

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2003 ALASKA

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TABLE ND.2

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
NONDUAL BENEFICIARIES, ALASKA, 2003

Beneficiary Characteristics	Number of Beneficiaries							Number of Benefit Months									
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children
<b>All</b>	<b>116,481</b>	<b>724</b>	<b>7,513</b>	<b>27,071</b>	<b>81,173</b>	<b>0</b>	<b>995,419</b>	<b>6,878</b>	<b>77,526</b>	<b>189,663</b>	<b>721,352</b>	<b>0</b>					
<b>Age</b>																	
5 and younger	31,240	0	341	0	30,899	0	265,719	0	3,181	0	262,538	0					
6-14	37,528	1	789	5	36,733	0	350,255	3	8,540	28	341,684	0					
15-20	18,756	6	685	4,739	13,326	0	156,531	18	7,102	33,264	116,147	0					
21-44	22,373	53	2,393	19,714	213	0	161,253	256	24,776	135,245	976	0					
45-64	5,866	51	3,203	2,611	1	0	54,363	413	32,832	21,112	6	0					
65-74	457	353	102	2	0	0	4,709	3,600	1,095	14	0	0					
75-84	205	205	0	0	0	0	2,086	2,086	0	0	0	0					
85 and older	55	55	0	0	0	0	502	502	0	0	0	0					
Unknown	1	0	0	0	1	1	0	0	0	0	1	0					
<b>Gender</b>																	
Female	64,190	502	3,852	20,264	39,572	0	538,292	4,693	40,505	140,709	352,385	0					
Male	52,288	222	3,661	6,807	41,598	0	457,100	2,185	37,021	48,954	368,940	0					
Unknown	3	0	0	0	3	0	27	0	0	0	27	0					
<b>Race</b>																	
White	48,589	215	4,021	12,250	32,103	0	410,313	1,716	40,914	84,624	283,059	0					
African American	6,279	6	475	1,333	4,465	0	53,600	54	4,788	9,647	39,111	0					
Other/unknown	61,613	503	3,017	13,488	44,605	0	531,506	5,108	31,824	95,392	399,182	0					
<b>Use of Nursing Facilities<sup>c</sup></b>																	
Entire year	71	17	54	0	0	0	631	171	460	0	0	0					
Part year	102	4	94	3	1	0	977	29	911	27	10	0					
None	116,308	703	7,365	27,068	81,172	0	993,811	6,678	76,155	189,636	721,342	0					
<b>Maintenance Assistance Status</b>																	
Cash	41,228	591	6,820	15,832	17,985	0	360,185	6,078	70,485	122,372	161,250	0					
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0					
Poverty-related	65,577	99	0	8,912	56,566	0	550,687	578	0	50,149	499,960	0					
Other/unknown	9,676	34	693	2,327	6,622	0	84,547	222	7,041	17,142	60,142	0					
<b>Managed Care (MC) Status</b>																	
Fee-for-service (FFS) all year	116,481	724	7,513	27,071	81,173	0	995,419	6,878	77,526	189,663	721,352	0					
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0					
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0					

Table ND2

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

- 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 = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; Rx = pharmacy benefit.

TABLE ND.3

ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
NONDUAL BENEFICIARIES, ALASKA, 2003

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ <sup>c</sup>	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>d</sup>	Number of Beneficiaries
All	54.2 %	6.3	\$445	\$71	\$5,239	8.5 %	116,481
<b>Age</b>							
5 and younger	53.4	2.3	134	58	4,208	3.2	31,240
6-14	44.4	2.7	223	81	3,208	7.0	37,528
15-20	52.4	4.0	346	86	6,245	5.5	18,756
21-44	66.3	11.1	741	67	6,601	11.2	22,373
45-64	77.6	36.3	2,555	70	13,593	18.8	5,866
65-74	82.5	31.3	1,742	56	17,324	10.1	457
75-84	82.0	29.4	1,502	51	20,897	7.2	205
85 and older	80.0	37.5	1,752	47	29,773	5.9	55
Unknown	0.0	0.0	0	0	0	0.0	1
<b>Basis of Eligibility<sup>e</sup></b>							
Aged	78.2	28.6	1,556	54	17,679	8.8	724
Disabled	82.4	41.5	3,340	80	24,954	13.4	7,513
Adults	63.2	7.2	412	58	4,450	9.3	27,071
Children	48.4	2.5	178	70	3,567	5.0	81,173
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>							
Female	57.8	7.4	468	63	5,267	8.9	64,190
Male	49.8	4.9	416	85	5,204	8.0	52,288
Unknown	33.3	0.3	4	11	4,300	0.1	3
<b>Race</b>							
White	60.0	8.3	613	74	5,098	12.0	48,589
African American	54.0	7.4	515	70	4,233	12.2	6,279
Other/unknown	49.7	4.6	305	66	5,453	5.6	61,613
<b>Use of Nursing Facilities<sup>f</sup></b>							
Entire year	97.2	71.8	5,662	79	110,309	5.1	71
Part year	99.0	82.2	5,984	73	84,901	7.0	102
None	54.1	6.2	437	71	5,105	8.6	116,308
<b>Maintenance Assistance Status</b>							
Cash	60.6	12.3	858	70	6,882	12.5	41,228
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	49.6	2.5	173	70	3,632	4.8	65,577
Other/unknown	57.9	6.6	530	80	9,130	5.8	9,676

Table ND3

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

- 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. In seven states (DE, IA, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.
- d. In seven states (DE, IA, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.
- e. 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.
- f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service; 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, ALASKA, 2003

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS <sup>c</sup>		Number of Rx, Percentage with:						Beneficiaries	Mean \$, All Medicaid FFS <sup>d</sup>	Benefit Months	
			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	Beneficiaries					
All	0.7	\$52	8.5 %	45.8 %	4.3 %	3.9 %	1.6 %	0.7 %	\$613	116,481	995,419			
<b>Age</b>														
5 and younger	0.3	16	3.2	46.6	1.9	0.6	0.0	0.0	495	31,240	265,719			
6-14	0.3	24	7.0	55.6	2.4	1.6	0.2	0.1	344	37,528	350,255			
15-20	0.5	41	5.5	47.6	4.5	2.8	0.6	0.1	748	18,756	156,531			
21-44	1.5	103	11.2	33.7	8.7	8.6	3.4	1.3	916	22,373	161,253			
45-64	3.9	276	18.8	22.4	11.4	19.5	13.0	6.8	1,467	5,866	54,363			
65-74	3.0	169	10.1	17.5	12.7	24.3	10.3	3.3	1,681	457	4,709			
75-84	2.9	148	7.2	18.0	13.2	27.8	8.8	2.4	2,054	205	2,086			
85 and older	4.1	192	5.9	20.0	18.2	23.6	12.7	7.3	3,262	55	502			
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0	1	1			
<b>Basis of Eligibility<sup>e</sup></b>														
Aged	3.0	164	8.8	21.8	13.0	23.9	8.8	3.0	1,861	724	6,878			
Disabled	4.0	324	13.4	17.6	11.4	20.1	13.7	8.2	2,418	7,513	77,526			
Adults	1.0	59	9.3	36.8	8.0	7.1	2.2	0.4	635	27,071	189,663			
Children	0.3	20	5.0	51.6	2.3	1.2	0.2	0.0	401	81,173	721,352			
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0			
<b>Gender</b>														
Female	0.9	56	8.9	42.2	5.0	4.6	2.0	0.8	628	64,190	538,292			
Male	0.6	48	8.0	50.2	3.4	3.2	1.0	0.5	595	52,288	457,100			
Unknown	0.0	0	0.1	66.7	0.0	0.0	0.0	0.0	478	3	27			
<b>Race</b>														
White	1.0	73	12.0	40.0	5.4	5.3	2.4	1.0	604	48,589	410,313			
African American	0.9	60	12.2	46.0	4.7	3.8	1.5	0.9	496	6,279	53,600			
Other/unknown	0.5	35	5.6	50.3	3.4	2.9	0.9	0.4	632	61,613	531,506			
<b>Use of Nursing Facilities<sup>f</sup></b>														
Entire year	8.1	637	5.1	2.8	9.9	31.0	28.2	23.9	12,412	71	631			
Part year	8.6	625	7.0	1.0	6.9	24.5	36.3	21.6	8,864	102	977			
None	0.7	51	8.6	45.9	4.3	3.9	1.5	0.6	598	116,308	993,811			
<b>Maintenance Assistance Status</b>														
Cash	1.4	98	12.5	39.4	41.2	7.7	3.8	1.7	788	41,228	360,185			
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0			
Poverty related	0.3	21	4.8	50.4	45.4	1.3	0.2	0.0	433	65,577	550,687			
Other/unknown	0.8	61	5.8	42.1	43.7	5.8	1.6	0.4	1,045	9,676	84,547			

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

- 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. In seven states (DE, IA, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.
  - d. In seven states (DE, IA, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.
  - e. 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.
  - f. 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 = Centers for Medicare & Medicaid Services; FFS = fee-for-service; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE ND.5  
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, ALASKA, 2003

Beneficiary	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>0.7</b>	<b>\$52</b>	<b>\$71</b>	<b>0.3</b>	<b>\$42</b>	<b>\$121</b>	<b>0.0</b>	<b>\$2</b>	<b>\$53</b>	<b>0.3</b>	<b>\$8</b>	<b>\$24</b>
<b>Age</b>												
5 and younger	0.3	16	58	0.1	12	113	0.0	1	43	0.1	3	18
6-14	0.3	24	81	0.2	20	128	0.0	1	72	0.1	3	24
15-20	0.5	41	86	0.2	35	146	0.0	2	67	0.2	5	23
21-44	1.5	103	67	0.7	80	119	0.1	4	51	0.8	18	24
45-64	3.9	276	70	1.9	219	117	0.2	11	47	1.8	46	25
65-74	3.0	169	56	1.5	129	88	0.2	7	38	1.4	32	23
75-84	2.9	148	51	1.4	111	78	0.2	8	34	1.2	29	23
85 and older	4.1	192	47	1.9	141	74	0.3	10	29	1.9	41	22
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	3.0	164	54	1.5	126	86	0.2	8	37	1.3	29	22
Disabled	4.0	324	80	2.0	265	129	0.2	12	55	1.7	46	26
Adults	1.0	59	58	0.4	43	112	0.1	3	49	0.6	12	22
Children	0.3	20	70	0.1	16	119	0.0	1	55	0.1	3	21
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Gender</b>												
Female	0.9	56	63	0.4	43	108	0.0	3	50	0.4	10	23
Male	0.6	48	85	0.3	40	145	0.0	2	59	0.3	6	24
Unknown	0.0	0	11	0.0	0	0	0.0	0	0	0.0	0	11
<b>Race</b>												
White	1.0	73	74	0.5	59	122	0.0	2	61	0.5	12	25
African American	0.9	60	70	0.5	50	112	0.0	1	51	0.4	8	22
Other/unknown	0.5	35	66	0.2	28	121	0.0	2	47	0.3	6	22
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	8.1	637	79	3.7	470	128	0.6	36	56	3.7	129	35
Part year	8.6	625	73	4.2	487	116	0.6	26	44	3.8	112	30
None	0.7	51	71	0.3	41	121	0.0	2	53	0.3	8	23
<b>Maintenance Assistance Status</b>												
Cash	1.4	98	70	0.7	78	119	0.1	4	50	0.7	16	24
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.3	21	70	0.1	17	125	0.0	1	55	0.1	3	21
Other/unknown	0.8	61	80	0.4	50	130	0.0	3	67	0.3	8	24

Table ND5

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

- 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 Alaska, 5.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- 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 = Centers for Medicare & 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, ALASKA, 2003

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				Users <sup>e</sup>								
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	Percentage of All Beneficiaries	As a Percentage of All Beneficiaries	Number of Benefit Months			
															\$10	\$1	\$3
Anti-infective Agents	0.2	0.1	0.0	0.1	\$14	\$10	\$1	\$3	\$60	\$97	\$84	\$26	84,815	\$5,091,931	38,229	32.8 %	373,417
Biologicals	0.4	0.4	0.0	0.0	485	485	0	0	1214	1,214	0	0	1,011	1,227,068	301	0.3	2,529
Antineoplastic Agents	0.6	0.2	0.1	0.2	179	165	5	9	306	659	59	38	2,315	709,369	387	0.3	3,958
Endocrine/Metabolic Drugs	0.5	0.3	0.1	0.2	26	18	4	4	49	70	38	26	57,236	2,820,250	11,554	9.9	108,974
Cardiovascular Agents	1.2	0.4	0.1	0.7	45	30	2	12	37	69	36	17	69,350	2,574,855	5,652	4.9	57,197
Respiratory Agents	0.4	0.2	0.0	0.2	22	18	1	3	58	85	68	22	69,783	4,051,444	18,447	15.8	183,349
Gastrointestinal Agents	0.5	0.3	0.0	0.2	59	49	2	8	112	152	205	42	37,373	4,174,686	7,107	6.1	70,386
Genitourinary Agents	0.3	0.2	0.0	0.1	14	12	1	1	50	60	47	18	8,577	427,093	3,279	2.8	30,600
CNS Drugs	1.1	0.7	0.0	0.4	100	88	2	10	87	122	105	25	141,407	12,313,191	12,670	10.9	123,051
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.1	0.1	55	45	4	6	86	100	73	46	21,142	1,813,121	3,173	2.7	32,755
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	164	164	0	0	202	204	0	15	836	169,043	98	0.1	1,033
Analgesics and Anesthetics	0.5	0.1	0.0	0.3	30	21	1	7	61	173	40	21	102,287	6,204,608	22,105	19.0	209,734
Neuromuscular Agents	0.8	0.4	0.1	0.4	54	42	2	10	68	110	43	27	62,284	4,238,430	7,800	6.7	78,277
Nutritional Products	0.3	0.0	0.0	0.3	4	0	0	4	14	35	17	14	16,414	237,734	5,981	5.1	53,880
Hematological Agents	0.7	0.2	0.2	0.3	320	312	4	4	448	1,302	21	14	7,601	3,403,329	1,083	0.9	10,637
Topical Products	0.2	0.1	0.0	0.1	9	6	1	3	42	75	63	21	45,354	1,916,932	21,904	18.8	216,840
Miscellaneous Products	0.2	0.1	0.0	0.0	31	26	3	2	160	176	242	66	1,915	306,307	985	0.8	10,038
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	5	0	0	0	37	0	0	0	3,534	129,502	2,478	2.1	25,137
<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.	733,234	51,808,893	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

- a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. 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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
  - 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 Alaska, 5.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
  - e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2003.
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & 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, ALASKA, 2003

Top 10 Drug Groups	Users			Among Users		
	Total Medicaid Rx \$	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	Rx \$ per Benefit
						Month
ANTIPSYCHOTICS	\$7,297,164	4,583	3.9 %	48,435	0.9	\$159
ANTIDEPRESSANTS	4,155,953	11,555	9.9	115,152	0.6	60
ANALGESICS - Narcotic	3,792,712	23,012	19.8	221,932	0.3	56
ANTICONVULSANT	3,525,872	4,514	3.9	47,305	0.8	89
ULCER DRUGS	2,810,307	6,280	5.4	63,113	0.4	100
MISC. HEMATOLOGICAL	2,716,709	220	0.2	2,344	0.9	1,256
ANTIASTHMATIC	2,489,206	15,704	13.5	159,139	0.3	62
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	1,813,121	3,735	3.2	39,075	0.5	86
ANALGESICS - ANTI-INFLAMMATORY	1,788,564	12,786	11.0	124,311	0.2	62
DERMATOLOGICAL	1,349,120	17,986	15.4	180,913	0.2	48
<b>Total</b>	<b>31,738,728</b>	<b>100,375</b>		<b>1,001,719</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad77847b6615> (October 26, 2007).

Bene Mo(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & 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, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, ALASKA, 2003

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$			
<b>All</b>	<b>370,936</b>	<b>\$31,738,728</b>	<b>4,583</b>	<b>3.9 %</b>	<b>48,435</b>	<b>0.9</b>	<b>\$151</b>	<b>11,555</b>	<b>9.9 %</b>	<b>115,152</b>	<b>0.6</b>	<b>\$36</b>			
<b>Female</b>	232,353	17,254,174	2,323	3.6	24,407	1.0	138	8,343	13.0	82,371	0.6	36			
<b>Disabled</b>	104,850	9,182,098	1,150	29.9	12,852	1.3	192	2,405	62.4	26,742	0.9	50			
5 and younger	533	60,148	2	1.3	22	0.2	22	4	2.6	48	0.4	26			
6-14	2,522	289,877	49	17.6	567	0.8	137	52	18.7	581	0.6	31			
15-20	2,711	327,562	71	27.2	806	0.9	154	78	29.9	886	0.6	47			
21-44	40,510	3,477,644	508	38.7	5,691	1.4	190	955	72.7	10,561	0.9	51			
45-64	57,802	4,946,883	512	28.8	5,670	1.5	207	1,297	72.9	14,462	0.9	50			
65-74	772	79,984	8	12.3	96	0.6	67	19	29.2	204	0.5	37			
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>	127,503	8,072,076	1,173	1.9	11,555	0.6	79	5,938	9.8	55,629	0.4	29			
5 and younger	9,316	371,977	12	0.1	130	0.3	42	14	0.1	150	0.4	24			
6-14	19,945	1,424,023	274	1.5	2,946	0.7	90	548	3.0	5,809	0.5	28			
15-20	20,836	1,261,601	329	3.4	3,249	0.6	80	1,236	12.7	11,934	0.4	27			
21-44	61,869	3,856,374	467	3.0	4,334	0.4	61	3,529	22.5	31,843	0.4	30			
45-64	11,633	865,572	61	3.9	586	0.8	109	551	35.6	5,254	0.5	32			
65-74	2,438	186,397	16	6.9	168	2.0	207	30	12.9	306	0.7	38			
75-84	960	71,202	7	5.5	62	0.9	120	20	15.6	217	0.8	35			
85 and older	506	34,930	7	19.4	80	1.1	83	10	27.8	116	1.0	36			
<b>Male</b>	138,583	14,484,554	2,260	4.3	24,028	0.9	163	3,212	6.1	32,781	0.6	37			
<b>Disabled</b>	61,374	6,896,937	1,115	30.5	12,248	1.3	223	1,208	33.0	13,059	0.9	47			
5 and younger	590	56,216	5	2.7	49	0.5	72	4	2.2	45	0.2	7			
6-14	5,603	674,632	164	32.1	1,857	0.8	150	87	17.0	982	0.7	44			
15-20	5,117	1,083,021	151	35.6	1,671	0.9	179	101	23.8	1,103	0.7	45			
21-44	22,155	2,449,093	502	46.5	5,447	1.4	259	440	40.8	4,688	1.0	53			
45-64	27,281	2,585,630	285	20.0	3,130	1.4	229	567	39.8	6,144	0.8	44			
65-74	628	48,345	8	21.6	94	1.8	218	9	24.3	97	1.0	40			
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
<b>Other Eligibles</b>	77,209	7,587,617	1,145	2.4	11,780	0.6	102	2,004	4.1	19,722	0.5	30			
5 and younger	12,781	789,650	25	0.2	279	0.4	76	14	0.1	151	0.2	12			
6-14	30,650	3,484,022	628	3.4	6,648	0.6	105	717	3.8	7,424	0.5	30			
15-20	15,373	1,968,720	365	4.4	3,667	0.6	103	650	7.8	6,321	0.5	34			
21-44	11,424	790,242	89	2.1	823	0.4	71	442	10.3	4,047	0.3	24			
45-64	5,152	418,788	24	2.1	216	0.8	94	154	13.8	1,513	0.5	31			
65-74	908	79,711	6	4.9	70	1.0	206	11	9.0	103	0.9	33			
75-84	800	51,418	5	6.5	60	0.6	79	11	14.3	129	1.1	52			
85 and older	121	5,066	3	15.8	17	1.2	34	5	26.3	34	1.5	27			
<b>Unknown</b>	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 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & 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, BASIS OF ELIGIBILITY, AND AGE<sup>a,b,c</sup>  
 NONDUAL BENEFICIARIES, ALASKA, 2003

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTICONVULSANT					ULCER DRUGS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>23,012</b>	<b>19.8 %</b>	<b>221,932</b>	<b>0.3</b>	<b>\$17</b>	<b>4,514</b>	<b>3.9 %</b>	<b>47,305</b>	<b>0.8</b>	<b>\$75</b>	<b>6,280</b>	<b>5.4 %</b>	<b>63,113</b>	<b>0.4</b>	<b>\$45</b>
<b>Female</b>	15,792	24.6	150,991	0.3	17	2,732	4.3	28,384	0.8	73	4,319	6.7	43,218	0.5	46
<b>Disabled</b>	2,938	76.3	32,630	0.5	39	1,303	33.8	14,460	1.1	99	1,489	38.7	16,599	0.7	67
5 and younger	19	12.3	212	0.1	1	22	14.2	253	0.8	138	21	13.5	220	0.4	37
6-14	36	12.9	408	0.1	8	82	29.5	939	0.8	132	25	9.0	283	0.5	52
15-20	60	23.0	662	0.1	2	85	32.6	963	0.9	114	33	12.6	365	0.5	63
21-44	1,124	85.5	12,391	0.5	40	551	41.9	6,084	1.3	104	444	33.8	4,939	0.7	63
45-64	1,673	94.0	18,659	0.5	41	555	31.2	6,125	1.1	84	938	52.7	10,476	0.7	70
65-74	26	40.0	298	0.4	23	8	12.3	96	0.6	88	28	43.1	316	0.6	67
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	12,854	21.3	118,361	0.3	10	1,429	2.4	13,924	0.5	46	2,830	4.7	26,619	0.3	32
5 and younger	417	2.8	4,337	0.1	1	33	0.2	333	0.3	23	171	1.1	1,569	0.2	17
6-14	1,233	6.8	12,754	0.1	2	203	1.1	2,198	0.6	47	268	1.5	2,758	0.2	16
15-20	2,367	24.3	22,192	0.2	2	225	2.3	2,194	0.6	53	445	4.6	4,144	0.2	20
21-44	7,862	50.1	69,439	0.3	14	824	5.3	7,739	0.5	43	1,467	9.4	13,354	0.3	34
45-64	846	54.7	8,223	0.4	22	122	7.9	1,246	0.5	52	358	23.2	3,451	0.4	46
65-74	75	32.2	834	0.2	16	15	6.4	160	1.5	76	74	31.8	820	0.7	58
75-84	46	35.9	504	0.3	7	4	3.1	28	0.4	8	36	28.1	407	0.5	69
85 and older	8	22.2	78	0.2	5	3	8.3	26	0.3	14	11	30.6	116	1.1	117
<b>Male</b>	7,220	13.8	70,941	0.3	18	1,782	3.4	18,921	0.8	77	1,961	3.8	19,895	0.4	42
<b>Disabled</b>	1,610	44.0	17,312	0.4	43	909	24.8	10,058	1.1	98	769	21.0	8,274	0.6	61
5 and younger	17	9.1	183	0.1	1	22	11.8	235	0.7	103	19	10.2	205	0.3	29
6-14	55	10.8	634	0.1	2	136	26.6	1,569	0.8	98	40	7.8	458	0.5	67
15-20	96	22.6	1,024	0.2	9	113	26.7	1,270	1.0	112	42	9.9	454	0.5	36
21-44	480	44.5	5,168	0.4	30	344	31.9	3,730	1.2	108	207	19.2	2,172	0.6	53
45-64	948	66.6	10,155	0.5	58	289	20.3	3,200	1.1	83	446	31.3	4,826	0.7	66
65-74	14	37.8	148	0.3	7	5	13.5	54	1.1	28	15	40.5	159	0.8	86
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>	5,610	11.5	53,629	0.2	10	873	1.8	8,863	0.6	54	1,192	2.5	11,621	0.3	29
5 and younger	632	3.9	6,481	0.1	1	69	0.4	759	0.4	42	263	1.6	2,468	0.2	15
6-14	1,241	6.7	12,851	0.1	2	361	1.9	3,772	0.6	54	206	1.1	2,217	0.2	18
15-20	1,467	17.6	14,133	0.1	2	200	2.4	1,988	0.7	63	180	7.2	1,706	0.3	24
21-44	1,767	41.2	15,336	0.4	19	169	3.9	1,599	0.4	51	318	7.4	2,960	0.3	39
45-64	454	40.6	4,287	0.5	42	58	5.2	567	0.6	47	162	14.5	1,566	0.4	43
65-74	24	19.7	268	0.4	61	10	8.2	106	1.5	56	34	27.9	376	0.5	47
75-84	22	28.6	256	0.2	3	6	7.8	72	0.8	20	24	31.2	271	0.6	49
85 and older	3	15.8	17	0.2	9	0	0.0	0	0.0	0	5	26.3	57	0.3	35
<b>Unknown</b>	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 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & 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, BASIS OF ELIGIBILITY, AND AGE<sup>a,b,c</sup>  
 NONDUAL BENEFICIARIES, ALASKA, 2003

Beneficiary Characteristics	MISC. HEMATOLOGICAL				ANTIASTHMATIC				STIMULANTS/ANTI-OBESITY/ANOREXIANTS						
	Number of Users	Users as % of All Benes	Number of Rx	Mean Rx \$	Number of Users	Users as % of All Benes	Number of Rx	Mean Rx \$	Number of Users	Users as % of All Benes	Number of Rx	Mean Rx \$			
<b>All</b>	<b>220</b>	<b>0.2 %</b>	<b>2,344</b>	<b>0.9</b>	<b>\$1,159</b>	<b>15,704</b>	<b>13.5 %</b>	<b>159,139</b>	<b>0.3</b>	<b>\$16</b>	<b>3,735</b>	<b>3.2 %</b>	<b>39,075</b>	<b>0.5</b>	<b>\$46</b>
<b>Female</b>	125	0.2	1,344	0.8	169	8,854	13.8	89,089	0.3	16	1,097	1.7	11,560	0.5	46
<b>Disabled</b>	89	2.3	965	1.0	81	1,695	44.0	18,820	0.4	29	155	4.0	1,738	0.6	62
5 and younger	0	0.0	0	0.0	0	53	34.2	557	0.3	22	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	56	20.1	607	0.3	21	50	18.0	566	0.7	54
15-20	0	0.0	0	0.0	0	50	19.2	564	0.2	15	19	7.3	215	0.6	58
21-44	22	1.7	245	0.9	85	484	36.8	5,418	0.3	22	47	3.6	525	0.6	78
45-64	64	3.6	687	1.0	81	1,022	57.4	11,338	0.5	34	38	2.1	421	0.5	57
65-74	3	4.6	33	0.5	65	30	46.2	336	0.3	16	1	1.5	11	0.5	8
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>	36	0.1	379	0.5	391	7,159	11.9	70,269	0.2	13	942	1.6	9,822	0.5	43
5 and younger	0	0.0	0	0.0	0	1,897	12.7	18,907	0.2	8	25	0.2	273	0.3	18
6-14	1	0.0	10	1.9	12,793	1,734	9.6	18,235	0.2	12	600	3.3	6,444	0.5	41
15-20	0	0.0	0	0.0	0	1,055	10.8	10,369	0.2	13	173	1.8	1,751	0.4	41
21-44	10	0.1	100	0.3	30	1,984	12.6	17,841	0.3	16	127	0.8	1,200	0.6	63
45-64	8	0.5	89	0.6	70	360	23.3	3,453	0.4	25	17	1.1	154	0.5	62
65-74	8	3.4	92	0.5	65	96	41.2	1,105	0.4	29	0	0.0	0	0.0	0
75-84	5	3.9	50	0.5	57	24	18.8	264	0.3	26	0	0.0	0	0.0	0
85 and older	4	11.1	38	0.8	57	9	25.0	95	0.3	26	0	0.0	0	0.0	0
<b>Male</b>	95	0.2	1,000	1.0	2,490	6,850	13.1	70,050	0.2	15	2,638	5.0	27,515	0.6	47
<b>Disabled</b>	66	1.8	707	0.7	727	830	22.7	9,122	0.4	32	254	6.9	2,849	0.7	65
5 and younger	0	0.0	0	0.0	0	67	36.0	757	0.3	23	6	3.2	58	0.3	21
6-14	0	0.0	0	0.0	0	119	23.3	1,345	0.3	42	147	28.8	1,670	0.7	61
15-20	2	0.5	24	0.6	19,685	72	17.0	799	0.4	27	64	15.1	720	0.7	63
21-44	7	0.6	73	0.2	24	145	13.4	1,577	0.4	24	16	1.5	169	0.6	70
45-64	56	3.9	604	0.7	65	415	29.1	4,508	0.5	35	21	1.5	232	0.8	109
65-74	1	2.7	6	0.8	89	12	32.4	136	0.3	23	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
<b>Other Eligibles</b>	29	0.1	293	1.9	6,744	6,020	12.4	60,928	0.2	12	2,384	4.9	24,666	0.5	44
5 and younger	2	0.0	21	1.9	9,623	2,826	17.7	28,590	0.2	9	104	0.6	1,134	0.4	28
6-14	3	0.0	32	5.0	30,806	2,155	11.5	22,427	0.2	14	1,825	9.8	18,917	0.6	46
15-20	3	0.0	24	5.3	32,165	614	7.4	5,925	0.2	13	404	4.8	4,153	0.5	42
21-44	4	0.1	38	0.4	48	255	5.9	2,215	0.2	14	47	1.1	415	0.5	53
45-64	8	0.7	78	0.8	52	106	9.5	1,046	0.4	28	4	0.4	47	0.2	19
65-74	6	4.9	65	1.1	90	29	23.8	318	0.4	30	0	0.0	0	0.0	0
75-84	3	3.9	35	1.8	126	31	40.3	359	0.5	40	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	4	21.1	48	0.2	10	0	0.0	0	0.0	0
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table ND7C

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene Mo(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & 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, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, ALASKA, 2003

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY				DERMATOLOGICAL						
	Number of Users	Users as % of All Benes	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All Benes	Mean Number of Rx	Mean Rx \$	Number of Beneficiaries	Benefit Months	Number of Months
<b>All</b>	<b>12,786</b>	<b>11.0 %</b>	<b>0.2</b>	<b>\$14</b>	<b>17,986</b>	<b>15.4 %</b>	<b>0.2</b>	<b>\$8</b>	<b>116,481</b>	<b>995,419</b>	
<b>Female</b>	8,931	13.9	0.2	16	10,955	17.1	0.2	8	64,189	538,291	
<b>Disabled</b>	1,591	41.3	0.4	40	1,384	35.9	0.2	10	3,852	40,505	
5 and younger	7	4.5	0.1	3	39	25.2	0.1	6	155	1,454	
6-14	16	5.8	0.2	6	95	34.2	0.1	7	278	3,003	
15-20	41	15.7	0.1	4	57	21.8	0.1	8	261	2,732	
21-44	556	42.3	0.4	30	479	36.5	0.2	9	1,314	13,896	
45-64	944	53.1	0.5	47	701	39.4	0.2	11	1,779	18,718	
65-74	27	41.5	0.3	65	13	20.0	0.1	7	65	702	
75-84	0	0.0	0.0	0	0	0.0	0.0	0	0	0	
85 and older	0	0.0	0.0	0	0	0.0	0.0	0	0	0	
<b>Other Eligibles</b>	7,340	12.2	0.2	10	9,571	15.9	0.2	7	60,337	497,786	
5 and younger	381	2.6	0.1	2	3,201	21.5	0.1	5	14,892	126,516	
6-14	695	3.8	0.1	7	2,177	12.0	0.1	7	18,078	167,957	
15-20	1,491	15.3	0.2	6	1,567	16.1	0.2	9	9,737	79,639	
21-44	4,033	25.7	0.2	10	2,241	14.3	0.2	9	15,687	106,865	
45-64	612	39.6	0.3	17	300	19.4	0.2	8	1,546	12,750	
65-74	80	34.3	0.4	26	44	18.9	0.2	10	233	2,402	
75-84	42	32.8	0.4	27	32	25.0	0.2	9	128	1,312	
85 and older	6	16.7	0.9	45	9	25.0	0.3	20	36	345	
<b>Male</b>	3,855	7.4	0.2	11	7,031	13.4	0.2	7	52,288	457,100	
<b>Disabled</b>	800	21.9	0.4	27	891	24.3	0.2	8	3,661	37,021	
5 and younger	4	2.2	0.2	3	52	28.0	0.1	5	186	1,727	
6-14	14	2.7	0.1	1	110	21.5	0.2	7	511	5,537	
15-20	56	13.2	0.2	22	129	30.4	0.2	11	424	4,370	
21-44	235	21.8	0.3	18	245	22.7	0.2	9	1,079	10,880	
45-64	475	33.4	0.4	34	336	23.6	0.2	8	1,424	14,114	
65-74	16	43.2	0.3	14	19	51.4	0.2	8	37	393	
75-84	0	0.0	0.0	0	0	0.0	0.0	0	0	0	
85 and older	0	0.0	0.0	0	0	0.0	0.0	0	0	0	
<b>Other Eligibles</b>	3,055	6.3	0.2	7	6,140	12.6	0.1	7	48,627	420,079	
5 and younger	407	2.5	0.1	2	3,220	20.1	0.1	6	16,004	135,995	
6-14	596	3.2	0.1	3	1,515	8.1	0.1	7	18,661	173,758	
15-20	872	10.5	0.1	5	976	11.7	0.2	11	8,334	69,790	
21-44	858	20.0	0.2	10	269	6.3	0.2	8	4,293	29,612	
45-64	271	24.3	0.2	14	118	10.6	0.2	8	1,117	8,781	
65-74	32	26.2	0.3	14	20	16.4	0.1	7	122	1,212	
75-84	15	19.5	0.4	21	19	24.7	0.2	9	77	774	
85 and older	4	21.1	0.3	19	3	15.8	0.2	6	19	157	
<b>Unknown</b>	0	0.0	0.0	0	0	0.0	0.0	0	4	28	

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

- 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 2003. 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 2003. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & 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, ALASKA, 2003**

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents	
				8.1	7.1
<b>All</b>	<b>\$637</b>		<b>71</b>		<b>631</b>
<b>Age</b>					
0-64	741	9.2	52		441
65-74	356	5.0	10		101
75-84	518	5.8	6		57
85 and older	303	6.2	3		32
Unknown	0	0.0	0		0
<b>Gender</b>					
Female	668	8.4	40		370
Male	593	7.6	31		261
Unknown	0	0.0	0		0
<b>Race</b>					
White	723	9.9	32		248
African American	530	6.9	5		54
Other/unknown	590	6.9	34		329
<b>Basis of Eligibility<sup>c</sup></b>					
Aged	410	5.4	17		171
Disabled	722	9.1	54		460
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 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2003 Medicaid enrollment. A total of 102 beneficiaries who were in nursing facilities for part of their enrollment and their 977 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 = Centers for Medicare & 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, ALASKA, 2003

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month 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 Number of Rx	Total Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months			
	Generic	Generic	Generic	Generic	Generic	Generic	Generic	Generic	Generic	Generic	Generic	Generic	Generic	Generic			
Anti-infective Agents	0.4	0.2	0.0	0.2	\$32	\$26	\$1	\$6	\$76	\$123	\$76	\$28	\$159	\$12,125	38	53.5 %	380
Biologicals	0.1	0.1	0.0	0.0	2	2	0	0	24	24	0	0	6	144	6	8.5	72
Antineoplastic Agents	0.9	0.8	0.0	0.1	###	1,101	0	2	1,241	1,351	0	32	24	29,790	3	4.2	27
Endocrine/Metabolic Drugs	1.4	0.6	0.1	0.7	54	29	6	19	40	51	50	29	304	12,140	21	29.6	223
Cardiovascular Agents	2.2	0.8	0.1	1.2	95	70	5	21	44	84	32	18	699	30,733	36	50.7	322
Respiratory Agents	1.0	0.7	0.1	0.2	79	67	8	4	83	102	78	22	237	19,636	24	33.8	249
Gastrointestinal Agents	1.5	0.8	0.0	0.7	102	82	0	20	66	102	0	27	667	44,314	47	66.2	435
Genitourinary Agents	0.4	0.3	0.0	0.1	30	27	0	3	79	91	0	37	51	4,051	13	18.3	135
CNS Drugs	2.4	1.6	0.1	0.8	191	153	20	18	78	96	234	24	1,067	83,676	51	71.8	439
Stimulants/Anti-obesity/Anorexia	1.5	0.0	0.0	1.5	32	0	0	32	22	0	0	22	35	756	2	2.8	24
Miscellaneous Psychological/Neurological Agents	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Analgesics and Anesthetics	1.6	0.7	0.2	0.7	189	158	6	25	120	224	34	36	505	60,760	39	54.9	322
Neuromuscular Agents	1.6	0.4	0.1	1.0	109	34	2	73	70	77	26	70	721	50,315	46	64.8	461
Nutritional Products	0.7	0.0	0.0	0.7	19	0	0	19	26	16	0	27	104	2,726	17	23.9	143
Hematological Agents	2.3	0.4	1.6	0.3	360	334	21	5	160	930	13	17	201	32,080	13	18.3	89
Topical Products	0.8	0.2	0.0	0.5	43	21	10	12	56	86	199	26	297	16,754	40	56.3	386
Miscellaneous Products	0.1	0.1	0.0	0.0	2	2	0	0	23	23	0	0	2	46	2	2.8	23
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	39	0	0	0	99	0	0	0	20	1,975	6	8.5	51
<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.	5,099	402,021	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

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 2003. A total of 102 beneficiaries who were in nursing facilities for part of their enrollment and their 977 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 2003. 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.medispan.com/marketing/ContentPage.aspx?contentid=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In Alaska, 5.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & 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, ALASKA, 2003

Top 10 Drug Groups in Nursing Facilities	Users				Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
HEMATOPOIETIC AGENTS	\$13,595	5	7.0 %	25	1.1	\$504	\$644	
ANTIDEPRESSANTS	40,609	50	70.4	480	1.4	62	85	
ANTIPSYCHOTICS	38,011	21	29.6	180	1.0	204	211	
ULCER DRUGS	34,174	35	49.3	328	1.1	92	104	
ANALGESICS - Narcotic	32,179	47	66.2	430	0.8	98	75	
ANTINEOPLASTICS	29,790	3	4.2	22	1.1	1241	1,354	
ANTICONVULSANT	25,340	39	54.9	388	1.0	63	65	
ANALGESICS - ANTI-INFLAMMATORY	27,106	18	25.4	184	0.9	172	147	
MUSCULOSKELETAL THERAPY AGENTS	23,483	18	25.4	202	1.4	83	116	
ANTICOAGULANTS	16,906	7	9.9	64	2.5	104	264	
Total	281,193	243		2,303	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

- 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 2003. A total of 102 beneficiaries who were in nursing facilities for part of their enrollment and their 977 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & 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, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup> NONDUAL BENEFICIARIES, ALASKA, 2003

Beneficiary Characteristics	All Top 10 Drug Groups					HEMATOPOIETIC AGENTS					ANTIDEPRESSANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$			
<b>All</b>	<b>2,599</b>	<b>\$281,193</b>	<b>5</b>	<b>7.0 %</b>	<b>25</b>	<b>1.1</b>	<b>\$544</b>	<b>50</b>	<b>70.4 %</b>	<b>480</b>	<b>1.4</b>	<b>\$85</b>			
<b>Female</b>	1,584	186,425	4	10.0	16	1.0	744	27	67.5	280	1.2	84			
<b>Disabled</b>	1,334	162,544	4	14.3	16	1.0	744	24	85.7	259	1.2	89			
64 or younger	1,322	161,515	4	14.8	16	1.0	744	23	85.2	247	1.3	89			
65-74	12	1,029	0	0.0	0	0.0	0	1	100.0	12	1.0	86			
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>	250	23,881	0	0.0	0	0.0	0	3	25.0	21	0.6	21			
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	143	12,364	0	0.0	0	0.0	0	1	16.7	1	1.0	42			
75-84	55	7,135	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
85 and older	52	4,382	0	0.0	0	0.0	0	2	66.7	20	0.6	20			
<b>Male</b>	1,015	94,768	1	3.2	9	1.2	188	23	74.2	200	1.6	86			
<b>Disabled</b>	812	72,503	1	3.8	9	1.2	188	19	73.1	152	1.8	84			
64 or younger	790	71,015	1	4.0	9	1.2	188	18	72.0	145	1.8	83			
65-74	22	1,488	0	0.0	0	0.0	0	1	100.0	7	1.6	108			
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>	203	22,265	0	0.0	0	0.0	0	4	80.0	48	1.0	92			
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	83	11,798	0	0.0	0	0.0	0	1	50.0	12	1.0	87			
75-84	120	10,467	0	0.0	0	0.0	0	3	100.0	36	1.0	94			
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
<b>Unknown</b>	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 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

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 2003. A total of 102 beneficiaries who were in nursing facilities for part of their enrollment and their 977 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & 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, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, ALASKA, 2003

Beneficiary Characteristics	ANTIPSYCHOTICS					ULCER DRUGS					ANALGESICS - Narcotic				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	21	29.6 %	180	1.0	\$211	35	49.3 %	328	1.1	\$104	47	66.2 %	430	0.8	\$75
<b>Female</b>	8	20.0	68	1.5	257	21	52.5	213	1.0	96	26	65.0	257	0.9	99
<b>Disabled</b>	2	7.1	16	1.8	321	12	42.9	111	1.0	99	20	71.4	213	1.0	116
64 or younger	2	7.4	16	1.8	321	12	44.4	111	1.0	99	20	74.1	213	1.0	116
65-74	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
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>	6	50.0	52	1.5	237	9	75.0	102	1.1	93	6	50.0	44	0.3	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
65-74	3	50.0	25	2.0	301	4	66.7	46	1.5	89	0	0.0	0	0.0	0
75-84	2	66.7	19	1.2	236	2	66.7	24	0.5	75	4	133.3	28	0.3	19
85 and older	1	33.3	8	0.5	37	3	100.0	32	1.0	111	2	66.7	16	0.3	8
<b>Male</b>	13	41.9	112	0.7	184	14	45.2	115	1.3	119	21	67.7	173	0.6	40
<b>Disabled</b>	9	34.6	66	0.8	159	12	46.2	91	1.4	113	20	76.9	161	0.6	42
64 or younger	9	36.0	66	0.8	159	11	44.0	84	1.4	114	18	72.0	147	0.6	46
65-74	0	0.0	0	0.0	0	1	100.0	7	1.0	93	2	200.0	14	0.3	6
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>	4	80.0	46	0.7	220	2	40.0	24	1.0	145	1	20.0	12	0.3	3
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	2	100.0	22	0.8	308	1	50.0	12	1.1	152	0	0.0	0	0.0	0
75-84	2	66.7	24	0.6	139	1	33.3	12	1.0	138	1	33.3	12	0.3	3
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Unknown</b>	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 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

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 2003. A total of 102 beneficiaries who were in nursing facilities for part of their enrollment and their 977 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0ffed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

Table ND10B

Nondual Beneficiaries

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, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, ALASKA, 2003

Beneficiary Characteristics	ANTINEOPLASTICS				ANTICONVULSANT				ANALGESICS - ANTI-INFLAMMATORY						
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>3</b>	<b>4.2 %</b>	<b>22</b>	<b>1.1</b>	<b>\$1,354</b>	<b>39</b>	<b>54.9 %</b>	<b>388</b>	<b>1.0</b>	<b>\$65</b>	<b>18</b>	<b>25.4 %</b>	<b>184</b>	<b>0.9</b>	<b>\$147</b>
<b>Female</b>	2	5.0	10	1.5	1,947	18	45.0	158	1.2	88	12	30.0	124	1.0	200
<b>Disabled</b>	2	7.1	10	1.5	1,947	13	46.4	124	1.3	105	10	35.7	115	1.1	214
64 or younger	2	7.4	10	1.5	1,947	13	48.1	124	1.3	105	10	37.0	115	1.1	214
65-74	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
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>	0	0.0	0	0.0	0	5	41.7	34	0.9	24	2	16.7	9	0.8	22
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	3	50.0	25	1.0	28	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	2	66.7	9	0.6	13	2	66.7	9	0.8	22
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>Male</b>	1	3.2	12	0.8	860	21	67.7	230	0.9	50	6	19.4	60	0.5	38
<b>Disabled</b>	1	3.8	12	0.8	860	15	57.7	161	0.9	56	5	19.2	48	0.4	28
64 or younger	1	4.0	12	0.8	860	15	60.0	161	0.9	56	5	20.0	48	0.4	28
65-74	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
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>	0	0.0	0	0.0	0	6	120.0	69	1.1	36	1	20.0	12	0.8	78
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	3	150.0	33	0.8	41	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	3	100.0	36	1.3	32	1	33.3	12	0.8	78
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>Unknown</b>	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 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

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 2003. A total of 102 beneficiaries who were in nursing facilities for part of their enrollment and their 977 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & 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, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup> NONDUAL BENEFICIARIES, ALASKA, 2003

Beneficiary Characteristics	MUSCULOSKELETAL THERAPY AGENTS					ANTICOAGULANTS						
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
<b>All</b>	<b>18</b>	<b>25.4 %</b>	<b>202</b>	<b>1.4</b>	<b>\$116</b>	<b>7</b>	<b>9.9 %</b>	<b>64</b>	<b>2.5</b>	<b>\$264</b>	<b>71</b>	<b>631</b>
<b>Female</b>	13	32.5	142	1.4	131	5	12.5	44	3.4	253	40	370
<b>Disabled</b>	13	46.4	142	1.4	131	5	17.9	44	3.4	253	28	258
64 or younger	13	48.1	142	1.4	131	5	18.5	44	3.4	253	27	246
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
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>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	12	112
64 or younger	0	0.0	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	6	59
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	21
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	32
<b>Male</b>	5	16.1	60	1.4	82	2	6.5	20	0.7	289	31	261
<b>Disabled</b>	4	15.4	48	1.5	86	2	7.7	20	0.7	289	26	202
64 or younger	4	16.0	48	1.5	86	2	8.0	20	0.7	289	25	195
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	7
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>	1	20.0	12	1.0	67	0	0.0	0	0.0	0	5	59
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	1	50.0	12	1.0	67	0	0.0	0	0.0	0	2	23
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	36
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Unknown</b>	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 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

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 2003. A total of 102 beneficiaries who were in nursing facilities for part of their enrollment and their 977 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 2003. 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 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentid=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & 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>  
 ALASKA, 2003

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx		Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx as a Percentage of Total Number of Beneficiaries	
				Excluded Rx	Excluded Rx				All Nondual Rx \$	1.6 %
<b>All</b>	<b>10,988</b>	<b>9.4 %</b>	<b>0.4</b>	<b>42,459</b>	<b>\$7</b>	<b>\$825,812</b>	<b>\$19</b>	<b>1.6 %</b>	<b>\$116,481</b>	
<b>Age</b>										
5 and younger	2,114	6.8	0.1	3,894	2	74,338	19	1.8	31,240	
6-14	1,389	3.7	0.1	3,159	2	82,178	26	1.0	37,528	
15-20	1,362	7.3	0.2	2,902	4	72,989	25	1.1	18,756	
21-44	4,193	18.7	0.8	17,623	14	309,563	18	1.9	22,373	
45-64	1,763	30.1	2.3	13,695	46	270,952	20	1.8	5,866	
65-74	104	22.8	1.7	760	20	9,359	12	1.2	457	
75-84	47	22.9	1.6	329	23	4,790	15	1.6	205	
85 and older	16	29.1	1.8	97	30	1,643	17	1.7	55	
Unknown	0	0.0	0.0	0	0	0	0	0.0	1	
<b>Basis of Eligibility<sup>c</sup></b>										
Aged	159	22.0	1.6	1,155	21	14,845	13	1.3	724	
Disabled	2,449	32.6	2.7	20,623	64	477,205	23	1.9	7,513	
Adults	4,330	16.0	0.5	13,471	8	209,645	16	1.9	27,071	
Children	4,050	5.0	0.1	7,210	2	124,117	17	0.9	81,173	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
<b>Gender</b>										
Female	7,653	11.9	0.5	30,398	9	570,044	19	1.9	64,190	
Male	3,334	6.4	0.2	12,060	5	255,757	21	1.2	52,288	
Unknown	1	33.3	0.3	1	4	11	11	100.0	3	
<b>Race</b>										
White	4,851	10.0	0.5	24,240	10	493,175	20	1.7	48,589	
African American	436	6.9	0.3	1,791	5	34,059	19	1.1	6,279	
Other/unknown	5,701	9.3	0.3	16,428	5	298,578	18	1.6	61,613	
<b>Use of Nursing Facilities<sup>d</sup></b>										
Entire year	46	64.8	6.0	429	135	9,619	22	2.4	71	
Part year	66	64.7	4.4	449	120	12,262	27	2.0	102	
None	10,876	9.4	0.4	41,581	7	803,931	19	1.6	116,308	
<b>Maintenance Assistance Status</b>										
Cash	5,992	14.5	0.8	31,948	15	636,757	20	1.8	41,228	
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0	
Poverty related	4,071	6.2	0.1	7,311	2	108,465	15	1.0	65,577	
Other/unknown	925	9.6	0.3	3,200	8	80,590	25	1.6	9,676	

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

- 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 2003.
- 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 = Centers for Medicare & 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>  
 ALASKA, 2003

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
All	0.0	\$1	\$19	\$0	\$0	995,419
<b>Age</b>						
5 and younger	0.0	0	19	0	0	265,719
6-14	0.0	0	26	0	0	350,255
15-20	0.0	0	25	0	0	156,531
21-44	0.1	2	18	0	1	161,253
45-64	0.3	5	20	0	3	54,363
65-74	0.2	2	12	0	1	4,709
75-84	0.2	2	15	0	1	2,086
85 and older	0.2	3	17	0	0	502
Unknown	0.0	0	0	0	0	1
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.2	2	13	0	1	6,878
Disabled	0.3	6	23	0	4	77,526
Adults	0.1	1	16	0	1	189,663
Children	0.0	0	17	0	0	721,352
Unknown	0.0	0	0	0	0	0
<b>Gender</b>						
Female	0.1	1	19	0	1	538,292
Male	0.0	1	21	0	0	457,100
Unknown	0.0	0	11	0	0	27
<b>Race</b>						
White	0.1	1	20	0	1	410,313
African American	0.0	1	19	0	0	53,600
Other/unknown	0.0	1	18	0	0	531,506
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.7	15	22	0	7	631
Part year	0.5	13	27	0	8	977
None	0.0	1	19	0	0	993,811
<b>Maintenance Assistance Status</b>						
Cash	0.1	2	20	0	1	360,185
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	0	15	0	0	550,687
Other/unknown	0.0	1	25	0	0	84,547

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

- 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 2003.
- 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 = Centers for Medicare & 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>  
 ALASKA, 2003

Drug Category	Number of Users	Rx \$ per User	Rx \$ as a Percentage of All Part D		Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D	
			Total Rx \$	Excluded Rx \$			Excluded Rx	Excluded Rx
<b>All</b>	<b>12,516</b>	<b>\$66</b>	<b>\$825,812</b>	<b>100.0 %</b>	<b>42,459</b>	<b>\$19</b>	<b>100.0 %</b>	
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0	0.0
Drugs for cosmetic purposes	39	17	660	0.1	48	14	0.1	0.1
Cough and cold medications	751	101	75,840	9.2	1,334	57	3.1	3.1
Vitamins and minerals	2,027	64	129,473	15.7	7,418	17	17.5	17.5
Non-prescription drugs	4,041	26	105,965	12.8	9,623	11	22.7	22.7
Barbiturates	149	83	12,407	1.5	1,006	12	2.4	2.4
Benzodiazepines	3,992	112	447,682	54.2	20,104	22	47.3	47.3
Other Part D Excl Rx Drugs	1,517	35	53,785	6.5	2,926	18	6.9	6.9

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

- 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 2003. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2003. 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 = Centers for Medicare & 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, ALASKA, 2003

Beneficiary Characteristics	Number of Beneficiaries					Number of Benefit Months					
	All	Aged	Disabled	Adults	Unknown	All	Aged	Disabled	Adults	Unknown	
<b>All</b>	<b>116,481</b>	<b>724</b>	<b>7,513</b>	<b>27,071</b>	<b>81,173</b>	<b>995,419</b>	<b>6,878</b>	<b>77,526</b>	<b>189,663</b>	<b>721,352</b>	<b>0</b>
<b>Age</b>											
5 and younger	31,240	0	341	0	30,899	265,719	0	3,181	0	262,538	0
6-14	37,528	1	789	5	36,733	350,255	3	8,540	28	341,684	0
15-20	18,756	6	685	4,739	13,326	156,531	18	7,102	33,264	116,147	0
21-44	22,373	53	2,393	19,714	213	161,253	256	24,776	135,245	976	0
45-64	5,866	51	3,203	2,611	1	54,363	413	32,832	21,112	6	0
65-74	457	353	102	2	0	4,709	3,600	1,095	14	0	0
75-84	205	205	0	0	0	2,086	2,086	0	0	0	0
85 and older	55	55	0	0	0	502	502	0	0	0	0
Unknown	1	0	0	0	1	0	0	0	0	1	0
<b>Gender</b>											
Female	64,190	502	3,852	20,264	39,572	538,292	4,693	40,505	140,709	352,385	0
Male	52,288	222	3,661	6,807	41,598	457,100	2,185	37,021	48,954	368,940	0
Unknown	3	0	0	0	3	27	0	0	0	27	0
<b>Race</b>											
White	48,589	215	4,021	12,250	32,103	410,313	1,716	40,914	84,624	283,059	0
African American	6,279	6	475	1,333	4,465	53,600	54	4,788	9,647	39,111	0
Other/unknown	61,613	503	3,017	13,488	44,605	531,506	5,108	31,824	95,392	399,182	0
<b>Use of Nursing Facilities<sup>c</sup></b>											
Entire year	71	17	54	0	0	631	171	460	0	0	0
Part year	102	4	94	3	1	977	29	911	27	10	0
None	116,308	703	7,365	27,068	81,172	993,811	6,678	76,155	189,636	721,342	0
<b>Maintenance Assistance Status</b>											
Cash	41,228	591	6,820	15,832	17,985	360,185	6,078	70,485	122,372	161,250	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0
Poverty related	65,577	99	0	8,912	56,566	550,687	578	0	50,149	499,960	0
Other/unknown	9,676	34	693	2,327	6,622	84,547	222	7,041	17,142	60,142	0
<b>Managed Care (MC) Status</b>											
Fee-for-service (FFS) all year	116,481	724	7,513	27,071	81,173	995,419	6,878	77,526	189,663	721,352	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

- 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 = Centers for Medicare & 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, ALASKA, 2003

	Beneficiaries and		
	Benefit Months in Cell J of Table 1 Number of Beneficiaries	Included in Cell K of Table 1 Number of Beneficiaries	Excluded from Cell K of Table 1 Number of Beneficiaries
<b>All</b>	<b>116,481</b>	<b>116,481</b>	<b>0</b>
Fee-for-service (FFS) all year	116,481	116,481	0
FFS part year, with Rx claims	0	0	0
FFS part year, with no Rx claims	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0
MC all year, with no Rx claims	0	0	0

Source: Data for this table are from the MAX 2003 file for Alaska, released by CMS in 04/2007. This table was produced on 11/01/2007.

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

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