

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

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TABLE ND.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 NONDUAL BENEFICIARIES, ILLINOIS, 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	Aged	Disabled	Adults	Children	Other/ Unknown	
All	1,589,779	13,583	175,334	358,433	1,042,131	298	14,388,649	112,342	1,844,977	2,742,919	9,686,069	2,342	14,388,649	112,342	1,844,977	2,742,919	9,686,069	2,342	
Age																			
5 and younger	435,809	0	2,996	31	432,782	0	3,846,004	0	32,389	167	3,813,448	0	3,846,004	0	32,389	167	3,813,448	0	
6-14	455,771	0	14,638	95	441,038	0	4,478,771	0	162,256	403	4,316,112	0	4,478,771	0	162,256	403	4,316,112	0	
15-20	201,916	0	13,942	24,905	163,069	0	1,843,207	0	147,414	170,274	1,525,519	0	1,843,207	0	147,414	170,274	1,525,519	0	
21-44	373,814	2	61,397	307,573	4,748	94	3,046,224	21	645,246	199,777	28,171	753	3,046,224	21	645,246	199,777	28,171	753	
45-64	102,846	50	76,367	25,789	438	202	995,357	118	791,416	220	2,472	1,574	995,357	118	791,416	220	2,472	1,574	
65-74	11,648	6,162	5,453	31	0	2	113,249	52,417	60,597	0	15	15	113,249	52,417	60,597	0	15	15	
75-84	5,566	5,078	488	0	0	0	48,310	43,140	5,170	0	0	0	48,310	43,140	5,170	0	0	0	
85 and older	2,346	2,291	53	2	0	0	17,147	16,646	489	12	0	0	17,147	16,646	489	12	0	0	
Unknown	63	0	0	7	56	0	380	0	0	33	347	0	380	0	0	33	347	0	
Gender																			
Female	938,465	9,460	91,204	316,062	521,441	298	8,356,341	76,043	978,382	2,450,985	4,848,589	2,342	8,356,341	76,043	978,382	2,450,985	4,848,589	2,342	
Male	651,314	4,123	84,130	42,371	520,690	0	6,032,308	36,299	866,595	291,934	4,837,480	0	6,032,308	36,299	866,595	291,934	4,837,480	0	
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Race																			
White	572,656	5,751	64,261	144,165	358,241	238	5,203,062	46,332	665,295	1,123,205	3,366,344	1,886	5,203,062	46,332	665,295	1,123,205	3,366,344	1,886	
African American	608,220	1,801	91,424	120,801	394,148	46	5,707,821	13,824	973,923	1,001,059	3,718,678	337	5,707,821	13,824	973,923	1,001,059	3,718,678	337	
Other/unknown	408,903	6,031	19,649	93,467	289,742	14	3,477,766	52,186	205,759	618,655	2,601,047	119	3,477,766	52,186	205,759	618,655	2,601,047	119	
Use of Nursing Facilities^c																			
Entire year	7,667	1,431	6,223	9	4	0	81,032	11,673	69,296	32	31	0	81,032	11,673	69,296	32	31	0	
Part year	5,950	882	4,928	125	15	0	59,791	7,030	51,432	1,179	150	0	59,791	7,030	51,432	1,179	150	0	
None	1,576,162	11,270	164,183	358,299	1,042,112	298	14,247,826	93,639	1,724,249	2,741,708	9,685,888	2,342	14,247,826	93,639	1,724,249	2,741,708	9,685,888	2,342	
Maintenance Assistance Status																			
Cash	225,544	4,860	131,034	15,921	73,729	0	2,399,717	54,060	1,479,405	150,343	715,909	0	2,399,717	54,060	1,479,405	150,343	715,909	0	
Medically needy	283,525	6,299	29,622	244,495	3,109	0	2,186,378	43,825	231,475	1,902,485	8,593	0	2,186,378	43,825	231,475	1,902,485	8,593	0	
Poverty-related	926,653	852	8,490	55,268	861,745	298	8,370,400	7,186	82,374	302,020	7,976,478	2,342	8,370,400	7,186	82,374	302,020	7,976,478	2,342	
Other/unknown	154,057	1,572	6,188	42,749	103,548	0	1,432,154	7,271	51,723	388,071	985,089	0	1,432,154	7,271	51,723	388,071	985,089	0	
Managed Care Status																			
FFS all year	1,490,379	13,582	174,570	338,195	963,734	298	13,800,708	112,337	1,839,926	2,623,537	9,222,566	2,342	13,800,708	112,337	1,839,926	2,623,537	9,222,566	2,342	
FFS part year, with Rx claims	52,403	1	468	13,428	38,506	0	365,474	5	3,451	90,535	271,483	0	365,474	5	3,451	90,535	271,483	0	
FFS part year, no Rx claims	46,997	0	296	6,810	39,891	0	222,467	0	1,600	28,847	192,020	0	222,467	0	1,600	28,847	192,020	0	

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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, ILLINOIS, 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	60.4 %	7.1	\$383	\$54	\$3,035	12.6 %	1,589,779
Age							
5 and younger	60.7	3.1	120	38	1,872	6.4	435,809
6-14	52.0	3.2	187	58	1,060	17.7	455,771
15-20	56.3	4.2	230	55	2,178	10.6	201,916
21-44	67.4	9.1	523	57	4,291	12.2	373,814
45-64	77.4	34.2	1,947	57	12,105	16.1	102,846
65-74	73.6	32.5	1,612	50	12,939	12.5	11,648
75-84	65.6	27.0	1,299	48	10,509	12.4	5,566
85 and older	68.0	27.4	1,173	43	11,784	10.0	2,346
Unknown	42.9	1.4	41	28	5,496	0.7	63
Basis of Eligibility^c							
Aged	64.3	23.1	1,092	47	9,676	11.3	13,583
Disabled	76.6	29.9	1,985	66	13,905	14.3	175,334
Adults	65.9	6.5	267	41	2,281	11.7	358,433
Children	55.7	3.2	144	45	1,378	10.4	1,042,131
Unknown	81.5	18.1	1,654	91	8,815	18.8	298
Gender							
Female	63.3	7.7	377	49	2,871	13.1	938,465
Male	56.3	6.1	391	64	3,272	11.9	651,314
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	65.4	9.4	536	57	3,211	16.7	572,656
African American	56.8	6.5	347	54	3,456	10.0	608,220
Other/unknown	58.7	4.6	221	48	2,163	10.2	408,903
Use of Nursing Facilities^d							
Entire year	96.1	74.6	5,022	67	43,862	11.4	7,667
Part year	96.1	59.2	3,883	66	54,297	7.2	5,950
None	60.1	6.5	347	53	2,643	13.1	1,576,162
Maintenance Assistance Status							
Cash	74.1	21.0	1,334	64	8,822	15.1	225,544
Medically needy	63.6	8.5	410	48	3,387	12.1	283,525
Poverty related	56.6	3.3	142	44	1,335	10.7	926,653
Other/unknown	57.7	6.7	387	58	4,143	9.3	154,057

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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, ILLINOIS, 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				
All	0.8	\$42	12.6 %	39.6 %	48.9 %	4.7 %	4.4 %	1.9 %	0.5 %	\$335	1,589,779	14,388,649
Age												
5 and younger	0.4	14	6.4	39.3	57.4	2.5	0.7	0.1	0.0	212	435,809	3,846,004
6-14	0.3	19	17.7	48.0	47.4	2.7	1.7	0.2	0.0	108	455,771	4,478,771
15-20	0.5	25	10.6	43.7	49.7	4.0	2.2	0.4	0.1	239	201,916	1,843,207
21-44	1.1	64	12.2	32.6	49.5	8.1	7.0	2.3	0.5	527	373,814	3,046,224
45-64	3.5	201	16.1	22.6	22.3	11.0	23.2	16.0	4.8	1,251	102,846	995,357
65-74	3.3	166	12.5	26.4	19.3	10.7	24.3	15.6	3.8	1,331	11,648	113,249
75-84	3.1	150	12.4	34.4	17.4	10.1	20.2	14.1	3.8	1,211	5,566	48,310
85 and older	3.7	161	10.0	32.0	12.5	8.1	22.4	19.3	5.7	1,612	2,346	17,147
Unknown	0.2	7	0.7	57.1	42.9	0.0	0.0	0.0	0.0	911	63	380
Basis of Eligibility^c												
Aged	2.8	132	11.3	35.7	19.2	10.3	19.8	12.0	3.1	1,170	13,583	112,342
Disabled	2.8	189	14.3	23.4	28.9	10.4	20.3	13.1	3.8	1,321	175,334	1,844,977
Adults	0.8	35	11.7	34.1	51.9	7.5	5.2	1.1	0.2	298	358,433	2,742,919
Children	0.3	15	10.4	44.3	51.7	2.7	1.2	0.1	0.0	148	1,042,131	9,686,069
Unknown	2.3	211	18.8	18.5	35.9	16.8	19.5	9.4	0.0	1,122	298	2,342
Gender												
Female	0.9	42	13.1	36.7	50.6	5.2	4.8	2.1	0.6	322	938,465	8,356,341
Male	0.7	42	11.9	43.7	46.6	4.0	3.8	1.6	0.4	353	651,314	6,032,308
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.0	59	16.7	34.6	49.7	6.1	6.0	2.8	0.9	353	572,656	5,203,062
African American	0.7	37	10.0	43.2	46.3	4.3	4.1	1.7	0.4	368	608,220	5,707,821
Other/unknown	0.5	26	10.2	41.3	51.8	3.4	2.5	0.8	0.2	254	408,903	3,477,766
Use of Nursing Facilities^d												
Entire year	7.1	475	11.4	3.9	4.2	6.1	28.2	38.7	19.0	4,150	7,667	81,032
Part year	5.9	386	7.2	3.9	11.8	10.0	30.3	31.3	12.8	5,403	5,950	59,791
None	0.7	38	13.1	39.9	49.3	4.7	4.2	1.6	0.4	292	1,576,162	14,247,826
Maintenance Assistance Status												
Cash	2.0	125	15.1	25.9	41.4	8.2	13.7	8.3	2.4	829	225,544	2,399,717
Medically needy	1.1	53	12.1	36.4	45.4	8.0	7.1	2.5	0.5	439	283,525	2,186,378
Poverty related	0.4	16	10.7	43.4	52.4	2.7	1.2	0.2	0.0	148	926,653	8,370,400
Other/unknown	0.7	42	9.3	42.3	45.8	5.3	4.6	1.4	0.4	446	154,057	1,432,154

Table ND4

Nondual Beneficiaries

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

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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 Illinois, 0.8 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, ILLINOIS, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users							
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos		
																Generic	Brand-Name
Anti-infective Agents	0.2	0.1	0.0	0.1	\$12	\$10	\$1	\$2	\$51	\$97	\$73	\$14	1,645,479	\$83,802,918	646,940	40.7 %	6,840,698
Biologicals	0.3	0.3	0.0	0.0	329	319	1	9	1003	1,026	1,058	553	11,994	12,030,855	3,740	0.2	36,602
Antineoplastic Agents	0.5	0.3	0.1	0.2	181	150	12	19	333	564	176	91	31,833	10,587,303	5,543	0.3	58,336
Endocrine/Metabolic Drugs	0.4	0.2	0.1	0.2	19	14	2	4	44	65	30	22	1,022,333	44,974,947	221,911	14.0	2,320,770
Cardiovascular Agents	1.2	0.4	0.1	0.7	43	25	3	15	36	61	37	21	1,381,959	49,379,116	107,826	6.8	1,156,080
Respiratory Agents	0.4	0.2	0.0	0.2	18	11	3	4	47	70	71	22	1,467,559	69,058,645	367,626	23.1	3,943,432
Gastrointestinal Agents	0.4	0.2	0.0	0.2	34	29	1	4	79	121	114	24	506,256	39,954,494	109,731	6.9	1,175,036
Genitourinary Agents	0.2	0.1	0.0	0.1	8	7	0	1	40	49	28	16	155,761	6,168,234	73,797	4.6	753,385
CNS Drugs	0.9	0.5	0.0	0.4	74	59	3	11	83	127	85	30	1,510,759	125,934,779	158,774	10.0	1,703,184
Stimulants/Anti-obesity/Anorexia	0.6	0.4	0.1	0.2	37	26	4	7	58	72	58	35	246,157	14,379,326	35,153	2.2	389,929
Miscellaneous Psychological/Neurological Agents	0.3	0.2	0.0	0.1	34	28	0	6	117	141	9	65	21,181	2,478,337	6,730	0.4	72,953
Analgesics and Anesthetics	0.3	0.0	0.0	0.3	9	4	1	4	29	127	55	15	1,194,599	34,198,015	362,221	22.8	3,837,924
Neuromuscular Agents	0.7	0.3	0.1	0.3	45	36	3	6	65	111	43	21	645,045	42,199,079	85,995	5.4	939,032
Nutritional Products	0.3	0.0	0.0	0.3	7	1	1	5	20	43	22	17	301,062	6,033,132	90,849	5.7	864,888
Hematological Agents	0.6	0.2	0.1	0.3	122	111	2	9	216	678	23	28	173,719	37,530,617	28,964	1.8	306,737
Topical Products	0.2	0.1	0.0	0.1	6	3	0	2	28	52	50	16	797,154	21,960,604	358,322	22.5	3,834,133
Miscellaneous Products	0.2	0.1	0.0	0.1	21	17	2	2	109	135	304	33	67,839	7,382,712	31,740	2.0	343,887
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	3	0	0	0	20	0	0	0	29,420	574,384	16,042	1.0	176,817
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.	11,210,109	608,627,497	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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 Illinois, 0.8 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, ILLINOIS, 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	\$75,051,542	71,406	4.5 %	798,870	0.6	\$156	\$94
ANTIASTHMATIC	40,694,342	291,694	18.3	3,161,048	0.3	47	13
ANTIDEPRESSANTS	40,331,886	133,807	8.4	1,442,780	0.4	62	28
ANTICONVULSANT	37,374,885	62,303	3.9	690,367	0.7	80	54
ULCER DRUGS	32,860,280	103,546	6.5	1,120,378	0.3	87	29
ANTIVIRAL	31,413,135	21,507	1.4	232,296	0.4	356	135
MISC. HEMATOLOGICAL	25,575,708	7,782	0.5	85,252	0.5	626	300
ANTIDIABETIC	22,222,600	58,679	3.7	635,235	0.6	56	35
ANTHISTAMINES	18,590,046	292,099	18.4	3,200,086	0.2	33	6
ANALGESICS - Narcotic	15,918,208	208,910	13.1	2,233,569	0.2	29	7
Total	340,032,632	1,251,733		13,599,881	n.a.	n.a.	n.a.

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

Beneficiary Characteristics	All Top 10 Drug Groups					ANTI-PSYCHOTICS					ANTI-ASTHMATIC						
	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	4,471,288	\$340,032,632	71,406	4.5 %	798,870	0.6	\$94	291,694	18.3 %	3,161,048	0.3	\$13					
Female	2,764,214	186,051,685	37,958	4.0	422,454	0.5	82	163,364	17.4	1,766,084	0.3	13					
Disabled	1,474,792	117,183,993	23,950	26.3	274,703	0.7	103	42,482	46.6	488,482	0.4	21					
5 and younger	4,849	283,857	13	1.0	155	0.3	39	702	56.6	7,970	0.3	18					
6-14	21,608	1,988,330	359	7.1	4,151	0.5	80	1,431	28.2	16,633	0.3	18					
15-20	26,301	2,169,504	600	11.3	6,861	0.5	82	1,219	22.9	13,934	0.3	15					
21-44	447,471	41,788,205	10,367	33.5	118,826	0.6	102	12,536	40.5	144,471	0.4	18					
45-64	901,630	66,238,363	11,745	26.5	134,688	0.7	106	24,678	55.7	283,042	0.5	23					
65-74	67,428	4,359,399	782	19.9	9,062	0.8	98	1,779	45.4	20,845	0.5	24					
75-84	5,247	339,035	78	22.5	888	0.8	113	128	36.9	1,497	0.6	29					
85 and older	258	17,300	6	16.7	72	0.8	94	9	25.0	90	0.3	11					
Other Eligibles	1,289,411	68,867,003	14,008	1.7	147,751	0.3	42	120,875	14.3	1,277,518	0.2	10					
5 and younger	156,566	4,751,027	449	0.2	5,033	0.2	13	39,847	18.8	424,454	0.2	7					
6-14	218,877	12,439,218	2,747	1.3	31,125	0.4	61	28,585	13.1	317,590	0.2	11					
15-20	146,810	8,821,638	2,791	2.5	30,685	0.4	51	12,981	11.5	139,374	0.2	10					
21-44	596,773	32,242,903	6,390	2.3	65,301	0.2	28	33,587	12.1	337,355	0.3	12					
45-64	105,759	6,693,943	758	4.1	7,658	0.3	46	4,298	23.3	43,049	0.4	18					
65-74	24,577	1,510,212	223	5.4	2,250	0.5	51	654	15.9	6,848	0.4	18					
75-84	26,165	1,583,822	364	10.3	3,281	0.6	61	583	16.4	5,872	0.4	22					
85 and older	13,884	824,240	286	16.0	2,418	0.6	59	340	19.1	2,976	0.5	21					
Male	1,707,074	153,980,947	33,448	5.1	376,416	0.7	108	128,330	19.7	1,394,964	0.3	12					
Disabled	963,997	106,748,296	22,722	27.0	258,808	0.7	124	23,416	27.8	264,556	0.4	21					
5 and younger	7,649	1,658,099	31	1.8	359	0.4	51	1,112	63.3	12,568	0.3	18					
6-14	44,785	10,135,493	1,078	11.3	12,532	0.6	85	3,185	33.3	37,094	0.3	18					
15-20	41,899	6,167,244	1,285	14.9	14,524	0.6	109	1,602	18.6	18,354	0.3	17					
21-44	355,492	43,723,934	11,261	37.0	128,477	0.7	131	5,652	18.6	63,609	0.4	19					
45-64	485,798	43,029,312	8,594	26.8	97,624	0.8	123	11,152	34.7	124,898	0.5	23					
65-74	25,949	1,852,799	423	27.6	4,744	0.8	108	664	43.4	7,483	0.5	24					
75-84	1,988	147,223	43	30.5	464	0.9	130	43	30.5	478	0.6	29					
85 and older	437	34,192	7	41.2	84	1.2	180	6	35.3	72	0.4	19					
Other Eligibles	743,070	47,232,340	10,726	1.9	117,608	0.5	73	104,913	18.5	1,130,401	0.2	10					
5 and younger	204,317	8,730,772	634	0.3	7,033	0.2	25	53,383	24.1	567,808	0.2	9					
6-14	298,161	21,034,107	5,950	2.7	66,929	0.5	76	38,466	17.2	427,001	0.2	12					
15-20	104,251	8,473,970	2,693	3.6	29,719	0.6	86	8,458	11.2	91,230	0.3	12					
21-44	74,481	4,909,242	883	2.5	8,209	0.3	48	2,705	7.7	25,196	0.3	14					
45-64	32,606	2,213,012	204	2.5	2,017	0.3	53	997	12.4	9,407	0.4	18					
65-74	13,306	873,691	126	6.0	1,307	0.5	71	423	20.3	4,578	0.4	20					
75-84	12,024	755,094	168	11.0	1,746	0.7	72	359	23.4	3,966	0.4	23					
85 and older	3,924	242,452	68	13.3	648	0.5	59	122	23.9	1,215	0.4	22					
Unknown	18	1,000	0	0.0	0	0.0	0	8	12.7	91	0.1	8					

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

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTICONVULSANT					ULCER DRUGS				
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx
All	133,807	8.4 %	1,442,780	\$28	0.4	62,303	3.9 %	690,367	0.7	\$54	103,546	6.5 %	1,120,378	0.3	\$29
Female	96,024	10.2	1,030,650	28	0.4	35,461	3.8	391,504	0.6	51	72,362	7.7	783,611	0.3	29
Disabled	40,304	44.2	459,476	33	0.5	21,488	23.6	245,662	0.7	58	32,059	35.2	368,294	0.4	39
5 and younger	6	0.5	68	11	0.4	108	8.7	1,201	0.7	58	133	10.7	1,497	0.5	30
6-14	358	7.1	4,112	25	0.4	668	13.2	7,717	0.8	74	235	4.6	2,690	0.4	32
15-20	820	15.4	9,330	29	0.4	808	15.2	9,268	0.8	76	486	9.1	5,616	0.3	25
21-44	14,348	46.3	163,326	32	0.5	9,069	29.3	103,628	0.8	67	8,530	27.5	98,110	0.4	33
45-64	23,639	53.4	269,504	34	0.6	10,246	23.1	117,067	0.7	49	20,587	46.5	236,098	0.4	41
65-74	1,051	26.8	12,208	30	0.5	549	14.0	6,361	0.8	39	1,945	49.6	22,657	0.4	38
75-84	79	22.8	902	37	0.7	37	10.7	393	0.9	36	130	37.5	1,489	0.5	39
85 and older	3	8.3	26	76	0.9	3	8.3	27	0.6	14	13	36.1	137	0.6	41
Other Eligibles	55,720	6.6	571,174	23	0.4	13,973	1.6	145,842	0.5	38	40,302	4.8	415,314	0.2	20
5 and younger	144	0.1	1,658	12	0.3	555	0.3	6,061	0.5	39	2,678	1.3	26,160	0.2	11
6-14	4,667	2.1	52,434	23	0.4	2,470	1.1	27,707	0.6	51	3,453	1.6	38,925	0.2	12
15-20	7,555	6.7	81,466	22	0.3	2,078	1.8	22,517	0.5	48	4,893	4.4	52,744	0.2	11
21-44	37,005	13.3	373,156	22	0.3	7,206	2.6	73,045	0.4	30	22,780	8.2	231,947	0.2	21
45-64	4,651	25.2	46,193	29	0.5	1,099	6.0	10,885	0.5	36	3,715	20.1	37,429	0.3	33
65-74	600	14.6	6,339	24	0.4	215	5.2	2,272	0.6	28	1,139	27.7	12,141	0.4	35
75-84	680	19.2	6,626	32	0.6	234	6.6	2,405	0.6	29	1,076	30.4	11,102	0.4	39
85 and older	418	23.4	3,302	38	0.7	116	6.5	950	0.7	30	568	31.9	4,866	0.6	44
Male	37,783	5.8	412,130	29	0.5	26,842	4.1	298,863	0.7	59	31,184	4.8	336,767	0.4	31
Disabled	20,747	24.7	232,182	32	0.5	18,137	21.6	205,773	0.8	65	17,314	20.6	194,746	0.4	37
5 and younger	12	0.7	138	11	0.2	172	9.8	1,945	0.7	52	190	10.8	2,160	0.4	29
6-14	944	9.9	10,912	26	0.5	1,178	12.3	13,673	0.8	63	379	4.0	4,460	0.4	38
15-20	1,069	12.4	12,162	33	0.5	1,297	15.1	14,853	0.9	79	440	5.1	5,069	0.4	33
21-44	8,218	27.0	91,467	32	0.5	8,321	27.4	94,655	0.8	73	5,374	17.7	60,834	0.4	35
45-64	10,097	31.5	112,868	31	0.5	6,816	21.2	76,648	0.7	53	10,226	31.9	114,251	0.5	39
65-74	380	24.8	4,348	33	0.6	325	21.2	3,683	0.8	47	641	41.9	7,243	0.5	38
75-84	23	16.3	239	37	0.7	24	17.0	268	0.9	36	55	39.0	631	0.5	37
85 and older	4	23.5	48	50	0.8	4	23.5	48	0.9	72	9	52.9	98	0.7	59
Other Eligibles	17,036	3.0	179,948	26	0.4	8,705	1.5	93,090	0.6	46	13,869	2.4	142,014	0.3	21
5 and younger	262	0.1	2,944	11	0.3	873	0.4	9,498	0.5	40	3,471	1.6	33,935	0.2	12
6-14	7,315	3.3	81,948	25	0.4	4,001	1.8	44,832	0.6	48	2,825	1.3	31,971	0.2	13
15-20	3,987	5.3	42,891	30	0.4	1,914	2.5	20,692	0.7	55	1,930	2.6	20,920	0.2	16
21-44	3,788	10.8	35,217	23	0.4	1,271	3.6	11,645	0.4	35	3,168	9.0	29,786	0.3	31
45-64	1,087	13.6	10,443	27	0.4	368	4.6	3,490	0.5	35	1,264	15.8	12,300	0.4	35
65-74	270	13.0	3,019	26	0.4	136	6.5	1,406	0.6	29	579	27.8	6,296	0.4	36
75-84	235	15.3	2,526	31	0.5	112	7.3	1,201	0.6	28	458	29.9	5,025	0.4	40
85 and older	92	18.0	960	34	0.6	30	5.9	326	0.6	16	174	34.1	1,781	0.5	42
Unknown	0	0.0	0	0	0.0	0	0.0	0	0.0	0	2	3.2	10	0.2	12

Table ND7B
 Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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 SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BOE, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, ILLINOIS, 2002

Beneficiary Characteristics	ANTIVIRAL				MISC. HEMATOLOGICAL				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	21,507	1.4 %	232,296	0.4	\$135	7,782	0.5 %	85,252	0.5	\$300	58,679	3.7 %	635,235	0.6	\$35
Female	12,972	1.4	139,359	0.3	103	4,599	0.5	50,607	0.5	102	40,923	4.4	443,746	0.6	35
Disabled	4,534	5.0	51,543	0.5	179	3,399	3.7	38,681	0.5	110	25,679	28.2	294,011	0.7	38
5 and younger	19	1.5	219	0.4	41	0	0.0	0	0.0	0	2	0.2	24	0.7	43
6-14	116	2.3	1,377	0.6	175	2	0.0	24	0.7	9,743	51	1.0	587	0.7	55
15-20	88	1.7	1,012	0.3	88	5	0.1	60	0.2	14	117	2.2	1,332	0.6	38
21-44	2,260	7.3	25,328	0.4	173	285	0.9	3,273	0.4	763	4,148	13.4	47,476	0.6	34
45-64	1,988	4.5	22,890	0.5	193	2,679	6.1	30,350	0.5	43	19,055	43.0	217,764	0.7	39
65-74	59	1.5	669	0.3	112	387	9.9	4,500	0.5	43	2,173	55.4	25,317	0.7	36
75-84	4	1.2	48	0.1	4	39	11.2	450	0.6	49	130	37.5	1,475	0.7	34
85 and older	0	0.0	0	0.0	0	2	5.6	24	0.1	4	3	8.3	36	0.5	13
Other Eligibles	8,438	1.0	87,816	0.3	59	1,200	0.1	11,926	0.4	77	15,244	1.8	149,735	0.6	30
5 and younger	939	0.4	10,347	0.2	14	5	0.0	56	0.2	59	75	0.0	784	0.6	30
6-14	1,036	0.5	11,727	0.3	68	4	0.0	48	0.1	4	623	0.3	6,859	0.7	42
15-20	1,170	1.0	12,428	0.2	27	8	0.0	93	0.7	3,986	774	0.7	8,029	0.6	36
21-44	4,848	1.7	48,680	0.3	68	277	0.1	2,812	0.3	52	8,057	2.9	77,619	0.5	27
45-64	358	1.9	3,690	0.3	155	277	1.5	2,803	0.4	37	3,230	17.5	30,953	0.6	33
65-74	44	1.1	484	0.2	44	202	4.9	2,097	0.5	43	1,258	30.6	13,209	0.6	29
75-84	30	0.8	338	0.1	12	259	7.3	2,629	0.5	43	899	25.4	9,356	0.7	28
85 and older	13	0.7	122	0.1	13	168	9.4	1,388	0.7	59	328	18.4	2,926	0.7	28
Male	8,535	1.3	92,937	0.5	183	3,183	0.5	34,645	0.5	589	17,756	2.7	191,489	0.6	35
Disabled	5,931	7.0	64,691	0.6	239	2,457	2.9	27,308	0.5	553	12,753	15.2	142,613	0.6	35
5 and younger	28	1.6	320	0.5	85	5	0.3	58	1.1	20,520	7	0.4	76	0.6	78
6-14	108	1.1	1,267	0.5	122	28	0.3	334	2.1	20,048	41	0.4	465	0.8	42
15-20	72	0.8	808	0.3	111	17	0.2	201	1.0	10,847	120	1.4	1,350	0.7	44
21-44	2,832	9.3	30,460	0.5	224	214	0.7	2,427	0.5	1,606	2,622	8.6	29,408	0.6	33
45-64	2,841	8.9	31,256	0.6	264	2,004	6.2	22,123	0.5	47	9,305	29.0	103,724	0.6	35
65-74	50	3.3	580	1.0	250	176	11.5	2,009	0.5	40	608	39.7	6,990	0.7	35
75-84	0	0.0	0	0.0	0	10	7.1	120	0.7	61	39	27.7	468	0.7	34
85 and older	0	0.0	0	0.0	0	3	17.6	36	0.6	59	11	64.7	132	0.7	26
Other Eligibles	2,604	0.5	28,246	0.2	54	726	0.1	7,337	0.5	722	5,003	0.9	48,876	0.6	34
5 and younger	1,022	0.5	11,289	0.2	16	31	0.0	332	1.0	5,149	129	0.1	1,425	0.6	32
6-14	830	0.4	9,357	0.2	46	27	0.0	304	0.7	7,442	540	0.2	5,906	0.7	42
15-20	317	0.4	3,486	0.2	39	18	0.0	187	0.8	4,876	397	0.5	4,133	0.8	50
21-44	314	0.9	2,935	0.4	198	122	0.3	1,039	0.4	116	1,512	4.3	13,424	0.6	33
45-64	88	1.1	829	0.4	245	195	2.4	1,887	0.4	66	1,390	17.3	12,702	0.6	34
65-74	23	1.1	252	0.3	42	168	8.1	1,785	0.5	46	602	28.9	6,510	0.6	27
75-84	10	0.7	98	0.2	11	111	7.2	1,229	0.6	51	368	24.0	4,087	0.6	28
85 and older	0	0.0	0	0.0	0	54	10.6	574	0.5	40	65	12.7	689	0.7	23
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 Illinois, released by CMS in 05/2006. 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, ILLINOIS, 2002

Beneficiary Characteristics	ANTHISTAMINES				ANALGESICS - Narcotic							
	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	292,099	18.4 %	3,200,086	0.2	\$6	208,910	13.1 %	2,233,569	0.2	\$7	1,589,779	14,388,649
Female	175,905	18.7	1,916,684	0.2	6	156,029	16.6	1,663,159	0.2	6	938,431	8,356,092
Disabled	31,457	34.5	366,443	0.3	10	42,033	46.1	480,179	0.4	14	91,204	978,382
5 and younger	317	25.6	3,667	0.2	3	38	3.1	438	0.1	1	1,240	13,294
6-14	1,326	26.1	15,571	0.2	6	326	6.4	3,825	0.2	2	5,072	55,924
15-20	1,283	24.1	14,848	0.2	7	866	16.3	10,023	0.2	4	5,325	57,133
21-44	10,214	33.0	118,907	0.2	9	14,695	47.4	168,394	0.3	12	30,988	334,647
45-64	16,985	38.4	197,743	0.3	11	24,535	55.4	279,405	0.4	15	44,274	469,401
65-74	1,266	32.3	14,928	0.3	10	1,476	37.6	16,994	0.3	10	3,922	44,019
75-84	66	19.0	779	0.2	10	89	25.6	1,004	0.4	11	347	3,659
85 and older	0	0.0	0	0.0	0	8	22.2	96	0.3	10	36	305
Other Eligibles	144,448	17.0	1,550,241	0.2	5	113,995	13.5	1,182,972	0.2	3	847,227	7,377,710
5 and younger	40,123	19.0	434,416	0.1	2	2,888	1.4	32,347	0.1	1	211,547	1,863,942
6-14	43,015	19.7	480,545	0.2	6	6,652	3.1	75,723	0.1	1	217,957	2,132,950
15-20	16,471	14.6	178,180	0.2	6	16,416	14.6	175,315	0.1	1	112,439	994,719
21-44	39,552	14.3	402,238	0.2	7	79,803	28.8	817,023	0.2	4	277,383	2,162,445
45-64	4,131	22.4	42,586	0.2	10	6,229	33.7	63,333	0.3	8	18,461	147,588
65-74	564	13.7	6,224	0.2	9	737	17.9	7,781	0.3	9	4,112	34,663
75-84	389	11.0	4,151	0.3	12	779	22.0	7,662	0.4	14	3,545	29,156
85 and older	203	11.4	1,901	0.3	13	491	27.5	3,788	0.5	15	1,783	12,247
Male	116,194	17.8	1,283,402	0.2	5	52,881	8.1	570,410	0.3	9	651,285	6,032,177
Disabled	17,045	20.3	196,934	0.2	9	23,033	27.4	256,075	0.4	16	84,130	866,595
5 and younger	540	30.8	6,229	0.2	3	99	5.6	1,150	0.1	5	1,756	19,095
6-14	2,333	24.4	27,394	0.2	7	556	5.8	6,517	0.1	2	9,566	106,332
15-20	1,326	15.4	15,366	0.2	8	864	10.0	10,026	0.2	7	8,617	90,281
21-44	5,232	17.2	60,220	0.3	10	8,361	27.5	93,520	0.4	16	30,409	310,599
45-64	7,210	22.5	83,032	0.3	9	12,628	39.3	138,938	0.5	17	32,093	322,015
65-74	378	24.7	4,389	0.3	9	491	32.1	5,519	0.3	11	1,531	16,578
75-84	24	17.0	280	0.4	16	30	21.3	357	0.3	10	141	1,511
85 and older	2	11.8	24	0.1	2	4	23.5	48	0.8	11	17	184
Other Eligibles	99,146	17.5	1,086,445	0.2	5	29,848	5.3	314,335	0.2	4	567,155	5,165,582
5 and younger	43,657	19.7	472,904	0.1	2	4,217	1.9	47,251	0.1	1	221,266	1,949,673
6-14	42,921	19.2	479,415	0.2	7	7,251	3.2	82,344	0.1	1	223,176	2,183,565
15-20	8,716	11.5	95,809	0.2	8	6,022	8.0	65,609	0.1	2	75,535	701,074
21-44	2,593	7.4	25,236	0.2	8	9,468	27.0	90,349	0.3	8	35,034	238,533
45-64	794	9.9	7,927	0.2	10	2,124	26.5	20,649	0.3	12	8,018	56,353
65-74	240	11.5	2,683	0.2	10	362	17.4	3,866	0.3	11	2,083	17,989
75-84	182	11.9	2,038	0.3	11	283	18.5	3,055	0.3	9	1,533	13,984
85 and older	43	8.4	433	0.2	6	121	23.7	1,212	0.4	20	510	4,411
Unknown	3	4.8	23	0.2	8	1	1.6	8	0.1	1	63	380

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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, ILLINOIS, 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	\$475	7.1	7,667	81,032
Age				
0-64	526	7.3	5,535	61,518
65-74	363	6.5	781	8,315
75-84	314	6.5	685	6,029
85 and older	241	5.7	666	5,170
Unknown	0	0.0	0	0
Gender				
Female	464	7.4	3,825	38,943
Male	486	6.7	3,842	42,089
Unknown	0	0.0	0	0
Race				
White	470	7.5	4,390	45,399
African American	485	6.5	2,784	30,239
Other/unknown	466	6.7	493	5,394
Basis of Eligibility^c				
Aged	281	6.2	1,431	11,673
Disabled	508	7.2	6,223	69,296
Adults	201	4.3	9	32
Children	408	5.4	4	31
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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 5,950 beneficiaries who were in nursing facilities for part of their enrollment and their 59,791 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, ILLINOIS, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users								
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total # of Rx	Total Rx \$	No.	As % of All-Year NF Residents						
												No. of Bene Mos	%					
Anti-infective Agents	0.5	0.3	0.0	0.2	\$63	\$56	\$3	\$4	\$117	\$179	\$84	\$23	24,257	\$2,841,548	4,185	54.6	%	45,361
Biologicals	0.1	0.0	0.0	0.1	16	0	0	16	154	64	0	160	142	21,913	125	1.6		1,330
Antineoplastic Agents	0.6	0.1	0.3	0.2	132	67	46	18	209	454	164	92	3,110	649,942	476	6.2		4,941
Endocrine/Metabolic Drugs	1.1	0.5	0.1	0.5	51	35	3	12	45	72	24	24	36,638	1,636,316	2,968	38.7		31,929
Cardiovascular Agents	1.8	0.4	0.2	1.1	56	26	7	23	32	59	31	21	83,419	2,633,818	4,465	58.2		47,183
Respiratory Agents	0.9	0.3	0.1	0.5	38	21	5	12	42	66	66	23	27,421	1,141,744	2,775	36.2		30,264
Gastrointestinal Agents	1.0	0.4	0.0	0.6	57	41	1	15	59	112	66	26	40,338	2,363,025	3,863	50.4		41,235
Genitourinary Agents	0.6	0.3	0.0	0.3	25	20	0	5	42	74	30	16	10,687	450,088	1,660	21.7		17,802
CNS Drugs	2.5	1.2	0.3	1.0	266	203	27	36	105	174	79	36	167,762	17,686,868	6,064	79.1		66,474
Stimulants/Anti-obesity/Anorexia	0.8	0.0	0.0	0.8	22	6	2	14	26	155	32	19	577	15,216	64	0.8		686
Miscellaneous Psychological/Neurological Agents	0.7	0.6	0.0	0.0	78	77	0	1	119	123	0	44	3,637	433,400	557	7.3		5,562
Analgesics and Anesthetics	1.0	0.2	0.1	0.7	34	19	5	11	33	98	45	15	36,882	1,218,363	3,354	43.7		35,602
Neuromuscular Agents	1.5	0.6	0.2	0.7	92	70	6	15	63	114	36	23	68,897	4,311,197	4,154	54.2		47,001
Nutritional Products	0.9	0.0	0.2	0.7	20	2	4	14	23	73	23	21	17,912	411,366	1,984	25.9		20,395
Hematological Agents	1.0	0.3	0.2	0.6	82	73	2	7	79	280	14	11	24,985	1,971,940	2,312	30.2		24,007
Topical Products	0.5	0.1	0.1	0.3	15	7	3	5	29	48	51	16	19,947	580,654	3,618	47.2		40,010
Miscellaneous Products	0.4	0.1	0.0	0.3	12	6	1	6	32	84	156	18	2,722	86,585	684	8.9		7,054
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	6	0	0	0	20	0	0	0	2,310	46,340	650	8.5		7,506
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.	571,643	38,500,323	n.a.	n.a.		n.a.

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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 5,950 beneficiaries who were in nursing facilities for part of their enrollment and their 59,791 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 Illinois, 0.8 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, ILLINOIS, 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	\$14,636,185	8,410	109.7 %	96,174	1.0	\$148	\$152
ANTICONVULSANT	3,823,374	4,442	57.9	50,587	1.0	74	76
ANTIDEPRESSANTS	2,182,697	4,202	54.8	45,858	0.8	60	48
ULCER DRUGS	2,004,148	3,661	47.8	39,279	0.7	77	51
ANTIVIRAL	1,555,699	551	7.2	6,051	0.7	383	257
ANTIDIABETIC	1,200,568	3,002	39.2	33,107	0.8	45	36
MISC. HEMATOLOGICAL	810,734	575	7.5	5,935	0.6	213	137
ANTIASTHMATIC	794,665	2,981	38.9	32,416	0.6	42	25
ANALGESICS - Narcotic	759,473	2,808	36.6	28,917	0.8	34	26
ANTIHYPERTENSIVE	737,739	2,768	36.1	29,232	0.8	34	25
Total	28,505,282	33,400		367,556	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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 5,950 beneficiaries who were in nursing facilities for part of their enrollment and their 59,791 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, ILLINOIS, 2002

Beneficiary Characteristics	All Top 10 Drug Groups						ANTIPSYCHOTICS						ANTICONVULSANT										
	No. of Rx	Rx \$	Users as %			Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	NF Residents	All-Year Residents	Users as %	No. of Users	No. of Bene Mos among Users	NF Residents	All-Year Residents	Users as %	No. of Users	No. of Bene Mos among Users	NF Residents	All-Year Residents	Mean Rx \$	Mean No. of Rx
			109.7 %	96,174	1.0																		
All	310,483	\$28,505,282	8,410	96,174	1.0	\$152	4,442	50,587	1.0	76													
Female	151,039	12,844,392	3,923	44,395	1.0	147	2,002	22,649	1.0	73													
Disabled	130,821	11,713,684	3,492	40,489	1.1	154	1,837	21,164	1.0	75													
64 or younger	115,635	10,567,303	3,081	35,741	1.1	158	1,653	19,102	1.0	78													
65-74	12,973	989,546	356	4,121	1.0	128	162	1,837	1.1	53													
75-84	2,064	147,910	51	579	0.9	118	19	198	1.2	53													
85 and older	149	8,925	4	48	0.7	94	3	27	0.6	14													
Other Eligibles	20,218	1,130,708	431	3,906	0.7	71	165	1,485	0.9	41													
64 or younger	145	7,472	6	27	1.5	106	5	23	0.4	26													
65-74	2,786	161,297	64	666	0.7	75	30	314	0.9	43													
75-84	9,213	518,097	195	1,812	0.7	72	81	743	0.9	41													
85 and older	8,074	443,842	166	1,401	0.6	68	49	405	0.9	41													
Male	159,444	15,660,890	4,487	51,779	1.0	157	2,440	27,938	1.0	78													
Disabled	150,969	15,117,390	4,316	50,039	1.0	159	2,370	27,211	1.0	78													
64 or younger	140,669	14,310,641	4,049	47,029	1.0	161	2,205	25,342	1.0	80													
65-74	8,887	697,171	235	2,635	1.0	127	153	1,725	1.0	55													
75-84	1,075	88,055	27	315	0.9	149	10	120	1.1	36													
85 and older	338	21,523	5	60	1.5	175	2	24	1.0	119													
Other Eligibles	8,475	543,500	171	1,740	0.8	96	70	727	1.0	50													
64 or younger	101	10,101	6	63	0.7	102	2	24	1.3	109													
65-74	2,228	144,349	40	408	0.7	104	26	255	1.0	44													
75-84	4,173	270,868	94	970	0.9	96	32	332	0.9	58													
85 and older	1,973	118,182	31	299	0.6	84	10	116	0.9	27													
Unknown	0	0	0	0	0.0	0	0	0	0.0	0													

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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 5,950 beneficiaries who were in nursing facilities for part of their enrollment and their 59,791 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, ILLINOIS, 2002

Beneficiary Characteristics	ANTIDEPRESSANTS						ULCER DRUGS						ANTIVIRAL						
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %			
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Mean No. of Rx	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Mean No. of Rx	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Mean No. of Rx	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	4,202	54.8 %	0.8	\$48	3,661	47.8 %	39,279	0.7	\$51	551	7.2 %	6,051	0.7	\$257					
Female	2,174	56.8	0.8	50	1,837	48.0	19,344	0.7	52	176	4.6	1,944	0.7	248					
Disabled	1,692	62.1	0.8	50	1,356	49.8	15,241	0.7	52	166	6.1	1,849	0.7	260					
64 or younger	1,532	66.3	0.8	51	1,165	50.4	13,131	0.7	52	157	6.8	1,747	0.7	269					
65-74	130	38.3	0.8	47	157	46.3	1,749	0.7	54	7	2.1	78	0.5	144					
75-84	28	43.8	0.9	49	29	45.3	320	0.6	50	2	3.1	24	0.2	6					
85 and older	2	18.2	0.9	55	5	45.5	41	0.9	35	0	0.0	0	0.0	0					
Other Eligibles	482	43.8	0.8	46	481	43.7	4,103	0.7	51	10	0.9	95	0.1	14					
64 or younger	4	44.4	1.2	77	3	33.3	26	0.7	49	0	0.0	0	0.0	0					
65-74	62	53.9	0.7	44	47	40.9	446	0.6	46	1	0.9	11	0.1	2					
75-84	209	48.5	0.8	49	205	47.6	1,780	0.7	52	5	1.2	52	0.1	17					
85 and older	207	38.0	0.8	44	226	41.5	1,851	0.7	51	4	0.7	32	0.2	14					
Male	2,028	52.8	0.8	45	1,824	47.5	19,935	0.7	50	375	9.8	4,107	0.7	261					
Disabled	1,863	53.3	0.8	46	1,631	46.6	18,002	0.7	50	372	10.6	4,077	0.7	263					
64 or younger	1,756	54.7	0.8	46	1,494	46.6	16,512	0.7	50	364	11.3	3,984	0.7	264					
65-74	95	38.5	0.7	47	117	47.4	1,269	0.6	53	8	3.2	93	0.7	230					
75-84	9	27.3	0.9	51	14	42.4	159	0.7	52	0	0.0	0	0.0	0					
85 and older	3	30.0	0.7	47	6	60.0	62	0.7	42	0	0.0	0	0.0	0					
Other Eligibles	165	48.0	0.7	43	193	56.1	1,933	0.7	51	3	0.9	30	0.1	10					
64 or younger	1	14.3	0.3	26	3	42.9	27	0.7	20	0	0.0	0	0.0	0					
65-74	37	46.3	0.7	40	46	57.5	460	0.6	50	2	2.5	18	0.2	10					
75-84	90	57.3	0.7	43	84	53.5	834	0.6	52	1	0.6	12	0.1	12					
85 and older	37	37.0	0.8	47	60	60.0	612	0.7	52	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					

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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 5,950 beneficiaries who were in nursing facilities for part of their enrollment and their 59,791 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, ILLINOIS, 2002

Beneficiary Characteristics	ANTIDIABETIC						MISC. HEMATOLOGICAL						ANTIASTHMATIC					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Mean No. of Rx	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Residents	NF	No. of Bene among Users	Mean No. of Rx	No. of Users	Residents	NF	No. of Bene among Users	Mean No. of Rx
All	3,002	33,107	0.8	\$36	575	0.6	5,935	\$137	2,981	38.9	32,416	0.6	\$25					
Female	1,645	17,867	0.8	38	285	0.7	2,742	63	1,616	42.2	17,301	0.6	25					
Disabled	1,336	15,062	0.8	39	172	0.6	1,875	64	1,262	46.3	14,180	0.6	25					
64 or younger	1,105	12,474	0.9	40	135	0.7	1,452	68	1,099	47.6	12,364	0.6	25					
65-74	206	2,295	0.8	34	32	0.5	363	44	129	38.1	1,455	0.6	25					
75-84	24	281	0.8	46	5	0.8	60	77	27	42.2	295	0.6	27					
85 and older	1	12	0.5	16	0	0.0	0	0	7	63.6	66	0.3	14					
Other Eligibles	309	2,805	0.8	32	113	0.7	867	61	354	32.2	3,121	0.6	24					
64 or younger	2	24	0.6	15	0	0.0	0	0	3	33.3	36	0.3	13					
65-74	50	457	0.8	34	8	0.8	42	74	50	43.5	448	0.7	22					
75-84	137	1,274	0.8	35	43	0.7	362	58	149	34.6	1,325	0.6	27					
85 and older	120	1,050	0.8	29	62	0.8	463	62	152	27.9	1,312	0.5	21					
Male	1,357	15,240	0.8	34	290	0.6	3,193	200	1,365	35.5	15,115	0.6	24					
Disabled	1,214	13,763	0.8	35	238	0.6	2,656	228	1,255	35.9	14,009	0.6	25					
64 or younger	1,093	12,389	0.8	34	206	0.6	2,297	254	1,119	34.9	12,493	0.6	25					
65-74	104	1,170	0.8	39	29	0.6	323	54	116	47.0	1,276	0.5	20					
75-84	10	120	0.6	37	3	1.0	36	111	17	51.5	204	0.7	42					
85 and older	7	84	0.8	24	0	0.0	0	0	3	30.0	36	0.3	9					
Other Eligibles	143	1,477	0.7	29	52	0.7	537	63	110	32.0	1,106	0.4	17					
64 or younger	0	0	0.0	0	0	0.0	0	0	1	14.3	12	0.1	9					
65-74	44	439	0.7	31	18	0.7	192	66	34	42.5	342	0.4	15					
75-84	71	768	0.7	30	16	0.7	165	64	36	22.9	406	0.5	22					
85 and older	28	270	0.7	25	18	0.7	180	60	39	39.0	346	0.3	15					
Unknown	0	0	0.0	0	0	0.0	0	0	0	0.0	0	0.0	0					

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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 5,950 beneficiaries who were in nursing facilities for part of their enrollment and their 59,791 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, ILLINOIS, 2002

Beneficiary Characteristics	ANALGESICS - Narcotic				ANTIHYPERTENSIVE				Mean Rx \$	Mean No. of Rx	Bene Mos among All-Year NF Residents	
	Users as %		Users as %		Users as %		Users as %					
	No. of Users	%	No. of Users	%	No. of Users	%	No. of Users	%				
All	2,808	36.6 %	28,917	0.8	\$26	2,768	36.1 %	29,232	0.8	\$25	7,667	81,032
Female	1,490	39.0	15,003	0.7	25	1,412	36.9	14,323	0.8	25	3,825	38,943
Disabled	1,057	38.8	11,558	0.8	27	897	32.9	10,109	0.8	26	2,725	30,510
64 or younger	940	40.7	10,288	0.8	28	717	31.0	8,087	0.7	26	2,311	25,900
65-74	103	30.4	1,116	0.4	14	150	44.2	1,681	0.8	25	339	3,820
75-84	13	20.3	142	0.8	23	27	42.2	305	0.8	29	64	677
85 and older	1	9.1	12	0.5	3	3	27.3	36	0.5	19	11	113
Other Eligibles	433	39.4	3,445	0.7	20	515	46.8	4,214	0.8	25	1,100	8,433
64 or younger	2	22.2	24	0.2	2	2	22.2	24	1.0	18	9	53
65-74	43	37.4	388	0.6	23	72	62.6	635	0.7	24	115	955
75-84	175	40.6	1,444	0.8	21	197	45.7	1,670	0.8	25	431	3,465
85 and older	213	39.1	1,589	0.6	19	244	44.8	1,885	0.8	25	545	3,960
Male	1,318	34.3	13,914	0.8	28	1,356	35.3	14,909	0.7	25	3,842	42,089
Disabled	1,199	34.3	12,732	0.8	28	1,181	33.8	13,145	0.7	25	3,498	38,786
64 or younger	1,130	35.2	11,951	0.9	29	1,048	32.7	11,624	0.7	25	3,208	35,528
65-74	65	26.3	733	0.4	14	108	43.7	1,221	0.7	25	247	2,763
75-84	2	6.1	24	0.4	11	20	60.6	240	0.8	26	33	387
85 and older	2	20.0	24	1.4	21	5	50.0	60	0.7	16	10	108
Other Eligibles	119	34.6	1,182	0.6	22	175	50.9	1,764	0.8	26	344	3,303
64 or younger	1	14.3	1	1.0	10	2	28.6	4	1.0	30	7	37
65-74	33	41.3	320	0.8	31	39	48.8	406	0.8	26	80	777
75-84	58	36.9	585	0.5	16	84	53.5	840	0.8	29	157	1,500
85 and older	27	27.0	276	0.5	23	50	50.0	514	0.7	21	100	989
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 Illinois, released by CMS in 05/2006. 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 5,950 beneficiaries who were in nursing facilities for part of their enrollment and their 59,791 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 ND10D

Nondual Beneficiaries

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

Beneficiary Characteristics	No. of Benes with at Least One Part D Excl Rx	% Benes with at Least One Part D Excl Rx	No. of Part D Excl Rx per Bene	Total No. Part D Excl Rx	Part D Excl Rx \$ per Bene	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx \$ as % of All Nondual Rx \$	Total No. of Benes
All	474,962	29.9 %	1.4	2,161,770	\$16	\$24,929,987	\$12	4.1 %	1,589,779
Age									
5 and younger	160,829	36.9	1.2	511,598	10	4,209,699	8	8.1	435,809
6-14	99,208	21.8	0.5	240,966	6	2,634,609	11	3.1	455,771
15-20	40,162	19.9	0.5	107,947	6	1,274,048	12	2.7	201,916
21-44	109,467	29.3	1.4	513,069	19	7,083,362	14	3.6	373,814
45-64	55,181	53.7	6.4	653,589	82	8,405,046	13	4.2	102,846
65-74	6,273	53.9	7.0	81,740	67	780,083	10	4.2	11,648
75-84	2,508	45.1	6.2	34,336	63	352,186	10	4.9	5,566
85 and older	1,320	56.3	7.9	18,482	81	190,707	10	6.9	2,346
Unknown	14	22.2	0.7	43	4	247	6	9.7	63
Basis of Eligibility^c									
Aged	5,910	43.5	5.2	69,957	49	665,214	10	4.5	13,583
Disabled	89,208	50.9	5.7	996,652	79	13,870,838	14	4.0	175,334
Adults	95,362	26.6	0.8	300,098	9	3,373,427	11	3.5	358,433
Children	284,369	27.3	0.8	794,528	7	7,011,232	9	4.7	1,042,131
Unknown	113	37.9	1.8	535	31	9,276	17	1.9	298
Gender									
Female	293,936	31.3	1.4	1,338,351	16	15,132,453	11	4.3	938,465
Male	181,026	27.8	1.3	823,419	15	9,797,534	12	3.8	651,314
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	137,076	23.9	1.3	737,162	18	10,150,210	14	3.3	572,656
African American	193,357	31.8	1.4	874,984	16	9,905,638	11	4.7	608,220
Other/unknown	144,529	35.3	1.3	549,624	12	4,874,139	9	5.4	408,903
Use of Nursing Facilities^d									
Entire year	6,783	88.5	20.5	157,121	252	1,935,719	12	5.0	7,667
Part year	5,264	88.5	15.0	89,518	253	1,503,672	17	6.5	5,950
None	462,915	29.4	1.2	1,915,131	14	21,490,596	11	3.9	1,576,162
Maintenance Assistance Status									
Cash	109,610	48.6	4.2	945,610	55	12,298,400	13	4.1	225,544
Medically needy	73,102	25.8	1.2	340,039	15	4,385,295	13	3.8	283,525
Poverty related	249,770	27.0	0.8	706,704	7	6,313,193	9	4.8	926,653
Other/unknown	42,480	27.6	1.1	169,417	13	1,933,099	11	3.2	154,057

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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}
 ILLINOIS, 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	0.2	\$2	\$12	\$0	\$0	14,388,649
Age						
5 and younger	0.1	1	8	0	0	3,846,004
6-14	0.1	1	11	0	0	4,478,771
15-20	0.1	1	12	0	0	1,843,207
21-44	0.2	2	14	0	1	3,046,224
45-64	0.7	8	13	0	3	995,357
65-74	0.7	7	10	0	1	113,249
75-84	0.7	7	10	0	1	48,310
85 and older	1.1	11	10	0	2	17,147
Unknown	0.1	1	6	0	0	380
Basis of Eligibility^c						
Aged	0.6	6	10	0	1	112,342
Disabled	0.5	8	14	0	2	1,844,977
Adults	0.1	1	11	0	0	2,742,919
Children	0.1	1	9	0	0	9,686,069
Unknown	0.2	4	17	0	2	2,342
Gender						
Female	0.2	2	11	0	0	8,356,341
Male	0.1	2	12	0	0	6,032,308
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	2	14	0	1	5,203,062
African American	0.2	2	11	0	0	5,707,821
Other/unknown	0.2	1	9	0	0	3,477,766
Use of Nursing Facilities^d						
Entire year	1.9	24	12	0	7	81,032
Part year	1.5	25	17	0	6	59,791
None	0.1	2	11	0	0	14,247,826
Maintenance Assistance Status						
Cash	0.4	5	13	0	2	2,399,717
Medically needy	0.2	2	13	0	1	2,186,378
Poverty related	0.1	1	9	0	0	8,370,400
Other/unknown	0.1	1	11	0	0	1,432,154

Table ND12

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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}
ILLINOIS, 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	606,154	\$41	\$24,929,987	100.0 %	2,161,770	\$12	100.0 %
Anorexia or weight loss/gain	13	271	3,519	0.0	39	90	0.0
Fertility drugs	19	268	5,095	0.0	62	82	0.0
Drugs for cosmetic purposes	173	15	2,536	0.0	253	10	0.0
Cough and cold medications	105,823	33	3,491,742	14.0	165,481	21	7.7
Vitamins and minerals	23,411	108	2,532,024	10.2	145,772	17	6.7
Non-prescription drugs	406,893	26	10,754,665	43.1	1,482,604	7	68.6
Barbiturates	4,197	58	242,216	1.0	35,094	7	1.6
Benzodiazepines	46,941	121	5,675,293	22.8	278,319	20	12.9
Other Part D Excl Rx Drugs	18,684	119	2,222,897	8.9	54,146	41	2.5

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

Beneficiary Characteristics	No. of Benefes					No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	1,697,149	13,586	175,344	376,674	1,131,247	298	16,030,268	112,377	1,848,562	3,025,088	11,041,899	2,342
Age												
5 and younger	465,530	0	3,000	31	462,499	0	4,347,528	0	33,038	169	4,314,321	0
6-14	501,916	0	14,638	95	487,183	0	5,152,519	0	163,792	409	4,988,318	0
15-20	215,730	0	13,944	25,647	176,139	0	2,038,049	0	147,798	184,689	1,705,562	0
21-44	390,281	2	61,401	323,861	4,923	94	3,301,156	21	646,095	2,623,646	30,641	753
45-64	104,064	50	76,367	27,000	445	202	1,011,841	118	791,574	215,908	2,667	1,574
65-74	11,648	6,162	5,453	31	0	2	113,251	52,417	60,597	222	0	15
75-84	5,568	5,080	488	0	0	0	48,335	43,156	5,179	0	0	0
85 and older	2,347	2,292	53	2	0	0	17,166	16,665	489	12	0	0
Unknown	65	0	0	7	58	0	423	0	0	33	390	0
Gender												
Female	1,001,459	9,460	91,210	333,784	566,707	298	9,325,473	76,043	980,400	2,725,390	5,541,298	2,342
Male	695,690	4,126	84,134	42,890	564,540	0	6,704,795	36,334	868,162	299,698	5,500,601	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	577,847	5,751	64,262	145,188	362,408	238	5,285,335	46,332	665,447	1,139,722	3,431,948	1,886
African American	692,390	1,804	91,433	136,260	462,847	46	6,979,359	13,859	977,191	1,240,921	4,747,051	337
Other/unknown	426,912	6,031	19,649	95,226	305,992	14	3,765,574	52,186	205,924	644,445	2,862,900	119
Use of Nursing Facilities^c												
Entire year	7,667	1,431	6,223	9	4	0	81,032	11,673	69,296	32	31	0
Part year	5,950	882	4,928	125	15	0	59,805	7,030	51,444	1,181	150	0
None	1,683,532	11,273	164,193	376,540	1,131,228	298	15,889,431	93,674	1,727,822	3,023,875	11,041,718	2,342
Maintenance Assistance Status												
Cash	248,902	4,860	131,039	19,397	93,606	0	2,753,280	54,060	1,482,581	206,523	1,010,116	0
Medically needy	295,409	6,302	29,626	256,355	3,126	0	2,365,615	43,853	231,806	2,081,087	8,869	0
Poverty related	992,065	852	8,491	55,450	926,974	298	9,374,656	7,193	82,444	305,265	8,977,412	2,342
Other/unknown	160,773	1,572	6,188	45,472	107,541	0	1,536,717	7,271	51,731	432,213	1,045,502	0
Managed Care Status												
FFS all year	1,490,379	13,582	174,570	338,195	963,734	298	13,800,708	112,337	1,839,926	2,623,537	9,222,566	2,342
FFS part year, with Rx claims	52,403	1	468	13,428	38,506	0	590,701	12	5,327	148,438	436,924	0
FFS part year, no Rx claims	46,997	0	296	6,810	39,891	0	506,370	0	3,205	69,212	433,953	0
MC all year, with Rx claims	171	0	2	67	102	0	1,521	0	20	444	1,057	0
MC all year, no Rx claims	107,199	3	8	18,174	89,014	0	1,130,968	28	84	183,457	947,399	0

Source: Data for this table are from the MAX 2002 file for Illinois, released by CMS in 05/2006. 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, ILLINOIS, 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	1,697,149	16,030,268	1,589,779	14,388,649	0	1,641,619
FFS all year	1,490,379	13,800,708	1,490,379	13,800,708	0	0
FFS part year, with Rx claims	52,403	590,701	52,403	365,474	0	225,227
FFS part year, with no Rx claims	46,997	506,370	46,997	222,467	0	283,903
MC all year, with Rx claims	171	1,521	0	0	0	1,521
MC all year, with no Rx claims	107,199	1,130,968	0	0	0	1,130,968

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