

**STATISTICAL COMPENDIUM:  
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2002  
OHIO**

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TABLE D.2  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 2002

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>219,109</b>	<b>125,506</b>	<b>90,388</b>	<b>3,155</b>	<b>60</b>	<b>0</b>	<b>2,180,582</b>	<b>1,222,797</b>	<b>933,861</b>	<b>23,378</b>	<b>546</b>	<b>0</b>
<b>Age</b>												
5 and younger	14	0	12	0	2	0	138	0	124	0	14	0
6-14	30	0	21	0	9	0	334	0	237	0	97	0
15-20	407	0	372	4	31	0	4,233	0	3,921	37	275	0
21-44	40,056	0	37,837	2,201	18	0	415,783	0	399,245	16,378	160	0
45-64	49,800	0	48,979	821	0	0	511,930	0	505,827	6,103	0	0
65-74	43,750	41,336	2,300	114	0	0	439,456	420,579	18,119	758	0	0
75-84	46,359	45,678	666	15	0	0	451,128	446,193	4,833	102	0	0
85 and older	38,687	38,486	201	0	0	0	357,543	355,988	1,555	0	0	0
Unknown	6	6	0	0	0	0	37	37	0	0	0	0
<b>Gender</b>												
Female	142,700	94,428	46,743	1,497	32	0	1,437,066	935,564	490,509	10,709	284	0
Male	76,409	31,078	43,645	1,658	28	0	743,516	287,233	443,352	12,669	262	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	170,331	99,364	68,516	2,407	44	0	1,686,413	956,472	711,000	18,534	407	0
African American	44,445	23,456	20,303	671	15	0	451,208	239,338	207,418	4,323	129	0
Other/unknown	4,333	2,686	1,569	77	1	0	42,961	26,987	15,443	521	10	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	54,316	49,514	4,802	0	0	0	530,147	478,788	51,359	0	0	0
Part year	18,037	15,134	2,897	6	0	0	160,619	131,920	28,642	57	0	0
None	146,756	60,858	82,689	3,149	60	0	1,489,816	612,089	853,860	23,321	546	0
<b>Maintenance Assistance Status</b>												
Cash	69,296	29,554	39,540	201	1	0	777,717	334,814	441,331	1,560	12	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	9,457	2,239	7,031	178	9	0	83,280	23,338	58,865	998	79	0
Other/unknown	140,356	93,713	43,817	2,776	50	0	1,319,585	864,645	433,665	20,820	455	0
<b>Dual Medicare Status<sup>d</sup></b>												
Full dual, all year	198,198	118,885	76,162	3,091	60	0	1,970,204	1,151,306	795,522	22,830	546	0
Full dual, part year	20,911	6,621	14,226	64	0	0	210,378	71,491	138,339	548	0	0
<b>Managed Care Status</b>												
FFS all year	217,721	125,486	89,657	2,520	58	0	2,173,517	1,222,644	929,817	20,521	535	0
FFS part year, with Rx claims	955	16	500	437	2	0	5,466	125	3,103	2,227	11	0
FFS part year, no Rx claims	433	4	231	198	0	0	1,599	28	941	630	0	0

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 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	90.9 %	57.6	\$3,018	\$52	\$20,862	14.5 %	219,109
<b>Age</b>							
5 and younger	92.9	58.4	4,732	81	76,267	6.2	14
6-14	96.7	62.8	7,911	126	27,032	29.3	30
15-20	84.8	29.0	3,304	114	15,317	21.6	407
21-44	87.6	41.4	3,087	75	16,038	19.2	40,056
45-64	91.0	64.3	3,865	60	20,334	19.0	49,800
65-74	89.1	61.4	2,995	49	15,797	19.0	43,750
75-84	92.3	62.3	2,737	44	23,362	11.7	46,359
85 and older	94.5	56.3	2,213	39	29,306	7.5	38,687
Unknown	50.0	26.5	842	32	14,256	5.9	6
<b>Basis of Eligibility<sup>c</sup></b>							
Aged	92.5	60.9	2,696	44	22,790	11.8	125,506
Disabled	89.2	54.3	3,520	65	18,786	18.7	90,388
Adults	75.1	22.7	1,442	64	3,849	37.5	3,155
Children	68.3	28.7	3,262	114	10,831	30.1	60
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>							
Female	93.0	62.2	3,059	49	20,934	14.6	142,700
Male	86.9	49.1	2,942	60	20,729	14.2	76,409
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Race</b>							
White	91.7	60.5	3,158	52	22,079	14.3	170,331
African American	88.2	48.2	2,559	53	17,210	14.9	44,445
Other/unknown	88.0	40.3	2,218	55	10,485	21.2	4,333
<b>Use of Nursing Facilities<sup>d</sup></b>							
Entire year	97.8	75.4	3,327	44	41,684	8.0	54,316
Part year	96.0	61.8	2,826	46	25,402	11.1	18,037
None	87.7	50.6	2,927	58	12,598	23.2	146,756
<b>Maintenance Assistance Status</b>							
Cash	92.3	54.7	3,070	56	10,774	28.5	69,296
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	75.6	17.8	1,029	58	2,940	35.0	9,457
Other/unknown	91.2	61.7	3,127	51	27,051	11.6	140,356

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 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	5.8	\$303	14.5 %	9.1 %	12.2 %	8.4 %	26.5 %	30.3 %	13.5 %	\$2,096	219,109	2,180,582
<b>Age</b>												
5 and younger	5.9	480	6.2	7.1	0.0	0.0	42.9	42.9	7.1	7,737	14	138
6-14	5.6	711	29.3	3.3	3.3	20.0	30.0	26.7	16.7	2,428	30	334
15-20	2.8	318	21.6	15.2	36.9	14.0	17.9	12.5	3.4	1,473	407	4,233
21-44	4.0	297	19.2	12.4	24.5	12.1	25.7	18.4	6.9	1,545	40,056	415,783
45-64	6.3	376	19.0	9.0	11.8	8.2	25.4	29.4	16.3	1,978	49,800	511,930
65-74	6.1	298	19.0	10.9	10.4	7.7	25.2	30.6	15.2	1,573	43,750	439,456
75-84	6.4	281	11.7	7.7	7.8	6.9	26.6	35.3	15.8	2,401	46,359	451,128
85 and older	6.1	239	7.5	5.5	7.3	7.4	30.0	37.6	12.2	3,171	38,687	357,543
Unknown	4.3	137	5.9	50.0	0.0	0.0	16.7	33.3	0.0	2,312	6	37
<b>Basis of Eligibility<sup>c</sup></b>												
Aged	6.3	277	11.8	7.5	8.3	7.2	27.4	34.9	14.7	2,339	125,506	1,222,797
Disabled	5.3	341	18.7	10.8	17.2	9.9	25.4	24.6	12.2	1,818	90,388	933,861
Adults	3.1	195	37.5	24.9	25.3	11.2	22.0	13.2	3.3	519	3,155	23,378
Children	3.2	359	30.1	31.7	11.7	16.7	20.0	13.3	6.7	1,190	60	546
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>												
Female	6.2	304	14.6	7.0	10.2	8.0	27.1	32.8	14.9	2,079	142,700	1,437,066
Male	5.0	302	14.2	13.1	16.0	9.2	25.3	25.6	10.9	2,130	76,409	743,516
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	6.1	319	14.3	8.3	10.9	7.9	25.9	31.9	15.0	2,230	170,331	1,686,413
African American	4.7	252	14.9	11.8	16.5	10.2	28.1	24.9	8.5	1,695	44,445	451,208
Other/unknown	4.1	224	21.2	12.0	20.0	11.1	31.0	20.3	5.7	1,058	4,333	42,961
<b>use of nursing Facilities<sup>d</sup></b>												
Entire year	7.7	341	8.0	2.2	3.9	4.8	24.6	41.7	22.7	4,271	54,316	530,147
Part year	6.9	317	11.1	4.0	6.7	6.8	28.1	37.4	17.0	2,853	18,037	160,619
None	5.0	288	23.2	12.3	16.0	9.9	26.9	25.2	9.7	1,241	146,756	1,489,816
<b>Maintenance Assistance Status</b>												
Cash	4.9	274	28.5	7.7	17.6	10.7	28.7	25.6	9.7	960	69,296	777,717
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	2.0	117	35.0	24.4	34.2	13.6	19.2	7.5	1.1	334	9,457	83,280
Other/unknown	6.6	333	11.6	8.8	8.1	6.9	25.8	34.1	16.2	2,877	140,356	1,319,585

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 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
<b>All</b>	<b>5.8</b>	<b>\$303</b>	<b>\$52</b>	<b>2.6</b>	<b>\$240</b>	<b>\$93</b>	<b>0.5</b>	<b>\$20</b>	<b>\$45</b>	<b>2.7</b>	<b>\$43</b>	<b>\$16</b>
<b>Age</b>												
5 and younger	5.9	480	81	2.8	385	136	0.7	63	96	2.4	32	13
6-14	5.6	711	126	2.6	605	229	0.7	60	88	2.2	44	20
15-20	2.8	318	114	1.3	276	215	0.3	17	66	1.2	25	20
21-44	4.0	297	75	1.9	246	130	0.3	18	63	1.8	33	19
45-64	6.3	376	60	2.9	303	104	0.4	23	53	2.9	49	17
65-74	6.1	298	49	2.7	233	85	0.5	20	43	2.9	45	16
75-84	6.4	281	44	2.8	216	78	0.5	20	38	3.1	44	14
85 and older	6.1	239	39	2.4	179	73	0.6	19	35	3.1	40	13
Unknown	4.3	137	32	1.3	82	62	0.2	20	82	2.7	35	13
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	6.3	277	44	2.7	213	79	0.5	20	39	3.0	44	14
Disabled	5.3	341	65	2.5	277	113	0.4	21	56	2.4	42	18
Adults	3.1	195	64	1.4	161	112	0.2	11	60	1.4	22	15
Children	3.2	359	114	1.4	287	198	0.3	35	103	1.3	36	27
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Gender</b>												
Female	6.2	304	49	2.7	239	87	0.5	21	43	2.9	44	15
Male	5.0	302	60	2.2	241	108	0.4	19	50	2.4	41	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	6.1	319	52	2.7	252	93	0.5	21	44	2.9	45	16
African American	4.7	252	53	2.1	199	95	0.4	17	46	2.3	35	15
Other/unknown	4.1	224	55	2.0	181	93	0.3	13	47	1.8	29	16
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	7.7	341	44	3.2	261	82	0.7	25	37	3.8	54	14
Part year	6.9	317	46	2.9	244	85	0.6	22	39	3.4	50	15
None	5.0	288	58	2.3	232	100	0.4	18	51	2.3	38	17
<b>Maintenance Assistance Status</b>												
Cash	4.9	274	56	2.3	219	97	0.4	18	50	2.2	37	16
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	2.0	117	58	0.9	94	100	0.1	8	53	0.9	15	16
Other/unknown	6.6	333	51	2.9	261	91	0.5	23	43	3.1	48	15

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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 Ohio, 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](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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 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 No. of Rx	Total Rx \$	No. Dual Benes	As % of Bene Mos		
															Generic	Patented Brand-Name
Anti-infective Agents	0.4	0.2	0.0	0.2	\$29	\$24	\$2	\$2	\$113	\$80	\$13	553,461	127,537	58.2 %	1,362,076	
Biologics	0.1	0.1	0.0	0.0	7	2	2	3	38	1,140	98	2,503	2,281	1.0	25,535	
Antineoplastic Agents	0.6	0.2	0.1	0.2	105	75	19	12	327	158	50	61,701	10,735	4.9	105,788	
Endocrine/Metabolic Drugs	1.1	0.5	0.1	0.4	41	33	3	5	61	23	12	1,162,659	102,345	46.7	1,079,936	
Cardiovascular Agents	2.0	0.7	0.2	1.1	63	41	7	15	62	37	13	2,891,968	141,231	64.5	1,463,148	
Respiratory Agents	0.9	0.4	0.1	0.4	42	30	5	7	67	69	21	957,302	102,920	47.0	1,100,273	
Gastrointestinal Agents	0.9	0.5	0.0	0.4	67	61	1	5	122	101	15	977,855	105,174	48.0	1,106,962	
Genitourinary Agents	0.5	0.4	0.0	0.1	30	28	0	1	67	34	12	227,850	39,209	17.9	419,386	
CNS Drugs	1.5	0.8	0.0	0.7	114	96	4	13	118	89	20	2,119,629	132,427	60.4	1,379,943	
Stimulants/Anti-obesity/Anorexia	0.7	0.1	0.1	0.5	36	16	8	12	127	89	24	11,921	1,559	0.7	16,624	
Miscellaneous Psychological/Neurological Agents	0.7	0.6	0.0	0.0	78	76	0	1	124	0	39	119,018	17,974	8.2	181,987	
Analgesics and Anesthetics	0.9	0.4	0.0	0.5	49	39	2	7	105	56	14	1,193,760	123,173	56.2	1,295,810	
Neuromuscular Agents	1.1	0.5	0.1	0.5	65	50	5	10	102	53	19	867,160	72,421	33.1	777,336	
Nutritional Products	0.7	0.0	0.1	0.6	11	1	2	8	66	21	13	397,759	54,905	25.1	565,418	
Hematological Agents	0.9	0.3	0.2	0.4	47	39	3	5	139	21	11	427,522	48,719	22.2	498,284	
Topical Products	0.5	0.2	0.1	0.2	18	13	2	4	54	38	16	556,994	99,682	45.5	1,078,439	
Miscellaneous Products	0.4	0.1	0.0	0.3	32	21	7	5	302	271	14	42,567	10,434	4.8	104,089	
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	9	0	0	0	0	0	0	54,363	16,070	7.3	173,222	
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	12,625,992	n.a.	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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](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 Ohio, 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 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	\$92,269,086	72,363	33.0 %	775,801	0.8	\$146	\$119
ULCER DRUGS	64,435,091	105,036	47.9	1,119,523	0.6	90	58
ANTIDEPRESSANTS	52,201,628	122,279	55.8	1,295,321	0.7	58	40
ANTICONVULSANT	41,151,246	63,478	29.0	686,378	0.9	68	60
ANTIDIABETIC	31,255,769	80,873	36.9	858,497	0.7	49	36
ANTHYPERLIPIDEMIC	30,804,172	50,630	23.1	552,161	0.7	81	56
ANALGESICS - ANTI-INFLAMMATORY	30,566,085	84,957	38.8	933,796	0.5	72	33
ANALGESICS - Narcotic	28,112,719	142,464	65.0	1,519,269	0.4	42	19
ANTIASTHMATIC	27,199,931	98,773	45.1	1,051,443	0.5	52	26
ANTIHYPERTENSIVE	22,122,866	94,096	42.9	996,430	0.7	32	22
Total	420,118,593	914,949		9,788,619	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 2002

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ULCER DRUGS			
	No. of Rx	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 \$
<b>All</b>	<b>6,170,219</b>	<b>\$420,118,593</b>	<b>72,363</b>	<b>33.0 %</b>	<b>775,801</b>	<b>0.8</b>	<b>\$119</b>	<b>105,036</b>	<b>47.9 %</b>	<b>1,119,523</b>	<b>0.6</b>	<b>\$58</b>
<b>Female</b>	4,211,437	274,765,887	42,990	30.1	460,001	0.8	104	74,205	52.0	796,316	0.6	57
<b>Disabled</b>	1,532,301	116,943,585	18,278	39.1	205,441	0.8	127	24,557	52.5	272,438	0.6	59
5 and younger	29	3,460	0	0.0	0	0.0	0	2	66.7	24	0.5	54
6-14	93	5,390	0	0.0	0	0.0	0	5	55.6	48	0.8	66
15-20	2,159	151,645	30	17.9	330	0.7	116	49	29.2	559	0.4	21
21-44	439,877	36,589,969	7,890	46.2	88,698	0.8	122	7,217	42.3	80,992	0.5	51
45-64	1,058,488	78,182,571	10,095	36.6	113,762	0.9	131	16,581	60.1	184,393	0.6	62
65-74	27,940	1,785,269	222	16.9	2,251	0.9	130	565	43.0	5,247	0.6	56
75-84	3,011	185,523	31	7.0	315	0.6	67	110	24.7	920	0.5	39
85 and older	704	39,758	10	6.1	85	0.4	39	28	17.1	255	0.4	46
<b>Other Eligibles</b>	2,679,077	157,821,160	24,712	25.8	254,560	0.7	86	49,647	51.7	523,869	0.7	57
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	26	1,099	0	0.0	0	0.0	0	1	25.0	12	0.8	11
15-20	229	13,470	6	30.0	48	0.4	88	11	55.0	106	0.5	21
21-44	14,792	1,081,046	218	18.2	2,022	0.5	83	347	28.9	3,298	0.4	40
45-64	3,935	283,085	16	6.3	121	0.7	103	81	31.9	740	0.5	55
65-74	928,728	58,992,040	5,826	20.9	63,188	0.8	105	15,981	57.4	176,648	0.6	60
75-84	1,007,968	58,397,810	9,535	27.9	98,173	0.7	87	17,868	52.2	189,139	0.7	56
85 and older	723,399	39,052,610	9,111	28.1	91,008	0.7	72	15,358	47.4	153,926	0.7	55
<b>Male</b>	1,958,782	145,352,706	29,373	38.4	315,800	0.9	140	30,831	40.4	323,207	0.6	58
<b>Disabled</b>	1,153,174	97,501,313	20,197	46.3	225,178	0.9	159	16,112	36.9	174,999	0.6	59
5 and younger	130	5,773	0	0.0	0	0.0	0	8	88.9	79	0.8	39
6-14	185	16,415	3	25.0	36	0.4	107	8	66.7	96	0.6	47
15-20	2,859	229,935	61	29.9	681	0.7	136	50	24.5	547	0.5	41
21-44	472,041	43,984,767	10,788	51.9	120,987	0.9	155	6,476	31.2	72,083	0.6	53
45-64	658,667	52,061,814	9,143	42.7	101,541	1.0	164	9,186	42.9	98,663	0.7	63
65-74	17,504	1,096,115	180	18.2	1,736	0.9	127	335	33.9	3,089	0.7	59
75-84	1,543	88,021	17	7.7	154	0.9	83	42	19.0	370	0.7	51
85 and older	245	18,473	5	13.5	43	0.1	9	7	18.9	72	0.7	61
<b>Other Eligibles</b>	805,588	47,850,040	9,176	28.0	90,622	0.8	95	14,719	44.9	148,208	0.7	57
5 and younger	6	202	0	0.0	0	0.0	0	1	50.0	9	0.7	22
6-14	150	7,475	2	40.0	24	1.2	120	4	80.0	47	0.6	63
15-20	144	16,808	1	6.7	12	1.2	336	5	33.3	45	0.8	173
21-44	12,550	1,017,990	165	16.2	1,606	0.6	102	270	26.5	2,483	0.5	52
45-64	8,417	617,874	53	9.3	506	0.4	94	189	33.3	1,749	0.5	52
65-74	370,948	23,218,211	3,253	23.9	34,315	0.8	113	6,172	45.4	65,578	0.7	58
75-84	289,055	16,415,784	3,744	32.6	36,207	0.8	89	5,344	46.5	52,860	0.7	57
85 and older	124,318	6,555,696	1,958	32.2	17,952	0.7	72	2,734	45.0	25,437	0.7	55
<b>Unknown</b>	79	2,495	0	0.0	0	0.0	0	1	16.7	9	0.1	3

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 2002

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTICONVULSANT					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
<b>All</b>	<b>122,279</b>	<b>55.8 %</b>	<b>1,295,321</b>	<b>\$40</b>	<b>0.7</b>	<b>63,478</b>	<b>29.0 %</b>	<b>686,378</b>	<b>\$60</b>	<b>0.9</b>	<b>80,873</b>	<b>36.9 %</b>	<b>858,497</b>	<b>\$36</b>	<b>0.7</b>
<b>Female</b>	86,383	60.5	920,041	40	0.7	38,775	27.2	420,807	55	0.8	57,364	40.2	615,903	36	0.7
<b>Disabled</b>	35,152	75.2	389,277	42	0.7	19,771	42.3	220,625	70	0.9	17,290	37.0	189,577	42	0.7
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	2	22.2	21	38	0.8	3	33.3	18	55	0.8	0	0.0	0	0	0.0
15-20	66	39.3	746	26	0.5	34	20.2	407	78	1.0	10	6.0	103	28	0.5
21-44	12,579	73.7	139,633	41	0.6	7,939	46.5	88,706	76	0.9	3,130	18.3	34,620	41	0.7
45-64	21,914	79.5	243,192	42	0.7	11,504	41.7	128,552	66	0.9	13,499	49.0	148,872	42	0.7
65-74	500	38.1	4,888	40	0.7	256	19.5	2,592	43	0.8	552	42.0	5,189	38	0.7
75-84	69	15.5	585	29	0.6	29	6.5	293	33	0.7	85	19.1	705	25	0.6
85 and older	22	13.4	212	23	0.5	6	3.7	57	5	0.3	14	8.5	88	21	0.6
<b>Other Eligibles</b>	51,229	53.4	530,743	39	0.7	19,003	19.8	200,173	38	0.8	40,073	41.8	426,314	34	0.7
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	2	50.0	21	45	0.6	0	0.0	0	0	0.0	0	0.0	0	0	0.0
15-20	8	40.0	81	17	0.4	3	15.0	31	37	1.0	1	5.0	12	1.6	84
21-44	741	61.7	6,688	34	0.5	322	26.8	2,912	52	0.6	107	8.9	992	41	0.7
45-64	153	60.2	1,288	34	0.5	61	24.0	528	52	0.6	76	29.9	683	38	0.6
65-74	14,513	52.1	158,510	37	0.7	6,539	23.5	71,692	45	0.8	16,194	58.1	178,364	38	0.7
75-84	18,403	53.8	190,772	40	0.7	7,204	21.1	75,505	37	0.8	15,580	45.5	164,362	32	0.8
85 and older	17,409	53.7	173,383	40	0.7	4,874	15.0	49,505	31	0.8	8,115	25.0	81,301	27	0.7
<b>Male</b>	35,896	47.0	375,280	41	0.7	24,703	32.3	265,571	68	0.9	23,509	30.8	242,594	37	0.7
<b>Disabled</b>	21,292	48.8	231,093	42	0.7	17,206	39.4	190,116	77	1.0	11,054	25.3	117,268	41	0.7
5 and younger	0	0.0	0	0	0.0	1	11.1	12	5	0.8	0	0.0	0	0	0.0
6-14	1	8.3	12	15	0.2	3	25.0	36	108	0.8	0	0.0	0	0	0.0
15-20	62	30.4	642	40	0.6	62	30.4	689	76	1.2	8	3.9	96	46	0.8
21-44	10,282	49.5	113,359	41	0.7	8,600	41.4	95,859	80	0.9	2,968	14.3	32,549	41	0.7
45-64	10,653	49.8	114,333	42	0.7	8,365	39.1	91,875	74	1.0	7,728	36.1	81,461	42	0.7
65-74	271	27.5	2,547	41	0.8	158	16.0	1,491	67	1.0	319	32.3	2,863	32	0.7
75-84	20	9.0	170	23	0.4	16	7.2	149	56	0.8	26	11.8	259	29	0.7
85 and older	3	8.1	30	58	0.8	1	2.7	5	7	0.4	5	13.5	40	27	0.4
<b>Other Eligibles</b>	14,604	44.6	144,187	39	0.7	7,497	22.9	75,455	45	0.9	12,455	38.0	125,326	34	0.8
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	3	60.0	36	27	0.9	0	0.0	0	0	0.0	0	0.0	0	0	0.0
15-20	1	6.7	12	137	1.0	2	13.3	24	51	0.7	0	0.0	0	0	0.0
21-44	450	44.2	4,324	33	0.5	248	24.4	2,361	61	0.5	105	10.3	928	36	0.6
45-64	241	42.5	2,339	33	0.5	106	18.7	991	73	0.6	140	24.7	1,320	38	0.6
65-74	5,255	38.7	54,908	39	0.7	3,287	24.2	34,788	50	0.9	5,901	43.4	61,853	37	0.7
75-84	5,578	48.6	54,118	39	0.7	2,721	23.7	26,813	39	0.8	4,635	40.4	46,048	32	0.8
85 and older	3,076	50.6	28,450	39	0.8	1,133	18.7	10,478	33	0.8	1,674	27.6	15,177	27	0.8
<b>Unknown</b>	2	33.3	21	11	0.4	1	16.7	9	5	0.1	1	16.7	12	1.1	12

Table D7B

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 2002

Beneficiary Characteristics	ANTHYPERLIPIDEMIC					ANALGESICS - ANTI-INFLAMMATORY					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 \$
<b>All</b>	<b>50,630</b>	<b>23.1 %</b>	<b>552,161</b>	<b>0.7</b>	<b>\$56</b>	<b>84,957</b>	<b>38.8 %</b>	<b>933,796</b>	<b>0.5</b>	<b>\$33</b>	<b>142,464</b>	<b>65.0 %</b>	<b>1,519,269</b>	<b>0.4</b>	<b>\$19</b>
<b>Female</b>	34,843	24.4	383,467	0.7	56	61,349	43.0	677,291	0.5	35	101,163	70.9	1,087,829	0.4	17
<b>Disabled</b>	11,865	25.4	131,175	0.6	54	24,935	53.3	279,759	0.4	29	40,920	87.5	454,930	0.4	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	11.1	12	0.1	1	4	44.4	39	0.1	1
15-20	1	0.6	12	0.8	99	76	45.2	861	0.2	6	119	70.8	1,345	0.2	13
21-44	1,831	10.7	20,635	0.6	48	8,613	50.5	96,977	0.3	18	14,523	85.1	162,327	0.3	17
45-64	9,563	34.7	106,313	0.7	55	15,718	57.0	176,959	0.4	36	25,474	92.4	283,735	0.4	20
65-74	398	30.3	3,701	0.7	52	441	33.6	4,223	0.5	37	672	51.2	6,434	0.4	16
75-84	63	14.2	451	0.5	47	69	15.5	567	0.5	32	98	22.0	806	0.4	18
85 and older	9	5.5	63	0.4	27	17	10.4	160	0.3	21	30	18.3	244	0.3	8
<b>Other Eligibles</b>	22,978	23.9	252,292	0.7	57	36,413	37.9	397,520	0.5	39	60,241	62.8	632,878	0.5	16
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	1	25.0	12	0.4	2
15-20	2	10.0	20	0.9	44	5	25.0	43	0.5	36	11	55.0	100	0.2	7
21-44	61	5.1	581	0.5	38	530	44.1	5,083	0.3	17	962	80.1	9,038	0.3	18
45-64	46	18.1	389	0.6	47	122	48.0	1,062	0.4	30	202	79.5	1,811	0.4	25
65-74	11,054	39.7	124,052	0.7	59	13,070	46.9	147,896	0.5	38	20,444	73.4	226,178	0.4	16
75-84	8,820	25.8	96,050	0.7	57	12,915	37.8	142,025	0.5	39	21,165	61.9	224,310	0.5	17
85 and older	2,995	9.2	31,200	0.7	50	9,771	30.1	101,411	0.6	40	17,456	53.9	171,429	0.5	15
<b>Male</b>	15,787	20.7	168,694	0.7	55	23,608	30.9	256,505	0.4	27	41,301	54.1	431,440	0.4	21
<b>Disabled</b>	8,819	20.2	95,359	0.7	54	14,169	32.5	155,838	0.4	23	25,085	57.5	269,402	0.4	25
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	11.1	12	0.1	1
6-14	0	0.0	0	0.0	0	1	8.3	12	0.1	0	1	8.3	12	0.1	1
15-20	4	2.0	33	0.9	71	33	16.2	375	0.2	11	91	44.6	1,024	0.2	9
21-44	2,544	12.2	28,509	0.6	48	6,483	31.2	72,303	0.3	16	11,757	56.6	128,652	0.4	25
45-64	6,018	28.1	64,522	0.7	57	7,412	34.6	80,908	0.4	30	12,778	59.7	135,757	0.5	26
65-74	229	23.2	2,076	0.7	52	206	20.9	1,912	0.5	36	414	41.9	3,608	0.4	15
75-84	21	9.5	201	0.8	52	25	11.3	243	0.6	44	35	15.8	258	0.3	9
85 and older	3	8.1	18	0.2	20	9	24.3	85	0.4	85	8	21.6	79	0.3	4
<b>Other Eligibles</b>	6,968	21.3	73,335	0.7	57	9,439	28.8	100,667	0.5	34	16,216	49.5	162,038	0.4	15
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	20.0	12	0.1	0	1	20.0	12	0.3	1
15-20	0	0.0	0	0.0	0	4	26.7	48	0.1	4	7	46.7	75	0.3	3
21-44	129	12.7	1,205	0.5	41	388	38.1	3,750	0.3	20	792	77.8	7,782	0.4	28
45-64	141	24.9	1,283	0.6	48	215	37.9	2,118	0.3	24	385	67.9	3,677	0.4	26
65-74	3,997	29.4	43,282	0.7	59	4,385	32.3	48,546	0.5	34	6,984	51.4	73,804	0.4	16
75-84	2,221	19.3	22,927	0.7	56	3,050	26.6	32,218	0.5	35	5,267	45.9	51,691	0.5	13
85 and older	480	7.9	4,638	0.7	49	1,396	23.0	13,975	0.6	36	2,780	45.8	24,997	0.4	11
<b>Unknown</b>	0	0.0	0	0.0	0	1	16.7	12	0.3	14	2	33.3	21	0.1	5

Table D7C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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](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<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 2002

Beneficiary Characteristics	ANTI-ASTHMATIC				ANTI-HYPERTENSIVE				Mean Rx \$	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	No. of Bene Mos
	No. of Users	Mean Rx \$	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									
<b>All</b>	<b>98,773</b>	<b>\$26</b>	<b>0.5</b>	<b>45.1 %</b>	<b>1,051,443</b>	<b>\$26</b>	<b>0.5</b>	<b>42.9 %</b>	<b>94,096</b>	<b>\$22</b>	<b>0.7</b>	<b>996,430</b>	<b>\$22</b>	<b>0.7</b>	<b>219,109</b>	<b>2,180,582</b>	
<b>Female</b>	69,287	26	0.5	48.6	745,191	26	0.5	45.8	65,372	23	0.7	697,629	23	0.7	142,696	1,437,038	
<b>Disabled</b>	25,268	27	0.5	54.1	280,270	27	0.5	34.1	15,917	22	0.6	173,834	22	0.6	46,743	490,509	
5 and younger	3	62	0.4	100.0	33	62	0.4	66.7	2	7	0.1	18	7	0.1	3	33	
6-14	2	22.2	0.1	22.2	24	2	0.1	55.6	5	9	0.5	39	9	0.5	9	93	
15-20	49	29.2	0.6	29.2	549	39	0.6	13.7	23	11	0.3	263	11	0.3	168	1,791	
21-44	6,930	40.6	0.4	40.6	77,737	23	0.4	16.0	2,738	19	0.6	30,481	19	0.6	17,068	181,710	
45-64	17,649	64.0	0.5	64.0	196,090	29	0.5	45.2	12,465	23	0.6	136,972	23	0.6	27,573	291,779	
65-74	545	41.5	0.5	41.5	5,085	27	0.5	41.5	545	21	0.7	5,020	21	0.7	1,313	10,589	
75-84	65	14.6	0.5	14.6	544	27	0.5	23.6	105	19	0.5	777	19	0.5	445	3,244	
85 and older	25	15.2	0.5	15.2	208	29	0.5	20.7	34	17	0.5	264	17	0.5	164	1,270	
<b>Other Eligibles</b>	44,017	24	0.5	45.9	464,903	24	0.5	51.5	49,452	23	0.7	523,762	23	0.7	95,953	946,529	
5 and younger	0	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	0	
15-20	2	10.0	0.1	10.0	16	2	0.1	25.0	5	6	0.4	50	6	0.4	20	176	
21-44	371	30.9	0.4	30.9	3,551	21	0.4	11.2	134	17	0.5	1,219	17	0.5	1,201	8,709	
45-64	95	37.4	0.4	37.4	882	27	0.4	34.3	87	19	0.6	756	19	0.6	254	1,760	
65-74	16,192	58.1	0.5	58.1	178,003	29	0.5	59.6	16,608	24	0.7	183,228	24	0.7	27,855	289,583	
75-84	15,418	45.1	0.5	45.1	162,642	25	0.5	55.0	18,820	23	0.7	200,826	23	0.7	34,208	341,817	
85 and older	11,939	36.8	0.4	36.8	119,809	18	0.4	42.6	13,798	22	0.7	137,683	22	0.7	32,411	304,446	
<b>Male</b>	29,486	27	0.5	38.6	306,252	27	0.5	37.6	28,724	21	0.7	298,801	21	0.7	76,407	743,507	
<b>Disabled</b>	13,219	30.3	0.5	30.3	141,955	27	0.5	30.6	13,359	21	0.7	141,662	21	0.7	43,645	443,352	
5 and younger	5	55.6	0.5	55.6	60	29	0.5	33.3	3	25	0.6	36	25	0.6	9	91	
6-14	8	66.7	0.4	66.7	96	27	0.4	58.3	7	16	0.5	84	16	0.5	12	144	
15-20	41	20.1	0.4	20.1	449	27	0.4	14.2	29	18	0.7	311	18	0.7	204	2,130	
21-44	4,414	21.3	0.4	21.3	48,601	22	0.4	19.3	4,008	20	0.6	43,795	20	0.6	20,769	217,535	
45-64	8,343	39.0	0.6	39.0	89,236	29	0.6	41.3	8,835	22	0.7	93,200	22	0.7	21,406	214,048	
65-74	364	36.9	0.6	36.9	3,152	31	0.6	41.4	409	19	0.7	3,684	19	0.7	987	7,530	
75-84	35	15.8	0.4	15.8	262	16	0.4	25.3	56	19	0.7	451	19	0.7	221	1,589	
85 and older	9	24.3	0.4	24.3	99	17	0.4	32.4	12	13	0.4	101	13	0.4	37	285	
<b>Other Eligibles</b>	16,265	27	0.5	49.6	164,281	27	0.5	46.9	15,364	20	0.7	157,131	20	0.7	32,762	300,155	
5 and younger	0	0	0.0	0.0	0	0	0.0	0.0	0	0	0.0	0	0	0.0	2	14	
6-14	1	20.0	0.3	20.0	12	5	0.3	100.0	5	10	0.9	58	10	0.9	5	59	
15-20	6	40.0	0.2	40.0	56	10	0.2	40.0	6	20	0.4	57	20	0.4	15	136	
21-44	220	21.6	0.3	21.6	2,107	17	0.3	15.8	161	22	0.6	1,485	22	0.6	1,018	7,829	
45-64	148	26.1	0.4	26.1	1,480	23	0.4	33.5	190	22	0.6	1,759	22	0.6	567	4,343	
65-74	7,439	54.7	0.6	54.7	78,599	31	0.6	51.7	7,033	21	0.7	74,757	21	0.7	13,595	131,754	
75-84	5,680	49.5	0.5	49.5	55,953	25	0.5	48.5	5,567	20	0.7	56,278	20	0.7	11,485	104,478	
85 and older	2,771	45.6	0.5	45.6	26,074	21	0.5	39.5	2,402	19	0.8	22,737	19	0.8	6,075	51,542	
<b>Unknown</b>	4	66.7	0.4	66.7	34	25	0.4	66.7	4	23	0.8	41	23	0.8	6	37	

Table D7D

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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](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<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 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
<b>All</b>	<b>\$341</b>	<b>7.7</b>	<b>54,316</b>	<b>530,147</b>
<b>Age</b>				
0-64	557	9.6	4,632	49,796
65-74	430	8.9	7,420	74,240
75-84	343	8.0	18,648	180,416
85 and older	263	6.7	23,614	225,675
Unknown	224	6.5	2	20
<b>Gender</b>				
Female	325	7.6	39,579	389,403
Male	386	7.9	14,737	140,744
Unknown	0	0.0	0	0
<b>Race</b>				
White	342	7.8	46,608	452,350
African American	337	7	7,356	74,540
Other/unknown	349	7.5	352	3,257
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	318	7.5	49,514	478,788
Disabled	555	9.6	4,802	51,359
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 Ohio, released by CMS in 05/2006. 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 18,037 beneficiaries who were in nursing facilities for part of their enrollment and their 160,619 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<sup>a, b, c, d, e</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users							
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total # of Rx	Total Rx \$	No.	As % of Dual All-Year NF Residents	No. of Bene Mos			
		Brand-Name	Generic		Brand-Name	Generic		Brand-Name	Generic								
Anti-infective Agents	0.4	0.2	0.0	0.2	\$22	\$18	\$2	\$2	\$2	\$49	\$63	\$12	172,895	\$8,512,011	37,806	69.6 %	389,234
Biologicals	0.1	0.1	0.0	0.0	3	0	1	1	8	30	953	25	1,451	44,066	1,348	2.5	14,960
Antineoplastic Agents	0.6	0.2	0.2	0.3	85	39	30	16	259	142	157	61	26,972	3,821,354	4,707	8.7	44,749
Endocrine/Metabolic Drugs	1.2	0.6	0.1	0.5	38	31	2	5	56	32	19	10	338,892	10,890,546	27,944	51.4	283,576
Cardiovascular Agents	2.2	0.5	0.3	1.4	50	26	8	16	51	23	31	12	889,199	20,810,993	41,541	76.5	412,707
Respiratory Agents	0.8	0.3	0.1	0.4	32	18	5	9	60	41	61	24	218,922	9,049,004	27,605	50.8	284,176
Gastrointestinal Agents	1.0	0.5	0.0	0.5	61	54	0	7	106	59	59	14	327,935	19,407,756	31,219	57.5	315,842
Genitourinary Agents	0.6	0.5	0.0	0.1	31	29	0	2	64	51	31	12	94,220	4,778,211	14,776	27.2	153,838
CNS Drugs	1.8	1.1	0.1	0.7	122	107	4	11	102	68	62	17	736,422	50,222,805	40,952	75.4	411,157
Stimulants/Anti-obesity/Anorexia	1.0	0.0	0.0	0.9	15	2	2	11	58	15	53	13	4,193	64,856	422	0.8	4,346
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	94	94	0	0	119	118	0	28	73,398	8,660,840	9,247	17.0	92,226
Analgesics and Anesthetics	1.1	0.5	0.1	0.5	46	39	2	5	79	43	38	9	321,584	13,705,994	29,947	55.1	299,506
Neuromuscular Agents	1.4	0.5	0.1	0.7	63	41	5	17	80	46	46	22	271,088	12,517,406	19,219	35.4	199,766
Nutritional Products	0.8	0.0	0.1	0.7	11	0	2	9	30	14	23	13	157,626	2,238,745	19,831	36.5	196,996
Hematological Agents	1.1	0.3	0.3	0.5	47	38	4	5	127	44	17	9	192,411	8,457,095	17,943	33.0	178,649
Topical Products	0.6	0.2	0.1	0.3	18	12	2	4	47	30	31	15	222,741	6,626,523	34,338	63.2	360,441
Miscellaneous Products	0.3	0.0	0.0	0.3	6	3	0	3	98	16	224	9	19,315	315,088	5,783	10.6	56,915
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	8	0	0	0	0	26	0	0	23,879	609,904	7,197	13.3	76,190
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.	4,093,143	180,733,197	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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 18,037 beneficiaries who were in nursing facilities for part of their enrollment and their 160,619 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](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003). In Ohio, 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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 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	\$29,110,412	25,803	47.5 %	269,929	0.8	\$130	\$108
ANTIDEPRESSANTS	17,852,133	37,820	69.6	389,619	0.8	55	46
ULCER DRUGS	16,945,642	27,885	51.3	285,454	0.8	77	59
ANTICONVULSANT	9,070,132	17,615	32.4	185,952	1.0	49	49
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	8,694,317	9,174	16.9	92,950	0.8	117	94
ANALGESICS - ANTI-INFLAMMATORY	7,330,350	16,227	29.9	172,009	0.6	66	43
ANTIDIABETIC	6,869,573	21,196	39.0	217,240	0.8	37	32
ANALGESICS - Narcotic	5,866,591	28,927	53.3	289,387	0.7	30	20
DERMATOLOGICAL	5,601,634	77,752	143.1	835,841	0.3	22	7
ANTIASTHMATIC	5,583,674	25,224	46.4	257,198	0.5	44	22
<b>Total</b>	<b>112,924,458</b>	<b>287,623</b>		<b>2,995,579</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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 18,037 beneficiaries who were in nursing facilities for part of their enrollment and their 160,619 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](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<sup>a, b, c, d</sup>  
DUAL ELIGIBLE BENEFICIARIES, OHIO, 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 No. of Rx	Users as % of All-Year Residents	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 Users	Residents	NF										No. of Users
<b>All</b>	<b>1,897,619</b>	<b>\$112,924,458</b>	<b>25,803</b>	<b>47.5 %</b>	<b>269,929</b>	<b>0.8</b>	<b>\$108</b>	<b>0.8</b>	<b>37,820</b>	<b>69.6 %</b>	<b>389,619</b>	<b>0.8</b>	<b>\$46</b>		
<b>Female</b>	1,351,432	78,624,611	17,500	44.2	183,891	0.8	100	0.8	27,898	70.5	288,750	0.8	46		
<b>Disabled</b>	116,548	8,222,681	1,536	74.0	17,214	1.1	173	1.1	1,804	86.9	19,849	0.9	53		
64 or younger	112,830	7,990,992	1,489	74.6	16,734	1.1	174	1.1	1,739	87.2	19,170	0.9	53		
65-74	3,711	231,584	47	58.8	480	1.0	148	1.0	64	80.0	671	0.8	50		
75-84	2	10	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0		
85 and older	5	95	0	0.0	0	0.0	0	0.0	1	100.0	8	0.1	5		
<b>Other Eligibles</b>	1,234,860	70,401,578	15,964	42.6	166,677	0.8	92	0.8	26,093	69.6	268,889	0.8	45		
64 or younger	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0		
65-74	200,127	12,356,883	2,620	62.4	28,454	0.9	125	0.9	3,496	83.2	37,073	0.9	49		
75-84	492,680	28,452,905	6,449	48.2	67,316	0.8	95	0.8	10,072	75.2	103,942	0.8	46		
85 and older	542,053	29,591,790	6,895	34.6	70,907	0.7	76	0.7	12,525	62.9	127,874	0.8	43		
<b>Male</b>	546,187	34,299,847	8,303	56.3	86,038	0.9	125	0.9	9,922	67.3	100,869	0.8	46		
<b>Disabled</b>	142,596	10,689,669	2,204	80.9	24,577	1.1	184	1.1	1,987	72.9	21,873	0.9	51		
64 or younger	139,005	10,472,955	2,160	81.9	24,209	1.1	184	1.1	1,925	73.0	21,290	0.9	51		
65-74	3,544	215,399	42	49.4	358	1.1	187	1.1	60	70.6	559	0.8	43		
75-84	47	1,315	2	66.7	10	0.6	9	0.6	2	66.7	24	0.5	13		
85 and older	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0		
<b>Other Eligibles</b>	403,576	23,609,449	6,099	50.8	61,461	0.8	101	0.8	7,935	66.1	78,996	0.8	45		
64 or younger	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0		
65-74	128,764	8,229,648	1,963	64.3	20,970	0.9	124	0.9	2,219	72.7	23,045	0.9	49		
75-84	176,082	10,094,493	2,705	51.5	26,861	0.8	96	0.8	3,501	66.6	34,735	0.8	44		
85 and older	98,730	5,285,308	1,431	38.6	13,630	0.7	77	0.7	2,215	59.8	21,216	0.8	42		
<b>Unknown</b>	39	1,081	0	0.0	0	0.0	0	0.0	1	50.0	12	0.4	3		

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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 18,037 beneficiaries who were in nursing facilities for part of their enrollment and their 160,619 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](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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 2002

Beneficiary Characteristics	ULCER DRUGS						ANTICONVULSANT						MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					
	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
<b>All</b>	<b>27,885</b>	<b>285,454</b>	<b>0.8</b>	<b>17,615</b>	<b>185,952</b>	<b>1.0</b>	<b>9,174</b>	<b>92,950</b>	<b>16.9</b>	<b>9,174</b>	<b>92,950</b>	<b>0.8</b>	<b>994</b>					
<b>Female</b>	20,305	208,929	0.8	11,249	119,091	1.0	6,776	69,650	17.1	6,776	69,650	0.8	94					
<b>Disabled</b>	1,217	13,349	0.8	1,593	17,850	1.2	161	1,800	7.8	161	1,800	0.7	131					
64 or younger	1,165	12,848	0.8	1,552	17,444	1.2	157	1,768	7.9	157	1,768	0.7	132					
65-74	51	500	0.8	41	406	1.1	53	32	5.0	4	32	1.0	119					
75-84	1	1	2.0	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					
<b>Other Eligibles</b>	19,088	195,580	0.8	9,656	101,241	0.9	6,615	67,850	17.6	6,615	67,850	0.8	93					
64 or younger	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0					
65-74	2,430	25,550	0.8	2,110	22,720	1.0	608	6,389	14.5	608	6,389	0.8	95					
75-84	7,107	73,057	0.8	4,109	42,941	1.0	2,771	28,309	20.7	2,771	28,309	0.8	94					
85 and older	9,551	96,973	0.8	3,437	35,580	0.8	33	33,152	16.3	3,236	33,152	0.8	91					
<b>Male</b>	7,580	76,525	0.8	6,366	66,861	1.1	55	23,300	16.3	2,398	23,300	0.8	93					
<b>Disabled</b>	1,540	16,695	0.8	2,177	24,295	1.2	232	2,521	8.5	232	2,521	0.6	96					
64 or younger	1,478	16,113	0.8	2,126	23,843	1.2	224	2,457	8.5	224	2,457	0.6	96					
65-74	60	558	0.8	51	452	1.2	61	52	8.2	7	52	0.8	90					
75-84	2	24	0.5	0	0	0.0	1	12	33.3	1	12	1.0	39					
85 and older	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0					
<b>Other Eligibles</b>	6,040	59,830	0.8	4,189	42,566	1.0	46	20,779	18.0	2,166	20,779	0.8	93					
64 or younger	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0					
65-74	1,650	17,168	0.8	1,596	16,967	1.0	55	4,223	13.8	421	4,223	0.8	97					
75-84	2,642	26,000	0.8	1,761	17,674	0.9	42	10,252	20.4	1,074	10,252	0.8	92					
85 and older	1,748	16,662	0.8	832	7,925	0.9	34	6,304	18.1	671	6,304	0.8	90					
<b>Unknown</b>	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 Ohio, released by CMS in 05/2006. 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 18,037 beneficiaries who were in nursing facilities for part of their enrollment and their 160,619 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](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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 2002

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY						ANTIDIABETIC						ANALGESICS - Narcotic							
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %				
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>16,227</b>	<b>29.9 %</b>	<b>0.6</b>	<b>\$43</b>	<b>0.6</b>	<b>\$43</b>	<b>21,196</b>	<b>39.0 %</b>	<b>0.8</b>	<b>\$32</b>	<b>\$32</b>	<b>28,927</b>	<b>53.3 %</b>	<b>0.7</b>	<b>\$20</b>	<b>\$20</b>	<b>289,387</b>	<b>0.7</b>	<b>0.7</b>	<b>\$20</b>
<b>Female</b>	12,478	31.5	0.7	44	0.7	44	15,196	38.4	0.8	31	31	22,175	56.0	0.7	21	21	223,710	0.7	0.7	21
<b>Disabled</b>	808	38.9	0.6	39	0.6	39	1,030	49.6	0.9	40	40	1,408	67.8	0.8	26	26	15,193	0.8	0.8	26
64 or younger	780	39.1	0.6	39	0.6	39	971	48.7	0.9	39	39	1,347	67.5	0.8	26	26	14,588	0.8	0.8	26
65-74	28	35.0	0.6	40	0.6	40	59	73.7	1.0	50	50	59	73.7	0.6	18	18	589	0.6	0.6	18
75-84	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0	0.0	0.0	0	0	0	0.0	0.0	0
85 and older	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	2	200.0	0.2	3	3	16	0.2	0.2	3
<b>Other Eligibles</b>	11,669	31.1	0.7	44	0.7	44	14,165	37.8	0.8	30	30	20,766	55.4	0.7	20	20	208,505	0.7	0.7	20
64 or younger	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0	0.0	0.0	0	0	0	0.0	0.0	0
65-74	1,384	32.9	0.6	45	0.6	45	2,718	64.7	0.9	35	35	2,647	63.0	0.8	25	25	27,410	0.8	0.8	25
75-84	4,380	32.7	0.7	44	0.7	44	6,285	46.9	0.8	31	31	7,747	57.9	0.7	23	23	78,394	0.7	0.7	23
85 and older	5,905	29.7	0.7	43	0.7	43	5,162	25.9	0.8	27	27	10,372	52.1	0.6	18	18	102,701	0.6	0.6	18
<b>Male</b>	3,749	25.4	0.6	39	0.6	39	6,000	40.7	0.9	33	33	6,752	45.8	0.6	19	19	65,677	0.6	0.6	19
<b>Disabled</b>	755	27.7	0.6	35	0.6	35	1,114	40.9	0.9	39	39	1,332	48.9	0.7	27	27	14,115	0.7	0.7	27
64 or younger	734	27.8	0.6	35	0.6	35	1,074	40.7	0.9	39	39	1,278	48.5	0.7	27	27	13,631	0.7	0.7	27
65-74	21	24.7	0.6	36	0.6	36	39	45.9	0.9	38	38	54	63.5	0.7	26	26	484	0.7	0.7	26
75-84	0	0.0	0.0	0	0.0	0	1	33.3	0.3	7	7	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	0.0	0.0	0
<b>Other Eligibles</b>	2,994	24.9	0.6	41	0.6	41	4,886	40.7	0.9	32	32	5,420	45.1	0.6	17	17	51,562	0.6	0.6	17
64 or younger	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0	0	0.0	0.0	0	0	0	0.0	0.0	0
65-74	810	26.5	0.6	43	0.6	43	1,540	50.4	0.9	35	35	1,420	46.5	0.7	21	21	14,143	0.7	0.7	21
75-84	1,286	24.5	0.6	41	0.6	41	2,277	43.3	0.8	32	32	2,286	43.5	0.6	17	17	21,877	0.6	0.6	17
85 and older	898	24.2	0.6	39	0.6	39	1,069	28.9	0.8	27	27	1,714	46.3	0.5	13	13	15,542	0.5	0.5	13
<b>Unknown</b>	1	50.0	0.3	14	0.3	14	1	50.0	1.1	12	12	1	50.0	0.1	0	0	12	0.1	0.1	0

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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 18,037 beneficiaries who were in nursing facilities for part of their enrollment and their 160,619 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](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 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<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 2002

Beneficiary Characteristics	DERMATOLOGICAL					ANTI-ASTHMATIC					Bene Mos among All-Year NF Residents	
	Users as %		Users as %		Mean Rx\$	Users as %		Users as %		Mean Rx\$		
	No. of Users	No. of Bene Mos among Users	No. of Bene Mos among Users	No. of Bene Mos among Users		No. of Residents	No. of Residents	No. of Rx	No. of Rx			
<b>All</b>	<b>77,752</b>	<b>143.1 %</b>	<b>835,841</b>	<b>0.3</b>	<b>\$7</b>	<b>25,224</b>	<b>46.4 %</b>	<b>257,198</b>	<b>0.5</b>	<b>\$22</b>	<b>54,316</b>	<b>530,147</b>
<b>Female</b>	54,978	138.9	593,793	0.3	6	17,589	44.4	180,958	0.5	21	39,578	389,391
<b>Disabled</b>	3,811	183.5	43,523	0.3	8	1,040	50.1	11,280	0.6	27	2,077	22,239
64 or younger	3,701	185.5	42,364	0.3	8	996	49.9	10,860	0.6	27	1,995	21,449
65-74	109	136.3	1,151	0.3	6	44	55.0	420	0.6	24	80	781
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
85 and older	1	100.0	8	0.1	1	0	0.0	0	0.0	0	1	8
<b>Other Eligibles</b>	51,166	136.4	550,258	0.3	6	16,549	44.1	169,678	0.5	20	37,501	367,152
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	6,507	154.9	71,397	0.3	7	2,370	56.4	24,507	0.6	28	4,202	42,603
75-84	18,420	137.6	198,757	0.3	7	6,088	45.5	62,339	0.5	22	13,391	131,774
85 and older	26,239	131.8	280,104	0.3	6	8,091	40.6	82,832	0.4	17	19,908	192,775
<b>Male</b>	22,774	154.5	242,048	0.3	7	7,635	51.8	76,240	0.5	24	14,736	140,736
<b>Disabled</b>	4,832	177.3	54,576	0.3	8	1,386	50.9	14,822	0.6	27	2,725	29,120
64 or younger	4,680	177.5	53,006	0.3	8	1,325	50.2	14,281	0.6	27	2,637	28,347
65-74	151	177.6	1,558	0.3	7	60	70.6	536	0.6	28	85	754
75-84	1	33.3	12	0.1	0	1	33.3	5	0.2	3	3	19
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Other Eligibles</b>	17,940	149.4	187,456	0.3	7	6,247	52.0	61,402	0.5	23	12,011	111,616
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	4,775	156.4	51,526	0.3	8	1,682	55.1	17,251	0.6	27	3,053	30,102
75-84	7,814	148.8	81,656	0.3	7	2,742	52.2	26,801	0.5	22	5,253	48,622
85 and older	5,351	144.4	54,274	0.3	7	1,823	49.2	17,350	0.5	20	3,705	32,892
<b>Unknown</b>	3	150.0	28	0.1	1	2	100.0	16	0.8	45	2	20

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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 18,037 beneficiaries who were in nursing facilities for part of their enrollment and their 160,619 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](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<sup>a,b</sup>  
 OHIO, 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	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx as % of All Dual Rx \$	Total No. of Benes
			12.1	71.0 %					
<b>All</b>	<b>155,552</b>	<b>71.0 %</b>	<b>12.1</b>	<b>71.0 %</b>	<b>2,641,315</b>	<b>\$25,718,914</b>	<b>\$10</b>	<b>3.9 %</b>	<b>219,109</b>
<b>Age</b>									
5 and younger	11	78.6	14.1	78.6	198	3,485	18	5.3	14
6-14	23	76.7	14.6	76.7	438	7,225	16	3.0	30
15-20	204	50.1	4.9	50.1	2,000	36,699	18	2.7	407
21-44	21,634	54.0	6.2	54.0	247,580	3,461,973	14	2.8	40,056
45-64	34,185	68.6	10.8	68.6	539,670	6,507,255	12	3.4	49,800
65-74	30,131	68.9	11.0	68.9	482,298	4,896,420	10	3.7	43,750
75-84	36,137	78.0	14.7	78.0	679,861	5,570,160	8	4.4	46,359
85 and older	33,225	85.9	17.8	85.9	689,258	5,235,658	8	6.1	38,687
Unknown	2	33.3	2.0	33.3	12	39	3	0.8	6
<b>Basis of Eligibility<sup>c</sup></b>									
Aged	97,984	78.1	14.6	78.1	1,832,468	15,508,904	8	4.6	125,506
Disabled	56,252	62.2	8.9	62.2	800,769	10,070,429	13	3.2	90,388
Adults	1,288	40.8	2.5	40.8	7,801	133,960	17	2.9	3,155
Children	28	46.7	4.6	46.7	277	5,621	20	2.9	60
Unknown	0	0.0	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>									
Female	108,116	75.8	13.3	75.8	1,894,419	18,090,038	10	4.1	142,700
Male	47,436	62.1	9.8	62.1	746,896	7,628,876	10	3.4	76,409
Unknown	0	0.0	0.0	0.0	0	0	0	0.0	0
<b>Race</b>									
White	123,817	72.7	12.9	72.7	2,191,568	21,432,066	10	4.0	170,331
African American	29,210	65.7	9.5	65.7	423,235	4,023,598	10	3.5	44,445
Other/unknown	2,525	58.3	6.1	58.3	26,512	263,250	10	2.7	4,333
<b>Use of Nursing Facilities<sup>d</sup></b>									
Entire year	51,323	94.5	24.1	94.5	1,309,619	10,117,778	8	5.6	54,316
Part year	16,166	89.6	14.9	89.6	288,437	2,467,765	9	4.8	18,037
None	88,063	60.0	7.2	60.0	1,063,259	13,133,371	12	3.1	146,756
<b>Maintenance Assistance Status</b>									
Cash	44,683	64.5	7.9	64.5	550,851	6,736,006	12	3.2	69,296
Medically needy	0	0.0	0.0	0.0	0	0	0	0.0	0
Poverty related	3,793	40.1	2.0	40.1	19,262	273,398	14	2.8	9,457
Other/unknown	107,076	76.3	14.8	76.3	2,071,202	18,709,510	9	4.3	140,356

Table D11

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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<sup>a,b</sup>  
 OHIO, 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
	1.2	\$12	\$10	\$0	\$2	2,180,582
<b>All</b>						
<b>Age</b>						
5 and younger	1.4	25	18	0	0	138
6-14	1.3	22	16	0	1	334
15-20	0.5	9	18	0	2	4,233
21-44	0.6	8	14	0	3	415,783
45-64	1.1	13	12	0	3	511,930
65-74	1.1	11	10	0	2	439,456
75-84	1.5	12	8	0	2	451,128
85 and older	1.9	15	8	0	2	357,543
Unknown	0.3	1	3	0	1	37
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	1.5	13	8	0	2	1,222,797
Disabled	0.9	11	13	0	3	933,861
Adults	0.3	6	17	0	2	23,378
Children	0.5	10	20	0	0	546
Unknown	0.0	0	0	0	0	0
<b>Gender</b>						
Female	1.3	13	10	0	2	1,437,066
Male	1.0	10	10	0	2	743,516
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	1.3	13	10	0	3	1,686,413
African American	0.9	9	10	0	1	451,208
Other/unknown	0.6	6	10	0	1	42,961
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	2.5	19	8	0	2	530,147
Part year	1.7	15	9	0	3	160,619
None	0.7	9	12	0	2	1,489,816
<b>Maintenance Assistance Status</b>						
Cash	0.7	9	12	0	2	777,717
Medically needy	0.0	0	0	0	0	0
Poverty related	0.2	3	14	0	1	83,280
Other/unknown	1.6	14	9	0	3	1,319,585

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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<sup>a,b,c</sup>  
 OHIO, 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
<b>All</b>	<b>276,111</b>	<b>\$93</b>	<b>\$25,718,914</b>	<b>100.0 %</b>	<b>2,641,315</b>	<b>\$10</b>	<b>100.0 %</b>
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	0	0	0	0.0	0	0	0.0
Cough and cold medications	41,777	92	3,862,891	15.0	136,691	28	5.2
Vitamins and minerals	52,946	100	5,286,683	20.6	379,521	14	14.4
Non-prescription drugs	115,982	86	9,984,862	38.8	1,647,062	6	62.4
Barbiturates	2,692	60	161,732	0.6	31,554	5	1.2
Benzodiazepines	55,323	95	5,239,601	20.4	416,348	13	15.8
Other Part D Excl Rx Drugs	7,391	160	1,183,145	4.6	30,139	39	1.1

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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<sup>a, b</sup>  
 OHIO, 2002

Total Number of Dual Eligible Beneficiaries, Age 85+ 38,687  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ \$85,595,556  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ \$2,213

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	2,133	5.5 %	0	0.0 %
1-500	7,113	18.4	1,686,004	2.0
501-1,000	5,265	13.6	3,901,764	4.6
1,001-1,500	4,142	10.7	5,133,965	6.0
1,501-2,000	3,526	9.1	6,147,087	7.2
2,001-2,500	2,978	7.7	6,666,352	7.8
2,501-3,000	2,476	6.4	6,786,749	7.9
3,001-3,500	2,122	5.5	6,874,234	8.0
3,501-4,000	1,897	4.9	7,103,037	8.3
4,001-4,500	1,492	3.9	6,327,669	7.4
4,501-5,000	1,292	3.3	6,123,772	7.2
5,001-5,500	1,008	2.6	5,277,412	6.2
5,501-6,000	801	2.1	4,595,678	5.4
6,001-6,500	615	1.6	3,834,235	4.5
6,501-7,000	478	1.2	3,223,645	3.8
7,001-7,500	347	0.9	2,514,246	2.9
7,501-8,000	240	0.6	1,857,582	2.2
8,001-8,500	214	0.6	1,761,953	2.1
8,501-9,000	134	0.3	1,172,268	1.4
9,001-9,500	101	0.3	934,283	1.1
9,501-10,000	75	0.2	728,962	0.9
10,001+	238	0.6	2,944,659	3.4

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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<sup>a, b</sup>  
DUAL ELIGIBLE BENEFICIARIES, OHIO, 2002

Beneficiary Characteristics	No. of Beneficiaries					No. of Beneficiaries					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>219,635</b>	<b>125,506</b>	<b>90,502</b>	<b>3,562</b>	<b>65</b>	<b>2,192,707</b>	<b>1,222,868</b>	<b>938,826</b>	<b>30,416</b>	<b>597</b>	<b>0</b>
<b>Age</b>											
5 and younger	14	0	12	0	2	138	0	124	0	14	0
6-14	30	0	21	0	9	341	0	240	0	101	0
15-20	413	0	372	6	35	4,327	0	3,966	40	321	0
21-44	40,435	0	37,916	2,500	19	424,620	0	402,755	21,704	161	0
45-64	49,935	0	49,014	921	0	514,880	0	507,216	7,664	0	0
65-74	43,756	41,336	2,300	120	0	439,662	420,639	18,129	894	0	0
75-84	46,359	45,678	666	15	0	451,159	446,204	4,841	114	0	0
85 and older	38,687	38,486	201	0	0	357,543	355,988	1,555	0	0	0
Unknown	6	6	0	0	0	37	37	0	0	0	0
<b>Gender</b>											
Female	143,023	94,428	46,818	1,742	35	1,444,845	935,595	493,849	15,087	314	0
Male	76,612	31,078	43,684	1,820	30	747,862	287,273	444,977	15,329	283	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>											
White	170,607	99,364	68,576	2,620	47	1,692,555	956,502	713,543	22,066	444	0
African American	44,668	23,456	20,352	843	17	456,631	239,365	209,653	7,470	143	0
Other/unknown	4,360	2,686	1,574	99	1	43,521	27,001	15,630	880	10	0
<b>Use of Nursing Facilities<sup>c</sup></b>											
Entire year	54,316	49,514	4,802	0	0	530,147	478,788	51,359	0	0	0
Part year	18,037	15,134	2,897	6	0	160,635	131,920	28,654	61	0	0
None	147,282	60,858	82,803	3,556	65	1,501,925	612,160	858,813	30,355	597	0
<b>Maintenance Assistance Status</b>											
Cash	69,339	29,554	39,551	233	1	779,012	334,818	441,988	2,194	12	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0
Poverty related	9,472	2,239	7,031	191	11	84,593	23,360	59,916	1,217	100	0
Other/unknown	140,824	93,713	43,920	3,138	53	1,329,102	864,690	436,922	27,005	485	0
<b>Dual Status<sup>d</sup></b>											
Full dual, all year	198,724	118,885	76,276	3,498	65	1,980,741	1,151,338	798,995	29,811	597	0
Full dual, part year	20,911	6,621	14,226	64	0	211,966	71,530	139,831	605	0	0
<b>Managed Care Status</b>											
FFS all year	217,721	125,486	89,657	2,520	58	2,173,517	1,222,644	929,817	20,521	535	0
FFS part year, with Rx claims	955	16	500	437	2	10,098	181	5,481	4,420	16	0
FFS part year, no Rx claims	433	4	231	198	0	4,162	43	2,359	1,760	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	526	0	114	407	5	4,930	0	1,169	3,715	46	0



Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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<sup>a</sup>  
 DUAL ELIGIBLE BENEFICIARIES, OHIO, 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
<b>All</b>	<b>219,635</b>	<b>2,192,707</b>	<b>219,109</b>	<b>2,180,582</b>	<b>0</b>	<b>12,125</b>
FFS all year	217,721	2,173,517	217,721	2,173,517	0	0
FFS part year, with Rx claims	955	10,098	955	5,466	0	4,632
FFS part year, with no Rx claims	433	4,162	433	1,599	0	2,563
MC all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	526	4,930	0	0	0	4,930

Source: Data for this table are from the MAX 2002 file for Ohio, released by CMS in 05/2006. 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.