,986	215

Source: Data for this table are from the MAX 2002 file for the U.S., released by CMS in 07/2006. This table was produced on 04/19/2007.

Table 2

All Medicaid Beneficiaries

a. Table 2 includes the beneficiaries represented by Cell C 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.

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 2002. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. The "Non-dual, all year" group includes beneficiaries who were never dually eligible or dually eligible but never had Medicaid fee-for-service pharmacy benefits. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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; Rx = pharmacy benefit.

TABLE 3
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
 UNITED STATES, 2002

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	57.8 %	11.9	\$709	\$59	\$4,652	15.2 %	38,157,187
Age							
5 and younger	55.7	3.5	129	37	1,871	6.9	7,639,081
6-14	49.6	3.6	213	59	1,663	12.8	7,761,975
15-20	47.1	3.8	224	59	2,412	9.3	4,429,423
21-44	53.2	9.0	649	72	4,241	15.3	10,020,218
45-64	75.3	32.3	2,156	67	10,265	21.0	3,886,186
65-74	82.4	36.7	2,018	55	8,828	22.9	1,739,287
75-84	85.1	41.3	2,089	51	13,630	15.3	1,507,298
85 and older	85.1	41.0	1,815	44	20,355	8.9	1,038,806
Unknown	16.1	0.6	29	48	1,272	2.3	134,913
Basis of Eligibility^c							
Aged	83.4	38.5	1,923	50	13,630	14.1	3,628,929
Disabled	80.3	32.2	2,322	72	12,598	18.4	6,709,504
Adults	46.3	4.3	211	49	1,801	11.7	9,861,439
Children	50.6	3.2	135	43	1,431	9.4	17,949,132
Unknown	68.4	10.8	1,004	93	7,836	12.8	8,183
Gender							
Female	59.4	13.2	722	55	4,613	15.7	22,916,991
Male	55.6	10.1	694	69	4,730	14.7	15,137,347
Unknown	21.8	0.9	42	49	1,646	2.6	102,849
Race							
White	64.6	16.0	931	58	5,921	15.7	17,636,404
African American	55.8	9.2	542	59	3,890	13.9	9,004,835
Other/unknown	49.0	7.8	500	64	3,303	15.2	11,515,948
Use of Nursing Facilities^d							
Entire year	89.1	59.6	2,917	49	37,496	7.8	946,066
Part year	91.3	49.4	2,610	53	25,892	10.1	525,986
None	56.6	10.2	625	61	3,500	17.9	36,685,135

Table 3

All Medicaid Beneficiaries

Maintenance Assistance Status	66.7	17.5	1,134	65	5,774	19.6	13,496,765
Cash	66.7	17.5	1,134	65	5,774	19.6	13,496,765
Medically needy	57.2	15.4	953	62	10,071	9.5	2,468,612
Poverty related	55.8	5.6	277	49	1,915	14.5	11,648,280
Other/unknown	48.9	11.0	586	53	4,970	11.8	10,543,530

Source: Data for this table are from the MAX 2002 file for the U.S., released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table 3 includes beneficiaries represented by Cell C 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 4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 UNITED STATES, 2002

Beneficiary Characteristics	Mean No. of Rx	No. of Rx, % with:							Mean \$, All Services	Benes	Bene Mos
		Rx \$ as % of All Services	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	1.5	15.2 %	42.2 %	34.8 %	6.8 %	9.4 %	5.2 %	1.6 %	\$596	38,157,187	297,997,693
Age											
5 and younger	0.5	6.9	44.3	47.3	5.1	2.6	0.6	0.3	272	7,639,081	52,628,867
6-14	0.5	12.8	50.4	41.6	4.3	2.9	0.6	0.2	213	7,761,975	60,520,859
15-20	0.5	9.3	52.9	38.0	4.8	3.3	0.7	0.2	329	4,429,423	32,513,977
21-44	1.2	15.3	46.8	32.8	7.3	8.5	3.5	1.1	576	10,020,218	73,729,720
45-64	3.6	21.0	24.7	19.2	11.0	23.8	15.9	5.4	1,149	3,886,186	34,721,518
65-74	3.6	22.9	17.6	19.5	12.7	27.6	17.6	5.0	866	1,739,287	17,731,180
75-84	4.0	15.3	14.9	15.9	11.9	29.4	21.7	6.2	1,332	1,507,298	15,426,320
85 and older	4.3	8.9	14.9	13.2	10.7	30.3	24.8	6.1	2,116	1,038,806	9,992,762
Unknown	0.1	2.3	83.9	13.2	1.4	1.1	0.4	0.1	234	134,913	732,490
Basis of Eligibility^c											
Aged	3.9	14.1	16.6	17.0	12.0	28.3	20.3	5.7	1,368	3,628,929	36,157,764
Disabled	3.2	18.4	19.7	25.0	11.9	24.0	14.8	4.6	1,251	6,709,504	67,567,956
Adults	0.7	11.7	53.7	33.0	6.0	5.3	1.6	0.5	274	9,861,439	64,738,681
Children	0.4	9.4	49.4	43.1	4.4	2.4	0.5	0.2	198	17,949,132	129,478,637
Unknown	1.6	12.8	31.6	34.7	13.6	15.9	3.7	0.6	1,173	8,183	54,655
Gender											
Female	1.7	15.7	40.6	34.6	7.0	10.1	5.9	1.9	588	22,916,991	179,786,537
Male	1.3	14.7	44.4	35.4	6.6	8.4	4.1	1.2	609	15,137,347	117,571,754
Unknown	0.1	2.6	78.2	19.0	1.7	1.0	0.2	0.0	265	102,849	639,402
Race											
White	2.0	15.7	35.4	35.3	7.7	11.6	7.4	2.5	739	17,636,404	141,392,469
African American	1.1	13.9	44.2	37.6	6.1	7.8	3.6	0.9	482	9,004,835	72,713,489
Other/unknown	1.1	15.2	51.0	31.9	6.1	7.3	3.0	0.7	453	11,515,948	83,891,735
Use of Nursing Facilities^d											
Entire year	6.0	7.8	10.9	7.8	6.7	26.1	33.9	14.6	3,753	946,066	9,452,665
Part year	5.4	10.1	8.7	11.2	9.6	30.3	29.4	10.7	2,813	525,986	4,840,669
None	1.3	17.9	43.4	35.9	6.8	8.7	4.1	1.1	453	36,685,135	283,704,359
Maintenance Assistance Status											
Cash	2.0	19.6	33.3	33.8	9.2	14.4	7.4	2.0	670	13,496,765	116,300,931

Table 4

All Medicaid Beneficiaries

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			
Medically needy	2.1	131	9.5	42.8	27.1	7.6	12.2	7.9	1,388	2,468,612	17,911,437
Poverty related	0.8	38	14.5	44.2	43.4	5.4	4.6	1.8	262	11,648,280	85,049,718
Other/unknown	1.5	78	11.8	51.1	28.6	5.2	7.7	5.5	666	10,543,530	78,735,607

Source: Data for this table are from the MAX 2002 file for the U.S., released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table 4 includes the beneficiaries represented by Cell C 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 5
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC
 UNITED STATES, 2002^{a,b,c}

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$
All	1.5	\$91	0.7	\$69	0.1	\$6	0.7	\$15
		\$ per Rx		\$ per Rx		\$ per Rx		\$ per Rx
Age								
5 and younger	0.5	19	0.2	14	0.0	2	0.3	4
6-14	0.5	27	0.2	21	0.0	3	0.2	4
15-20	0.5	31	0.2	23	0.0	3	0.2	5
21-44	1.2	88	0.5	69	0.1	6	0.6	13
45-64	3.6	241	1.6	186	0.2	15	1.7	39
65-74	3.6	198	1.7	150	0.3	13	1.7	35
75-84	4.0	204	1.8	152	0.3	13	1.9	39
85 and older	4.3	189	1.7	135	0.4	13	2.2	40
Unknown	0.1	5	0.0	4	0.0	0	0.1	1
Basis of Eligibility^d								
Aged	3.9	193	1.7	144	0.3	13	1.9	36
Disabled	3.2	231	1.4	180	0.2	15	1.5	36
Adults	0.7	32	0.3	24	0.0	3	0.3	6
Children	0.4	19	0.2	13	0.0	2	0.2	3
Unknown	1.6	150	0.7	129	0.1	6	0.8	16
Gender								
Female	1.7	92	0.7	69	0.1	7	0.8	16
Male	1.3	89	0.6	69	0.1	6	0.6	14
Unknown	0.1	7	0.0	5	0.0	0	0.1	1
Race								
White	2.0	116	0.9	88	0.1	8	1.0	20
African American	1.1	67	0.5	52	0.1	4	0.6	11
Other/unknown	1.1	69	0.5	53	0.1	5	0.5	11
Use of Nursing Facilities^e								
Entire year	6.0	292	2.4	213	0.5	19	3.0	59
Part year	5.4	284	2.2	211	0.4	18	2.7	54
None	1.3	81	0.6	62	0.1	6	0.6	13

Table 5

All Medicaid Beneficiaries

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$
Maintenance Assistance Status								
Cash	2.0	132	0.9	101	0.1	9	1.0	21
Medically needy	2.1	131	0.9	100	0.2	9	1.0	22
Poverty related	0.8	38	0.3	28	0.1	3	0.4	7
Other/unknown	1.5	78	0.6	59	0.1	5	0.7	14

Source: Data for this table are from the MAX 2002 file for the U.S., released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table 5 includes the beneficiaries represented by Cell C 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 the U.S., 0.8 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddeb.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 6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY
 UNITED STATES, 2002^{a,b,c,d}

Therapeutic Category	No. of Rx per Bene Mo Among Users			\$ per Bene Mo Among Users			Total Rx \$			Users		
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos	
		Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name						
Anti-infective Agents	0.3	0.1	0.0	\$17	\$1	\$2	39,930,901	\$2,757,404,518	13,947,781	36.6 %	134,842,884	
Biologicals	0.2	0.2	0.0	146	111	7	311,127	242,110,291	158,132	0.4	1,655,900	
Antineoplastic Agents	0.5	0.2	0.0	120	90	7	1,838,701	431,831,743	356,532	0.9	3,607,217	
Endocrine/Metabolic Drugs	0.6	0.3	0.1	31	23	3	42,051,256	2,034,197,066	6,576,234	17.2	65,339,065	
Cardiovascular Agents	1.4	0.6	0.1	55	37	4	86,376,785	3,353,150,341	5,881,916	15.4	60,746,728	
Respiratory Agents	0.5	0.2	0.1	24	17	3	48,272,172	2,325,621,866	9,963,683	26.1	97,903,933	
Gastrointestinal Agents	0.6	0.3	0.0	45	38	1	28,118,721	2,202,848,119	4,733,510	12.4	48,489,135	
Genitourinary Agents	0.3	0.3	0.0	18	16	0	6,876,032	370,726,229	2,098,521	5.5	20,763,488	
CNS Drugs	1.1	0.6	0.0	91	74	5	69,953,461	5,951,094,327	6,460,736	16.9	65,235,583	
Stimulants/Anti-obesity/Anorexia	0.6	0.3	0.1	40	27	5	4,863,622	313,530,230	780,790	2.0	7,867,020	
Miscellaneous Psychological/Neurological Agents	0.5	0.5	0.0	65	62	0	2,385,002	301,601,770	440,545	1.2	4,606,133	
Analgesics and Anesthetics	0.5	0.1	0.0	26	19	2	47,148,067	2,341,456,848	9,159,583	24.0	90,084,231	
Neuromuscular Agents	0.8	0.3	0.1	52	40	4	28,506,884	1,855,555,419	3,442,554	9.0	35,576,435	
Nutritional Products	0.4	0.0	0.0	7	0	1	10,797,013	186,206,072	2,733,683	7.2	25,674,904	
Hematological Agents	0.6	0.2	0.1	69	60	2	10,969,041	1,178,568,954	1,656,240	4.3	16,997,407	
Topical Products	0.3	0.1	0.0	11	7	1	25,436,064	936,933,757	8,242,543	21.6	82,254,027	
Miscellaneous Products	0.4	0.2	0.0	64	45	10	1,198,866	214,323,332	330,305	0.9	3,371,006	
Unknown Therapeutic Category	0.3	0.0	0.0	9	0	0	2,053,548	67,251,206	730,464	1.9	7,816,665	
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	455,887,263	27,064,412,088	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2002 file for the U.S., released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table 6 includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2002. 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 the U.S., 0.8 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (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 7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 UNITED STATES, 2002

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
ANTIPTCHOTICS	\$3,317,947,526	2,720,633	29,503,722	0.7	\$169	\$112
ANTIDEPRESSANTS	1,942,253,297	5,255,242	55,273,146	0.5	66	35
ULCER DRUGS	1,775,661,602	4,522,254	48,254,450	0.4	87	37
ANTICONVULSANT	1,517,245,561	2,535,079	27,475,430	0.7	79	55
ANTIVIRAL	1,249,304,145	777,956	8,296,084	0.4	373	151
ANTIASTHMATIC	1,204,561,739	6,289,414	65,611,727	0.3	56	18
ANTIDIABETIC	1,158,221,290	2,939,464	31,581,540	0.6	60	37
ANALGESICS - NARCOTIC	1,058,639,518	7,572,652	78,447,808	0.3	43	13
ANTHYPERLIPIDEMIC	1,057,971,903	1,952,247	21,479,963	0.6	88	49
ANALGESICS - ANTI-INFLAMMATORY	1,011,390,811	5,998,251	63,150,662	0.3	59	16
Total	15,293,197,392	40,563,192	429,074,532	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for the U.S., released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table 7 includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. 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 2002. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mdmb.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; n.a. = not applicable.

NATIONAL COMPARISON TABLE N.1a
 OVERVIEW OF MEDICAID PHARMACY REIMBURSEMENT, ALL STATES COMBINED AND BY STATE
 ALL MEDICAID BENEFICIARIES, 2002^a

	Total Rx \$ for All Beneficiaries in MAX 2002 (GRAND TOTAL) ^b		Total Rx \$ for Beneficiaries Included in this Study (TOTAL) ^c		Rx \$ Excluded from this Study by Reason		Rx \$ for Dual Eligible Beneficiaries Included in this Study ^f		Rx \$ for All-Year NF Residents Included in this Study ^g		Rx \$ for Part-Year NF Residents Excluded from this Study ^h		Rx \$ for Dual Eligible All-Year NF Residents Included in this Study ^h		Rx \$ for Dual Eligible Part-Year NF Residents Excluded from this Study ^h	
	Benes in MAX 2002		Benes in this Study		Benes Not Eligible for Medicaid or Not Having Rx Benefits ^d		Benes Not Having FFS Rx Benefits ^e		As % of GRAND TOTAL		As % of GRAND TOTAL		As % of GRAND TOTAL		As % of GRAND TOTAL	
	\$	%	\$	%	\$	%	\$	%	\$	%	\$	%	\$	%	\$	%
All States	\$28,817,241,020	93.9	\$27,064,412,088	93.9	\$692,311,921	\$1,060,517,011	\$14,763,851,359	51.2	\$2,759,342,436	\$2,759,342,436	\$1,372,822,365	\$2,441,665,373	\$1,098,557,889			
Alabama	474,970,478	96.9	469,694,217	96.9	1,435,853	3,840,408	215,405,831	45.4	52,243,979	52,243,979	17,158,190	48,743,302	15,041,431			
Alaska	85,282,877	96.2	82,062,662	96.2	3,220,215	0	37,332,219	43.8	2,364,318	2,364,318	1,148,347	2,010,857	803,991			
Arizona	3,420,564	65.2	2,230,788	65.2	34,952	1,154,824	448,680	13.1	22,348	22,348	238,365	3,128	62,976			
Arkansas	289,314,218	98.9	286,254,033	98.9	3,060,185	0	127,387,198	44.0	41,815,938	41,815,938	9,882,659	37,112,597	8,530,411			
California	3,435,272,992	95.5	3,281,156,621	95.5	35,819,397	118,296,974	1,990,264,212	57.9	169,587,479	169,587,479	138,084,166	141,723,566	104,124,839			
Colorado	211,665,995	99.5	210,676,723	99.5	892,218	97,054	132,479,732	62.6	27,406,320	27,406,320	15,843,511	24,760,044	13,967,639			
Connecticut	362,578,128	99.9	362,391,109	99.9	50,182	136,837	251,582,514	69.4	68,402,862	68,402,862	31,918,691	61,260,311	24,322,256			
Delaware	101,514,426	40.7	41,316,337	40.7	8,962,426	51,235,663	28,318,625	27.9	5,666,286	5,666,286	2,753,511	5,311,415	2,383,731			
D.C.	71,354,954	98.6	70,338,993	98.6	994,212	21,749	32,203,496	45.1	1,224,354	1,224,354	2,855,123	787,708	1,401,510			
Florida	1,779,551,993	92.9	1,652,470,192	92.9	127,046,590	35,211	918,861,829	51.6	144,758,432	144,758,432	72,229,029	130,407,003	57,560,233			
Georgia	789,552,678	94.0	742,145,042	94.0	47,407,636	0	323,703,873	41.0	72,527,071	72,527,071	30,547,789	65,375,723	26,843,516			
Hawaii	82,060,027	93.6	76,809,671	93.6	4,725,339	525,017	57,258,708	57.3	4,118,560	4,118,560	2,107,359	3,671,562	1,938,339			
Idaho	122,126,094	99.9	122,033,575	99.9	92,519	0	4,725,339	46.9	9,064,309	9,064,309	6,260,627	8,223,148	5,092,719			
Illinois	1,176,249,164	97.9	1,151,318,582	97.9	24,910,100	20,482	542,691,085	46.1	190,078,312	190,078,312	72,384,193	151,577,989	49,260,596			
Indiana	619,317,130	99.2	614,531,487	99.2	4,357,643	428,000	340,691,225	55.0	103,778,155	103,778,155	45,007,030	93,115,882	38,184,819			
Iowa	285,764,225	96.6	276,073,523	96.6	368,858	9,321,844	159,543,764	55.8	37,111,187	37,111,187	18,503,253	34,761,936	16,398,375			
Kansas	223,883,357	97.5	218,332,161	97.5	4,364,961	1,186,235	133,806,981	59.8	37,194,450	37,194,450	15,310,860	34,401,559	13,393,370			
Kentucky	679,910,307	95.9	652,165,624	95.9	7,999,072	19,745,611	286,630,830	42.2	63,976,352	63,976,352	27,229,119	58,502,464	22,484,717			
Louisiana	703,071,164	97.4	684,762,188	97.4	18,308,976	0	296,742,294	42.2	93,478,678	93,478,678	32,928,064	80,028,254	27,838,338			
Maine	256,313,122	89.0	228,117,712	89.0	28,195,410	0	121,934,974	47.6	12,244,348	12,244,348	11,432,480	11,534,571	9,818,738			
Maryland	328,496,120	69.1	226,839,968	69.1	30,805,316	70,850,836	180,645,455	55.0	51,994,559	51,994,559	20,405,210	44,337,055	15,801,755			
Massachusetts	943,957,442	96.7	912,690,773	96.7	30,508,424	758,245	525,581,897	55.7	85,431,812	85,431,812	49,319,492	77,516,631	37,921,919			
Michigan	678,417,989	87.0	590,191,963	87.0	14,317,181	73,902,643	482,505,190	68.2	62,381,126	62,381,126	36,991,719	57,765,068	33,674,260			
Minnesota	316,547,777	99.6	315,219,913	99.6	707,946	620,140	182,313,637	57.6	24,573,313	24,573,313	20,681,911	20,681,911	14,157,569			
Mississippi	543,302,591	99.8	542,292,204	99.8	1,010,387	0	322,455,353	59.4	48,872,761	48,872,761	16,226,923	45,472,543	14,627,404			
Missouri	840,171,724	96.3	826,125,448	96.3	9,930,255	4,116,021	480,641,785	57.2	85,079,340	85,079,340	46,690,426	76,767,914	39,137,910			
Montana	78,389,842	93.1	72,956,068	93.1	5,433,253	521	41,929,147	53.5	10,042,327	10,042,327	3,945,456	9,259,953	3,354,656			
Nebraska	199,247,222	88.4	136,384,687	88.4	980,215	61,882,320	103,572,251	52.0	26,401,281	26,401,281	10,517,224	24,101,308	9,368,481			
Nevada	94,546,063	98.8	93,386,941	98.8	1,040,702	118,420	43,770,918	46.3	7,156,198	7,156,198	4,683,099	6,054,756	3,281,611			
New Hampshire	100,655,096	97.9	98,550,857	97.9	285,072	1,819,167	59,176,604	58.8	14,317,230	14,317,230	5,737,261	13,660,073	5,111,287			
New Jersey	683,611,286	87.7	599,542,226	87.7	68,792,136	15,276,924	425,091,481	62.2	90,536,632	90,536,632	41,429,925	78,157,665	32,573,399			
New Mexico	75,710,436	99.9	75,628,852	99.9	71,612	9,972	63,101,893	83.3	12,622,914	12,622,914	5,016,676	11,298,450	4,469,979			
New York	3,493,661,585	91.2	3,185,716,824	91.2	5,568,475	302,376,286	1,509,074,415	43.2	104,187,530	104,187,530	102,476,824	78,856,226	66,182,827			
North Carolina	1,115,317,197	95.5	1,065,140,774	95.5	48,593,223	1,583,200	587,138,356	52.6	61,119,416	61,119,416	45,393,971	57,029,271	40,054,266			
North Dakota	52,312,024	99.7	52,170,177	99.7	44,822	97,025	32,426,822	62.0	11,580,788	11,580,788	3,287,173	11,082,415	2,905,520			
Ohio	1,384,470,936	99.7	1,380,354,197	99.7	4,106,188	10,551	661,289,806	47.8	206,718,233	206,718,233	71,387,907	180,733,197	50,969,619			
Oklahoma	281,560,007	85.2	239,849,544	85.2	2,244,710	39,465,753	173,424,687	61.6	48,243,839	48,243,839	24,728,393	42,776,102	21,400,058			
Oregon	273,788,067	65.0	178,013,733	65.0	37,545,065	58,229,279	98,689,951	36.0	12,613,567	12,613,567	9,081,602	11,612,275	7,507,438			
Pennsylvania	701,578,693	99.4	697,692,118	99.4	3,031,255	855,320	440,548,098	62.8	173,907,276	173,907,276	72,483,213	160,997,655	64,645,444			
Rhode Island	127,991,101	84.1	107,679,706	84.1	9,554,648	10,756,747	72,344,479	56.5	16,682,376	16,682,376	7,963,905	15,143,750	6,646,036			
South Carolina	458,489,649	98.6	451,982,385	98.6	6,778,986	5,829,368	226,179,394	49.3	8,398,362	8,398,362	6,675,014	7,752,001	5,896,928			
South Dakota	65,014,848	100.0	65,014,680	100.0	31,168	0	36,813,950	56.6	13,673,190	13,673,190	4,100,027	12,888,006	3,561,505			
Tennessee	581,655,359	98.7	574,374,453	98.7	3,032,895	4,248,011	255,483,471	43.9	21,528,716	21,528,716	9,165,766	19,539,888	7,755,830			
Texas	1,641,881,060	90.6	1,487,165,732	90.6	4,790,723	149,924,605	703,794,905	42.9	222,367,101	222,367,101	78,176,526	201,145,186	66,563,902			
Utah	140,314,953	71.2	99,873,046	71.2	479,851	39,962,056	46,838,737	33.4	12,279,907	12,279,907	6,212,502	10,509,346	4,712,116			
Vermont	115,480,124	81.1	93,654,681	81.1	21,825,443	0	48,268,163	41.8	5,956,387	5,956,387	3,812,286	5,647,155	3,447,042			
Virginia	462,871,449	99.3	459,584,877	99.3	1,361,521	1,925,051	293,888,899	63.5	57,365,322	57,365,322	29,378,208	51,056,163	25,341,280			
Washington	450,945,771	89.4	403,028,189	89.4	46,898,065	1,019,517	195,462,249	43.3	26,190,748	26,190,748	23,465,879	22,845,816	16,203,260			

Table N.1a

All Medicaid Beneficiaries

	Total Rx \$ for Benes Included in this Study (TOTAL) ^c		Rx \$ Excluded from this Study by Reason		Rx \$ for Dual Eligible Benes Included in this Study ^f		Rx \$ for Dual Eligible Part-Year NF Residents Excluded from this Study ^f	
	Total Rx \$ for All Benes in MAX 2002 (GRAND TOTAL) ^b	As % of GRAND TOTAL	Benes Not Eligible for Medicaid or Not Having Rx Benefits ^d	Benes Not Having FFS Rx Benefits ^e	Rx \$ for All-Year NF Residents Included in this Study ^g	Rx \$ for Part-Year NF Residents Excluded from this Study ^h	Rx \$ for Dual Eligible All-Year NF Residents Included in this Study ⁱ	Rx \$ for Dual Eligible Part-Year NF Residents Excluded from this Study ⁱ
West Virginia	310,763,434	96.0	3,514,263	8,826,780	22,097,352	9,718,133	19,992,549	7,958,228
Wisconsin	485,537,658	97.4	12,576,655	6,344	72,717,732	28,402,240	68,768,347	24,440,224
Wyoming	37,354,604	99.2	305,822	0	5,251,362	2,059,706	4,913,679	1,733,592

Source: Data for this table are from the MAX 2002 file for the U.S., released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to states.
 - b. This column represents the amount of Medicaid pharmacy benefit reimbursement for all pharmacy claims contained in the MAX 2002 files, some of which were excluded from this study because those claims were made for beneficiaries who did not meet the inclusion criteria (see Table 1) or took place during months that were excluded from the analysis (see footnote c of Table 1).
 - c. These columns include beneficiaries represented by Cell C of Table 1.
 - d. These columns include beneficiaries who did not meet either of the first two inclusion criteria (see Table 1).
 - e. These columns include beneficiaries who satisfied the first two inclusion criteria but failed to meet the third criterion (see Table 1).
 - f, g, h. These columns include beneficiaries represented by Cells G, D, and H of Table 1, respectively.
 - i. Refer to footnote f of Table 1 for information about how we determined part-year nursing facility residents.
- Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; D.C. = District of Columbia; FFS = fee-for-service; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx \$ = pharmacy reimbursement.

NATIONAL COMPARISON TABLE N.1b
 OVERVIEW OF MEDICAID PHARMACY REIMBURSEMENT, ALL STATES COMBINED AND BY STATE
 PERCENTAGE COMPARISONS, ALL MEDICAID BENEFICIARIES, 2002^a

	Total Rx \$ for All Benes in MAX 2002 (GRAND TOTAL) ^b		Total Rx \$ for Benes Included in this Study (TOTAL) ^c		Rx \$ Excluded from this Study by Reason as % of GRAND TOTAL		Rx \$ for Dual Eligible Benes Included in this Study as % of TOTAL ^g		Rx \$ for Part-Year NF Residents Excluded from this Study as % of TOTAL ^h		Rx \$ for Dual Eligible Part-Year NF Residents Excluded from this Study as % of TOTAL ⁱ	
					Benes Not Eligible for Medicaid or Not Having Rx Benefits ^d	Benes Not Having FFS Rx Benefits ^e						
					2.4 %	3.7 %	54.6 %	10.2 %	5.1 %	9.0 %	4.1 %	4.1 %
All States	\$28,817,241,020	\$27,064,412,088										
Alabama	\$474,970,478	\$469,694,217	0.3	0.8	45.9	11.1	3.7	10.4	3.2			
Alaska	\$85,282,877	\$82,062,662	3.8	0.0	45.5	2.9	1.4	2.5	1.0			
Arizona	\$3,420,564	\$2,230,788	1.0	33.8	20.1	1.0	10.7	0.1	2.8			
Arkansas	\$289,314,218	\$286,254,033	1.1	0.0	44.5	14.6	3.5	13.0	3.0			
California	\$3,435,272,992	\$3,281,156,621	1.0	3.4	60.7	5.2	4.2	4.3	3.2			
Colorado	\$211,665,995	\$210,676,723	0.4	0.0	62.9	13.0	7.5	11.8	6.6			
Connecticut	\$362,578,128	\$362,391,109	0.0	0.0	69.4	18.9	8.8	16.9	6.7			
Delaware	\$101,514,426	\$41,316,337	8.8	50.5	68.5	13.7	6.7	12.9	5.8			
D.C.	\$71,354,954	\$70,338,993	1.4	0.0	45.8	1.7	4.1	1.1	2.0			
Florida	\$1,779,551,993	\$1,652,470,192	7.1	0.0	55.6	8.8	4.4	7.9	3.5			
Georgia	\$789,552,678	\$742,145,042	6.0	0.0	43.6	9.8	4.1	8.8	3.6			
Hawaii	\$82,060,027	\$76,809,671	5.8	0.6	61.2	5.4	27.5	4.8	25.6			
Idaho	\$122,126,094	\$122,033,575	0.1	0.0	46.9	7.4	5.1	6.7	4.2			
Illinois	\$1,176,249,164	\$1,151,318,582	2.1	0.0	47.1	16.5	6.3	13.2	4.3			
Indiana	\$619,317,130	\$614,531,487	0.7	0.1	55.4	16.9	7.3	15.2	6.2			
Iowa	\$285,764,225	\$276,073,523	0.1	3.3	57.8	13.4	6.7	12.6	5.9			
Kansas	\$223,883,357	\$218,332,161	1.9	0.5	61.3	17.0	7.0	15.8	6.1			
Kentucky	\$679,910,307	\$652,165,624	1.2	2.9	44.0	9.8	4.2	9.0	3.4			
Louisiana	\$703,071,164	\$684,762,188	2.6	0.0	43.3	13.7	4.8	11.7	4.1			
Maine	\$256,313,122	\$228,117,712	11.0	0.0	53.5	5.4	5.0	5.1	4.3			
Maryland	\$328,496,120	\$226,839,988	9.4	21.6	79.6	22.9	9.0	19.5	7.0			
Massachusetts	\$943,957,442	\$912,690,773	3.2	0.1	57.6	9.4	5.4	8.5	4.2			
Michigan	\$678,411,787	\$590,191,963	2.1	10.9	78.4	10.6	6.3	9.8	5.7			
Minnesota	\$316,547,999	\$315,219,913	0.2	0.2	57.8	7.8	6.7	6.6	4.5			
Mississippi	\$543,302,591	\$542,292,204	0.2	0.0	59.5	9.0	3.0	8.4	2.7			
Missouri	\$840,171,724	\$826,125,448	1.2	0.5	58.2	10.3	5.7	9.3	4.7			
Montana	\$78,389,842	\$72,956,068	6.9	0.0	57.5	13.8	5.4	12.7	4.6			
Nebraska	\$199,247,222	\$136,384,687	0.5	31.1	75.9	19.4	7.7	17.7	6.9			
Nevada	\$94,546,063	\$93,386,941	1.1	0.1	46.9	7.7	5.0	6.5	3.5			
New Hampshire	\$100,655,096	\$98,550,857	0.3	1.8	60.0	14.5	5.8	13.9	5.2			

Table N.1b

All Medicaid Beneficiaries

	Rx \$ Excluded from this Study by Reason as % of GRAND TOTAL		Total Rx \$ for Benes in MAX 2002 (GRAND TOTAL) ^b	Total Rx \$ for Benes Included in this Study (TOTAL) ^c	Benes Not Eligible for Medicaid or Not Having Rx Benefits ^d		Benes Not Having FFS Rx Benefits ^e		Rx \$ for Dual Eligible Benes Included in this Study as % of TOTAL	Rx \$ for All-Year NF Residents Included in this Study as % of TOTAL ^g	Rx \$ for Part-Year NF Residents Excluded from this Study as % of TOTAL ^h	Rx \$ for Dual Eligible Part-Year NF Residents Excluded from this Study as % of TOTAL ⁱ
	Eligible for Medicaid or Not Having Rx Benefits ^d	Benes Not Having FFS Rx Benefits ^e										
New Jersey	10.1	2.2	\$683,611,286	\$599,542,226	70.9	15.1	6.9	13.0	5.4			
New Mexico	0.1	0.0	\$75,710,436	\$75,628,852	83.4	16.7	6.6	14.9	5.9			
New York	0.2	8.7	\$3,493,661,585	\$3,185,716,824	47.4	3.3	3.2	2.5	2.1			
North Carolina	4.4	0.1	\$1,115,317,197	\$1,065,140,774	55.1	5.7	4.3	5.4	3.8			
North Dakota	0.1	0.2	\$52,312,024	\$52,170,177	62.2	22.2	6.3	21.2	5.6			
Ohio	0.3	0.0	\$1,384,470,936	\$1,380,354,197	47.9	15.0	5.2	13.1	3.7			
Oklahoma	0.8	14.0	\$281,560,007	\$239,849,544	72.3	20.1	10.3	17.8	8.9			
Oregon	13.7	21.3	\$273,788,067	\$178,013,733	55.4	7.1	5.1	6.5	4.2			
Pennsylvania	0.4	0.1	\$701,578,693	\$697,692,118	63.1	24.9	10.4	23.1	9.3			
Rhode Island	7.5	8.4	\$127,991,101	\$107,679,706	67.2	15.5	7.4	14.1	6.2			
South Carolina	0.1	1.3	\$458,489,649	\$451,982,385	50.0	1.9	1.5	1.7	1.3			
South Dakota	0.0	0.0	\$65,045,848	\$65,014,680	56.6	21.0	6.3	19.8	5.5			
South Dakota	0.5	0.7	\$581,655,359	\$574,374,453	44.5	3.7	1.6	3.4	1.4			
Tennessee	0.3	9.1	\$1,641,881,060	\$1,487,165,732	47.3	15.0	5.3	13.5	4.5			
Texas	0.3	28.5	\$140,314,953	\$99,873,046	46.9	12.3	6.2	10.5	4.7			
Utah	18.9	0.0	\$115,480,124	\$93,654,681	51.5	6.4	4.1	6.0	3.7			
Vermont	0.3	0.4	\$462,871,449	\$459,584,877	63.9	12.5	6.4	11.1	5.5			
Virginia	10.4	0.2	\$450,945,771	\$403,028,189	48.5	6.5	5.8	5.7	4.0			
Washington	1.1	2.8	\$310,763,434	\$298,422,391	39.6	7.4	3.3	6.7	2.7			
West Virginia	2.6	0.0	\$485,537,658	\$472,954,659	65.8	15.4	6.0	14.5	5.2			
Wisconsin	0.8	0.0	\$37,354,604	\$37,048,782	47.7	14.2	5.6	13.3	4.7			
Wyoming												

Source: Data for this table are from the MAX 2002 file for the U.S., released by CMS in 07/2006. This table was produced on 04/19/2007.

a. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to states.

b. This column represents the amount of Medicaid pharmacy benefit reimbursement for all pharmacy claims contained in the MAX 2002 files, some of which were excluded from this study because those claims were made for beneficiaries who did not meet the inclusion criteria (see Table 1) or took place during months that were excluded from the analysis (see footnote c of Table 1).

c. These columns include beneficiaries represented by Cell C of Table 1.

d. These columns include beneficiaries who did not meet either of the first two inclusion criteria (see Table 1).

e. These columns include beneficiaries who satisfied the first two inclusion criteria but failed to meet the third criterion (see Table 1).

f, g, h. These columns include beneficiaries represented by Cells G, D, and H of Table 1, respectively.

i. Refer to footnote f of Table 1 for information about how we determined part-year nursing facility residents.

Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; D.C. = District of Columbia; FFS = fee-for-service; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx \$ = pharmacy reimbursement.

NATIONAL COMPARISON TABLE N.2
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, ALL STATES COMBINED AND BY STATE
 NONDUAL BENEFICIARIES, 2002^{a,b}

	% of All Rx										Among All-Year NF Residents ^d	
	No. of Benes	No. of Benes Mos	% of Benes with One or More Rx	No. of Rx Paid per Bene-Mo	Rx \$ per Bene Mo	Patented Brand-Name ^c	Off-Patent Brand-Name	Generic	Rx \$ as % of Total Medicaid \$	No. of Rx per Bene Mo	Rx \$ per Bene Mo	
All States	31,971,338	234,744,351	52.5 %	0.9	\$52	43.7 %	7.6 %	48.3 %	13.2 %	6.7	\$406	
Alabama	671,804	6,590,109	61.4	0.8	39	40.9	9.0	50.0	17.9	6.5	328	
Alaska	112,899	949,580	52.7	0.7	47	43.9	9.2	46.5	8.1	6.4	452	
Arizona	149,874	1,093,175	3.4	0.0	2	28.5	5.8	65.3	0.4	32.9	1747	
Arkansas	547,829	5,137,141	56.3	0.6	31	42.9	8.3	48.7	13.2	6.2	340	
California	4,870,848	34,132,484	32.0	0.5	38	40.9	8.5	50.2	14.3	5.9	386	
Colorado	267,572	1,553,870	42.4	0.8	50	41.2	7.2	51.3	8.9	7.7	450	
Connecticut	152,444	626,619	32.0	2.3	177	48.4	6.3	45.2	13.8	7.3	523	
Delaware	34,106	98,374	59.1	2.2	132	48.2	6.7	44.9	10.3	7.6	361	
D.C.	55,255	350,306	36.7	1.3	109	43.2	6.6	49.5	8.2	1.7	95	
Florida	1,786,950	12,715,004	49.6	0.9	58	43.9	6.2	49.6	16.0	7.8	417	
Georgia	1,332,671	11,352,642	62.7	0.8	37	43.0	9.2	47.5	13.6	5.7	303	
Hawaii	76,453	251,440	19.1	1.6	119	39.8	5.4	54.6	13.0	4.7	263	
Idaho	176,694	1,607,884	62.2	0.7	40	42.2	5.9	51.5	13.7	8.9	496	
Illinois	1,589,779	14,388,649	60.4	0.8	42	39.1	6.9	53.7	12.6	7.1	475	
Indiana	634,193	4,640,313	59.4	1.0	59	41.6	5.7	52.5	15.5	9.2	572	
Iowa	248,762	1,869,081	64.9	1.1	62	41.5	7.1	51.1	13.6	7.3	375	
Kansas	217,700	1,436,539	52.1	1.0	59	48.7	7.2	43.9	12.0	9.0	583	
Kentucky	503,770	4,680,263	75.9	1.5	78	44.6	7.2	47.9	20.4	10.6	488	
Louisiana	876,097	8,339,787	67.2	0.9	47	44.3	9.3	46.3	19.2	8.0	491	
Maine	199,013	1,986,083	68.8	1.0	54	44.5	7.0	48.3	9.6	7.4	356	
Maryland	276,981	1,197,641	20.5	0.6	39	47.7	8.1	43.9	4.3	8.3	460	
Massachusetts	665,058	5,826,673	61.0	1.1	66	46.9	1.1	47.5	15.4	6.1	334	
Michigan	709,624	3,162,320	40.2	0.8	40	40.9	5.2	53.7	9.0	7.1	325	
Minnesota	292,546	1,558,627	43.1	1.2	85	44.7	8.2	46.9	8.3	8.0	511	
Mississippi	566,812	5,444,325	70.2	0.8	40	44.7	9.4	45.5	16.5	7.1	414	
Missouri	575,621	4,616,646	61.4	1.3	75	44.1	7.5	48.0	20.9	8.1	460	
Montana	75,683	656,650	58.8	0.8	47	40.8	6.3	52.7	11.7	7.3	392	
Nebraska	97,513	251,463	62.6	2.5	131	43.4	7.1	49.5	9.9	7.8	445	
Nevada	131,844	745,190	39.8	1.0	67	40.7	6.6	52.6	11.2	7.0	395	
New Hampshire	93,325	766,244	61.2	0.9	51	43.0	6.7	50.3	12.2	7.3	373	
New Jersey	351,805	1,659,479	35.3	1.4	105	48.8	7.5	43.7	10.4	8.0	466	
New Mexico	226,845	1,221,157	27.0	0.3	10	30.7	13.1	55.8	2.5	7.4	344	
New York	3,019,468	21,097,249	50.5	1.0	80	50.8	7.6	41.0	11.9	1.9	263	

Table N.2

Nondual Beneficiaries

	% of All Rx										Among All-Year NF Residents ^d	
	No. of Benes	No. of Benes with Mos	% of Benes with One or More Rx	No. of Rx Paid per Bene Mo	Rx \$ per Bene Mo	Patented Brand-Name ^c	Off-Patent Brand-Name	Generic	Rx \$ as % of Total Medicaid \$	No. of Rx per Bene Mo	\$ per Bene Mo	No. of Rx per Bene Mo
North Carolina	1,106,359	10,047,889	67.0	0.9	48	44.6	7.7	47.4	14.0	6.7	6.7	413
North Dakota	57,908	494,100	58.8	0.8	40	44.2	8.7	46.9	12.0	7.1	7.1	347
Ohio	1,321,426	10,512,736	61.9	1.3	68	44.9	7.0	47.8	15.9	9.7	9.7	510
Oklahoma	355,041	1,070,178	40.3	1.0	62	41.4	8.5	50.0	8.3	7.6	7.6	453
Oregon	300,815	1,392,138	41.8	1.1	57	38.6	5.0	56.3	10.8	8.1	8.1	409
Pennsylvania	619,184	3,603,158	46.3	1.1	71	46.3	7.3	46.2	13.6	9.0	9.0	470
Rhode Island	38,075	239,720	48.5	2.1	147	48.1	5.4	46.4	11.0	4.2	4.2	280
South Carolina	747,384	7,471,042	61.2	0.6	30	45.2	9.2	45.6	14.0	1.7	1.7	92
South Dakota	98,550	896,697	54.7	0.6	31	46.4	8.5	44.9	10.1	8.1	8.1	453
Tennessee	1,268,135	6,991,395	54.6	1.1	46	38.1	6.6	54.9	9.1	6.0	6.0	249
Texas	2,426,935	16,776,482	69.6	0.9	47	41.4	11.0	47.4	12.5	7.4	7.4	447
Utah	164,330	791,254	60.6	1.3	67	40.2	6.0	53.6	11.5	8.5	8.5	503
Vermont	124,953	1,187,734	65.4	0.8	38	41.4	7.3	51.2	12.9	6.6	6.6	390
Virginia	393,648	2,229,827	50.9	1.2	74	44.3	8.1	46.9	13.2	7.9	7.9	392
Washington	649,996	4,086,623	42.6	0.9	51	39.0	5.1	55.8	14.1	6.5	6.5	369
West Virginia	276,893	2,182,308	73.9	1.7	83	42.2	6.8	50.8	20.7	8.1	8.1	409
Wisconsin	373,556	2,248,624	46.3	1.2	72	44.3	7.1	48.4	11.3	7.7	7.7	395
Wyoming	60,312	519,439	62.2	0.7	37	42.6	8.4	48.7	11.9	6.9	6.9	383

Source: Data for this table are from the MAX 2002 file for the U.S., released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table N.2, except for the last two columns, includes beneficiaries represented by Cell K of Table 1 in the national table set and the table set for each state. The last two columns include beneficiaries represented by Cell L 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 states.

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. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mdmb.asp (May 13 2003).

d. All-year nursing facility residents are beneficiaries who resided in nursing facilities throughout their Medicaid enrollment in 2002. Part-year residents were excluded from the analysis. See footnote f of Table 1 for more information about how we determined all-year nursing facility residents.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; D.C. = District of Columbia; MAX = Medicaid Analytic Extract; NF = nursing facility.

NATIONAL COMPARISON TABLE N.3
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT BY BASIS OF ELIGIBILITY, ALL STATES COMBINED AND BY STATE
 NONDUAL BENEFICIARIES, 2002^{a,b,c}

	Share of Bene Mos (percent)					Rx \$ per Bene Mo. (dollars)					Share of Total Medicaid Rx \$ (percent)				
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children
	100	1.0	16.5	27.4	55.2	52	123	197	31	19	100	2.4	61.9	16.0	19.7
All States	100	1.0	16.5	27.4	55.2	52	123	197	31	19	100	2.4	61.9	16.0	19.7
Alabama	100	0.1	17.7	21.0	61.1	39	132	140	9	19	100	0.5	64.1	5.0	30.3
Alaska	100	0.6	7.9	19.0	72.5	47	137	304	56	16	100	1.8	50.7	22.7	24.4
Arizona	100	0.4	7.3	47.7	44.6	2	3	16	0	1	100	0.6	71.2	12.7	15.5
Arkansas	100	0.6	13.6	26.8	59.0	31	98	128	9	18	100	2.0	56.5	8.0	33.6
California	100	1.7	14.3	57.1	26.9	38	102	198	9	11	100	4.6	74.8	12.8	7.5
Colorado	100	1.4	13.1	20.7	64.7	50	144	230	30	19	100	4.1	59.8	12.2	23.8
Connecticut	100	7.2	48.2	14.2	30.2	177	174	320	28	19	100	7.1	87.3	2.3	3.3
Delaware	100	0.8	10.4	54.7	33.9	132	288	585	90	57	100	1.8	46.1	37.2	14.7
D.C.	100	3.0	50.9	12.6	33.5	109	80	188	32	20	100	2.2	88.0	3.7	6.1
Florida	100	1.1	16.5	24.9	57.6	58	141	236	25	19	100	2.6	67.4	10.9	19.1
Georgia	100	0.4	13.7	16.4	69.4	37	124	146	31	16	100	1.3	54.2	13.6	30.7
Hawaii	100	6.9	48.9	21.6	22.4	119	114	222	7	2	100	6.7	91.6	1.3	0.4
Idaho	100	0.2	11.2	12.9	75.8	40	163	211	47	14	100	0.7	58.5	14.9	26.0
Illinois	100	0.8	12.8	19.1	67.3	42	132	189	35	15	100	2.4	57.2	15.7	24.6
Indiana	100	0.6	13.3	15.7	70.3	59	194	251	45	25	100	1.9	56.6	11.9	29.5
Iowa	100	0.7	18.1	19.2	62.0	62	163	205	49	24	100	1.8	59.6	15.1	23.5
Kansas	100	0.7	19.6	14.1	65.6	59	191	194	32	23	100	2.2	64.5	7.8	25.4
Kentucky	100	0.3	25.4	14.4	59.8	78	201	211	60	25	100	0.7	68.7	11.1	19.4
Louisiana	100	0.5	16.1	10.0	73.5	47	206	162	37	22	100	2.1	56.0	8.0	33.9
Maine	100	0.4	15.3	30.9	53.3	54	159	183	44	21	100	1.2	52.4	25.6	20.7
Maryland	100	4.0	11.4	62.7	21.9	39	137	190	8	30	100	14.2	56.2	12.9	16.7
Massachusetts	100	1.7	21.6	26.1	50.6	66	86	207	45	17	100	2.3	67.1	17.7	13.0
Michigan	100	0.7	12.0	24.2	63.2	40	112	185	32	16	100	1.9	54.8	18.9	24.4
Minnesota	100	0.3	34.0	19.8	45.8	85	120	204	35	19	100	0.4	81.3	8.1	10.1
Mississippi	100	0.2	17.5	12.6	69.7	40	163	135	36	17	100	0.9	58.4	11.1	29.6
Missouri	100	1.0	18.8	26.4	53.8	75	149	253	42	27	100	2.1	63.3	14.9	19.7
Montana	100	0.3	15.9	7.9	75.9	47	187	197	43	16	100	1.1	66.6	7.2	25.1
Nebraska	100	1.7	14.0	24.1	60.1	131	296	374	114	76	100	3.8	40.1	20.9	34.9
Nevada	100	1.2	25.5	21.9	51.4	67	147	201	27	15	100	2.6	77.0	8.9	11.5
New Hampshire	100	1.0	8.8	15.1	75.1	51	169	258	65	23	100	3.2	44.3	19.1	33.4
New Jersey	100	4.4	36.5	15.4	43.6	105	144	236	20	22	100	6.1	82.0	3.0	8.9
New Mexico	100	0.3	7.3	40.8	51.6	10	102	70	6	5	100	2.6	49.2	25.2	22.6
New York	100	2.1	19.5	35.3	43.1	80	84	251	60	18	100	2.2	61.6	26.6	9.6
North Carolina	100	0.2	14.4	18.9	66.5	48	133	181	48	19	100	0.5	54.6	19.1	25.8
North Dakota	100	0.6	9.6	30.0	59.8	40	158	187	37	17	100	2.4	45.0	27.6	24.9
Ohio	100	1.1	18.4	21.1	59.4	68	197	240	50	20	100	3.0	64.6	15.3	17.0

Table N.3

Nondual Beneficiaries

	Share of Bene Mos (percent)				Rx \$ per Bene Mo (dollars)				Share of Total Medicaid Rx \$ (percent)						
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children
Oklahoma	100	1.6	10.1	13.7	74.5	62	152	293	36	34	100	3.9	47.8	7.9	40.3
Oregon	100	0.2	9.9	39.6	50.2	57	173	243	67	12	100	0.7	42.2	46.5	10.6
Pennsylvania	100	1.0	22.3	15.4	61.3	71	205	215	58	20	100	2.9	67.2	12.4	17.0
Rhode Island	100	3.0	75.5	4.8	16.1	147	127	184	14	21	100	2.6	94.3	0.4	2.3
South Carolina	100	0.5	10.7	28.0	60.8	30	110	129	20	17	100	1.9	45.6	18.6	33.9
South Dakota	100	0.2	9.9	15.4	74.6	31	173	158	28	15	100	1.0	49.6	13.7	35.6
Tennessee	100	0.3	13.7	33.7	52.3	46	91	126	67	10	100	0.5	37.8	49.7	12.0
Texas	100	0.2	13.6	13.8	72.3	47	194	155	44	26	100	1.0	45.1	13.0	40.9
Utah	100	0.5	9.3	25.4	64.7	67	291	365	61	25	100	2.3	50.7	23.2	23.6
Vermont	100	0.2	7.8	34.8	57.1	38	159	200	34	18	100	0.8	41.0	31.2	26.9
Virginia	100	2.6	18.6	13.3	65.3	74	191	247	46	26	100	6.8	62.1	8.3	22.8
Washington	100	2.5	23.4	31.0	43.1	51	100	170	14	10	100	4.9	78.5	8.4	8.3
West Virginia	100	0.4	30.2	14.1	55.2	83	155	190	66	28	100	0.7	69.5	11.2	18.4
Wisconsin	100	0.8	35.1	21.2	42.9	72	137	157	39	17	100	1.5	76.7	11.6	10.1
Wyoming	100	0.1	9.5	16.3	74.0	37	188	190	40	17	100	0.6	48.4	17.4	33.4

Source: Data for this table are from the MAX 2002 file for the U.S., released by CMS in 07/2006. This table was produced on 04/19/2007.

- a. Table N.3 includes beneficiaries represented by Cell K of Table 1 in the national table set and the table set for each state. 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 states.
- 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. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; D.C. = District of Columbia; MAX = Medicaid Analytic Extract.

NATIONAL COMPARISON TABLE N.4
 TOP 10 DRUG GROUPS RANKED BY TOTAL MEDICAID PHARMACY REIMBURSEMENT, ALL STATES COMBINED AND BY STATE
 NONDUAL BENEFICIARIES, 2002^{a,b,c}

	ANTI- PSYCHOTICS	ANTI- DEPRESSANTS	ANTI- ANTIVIRAL	CONVULSANT	ANTI- ASTHMATIC	ULCER DRUGS	ANALGESICS- NARCOTIC	ANTIIDIABETIC	ANALGESICS - ANTI INFLAMMATORY	ANTI-HISTAMINES
All States	1	2	3	4	5	6	7	8	9	10
Alabama	1	4	.	3	2	.	9	5	.	7
Alaska	1	3	10	4	7	6	2	.	8	.
Arizona	2	3	.	10	6	9	.	7	4	.
Arkansas	1	3	.	4	2	8	10	.	.	7
California	1	2	3	4	9	5	10	7	8	.
Colorado	1	3	.	2	6	4	5	9	7	8
Connecticut	1	3	2	4	8	5	6	7	10	.
Delaware	2	4	1	3	6	.	8	5	.	.
D.C.	2	4	1	3	8	5	6	.	.	9
Florida	1	4	2	5	3	7	8	.	.	.
Georgia	1	3	5	4	2	.	6	10	.	9
Hawaii	1	4	6	3	9	.	2	7	.	.
Idaho	1	2	.	3	4	6	5	10	.	.
Illinois	1	3	6	4	2	5	10	8	9	9
Indiana	1	2	.	3	5	7	6	9	.	10
Iowa	1	2	.	3	4	6	7	8	.	.
Kansas	1	2	.	3	4	5	6	10	9	8
Kentucky	2	1	.	4	3	5	.	8	6	7
Louisiana	1	4	.	6	2	7	9	.	.	3
Maine	2	1	10	3	6	4	5	9	.	.
Maryland	1	5	2	3	.	4	7	9	.	.
Massachusetts	1	2	4	3	7	5	6	10	.	.
Michigan	1	2	.	3	4	7	6	.	.	10
Minnesota	1	2	10	3	7	5	6	9	.	.
Mississippi	1	3	.	4	2	5	10	7	.	6
Missouri	1	2	7	3	4	10	5	.	6	8
Montana	1	2	.	3	6	5	4	10	.	9
Nebraska	1	3	.	2	5	4	7	.	.	10
Nevada	1	3	6	4	5	8	2	10	.	.
New Hampshire	1	2	8	3	4	7	5	.	10	10
New Jersey	2	5	1	3	6	4	7	9	10	.
New Mexico	2	3	.	5	4	6	9	7	.	8
New York	2	3	1	6	5	4	.	8	7	.
North Carolina	1	3	9	4	5	2	7	.	.	6
North Dakota	2	1	.	3	4	5	7	10	8	.
Ohio	1	2	.	4	5	3	6	8	7	9

Table N.4
 Nondual Beneficiaries

	ANTI- PSYCHOTICS	ANTI- DEPRESSANTS	ANTI- ANTIVIRAL	CONVULSANT	ANTI-ASTHMATIC	ULCER DRUGS	ANALGESICS - NARCOTIC	ANTI-DIABETIC	ANALGESICS - ANTI INFLAMMATORY	ANTI-HISTAMINES
Oklahoma	1	2	.	3	4	7	6	10	.	9
Oregon	2	1	6	3	5	7	4	8	9	.
Pennsylvania	1	2	10	3	5	4	6	7	9	.
Rhode Island	1	2	3	4	7	5	6	9	10	.
South Carolina	1	3	7	4	2	10	8	9	.	5
South Dakota	1	2	.	3	4	5	.	.	.	10
Tennessee	3	1	8	.	5	2	7	6	10	.
Texas	1	4	.	3	2	.	.	.	9	6
Utah	1	2	.	3	6	5	4	.	9	.
Vermont	2	1	8	3	4	7	5	10	.	.
Virginia	1	3	.	4	5	2	6	.	9	8
Washington	1	2	7	3	6	5	4	9	8	.
West Virginia	2	1	.	3	4	8	5	6	.	9
Wisconsin	1	2	9	3	6	4	5	8	.	.
Wyoming	2	1	.	3	4	5	7	.	.	9

Source: Data for this table are from the MAX 2002 file for the U.S., released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table N.4 is based on beneficiaries represented by Cell K of Table 1 in the national table set and the table set for each state.

b. The top 10 drug groups were determined based on total Medicaid reimbursement in each state for 2002. The Medicaid reimbursement amounts do not reflect federally required rebates from drug manufacturers to states. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mdmb.asp (May 13 2003).

CMS = Center for Medicare and Medicaid Services; D.C. = District of Columbia; MAX = Medicaid Analytic Extract.