

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2002 SOUTH CAROLINA

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TABLE ND.2

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
NONDUAL BENEFICIARIES, SOUTH CAROLINA, 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	747,384	4,212	74,832	219,743	448,506	91	7,471,042	38,598	798,546	2,094,027	4,539,159	712
Age												
5 and younger	177,304	2	5,033	5	172,264	0	1,688,969	14	52,454	6	1,636,495	0
6-14	211,231	0	11,149	18	200,064	0	2,242,261	0	123,147	53	2,119,061	0
15-20	114,483	2	7,995	30,949	75,537	0	1,160,127	24	86,484	293,139	780,480	0
21-44	201,155	10	22,177	178,703	264	1	1,946,919	75	237,612	1,706,784	2,440	8
45-64	38,684	122	28,426	10,044	2	90	394,223	1,116	298,522	93,865	16	704
65-74	2,253	2,204	41	7	1	0	23,096	22,765	250	76	5	0
75-84	1,155	1,144	8	3	0	0	9,937	9,840	67	30	0	0
85 and older	736	728	2	6	0	0	4,821	4,764	7	50	0	0
Unknown	383	0	1	8	374	0	689	0	3	24	662	0
Gender												
Female	464,289	2,849	37,849	199,591	223,909	91	4,617,408	26,570	408,683	1,914,638	2,266,805	712
Male	282,877	1,353	36,979	20,110	224,435	0	2,851,789	11,942	389,834	179,034	2,270,979	0
Unknown	218	10	4	42	162	0	1,845	86	29	355	1,375	0
Race												
White	302,798	1,453	24,988	99,009	177,305	43	2,974,630	12,056	263,214	930,158	1,768,837	365
African American	396,682	2,067	34,995	113,318	246,266	46	4,046,488	19,489	376,546	1,111,484	2,538,636	333
Other/unknown	47,904	692	14,849	7,416	24,945	2	449,924	7,053	158,786	52,385	231,686	14
Use of Nursing Facilities^c												
Entire year	637	261	376	0	0	0	7,031	2,787	4,244	0	0	0
Part year	466	143	317	6	0	0	4,401	1,283	3,061	57	0	0
None	746,281	3,808	74,139	219,737	448,506	91	7,459,610	34,528	791,241	2,093,970	4,539,159	712
Maintenance Assistance Status												
Cash	228,994	2,309	64,900	69,440	92,345	0	2,282,520	24,073	704,954	640,690	912,803	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	335,036	1,123	5,781	21,474	306,567	91	3,309,368	9,919	50,262	158,011	3,090,464	712
Other/unknown	183,354	780	4,151	128,829	49,594	0	1,879,154	4,606	43,330	1,295,326	535,892	0
Managed Care Status												
FFS all year	705,267	4,202	72,385	212,799	415,790	91	7,239,288	38,555	784,036	2,055,189	4,360,796	712
FFS part year, with Rx claims	25,488	7	1,950	4,974	18,557	0	154,331	38	12,158	30,204	111,931	0
FFS part year, no Rx claims	16,629	3	497	1,970	14,159	0	77,423	5	2,352	8,634	66,432	0

Table ND2

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for South Carolina, 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, SOUTH CAROLINA, 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	61.2 %	6.1	\$302	\$50	\$2,161	14.0 %	747,384
Age							
5 and younger	69.3	4.6	150	33	1,645	9.1	177,304
6-14	61.7	4.6	242	53	1,368	17.7	211,231
15-20	57.6	4.7	218	46	2,126	10.3	114,483
21-44	52.6	6.1	327	54	2,319	14.1	201,155
45-64	77.5	23.8	1,378	58	7,627	18.1	38,684
65-74	74.0	24.7	1,188	48	7,928	15.0	2,253
75-84	56.9	19.0	841	44	6,221	13.5	1,155
85 and older	38.7	12.3	547	44	5,969	9.2	736
Unknown	0.0	0.0	0	0	9	0.0	383
Basis of Eligibility^c							
Aged	63.7	21.4	1,005	47	7,189	14.0	4,212
Disabled	77.5	19.7	1,375	70	8,850	15.5	74,832
Adults	50.3	4.8	191	40	1,407	13.6	219,743
Children	63.8	4.3	171	40	1,366	12.5	448,506
Unknown	80.2	16.2	904	56	10,959	8.2	91
Gender							
Female	59.6	6.2	282	46	1,985	14.2	464,289
Male	63.8	6.0	335	56	2,451	13.7	282,877
Unknown	45.0	3.5	183	53	831	22.0	218
Race							
White	64.4	7.3	358	49	2,252	15.9	302,798
African American	59.0	5.0	237	48	1,937	12.2	396,682
Other/unknown	59.1	8.0	488	61	3,447	14.2	47,904
Use of Nursing Facilities^d							
Entire year	52.3	18.2	1,015	56	38,059	2.7	637
Part year	72.3	24.0	1,670	70	37,560	4.4	466
None	61.2	6.1	301	50	2,108	14.3	746,281
Maintenance Assistance Status							
Cash	70.8	10.1	578	57	3,610	16.0	228,994
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	63.6	4.5	183	41	1,511	12.1	335,036
Other/unknown	44.8	4.0	175	44	1,538	11.4	183,354

Table ND3

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for South Carolina, 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, SOUTH CAROLINA, 2002

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:					Mean \$, All Services	Benes	Bene Mos	
				38.8 % None	50.0 % More than 0, 1, but 2 or Less	5.7 % More than 1, but 2 or Less	4.6 % More than 2, but 5 or Less	0.8 % More than 5, but 10 or Less				0.1 % More than 10
All	0.6	\$30	14.0 %	38.8 %	50.0 %	5.7 %	4.6 %	0.8 %	0.1 %	\$216	747,384	7,471,042
Age												
5 and younger	0.5	16	9.1	30.7	62.5	4.8	1.8	0.2	0.1	173	177,304	1,688,969
6-14	0.4	23	17.7	38.3	54.5	4.4	2.5	0.3	0.0	129	211,231	2,242,261
15-20	0.5	22	10.3	42.4	49.7	4.9	2.6	0.3	0.1	210	114,483	1,160,127
21-44	0.6	34	14.1	47.4	39.9	6.5	5.4	0.7	0.1	240	201,155	1,946,919
45-64	2.3	135	18.1	22.5	25.7	14.3	29.1	7.8	0.7	748	38,684	394,223
65-74	2.4	116	15.0	26.0	21.4	13.8	30.5	8.0	0.3	773	2,253	23,096
75-84	2.2	98	13.5	43.1	14.7	12.2	23.1	6.8	0.1	723	1,155	9,937
85 and older	1.9	84	9.2	61.3	11.8	7.5	14.5	4.3	0.5	911	736	4,821
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	5	383	689
Basis of Eligibility^c												
Aged	2.3	110	14.0	36.3	17.8	12.4	25.9	7.4	0.3	784	4,212	38,598
Disabled	1.8	129	15.5	22.5	35.8	13.3	22.2	5.7	0.5	829	74,832	798,546
Adults	0.5	20	13.6	49.7	40.3	5.7	3.9	0.3	0.1	148	219,743	2,094,027
Children	0.4	17	12.5	36.2	57.4	4.3	1.9	0.2	0.0	135	448,506	4,539,159
Unknown	2.1	116	8.2	19.8	30.8	20.9	26.4	2.2	0.0	1,401	91	712
Gender												
Female	0.6	28	14.2	40.4	48.2	5.6	4.8	0.8	0.1	200	464,289	4,617,408
Male	0.6	33	13.7	36.2	53.0	5.7	4.4	0.7	0.1	243	282,877	2,851,789
Unknown	0.4	22	22.0	55.0	38.1	3.7	3.2	0.0	0.0	98	218	1,845
Race												
White	0.7	36	15.9	35.6	50.0	7.2	6.1	1.0	0.1	229	302,798	2,974,630
African American	0.5	23	12.2	41.0	50.8	4.4	3.2	0.5	0.1	190	396,682	4,046,488
Other/unknown	0.9	52	14.2	40.9	43.6	6.2	7.5	1.6	0.2	367	47,904	449,924
Use of Nursing Facilities^d												
Entire year	1.7	92	2.7	47.7	18.4	9.3	15.7	7.5	1.4	3,448	637	7,031
Part year	2.5	177	4.4	27.7	22.5	11.8	25.5	11.6	0.9	3,977	466	4,401
None	0.6	30	14.3	38.8	50.0	5.7	4.6	0.8	0.1	211	746,281	7,459,610
Maintenance Assistance Status												
Cash	1.0	58	16.0	29.2	49.7	8.9	10.1	2.0	0.2	362	228,994	2,282,520
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.5	19	12.1	36.4	56.5	4.6	2.2	0.3	0.0	153	335,036	3,309,368
Other/unknown	0.4	17	11.4	55.2	38.4	3.7	2.4	0.3	0.0	150	183,354	1,879,154

Table ND4

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for South Carolina, 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 South Carolina, 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 South Carolina, 0.1 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, SOUTH CAROLINA, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos				
	Patented		Off-Patent		Patented		Off-Patent										
	Total	Brand-Name	Generic	Total	Brand-Name	Generic	Total	Brand-Name						Generic			
Anti-infective Agents	0.2	0.1	0.0	0.1	\$11	\$9	\$1	\$1	\$49	\$75	\$74	\$12	713,558	\$34,613,666	296,722	39.7	3,262,477
Biologics	0.2	0.1	0.0	0.1	177	1	18	158	1175	15	1,027	2,877	225	264,391	127	0.0	1,490
Antineoplastic Agents	0.4	0.2	0.0	0.2	138	123	3	13	318	560	152	64	8,796	2,796,794	1,864	0.2	20,277
Endocrine/Metabolic Drugs	0.4	0.2	0.1	0.1	16	12	2	2	42	60	30	19	430,859	17,936,392	104,155	13.9	1,145,923
Cardiovascular Agents	0.9	0.4	0.0	0.4	31	24	1	6	36	57	33	14	461,961	16,476,413	48,401	6.5	532,271
Respiratory Agents	0.3	0.2	0.1	0.1	14	10	2	2	43	65	39	17	932,221	40,001,907	253,871	34.0	2,795,109
Gastrointestinal Agents	0.3	0.1	0.0	0.2	18	14	1	3	63	114	146	20	167,040	10,467,869	52,705	7.1	576,337
Genitourinary Agents	0.2	0.1	0.0	0.0	7	6	0	0	38	45	31	11	59,484	2,282,681	31,655	4.2	344,946
CNS Drugs	0.6	0.3	0.0	0.2	45	38	2	5	81	129	94	21	469,720	37,825,653	76,763	10.3	843,247
Stimulants/Anti-obesity/Anorexia	0.6	0.4	0.1	0.1	37	28	3	6	66	77	63	42	170,825	11,345,070	27,557	3.7	308,010
Miscellaneous Psychological/Neurological Agents	0.5	0.3	0.0	0.2	53	48	0	5	117	180	0	26	3,350	390,999	660	0.1	7,399
Analgesics and Anesthetics	0.3	0.0	0.0	0.2	10	6	1	3	35	143	65	13	438,732	15,342,094	145,583	19.5	1,602,488
Neuromuscular Agents	0.5	0.2	0.0	0.2	34	28	2	4	70	127	51	19	224,557	15,685,870	41,151	5.5	456,350
Nutritional Products	0.2	0.0	0.1	0.2	3	0	1	2	11	12	11	11	95,354	1,061,861	36,778	4.9	388,331
Hematological Agents	0.3	0.1	0.0	0.2	53	50	1	3	174	448	24	18	38,752	6,750,290	11,671	1.6	126,740
Topical Products	0.2	0.1	0.0	0.1	6	4	1	1	32	52	54	15	329,680	10,704,648	155,809	20.8	1,705,739
Miscellaneous Products	0.5	0.3	0.0	0.2	158	133	12	14	299	414	248	87	6,098	1,825,156	1,028	0.1	11,517
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	4	0	0	0	34	0	0	0	910	31,217	694	0.1	7,916
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.	4,552,122	225,802,991	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for South Carolina, 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 South Carolina, 0.1 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, SOUTH CAROLINA, 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	\$20,172,363	17,999	2.4 %	203,681	0.5	\$187	\$99	
ASTHMATIC	16,868,949	112,379	15.0	1,252,218	0.2	59	13	
ANTIDEPRESSANTS	14,368,798	56,569	7.6	624,266	0.4	66	23	
ANTICONVULSANT	13,621,398	24,793	3.3	278,949	0.6	88	49	
ANTIHISTAMINES	11,726,163	124,689	16.7	1,411,526	0.2	47	8	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	11,221,764	31,510	4.2	356,115	0.5	66	32	
ANTIVIRAL	10,211,975	11,497	1.5	128,016	0.3	317	80	
ANALGESICS - Narcotic	8,644,533	140,753	18.8	1,560,521	0.2	32	6	
ANTIDIABETIC	7,997,644	22,722	3.0	252,091	0.5	61	32	
ULCER DRUGS	7,751,330	48,965	6.6	541,080	0.2	63	14	
Total	122,584,817	591,876		6,608,463	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2002 file for South Carolina, 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, SOUTH CAROLINA, 2002

Beneficiary Characteristics	All Top 10 Drug Groups					ANTI-PSYCHOTICS					ANTI-ASTHMATIC						
	No. of Rx	Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	1,748,065	\$122,584,817	17,999	2.4 %	203,681	0.5	\$99	112,379	15.0 %	1,252,218	0.2	\$14					
Female	1,010,335	66,709,665	9,854	2.1	111,245	0.5	89	56,995	12.3	634,363	0.2	13					
Disabled	400,526	33,926,139	6,345	16.8	72,981	0.6	112	11,105	29.3	126,945	0.3	20					
5 and younger	8,453	594,739	27	1.3	317	0.4	55	1,048	51.5	11,961	0.3	21					
6-14	24,150	1,961,882	273	7.3	3,117	0.5	78	1,113	29.7	12,894	0.3	19					
15-20	19,347	1,708,894	343	11.8	3,975	0.5	94	564	19.3	6,516	0.3	17					
21-44	120,253	11,737,912	2,618	22.0	29,908	0.6	111	2,474	20.8	28,421	0.3	15					
45-64	228,213	17,906,898	3,084	17.9	35,664	0.6	118	5,904	34.3	67,129	0.4	22					
65-74	104	15,708	0	0.0	0	0.0	0	2	9.1	24	0.1	5					
75-84	6	106	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	609,809	32,783,526	3,509	0.8	38,264	0.3	45	45,890	10.8	507,418	0.2	11					
5 and younger	69,820	3,116,878	41	0.0	453	0.3	41	16,226	19.3	176,783	0.2	10					
6-14	149,582	8,852,226	598	0.6	6,751	0.4	51	14,048	14.1	160,340	0.2	13					
15-20	91,253	4,299,977	651	1.0	7,308	0.3	38	5,415	8.0	60,683	0.2	10					
21-44	245,179	13,083,482	1,801	1.1	19,278	0.2	39	8,746	5.3	93,954	0.2	9					
45-64	35,403	2,309,067	210	2.8	2,086	0.3	38	1,050	13.8	11,050	0.3	15					
65-74	13,697	857,843	143	9.4	1,674	0.7	115	315	20.8	3,580	0.4	23					
75-84	3,638	191,962	46	6.2	501	0.4	56	60	8.1	702	0.3	17					
85 and older	1,237	72,091	19	3.8	213	0.4	49	30	6.1	326	0.2	9					
Male	737,422	55,848,352	8,144	2.9	92,424	0.6	112	55,360	19.6	617,598	0.2	14					
Disabled	283,385	28,749,011	5,501	14.9	63,216	0.7	135	8,341	22.6	95,355	0.3	21					
5 and younger	13,724	973,835	51	1.7	558	0.4	63	1,782	59.4	20,652	0.3	20					
6-14	58,675	4,762,226	919	12.4	10,527	0.5	90	2,453	33.1	28,401	0.3	20					
15-20	29,021	2,807,124	691	13.6	7,938	0.6	117	772	15.2	8,828	0.3	19					
21-44	83,942	10,770,893	2,323	22.6	26,772	0.7	152	883	8.6	10,020	0.3	20					
45-64	97,883	9,425,755	1,514	13.5	17,387	0.7	145	2,440	21.8	27,362	0.4	25					
65-74	101	6,935	1	5.3	12	0.1	14	9	47.4	72	0.4	42					
75-84	39	2,243	2	50.0	22	0.7	17	2	50.0	20	0.1	6					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Other Eligibles	454,037	27,099,341	2,643	1.1	29,208	0.4	62	47,019	19.1	522,243	0.2	13					
5 and younger	97,013	4,637,929	93	0.1	1,020	0.3	46	23,012	26.0	250,220	0.2	12					
6-14	240,910	15,031,235	1,452	1.4	16,413	0.4	61	18,901	18.8	215,699	0.2	14					
15-20	60,332	3,715,766	655	1.7	7,229	0.4	65	3,737	9.6	42,123	0.2	12					
21-44	36,740	2,390,490	267	1.9	2,640	0.3	58	957	6.8	9,908	0.2	13					
45-64	11,965	870,607	57	2.2	567	0.2	40	270	10.2	2,660	0.3	18					
65-74	4,316	290,076	73	10.6	842	0.6	98	92	13.3	1,048	0.4	22					
75-84	1,828	109,648	26	6.5	292	0.5	70	41	10.2	486	0.3	15					
85 and older	933	53,590	20	8.4	205	0.4	56	9	3.8	99	0.3	20					
Unknown	308	26,800	1	0.2	12	0.6	130	24	4.0	257	0.2	9					

Source: Data for this table are from the MAX 2002 file for South Carolina, 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, SOUTH CAROLINA, 2002

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTICONVULSANT					ANTI-HISTAMINES				
	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean Rx	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean Rx	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among	Mean Rx	Mean No. of Rx
All	56,569	7.6 %	624,266	\$23	0.4	24,793	3.3 %	278,949	0.6	\$49	124,689	16.7 %	1,411,526	0.2	\$8
Female	40,652	8.8	446,622	23	0.3	14,680	3.2	164,682	0.5	44	72,552	15.6	817,018	0.2	8
Disabled	12,960	34.2	147,434	29	0.4	8,088	21.4	92,897	0.6	58	8,525	22.5	98,714	0.2	12
5 and younger	24	1.2	287	12	0.3	236	11.6	2,753	0.6	58	516	25.4	6,045	0.2	6
6-14	440	11.8	5,044	27	0.5	684	18.3	7,924	0.7	73	1,064	28.4	12,323	0.2	12
15-20	629	21.5	7,180	30	0.4	553	18.9	6,465	0.7	82	743	25.5	8,666	0.2	11
21-44	4,725	39.7	53,614	29	0.4	3,109	26.1	35,668	0.6	64	2,634	22.1	30,524	0.2	11
45-64	7,137	41.4	81,253	29	0.5	3,505	20.3	40,075	0.6	45	3,568	20.7	41,156	0.2	13
65-74	5	22.7	56	10	0.2	1	4.5	12	0.8	19	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	27,692	6.5	299,188	19	0.3	6,592	1.5	71,785	0.4	27	64,027	15.0	718,304	0.2	7
5 and younger	125	0.1	1,406	11	0.2	200	0.2	2,272	0.4	36	15,467	18.4	174,835	0.1	5
6-14	3,062	3.1	34,793	20	0.3	840	0.8	9,586	0.4	34	22,116	22.2	253,788	0.2	10
15-20	4,958	7.3	55,107	18	0.3	909	1.3	10,187	0.4	33	10,799	16.0	120,509	0.2	7
21-44	17,234	10.5	183,381	19	0.3	3,970	2.4	42,467	0.3	23	14,249	8.6	154,059	0.2	6
45-64	1,915	25.2	19,991	24	0.4	458	6.0	4,758	0.4	26	1,085	14.3	11,505	0.2	12
65-74	246	16.2	2,824	26	0.5	162	10.7	1,918	0.6	34	219	14.5	2,546	0.3	17
75-84	106	14.2	1,178	21	0.4	39	5.2	447	0.5	25	65	8.7	748	0.2	11
85 and older	46	9.3	508	24	0.4	14	2.8	150	0.7	50	27	5.5	314	0.3	18
Male	15,911	5.6	177,581	24	0.4	10,111	3.6	114,243	0.6	56	52,106	18.4	594,168	0.2	9
Disabled	6,235	16.9	70,650	29	0.4	6,758	18.3	77,505	0.7	65	6,068	16.4	70,256	0.2	13
5 and younger	44	1.5	517	23	0.5	305	10.2	3,551	0.7	58	876	29.2	10,201	0.2	7
6-14	1,175	15.9	13,552	25	0.4	1,272	17.2	14,791	0.7	68	2,133	28.8	24,817	0.2	14
15-20	792	15.6	9,100	33	0.5	780	15.4	9,024	0.8	79	805	15.9	9,356	0.2	13
21-44	2,007	19.5	22,498	32	0.5	2,531	24.6	28,992	0.8	77	1,191	11.6	13,748	0.3	14
45-64	2,214	19.8	24,949	26	0.4	1,867	16.7	21,113	0.6	43	1,060	9.5	12,100	0.3	12
65-74	2	10.5	24	49	0.7	2	10.5	24	0.2	7	2	10.5	24	0.3	17
75-84	1	25.0	10	45	0.7	1	25.0	10	0.3	52	1	25.0	10	0.1	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	9,676	3.9	106,931	21	0.3	3,353	1.4	36,738	0.4	35	46,038	18.7	523,912	0.2	8
5 and younger	211	0.2	2,414	12	0.2	313	0.4	3,510	0.4	32	17,244	19.5	194,444	0.2	5
6-14	4,572	4.6	52,066	21	0.4	1,274	1.3	14,579	0.4	35	22,494	22.4	258,888	0.2	11
15-20	2,352	6.1	26,194	22	0.3	701	1.8	7,762	0.5	46	4,922	12.7	55,967	0.2	9
21-44	1,912	13.5	19,508	3	0.3	765	5.4	7,755	0.3	26	1,074	7.6	11,238	0.2	7
45-64	478	18.1	5,002	22	0.3	212	8.0	2,143	0.3	26	188	7.1	2,018	0.2	10
65-74	84	12.2	970	29	0.5	59	8.5	675	0.7	33	62	9.0	726	0.3	15
75-84	44	11.0	519	25	0.5	20	5.0	221	0.6	23	27	6.7	323	0.4	20
85 and older	23	9.7	258	26	0.4	9	3.8	93	0.4	18	27	11.3	308	0.3	12
Unknown	6	1.0	63	12	0.2	2	0.3	24	0.5	18	31	5.2	340	0.2	12

Nondual Beneficiaries

Table ND7B

Source: Data for this table are from the MAX 2002 file for South Carolina, 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, SOUTH CAROLINA, 2002

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS				ANTIVIRAL				ANALGESICS - Narcotic						
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
All	31,510	4.2 %	356,115	0.5	\$32	11,497	1.5 %	128,016	0.3	\$80	140,753	18.8 %	1,560,521	0.2	\$6
Female	8,558	1.8	96,691	0.4	30	7,520	1.6	83,466	0.2	67	102,155	22.0	1,131,860	0.2	5
Disabled	1,334	3.5	15,296	0.5	35	1,760	4.7	19,766	0.4	137	19,512	51.6	223,533	0.3	13
5 and younger	47	2.3	556	0.4	19	41	2.0	476	0.3	26	197	9.7	2,273	0.1	1
6-14	766	20.5	8,793	0.5	33	90	2.4	1,005	0.5	147	576	15.4	6,756	0.2	2
15-20	222	7.6	2,592	0.6	39	78	2.7	904	0.2	55	979	33.5	11,361	0.2	4
21-44	165	1.4	1,834	0.4	40	924	7.8	10,286	0.3	137	7,224	60.7	82,769	0.3	14
45-64	134	0.8	1,521	0.3	37	627	3.6	7,095	0.4	152	10,525	61.1	120,242	0.3	14
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	9	40.9	108	0.3	108
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	50.0	24	0.2	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	7,224	1.7	81,395	0.4	29	5,760	1.4	63,700	0.2	45	82,643	19.4	908,327	0.2	3
5 and younger	287	0.3	3,120	0.3	19	511	0.6	5,791	0.1	8	3,009	3.6	34,330	0.1	1
6-14	5,625	5.6	63,645	0.5	30	1,031	1.0	11,860	0.2	26	7,920	8.0	90,969	0.1	1
15-20	786	1.2	8,921	0.4	30	1,085	1.6	12,031	0.2	16	17,667	26.1	196,395	0.1	1
21-44	464	0.3	5,043	0.3	31	2,938	1.8	31,931	0.2	64	49,716	30.2	539,727	0.2	4
45-64	58	0.8	618	0.3	33	165	2.2	1,743	0.3	162	3,538	46.5	37,722	0.2	8
65-74	4	0.3	48	0.3	22	23	1.5	262	0.2	56	544	35.9	6,380	0.2	6
75-84	0	0.0	0	0.0	0	4	0.5	46	0.1	5	195	26.2	2,234	0.3	7
85 and older	0	0.0	0	0.0	0	3	0.6	36	0.1	6	54	10.9	570	0.3	12
Male	22,939	8.1	259,284	0.5	32	3,973	1.4	44,511	0.3	104	38,572	13.6	428,373	0.2	7
Disabled	3,960	10.7	45,072	0.5	36	1,902	5.1	20,986	0.4	177	10,899	29.5	122,981	0.3	17
5 and younger	168	5.6	1,879	0.3	18	51	1.7	597	0.4	47	328	10.9	3,832	0.1	1
6-14	2,889	39.0	32,951	0.5	36	127	1.7	1,482	0.4	80	947	12.8	11,157	0.1	2
15-20	735	14.5	8,343	0.5	35	82	1.6	943	0.2	54	1,078	21.2	12,440	0.2	4
21-44	120	1.2	1,352	0.6	47	976	9.5	10,495	0.4	180	3,550	34.5	39,927	0.3	19
45-64	48	0.4	547	0.5	49	666	6.0	7,469	0.5	217	4,985	44.5	55,519	0.3	22
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	9	47.4	91	0.2	1
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	50.0	15	0.3	29
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	18,979	7.7	214,212	0.5	31	2,071	0.8	23,525	0.2	39	27,673	11.3	305,392	0.2	4
5 and younger	846	1.0	9,497	0.3	18	546	0.6	6,192	0.1	9	4,311	4.9	49,078	0.1	1
6-14	15,867	15.8	179,120	0.5	32	857	0.9	9,949	0.1	19	8,203	8.2	94,614	0.1	1
15-20	2,158	5.6	24,490	0.4	30	414	1.1	4,727	0.1	21	6,943	17.9	77,348	0.1	1
21-44	85	0.6	857	0.3	37	199	1.4	2,087	0.3	174	6,507	46.1	66,175	0.2	10
45-64	21	0.8	224	0.4	24	48	1.8	499	0.5	370	1,411	53.3	14,768	0.3	14
65-74	1	0.1	12	1.0	112	6	0.9	59	0.4	214	171	24.7	1,955	0.2	9
75-84	1	0.2	12	0.8	17	0	0.0	0	0.0	0	83	20.7	963	0.3	14
85 and older	0	0.0	0	0.0	0	1	0.4	12	0.1	5	44	18.5	491	0.3	14
Unknown	13	2.2	140	0.5	24	4	0.7	39	0.3	248	26	4.3	288	0.2	14

Table ND7C
 Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for South Carolina, 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, SOUTH CAROLINA, 2002

Beneficiary Characteristics	ANTIDIABETIC				ULCER DRUGS				Mean Rx \$	Mean No. of Rx	Mean No. of Bene among Users	Users as % of All Benes	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean No. of Bene among Users	Users as % of All Benes	No. of Users	No. of Bene	Mean Rx \$	Mean No. of Rx	Mean No. of Bene among Users	Users as % of All Benes	No. of Users	No. of Bene	
	No. of Users	Users as % of All Benes	No. of Bene among Users	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene among Users	Mean No. of Rx																		No. of Users
All	22,722	3.0%	252,091	0.5	\$32	48,965	6.6%	541,080	0.2	\$14	747,384		7,471,042													
Female	17,160	3.7	190,991	0.5	32	32,328	7.0	359,310	0.2	14	464,089		4,617,033													
Disabled	9,598	25.4	110,157	0.6	35	10,287	27.2	118,698	0.3	22	37,849		408,683													
5 and younger	6	0.3	70	0.2	17	387	19.0	4,331	0.3	23	2,035		21,094													
6-14	70	1.9	819	0.6	35	355	9.5	4,118	0.3	30	3,742		41,437													
15-20	110	3.8	1,254	0.6	41	418	14.3	4,797	0.3	30	2,919		31,924													
21-44	1,763	14.8	20,095	0.5	32	2,763	23.2	31,943	0.3	18	11,895		128,987													
45-64	7,647	44.4	87,903	0.6	35	6,356	36.9	73,417	0.3	23	17,231		185,067													
65-74	2	9.1	16	0.7	39	7	31.8	80	0.5	32	22		132													
75-84	0	0.0	0	0.0	0	1	25.0	12	0.2	4	4		38													
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1		4													
Other Eligibles	7,562	1.8	80,834	0.5	27	22,041	5.2	240,612	0.2	10	426,240		4,208,350													
5 and younger	41	0.0	469	0.6	29	3,442	4.1	33,265	0.2	7	83,857		796,972													
6-14	404	0.4	4,700	0.6	40	3,652	3.7	42,304	0.1	9	99,568		1,052,707													
15-20	655	1.0	7,239	0.5	33	3,848	5.7	43,443	0.1	8	67,629		674,880													
21-44	4,084	2.5	42,787	0.4	23	9,109	5.5	99,603	0.2	10	164,826		1,586,384													
45-64	1,523	20.0	15,734	0.5	30	1,351	17.8	14,578	0.3	17	7,607		71,719													
65-74	657	43.4	7,659	0.6	32	431	28.4	5,015	0.3	21	1,515		16,120													
75-84	165	22.2	1,886	0.6	25	156	21.0	1,819	0.4	25	744		6,511													
85 and older	33	6.7	360	0.6	28	52	10.5	585	0.4	28	494		3,057													
Male	5,561	2.0	61,088	0.5	32	16,631	5.9	181,708	0.2	15	282,695		2,851,480													
Disabled	3,494	9.4	39,263	0.5	32	5,575	15.1	64,067	0.3	25	36,978		389,831													
5 and younger	15	0.5	166	0.5	20	512	17.1	5,827	0.3	27	2,998		31,360													
6-14	46	0.6	535	0.7	36	595	8.0	6,987	0.3	30	7,407		81,710													
15-20	90	1.8	1,037	0.6	38	448	8.8	5,231	0.3	27	5,076		54,560													
21-44	761	7.4	8,661	0.5	31	1,325	12.9	15,102	0.3	24	10,280		108,610													
45-64	2,576	23.0	28,796	0.5	32	2,691	24.0	30,872	0.3	24	11,193		113,441													
65-74	4	21.1	48	0.4	28	4	21.1	48	0.2	12	19		118													
75-84	2	50.0	20	0.3	18	0	0.0	0	0.0	0	4		29													
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1		3													
Other Eligibles	2,067	0.8	21,825	0.5	33	11,056	4.5	117,641	0.2	10	245,717		2,461,649													
5 and younger	64	0.1	738	0.6	33	4,130	4.7	39,959	0.2	8	88,342		839,114													
6-14	322	0.3	3,651	0.6	40	3,320	3.3	38,373	0.2	9	100,446		1,065,675													
15-20	279	0.7	3,032	0.6	42	1,709	4.4	19,253	0.2	11	38,833		398,494													
21-44	674	4.8	6,777	0.5	29	1,256	8.9	13,130	0.2	15	14,118		122,654													
45-64	475	17.9	4,706	0.5	30	407	15.4	4,224	0.3	20	2,648		23,956													
65-74	152	22.0	1,750	0.6	33	134	19.4	1,547	0.4	22	691		6,663													
75-84	65	16.2	767	0.6	28	61	15.2	710	0.4	32	401		3,340													
85 and older	36	15.1	404	0.7	25	39	16.4	445	0.4	25	238		1,753													
Unknown	1	0.2	12	0.9	19	6	1.0	62	0.1	8	600		2,529													

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for South Carolina, 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, SOUTH CAROLINA, 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	\$92	1.7	637	7,031
Age				
0-64	101	1.8	378	4,262
65-74	76	1.5	63	739
75-84	73	1.4	101	1,021
85 and older	83	1.6	95	1,009
Unknown	0	0.0	0	0
Gender				
Female	97	1.7	357	4,012
Male	86	1.6	280	3,019
Unknown	0	0.0	0	0
Race				
White	95	1.8	254	2,684
African American	94	1.6	332	3,776
Other/unknown	65	1.3	51	571
Basis of Eligibility^c				
Aged	78	1.5	261	2,787
Disabled	101	1.8	376	4,244
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2002 file for South Carolina, 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 466 beneficiaries who were in nursing facilities for part of their enrollment and their 4,401 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, SOUTH CAROLINA, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx			Total Rx \$			Users					
	Patented			Off-Patent			Generic			Patented			Off-Patent			Generic		
	Total	Brand-Name	Off-Patent	Brand-Name	Off-Patent	Generic	Total	Brand-Name	Off-Patent	Brand-Name	Off-Patent	Generic	Total # of Rx	Total Rx \$	No.	As % of All-Year NF Residents	No. of Bene Mos	
Anti-infective Agents	0.3	0.2	0.0	0.1	\$43	\$38	\$2	\$3	\$139	\$199	\$135	\$32	591	\$82,234	166	26.1 %	1,918	
Biologicals	0.1	0.1	0.0	0.0	1	1	0	1	14	13	0	18	18	260	16	2.5	192	
Antineoplastic Agents	0.4	0.1	0.0	0.3	47	8	5	34	110	110	148	107	68	7,503	14	2.2	159	
Endocrine/Metabolic Drugs	0.7	0.4	0.1	0.3	35	29	1	4	47	76	29	14	1,010	47,882	119	18.7	1,357	
Cardiovascular Agents	1.3	0.4	0.1	0.8	40	27	2	11	31	59	28	15	2,701	84,782	186	29.2	2,138	
Respiratory Agents	0.4	0.2	0.1	0.2	20	10	6	4	52	69	77	24	436	22,685	98	15.4	1,130	
Gastrointestinal Agents	0.6	0.1	0.0	0.5	24	9	0	14	41	102	63	29	934	38,546	141	22.1	1,627	
Genitourinary Agents	0.4	0.3	0.0	0.1	19	17	0	2	51	67	0	17	160	8,092	36	5.7	418	
CNS Drugs	0.9	0.5	0.0	0.4	71	57	2	13	76	116	64	31	2,191	165,766	202	31.7	2,322	
Stimulants/Anti-obesity/Anorexia	0.5	0.0	0.1	0.4	12	0	6	7	25	0	38	20	24	597	4	0.6	48	
Miscellaneous Psychological/Neurological Agents	0.4	0.4	0.0	0.0	49	49	0	0	130	130	0	0	89	11,567	22	3.5	237	
Analgesics and Anesthetics	0.5	0.2	0.0	0.2	30	25	1	4	62	116	36	17	660	40,911	121	19.0	1,371	
Neuromuscular Agents	0.9	0.3	0.1	0.5	45	23	7	15	52	93	56	30	1,463	76,486	144	22.6	1,695	
Nutritional Products	0.4	0.0	0.0	0.4	6	0	0	6	13	39	13	13	308	4,055	61	9.6	686	
Hematological Agents	0.6	0.3	0.1	0.2	44	40	3	2	74	128	21	12	498	36,710	73	11.5	830	
Topical Products	0.3	0.1	0.0	0.2	12	7	2	3	38	57	72	19	452	17,158	118	18.5	1,383	
Miscellaneous Products	0.4	0.2	0.0	0.2	21	6	0	15	51	26	0	81	22	1,127	5	0.8	53	
Unknown Therapeutic Category	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0	
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	11,625	646,361	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2002 file for South Carolina, 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 466 beneficiaries who were in nursing facilities for part of their enrollment and their 4,401 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 South Carolina, 0.1 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, SOUTH CAROLINA, 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	\$94,925	110	17.3 %	1,293	0.5	\$138	\$73
ANTICONVULSANT	62,395	151	23.7	1,774	0.6	55	35
ANTIDEPRESSANTS	56,731	165	25.9	1,911	0.5	58	30
ANTIDIABETIC	41,921	132	20.7	1,553	0.5	52	27
ANTIHYPERTENSIVE	28,886	138	21.7	1,589	0.5	33	18
ULCER DRUGS	27,494	119	18.7	1,386	0.5	44	20
MISC. HEMATOLOGICAL	26,303	39	6.1	454	0.6	99	58
ANTIVIRAL	25,300	15	2.4	180	0.4	320	141
CALCIUM BLOCKERS	23,587	70	11.0	805	0.5	54	29
ANALGESICS - Narcotic	20,701	95	14.9	1,056	0.3	68	20
Total	408,243	1,034		12,001	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for South Carolina, 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 466 beneficiaries who were in nursing facilities for part of their enrollment and their 4,401 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, SOUTH CAROLINA, 2002

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTICONVULSANT				
	No. of Rx	Rx \$	Users as %			Mean Rx \$	No. of Users	Users as %			Mean Rx \$	No. of Users	Users as %		
			No. of Bene Mos among	NF Residents	All-Year Residents			No. of Bene Mos among	NF Residents	All-Year Residents			No. of Bene Mos among	NF Residents	All-Year Residents
All	6,170	\$408,243	110	17.3 %	1,293	0.5	\$73	151	23.7 %	1,774	0.6	\$55			
Female	3,569	238,995	57	16.0	666	0.6	78	85	23.8	1,000	0.6	34			
Disabled	2,255	164,197	33	16.2	388	0.7	98	60	29.4	715	0.6	33			
64 or younger	2,255	164,197	33	16.2	388	0.7	98	60	29.4	715	0.6	33			
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
Other Eligibles	1,314	74,798	24	15.7	278	0.5	49	25	16.3	285	0.7	38			
64 or younger	1	5	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	573	33,398	9	23.1	108	0.9	66	17	43.6	204	0.7	39			
75-84	366	22,216	8	15.1	86	0.4	52	5	9.4	45	0.4	33			
85 and older	374	19,179	7	11.7	84	0.3	25	3	5.0	36	0.8	36			
Male	2,601	169,248	53	18.9	627	0.4	69	66	23.6	774	0.6	36			
Disabled	1,751	117,562	33	19.2	391	0.5	78	52	30.2	614	0.7	37			
64 or younger	1,751	117,562	33	19.3	391	0.5	78	52	30.4	614	0.7	37			
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
Other Eligibles	850	51,686	20	18.5	236	0.4	54	14	13.0	160	0.6	34			
64 or younger	20	460	0	0.0	0	0.0	0	1	50.0	12	0.8	21			
65-74	138	6,699	2	8.3	24	0.5	49	6	25.0	72	0.7	45			
75-84	335	22,576	10	21.3	116	0.4	58	5	10.6	60	0.6	27			
85 and older	357	21,951	8	22.9	96	0.3	50	2	5.7	16	0.3	18			
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 South Carolina, 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 466 beneficiaries who were in nursing facilities for part of their enrollment and their 4,401 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, SOUTH CAROLINA, 2002

Beneficiary Characteristics	ANTIDEPRESSANTS						ANTIDIABETIC						ANTIHYPERTENSIVE					
	Users as %			Mean			Users as %			Mean			Users as %			Mean		
	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	Residents	NF	All-Year	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	Residents	NF	All-Year	No. of Users	No. of Bene Mos among Users	Mean No. of Rx
All	165	25.9 %	0.5	1,911	0.5	\$30	132	20.7 %	1,553	0.5	\$27	138	21.7 %	1,589	0.5	\$18		
Female	89	24.9	0.5	1,007	0.5	29	86	24.1	1,015	0.5	28	74	20.7	854	0.5	17		
Disabled	60	29.4	0.5	688	0.5	28	53	26.0	619	0.5	26	42	20.6	493	0.5	16		
64 or younger	60	29.4	0.5	688	0.5	28	53	26.0	619	0.5	26	42	20.6	493	0.5	16		
65-74	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
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		
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		
Other Eligibles	29	19.0	0.5	319	0.5	30	33	21.6	396	0.6	32	32	20.9	361	0.5	18		
64 or younger	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	2	0.5	3		
65-74	6	15.4	0.6	72	0.6	50	16	41.0	192	0.6	39	6	15.4	72	0.7	28		
75-84	15	28.3	0.4	151	0.4	22	7	13.2	84	0.7	29	14	26.4	163	0.5	13		
85 and older	8	13.3	0.4	96	0.4	27	10	16.7	120	0.6	23	11	18.3	124	0.5	18		
Male	76	27.1	0.5	904	0.5	31	46	16.4	538	0.5	25	64	22.9	735	0.6	20		
Disabled	47	27.3	0.5	564	0.5	36	27	15.7	324	0.5	23	43	25.0	511	0.6	22		
64 or younger	47	27.5	0.5	564	0.5	36	27	15.8	324	0.5	23	43	25.1	511	0.6	22		
65-74	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
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		
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		
Other Eligibles	29	26.9	0.4	340	0.4	22	19	17.6	214	0.6	27	21	19.4	224	0.5	15		
64 or younger	0	0.0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
65-74	5	20.8	0.5	60	0.5	15	3	12.5	36	0.3	7	5	20.8	60	0.4	10		
75-84	14	29.8	0.4	161	0.4	21	6	12.8	72	0.5	30	11	23.4	104	0.6	23		
85 and older	10	28.6	0.4	119	0.4	28	10	28.6	106	0.7	33	5	14.3	60	0.5	8		
Unknown	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 South Carolina, 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 466 beneficiaries who were in nursing facilities for part of their enrollment and their 4,401 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, SOUTH CAROLINA, 2002

Beneficiary Characteristics	ULCER DRUGS						MISC. HEMATOLOGICAL						ANTIVIRAL					
	Users as %			Mean			Users as %			Mean			Users as %			Mean		
	No. of Users	No. of Bene among Users	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Residents	NF	Mos among Users	No. of Users	No. of Bene among Users	Mean No. of Rx	Residents	NF	Mos among Users	No. of Users	No. of Bene among Users	Mean No. of Rx
All	119	1,386	0.5	39	454	0.6	6.1 %	39	15	180	0.4	2.4 %	15	180	0.4	141	141	141
Female	67	769	0.4	18	208	0.5	5.0	18	15	180	0.4	4.2	15	180	0.4	141	141	141
Disabled	38	434	0.5	6	72	0.6	2.9	6	13	156	0.5	6.4	13	156	0.5	161	161	161
64 or younger	38	434	0.5	6	72	0.6	2.9	6	13	156	0.5	6.4	13	156	0.5	161	161	161
65-74	0	0	0.0	0	0	0.0	0.0	0	0	0	0.0	0.0	0	0	0.0	0	0	0
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
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
Other Eligibles	29	335	0.4	12	136	0.5	7.8	12	2	24	0.1	1.3	2	24	0.1	7	7	7
64 or younger	0	0	0.0	0	0	0.0	0.0	0	0	0	0.0	0.0	0	0	0.0	0	0	0
65-74	5	60	0.6	3	36	0.6	7.7	3	0	0	0.0	0.0	0	0	0.0	0	0	0
75-84	12	141	0.2	4	40	0.9	7.5	4	1	12	0.1	1.9	1	12	0.1	2	2	2
85 and older	12	134	0.4	5	60	0.3	8.3	5	1	12	0.1	1.7	1	12	0.1	12	12	12
Male	52	617	0.5	21	246	0.6	7.5	21	0	0	0.0	0.0	0	0	0.0	0	0	0
Disabled	30	360	0.5	13	150	0.6	7.6	13	0	0	0.0	0.0	0	0	0.0	0	0	0
64 or younger	30	360	0.5	13	150	0.6	7.6	13	0	0	0.0	0.0	0	0	0.0	0	0	0
65-74	0	0	0.0	0	0	0.0	0.0	0	0	0	0.0	0.0	0	0	0.0	0	0	0
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
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
Other Eligibles	22	257	0.4	8	96	0.7	7.4	8	0	0	0.0	0.0	0	0	0.0	0	0	0
64 or younger	1	12	0.8	0	0	0.0	0.0	0	0	0	0.0	0.0	0	0	0.0	0	0	0
65-74	3	36	0.5	0	0	0.0	0.0	0	0	0	0.0	0.0	0	0	0.0	0	0	0
75-84	7	84	0.5	1	12	0.9	2.1	1	0	0	0.0	0.0	0	0	0.0	0	0	0
85 and older	11	125	0.4	7	84	0.6	20.0	7	0	0	0.0	0.0	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	0	0	0

Source: Data for this table are from the MAX 2002 file for South Carolina, 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 466 beneficiaries who were in nursing facilities for part of their enrollment and their 4,401 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, SOUTH CAROLINA, 2002

Beneficiary Characteristics	CALCIUM BLOCKERS					ANALGESICS - Narcotic					Bene Mos among All-Year NF Residents	
	Users as %		Mean		No. of Bene Users	Users as %		Mean		No. of Bene Users		
	No. of Users	Residents	Rx	Rx-\$		No. of Users	Residents	Rx	Rx-\$			
All	70	11.0 %	0.5	\$29	805	95	14.9 %	0.3	\$20	1,056	637	7,031
Female	49	13.7	0.5	27	575	60	16.8	0.3	22	668	357	4,012
Disabled	30	14.7	0.5	29	350	43	21.1	0.3	21	484	204	2,350
64 or younger	30	14.7	0.5	29	350	43	21.1	0.3	21	484	204	2,350
65-74	0	0.0	0.0	0	0	0	0.0	0.0	0	0	0	0
75-84	0	0.0	0.0	0	0	0	0.0	0.0	0	0	0	0
85 and older	0	0.0	0.0	0	0	0	0.0	0.0	0	0	0	0
Other Eligibles	19	12.4	0.5	24	225	17	11.1	0.3	25	184	153	1,662
64 or younger	0	0.0	0.0	0	0	0	0.0	0.0	0	0	1	2
65-74	6	15.4	0.7	32	72	5	12.8	0.3	15	60	39	465
75-84	5	9.4	0.4	17	57	7	13.2	0.2	24	74	53	548
85 and older	8	13.3	0.5	22	96	5	8.3	0.6	39	50	60	647
Male	21	7.5	0.6	35	230	35	12.5	0.3	15	388	280	3,019
Disabled	10	5.8	0.7	44	120	21	12.2	0.2	16	241	172	1,894
64 or younger	10	5.8	0.7	44	120	21	12.3	0.2	16	241	171	1,892
65-74	0	0.0	0.0	0	0	0	0.0	0.0	0	0	0	0
75-84	0	0.0	0.0	0	0	0	0.0	0.0	0	0	1	2
85 and older	0	0.0	0.0	0	0	0	0.0	0.0	0	0	0	0
Other Eligibles	11	10.2	0.6	26	110	14	13.0	0.3	13	147	108	1,125
64 or younger	0	0.0	0.0	0	0	0	0.0	0.0	0	0	2	18
65-74	1	4.2	0.2	8	12	0	0.0	0.0	0	0	24	274
75-84	7	14.9	0.6	31	63	3	6.4	0.2	10	29	47	471
85 and older	3	8.6	0.7	25	35	11	31.4	0.4	14	118	35	362
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 South Carolina, 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 466 beneficiaries who were in nursing facilities for part of their enrollment and their 4,401 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}
 SOUTH CAROLINA, 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 Nonduals Rx \$	Total No. of Benes
			Excl Rx	Bene						
All	205,821	27.5 %	0.7	527,856	\$13	\$10,064,746	\$19	4.5 %	747,384	
Age										
5 and younger	70,856	40.0	0.9	159,906	16	2,759,066	17	10.4	177,304	
6-14	57,114	27.0	0.5	110,969	11	2,344,274	21	4.6	211,231	
15-20	24,955	21.8	0.5	53,207	11	1,213,008	23	4.9	114,483	
21-44	36,823	18.3	0.6	119,847	11	2,256,327	19	3.4	201,155	
45-64	14,912	38.5	2.0	77,553	36	1,388,547	18	2.6	38,684	
65-74	743	33.0	1.8	4,005	29	65,282	16	2.4	2,253	
75-84	283	24.5	1.4	1,581	22	25,926	16	2.7	1,155	
85 and older	135	18.3	1.1	788	17	12,316	16	3.1	736	
Unknown	0	0.0	0.0	0	0	0	0	0.0	383	
Basis of Eligibility^c										
Aged	1,193	28.3	1.6	6,634	26	109,712	17	2.6	4,212	
Disabled	28,255	37.8	1.8	134,917	37	2,747,531	20	2.7	74,832	
Adults	36,421	16.6	0.4	98,861	8	1,770,917	18	4.2	219,743	
Children	139,923	31.2	0.6	287,349	12	5,435,630	19	7.1	448,506	
Unknown	29	31.9	1.0	95	11	956	10	1.2	91	
Gender										
Female	121,684	26.2	0.7	324,435	13	6,071,921	19	4.6	464,289	
Male	84,095	29.7	0.7	203,340	14	3,991,714	20	4.2	282,877	
Unknown	42	19.3	0.4	81	5	1,111	14	2.8	218	
Race										
White	94,208	31.1	0.9	268,476	17	5,083,790	19	4.7	302,798	
African American	97,584	24.6	0.5	215,619	10	4,095,243	19	4.4	396,682	
Other/unknown	14,029	29.3	0.9	43,761	18	885,713	20	3.8	47,904	
Use of Nursing Facilities^d										
Entire year	141	22.1	1.3	857	20	13,049	15	2.0	637	
Part year	181	38.8	1.7	815	31	14,478	18	1.9	466	
None	205,499	27.5	0.7	526,184	13	10,037,219	19	4.5	746,281	
Maintenance Assistance Status										
Cash	76,535	33.4	1.1	248,802	20	4,637,111	19	3.5	228,994	
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0	
Poverty related	99,018	29.6	0.6	207,594	12	3,947,549	19	6.4	335,036	
Other/unknown	30,268	16.5	0.4	71,460	8	1,480,086	21	4.6	183,354	

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for South Carolina, 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}
 SOUTH CAROLINA, 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	\$1	\$19	\$0	\$0	7,471,042
Age						
5 and younger	0.1	2	17	0	0	1,688,969
6-14	0.0	1	21	0	0	2,242,261
15-20	0.0	1	23	0	0	1,160,127
21-44	0.1	1	19	0	0	1,946,919
45-64	0.2	4	18	0	2	394,223
65-74	0.2	3	16	0	1	23,096
75-84	0.2	3	16	0	1	9,937
85 and older	0.2	3	16	0	1	4,821
Unknown	0.0	0	0	0	0	689
Basis of Eligibility^c						
Aged	0.2	3	17	0	1	38,598
Disabled	0.2	3	20	0	1	798,546
Adults	0.0	1	18	0	0	2,094,027
Children	0.1	1	19	0	0	4,539,159
Unknown	0.1	1	10	0	1	712
Gender						
Female	0.1	1	19	0	0	4,617,408
Male	0.1	1	20	0	0	2,851,789
Unknown	0.0	1	14	0	0	1,845
Race						
White	0.1	2	19	0	0	2,974,630
African American	0.1	1	19	0	0	4,046,488
Other/unknown	0.1	2	20	0	1	449,924
Use of Nursing Facilities^d						
Entire year	0.1	2	15	0	1	7,031
Part year	0.2	3	18	0	2	4,401
None	0.1	1	19	0	0	7,459,610
Maintenance Assistance Status						
Cash	0.1	2	19	0	1	2,282,520
Medically needy	0.0	0	0	0	0	0
Poverty related	0.1	1	19	0	0	3,309,368
Other/unknown	0.0	1	21	0	0	1,879,154

Table ND12

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for South Carolina, 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}
 SOUTH CAROLINA, 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	236,371	\$43	\$10,064,746	100.0 %	527,856	\$19	100.0 %
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	15	85	1,281	0.0	18	71	0.0
Drugs for cosmetic purposes	190	11	2,051	0.0	257	8	0.0
Cough and cold medications	167,897	41	6,930,079	68.9	323,875	21	61.4
Vitamins and minerals	11,213	47	522,208	5.2	35,542	15	6.7
Non-prescription drugs	26,638	10	276,827	2.8	41,181	7	7.8
Barbiturates	1,521	29	43,865	0.4	9,737	5	1.8
Benzodiazepines	21,911	79	1,739,207	17.3	103,895	17	19.7
Other Part D Excl Rx Drugs	6,986	79	549,228	5.5	13,351	41	2.5

Source: Data for this table are from the MAX 2002 file for South Carolina, 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, SOUTH CAROLINA, 2002

Beneficiary Characteristics	No. of Benes					No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	794,242	4,227	77,767	224,074	488,083	91	8,247,136	38,836	846,863	2,177,118	5,183,607	712
Age												
5 and younger	191,354	2	5,262	5	186,085	0	1,932,611	14	56,413	6	1,876,178	0
6-14	232,586	0	12,104	18	220,464	0	2,580,844	0	138,362	53	2,442,429	0
15-20	121,120	2	8,499	31,732	80,887	0	1,262,599	24	94,407	306,354	861,814	0
21-44	205,055	10	22,809	181,965	270	1	2,022,711	75	248,614	1,771,511	2,503	8
45-64	39,585	123	29,041	10,329	2	90	409,599	1,137	308,740	99,002	16	704
65-74	2,266	2,216	41	8	1	0	23,294	22,951	250	88	5	0
75-84	1,157	1,146	8	3	0	0	9,968	9,871	67	30	0	0
85 and older	736	728	2	6	0	0	4,821	4,764	7	50	0	0
Unknown	383	0	1	8	374	0	689	0	3	24	662	0
Gender												
Female	489,031	2,860	39,375	203,213	243,492	91	5,036,890	26,762	434,407	1,986,317	2,588,692	712
Male	304,993	1,357	38,388	20,819	244,429	0	3,208,401	11,988	412,427	190,446	2,593,540	0
Unknown	218	10	4	42	162	0	1,845	86	29	355	1,375	0
Race												
White	315,171	1,454	25,581	100,185	187,908	43	3,189,619	12,076	273,283	955,148	1,948,747	365
African American	429,058	2,080	36,527	116,372	274,033	46	4,569,283	19,686	401,382	1,167,459	2,980,423	333
Other/unknown	50,013	693	15,659	7,517	26,142	2	488,234	7,074	172,198	54,511	254,437	14
Use of Nursing Facilities^c												
Entire year	637	261	376	0	0	0	7,032	2,787	4,245	0	0	0
Part year	467	143	317	6	1	0	4,462	1,285	3,108	57	12	0
None	793,138	3,823	77,074	224,068	488,082	91	8,235,642	34,764	839,510	2,177,061	5,183,595	712
Maintenance Assistance Status												
Cash	243,811	2,318	67,722	71,827	101,944	0	2,544,971	24,222	751,374	690,067	1,079,308	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	358,200	1,125	5,812	21,489	329,683	91	3,687,982	9,960	50,989	159,909	3,466,412	712
Other/unknown	192,231	784	4,233	130,758	56,456	0	2,014,183	4,654	44,500	1,327,142	637,887	0
Managed Care Status												
FFS all year	705,267	4,202	72,385	212,799	415,790	91	7,239,288	38,555	784,036	2,055,189	4,360,796	712
FFS part year, with Rx claims	25,488	7	1,950	4,974	18,557	0	289,092	84	22,768	54,803	211,437	0
FFS part year, no Rx claims	16,629	3	497	1,970	14,159	0	181,233	28	5,694	20,678	154,833	0
MC all year, with Rx claims	11,807	3	1,099	1,118	9,587	0	138,094	36	13,054	12,526	112,478	0
MC all year, no Rx claims	35,051	12	1,836	3,213	29,990	0	399,429	133	21,311	33,922	344,063	0

Source: Data for this table are from the MAX 2002 file for South Carolina, 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, SOUTH CAROLINA, 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	794,242	8,247,136	747,384	7,471,042	0	776,094
FFS all year	705,267	7,239,288	705,267	7,239,288	0	0
FFS part year, with Rx claims	25,488	289,092	25,488	154,331	0	134,761
FFS part year, with no Rx claims	16,629	181,233	16,629	77,423	0	103,810
MC all year, with Rx claims	11,807	138,094	0	0	0	138,094
MC all year, with no Rx claims	35,051	399,429	0	0	0	399,429

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