

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2002 TEXAS

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TABLE D.2  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, TEXAS, 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>345,218</b>	<b>250,466</b>	<b>93,202</b>	<b>1,513</b>	<b>37</b>	<b>0</b>		<b>3,668,772</b>	<b>2,651,845</b>	<b>1,006,453</b>	<b>10,198</b>	<b>276</b>	<b>0</b>	
<b>Age</b>														
5 and younger	28	0	22	0	6	0		265	0	229	0	36	0	
6-14	97	0	82	0	15	0		999	0	884	0	115	0	
15-20	627	0	603	8	16	0		6,551	0	6,376	50	125	0	
21-44	39,150	2	38,167	981	0	0		417,259	21	410,765	6,473	0	0	
45-64	52,980	40	52,455	485	0	0		572,868	305	569,157	3,406	0	0	
65-74	98,525	97,100	1,388	37	0	0		1,064,607	1,050,652	13,710	245	0	0	
75-84	91,351	90,983	367	1	0	0		981,294	977,217	4,065	12	0	0	
85 and older	62,460	62,341	118	1	0	0		624,929	623,650	1,267	12	0	0	
Unknown	0	0	0	0	0	0		0	0	0	0	0	0	
<b>Gender</b>														
Female	227,643	177,534	49,189	903	17	0		2,434,970	1,894,027	534,920	5,888	135	0	
Male	117,575	72,932	44,013	610	20	0		1,233,802	757,818	471,533	4,310	141	0	
Unknown	0	0	0	0	0	0		0	0	0	0	0	0	
<b>Race</b>														
White	168,279	120,889	46,795	586	9	0		1,761,744	1,247,281	510,573	3,819	71	0	
African American	54,277	34,009	19,961	299	8	0		576,468	363,736	210,845	1,819	68	0	
Other/unknown	122,662	95,568	26,446	628	20	0		1,330,560	1,040,828	285,035	4,560	137	0	
<b>Use of Nursing Facilities<sup>c</sup></b>														
Entire year	57,954	53,663	4,291	0	0	0		583,412	536,567	46,845	0	0	0	
Part year	26,685	23,948	2,734	3	0	0		255,439	227,487	27,930	22	0	0	
None	260,579	172,855	86,177	1,510	37	0		2,829,921	1,887,791	931,678	10,176	276	0	
<b>Maintenance Assistance Status</b>														
Cash	222,458	153,345	68,424	686	3	0		2,434,897	1,697,713	732,137	5,028	19	0	
Medically needy	451	0	0	451	0	0		2,880	0	0	2,880	0	0	
Poverty-related	2,920	1,267	1,383	246	24	0		28,001	13,181	13,432	1,237	151	0	
Other/unknown	119,389	95,854	23,395	130	10	0		1,202,994	940,951	260,884	1,053	106	0	
<b>Dual Medicare Status<sup>d</sup></b>														
Full dual, all year	336,487	244,338	90,612	1,500	37	0		3,580,137	2,589,649	980,147	10,065	276	0	
Full dual, part year	8,731	6,128	2,590	13	0	0		88,635	62,196	26,306	133	0	0	
<b>Managed Care Status</b>														
FFS all year	337,588	246,254	90,066	1,246	22	0		3,637,051	2,635,565	992,034	9,253	199	0	
FFS part year, with Rx claims	6,694	3,675	2,774	231	14	0		28,052	14,297	12,845	839	71	0	
FFS part year, no Rx claims	936	537	362	36	1	0		3,669	1,983	1,574	106	6	0	

Source: Data for this table are from the MAX 2002 file for Texas, 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, TEXAS, 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	89.1 %	31.5	\$2,039	\$65	\$12,627	16.1 %	345,218
<b>Age</b>							
5 and younger	100.0	39.3	3,996	102	29,931	13.3	28
6-14	96.9	43.6	7,188	165	22,072	32.6	97
15-20	80.7	20.1	1,926	96	12,117	15.9	627
21-44	81.2	17.8	1,860	104	12,551	14.8	39,150
45-64	86.9	29.3	2,320	79	14,515	16.0	52,980
65-74	88.3	27.2	1,837	68	8,426	21.8	98,525
75-84	91.5	35.6	2,107	59	12,498	16.9	91,351
85 and older	94.1	42.8	2,122	50	17,873	11.9	62,460
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>							
Aged	90.9	34.1	2,006	59	12,233	16.4	250,466
Disabled	84.6	24.8	2,141	87	13,795	15.5	93,202
Adults	83.3	14.5	1,201	83	5,896	20.4	1,513
Children	91.9	30.0	3,223	107	17,010	18.9	37
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>							
Female	92.0	34.4	2,141	62	12,781	16.7	227,643
Male	83.7	25.8	1,841	71	12,330	14.9	117,575
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Race</b>							
White	90.2	38.6	2,361	61	15,502	15.2	168,279
African American	89.0	28.4	1,791	63	11,898	15.0	54,277
Other/unknown	87.8	23.2	1,706	74	9,006	18.9	122,662
<b>Use of Nursing Facilities<sup>d</sup></b>							
Entire year	97.8	68.2	3,471	51	27,169	12.8	57,954
Part year	94.5	46.8	2,494	53	19,930	12.5	26,685
None	86.7	21.8	1,674	77	8,645	19.4	260,579
<b>Maintenance Assistance Status</b>							
Cash	88.1	20.3	1,606	79	6,357	25.3	222,458
Medically needy	77.6	10.7	970	91	7,220	13.4	451
Poverty related	76.6	9.9	783	79	3,665	21.4	2,920
Other/unknown	91.5	52.9	2,879	54	24,551	11.7	119,389

Source: Data for this table are from the MAX 2002 file for Texas, 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, TEXAS, 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
<b>All</b>	<b>3.0</b>	<b>\$192</b>	<b>16.1 %</b>	<b>10.9 %</b>	<b>23.9 %</b>	<b>21.8 %</b>	<b>26.6 %</b>	<b>12.5 %</b>	<b>4.3 %</b>	<b>\$1,188</b>	<b>345,218</b>	<b>3,668,772</b>
<b>Age</b>												
5 and younger	4.2	422	13.3	0.0	10.7	14.3	53.6	14.3	7.1	3,163	28	265
6-14	4.2	698	32.6	3.1	6.2	15.5	46.4	22.7	6.2	2,143	97	999
15-20	1.9	184	15.9	19.3	37.6	14.0	21.4	5.9	1.8	1,160	627	6,551
21-44	1.7	175	14.8	18.8	35.9	21.5	18.8	3.3	1.7	1,178	39,150	417,259
45-64	2.7	215	16.0	13.1	22.6	23.6	28.7	8.0	4.0	1,342	52,980	572,868
65-74	2.5	170	21.8	11.7	27.4	25.1	24.4	7.8	3.6	780	98,525	1,064,607
75-84	3.3	196	16.9	8.5	21.7	21.7	27.4	15.4	5.3	1,164	91,351	981,294
85 and older	4.3	212	11.9	5.9	15.3	15.4	32.2	25.3	5.8	1,786	62,460	624,929
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>												
Aged	3.2	189	16.4	9.1	22.3	21.5	27.4	14.9	4.8	1,155	250,466	2,651,845
Disabled	2.3	198	15.5	15.4	28.1	22.7	24.6	6.2	3.0	1,278	93,202	1,006,453
Adults	2.2	178	20.4	16.7	31.1	22.6	21.3	3.6	4.7	875	1,513	10,198
Children	4.0	432	18.9	8.1	8.1	5.4	48.6	18.9	10.8	2,280	37	276
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	3.2	200	16.7	8.0	21.7	22.6	29.1	13.7	4.9	1,195	227,643	2,434,970
Male	2.5	176	14.9	16.3	28.3	20.2	21.8	10.2	3.2	1,175	117,575	1,233,802
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	3.7	226	15.2	9.8	18.8	18.3	28.7	17.9	6.5	1,481	168,279	1,761,744
African American	2.7	169	15.0	11.0	25.2	22.4	28.1	10.1	3.3	1,120	54,277	576,468
Other/unknown	2.1	157	18.9	12.2	30.5	26.3	23.1	6.1	1.8	830	122,662	1,330,560
<b>use of nursing Facilities<sup>d</sup></b>												
Entire year	6.8	345	12.8	2.2	4.0	6.0	30.2	42.7	14.8	2,699	57,954	583,412
Part year	4.9	261	12.5	5.5	10.9	12.0	35.6	29.0	7.1	2,082	26,685	255,439
None	2.0	154	19.4	13.3	29.7	26.3	24.9	4.1	1.7	796	260,579	2,829,921
<b>Maintenance Assistance Status</b>												
Cash	1.9	147	25.3	11.9	31.0	28.2	25.0	2.7	1.2	581	222,458	2,434,897
Medically needy	1.7	152	13.4	22.4	29.9	25.7	19.5	0.9	1.6	1,131	451	2,880
Poverty related	1.0	82	21.4	23.4	52.0	14.1	7.0	2.0	1.5	382	2,920	28,001
Other/unknown	5.3	286	11.7	8.5	10.1	10.1	30.1	31.1	10.2	2,437	119,389	1,202,994

Table D4

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Texas, 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, TEXAS, 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>3.0</b>	<b>\$192</b>	<b>\$65</b>	<b>1.4</b>	<b>\$151</b>	<b>\$108</b>	<b>0.2</b>	<b>\$13</b>	<b>\$56</b>	<b>1.3</b>	<b>\$28</b>	<b>\$21</b>
<b>Age</b>												
5 and younger	4.2	422	102	2.1	338	162	0.3	55	161	1.7	30	17
6-14	4.2	698	165	2.0	583	295	0.4	78	181	1.8	36	20
15-20	1.9	184	96	0.9	149	168	0.2	15	82	0.8	20	24
21-44	1.7	175	104	0.8	142	182	0.1	14	95	0.7	19	25
45-64	2.7	215	79	1.3	171	133	0.2	15	74	1.2	28	23
65-74	2.5	170	68	1.3	136	107	0.2	11	59	1.1	23	22
75-84	3.3	196	59	1.6	154	97	0.2	12	49	1.5	30	20
85 and older	4.3	212	50	1.8	160	87	0.4	15	42	2.1	38	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	3.2	189	59	1.5	148	98	0.2	12	49	1.5	29	20
Disabled	2.3	198	87	1.1	159	147	0.2	14	81	1.0	24	24
Adults	2.2	178	83	1.0	143	149	0.2	13	87	1.0	22	21
Children	4.0	432	107	1.8	373	204	0.3	22	81	1.9	34	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Gender</b>												
Female	3.2	200	62	1.5	157	104	0.3	13	53	1.4	29	20
Male	2.5	176	71	1.2	139	120	0.2	12	65	1.1	25	22
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	3.7	226	61	1.7	175	105	0.3	16	53	1.7	35	20
African American	2.7	169	63	1.2	131	110	0.2	11	59	1.3	26	20
Other/unknown	2.1	157	74	1.1	128	114	0.2	10	62	0.9	20	23
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	6.8	345	51	2.9	262	89	0.5	22	42	3.3	60	18
Part year	4.9	261	53	2.1	199	93	0.4	17	46	2.4	45	19
None	2.0	154	77	1.0	124	123	0.2	11	68	0.8	20	23
<b>Maintenance Assistance Status</b>												
Cash	1.9	147	79	1.0	119	124	0.1	10	71	0.8	18	24
Medically needy	1.7	152	91	0.8	122	156	0.1	12	100	0.8	18	23
Poverty related	1.0	82	79	0.5	66	132	0.1	6	69	0.4	10	22
Other/unknown	5.3	286	54	2.3	219	95	0.4	19	46	2.5	48	19

Source: Data for this table are from the MAX 2002 file for Texas, 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 Texas, 0.7 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, TEXAS, 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. of Rx	Total Rx \$	No. Dual Benes	As % of Bene Mos		
														Generic	Generic
Anti-infective Agents	0.3	0.1	0.0	0.1	\$18	\$16	\$1	\$2	\$71	\$110	\$85	\$16	179,303	51.9 %	1,979,214
Biologics	0.1	0.0	0.0	0.1	159	0	36	122	1143	0	1,310	1,101	3	0.0	36
Antineoplastic Agents	0.4	0.1	0.0	0.3	79	39	6	34	184	329	170	124	18,257	5.3	186,094
Endocrine/Metabolic Drugs	0.7	0.4	0.1	0.2	41	33	3	5	59	88	31	23	151,831	44.0	1,676,110
Cardiovascular Agents	1.1	0.4	0.1	0.6	53	37	4	11	47	85	47	19	223,023	64.6	2,437,794
Respiratory Agents	0.5	0.2	0.1	0.2	24	17	4	3	52	77	65	18	141,298	40.9	1,558,942
Gastrointestinal Agents	0.6	0.4	0.0	0.2	47	42	1	4	78	116	101	17	134,047	38.8	1,461,241
Genitourinary Agents	0.4	0.3	0.0	0.1	27	25	0	2	67	81	47	19	46,991	13.6	518,735
CNS Drugs	0.9	0.5	0.0	0.4	82	69	4	8	89	137	114	21	154,584	44.8	1,671,399
Stimulants/Anti-obesity/Anorexia	0.4	0.2	0.1	0.2	46	33	5	8	108	168	96	45	7,822	0.5	18,219
Miscellaneous Psychological/Neurological Agents	0.6	0.6	0.0	0.0	81	80	0	1	131	135	62	39	22,109	6.4	233,276
Analgesics and Anesthetics	0.5	0.2	0.0	0.3	35	27	3	5	65	130	78	18	173,897	50.4	1,922,847
Neuromuscular Agents	0.7	0.3	0.1	0.4	49	34	5	10	71	130	71	28	78,772	22.8	867,038
Nutritional Products	0.5	0.0	0.0	0.5	9	0	1	7	17	26	34	16	59,099	17.1	633,786
Hematological Agents	0.6	0.3	0.1	0.2	54	48	2	5	95	186	26	20	63,900	18.5	690,392
Topical Products	0.4	0.2	0.0	0.1	17	12	1	3	46	64	50	20	129,750	37.6	1,444,899
Miscellaneous Products	0.2	0.1	0.0	0.2	35	24	4	6	140	475	347	33	4,315	1.2	45,562
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	6	0	0	0	31	0	0	0	6,700	1.9	73,781
<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.	n.a.	10,879,270	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Texas, 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 Texas, 0.7 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, TEXAS, 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	\$76,554,340	67,339	19.5 %	729,230	0.6	\$187	\$105
ULCER DRUGS	57,761,207	125,311	36.3	1,386,804	0.5	90	42
ANTI-DIABETIC	47,859,196	126,573	36.7	1,423,344	0.5	73	34
ANTIDEPRESSANTS	45,168,749	115,835	33.6	1,266,228	0.5	71	36
ANALGESICS - ANTI-INFLAMMATORY	41,370,038	113,014	32.7	1,294,654	0.3	103	32
ANTIHYPERTENSIVE	39,660,686	73,245	21.2	840,539	0.4	120	47
ANTICONVULSANT	38,278,764	154,241	44.7	1,727,082	0.4	50	22
CALCIUM BLOCKERS	31,765,149	59,599	17.3	664,528	0.6	82	48
ANALGESICS - Narcotic	25,653,184	72,504	21.0	807,757	0.5	63	32
	23,063,164	152,992	44.3	1,707,656	0.3	41	14
Total	427,134,477	1,060,653		11,847,822	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Texas, 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, TEXAS, 2002

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ULCER DRUGS				
	No. of Rx	Rx \$	No. of Users	Mean No. of Rx	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>5,204,478</b>	<b>\$427,134,477</b>	<b>67,339</b>	<b>0.6</b>	<b>19.5 %</b>	<b>729,230</b>	<b>0.6</b>	<b>\$105</b>	<b>125,311</b>	<b>36.3 %</b>	<b>1,386,804</b>	<b>0.5</b>	<b>\$42</b>
<b>Female</b>	3,707,168	295,508,564	42,685	0.6	18.8	461,746	0.6	95	89,675	39.4	996,547	0.5	42
<b>Disabled</b>	683,384	71,631,919	10,986	0.5	22.3	126,116	0.5	122	16,304	33.1	186,584	0.4	39
5 and younger	88	3,912	0	0.0	0.0	0	0.0	0	5	62.5	53	0.7	27
6-14	600	36,187	1	1.2	2.6	12	1.2	179	18	46.2	208	0.5	34
15-20	2,415	216,706	32	0.6	11.5	347	0.6	144	84	30.2	988	0.3	24
21-44	164,043	20,231,981	4,370	0.4	25.8	50,412	0.4	124	3,882	22.9	44,673	0.3	34
45-64	495,641	49,486,777	6,413	0.5	20.9	73,496	0.5	120	11,856	38.6	135,741	0.4	40
65-74	16,348	1,315,560	138	0.7	15.7	1,511	0.7	117	351	39.9	3,672	0.5	43
75-84	3,186	264,717	21	0.5	8.3	217	0.5	76	84	33.3	988	0.4	41
85 and older	1,063	76,079	11	0.6	12.4	121	0.6	73	24	27.0	261	0.6	44
<b>Other Eligibles</b>	3,023,784	223,876,645	31,699	0.6	17.8	335,630	0.6	85	73,371	41.1	809,963	0.5	43
5 and younger	6	337	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	34	5,301	3	0.3	50.0	36	0.3	102	5	29.4	42	0.3	16
15-20	91	4,970	0	0.0	0.0	0	0.0	0	98	14.8	928	0.2	21
21-44	3,617	349,339	60	0.4	9.1	461	0.4	105	68	28.8	683	0.4	40
45-64	2,167	193,356	14	0.4	5.9	131	0.4	58	24,308	38.6	278,419	0.4	38
65-74	951,155	80,711,342	6,760	0.6	10.7	74,895	0.6	102	27,016	42.0	299,818	0.5	43
75-84	1,162,405	85,117,796	11,947	0.6	18.6	127,191	0.6	86	21,876	43.5	230,073	0.6	48
85 and older	904,309	57,494,204	12,915	0.6	25.7	132,916	0.6	75	35,636	30.3	390,257	0.5	41
<b>Male</b>	1,497,310	131,625,913	24,654	0.6	21.0	267,484	0.6	122	10,295	23.4	116,664	0.4	41
<b>Disabled</b>	523,926	58,733,879	11,975	0.5	27.2	137,360	0.5	155	10	71.4	114	0.4	25
5 and younger	123	6,416	0	0.0	0.0	0	0.0	0	17	39.5	193	0.4	38
6-14	519	34,308	1	0.5	2.3	12	0.5	104	66	20.3	770	0.4	31
15-20	2,693	299,083	79	0.6	24.3	897	0.6	123	3,640	17.2	41,809	0.4	38
21-44	189,409	25,876,723	6,248	0.5	29.5	72,049	0.5	161	6,344	29.1	71,489	0.5	43
45-64	321,306	31,785,458	5,530	0.6	25.4	63,268	0.6	150	173	34.0	1,799	0.5	40
65-74	8,148	612,292	97	0.7	19.1	934	0.7	123	33	28.7	369	0.5	52
75-84	1,407	100,759	9	0.7	7.8	108	0.7	79	12	41.4	121	0.4	32
85 and older	321	18,840	11	0.4	37.9	92	0.4	46	25,341	34.4	273,593	0.5	41
<b>Other Eligibles</b>	973,384	72,892,034	12,679	0.6	17.2	130,124	0.6	87	1	25.0	5	0.8	14
5 and younger	4	68	0	0.0	0.0	0	0.0	0	2	22.2	23	0.6	66
6-14	77	5,906	0	0.0	0.0	0	0.0	0	3	42.9	32	0.4	23
15-20	70	6,139	1	0.8	14.3	12	0.8	168	48	14.9	397	0.3	31
21-44	2,135	247,211	28	0.2	8.7	255	0.2	106	71	24.6	636	0.4	38
45-64	2,166	198,077	16	0.3	5.5	173	0.3	84	10,706	31.3	119,299	0.4	38
65-74	422,366	33,813,962	4,231	0.6	12.4	45,794	0.6	102	9,648	36.2	104,257	0.5	41
75-84	375,692	27,469,065	5,216	0.6	19.6	53,162	0.6	82	4,862	40.3	48,944	0.6	47
85 and older	170,874	11,151,606	3,187	0.6	26.4	30,728	0.6	74	0	0.0	0	0.0	0
<b>Unknown</b>	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 Texas, 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, TEXAS, 2002

Beneficiary Characteristics	ANTIDIABETIC					ANTIDEPRESSANTS					ANALGESICS - ANTI-INFLAMMATORY				
	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>126,573</b>	<b>36.7 %</b>	<b>1,423,344</b>	<b>\$34</b>	<b>0.5</b>	<b>115,835</b>	<b>33.6 %</b>	<b>1,266,228</b>	<b>\$36</b>	<b>0.5</b>	<b>113,014</b>	<b>32.7 %</b>	<b>1,294,654</b>	<b>\$32</b>	<b>0.3</b>
<b>Female</b>	89,557	39.3	1,011,187	34	0.5	85,214	37.4	935,056	36	0.5	82,826	36.4	950,165	34	0.3
<b>Disabled</b>	16,632	33.8	190,927	36	0.4	22,641	46.0	258,555	36	0.4	16,394	33.3	190,127	30	0.3
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	6	15.4	68	33	0.4	4	10.3	43	3	0.1
15-20	8	2.9	96	40	0.4	71	25.5	788	31	0.4	66	23.7	724	8	0.2
21-44	2,462	14.5	28,272	34	0.3	6,942	40.9	79,406	36	0.4	4,462	26.3	51,621	20	0.2
45-64	13,409	43.7	154,123	37	0.4	15,266	49.7	174,422	36	0.4	11,455	37.3	133,166	34	0.3
65-74	591	67.2	6,597	35	0.5	297	33.8	3,206	37	0.6	284	32.3	3,162	30	0.3
75-84	131	52.0	1,505	34	0.4	45	17.9	497	28	0.4	101	40.1	1,171	31	0.3
85 and older	31	34.8	334	35	0.4	14	15.7	168	29	0.5	22	24.7	240	24	0.3
<b>Other Eligibles</b>	72,925	40.9	820,260	33	0.5	62,573	35.1	676,501	36	0.5	66,432	37.2	760,038	35	0.3
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	16.7	12	5	0.1	0	0.0	0	0	0.0
15-20	0	0.0	0	0	0.0	4	23.5	30	52	0.6	1	5.9	10	2	0.1
21-44	55	8.3	516	24	0.3	249	37.7	2,316	36	0.3	151	22.8	1,367	15	0.2
45-64	70	29.7	691	42	0.4	93	39.4	931	36	0.3	84	35.6	842	28	0.2
65-74	32,793	52.1	376,499	35	0.4	18,157	28.8	205,590	31	0.4	26,869	42.7	312,061	32	0.3
75-84	27,723	43.1	312,321	33	0.5	23,165	36.0	251,345	36	0.6	24,502	38.1	282,456	35	0.3
85 and older	12,284	24.4	130,233	29	0.6	20,904	41.6	216,277	39	0.7	14,825	29.5	163,302	40	0.5
<b>Male</b>	37,016	31.5	412,157	34	0.5	30,621	26.0	331,172	36	0.5	30,188	25.7	344,489	27	0.3
<b>Disabled</b>	10,000	22.7	113,156	37	0.4	12,333	28.0	139,661	38	0.4	8,827	20.1	101,637	22	0.2
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	3	7.0	36	41	0.6	6	14.0	65	2	0.1
15-20	11	3.4	132	30	0.5	72	22.2	824	42	0.5	43	13.2	504	4	0.1
21-44	2,247	10.6	25,537	35	0.4	5,660	26.7	64,576	38	0.4	3,495	16.5	40,226	0.2	15
45-64	7,462	34.3	84,469	37	0.5	6,437	29.6	72,593	38	0.5	5,113	23.5	58,980	0.3	27
65-74	237	46.6	2,533	32	0.5	147	28.9	1,471	44	0.6	129	25.3	1,404	0.3	27
75-84	39	33.9	444	33	0.4	12	10.4	144	37	0.6	31	27.0	355	0.5	44
85 and older	4	13.8	41	8	0.3	2	6.9	17	27	0.5	10	34.5	103	0.3	10
<b>Other Eligibles</b>	27,016	36.7	299,001	33	0.5	18,288	24.9	191,511	35	0.6	21,361	29.0	242,852	0.3	29
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	6	45	0.7	0	0.0	0	0	0.0
15-20	0	0.0	0	0	0.0	1	14.3	12	67	1.0	0	0.0	0	0	0.0
21-44	55	17.1	463	38	0.4	95	29.5	807	37	0.3	78	24.2	739	0.2	29
45-64	85	29.4	775	37	0.3	83	28.7	777	27	0.3	87	30.1	835	0.2	25
65-74	13,983	40.9	158,118	34	0.4	6,830	20.0	74,841	34	0.5	10,168	29.7	117,171	0.3	27
75-84	10,047	37.7	110,696	32	0.5	7,294	27.3	76,002	35	0.6	7,980	29.9	91,171	0.3	30
85 and older	2,846	23.6	28,949	29	0.6	3,984	33.0	39,066	38	0.6	3,048	25.3	32,936	0.4	35
<b>Unknown</b>	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 Texas, 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, TEXAS, 2002

Beneficiary Characteristics	ANTHYPERLIPIDEMIC					ANTHYPERTENSIVE					ANTICONVULSANT				
	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>73,245</b>	<b>21.2 %</b>	<b>840,539</b>	<b>0.4</b>	<b>\$47</b>	<b>154,241</b>	<b>44.7 %</b>	<b>1,727,082</b>	<b>0.4</b>	<b>\$22</b>	<b>59,599</b>	<b>17.3 %</b>	<b>664,528</b>	<b>0.6</b>	<b>\$48</b>
<b>Female</b>	51,261	22.5	590,203	0.4	47	109,884	48.3	1,234,233	0.4	23	37,295	16.4	416,234	0.6	44
<b>Disabled</b>	9,303	18.9	107,621	0.3	44	16,318	33.2	186,643	0.4	20	14,670	29.8	168,002	0.5	60
5 and younger	2	25.0	24	0.3	14	1	12.5	5	1.6	102	1	12.5	5	0.2	17
6-14	4	10.3	46	0.5	29	29	74.4	341	0.4	13	10	25.6	120	0.6	38
15-20	18	6.5	206	0.3	23	78	28.1	889	0.4	16	75	27.0	877	0.7	75
21-44	1,231	7.3	14,215	0.3	39	2,599	15.3	29,479	0.3	17	5,581	32.9	64,219	0.5	72
45-64	7,688	25.0	89,020	0.3	45	12,933	42.1	148,382	0.4	21	8,784	28.6	100,398	0.5	53
65-74	282	32.1	3,200	0.4	47	499	56.8	5,490	0.4	23	198	22.5	2,140	0.6	45
75-84	63	25.0	741	0.4	46	128	50.8	1,491	0.4	23	16	6.3	183	0.6	40
85 and older	15	16.9	169	0.4	68	51	57.3	566	0.4	20	5	5.6	60	0.8	27
<b>Other Eligibles</b>	41,958	23.5	482,582	0.4	48	93,566	52.4	1,047,590	0.5	23	22,625	12.7	248,232	0.6	33
5 and younger	1	50.0	9	0.3	24	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	3	50.0	25	0.3	33
15-20	0	0.0	0	0.0	0	8	47.1	59	0.3	8	3	17.6	25	0.5	39
21-44	25	3.8	262	0.3	39	76	11.5	609	0.3	15	126	19.1	1,100	0.4	50
45-64	33	14.0	355	0.3	46	83	35.2	758	0.4	21	39	16.5	369	0.4	37
65-74	20,580	32.7	238,265	0.4	47	34,299	54.5	393,980	0.4	23	8,216	13.1	93,019	0.5	35
75-84	16,204	25.2	186,674	0.4	49	35,606	55.4	401,704	0.5	24	8,734	13.6	95,870	0.6	33
85 and older	5,115	10.2	57,017	0.5	50	23,494	46.7	250,480	0.6	23	5,504	10.9	57,824	0.6	30
<b>Male</b>	21,984	18.7	250,336	0.4	47	44,357	37.7	492,849	0.4	21	22,304	19.0	248,294	0.6	54
<b>Disabled</b>	6,512	14.8	74,906	0.4	46	11,245	25.5	126,349	0.4	20	12,848	29.2	147,300	0.6	68
5 and younger	0	0.0	0	0.0	0	7	50.0	84	0.4	18	1	7.1	12	0.2	2
6-14	6	14.0	64	0.4	32	28	65.1	327	0.5	15	4	9.3	48	0.8	76
15-20	5	1.5	56	0.2	27	69	21.2	803	0.3	11	86	26.5	1,005	0.7	95
21-44	1,744	8.2	20,306	0.4	41	3,128	14.7	35,177	0.4	19	6,460	30.5	74,468	0.6	73
45-64	4,622	21.2	53,018	0.4	48	7,695	35.4	86,509	0.4	21	6,173	28.4	70,479	0.7	62
65-74	114	22.4	1,235	0.5	50	247	48.5	2,635	0.5	23	116	22.8	1,210	0.7	53
75-84	16	13.9	175	0.5	49	59	51.3	691	0.4	21	4	3.5	48	0.5	41
85 and older	5	17.2	52	0.3	34	12	41.4	123	0.6	27	4	13.8	30	0.5	15
<b>Other Eligibles</b>	15,472	21.0	175,430	0.4	47	33,112	45.0	366,500	0.4	21	9,456	12.9	100,994	0.6	35
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	11.1	3	0.3	21	4	44.4	36	0.6	56	0	0.0	0	0.0	0
15-20	1	14.3	1	1.0	63	3	42.9	18	0.3	3	2	28.6	13	0.9	159
21-44	41	12.7	378	0.3	31	75	23.3	675	0.3	17	63	19.6	564	0.4	65
45-64	77	26.6	708	0.3	43	97	33.6	812	0.3	22	38	13.1	371	0.4	34
65-74	8,613	25.2	98,594	0.4	47	15,335	44.8	173,465	0.4	21	4,310	12.6	47,681	0.6	38
75-84	5,670	21.3	64,278	0.4	48	12,695	47.6	140,704	0.4	21	3,610	13.5	38,113	0.6	32
85 and older	1,069	8.9	11,468	0.5	47	4,903	40.7	50,790	0.6	21	1,433	11.9	14,252	0.6	29
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table D7C

Dual Eligible Beneficiaries

Source: Data for this table are from the MAX 2002 file for Texas, 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, TEXAS, 2002

Beneficiary Characteristics	CALCIUM BLOCKERS				ANALGESICS - Narcotic				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	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 \$									
<b>All</b>	72,504	21.0 %	807,757	\$32	0.5	152,992	44.3 %	1,707,656	\$14	0.3	345,218	3,668,772					
<b>Female</b>	54,418	23.9	607,934	32	0.5	111,115	48.8	1,244,591	14	0.3	227,643	2,434,970					
<b>Disabled</b>	7,349	14.9	83,634	32	0.4	27,557	56.0	314,750	19	0.3	49,189	534,920					
5 and younger	5	62.5	51	26	0.4	3	37.5	20	10	0.9	8	80					
6-14	23	59.0	264	53	0.7	17	43.6	201	1	0.1	39	436					
15-20	50	18.0	569	37	0.5	132	47.5	1,527	2	0.2	278	2,944					
21-44	1,121	6.6	12,720	32	0.3	8,140	48.0	92,873	17	0.3	16,953	183,235					
45-64	5,813	18.9	66,323	32	0.4	18,709	61.0	214,073	20	0.4	30,691	335,651					
65-74	250	28.4	2,728	34	0.5	443	50.4	4,763	15	0.3	879	8,798					
75-84	64	25.4	724	33	0.5	88	34.9	1,015	7	0.2	252	2,817					
85 and older	23	25.8	255	32	0.5	25	28.1	278	3	0.2	89	959					
<b>Other Eligibles</b>	47,069	26.4	524,300	32	0.5	83,558	46.8	929,841	12	0.3	178,454	1,900,050					
5 and younger	1	50.0	9	14	0.3	0	0.0	0	0	0.0	2	10					
6-14	1	16.7	12	48	0.8	1	16.7	12	1	0.1	6	45					
15-20	3	17.6	22	46	0.5	9	52.9	62	5	0.3	17	130					
21-44	27	4.1	228	26	0.4	373	56.4	3,362	26	0.4	661	4,168					
45-64	36	15.3	324	29	0.4	141	59.7	1,421	12	0.3	236	1,690					
65-74	15,649	24.9	178,871	32	0.4	29,261	46.5	336,051	12	0.3	62,945	688,318					
75-84	18,153	28.2	203,574	32	0.5	30,573	47.5	342,508	12	0.3	64,306	697,288					
85 and older	13,199	26.3	141,260	32	0.6	23,200	46.1	246,425	12	0.4	50,281	508,401					
<b>Male</b>	18,086	15.4	199,823	32	0.5	41,877	35.6	463,065	13	0.3	117,575	1,233,802					
<b>Disabled</b>	4,623	10.5	51,529	34	0.4	15,700	35.7	176,906	18	0.4	44,013	471,533					
5 and younger	5	35.7	54	36	0.6	4	28.6	42	1	0.1	14	149					
6-14	22	51.2	255	53	0.7	9	20.9	105	1	0.1	43	448					
15-20	35	10.8	382	38	0.5	85	26.2	996	4	0.2	325	3,432					
21-44	1,172	5.5	13,114	33	0.4	6,603	31.1	74,659	18	0.3	21,214	227,530					
45-64	3,257	15.0	36,357	34	0.5	8,748	40.2	98,515	19	0.4	21,764	233,506					
65-74	99	19.4	1,022	33	0.5	197	38.7	1,978	11	0.4	509	4,912					
75-84	24	20.9	260	35	0.6	45	39.1	516	6	0.2	115	1,248					
85 and older	9	31.0	85	33	0.5	9	31.0	95	7	0.5	29	308					
<b>Other Eligibles</b>	13,463	18.3	148,294	31	0.5	26,177	35.6	286,159	10	0.3	73,562	762,269					
5 and younger	0	0.0	0	0	0.0	0	0.0	0	0	0.0	4	26					
6-14	5	55.6	44	46	0.8	1	11.1	12	1	0.1	9	70					
15-20	0	0.0	0	0	0.0	3	42.9	32	4	0.4	7	45					
21-44	23	7.1	172	21	0.2	213	66.1	1,922	39	0.4	322	2,326					
45-64	25	8.7	199	29	0.3	151	52.2	1,361	17	0.4	289	2,021					
65-74	5,875	17.2	66,309	31	0.5	11,861	34.7	133,247	11	0.3	34,192	362,579					
75-84	5,262	19.7	58,019	31	0.5	9,487	35.6	103,758	9	0.3	26,678	279,941					
85 and older	2,273	18.8	23,551	30	0.6	4,461	37.0	45,827	9	0.3	12,061	115,261					
<b>Unknown</b>	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 Texas, 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, TEXAS, 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>\$345</b>	<b>6.8</b>	<b>57,954</b>	<b>583,412</b>
<b>Age</b>				
0-64	465	7.6	4,030	44,198
65-74	422	7.7	8,379	87,800
75-84	362	7.1	18,837	190,104
85 and older	286	6.1	26,708	261,310
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	339	6.8	42,148	428,650
Male	360	6.6	15,806	154,762
Unknown	0	0.0	0	0
<b>Race</b>				
White	346	7	42,850	425,860
African American	315	6	7,184	75,792
Other/unknown	364	6.4	7,920	81,760
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	335	6.7	53,663	536,567
Disabled	461	7.6	4,291	46,845
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 Texas, 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 26,685 beneficiaries who were in nursing facilities for part of their enrollment and their 255,439 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, TEXAS, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total # of Rx	Total Rx \$	No. Residents	As % of Dual All-Year NF Residents	No. of Bene Mos			
	Total	Patented	Off-Patent	Brand-Name	Total	Patented	Off-Patent	Brand-Name								
				Generic				Generic								
Anti-infective Agents	0.3	0.2	0.0	0.1	\$18	\$14	\$1	\$2	\$53	\$81	\$14	147,609	\$7,786,430	41,702	72.0 %	441,928
Biologics	0.3	0.0	0.1	0.2	186	0	109	77	745	1,310	463	3	2,236	1	0.0	12
Antineoplastic Agents	0.5	0.1	0.0	0.4	80	20	8	52	149	231	170	37,504	5,574,380	7,164	12.4	70,101
Endocrine/Metabolic Drugs	1.2	0.6	0.2	0.4	45	35	3	7	39	61	20	370,746	14,279,680	30,020	51.8	314,548
Cardiovascular Agents	2.0	0.5	0.2	1.3	52	29	5	18	26	56	32	906,661	23,902,871	44,476	76.7	457,591
Respiratory Agents	0.7	0.3	0.1	0.3	28	18	5	5	43	63	58	237,175	10,128,564	34,101	58.8	362,206
Gastrointestinal Agents	1.0	0.5	0.0	0.5	61	51	1	8	61	104	82	336,769	20,389,472	32,212	55.6	336,120
Genitourinary Agents	0.6	0.4	0.0	0.1	35	32	1	3	59	72	43	91,488	5,399,535	14,335	24.7	154,188
CNS Drugs	1.5	0.9	0.1	0.5	120	105	5	10	78	112	73	696,210	54,185,101	43,278	74.7	450,554
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.1	0.3	41	31	2	8	73	139	41	2,394	173,752	401	0.7	4,256
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	98	98	0	0	124	126	0	87,813	10,911,504	10,621	18.3	110,911
Analgesics and Anesthetics	0.9	0.4	0.1	0.4	42	33	3	6	50	95	56	276,011	13,786,968	30,856	53.2	324,552
Neuromuscular Agents	1.2	0.4	0.1	0.7	60	36	5	19	52	88	59	230,407	11,980,228	18,677	32.2	200,115
Nutritional Products	0.7	0.0	0.0	0.7	11	0	1	9	14	21	28	162,464	2,352,293	21,225	36.6	220,655
Hematological Agents	0.9	0.4	0.2	0.4	69	59	4	6	73	154	19	174,376	12,696,155	17,761	30.6	184,287
Topical Products	0.5	0.2	0.0	0.2	20	14	2	4	39	56	48	186,093	7,313,611	34,052	58.8	367,694
Miscellaneous Products	0.2	0.0	0.0	0.2	8	4	0	4	37	161	238	4,063	152,116	1,711	3.0	17,994
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	5	0	0	0	23	0	0	5,659	130,290	2,245	3.9	24,058
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.	3,953,445	201,145,186	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Texas, 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 26,685 beneficiaries who were in nursing facilities for part of their enrollment and their 255,439 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 Texas, 0.7 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.

Table D9

Dual Eligible 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; 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, TEXAS, 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	\$31,679,746	28,516	49.2 %	303,245	0.7	\$144	\$104
ANTIDEPRESSANTS	18,578,006	37,818	65.3	399,802	0.8	60	46
ULCER DRUGS	17,370,677	30,312	52.3	318,879	0.7	75	54
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	10,911,534	10,662	18.4	111,369	0.8	124	98
ANTIDIABETIC	8,606,998	22,910	39.5	244,005	0.8	43	35
ANALGESICS - ANTI-INFLAMMATORY	8,188,307	15,591	26.9	169,388	0.6	76	48
ANTICONVULSANT	8,040,164	15,794	27.3	170,931	0.9	54	47
ANTIHYPERTENSIVE	7,349,689	27,479	47.4	288,103	0.8	33	26
MISC. HEMATOLOGICAL	6,577,928	10,574	18.2	111,005	0.7	82	59
ANTINEOPLASTICS	5,574,380	7,296	12.6	71,403	0.5	149	78
<b>Total</b>	<b>122,877,429</b>	<b>206,952</b>		<b>2,188,130</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 Texas, 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 26,685 beneficiaries who were in nursing facilities for part of their enrollment and their 255,439 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, TEXAS, 2002

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	No. of Rx	Rx \$	No. of Users	Users as %		Mean Rx \$	Mean No. of Rx	No. of Bene Mos among Users	NF Residents	All-Year Residents	No. of Users	Users as %		Mean Rx \$	Mean No. of Rx
				of All-Year	NF							of All-Year	NF		
<b>All</b>	<b>1,640,177</b>	<b>\$122,877,429</b>	<b>28,516</b>	<b>49.2 %</b>	<b>303,245</b>	<b>0.7</b>	<b>\$105</b>	<b>37,818</b>	<b>65.3 %</b>	<b>399,802</b>	<b>0.8</b>	<b>\$47</b>			
<b>Female</b>	1,186,571	87,907,562	19,776	46.9	211,434	0.7	101	27,960	66.3	296,775	0.8	47			
<b>Disabled</b>	78,255	6,728,931	1,299	65.2	14,801	0.8	148	1,680	84.4	18,879	0.8	52			
64 or younger	72,813	6,311,076	1,207	65.5	13,772	0.8	149	1,571	85.3	17,725	0.8	52			
65-74	4,546	356,942	77	68.8	880	0.8	129	95	84.8	1,019	0.8	50			
75-84	420	27,871	8	57.1	76	0.9	122	8	57.1	63	0.5	22			
85 and older	476	33,042	7	30.4	73	0.8	95	6	26.1	72	0.6	43			
<b>Other Eligibles</b>	1,108,316	81,178,631	18,477	46.0	196,633	0.7	98	26,280	65.4	277,896	0.8	46			
64 or younger	25	2,255	0	0.0	0	0.0	0	1	50.0	10	1.0	54			
65-74	179,391	13,796,676	2,994	64.6	33,049	0.8	128	3,754	81.0	41,064	0.8	49			
75-84	421,513	30,848,758	6,988	52.2	75,212	0.7	100	9,764	73.0	104,160	0.8	47			
85 and older	507,387	36,530,942	8,495	38.4	88,372	0.7	84	12,761	57.6	132,662	0.8	45			
<b>Male</b>	453,606	34,969,867	8,740	55.3	91,811	0.7	112	9,858	62.4	103,027	0.8	46			
<b>Disabled</b>	86,600	7,384,544	1,571	68.3	17,737	0.8	157	1,576	68.5	17,521	0.8	51			
64 or younger	82,818	7,097,815	1,502	68.8	17,023	0.8	158	1,503	68.8	16,747	0.8	51			
65-74	3,279	249,115	56	59.6	578	0.9	150	67	71.3	709	0.8	49			
75-84	381	28,268	7	46.7	84	0.7	97	5	33.3	60	0.9	44			
85 and older	122	9,346	6	85.7	52	0.5	69	1	14.3	5	1.0	79			
<b>Other Eligibles</b>	367,006	27,585,323	7,169	53.1	74,074	0.7	102	8,282	61.3	85,506	0.8	45			
64 or younger	88	8,221	2	100.0	24	0.5	130	1	50.0	12	1.1	77			
65-74	119,298	9,150,343	2,278	64.4	24,785	0.7	118	2,488	70.4	26,944	0.8	47			
75-84	151,938	11,282,440	3,001	55.2	30,948	0.7	97	3,458	63.7	35,627	0.8	45			
85 and older	95,682	7,144,319	1,888	41.6	18,317	0.7	86	2,335	51.5	22,923	0.7	43			
<b>Unknown</b>	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 Texas, 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 26,685 beneficiaries who were in nursing facilities for part of their enrollment and their 255,439 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, TEXAS, 2002

Beneficiary Characteristics	ULCER DRUGS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIDIABETIC				
	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Users as % of All-Year NF Residents	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Users as % of All-Year NF Residents	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Users as % of All-Year NF Residents
<b>All</b>	<b>30,312</b>	<b>318,879</b>	<b>0.7</b>	<b>\$55</b>	<b>10,662</b>	<b>18.4 %</b>	<b>111,369</b>	<b>0.8</b>	<b>\$98</b>	<b>22,910</b>	<b>39.5 %</b>	<b>244,005</b>	<b>0.8</b>	<b>\$35</b>	
<b>Female</b>	22,122	234,107	0.7	55	7,879	18.7	83,186	0.8	98	16,204	38.4	173,904	0.8	35	
<b>Disabled</b>	1,136	12,622	0.7	55	159	8.0	1,754	0.7	126	1,001	50.3	11,305	0.9	42	
64 or younger	1,046	11,713	0.7	54	134	7.3	1,508	0.7	132	914	49.6	10,375	0.9	42	
65-74	69	696	0.8	59	16	14.3	182	0.6	81	72	64.3	790	0.9	40	
75-84	8	78	1.0	70	5	35.7	27	1.0	124	6	42.9	62	1.0	35	
85 and older	13	135	0.8	58	4	17.4	37	0.9	117	9	39.1	78	0.8	40	
<b>Other Eligibles</b>	20,986	221,485	0.7	55	7,720	19.2	81,432	0.8	98	15,203	37.9	162,599	0.8	35	
64 or younger	1	10	1.0	112	1	50.0	10	0.4	51	0	0.0	0	0.0	0	
65-74	2,731	29,909	0.7	55	772	16.6	8,271	0.8	100	3,057	65.9	33,822	0.9	40	
75-84	7,279	77,577	0.7	55	3,000	22.4	31,478	0.8	100	6,528	48.8	70,371	0.8	36	
85 and older	10,975	113,989	0.7	55	3,947	17.8	41,673	0.8	96	5,618	25.4	58,406	0.8	31	
<b>Male</b>	8,190	84,772	0.7	54	2,783	17.6	28,183	0.8	97	6,706	42.4	70,101	0.8	35	
<b>Disabled</b>	1,230	13,616	0.7	56	154	6.7	1,682	0.8	100	1,110	48.3	12,152	0.9	42	
64 or younger	1,176	13,058	0.7	56	146	6.7	1,603	0.7	101	1,038	47.5	11,397	0.9	42	
65-74	41	427	0.7	50	7	7.4	76	0.8	80	65	69.1	696	0.8	39	
75-84	8	85	0.9	52	0	0.0	0	0.0	0	5	33.3	42	0.9	62	
85 and older	5	46	0.6	64	1	14.3	3	1.0	131	2	28.6	17	0.3	5	
<b>Other Eligibles</b>	6,960	71,156	0.7	53	2,629	19.5	26,501	0.8	97	5,596	41.4	57,949	0.8	34	
64 or younger	2	13	1.0	13	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
65-74	1,997	21,245	0.7	53	579	16.4	6,211	0.8	95	1,922	54.4	20,798	0.8	37	
75-84	2,787	28,538	0.7	53	1,152	21.2	11,578	0.8	97	2,421	44.6	25,082	0.8	34	
85 and older	2,174	21,360	0.7	54	898	19.8	8,712	0.8	97	1,253	27.6	12,069	0.8	30	
<b>Unknown</b>	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 Texas, 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 26,685 beneficiaries who were in nursing facilities for part of their enrollment and their 255,439 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, TEXAS, 2002

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY						ANTICONVULSANT						ANTIHYPERTENSIVE					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx	No. of Users	No. of Bene Mos among Residents	Mean No. of Rx
<b>All</b>	<b>15,591</b>	<b>26.9 %</b>	<b>0.6</b>	<b>15,794</b>	<b>27.3 %</b>	<b>0.9</b>	<b>27,479</b>	<b>47.4 %</b>	<b>\$47</b>	<b>27,479</b>	<b>47.4 %</b>	<b>\$47</b>	<b>27,479</b>	<b>47.4 %</b>	<b>288,103</b>	<b>0.8</b>	<b>\$26</b>	
<b>Female</b>	11,979	28.4	0.6	10,308	24.5	0.8	19,829	47.0	45	19,829	47.0	45	19,829	47.0	208,755	0.8	26	
<b>Disabled</b>	571	28.7	0.6	1,476	74.1	1.0	875	43.9	66	875	43.9	66	875	43.9	9,825	0.8	26	
64 or younger	527	28.6	0.6	1,398	75.9	1.0	797	43.3	66	797	43.3	66	797	43.3	9,050	0.8	26	
65-74	36	32.1	0.5	71	63.4	0.9	62	55.4	58	62	55.4	58	62	55.4	625	0.8	31	
75-84	4	28.6	0.8	4	28.6	1.4	6	42.9	52	6	42.9	52	6	60	0.6	0.6	27	
85 and older	4	17.4	0.5	3	13.0	1.1	10	43.5	34	10	43.5	34	10	90	0.8	0.8	25	
<b>Other Eligibles</b>	11,408	28.4	0.6	8,832	22.0	0.8	18,954	47.2	41	18,954	47.2	41	18,954	47.2	198,930	0.8	26	
64 or younger	1	50.0	0.1	0	0.0	0.0	0	0.0	0	0	0.0	0	0	0	0	0.0	0	
65-74	1,501	32.4	0.6	2,158	46.5	0.9	2,569	55.4	50	2,569	55.4	50	2,569	55.4	28,006	0.8	27	
75-84	3,970	29.7	0.6	3,576	26.7	0.8	6,826	51.0	41	6,826	51.0	41	6,826	51.0	72,415	0.8	26	
85 and older	5,936	26.8	0.6	3,098	14.0	0.8	9,559	43.2	34	9,559	43.2	34	9,559	43.2	98,509	0.8	25	
<b>Male</b>	3,612	22.9	0.6	5,486	34.7	0.9	7,650	48.4	52	7,650	48.4	52	7,650	48.4	79,348	0.8	25	
<b>Disabled</b>	512	22.3	0.6	1,676	72.9	1.0	1,110	48.3	67	1,110	48.3	67	1,110	48.3	12,204	0.8	28	
64 or younger	471	21.6	0.6	1,626	74.5	1.0	1,039	47.6	67	1,039	47.6	67	1,039	47.6	11,500	0.8	28	
65-74	31	33.0	0.5	48	51.1	0.9	60	63.8	49	60	63.8	49	60	589	0.8	29		
75-84	6	40.0	0.7	1	6.7	1.0	7	46.7	72	7	46.7	72	7	84	0.7	28		
85 and older	4	57.1	0.4	1	14.3	0.7	4	57.1	9	4	57.1	9	4	31	0.9	30		
<b>Other Eligibles</b>	3,100	23.0	0.6	3,810	28.2	0.8	6,540	48.4	45	6,540	48.4	45	6,540	48.4	67,144	0.8	25	
64 or younger	1	50.0	2.0	2	100.0	1.8	1	50.0	146	1	50.0	146	1	1	2.0	60		
65-74	834	23.6	0.6	1,512	42.8	0.9	1,918	54.2	52	1,918	54.2	52	1,918	54.2	20,620	0.8	26	
75-84	1,227	22.6	0.6	1,576	29.0	0.8	2,706	49.8	42	2,706	49.8	42	2,706	49.8	27,800	0.8	25	
85 and older	1,038	22.9	0.6	720	15.9	0.8	1,915	42.2	35	1,915	42.2	35	1,915	42.2	18,723	0.7	24	
<b>Unknown</b>	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 Texas, 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 26,685 beneficiaries who were in nursing facilities for part of their enrollment and their 255,439 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, TEXAS, 2002

Beneficiary Characteristics	MISC. HEMATOLOGICAL					ANTINEOPLASTICS						
	Users as %		No. of Bene		Mean	Users as %		No. of Bene		Mean	Bene Mos among All-Year NF Residents	
	No. of Users	Residents	No. of Users	Mos among Users	Rx	No. of Users	Residents	No. of Users	Mos among Users	No. of Rx		
<b>All</b>	<b>10,574</b>	<b>18.2 %</b>	<b>111,005</b>	<b>0.7</b>	<b>\$59</b>	<b>7,296</b>	<b>12.6 %</b>	<b>71,403</b>	<b>0.5</b>	<b>\$78</b>	<b>57,954</b>	<b>583,412</b>
<b>Female</b>	7,435	17.6	78,547	0.7	59	5,625	13.3	55,489	0.5	74	42,148	428,650
<b>Disabled</b>	266	13.4	2,999	0.7	58	193	9.7	2,055	0.5	187	1,991	21,878
64 or younger	232	12.6	2,658	0.7	59	174	9.4	1,905	0.5	196	1,842	20,373
65-74	24	21.4	271	0.6	54	14	12.5	109	0.4	84	112	1,161
75-84	0	0.0	0	0.0	0	1	7.1	12	1.0	54	14	135
85 and older	10	43.5	70	0.6	41	4	17.4	29	0.3	20	23	209
<b>Other Eligibles</b>	7,169	17.9	75,548	0.7	59	5,432	13.5	53,434	0.5	70	40,157	406,772
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	12
65-74	841	18.1	9,279	0.7	60	472	10.2	4,948	0.6	82	4,637	49,251
75-84	2,530	18.9	26,796	0.7	62	1,686	12.6	17,002	0.5	67	13,376	137,425
85 and older	3,798	17.2	39,473	0.7	57	3,274	14.8	31,484	0.5	69	22,142	220,084
<b>Male</b>	3,139	19.9	32,458	0.7	59	1,671	10.6	15,914	0.5	92	15,806	154,762
<b>Disabled</b>	316	13.7	3,460	0.8	62	169	7.3	1,862	0.5	113	2,300	24,967
64 or younger	298	13.6	3,274	0.8	62	158	7.2	1,745	0.5	115	2,184	23,800
65-74	16	17.0	162	0.8	66	9	9.6	93	0.5	68	94	942
75-84	1	6.7	12	1.0	104	2	13.3	24	0.8	102	15	162
85 and older	1	14.3	12	0.6	55	0	0.0	0	0.0	0	7	63
<b>Other Eligibles</b>	2,823	20.9	28,998	0.7	59	1,502	11.1	14,052	0.5	90	13,506	129,795
64 or younger	1	50.0	1	2.0	162	0	0.0	0	0.0	0	2	13
65-74	757	21.4	8,159	0.7	61	299	8.5	3,051	0.5	78	3,536	36,446
75-84	1,131	20.8	11,706	0.7	58	617	11.4	5,758	0.5	93	5,432	52,382
85 and older	934	20.6	9,132	0.7	58	586	12.9	5,243	0.5	93	4,536	40,954
<b>Unknown</b>	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 Texas, 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 26,685 beneficiaries who were in nursing facilities for part of their enrollment and their 255,439 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>  
 TEXAS, 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
			1.8	39.1 %					
<b>All</b>	<b>134,839</b>	<b>39.1 %</b>	<b>1.8</b>	<b>39.1 %</b>	<b>612,279</b>	<b>\$57</b>	<b>\$19,638,258</b>	<b>\$32</b>	<b>345,218</b>
<b>Age</b>									
5 and younger	18	64.3	2.8	64.3	78	201	5,626	72	28
6-14	43	44.3	1.7	44.3	167	547	53,085	318	97
15-20	216	34.4	1.5	34.4	954	90	56,276	59	627
21-44	13,661	34.9	1.4	34.9	56,082	54	2,125,134	38	39,150
45-64	20,948	39.5	2.0	39.5	104,668	71	3,764,949	36	52,980
65-74	35,317	35.8	1.5	35.8	150,017	50	4,916,583	33	98,525
75-84	36,564	40.0	1.9	40.0	169,569	56	5,117,541	30	91,351
85 and older	28,072	44.9	2.1	44.9	130,744	58	3,599,064	28	62,460
Unknown	0	0.0	0.0	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>									
Aged	99,246	39.6	1.8	39.6	446,916	54	13,518,815	30	250,466
Disabled	35,096	37.7	1.8	37.7	163,539	65	6,061,779	37	93,202
Adults	480	31.7	1.2	31.7	1,759	37	55,811	32	1,513
Children	17	45.9	1.8	45.9	65	50	1,853	29	37
Unknown	0	0.0	0.0	0.0	0	0	0	0	0
<b>Gender</b>									
Female	94,638	41.6	1.9	41.6	428,819	56	12,776,592	30	227,643
Male	40,201	34.2	1.6	34.2	183,460	58	6,861,666	37	117,575
Unknown	0	0.0	0.0	0.0	0	0	0	0	0
<b>Race</b>									
White	72,435	43.0	2.3	43.0	382,205	68	11,460,873	30	168,279
African American	18,169	33.5	1.4	33.5	76,983	47	2,567,117	33	54,277
Other/unknown	44,235	36.1	1.2	36.1	153,091	46	5,610,268	37	122,662
<b>Use of Nursing Facilities<sup>d</sup></b>									
Entire year	32,444	56.0	3.5	56.0	204,009	97	5,601,356	27	57,954
Part year	14,106	52.9	2.7	52.9	72,887	82	2,177,454	30	26,685
None	88,289	33.9	1.3	33.9	335,383	46	11,859,448	35	260,579
<b>Maintenance Assistance Status</b>									
Cash	75,106	33.8	1.2	33.8	259,855	42	9,410,148	36	222,458
Medically needy	117	25.9	0.7	25.9	312	29	13,104	42	451
Poverty related	672	23.0	0.6	23.0	1,765	22	64,879	37	2,920
Other/unknown	58,944	49.4	2.9	49.4	350,347	85	10,150,127	29	119,389

Source: Data for this table are from the MAX 2002 file for Texas, 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>  
 TEXAS, 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
All	0.2	\$5	\$32	\$0	\$1	3,668,772
<b>Age</b>						
5 and younger	0.3	21	72	0	0	265
6-14	0.2	53	318	0	0	999
15-20	0.1	9	59	0	1	6,551
21-44	0.1	5	38	0	1	417,259
45-64	0.2	7	36	0	2	572,868
65-74	0.1	5	33	0	1	1,064,607
75-84	0.2	5	30	0	1	981,294
85 and older	0.2	6	28	0	1	624,929
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.2	5	30	0	1	2,651,845
Disabled	0.2	6	37	0	2	1,006,453
Adults	0.2	5	32	0	2	10,198
Children	0.2	7	29	0	0	276
Unknown	0.0	0	0	0	0	0
<b>Gender</b>						
Female	0.2	5	30	0	1	2,434,970
Male	0.1	6	37	0	1	1,233,802
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	0.2	7	30	0	2	1,761,744
African American	0.1	4	33	0	1	576,468
Other/unknown	0.1	4	37	0	1	1,330,560
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.3	10	27	0	3	583,412
Part year	0.3	9	30	0	2	255,439
None	0.1	4	35	0	1	2,829,921
<b>Maintenance Assistance Status</b>						
Cash	0.1	4	36	0	1	2,434,897
Medically needy	0.1	5	42	0	1	2,880
Poverty related	0.1	2	37	0	1	28,001
Other/unknown	0.3	8	29	0	2	1,202,994

Source: Data for this table are from the MAX 2002 file for Texas, 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>  
TEXAS, 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>166,190</b>	<b>\$118</b>	<b>\$19,638,258</b>	<b>100.0 %</b>	<b>612,279</b>	<b>\$32</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	8,550	216	1,846,175	9.4	12,522	147	2.0
Fertility drugs	3	1,905	5,714	0.0	5	1,143	0.0
Drugs for cosmetic purposes	3,183	1,090	3,470,081	17.7	13,711	253	2.2
Cough and cold medications	1,612	365	587,917	3.0	2,826	208	0.5
Vitamins and minerals	620	60	37,039	0.2	877	42	0.1
Non-prescription drugs	87,861	95	8,316,816	42.4	263,462	32	43.0
Barbiturates	444	15	6,646	0.0	576	12	0.1
Benzodiazepines	63,267	78	4,961,062	25.3	316,739	16	51.7
Other Part D Excl Rx Drugs	650	626	406,808	2.1	1,561	261	0.3

Source: Data for this table are from the MAX 2002 file for Texas, 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 1D  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84<sup>a, b</sup>  
 TEXAS, 2002

Total Number of Dual Eligible Beneficiaries, Age 75-84 91,351  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 \$192,499,962  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 \$2,107

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	7,810	8.5 %	0	0.0 %
1-500	13,805	15.1	3,319,216	1.7
501-1,000	12,277	13.4	9,141,753	4.7
1,001-1,500	11,268	12.3	14,003,031	7.3
1,501-2,000	9,942	10.9	17,334,254	9.0
2,001-2,500	8,074	8.8	18,086,300	9.4
2,501-3,000	6,304	6.9	17,273,472	9.0
3,001-3,500	4,656	5.1	15,079,456	7.8
3,501-4,000	3,637	4.0	13,595,738	7.1
4,001-4,500	2,817	3.1	11,935,902	6.2
4,501-5,000	2,253	2.5	10,678,344	5.5
5,001-5,500	1,714	1.9	8,976,152	4.7
5,501-6,000	1,410	1.5	8,097,349	4.2
6,001-6,500	1,088	1.2	6,792,379	3.5
6,501-7,000	896	1.0	6,036,896	3.1
7,001-7,500	705	0.8	5,101,637	2.7
7,501-8,000	509	0.6	3,937,383	2.0
8,001-8,500	465	0.5	3,831,721	2.0
8,501-9,000	377	0.4	3,291,489	1.7
9,001-9,500	292	0.3	2,700,679	1.4
9,501-10,000	204	0.2	1,985,412	1.0
10,001+	848	0.9	11,301,399	5.9

Source: Data for this table are from the MAX 2002 file for Texas, 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, TEXAS, 2002

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>371,492</b>	<b>269,534</b>	<b>100,306</b>	<b>1,615</b>	<b>37</b>	<b>4,019,131</b>	<b>2,899,526</b>	<b>1,107,065</b>	<b>12,204</b>	<b>336</b>	<b>0</b>
<b>Age</b>											
5 and younger	31	0	25	0	6	317	0	263	0	54	0
6-14	101	0	86	0	15	1,093	0	959	0	134	0
15-20	641	0	617	8	16	7,023	0	6,815	60	148	0
21-44	42,472	2	41,426	1,044	0	466,489	24	458,695	7,770	0	0
45-64	56,671	41	56,108	522	0	623,567	317	619,175	4,075	0	0
65-74	108,155	106,601	1,515	39	0	1,193,600	1,178,055	15,270	275	0	0
75-84	98,712	98,311	400	1	0	1,074,213	1,069,710	4,491	12	0	0
85 and older	64,709	64,579	129	1	0	652,829	651,420	1,397	12	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>											
Female	245,129	190,981	53,166	965	17	2,666,558	2,067,861	591,324	7,201	172	0
Male	126,363	78,553	47,140	650	20	1,352,573	831,665	515,741	5,003	164	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>											
White	174,198	124,731	48,839	619	9	1,842,123	1,297,118	540,413	4,513	79	0
African American	62,456	38,729	23,388	331	8	685,081	424,122	258,442	2,431	86	0
Other/unknown	134,838	106,074	28,079	665	20	1,491,927	1,178,286	308,210	5,260	171	0
<b>Use of Nursing Facilities<sup>c</sup></b>											
Entire year	57,955	53,664	4,291	0	0	583,416	536,571	46,845	0	0	0
Part year	26,685	23,948	2,734	3	0	257,484	229,228	28,234	22	0	0
None	286,852	191,922	93,281	1,612	37	3,178,231	2,133,727	1,031,986	12,182	336	0
<b>Maintenance Assistance Status</b>											
Cash	247,720	171,939	75,022	756	3	2,766,837	1,936,274	824,101	6,438	24	0
Medically needy	451	0	0	451	0	2,976	0	0	2,976	0	0
Poverty related	2,933	1,267	1,383	259	24	29,336	13,555	14,096	1,490	195	0
Other/unknown	120,388	96,328	23,901	149	10	1,219,982	949,697	268,868	1,300	117	0
<b>Dual Status<sup>d</sup></b>											
Full dual, all year	362,761	263,406	97,716	1,602	37	3,928,551	2,836,353	1,079,791	12,071	336	0
Full dual, part year	8,731	6,128	2,590	13	0	90,580	63,173	27,274	133	0	0
<b>Managed Care Status</b>											
FFS all year	337,588	246,254	90,066	1,246	22	3,637,051	2,635,565	992,034	9,253	199	0
FFS part year, with Rx claims	6,694	3,675	2,774	231	14	71,510	38,907	30,458	2,019	126	0
FFS part year, no Rx claims	936	537	362	36	1	8,608	4,892	3,481	224	11	0
MC all year, with Rx claims	23,824	17,400	6,341	83	0	276,554	202,560	73,356	638	0	0
MC all year, no Rx claims	2,450	1,668	763	19	0	25,408	17,602	7,736	70	0	0

Source: Data for this table are from the MAX 2002 file for Texas, 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(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, TEXAS, 2002

Beneficiary Characteristics	Benes and					
	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 Benes	No. of Benes	No. of Benes	No. of Benes	No. of Benes
<b>All</b>	<b>371,492</b>	<b>4,019,131</b>	<b>345,218</b>	<b>3,668,772</b>	<b>0</b>	<b>350,359</b>
FFS all year	337,588	3,637,051	337,588	3,637,051	0	0
FFS part year, with Rx claims	6,694	71,510	6,694	28,052	0	43,458
FFS part year, with no Rx claims	936	8,608	936	3,669	0	4,939
MC all year, with Rx claims	23,824	276,554	0	0	0	276,554
MC all year, with no Rx claims	2,450	25,408	0	0	0	25,408

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