

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2002 TEXAS

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TABLE ND.2  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 2002

Beneficiary Characteristics	No. of Benes							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown		
<b>All</b>	<b>2,426,935</b>	<b>4,297</b>	<b>231,032</b>	<b>417,496</b>	<b>1,774,056</b>	<b>54</b>	<b>16,776,482</b>	<b>39,918</b>	<b>2,288,357</b>	<b>2,310,632</b>	<b>12,137,421</b>	<b>154</b>		
<b>Age</b>														
5 and younger	878,547	0	13,309	25	865,213	0	5,833,035	0	126,684	170	5,706,181	0		
6-14	736,662	0	32,361	470	703,831	0	5,364,094	0	342,103	2,697	5,019,294	0		
15-20	301,974	0	23,152	74,043	204,779	0	2,037,759	0	240,633	386,262	1,410,864	0		
21-44	389,884	4	71,010	318,654	200	16	2,470,070	17	708,174	1,760,870	959	50		
45-64	115,438	46	91,102	24,238	14	38	1,030,778	209	870,217	160,197	51	104		
65-74	1,913	1,778	89	43	3	0	17,599	16,784	499	307	9	0		
75-84	1,393	1,383	2	7	1	0	13,241	13,155	16	58	12	0		
85 and older	1,120	1,086	7	16	11	0	9,899	9,753	31	71	44	0		
Unknown	4	0	0	0	4	7	0	0	0	0	7	0		
<b>Gender</b>														
Female	1,366,104	2,851	116,649	375,546	871,004	54	9,230,689	26,443	1,170,726	2,068,758	5,964,608	154		
Male	1,060,801	1,437	114,381	41,950	903,033	0	7,545,709	13,450	1,117,625	241,874	6,172,760	0		
Unknown	30	9	2	0	19	0	84	25	6	0	53	0		
<b>Race</b>														
White	581,205	1,967	84,784	123,237	371,198	19	4,024,509	18,360	846,340	655,987	2,503,774	48		
African American	457,256	611	55,731	83,639	317,268	7	2,997,201	6,029	546,458	437,483	2,007,214	17		
Other/unknown	1,388,474	1,719	90,517	210,620	1,085,590	28	9,754,772	15,529	895,559	1,217,162	7,626,433	89		
<b>Use of Nursing Facilities<sup>c</sup></b>														
Entire year	4,592	1,175	3,413	3	1	0	47,485	11,267	36,206	9	3	0		
Part year	3,282	462	2,785	30	5	0	31,338	4,130	26,976	189	43	0		
None	2,419,061	2,660	224,834	417,463	1,774,050	54	16,697,659	24,521	2,225,175	2,310,434	12,137,375	154		
<b>Maintenance Assistance Status</b>														
Cash	641,275	2,288	223,974	128,992	286,021	0	5,183,789	21,549	2,217,109	772,492	2,172,639	0		
Medically needy	65,598	0	0	65,076	522	0	391,417	0	0	389,250	2,167	0		
Poverty-related	1,453,055	13	21	173,561	1,279,406	54	9,158,547	147	186	755,505	8,402,555	154		
Other/unknown	267,007	1,996	7,037	49,867	208,107	0	2,042,729	18,222	71,062	393,385	1,560,060	0		
<b>Managed Care Status</b>														
FFS all year	1,774,018	4,122	214,458	306,101	1,249,283	54	14,817,724	39,267	2,212,706	2,014,615	10,550,982	154		
FFS part year, with Rx claims	448,791	145	14,356	88,094	346,196	0	1,366,493	540	65,780	238,771	1,061,402	0		
FFS part year, no Rx claims	204,126	30	2,218	23,301	178,577	0	592,265	111	9,871	57,246	525,037	0		

Table ND2

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Texas, 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<sup>a,b</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 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	69.6 %	6.4	\$323	\$50	\$2,589	12.5 %	2,426,935
<b>Age</b>							
5 and younger	72.7	6.1	171	28	2,095	8.2	878,547
6-14	64.6	4.9	247	50	1,350	18.3	736,662
15-20	65.0	5.0	286	58	2,284	12.5	301,974
21-44	73.2	7.2	475	66	4,138	11.5	389,884
45-64	77.2	18.7	1,487	79	9,384	15.8	115,438
65-74	75.7	22.0	1,462	67	11,173	13.1	1,913
75-84	83.6	37.2	2,073	56	15,208	13.6	1,393
85 and older	87.4	40.1	1,938	48	17,636	11.0	1,120
Unknown	0.0	0.0	0	0	45	0.0	4
<b>Basis of Eligibility<sup>c</sup></b>							
Aged	81.0	31.9	1,802	57	14,128	12.8	4,297
Disabled	77.5	17.3	1,530	89	11,278	13.6	231,032
Adults	73.6	5.5	244	44	2,484	9.8	417,496
Children	67.6	5.1	181	35	1,454	12.4	1,774,056
Unknown	22.2	0.8	33	42	6,199	0.5	54
<b>Gender</b>							
Female	71.4	6.6	316	48	2,568	12.3	1,366,104
Male	67.2	6.2	331	53	2,617	12.7	1,060,801
Unknown	26.7	4.1	194	47	3,069	6.3	30
<b>Race</b>							
White	70.5	7.7	486	63	3,550	13.7	581,205
African American	63.3	5.6	296	53	2,548	11.6	457,256
Other/unknown	71.3	6.1	263	43	2,200	12.0	1,388,474
<b>Use of Nursing Facilities<sup>d</sup></b>							
Entire year	98.2	76.8	4,622	60	39,152	11.8	4,592
Part year	98.1	53.5	3,538	66	40,114	8.8	3,282
None	69.5	6.2	310	50	2,469	12.6	2,419,061
<b>Maintenance Assistance Status</b>							
Cash	73.1	9.8	674	69	4,848	13.9	641,275
Medically needy	65.8	5.7	315	55	2,841	11.1	65,598
Poverty related	67.5	4.7	160	34	1,362	11.8	1,453,055
Other/unknown	73.8	7.5	366	49	3,782	9.7	267,007

Source: Data for this table are from the MAX 2002 file for Texas, 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<sup>a,b</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 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	0.9	\$47	12.5 %	30.4 %	48.1 %	10.3 %	7.6 %	2.3 %	1.3 %	\$375	2,426,935	16,776,482
<b>Age</b>												
5 and younger	0.9	26	8.2	27.3	50.6	10.9	7.5	2.3	1.3	316	878,547	5,833,035
6-14	0.7	34	18.3	35.4	49.6	7.4	5.4	1.5	0.7	185	736,662	5,364,094
15-20	0.7	42	12.5	35.0	48.1	7.8	6.3	2.1	0.8	339	301,974	2,037,759
21-44	1.1	75	11.5	26.8	46.2	12.8	9.2	3.1	1.9	653	389,884	2,470,070
45-64	2.1	167	15.8	22.8	28.3	21.2	20.2	4.1	3.3	1,051	115,438	1,030,778
65-74	2.4	159	13.1	24.3	25.8	18.5	19.7	8.2	3.6	1,215	1,913	17,599
75-84	3.9	218	13.6	16.4	17.1	15.9	22.3	20.9	7.4	1,600	1,393	13,241
85 and older	4.5	219	11.0	12.6	12.4	11.7	31.4	25.1	6.8	1,995	1,120	9,899
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	26	4	7
<b>Basis of Eligibility<sup>c</sup></b>												
Aged	3.4	194	12.8	19.0	19.3	15.5	23.6	16.9	5.7	1,521	4,297	39,918
Disabled	1.7	155	13.6	22.5	36.1	17.8	17.3	3.8	2.5	1,139	231,032	2,288,357
Adults	1.0	44	9.8	26.4	48.5	11.9	8.4	3.1	1.8	449	417,496	2,310,632
Children	0.8	26	12.4	32.4	49.7	8.9	6.2	1.8	1.0	213	1,774,056	12,137,421
Unknown	0.3	12	0.5	77.8	14.8	5.6	1.9	0.0	0.0	2,174	54	154
<b>Gender</b>												
Female	1.0	47	12.3	28.6	48.9	10.7	8.0	2.5	1.4	380	1,366,104	9,230,689
Male	0.9	47	12.7	32.8	47.2	9.7	7.2	2.0	1.1	368	1,060,801	7,545,709
Unknown	1.5	69	6.3	73.3	6.7	3.3	10.0	3.3	3.3	1,096	30	84
<b>Race</b>												
White	1.1	70	13.7	29.5	46.2	11.2	9.0	2.6	1.5	513	581,205	4,024,509
African American	0.8	45	11.6	36.7	42.7	8.6	7.6	2.7	1.6	389	457,256	2,997,201
Other/unknown	0.9	38	12.0	28.7	50.8	10.4	7.1	2.0	1.1	313	1,388,474	9,754,772
<b>Use of Nursing Facilities<sup>d</sup></b>												
Entire year	7.4	447	11.8	1.8	3.0	4.9	27.7	42.4	20.2	3,786	4,592	47,485
Part year	5.6	371	8.8	1.9	8.3	11.2	37.4	29.5	11.6	4,201	3,282	31,338
None	0.9	45	12.6	30.5	48.3	10.3	7.6	2.2	1.2	358	2,419,061	16,697,659
<b>Maintenance Assistance Status</b>												
Cash	1.2	83	13.9	26.9	45.2	12.8	10.7	2.7	1.8	600	641,275	5,183,789
Medically needy	1.0	53	11.1	34.2	43.6	14.6	6.6	0.7	0.4	476	65,598	391,417
Poverty related	0.8	25	11.8	32.5	48.7	9.0	6.4	2.2	1.1	216	1,453,055	9,158,547
Other/unknown	1.0	48	9.7	26.2	53.5	9.9	7.1	2.2	1.1	494	267,007	2,042,729

Table ND4

Nondual Beneficiaries

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



TABLE ND.5  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 2002

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$	No. of Rx	Rx \$
<b>All</b>	<b>0.9</b>	<b>\$47</b>	<b>0.4</b>	<b>\$35</b>	<b>0.1</b>	<b>\$5</b>	<b>0.4</b>	<b>\$7</b>
<b>Age</b>								
5 and younger	0.9	26	0.3	17	0.1	3	0.5	6
6-14	0.7	34	0.3	25	0.1	5	0.3	5
15-20	0.7	42	0.3	32	0.1	5	0.3	5
21-44	1.1	75	0.5	58	0.1	7	0.6	11
45-64	2.1	167	1.0	134	0.1	11	0.9	22
65-74	2.4	159	1.2	127	0.2	9	1.1	23
75-84	3.9	218	1.8	169	0.3	13	1.9	37
85 and older	4.5	219	1.9	162	0.4	16	2.3	41
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Basis of Eligibility<sup>d</sup></b>								
Aged	3.4	194	1.6	150	0.3	12	1.6	32
Disabled	1.7	155	0.8	125	0.1	11	0.8	18
Adults	1.0	44	0.4	32	0.1	5	0.5	8
Children	0.8	26	0.3	18	0.1	4	0.4	5
Unknown	0.3	12	0.1	9	0.0	1	0.2	2
<b>Gender</b>								
Female	1.0	47	0.4	35	0.1	5	0.5	7
Male	0.9	47	0.4	35	0.1	5	0.4	7
Unknown	1.5	69	0.5	52	0.1	6	0.8	11
<b>Race</b>								
White	1.1	70	0.5	54	0.1	6	0.5	10
African American	0.8	45	0.4	35	0.1	4	0.4	7
Other/unknown	0.9	38	0.3	27	0.1	4	0.4	6
<b>Use of Nursing Facilities<sup>e</sup></b>								
Entire year	7.4	447	3.2	346	0.5	25	3.7	75
Part year	5.6	371	2.3	289	0.4	22	2.9	59
None	0.9	45	0.4	34	0.1	5	0.4	7
<b>Maintenance Assistance</b>								
<b>Status</b>								
Cash	1.2	83	0.5	66	0.1	7	0.6	11
Medically needy	1.0	53	0.4	41	0.1	4	0.5	8
Poverty related	0.8	25	0.3	17	0.1	4	0.4	5
Other/unknown	1.0	48	0.4	37	0.1	4	0.5	7

Source: Data for this table are from the MAX 2002 file for Texas, 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 Texas, 0.7 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](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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users					
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Generic	Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos
Anti-infective Agents	0.3	0.2	0.0	0.1	\$14	\$10	\$2	\$2	\$67	\$13	3,182,123	\$136,426,973	1,228,129	50.6%	10,046,439
Biologicals	0.8	0.1	0.1	0.5	####	828	145	####	1,157	2,054	389	1,028,458	48	0.0	502
Antineoplastic Agents	0.4	0.2	0.0	0.2	128	108	4	16	586	135	23,359	7,504,142	6,037	0.2	58,469
Endocrine/Metabolic Drugs	0.3	0.2	0.1	0.1	18	14	2	2	91	42	820,774	49,162,560	311,516	12.8	2,671,901
Cardiovascular Agents	0.7	0.3	0.0	0.3	34	25	2	6	92	56	741,264	38,435,851	117,170	4.8	1,126,561
Respiratory Agents	0.4	0.2	0.1	0.2	17	11	3	3	63	38	4,115,550	152,655,542	1,114,562	45.9	9,226,067
Gastrointestinal Agents	0.3	0.2	0.0	0.1	22	19	1	2	111	148	493,637	35,448,335	183,233	7.5	1,645,104
Genitourinary Agents	0.2	0.2	0.0	0.0	10	9	0	1	49	40	174,998	7,481,873	99,917	4.1	744,479
CNS Drugs	0.6	0.3	0.0	0.3	63	54	3	6	167	144	1,253,436	129,625,583	224,628	9.3	2,056,537
Stimulants/Anti-obesity/Anorexia	0.5	0.3	0.1	0.1	41	29	6	6	89	83	286,070	22,412,148	57,769	2.4	542,688
Miscellaneous Psychological/Neurological Agents	0.4	0.3	0.0	0.1	53	49	0	4	172	37	11,516	1,649,760	3,196	0.1	30,978
Analgesics and Anesthetics	0.3	0.0	0.0	0.2	9	5	1	3	139	28	1,778,573	55,480,849	714,034	29.4	6,083,596
Neuromuscular Agents	0.5	0.2	0.0	0.2	44	36	4	5	148	74	642,189	52,797,665	124,439	5.1	1,195,311
Nutritional Products	0.2	0.0	0.1	0.1	5	1	2	2	22	26	379,325	7,323,859	218,834	9.0	1,627,497
Hematological Agents	0.3	0.1	0.1	0.1	84	74	2	8	716	42	123,580	35,172,659	52,246	2.2	418,772
Topical Products	0.2	0.1	0.0	0.1	8	5	1	2	50	47	14,785	45,739,587	700,627	28.9	5,972,822
Miscellaneous Products	0.4	0.2	0.1	0.2	132	94	24	14	559	416	14,785	4,468,709	3,412	0.1	33,940
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	3	0	0	0	0	0	27,130	556,254	21,118	0.9	193,247
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	15,546,763	783,370,827	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Texas, 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](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 Texas, 0.7 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](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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 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	\$72,942,401	62.888	688,528	0.4	\$237	\$106		
ANTIASTHMATIC	51,577,725	412,241	4,099,003	0.2	57	13		
ANTICONVULSANT	44,413,377	70,562	764,852	0.5	109	58		
ANTIDEPRESSANTS	37,929,106	135,392	1,384,940	0.3	80	27		
COUGH/COLD/ALLERGY	35,447,384	1,158,003	11,571,995	0.2	19	3		
ANTIHISTAMINES	32,006,288	450,337	4,564,687	0.2	44	7		
PENICILLINS	27,542,070	723,995	7,132,267	0.1	26	4		
CEPHALOSPORINS	27,513,328	452,049	4,586,438	0.1	45	6		
ANALGESICS - ANTI-INFLAMMATORY	26,503,315	464,760	4,689,391	0.2	30	6		
DERMATOLOGICAL	26,242,761	627,944	6,332,440	0.1	30	4		
Total	382,117,755	4,558,171	45,814,541	n.a.	n.a.	n.a.		

Source: Data for this table are from the MAX 2002 file for Texas, 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](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<sup>a,b,c</sup>  
NONDUAL BENEFICIARIES, TEXAS, 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 \$
<b>All</b>	<b>8,073,361</b>	<b>\$382,117,755</b>	<b>62,888</b>	<b>2.6 %</b>	<b>688,528</b>	<b>0.4</b>	<b>\$106</b>	<b>412,241</b>	<b>17.0 %</b>	<b>4,099,003</b>	<b>0.2</b>	<b>\$13</b>					
<b>Female</b>	4,279,130	201,484,550	30,665	2.2	332,778	0.4	96	198,241	14.5	1,969,243	0.2	12					
<b>Disabled</b>	862,313	84,793,475	19,568	16.8	221,390	0.4	113	29,122	25.0	330,164	0.3	20					
5 and younger	48,805	2,264,326	65	1.2	726	0.4	71	3,299	58.5	36,880	0.3	23					
6-14	106,302	7,056,290	1,251	10.5	14,390	0.5	84	4,258	35.9	49,313	0.3	21					
15-20	72,440	6,160,973	1,499	16.3	16,935	0.4	94	1,984	21.6	22,673	0.3	19					
21-44	255,489	29,206,959	8,031	22.3	90,741	0.4	115	6,076	16.9	68,937	0.2	16					
45-64	379,012	40,088,702	8,715	16.2	98,546	0.4	118	13,488	25.0	152,247	0.3	21					
65-74	257	15,928	7	14.6	52	0.5	72	16	33.3	113	0.5	33					
75-84	1	8	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	7	289	0	0.0	0	0.0	0	1	33.3	1	1.0	8					
<b>Other Eligibles</b>	3,416,817	116,691,075	11,097	0.9	111,388	0.4	63	169,119	13.5	1,639,079	0.2	10					
5 and younger	1,608,396	40,224,392	392	0.1	4,289	0.3	47	89,419	21.2	875,041	0.2	10					
6-14	954,222	35,668,975	3,679	1.1	40,298	0.5	73	45,554	13.0	459,262	0.2	11					
15-20	336,228	14,636,346	2,708	1.6	27,842	0.4	66	13,631	8.0	128,341	0.2	10					
21-44	445,213	20,983,847	3,260	1.1	28,610	0.2	43	18,160	6.3	153,923	0.2	10					
45-64	46,178	3,308,456	395	2.4	3,643	0.2	47	1,603	9.6	14,874	0.2	16					
65-74	7,148	572,496	176	16.2	1,890	0.7	102	170	15.6	1,812	0.4	19					
75-84	10,188	706,078	253	27.9	2,606	0.6	81	311	34.3	3,115	0.4	21					
85 and older	9,244	590,485	234	26.8	2,210	0.6	78	271	31.0	2,711	0.3	13					
<b>Male</b>	3,794,197	180,631,172	32,219	3.0	355,737	0.5	116	213,996	20.2	2,129,741	0.2	13					
<b>Disabled</b>	735,956	74,847,340	21,045	18.4	237,957	0.5	130	25,277	22.1	284,406	0.3	21					
5 and younger	71,331	3,501,348	239	3.1	2,701	0.4	69	5,141	67.0	57,486	0.3	25					
6-14	179,013	13,664,997	4,015	19.6	45,782	0.5	95	7,874	38.4	90,869	0.3	21					
15-20	103,193	10,076,930	2,847	20.4	32,165	0.5	117	2,917	20.9	33,410	0.3	20					
21-44	207,076	29,219,478	8,727	25.0	99,105	0.5	153	2,904	8.3	32,667	0.3	16					
45-64	175,220	18,376,043	5,210	14.0	58,148	0.5	131	6,429	17.3	69,911	0.3	22					
65-74	122	8,447	7	17.1	56	0.4	53	12	29.3	63	0.3	10					
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	1	97	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
<b>Other Eligibles</b>	3,058,241	105,763,832	11,174	1.2	117,780	0.5	85	188,719	19.9	1,845,335	0.2	12					
5 and younger	1,816,106	48,862,577	789	0.2	8,467	0.3	53	118,528	26.8	1,151,423	0.2	11					
6-14	963,899	41,474,519	7,090	2.0	76,325	0.5	86	58,225	16.4	579,722	0.2	13					
15-20	217,266	11,394,767	2,512	2.3	25,869	0.5	94	9,758	9.1	95,446	0.2	12					
21-44	37,271	2,211,871	379	1.2	3,098	0.3	59	1,377	4.3	10,999	0.2	13					
45-64	12,876	942,075	116	1.5	1,065	0.3	58	485	6.3	4,113	0.2	16					
65-74	4,605	418,141	106	14.4	1,184	0.7	145	126	17.1	1,410	0.3	19					
75-84	4,125	344,318	114	23.8	1,138	0.7	99	152	31.8	1,539	0.4	26					
85 and older	2,093	135,564	68	28.9	634	0.5	62	68	28.9	683	0.3	11					
<b>Unknown</b>	34	2,033	4	11.8	13	0.5	66	4	11.8	19	0.2	9					

Table ND7A

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Texas, 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](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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 2002

Beneficiary Characteristics	ANTICONVULSANT					ANTIDEPRESSANTS					COUGH/COLD/ALLERGY				
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean Rx	Mean No. of Rx
<b>All</b>	<b>70,562</b>	<b>2.9 %</b>	<b>764,852</b>	<b>0.5</b>	<b>0.5</b>	<b>135,392</b>	<b>5.6 %</b>	<b>1,384,940</b>	<b>0.3</b>	<b>0.3</b>	<b>1,158,003</b>	<b>47.7 %</b>	<b>11,571,995</b>	<b>0.2</b>	<b>0.2</b>
<b>Female</b>	39,024	2.9	418,833	0.5	0.5	92,104	6.7	926,713	0.3	0.3	611,192	44.7	6,081,634	0.2	0.2
<b>Disabled</b>	25,938	22.2	293,639	0.5	0.5	38,439	33.0	433,767	0.3	0.3	46,513	39.9	538,528	0.1	0.1
5 and younger	663	11.8	7,266	0.7	0.7	55	1.0	613	0.4	0.4	5,039	89.4	57,381	0.2	0.2
6-14	2,597	21.9	29,571	0.7	0.7	1,460	12.3	16,717	0.4	0.4	8,426	71.1	98,343	0.1	0.1
15-20	2,224	24.2	25,265	0.7	0.7	2,100	22.9	23,827	0.4	0.4	4,618	50.3	53,850	0.1	0.1
21-44	10,097	28.0	114,479	0.5	0.5	13,626	37.8	153,339	0.3	0.3	12,373	34.3	143,264	0.1	0.1
45-64	10,350	19.2	117,005	0.5	0.5	21,191	39.3	239,196	0.3	0.3	16,048	29.8	185,619	0.1	0.1
65-74	7	14.6	53	0.5	0.5	7	14.6	75	0.4	0.4	7	14.6	58	0.3	0.3
75-84	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	1	100.0	12	0.1	0.1
85 and older	0	0.0	0	0.0	0.0	0	0.0	0	0.0	0.0	1	33.3	1	1.0	1.0
<b>Other Eligibles</b>	13,086	1.0	125,194	0.4	0.4	53,665	4.3	492,946	0.3	0.3	564,679	45.2	5,543,106	0.2	0.2
5 and younger	828	0.2	8,382	0.4	0.4	562	0.1	5,932	0.3	0.3	295,719	70.0	2,893,557	0.2	0.2
6-14	2,774	0.8	29,144	0.5	0.5	8,615	2.5	91,532	0.4	0.4	159,569	45.7	1,642,054	0.1	0.1
15-20	2,416	1.4	23,944	0.4	0.4	10,507	6.1	101,179	0.3	0.3	45,915	26.8	447,893	0.1	0.1
21-44	5,808	2.0	51,509	0.3	0.3	29,303	10.2	250,031	0.3	0.3	58,258	20.3	508,482	0.1	0.1
45-64	873	5.2	8,174	0.3	0.3	3,663	22.0	33,836	0.3	0.3	4,593	27.6	44,262	0.1	0.1
65-74	154	14.1	1,707	0.7	0.7	249	22.9	2,720	0.5	0.5	223	20.5	2,507	0.1	0.1
75-84	146	16.1	1,494	0.6	0.6	380	41.9	3,900	0.7	0.7	235	25.9	2,597	0.2	0.2
85 and older	87	10.0	840	0.7	0.7	386	44.2	3,816	0.7	0.7	167	19.1	1,754	0.2	0.2
<b>Male</b>	31,537	3.0	346,014	0.6	0.6	43,286	4.1	458,220	0.4	0.4	546,808	51.5	5,490,342	0.2	0.2
<b>Disabled</b>	22,721	19.9	257,121	0.6	0.6	21,460	18.8	238,997	0.4	0.4	37,763	33.0	436,126	0.1	0.1
5 and younger	937	12.2	10,454	0.6	0.6	146	1.9	1,652	0.3	0.3	7,076	92.2	80,739	0.2	0.2
6-14	4,381	21.4	50,104	0.7	0.7	3,403	16.6	38,671	0.4	0.4	12,886	62.9	150,458	0.1	0.1
15-20	3,211	23.0	36,523	0.7	0.7	2,716	19.4	30,719	0.4	0.4	5,616	40.2	65,155	0.1	0.1
21-44	8,694	24.9	99,372	0.6	0.6	7,535	21.5	84,031	0.4	0.4	6,691	19.1	77,423	0.1	0.1
45-64	5,491	14.8	60,625	0.5	0.5	7,656	20.6	83,890	0.4	0.4	5,492	14.8	62,338	0.2	0.2
65-74	7	17.1	43	0.5	0.5	4	9.8	34	1.1	1.1	2	4.9	13	0.2	0.2
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
<b>Other Eligibles</b>	8,816	0.9	88,893	0.5	0.5	21,826	2.3	219,223	0.4	0.4	509,045	53.8	5,054,216	0.2	0.2
5 and younger	1,122	0.3	11,354	0.4	0.4	785	0.2	8,310	0.2	0.2	321,091	72.6	3,136,047	0.2	0.2
6-14	4,290	1.2	45,292	0.5	0.5	11,688	3.3	122,995	0.4	0.4	151,725	42.7	1,561,374	0.1	0.1
15-20	1,802	1.7	18,114	0.5	0.5	5,770	5.4	57,154	0.4	0.4	30,042	28.0	303,142	0.1	0.1
21-44	1,017	3.2	8,609	0.3	0.3	2,407	7.5	19,765	0.3	0.3	4,754	14.8	40,210	0.1	0.1
45-64	375	4.9	3,335	0.3	0.3	803	10.4	7,044	0.3	0.3	1,114	14.5	9,920	0.1	0.1
65-74	106	14.4	1,134	0.7	0.7	156	21.2	1,730	0.5	0.5	174	23.7	1,950	0.1	0.1
75-84	74	15.5	744	0.6	0.6	133	27.8	1,415	0.6	0.6	104	21.8	1,149	0.2	0.2
85 and older	30	12.8	311	0.5	0.5	84	35.7	810	0.6	0.6	41	17.4	424	0.2	0.2
<b>Unknown</b>	1	2.9	5	0.4	0.4	2	5.9	7	0.4	0.4	3	8.8	19	0.2	0.2

Table ND7B

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Texas, 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](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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 2002

Beneficiary Characteristics	ANTIHIISTAMINES				PENICILLINS				CEPHALOSPORINS						
	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 \$
<b>All</b>	<b>450,337</b>	<b>18.6 %</b>	<b>4,564,667</b>	<b>0.2</b>	<b>\$7</b>	<b>723,995</b>	<b>29.8 %</b>	<b>7,132,267</b>	<b>0.1</b>	<b>\$4</b>	<b>452,049</b>	<b>18.6 %</b>	<b>4,586,438</b>	<b>0.1</b>	<b>\$6</b>
<b>Female</b>	246,173	18.0	2,465,127	0.2	7	387,747	28.4	3,784,862	0.1	4	243,777	17.8	2,446,229	0.1	6
<b>Disabled</b>	26,582	22.8	305,246	0.2	12	28,728	24.6	331,545	0.1	4	21,423	18.4	247,490	0.1	6
5 and younger	1,906	33.8	21,858	0.2	6	3,589	63.7	40,596	0.2	4	2,799	49.7	31,917	0.1	7
6-14	4,292	36.2	49,884	0.2	10	5,999	50.6	69,581	0.1	5	4,140	34.9	48,210	0.1	8
15-20	2,561	27.9	29,637	0.2	11	3,196	34.8	37,087	0.1	4	2,135	23.3	24,939	0.1	6
21-44	7,456	20.7	85,787	0.2	11	7,824	21.7	90,631	0.1	4	5,553	15.4	64,130	0.1	4
45-64	10,359	19.2	118,013	0.2	14	8,114	15.1	93,584	0.1	5	6,790	12.6	78,254	0.1	4
65-74	7	14.6	55	0.2	7	6	12.5	66	0.1	4	6	12.5	40	0.3	11
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	1	33.3	12	0.3	16	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	219,591	17.6	2,159,881	0.2	6	359,019	28.7	3,453,317	0.1	4	222,354	17.8	2,198,739	0.1	6
5 and younger	85,334	20.2	871,679	0.1	4	175,899	41.6	1,710,872	0.2	3	108,639	25.7	1,102,547	0.1	6
6-14	72,710	20.8	741,772	0.2	8	101,166	29.0	1,020,028	0.1	4	58,870	16.9	610,402	0.1	7
15-20	25,612	14.9	239,807	0.2	7	34,015	19.8	314,926	0.1	4	21,977	12.8	205,147	0.1	5
21-44	33,170	11.6	279,401	0.2	7	45,220	15.8	381,128	0.1	4	30,711	10.7	259,596	0.1	4
45-64	2,124	12.8	20,409	0.2	12	2,337	14.0	22,337	0.1	5	1,689	10.1	16,028	0.1	5
65-74	168	15.4	1,838	0.2	12	119	10.9	1,271	0.1	4	114	10.5	1,310	0.1	3
75-84	206	22.7	2,268	0.3	13	134	14.8	1,419	0.1	5	153	16.9	1,657	0.1	5
85 and older	267	30.5	2,707	0.3	13	129	14.8	1,336	0.1	5	201	23.0	2,052	0.1	6
<b>Male</b>	204,162	19.2	2,099,553	0.2	7	336,247	31.7	3,347,396	0.1	4	208,271	19.6	2,140,208	0.1	6
<b>Disabled</b>	20,783	18.2	238,108	0.2	11	26,392	23.1	302,859	0.1	5	19,056	16.7	219,194	0.1	6
5 and younger	2,798	36.5	31,979	0.2	6	5,070	66.1	57,324	0.2	4	3,703	48.3	42,370	0.1	7
6-14	6,984	34.1	80,893	0.2	11	8,738	42.6	101,406	0.1	5	5,770	28.1	67,473	0.1	7
15-20	3,093	22.1	35,910	0.2	13	3,719	26.6	43,127	0.1	5	2,568	18.4	29,772	0.1	6
21-44	4,350	12.4	49,822	0.2	14	4,900	14.0	56,484	0.1	5	3,720	10.6	42,631	0.1	4
45-64	3,555	9.6	39,487	0.2	13	3,960	10.6	44,486	0.1	5	3,292	8.8	36,926	0.1	4
65-74	3	7.3	17	0.2	13	4	9.8	27	0.1	5	3	7.3	22	0.1	7
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	1	25.0	5	0.2	19	0	0.0	0	0.0	0
<b>Other Eligibles</b>	183,379	19.4	1,861,445	0.2	6	309,855	32.7	3,044,537	0.2	4	189,215	20.0	1,921,014	0.1	6
5 and younger	95,668	21.6	976,652	0.1	4	193,126	43.6	1,876,686	0.2	4	120,585	27.2	1,218,619	0.1	6
6-14	72,657	20.5	737,714	0.2	9	95,137	26.8	961,396	0.1	4	54,350	15.3	563,792	0.1	7
15-20	12,490	11.6	124,503	0.2	9	17,649	16.4	172,733	0.1	4	11,203	10.4	111,798	0.1	5
21-44	1,806	5.6	15,278	0.2	8	3,079	9.6	25,786	0.1	6	2,309	7.2	19,571	0.1	4
45-64	494	6.4	4,385	0.2	12	705	9.2	6,156	0.1	7	582	7.6	5,233	0.1	4
65-74	120	16.3	1,323	0.2	13	88	12.0	980	0.1	5	77	10.5	849	0.1	9
75-84	85	17.8	944	0.3	16	50	10.5	570	0.1	7	73	15.3	799	0.1	7
85 and older	59	25.1	646	0.3	13	21	8.9	230	0.1	6	36	15.3	353	0.1	8
<b>Unknown</b>	2	5.9	7	0.3	9	1	2.9	9	0.1	1	1	2.9	1	1.0	13

Table ND7C  
 Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Texas, 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](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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 2002

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY				DERMATOLOGICAL							
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Benes	No. of Bene Mos
<b>All</b>	<b>464,760</b>	<b>19.2 %</b>	<b>4,689,391</b>	<b>0.2</b>	<b>\$6</b>	<b>627,944</b>	<b>25.9 %</b>	<b>6,332,440</b>	<b>0.1</b>	<b>\$4</b>	<b>2,426,935</b>	<b>16,776,482</b>
<b>Female</b>	270,672	19.8	2,695,750	0.2	7	344,007	25.2	3,454,754	0.1	4	1,366,103	9,230,688
<b>Disabled</b>	36,713	31.5	422,220	0.2	23	33,866	29.0	391,185	0.2	6	116,649	1,170,726
5 and younger	1,151	20.4	13,320	0.2	3	3,016	53.5	34,387	0.1	4	5,636	53,345
6-14	2,930	24.7	34,222	0.2	4	5,424	45.7	63,312	0.1	5	11,859	126,431
15-20	2,242	24.4	26,013	0.2	7	3,417	37.2	39,817	0.1	6	9,180	96,200
21-44	9,980	27.7	114,819	0.2	17	8,798	24.4	101,880	0.1	7	36,037	363,997
45-64	20,405	37.9	233,809	0.2	32	13,198	24.5	151,653	0.2	7	53,885	530,425
65-74	5	10.4	37	0.4	40	12	25.0	124	0.5	19	48	300
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
85 and older	0	0.0	0	0.0	0	1	33.3	12	0.2	6	3	16
<b>Other Eligibles</b>	233,959	18.7	2,273,530	0.2	4	310,141	24.8	3,063,569	0.1	4	1,249,454	8,059,962
5 and younger	76,207	18.0	774,105	0.2	2	160,727	38.0	1,582,829	0.1	3	422,674	2,785,638
6-14	68,411	19.6	704,498	0.2	2	85,282	24.4	886,291	0.1	4	349,129	2,489,204
15-20	31,030	18.1	292,642	0.2	3	29,449	17.2	288,054	0.1	6	171,451	1,065,602
21-44	51,521	18.0	438,160	0.2	6	30,836	10.8	267,816	0.2	6	286,685	1,580,188
45-64	5,934	35.7	54,803	0.2	19	2,772	16.7	26,935	0.1	6	16,644	112,739
65-74	343	31.5	3,884	0.3	32	270	24.8	3,060	0.2	6	1,089	10,213
75-84	266	29.3	2,889	0.4	41	372	41.0	4,058	0.2	9	908	8,614
85 and older	247	28.3	2,549	0.5	42	433	49.5	4,526	0.2	8	874	7,764
<b>Male</b>	194,086	18.3	1,993,634	0.2	4	283,934	26.8	2,877,673	0.1	4	1,060,798	7,545,703
<b>Disabled</b>	21,718	19.0	247,829	0.2	13	28,519	24.9	327,730	0.2	7	114,381	1,117,625
5 and younger	1,818	23.7	21,016	0.2	3	3,807	49.6	43,508	0.1	4	7,673	73,339
6-14	4,210	20.5	49,145	0.2	4	7,168	35.0	83,621	0.1	5	20,502	215,672
15-20	2,395	17.1	27,655	0.2	5	4,490	32.1	51,915	0.2	7	13,972	144,433
21-44	5,195	14.9	59,025	0.2	13	6,768	19.4	77,682	0.2	9	34,973	344,177
45-64	8,097	21.8	90,968	0.2	23	6,280	16.9	70,956	0.2	8	37,215	339,786
65-74	3	7.3	20	0.3	9	6	14.6	48	0.2	10	41	199
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	4
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	15
<b>Other Eligibles</b>	172,368	18.2	1,745,805	0.2	3	255,415	27.0	2,549,943	0.1	4	946,417	6,428,078
5 and younger	82,914	18.7	840,320	0.2	3	160,791	36.3	1,578,012	0.1	3	442,550	2,920,671
6-14	64,434	18.1	665,844	0.2	2	68,976	19.4	718,028	0.1	4	355,169	2,532,781
15-20	17,557	16.4	175,210	0.2	2	21,268	19.8	215,110	0.1	7	107,369	731,519
21-44	5,219	16.2	43,639	0.2	11	2,884	9.0	24,444	0.2	7	32,189	181,708
45-64	1,866	24.3	16,635	0.2	19	994	12.9	9,032	0.2	8	7,692	47,822
65-74	188	25.6	2,073	0.3	29	201	27.3	2,124	0.2	8	735	6,887
75-84	130	27.2	1,425	0.3	29	182	38.1	1,976	0.2	19	478	4,603
85 and older	60	25.5	659	0.5	41	119	50.6	1,217	0.2	10	235	2,087
<b>Unknown</b>	2	5.9	7	1.0	45	3	8.8	13	0.2	9	34	91

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Texas, 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](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<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 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
<b>All</b>	<b>\$447</b>	<b>7.4</b>	<b>4,592</b>	<b>47,485</b>
<b>Age</b>				
0-64	484	7.8	3,410	36,157
65-74	408	7.0	211	2,192
75-84	354	6.8	437	4,255
85 and older	273	5.8	534	4,881
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	454	7.8	2,622	27,283
Male	437	7.0	1,968	20,196
Unknown	325	6.7	2	6
<b>Race</b>				
White	448	7.6	2,669	27,320
African American	455	7.4	942	9,952
Other/unknown	436	6.9	981	10,213
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	329	6.4	1,175	11,267
Disabled	484	7.8	3,413	36,206
Adults	732	15.0	3	9
Children	537	7.7	1	3
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2002 file for Texas, 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 3,282 beneficiaries who were in nursing facilities for part of their enrollment and their 31,338 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<sup>a, b, c, d, e</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 2002

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users							
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total # of Rx	Total Rx \$	No.	As % of All-Year NF Residents	No. of Bene Mos			
		Generic	Generic		Generic	Generic		Generic	Generic								
Anti-infective Agents	0.4	0.2	0.0	0.2	\$37	\$32	\$2	\$3	\$87	\$134	\$86	\$18	14,862	\$1,287,096	3,227	70.3 %	34,583
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.5	0.1	0.0	0.4	115	52	6	57	218	499	182	145	2,141	466,152	401	8.7	4,041
Endocrine/Metabolic Drugs	1.2	0.6	0.2	0.4	57	44	4	9	46	70	26	20	29,081	1,337,480	2,202	48.0	23,672
Cardiovascular Agents	2.0	0.6	0.1	1.2	62	38	5	18	31	63	36	15	60,669	1,909,777	2,967	64.6	30,872
Respiratory Agents	0.8	0.3	0.1	0.4	35	22	5	7	45	68	60	21	22,150	1,006,012	2,678	58.3	28,877
Gastrointestinal Agents	1.2	0.5	0.0	0.6	67	55	1	11	57	100	90	18	33,332	1,911,303	2,699	58.8	28,670
Genitourinary Agents	0.6	0.4	0.0	0.2	34	29	1	4	55	73	45	19	6,543	363,037	1,010	22.0	10,782
CNS Drugs	1.9	1.1	0.1	0.7	173	151	6	16	93	143	84	22	73,098	6,826,128	3,704	80.7	39,421
Stimulants/Anti-obesity/Anorexia	0.6	0.3	0.0	0.3	56	48	1	7	91	150	43	26	247	22,599	41	0.9	405
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	99	98	0	1	125	127	0	59	3,709	464,708	452	9.8	4,706
Analgesics and Anesthetics	1.0	0.3	0.1	0.6	48	35	4	8	48	105	55	15	25,865	1,244,600	2,465	53.7	26,049
Neuromuscular Agents	1.5	0.5	0.1	0.9	91	62	6	22	60	118	59	26	40,897	2,471,031	2,477	53.9	27,294
Nutritional Products	0.7	0.0	0.0	0.7	11	0	1	10	15	39	32	14	10,406	159,176	1,383	30.1	14,479
Hematological Agents	1.0	0.3	0.2	0.5	72	63	3	6	76	189	21	13	13,640	1,036,685	1,394	30.4	14,346
Topical Products	0.5	0.2	0.1	0.2	22	14	3	5	44	63	58	22	14,771	654,767	2,746	59.8	30,040
Miscellaneous Products	0.3	0.0	0.0	0.3	17	8	4	5	58	235	341	21	750	43,316	241	5.2	2,531
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	8	0	0	0	25	0	0	0	727	18,048	207	4.5	2,350
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	352,888	21,221,915	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Texas, 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 3,282 beneficiaries who were in nursing facilities for part of their enrollment and their 31,338 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](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](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

In Texas, 0.7 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 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	\$4,615,314	2,910	63.4 %	31,963	0.8	\$181	\$144
ANTICONVULSANT	2,026,982	2,787	60.7	31,188	1.0	67	65
ANTIDEPRESSANTS	1,752,402	3,216	70.0	34,518	0.8	63	51
ULCER DRUGS	1,516,780	2,593	56.5	27,805	0.7	74	55
ANTIDIABETIC	990,122	2,248	49.0	24,060	0.9	47	41
ANTIHYPERTENSIVE	608,146	2,072	45.1	21,725	0.8	36	28
ANALGESICS - ANTI-INFLAMMATORY	587,287	1,236	26.9	13,595	0.6	74	43
ANALGESICS - Narcotic	552,293	2,580	56.2	27,282	0.6	35	20
ANTIASTHMATIC	531,710	2,203	48.0	23,426	0.5	49	23
ANTINEOPLASTICS	465,278	412	9.0	4,163	0.5	218	112
Total	13,646,314	22,257		239,725	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2002 file for Texas, 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 3,282 beneficiaries who were in nursing facilities for part of their enrollment and their 31,338 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](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<sup>a, b, c, d</sup>  
NONDUAL BENEFICIARIES, TEXAS, 2002

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTICONVULSANT				
	No. of Rx	Rx \$	Users as %			Mean Rx \$	No. of Users	Users as %			Mean Rx \$	No. of Users	Users as %		
			No. of Rx	Rx \$	No. of Bene Mos among Users			Residents	NF	No. of Bene Mos among Users			Residents	NF	
<b>All</b>	<b>178,395</b>	<b>\$13,646,314</b>	<b>2,910</b>	<b>63.4 %</b>	<b>31,963</b>	<b>0.8</b>	<b>\$144</b>	<b>2,787</b>	<b>60.7 %</b>	<b>31,188</b>	<b>1.0</b>	<b>\$65</b>			
<b>Female</b>	105,542	8,015,909	1,681	64.1	18,507	0.8	140	1,511	57.6	16,959	0.9	64			
<b>Disabled</b>	81,865	6,478,060	1,259	71.7	14,251	0.8	154	1,305	74.3	14,809	1.0	68			
64 or younger	81,702	6,469,768	1,256	71.7	14,221	0.8	154	1,303	74.4	14,785	1.0	68			
65-74	163	8,292	3	75.0	30	0.8	98	2	50.0	24	0.8	38			
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			
<b>Other Eligibles</b>	23,677	1,537,849	422	48.7	4,256	0.7	91	206	23.8	2,150	0.9	40			
64 or younger	94	4,744	1	33.3	1	2.0	205	0	0.0	0	0.0	0			
65-74	4,874	339,410	93	77.5	1,014	0.8	110	73	60.8	813	0.9	44			
75-84	9,375	592,079	166	53.7	1,704	0.7	90	80	25.9	817	0.8	33			
85 and older	9,334	601,616	162	37.3	1,537	0.7	81	53	12.2	520	0.9	44			
<b>Male</b>	72,835	5,629,098	1,228	62.4	13,452	0.8	151	1,276	64.8	14,229	1.0	66			
<b>Disabled</b>	64,413	5,007,641	1,042	62.9	11,552	0.8	156	1,169	70.5	13,144	1.0	68			
64 or younger	64,255	4,987,827	1,039	62.9	11,522	0.8	156	1,166	70.6	13,123	1.0	68			
65-74	158	19,814	3	60.0	30	0.4	58	3	60.0	21	0.4	34			
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			
<b>Other Eligibles</b>	8,422	621,457	186	59.8	1,900	0.8	121	107	34.4	1,085	0.8	42			
64 or younger	72	5,129	1	33.3	4	1.3	465	3	100.0	12	1.6	63			
65-74	2,835	225,575	59	72.0	648	0.9	165	47	57.3	515	1.0	50			
75-84	3,672	270,385	84	66.1	871	0.8	113	42	33.1	404	0.7	38			
85 and older	1,843	120,368	42	42.4	377	0.6	61	15	15.2	154	0.7	25			
<b>Unknown</b>	18	1,307	1	50.0	4	0.8	106	0	0.0	0	0.0	0			

Source: Data for this table are from the MAX 2002 file for Texas, 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 3,282 beneficiaries who were in nursing facilities for part of their enrollment and their 31,338 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](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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 2002

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANTIDIABETIC					
	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	Mos among Users	No. of Rx	No. of Users	Residents	NF Residents	No. of Users	Mos among Users
<b>All</b>	<b>3,216</b>	<b>70.0 %</b>	<b>34,518</b>	<b>0.8</b>	<b>\$51</b>	<b>2,593</b>	<b>56.5 %</b>	<b>27,805</b>	<b>0.7</b>	<b>\$55</b>	<b>2,248</b>	<b>49.0 %</b>	<b>24,060</b>	<b>0.9</b>	<b>\$41</b>	
<b>Female</b>	1,957	74.6	21,072	0.8	52	1,494	57.0	16,084	0.7	56	1,361	51.9	14,644	0.9	42	
<b>Disabled</b>	1,423	81.0	15,597	0.8	54	1,076	61.3	11,792	0.7	58	1,083	61.7	11,867	0.9	43	
64 or younger	1,422	81.2	15,588	0.8	54	1,075	61.4	11,780	0.7	58	1,076	61.4	11,819	0.9	43	
65-74	1	25.0	9	0.7	43	1	25.0	12	1.7	135	7	175.0	48	0.7	18	
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	
<b>Other Eligibles</b>	534	61.7	5,475	0.8	48	418	48.3	4,292	0.7	53	278	32.1	2,777	0.9	37	
64 or younger	0	0.0	0	0.0	0	1	33.3	12	0.8	6	2	66.7	24	1.5	111	
65-74	80	66.7	890	0.9	59	62	51.7	667	0.7	50	74	61.7	756	0.9	39	
75-84	223	72.2	2,282	0.8	48	159	51.5	1,663	0.7	53	100	32.4	1,082	0.9	41	
85 and older	231	53.2	2,303	0.8	45	196	45.2	1,950	0.8	53	102	23.5	915	0.8	29	
<b>Male</b>	1,258	63.9	13,444	0.8	49	1,098	55.8	11,719	0.7	52	886	45.0	9,414	0.9	40	
<b>Disabled</b>	1,078	65.1	11,601	0.8	48	965	58.2	10,381	0.7	52	763	46.0	8,164	0.9	41	
64 or younger	1,075	65.1	11,571	0.8	48	961	58.2	10,343	0.7	52	759	45.9	8,122	0.9	41	
65-74	3	60.0	30	1.2	51	4	80.0	38	0.5	42	4	80.0	42	0.9	30	
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	
<b>Other Eligibles</b>	180	57.9	1,843	0.7	50	133	42.8	1,338	0.7	52	123	39.5	1,250	0.8	34	
64 or younger	6	200.0	21	1.1	54	1	33.3	1	1.0	21	0	0.0	0	0.0	0	
65-74	49	59.8	540	0.8	49	34	41.5	343	0.7	43	50	61.0	535	0.8	38	
75-84	75	59.1	803	0.7	57	57	44.9	571	0.7	58	52	40.9	555	0.7	30	
85 and older	50	50.5	479	0.7	40	41	41.4	423	0.7	51	21	21.2	160	0.7	36	
<b>Unknown</b>	1	50.0	2	1.0	7	1	50.0	2	2.5	227	1	50.0	2	1.0	26	

Source: Data for this table are from the MAX 2002 file for Texas, 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 3,282 beneficiaries who were in nursing facilities for part of their enrollment and their 31,338 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](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 ND10B

Nondual Beneficiaries

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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 2002

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANALGESICS - ANTI-INFLAMMATORY					ANALGESICS - Narcotic				
	Users as %					Users as %					Users as %				
	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	
<b>All</b>	<b>2,072</b>	<b>21,725</b>	<b>0.8</b>	<b>\$28</b>	<b>0.6</b>	<b>1,236</b>	<b>13,595</b>	<b>0.6</b>	<b>\$43</b>	<b>0.6</b>	<b>2,580</b>	<b>27,282</b>	<b>0.6</b>	<b>\$20</b>	
<b>Female</b>	1,174	12,327	0.8	27	0.6	828	9,155	0.6	45	0.6	1,572	16,997	0.6	22	
<b>Disabled</b>	789	8,476	0.8	28	0.6	562	6,382	0.6	43	0.6	1,158	12,833	0.6	23	
64 or younger	786	8,456	0.8	28	0.6	562	6,382	0.6	43	0.6	1,153	12,773	0.6	23	
65-74	3	20	0.5	21	0.0	0	0	0.0	0	0.0	5	60	0.5	9	
75-84	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	
<b>Other Eligibles</b>	385	3,851	0.8	26	0.7	266	2,773	0.7	50	0.7	414	4,164	0.5	19	
64 or younger	1	12	1.1	68	0.0	0	0	0.0	0	0.0	2	16	1.1	32	
65-74	61	692	0.7	29	0.6	36	422	0.6	41	0.6	68	747	0.5	28	
75-84	161	1,589	0.8	26	0.6	96	995	0.6	53	0.6	155	1,558	0.5	13	
85 and older	162	1,558	0.7	25	0.7	134	1,356	0.7	51	0.7	189	1,843	0.5	19	
<b>Male</b>	897	9,396	0.8	29	0.6	407	4,438	0.6	39	0.6	1,007	10,283	0.6	17	
<b>Disabled</b>	750	7,873	0.8	30	0.6	334	3,635	0.6	38	0.6	873	8,931	0.6	18	
64 or younger	748	7,859	0.8	30	0.6	334	3,635	0.6	38	0.6	871	8,913	0.6	17	
65-74	2	14	0.9	41	0.0	0	0	0.0	0	0.0	2	18	1.6	686	
75-84	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	
<b>Other Eligibles</b>	147	1,523	0.7	26	0.6	73	803	0.6	42	0.6	134	1,352	0.4	12	
64 or younger	1	4	1.0	100	0.7	1	3	0.7	97	0.7	1	4	1.5	18	
65-74	44	453	0.7	27	0.7	15	171	0.7	49	0.7	32	325	0.3	10	
75-84	60	658	0.8	27	0.5	30	338	0.5	35	0.5	58	596	0.5	6	
85 and older	42	408	0.7	23	0.6	27	291	0.6	46	0.6	43	427	0.3	22	
<b>Unknown</b>	1	2	1.0	38	1.0	1	2	1.0	80	1.0	1	2	1.0	63	

Source: Data for this table are from the MAX 2002 file for Texas, 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 3,282 beneficiaries who were in nursing facilities for part of their enrollment and their 31,338 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](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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, TEXAS, 2002

Beneficiary Characteristics	ANTI-ASTHMATIC					ANTINEOPLASTICS						
	Users as %		Mean		No. of Bene Mos among Users	Users as %		Mean		No. of Bene Mos among Users		
	No. of Users	Residents	Rx	Rx-\$		Residents	NF	Rx	Rx-\$			
<b>All</b>	<b>2,203</b>	<b>48.0 %</b>	<b>23,426</b>	<b>0.5</b>	<b>\$23</b>	<b>412</b>	<b>9.0 %</b>	<b>4,163</b>	<b>0.5</b>	<b>\$112</b>	<b>4,592</b>	<b>47,485</b>
<b>Female</b>	1,258	48.0	13,395	0.4	21	256	9.8	2,608	0.5	119	2,622	27,283
<b>Disabled</b>	895	51.0	9,699	0.4	22	155	8.8	1,698	0.5	132	1,756	18,960
64 or younger	891	50.9	9,671	0.4	22	155	8.8	1,698	0.5	132	1,752	18,925
65-74	4	100.0	28	0.7	22	0	0.0	0	0.0	0	4	35
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
<b>Other Eligibles</b>	363	41.9	3,696	0.4	18	101	11.7	910	0.5	95	866	8,323
64 or younger	1	33.3	12	0.9	30	0	0.0	0	0.0	0	3	17
65-74	51	42.5	528	0.4	17	11	9.2	116	0.4	82	120	1,273
75-84	138	44.7	1,402	0.5	23	28	9.1	273	0.6	79	309	3,011
85 and older	173	39.9	1,754	0.3	14	62	14.3	521	0.5	106	434	4,022
<b>Male</b>	945	48.0	10,031	0.5	25	156	7.9	1,555	0.5	100	1,968	20,196
<b>Disabled</b>	792	47.8	8,534	0.5	26	127	7.7	1,301	0.5	104	1,657	17,246
64 or younger	790	47.8	8,522	0.5	26	127	7.7	1,301	0.5	104	1,652	17,207
65-74	2	40.0	12	0.3	6	0	0.0	0	0.0	0	5	39
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
<b>Other Eligibles</b>	153	49.2	1,497	0.4	21	29	9.3	254	0.4	80	311	2,950
64 or younger	6	200.0	17	0.6	35	0	0.0	0	0.0	0	3	8
65-74	37	45.1	395	0.3	14	5	6.1	32	0.5	59	82	845
75-84	71	55.9	714	0.5	29	10	7.9	85	0.5	86	127	1,242
85 and older	39	39.4	371	0.3	11	14	14.1	137	0.4	81	99	855
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	6

Source: Data for this table are from the MAX 2002 file for Texas, 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 3,282 beneficiaries who were in nursing facilities for part of their enrollment and their 31,338 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](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<sup>a,b</sup>  
 TEXAS, 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. of 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
		40.8 %	1.2	2,967,609	\$32	\$76,782,988	\$26	9.8 %	2,426,935					
<b>All</b>	<b>990,600</b>	<b>40.8 %</b>	<b>1.2</b>	<b>2,967,609</b>	<b>\$32</b>	<b>\$76,782,988</b>	<b>\$26</b>	<b>9.8 %</b>	<b>2,426,935</b>					
<b>Age</b>														
5 and younger	497,553	56.6	2.0	1,717,679	42	37,022,477	22	24.6	878,547					
6-14	280,952	38.1	0.9	649,640	26	19,467,689	30	10.7	736,662					
15-20	76,208	25.2	0.5	162,151	20	6,141,662	38	7.1	301,974					
21-44	96,254	24.7	0.7	267,050	20	7,842,176	29	4.2	389,884					
45-64	38,002	32.9	1.4	163,575	53	6,091,128	37	3.5	115,438					
65-74	586	30.6	1.2	2,351	34	65,261	28	2.3	1,913					
75-84	585	42.0	2.3	3,143	62	87,057	28	3.0	1,393					
85 and older	460	41.1	1.8	2,020	59	65,538	32	3.0	1,120					
Unknown	0	0.0	0.0	0	0	0	0	0.0	4					
<b>Basis of Eligibility<sup>c</sup></b>														
Aged	1,589	37.0	1.7	7,371	50	214,467	29	2.8	4,297					
Disabled	87,756	38.0	1.7	393,283	87	20,016,912	51	5.7	231,032					
Adults	93,014	22.3	0.5	211,518	12	4,924,081	23	4.8	417,496					
Children	808,240	45.6	1.3	2,355,436	29	51,627,484	22	16.1	1,774,056					
Unknown	1	1.9	0.0	1	1	44	44	2.5	54					
<b>Gender</b>														
Female	533,965	39.1	1.1	1,551,382	29	39,027,257	25	9.0	1,366,104					
Male	456,631	43.0	1.3	1,416,217	36	37,755,570	27	10.7	1,060,801					
Unknown	4	13.3	0.3	10	5	161	16	2.8	30					
<b>Race</b>														
White	207,340	35.7	1.0	591,572	36	20,639,455	35	7.3	581,205					
African American	141,134	30.9	0.8	387,822	22	9,848,587	25	7.3	457,256					
Other/unknown	642,126	46.2	1.4	1,988,215	33	46,294,946	23	12.7	1,388,474					
<b>Use of Nursing Facilities<sup>d</sup></b>														
Entire year	2,804	61.1	5.2	23,821	178	817,060	34	3.9	4,592					
Part year	2,087	63.6	4.1	13,397	164	538,497	40	4.6	3,282					
None	985,709	40.7	1.2	2,930,391	31	75,427,431	26	10.0	2,419,061					
<b>Maintenance Assistance Status</b>														
Cash	260,738	40.7	1.4	899,604	46	29,802,018	33	6.9	641,275					
Medically needy	15,593	23.8	0.6	37,449	15	969,436	26	4.7	65,598					
Poverty related	586,796	40.4	1.1	1,626,401	25	35,822,006	22	15.4	1,453,055					
Other/unknown	127,473	47.7	1.5	404,155	38	10,189,528	25	10.4	267,007					

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Texas, 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<sup>a,b</sup>  
 TEXAS, 2002

Beneficiary Characteristics	No. Rx per Bene Mo.	Rx \$ per Bene Mo.	\$ per Rx	Barbiturate \$ per Bene Mo.	Benzodiazepine \$ per Bene Mo.	No. of Bene Mos
All	0.2	\$5	\$26	\$0	\$0	16,776,482
<b>Age</b>						
5 and younger	0.3	6	22	0	0	5,833,035
6-14	0.1	4	30	0	0	5,364,094
15-20	0.1	3	38	0	0	2,037,759
21-44	0.1	3	29	0	1	2,470,070
45-64	0.2	6	37	0	2	1,030,778
65-74	0.1	4	28	0	1	17,599
75-84	0.2	7	28	0	2	13,241
85 and older	0.2	7	32	0	1	9,899
Unknown	0.0	0	0	0	0	7
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.2	5	29	0	1	39,918
Disabled	0.2	9	51	0	1	2,288,357
Adults	0.1	2	23	0	0	2,310,632
Children	0.2	4	22	0	0	12,137,421
Unknown	0.0	0	44	0	0	154
<b>Gender</b>						
Female	0.2	4	25	0	0	9,230,689
Male	0.2	5	27	0	0	7,545,709
Unknown	0.1	2	16	0	0	84
<b>Race</b>						
White	0.1	5	35	0	0	4,024,509
African American	0.1	3	25	0	0	2,997,201
Other/unknown	0.2	5	23	0	0	9,754,772
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.5	17	34	0	5	47,485
Part year	0.4	17	40	0	4	31,338
None	0.2	5	26	0	0	16,697,659
<b>Maintenance Assistance Status</b>						
Cash	0.2	6	33	0	1	5,183,789
Medically needy	0.1	2	26	0	0	391,417
Poverty related	0.2	4	22	0	0	9,158,547
Other/unknown	0.2	5	25	0	0	2,042,729

Table ND12

Nondual Beneficiaries

Source: Data for this table are from the MAX 2002 file for Texas, 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<sup>a,b,c</sup>  
TEXAS, 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
<b>All</b>	<b>1,030,767</b>	<b>\$74</b>	<b>\$76,782,988</b>	<b>100.0 %</b>	<b>2,967,609</b>	<b>\$26</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	16,002	236	3,784,196	4.9	21,117	179	0.7
Fertility drugs	48	21,340	1,024,332	1.3	387	2,647	0.0
Drugs for cosmetic purposes	2,834	1,001	2,838,024	3.7	9,437	301	0.3
Cough and cold medications	1,991	2,020	4,020,970	5.2	5,331	754	0.2
Vitamins and minerals	58	515	29,890	0.0	123	243	0.0
Non-prescription drugs	948,504	64	60,862,380	79.3	2,685,080	23	90.5
Barbiturates	4,318	12	51,096	0.1	4,824	11	0.2
Benzodiazepines	55,999	68	3,785,007	4.9	239,306	16	8.1
Other Part D Excl Rx Drugs	1,013	382	387,093	0.5	2,004	193	0.1

Source: Data for this table are from the MAX 2002 file for Texas, released by CMS in 05/2006. This table was produced on 04/19/2007.

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all non-dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2002. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2002. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table ND11.

b. Includes OTC drugs as well as prescription drugs.

c. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

APPENDIX TABLE A.1

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
NONDUAL BENEFICIARIES, TEXAS, 2002

Beneficiary Characteristics	No. of Beneficiaries					No. of Beneficiaries with Pharmacy Benefit Coverage					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>2,728,831</b>	<b>4,766</b>	<b>259,852</b>	<b>463,537</b>	<b>2,000,622</b>	<b>54</b>	<b>46,247</b>	<b>2,723,968</b>	<b>3,151,968</b>	<b>17,232,206</b>	<b>154</b>
<b>Age</b>											
5 and younger	1,015,969	0	14,571	28	1,001,370	0	0	151,853	251	8,373,217	0
6-14	808,792	0	35,401	494	772,897	0	0	393,864	3,619	6,946,173	0
15-20	332,835	1	24,808	81,929	226,097	0	12	267,487	543,504	1,911,380	0
21-44	436,568	6	81,083	355,242	221	16	37	857,606	2,413,808	1,238	50
45-64	129,745	47	103,875	25,769	16	38	243	1,052,471	190,292	70	104
65-74	2,249	2,101	102	43	3	0	21,172	604	328	22	0
75-84	1,505	1,493	4	7	1	0	14,625	40	58	12	0
85 and older	1,164	1,118	8	25	13	0	10,158	43	108	87	0
Unknown	4	0	0	0	4	7	0	0	0	7	0
<b>Gender</b>											
Female	1,538,278	3,131	132,814	419,841	982,438	54	30,266	1,412,796	2,873,988	8,474,957	154
Male	1,190,522	1,626	127,036	43,696	1,018,164	0	15,956	1,311,166	277,980	8,757,170	0
Unknown	31	9	2	0	20	0	25	6	0	79	0
<b>Race</b>											
White	646,025	2,068	92,248	136,340	415,350	19	19,649	961,364	870,765	3,358,645	48
African American	535,885	735	68,551	96,018	370,574	7	7,586	736,220	710,084	3,319,980	17
Other/unknown	1,546,921	1,963	99,053	231,179	1,214,698	28	19,012	1,026,384	1,571,119	10,553,581	89
<b>Use of Nursing Facilities<sup>c</sup></b>											
Entire year	4,594	1,175	3,415	3	1	0	11,267	36,262	9	3	0
Part year	3,318	462	2,820	31	5	0	4,153	28,300	216	53	0
None	2,720,919	3,129	253,617	463,503	2,000,616	54	30,827	2,659,406	3,151,743	17,232,150	154
<b>Maintenance Assistance Status</b>											
Cash	711,557	2,745	252,515	137,868	318,429	0	27,680	2,648,351	1,056,079	3,093,467	0
Medically needy	65,598	0	0	65,076	522	0	0	0	408,246	2,653	0
Poverty related	1,602,410	13	21	200,659	1,401,663	54	147	186	1,130,743	11,937,762	154
Other/unknown	349,266	2,008	7,316	59,934	280,008	0	18,420	75,431	556,900	2,198,324	0
<b>Managed Care Status</b>											
FFS all year	1,774,018	4,122	214,458	306,101	1,249,283	54	39,267	2,212,706	2,014,615	10,550,982	154
FFS part year, with Rx claims	448,791	145	14,356	88,094	346,196	0	1,432	157,936	716,900	3,311,843	0
FFS part year, no Rx claims	204,126	30	2,218	23,301	178,577	0	259	21,944	144,344	1,421,440	0
MC all year, with Rx claims	209,252	407	25,195	33,533	150,117	0	4,717	293,289	226,411	1,468,557	0
MC all year, no Rx claims	92,644	62	3,625	12,508	76,449	0	572	38,093	49,698	479,384	0

Source: Data for this table are from the MAX 2002 file for Texas, 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<sup>a</sup>**  
**NONDUAL BENEFICIARIES, TEXAS, 2002**

	Bene Mos in Cell J of Table 1		Benes and		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	No. of Benes	No. of Bene Mos
<b>All</b>	<b>2,728,831</b>	<b>23,154,543</b>	<b>2,426,935</b>	<b>16,776,482</b>	<b>0</b>	<b>6,378,061</b>		
FFS all year	1,774,018	14,817,724	1,774,018	14,817,724	0	0		
FFS part year, with Rx claims	448,791	4,188,111	448,791	1,366,493	0	2,821,618		
FFS part year, with no Rx claims	204,126	1,587,987	204,126	592,265	0	995,722		
MC all year, with Rx claims	209,252	1,992,974	0	0	0	1,992,974		
MC all year, with no Rx claims	92,644	567,747	0	0	0	567,747		

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