

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2003 FLORIDA

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TABLE ND.2

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 NONDUAL BENEFICIARIES, FLORIDA, 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	Other/ Unknown	
All	1,808,821	15,476	220,390	464,396	1,108,559	0	13,062,375	133,275	2,161,563	3,000,789	7,766,748	0	13,062,375	133,275	2,161,563	3,000,789	7,766,748	0	
Age																			
5 and younger	510,229	0	14,384	0	495,845	0	3,552,339	0	139,997	0	3,412,342	0	3,552,339	0	139,997	0	3,412,342	0	
6-14	479,058	0	39,240	0	439,818	0	3,555,548	0	409,645	0	3,145,903	0	3,555,548	0	409,645	0	3,145,903	0	
15-20	237,052	0	23,760	42,139	171,153	0	1,732,800	0	243,276	290,254	1,199,270	0	1,732,800	0	243,276	290,254	1,199,270	0	
21-44	455,990	1	59,548	394,857	1,584	0	3,138,198	5	574,183	2,555,439	8,571	0	3,138,198	5	574,183	2,555,439	8,571	0	
45-64	108,654	219	81,081	27,333	21	0	926,672	1,744	770,159	154,685	84	0	926,672	1,744	770,159	154,685	84	0	
65-74	10,617	8,598	1,957	62	0	0	90,877	70,209	20,282	386	0	0	90,877	70,209	20,282	386	0	0	
75-84	5,154	4,805	346	3	0	0	47,799	44,431	3,347	21	0	0	47,799	44,431	3,347	21	0	0	
85 and older	1,929	1,853	74	2	0	0	17,564	16,886	674	4	0	0	17,564	16,886	674	4	0	0	
Unknown	138	0	0	0	138	0	578	0	0	0	578	0	578	0	0	0	578	0	
Gender																			
Female	1,072,995	10,073	107,139	402,853	552,930	0	7,726,849	87,029	1,063,067	2,704,575	3,872,178	0	7,726,849	87,029	1,063,067	2,704,575	3,872,178	0	
Male	734,490	5,390	113,246	61,541	554,313	0	5,329,149	46,139	1,098,462	296,207	3,888,341	0	5,329,149	46,139	1,098,462	296,207	3,888,341	0	
Unknown	1,336	13	5	2	1,316	0	6,377	107	34	7	6,229	0	6,377	107	34	7	6,229	0	
Race																			
White	657,717	2,194	78,976	191,552	384,995	0	4,843,289	18,762	757,251	1,304,376	2,762,900	0	4,843,289	18,762	757,251	1,304,376	2,762,900	0	
African American	526,975	2,038	55,860	134,517	334,560	0	3,815,462	15,612	550,070	878,814	2,370,966	0	3,815,462	15,612	550,070	878,814	2,370,966	0	
Other/unknown	624,129	11,244	85,554	138,327	389,004	0	4,403,624	98,901	854,242	817,599	2,632,882	0	4,403,624	98,901	854,242	817,599	2,632,882	0	
Use of Nursing Facilities^c																			
Entire year	3,490	782	2,701	1	6	0	34,406	7,257	27,095	1	53	0	34,406	7,257	27,095	1	53	0	
Part year	3,932	432	3,451	35	14	0	34,377	3,624	30,354	277	122	0	34,377	3,624	30,354	277	122	0	
None	1,801,399	14,262	214,238	464,360	1,108,539	0	12,993,592	122,394	2,104,114	3,000,511	7,766,573	0	12,993,592	122,394	2,104,114	3,000,511	7,766,573	0	
Maintenance Assistance Status																			
Cash	715,720	6,872	202,876	189,393	316,579	0	5,563,474	70,574	2,029,239	1,128,409	2,335,252	0	5,563,474	70,574	2,029,239	1,128,409	2,335,252	0	
Medically needy	22,030	22	1,662	15,802	4,544	0	137,475	120	13,276	97,173	26,906	0	137,475	120	13,276	97,173	26,906	0	
Poverty-related	690,771	7,728	10,736	71,982	600,325	0	4,651,839	55,788	69,580	492,165	4,034,306	0	4,651,839	55,788	69,580	492,165	4,034,306	0	
Other/unknown	380,300	854	5,116	187,219	187,111	0	2,709,587	6,793	49,468	1,283,042	1,370,284	0	2,709,587	6,793	49,468	1,283,042	1,370,284	0	
Managed Care (MC) Status																			
Fee-for-service (FFS) all year	1,342,106	12,719	190,341	361,300	777,746	0	11,389,351	121,684	2,001,890	2,595,745	6,670,032	0	11,389,351	121,684	2,001,890	2,595,745	6,670,032	0	
FFS part year, with Rx claims	153,116	1,638	18,739	43,046	89,693	0	751,516	8,392	112,809	215,408	414,907	0	751,516	8,392	112,809	215,408	414,907	0	
FFS part year, no Rx claims	313,599	1,119	11,310	60,050	241,120	0	921,508	3,199	46,864	189,636	681,809	0	921,508	3,199	46,864	189,636	681,809	0	

Table ND2

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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^{a, b}
NONDUAL BENEFICIARIES, FLORIDA, 2003

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid FFS \$ ^d	Number of Beneficiaries
All	51.3 %	6.7	\$477	\$72	\$2,797	17.1 %	1,808,821
Age							
5 and younger	55.5	3.8	195	52	2,126	9.2	510,229
6-14	44.4	3.5	277	79	1,536	18.0	479,058
15-20	46.4	3.8	281	74	2,296	12.2	237,052
21-44	50.0	6.9	540	78	3,210	16.8	455,990
45-64	73.4	35.2	2,638	75	9,856	26.8	108,654
65-74	77.3	30.0	1,824	61	8,027	22.7	10,617
75-84	79.7	32.4	1,790	55	9,229	19.4	5,154
85 and older	78.0	34.2	1,639	48	13,907	11.8	1,929
Unknown	3.6	0.2	11	49	239	4.6	138
Basis of Eligibility^e							
Aged	77.2	28.4	1,578	56	8,073	19.5	15,476
Disabled	75.3	28.2	2,590	92	12,277	21.1	220,390
Adults	47.5	4.2	208	49	1,756	11.8	464,396
Children	47.7	3.1	154	50	1,275	12.1	1,108,559
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	52.0	6.8	433	63	2,613	16.6	1,072,995
Male	50.2	6.4	542	85	3,068	17.7	734,490
Unknown	28.0	1.3	86	67	1,575	5.5	1,336
Race							
White	54.1	7.8	517	66	2,881	17.9	657,717
African American	45.8	4.7	349	74	2,509	13.9	526,975
Other/unknown	52.8	7.0	544	77	2,952	18.4	624,129
Use of Nursing Facilities^f							
Entire year	97.7	80.0	4,696	59	56,183	8.4	3,490
Part year	95.3	59.8	4,022	67	48,173	8.3	3,932
None	51.1	6.4	461	72	2,594	17.8	1,801,399
Maintenance Assistance Status							
Cash	57.8	11.3	905	80	4,437	20.4	715,720
Medically needy	58.0	9.6	760	79	4,059	18.7	22,030
Poverty related	48.8	3.5	169	49	1,506	11.2	690,771
Other/unknown	43.0	3.5	215	61	1,982	10.8	380,300

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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^{a,b}
 NONDUAL BENEFICIARIES, FLORIDA, 2003

Beneficiary Characteristics	Number of Rx. Percentage with:										Beneficiaries	Number
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS ^c	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	Mean \$, All Medicaid FFS ^d		
All	0.9	\$66	17.1 %	48.7 %	38.3 %	5.4 %	4.9 %	2.1 %	0.5 %	\$387	1,808,821	13,062,375
Age												
5 and younger	0.5	28	9.2	44.5	47.7	5.4	2.2	0.2	0.0	305	510,229	3,552,339
6-14	0.5	37	18.0	55.6	37.3	4.1	2.6	0.3	0.0	207	479,058	3,555,548
15-20	0.5	38	12.2	53.6	38.7	4.4	2.8	0.4	0.0	314	237,052	1,732,800
21-44	1.0	78	16.8	50.0	34.5	6.2	6.4	2.5	0.4	467	455,990	3,138,198
45-64	4.1	309	26.8	26.6	16.2	9.4	22.8	19.1	5.8	1,156	108,654	926,672
65-74	3.5	213	22.7	22.7	19.3	12.4	27.4	15.4	2.8	938	10,617	90,877
75-84	3.5	193	19.4	20.3	17.1	12.4	30.3	17.0	2.8	995	5,154	47,799
85 and older	3.8	180	11.8	22.0	13.8	10.6	28.2	21.0	4.3	1,527	1,929	17,564
Unknown	0.1	3	4.6	96.4	3.6	0.0	0.0	0.0	0.0	57	138	578
Basis of Eligibility^e												
Aged	3.3	183	19.5	22.8	19.0	12.8	28.4	14.7	2.2	937	15,476	133,275
Disabled	2.9	264	21.1	24.7	27.9	10.6	19.8	13.3	3.8	1,252	220,390	2,161,563
Adults	0.7	32	11.8	52.5	36.3	5.5	4.4	1.2	0.1	272	464,396	3,000,789
Children	0.4	22	12.1	52.3	41.4	4.3	1.8	0.1	0.0	182	1,108,559	7,766,748
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	1.0	60	16.6	48.0	38.8	5.4	4.9	2.3	0.6	363	1,072,995	7,726,849
Male	0.9	75	17.7	49.8	37.4	5.5	4.9	1.9	0.4	423	734,490	5,329,149
Unknown	0.3	18	5.5	72.0	23.1	3.1	1.5	0.3	0.0	330	1,336	6,377
Race												
White	1.1	70	17.9	45.9	38.8	6.0	5.9	2.7	0.7	391	657,717	4,843,289
African American	0.7	48	13.9	54.2	36.8	4.0	3.3	1.4	0.3	347	526,975	3,815,462
Other/unknown	1.0	77	18.4	47.2	38.9	6.0	5.3	2.2	0.5	418	624,129	4,403,624
Use of Nursing Facilities^f												
Entire year	8.1	476	8.4	2.3	3.8	4.5	24.4	38.4	26.6	5,699	3,490	34,406
Part year	6.8	460	8.3	4.7	7.9	7.9	27.5	33.9	18.2	5,510	3,932	34,377
None	0.9	64	17.8	48.9	38.4	5.4	4.8	2.0	0.4	360	1,801,399	12,993,592
Maintenance Assistance Status												
Cash	1.5	116	20.4	42.2	36.6	7.0	8.6	4.5	1.1	571	715,720	5,563,474
Medically needy	1.5	122	18.7	42.0	34.8	7.2	10.3	4.8	0.9	650	22,030	137,475
Poverty related	0.5	25	11.2	51.2	41.6	4.5	2.2	0.4	0.1	224	690,771	4,651,839
Other/unknown	0.5	30	10.8	57.0	35.5	4.1	2.7	0.6	0.1	278	380,300	2,709,587

Table ND4

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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^{a, b, c}
 NONDUAL BENEFICIARIES, FLORIDA, 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
All	0.9	\$66	\$72	0.4	\$54	\$126	0.0	\$1	\$55	0.5	\$10	\$23
Age												
5 and younger	0.5	28	52	0.2	23	99	0.0	1	44	0.3	4	15
6-14	0.5	37	79	0.3	31	118	0.0	1	71	0.2	5	26
15-20	0.5	38	74	0.3	32	125	0.0	1	66	0.2	5	22
21-44	1.0	78	78	0.4	64	146	0.0	1	56	0.5	12	23
45-64	4.1	309	75	1.9	251	131	0.1	5	53	2.1	53	25
65-74	3.5	213	61	1.7	167	97	0.1	3	38	1.7	43	25
75-84	3.5	193	55	1.7	152	90	0.1	2	29	1.7	38	22
85 and older	3.8	180	48	1.6	134	82	0.1	3	28	2.0	42	21
Unknown	0.1	3	49	0.0	2	79	0.0	0	60	0.0	0	18
Basis of Eligibility^d												
Aged	3.3	183	56	1.6	144	89	0.1	2	32	1.6	37	23
Disabled	2.9	264	92	1.4	220	159	0.1	5	68	1.4	39	27
Adults	0.7	32	49	0.3	25	91	0.0	1	33	0.4	7	19
Children	0.4	22	50	0.2	18	85	0.0	1	49	0.2	3	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	1.0	60	63	0.4	48	112	0.0	1	46	0.5	10	21
Male	0.9	75	85	0.4	63	146	0.0	2	71	0.4	10	25
Unknown	0.3	18	67	0.1	16	155	0.0	0	25	0.2	2	13
Race												
White	1.1	70	66	0.5	57	116	0.0	2	52	0.5	11	21
African American	0.7	48	74	0.3	40	134	0.0	1	52	0.3	7	21
Other/unknown	1.0	77	77	0.5	63	132	0.0	2	61	0.5	12	25
Use of Nursing Facilities^e												
Entire year	8.1	476	59	3.3	374	112	0.3	10	38	4.5	91	20
Part year	6.8	460	67	2.7	363	134	0.2	10	46	3.9	86	22
None	0.9	64	72	0.4	53	126	0.0	1	56	0.4	10	23
Maintenance Assistance												
Status												
Cash	1.5	116	80	0.7	96	140	0.0	2	62	0.7	18	25
Medically needy	1.5	122	79	0.7	103	142	0.0	2	51	0.8	17	22
Poverty related	0.5	25	49	0.2	20	85	0.0	1	45	0.3	4	17
Other/unknown	0.5	30	61	0.2	25	105	0.0	1	46	0.2	4	19

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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 Florida, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, <http://www.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^{a, b, c, d}
 NONDUAL BENEFICIARIES, FLORIDA, 2003

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				Users ^e								
	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	Total Number of Rx	Total Rx \$	Number of Users	Percentage of All Benes	As a Percentage	Number of Benefit Months			
															Brand-Name	Brand-Name	Brand-Name
Anti-infective Agents	0.3	0.2	0.0	0.1	\$27	\$24	\$1	\$3	\$94	\$155	\$72	\$22	1,618,665	\$152,940,961	579,054	32.0 %	5,582,051
Biologicals	0.4	0.4	0.0	0.0	455	376	22	57	1111	1,013	2,208	2,019	29,284	32,542,611	7,815	0.4	71,493
Antineoplastic Agents	0.5	0.2	0.0	0.3	149	117	3	29	315	605	171	111	37,534	11,810,506	7,804	0.4	79,091
Endocrine/Metabolic Drugs	0.4	0.2	0.0	0.1	23	19	1	3	54	79	21	22	907,219	49,204,867	223,858	12.4	2,184,802
Cardiovascular Agents	1.2	0.5	0.0	0.7	44	32	0	11	38	66	44	17	1,332,262	50,988,151	116,162	6.4	1,156,014
Respiratory Agents	0.4	0.2	0.0	0.2	22	16	0	6	51	75	41	27	1,928,211	97,593,288	457,688	25.3	4,456,652
Gastrointestinal Agents	0.5	0.3	0.0	0.2	41	36	2	4	86	128	261	21	594,549	51,289,573	124,506	6.9	1,242,310
Genitourinary Agents	0.2	0.2	0.0	0.0	10	9	0	1	45	52	38	19	147,909	6,712,030	73,600	4.1	681,229
CNS Drugs	0.9	0.5	0.0	0.4	92	82	1	9	98	164	84	21	1,707,162	166,939,693	182,164	10.1	1,821,036
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.1	43	38	1	4	74	84	68	34	272,527	20,156,838	46,131	2.6	472,268
Miscellaneous Psychological/Neurological Agents	0.4	0.3	0.0	0.1	58	54	0	4	152	179	94	54	19,955	3,037,242	4,913	0.3	52,425
Analgesics and Anesthetics	0.4	0.1	0.0	0.3	21	15	0	6	48	140	76	17	1,182,372	57,205,435	287,650	15.9	2,786,208
Neuromuscular Agents	0.7	0.3	0.0	0.4	52	43	1	8	75	135	45	23	707,603	52,783,169	100,600	5.6	1,020,237
Nutritional Products	0.3	0.0	0.0	0.2	3	0	0	3	11	12	10	11	300,146	3,379,448	115,575	6.4	1,042,470
Hematological Agents	0.5	0.2	0.0	0.3	151	135	1	15	306	800	48	49	197,192	60,343,226	41,610	2.3	399,315
Topical Products	0.3	0.1	0.0	0.1	10	7	0	3	40	63	58	21	890,297	35,177,754	357,591	19.8	3,511,449
Miscellaneous Products	0.4	0.1	0.0	0.3	72	56	4	12	169	379	265	44	42,516	7,183,245	10,075	0.6	99,745
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	4	0	0	0	32	0	0	0	113,358	3,602,733	79,523	4.4	807,974
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	12,028,761	862,890,770	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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 Florida, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

For information about this classification method, see Wolters Kluwer Health, <http://www.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^{a, b, c}
 NONDUAL BENEFICIARIES, FLORIDA, 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	\$111,616,717	84,204	4.7 %	906,072	0.5	\$233
ANTIVIRAL	86,776,779	42,847	2.4	446,450	0.5	404
ANTIASTHMATIC	59,771,552	326,005	18.0	3,293,193	0.3	67
MISC. HEMATOLOGICAL	46,834,214	15,141	0.8	161,143	0.5	620
ANTICONVULSANT	45,297,719	74,553	4.1	782,320	0.6	96
ANTIDEPRESSANTS	43,065,277	144,430	8.0	1,463,033	0.5	65
ULCER DRUGS	41,691,580	126,243	7.0	1,283,404	0.4	90
PASSIVE IMMUNIZING AGENTS	32,409,951	6,430	0.4	56,263	0.5	1,171
ANALGESICS - Narcotic	29,358,453	255,775	14.1	2,506,552	0.3	45
DERMATOLOGICAL	25,250,008	357,177	19.7	3,639,587	0.2	43
Total	522,072,250	1,432,805		14,538,017	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad77847b6615> (October 26, 2007).

Bene(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 FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, FLORIDA, 2003

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIVIRAL						
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Number of Rx per Benefit Month	Mean Benefit per Rx \$ per Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Number of Rx per Benefit Month	Mean Benefit per Rx \$ per Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Number of Rx per Benefit Month	Mean Benefit per Rx \$ per Month
All	4,528,636	\$522,072,250	84,204	4.7 %	906,072	0.5	\$123	42,847	2.4 %	446,450	0.5	\$194					
Female	2,686,989	263,950,324	45,191	4.2	485,692	0.5	117	23,789	2.2	247,367	0.4	170					
Disabled	1,553,768	179,060,874	33,340	31.1	369,829	0.5	128	13,360	12.5	147,395	0.5	207					
5 and younger	31,879	6,929,995	83	1.4	896	0.4	73	160	2.8	1,845	0.6	100					
6-14	71,493	7,919,635	1,625	12.5	18,449	0.5	89	677	5.2	7,852	0.7	212					
15-20	56,810	6,474,478	1,657	18.5	18,536	0.5	98	420	4.7	4,856	0.5	176					
21-44	462,335	60,643,789	12,495	40.2	136,411	0.5	125	6,961	22.4	76,070	0.5	202					
45-64	908,890	95,152,705	17,058	36.4	190,884	0.6	138	5,088	10.9	56,158	0.5	221					
65-74	19,372	1,686,906	356	29.9	3,986	0.6	125	49	4.1	554	0.4	165					
75-84	2,761	238,090	64	27.6	650	0.7	131	5	2.2	60	0.1	20					
85 and older	228	15,276	2	4.5	17	0.5	163	0	0.0	0	0.0	0					
Other Eligibles	1,133,221	84,889,450	11,851	1.2	115,863	0.4	83	10,429	1.1	99,972	0.3	115					
5 and younger	225,558	18,134,883	217	0.1	2,333	0.3	58	1,002	0.4	10,249	0.2	32					
6-14	176,679	12,341,314	2,008	0.9	21,255	0.4	76	1,373	0.6	14,759	0.4	112					
15-20	123,332	8,169,527	1,932	1.5	19,573	0.4	78	1,346	1.1	13,206	0.2	71					
21-44	457,913	33,814,585	5,834	1.7	54,131	0.3	86	6,044	1.7	55,342	0.3	133					
45-64	70,935	6,411,788	841	4.5	7,827	0.4	99	511	2.8	4,733	0.5	252					
65-74	39,464	3,169,534	471	8.6	5,075	0.4	93	75	1.4	827	0.1	23					
75-84	26,515	1,997,239	344	10.9	3,619	0.4	75	58	1.8	637	0.2	41					
85 and older	12,825	850,580	204	15.8	2,050	0.5	78	20	1.6	219	0.1	10					
Male	1,841,000	258,033,773	39,010	5.3	420,344	0.6	130	19,052	2.6	199,039	0.5	225					
Disabled	1,144,329	196,515,625	30,655	27.1	335,996	0.6	140	15,628	13.8	164,651	0.6	247					
5 and younger	47,106	13,486,961	283	3.3	3,112	0.4	68	175	2.0	1,991	0.5	92					
6-14	137,413	34,153,210	5,110	19.5	56,967	0.5	96	795	3.0	9,303	0.6	199					
15-20	85,083	16,435,341	3,354	22.7	37,127	0.6	122	276	1.9	3,163	0.5	175					
21-44	349,237	62,395,284	11,525	40.5	125,027	0.6	150	7,305	25.6	74,727	0.6	237					
45-64	508,317	67,957,041	9,970	29.1	109,043	0.6	158	7,025	20.5	74,893	0.6	270					
65-74	14,788	1,828,949	370	48.4	4,215	0.6	189	48	6.3	534	0.5	205					
75-84	2,070	237,166	40	35.1	469	0.7	227	3	2.6	28	0.5	246					
85 and older	315	21,673	3	10.0	36	0.8	129	1	3.3	12	0.1	6					
Other Eligibles	696,663	61,517,940	8,355	1.3	84,348	0.4	88	3,423	0.6	34,377	0.3	120					
5 and younger	270,089	23,653,471	438	0.2	4,729	0.3	64	1,008	0.4	10,360	0.2	25					
6-14	208,691	16,728,296	4,084	1.9	42,928	0.4	81	1,129	0.5	12,179	0.4	114					
15-20	87,590	9,079,834	2,167	2.5	21,765	0.4	91	471	0.5	4,944	0.3	98					
21-44	64,620	5,909,565	796	1.6	6,248	0.4	109	514	1.1	4,226	0.5	266					
45-64	25,776	2,706,921	232	2.6	2,053	0.4	121	213	2.4	1,744	0.6	442					
65-74	21,345	1,992,344	327	10.3	3,455	0.4	131	56	1.8	581	0.3	147					
75-84	13,200	1,085,507	221	13.3	2,293	0.4	85	26	1.6	274	0.2	54					
85 and older	5,352	362,002	90	16.0	877	0.5	73	6	1.1	69	0.1	8					
Unknown	655	88,361	3	0.2	36	0.4	44	7	0.5	55	0.1	3					

Table ND7A

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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 FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a,b,c}
 NONDUAL BENEFICIARIES, FLORIDA, 2003

Beneficiary Characteristics	ANTI-ASTHMATIC						MISC. HEMATOLOGICAL						ANTICONVULSANT					
	Number of Users	Users as % of All Benefes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Number of Users	Mean of Rx per Benefit Month	Number of Benefit Months Among Users	Users as % of All Benefes	Number of Users	Mean of Rx per Benefit Month	Number of Benefit Months Among Users	Users as % of All Benefes	Number of Users	Mean of Rx per Benefit Month	Number of Benefit Months Among Users	Users as % of All Benefes	Number of Users	Mean of Rx per Benefit Month
All	326,005	18.0 %	3,293,193	0.3	\$18	15,141	0.8 %	161,143	0.5	\$291	74,553	4.1 %	782,320	0.6	\$58			
Female	168,365	15.7	1,702,728	0.3	19	9,208	0.9	99,089	0.4	40	43,551	4.1	454,724	0.6	55			
Disabled	48,438	45.2	538,574	0.4	29	5,964	5.6	66,290	0.5	43	30,178	28.2	330,945	0.6	61			
5 and younger	3,789	65.7	42,334	0.3	24	3	0.1	32	0.1	71	613	10.6	6,726	0.6	76			
6-14	4,379	33.7	50,499	0.3	21	10	0.1	114	0.5	18	2,308	17.7	26,380	0.7	83			
15-20	2,008	22.4	23,099	0.3	22	11	0.1	109	0.3	161	1,858	20.7	20,969	0.7	86			
21-44	10,747	34.6	118,150	0.4	26	689	2.2	7,662	0.4	51	10,978	35.3	118,677	0.7	68			
45-64	26,784	57.2	296,484	0.5	33	5,001	10.7	55,580	0.5	42	14,135	30.2	155,094	0.6	49			
65-74	640	53.7	7,064	0.5	33	201	16.9	2,247	0.5	41	250	21.0	2,732	0.6	33			
75-84	85	36.6	899	0.4	30	39	16.8	439	0.6	66	34	14.7	358	0.6	26			
85 and older	6	13.6	45	0.3	19	10	22.7	107	0.5	42	2	4.5	9	0.7	78			
Other Eligibles	119,927	12.4	1,164,154	0.2	14	3,244	0.3	32,799	0.4	33	13,373	1.4	123,779	0.4	37			
5 and younger	53,191	21.9	525,678	0.2	12	7	0.0	72	0.2	61	514	0.2	5,138	0.4	35			
6-14	29,551	13.5	294,939	0.2	14	24	0.0	239	0.2	85	1,756	0.8	17,752	0.5	52			
15-20	9,620	7.6	93,112	0.2	12	33	0.0	360	0.2	98	1,761	1.4	17,014	0.4	46			
21-44	21,917	6.3	195,633	0.3	16	1,021	2.3	9,567	0.3	19	7,366	2.1	65,153	0.4	32			
45-64	2,932	15.8	25,777	0.4	28	421	2.3	3,745	0.4	33	1,189	6.4	10,516	0.5	39			
65-74	1,433	26.2	15,494	0.4	35	922	16.8	9,980	0.4	33	407	7.4	4,193	0.5	25			
75-84	883	28.1	9,494	0.4	31	571	18.2	6,271	0.5	43	283	9.0	3,014	0.5	27			
85 and older	400	31.0	4,027	0.4	24	245	19.0	2,565	0.6	48	97	7.5	999	0.6	27			
Male	157,513	21.4	1,589,686	0.3	18	5,928	0.8	61,994	0.5	692	30,999	4.2	327,560	0.6	63			
Disabled	36,393	32.1	401,972	0.4	28	4,236	3.7	45,371	0.5	830	24,325	21.5	264,588	0.7	67			
5 and younger	6,299	73.1	70,372	0.3	25	37	0.4	433	0.8	10,762	894	10.4	9,921	0.6	72			
6-14	9,129	34.8	104,615	0.3	21	72	0.3	837	1.2	22,551	3,934	15.0	44,422	0.7	73			
15-20	2,819	19.1	32,188	0.3	21	43	0.3	478	0.7	12,913	2,673	18.1	29,925	0.7	83			
21-44	4,693	16.5	50,772	0.4	27	393	1.4	4,101	0.5	1,494	8,857	31.1	95,270	0.7	74			
45-64	12,889	37.7	137,579	0.5	36	3,457	10.1	36,906	0.5	46	7,775	22.7	82,935	0.6	50			
65-74	480	62.7	5,457	0.5	43	196	25.6	2,182	0.5	41	172	22.5	1,879	0.6	37			
75-84	75	65.8	887	0.5	42	28	24.6	325	0.6	45	15	13.2	176	0.6	38			
85 and older	9	30.0	102	0.4	14	10	33.3	109	0.6	52	5	16.7	60	0.8	47			
Other Eligibles	121,117	19.5	1,187,680	0.2	14	1,692	0.3	16,623	0.5	315	6,674	1.1	62,972	0.5	43			
5 and younger	70,731	28.1	694,765	0.2	13	42	0.0	390	0.5	2,953	715	0.3	7,173	0.4	36			
6-14	38,298	17.4	379,475	0.2	15	57	0.0	589	0.3	1,934	2,432	1.1	24,589	0.5	46			
15-20	7,127	8.3	69,828	0.2	15	35	0.0	347	0.6	5,524	1,394	1.6	13,611	0.5	52			
21-44	2,385	4.9	18,324	0.3	22	253	0.5	2,026	0.4	238	1,299	2.7	9,844	0.4	35			
45-64	916	10.1	8,052	0.4	27	299	3.3	2,465	0.5	45	439	4.9	3,627	0.4	35			
65-74	921	28.9	9,469	0.4	38	552	17.3	5,956	0.5	37	224	7.0	2,358	0.5	35			
75-84	546	32.9	5,847	0.4	32	350	21.1	3,811	0.5	43	119	7.2	1,250	0.5	21			
85 and older	193	34.3	1,920	0.4	22	104	18.5	1,039	0.7	59	52	9.3	520	0.6	30			
Unknown	130	8.8	813	0.2	14	5	0.3	60	0.5	18	3	0.2	36	0.2	13			

Table ND7B

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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 FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a,b,c}
NONDUAL BENEFICIARIES, FLORIDA, 2003

Beneficiary Characteristics	ANTIDEPRESSANTS				ULCER DRUGS				PASSIVE IMMUNIZING AGENTS			
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month
All	144,430	8.0 %	1,463,033	\$29	126,243	7.0 %	1,283,404	\$33	6,430	0.4 %	56,263	\$576
Female	99,147	9.2	995,593	30	83,575	7.8	853,625	32	3,582	0.3	31,404	474
Disabled	51,016	47.6	555,098	35	40,353	37.7	447,352	42	927	0.9	9,353	734
5 and younger	47	0.8	512	10	1,012	17.6	10,705	23	811	14.1	8,021	588
6-14	1,694	13.0	19,216	25	1,122	8.6	13,078	32	17	0.1	202	405
15-20	2,033	22.7	22,669	29	1,039	11.6	11,950	29	9	0.1	103	1,213
21-44	16,729	53.8	178,916	33	10,184	32.8	112,578	37	57	0.2	658	1,776
45-64	29,968	64.0	327,766	37	26,197	55.9	290,266	45	33	0.1	369	2,094
65-74	472	39.6	5,274	35	694	58.3	7,689	42	0	0.0	0	0
75-84	64	27.6	660	36	91	39.2	961	43	0	0.0	0	0
85 and older	9	20.5	85	22	14	31.8	125	30	0	0.0	0	0
Other Eligibles	48,131	5.0	440,495	23	43,222	4.5	406,273	22	2,655	0.3	22,051	364
5 and younger	283	0.1	2,934	15	5,879	2.4	51,525	9	1,671	0.7	13,414	567
6-14	4,526	2.1	47,094	22	4,262	1.9	44,423	13	10	0.0	85	448
15-20	6,945	5.5	67,786	20	4,589	3.6	45,437	13	249	0.2	2,123	13
21-44	29,808	8.6	262,721	22	20,222	5.8	183,401	23	722	0.2	6,400	51
45-64	4,268	23.0	35,769	29	3,597	19.4	31,831	37	2	0.0	19	1,648
65-74	1,222	22.3	12,957	27	2,625	48.0	27,763	39	0	0.0	0	0
75-84	736	23.4	7,778	27	1,475	46.9	15,986	40	1	0.0	10	421
85 and older	343	26.6	3,456	32	573	44.4	5,907	39	0	0.0	0	0
Male	45,277	6.2	467,384	29	42,637	5.8	429,555	33	2,836	0.4	24,771	705
Disabled	28,989	25.6	311,910	32	23,110	20.4	249,741	42	1,002	0.9	10,339	841
5 and younger	133	1.5	1,485	16	1,394	16.2	14,998	22	869	10.1	8,802	613
6-14	3,987	15.2	44,843	26	1,503	5.7	17,492	34	28	0.1	320	666
15-20	2,723	18.4	30,370	32	1,202	8.1	13,650	36	2	0.0	24	2,105
21-44	9,214	32.4	97,345	34	5,892	20.7	63,639	42	48	0.2	567	2,584
45-64	12,588	36.8	133,943	34	12,607	36.8	134,203	45	52	0.2	590	2,533
65-74	293	38.3	3,327	34	436	57.0	4,898	44	3	0.4	36	2,148
75-84	46	40.4	548	28	65	57.0	746	45	0	0.0	0	0
85 and older	5	16.7	49	39	11	36.7	115	39	0	0.0	0	0
Other Eligibles	16,288	2.6	155,474	24	19,527	3.1	179,814	20	1,834	0.3	14,432	607
5 and younger	383	0.2	3,969	13	7,077	2.8	62,385	10	1,818	0.7	14,248	608
6-14	6,358	2.9	65,779	21	3,597	1.6	37,240	15	14	0.0	160	453
15-20	4,271	5.0	42,127	26	2,045	2.4	20,228	18	2	0.0	24	683
21-44	3,173	6.6	24,213	25	3,295	6.8	26,192	33	0	0.0	0	0
45-64	1,150	12.7	9,609	25	1,399	15.5	11,598	39	0	0.0	0	0
65-74	516	16.2	5,310	28	1,212	38.1	12,648	37	0	0.0	0	0
75-84	302	18.2	3,207	26	673	40.5	7,255	41	0	0.0	0	0
85 and older	135	24.0	1,260	33	229	40.7	2,268	40	0	0.0	0	0
Unknown	6	0.4	56	21	31	2.1	224	16	12	0.8	88	693

Table ND7C

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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 FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, FLORIDA, 2003

Beneficiary Characteristics	ANALGESICS - Narcotic				DERMATOLOGICAL						
	Number of Users	Users as % of All Benefes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Number of Users	Users as % of All Benefes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Number of Beneficiaries	Number of Benefit Months	
All	255,775	14.1 %	2,506,552	0.3	357,177	19.7 %	3,639,587	0.2	\$7	1,808,821	13,062,375
Female	185,105	17.3	1,806,362	0.3	205,566	19.2	2,093,491	0.2	7	1,072,929	7,726,578
Disabled	58,230	54.3	638,601	0.4	45,637	42.6	520,863	0.2	9	107,139	1,063,067
5 and younger	410	7.1	4,637	0.1	2,763	47.9	30,991	0.2	6	5,763	56,186
6-14	1,269	9.8	14,651	0.1	4,302	33.1	50,054	0.2	7	13,011	137,391
15-20	2,109	23.5	23,930	0.2	2,904	32.4	33,671	0.2	9	8,970	91,824
21-44	20,577	66.2	224,443	0.3	11,799	38.0	133,753	0.2	9	31,067	303,661
45-64	33,146	70.7	363,035	0.4	23,172	49.4	264,516	0.2	10	46,861	459,131
65-74	627	52.6	6,903	0.4	593	49.8	6,735	0.2	9	1,191	12,307
75-84	81	34.9	883	0.4	91	39.2	1,011	0.2	13	232	2,176
85 and older	11	25.0	119	0.2	13	29.5	132	0.2	4	44	391
Other Eligibles	126,875	13.1	1,167,761	0.2	159,929	16.6	1,572,628	0.2	6	965,790	6,663,511
5 and younger	3,910	1.6	41,084	0.1	69,235	28.5	674,221	0.1	5	242,561	1,667,645
6-14	7,353	3.4	75,710	0.1	36,400	16.6	374,828	0.1	7	219,271	1,568,164
15-20	19,609	15.4	185,715	0.1	18,113	14.2	181,572	0.2	8	127,374	893,536
21-44	87,688	25.2	788,964	0.2	28,391	8.2	262,612	0.2	7	348,152	2,340,612
45-64	6,036	32.6	52,334	0.3	3,160	17.1	28,749	0.2	9	18,526	108,013
65-74	1,045	19.1	11,013	0.2	2,415	44.1	26,374	0.2	9	5,473	44,652
75-84	837	26.6	8,968	0.3	1,486	47.3	16,427	0.2	8	3,143	28,969
85 and older	397	30.8	3,973	0.4	729	56.5	7,845	0.2	9	1,290	11,920
Male	70,657	9.6	700,071	0.3	151,429	20.6	1,544,791	0.2	7	734,420	5,328,856
Disabled	34,395	30.8	370,175	0.4	35,768	31.6	404,472	0.2	9	113,246	1,098,462
5 and younger	740	8.6	8,472	0.1	3,625	42.1	40,997	0.1	6	8,620	83,809
6-14	2,231	8.5	25,652	0.1	6,472	24.7	75,179	0.1	7	26,229	272,254
15-20	2,246	15.2	25,652	0.2	3,950	26.7	45,672	0.2	9	14,790	151,452
21-44	10,835	38.0	113,862	0.4	8,627	30.3	96,976	0.2	10	28,481	270,522
45-64	18,505	54.1	192,774	0.5	12,549	36.7	139,387	0.2	10	34,217	311,008
65-74	297	38.8	3,277	0.4	468	61.2	5,370	0.2	11	765	7,963
75-84	37	32.5	438	0.4	69	60.5	806	0.2	16	114	1,171
85 and older	4	13.3	48	0.2	8	26.7	85	0.2	7	30	283
Other Eligibles	35,762	5.8	329,896	0.2	115,659	18.6	1,140,296	0.1	6	621,174	4,230,394
5 and younger	6,359	2.5	66,778	0.1	67,500	26.8	654,376	0.1	5	251,974	1,738,500
6-14	8,129	3.7	83,517	0.1	28,261	12.8	291,717	0.1	6	220,543	1,577,721
15-20	6,683	7.8	65,454	0.1	13,095	15.2	131,693	0.2	11	85,918	595,988
21-44	11,124	23.0	83,845	0.3	3,137	6.5	25,281	0.2	10	48,288	223,396
45-64	2,510	27.7	20,728	0.4	1,231	13.6	10,753	0.2	10	9,047	48,500
65-74	469	14.7	4,697	0.2	1,352	42.5	14,720	0.2	10	3,182	25,901
75-84	344	20.7	3,578	0.3	785	47.3	8,592	0.2	9	1,660	15,432
85 and older	144	25.6	1,299	0.4	298	53.0	3,164	0.2	9	562	4,956
Unknown	13	0.9	119	0.4	184	12.5	1,328	0.2	5	1,472	6,941

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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^{a, b}
 NONDUAL BENEFICIARIES, FLORIDA, 2003

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	\$476	8.1		3,490	34,406
Age					
0-64	529	8.7		2,553	25,425
65-74	397	7.2		268	2,754
75-84	327	6.4		323	3,038
85 and older	267	6.0		346	3,189
Unknown	0	0.0		0	0
Gender					
Female	462	8.4		1,786	17,990
Male	493	7.8		1,702	16,404
Unknown	153	1.9		2	12
Race					
White	467	8.6		1,733	16,673
African American	507	7.6		1,036	10,483
Other/unknown	453	7.7		721	7,250
Basis of Eligibility^c					
Aged	308	6.4		782	7,257
Disabled	522	8.6		2,701	27,095
Adults	0	0.0		1	1
Children	479	7.2		6	53
Unknown	0	0.0		0	0

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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 3,932 beneficiaries who were in nursing facilities for part of their enrollment and their 34,377 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^{a, b, c, d, e}
 NONDUAL BENEFICIARIES, FLORIDA, 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	Percentage of All-Year Nursing Facility Residents	Number of Benefit Months			
	Generic	Generic	Generic	Generic	Generic	Generic	Generic	Generic	Generic	As a							
Anti-infective Agents	0.7	0.4	0.0	0.3	##	\$90	\$2	\$9	\$135	\$208	\$82	\$31	18,693	\$2,530,700	2,444	70.0 %	25,232
Biologicals	0.1	0.1	0.0	0.0	16	11	0	5	137	120	0	196	724	99,480	565	16.2	6,179
Antineoplastic Agents	0.5	0.1	0.0	0.5	97	48	0	49	184	691	0	108	1,924	354,180	376	10.8	3,651
Endocrine/Metabolic Drugs	1.1	0.5	0.1	0.4	54	42	3	9	49	82	19	20	16,308	795,991	1,452	41.6	14,859
Cardiovascular Agents	2.0	0.7	0.0	1.4	66	41	1	23	32	63	35	17	48,282	1,545,973	2,371	67.9	23,591
Respiratory Agents	1.0	0.4	0.0	0.6	42	31	1	10	43	76	62	18	16,881	721,150	1,643	47.1	17,200
Gastrointestinal Agents	1.1	0.5	0.0	0.5	69	57	1	10	65	116	53	19	22,641	1,467,429	2,087	59.8	21,261
Genitourinary Agents	0.6	0.4	0.0	0.2	35	31	0	4	58	73	29	22	3,992	229,621	606	17.4	6,508
CNS Drugs	1.9	1.0	0.0	0.8	137	121	2	14	71	116	52	17	51,647	3,678,240	2,617	75.0	26,827
Stimulants/Anti-obesity/Anorexia	0.7	0.1	0.0	0.6	23	5	0	17	31	76	11	26	179	5,470	23	0.7	243
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.0	96	95	0	1	144	144	0	98	2,112	303,607	307	8.8	3,159
Analgesics and Anesthetics	1.4	0.5	0.0	0.9	61	49	1	12	43	96	33	13	27,112	1,157,763	1,883	54.0	18,874
Neuromuscular Agents	1.5	0.5	0.0	0.9	89	59	2	29	61	117	41	31	28,039	1,708,145	1,777	50.9	19,115
Nutritional Products	0.7	0.0	0.0	0.7	13	0	0	13	18	14	14	18	9,079	161,515	1,217	34.9	12,215
Hematological Agents	1.0	0.3	0.1	0.6	68	59	2	8	65	185	19	12	15,079	978,305	1,464	41.9	14,428
Topical Products	0.6	0.3	0.0	0.3	24	15	2	7	40	56	55	23	14,347	575,505	2,227	63.8	23,674
Miscellaneous Products	0.3	0.0	0.0	0.3	8	3	0	4	24	195	166	14	1,598	37,674	454	13.0	4,715
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	16	0	0	0	58	0	0	0	668	38,884	232	6.6	2,489
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	279,305	16,389,632	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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 3,932 beneficiaries who were in nursing facilities for part of their enrollment and their 34,377 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 Florida, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Bene Mo(s) = benefit month(s); CMS = 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, FLORIDA, 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
ANTIPSYCHOTICS	\$2,321,184	1,861	53.3 %	20,281	0.6	\$177	\$114
ANTICONVULSANT	1,364,365	1,946	55.8	21,141	1.0	66	65
ANTIVIRAL	1,287,389	473	13.6	4,918	0.7	373	262
ULCER DRUGS	1,214,081	2,320	66.5	23,960	0.7	73	51
ANTIDEPRESSANTS	1,016,452	2,264	64.9	23,571	0.7	58	43
ANALGESICS - Narcotic	751,255	2,216	63.5	22,166	0.9	36	34
ANTI-DIABETIC	681,831	1,790	51.3	18,360	0.9	42	37
ANTI-ASTHMATIC	490,013	1,871	53.6	19,428	0.6	42	25
ANTI-HYPERTENSIVE	449,720	1,860	53.3	18,875	0.7	33	24
DERMATOLOGICAL	445,283	3,910	112.0	42,835	0.3	41	10
Total	10,021,573	20,511		215,535	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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 3,932 beneficiaries who were in nursing facilities for part of their enrollment and their 34,377 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^{a, b, c, d} NONDUAL BENEFICIARIES, FLORIDA, 2003

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTICONVULSANT						
	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 \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	144,625	\$10,021,573	1,861	53.3 %	20,281	0.6	\$115	1,946	55.8 %	21,141	1.0	\$65					
Female	76,807	4,929,304	1,022	57.2	11,209	0.7	112	951	53.2	10,456	1.0	62					
Disabled	62,402	4,139,535	776	61.0	8,666	0.7	120	819	64.4	9,048	1.0	65					
64 or younger	58,287	3,847,111	713	60.8	7,927	0.7	118	772	65.9	8,515	1.0	65					
65-74	3,145	222,537	51	71.8	597	0.6	128	39	54.9	445	0.8	61					
75-84	859	65,355	12	54.5	142	0.8	208	7	31.8	82	0.7	26					
85 and older	111	4,532	0	0.0	0	0.0	0	1	14.3	6	0.8	111					
Other Eligibles	14,405	789,769	246	47.9	2,543	0.6	85	132	25.7	1,408	0.8	43					
64 or younger	75	2,119	0	0.0	0	0.0	0	2	33.3	8	0.9	39					
65-74	3,144	179,104	41	52.6	441	0.7	99	35	44.9	385	1.0	62					
75-84	5,401	299,540	105	57.1	1,081	0.5	76	57	31.0	587	0.8	38					
85 and older	5,785	309,006	100	40.7	1,021	0.6	90	38	15.4	428	0.7	32					
Male	67,804	5,090,975	839	49.3	9,072	0.6	117	995	58.5	10,685	1.0	67					
Disabled	60,644	4,684,843	709	49.6	7,721	0.7	123	926	64.8	9,952	1.0	68					
64 or younger	58,310	4,528,822	661	48.2	7,196	0.7	123	902	65.8	9,698	1.0	69					
65-74	2,129	141,286	44	88.0	479	0.6	124	21	42.0	218	0.9	50					
75-84	205	14,735	4	50.0	46	1.1	188	3	37.5	36	0.8	66					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Other Eligibles	7,160	406,132	130	47.4	1,351	0.6	83	69	25.2	733	0.9	50					
64 or younger	77	6,044	0	0.0	0	0.0	0	1	25.0	12	1.1	29					
65-74	2,465	151,175	44	63.8	480	0.6	101	34	49.3	376	1.0	69					
75-84	2,710	152,919	57	52.3	584	0.6	79	22	20.2	214	0.6	22					
85 and older	1,908	95,994	29	31.5	287	0.6	60	12	13.0	131	0.9	42					
Unknown	14	1,294	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 Florida, released by CMS in 06/2007. 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 3,932 beneficiaries who were in nursing facilities for part of their enrollment and their 34,377 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, FLORIDA, 2003

Beneficiary Characteristics	ANTIVIRAL					ULCER DRUGS					ANTIDEPRESSANTS				
	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 \$
All	473	13.6 %	4,918	0.7	\$262	2,320	66.5 %	23,960	0.7	\$51	2,264	64.9 %	23,571	0.7	\$43
Female															
Disabled	139	7.8	1,457	0.6	218	1,195	66.9	12,554	0.7	50	1,269	71.1	13,285	0.8	44
64 or younger	126	9.9	1,313	0.6	241	906	71.2	9,630	0.7	51	973	76.5	10,335	0.8	45
65-74	123	10.5	1,277	0.6	237	826	70.5	8,733	0.7	52	908	77.5	9,588	0.8	46
75-84	2	2.8	24	1.0	584	58	81.7	647	0.6	39	47	66.2	541	0.7	40
85 and older	1	4.5	12	0.1	9	14	63.6	166	0.7	59	14	63.6	164	0.6	35
Other Eligibles	13	2.5	144	0.1	6	289	56.2	2,924	0.7	48	296	57.6	2,950	0.7	41
64 or younger	0	0.0	0	0.0	0	2	33.3	16	1.0	45	2	33.3	8	0.6	22
65-74	1	1.3	12	0.1	5	59	75.6	606	0.7	49	52	66.7	564	0.7	41
75-84	5	2.7	49	0.1	8	86	46.7	852	0.7	55	106	57.6	1,017	0.8	44
85 and older	7	2.8	83	0.1	6	142	57.7	1,450	0.7	44	136	55.3	1,361	0.7	38
Male															
Disabled	334	19.6	3,461	0.8	280	1,125	66.1	11,406	0.7	51	994	58.4	10,282	0.7	42
64 or younger	330	23.1	3,413	0.8	284	969	67.9	9,923	0.7	52	851	59.6	8,919	0.7	42
65-74	328	23.9	3,389	0.8	285	933	68.1	9,528	0.7	52	821	59.9	8,581	0.7	42
75-84	2	4.0	24	0.5	129	33	66.0	367	0.6	40	30	60.0	338	0.7	38
85 and older	0	0.0	0	0.0	0	3	37.5	28	0.5	16	0	0.0	0	0.0	0
Other Eligibles	4	1.5	48	0.3	24	156	56.9	1,483	0.6	47	143	52.2	1,363	0.8	40
64 or younger	0	0.0	0	0.0	0	6	150.0	70	0.7	72	0	0.0	0	0.0	0
65-74	1	1.4	12	0.1	5	45	65.2	475	0.6	42	33	47.8	339	0.8	46
75-84	2	1.8	24	0.5	39	53	48.6	484	0.6	46	54	49.5	548	0.7	39
85 and older	1	1.1	12	0.1	14	52	56.5	454	0.7	50	56	60.9	476	0.8	37
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	4	1.3	69

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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 3,932 beneficiaries who were in nursing facilities for part of their enrollment and their 34,377 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.

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^{a, b, c, d}
 NONDUAL BENEFICIARIES, FLORIDA, 2003

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTI-DIABETIC					ANTI-ASTHMATIC				
	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 \$
All	2,216	63.5 %	22,166	0.9	\$34	1,790	51.3 %	18,360	0.9	\$37	1,871	53.6 %	19,428	0.6	\$25
Female	1,204	67.4	12,408	0.9	30	1,047	58.6	10,884	0.9	38	944	52.9	10,108	0.5	23
Disabled	937	73.7	9,822	1.0	34	812	63.8	8,532	0.9	40	698	54.9	7,648	0.6	25
64 or younger	882	75.3	9,205	1.0	35	746	63.7	7,791	0.9	40	643	54.9	7,006	0.6	25
65-74	35	49.3	385	1.0	27	51	71.8	567	1.0	38	41	57.7	478	0.4	20
75-84	16	72.7	190	0.6	20	12	54.5	144	0.9	37	13	59.1	152	0.3	21
85 and older	4	57.1	42	0.1	1	3	42.9	30	0.5	21	1	14.3	12	0.4	4
Other Eligibles	267	51.9	2,586	0.5	12	235	45.7	2,352	0.8	32	246	47.9	2,460	0.4	15
64 or younger	4	66.7	21	0.7	8	2	33.3	2	1.5	35	2	33.3	18	0.9	13
65-74	32	41.0	325	0.6	8	68	87.2	716	0.8	30	54	69.2	576	0.4	22
75-84	98	53.3	938	0.5	12	102	55.4	978	0.9	35	87	47.3	900	0.4	17
85 and older	133	54.1	1,302	0.5	14	63	25.6	656	0.7	30	103	41.9	966	0.4	9
Male	1,011	59.4	9,754	1.0	39	743	43.7	7,476	0.8	36	927	54.5	9,320	0.6	28
Disabled	900	63.0	8,812	1.0	41	612	42.9	6,233	0.8	37	789	55.3	7,964	0.7	30
64 or younger	879	64.2	8,591	1.0	42	574	41.9	5,807	0.8	38	751	54.8	7,558	0.7	31
65-74	18	36.0	185	0.7	11	34	68.0	378	0.9	33	31	62.0	331	0.6	25
75-84	3	37.5	36	0.1	1	4	50.0	48	0.7	14	7	87.5	75	0.2	12
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	111	40.5	942	0.6	20	131	47.8	1,243	0.8	30	138	50.4	1,356	0.4	15
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	75.0	36	0.3	17
65-74	16	23.2	126	0.5	10	59	85.5	581	0.8	29	42	60.9	415	0.4	17
75-84	44	40.4	396	0.5	17	55	50.5	502	0.9	34	62	56.9	620	0.4	14
85 and older	51	55.4	420	0.7	26	17	18.5	160	0.8	24	31	33.7	285	0.3	12
Unknown	1	50.0	4	2.3	255	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 Florida, released by CMS in 06/2007. 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 3,932 beneficiaries who were in nursing facilities for part of their enrollment and their 34,377 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^{a, b, c, d} NONDUAL BENEFICIARIES, FLORIDA, 2003

Beneficiary Characteristics	ANTIHYPERTENSIVE					DERMATOLOGICAL						
	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
All	1,860	53.3 %	18,875	0.7	\$24	3,910	112.0 %	42,835	0.3	\$10	3,490	34,406
Female	959	53.7	9,952	0.7	24	2,082	116.6	22,981	0.3	11	1,786	17,990
Disabled	711	55.9	7,418	0.7	25	1,562	122.8	17,477	0.3	11	1,272	13,122
64 or younger	656	56.0	6,788	0.7	25	1,460	124.6	16,319	0.3	11	1,172	11,989
65-74	39	54.9	458	0.7	25	73	102.8	816	0.2	7	71	793
75-84	12	54.5	142	0.8	23	24	109.1	288	0.2	8	22	262
85 and older	4	57.1	30	0.4	8	5	71.4	54	0.2	6	7	78
Other Eligibles	248	48.2	2,534	0.7	22	520	101.2	5,504	0.2	9	514	4,868
64 or younger	1	16.7	4	1.3	50	3	50.0	18	0.5	13	6	28
65-74	56	71.8	549	0.7	24	88	112.8	974	0.2	10	78	759
75-84	101	54.9	1,019	0.7	22	185	100.5	1,913	0.3	10	184	1,734
85 and older	90	36.6	962	0.7	21	244	99.2	2,599	0.2	8	246	2,347
Male	901	52.9	8,923	0.7	24	1,828	107.4	19,854	0.2	10	1,702	16,404
Disabled	762	53.4	7,601	0.7	24	1,556	109.0	17,065	0.2	10	1,428	13,969
64 or younger	715	52.2	7,123	0.7	24	1,476	107.7	16,158	0.2	10	1,370	13,369
65-74	42	84.0	420	0.6	19	71	142.0	807	0.3	12	50	523
75-84	5	62.5	58	0.6	17	9	112.5	100	0.2	6	8	77
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	139	50.7	1,322	0.7	22	272	99.3	2,789	0.2	10	274	2,435
64 or younger	0	0.0	0	0.0	0	1	25.0	10	0.2	3	4	35
65-74	42	60.9	415	0.8	18	76	110.1	818	0.3	10	69	679
75-84	60	55.0	595	0.7	24	107	98.2	1,057	0.2	10	109	965
85 and older	37	40.2	312	0.7	21	88	95.7	904	0.2	9	92	756
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	12

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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 3,932 beneficiaries who were in nursing facilities for part of their enrollment and their 34,377 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 ND10D

Nondual Beneficiaries

TABLE ND.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 FLORIDA, 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	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx		
							Excluded Rx	All Nondual Rx \$	
All	375,104	20.7 %	0.7	1,312,707	\$35,504,274	\$27	\$27	4.1 %	1,808,821
Age									
5 and younger	158,466	31.1	0.7	375,938	6,305,712	17	17	6.3	510,229
6-14	78,720	16.4	0.4	173,795	7,373,753	42	42	5.6	479,058
15-20	28,044	11.8	0.3	64,261	2,582,080	40	40	3.9	237,052
21-44	59,480	13.0	0.6	274,951	8,845,366	32	32	3.6	455,990
45-64	43,275	39.8	3.4	371,069	9,474,846	26	26	3.3	108,654
65-74	4,165	39.2	2.9	30,884	579,579	19	19	3.0	10,617
75-84	2,089	40.5	3.0	15,412	229,065	15	15	2.5	5,154
85 and older	865	44.8	3.3	6,397	113,873	18	18	3.6	1,929
Unknown	0	0.0	0.0	0	0	0	0	0.0	138
Basis of Eligibility^c									
Aged	5,971	38.6	2.6	40,967	608,115	15	15	2.5	15,476
Disabled	82,284	37.3	2.8	618,475	23,760,641	38	38	4.2	220,390
Adults	48,659	10.5	0.3	147,920	2,821,612	19	19	2.9	464,396
Children	238,190	21.5	0.5	505,345	8,313,906	16	16	4.9	1,108,559
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Gender									
Female	213,546	19.9	0.7	781,888	19,103,519	24	24	4.1	1,072,995
Male	161,426	22.0	0.7	530,554	16,397,901	31	31	4.1	734,490
Unknown	132	9.9	0.2	265	2,854	11	11	2.5	1,336
Race									
White	138,841	21.1	0.8	528,326	12,109,794	23	23	3.6	657,717
African American	81,575	15.5	0.4	227,145	6,797,284	30	30	3.7	526,975
Other/unknown	154,688	24.8	0.9	557,236	16,597,196	30	30	4.9	624,129
Use of Nursing Facilities^d									
Entire year	2,218	63.6	8.6	29,889	524,254	18	18	3.2	3,490
Part year	2,772	70.5	6.7	26,453	653,035	25	25	4.1	3,932
None	370,114	20.5	0.7	1,256,365	34,326,985	27	27	4.1	1,801,399
Maintenance Assistance Status									
Cash	178,294	24.9	1.2	844,642	26,531,803	31	31	4.1	715,720
Medically needy	4,557	20.7	0.9	18,827	416,008	22	22	2.5	22,030
Poverty related	141,446	20.5	0.5	320,387	5,263,505	16	16	4.5	690,771
Other/unknown	50,807	13.4	0.3	128,851	3,292,958	26	26	4.0	380,300

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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^{a,b}
 FLORIDA, 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	0.1	\$3	\$27	\$0	\$1	13,062,375
Age						
5 and younger	0.1	2	17	0	0	3,552,339
6-14	0.0	2	42	0	0	3,555,548
15-20	0.0	1	40	0	0	1,732,800
21-44	0.1	3	32	0	1	3,138,198
45-64	0.4	10	26	0	4	926,672
65-74	0.3	6	19	0	2	90,877
75-84	0.3	5	15	0	2	47,799
85 and older	0.4	6	18	0	2	17,564
Unknown	0.0	0	0	0	0	578
Basis of Eligibility^c						
Aged	0.3	5	15	0	2	133,275
Disabled	0.3	11	38	0	3	2,161,563
Adults	0.0	1	19	0	0	3,000,789
Children	0.1	1	16	0	0	7,766,748
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.1	2	24	0	1	7,726,849
Male	0.1	3	31	0	1	5,329,149
Unknown	0.0	0	11	0	0	6,377
Race						
White	0.1	3	23	0	1	4,843,289
African American	0.1	2	30	0	0	3,815,462
Other/unknown	0.1	4	30	0	1	4,403,624
Use of Nursing Facilities^d						
Entire year	0.9	15	18	1	7	34,406
Part year	0.8	19	25	0	6	34,377
None	0.1	3	27	0	1	12,993,592
Maintenance Assistance Status						
Cash	0.2	5	31	0	1	5,563,474
Medically needy	0.1	3	22	0	1	137,475
Poverty related	0.1	1	16	0	0	4,651,839
Other/unknown	0.0	1	26	0	0	2,709,587

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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^{a,b,c}
FLORIDA, 2003

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$		Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx	
				Excluded Rx \$	100.0 %			Excluded Rx	100.0 %
All	455,458	\$78	\$35,504,274	0	100.0 %	1,312,707	\$27	0	100.0 %
Anorexia or weight loss/gain	0	0.0	0	0.0	0.0	0	0	0	0.0
Fertility drugs	9	85	767	0.0	0.0	14	55	14	0.0
Drugs for cosmetic purposes	241	18	4,238	0.0	0.0	383	11	383	0.0
Cough and cold medications	249,127	40	9,948,982	28.0	28.0	474,227	21	474,227	36.1
Vitamins and minerals	52,488	44	2,288,785	6.4	6.4	157,099	15	157,099	12.0
Non-prescription drugs	61,367	137	8,421,047	23.7	23.7	159,844	53	159,844	12.2
Barbiturates	3,777	66	249,826	0.7	0.7	31,045	8	31,045	2.4
Benzodiazepines	69,225	109	7,579,972	21.3	21.3	436,843	17	436,843	33.3
Other Part D Excl Rx Drugs	19,224	365	7,010,657	19.7	19.7	53,252	132	53,252	4.1

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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^{a, b}
 NONDUAL BENEFICIARIES, FLORIDA, 2003

Beneficiary Characteristics	Number of Beneficiaries					Number of Benefit Months						
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	2,295,750	18,901	280,790	534,882	1,461,177	0	20,485,182	185,574	3,012,454	4,131,752	13,155,402	0
Age												
5 and younger	655,044	0	16,809	0	638,235	0	5,908,314	0	179,756	0	5,728,558	0
6-14	653,308	0	55,498	0	597,810	0	6,116,172	0	633,253	0	5,482,919	0
15-20	303,190	0	32,611	47,882	222,697	0	2,675,605	0	363,100	383,383	1,929,122	0
21-44	531,470	1	75,909	453,290	2,270	0	4,322,786	5	805,318	3,503,396	14,067	0
45-64	130,974	221	97,096	33,634	23	0	1,246,621	1,773	1,000,353	244,386	109	0
65-74	13,030	10,570	2,389	71	0	0	128,816	102,381	25,873	562	0	0
75-84	6,369	5,969	397	3	0	0	64,747	60,720	4,006	21	0	0
85 and older	2,223	2,140	81	2	0	0	21,494	20,695	795	4	0	0
Unknown	142	0	0	0	142	0	627	0	0	0	627	0
Gender												
Female	1,337,419	12,353	136,290	458,801	729,975	0	11,818,854	121,760	1,475,815	3,638,578	6,582,701	0
Male	956,541	6,535	144,495	76,079	729,432	0	8,656,216	63,705	1,536,605	493,157	6,562,749	0
Unknown	1,790	13	5	2	1,770	0	10,112	109	34	17	9,952	0
Race												
White	787,801	2,526	93,571	214,016	477,688	0	6,862,550	23,297	968,362	1,673,385	4,197,506	0
African American	733,087	2,563	79,703	165,336	485,485	0	6,929,924	23,627	875,163	1,375,678	4,655,456	0
Other/unknown	774,862	13,812	107,516	155,530	498,004	0	6,692,708	138,650	1,168,929	1,082,689	4,302,440	0
Use of Nursing Facilities^c												
Entire year	3,492	783	2,702	1	6	0	34,548	7,287	27,207	1	53	0
Part year	4,037	442	3,544	37	14	0	37,950	3,891	33,600	324	135	0
None	2,288,221	17,676	274,544	534,844	1,461,157	0	20,412,684	174,396	2,951,647	4,131,427	13,155,214	0
Maintenance Assistance Status												
Cash	951,119	8,729	262,362	234,677	445,351	0	9,205,516	96,678	2,859,577	1,887,422	4,361,839	0
Medically needy	22,030	22	1,662	15,802	4,544	0	162,772	143	14,456	114,663	33,510	0
Poverty related	868,462	9,291	11,506	75,134	772,531	0	7,375,390	81,877	86,422	536,575	6,670,516	0
Other/unknown	454,139	859	5,260	209,269	238,751	0	3,741,504	6,876	51,999	1,593,092	2,089,537	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	1,342,106	12,719	190,341	361,300	777,746	0	11,389,351	121,684	2,001,890	2,595,745	6,670,032	0
FFS part year, with Rx claims	153,116	1,638	18,739	43,046	89,693	0	1,490,513	16,074	199,559	409,255	865,625	0
FFS part year, no Rx claims	313,599	1,119	11,310	60,050	241,120	0	2,806,332	9,867	113,758	494,242	2,188,465	0
MC all year, with Rx claims	302	10	13	34	245	0	1,635	64	124	136	1,311	0
MC all year, no Rx claims	486,627	3,415	60,387	70,452	352,373	0	4,797,351	37,885	697,123	632,374	3,429,969	0

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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^a
NONDUAL BENEFICIARIES, FLORIDA, 2003

	Beneficiaries and Benefit Months in Cell J of Table 1	Included in Cell K of Table 1	Excluded from Cell K of Table 1
	Number of Beneficiaries	Number of Beneficiaries	Number of Beneficiaries
	Number of Months	Number of Months	Number of Months
All	2,295,750	1,808,821	0
Fee-for-service (FFS) all year	1,342,106	1,342,106	0
FFS part year, with Rx claims	153,116	153,116	0
FFS part year, with no Rx claims	313,599	313,599	0
Managed care (MC) all year, with Rx claims	302	0	0
MC all year, with no Rx claims	486,627	0	0
	20,485,182	13,062,375	7,422,807

Source: Data for this table are from the MAX 2003 file for Florida, released by CMS in 06/2007. 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.