

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2002 IOWA

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TABLE D.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	59,858	31,966	27,522	353	17	0	631,554	323,935	304,869	2,625	125	0
Age												
5 and younger	6	0	5	0	1	0	62	0	51	0	11	0
6-14	8	0	7	0	1	0	91	0	84	0	7	0
15-20	144	0	138	3	3	0	1,603	0	1,549	18	36	0
21-44	12,418	0	12,150	260	8	0	138,324	0	136,287	1,982	55	0
45-64	13,525	0	13,445	78	2	0	149,133	0	148,579	545	9	0
65-74	9,170	8,074	1,088	6	2	0	96,758	85,679	11,035	37	7	0
75-84	11,878	11,347	527	4	0	0	121,398	115,733	5,645	20	0	0
85 and older	12,709	12,545	162	2	0	0	124,185	122,523	1,639	23	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	38,042	23,661	14,188	183	10	0	401,689	242,938	157,315	1,372	64	0
Male	21,816	8,305	13,334	170	7	0	229,865	80,997	147,554	1,253	61	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	49,040	25,294	23,474	262	10	0	536,481	267,873	266,493	2,029	86	0
African American	1,770	560	1,184	26	0	0	19,497	6,236	13,055	206	0	0
Other/unknown	9,048	6,112	2,864	65	7	0	75,576	49,826	25,321	390	39	0
Use of Nursing Facilities^c												
Entire year	12,204	11,321	883	0	0	0	130,738	120,815	9,923	0	0	0
Part year	6,886	6,282	604	0	0	0	60,081	53,899	6,182	0	0	0
None	40,768	14,363	26,035	353	17	0	440,735	149,221	288,764	2,625	125	0
Maintenance Assistance Status												
Cash	19,604	5,536	13,933	134	1	0	220,164	63,132	156,067	963	2	0
Medically needy	4,198	2,419	1,635	139	5	0	41,367	23,999	16,304	1,018	46	0
Poverty-related	1,664	838	766	56	4	0	16,793	8,759	7,559	439	36	0
Other/unknown	34,392	23,173	11,188	24	7	0	353,230	228,045	124,939	205	41	0
Dual Medicare Status^d												
Full dual, all year	56,001	29,908	25,744	332	17	0	590,938	302,234	286,162	2,417	125	0
Full dual, part year	3,857	2,058	1,778	21	0	0	40,616	21,701	18,707	208	0	0
Managed Care Status												
FFS all year	59,798	31,966	27,495	321	16	0	631,245	323,935	304,713	2,474	123	0
FFS part year, with Rx claims	57	0	26	30	1	0	292	0	147	143	2	0
FFS part year, no Rx claims	3	0	1	2	0	0	17	0	9	8	0	0

Table D2

Dual Eligible Beneficiaries

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

- a. Table D.2 includes the beneficiaries represented by Cell G 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. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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 D.3
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 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	90.5 %	51.0	\$2,665	\$52	\$15,256	17.5 %	59,858
Age							
5 and younger	66.7	35.7	2,945	83	10,810	27.2	6
6-14	100.0	89.3	6,665	75	21,115	31.6	8
15-20	85.4	25.6	2,038	80	14,608	14.0	144
21-44	87.6	37.2	2,889	78	14,338	20.1	12,418
45-64	89.7	55.6	3,475	63	15,830	22.0	13,525
65-74	87.9	53.7	2,536	47	11,662	21.7	9,170
75-84	91.0	56.6	2,380	42	15,115	15.7	11,878
85 and older	95.5	52.5	1,951	37	18,274	10.7	12,709
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^c							
Aged	92.5	55.3	2,294	42	15,881	14.4	31,966
Disabled	88.5	46.4	3,115	67	14,690	21.2	27,522
Adults	68.8	18.0	1,220	68	3,333	36.6	353
Children	64.7	18.9	1,684	89	4,702	35.8	17
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	93.4	56.0	2,716	49	14,938	18.2	38,042
Male	85.3	42.2	2,577	61	15,812	16.3	21,816
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	91.9	54.0	2,858	53	16,378	17.5	49,040
African American	86.6	39.9	2,134	54	10,125	21.1	1,770
Other/unknown	83.7	36.8	1,724	47	10,178	16.9	9,048
Use of Nursing Facilities^d							
Entire year	95.9	67.8	2,848	42	27,727	10.3	12,204
Part year	96.7	56.8	2,381	42	17,155	13.9	6,886
None	87.8	45.0	2,659	59	11,202	23.7	40,768
Maintenance Assistance Status							
Cash	89.5	46.6	2,771	59	7,380	37.6	19,604
Medically needy	82.0	40.1	2,253	56	4,363	51.6	4,198
Poverty related	66.8	11.1	603	55	2,243	26.9	1,664
Other/unknown	93.2	56.7	2,755	49	21,705	12.7	34,392

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

- a. Table D.3 includes beneficiaries represented by Cell G 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 D.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

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	4.8	\$253	17.5 %	9.5 %	15.3 %	9.6 %	28.5 %	28.1 %	8.9 %	\$1,446	59,858	631,554
Age												
5 and younger	3.5	285	27.2	33.3	0.0	16.7	33.3	16.7	0.0	1,046	6	62
6-14	7.8	586	31.6	0.0	0.0	0.0	25.0	62.5	12.5	1,856	8	91
15-20	2.3	183	14.0	14.6	38.2	10.4	26.4	9.7	0.7	1,312	144	1,603
21-44	3.3	259	20.1	12.4	28.0	12.7	26.5	16.2	4.3	1,287	12,418	138,324
45-64	5.0	315	22.0	10.3	14.3	9.6	28.1	27.4	10.3	1,436	13,525	149,133
65-74	5.1	240	21.7	12.1	14.2	8.7	25.1	29.1	10.8	1,105	9,170	96,758
75-84	5.5	233	15.7	9.0	9.9	7.8	28.4	33.4	11.5	1,479	11,878	121,398
85 and older	5.4	200	10.7	4.5	9.7	8.8	33.6	35.2	8.2	1,870	12,709	124,185
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^c												
Aged	5.5	226	14.4	7.5	10.5	8.3	29.6	33.7	10.4	1,567	31,966	323,935
Disabled	4.2	281	21.2	11.5	20.8	11.1	27.4	21.9	7.2	1,326	27,522	304,869
Adults	2.4	164	36.6	31.2	24.9	11.9	18.1	10.5	3.4	448	353	2,625
Children	2.6	229	35.8	35.3	17.6	11.8	23.5	5.9	5.9	640	17	125
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	5.3	257	18.2	6.6	13.0	9.3	29.7	31.2	10.3	1,415	38,042	401,689
Male	4.0	245	16.3	14.7	19.3	10.2	26.5	22.8	6.4	1,501	21,816	229,865
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	4.9	261	17.5	8.1	15.2	9.5	29.0	28.9	9.3	1,497	49,040	536,481
African American	3.6	194	21.1	13.4	26.1	10.8	24.9	20.2	4.6	919	1,770	19,497
Other/unknown	4.4	206	16.9	16.3	14.2	9.8	26.9	25.4	7.5	1,219	9,048	75,576
use of nursing Facilities^d												
Entire year	6.3	266	10.3	4.1	6.5	6.6	29.9	38.3	14.7	2,588	12,204	130,738
Part year	6.5	273	13.9	3.3	6.6	6.9	29.5	39.7	14.1	1,966	6,886	60,081
None	4.2	246	23.7	12.2	19.4	11.0	28.0	23.1	6.3	1,036	40,768	440,735
Maintenance Assistance Status												
Cash	4.2	247	37.6	10.5	20.9	11.4	28.0	22.6	6.6	657	19,604	220,164
Medically needy	4.1	229	51.6	18.0	14.4	10.9	29.3	22.5	4.9	443	4,198	41,367
Poverty related	1.1	60	26.9	33.2	42.5	9.2	11.2	3.6	0.2	222	1,664	16,793
Other/unknown	5.5	268	12.7	6.8	11.0	8.5	29.6	33.2	11.1	2,113	34,392	353,230

Table D4

Dual Eligible Beneficiaries

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

- a. Table D.4 includes the beneficiaries represented by Cell G 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 D.5
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx	No. of Rx	Rx \$	\$ per Rx
All	4.8	\$253	\$52	1.9	\$175	\$94	0.4	\$19	\$44	2.5	\$58	\$23
Age												
5 and younger	3.5	285	83	1.6	235	144	0.3	25	78	1.5	25	17
6-14	7.8	586	75	2.9	388	135	1.2	97	84	3.8	101	26
15-20	2.3	183	80	1.0	144	144	0.2	11	64	1.1	28	25
21-44	3.3	259	78	1.4	189	133	0.3	21	72	1.6	49	30
45-64	5.0	315	63	2.1	226	108	0.4	23	59	2.5	65	26
65-74	5.1	240	47	2.0	164	82	0.4	16	39	2.7	60	23
75-84	5.5	233	42	2.0	154	76	0.5	17	33	3.0	61	21
85 and older	5.4	200	37	1.8	126	72	0.6	17	29	3.0	57	19
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	5.5	226	42	2.0	148	76	0.5	17	33	3.0	61	21
Disabled	4.2	281	67	1.8	203	116	0.3	22	63	2.1	56	27
Adults	2.4	164	68	1.0	111	110	0.2	8	54	1.2	45	36
Children	2.6	229	89	1.0	154	155	0.2	24	121	1.4	51	37
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	5.3	257	49	2.0	176	87	0.5	19	40	2.8	61	22
Male	4.0	245	61	1.6	172	110	0.3	19	56	2.1	53	26
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	4.9	261	53	1.9	181	96	0.4	20	45	2.6	60	23
African American	3.6	194	54	1.4	139	98	0.2	11	47	1.9	43	22
Other/unknown	4.4	206	47	1.7	143	84	0.4	14	37	2.3	49	21
Use of Nursing Facilities^e												
Entire year	6.3	266	42	2.2	173	79	0.6	21	33	3.5	72	21
Part year	6.5	273	42	2.3	180	77	0.6	20	33	3.5	73	21
None	4.2	246	59	1.7	175	103	0.3	19	53	2.1	52	25
Maintenance Assistance Status												
Cash	4.2	247	59	1.7	174	104	0.3	20	57	2.1	53	25
Medically needy	4.1	229	56	1.7	161	97	0.4	17	49	2.0	50	25
Poverty related	1.1	60	55	0.5	45	99	0.1	4	44	0.5	11	20
Other/unknown	5.5	268	49	2.0	183	89	0.5	20	38	2.9	65	22

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

- a. Table D.5 includes the beneficiaries represented by Cell G 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 Iowa, 0.6 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).
- 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 D.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

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	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total No. of Rx	Total Rx \$	No. Dual Benes	As % of Benes	No. of Bene Mos
Anti-infective Agents	0.4	0.2	0.0	0.2	\$20	\$16	\$1	\$3	\$58	\$100	\$83	\$16	134,923	\$7,761,480	35,030	58.5 %	384,714
Biologics	0.1	0.1	0.0	0.0	33	1	2	30	315	20	1,944	901	1,901	598,061	1,584	2.6	18,345
Antineoplastic Agents	0.6	0.3	0.0	0.3	130	111	4	15	200	328	105	55	11,377	2,274,671	1,661	2.8	17,508
Endocrine/Metabolic Drugs	1.1	0.5	0.2	0.4	40	28	5	7	37	59	20	20	309,199	11,563,771	26,513	44.3	287,392
Cardiovascular Agents	1.9	0.6	0.2	1.1	58	34	5	20	31	57	28	18	714,553	22,162,541	35,662	59.6	380,198
Respiratory Agents	0.8	0.4	0.0	0.4	39	28	2	9	51	77	53	26	188,658	9,614,633	22,438	37.5	248,051
Gastrointestinal Agents	0.8	0.3	0.0	0.5	43	31	1	11	53	115	85	21	213,550	11,374,201	24,568	41.0	265,729
Genitourinary Agents	0.6	0.4	0.0	0.2	33	30	0	3	56	72	39	18	63,881	3,596,502	9,878	16.5	107,551
CNS Drugs	1.6	0.8	0.1	0.7	129	93	10	25	82	122	108	35	585,350	47,714,207	34,396	57.5	370,900
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.1	0.3	51	31	6	14	81	124	85	45	5,910	477,833	836	1.4	9,439
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	97	95	0	1	129	136	0	26	18,969	2,452,216	2,449	4.1	25,378
Analgesics and Anesthetics	0.8	0.2	0.1	0.6	40	25	4	11	49	124	68	20	264,253	12,905,877	29,682	49.6	321,004
Neuromuscular Agents	1.1	0.4	0.1	0.5	72	51	7	14	65	115	50	27	215,199	14,041,936	17,525	29.3	194,106
Nutritional Products	0.7	0.0	0.1	0.6	15	0	2	13	22	27	26	21	86,675	1,886,556	11,651	19.5	122,592
Hematological Agents	0.9	0.2	0.3	0.4	47	34	6	7	53	158	21	17	96,662	5,133,978	10,400	17.4	109,675
Topical Products	0.4	0.2	0.0	0.2	16	10	1	4	36	57	41	19	121,350	4,389,590	25,237	42.2	280,322
Miscellaneous Products	0.4	0.2	0.1	0.1	74	48	18	8	199	298	262	54	6,958	1,381,868	1,681	2.8	18,638
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	6	0	0	0	18	0	0	0	11,713	213,843	3,392	5.7	37,497
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.	3,051,081	159,543,764	n.a.	n.a.	n.a.

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

- a. Table D.6 includes the beneficiaries represented by Cell G 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 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. 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 Iowa, 0.6 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 D.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

Top 10 Drug Groups	Users			Among Users		
	Total Medicaid Rx \$	No.	As % of Dual Benes	No. of Bene Mos	No. of Rx per Bene Mo	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$27,656,691	19,671	32.9 %	217,968	0.8	\$152
ANTIDEPRESSANTS	15,621,413	32,994	55.1	360,284	0.7	60
ANTICONVULSANT	10,985,846	14,720	24.6	164,605	0.9	76
ULCER DRUGS	9,110,303	25,476	42.6	278,248	0.5	60
ANTI-DIABETIC	7,562,529	17,341	29.0	187,913	0.8	52
ANALGESICS - Narcotic	7,535,678	32,101	53.6	348,716	0.5	48
ANTI-ASTHMATIC	6,917,240	21,615	36.1	236,676	0.5	57
ANTI-HYPERLIPIDEMIC	6,167,526	10,442	17.4	117,161	0.7	76
ANTI-HYPERTENSIVE	5,784,776	20,167	33.7	217,292	0.7	37
CALCIUM BLOCKERS	3,886,591	10,060	16.8	108,326	0.8	46
Total	101,228,593	204,587		2,237,189	n.a.	n.a.

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

a. Table D.7 includes the beneficiaries represented by Cell G 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_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; n.a. = not applicable.

TABLE D.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}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS			
	No. of Rx	Rx \$	No. of Users	Mean Rx \$	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	1,485,970	\$101,228,593	19,671	\$127	32.9 %	217,968	0.8	\$127	55.1 %	32,994	0.7	\$43
Female	996,713	63,393,743	11,224	109	29.5	123,756	0.8	109	60.3	22,949	0.7	43
Disabled	390,742	30,868,342	5,567	135	39.2	64,378	0.8	135	74.8	10,613	0.7	47
5 and younger	10	225	0	0	0.0	0	0.0	0	0.0	0	0.0	0
6-14	71	5,181	0	0	0.0	0	0.0	0	50.0	1	1.0	7
15-20	532	38,656	9	63	16.1	101	0.5	63	41.1	23	0.4	37
21-44	125,863	11,135,253	2,522	133	45.7	29,223	0.8	133	75.8	4,181	0.7	48
45-64	240,803	18,316,660	2,882	138	39.0	33,383	0.8	138	81.3	6,007	0.7	47
65-74	13,749	852,818	99	118	14.4	1,082	0.8	118	36.5	251	0.7	38
75-84	7,553	413,679	38	70	9.6	407	0.7	70	26.7	106	0.7	36
85 and older	2,161	105,870	17	102	12.3	182	0.8	102	31.9	44	0.5	29
Other Eligibles	605,971	32,525,401	5,657	81	23.7	59,378	0.7	81	51.7	12,336	0.8	39
5 and younger	0	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0
6-14	7	436	0	0	0.0	0	0.0	0	0.0	0	0.0	0
15-20	12	350	0	0	0.0	0	0.0	0	0.0	0	0.0	0
21-44	1,321	103,557	22	75	14.0	211	0.4	75	58.6	92	0.5	34
45-64	384	26,591	4	99	16.7	21	0.5	99	66.7	16	0.6	39
65-74	160,458	9,491,952	1,206	103	22.8	13,343	0.8	103	54.4	2,875	0.7	37
75-84	225,579	12,130,194	2,028	82	25.2	21,499	0.7	82	53.3	4,298	0.8	39
85 and older	218,210	10,772,321	2,397	67	23.2	24,304	0.7	67	49.0	5,055	0.8	41
Male	489,257	37,834,850	8,447	151	38.7	94,212	0.9	151	46.0	10,045	0.7	44
Disabled	300,889	27,392,099	6,177	170	46.3	71,431	1.0	170	48.0	6,402	0.7	47
5 and younger	34	783	0	0	0.0	0	0.0	0	0.0	0	0.0	0
6-14	150	7,123	0	0	0.0	0	0.0	0	40.0	2	0.8	16
15-20	1,124	110,179	30	141	36.6	354	0.8	141	36.6	30	0.5	33
21-44	130,998	13,230,605	3,229	177	48.7	37,458	1.0	177	49.3	3,267	0.7	47
45-64	160,438	13,558,866	2,851	165	47.1	32,925	1.0	165	49.1	2,974	0.7	47
65-74	5,922	355,209	52	112	13.0	533	0.8	112	24.2	97	0.6	33
75-84	1,878	113,952	13	99	10.0	137	0.7	99	18.5	24	0.5	31
85 and older	345	15,382	2	22	8.3	24	0.3	22	33.3	8	0.6	35
Other Eligibles	188,368	10,442,751	2,270	89	26.8	22,781	0.8	89	42.9	3,643	0.7	39
5 and younger	0	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0
6-14	0	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0
15-20	18	997	0	0	0.0	0	0.0	0	33.3	1	0.2	14
21-44	834	57,570	8	83	7.2	70	0.7	83	45.9	51	0.5	31
45-64	642	34,610	3	135	5.4	17	0.7	135	41.1	23	0.4	23
65-74	69,338	4,231,288	690	118	24.7	7,378	0.8	118	38.4	1,072	0.7	40
75-84	72,880	3,916,101	932	81	28.3	9,412	0.8	81	45.0	1,479	0.7	39
85 and older	44,656	2,202,185	637	67	28.6	5,904	0.7	67	45.6	1,017	0.8	40
Unknown	0	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0

Dual Eligible Beneficiaries

Table D7A

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

a. Table D.7A includes the beneficiaries represented by Cell G 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 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 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); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.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}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					ANTIDIABETIC				
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx
All	14,720	24.6 %	164,605	\$67	0.9	25,476	42.6 %	278,248	\$33	0.5	17,341	29.0 %	187,913	\$40	0.8
Female															
Disabled															
5 and younger	8,812	23.2	98,613	62	0.9	17,829	46.9	195,389	33	0.5	12,030	31.6	131,117	40	0.8
6-14	5,372	37.9	61,791	74	0.9	6,245	44.0	71,587	35	0.5	3,753	26.5	42,636	46	0.7
15-20	0	0.0	0	0	0.0	2	100.0	24	9	0.4	0	0.0	0	0	0.0
21-44	1	50.0	12	52	0.9	1	50.0	12	124	1.0	0	0.0	0	0	0.0
45-64	13	23.2	149	86	0.8	16	28.6	185	18	0.2	0	0.0	0	0	0.0
65-74	2,382	43.2	27,497	78	0.8	2,002	36.3	23,005	33	0.4	788	14.3	9,073	44	0.7
75-84	2,848	38.5	32,733	72	0.9	3,770	51.0	43,369	36	0.5	2,613	35.4	29,703	46	0.8
85 and older	85	12.4	909	47	0.7	252	36.7	2,705	33	0.5	242	35.2	2,626	42	0.7
Other Eligibles	34	8.6	385	35	0.7	145	36.5	1,645	34	0.5	94	23.7	1,052	45	0.8
5 and younger	9	6.5	106	19	0.6	57	41.3	642	22	0.5	16	11.6	182	28	0.6
6-14	3,440	14.4	36,822	42	0.8	11,584	48.6	123,802	32	0.6	8,277	34.7	88,481	37	0.8
15-20	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0
21-44	0	0.0	0	0	0.0	1	100.0	7	36	0.4	0	0.0	0	0	0.0
45-64	30	19.1	261	63	0.5	33	21.0	332	19	0.3	4	2.5	42	18	0.4
65-74	5	20.8	52	69	0.5	11	45.8	114	35	0.5	7	29.2	49	35	0.7
75-84	1,213	22.9	13,545	50	0.9	2,711	51.3	30,174	34	0.5	2,615	49.4	28,756	41	0.8
85 and older	1,223	15.2	13,093	42	0.9	4,056	50.3	43,757	32	0.6	3,387	42.0	36,564	37	0.8
Male	969	9.4	9,871	32	0.8	4,772	46.3	49,418	30	0.6	2,264	21.9	23,070	33	0.8
Disabled	5,908	27.1	65,992	74	0.9	7,647	35.1	82,859	33	0.5	5,311	24.3	56,796	41	0.8
5 and younger	4,564	34.2	52,409	81	0.9	4,049	30.4	46,266	35	0.5	2,501	18.8	28,188	45	0.7
6-14	0	0.0	0	0	0.0	1	33.3	12	29	1.1	0	0.0	0	0	0.0
15-20	3	60.0	36	75	0.8	4	80.0	48	40	0.6	0	0.0	0	0	0.0
21-44	24	29.3	283	94	0.9	15	18.3	179	52	0.5	0	0.0	0	0	0.0
45-64	2,304	34.7	26,577	87	0.9	1,672	25.2	19,270	34	0.5	728	11.0	8,355	46	0.7
65-74	2,197	36.3	25,176	76	1.0	2,192	36.2	24,954	36	0.5	1,640	27.1	18,374	44	0.7
75-84	30	7.5	265	42	1.0	109	27.2	1,169	28	0.5	92	22.9	990	39	0.7
85 and older	5	3.8	60	17	0.8	46	35.4	514	29	0.4	32	24.6	361	57	0.8
Other Eligibles	1	4.2	12	20	1.0	10	41.7	120	26	0.5	9	37.5	108	27	0.7
5 and younger	1,344	15.8	13,583	45	0.9	3,598	42.4	36,593	30	0.6	2,810	33.1	28,608	38	0.8
6-14	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0
15-20	0	0.0	0	0	0.0	0	0.0	0	2	0.1	0	0.0	0	0	0.0
21-44	17	15.3	147	20	0.4	27	24.3	279	26	0.3	14	12.6	110	29	0.3
45-64	12	21.4	113	44	0.6	8	14.3	70	29	0.3	6	10.7	56	39	0.8
65-74	591	21.2	6,323	56	0.9	1,110	39.7	11,820	29	0.5	1,041	37.3	11,102	43	0.8
75-84	472	14.4	4,771	36	0.8	1,405	42.7	14,243	30	0.6	1,144	34.8	11,555	36	0.8
85 and older	252	11.3	2,229	39	0.8	1,047	47.0	10,169	30	0.6	605	27.1	5,785	32	0.8
Unknown	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0

Table D7B

Dual Eligible Beneficiaries

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

a. Table D.7B includes the beneficiaries represented by Cell G 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 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 2002. 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	ANALGESICS - Narcotic				ANTIASTHMATIC				ANTIHYPERLIPIDEMIC						
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	32,101	53.6 %	348,716	0.5	\$22	21,615	36.1 %	236,676	0.5	\$29	10,442	17.4 %	117,161	0.7	\$55
Female	23,307	61.3	253,756	0.5	22	14,486	38.1	159,532	0.5	29	7,086	18.6	79,665	0.7	53
Disabled	9,333	65.8	106,643	0.4	21	6,133	43.2	70,134	0.5	28	2,806	19.8	32,137	0.7	53
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	50.0	12	0.2	3	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	28	50.0	325	0.3	4	15	26.8	175	0.2	15	3	5.4	36	0.4	22
21-44	3,420	62.0	39,272	0.3	16	1,978	35.9	22,800	0.4	23	455	8.2	5,248	0.6	46
45-64	5,359	72.5	61,236	0.4	25	3,720	50.3	42,513	0.5	30	2,001	27.1	22,991	0.7	54
65-74	294	42.8	3,197	0.4	14	288	41.9	3,156	0.5	27	218	31.7	2,388	0.7	54
75-84	169	42.6	1,906	0.3	11	104	26.2	1,165	0.6	38	109	27.5	1,240	0.7	52
85 and older	62	44.9	695	0.4	14	28	20.3	325	0.2	10	20	14.5	234	0.6	39
Other Eligibles	13,974	58.6	147,113	0.5	24	8,353	35.0	89,398	0.5	29	4,280	17.9	47,528	0.7	53
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	66.7	18	0.2	2	2	66.7	12	0.2	8	0	0.0	0	0.0	0
21-44	104	66.2	946	0.4	25	42	26.8	384	0.3	26	4	2.5	48	0.4	43
45-64	15	62.5	140	0.5	33	8	33.3	84	0.7	35	2	8.3	21	0.7	42
65-74	3,401	64.3	37,557	0.5	20	2,711	51.3	30,031	0.5	33	1,722	32.6	19,379	0.7	55
75-84	4,861	60.3	51,915	0.5	24	2,949	36.6	31,693	0.6	31	1,846	22.9	20,463	0.7	53
85 and older	5,591	54.2	56,537	0.6	25	2,641	25.6	27,194	0.5	24	706	6.8	7,617	0.7	49
Male	8,794	40.3	94,960	0.4	20	7,129	32.7	77,144	0.5	31	3,356	15.4	37,496	0.7	52
Disabled	5,215	39.1	59,063	0.4	20	3,311	24.8	37,644	0.5	28	2,075	15.6	23,761	0.7	51
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	20.0	12	0.4	4	3	60.0	36	0.5	11	0	0.0	0	0.0	0
15-20	27	32.9	318	0.1	2	15	18.3	180	0.5	28	0	0.0	0	0.0	0
21-44	2,476	37.3	28,255	0.3	16	1,237	18.6	14,229	0.4	23	634	9.6	7,411	0.7	47
45-64	2,548	42.1	28,703	0.4	24	1,882	31.1	21,312	0.5	31	1,315	21.7	14,976	0.7	52
65-74	121	30.2	1,311	0.4	12	130	32.4	1,384	0.6	38	88	21.9	947	0.7	55
75-84	37	28.5	408	0.3	14	39	30.0	443	0.4	25	37	28.5	415	0.6	40
85 and older	5	20.8	56	0.3	7	5	20.8	60	0.3	17	1	4.2	12	0.8	56
Other Eligibles	3,579	42.2	35,897	0.5	19	3,818	45.0	39,500	0.6	34	1,281	15.1	13,735	0.7	55
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	33.3	10	0.1	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	58	52.3	527	0.3	20	11	9.9	114	1.1	78	5	4.5	46	0.5	25
45-64	43	76.8	414	0.4	15	18	32.1	169	0.5	21	9	16.1	87	0.5	42
65-74	1,229	44.0	12,969	0.5	20	1,438	51.5	15,525	0.6	35	633	22.7	7,071	0.7	56
75-84	1,289	39.2	12,901	0.4	17	1,455	44.3	14,859	0.6	33	496	15.1	5,265	0.7	55
85 and older	959	43.0	9,076	0.5	21	896	40.2	8,833	0.6	31	138	6.2	1,266	0.7	47
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7C

Dual Eligible Beneficiaries

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

- a. Table D.7C includes the beneficiaries represented by Cell G 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 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 2002. 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	ANTIHYPERTENSIVE				CALCIUM BLOCKERS				Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	No. of Bene Mos
	No. of Users	Users as % of Dual Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users									
All	20,167	33.7 %	217,292	0.7	\$27	10,060	16.8 %	108,326	0.8	\$36	59,858	631,554					
Female	13,850	36.4	149,597	0.7	27	7,506	19.7	81,048	0.8	36	38,042	401,689					
Disabled	3,505	24.7	39,499	0.7	26	1,598	11.3	18,131	0.7	34	14,188	157,315					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24					
6-14	3	150.0	36	0.7	56	1	50.0	12	0.7	78	2	24					
15-20	6	10.7	65	0.3	11	4	7.1	41	0.6	25	56	611					
21-44	652	11.8	7,414	0.6	22	283	5.1	3,230	0.6	28	5,517	61,772					
45-64	2,326	31.5	26,344	0.7	27	1,061	14.4	12,137	0.7	35	7,389	82,109					
65-74	270	39.3	2,825	0.7	27	120	17.5	1,281	0.7	36	687	7,051					
75-84	189	47.6	2,147	0.7	27	92	23.2	1,037	0.8	39	397	4,313					
85 and older	59	42.8	668	0.8	28	37	26.8	393	0.7	30	138	1,411					
Other Eligibles	10,345	43.4	110,098	0.8	28	5,908	24.8	62,917	0.8	37	23,854	244,374					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
6-14	0	0.0	0	0.0	0	1	100.0	7	0.6	26	1	7					
15-20	1	33.3	12	0.5	12	1	33.3	12	0.1	7	3	20					
21-44	11	7.0	84	0.5	10	5	3.2	51	0.4	26	157	1,193					
45-64	3	12.5	28	0.7	27	0	0.0	0	0.0	0	24	155					
65-74	2,552	48.3	28,302	0.7	27	1,304	24.7	14,445	0.8	36	5,289	56,863					
75-84	3,843	47.7	41,499	0.7	28	2,179	27.0	23,476	0.8	36	8,063	83,923					
85 and older	3,935	38.1	40,173	0.8	28	2,418	23.4	24,926	0.9	37	10,317	102,213					
Male	6,317	29.0	67,695	0.7	26	2,554	11.7	27,278	0.8	36	21,816	229,865					
Disabled	2,872	21.5	32,356	0.7	25	1,101	8.3	12,373	0.7	37	13,334	147,554					
5 and younger	2	66.7	24	0.9	18	0	0.0	0	0.0	0	3	27					
6-14	5	100.0	60	0.8	24	1	20.0	12	0.4	16	5	60					
15-20	16	19.5	189	0.6	18	5	6.1	60	0.9	61	82	938					
21-44	897	13.5	10,287	0.7	25	316	4.8	3,597	0.7	35	6,633	74,515					
45-64	1,756	29.0	19,727	0.7	26	704	11.6	7,860	0.7	37	6,056	66,470					
65-74	137	34.2	1,419	0.6	23	53	13.2	600	0.8	44	401	3,984					
75-84	50	38.5	551	0.7	24	19	14.6	217	0.7	47	130	1,332					
85 and older	9	37.5	99	0.8	23	3	12.5	27	1.0	41	24	228					
Other Eligibles	3,445	40.6	35,339	0.7	26	1,453	17.1	14,905	0.8	35	8,482	82,311					
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	11					
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					
15-20	3	100.0	36	0.4	23	0	0.0	0	0.0	0	3	34					
21-44	8	7.2	63	0.5	24	3	2.7	25	0.8	52	111	844					
45-64	24	42.9	226	0.4	14	7	12.5	75	0.4	27	56	399					
65-74	1,181	42.3	12,682	0.7	26	514	18.4	5,463	0.8	36	2,793	28,860					
75-84	1,394	42.4	14,244	0.7	25	594	18.1	6,122	0.8	34	3,288	31,830					
85 and older	835	37.4	8,088	0.8	27	335	15.0	3,220	0.8	35	2,230	20,333					
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0					

Table D7D

Dual Eligible Beneficiaries

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

a. Table D.7D includes the beneficiaries represented by Cell G 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 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 2002. 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 D.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

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	\$266	6.3	12,204	130,738
Age				
0-64	379	7.0	862	9,702
65-74	343	7.2	1,337	14,633
75-84	295	6.9	3,669	39,046
85 and older	216	5.7	6,336	67,357
Unknown	0	0.0	0	0
Gender				
Female	262	6.4	8,975	97,265
Male	278	6.1	3,229	33,473
Unknown	0	0.0	0	0
Race				
White	268	6.3	10,160	112,786
African American	279	6.5	95	1,107
Other/unknown	252	6.2	1,949	16,845
Basis of Eligibility^c				
Aged	257	6.3	11,321	120,815
Disabled	377	6.9	883	9,923
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

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

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2002 Medicaid enrollment. A total of 6,886 beneficiaries who were in nursing facilities for part of their enrollment and their 60,081 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 D.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

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	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total # of Rx	Total Rx \$	No. Residents	As % of Dual All-Year NF Residents	No. of Bene Mos			
																Patented Brand-Name	Off-Patent Brand-Name	Generic
Anti-infective Agents	0.3	0.2	0.0	0.2	\$16	\$12	\$1	\$2	\$45	\$72	\$70	\$15	32,964	\$1,488,908	8,513	69.8 %	94,436	
Biologics	0.1	0.0	0.0	0.0	2	1	0	1	19	17	0	22	346	6,709	325	2.7	3,635	
Antineoplastic Agents	0.7	0.3	0.0	0.3	98	72	5	21	133	207	120	61	3,110	414,493	391	3.2	4,219	
Endocrine/Metabolic Drugs	1.2	0.5	0.3	0.5	42	29	5	8	34	57	18	18	76,723	2,578,917	5,659	46.4	61,615	
Cardiovascular Agents	2.1	0.5	0.2	1.4	53	23	5	24	25	49	23	17	204,906	5,020,897	8,837	72.4	95,393	
Respiratory Agents	0.7	0.3	0.0	0.4	34	21	2	11	46	71	50	27	36,472	1,671,848	4,482	36.7	49,610	
Gastrointestinal Agents	1.0	0.2	0.0	0.7	39	23	1	15	39	96	61	20	67,056	2,607,656	6,148	50.4	67,382	
Genitourinary Agents	0.7	0.5	0.0	0.2	39	35	0	4	57	70	39	20	22,686	1,283,574	2,963	24.3	32,839	
CNS Drugs	1.6	0.9	0.1	0.7	106	81	7	18	65	93	72	28	144,990	9,396,943	8,112	66.5	88,327	
Stimulants/Anti-obesity/Anorexia	0.7	0.1	0.0	0.5	31	20	1	10	47	147	40	21	622	29,429	82	0.7	941	
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	102	101	0	1	123	125	0	29	9,549	1,174,567	1,088	8.9	11,539	
Analgesics and Anesthetics	1.0	0.3	0.1	0.6	43	28	4	11	43	103	50	17	64,402	2,796,310	5,952	48.8	64,969	
Neuromuscular Agents	1.3	0.4	0.2	0.7	73	38	11	24	56	89	52	36	47,665	2,646,754	3,284	26.9	36,208	
Nutritional Products	0.9	0.0	0.1	0.8	19	0	2	16	21	28	28	21	32,722	699,015	3,479	28.5	37,772	
Hematological Agents	1.2	0.2	0.4	0.5	44	30	7	8	38	121	17	14	37,042	1,393,452	2,920	23.9	31,603	
Topical Products	0.5	0.2	0.0	0.3	18	12	1	6	35	56	40	20	40,577	1,437,338	6,931	56.8	77,777	
Miscellaneous Products	0.2	0.1	0.0	0.1	8	3	2	3	41	38	200	28	1,200	48,723	516	4.2	5,897	
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	5	0	0	0	17	0	0	0	3,979	66,403	1,117	9.2	12,563	
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.	827,011	34,761,936	n.a.	n.a.	n.a.	n.a.

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

- a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 6,886 beneficiaries who were in nursing facilities for part of their enrollment and their 60,081 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 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.
- 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 Iowa, 0.6 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

	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
Top 10 Drug Groups in Nursing Facilities	\$4,641,770	4,542	37.2 %	50,210	0.8	\$114	\$92
ANTIPSYCHOTICS	3,828,491	7,290	59.7	80,323	0.9	55	48
ANTIDEPRESSANTS	2,110,951	5,830	47.8	64,286	0.7	47	33
ULCER DRUGS	1,994,209	5,873	48.1	64,726	0.7	47	31
ANALGESICS - Narcotic	1,624,009	3,674	30.1	40,315	0.9	43	40
ANTI-DIABETIC	1,542,878	2,509	20.6	27,903	1.1	53	55
ANTICONVULSANT	1,459,016	4,303	35.3	46,764	0.9	35	31
ANTI-HYPERTENSIVE	1,307,110	3,880	31.8	42,632	0.6	52	31
ANTI-ASTHMATIC	1,174,567	1,080	8.8	11,479	0.8	123	102
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	992,181	2,243	18.4	24,423	0.9	43	41
CALCIUM BLOCKERS							
Total	20,675,182	41,224		453,061	n.a.	n.a.	n.a.

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

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 6,886 beneficiaries who were in nursing facilities for part of their enrollment and their 60,081 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 2002. 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 2002 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_mdmb.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 D.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}
DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	All Top 10 Drug Groups						ANTIPSYCHOTICS						ANTIDEPRESSANTS					
	No. of Rx	Rx \$	Users as %			Mean Rx \$	No. of Bene Mos among Users	Mean Rx \$	Users as %			Mean Rx \$	No. of Bene Mos among Users	Mean Rx \$				
			No. of Users	Residents	NF				No. of Users	Residents	NF							
All	363,963	\$20,675,182	4,542	37.2 %	50,210	0.8	\$92	7,290	59.7 %	80,323	0.9	\$48						
Female	269,082	15,080,716	3,182	35.5	35,555	0.8	90	5,461	60.8	60,784	0.9	48						
Disabled	17,190	1,208,745	218	49.7	2,492	0.9	134	324	73.8	3,690	0.9	56						
64 or younger	16,699	1,179,978	205	48.6	2,358	0.9	137	316	74.9	3,596	0.9	57						
65-74	217	13,155	6	85.7	70	1.0	87	4	57.1	46	1.0	59						
75-84	96	7,649	2	66.7	24	1.0	92	1	33.3	12	0.1	6						
85 and older	178	7,963	5	71.4	40	0.9	77	3	42.9	36	0.5	24						
Other Eligibles	251,892	13,871,971	2,964	34.7	33,063	0.8	86	5,137	60.2	57,094	0.9	47						
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
65-74	31,822	1,994,716	411	53.9	4,706	0.9	120	555	72.7	6,243	0.9	53						
75-84	89,132	5,056,327	1,063	42.4	11,836	0.8	91	1,724	68.8	19,135	0.9	48						
85 and older	130,938	6,820,928	1,490	28.3	16,521	0.7	73	2,858	54.3	31,716	0.9	45						
Male	94,881	5,594,466	1,360	42.1	14,655	0.8	99	1,829	56.6	19,539	0.9	48						
Disabled	15,855	1,099,504	236	53.2	2,703	0.9	121	242	54.5	2,774	0.9	63						
64 or younger	15,797	1,093,614	235	53.4	2,691	0.9	120	241	54.8	2,762	0.9	62						
65-74	58	5,890	1	25.0	12	1.3	263	1	25.0	12	1.0	74						
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
Other Eligibles	79,026	4,494,962	1,124	40.4	11,952	0.8	94	1,587	57.0	16,765	0.9	45						
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0						
65-74	19,474	1,237,787	257	45.6	2,890	0.9	131	356	63.2	3,894	0.9	49						
75-84	33,601	1,900,073	509	43.8	5,425	0.8	91	690	59.4	7,337	0.8	44						
85 and older	25,951	1,357,102	358	33.7	3,637	0.7	71	541	51.0	5,534	0.9	45						
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 2002 file for Iowa, released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 6,886 beneficiaries who were in nursing facilities for part of their enrollment and their 60,081 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 2002. 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 2002 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	ULCER DRUGS						ANALGESICS - Narcotic						ANTIDIABETIC					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx
All	5,830	47.8 %	0.7	5,873	48.1 %	0.7	64,286	64,726	0.7	3,674	30.1 %	0.9	40,315	40,315	0.9	\$40		
Female	4,304	48.0	0.7	4,667	52.0	0.7	47,847	51,879	0.7	2,634	29.3	0.9	29,191	29,191	0.9	40		
Disabled	194	44.2	0.7	212	48.3	0.8	2,255	2,406	0.8	153	34.9	1.0	1,726	1,726	1.0	49		
64 or younger	188	44.5	0.7	207	49.1	0.8	2,183	2,348	0.8	151	35.8	1.0	1,704	1,704	1.0	50		
65-74	0	0.0	0.0	4	57.1	0.2	0	46	0.2	1	14.3	0.9	10	10	0.9	9		
75-84	2	66.7	1.0	0	0.0	0.0	24	0	0.0	0	0.0	0.0	0	0	0.0	0		
85 and older	4	57.1	0.8	1	14.3	1.0	48	12	1.0	1	14.3	0.3	12	12	0.3	4		
Other Eligibles	4,110	48.1	0.7	4,455	52.2	0.7	45,592	49,473	0.7	2,481	29.1	0.9	27,465	27,465	0.9	40		
64 or younger	0	0.0	0.0	0	0.0	0.0	0	0	0.0	0	0.0	0.0	0	0	0.0	0		
65-74	409	53.6	0.7	442	57.9	0.7	4,618	4,910	0.7	364	47.7	1.0	4,073	4,073	1.0	46		
75-84	1,273	50.8	0.7	1,419	56.6	0.7	14,055	15,761	0.7	1,050	41.9	0.9	11,798	11,798	0.9	41		
85 and older	2,428	46.1	0.7	2,594	49.2	0.6	26,919	28,802	0.6	1,067	20.3	0.9	11,594	11,594	0.9	37		
Male	1,526	47.3	0.7	1,206	37.3	0.6	16,439	12,847	0.6	1,040	32.2	0.9	11,124	11,124	0.9	40		
Disabled	204	45.9	0.7	156	35.1	0.5	2,324	1,749	0.5	101	22.7	1.0	1,150	1,150	1.0	41		
64 or younger	202	45.9	0.7	156	35.5	0.5	2,300	1,749	0.5	99	22.5	1.0	1,126	1,126	1.0	41		
65-74	2	50.0	0.5	0	0.0	0.0	24	0	0.0	2	50.0	0.6	24	24	0.6	22		
75-84	0	0.0	0.0	0	0.0	0.0	0	0	0.0	0	0.0	0.0	0	0	0.0	0		
85 and older	0	0.0	0.0	0	0.0	0.0	0	0	0.0	0	0.0	0.0	0	0	0.0	0		
Other Eligibles	1,322	47.5	0.7	1,050	37.7	0.6	14,115	11,098	0.6	939	33.7	0.9	9,974	9,974	0.9	40		
64 or younger	0	0.0	0.0	0	0.0	0.0	0	0	0.0	0	0.0	0.0	0	0	0.0	0		
65-74	248	44.0	0.7	220	39.1	0.5	2,749	2,455	0.5	210	37.3	1.0	2,248	2,248	1.0	46		
75-84	531	45.7	0.7	401	34.5	0.5	5,662	4,180	0.5	433	37.3	0.9	4,728	4,728	0.9	41		
85 and older	543	51.2	0.7	429	40.4	0.6	5,704	4,463	0.6	296	27.9	0.9	2,998	2,998	0.9	35		
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		

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

- a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 6,886 beneficiaries who were in nursing facilities for part of their enrollment and their 60,081 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 2002. 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 2002 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	ANTICONVULSANT					ANTIHYPERTENSIVE					ANTIASTHMATIC				
	Users as %					Users as %					Users as %				
	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	2,509	20.6 %	27,903	1.1	\$55	4,303	35.3 %	46,764	0.9	\$31	3,880	31.8 %	42,632	0.6	\$31
Female	1,674	18.7	18,674	1.0	52	3,156	35.2	34,580	0.9	31	2,594	28.9	28,821	0.5	28
Disabled	278	63.3	3,102	1.2	75	101	23.0	1,105	1.0	34	113	25.7	1,334	0.7	43
64 or younger	272	64.5	3,048	1.2	75	95	22.5	1,045	1.0	33	108	25.6	1,274	0.7	44
65-74	5	71.4	42	1.5	84	1	14.3	10	1.0	41	1	14.3	12	0.1	1
75-84	0	0.0	0	0.0	0	2	66.7	24	1.0	52	2	66.7	24	0.2	10
85 and older	1	14.3	12	1.1	30	3	42.9	26	1.0	41	2	28.6	24	0.1	2
Other Eligibles	1,396	16.4	15,572	1.0	47	3,055	35.8	33,475	0.9	31	2,481	29.1	27,487	0.5	27
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	319	41.8	3,616	1.1	62	321	42.1	3,590	0.9	32	307	40.2	3,450	0.6	34
75-84	535	21.4	5,989	1.0	50	987	39.4	10,897	0.9	33	829	33.1	9,094	0.6	32
85 and older	542	10.3	5,967	0.9	35	1,747	33.2	18,988	0.9	30	1,345	25.5	14,943	0.4	23
Male	835	25.9	9,229	1.1	63	1,147	35.5	12,184	0.9	31	1,286	39.8	13,811	0.7	37
Disabled	298	67.1	3,496	1.2	80	100	22.5	1,125	0.9	34	143	32.2	1,574	0.7	37
64 or younger	298	67.7	3,496	1.2	80	99	22.5	1,113	0.9	34	143	32.5	1,574	0.7	37
65-74	0	0.0	0	0.0	0	1	25.0	12	0.4	20	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	537	19.3	5,733	1.0	52	1,047	37.6	11,059	0.9	31	1,143	41.0	12,237	0.7	36
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	203	36.1	2,265	1.1	68	201	35.7	2,195	0.9	33	259	46.0	2,828	0.8	40
75-84	210	18.1	2,252	1.0	42	469	40.4	4,972	0.9	30	452	38.9	4,898	0.7	37
85 and older	124	11.7	1,216	0.9	41	377	35.5	3,892	0.9	30	432	40.7	4,511	0.6	34
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 2002 file for Iowa, released by CMS in 07/2006. This table was produced on 04/19/2007.

a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 6,886 beneficiaries who were in nursing facilities for part of their enrollment and their 60,081 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 2002. 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 2002 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 D.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}
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL						CALCIUM BLOCKERS					
	Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Users	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean Rx \$
All	1,080	8.8 %	\$102	2,243	18.4 %	\$41	2,423	0.9	\$41	12,204	130,738	130,738
Female	818	9.1	102	1,779	19.8	41	19,495	0.9	41	8,975	97,265	97,265
Disabled	23	5.2	221	50	11.4	40	557	1.0	40	439	4,917	4,917
64 or younger	20	4.7	247	46	10.9	40	521	1.0	40	422	4,744	4,744
65-74	0	0.0	0	1	14.3	20	10	1.1	20	7	63	63
75-84	1	33.3	134	1	33.3	50	12	0.8	50	3	36	36
85 and older	2	28.6	26	2	28.6	35	14	1.0	35	7	74	74
Other Eligibles	795	9.3	99	1,729	20.3	41	18,938	0.9	41	8,536	92,348	92,348
64 or younger	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0
65-74	52	6.8	108	150	19.7	43	1,718	0.9	43	763	8,484	8,484
75-84	307	12.3	101	523	20.9	41	5,704	0.9	41	2,505	27,127	27,127
85 and older	436	8.3	96	1,056	20.0	41	11,516	0.9	41	5,268	56,737	56,737
Male	262	8.1	102	464	14.4	39	4,928	0.9	39	3,229	33,473	33,473
Disabled	17	3.8	174	42	9.5	42	474	0.9	42	444	5,006	5,006
64 or younger	17	3.9	174	42	9.5	42	474	0.9	42	440	4,958	4,958
65-74	0	0.0	0	0	0.0	0	0	0.0	0	4	48	48
75-84	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
Other Eligibles	245	8.8	97	422	15.2	39	4,454	0.9	39	2,785	28,467	28,467
64 or younger	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0
65-74	34	6.0	85	95	16.9	43	1,055	1.0	43	563	6,038	6,038
75-84	121	10.4	102	192	16.5	38	2,031	0.9	38	1,161	11,883	11,883
85 and older	90	8.5	96	135	12.7	38	1,368	0.9	38	1,061	10,546	10,546
Unknown	0	0.0	0	0	0.0	0	0	0.0	0	0	0	0

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

a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 6,886 beneficiaries who were in nursing facilities for part of their enrollment and their 60,081 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 2002. 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 2002 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 D.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG DUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 IOWA, 2002

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	Part D Excl Rx \$	\$ per Part D Excl Rx	Total Part D Excl Rx \$	Part D Excl Rx as % of All Dual Rx	Total No. of Benes
All	37,196	62.1 %	6.7	403,204	\$104	\$6,217,366	\$15	0.7 %	59,858
Age									
5 and younger	3	50.0	2.7	16	45	268	17	0.4	6
6-14	6	75.0	7.5	60	127	1,017	17	0.6	8
15-20	60	41.7	2.2	315	38	5,530	18	0.3	144
21-44	5,929	47.7	3.7	45,668	100	1,238,698	27	0.7	12,418
45-64	7,865	58.2	5.8	77,942	106	1,430,812	18	0.7	13,525
65-74	5,357	58.4	6.3	57,690	107	983,460	17	0.9	9,170
75-84	8,002	67.4	7.9	93,430	99	1,174,032	13	0.7	11,878
85 and older	9,974	78.5	10.1	128,083	109	1,383,549	11	0.6	12,709
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	22,530	70.5	8.5	272,762	108	3,443,636	13	0.7	31,966
Disabled	14,553	52.9	4.7	129,898	99	2,716,988	21	0.7	27,522
Adults	108	30.6	1.5	524	159	56,285	107	4.8	353
Children	5	29.4	1.2	20	27	457	23	0.6	17
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Gender									
Female	25,787	67.8	7.7	292,584	118	4,474,313	15	0.8	38,042
Male	11,409	52.3	5.1	110,620	80	1,743,053	16	0.5	21,816
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	31,148	63.5	7.1	348,214	111	5,430,609	16	0.7	49,040
African American	903	51.0	4.0	7,049	63	112,003	16	0.6	1,770
Other/unknown	5,145	56.9	5.3	47,941	75	674,754	14	0.7	9,048
Use of Nursing Facilities^d									
Entire year	10,264	84.1	13.1	159,546	146	1,786,392	11	0.5	12,204
Part year	5,842	84.8	9.2	63,467	115	788,560	12	0.7	6,886
None	21,090	51.7	4.4	180,191	89	3,642,414	20	0.8	40,768
Maintenance Assistance Status									
Cash	10,384	53.0	4.8	93,345	88	1,729,101	19	1.2	19,604
Medically needy	2,005	47.8	3.7	15,721	86	361,394	23	2.0	4,198
Poverty related	454	27.3	1.0	1,606	15	25,056	16	0.7	1,664
Other/unknown	24,353	70.8	8.5	292,532	119	4,101,815	14	0.5	34,392

Table D11

Dual Eligible Beneficiaries

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

- a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. 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 D.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 IOWA, 2002

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazapine \$ per Bene Mo.	No. of Bene Mos
	0.6	\$10	\$15	\$0	\$3	631,554
All						
Age						
5 and younger	0.3	4	17	0	0	62
6-14	0.7	11	17	0	3	91
15-20	0.2	3	18	0	1	1,603
21-44	0.3	9	27	0	4	138,324
45-64	0.5	10	18	0	4	149,133
65-74	0.6	10	17	0	3	96,758
75-84	0.8	10	13	0	3	121,398
85 and older	1.0	11	11	0	2	124,185
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.8	11	13	0	3	323,935
Disabled	0.4	9	21	0	4	304,869
Adults	0.2	21	107	0	2	2,625
Children	0.2	4	23	0	0	125
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.7	11	15	0	3	401,689
Male	0.5	8	16	0	3	229,865
Unknown	0.0	0	0	0	0	0
Race						
White	0.6	10	16	0	3	536,481
African American	0.4	6	16	0	2	19,497
Other/unknown	0.6	9	14	0	2	75,576
Use of Nursing Facilities^d						
Entire year	1.2	14	11	0	3	130,738
Part year	1.1	13	12	0	3	60,081
None	0.4	8	20	0	3	440,735
Maintenance Assistance Status						
Cash	0.4	8	19	0	3	220,164
Medically needy	0.4	9	23	0	3	41,367
Poverty related	0.1	1	16	0	1	16,793
Other/unknown	0.8	12	14	0	3	353,230

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

- a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. 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 D.13
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
 IOWA, 2002

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	59,466	\$105	\$6,217,366	100.0 %	403,204	\$15	100.0 %
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	43	17	719	0.0	67	11	0.0
Cough and cold medications	10,234	60	611,384	9.8	29,486	21	7.3
Vitamins and minerals	11,422	163	1,862,656	30.0	85,117	22	21.1
Non-prescription drugs	21,982	46	1,001,290	16.1	172,987	6	42.9
Barbiturates	647	87	56,467	0.9	7,251	8	1.8
Benzodiazepines	14,073	142	2,005,123	32.3	104,359	19	25.9
Other Part D Excl Rx Drugs	1,065	638	679,727	10.9	3,937	173	1.0

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

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2002. 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 D11.

b. Includes OTC drugs as well as prescription drugs.

c. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. 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.

SUPPLEMENTAL TABLE 1E
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b}
 IOWA, 2002

Total Number of Dual Eligible Beneficiaries, Age 85+ 12,709
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$24,790,589
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,951

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	569	4.5 %	0	0.0 %
1-500	2,484	19.5	590,159	2.4
501-1,000	1,918	15.1	1,426,783	5.8
1,001-1,500	1,566	12.3	1,951,242	7.9
1,501-2,000	1,281	10.1	2,236,342	9.0
2,001-2,500	1,064	8.4	2,388,422	9.6
2,501-3,000	874	6.9	2,397,090	9.7
3,001-3,500	742	5.8	2,403,487	9.7
3,501-4,000	559	4.4	2,089,274	8.4
4,001-4,500	449	3.5	1,904,448	7.7
4,501-5,000	305	2.4	1,445,761	5.8
5,001-5,500	245	1.9	1,283,789	5.2
5,501-6,000	183	1.4	1,053,365	4.2
6,001-6,500	116	0.9	723,034	2.9
6,501-7,000	89	0.7	598,315	2.4
7,001-7,500	71	0.6	515,369	2.1
7,501-8,000	50	0.4	385,243	1.6
8,001-8,500	47	0.4	387,529	1.6
8,501-9,000	28	0.2	246,259	1.0
9,001-9,500	19	0.1	175,650	0.7
9,501-10,000	10	0.1	97,746	0.4
10,001+	40	0.3	491,282	2.0

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

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2002.

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

APPENDIX TABLE A.3

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	59,883	31,966	27,522	377	18	632,047	323,935	305,009	2,959	144	0
Age											
5 and younger	6	0	5	0	1	62	0	51	0	11	0
6-14	8	0	7	0	1	91	0	84	0	7	0
15-20	145	0	138	3	4	1,628	0	1,556	24	48	0
21-44	12,435	0	12,150	277	8	138,686	0	136,388	2,243	55	0
45-64	13,532	0	13,445	85	2	149,239	0	148,611	612	16	0
65-74	9,170	8,074	1,088	6	2	96,758	85,679	11,035	37	7	0
75-84	11,878	11,347	527	4	0	121,398	115,733	5,645	20	0	0
85 and older	12,709	12,545	162	2	0	124,185	122,523	1,639	23	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	38,058	23,661	14,188	198	11	402,008	242,938	157,410	1,577	83	0
Male	21,825	8,305	13,334	179	7	230,039	80,997	147,599	1,382	61	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	49,061	25,294	23,474	282	11	536,901	267,873	266,616	2,314	98	0
African American	1,773	560	1,184	29	0	19,533	6,236	13,066	231	0	0
Other/unknown	9,049	6,112	2,864	66	7	75,613	49,826	25,327	414	46	0
Use of Nursing Facilities^c											
Entire year	12,204	11,321	883	0	0	130,738	120,815	9,923	0	0	0
Part year	6,886	6,282	604	0	0	60,081	53,899	6,182	0	0	0
None	40,793	14,363	26,035	377	18	441,228	149,221	288,904	2,959	144	0
Maintenance Assistance Status											
Cash	19,623	5,536	13,933	153	1	220,529	63,132	156,162	1,226	9	0
Medically needy	4,198	2,419	1,635	139	5	41,373	23,999	16,304	1,024	46	0
Poverty related	1,665	838	766	57	4	16,831	8,759	7,577	459	36	0
Other/unknown	34,397	23,173	11,188	28	8	353,314	228,045	124,966	250	53	0
Dual Status^d											
Full dual, all year	56,026	29,908	25,744	356	18	591,413	302,234	286,284	2,751	144	0
Full dual, part year	3,857	2,058	1,778	21	0	40,634	21,701	18,725	208	0	0
Managed Care Status											
FFS all year	59,798	31,966	27,495	321	16	631,245	323,935	304,713	2,474	123	0
FFS part year, with Rx claims	57	0	26	30	1	563	0	284	270	9	0
FFS part year, no Rx claims	3	0	1	2	0	24	0	12	12	0	0
MC all year, with Rx claims	24	0	0	23	1	214	0	0	202	12	0
MC all year, no Rx claims	1	0	0	1	0	1	0	0	1	0	0

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

a. Table A.3 includes the beneficiaries represented by Cell F 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.

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid 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. 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; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.4
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 DUAL ELIGIBLE BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	Bene Mos in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G 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	59,883	632,047	59,858	631,554	0	493
FFS all year	59,798	631,245	59,798	631,245	0	0
FFS part year, with Rx claims	57	563	57	292	0	271
FFS part year, with no Rx claims	3	24	3	17	0	7
MC all year, with Rx claims	24	214	0	0	0	214
MC all year, with no Rx claims	1	1	0	0	0	1

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

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.