

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

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TABLE ND.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 NONDUAL BENEFICIARIES, PENNSYLVANIA, 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	619,184	6,638	108,213	119,910	383,999	424	3,603,158	36,747	803,003	553,129	2,207,511	2,768		
Age														
5 and younger	146,960	1	8,003	0	138,956	0	825,208	2	49,570	0	775,636	0		
6-14	169,751	2	22,741	0	147,008	0	1,071,009	4	167,238	0	903,767	0		
15-20	108,633	2	14,339	0	94,293	9	619,937	15	105,977	0	513,908	37		
21-44	142,717	11	30,174	108,626	3,749	157	738,990	73	224,226	499,529	14,197	965		
45-64	44,506	63	32,904	11,281	0	258	311,480	336	255,782	53,596	0	1,766		
65-74	2,737	2,682	52	3	0	0	16,047	15,833	210	4	0	0		
75-84	2,103	2,103	0	0	0	0	12,052	12,052	0	0	0	0		
85 and older	1,774	1,774	0	0	0	0	8,432	8,432	0	0	0	0		
Unknown	3	0	0	0	3	3	0	0	0	0	3	0		
Gender														
Female	346,835	4,569	51,074	96,114	194,654	424	1,974,881	25,257	391,041	444,543	1,111,272	2,768		
Male	272,349	2,069	57,139	23,796	189,345	0	1,628,277	11,490	411,962	108,586	1,096,239	0		
Unknown	0	0	0	0	0	0	0	0	0	0	0	0		
Race														
White	434,673	4,058	86,323	81,364	262,620	308	2,967,232	24,585	704,365	449,098	1,787,154	2,030		
African American	100,114	1,013	11,252	21,605	66,165	79	357,649	6,168	55,823	58,087	237,048	523		
Other/unknown	84,397	1,567	10,638	16,941	55,214	37	278,277	5,994	42,815	45,944	183,309	215		
Use of Nursing Facilities^c														
Entire year	2,597	945	1,650	1	1	0	27,444	10,043	17,394	4	3	0		
Part year	2,270	531	1,673	57	8	1	15,756	3,981	11,445	280	38	12		
None	614,317	5,162	104,890	119,852	383,990	423	3,559,958	22,723	774,164	552,845	2,207,470	2,756		
Maintenance Assistance Status														
Cash	212,174	2,260	68,927	51,775	89,212	0	1,282,220	17,223	559,437	234,208	471,352	0		
Medically needy	26,602	589	359	6,978	18,676	0	141,378	3,151	2,178	43,168	92,881	0		
Poverty-related	269,815	1,535	34,154	22,290	211,412	424	1,574,002	6,624	208,502	80,159	1,275,949	2,768		
Other/unknown	110,593	2,254	4,773	38,867	64,699	0	605,558	9,749	32,886	195,594	367,329	0		
Managed Care Status														
FFS all year	332,884	4,872	67,033	59,107	201,480	392	2,844,111	32,002	682,021	409,736	1,717,752	2,600		
FFS part year, with Rx claims	85,779	897	21,376	20,292	43,194	20	297,385	2,874	70,900	59,500	163,994	117		
FFS part year, no Rx claims	200,521	869	19,804	40,511	139,325	12	461,662	1,871	50,082	83,893	325,765	51		

Source: Data for this table are from the MAX 2002 file for Pennsylvania, 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, PENNSYLVANIA, 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	46.3 %	6.5	\$415	\$64	\$3,055	13.6 %	619,184
Age							
5 and younger	43.3	2.2	98	44	1,820	5.4	146,960
6-14	41.5	3.4	212	62	2,174	9.8	169,751
15-20	42.7	4.0	253	63	2,575	9.8	108,633
21-44	49.5	7.9	548	70	3,458	15.9	142,717
45-64	72.4	31.8	2,101	66	8,925	23.5	44,506
65-74	56.8	24.0	1,300	54	12,713	10.2	2,737
75-84	51.5	25.1	1,229	49	14,265	8.6	2,103
85 and older	36.4	18.1	755	42	11,297	6.7	1,774
Unknown	0.0	0.0	0	0	0	0.0	3
Basis of Eligibility^c							
Aged	49.7	22.7	1,133	50	12,846	8.8	6,638
Disabled	68.5	22.0	1,597	73	9,174	17.4	108,213
Adults	45.3	4.7	267	56	2,209	12.1	119,910
Children	40.2	2.4	114	48	1,422	8.0	383,999
Unknown	59.7	12.3	2,438	198	6,959	35.0	424
Gender							
Female	47.5	7.1	424	60	2,937	14.4	346,835
Male	44.7	5.8	404	70	3,207	12.6	272,349
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	54.8	8.2	523	64	3,103	16.8	434,673
African American	23.5	2.9	178	61	3,291	5.4	100,114
Other/unknown	29.2	2.1	143	68	2,530	5.7	84,397
Use of Nursing Facilities^d							
Entire year	96.3	95.0	4,971	52	59,336	8.4	2,597
Part year	93.3	57.5	3,453	60	36,017	9.6	2,270
None	45.9	5.9	385	65	2,696	14.3	614,317
Maintenance Assistance Status							
Cash	51.4	10.9	745	68	4,409	16.9	212,174
Medically needy	37.1	3.3	159	49	2,132	7.5	26,602
Poverty related	43.0	3.4	190	56	1,944	9.8	269,815
Other/unknown	46.6	6.5	396	61	3,393	11.7	110,593

Table ND3

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Pennsylvania, 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, PENNSYLVANIA, 2002

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:					Mean \$, All Services	Benes	Bene Mos	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less				More than 10
All	1.1	\$71	13.6 %	53.7 %	31.6 %	5.3 %	5.8 %	2.6 %	0.9 %	\$525	619,184	3,603,158
Age												
5 and younger	0.4	18	5.4	56.7	38.9	3.0	1.2	0.1	0.0	324	146,960	825,208
6-14	0.5	34	9.8	58.5	33.3	4.2	3.3	0.5	0.1	345	169,751	1,071,009
15-20	0.7	44	9.8	57.3	31.9	5.5	4.4	0.9	0.1	451	108,633	619,937
21-44	1.5	106	15.9	50.5	28.4	7.6	8.9	3.6	1.0	668	142,717	738,990
45-64	4.5	300	23.5	27.6	14.2	9.6	22.7	18.4	7.6	1,275	44,506	311,480
65-74	4.1	222	10.2	43.2	12.3	8.4	16.8	13.6	5.7	2,168	2,737	16,047
75-84	4.4	215	8.6	48.5	8.7	6.2	15.4	15.7	5.5	2,489	2,103	12,052
85 and older	3.8	159	6.7	63.6	4.8	4.9	12.7	9.8	4.2	2,377	1,774	8,432
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	3	3
Basis of Eligibility^c												
Aged	4.1	205	8.8	50.3	9.2	6.7	15.3	13.3	5.2	2,320	6,638	36,747
Disabled	3.0	215	17.4	31.5	24.4	10.6	18.3	11.1	4.1	1,236	108,213	803,003
Adults	1.0	58	12.1	54.7	29.0	7.1	6.8	2.1	0.4	479	119,910	553,129
Children	0.4	20	8.0	59.8	34.9	3.3	1.8	0.2	0.0	247	383,999	2,207,511
Unknown	1.9	374	35.0	40.3	25.0	13.4	15.1	3.8	2.4	1,066	424	2,768
Gender												
Female	1.2	75	14.4	52.5	32.2	5.4	5.9	3.0	1.1	516	346,835	1,974,881
Male	1.0	68	12.6	55.3	31.0	5.3	5.7	2.2	0.6	536	272,349	1,628,277
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.2	77	16.8	45.2	37.6	6.2	6.9	3.2	1.0	455	434,673	2,967,232
African American	0.8	50	5.4	76.5	15.5	3.0	3.1	1.4	0.6	921	100,114	357,649
Other/unknown	0.6	43	5.7	70.8	20.0	3.9	3.6	1.3	0.3	767	84,397	278,277
Use of Nursing Facilities^d												
Entire year	9.0	470	8.4	3.7	3.8	4.7	19.8	37.5	30.6	5,615	2,597	27,444
Part year	8.3	497	9.6	6.7	5.5	5.6	22.8	29.8	29.6	5,189	2,270	15,756
None	1.0	66	14.3	54.1	31.9	5.3	5.7	2.4	0.6	465	614,317	3,559,958
Maintenance Assistance Status												
Cash	1.8	123	16.9	48.6	29.0	6.7	9.1	5.0	1.8	730	212,174	1,282,220
Medically needy	0.6	30	7.5	62.9	28.7	4.4	2.9	0.8	0.2	401	26,602	141,378
Poverty related	0.6	33	9.8	57.0	35.1	4.0	2.9	0.9	0.2	333	269,815	1,574,002
Other/unknown	1.2	72	11.7	53.4	29.1	6.4	7.3	2.9	0.9	620	110,593	605,558

Table ND4

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Pennsylvania, 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 Pennsylvania, 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 Pennsylvania, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all 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, PENNSYLVANIA, 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	Generic
Anti-infective Agents	0.3	0.1	0.0	0.1	\$14	\$11	\$2	\$2	\$2	\$52	\$92	\$79	\$15	456,791	\$23,711,394	176,853	28.6 %	1,640,120
Biologics	0.2	0.2	0.0	0.0	114	103	1	10	10	655	644	2,359	717	7,767	5,085,100	4,480	0.7	44,668
Antineoplastic Agents	0.7	0.4	0.1	0.3	303	263	16	24	16	420	649	312	89	16,230	6,814,765	2,612	0.4	22,513
Endocrine/Metabolic Drugs	0.6	0.3	0.1	0.2	28	21	3	5	5	50	75	29	25	332,827	16,748,334	64,656	10.4	588,117
Cardiovascular Agents	1.3	0.5	0.1	0.7	52	35	3	14	3	40	69	36	20	469,199	18,735,315	41,071	6.6	361,870
Respiratory Agents	0.5	0.2	0.0	0.2	24	17	3	4	3	51	68	66	24	492,514	25,300,353	113,191	18.3	1,052,734
Gastrointestinal Agents	0.6	0.4	0.0	0.2	53	46	3	5	5	90	126	193	24	223,709	20,176,665	41,134	6.6	377,802
Genitourinary Agents	0.3	0.2	0.0	0.1	16	14	0	1	1	49	60	44	17	46,149	2,280,208	16,014	2.6	146,735
CNS Drugs	1.1	0.6	0.0	0.4	90	71	3	15	3	82	115	100	35	732,426	60,180,620	78,107	12.6	671,199
Stimulants/Anti-obesity/Anorexia	0.7	0.4	0.1	0.2	45	29	6	9	6	63	75	65	42	126,222	7,958,301	19,872	3.2	178,339
Miscellaneous Psychological/Neurological Agents	0.3	0.2	0.0	0.1	52	45	0	6	6	153	184	0	67	8,224	1,255,207	2,447	0.4	24,369
Analgesics and Anesthetics	0.6	0.2	0.0	0.4	32	23	2	7	7	56	135	75	18	430,005	24,179,612	83,891	13.5	754,208
Neuromuscular Agents	0.9	0.4	0.1	0.4	61	49	3	9	3	71	115	66	23	295,937	21,089,261	38,958	6.3	345,932
Nutritional Products	0.3	0.0	0.0	0.2	5	0	1	4	4	19	36	23	17	89,654	1,673,736	39,780	6.4	353,774
Hematological Agents	0.8	0.3	0.2	0.4	155	145	3	7	7	193	554	20	17	65,545	12,632,554	9,423	1.5	81,656
Topical Products	0.2	0.1	0.0	0.1	9	5	1	2	2	35	56	58	18	216,746	7,543,534	91,055	14.7	877,970
Miscellaneous Products	0.3	0.2	0.0	0.1	37	29	4	5	5	132	194	202	40	11,487	1,519,219	4,422	0.7	40,640
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	7	0	0	0	0	31	0	0	0	8,491	259,842	3,855	0.6	37,370
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.	n.a.	4,029,923	257,144,020	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Pennsylvania, 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 Pennsylvania, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.Medi-Span.com/products/product_mddb.asp (May 13 2003).

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

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, PENNSYLVANIA, 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	\$29,171,349	33,027	298,256	0.7	\$148	\$98	
ANTIDEPRESSANTS	25,138,184	72,608	650,617	0.5	70	39	
ANTICONVULSANT	18,031,814	31,701	287,022	0.8	84	63	
ULCER DRUGS	16,464,455	39,309	373,139	0.5	95	44	
ANTIASTHMATIC	13,032,661	73,251	685,995	0.3	57	19	
ANALGESICS - Narcotic	12,634,344	79,184	762,493	0.3	49	17	
ANTIDIABETIC	8,186,968	19,891	177,011	0.7	63	46	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	7,905,548	21,714	201,301	0.6	63	39	
ANALGESICS - ANTI-INFLAMMATORY	7,627,042	51,204	486,090	0.3	59	16	
ANTIVIRAL	7,199,137	5,861	49,209	0.4	379	146	
Total	145,391,502	427,750	3,971,133	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2002 file for Pennsylvania, 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, PENNSYLVANIA, 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	1,835,975	\$145,391,502	33,027	5.3 %	298,256	0.7	\$98	72,608	11.7 %	650,617	0.5	\$39					
Female	1,070,648	81,844,426	16,165	4.7	148,665	0.6	87	47,229	13.6	426,731	0.5	39					
Disabled	694,005	58,336,538	10,631	20.8	100,211	0.7	102	23,748	46.5	226,086	0.6	46					
5 and younger	6,262	459,076	37	1.2	411	0.5	63	21	0.7	181	0.4	11					
6-14	36,441	2,730,542	985	13.5	9,013	0.6	71	1,233	16.9	11,342	0.5	31					
15-20	35,310	2,867,658	1,153	20.7	10,620	0.6	75	1,960	35.2	18,135	0.5	37					
21-44	221,542	20,152,790	4,052	25.8	38,206	0.7	101	9,236	58.9	87,775	0.6	45					
45-64	394,177	32,104,372	4,401	22.5	41,941	0.7	116	11,290	57.8	108,597	0.7	49					
65-74	273	22,100	3	10.0	20	0.6	50	8	26.7	56	0.7	51					
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	376,643	23,507,888	5,534	1.9	48,454	0.5	57	23,481	7.9	200,645	0.4	31					
5 and younger	18,019	847,496	70	1.1	736	0.3	40	75	0.1	746	0.3	14					
6-14	53,464	3,399,202	1,018	1.4	9,756	0.6	68	1,997	2.7	19,059	0.5	27					
15-20	63,728	3,696,166	1,434	2.8	12,961	0.5	53	5,266	10.2	46,972	0.4	27					
21-44	166,962	10,387,457	2,029	2.2	16,128	0.3	42	13,242	14.4	109,865	0.4	30					
45-64	35,192	2,646,182	376	5.4	2,858	0.4	51	2,040	29.4	15,723	0.5	42					
65-74	18,090	1,249,223	234	13.7	2,356	0.9	128	335	19.7	3,253	0.8	48					
75-84	14,122	867,858	225	15.6	2,209	0.7	89	316	21.9	3,028	0.8	44					
85 and older	7,066	414,304	148	10.7	1,450	0.6	59	210	15.2	1,999	0.8	46					
Male	765,327	63,547,076	16,862	6.2	149,591	0.7	108	25,379	9.3	223,886	0.6	39					
Disabled	493,191	44,339,950	11,334	19.8	102,342	0.7	117	14,609	25.6	134,241	0.6	42					
5 and younger	10,438	722,765	133	2.7	1,306	0.5	59	67	1.3	656	0.3	15					
6-14	98,167	7,619,068	3,361	21.7	31,328	0.6	83	3,061	19.8	28,509	0.5	32					
15-20	53,097	4,713,274	1,898	21.7	17,495	0.7	103	2,242	25.6	20,870	0.6	41					
21-44	136,810	14,593,584	3,565	24.6	30,502	0.8	146	4,600	31.7	40,868	0.6	44					
45-64	194,185	16,674,375	2,373	17.7	21,691	0.8	140	4,635	34.7	43,303	0.7	47					
65-74	494	16,884	4	18.2	20	0.6	75	4	18.2	35	3.0	75					
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	272,136	19,207,126	5,528	2.6	47,249	0.7	90	10,770	5.0	89,645	0.5	34					
5 and younger	27,233	1,377,471	119	0.2	1,223	0.4	49	104	0.1	1,033	0.3	14					
6-14	99,118	6,980,318	2,166	2.9	20,337	0.7	96	2,817	3.8	26,888	0.5	31					
15-20	63,715	4,312,123	1,863	4.3	15,643	0.7	89	3,787	8.8	31,397	0.6	34					
21-44	44,864	3,616,621	861	4.2	5,675	0.5	77	2,718	13.1	19,624	0.5	34					
45-64	20,757	1,814,637	238	5.1	1,659	0.5	92	995	21.3	7,392	0.5	42					
65-74	7,939	550,533	121	12.3	1,139	0.8	96	140	14.3	1,353	0.9	54					
75-84	5,424	368,139	105	15.9	1,071	0.8	100	130	19.7	1,273	0.8	48					
85 and older	3,086	187,284	55	13.9	502	0.7	88	79	20.0	685	0.8	43					
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 Pennsylvania, 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, PENNSYLVANIA, 2002

Beneficiary Characteristics	ANTICONVULSANT					ULCER DRUGS					ANTIASTHMATIC				
	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	31,701	5.1 %	287,022	0.8	\$63	39,309	6.3 %	373,139	0.5	\$44	73,251	11.8 %	685,995	0.3	\$19
Female	17,924	5.2	164,018	0.7	62	25,333	7.3	243,360	0.5	44	40,576	11.7	380,304	0.3	20
Disabled	12,187	23.9	115,348	0.8	70	14,249	27.9	142,918	0.5	56	16,654	32.6	164,237	0.5	28
5 and younger	202	6.8	1,931	0.7	71	365	12.2	3,345	0.4	30	761	25.5	7,302	0.3	22
6-14	1,032	14.2	9,904	0.8	67	462	6.4	4,832	0.4	34	1,292	17.8	12,835	0.4	20
15-20	1,077	19.3	10,128	0.8	70	592	10.6	6,127	0.3	29	884	15.9	8,668	0.3	18
21-44	4,975	31.7	46,341	0.8	79	4,295	27.4	43,450	0.5	52	4,688	29.9	46,701	0.4	24
45-64	4,892	25.0	46,979	0.8	61	8,526	43.7	85,111	0.6	62	9,019	46.2	88,692	0.5	32
65-74	9	30.0	65	0.6	81	9	30.0	53	0.4	35	10	33.3	39	0.6	42
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	5,737	1.9	48,670	0.6	41	11,084	3.7	100,442	0.3	28	23,922	8.1	216,067	0.3	14
5 and younger	135	0.2	1,207	0.5	49	1,019	1.5	8,536	0.3	11	6,115	9.0	57,429	0.2	10
6-14	610	0.8	5,744	0.6	45	1,149	1.6	11,816	0.2	15	5,742	7.9	55,830	0.3	14
15-20	1,107	2.2	9,642	0.6	46	1,899	3.7	18,541	0.2	15	3,640	7.1	32,971	0.2	12
21-44	2,896	3.2	23,609	0.5	37	4,925	5.4	43,361	0.3	30	6,642	7.2	54,501	0.3	15
45-64	551	7.9	4,108	0.6	47	1,097	15.8	8,942	0.5	49	1,040	15.0	8,306	0.4	25
65-74	212	12.4	2,057	1.0	52	440	25.8	4,001	0.6	52	366	21.5	3,414	0.5	31
75-84	172	11.9	1,766	0.9	37	355	24.6	3,328	0.7	55	261	18.1	2,487	0.6	24
85 and older	54	3.9	537	0.8	32	200	14.5	1,917	0.7	52	116	8.4	1,129	0.5	18
Male	13,777	5.1	123,004	0.8	65	13,976	5.1	129,779	0.5	44	32,675	12.0	305,691	0.3	18
Disabled	9,902	17.3	91,039	0.8	70	8,391	14.7	80,752	0.6	52	11,049	19.3	107,579	0.4	26
5 and younger	275	5.5	2,785	0.6	62	480	9.6	4,256	0.5	29	1,340	26.7	12,955	0.3	21
6-14	2,039	13.2	19,140	0.7	60	675	4.4	6,923	0.4	35	2,660	17.2	26,695	0.3	19
15-20	1,382	15.8	13,125	0.8	69	603	6.9	6,259	0.4	33	1,125	12.8	11,264	0.3	16
21-44	3,619	25.0	32,297	0.9	85	2,501	17.3	23,935	0.5	53	1,740	12.0	16,361	0.4	24
45-64	2,581	19.3	23,646	0.9	61	4,120	30.8	39,298	0.6	60	4,173	31.2	40,233	0.6	35
65-74	6	27.3	46	1.5	38	12	54.5	81	1.8	56	11	50.0	71	0.9	40
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	3,875	1.8	31,965	0.6	49	5,585	2.6	49,027	0.3	30	21,626	10.0	198,112	0.3	14
5 and younger	166	0.2	1,585	0.5	60	1,318	1.9	11,114	0.3	15	8,938	12.6	82,273	0.2	11
6-14	905	1.2	8,538	0.7	47	900	1.2	9,482	0.2	18	7,924	10.7	75,846	0.3	15
15-20	1,150	2.7	9,568	0.7	47	993	2.3	9,353	0.3	19	2,854	6.7	25,098	0.3	14
21-44	1,088	5.3	7,441	0.5	48	1,363	6.6	10,748	0.4	43	1,061	5.1	7,863	0.4	20
45-64	357	7.7	2,710	0.6	53	602	12.9	4,571	0.5	58	443	9.5	3,299	0.4	28
65-74	122	12.4	1,238	1.1	61	177	18.0	1,593	0.7	53	193	19.7	1,796	0.6	31
75-84	61	9.3	660	1.0	37	132	20.0	1,263	0.7	63	120	18.2	1,094	0.6	25
85 and older	26	6.6	225	0.6	39	100	25.3	903	0.7	61	93	23.5	843	0.5	14
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 Pennsylvania, 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 BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BOE, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, PENNSYLVANIA, 2002

Beneficiary Characteristics	ANALGESICS - Narcotic				ANTI-DIABETIC				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	79,184	12.8 %	762,493	0.3	\$17	19,891	3.2 %	177,011	0.7	\$46	21,714	3.5 %	201,301	0.6	\$39
Female	53,931	15.5	524,054	0.3	14	12,944	3.7	116,720	0.7	46	6,062	1.7	57,376	0.6	38
Disabled	22,405	43.9	232,025	0.4	24	9,388	18.4	88,614	0.8	49	2,630	5.1	25,416	0.6	42
5 and younger	91	3.0	1,003	0.1	1	22	0.7	179	0.6	30	47	1.6	495	0.4	24
6-14	387	5.3	4,233	0.1	2	158	2.2	1,492	0.7	39	1,355	18.6	12,766	0.7	39
15-20	869	15.6	9,400	0.2	4	135	2.4	1,271	0.6	44	463	8.3	4,307	0.6	39
21-44	9,104	58.1	94,567	0.4	22	1,756	11.2	16,364	0.7	45	381	2.4	3,817	0.5	49
45-64	11,947	61.2	122,789	0.5	27	7,306	37.4	69,207	0.8	50	384	2.0	4,031	0.5	54
65-74	7	23.3	33	1.5	136	11	36.7	101	0.8	48	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	31,526	10.7	292,029	0.2	7	3,556	1.2	28,106	0.7	38	3,432	1.2	31,960	0.5	35
5 and younger	531	0.8	5,578	0.1	1	23	0.0	181	0.4	28	161	0.2	1,740	0.4	22
6-14	1,904	2.6	20,283	0.1	2	182	0.2	1,610	0.7	46	2,296	3.1	21,484	0.6	36
15-20	5,918	11.5	58,357	0.2	3	253	0.5	2,072	0.6	38	517	1.0	4,672	0.6	37
21-44	20,274	22.1	181,753	0.3	8	1,422	1.5	10,311	0.6	35	380	0.4	3,431	0.4	36
45-64	2,005	28.9	17,448	0.4	18	734	10.6	5,330	0.7	42	68	1.0	531	0.5	45
65-74	397	23.3	3,938	0.5	19	525	30.8	4,530	0.8	41	2	0.1	24	0.5	13
75-84	306	21.2	2,964	0.5	23	299	20.7	2,889	0.8	34	3	0.2	30	0.6	38
85 and older	191	13.9	1,708	0.5	16	118	8.6	1,183	0.8	27	5	0.4	48	0.5	10
Male	25,253	9.3	238,439	0.4	21	6,947	2.6	60,291	0.7	46	15,652	5.7	143,925	0.6	40
Disabled	12,843	22.5	126,924	0.5	31	5,121	9.0	46,767	0.7	48	7,329	12.8	67,806	0.7	41
5 and younger	175	3.5	1,838	0.1	1	23	0.5	193	0.7	23	249	5.0	2,531	0.4	21
6-14	621	4.0	6,761	0.1	2	184	1.2	1,943	0.7	52	5,238	33.9	48,096	0.7	41
15-20	929	10.6	9,930	0.2	3	126	1.4	1,272	0.7	49	1,467	16.7	13,557	0.7	43
21-44	4,842	33.4	47,319	0.5	34	993	6.8	8,812	0.8	47	232	1.6	2,178	0.6	50
45-64	6,270	46.9	61,021	0.6	38	3,790	28.3	34,510	0.8	48	143	1.1	1,444	0.5	47
65-74	6	27.3	55	0.4	25	5	22.7	37	0.6	20	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	12,410	5.8	111,515	0.3	10	1,826	0.8	13,524	0.7	42	8,323	3.9	76,119	0.6	38
5 and younger	904	1.3	9,405	0.1	1	61	0.1	622	0.4	26	411	0.6	4,192	0.3	18
6-14	1,857	2.5	19,962	0.1	2	154	0.2	1,367	0.7	48	6,181	8.4	57,379	0.6	39
15-20	3,106	7.2	29,775	0.2	2	206	0.5	1,763	0.8	57	1,582	3.7	13,439	0.7	42
21-44	4,864	23.5	38,501	0.4	17	545	2.6	3,536	0.7	41	117	0.6	845	0.4	43
45-64	1,383	29.7	11,154	0.5	27	497	10.7	3,051	0.7	41	28	0.6	220	0.4	41
65-74	133	13.6	1,272	0.5	28	204	20.8	1,736	0.8	40	1	0.1	8	0.8	31
75-84	88	13.4	833	0.6	26	93	14.1	828	0.8	41	2	0.3	24	0.3	6
85 and older	75	19.0	613	0.4	14	66	16.7	621	0.8	28	1	0.3	12	0.3	4
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 Pennsylvania, 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, PENNSYLVANIA, 2002

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY				ANTIVIRAL					
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	No. of Bene Mos	
All	51,204	8.3 %	486,090	0.3	5,861	0.9 %	49,209	0.4	619,184	3,603,158
Female	34,760	10.0	331,553	0.3	3,622	1.0	31,394	0.3	346,834	1,974,880
Disabled	13,718	26.9	140,181	0.4	1,654	3.2	14,622	0.4	51,074	391,041
5 and younger	76	2.5	780	0.2	29	1.0	266	0.4	2,986	18,756
6-14	301	4.1	3,262	0.2	84	1.2	810	0.4	89	53,435
15-20	718	12.9	7,445	0.2	65	1.2	623	0.2	5,575	40,654
21-44	4,981	31.8	51,235	0.3	853	5.4	7,066	0.5	15,676	121,797
45-64	7,640	39.1	77,435	0.4	623	3.2	5,857	0.4	19,532	156,294
65-74	2	6.7	24	0.3	0	0.0	0	0.0	30	105
75-84	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
Other Eligibles	21,042	7.1	191,372	0.2	1,968	0.7	16,772	0.3	295,760	1,583,839
5 and younger	1,413	2.1	13,244	0.2	90	0.1	926	0.2	67,998	380,696
6-14	2,034	2.8	20,055	0.2	205	0.3	1,954	0.3	73,058	448,650
15-20	4,666	9.1	44,869	0.2	389	0.8	3,545	0.2	51,382	273,220
21-44	10,894	11.9	95,842	0.2	1,139	1.2	9,032	0.3	91,857	422,015
45-64	1,410	20.3	11,783	0.4	99	1.4	801	0.4	6,938	34,234
65-74	355	20.8	3,081	0.5	11	0.6	105	0.3	1,704	10,288
75-84	184	12.7	1,622	0.5	19	1.3	223	0.3	1,444	8,535
85 and older	86	6.2	876	0.7	16	1.2	186	0.1	1,379	6,201
Male	16,444	6.0	154,537	0.3	2,239	0.8	17,815	0.5	272,347	1,628,275
Disabled	6,978	12.2	69,848	0.3	1,444	2.5	11,572	0.6	57,139	411,962
5 and younger	96	1.9	983	0.2	15	0.3	129	0.3	5,017	30,814
6-14	469	3.0	4,810	0.2	110	0.7	998	0.3	15,466	113,803
15-20	693	7.9	7,109	0.2	68	0.8	664	0.3	8,764	65,323
21-44	2,409	16.6	24,039	0.3	676	4.7	5,296	0.6	14,498	102,429
45-64	3,309	24.7	32,883	0.4	575	4.3	4,485	0.6	13,372	99,488
65-74	2	9.1	24	2.3	0	0.0	0	0.0	22	105
75-84	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
Other Eligibles	9,466	4.4	84,689	0.2	795	0.4	6,243	0.3	215,208	1,216,313
5 and younger	1,614	2.3	15,274	0.2	91	0.1	911	0.2	70,959	394,942
6-14	1,662	2.2	16,064	0.1	188	0.3	1,841	0.3	73,952	455,121
15-20	2,808	6.5	26,381	0.2	130	0.3	1,162	0.2	42,912	240,740
21-44	2,351	11.4	18,486	0.2	244	1.2	1,364	0.5	20,686	92,749
45-64	825	17.7	6,624	0.3	109	2.3	629	0.5	4,664	21,464
65-74	114	11.6	946	0.4	17	1.7	166	0.5	981	5,549
75-84	54	8.2	540	0.4	10	1.5	110	0.1	659	3,517
85 and older	38	9.6	374	0.5	6	1.5	60	0.1	395	2,231
Unknown	0	0.0	0	0.0	0	0.0	0	0.0	3	3

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Pennsylvania, 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, PENNSYLVANIA, 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	\$470	9.0	2,597	27,444
Age				
0-64	546	10.0	1,654	17,443
65-74	411	8.0	263	2,967
75-84	353	7.3	354	3,728
85 and older	260	6.2	326	3,306
Unknown	0	0.0	0	0
Gender				
Female	458	9.0	1,515	16,211
Male	488	8.9	1,082	11,233
Unknown	0	0.0	0	0
Race				
White	478	9.1	1,699	17,433
African American	448	9.1	714	7,969
Other/unknown	498	7.8	184	2,042
Basis of Eligibility^c				
Aged	337	7.1	945	10,043
Disabled	547	10.1	1,650	17,394
Adults	259	6.5	1	4
Children	0	0.0	1	3
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2002 file for Pennsylvania, 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 2,270 beneficiaries who were in nursing facilities for part of their enrollment and their 15,756 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, PENNSYLVANIA, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx	Total Rx \$	No.	As % of All-Year NF Residents	No. of Bene Mos						
	Patented			Patented								Generic	Generic				
	Total	Off-Patent	Brand-Name	Total	Off-Patent	Brand-Name											
Anti-infective Agents	0.6	0.3	0.0	0.2	\$48	\$40	\$4	\$5	\$87	\$133	\$115	\$23	10,652	\$926,707	1,732	66.7 %	19,178
Biologicals	0.1	0.1	0.0	0.0	9	9	0	1	92	116	0	20	200	18,435	177	6.8	2,015
Antineoplastic Agents	0.8	0.4	0.0	0.4	189	137	6	46	223	365	144	106	1,557	346,619	171	6.6	1,838
Endocrine/Metabolic Drugs	1.4	0.6	0.2	0.5	51	35	5	11	37	58	22	21	16,212	607,071	1,093	42.1	11,898
Cardiovascular Agents	2.4	0.7	0.2	1.5	69	35	6	28	28	51	29	18	42,788	1,209,479	1,623	62.5	17,551
Respiratory Agents	1.2	0.4	0.1	0.7	45	24	4	17	38	59	53	24	13,552	514,943	1,040	40.0	11,373
Gastrointestinal Agents	1.3	0.6	0.0	0.7	78	64	1	13	60	100	67	20	20,326	1,212,193	1,444	55.6	15,578
Genitourinary Agents	1.0	0.7	0.0	0.3	46	41	1	4	46	58	50	14	6,193	282,293	549	21.1	6,162
CNS Drugs	2.2	1.2	0.1	0.9	161	129	5	26	74	108	64	30	45,795	3,404,827	1,952	75.2	21,168
Stimulants/Anti-obesity/Anorexia	0.8	0.2	0.0	0.5	48	38	1	9	64	154	52	19	362	23,169	45	1.7	480
Miscellaneous Psychological/Neurological Agents	0.9	0.8	0.0	0.0	114	112	0	2	133	134	0	74	1,768	234,613	206	7.9	2,057
Analgesics and Anesthetics	1.3	0.5	0.1	0.7	62	49	4	10	48	97	36	14	17,024	814,120	1,232	47.4	13,115
Neuromuscular Agents	2.1	0.8	0.1	1.2	105	69	8	27	50	91	58	23	32,197	1,605,057	1,374	52.9	15,332
Nutritional Products	0.8	0.0	0.1	0.8	15	1	1	14	18	28	11	18	6,368	114,240	704	27.1	7,661
Hematological Agents	1.5	0.4	0.5	0.5	99	86	6	7	66	196	12	13	14,368	946,824	904	34.8	9,520
Topical Products	0.8	0.3	0.1	0.4	28	17	4	8	38	61	52	19	14,660	552,543	1,734	66.8	19,416
Miscellaneous Products	0.3	0.1	0.0	0.2	18	15	0	3	63	140	0	18	636	39,915	195	7.5	2,199
Unknown Therapeutic Category	0.6	0.0	0.0	0.0	16	0	0	0	28	0	0	0	2,031	56,573	305	11.7	3,466
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.	246,689	12,909,621	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Pennsylvania, 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 2,270 beneficiaries who were in nursing facilities for part of their enrollment and their 15,756 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 Pennsylvania, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

TABLE ND.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NONDUAL BENEFICIARIES, PENNSYLVANIA, 2002

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	No. of Users	Users			Among Users		
			As % of All-Year NF Residents	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo	
ANTIPTYCHOTICS	\$1,918,750	1,332	51.3 %	14,832	1.0	\$133	\$129	
ANTICONVULSANT	1,207,731	1,482	57.1	16,762	1.4	52	72	
ANTIDEPRESSANTS	1,198,299	1,790	68.9	19,738	1.0	58	61	
ULCER DRUGS	1,098,091	1,503	57.9	16,431	1.0	69	67	
ANALGESICS - Narcotic	530,125	1,292	49.7	13,636	0.8	46	39	
ANTIDIABETIC	478,864	1,077	41.5	12,168	1.0	38	39	
HEMATOPOIETIC AGENTS	444,976	568	21.9	6,106	0.8	87	73	
DERMATOLOGICAL	413,782	3,457	133.1	39,479	0.3	33	10	
ANTIHYPERTENSIVE	366,955	1,033	39.8	11,453	1.0	33	32	
ANTIASTHMATIC	348,070	1,089	41.9	11,873	0.8	38	29	
Total	8,005,643	14,623		162,478	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2002 file for Pennsylvania, 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 2,270 beneficiaries who were in nursing facilities for part of their enrollment and their 15,756 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, PENNSYLVANIA, 2002

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTICONVULSANT						
	No. of Rx	Rx \$	Users as %			Mean Rx \$	No. of Users	No. of Bene Mos among Users	Users as %		Mean Rx \$	No. of Rx	Mean No. of	No. of Bene Mos among Users	Users as %		Mean Rx \$
			No. of Rx	Rx \$	Residents				NF Residents	Residents					NF Residents	Residents	
All	136,089	\$8,005,643	1,332	51.3 %	14,832	1.0	\$129	1,482	57.1 %	16,762	1.4	\$72					
Female	79,792	4,675,088	787	51.9	8,802	0.9	126	851	56.2	9,612	1.4	71					
Disabled	54,933	3,257,337	468	53.8	5,295	1.0	142	652	74.9	7,380	1.4	78					
64 or younger	54,794	3,248,657	467	53.8	5,283	1.0	142	648	74.7	7,354	1.4	78					
65-74	139	8,680	1	50.0	12	0.2	14	4	200.0	26	0.3	17					
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	24,859	1,417,751	319	49.5	3,507	0.8	101	199	30.9	2,232	1.2	52					
64 or younger	208	11,856	2	28.6	24	0.6	134	4	57.1	48	1.0	46					
65-74	8,447	537,539	97	62.2	1,131	1.1	144	85	54.5	984	1.4	64					
75-84	10,069	558,743	126	50.0	1,356	0.8	95	79	31.3	882	1.1	44					
85 and older	6,135	309,613	94	40.9	996	0.6	61	31	13.5	318	0.9	35					
Male	56,297	3,330,555	545	50.4	6,030	1.0	135	631	58.3	7,150	1.4	73					
Disabled	44,676	2,687,499	409	52.4	4,517	1.1	145	529	67.8	5,971	1.4	76					
64 or younger	44,278	2,675,965	407	52.5	4,502	1.1	145	527	68.0	5,951	1.4	77					
65-74	398	11,534	2	40.0	15	0.5	33	2	40.0	20	2.8	59					
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	11,621	643,056	136	45.0	1,513	0.9	105	102	33.8	1,179	1.2	55					
64 or younger	86	4,587	1	25.0	12	0.8	116	1	25.0	12	3.3	125					
65-74	4,682	253,538	46	46.0	542	0.9	98	53	53.0	628	1.2	59					
75-84	4,365	247,822	60	58.8	662	0.9	103	39	38.2	448	1.2	43					
85 and older	2,488	137,109	29	30.2	297	0.9	120	9	9.4	91	0.8	75					
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 Pennsylvania, 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 2,270 beneficiaries who were in nursing facilities for part of their enrollment and their 15,756 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, PENNSYLVANIA, 2002

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANALGESICS - Narcotic						
	Users as %		No. of Bene		Mean	Users as %		No. of Bene		Mean	Users as %		No. of Bene		Mean		
	No. of Users	Residents	No. of Users	NF Residents	No. of Rx	No. of Users	Residents	NF Residents	No. of Users	NF Residents	No. of Rx	No. of Users	Residents	NF Residents	No. of Users	NF Residents	No. of Rx
All	1,790	68.9 %	19,738	1.0	\$61	1,503	57.9 %	16,431	1.0	\$67	1,292	49.7 %	13,636	0.8	\$39		
Female	1,074	70.9	11,815	1.0	61	858	56.6	9,396	1.0	65	806	53.2	8,686	0.8	38		
Disabled	700	80.5	7,752	1.1	64	531	61.0	5,823	1.0	68	552	63.4	5,971	0.9	44		
64 or younger	696	80.2	7,715	1.1	64	528	60.8	5,787	1.0	69	551	63.5	5,959	0.9	43		
65-74	4	200.0	37	0.7	53	3	150.0	36	0.4	29	1	50.0	12	2.9	246		
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	374	58.0	4,063	0.9	55	327	50.7	3,573	0.8	61	254	39.4	2,715	0.6	25		
64 or younger	4	57.1	48	0.9	45	2	28.6	24	1.0	59	1	14.3	12	1.3	33		
65-74	93	59.6	1,036	1.0	65	89	57.1	1,012	0.8	56	61	39.1	694	0.6	15		
75-84	154	61.1	1,691	0.9	50	141	56.0	1,510	0.8	62	117	46.4	1,234	0.6	35		
85 and older	123	53.5	1,288	0.9	53	95	41.3	1,027	0.9	64	75	32.6	775	0.6	19		
Male	716	66.2	7,923	1.0	60	645	59.6	7,035	1.0	69	486	44.9	4,950	0.9	41		
Disabled	532	68.2	5,896	1.1	62	490	62.8	5,292	1.1	71	402	51.5	4,055	1.0	44		
64 or younger	529	68.3	5,865	1.1	62	485	62.6	5,254	1.0	71	400	51.6	4,036	1.0	44		
65-74	3	60.0	31	3.3	72	5	100.0	38	3.0	95	2	40.0	19	0.8	67		
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	184	60.9	2,027	0.9	55	155	51.3	1,743	0.8	63	84	27.8	895	0.6	25		
64 or younger	2	50.0	16	1.1	62	1	25.0	12	1.2	53	1	25.0	4	0.8	13		
65-74	65	65.0	780	1.0	63	51	51.0	594	0.8	53	28	28.0	307	0.7	24		
75-84	73	71.6	775	0.8	51	57	55.9	630	0.8	68	34	33.3	378	0.6	28		
85 and older	44	45.8	456	0.9	50	46	47.9	507	0.9	69	21	21.9	206	0.5	22		
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 Pennsylvania, 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 2,270 beneficiaries who were in nursing facilities for part of their enrollment and their 15,756 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, PENNSYLVANIA, 2002

Beneficiary Characteristics	ANTIDIABETIC						HEMATOPOIETIC AGENTS						DERMATOLOGICAL					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx
All	1,077	12,168	1.0	568	6,106	0.8	568	6,106	0.8	3,457	39,479	133.1	3,457	39,479	0.3	\$39	\$73	\$11
Female	661	7,471	1.1	311	3,424	0.9	311	3,424	0.9	2,099	24,014	138.5	2,099	24,014	0.3			10
Disabled	406	4,525	1.1	184	2,045	0.8	184	2,045	0.8	1,348	15,500	154.9	1,348	15,500	0.3			11
64 or younger	405	4,513	1.1	182	2,021	0.8	182	2,021	0.8	1,345	15,464	155.0	1,345	15,464	0.3			11
65-74	1	12	1.6	2	24	0.1	2	24	0.1	3	36	150.0	3	36	0.4			25
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	255	2,946	1.0	127	1,379	0.9	127	1,379	0.9	751	8,514	116.4	751	8,514	0.3			10
64 or younger	1	12	1.1	1	12	0.9	1	12	0.9	4	48	57.1	4	48	0.3			3
65-74	94	1,103	1.1	41	482	0.9	41	482	0.9	201	2,336	128.8	201	2,336	0.3			15
75-84	105	1,207	0.9	50	537	0.9	50	537	0.9	332	3,767	131.7	332	3,767	0.3			8
85 and older	55	624	0.9	35	348	0.8	35	348	0.8	214	2,363	93.0	214	2,363	0.3			8
Male	416	4,697	1.0	257	2,682	0.8	257	2,682	0.8	1,358	15,465	125.5	1,358	15,465	0.3			11
Disabled	302	3,405	1.0	182	1,840	0.9	182	1,840	0.9	1,032	11,712	132.3	1,032	11,712	0.3			12
64 or younger	301	3,397	1.0	181	1,832	0.9	181	1,832	0.9	1,027	11,665	132.5	1,027	11,665	0.3			12
65-74	1	8	1.1	1	8	0.9	1	8	0.9	5	47	100.0	5	47	0.4			13
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	114	1,292	0.9	75	842	0.8	75	842	0.8	326	3,753	107.9	326	3,753	0.2			7
64 or younger	0	0	0.0	0	0	0.0	0	0	0.0	2	24	50.0	2	24	0.1			1
65-74	47	554	0.8	31	344	0.7	31	344	0.7	103	1,219	103.0	103	1,219	0.3			9
75-84	37	424	0.9	27	320	0.9	27	320	0.9	119	1,372	116.7	119	1,372	0.3			6
85 and older	30	314	0.9	17	178	0.7	17	178	0.7	102	1,138	106.3	102	1,138	0.2			5
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 Pennsylvania, 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 2,270 beneficiaries who were in nursing facilities for part of their enrollment and their 15,756 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).
- 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, PENNSYLVANIA, 2002

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIASTHMATIC					Bene Mos among All-Year NF Residents	
	Users as %		Users as %		Mean Rx\$	Users as %		Users as %		Mean Rx\$		
	No. of Users	%	No. of Users	%		No. of Users	%	No. of Users	%			
All	1,033	39.8 %	11,453	1.0	\$32	1,089	41.9 %	11,873	0.8	\$29	2,597	27,444
Female	572	37.8	6,357	0.9	31	630	41.6	6,898	0.8	30	1,515	16,211
Disabled	311	35.7	3,474	0.9	32	419	48.2	4,579	0.9	33	870	9,413
64 or younger	309	35.6	3,450	0.9	32	418	48.2	4,567	0.9	33	868	9,400
65-74	2	100.0	24	0.2	7	1	50.0	12	0.8	5	2	13
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	261	40.5	2,883	1.0	30	211	32.7	2,319	0.6	23	645	6,798
64 or younger	2	28.6	24	0.7	28	2	28.6	24	0.5	60	7	63
65-74	75	48.1	861	0.9	31	54	34.6	580	0.5	20	156	1,764
75-84	99	39.3	1,097	1.0	28	96	38.1	1,074	0.7	24	252	2,663
85 and older	85	37.0	901	1.0	32	59	25.7	641	0.6	21	230	2,308
Male	461	42.6	5,096	1.0	33	459	42.4	4,975	0.7	29	1,082	11,233
Disabled	334	42.8	3,616	1.1	33	330	42.3	3,543	0.8	31	780	7,981
64 or younger	333	43.0	3,604	1.1	33	327	42.2	3,516	0.8	31	775	7,950
65-74	1	20.0	12	4.1	32	3	60.0	27	0.7	53	5	31
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	127	42.1	1,480	1.0	32	129	42.7	1,432	0.7	23	302	3,252
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	30
65-74	62	62.0	742	1.0	32	43	43.0	514	0.5	24	100	1,159
75-84	42	41.2	472	1.0	33	44	43.1	488	0.8	27	102	1,065
85 and older	23	24.0	266	1.0	34	42	43.8	430	0.6	17	96	998
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 Pennsylvania, 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 2,270 beneficiaries who were in nursing facilities for part of their enrollment and their 15,756 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}
 PENNSYLVANIA, 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	\$ per Part D Excl Rx	Total Part D Excl Rx \$	\$ per Part D Excl Rx	Part D Excl Rx \$ as % of All Nondual Rx \$	Total No. of Benes
All	112,654	18.2 %	0.7	444,486	\$15	\$9,350,649	\$21	3.6 %	619,184
Age									
5 and younger	29,053	19.8	0.4	64,956	7	986,841	15	6.8	146,960
6-14	21,483	12.7	0.3	46,273	6	1,084,656	23	3.0	169,751
15-20	14,245	13.1	0.3	34,856	8	856,782	25	3.1	108,633
21-44	27,402	19.2	0.9	127,756	21	2,965,432	23	3.8	142,717
45-64	18,602	41.8	3.5	153,760	73	3,235,567	21	3.5	44,506
65-74	835	30.5	2.8	7,560	38	104,088	14	2.9	2,737
75-84	614	29.2	2.7	5,758	35	74,060	13	2.9	2,103
85 and older	420	23.7	2.0	3,567	24	43,223	12	3.2	1,774
Unknown	0	0.0	0.0	0	0	0	0	0.0	3
Basis of Eligibility^c									
Aged	1,878	28.3	2.6	17,056	34	225,761	13	3.0	6,638
Disabled	35,912	33.2	2.3	251,395	53	5,732,947	23	3.3	108,213
Adults	18,744	15.6	0.5	61,505	12	1,429,763	23	4.5	119,910
Children	56,003	14.6	0.3	113,990	5	1,953,349	17	4.5	383,999
Unknown	117	27.6	1.3	540	21	8,829	16	0.9	424
Gender									
Female	67,866	19.6	0.8	285,755	17	5,934,487	21	4.0	346,835
Male	44,788	16.4	0.6	158,731	13	3,416,162	22	3.1	272,349
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	95,094	21.9	0.9	392,467	19	8,457,991	22	3.7	434,673
African American	8,428	8.4	0.3	30,346	5	508,622	17	2.9	100,114
Other/unknown	9,132	10.8	0.3	21,673	5	384,036	18	3.2	84,397
Use of Nursing Facilities^d									
Entire year	1,821	70.1	9.6	24,842	127	329,828	13	2.6	2,597
Part year	1,612	71.0	6.4	14,449	148	335,699	23	4.3	2,270
None	109,221	17.8	0.7	405,195	14	8,685,122	21	3.7	614,317
Maintenance Assistance Status									
Cash	49,407	23.3	1.2	265,172	27	5,791,020	22	3.7	212,174
Medically needy	2,885	10.8	0.3	7,551	5	141,205	19	3.3	26,602
Poverty related	41,193	15.3	0.4	100,475	7	1,876,099	19	3.7	269,815
Other/unknown	19,169	17.3	0.6	71,288	14	1,542,325	22	3.5	110,593

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Pennsylvania, 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}
PENNSYLVANIA, 2002

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazepine \$ per Bene Mo.	No. of Bene Mos
All	0.1	\$3	\$21	\$0	\$1	3,603,158
Age						
5 and younger	0.1	1	15	0	0	825,208
6-14	0.0	1	23	0	0	1,071,009
15-20	0.1	1	25	0	0	619,937
21-44	0.2	4	23	0	2	738,990
45-64	0.5	10	21	0	4	311,480
65-74	0.5	6	14	0	2	16,047
75-84	0.5	6	13	0	2	12,052
85 and older	0.4	5	12	0	1	8,432
Unknown	0.0	0	0	0	0	3
Basis of Eligibility^c						
Aged	0.5	6	13	0	2	36,747
Disabled	0.3	7	23	0	3	803,003
Adults	0.1	3	23	0	1	553,129
Children	0.1	1	17	0	0	2,207,511
Unknown	0.2	3	16	0	2	2,768
Gender						
Female	0.1	3	21	0	1	1,974,881
Male	0.1	2	22	0	1	1,628,277
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	3	22	0	1	2,967,232
African American	0.1	1	17	0	0	357,649
Other/unknown	0.1	1	18	0	0	278,277
Use of Nursing Facilities^d						
Entire year	0.9	12	13	1	4	27,444
Part year	0.9	21	23	0	5	15,756
None	0.1	2	21	0	1	3,559,958
Maintenance Assistance Status						
Cash	0.2	5	22	0	2	1,282,220
Medically needy	0.1	1	19	0	0	141,378
Poverty related	0.1	1	19	0	0	1,574,002
Other/unknown	0.1	3	22	0	1	605,558

Table ND12

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Pennsylvania, 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}
PENNSYLVANIA, 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	147,359	\$63	\$9,350,649	100.0 %	444,486	\$21	100.0 %
Anorexia or weight loss/gain	16	62	995	0.0	32	31	0.0
Fertility drugs	47	279	13,109	0.1	107	123	0.0
Drugs for cosmetic purposes	249	23	5,693	0.1	386	15	0.1
Cough and cold medications	53,187	56	2,972,259	31.8	101,423	29	22.8
Vitamins and minerals	14,371	71	1,016,252	10.9	48,787	21	11.0
Non-prescription drugs	50,478	23	1,152,610	12.3	133,160	9	30.0
Barbiturates	1,463	57	83,247	0.9	11,999	7	2.7
Benzodiazepines	23,986	126	3,033,376	32.4	135,852	22	30.6
Other Part D Excl Rx Drugs	3,562	301	1,073,108	11.5	12,740	84	2.9

Source: Data for this table are from the MAX 2002 file for Pennsylvania, 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 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, PENNSYLVANIA, 2002

Beneficiary Characteristics	No. of Beneficiaries					No. of Beneficiaries					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	1,366,160	12,976	268,291	248,898	835,568	13,425,351	117,063	2,932,377	2,191,030	8,181,938	2,943
Age											
5 and younger	318,132	2	15,211	0	302,919	3,029,429	14	158,578	0	2,870,837	0
6-14	398,326	3	51,484	0	346,839	4,158,290	36	576,711	0	3,581,543	0
15-20	209,314	4	30,283	0	179,018	2,024,360	31	333,072	0	1,691,220	37
21-44	305,513	20	78,554	219,992	6,788	2,837,387	175	855,203	1,942,634	38,323	1,052
45-64	121,903	138	92,610	28,896	0	1,259,197	1,270	1,007,731	248,342	0	1,854
65-74	7,068	6,909	149	10	0	71,215	70,079	1,082	54	0	0
75-84	3,652	3,652	0	0	0	31,795	31,795	0	0	0	0
85 and older	2,249	2,248	0	0	1	13,675	13,663	0	0	12	0
Unknown	3	0	0	0	3	0	0	0	0	3	0
Gender											
Female	773,015	8,877	133,408	205,034	425,269	7,590,453	79,922	1,474,036	1,858,103	4,175,449	2,943
Male	593,145	4,099	134,883	43,864	410,299	5,834,898	37,141	1,458,341	332,927	4,006,489	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	758,200	6,238	167,942	135,425	448,284	7,353,918	51,675	1,824,138	1,162,937	4,313,010	2,158
African American	411,864	2,909	66,701	78,462	263,713	4,197,483	28,387	742,988	733,020	2,692,528	560
Other/unknown	196,096	3,829	33,648	35,011	123,571	1,873,950	37,001	365,251	295,073	1,176,400	225
Use of Nursing Facilities^c											
Entire year	2,601	945	1,653	2	1	27,502	10,053	17,439	7	3	0
Part year	2,335	536	1,725	65	8	22,304	4,598	17,034	584	76	12
None	1,361,224	11,495	264,913	248,831	835,559	13,375,545	102,412	2,897,904	2,190,439	8,181,859	2,931
Maintenance Assistance Status											
Cash	590,301	6,994	205,183	113,394	264,730	6,171,908	75,867	2,326,291	1,052,137	2,717,613	0
Medically needy	43,135	602	403	12,840	29,290	376,959	3,301	3,630	129,058	240,970	0
Poverty related	472,036	2,735	55,360	28,227	385,287	4,386,871	22,801	532,732	175,955	3,652,440	2,943
Other/unknown	260,688	2,645	7,345	94,437	156,261	2,489,613	15,094	69,724	833,880	1,570,915	0
Managed Care Status											
FFS all year	332,884	4,872	67,033	59,107	201,480	2,844,111	32,002	682,021	409,736	1,717,752	2,600
FFS part year, with Rx claims	85,779	897	21,376	20,292	43,194	848,888	9,186	226,482	173,566	439,447	207
FFS part year, no Rx claims	200,521	869	19,804	40,511	139,325	1,738,892	7,439	187,224	322,050	1,222,069	110
MC all year, with Rx claims	2,920	32	828	1,258	802	23,987	314	7,747	8,306	7,620	0
MC all year, no Rx claims	744,056	6,306	159,250	127,730	450,767	7,969,473	68,122	1,828,903	1,277,372	4,795,050	26

Source: Data for this table are from the MAX 2002 file for Pennsylvania, 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, PENNSYLVANIA, 2002

	Benes and			
	Bene Mos in Cell J of Table 1 No. of Benes	13,425,351	Included in Cell K of Table 1 No. of Benes	Excluded from Cell K of Table 1 No. of Benes
All	1,366,160	3,603,158	0	9,822,193
FFS all year	332,884	2,844,111	0	0
FFS part year, with Rx claims	85,779	848,888	85,779	0
FFS part year, with no Rx claims	200,521	1,738,892	200,521	0
MC all year, with Rx claims	2,920	23,987	0	0
MC all year, with no Rx claims	744,056	7,969,473	0	0

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