

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

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

Beneficiary Characteristics	No. of Benes							No. of Bene Mos				
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	248,762	1,544	32,571	60,043	154,604	0	1,869,081	13,213	338,905	358,812	1,158,151	0
Age												
5 and younger	64,049	0	1,834	134	62,081	0	456,129	0	17,734	992	437,403	0
6-14	69,392	0	4,776	79	64,537	0	568,496	0	52,252	626	515,618	0
15-20	36,156	0	3,745	5,966	26,445	0	271,673	0	40,445	35,172	196,056	0
21-44	62,972	0	11,082	50,467	1,423	0	425,436	0	117,005	300,176	8,255	0
45-64	14,451	0	10,941	3,396	114	0	132,291	0	109,664	21,836	791	0
65-74	746	609	136	1	0	0	7,642	6,389	1,243	10	0	0
75-84	528	478	49	0	1	0	4,557	4,063	482	0	12	0
85 and older	466	457	8	0	1	0	2,853	2,761	80	0	12	0
Unknown	2	0	0	0	2	4	0	0	0	0	4	0
Gender												
Female	141,856	1,046	16,952	47,033	76,825	0	1,050,940	8,868	178,430	287,741	575,901	0
Male	106,906	498	15,619	13,010	77,779	0	818,141	4,345	160,475	71,071	582,250	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	174,715	1,006	24,957	43,356	105,396	0	1,394,908	8,189	270,477	275,832	840,410	0
African American	18,436	39	2,804	4,026	11,567	0	132,913	388	29,240	21,924	81,361	0
Other/unknown	55,611	499	4,810	12,661	37,641	0	341,260	4,636	39,188	61,056	236,380	0
Use of Nursing Facilities^c												
Entire year	577	218	357	0	2	0	6,271	2,343	3,904	0	24	0
Part year	529	104	408	14	3	0	5,291	932	4,196	143	20	0
None	247,656	1,222	31,806	60,029	154,599	0	1,857,519	9,938	330,805	358,669	1,158,107	0
Maintenance Assistance Status												
Cash	112,838	655	25,990	36,122	50,071	0	870,932	7,260	272,372	218,947	372,353	0
Medically needy	6,374	107	836	4,315	1,116	0	41,587	908	5,246	28,633	6,800	0
Poverty-related	85,885	7	11	11,129	74,738	0	596,679	76	93	54,086	542,424	0
Other/unknown	43,665	775	5,734	8,477	28,679	0	359,883	4,969	61,194	57,146	236,574	0
Managed Care Status												
FFS all year	198,441	1,544	31,999	44,619	120,279	0	1,692,947	13,213	335,258	309,064	1,035,412	0
FFS part year, with Rx claims	33,998	0	521	11,971	21,506	0	125,753	0	3,329	40,322	82,102	0
FFS part year, no Rx claims	16,323	0	51	3,453	12,819	0	50,381	0	318	9,426	40,637	0

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

- a. Table ND.2 includes the beneficiaries represented by Cell K 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.

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 ND.3
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a,b}
 NONDUAL BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	No. of Benes
All	64.9 %	8.5	\$468	\$55	\$3,448	13.6 %	248,762
Age							
5 and younger	66.6	3.8	149	40	1,844	8.1	64,049
6-14	57.2	4.9	295	60	2,132	13.9	69,392
15-20	62.1	6.5	393	60	3,967	9.9	36,156
21-44	70.0	10.8	611	57	4,515	13.5	62,972
45-64	78.9	38.2	2,177	57	10,146	21.5	14,451
65-74	76.8	33.1	1,618	49	10,107	16.0	746
75-84	66.1	29.5	1,282	44	10,537	12.2	528
85 and older	47.4	24.8	916	37	9,036	10.1	466
Unknown	0.0	0.0	0	0	598	0.0	2
Basis of Eligibility^c							
Aged	66.0	31.5	1,396	44	10,263	13.6	1,544
Disabled	82.2	31.5	2,131	68	14,210	15.0	32,571
Adults	67.9	6.9	293	42	2,308	12.7	60,043
Children	60.1	4.0	177	45	1,556	11.4	154,604
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	67.9	9.5	481	51	3,307	14.5	141,856
Male	60.9	7.1	452	63	3,636	12.4	106,906
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	68.9	10.0	559	56	3,869	14.5	174,715
African American	61.7	6.4	336	53	2,819	11.9	18,436
Other/unknown	53.3	4.4	227	52	2,334	9.7	55,611
Use of Nursing Facilities^d							
Entire year	95.0	78.8	4,072	52	44,067	9.2	577
Part year	97.4	71.9	3,979	55	41,978	9.5	529
None	64.8	8.2	453	55	3,271	13.8	247,656
Maintenance Assistance Status							
Cash	70.2	11.8	678	57	4,027	16.8	112,838
Medically needy	42.1	6.8	409	60	3,598	11.4	6,374
Poverty related	56.1	3.1	119	38	1,230	9.7	85,885
Other/unknown	71.8	10.6	624	59	6,294	9.9	43,665

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

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

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:					Mean \$, All Services	Benes	Bene Mos	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less				More than 10
All	1.1	\$62	13.6 %	35.1 %	44.8 %	7.6 %	7.9 %	3.3 %	1.3 %	\$459	248,762	1,869,081
Age												
5 and younger	0.5	21	8.1	33.4	55.6	5.6	3.8	1.1	0.4	259	64,049	456,129
6-14	0.6	36	13.9	42.8	44.8	5.7	5.0	1.2	0.4	260	69,392	568,496
15-20	0.9	52	9.9	37.9	44.6	7.8	7.1	1.9	0.6	528	36,156	271,673
21-44	1.6	90	13.5	30.0	40.5	10.8	11.7	5.0	2.0	668	62,972	425,436
45-64	4.2	238	21.5	21.1	19.8	10.1	23.2	18.3	7.6	1,108	14,451	132,291
65-74	3.2	158	16.0	23.2	24.7	11.0	23.1	12.9	5.2	987	746	7,642
75-84	3.4	149	12.2	33.9	15.2	9.7	20.1	18.4	2.8	1,221	528	4,557
85 and older	4.1	150	10.1	52.6	6.0	6.0	16.7	15.5	3.2	1,476	466	2,853
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	299	2	4
Basis of Eligibility^c												
Aged	3.7	163	13.6	34.0	15.2	9.3	20.8	16.6	4.1	1,199	1,544	13,213
Disabled	3.0	205	15.0	17.8	30.0	12.4	22.1	13.4	4.3	1,366	32,571	338,905
Adults	1.2	49	12.7	32.1	42.8	10.3	9.5	3.4	1.9	386	60,043	358,812
Children	0.5	24	11.4	39.9	49.0	5.5	4.1	1.1	0.4	208	154,604	1,158,151
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	1.3	65	14.5	32.1	45.7	8.2	8.5	3.9	1.7	446	141,856	1,050,940
Male	0.9	59	12.4	39.1	43.7	6.8	7.0	2.6	0.8	475	106,906	818,141
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.2	70	14.5	31.1	46.6	8.2	8.8	3.9	1.5	485	174,715	1,394,908
African American	0.9	47	11.9	38.3	43.1	7.4	7.2	2.9	1.1	391	18,436	132,913
Other/unknown	0.7	37	9.7	46.7	39.9	5.8	5.2	1.8	0.6	380	55,611	341,260
Use of Nursing Facilities^d												
Entire year	7.3	375	9.2	5.0	4.5	4.7	24.3	41.8	19.8	4,055	577	6,271
Part year	7.2	398	9.5	2.6	8.3	7.0	25.7	36.7	19.7	4,197	529	5,291
None	1.1	60	13.8	35.2	45.0	7.6	7.8	3.2	1.2	436	247,656	1,857,519
Maintenance Assistance Status												
Cash	1.5	88	16.8	29.8	44.1	8.8	10.2	5.0	2.1	522	112,838	870,932
Medically needy	1.0	63	11.4	57.9	23.3	6.2	8.3	3.5	0.9	552	6,374	41,587
Poverty related	0.4	17	9.7	43.9	46.4	5.0	3.4	0.9	0.3	177	85,885	596,679
Other/unknown	1.3	76	9.9	28.2	46.7	9.5	10.4	4.0	1.3	764	43,665	359,883

Table ND4

Nondual Beneficiaries

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

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

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs			
	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$		
All	1.1	\$62	0.5	\$45	\$97	0.1	\$4	0.6	\$13	\$22
Age										
5 and younger	0.5	21	0.2	15	75	0.0	1	0.3	4	15
6-14	0.6	36	0.3	27	95	0.0	3	0.3	6	22
15-20	0.9	52	0.4	39	100	0.1	4	0.4	9	23
21-44	1.6	90	0.6	65	104	0.1	7	0.9	19	22
45-64	4.2	238	1.7	171	99	0.3	15	2.2	52	24
65-74	3.2	158	1.3	109	84	0.2	9	1.7	39	23
75-84	3.4	149	1.3	99	76	0.3	13	1.7	36	21
85 and older	4.1	150	1.4	93	69	0.4	12	2.3	45	20
Unknown	0.0	0	0.0	0	0	0.0	0	0.0	0	0
Basis of Eligibility^d										
Aged	3.7	163	1.4	109	78	0.3	12	1.9	42	22
Disabled	3.0	205	1.3	153	117	0.2	13	1.5	39	26
Adults	1.2	49	0.4	33	80	0.1	4	0.7	12	18
Children	0.5	24	0.2	17	74	0.0	2	0.3	5	18
Unknown	0.0	0	0.0	0	0	0.0	0	0.0	0	0
Gender										
Female	1.3	65	0.5	46	90	0.1	5	0.7	14	21
Male	0.9	59	0.4	44	108	0.1	4	0.5	11	24
Unknown	0.0	0	0.0	0	0	0.0	0	0.0	0	0
Race										
White	1.2	70	0.5	51	97	0.1	5	0.6	14	23
African American	0.9	47	0.3	34	100	0.0	3	0.5	10	20
Other/unknown	0.7	37	0.3	27	97	0.1	2	0.4	7	19
Use of Nursing Facilities^e										
Entire year	7.3	375	2.6	258	98	0.6	25	4.0	92	23
Part year	7.2	398	2.7	281	102	0.6	28	3.8	89	23
None	1.1	60	0.5	44	97	0.1	4	0.6	12	22
Maintenance Assistance										
Status										
Cash	1.5	88	0.6	64	103	0.1	6	0.8	18	22
Medically needy	1.0	63	0.4	43	101	0.1	6	0.5	14	26
Poverty related	0.4	17	0.2	12	67	0.0	2	0.2	4	17
Other/unknown	1.3	76	0.6	56	97	0.1	5	0.6	14	24

Table ND5

Nondual Beneficiaries

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

- a. Table ND.5 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Iowa, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, IOWA, 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	Generic	Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos		
																Brand-Name	Brand-Name
Anti-infective Agents	0.3	0.1	0.0	0.2	\$12	\$9	\$1	\$2	\$40	\$66	\$74	\$16	304,033	\$12,310,132	113,935	45.8 %	1,011,379
Biologics	0.2	0.2	0.0	0.0	153	151	1	2	725	739	572	264	3,111	2,255,785	1,451	0.6	14,711
Antineoplastic Agents	0.6	0.3	0.0	0.3	202	184	4	14	333	570	126	54	4,409	1,468,306	726	0.3	7,277
Endocrine/Metabolic Drugs	0.5	0.2	0.1	0.2	24	17	3	4	45	68	28	22	182,284	8,122,189	37,817	15.2	341,855
Cardiovascular Agents	1.1	0.4	0.1	0.7	41	26	3	12	36	64	44	19	203,249	7,372,316	17,956	7.2	179,291
Respiratory Agents	0.4	0.2	0.0	0.2	17	11	1	5	41	73	40	21	257,636	10,690,391	68,775	27.6	625,167
Gastrointestinal Agents	0.5	0.2	0.0	0.3	32	25	1	6	66	111	147	22	94,708	6,214,880	20,274	8.1	193,986
Genitourinary Agents	0.3	0.2	0.0	0.1	13	11	0	2	45	57	56	18	26,311	1,181,515	10,233	4.1	88,939
CNS Drugs	1.0	0.6	0.0	0.4	85	66	4	15	81	116	108	34	399,543	32,365,145	40,816	16.4	382,896
Stimulants/Anti-obesity/Anorexia	0.8	0.4	0.1	0.2	49	33	6	10	65	78	68	41	92,681	6,056,251	12,582	5.1	123,434
Miscellaneous Psychological/Neurological Agents	0.5	0.5	0.0	0.1	90	87	0	4	165	192	0	37	1,633	269,554	298	0.1	2,985
Analgesics and Anesthetics	0.5	0.1	0.0	0.4	18	11	1	6	38	129	68	17	208,836	7,965,973	49,737	20.0	437,746
Neuromuscular Agents	0.8	0.4	0.1	0.3	55	45	3	7	72	119	53	22	138,516	9,977,033	18,262	7.3	181,086
Nutritional Products	0.4	0.0	0.1	0.3	7	1	2	5	19	30	23	18	36,166	694,842	12,348	5.0	93,751
Hematological Agents	0.6	0.2	0.1	0.3	151	129	4	18	239	798	28	54	20,229	4,833,169	3,435	1.4	32,047
Topical Products	0.2	0.1	0.0	0.1	7	4	1	2	31	56	42	17	121,745	3,810,031	57,577	23.1	528,956
Miscellaneous Products	0.4	0.2	0.0	0.2	67	47	12	8	164	236	268	48	5,181	848,349	1,309	0.5	12,604
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	4	0	0	0	20	0	0	0	4,610	93,898	2,192	0.9	22,463
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	2,104,881	116,529,759	n.a.	n.a.	n.a.

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

- a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2002. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).
- d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Iowa, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, IOWA, 2002

Top 10 Drug Groups	Users				Among Users		
	Total Medicaid Rx \$	No. As % of All Benes	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo	
ANTIPSYCHOTICS	\$16,393,423	14.528	156,976	0.7	\$156	\$104	
ANTIDEPRESSANTS	12,194,784	14.7	369,774	0.5	63	33	
ANTICONVULSANT	8,606,744	12,461	134,722	0.7	88	64	
ANTIASTHMATIC	6,235,272	36,756	375,165	0.3	53	17	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	5,640,168	12,937	136,233	0.6	66	41	
ULCER DRUGS	4,453,870	17,462	180,301	0.4	70	25	
ANALGESICS - Narcotic	4,113,172	42,898	424,104	0.3	37	10	
ANTIDIABETIC	3,381,602	7,521	78,462	0.7	61	43	
MISC. HEMATOLOGICAL	2,887,341	802	8,484	0.5	635	340	
PENICILLINS	2,479,919	67,750	683,308	0.1	25	4	
Total	66,386,295	249,628	2,547,529	n.a.	n.a.	n.a.	

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

a. Table ND.7 includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2002. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE ND.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE^{a,b,c}
 NONDUAL BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	933,351	\$66,386,295	14,528	5.8 %	156,976	0.7	\$104	36,513	14.7 %	369,774	0.5	\$33					
Female	552,760	36,139,321	7,319	5.2	79,417	0.6	93	25,428	17.9	255,354	0.5	33					
Disabled	306,251	23,855,834	4,598	27.1	52,257	0.7	113	10,152	59.9	114,154	0.6	41					
5 and younger	3,632	212,841	11	1.4	124	0.2	33	14	1.8	162	0.3	12					
6-14	16,308	1,256,957	244	14.4	2,791	0.7	113	351	20.8	3,952	0.6	33					
15-20	15,615	1,361,896	355	24.8	4,044	0.7	110	510	35.6	5,776	0.6	38					
21-44	108,385	9,145,548	2,071	34.2	23,610	0.7	113	4,303	71.0	48,746	0.6	40					
45-64	161,586	11,832,941	1,910	27.8	21,604	0.7	114	4,956	72.1	55,326	0.7	43					
65-74	576	38,645	7	9.3	84	0.7	167	12	16.0	124	0.5	31					
75-84	148	6,945	0	0.0	0	0.0	0	6	19.4	68	0.5	16					
85 and older	1	61	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Other Eligibles	246,509	12,283,487	2,721	2.2	27,160	0.5	56	15,276	12.2	141,200	0.4	26					
5 and younger	29,670	841,205	61	0.2	662	0.3	39	79	0.3	832	0.3	19					
6-14	49,959	2,700,884	693	2.2	7,453	0.6	72	1,759	5.5	18,415	0.5	23					
15-20	38,850	2,073,102	681	3.5	6,887	0.5	58	3,112	16.2	30,431	0.4	25					
21-44	104,280	5,223,603	1,062	2.6	9,841	0.3	38	9,312	23.0	81,918	0.4	27					
45-64	11,144	683,914	82	4.0	758	0.3	33	732	35.6	6,499	0.5	34					
65-74	6,382	418,895	52	13.3	594	0.8	123	129	32.9	1,497	0.7	40					
75-84	3,612	202,701	48	15.0	504	0.7	88	83	25.9	882	0.7	39					
85 and older	2,612	139,183	42	12.6	461	0.7	66	70	21.0	726	0.7	38					
Male	380,591	30,246,974	7,209	6.7	77,559	0.7	116	11,085	10.4	114,420	0.6	33					
Disabled	196,976	19,679,678	4,318	27.6	48,506	0.8	135	5,013	32.1	55,727	0.6	39					
5 and younger	5,854	605,917	34	3.2	388	0.4	50	21	2.0	241	0.5	16					
6-14	37,665	4,522,778	949	30.8	10,850	0.8	114	781	25.3	8,949	0.6	33					
15-20	27,097	2,959,578	771	33.3	8,791	0.8	124	694	30.0	7,946	0.6	39					
21-44	63,606	6,695,921	1,746	34.8	19,424	0.8	151	1,928	38.4	21,216	0.6	42					
45-64	62,510	4,881,526	815	20.0	9,027	0.8	139	1,580	38.8	17,292	0.6	39					
65-74	142	7,787	2	3.3	14	0.1	14	5	8.2	35	0.2	9					
75-84	101	6,166	1	5.6	12	0.1	7	4	22.2	48	0.1	2					
85 and older	1	5	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Other Eligibles	183,615	10,567,296	2,891	3.2	29,053	0.6	84	6,072	6.7	58,693	0.5	28					
5 and younger	37,176	1,205,177	78	0.2	736	0.4	47	94	0.3	980	0.3	10					
6-14	85,421	5,435,925	1,625	5.0	17,116	0.6	88	2,546	7.8	27,041	0.5	25					
15-20	32,375	2,298,918	835	6.3	8,145	0.7	86	1,783	13.5	17,121	0.5	33					
21-44	19,390	1,079,681	252	2.2	2,062	0.3	57	1,302	11.4	10,420	0.4	26					
45-64	4,731	285,502	37	2.5	261	0.4	54	243	16.7	2,056	0.4	29					
65-74	2,204	157,260	26	11.9	309	1.0	181	45	20.6	509	0.5	31					
75-84	1,306	62,946	22	13.8	251	0.5	48	33	20.8	316	0.6	33					
85 and older	1,012	41,887	16	12.9	173	0.5	37	26	21.0	250	0.8	31					
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					

Table ND7A Nondual Beneficiaries

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

a. Table ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2002. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BOE, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	ANTICONVULSANT					ANTIASTHMATIC					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean No. of Rx	Mean Rx \$
All	12,461	5.0 %	134,722	0.7	\$64	36,756	14.8 %	375,165	0.3	\$17	12,937	5.2 %	136,233	0.6	\$41
Female	7,382	5.2	79,666	0.7	61	21,370	15.1	218,133	0.3	18	4,087	2.9	43,373	0.6	39
Disabled	4,959	29.3	56,387	0.8	70	7,484	44.1	85,067	0.4	26	960	5.7	10,941	0.6	45
5 and younger	100	12.8	1,087	0.8	76	311	39.8	3,394	0.3	17	20	2.6	221	0.2	12
6-14	428	25.3	4,924	0.9	76	415	24.5	4,856	0.3	20	424	25.1	4,763	0.7	43
15-20	420	29.3	4,869	0.9	88	305	21.3	3,526	0.3	17	167	11.7	1,911	0.7	45
21-44	2,085	34.4	23,838	0.8	76	2,528	41.7	28,923	0.4	22	192	3.2	2,236	0.5	46
45-64	1,917	27.9	21,581	0.7	57	3,893	56.6	44,028	0.5	31	157	2.3	1,810	0.5	53
65-74	7	9.3	68	0.9	22	27	36.0	280	0.5	35	0	0.0	0	0.0	0
75-84	2	6.5	20	0.4	33	5	16.1	60	0.2	14	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	2,423	1.9	23,279	0.5	38	13,886	11.1	133,066	0.3	12	3,127	2.5	32,432	0.6	37
5 and younger	79	0.3	826	0.4	31	3,764	12.4	36,705	0.2	7	147	0.5	1,615	0.4	22
6-14	356	1.1	3,808	0.6	42	2,703	8.5	27,984	0.2	13	2,201	6.9	22,933	0.6	37
15-20	442	2.3	4,389	0.5	39	1,907	9.9	18,641	0.2	11	470	2.4	4,934	0.6	44
21-44	1,340	3.3	12,171	0.4	35	4,824	11.9	43,023	0.3	13	287	0.7	2,724	0.4	37
45-64	116	5.6	1,101	0.5	43	430	20.9	3,896	0.4	28	20	1.0	202	0.5	38
65-74	52	13.3	593	1.0	61	154	39.3	1,765	0.6	41	1	0.3	12	0.3	39
75-84	28	8.8	290	0.9	44	55	17.2	582	0.4	20	0	0.0	0	0.0	0
85 and older	10	3.0	101	0.9	27	49	14.7	470	0.5	25	1	0.3	12	0.2	2
Male	5,079	4.8	55,056	0.8	69	15,386	14.4	157,032	0.3	15	8,850	8.3	92,860	0.7	43
Disabled	3,640	23.3	41,096	0.8	79	4,214	27.0	46,840	0.4	24	2,095	13.4	23,825	0.7	48
5 and younger	137	13.0	1,573	0.7	70	568	53.9	6,289	0.3	17	73	6.9	806	0.5	24
6-14	694	22.5	8,013	0.8	74	775	25.1	8,859	0.3	17	1,336	43.3	15,177	0.7	48
15-20	606	26.2	6,984	0.9	83	426	18.4	4,880	0.4	21	511	22.1	5,886	0.8	51
21-44	1,443	28.8	16,324	0.9	90	887	17.7	10,104	0.4	20	120	2.4	1,351	0.7	48
45-64	758	18.6	8,178	0.8	63	1,546	38.0	16,586	0.6	33	55	1.4	605	0.6	64
65-74	0	0.0	0	0.0	0	5	8.2	44	0.4	21	0	0.0	0	0.0	0
75-84	2	11.1	24	0.6	56	7	38.9	78	0.3	24	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	1,439	1.6	13,960	0.5	38	11,172	12.2	110,192	0.2	12	6,755	7.4	69,035	0.6	41
5 and younger	104	0.3	1,004	0.4	22	5,408	16.9	52,721	0.2	9	374	1.2	3,836	0.4	21
6-14	545	1.7	5,758	0.5	39	3,663	11.2	38,010	0.3	13	5,175	15.8	53,129	0.6	41
15-20	359	2.7	3,546	0.6	44	1,098	8.3	10,695	0.3	13	1,114	8.4	11,255	0.6	45
21-44	334	2.9	2,730	0.4	34	742	6.5	6,204	0.4	19	79	0.7	688	0.5	47
45-64	54	3.7	458	0.5	29	148	10.2	1,349	0.5	24	12	0.8	115	0.4	46
65-74	22	10.1	264	0.8	49	62	28.4	696	0.5	32	0	0.0	0	0.0	0
75-84	14	8.8	127	0.6	35	37	23.3	369	0.7	25	1	0.6	12	0.1	1
85 and older	7	5.6	73	0.7	23	14	11.3	148	0.7	28	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table ND7B
 Nondual Beneficiaries

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

- a. Table ND.7B includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2002. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BOE, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					ANTIDIABETIC				
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	17,462	7.0 %	180,301	0.4	\$25	42,898	17.2 %	424,104	0.3	\$10	7,521	3.0 %	78,462	0.7	\$43
Female	11,973	8.4	124,269	0.3	24	31,392	22.1	309,779	0.3	10	5,315	3.7	56,063	0.7	43
Disabled	5,937	35.0	67,150	0.4	32	10,112	59.7	113,965	0.4	19	3,602	21.2	40,415	0.7	47
5 and younger	143	18.3	1,540	0.4	26	70	9.0	802	0.1	1	2	0.3	24	0.5	13
6-14	158	9.3	1,864	0.5	40	179	10.6	2,080	0.1	3	16	0.9	186	0.9	80
15-20	258	18.0	2,950	0.4	25	340	23.7	3,870	0.2	4	45	3.1	491	0.7	38
21-44	2,029	33.5	23,290	0.4	28	4,320	71.2	49,076	0.3	17	801	13.2	8,946	0.7	40
45-64	3,324	48.4	37,265	0.5	34	5,173	75.3	57,819	0.4	22	2,713	39.5	30,527	0.7	49
65-74	16	21.3	148	0.3	21	22	29.3	233	0.3	3	22	29.3	205	0.6	23
75-84	8	25.8	87	0.5	25	8	25.8	85	0.1	1	3	9.7	36	0.8	39
85 and older	1	20.0	6	0.2	10	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	6,036	4.8	57,119	0.2	15	21,280	17.0	195,814	0.2	4	1,713	1.4	15,648	0.6	34
5 and younger	477	1.6	4,238	0.2	10	676	2.2	6,837	0.1	1	9	0.0	92	0.6	33
6-14	552	1.7	5,863	0.2	11	1,268	4.0	13,311	0.1	2	81	0.3	805	0.8	45
15-20	994	5.2	9,656	0.2	10	3,674	19.1	34,793	0.1	2	124	0.6	1,167	0.6	30
21-44	3,342	8.3	30,695	0.2	16	14,497	35.9	129,571	0.2	4	948	2.3	8,096	0.6	31
45-64	361	17.6	3,235	0.3	26	815	39.6	7,371	0.3	13	229	11.1	1,894	0.6	39
65-74	141	36.0	1,608	0.5	36	167	42.6	1,902	0.4	13	164	41.8	1,894	0.8	41
75-84	100	31.3	1,118	0.5	25	113	35.3	1,256	0.4	11	100	31.3	1,090	0.7	37
85 and older	69	20.7	706	0.6	21	70	21.0	773	0.7	34	58	17.4	610	0.7	27
Male	5,489	5.1	56,032	0.4	26	11,506	10.8	114,325	0.3	10	2,206	2.1	22,399	0.7	43
Disabled	2,977	19.1	32,878	0.5	32	4,656	29.8	50,903	0.3	18	1,549	9.9	16,786	0.7	45
5 and younger	153	14.5	1,703	0.4	27	99	9.4	1,145	0.1	2	8	0.8	96	0.6	39
6-14	199	6.5	2,326	0.4	40	282	9.1	3,259	0.1	3	13	0.4	152	1.3	58
15-20	222	9.6	2,520	0.4	34	362	15.7	4,136	0.1	3	35	1.5	391	0.7	37
21-44	1,028	20.5	11,453	0.4	30	1,713	34.1	18,759	0.3	12	338	6.7	3,835	0.7	43
45-64	1,353	33.3	14,631	0.5	33	2,177	53.5	23,338	0.4	28	1,144	28.1	12,216	0.7	46
65-74	13	21.3	143	0.3	22	13	21.3	146	0.1	1	9	14.8	78	0.7	34
75-84	9	50.0	102	0.1	8	10	55.6	120	0.1	1	2	11.1	18	0.5	8
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	2,512	2.8	23,154	0.3	17	6,850	7.5	63,422	0.2	4	657	0.7	5,613	0.7	39
5 and younger	631	2.0	5,529	0.2	11	875	2.7	8,897	0.1	1	8	0.0	64	1.3	54
6-14	442	1.3	4,652	0.2	11	1,185	3.6	12,399	0.1	1	92	0.3	925	0.7	41
15-20	324	2.5	3,145	0.2	12	1,365	10.3	13,059	0.1	2	58	0.4	495	0.8	51
21-44	822	7.2	7,053	0.3	24	2,845	24.8	23,561	0.3	7	268	2.3	1,978	0.6	37
45-64	172	11.8	1,430	0.4	29	425	29.2	3,796	0.3	14	147	10.1	1,215	0.6	41
65-74	60	27.5	714	0.5	29	72	33.0	827	0.3	6	44	20.2	499	0.7	30
75-84	36	22.6	364	0.5	23	43	27.0	464	0.4	14	27	17.0	292	0.7	30
85 and older	25	20.2	267	0.6	30	40	32.3	419	0.5	16	13	10.5	145	1.0	35
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table ND7C

Nondual Beneficiaries

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

- a. Table ND.7C includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2002. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BOE, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	MISC. HEMATOLOGICAL				PENICILLINS							
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Benes	No. of Bene Mos
All	802	0.3 %	8,484	0.5	\$340	67,750	27.2 %	683,308	0.1	\$4	248,762	1,869,081
Female												
Disabled												
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	2	0.1	24	0.5	24	782	46.2	9,097	0.2	5	1,691	18,544
15-20	1	0.1	12	0.3	15	468	32.7	5,435	0.1	4	1,432	15,408
21-44	38	0.6	427	0.5	39	1,965	32.4	22,752	0.1	4	6,064	64,989
45-64	308	4.5	3,388	0.6	54	1,751	25.5	20,252	0.1	5	6,873	70,927
65-74	3	4.0	17	0.4	36	6	8.0	66	0.1	6	75	684
75-84	1	3.2	12	0.4	46	4	12.9	48	0.2	4	31	313
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	54
Other Eligibles												
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	1	0.0	6	0.2	3	8,063	25.3	84,706	0.1	3	31,857	254,935
15-20	1	0.0	9	0.1	16	4,025	20.9	39,504	0.1	3	19,215	135,111
21-44	33	0.1	290	0.3	37	8,153	20.2	73,316	0.1	4	40,435	246,681
45-64	17	0.8	150	0.3	34	314	15.3	2,922	0.2	5	2,056	13,754
65-74	27	6.9	314	0.6	52	61	15.6	693	0.1	4	392	4,173
75-84	18	5.6	203	0.8	75	30	9.4	351	0.1	4	320	2,792
85 and older	12	3.6	128	0.6	63	27	8.1	295	0.1	5	334	1,903
Male												
Disabled												
5 and younger	12	1.1	130	0.8	2,042	660	62.7	7,418	0.2	4	1,053	10,223
6-14	13	0.4	138	0.8	9,723	1,265	41.0	14,685	0.1	4	3,085	33,708
15-20	4	0.2	36	0.8	11,826	613	26.5	7,083	0.1	6	2,313	25,037
21-44	31	0.6	340	0.4	1,046	1,038	20.7	11,881	0.1	4	5,018	52,016
45-64	214	5.3	2,245	0.5	49	741	18.2	8,334	0.1	5	4,068	38,737
65-74	1	1.6	12	0.1	4	5	8.2	60	0.1	4	61	559
75-84	2	11.1	21	0.9	81	0	0.0	0	0.0	0	18	169
85 and older	0	0.0	0	0.0	0	1	33.3	12	0.1	0	3	26
Other Eligibles												
5 and younger	63	0.1	582	0.4	224	24,764	27.1	245,807	0.1	4	91,287	657,666
6-14	4	0.0	46	0.4	484	13,945	43.7	136,194	0.2	4	31,922	225,238
15-20	1	0.0	12	0.1	446	7,402	22.6	77,556	0.1	3	32,759	261,309
21-44	12	0.1	12	0.5	6,924	1,866	14.1	18,716	0.1	4	13,196	96,117
45-64	21	1.4	59	0.5	51	1,317	11.5	11,099	0.1	5	11,455	61,750
65-74	15	6.9	177	0.3	30	182	12.5	1,640	0.1	6	1,454	8,873
75-84	7	4.4	77	0.3	32	12	7.5	246	0.1	8	218	2,226
85 and older	2	1.6	22	1.0	76	19	15.3	212	0.1	3	159	1,283
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	4

Table ND7D

Nondual Beneficiaries

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

- a. Table ND.7D includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2002. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
All	\$375	7.3	577	6,271
Age				
0-64	433	7.8	358	3,916
65-74	456	8.0	41	474
75-84	245	5.9	73	779
85 and older	225	5.9	105	1,102
Unknown	0	0.0	0	0
Gender				
Female	391	7.7	360	3,949
Male	348	6.5	217	2,322
Unknown	0	0.0	0	0
Race				
White	380	7.3	478	5,318
African American	397	7	18	216
Other/unknown	331	6.7	81	737
Basis of Eligibility^c				
Aged	275	6.3	218	2,343
Disabled	435	7.8	357	3,904
Adults	0	0.0	0	0
Children	201	4.8	2	24
Unknown	0	0.0	0	0

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

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2002 Medicaid enrollment. A total of 529 beneficiaries who were in nursing facilities for part of their enrollment and their 5,291 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 ND.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 NONDUAL BENEFICIARIES, IOWA, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx	Total Rx \$	No.	As % of All-Year NF Residents	No. of Bene Mos					
	Users			Users								Total	Patented	Off-Patent	Generic	
	Total	Patented	Off-Patent	Total	Patented	Off-Patent										
Anti-infective Agents	0.4	0.2	0.0	0.2	\$22	\$16	\$2	\$5	\$50	\$89	\$21	1,937	\$97,356	387	67.1 %	4,355
Biologicals	0.1	0.1	0.0	0.0	2	1	0	1	17	14	0	55	926	49	8.5	552
Antineoplastic Agents	0.9	0.7	0.0	0.2	282	271	4	6	309	405	149	218	67,387	22	3.8	239
Endocrine/Metabolic Drugs	1.3	0.6	0.2	0.5	50	34	5	11	38	59	20	3,705	140,411	256	44.4	2,831
Cardiovascular Agents	2.0	0.5	0.2	1.3	54	25	6	22	27	53	29	7,289	200,382	338	58.6	3,736
Respiratory Agents	0.9	0.3	0.0	0.6	41	23	1	17	44	66	46	2,537	112,190	241	41.8	2,721
Gastrointestinal Agents	1.2	0.3	0.0	0.8	58	39	1	17	50	120	89	4,076	202,070	310	53.7	3,480
Genitourinary Agents	0.9	0.5	0.0	0.4	46	35	0	10	52	73	48	1,459	76,440	149	25.8	1,673
CNS Drugs	2.0	1.0	0.1	0.9	150	117	6	27	74	113	83	9,122	673,765	408	70.7	4,491
Stimulants/Anti-obesity/Anorexia	0.9	0.3	0.0	0.6	67	48	1	18	77	173	107	106	8,145	11	1.9	122
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	129	129	0	0	152	152	0	256	38,851	29	5.0	302
Analgesics and Anesthetics	1.0	0.2	0.1	0.7	41	27	4	11	40	113	53	3,414	137,073	305	52.9	3,315
Neuromuscular Agents	1.9	0.6	0.2	1.0	120	79	13	29	65	123	60	5,759	373,465	283	49.0	3,102
Nutritional Products	0.8	0.0	0.1	0.7	19	0	4	16	23	0	36	1,272	29,523	138	23.9	1,522
Hematological Agents	1.3	0.3	0.4	0.6	47	32	7	8	38	122	16	1,654	62,125	124	21.5	1,309
Topical Products	0.6	0.2	0.0	0.3	27	18	1	8	48	86	45	2,298	110,816	359	62.2	4,046
Miscellaneous Products	0.4	0.2	0.0	0.2	34	32	0	2	91	141	0	170	15,444	40	6.9	453
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	5	0	0	0	18	0	0	158	2,882	48	8.3	549
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.	45,485	2,349,251	n.a.	n.a.	n.a.

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

a. Table ND.9 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 529 beneficiaries who were in nursing facilities for part of their enrollment and their 5,291 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2002. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. For information about these therapeutic categories, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

In Iowa, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

TABLE ND.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NONDUAL BENEFICIARIES, IOWA, 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	\$392,415	277	48.0 %	3,130	0.9	\$142	\$125
ANTICONVULSANT	259,339	302	52.3	3,382	1.2	63	77
ANTIDEPRESSANTS	212,425	370	64.1	4,076	0.9	59	52
ULCER DRUGS	136,945	290	50.3	3,262	0.7	56	42
ANTIDIABETIC	97,554	210	36.4	2,332	0.9	46	42
ANALGESICS - Narcotic	90,269	289	50.1	3,159	0.7	41	29
ANTIASTHMATIC	84,115	240	41.6	2,670	0.6	49	32
MUSCULOSKELETAL THERAPY AGENTS	76,814	86	14.9	957	1.1	75	80
DERMATOLOGICAL	68,573	546	94.6	6,287	0.3	37	11
ANTINEOPLASTICS	67,387	22	3.8	239	0.9	309	282
Total	1,485,836	2,632		29,494	n.a.	n.a.	n.a.

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

a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 529 beneficiaries who were in nursing facilities for part of their enrollment and their 5,291 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2002 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE ND.10A

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d} NONDUAL BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTICONVULSANT				
	No. of Rx	Rx \$	Users as %			Mean Rx \$	No. of Users	Users as %			Mean Rx \$	No. of Users	Users as %		
			No. of Rx	Rx \$	Mean No. of Rx			Residents	NF	Mos among Users			Residents	NF	Mos among Users
All	22,054	\$1,485,836	277	48.0 %	3,130	0.9	302	52.3 %	3,382	1.2	\$77				
Female	14,362	959,958	174	48.3	1,958	0.9	185	51.4	2,085	1.2	65				
Disabled	9,786	682,233	115	55.6	1,292	0.8	156	75.4	1,760	1.2	62				
64 or younger	9,691	672,967	113	54.9	1,268	0.8	153	74.3	1,724	1.2	63				
65-74	95	9,266	2	200.0	24	1.4	3	300.0	36	1.2	20				
75-84	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0				
85 and older	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0				
Other Eligibles	4,576	277,725	59	38.6	666	0.9	29	19.0	325	1.3	80				
64 or younger	39	843	0	0.0	0	0.0	1	100.0	12	2.2	51				
65-74	1,265	103,778	12	44.4	126	1.1	12	44.4	135	1.3	118				
75-84	1,526	82,388	19	34.5	204	1.0	9	16.4	108	1.5	69				
85 and older	1,746	90,716	28	40.0	336	0.8	7	10.0	70	0.9	29				
Male	7,692	525,878	103	47.5	1,172	0.9	117	53.9	1,297	1.2	96				
Disabled	5,994	444,072	78	52.0	877	1.0	104	69.3	1,155	1.3	102				
64 or younger	5,994	444,072	78	52.0	877	1.0	104	69.3	1,155	1.3	102				
65-74	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0				
75-84	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0				
85 and older	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0				
Other Eligibles	1,698	81,806	25	37.3	295	0.7	13	19.4	142	0.9	47				
64 or younger	36	1,369	0	0.0	0	0.0	1	100.0	12	2.9	110				
65-74	593	35,997	7	53.8	84	0.9	7	53.8	84	0.7	41				
75-84	468	20,750	10	55.6	115	0.6	4	22.2	34	0.7	44				
85 and older	601	23,690	8	22.9	96	0.6	1	2.9	12	1.1	36				
Unknown	0	0	0	0.0	0	0.0	0	0.0	0	0.0	0				

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

a. Table ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 529 beneficiaries who were in nursing facilities for part of their enrollment and their 5,291 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2002 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	ANTIDEPRESSANTS						ULCER DRUGS						ANTIDIABETIC					
	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	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx
All	370	64.1 %	\$52	290	50.3 %	0.7	3,262	36.4 %	\$42	210	36.4 %	\$42	2,332	0.9	\$42			
Female	246	68.3	53	177	49.2	0.8	2,021	45.3	40	163	45.3	40	1,799	0.9	45			
Disabled	155	74.9	53	116	56.0	0.7	1,336	41.5	46	86	41.5	46	928	0.9	48			
64 or younger	155	75.2	53	116	56.3	0.7	1,336	41.7	46	86	41.7	46	928	0.9	48			
65-74	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0	0.0	0			
75-84	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0	0.0	0			
85 and older	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0	0.0	0			
Other Eligibles	91	59.5	52	61	39.9	0.8	685	50.3	29	77	50.3	29	871	0.9	42			
64 or younger	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0	0.0	0			
65-74	18	66.7	72	12	44.4	0.8	117	66.7	55	18	66.7	55	216	1.4	70			
75-84	36	65.5	50	21	38.2	0.8	246	52.7	26	29	52.7	26	335	0.8	38			
85 and older	37	52.9	45	28	40.0	0.7	322	42.9	22	30	42.9	22	320	0.7	26			
Male	124	57.1	50	113	52.1	0.7	1,241	21.7	45	47	21.7	45	533	0.9	32			
Disabled	86	57.3	58	83	55.3	0.7	910	22.7	48	34	22.7	48	379	0.8	35			
64 or younger	86	57.3	58	83	55.3	0.7	910	22.7	48	34	22.7	48	379	0.8	35			
65-74	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0	0.0	0			
75-84	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0	0.0	0			
85 and older	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0	0.0	0			
Other Eligibles	38	56.7	34	30	44.8	0.8	331	19.4	35	13	19.4	35	154	1.2	26			
64 or younger	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0	0.0	0			
65-74	11	84.6	33	12	92.3	0.7	144	46.2	44	6	46.2	44	72	1.2	33			
75-84	12	66.7	37	6	33.3	0.8	63	11.1	16	2	11.1	16	24	1.3	18			
85 and older	15	42.9	32	12	34.3	0.9	124	14.3	34	5	14.3	34	58	1.1	20			
Unknown	0	0.0	0	0	0.0	0.0	0	0.0	0	0	0.0	0	0	0.0	0			

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

a. Table ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 529 beneficiaries who were in nursing facilities for part of their enrollment and their 5,291 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2002 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTI-ASTHMATIC					MUSCULOSKELETAL THERAPY AGENTS						
	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	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 \$	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	289	50.1 %	0.7	\$29	0.7	240	41.6 %	0.6	\$32	0.6	2,670	14.9 %	0.6	86	14.9 %	957	\$80
Female	201	55.8	0.7	33	0.7	142	39.4	0.6	30	0.6	1,587	13.6	0.6	49	13.6	552	99
Disabled	127	61.4	0.6	34	0.6	99	47.8	0.7	32	0.7	1,138	22.2	0.7	46	22.2	516	106
64 or younger	126	61.2	0.6	34	0.6	97	47.1	0.7	32	0.7	1,114	22.3	0.7	46	22.3	516	106
65-74	1	100.0	0.1	1	0.1	2	200.0	0.7	30	0.7	24	0.0	0.7	0	0.0	0	0
75-84	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	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
Other Eligibles	74	48.4	0.8	31	0.8	43	28.1	0.5	25	0.5	449	2.0	0.5	3	2.0	36	7
64 or younger	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	1	100.0	12	19
65-74	16	59.3	0.8	33	0.8	9	33.3	0.7	50	0.7	90	3.7	0.7	1	3.7	12	1
75-84	23	41.8	0.6	7	0.6	12	21.8	0.6	25	0.6	137	1.8	0.6	1	1.8	12	1
85 and older	35	50.0	0.8	44	0.8	22	31.4	0.4	16	0.4	222	0.0	0.4	0	0.0	0	0
Male	88	40.6	0.7	19	0.7	98	45.2	0.7	34	0.7	1,083	17.1	0.7	37	17.1	405	55
Disabled	56	37.3	0.7	16	0.7	80	53.3	0.7	37	0.7	876	22.7	0.7	34	22.7	369	57
64 or younger	56	37.3	0.7	16	0.7	80	53.3	0.7	37	0.7	876	22.7	0.7	34	22.7	369	57
65-74	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
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
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
Other Eligibles	32	47.8	0.7	25	0.7	18	26.9	0.7	22	0.7	207	4.5	0.7	3	4.5	36	27
64 or younger	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0
65-74	2	15.4	2.3	19	2.3	6	46.2	0.5	20	0.5	72	23.1	0.5	3	23.1	36	27
75-84	10	55.6	0.7	36	0.7	10	55.6	0.9	23	0.9	111	0.0	0.9	0	0.0	0	0
85 and older	20	57.1	0.6	20	0.6	2	5.7	0.3	18	0.3	24	0.0	0.3	0	0.0	0	0
Unknown	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	0	0.0	0	0

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

a. Table ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 529 beneficiaries who were in nursing facilities for part of their enrollment and their 5,291 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2002 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BOE, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IOWA, 2002

Beneficiary Characteristics	DERMATOLOGICAL					ANTINEOPLASTICS						
	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			
All	546	94.6 %	6,287	0.3	\$11	22	3.8 %	239	0.9	\$282	577	6,271
Female	355	98.6	4,101	0.3	13	18	5.0	191	0.9	293	360	3,949
Disabled	229	110.6	2,661	0.3	9	12	5.8	133	0.9	401	207	2,303
64 or younger	228	110.7	2,649	0.3	9	12	5.8	133	0.9	401	206	2,291
65-74	1	100.0	12	0.3	12	0	0.0	0	0.0	0	1	12
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	126	82.4	1,440	0.3	21	6	3.9	58	0.8	45	153	1,646
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
65-74	28	103.7	336	0.4	67	2	7.4	15	0.3	25	27	306
75-84	45	81.8	508	0.2	6	2	3.6	24	1.0	70	55	582
85 and older	53	75.7	596	0.3	7	2	2.9	19	0.8	30	70	746
Male	191	88.0	2,186	0.3	7	4	1.8	48	1.0	237	217	2,322
Disabled	138	92.0	1,594	0.3	8	1	0.7	12	0.8	772	150	1,601
64 or younger	138	92.0	1,594	0.3	8	1	0.7	12	0.8	772	150	1,601
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	53	79.1	592	0.2	5	3	4.5	36	1.1	59	67	721
64 or younger	1	100.0	12	0.1	4	0	0.0	0	0.0	0	1	12
65-74	15	115.4	180	0.2	6	1	7.7	12	1.0	15	13	156
75-84	13	72.2	142	0.2	6	0	0.0	0	0.0	0	18	197
85 and older	24	68.6	258	0.2	5	2	5.7	24	1.2	81	35	356
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

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

a. Table ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2002. A total of 529 beneficiaries who were in nursing facilities for part of their enrollment and their 5,291 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2002. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2002 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 IOWA, 2002

Beneficiary Characteristics	No. of Benes with at Least One Part D Excl Rx	% Benes with at Least One Part D Excl Rx	No. of Part D Excl Rx per Bene	Total No. Part D Excl Rx	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx \$ as % of All Nondual Rx \$	Total No. of Benes
All	63,240	25.4 %	0.9	212,080	\$15	\$3,645,638	\$17	248,762
Age								
5 and younger	18,854	29.4	0.6	37,800	10	641,834	17	64,049
6-14	12,582	18.1	0.4	26,160	7	493,154	19	69,392
15-20	7,552	20.9	0.5	18,756	8	293,634	16	36,156
21-44	17,004	27.0	1.1	67,975	18	1,145,491	17	62,972
45-64	6,551	45.3	3.8	54,642	68	983,662	18	14,451
65-74	315	42.2	3.7	2,796	48	35,716	13	746
75-84	214	40.5	3.5	1,862	51	27,090	15	528
85 and older	168	36.1	4.5	2,089	54	25,057	12	466
Unknown	0	0.0	0.0	0	0	0	0	2
Basis of Eligibility^c								
Aged	630	40.8	4.1	6,335	54	82,884	13	1,544
Disabled	14,153	43.5	3.2	102,806	61	1,978,454	19	32,571
Adults	13,948	23.2	0.6	37,657	10	575,261	15	60,043
Children	34,509	22.3	0.4	65,282	7	1,009,039	15	154,604
Unknown	0	0.0	0.0	0	0	0	0	0
Gender								
Female	38,790	27.3	1.0	138,735	17	2,342,796	17	141,856
Male	24,450	22.9	0.7	73,345	12	1,302,842	18	106,906
Unknown	0	0.0	0.0	0	0	0	0	0
Race								
White	48,281	27.6	1.0	173,706	17	3,033,746	17	174,715
African American	4,054	22.0	0.6	11,564	10	177,618	15	18,436
Other/unknown	10,905	19.6	0.5	26,810	8	434,274	16	55,611
Use of Nursing Facilities^d								
Entire year	475	82.3	14.1	8,126	200	115,258	14	577
Part year	443	83.7	9.2	4,858	130	68,750	14	529
None	62,322	25.2	0.8	199,096	14	3,461,630	17	247,656
Maintenance Assistance Status								
Cash	34,119	30.2	1.2	136,936	21	2,374,712	17	112,838
Medically needy	1,064	16.7	0.6	4,069	11	70,727	17	6,374
Poverty related	15,940	18.6	0.3	27,922	5	427,551	15	85,885
Other/unknown	12,117	27.7	1.0	43,153	18	772,648	18	43,665

Table ND11
 Nondual Beneficiaries

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

- a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual 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 ND.12

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 IOWA, 2002

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazepine \$ per Bene Mo.	No. of Bene Mos
All	0.1	\$2	\$17	\$0	\$1	1,869,081
Age						
5 and younger	0.1	1	17	0	0	456,129
6-14	0.0	1	19	0	0	568,496
15-20	0.1	1	16	0	0	271,673
21-44	0.2	3	17	0	1	425,436
45-64	0.4	7	18	0	3	132,291
65-74	0.4	5	13	0	2	7,642
75-84	0.4	6	15	0	2	4,557
85 and older	0.7	9	12	0	2	2,853
Unknown	0.0	0	0	0	0	4
Basis of Eligibility^c						
Aged	0.5	6	13	0	2	13,213
Disabled	0.3	6	19	0	3	338,905
Adults	0.1	2	15	0	1	358,812
Children	0.1	1	15	0	0	1,158,151
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.1	2	17	0	1	1,050,940
Male	0.1	2	18	0	0	818,141
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	2	17	0	1	1,394,908
African American	0.1	1	15	0	0	132,913
Other/unknown	0.1	1	16	0	0	341,260
Use of Nursing Facilities^d						
Entire year	1.3	18	14	1	8	6,271
Part year	0.9	13	14	0	5	5,291
None	0.1	2	17	0	1	1,857,519
Maintenance Assistance Status						
Cash	0.2	3	17	0	1	870,932
Medically needy	0.1	2	17	0	1	41,587
Poverty related	0.0	1	15	0	0	596,679
Other/unknown	0.1	2	18	0	1	359,883

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

- a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual 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 ND.13
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
 IOWA, 2002

Drug Category	No. Users	Rx \$ per User	Total Rx \$	Rx \$ as % of All Part D Excl Rx \$	Total No. Rx.	\$ per Rx	No. Rx as % of All Part D Excl Rx
All	77,626	\$47	\$3,645,638	100.0 %	212,080	\$17	100.0 %
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	2	30	60	0.0	2	30	0.0
Drugs for cosmetic purposes	146	16	2,350	0.1	209	11	0.1
Cough and cold medications	43,177	34	1,483,534	40.7	79,121	19	37.3
Vitamins and minerals	2,815	128	361,153	9.9	15,737	23	7.4
Non-prescription drugs	19,260	17	333,809	9.2	46,730	7	22.0
Barbiturates	678	77	51,868	1.4	5,963	9	2.8
Benzodiazepines	9,919	123	1,216,001	33.4	59,480	20	28.0
Other Part D Excl Rx Drugs	1,629	121	196,863	5.4	4,838	41	2.3

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

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual 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 ND11.

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.

APPENDIX TABLE A.1

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

Beneficiary Characteristics	No. of Beneficiaries					No. of Beneficiaries					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	293,144	1,544	32,571	70,476	188,553	2,566,950	13,213	341,651	531,316	1,680,770	0
Age											
5 and younger	79,302	0	1,834	161	77,307	683,663	0	18,424	1,414	663,825	0
6-14	83,286	0	4,776	96	78,414	793,424	0	53,206	920	739,298	0
15-20	41,460	0	3,745	6,673	31,042	358,246	0	40,736	51,611	265,899	0
21-44	72,339	0	11,082	59,590	1,667	575,856	0	117,598	447,394	10,864	0
45-64	15,015	0	10,941	3,955	119	140,705	0	109,882	29,967	856	0
65-74	746	609	136	1	0	7,642	6,389	1,243	10	0	0
75-84	528	478	49	0	1	4,557	4,063	482	0	12	0
85 and older	466	457	8	0	1	2,853	2,761	80	0	12	0
Unknown	2	0	0	0	2	4	0	0	0	4	0
Gender											
Female	167,369	1,046	16,952	55,647	93,724	1,454,682	8,868	179,752	430,008	836,054	0
Male	125,775	498	15,619	14,829	94,829	1,112,268	4,345	161,899	101,308	844,716	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	203,672	1,006	24,957	51,069	126,640	1,852,999	8,189	272,312	402,032	1,170,466	0
African American	25,839	39	2,804	5,671	17,325	248,614	388	29,891	47,805	170,530	0
Other/unknown	63,633	499	4,810	13,736	44,588	465,337	4,636	39,448	81,479	339,774	0
Use of Nursing Facilities^c											
Entire year	577	218	357	0	2	6,271	2,343	3,904	0	24	0
Part year	529	104	408	14	3	5,320	932	4,212	148	28	0
None	292,038	1,222	31,806	70,462	188,548	2,555,359	9,938	333,535	531,168	1,680,718	0
Maintenance Assistance Status											
Cash	134,251	655	25,990	43,295	64,311	1,221,420	7,260	274,877	342,500	596,783	0
Medically needy	6,374	107	836	4,315	1,116	43,162	908	5,279	29,930	7,045	0
Poverty related	102,092	7	11	12,129	89,945	840,303	76	93	71,365	768,769	0
Other/unknown	50,427	775	5,734	10,737	33,181	462,065	4,969	61,402	87,521	308,173	0
Managed Care Status											
FFS all year	198,441	1,544	31,999	44,619	120,279	1,692,947	13,213	335,258	309,064	1,035,412	0
FFS part year, with Rx claims	33,998	0	521	11,971	21,506	324,188	0	5,873	105,326	212,989	0
FFS part year, no Rx claims	16,323	0	51	3,453	12,819	124,752	0	520	22,561	101,671	0
MC all year, with Rx claims	30,527	0	0	8,172	22,355	316,651	0	0	80,118	236,533	0
MC all year, no Rx claims	13,855	0	0	2,261	11,594	108,412	0	0	14,247	94,165	0

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

a. Table A.1 includes the beneficiaries represented by Cell J 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.

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.2
MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
NONDUAL BENEFICIARIES, IOWA, 2002

	Bene Mos in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
All	293,144	2,566,950	248,762	1,869,081	0	697,869
FFS all year	198,441	1,692,947	198,441	1,692,947	0	0
FFS part year, with Rx claims	33,998	324,188	33,998	125,753	0	198,435
FFS part year, with no Rx claims	16,323	124,752	16,323	50,381	0	74,371
MC all year, with Rx claims	30,527	316,651	0	0	0	316,651
MC all year, with no Rx claims	13,855	108,412	0	0	0	108,412

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

a. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.