

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

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TABLE D.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 DUAL ELIGIBLE BENEFICIARIES, MINNESOTA, 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	70,293	27,837	41,813	617	26	0	661,864	200,032	457,799	3,826	207	0
Age												
5 and younger	5	0	5	0	0	0	58	0	58	0	0	0
6-14	16	0	14	0	2	0	161	0	140	0	21	0
15-20	194	0	176	2	16	0	2,049	0	1,917	13	119	0
21-44	19,703	0	19,260	435	8	0	215,619	0	212,845	2,707	67	0
45-64	21,748	2	21,579	167	0	0	237,334	21	236,270	1,043	0	0
65-74	8,670	7,937	720	13	0	0	64,251	58,093	6,095	63	0	0
75-84	9,725	9,686	39	0	0	0	71,226	70,921	305	0	0	0
85 and older	10,232	10,212	20	0	0	0	71,166	70,997	169	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	40,226	19,448	20,367	402	9	0	370,790	142,599	225,502	2,606	83	0
Male	30,067	8,389	21,446	215	17	0	291,074	57,433	232,297	1,220	124	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	60,753	24,848	35,467	419	19	0	576,156	181,153	392,076	2,771	156	0
African American	4,371	707	3,557	103	4	0	41,479	4,389	36,554	516	20	0
Other/unknown	5,169	2,282	2,789	95	3	0	44,229	14,490	29,169	539	31	0
Use of Nursing Facilities^c												
Entire year	9,149	7,734	1,414	1	0	0	67,835	52,323	15,509	3	0	0
Part year	7,074	5,459	1,606	9	0	0	52,798	35,867	16,866	65	0	0
None	54,070	14,644	38,793	607	26	0	541,231	111,842	425,424	3,758	207	0
Maintenance Assistance Status												
Cash	24,602	4,302	20,168	129	3	0	262,305	32,839	228,763	687	16	0
Medically needy	23,025	13,163	9,730	130	2	0	201,987	97,151	103,899	918	19	0
Poverty-related	1,196	648	529	18	1	0	11,326	5,989	5,210	118	9	0
Other/unknown	21,470	9,724	11,386	340	20	0	186,246	64,053	119,927	2,103	163	0
Dual Medicare Status^d												
Full dual, all year	67,223	25,847	40,744	606	26	0	632,837	181,977	446,921	3,732	207	0
Full dual, part year	3,070	1,990	1,069	11	0	0	29,027	18,055	10,878	94	0	0
Managed Care Status												
FFS all year	59,683	18,496	40,813	356	18	0	619,261	164,954	451,383	2,759	165	0
FFS part year, with Rx claims	8,621	7,580	855	180	6	0	35,929	29,317	5,754	821	37	0
FFS part year, no Rx claims	1,989	1,761	145	81	2	0	6,674	5,761	662	246	5	0

Source: Data for this table are from the MAX 2002 file for Minnesota, 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, MINNESOTA, 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	86.1 %	38.0	\$2,594	\$68	\$21,234	12.2 %	70,293
Age							
5 and younger	100.0	51.8	1,913	37	52,409	3.6	5
6-14	87.5	43.4	2,940	68	20,427	14.4	16
15-20	83.0	24.1	2,053	85	25,084	8.2	194
21-44	88.1	35.5	3,209	90	24,133	13.3	19,703
45-64	89.5	49.8	3,651	73	24,286	15.0	21,748
65-74	74.5	27.3	1,491	55	12,813	11.6	8,670
75-84	81.4	31.6	1,375	44	16,113	8.5	9,725
85 and older	89.7	33.3	1,263	38	21,082	6.0	10,232
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^c							
Aged	82.3	30.8	1,351	44	16,862	8.0	27,837
Disabled	89.0	43.2	3,443	80	24,392	14.1	41,813
Adults	70.5	15.3	1,122	74	4,171	26.9	617
Children	73.1	19.6	1,939	99	29,021	6.7	26
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	88.6	41.6	2,592	62	20,136	12.9	40,226
Male	82.8	33.3	2,596	78	22,703	11.4	30,067
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	87.4	39.8	2,686	68	22,581	11.9	60,753
African American	79.2	28.3	2,075	73	12,108	17.1	4,371
Other/unknown	77.7	25.6	1,949	76	13,120	14.9	5,169
Use of Nursing Facilities^d							
Entire year	95.7	48.3	2,261	47	33,906	6.7	9,149
Part year	91.3	39.2	2,001	51	22,670	8.8	7,074
None	83.8	36.1	2,728	76	18,902	14.4	54,070
Maintenance Assistance Status							
Cash	89.5	40.8	3,188	78	25,062	12.7	24,602
Medically needy	82.7	37.6	2,212	59	20,613	10.7	23,025
Poverty related	51.1	10.1	678	68	3,532	19.2	1,196
Other/unknown	87.9	36.9	2,428	66	18,500	13.1	21,470

Source: Data for this table are from the MAX 2002 file for Minnesota, 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, MINNESOTA, 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	4.0	\$276	12.2 %	13.9 %	18.8 %	11.3 %	27.8 %	22.0 %	6.2 %	\$2,255	70,293	661,864
Age												
5 and younger	4.5	165	3.6	0.0	0.0	20.0	40.0	40.0	0.0	4,518	5	58
6-14	4.3	292	14.4	12.5	6.3	0.0	50.0	31.3	0.0	2,030	16	161
15-20	2.3	194	8.2	17.0	42.3	8.8	23.2	7.2	1.5	2,375	194	2,049
21-44	3.2	293	13.3	11.9	27.8	13.9	27.0	15.7	3.7	2,205	19,703	215,619
45-64	4.6	335	15.0	10.5	16.9	10.9	28.8	24.9	8.0	2,225	21,748	237,334
65-74	3.7	201	11.6	25.5	18.2	9.5	22.1	18.0	6.6	1,729	8,670	64,251
75-84	4.3	188	8.5	18.6	13.7	9.4	26.2	25.1	6.9	2,200	9,725	71,226
85 and older	4.8	182	6.0	10.3	10.5	10.4	33.5	29.0	6.4	3,031	10,232	71,166
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	4.3	188	8.0	17.7	13.9	9.7	27.6	24.4	6.6	2,347	27,837	200,032
Disabled	3.9	315	14.1	11.0	22.0	12.3	28.0	20.6	6.0	2,228	41,813	457,799
Adults	2.5	181	26.9	29.5	27.6	13.0	19.6	8.6	1.8	673	617	3,826
Children	2.5	244	6.7	26.9	42.3	7.7	11.5	11.5	0.0	3,645	26	207
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	4.5	281	12.9	11.4	16.4	10.9	28.8	25.0	7.5	2,185	40,226	370,790
Male	3.4	268	11.4	17.2	22.0	11.8	26.3	18.1	4.6	2,345	30,067	291,074
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	4.2	283	11.9	12.6	17.5	11.3	28.5	23.4	6.6	2,381	60,753	576,156
African American	3.0	219	17.1	20.8	26.7	11.7	22.5	14.9	3.4	1,276	4,371	41,479
Other/unknown	3.0	228	14.9	22.3	27.2	11.1	23.4	12.0	4.0	1,533	5,169	44,229
use or nursing Facilities^d												
Entire year	6.5	305	6.7	4.3	5.4	7.1	30.6	38.6	14.0	4,573	9,149	67,835
Part year	5.3	268	8.8	8.7	11.5	10.8	31.7	27.5	9.8	3,037	7,074	52,798
None	3.6	273	14.4	16.2	22.1	12.1	26.8	18.5	4.4	1,888	54,070	541,231
Maintenance Assistance Status												
Cash	3.8	299	12.7	10.5	23.0	12.5	28.4	20.3	5.2	2,351	24,602	262,305
Medically needy	4.3	252	10.7	17.3	15.1	10.0	26.8	23.4	7.4	2,350	23,025	201,987
Poverty related	1.1	72	19.2	48.9	29.4	7.4	9.7	4.3	0.3	373	1,196	11,326
Other/unknown	4.3	280	13.1	12.1	17.5	11.5	29.0	23.5	6.4	2,133	21,470	186,246

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Minnesota, 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, MINNESOTA, 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	4.0	\$276	\$68	1.8	\$209	\$119	0.4	\$21	\$58	1.9	\$45	\$24
Age												
5 and younger	4.5	165	37	1.7	100	60	0.5	36	75	2.3	29	13
6-14	4.3	292	68	1.3	177	140	0.7	75	100	2.3	40	18
15-20	2.3	194	85	1.1	149	138	0.2	13	71	1.0	33	32
21-44	3.2	293	90	1.5	228	149	0.3	22	80	1.4	43	30
45-64	4.6	335	73	2.0	255	126	0.4	25	66	2.1	54	25
65-74	3.7	201	55	1.6	148	95	0.3	15	46	1.8	38	21
75-84	4.3	188	44	1.7	134	78	0.4	15	37	2.2	38	18
85 and older	4.8	182	38	1.7	128	74	0.5	15	29	2.5	38	15
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	4.3	188	44	1.7	135	81	0.4	15	35	2.2	38	17
Disabled	3.9	315	80	1.8	242	135	0.3	24	71	1.8	49	27
Adults	2.5	181	74	1.1	138	129	0.2	14	76	1.2	29	24
Children	2.5	244	99	1.0	209	215	0.3	13	48	1.2	22	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	4.5	281	62	2.0	213	109	0.4	21	52	2.1	47	22
Male	3.4	268	78	1.5	204	136	0.3	21	68	1.6	43	27
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	4.2	283	68	1.8	216	118	0.4	21	56	2.0	46	23
African American	3.0	219	73	1.2	165	134	0.3	18	64	1.5	36	25
Other/unknown	3.0	228	76	1.3	159	124	0.3	23	82	1.4	46	32
Use of Nursing Facilities^e												
Entire year	6.5	305	47	2.5	221	89	0.6	22	34	3.4	61	18
Part year	5.3	268	51	2.1	202	95	0.5	19	38	2.6	48	18
None	3.6	273	76	1.6	208	128	0.3	21	67	1.7	43	26
Maintenance Assistance Status												
Cash	3.8	299	78	1.7	228	132	0.3	23	69	1.8	48	27
Medically needy	4.3	252	59	1.8	190	107	0.4	19	47	2.1	44	21
Poverty related	1.1	72	68	0.5	55	116	0.1	6	59	0.5	11	23
Other/unknown	4.3	280	66	1.8	212	115	0.4	23	58	2.0	45	23

Source: Data for this table are from the MAX 2002 file for Minnesota, 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 Minnesota, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE D.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, MINNESOTA, 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	Total	No. Dual Benes	As % of Benes	No. of Bene Mos				
														Generic	Generic	Generic	Generic
Anti-infective Agents	0.4	0.2	0.0	0.2	\$26	\$22	\$2	\$3	\$73	\$131	\$84	\$17	122,402	\$8,901,885	32,309	46.0 %	339,790
Biologics	0.1	0.1	0.0	0.0	44	1	20	22	374	19	4,845	621	2,101	785,608	1,691	2.4	17,980
Antineoplastic Agents	0.6	0.3	0.0	0.2	172	155	3	14	285	472	90	57	8,929	2,542,799	1,508	2.1	14,779
Endocrine/Metabolic Drugs	0.9	0.4	0.2	0.3	39	27	5	6	41	65	27	19	247,823	10,227,537	26,511	37.7	264,854
Cardiovascular Agents	1.5	0.5	0.2	0.9	52	32	6	14	34	70	34	15	492,381	16,794,346	34,475	49.0	325,184
Respiratory Agents	0.8	0.5	0.1	0.3	48	36	6	6	60	76	83	23	166,754	9,937,098	19,787	28.1	206,469
Gastrointestinal Agents	0.8	0.4	0.0	0.3	60	51	2	7	80	120	133	24	176,259	14,137,327	23,334	33.2	233,846
Genitourinary Agents	0.5	0.4	0.0	0.2	30	27	0	3	57	75	45	18	45,184	2,556,646	8,267	11.8	84,398
CNS Drugs	1.6	0.8	0.1	0.7	167	132	10	25	106	160	124	38	625,631	66,399,339	39,399	56.0	398,375
Stimulants/Anti-obesity/Anorexia	0.6	0.3	0.1	0.3	51	34	6	12	87	133	78	45	11,092	968,933	1,712	2.4	18,993
Miscellaneous Psychological/Neurological Agents	0.4	0.4	0.0	0.1	61	55	0	6	140	150	0	87	16,627	2,326,142	3,876	5.5	38,186
Analgesics and Anesthetics	0.8	0.2	0.1	0.5	45	32	4	9	58	133	68	19	240,122	13,997,366	30,539	43.4	310,554
Neuromuscular Agents	1.2	0.6	0.1	0.5	92	75	6	12	80	135	56	24	267,793	21,496,584	21,858	31.1	232,499
Nutritional Products	0.6	0.0	0.1	0.5	13	0	2	11	21	43	20	20	53,728	1,109,252	9,215	13.1	86,221
Hematological Agents	0.8	0.2	0.1	0.5	41	32	3	6	53	193	22	13	67,269	3,561,967	9,459	13.5	87,801
Topical Products	0.4	0.2	0.0	0.2	15	10	2	4	36	60	45	18	112,101	4,048,824	24,777	35.2	261,500
Miscellaneous Products	0.7	0.2	0.1	0.3	149	94	32	24	223	397	256	77	10,591	2,363,577	1,509	2.1	15,849
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	8	0	0	0	29	0	0	0	5,539	158,407	1,891	2.7	20,363
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.	2,672,326	182,313,637	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Minnesota, 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 Minnesota, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE D.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 DUAL ELIGIBLE BENEFICIARIES, MINNESOTA, 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	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$42,974,309	25,275	36.0 %	270,284	0.9	\$183	\$159
ANTIDEPRESSANTS	18,939,629	40,531	57.7	417,125	0.7	67	45
ANTICONVULSANT	18,885,265	20,638	29.4	223,488	0.9	95	85
ULCER DRUGS	11,300,329	23,081	32.8	234,673	0.6	83	48
ANALGESICS - Narcotic	7,053,606	31,959	45.5	332,326	0.4	50	21
ANTHYPERLIPIDEMIC	6,037,481	11,057	15.7	114,954	0.6	84	53
ANTIDIABETIC	5,841,779	15,109	21.5	148,134	0.7	54	39
ANTIASTHMATIC	5,397,680	19,868	28.3	203,557	0.5	57	27
ANALGESICS - ANTI-INFLAMMATORY	4,417,293	18,891	26.9	202,037	0.4	61	22
ANTHYPERTENSIVE	3,944,723	18,494	26.3	176,009	0.6	35	22
Total	124,792,094	224,903		2,322,587	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Minnesota, 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, MINNESOTA, 2002

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS			
	No. of Rx	Rx \$	No. of Users	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	Users as % of Dual Benes	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx
All	1,453,457	\$124,792,094	25,275	0.9	36.0 %	270,284	\$159	0.9	57.7 %	40,531	\$45	0.7
Female	866,772	69,088,817	13,352	0.8	33.2	140,969	138	0.8	65.4	26,289	45	0.7
Disabled	575,007	52,361,279	9,598	0.8	47.1	110,404	153	0.8	83.0	16,895	49	0.7
5 and younger	0	0	0	0.0	0.0	0	0	0.0	0.0	0	0	0.0
6-14	72	2,348	0	0.0	0.0	0	0	0.0	20.0	2	7	0.7
15-20	995	88,104	28	0.7	36.8	310	81	0.7	64.5	49	34	0.5
21-44	209,392	20,624,212	4,341	0.8	50.1	49,986	149	0.8	82.2	7,113	49	0.6
45-64	355,272	30,965,193	5,110	0.9	45.7	58,935	158	0.9	84.9	9,506	49	0.7
65-74	8,824	651,619	114	0.7	29.2	1,129	110	0.7	54.4	212	42	0.7
75-84	323	22,639	3	1.5	12.0	29	199	1.5	24.0	6	35	0.6
85 and older	129	7,164	2	0.5	11.8	15	47	0.5	41.2	7	3	0.4
Other Eligibles	291,765	16,727,538	3,754	0.7	18.9	30,565	82	0.7	47.3	9,394	35	0.7
5 and younger	0	0	0	0.0	0.0	0	0	0.0	0.0	0	0	0.0
6-14	15	669	0	0.0	0.0	0	0	0.0	100.0	1	0	0.5
15-20	47	1,685	2	0.3	28.6	16	19	0.3	14.3	1	34	0.5
21-44	2,586	199,893	48	0.5	15.7	446	79	0.5	54.6	167	39	0.5
45-64	1,048	76,836	12	0.5	12.8	93	77	0.5	55.3	52	45	0.5
65-74	71,974	4,831,231	791	0.8	16.9	6,926	108	0.8	43.3	2,025	34	0.6
75-84	105,327	5,882,907	1,260	0.7	18.7	10,165	76	0.7	46.8	3,148	35	0.7
85 and older	110,768	5,734,317	1,641	0.7	20.4	12,919	72	0.7	49.7	4,000	35	0.7
Male	586,685	55,703,277	11,923	0.9	39.7	129,315	182	0.9	47.4	14,242	46	0.7
Disabled	484,166	49,658,230	10,321	1.0	48.1	117,268	191	1.0	51.9	11,134	48	0.7
5 and younger	39	648	0	0.0	0.0	0	0	0.0	0.0	0	0	0.0
6-14	19	216	0	0.0	0.0	0	0	0.0	0.0	0	0	0.0
15-20	1,267	122,279	27	0.8	27.0	305	147	0.8	42.0	42	35	0.5
21-44	208,573	23,729,826	5,574	0.9	52.6	63,292	191	0.9	51.3	5,435	49	0.7
45-64	268,657	25,381,364	4,650	1.0	44.8	53,072	193	1.0	53.4	5,542	48	0.7
65-74	5,434	418,200	70	0.9	21.2	599	192	0.9	31.5	104	52	0.8
75-84	132	4,859	0	0.0	0.0	0	0	0.0	57.1	8	25	0.7
85 and older	45	838	0	0.0	0.0	0	0	0.0	100.0	3	19	1.3
Other Eligibles	102,519	6,045,047	1,602	0.7	18.6	12,047	96	0.7	36.1	3,108	35	0.7
5 and younger	0	0	0	0.0	0.0	0	0	0.0	0.0	0	0	0.0
6-14	7	50	0	0.0	0.0	0	0	0.0	0.0	0	0	0.0
15-20	42	6,778	3	0.4	27.3	30	77	0.4	0.0	0	0	0.0
21-44	771	68,480	16	0.6	11.7	94	111	0.6	32.1	44	33	0.4
45-64	821	67,756	6	0.6	8.0	56	45	0.6	25.3	19	35	0.6
65-74	37,888	2,586,035	528	0.8	16.1	4,180	131	0.8	28.6	937	35	0.7
75-84	37,052	2,009,444	583	0.7	19.7	4,303	81	0.7	38.4	1,136	34	0.7
85 and older	25,938	1,306,504	466	0.7	21.6	3,384	71	0.7	45.1	972	36	0.7
Unknown	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 Minnesota, 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, MINNESOTA, 2002

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					ANALGESICS - Narcotic				
	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	20,638	29.4 %	223,488	0.9	\$85	23,081	32.8 %	234,673	0.6	\$48	31,959	45.5 %	332,326	0.4	\$21
Female	11,478	28.5	123,281	0.8	78	14,665	36.5	148,029	0.6	48	20,877	51.9	216,571	0.4	21
Disabled	8,932	43.9	102,221	0.9	86	7,937	39.0	90,602	0.6	50	12,704	62.4	145,063	0.4	20
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	5	50.0	51	0.4	32	1	10.0	12	0.1	0
15-20	23	30.3	265	0.6	112	21	27.6	242	0.3	22	37	48.7	414	0.1	2
21-44	4,023	46.5	46,100	0.8	91	2,812	32.5	32,474	0.5	47	5,244	60.6	60,216	0.3	16
45-64	4,788	42.8	54,931	0.9	81	4,937	44.1	56,233	0.6	53	7,220	64.5	82,376	0.4	23
65-74	92	23.6	853	0.9	70	150	38.5	1,473	0.5	45	186	47.7	1,863	0.5	27
75-84	5	20.0	60	0.4	19	8	32.0	90	0.4	33	9	36.0	98	0.2	17
85 and older	1	5.9	12	0.6	44	4	23.5	39	0.3	20	7	41.2	84	0.5	19
Other Eligibles	2,546	12.8	21,060	0.8	41	6,728	33.9	57,427	0.6	45	8,173	41.2	71,508	0.5	22
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	100.0	12	0.3	13	0	0.0	0	0.0	0	1	100.0	12	0.2	1
15-20	2	28.6	20	0.7	36	2	28.6	20	0.4	6	6	85.7	45	0.4	4
21-44	69	22.5	576	0.5	54	69	22.5	659	0.3	34	179	58.5	1,553	0.3	11
45-64	18	19.1	138	0.6	68	21	22.3	189	0.4	33	58	61.7	543	0.3	6
65-74	770	16.5	6,553	0.8	48	1,528	32.7	13,692	0.5	46	1,905	40.8	17,882	0.5	22
75-84	894	13.3	7,455	0.8	39	2,290	34.1	19,863	0.6	45	2,711	40.3	24,041	0.5	22
85 and older	792	9.8	6,306	0.8	34	2,818	35.0	23,004	0.7	44	3,313	41.1	27,432	0.6	23
Male	9,160	30.5	100,207	0.9	92	8,416	28.0	86,644	0.6	48	11,082	36.9	115,755	0.4	22
Disabled	7,985	37.2	91,076	1.0	97	5,924	27.6	66,706	0.6	50	8,546	39.8	95,303	0.4	23
5 and younger	1	20.0	12	0.1	1	4	80.0	44	0.4	9	3	60.0	36	0.1	1
6-14	0	0.0	0	0.0	0	1	25.0	12	0.9	7	0	0.0	0	0.0	0
15-20	26	26.0	309	0.9	110	21	21.0	252	0.5	42	44	44.0	487	0.3	8
21-44	3,909	36.9	44,685	0.9	99	2,449	23.1	27,827	0.6	48	3,912	36.9	43,851	0.3	21
45-64	3,975	38.3	45,395	1.0	96	3,357	32.3	37,781	0.6	51	4,497	43.3	50,141	0.4	25
65-74	73	22.1	663	0.9	71	88	26.7	766	0.6	51	88	26.7	764	0.5	18
75-84	1	7.1	12	0.8	27	3	21.4	17	0.8	44	2	14.3	24	0.6	21
85 and older	0	0.0	0	0.0	0	1	33.3	7	1.0	46	0	0.0	0	0.0	0
Other Eligibles	1,175	13.6	9,131	0.8	45	2,492	28.9	19,938	0.6	43	2,536	29.4	20,452	0.5	19
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	1	100.0	9	0.1	2	0	0.0	0	0.0	0
15-20	1	9.1	5	0.6	255	2	18.2	22	0.6	138	1	9.1	5	0.2	2
21-44	26	19.0	181	0.6	80	20	14.6	189	0.4	60	38	27.7	322	0.4	18
45-64	12	16.0	88	0.9	89	23	30.7	197	0.4	40	33	44.0	232	0.8	95
65-74	516	15.7	4,259	0.9	55	808	24.6	6,795	0.6	45	883	26.9	7,287	0.4	21
75-84	405	13.7	3,083	0.8	33	890	30.0	7,290	0.6	41	886	29.9	7,365	0.5	17
85 and older	215	10.0	1,515	0.8	33	748	34.7	5,436	0.7	44	695	32.2	5,241	0.5	15
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 Minnesota, 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, MINNESOTA, 2002

Beneficiary Characteristics	ANTHYPERLIPIDEMIC					ANTIDIABETIC					ANTIASTHMATIC				
	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	11,057	15.7 %	114,954	0.6	\$53	15,109	21.5 %	148,134	0.7	\$39	19,868	28.3 %	203,557	0.5	\$27
Female	6,495	16.1	66,604	0.6	53	9,412	23.4	92,367	0.7	40	13,010	32.3	134,883	0.5	26
Disabled	3,488	17.1	39,655	0.6	55	4,475	22.0	50,541	0.7	46	7,839	38.5	89,528	0.4	26
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	2	20.0	16	0.1	1
15-20	3	3.9	36	0.5	66	6	7.9	70	0.6	31	12	15.8	128	0.5	25
21-44	714	8.2	8,316	0.6	47	1,112	12.8	12,929	0.7	45	2,805	32.4	32,386	0.4	21
45-64	2,651	23.7	30,167	0.6	56	3,187	28.5	35,941	0.7	46	4,827	43.1	55,162	0.5	28
65-74	115	29.5	1,093	0.6	59	155	39.7	1,453	0.7	43	179	45.9	1,696	0.5	33
75-84	4	16.0	31	0.3	18	13	52.0	140	0.3	28	13	52.0	128	0.5	21
85 and older	1	5.9	12	0.2	10	2	11.8	8	0.8	36	1	5.9	12	0.1	16
Other Eligibles	3,007	15.1	26,949	0.6	51	4,937	24.9	41,826	0.7	32	5,171	26.0	45,355	0.5	28
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	100.0	12	0.1	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	14.3	8	0.1	2
21-44	14	4.6	145	0.6	65	27	8.8	230	0.7	48	64	20.9	610	0.3	17
45-64	10	10.6	73	0.5	53	30	31.9	255	0.6	42	27	28.7	230	0.4	29
65-74	1,164	24.9	10,392	0.6	52	1,544	33.0	13,500	0.7	36	1,551	33.2	14,194	0.5	31
75-84	1,263	18.8	11,504	0.6	51	1,935	28.8	16,418	0.7	33	1,873	27.9	16,555	0.6	28
85 and older	555	6.9	4,823	0.7	49	1,401	17.4	11,423	0.8	27	1,655	20.5	13,758	0.5	23
Male	4,562	15.2	48,350	0.6	52	5,697	18.9	55,767	0.7	39	6,858	22.8	68,674	0.5	27
Disabled	3,369	15.7	38,264	0.6	52	3,544	16.5	39,147	0.7	42	4,413	20.6	49,070	0.5	26
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	60.0	34	0.1	3
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	3	3.0	36	0.7	30	5	5.0	60	0.3	16	29	29.0	316	0.3	24
21-44	1,058	10.0	12,159	0.6	48	1,001	9.4	11,128	0.7	42	1,670	15.8	18,585	0.4	20
45-64	2,233	21.5	25,413	0.6	54	2,423	23.3	26,968	0.7	42	2,571	24.8	28,830	0.5	29
65-74	74	22.4	645	0.6	54	111	33.6	953	0.8	41	135	40.9	1,250	0.7	40
75-84	1	7.1	11	0.2	21	4	28.6	38	0.5	15	4	28.6	48	0.1	7
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	33.3	7	0.9	16
Other Eligibles	1,193	13.8	10,086	0.6	49	2,153	25.0	16,620	0.7	32	2,445	28.4	19,604	0.6	30
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	9	6.6	60	0.6	56	5	3.6	34	1.4	68	19	13.9	183	0.4	29
45-64	13	17.3	102	0.5	52	19	25.3	160	0.6	56	16	21.3	123	0.7	25
65-74	625	19.1	5,425	0.6	48	857	26.1	6,812	0.7	37	904	27.6	7,399	0.6	34
75-84	423	14.3	3,533	0.6	51	817	27.6	6,296	0.7	28	881	29.7	7,198	0.6	29
85 and older	123	5.7	966	0.7	48	455	21.1	3,318	0.7	28	625	29.0	4,701	0.6	26
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 Minnesota, 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, MINNESOTA, 2002

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY				ANTIHYPERTENSIVE							
	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 Benes	No. of Bene Mos
All	18,891	26.9 %	202,037	0.4	\$22	18,494	26.3 %	176,009	0.6	\$22	70,293	661,864
Female	12,393	30.8	132,168	0.4	24	11,404	28.3	106,925	0.6	23	40,226	370,790
Disabled	8,165	40.1	94,233	0.3	21	4,085	20.1	46,144	0.6	22	20,367	225,502
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	5	50.0	60	0.7	11	10	103
15-20	20	26.3	228	0.1	2	13	17.1	152	0.3	8	76	821
21-44	3,255	37.6	37,811	0.3	16	830	9.6	9,561	0.6	19	8,657	96,886
45-64	4,746	42.4	54,775	0.4	24	3,075	27.5	34,891	0.6	23	11,192	123,884
65-74	135	34.6	1,332	0.5	34	151	38.7	1,368	0.7	27	390	3,452
75-84	4	16.0	37	0.3	21	6	24.0	69	0.5	19	25	209
85 and older	5	29.4	50	0.2	29	5	29.4	43	0.5	29	17	147
Other Eligibles	4,228	21.3	37,935	0.5	33	7,319	36.9	60,781	0.7	23	19,859	145,288
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	2	200.0	24	0.1	3	0	0.0	0	0.0	0	1	12
15-20	0	0.0	0	0.0	0	1	14.3	8	0.1	11	7	59
21-44	71	23.2	605	0.2	11	18	5.9	128	0.4	22	306	1,966
45-64	28	29.8	258	0.3	22	24	25.5	172	0.4	13	94	642
65-74	1,161	24.9	10,858	0.4	33	1,565	33.5	13,757	0.6	23	4,672	35,071
75-84	1,380	20.5	12,683	0.5	32	2,694	40.1	22,913	0.7	23	6,724	50,370
85 and older	1,586	19.7	13,507	0.5	34	3,017	37.5	23,803	0.7	23	8,055	57,168
Male	6,498	21.6	69,869	0.3	17	7,090	23.6	69,084	0.6	22	30,067	291,074
Disabled	5,129	23.9	58,293	0.3	15	4,133	19.3	45,865	0.6	23	21,446	232,297
5 and younger	1	20.0	10	0.1	3	3	60.0	32	0.4	3	5	58
6-14	0	0.0	0	0.0	0	1	25.0	8	1.0	16	4	37
15-20	22	22.0	255	0.2	8	10	10.0	119	0.6	7	100	1,096
21-44	2,306	21.7	26,251	0.3	11	1,188	11.2	13,198	0.6	22	10,603	115,959
45-64	2,745	26.4	31,286	0.3	19	2,818	27.1	31,520	0.6	23	10,387	112,386
65-74	55	16.7	491	0.4	22	104	31.5	915	0.6	24	330	2,643
75-84	0	0.0	0	0.0	0	8	57.1	66	0.5	14	14	96
85 and older	0	0.0	0	0.0	0	1	33.3	7	0.6	2	3	22
Other Eligibles	1,369	15.9	11,576	0.4	27	2,957	34.3	23,219	0.6	21	8,621	58,777
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	9	0.7	4	1	9
15-20	3	27.3	23	0.2	3	2	18.2	10	0.7	7	11	73
21-44	26	19.0	219	0.2	4	16	11.7	135	0.5	29	137	808
45-64	8	10.7	66	0.6	38	25	33.3	198	0.5	19	75	422
65-74	494	15.1	4,350	0.4	28	1,093	33.3	8,817	0.6	21	3,278	23,085
75-84	476	16.1	4,106	0.4	25	1,089	36.8	8,737	0.6	20	2,962	20,551
85 and older	362	16.8	2,812	0.5	30	731	33.9	5,313	0.7	21	2,157	13,829
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 Minnesota, 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, MINNESOTA, 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	\$305	6.5	9,149	67,835
Age				
0-64	516	7.8	1,325	14,814
65-74	350	7.1	828	5,692
75-84	272	6.6	2,403	16,005
85 and older	214	5.8	4,593	31,324
Unknown	0	0.0	0	0
Gender				
Female	283	6.5	6,387	46,649
Male	353	6.5	2,762	21,186
Unknown	0	0.0	0	0
Race				
White	300	6.5	8,660	64,242
African American	439	7.7	161	1,194
Other/unknown	369	6.1	328	2,399
Basis of Eligibility^c				
Aged	244	6.2	7,734	52,323
Disabled	509	7.7	1,414	15,509
Adults	0	0.0	1	3
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2002 file for Minnesota, 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 7,074 beneficiaries who were in nursing facilities for part of their enrollment and their 52,798 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, MINNESOTA, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users								
	Total	Patented	Off-Patent	Brand-Name	Off-Patent	Brand-Name	Total	Patented	Off-Patent	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
Anti-infective Agents	0.4	0.2	0.0	0.2	\$2	\$3	\$44	\$70	\$51	\$15	17,999	\$800,019	5,069	55.4 %	45,332			
Biologics	0.1	0.1	0.0	0.0	1	0	16	14	0	19	591	9,433	503	5.5	4,855			
Antineoplastic Agents	0.8	0.4	0.0	0.3	168	151	210	355	77	43	1,606	337,924	242	2.6	2,010			
Endocrine/Metabolic Drugs	1.2	0.5	0.3	0.4	38	26	30	53	19	13	39,304	1,197,198	3,997	43.7	31,627			
Cardiovascular Agents	2.1	0.4	0.3	1.4	46	22	22	52	26	13	101,454	2,264,437	6,439	70.4	48,912			
Respiratory Agents	1.0	0.5	0.1	0.4	48	31	48	64	74	25	20,649	980,841	2,396	26.2	20,581			
Gastrointestinal Agents	1.0	0.5	0.0	0.5	57	46	57	96	91	20	30,318	1,742,312	3,787	41.4	30,706			
Genitourinary Agents	0.7	0.4	0.0	0.2	32	28	50	66	29	20	9,106	452,620	1,605	17.5	13,978			
CNS Drugs	1.7	1.0	0.1	0.7	139	113	81	118	71	30	85,957	6,945,625	6,233	68.1	49,884			
Stimulants/Anti-obesity/Anorexia	0.9	0.1	0.1	0.7	29	12	34	123	44	21	1,030	34,754	124	1.4	1,199			
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	110	109	137	140	0	28	4,103	563,610	694	7.6	5,139			
Analgesics and Anesthetics	1.0	0.4	0.1	0.5	45	34	45	88	40	14	34,559	1,571,360	4,246	46.4	34,647			
Neuromuscular Agents	1.4	0.5	0.1	0.7	78	50	55	92	51	29	34,359	1,897,395	2,769	30.3	24,379			
Nutritional Products	0.8	0.0	0.1	0.7	14	0	17	18	16	17	15,972	269,130	2,323	25.4	18,823			
Hematological Agents	1.1	0.2	0.2	0.7	43	33	38	146	12	10	20,122	757,452	2,253	24.6	17,631			
Topical Products	0.6	0.2	0.0	0.3	18	12	31	52	38	16	23,279	720,314	4,352	47.6	39,359			
Miscellaneous Products	0.4	0.1	0.0	0.3	51	37	122	340	228	30	948	115,543	245	2.7	2,265			
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	8	0	22	0	0	0	977	21,944	305	3.3	2,889			
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.	442,333	20,681,911	n.a.	n.a.	n.a.			

Source: Data for this table are from the MAX 2002 file for Minnesota, 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 7,074 beneficiaries who were in nursing facilities for part of their enrollment and their 52,798 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 Minnesota, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

TABLE 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, MINNESOTA, 2002

Top 10 Drug Groups in Nursing Facilities	Users				Among Users		
	Total Medicaid Rx \$	No. of Users	As % of All-Year NF Residents	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ANTIPSYCHOTICS	\$4,394,073	3,599	39.3 %	31,953	0.9	\$147	\$138
ANTIDEPRESSANTS	2,153,500	6,015	65.7	48,983	0.9	51	44
ULCER DRUGS	1,427,188	3,594	39.3	29,704	0.8	63	48
ANTICONVULSANT	1,369,393	2,348	25.7	21,410	1.0	61	64
ANALGESICS - Narcotic	993,689	3,879	42.4	32,405	0.7	43	31
ANTIDIABETIC	704,144	2,417	26.4	19,982	1.0	37	35
ANTIASTHMATIC	653,066	2,704	29.6	22,727	0.6	45	29
ANTIHYPERTENSIVE	623,696	3,189	34.9	24,839	0.9	29	25
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	569,980	732	8.0	5,498	0.8	134	104
ANALGESICS - ANTI-INFLAMMATORY	497,501	1,850	20.2	16,185	0.6	55	31
Total	13,386,230	30,327		253,686	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Minnesota, 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 7,074 beneficiaries who were in nursing facilities for part of their enrollment and their 52,798 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); 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, MINNESOTA, 2002

Beneficiary Characteristics	All Top 10 Drug Groups										ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	No. of Rx	Rx \$	No. of Users	Users as %			Mean Rx \$	No. of Bene Mos among Users	Mean No. of Rx	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx	No. of Bene Mos among Users	Users as % of All-Year Residents	No. of Bene Mos among Users	Mean No. of Rx				
				39.3 %	31,953	0.9											65.7 %	48,983	0.9	
All	208,403	\$13,386,230	3,599	31,953	0.9	\$138	6,015	65.7 %	48,983	0.9	\$44									
Female	137,475	8,365,332	2,313	20,143	0.9	119	4,284	67.1	34,505	0.9	43									
Disabled	30,431	2,613,597	524	5,998	1.1	194	566	86.5	6,423	0.9	52									
64 or younger	29,158	2,530,769	499	5,750	1.1	198	541	88.1	6,199	0.9	52									
65-74	1,104	73,172	22	212	0.9	91	20	60.6	180	0.6	35									
75-84	126	8,589	2	24	1.6	220	3	100.0	28	0.6	44									
85 and older	43	1,067	1	12	0.4	35	2	50.0	16	1.3	8									
Other Eligibles	107,044	5,751,735	1,789	14,145	0.8	87	3,718	64.9	28,082	0.8	41									
64 or younger	0	0	0	0	0.0	0	0	0.0	0	0.0	0									
65-74	10,976	685,133	191	1,548	1.0	132	313	77.7	2,363	0.8	41									
75-84	35,161	1,870,624	589	4,642	0.8	86	1,210	73.6	9,038	0.9	42									
85 and older	60,907	3,195,978	1,009	7,955	0.7	79	2,195	59.5	16,681	0.8	41									
Male	70,928	5,020,898	1,286	11,810	1.0	169	1,731	62.7	14,478	0.9	46									
Disabled	34,845	2,972,780	600	6,725	1.2	222	536	70.5	5,985	0.9	51									
64 or younger	33,540	2,882,919	576	6,544	1.2	224	509	71.7	5,758	0.9	51									
65-74	1,259	88,335	24	181	0.9	179	26	53.1	215	0.9	60									
75-84	46	1,526	0	0	0.0	0	1	100.0	12	1.0	5									
85 and older	0	0	0	0	0.0	0	0	0.0	0	0.0	0									
Other Eligibles	36,083	2,048,118	686	5,085	0.8	99	1,195	59.7	8,493	0.8	42									
64 or younger	0	0	0	0	0.0	0	0	0.0	0	0.0	0									
65-74	7,207	473,029	166	1,158	1.1	145	212	61.8	1,456	0.9	44									
75-84	14,692	816,822	273	2,028	0.8	93	488	64.6	3,480	0.8	42									
85 and older	14,184	758,267	247	1,899	0.7	78	495	54.8	3,557	0.8	41									
Unknown	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 Minnesota, 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 7,074 beneficiaries who were in nursing facilities for part of their enrollment and their 52,798 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, MINNESOTA, 2002

Beneficiary Characteristics	ULCER DRUGS						ANTICONVULSANT						ANALGESICS - Narcotic					
	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	3,594	29,704	0.8	2,348	21,410	1.0	3,879	32,405	\$64	3,879	42.4 %	\$64	3,879	32,405	0.7	\$31		
Female	2,450	20,009	0.8	1,402	12,453	1.0	2,844	23,522	63	2,844	44.5	63	2,844	23,522	0.7	33		
Disabled	306	3,423	0.8	463	5,201	1.1	293	3,264	87	293	44.8	87	293	3,264	0.7	36		
64 or younger	288	3,264	0.8	439	5,004	1.1	276	3,085	87	276	45.0	87	276	3,085	0.7	37		
65-74	16	144	0.7	22	173	1.1	16	167	86	16	48.5	86	16	167	0.5	19		
75-84	1	12	1.1	2	24	0.3	3	0	3	0	0.0	3	0	0	0.0	0		
85 and older	1	3	1.0	0	0	0.0	0	0	19	0	0.0	19	0	0	0.0	4		
Other Eligibles	2,144	16,586	0.8	939	7,252	1.0	45	20,258	47	2,551	44.5	45	2,551	20,258	0.7	32		
64 or younger	0	0	0.0	0	0	0.0	0	0	0	0	0.0	0	0	0	0.0	0		
65-74	177	1,311	0.8	160	1,215	1.1	59	1,468	48	190	47.1	48	190	1,468	0.9	58		
75-84	651	4,901	0.8	350	2,717	1.0	44	5,664	49	733	44.6	44	733	5,664	0.8	33		
85 and older	1,316	10,374	0.8	429	3,320	0.9	42	13,126	45	1,628	44.2	42	1,628	13,126	0.7	29		
Male	1,144	9,695	0.8	946	8,957	1.1	66	8,883	50	1,035	37.5	66	1,035	8,883	0.7	25		
Disabled	348	3,869	0.8	521	5,892	1.1	77	3,533	54	318	41.8	77	318	3,533	0.8	28		
64 or younger	335	3,758	0.8	496	5,680	1.1	76	3,433	54	307	43.2	76	307	3,433	0.7	28		
65-74	12	99	0.9	24	200	1.1	84	100	55	11	22.4	84	11	100	1.5	21		
75-84	1	12	1.0	1	12	0.8	27	0	60	0	0.0	27	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		
Other Eligibles	796	5,826	0.7	425	3,065	0.9	46	5,350	48	717	35.8	46	717	5,350	0.6	23		
64 or younger	0	0	0.0	0	0	0.0	0	0	0	0	0.0	0	0	0	0.0	0		
65-74	127	907	0.8	135	1,034	1.1	57	674	56	108	31.5	57	108	674	0.7	27		
75-84	304	2,307	0.8	171	1,204	0.9	41	2,067	45	268	35.5	41	268	2,067	0.7	27		
85 and older	365	2,612	0.7	119	827	0.8	38	2,609	48	341	37.8	38	341	2,609	0.5	19		
Unknown	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 Minnesota, 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 7,074 beneficiaries who were in nursing facilities for part of their enrollment and their 52,798 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, MINNESOTA, 2002

Beneficiary Characteristics	ANTI-DIABETIC					ANTI-ASTHMATIC					ANTI-HYPERTENSIVE							
	Users as %					Users as %					Users as %							
	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$
All	2,417	19,982	1.0	\$35	1.0	2,704	22,727	0.6	\$29	0.6	3,189	24,839	0.9	\$25	3,189	24,839	0.9	\$25
Female	1,507	12,422	1.0	35	1.0	1,765	14,904	0.6	27	0.6	2,158	16,421	0.9	25	2,158	16,421	0.9	25
Disabled	180	1,975	1.1	47	1.1	274	3,041	0.7	36	0.7	163	1,788	0.9	28	163	1,788	0.9	28
64 or younger	161	1,805	1.1	45	1.1	265	2,948	0.7	36	0.7	148	1,660	0.9	28	148	1,660	0.9	28
65-74	17	162	1.2	79	1.2	5	45	0.5	22	0.5	14	124	1.0	37	14	124	1.0	37
75-84	0	0	0.0	0	0.0	4	48	1.0	38	1.0	0	0	0.0	0	0	0	0.0	0
85 and older	2	8	0.8	36	0.8	0	0	0.0	0	0.0	1	4	1.0	31	1	4	1.0	31
Other Eligibles	1,327	10,447	0.9	32	0.9	1,491	11,863	0.6	25	0.6	1,995	14,633	0.9	25	1,995	14,633	0.9	25
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	163	1,294	1.1	45	1.1	157	1,269	0.7	28	0.7	137	1,083	0.9	30	137	1,083	0.9	30
75-84	503	3,828	1.0	35	1.0	488	3,804	0.7	28	0.7	591	4,332	0.9	25	591	4,332	0.9	25
85 and older	661	5,325	0.9	27	0.9	846	6,790	0.5	23	0.5	1,267	9,218	0.9	24	1,267	9,218	0.9	24
Male	910	7,560	0.9	36	0.9	939	7,823	0.7	32	0.7	1,031	8,418	0.8	26	1,031	8,418	0.8	26
Disabled	286	3,163	1.0	40	1.0	292	3,181	0.7	31	0.7	277	3,087	0.9	28	277	3,087	0.9	28
64 or younger	261	2,963	0.9	39	0.9	277	3,077	0.7	31	0.7	258	2,927	0.9	28	258	2,927	0.9	28
65-74	25	200	1.2	58	1.2	14	92	0.8	27	0.8	18	148	0.9	30	18	148	0.9	30
75-84	0	0	0.0	0	0.0	1	12	1.1	1	1.1	1	12	1.0	34	1	12	1.0	34
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	624	4,397	0.9	34	0.9	647	4,642	0.7	32	0.7	754	5,331	0.8	24	754	5,331	0.8	24
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	121	777	1.0	44	1.0	96	613	0.6	38	0.6	136	929	0.9	24	136	929	0.9	24
75-84	281	1,921	0.9	32	0.9	281	2,021	0.7	36	0.7	309	2,201	0.8	25	309	2,201	0.8	25
85 and older	222	1,699	0.9	31	0.9	270	2,008	0.7	27	0.7	309	2,201	0.8	24	309	2,201	0.8	24
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 Minnesota, 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 7,074 beneficiaries who were in nursing facilities for part of their enrollment and their 52,798 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, MINNESOTA, 2002

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANALGESICS - ANTI-INFLAMMATORY							
	Users as %		Users as %		Mean Rx \$	Users as %		Users as %		Mean Rx \$			
	No. of Users	Residents	No. of Users	Residents		No. of Users	Residents	No. of Users	Residents				
	No. of Users	No. of Bene Mos among Users	Mean Rx \$	No. of Rx	No. of Bene Mos among Users	Mean Rx \$	No. of Rx	No. of Bene Mos among Users	Mean Rx \$	All-Year NF Residents	Bene Mos among All-Year NF Residents		
All	732	8.0 %	\$104	0.8	5,498	0.8	1,850	20.2 %	16,185	0.6	\$31	9,149	67,835
Female	509	8.0	100	0.8	3,888	0.8	1,302	20.4	11,326	0.6	32	6,387	46,649
Disabled	46	7.0	179	0.6	528	0.6	190	29.1	2,188	0.5	17	654	7,189
64 or younger	44	7.2	181	0.6	508	0.6	181	29.5	2,096	0.5	16	614	6,866
65-74	2	6.1	107	0.8	20	0.8	9	27.3	92	0.9	40	33	271
75-84	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	3	28
85 and older	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	4	24
Other Eligibles	463	8.1	88	0.8	3,360	0.8	1,112	19.4	9,138	0.6	36	5,733	39,460
64 or younger	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0	0
65-74	28	6.9	63	0.7	194	0.7	97	24.1	833	0.6	35	403	2,875
75-84	174	10.6	88	0.8	1,240	0.8	312	19.0	2,546	0.6	36	1,644	11,118
85 and older	261	7.1	91	0.8	1,926	0.8	703	19.1	5,759	0.6	35	3,686	25,467
Male	223	8.1	112	0.8	1,610	0.8	548	19.8	4,859	0.5	28	2,762	21,186
Disabled	43	5.7	144	0.6	459	0.6	165	21.7	1,887	0.4	18	760	8,320
64 or younger	43	6.1	144	0.6	459	0.6	163	23.0	1,867	0.4	18	710	7,945
65-74	0	0.0	0	0.0	0	0.0	2	4.1	20	0.4	24	49	363
75-84	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	1	12
85 and older	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0	0
Other Eligibles	180	9.0	99	0.9	1,151	0.9	383	19.1	2,972	0.6	34	2,002	12,866
64 or younger	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	1	3
65-74	29	8.5	101	1.0	134	1.0	64	18.7	504	0.6	41	343	2,183
75-84	75	9.9	99	0.9	521	0.9	140	18.5	1,083	0.5	29	755	4,847
85 and older	76	8.4	98	0.8	496	0.8	179	19.8	1,385	0.6	35	903	5,833
Unknown	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 Minnesota, 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 7,074 beneficiaries who were in nursing facilities for part of their enrollment and their 52,798 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}
 MINNESOTA, 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 \$	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx as % of All Dual Rx \$	Total No. of Benes
	41,678	59.3 %	7.2	505,376	\$106	\$7,440,763	\$15	4.1 %	70,293
Age									
5 and younger	3	60.0	12.0	60	124	618	10	6.5	5
6-14	12	75.0	6.8	108	68	1,082	10	2.3	16
15-20	72	37.1	3.3	642	71	13,682	21	3.4	194
21-44	9,959	50.5	5.3	103,991	120	2,359,878	23	3.7	19,703
45-64	13,716	63.1	8.9	192,548	135	2,925,551	15	3.7	21,748
65-74	4,164	48.0	4.9	42,303	64	557,676	13	4.3	8,670
75-84	5,926	60.9	6.8	66,318	72	704,647	11	5.3	9,725
85 and older	7,826	76.5	9.7	99,406	86	877,629	9	6.8	10,232
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	17,456	62.7	7.3	202,814	74	2,065,400	10	5.5	27,837
Disabled	24,012	57.4	7.2	301,441	128	5,348,568	18	3.7	41,813
Adults	201	32.6	1.6	1,010	40	24,677	24	3.6	617
Children	9	34.6	4.3	111	81	2,118	19	4.2	26
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Gender									
Female	26,090	64.9	8.2	328,478	117	4,700,849	14	4.5	40,226
Male	15,588	51.8	5.9	176,898	91	2,739,914	15	3.5	30,067
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	36,895	60.7	7.6	463,165	107	6,490,060	14	4.0	60,753
African American	2,284	52.3	4.7	20,756	105	457,293	22	5.0	4,371
Other/unknown	2,499	48.3	4.2	21,455	95	493,410	23	4.9	5,169
Use of Nursing Facilities^d									
Entire year	8,026	87.7	14.6	133,227	135	1,237,210	9	6.0	9,149
Part year	5,625	79.5	8.9	62,993	93	657,627	10	4.6	7,074
None	28,027	51.8	5.7	309,156	103	5,545,926	18	3.8	54,070
Maintenance Assistance Status									
Cash	14,319	58.2	7.0	172,029	119	2,935,518	17	3.7	24,602
Medically needy	14,173	61.6	8.3	191,229	101	2,329,647	12	4.6	23,025
Poverty related	267	22.3	1.2	1,405	19	22,526	16	2.8	1,196
Other/unknown	12,919	60.2	6.6	140,713	100	2,153,072	15	4.1	21,470

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Minnesota, 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}
 MINNESOTA, 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
	0.8	\$11	\$15	\$0	\$3	661,864
All						
Age						
5 and younger	1.0	11	10	0	1	58
6-14	0.7	7	10	0	0	161
15-20	0.3	7	21	0	1	2,049
21-44	0.5	11	23	0	3	215,619
45-64	0.8	12	15	0	4	237,334
65-74	0.7	9	13	0	2	64,251
75-84	0.9	10	11	0	2	71,226
85 and older	1.4	12	9	0	1	71,166
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	1.0	10	10	0	2	200,032
Disabled	0.7	12	18	0	3	457,799
Adults	0.3	6	24	0	2	3,826
Children	0.5	10	19	3	4	207
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.9	13	14	0	3	370,790
Male	0.6	9	15	0	3	291,074
Unknown	0.0	0	0	0	0	0
Race						
White	0.8	11	14	0	3	576,156
African American	0.5	11	22	0	1	41,479
Other/unknown	0.5	11	23	0	3	44,229
Use of Nursing Facilities^d						
Entire year	2.0	18	9	0	3	67,835
Part year	1.2	12	10	0	3	52,798
None	0.6	10	18	0	3	541,231
Maintenance Assistance Status						
Cash	0.7	11	17	0	3	262,305
Medically needy	0.9	12	12	0	3	201,987
Poverty related	0.1	2	16	0	1	11,326
Other/unknown	0.8	12	15	0	3	186,246

Source: Data for this table are from the MAX 2002 file for Minnesota, 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}
 MINNESOTA, 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	62,438	\$119	\$7,440,763	100.0 %	505,376	\$15	100.0 %
Anorexia or weight loss/gain	3	114	341	0.0	10	34	0.0
Fertility drugs	2	104	207	0.0	5	41	0.0
Drugs for cosmetic purposes	63	20	1,274	0.0	123	10	0.0
Cough and cold medications	3,650	172	627,652	8.4	11,832	53	2.3
Vitamins and minerals	8,618	124	1,069,136	14.4	50,541	21	10.0
Non-prescription drugs	34,324	79	2,716,925	36.5	344,089	8	68.1
Barbiturates	682	90	61,099	0.8	7,249	8	1.4
Benzodiazepines	13,525	139	1,880,256	25.3	84,896	22	16.8
Other Part D Excl Rx Drugs	1,571	690	1,083,873	14.6	6,631	163	1.3

Source: Data for this table are from the MAX 2002 file for Minnesota, 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 1
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES^{a, b}
 MINNESOTA, 2002

Total Number of Dual Eligible Beneficiaries 70,293
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries \$182,313,637
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary \$2,594

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	9,745	13.9 %	\$0	0.0 %
1-500	16,207	23.1	3,294,891	1.8
501-1,000	7,932	11.3	5,811,756	3.2
1,001-1,500	5,676	8.1	7,039,057	3.9
1,501-2,000	4,304	6.1	7,483,071	4.1
2,001-2,500	3,525	5.0	7,913,471	4.3
2,501-3,000	3,012	4.3	8,285,244	4.5
3,001-3,500	2,460	3.5	7,979,204	4.4
3,501-4,000	2,100	3.0	7,849,482	4.3
4,001-4,500	1,847	2.6	7,837,558	4.3
4,501-5,000	1,566	2.2	7,435,031	4.1
5,001-5,500	1,416	2.0	7,422,793	4.1
5,501-6,000	1,214	1.7	6,971,278	3.8
6,001-6,500	1,089	1.5	6,794,683	3.7
6,501-7,000	934	1.3	6,302,299	3.5
7,001-7,500	820	1.2	5,939,789	3.3
7,501-8,000	659	0.9	5,108,728	2.8
8,001-8,500	636	0.9	5,241,992	2.9
8,501-9,000	558	0.8	4,883,939	2.7
9,001-9,500	477	0.7	4,412,582	2.4
9,501-10,000	451	0.6	4,394,725	2.4
10,001+	3,665	5.2	53,912,064	29.6

Source: Data for this table are from the MAX 2002 file for Minnesota, 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.

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

Total Number of Dual Eligible Beneficiaries, Age 85+ 10,232
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$12,918,181
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$1,263

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	1,056	10.3 %	0	0.0 %
1-500	3,497	34.2	762,122	5.9
501-1,000	1,654	16.2	1,202,309	9.3
1,001-1,500	1,039	10.2	1,276,788	9.9
1,501-2,000	740	7.2	1,277,618	9.9
2,001-2,500	522	5.1	1,170,686	9.1
2,501-3,000	451	4.4	1,236,724	9.6
3,001-3,500	326	3.2	1,060,165	8.2
3,501-4,000	228	2.2	853,110	6.6
4,001-4,500	202	2.0	857,567	6.6
4,501-5,000	136	1.3	644,001	5.0
5,001-5,500	114	1.1	596,696	4.6
5,501-6,000	65	0.6	372,090	2.9
6,001-6,500	61	0.6	379,802	2.9
6,501-7,000	41	0.4	277,172	2.1
7,001-7,500	25	0.2	180,961	1.4
7,501-8,000	17	0.2	131,843	1.0
8,001-8,500	12	0.1	97,677	0.8
8,501-9,000	9	0.1	79,123	0.6
9,001-9,500	6	0.1	55,512	0.4
9,501-10,000	7	0.1	67,801	0.5
10,001+	24	0.2	338,414	2.6

Source: Data for this table are from the MAX 2002 file for Minnesota, 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, MINNESOTA, 2002

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	103,611	60,434	42,149	987	41	1,089,004	614,841	465,585	8,174	404	0
Age											
5 and younger	5	0	5	0	0	58	0	58	0	0	0
6-14	16	0	14	0	2	168	0	144	0	24	0
15-20	207	0	177	2	28	2,270	0	1,970	17	283	0
21-44	19,925	0	19,290	624	11	220,178	0	214,765	5,316	97	0
45-64	21,947	2	21,638	307	0	240,479	24	237,997	2,458	0	0
65-74	17,938	16,951	935	52	0	190,798	180,648	9,791	359	0	0
75-84	20,933	20,869	63	1	0	215,454	214,846	596	12	0	0
85 and older	22,640	22,612	27	1	0	219,599	219,323	264	12	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	64,953	43,788	20,564	582	19	685,677	450,480	229,970	5,041	186	0
Male	38,658	16,646	21,585	405	22	403,327	164,361	235,615	3,133	218	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	89,058	52,617	35,731	679	31	935,482	531,552	397,970	5,663	297	0
African American	5,634	1,881	3,584	162	7	59,038	20,081	37,487	1,399	71	0
Other/unknown	8,919	5,936	2,834	146	3	94,484	63,208	30,128	1,112	36	0
Use of Nursing Facilities^c											
Entire year	22,017	20,552	1,464	1	0	223,671	207,416	16,252	3	0	0
Part year	9,724	8,092	1,623	9	0	89,195	71,865	17,244	86	0	0
None	71,870	31,790	39,062	977	41	776,138	335,560	432,089	8,085	404	0
Maintenance Assistance Status											
Cash	37,420	16,830	20,363	221	6	426,981	191,894	232,932	2,093	62	0
Medically needy	36,597	26,645	9,796	154	2	376,054	269,140	105,400	1,495	19	0
Poverty related	1,209	660	529	18	2	12,412	6,945	5,300	143	24	0
Other/unknown	28,385	16,299	11,461	594	31	273,557	146,862	121,953	4,443	299	0
Dual Status^d											
Full dual, all year	100,538	58,443	41,080	975	40	1,056,795	593,794	454,566	8,043	392	0
Full dual, part year	3,073	1,991	1,069	12	1	32,209	21,047	11,019	131	12	0
Managed Care Status											
FFS all year	59,683	18,496	40,813	356	18	619,261	164,954	451,383	2,759	165	0
FFS part year, with Rx claims	8,621	7,580	855	180	6	87,602	76,458	9,323	1,757	64	0
FFS part year, no Rx claims	1,989	1,761	145	81	2	19,050	17,067	1,305	659	19	0
MC all year, with Rx claims	75	44	31	0	0	867	495	372	0	0	0
MC all year, no Rx claims	33,243	32,553	305	370	15	362,224	355,867	3,202	2,999	156	0

Source: Data for this table are from the MAX 2002 file for Minnesota, 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, MINNESOTA, 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	103,611	1,089,004	70,293	661,864	0	427,140
FFS all year	59,683	619,261	59,683	619,261	0	0
FFS part year, with Rx claims	8,621	87,602	8,621	35,929	0	51,673
FFS part year, with no Rx claims	1,989	19,050	1,989	6,674	0	12,376
MC all year, with Rx claims	75	867	0	0	0	867
MC all year, with no Rx claims	33,243	362,224	0	0	0	362,224

Source: Data for this table are from the MAX 2002 file for Minnesota, 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.