

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

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

Beneficiary Characteristics	No. of Benes							No. of Bene Mos					Other/Unknown
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Other/Unknown	
All	292,546	957	51,174	80,838	159,467	110	1,558,627	4,708	530,201	309,206	714,174	338	
Age													
5 and younger	64,369	0	2,894	31	61,444	0	300,733	0	28,426	151	272,156	0	
6-14	72,765	0	8,353	51	64,361	0	379,408	0	90,471	268	288,669	0	
15-20	45,838	0	5,591	8,023	32,211	13	241,981	0	59,602	32,968	149,379	32	
21-44	85,508	0	17,096	66,898	1,442	72	432,097	0	174,894	253,058	3,931	214	
45-64	22,969	0	17,131	5,812	1	25	198,787	0	176,043	22,651	1	92	
65-74	666	547	102	17	0	0	3,311	2,501	719	91	0	0	
75-84	263	253	7	3	0	0	1,360	1,307	46	7	0	0	
85 and older	157	157	0	0	0	0	900	900	0	0	0	0	
Unknown	11	0	0	3	8	0	50	0	0	12	38	0	
Gender													
Female	165,656	589	25,499	61,860	77,598	110	857,476	2,920	267,715	241,528	344,975	338	
Male	126,890	368	25,675	18,978	81,869	0	701,151	1,788	262,486	67,678	369,199	0	
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	
Race													
White	164,546	401	32,595	48,687	82,810	53	898,171	2,240	340,210	182,445	373,075	201	
African American	53,971	246	8,764	14,414	30,541	6	256,021	1,170	86,933	48,278	119,617	23	
Other/unknown	74,029	310	9,815	17,737	46,116	51	404,435	1,298	103,058	78,483	221,482	114	
Use of Nursing Facilities^c													
Entire year	869	96	656	20	97	0	7,615	571	6,753	35	256	0	
Part year	2,972	94	1,627	537	714	0	24,240	545	15,849	2,992	4,854	0	
None	288,705	767	48,891	80,281	158,656	110	1,526,772	3,592	507,599	306,179	709,064	338	
Maintenance Assistance Status													
Cash	122,976	375	38,387	33,068	51,146	0	785,070	1,847	411,510	134,756	236,957	0	
Medically needy	12,642	168	1,700	7,003	3,771	0	59,416	1,032	14,057	27,595	16,732	0	
Poverty-related	23,220	2	166	2,681	20,261	110	101,752	13	1,119	9,122	91,160	338	
Other/unknown	133,708	412	10,921	38,086	84,289	0	612,389	1,816	103,515	137,733	369,325	0	
Managed Care Status													
FFS all year	135,654	444	46,801	29,670	58,639	100	1,089,609	2,974	504,832	165,264	416,228	311	
FFS part year, with Rx claims	48,532	336	3,546	20,293	24,355	2	185,020	1,240	21,724	66,062	95,990	4	
FFS part year, no Rx claims	108,360	177	827	30,875	76,473	8	283,998	494	3,645	77,880	201,956	23	

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

- a. Table 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, MINNESOTA, 2002

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	No. of Benes
All	43.1 %	6.3	\$454	\$72	\$5,459	8.3 %	292,546
Age							
5 and younger	33.5	1.5	101	68	3,159	3.2	64,369
6-14	33.2	2.9	213	72	4,006	5.3	72,765
15-20	41.3	4.0	320	79	5,400	5.9	45,838
21-44	50.1	7.3	565	78	6,520	8.7	85,508
45-64	77.8	30.9	2,059	67	12,408	16.6	22,969
65-74	63.1	9.8	526	54	9,471	5.6	666
75-84	61.6	15.3	709	46	12,290	5.8	263
85 and older	76.4	23.9	821	34	16,509	5.0	157
Unknown	54.5	2.3	198	87	3,037	6.5	11
Basis of Eligibility^c							
Aged	63.7	12.9	588	46	10,769	5.5	957
Disabled	83.2	27.3	2,113	77	20,000	10.6	51,174
Adults	42.2	2.4	133	56	2,306	5.8	80,838
Children	30.5	1.5	84	57	2,361	3.6	159,467
Unknown	39.1	2.4	129	55	3,252	4.0	110
Gender							
Female	45.0	6.6	434	65	4,865	8.9	165,656
Male	40.5	5.8	480	82	6,234	7.7	126,890
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	47.4	8.1	583	72	6,451	9.0	164,546
African American	34.8	4.1	280	69	4,437	6.3	53,971
Other/unknown	39.6	4.0	296	75	3,999	7.4	74,029
Use of Nursing Facilities^d							
Entire year	90.8	69.8	4,478	64	49,685	9.0	869
Part year	85.5	34.0	2,310	68	30,494	7.6	2,972
None	42.5	5.8	423	73	5,068	8.3	288,705
Maintenance Assistance Status							
Cash	51.7	10.4	772	74	7,807	9.9	122,976
Medically needy	42.8	6.2	386	62	5,054	7.6	12,642
Poverty related	29.6	1.2	55	45	1,844	3.0	23,220
Other/unknown	37.5	3.4	238	70	3,966	6.0	133,708

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

- a. Table 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, MINNESOTA, 2002

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:					Mean \$, All Services	Benes	Bene Mos	
				56.9 % None	28.6 % More than 0, 1, but 2 or Less	5.5 % More than 1, but 2 or Less	5.9 % More than 2, but 5 or Less	2.4 % More than 5, but 10 or Less				0.6 % More than 10
All	1.2	\$85	8.3 %	56.9 %	28.6 %	5.5 %	5.9 %	2.4 %	0.6 %	\$1,025	292,546	1,558,627
Age												
5 and younger	0.3	22	3.2	66.5	29.9	2.3	1.1	0.1	0.0	676	64,369	300,733
6-14	0.6	41	5.3	66.8	25.5	4.0	3.3	0.4	0.0	768	72,765	379,408
15-20	0.8	61	5.9	58.7	30.2	5.6	4.6	0.8	0.1	1,023	45,838	241,981
21-44	1.4	112	8.7	49.9	30.7	7.6	8.1	3.0	0.7	1,290	85,508	432,097
45-64	3.6	238	16.6	22.2	24.6	11.4	21.5	15.2	5.2	1,434	22,969	198,787
65-74	2.0	106	5.6	36.9	29.0	11.6	12.5	8.6	1.5	1,905	666	3,311
75-84	3.0	137	5.8	38.4	18.6	9.5	17.5	11.4	4.6	2,377	263	1,360
85 and older	4.2	143	5.0	23.6	13.4	10.2	21.7	25.5	5.7	2,880	157	900
Unknown	0.5	44	6.5	45.5	45.5	9.1	0.0	0.0	0.0	668	11	50
Basis of Eligibility^c												
Aged	2.6	120	5.5	36.3	23.8	10.8	15.0	11.0	3.1	2,189	957	4,708
Disabled	2.6	204	10.6	16.8	34.3	12.9	21.3	11.4	3.3	1,930	51,174	530,201
Adults	0.6	35	5.8	57.8	30.6	6.1	4.5	1.0	0.2	603	80,838	309,206
Children	0.3	19	3.6	69.5	25.9	2.9	1.6	0.1	0.0	527	159,467	714,174
Unknown	0.8	42	4.0	60.9	26.4	5.5	5.5	1.8	0.0	1,058	110	338
Gender												
Female	1.3	84	8.9	55.0	29.9	5.7	6.0	2.6	0.8	940	165,656	857,476
Male	1.1	87	7.7	59.5	27.0	5.3	5.7	2.0	0.4	1,128	126,890	701,151
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.5	107	9.0	52.6	29.2	6.5	7.5	3.2	0.9	1,182	164,546	898,171
African American	0.9	59	6.3	65.2	24.7	4.4	4.0	1.4	0.4	935	53,971	256,021
Other/unknown	0.7	54	7.4	60.4	30.2	4.2	3.7	1.2	0.2	732	74,029	404,435
Use of Nursing Facilities^d												
Entire year	8.0	511	9.0	9.2	6.4	5.2	21.2	34.8	23.2	5,670	869	7,615
Part year	4.2	283	7.6	14.5	30.5	12.0	17.8	16.7	8.5	3,739	2,972	24,240
None	1.1	80	8.3	57.5	28.7	5.5	5.7	2.1	0.5	958	288,705	1,526,772
Maintenance Assistance Status												
Cash	1.6	121	9.9	48.3	31.2	6.7	8.5	4.1	1.2	1,223	122,976	785,070
Medically needy	1.3	82	7.6	57.2	26.3	6.0	6.6	3.0	0.9	1,075	12,642	59,416
Poverty related	0.3	13	3.0	70.4	25.8	2.3	1.2	0.2	0.0	421	23,220	101,752
Other/unknown	0.7	52	6.0	62.5	27.0	5.0	4.2	1.1	0.2	866	133,708	612,389

Table ND4

Nondual Beneficiaries

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

- a. Table 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, MINNESOTA, 2002

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs				
	No. of Rx	Rx \$	No. of Rx	\$ per Rx	No. of Rx	Rx \$	No. of Rx	Rx \$			
All	1.2	\$85	\$72	0.5	\$123	0.1	\$7	\$68	0.6	\$14	\$25
Age											
5 and younger	0.3	22	68	0.1	130	0.0	1	47	0.2	4	22
6-14	0.6	41	72	0.3	110	0.1	4	69	0.2	6	25
15-20	0.8	61	79	0.4	124	0.1	5	71	0.3	8	25
21-44	1.4	112	78	0.6	134	0.1	9	75	0.7	18	26
45-64	3.6	238	67	1.5	116	0.3	19	64	1.7	41	24
65-74	2.0	106	54	0.8	88	0.2	15	74	1.0	19	19
75-84	3.0	137	46	1.2	85	0.2	9	38	1.5	27	18
85 and older	4.2	143	34	1.5	67	0.5	15	28	2.1	27	13
Unknown	0.5	44	87	0.1	102	0.1	20	144	0.3	13	51
Basis of Eligibility^d											
Aged	2.6	120	46	1.0	81	0.3	14	51	1.3	21	16
Disabled	2.6	204	77	1.2	133	0.2	15	68	1.2	30	24
Adults	0.6	35	56	0.2	93	0.1	4	73	0.3	10	28
Children	0.3	19	57	0.2	85	0.0	2	66	0.1	4	25
Unknown	0.8	42	55	0.3	99	0.0	3	83	0.4	8	19
Gender											
Female	1.3	84	65	0.6	110	0.1	7	66	0.6	15	24
Male	1.1	87	82	0.5	141	0.1	6	71	0.5	12	25
Unknown	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0
Race											
White	1.5	107	72	0.7	122	0.1	8	65	0.7	15	23
African American	0.9	59	69	0.4	131	0.1	4	62	0.4	9	20
Other/unknown	0.7	54	75	0.3	120	0.1	6	84	0.4	13	37
Use of Nursing Facilities^e											
Entire year	8.0	511	64	3.2	376	0.7	40	58	4.1	94	23
Part year	4.2	283	68	1.7	217	0.3	18	57	2.1	48	23
None	1.1	80	73	0.5	123	0.1	6	69	0.5	13	25
Maintenance Assistance Status											
Cash	1.6	121	74	0.7	91	0.1	10	72	0.8	20	26
Medically needy	1.3	82	62	0.6	108	0.1	7	58	0.6	13	21
Poverty related	0.3	13	45	0.1	71	0.0	1	55	0.1	3	19
Other/unknown	0.7	52	70	0.4	118	0.1	4	60	0.3	7	22

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

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

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

TABLE ND.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, MINNESOTA, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users							
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	No.	As % of All Benes	No. of Bene Mos				
														Generic	Brand-Name	Generic	Brand-Name
Anti-infective Agents	0.3	0.1	0.0	0.2	\$18	\$13	\$2	\$3	\$62	\$107	\$90	\$22	175,234	69,407	23.7 %	593,093	
Biologicals	0.2	0.2	0.0	0.0	187	144	10	34	857	903	844	708	2,055	953	0.3	9,404	
Antineoplastic Agents	0.6	0.3	0.0	0.2	193	175	3	15	321	540	92	62	5,579	967	0.3	9,275	
Endocrine/Metabolic Drugs	0.6	0.3	0.1	0.2	33	24	5	5	56	86	40	23	146,241	27,725	9.5	244,442	
Cardiovascular Agents	1.1	0.3	0.1	0.6	42	27	5	10	39	77	44	16	197,942	19,397	6.6	185,923	
Respiratory Agents	0.6	0.3	0.1	0.2	33	24	4	5	57	76	77	24	167,296	33,155	11.3	294,638	
Gastrointestinal Agents	0.6	0.3	0.0	0.2	47	39	3	5	84	117	179	26	107,140	19,914	6.8	190,238	
Genitourinary Agents	0.3	0.2	0.0	0.1	16	13	0	2	46	63	39	19	23,667	7,672	2.6	68,238	
CNS Drugs	1.1	0.6	0.0	0.4	105	86	5	14	95	138	110	32	406,807	40,988	14.0	369,944	
Stimulants/Anti-obesity/Anorexia	0.7	0.3	0.1	0.2	41	25	8	9	62	75	61	43	60,712	10,461	3.6	92,033	
Miscellaneous Psychological/Neurological Agents	0.3	0.2	0.0	0.1	32	23	0	9	126	150	0	89	6,793	2,843	1.0	26,677	
Analgesics and Anesthetics	0.6	0.1	0.0	0.4	29	17	3	9	51	140	79	22	205,928	41,362	14.1	360,674	
Neuromuscular Agents	0.9	0.5	0.1	0.3	72	59	4	8	80	123	62	24	179,526	20,180	6.9	199,171	
Nutritional Products	0.4	0.0	0.0	0.3	8	1	1	7	23	29	24	23	27,875	10,289	3.5	78,972	
Hematological Agents	0.6	0.2	0.1	0.4	253	243	3	7	393	1,512	34	18	23,380	3,828	1.3	36,351	
Topical Products	0.3	0.1	0.0	0.2	10	5	1	3	35	57	55	20	94,018	37,268	12.7	342,220	
Miscellaneous Products	0.7	0.2	0.1	0.4	131	88	26	17	190	375	258	47	7,415	1,079	0.4	10,709	
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	8	0	0	0	38	0	0	0	3,835	2,023	0.7	19,148	
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.	1,841,443	n.a.	n.a.	n.a.	132,906,276

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

- a. Table 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 Minnesota, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, MINNESOTA, 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	\$21,934,374	17,672	6.0 %	181,119	0.7	\$176	\$121
ANTIDEPRESSANTS	13,989,062	43,654	14.9	401,880	0.5	65	35
ANTICONVULSANT	12,955,066	17,748	6.1	182,676	0.8	94	71
MISC. HEMATOLOGICAL	7,625,490	851	0.3	8,368	0.5	1,661	911
ULCER DRUGS	6,793,690	19,168	6.6	187,278	0.4	83	36
ANALGESICS - Narcotic	5,683,098	41,396	14.2	378,402	0.3	45	15
ANTIASTHMATIC	5,289,047	30,294	10.4	275,259	0.4	54	19
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	3,775,340	11,493	3.9	103,329	0.6	62	37
ANTIDIABETIC	3,624,141	9,671	3.3	91,565	0.7	60	40
ANTIVIRAL	3,431,640	3,081	1.1	28,679	0.3	352	120
Total	85,100,948	195,028		1,838,555	n.a.	n.a.	n.a.

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

a. Table 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, MINNESOTA, 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	916,585	\$85,100,948	17,672	6.0 %	181,119	0.7	\$121	43,654	14.9 %	401,880	0.5	\$35					
Female	520,603	42,327,719	9,161	5.5	93,277	0.6	110	28,373	17.1	255,894	0.5	35					
Disabled	408,284	35,203,879	7,166	28.1	78,292	0.7	121	16,014	62.8	174,169	0.6	39					
5 and younger	4,464	280,269	13	1.2	120	0.4	30	21	1.9	226	0.3	12					
6-14	20,502	1,343,049	300	10.7	3,356	0.5	66	552	19.8	6,213	0.5	22					
15-20	20,127	1,530,044	477	22.2	5,323	0.6	78	833	38.7	9,263	0.5	30					
21-44	150,129	14,276,779	3,282	35.8	35,128	0.7	123	6,841	74.6	73,599	0.5	40					
45-64	212,684	17,747,955	3,090	30.3	34,331	0.7	132	7,747	75.9	84,731	0.6	41					
65-74	375	25,747	4	7.0	34	1.2	179	20	35.1	137	0.5	30					
75-84	3	36	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	112,317	7,123,553	1,995	1.4	14,985	0.4	51	12,358	8.8	81,722	0.4	27					
5 and younger	4,353	198,252	18	0.1	147	0.2	44	27	0.1	266	0.3	5					
6-14	19,170	1,182,732	350	1.1	3,287	0.6	67	1,244	3.9	10,727	0.5	24					
15-20	22,606	1,439,847	565	2.5	4,820	0.5	57	2,660	11.6	21,012	0.4	26					
21-44	55,043	3,507,859	915	1.8	5,843	0.3	37	7,406	14.4	43,413	0.4	28					
45-64	8,131	609,815	98	2.9	600	0.4	51	850	24.9	5,102	0.5	31					
65-74	927	61,234	12	3.7	84	0.6	73	57	17.5	415	0.4	26					
75-84	1,192	78,132	17	11.0	87	0.8	55	56	36.1	389	0.8	37					
85 and older	895	45,682	20	16.9	117	0.6	46	58	49.2	398	0.7	30					
Male	395,982	42,773,229	8,511	6.7	87,842	0.7	133	15,281	12.0	145,986	0.6	34					
Disabled	310,297	36,640,345	6,757	26.3	72,888	0.8	141	9,841	38.3	104,773	0.6	36					
5 and younger	6,922	1,863,541	45	2.5	493	0.5	49	72	4.1	757	0.4	10					
6-14	47,299	5,249,741	993	17.9	11,093	0.6	80	1,472	26.5	16,486	0.5	24					
15-20	35,261	5,511,044	938	27.3	10,538	0.7	104	1,256	36.5	14,080	0.6	33					
21-44	111,696	14,233,289	3,125	39.4	32,847	0.8	170	3,631	45.8	37,442	0.6	43					
45-64	108,740	9,756,973	1,648	23.8	17,855	0.8	152	3,393	49.0	35,892	0.6	37					
65-74	364	22,814	8	17.8	62	0.8	75	17	37.8	116	0.7	32					
75-84	15	2,943	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	85,677	6,132,202	1,753	1.7	14,945	0.6	92	5,440	5.4	41,213	0.5	29					
5 and younger	6,947	362,311	26	0.1	192	0.5	62	51	0.2	464	0.3	14					
6-14	35,986	2,639,123	724	2.2	6,788	0.6	99	1,854	5.7	16,058	0.5	27					
15-20	24,696	1,817,013	715	4.1	6,282	0.6	92	1,959	11.3	16,047	0.5	31					
21-44	12,891	955,751	237	1.4	1,299	0.4	73	1,266	7.4	6,783	0.4	28					
45-64	3,857	281,088	22	0.9	128	0.4	64	257	10.6	1,431	0.5	32					
65-74	748	48,140	9	3.8	93	0.5	92	28	11.7	234	0.6	30					
75-84	270	12,669	8	7.9	66	0.7	48	13	12.9	112	0.6	17					
85 and older	282	16,107	12	30.8	97	0.7	57	12	30.8	84	0.8	47					
Unknown	10	969	1	9.1	9	0.2	18	1	9.1	3	0.7	96					

Table ND7A

Nondual Beneficiaries

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

a. Table 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, MINNESOTA, 2002

Beneficiary Characteristics	ANTICONVULSANT					MISC. HEMATOLOGICAL					ULCER DRUGS				
	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	17,748	6.1 %	182,676	0.8	\$71	851	0.3 %	8,368	0.5	\$911	19,168	6.6 %	187,278	0.4	\$36
Female	9,702	5.9	98,891	0.7	68	430	0.3	4,286	0.5	47	12,244	7.4	119,319	0.4	36
Disabled	7,666	30.1	84,798	0.8	72	374	1.5	3,951	0.5	47	8,424	33.0	93,007	0.5	40
5 and younger	198	17.7	2,227	0.7	52	1	0.1	12	0.6	3	199	17.8	2,130	0.5	30
6-14	736	26.4	8,500	0.7	55	4	0.1	38	0.5	21	306	11.0	3,557	0.5	34
15-20	646	30.0	7,326	0.8	71	6	0.3	72	0.7	109	307	14.3	3,478	0.4	28
21-44	3,209	35.0	35,064	0.8	84	55	0.6	565	0.4	36	2,818	30.7	30,903	0.4	36
45-64	2,873	28.1	31,659	0.7	64	307	3.0	3,257	0.5	48	4,775	46.8	52,786	0.5	44
65-74	4	7.0	22	0.8	41	1	1.8	7	0.1	7	18	31.6	141	0.5	50
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	12	0.3	3
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	2,036	1.5	14,093	0.5	47	56	0.0	335	0.5	48	3,820	2.7	26,312	0.3	21
5 and younger	66	0.2	438	0.5	31	0	0.0	0	0.0	0	292	1.0	1,990	0.3	11
6-14	274	0.9	2,372	0.5	43	0	0.0	0	0.0	0	219	0.7	1,972	0.2	13
15-20	419	1.8	3,621	0.5	45	2	0.0	17	0.2	39	657	2.9	5,259	0.2	13
21-44	1,085	2.1	6,327	0.5	50	18	0.0	101	0.4	44	2,147	4.2	13,094	0.3	22
45-64	151	4.4	1,034	0.4	46	23	0.7	133	0.5	44	362	10.6	2,475	0.4	33
65-74	12	3.7	88	0.9	67	4	1.2	20	0.5	44	74	22.8	449	0.3	37
75-84	15	9.7	112	1.0	41	5	3.2	33	0.7	57	35	22.6	257	0.7	59
85 and older	14	11.9	101	0.8	65	4	3.4	31	0.7	73	34	28.8	216	0.7	45
Male	8,046	6.3	83,785	0.8	74	421	0.3	4,082	0.6	1,819	6,924	5.5	67,959	0.5	37
Disabled	6,611	25.7	72,507	0.8	79	361	1.4	3,720	0.6	1,953	5,209	20.3	56,600	0.5	40
5 and younger	230	13.0	2,565	0.6	45	4	0.2	48	2.5	30,393	282	15.9	3,135	0.4	25
6-14	1,165	20.9	13,246	0.7	53	25	0.4	299	0.9	6,641	477	8.6	5,518	0.4	27
15-20	916	26.6	10,545	0.8	73	10	0.3	101	2.5	25,347	336	9.8	3,827	0.5	34
21-44	2,754	34.7	29,823	0.9	102	40	0.5	390	0.8	2,791	1,761	22.2	18,961	0.5	42
45-64	1,539	22.2	16,276	0.8	66	279	4.0	2,848	0.5	60	2,342	33.9	25,079	0.5	44
65-74	7	15.6	52	0.8	46	3	6.7	34	0.3	33	11	24.4	80	0.5	48
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	1,435	1.4	11,278	0.6	47	60	0.1	362	0.4	446	1,715	1.7	11,359	0.3	24
5 and younger	80	0.3	588	0.5	39	2	0.0	8	0.6	1,674	372	1.2	2,462	0.3	13
6-14	515	1.6	4,573	0.6	44	1	0.0	12	1.0	8,189	189	0.6	1,653	0.3	19
15-20	461	2.7	4,027	0.6	49	1	0.0	12	1.1	11	297	1.7	2,246	0.3	21
21-44	296	1.7	1,586	0.5	54	25	0.1	129	0.3	335	591	3.5	3,337	0.3	31
45-64	65	2.7	392	0.5	46	23	0.9	149	0.4	34	196	8.1	1,210	0.4	35
65-74	12	5.0	64	1.2	61	6	2.5	37	0.5	24	47	19.7	293	0.5	40
75-84	2	2.0	13	0.3	10	1	1.0	12	0.3	28	15	14.9	96	0.4	24
85 and older	4	10.3	35	0.9	56	1	2.6	3	0.7	74	8	20.5	62	0.7	41
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 Minnesota, 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, MINNESOTA, 2002

Beneficiary Characteristics	ANALGESICS - Narcotic				ANTI-ASTHMATIC				STIMULANTS/ANTI-OBESITY/ANOREXIANTS						
	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	41,396	14.2 %	378,402	0.3	\$15	30,294	10.4 %	275,259	0.4	\$19	11,493	3.9 %	103,329	0.6	\$37
Female	28,007	16.9	255,524	0.3	14	17,461	10.5	159,050	0.3	19	3,834	2.3	34,545	0.5	36
Disabled	14,190	55.6	156,869	0.4	17	9,287	36.4	102,391	0.4	22	1,581	6.2	17,299	0.6	39
5 and younger	93	8.3	1,081	0.1	1	430	38.5	4,640	0.3	17	29	2.6	289	0.5	21
6-14	306	11.0	3,537	0.1	2	746	26.7	8,490	0.3	18	555	19.9	6,184	0.6	32
15-20	497	23.1	5,619	0.1	2	486	22.6	5,433	0.3	13	224	10.4	2,518	0.6	37
21-44	6,018	65.6	66,534	0.3	15	3,044	33.2	33,291	0.3	19	440	4.8	4,750	0.5	41
45-64	7,255	71.0	79,923	0.4	20	4,564	44.7	50,401	0.5	27	332	3.3	3,556	0.5	49
65-74	21	36.8	175	0.2	4	17	29.8	136	0.2	9	1	1.8	2	0.5	4
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	13,817	9.9	98,655	0.3	10	8,174	5.8	56,659	0.3	13	2,253	1.6	17,246	0.5	33
5 and younger	232	0.8	1,947	0.1	3	1,741	5.8	13,482	0.2	10	76	0.3	534	0.4	21
6-14	550	1.7	4,615	0.1	5	1,578	5.0	11,537	0.3	14	1,321	4.2	10,412	0.6	33
15-20	2,367	10.3	17,925	0.2	5	1,323	5.8	9,962	0.2	12	442	1.9	3,811	0.5	33
21-44	9,782	19.0	68,111	0.3	11	3,107	6.0	18,975	0.3	14	362	0.7	2,162	0.5	41
45-64	750	22.0	5,052	0.4	22	342	10.0	2,053	0.4	22	50	1.5	315	0.5	29
65-74	59	18.2	436	0.3	10	30	9.2	198	0.5	31	1	0.3	6	0.2	19
75-84	44	28.4	330	0.8	80	29	18.7	240	0.4	25	0	0.0	0	0.0	0
85 and older	33	28.0	239	0.5	11	24	20.3	212	0.6	27	1	0.8	6	0.2	4
Male	13,389	10.6	122,878	0.3	17	12,833	10.1	116,209	0.4	19	7,659	6.0	68,784	0.6	37
Disabled	8,330	32.4	88,448	0.4	20	6,355	24.8	69,908	0.4	23	2,973	11.6	33,250	0.6	36
5 and younger	145	8.2	1,608	0.1	1	805	45.3	8,804	0.3	18	83	4.7	920	0.4	20
6-14	431	7.8	4,956	0.1	1	1,504	27.0	17,086	0.3	18	1,871	33.6	20,890	0.6	35
15-20	540	15.7	6,118	0.1	3	680	19.8	7,789	0.3	20	685	19.9	7,865	0.6	36
21-44	3,161	39.9	33,016	0.4	19	1,143	14.4	12,492	0.4	19	231	2.9	2,418	0.6	44
45-64	4,033	58.3	42,614	0.5	26	2,206	31.9	23,611	0.5	31	103	1.5	1,157	0.7	50
65-74	19	42.2	124	0.4	9	17	37.8	126	0.5	39	0	0.0	0	0.0	0
75-84	1	16.7	12	0.2	33	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	5,059	5.0	34,430	0.3	11	6,477	6.4	46,297	0.3	14	4,684	4.6	35,516	0.6	37
5 and younger	321	1.0	2,721	0.1	2	2,724	8.7	20,720	0.2	11	178	0.6	1,440	0.4	20
6-14	598	1.8	5,201	0.1	4	2,058	6.3	14,462	0.3	16	3,354	10.3	24,788	0.6	38
15-20	1,173	6.8	8,577	0.2	4	941	5.4	7,213	0.3	15	1,042	6.0	8,660	0.6	38
21-44	2,469	14.5	14,825	0.3	15	581	3.4	2,845	0.4	20	93	0.5	535	0.5	47
45-64	427	17.6	2,612	0.4	26	119	4.9	750	0.5	33	16	0.7	89	0.9	52
65-74	46	19.2	316	0.3	6	27	11.3	156	0.3	13	1	0.4	4	1.3	12
75-84	16	15.8	102	0.2	2	20	19.8	114	0.4	20	0	0.0	0	0.0	0
85 and older	9	23.1	76	0.2	4	7	17.9	37	1.1	37	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	1	9.1	4	0.3	6	2	18.2	18	0.3	28

Table ND7C
 Nondual Beneficiaries

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

- a. Table 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, MINNESOTA, 2002

Beneficiary Characteristics	ANTIDIABETIC					ANTIVIRAL						
	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 Bene Mos	
All	9,671	3.3 %	91,565	0.7	\$40	3,081	1.1 %	28,679	0.3	\$120	292,546	1,558,627
Female	6,195	3.7	59,570	0.7	40	1,894	1.1	17,066	0.3	95	165,651	857,456
Disabled	4,541	17.8	50,021	0.7	42	1,006	3.9	11,131	0.3	118	25,499	267,715
5 and younger	7	0.6	84	0.7	27	13	1.2	149	0.3	52	1,118	10,930
6-14	32	1.1	362	0.8	30	50	1.8	590	0.2	47	2,792	30,206
15-20	48	2.2	540	0.6	31	58	2.7	658	0.2	36	2,151	22,989
21-44	1,034	11.3	11,373	0.6	42	451	4.9	4,858	0.4	137	9,167	95,594
45-64	3,398	33.3	37,518	0.7	42	434	4.2	4,876	0.3	121	10,213	107,592
65-74	22	38.6	144	0.8	39	0	0.0	0	0.0	0	57	392
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	1,654	1.2	9,549	0.5	34	888	0.6	5,935	0.3	51	140,152	589,741
5 and younger	11	0.0	37	0.8	44	55	0.2	427	0.2	10	30,131	133,721
6-14	85	0.3	534	0.8	42	93	0.3	789	0.2	41	31,734	139,982
15-20	106	0.5	655	0.6	43	147	0.6	1,069	0.2	19	22,880	101,600
21-44	950	1.8	5,556	0.5	33	538	1.0	3,282	0.3	61	51,394	197,659
45-64	399	11.7	2,192	0.5	34	39	1.1	255	0.5	180	3,415	13,819
65-74	70	21.5	368	0.6	27	2	0.6	7	0.3	7	325	1,473
75-84	19	12.3	129	0.9	38	4	2.6	38	0.1	2	155	823
85 and older	14	11.9	78	0.5	15	10	8.5	68	0.2	3	118	664
Male	3,476	2.7	31,995	0.7	38	1,187	0.9	11,613	0.4	156	126,884	701,121
Disabled	2,616	10.2	27,660	0.7	38	921	3.6	9,605	0.4	179	25,675	262,486
5 and younger	6	0.3	64	0.6	11	25	1.4	268	0.2	10	1,776	17,496
6-14	50	0.9	538	0.6	26	66	1.2	741	0.3	93	5,561	60,265
15-20	63	1.8	704	0.7	38	52	1.5	594	0.1	11	3,440	36,613
21-44	576	7.3	6,064	0.7	39	439	5.5	4,411	0.5	206	7,929	79,300
45-64	1,915	27.7	20,237	0.7	38	338	4.9	3,584	0.5	203	6,918	68,451
65-74	5	11.1	41	0.5	27	1	2.2	7	0.1	4	45	327
75-84	1	16.7	12	1.1	212	0	0.0	0	0.0	0	6	34
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	860	0.8	4,335	0.6	39	266	0.3	2,008	0.2	47	101,209	438,635
5 and younger	18	0.1	89	0.9	39	47	0.1	361	0.2	5	31,344	138,586
6-14	67	0.2	311	0.8	44	68	0.2	599	0.2	12	32,678	148,955
15-20	80	0.5	353	0.9	54	55	0.3	428	0.2	17	17,367	80,779
21-44	361	2.1	1,826	0.6	37	77	0.5	499	0.4	127	17,018	59,544
45-64	252	10.4	1,299	0.6	39	15	0.6	89	0.3	150	2,423	8,925
65-74	60	25.1	346	0.5	31	3	1.3	20	0.5	76	239	1,119
75-84	15	14.9	78	0.7	30	1	1.0	12	0.1	1	101	491
85 and older	7	17.9	33	0.6	10	0	0.0	0	0.0	0	39	236
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	11	50

Table ND7D

Nondual Beneficiaries

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

- a. Table 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, MINNESOTA, 2002**

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
All	\$511	8.0	869	7,615
Age				
0-64	531	8.1	760	6,970
65-74	472	7.6	23	133
75-84	310	7.0	30	201
85 and older	214	6.5	56	311
Unknown	0	0.0	0	0
Gender				
Female	509	8.4	430	3,941
Male	513	7.5	439	3,674
Unknown	0	0.0	0	0
Race				
White	504	8	655	5,745
African American	566	8.5	93	858
Other/unknown	504	7.3	121	1,012
Basis of Eligibility^c				
Aged	306	7.2	96	571
Disabled	548	8.3	656	6,753
Adults	85	2.4	20	35
Children	50	1.2	97	256
Unknown	0	0.0	0	0

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

a. Table 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 2,972 beneficiaries who were in nursing facilities for part of their enrollment and their 24,240 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, MINNESOTA, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx			Total Rx \$			Users				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	No.	As % of All-Year NF Residents	No. of Bene Mos		
		Generic	Generic		Generic	Generic		Generic	Generic		Generic	Generic					
Anti-infective Agents	0.6	0.3	0.0	0.2	\$41	\$35	\$2	\$4	\$72	\$116	\$58	\$16	2,781	\$201,381	482	55.5 %	4,946
Biologicals	0.1	0.1	0.0	0.0	16	1	15	1	157	13	2,235	19	125	19,684	112	12.9	1,232
Antineoplastic Agents	0.9	0.6	0.1	0.3	329	311	7	12	347	501	125	42	307	106,582	33	3.8	324
Endocrine/Metabolic Drugs	1.4	0.6	0.2	0.5	55	38	7	9	40	63	28	19	4,377	176,414	325	37.4	3,232
Cardiovascular Agents	2.0	0.5	0.2	1.2	59	36	7	16	30	66	32	13	8,747	261,792	454	52.2	4,439
Respiratory Agents	1.2	0.6	0.1	0.5	66	42	7	16	55	72	76	31	3,438	187,806	273	31.4	2,867
Gastrointestinal Agents	1.2	0.6	0.0	0.6	78	61	2	16	65	108	110	25	4,480	292,575	375	43.2	3,737
Genitourinary Agents	0.7	0.3	0.0	0.4	28	21	0	7	38	66	26	17	1,398	52,831	180	20.7	1,905
CNS Drugs	2.3	1.2	0.1	1.0	243	195	13	36	105	163	116	35	14,175	1,493,723	631	72.6	6,145
Stimulants/Anti-obesity/Anorexia	0.9	0.1	0.1	0.7	28	12	3	13	33	179	35	19	195	6,450	24	2.8	227
Miscellaneous Psychological/Neurological Agents	0.5	0.4	0.0	0.0	53	50	0	3	111	112	0	100	181	20,038	36	4.1	375
Analgesics and Anesthetics	1.3	0.4	0.2	0.8	59	36	9	14	44	95	47	19	5,306	235,160	413	47.5	4,012
Neuromuscular Agents	1.7	0.7	0.1	0.9	121	85	11	25	69	116	73	29	8,072	556,972	434	49.9	4,615
Nutritional Products	0.8	0.0	0.1	0.7	14	1	2	11	17	40	16	16	1,500	25,810	186	21.4	1,881
Hematological Agents	1.3	0.3	0.2	0.8	82	69	4	9	62	244	22	10	2,206	137,849	179	20.6	1,676
Topical Products	0.6	0.2	0.1	0.4	20	10	2	8	33	56	38	22	2,969	97,700	477	54.9	4,952
Miscellaneous Products	0.6	0.0	0.1	0.5	31	2	20	9	50	81	169	19	323	16,125	52	6.0	524
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	8	0	0	0	23	0	0	0	111	2,511	30	3.5	334
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.	60,691	3,891,403	n.a.	n.a.	n.a.

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

a. Table 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 2,972 beneficiaries who were in nursing facilities for part of their enrollment and their 24,240 benefit months were excluded from the analysis.

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

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

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

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

In Minnesota, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

TABLE 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, MINNESOTA, 2002

Top 10 Drug Groups in Nursing Facilities	Users					Among Users		
	Total Medicaid Rx \$	No. of Users	As % of All-Year NF Residents	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo	
ANTIPSYCHOTICS	\$1,084,170	538	61.9 %	5,745	1.0	\$180	\$189	
ANTICONVULSANT	417,367	436	50.2	4,700	1.2	76	89	
ANTIDEPRESSANTS	317,350	657	75.6	6,416	0.9	57	49	
ULCER DRUGS	226,159	380	43.7	3,873	0.8	72	58	
ANALGESICS - Narcotic	157,999	433	49.8	4,283	0.9	40	37	
ANTIASTHMATIC	129,372	339	39.0	3,543	0.7	54	37	
ANTIIDIABETIC	114,554	263	30.3	2,572	1.1	42	45	
ANTINEOPLASTICS	106,582	36	4.1	340	0.9	347	313	
ANTIHYPERTENSIVE	89,357	134	15.4	1,448	0.8	73	62	
MUSCULOSKELETAL THERAPY AGENTS	80,980	129	14.8	1,434	1.0	56	56	
Total	2,723,890	3,345		34,354	n.a.	n.a.	n.a.	

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

a. Table 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 2,972 beneficiaries who were in nursing facilities for part of their enrollment and their 24,240 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, MINNESOTA, 2002

Beneficiary Characteristics	All Top 10 Drug Groups										ANTIPSYCHOTICS					ANTICONVULSANT				
	No. of Rx	Rx \$	Users as % of All-Year			Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene Mos among	NF Residents	Mean No. of Rx	Users as % of All-Year	No. of Bene Mos among	NF Residents	Mean No. of Rx	Mean Rx \$				
			538	61.9 %	5,745												1.0	\$189	436	50.2 %
All	32,163	\$2,723,890	538	61.9 %	5,745	1.0	\$189	436	50.2 %	4,700	1.2	\$89								
Female	17,249	1,485,787	292	67.9	3,085	1.1	195	221	51.4	2,364	1.2	86								
Disabled	16,121	1,422,150	266	80.9	2,951	1.1	202	202	61.4	2,233	1.2	88								
64 or younger	16,062	1,419,476	265	82.0	2,946	1.1	202	200	61.9	2,225	1.2	88								
65-74	59	2,674	1	16.7	5	1.8	124	2	33.3	8	1.1	40								
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	1,128	63,637	26	25.7	134	0.8	44	19	18.8	131	1.1	65								
64 or younger	72	2,718	4	12.9	13	0.7	40	2	6.5	9	0.4	19								
65-74	116	6,694	2	40.0	16	0.9	51	1	20.0	3	1.0	172								
75-84	467	31,692	10	47.6	50	1.0	51	6	28.6	51	1.4	47								
85 and older	473	22,533	10	22.7	55	0.6	37	10	22.7	68	0.9	80								
Male	14,914	1,238,103	246	56.0	2,660	1.0	182	215	49.0	2,336	1.2	91								
Disabled	14,206	1,202,816	227	69.4	2,502	1.0	188	202	61.8	2,250	1.2	94								
64 or younger	14,036	1,189,696	220	68.8	2,447	1.0	191	197	61.6	2,217	1.2	94								
65-74	155	10,177	7	116.7	55	0.9	78	5	83.3	33	1.0	65								
75-84	15	2,943	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	708	35,287	19	17.0	158	0.6	78	13	11.6	86	1.1	38								
64 or younger	191	9,738	7	8.1	31	0.5	116	7	8.1	44	1.0	18								
65-74	227	13,498	3	50.0	36	0.9	141	3	50.0	22	1.9	103								
75-84	130	3,224	2	25.0	24	0.8	7	2	25.0	13	0.3	10								
85 and older	160	8,827	7	58.3	67	0.6	52	1	8.3	7	0.3	9								
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 Minnesota, 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 2,972 beneficiaries who were in nursing facilities for part of their enrollment and their 24,240 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, MINNESOTA, 2002

Beneficiary Characteristics	ANTIDEPRESSANTS						ULCER DRUGS						ANALGESICS - Narcotic					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	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	657	75.6 %	0.9	6,416	0.9	\$50	380	43.7 %	0.8	3,873	0.8	\$58	433	49.8 %	0.9	4,283	0.9	\$37
Female	382	88.8	0.9	3,767	0.9	49	190	44.2	0.8	1,898	0.8	53	217	50.5	0.9	2,069	0.9	42
Disabled	311	94.5	0.9	3,380	0.9	51	161	48.9	0.8	1,750	0.8	51	192	58.4	0.9	1,927	0.9	36
64 or younger	307	95.0	0.9	3,372	0.9	51	160	49.5	0.8	1,748	0.8	51	189	58.5	0.9	1,918	0.9	37
65-74	4	66.7	1.0	47	1.0	47	1	16.7	1.0	2	1.0	58	3	50.0	0.4	9	0.4	7
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	71	70.3	0.9	387	0.9	35	29	28.7	0.9	148	0.9	77	25	24.8	1.3	142	1.3	115
64 or younger	17	54.8	0.6	68	0.6	19	1	3.2	0.5	2	0.5	48	4	12.9	0.2	17	0.2	4
65-74	4	80.0	0.9	22	0.9	38	3	60.0	1.0	11	1.0	102	2	40.0	1.4	14	2.5	190
75-84	18	85.7	1.2	112	1.2	41	8	38.1	1.1	53	1.1	126	7	33.3	1.4	59	1.4	207
85 and older	32	72.7	0.9	185	0.9	36	17	38.6	0.7	82	0.7	42	12	27.3	1.2	52	1.2	26
Male	275	62.6	0.8	2,649	0.8	50	190	43.3	0.8	1,975	0.8	63	216	49.2	0.9	2,214	0.9	32
Disabled	223	68.2	0.9	2,344	0.9	53	178	54.4	0.8	1,886	0.8	64	199	60.9	1.0	2,109	1.0	34
64 or younger	218	68.1	0.9	2,311	0.9	53	175	54.7	0.8	1,869	0.8	64	196	61.3	1.0	2,091	1.0	34
65-74	5	83.3	1.0	33	1.0	41	3	50.0	1.1	17	1.1	76	2	33.3	0.8	6	0.8	11
75-84	0	0.0	0.0	0	0.0	0	0	0.0	0.0	0	0.0	0	1	100.0	0.2	12	0.2	33
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	52	46.4	0.7	305	0.7	30	12	10.7	0.9	89	0.9	46	17	15.2	0.5	105	0.5	10
64 or younger	34	39.5	0.5	132	0.5	30	5	5.8	0.8	18	0.8	22	8	9.3	1.7	19	1.7	37
65-74	7	116.7	0.9	68	0.9	32	3	50.0	1.0	24	1.0	68	2	33.3	0.8	16	0.8	13
75-84	6	75.0	0.7	61	0.7	19	1	12.5	1.0	12	1.0	8	3	37.5	0.1	36	0.1	2
85 and older	5	41.7	0.8	44	0.8	41	3	25.0	0.9	35	0.9	55	4	33.3	0.2	34	0.2	2
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	0

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

a. Table 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 2,972 beneficiaries who were in nursing facilities for part of their enrollment and their 24,240 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, MINNESOTA, 2002

Beneficiary Characteristics	ANTI-ASTHMATIC					ANTI-DIABETIC					ANTI-NEOPLASTICS				
	Users as %					Users as %					Users as %				
	No. of Users	Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	339	39.0 %	3,543	0.7	\$37	263	30.3 %	2,572	1.1	\$45	36	4.1 %	340	0.9	\$314
Female	174	40.5	1,821	0.6	34	147	34.2	1,461	1.1	46	30	7.0	285	0.9	333
Disabled	152	46.2	1,651	0.6	36	129	39.2	1,371	1.1	47	28	8.5	279	0.9	339
64 or younger	150	46.4	1,639	0.6	36	125	38.7	1,354	1.1	47	28	8.7	279	0.9	339
65-74	2	33.3	12	0.2	6	4	66.7	17	1.2	51	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	22	21.8	170	0.4	16	18	17.8	90	1.0	28	2	2.0	6	0.5	41
64 or younger	5	16.1	26	0.2	8	2	6.5	4	1.0	56	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	3	60.0	17	1.1	19	0	0.0	0	0.0	0
75-84	5	23.8	39	0.3	4	6	28.6	47	1.1	36	1	4.8	2	1.0	114
85 and older	12	27.3	105	0.5	22	7	15.9	22	0.7	14	1	2.3	4	0.3	4
Male	165	37.6	1,722	0.8	39	116	26.4	1,111	1.0	43	6	1.4	55	0.9	213
Disabled	155	47.4	1,656	0.8	40	105	32.1	1,064	1.0	43	6	1.8	55	0.9	213
64 or younger	152	47.5	1,641	0.7	39	104	32.5	1,052	1.0	41	6	1.9	55	0.9	213
65-74	3	50.0	15	1.1	70	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	1	100.0	12	1.1	212	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	10	8.9	66	0.8	23	11	9.8	47	1.2	36	0	0.0	0	0.0	0
64 or younger	1	1.2	1	1.0	101	2	2.3	2	1.0	42	0	0.0	0	0.0	0
65-74	1	16.7	7	0.6	16	2	33.3	15	1.5	21	0	0.0	0	0.0	0
75-84	4	50.0	32	0.3	3	2	25.0	13	2.0	82	0	0.0	0	0.0	0
85 and older	4	33.3	26	1.4	46	5	41.7	17	0.4	13	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

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

a. Table 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 2,972 beneficiaries who were in nursing facilities for part of their enrollment and their 24,240 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, MINNESOTA, 2002

Beneficiary Characteristics	ANTHYPERLIPIDEMIC				MUSCULOSKELETAL THERAPY AGENTS				Mean Rx \$	Mean No. of Rx	All-Year NF Residents	Bene Mos among All-Year NF Residents
	Users as %		Users as %		Users as %		Users as %					
	No. of Users	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean Rx \$	Mean No. of Rx				
All	134	15.4 %	1,448	0.8	129	14.8 %	1,434	1.0	\$57	869	7,615	
Female	72	16.7	795	0.9	65	15.1	717	1.0	45	430	3,941	
Disabled	66	20.1	755	0.9	64	19.5	705	1.0	46	329	3,483	
64 or younger	65	20.1	753	0.9	63	19.5	703	1.0	46	323	3,460	
65-74	1	16.7	2	1.0	1	16.7	2	1.0	6	6	23	
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	6	5.9	40	1.1	1	1.0	12	1.0	16	101	458	
64 or younger	1	3.2	2	0.5	0	0.0	0	0.0	0	31	75	
65-74	2	40.0	10	1.5	0	0.0	0	0.0	0	5	24	
75-84	2	9.5	16	0.9	0	0.0	0	0.0	0	21	123	
85 and older	1	2.3	12	1.1	1	2.3	12	1.0	16	44	236	
Male	62	14.1	653	0.8	64	14.6	717	1.0	68	439	3,674	
Disabled	58	17.7	621	0.8	61	18.7	681	1.0	70	327	3,270	
64 or younger	58	18.1	621	0.8	61	19.1	681	1.0	70	320	3,219	
65-74	0	0.0	0	0.0	0	0.0	0	0.0	0	6	39	
75-84	0	0.0	0	0.0	0	0.0	0	0.0	0	1	12	
85 and older	0	0.0	0	0.0	0	0.0	0	0.0	0	0	0	
Other Eligibles	4	3.6	32	0.8	3	2.7	36	0.9	21	112	404	
64 or younger	1	1.2	5	0.2	1	1.2	12	0.8	9	86	216	
65-74	1	16.7	12	1.1	1	16.7	12	1.4	34	6	47	
75-84	1	12.5	12	0.9	1	12.5	12	0.5	21	8	66	
85 and older	1	8.3	3	0.3	0	0.0	0	0.0	0	12	75	
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 Minnesota, 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 2,972 beneficiaries who were in nursing facilities for part of their enrollment and their 24,240 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}
 MINNESOTA, 2002

Beneficiary Characteristics	No. of Benes with at Least One Part D Excl Rx	% Benes with at Least One Part D Excl Rx	No. of Part D		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
			Excl Rx	Bene						
All	44,231	15.1 %	0.9	256,021	\$17	\$4,894,477	\$19	3.7 %	292,546	
Age										
5 and younger	6,536	10.2	0.2	14,529	5	306,705	21	4.7	64,369	
6-14	5,644	7.8	0.3	20,064	8	575,443	29	3.7	72,765	
15-20	4,924	10.7	0.4	18,394	8	389,585	21	2.7	45,838	
21-44	15,562	18.2	1.0	89,649	20	1,745,698	19	3.6	85,508	
45-64	11,136	48.5	4.8	110,337	80	1,832,775	17	3.9	22,969	
65-74	217	32.6	1.7	1,156	43	28,321	24	8.1	666	
75-84	107	40.7	3.4	904	32	8,422	9	4.5	263	
85 and older	104	66.2	6.3	987	48	7,523	8	5.8	157	
Unknown	1	9.1	0.1	1	0	5	5	0.2	11	
Basis of Eligibility^c										
Aged	367	38.3	2.8	2,667	42	40,108	15	7.1	957	
Disabled	23,701	46.3	4.2	214,789	77	3,951,113	18	3.7	51,174	
Adults	8,915	11.0	0.2	18,554	6	510,794	28	4.7	80,838	
Children	11,237	7.0	0.1	19,983	2	391,883	20	2.9	159,467	
Unknown	11	10.0	0.3	28	5	579	21	4.1	110	
Gender										
Female	27,564	16.6	1.0	159,103	19	3,157,479	20	4.4	165,656	
Male	16,667	13.1	0.8	96,918	14	1,736,998	18	2.8	126,890	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Race										
White	25,493	15.5	1.1	177,190	21	3,384,770	19	3.5	164,546	
African American	7,375	13.7	0.6	34,183	10	537,463	16	3.6	53,971	
Other/unknown	11,363	15.3	0.6	44,648	13	972,244	22	4.4	74,029	
Use of Nursing Facilities^d										
Entire year	714	82.2	18.1	15,707	222	193,207	12	5.0	869	
Part year	1,651	55.6	5.9	17,521	83	245,891	14	3.6	2,972	
None	41,866	14.5	0.8	222,793	15	4,455,379	20	3.6	288,705	
Maintenance Assistance Status										
Cash	27,894	22.7	1.6	195,055	30	3,733,120	19	3.9	122,976	
Medically needy	1,800	14.2	0.9	10,908	14	179,218	16	3.7	12,642	
Poverty related	1,397	6.0	0.1	2,448	2	40,752	17	3.2	23,220	
Other/unknown	13,140	9.8	0.4	47,610	7	941,387	20	3.0	133,708	

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

- a. Table 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}
 MINNESOTA, 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	\$3	\$19	\$0	\$1	1,558,627
Age						
5 and younger	0.0	1	21	0	0	300,733
6-14	0.1	2	29	0	0	379,408
15-20	0.1	2	21	0	0	241,981
21-44	0.2	4	19	0	1	432,097
45-64	0.6	9	17	0	3	198,787
65-74	0.3	9	24	0	1	3,311
75-84	0.7	6	9	0	1	1,360
85 and older	1.1	8	8	0	1	900
Unknown	0.0	0	5	0	0	50
Basis of Eligibility^c						
Aged	0.6	9	15	0	1	4,708
Disabled	0.4	7	18	0	2	530,201
Adults	0.1	2	28	0	0	309,206
Children	0.0	1	20	0	0	714,174
Unknown	0.1	2	21	0	1	338
Gender						
Female	0.2	4	20	0	1	857,476
Male	0.1	2	18	0	1	701,151
Unknown	0.0	0	0	0	0	0
Race						
White	0.2	4	19	0	1	898,171
African American	0.1	2	16	0	0	256,021
Other/unknown	0.1	2	22	0	1	404,435
Use of Nursing Facilities^d						
Entire year	2.1	25	12	0	6	7,615
Part year	0.7	10	14	0	3	24,240
None	0.1	3	20	0	1	1,526,772
Maintenance Assistance Status						
Cash	0.2	5	19	0	1	785,070
Medically needy	0.2	3	16	0	1	59,416
Poverty related	0.0	0	17	0	0	101,752
Other/unknown	0.1	2	20	0	0	612,389

Table ND12

Nondual Beneficiaries

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

- a. Table 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}
MINNESOTA, 2002

Drug Category	No. Users	Rx \$ per User	Total Rx \$	Rx \$ as % of All Part D Excl Rx \$	Total No. Rx.	\$ per Rx	No. Rx as % of All Part D Excl Rx
All	56,255	\$87	\$4,894,477	100.0 %	256,021	\$19	100.0 %
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	6	57	341	0.0	9	38	0.0
Drugs for cosmetic purposes	123	14	1,687	0.0	162	10	0.1
Cough and cold medications	5,243	117	612,098	12.5	11,895	51	4.6
Vitamins and minerals	3,309	129	427,604	8.7	16,916	25	6.6
Non-prescription drugs	35,045	47	1,636,698	33.4	162,950	10	63.6
Barbiturates	629	74	46,832	1.0	5,396	9	2.1
Benzodiazepines	9,425	150	1,418,113	29.0	51,664	27	20.2
Other Part D Excl Rx Drugs	2,475	303	751,104	15.3	7,029	107	2.7

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

a. Table 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, MINNESOTA, 2002

Beneficiary Characteristics	No. of Benes					No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	552,066	2,000	52,039	148,920	348,997	110	19,263	555,392	1,204,084	3,269,818	381
Age											
5 and younger	135,606	0	2,915	39	132,652	0	0	30,513	327	1,208,499	0
6-14	148,977	0	8,382	67	140,528	0	0	93,111	622	1,376,142	0
15-20	87,416	0	5,607	10,939	70,857	13	0	60,872	95,415	659,295	42
21-44	143,466	0	17,381	121,062	4,951	72	0	184,061	973,486	25,839	247
45-64	34,399	1	17,614	16,758	1	25	12	185,399	133,738	1	92
65-74	1,341	1,161	131	49	0	0	11,311	1,344	474	0	0
75-84	542	530	9	3	0	0	5,162	92	10	0	0
85 and older	308	308	0	0	0	0	2,778	0	0	0	0
Unknown	11	0	0	3	8	0	0	0	12	42	0
Gender											
Female	309,802	1,238	25,929	111,559	170,966	110	11,985	280,662	930,757	1,603,985	381
Male	242,264	762	26,110	37,361	178,031	0	7,278	274,730	273,327	1,665,833	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	312,579	935	33,173	92,755	185,663	53	9,037	355,324	731,050	1,728,282	214
African American	100,401	563	8,933	26,436	64,463	6	5,839	92,744	235,733	624,823	23
Other/unknown	139,086	502	9,933	29,729	98,871	51	4,387	107,324	237,301	916,713	144
Use of Nursing Facilities^c											
Entire year	1,047	252	668	27	100	0	2,477	6,896	50	283	0
Part year	3,214	126	1,652	657	779	0	1,129	16,818	5,782	6,853	0
None	547,805	1,622	49,719	148,236	348,118	110	15,657	531,678	1,198,252	3,262,682	381
Maintenance Assistance Status											
Cash	206,221	1,022	38,867	55,538	110,794	0	10,982	428,692	514,124	1,121,820	0
Medically needy	17,139	311	1,793	9,231	5,804	0	2,953	15,660	73,429	52,637	0
Poverty related	35,242	2	194	3,031	31,905	110	24	1,506	18,457	308,538	381
Other/unknown	293,464	665	11,185	81,120	200,494	0	5,304	109,534	598,074	1,786,823	0
Managed Care Status											
FFS all year	135,654	444	46,801	29,670	58,639	100	2,974	504,832	165,264	416,228	311
FFS part year, with Rx claims	48,532	336	3,546	20,293	24,355	2	3,281	36,861	185,158	243,612	17
FFS part year, no Rx claims	108,360	177	827	30,875	76,473	8	1,639	7,973	263,955	713,131	53
MC all year, with Rx claims	841	0	36	202	603	0	0	219	2,007	5,483	0
MC all year, no Rx claims	258,679	1,043	829	67,880	188,927	0	11,369	5,507	587,700	1,891,364	0

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

- a. Table A.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, MINNESOTA, 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	552,066	5,048,938	292,546	1,558,627	0	3,490,311
FFS all year	135,654	1,089,609	135,654	1,089,609	0	0
FFS part year, with Rx claims	48,532	468,929	48,532	185,020	0	283,909
FFS part year, with no Rx claims	108,360	986,751	108,360	283,998	0	702,753
MC all year, with Rx claims	841	7,709	0	0	0	7,709
MC all year, with no Rx claims	258,679	2,495,940	0	0	0	2,495,940

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

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

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