

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

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TABLE ND.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
 NONDUAL BENEFICIARIES, HAWAII, 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	84,116	1,571	13,078	34,610	34,857	0	270,212	14,630	128,386	63,512	63,684	0
Age												
5 and younger	14,670	0	622	0	14,048	0	30,866	0	5,737	0	25,129	0
6-14	16,153	0	970	0	15,183	0	38,096	0	10,092	0	28,004	0
15-20	9,579	0	751	3,204	5,624	0	23,325	0	7,106	5,675	10,544	0
21-44	29,616	2	4,258	25,354	2	0	86,830	15	40,412	46,396	7	0
45-64	12,463	24	6,392	6,047	0	0	75,840	195	64,221	11,424	0	0
65-74	1,016	939	72	5	0	0	9,273	8,570	686	17	0	0
75-84	470	459	11	0	0	0	4,549	4,436	113	0	0	0
85 and older	149	147	2	0	0	0	1,433	1,414	19	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	43,622	1,029	6,274	19,220	17,099	0	136,210	9,693	61,270	34,071	31,176	0
Male	40,494	542	6,804	15,390	17,758	0	134,002	4,937	67,116	29,441	32,508	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	21,745	99	4,488	10,143	7,015	0	75,399	915	43,152	18,542	12,790	0
African American	1,655	5	268	776	606	0	5,191	39	2,530	1,509	1,113	0
Other/unknown	60,716	1,467	8,322	23,691	27,236	0	189,622	13,676	82,704	43,461	49,781	0
Use of Nursing Facilities^c												
Entire year	208	63	136	9	0	0	2,127	636	1,476	15	0	0
Part year	554	51	391	95	17	0	4,498	525	3,718	214	41	0
None	83,354	1,457	12,551	34,506	34,840	0	263,587	13,469	123,192	63,283	63,643	0
Maintenance Assistance Status												
Cash	44,370	872	10,183	13,359	19,956	0	176,421	8,727	107,464	23,889	36,341	0
Medically needy	255	60	180	13	2	0	1,631	490	1,122	17	2	0
Poverty-related	14,554	622	2,106	0	11,826	0	45,237	5,391	18,538	0	21,308	0
Other/unknown	24,937	17	609	21,238	3,073	0	46,923	22	1,262	39,606	6,033	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	18,793	1,523	10,918	3,965	2,387	0	146,529	14,392	118,008	7,723	6,406	0
FFS part year, with Rx claims	5,003	29	1,334	2,575	1,065	0	16,505	154	8,159	5,804	2,388	0
FFS part year, no Rx claims	60,320	19	826	28,070	31,405	0	107,178	84	2,219	49,985	54,890	0

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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, HAWAII, 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	18.4 %	5.2	\$417	\$80	\$3,236	12.9 %	84,116
Age							
5 and younger	6.8	0.7	59	84	2,908	2.0	14,670
6-14	6.8	0.8	90	110	1,443	6.2	16,153
15-20	9.0	0.9	101	109	1,941	5.2	9,579
21-44	16.7	3.6	355	99	3,165	11.2	29,616
45-64	51.3	21.4	1,545	72	6,684	23.1	12,463
65-74	72.7	20.6	1,179	57	5,152	22.9	1,016
75-84	76.6	23.2	1,203	52	6,056	19.9	470
85 and older	75.8	25.0	1,441	58	16,905	8.5	149
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	74.5	21.3	1,203	57	6,343	19.0	1,571
Disabled	80.4	30.2	2,487	82	11,562	21.5	13,078
Adults	7.9	0.3	13	46	1,915	0.7	34,610
Children	3.1	0.1	6	68	1,284	0.5	34,857
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	18.0	5.6	389	70	3,201	12.1	43,622
Male	18.8	4.9	447	91	3,273	13.7	40,494
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	22.6	7.2	635	88	3,522	18.0	21,745
African American	18.3	4.6	388	84	2,559	15.2	1,655
Other/unknown	16.9	4.5	339	75	3,152	10.8	60,716
Use of Nursing Facilities^f							
Entire year	94.7	48.7	2,835	58	78,961	3.6	208
Part year	89.2	42.4	3,049	72	43,122	7.1	554
None	17.8	4.9	393	80	2,782	14.1	83,354
Maintenance Assistance Status							
Cash	23.9	8.2	654	80	3,663	17.9	44,370
Medically needy	62.0	22.5	1,749	78	22,771	7.7	255
Poverty related	17.1	4.3	351	82	3,833	9.2	14,554
Other/unknown	9.1	0.4	19	50	1,927	1.0	24,937

Table ND3

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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, HAWAII, 2003

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of		Number of Rx, Percentage with:							Beneficiaries	Mean \$, All Medicaid FFS ^d	Benefit Months	
			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	Beneficiaries				
All	1.6	\$130	12.9 %	81.6 %	7.8 %	2.9 %	4.6 %	2.5 %	0.6 %	\$1,007	84,116	270,212			
Age															
5 and younger	0.3	28	2.0	93.2	4.6	1.2	0.7	0.2	0.0	1,382	14,670	30,866			
6-14	0.3	38	6.2	93.2	4.9	0.8	0.8	0.2	0.0	612	16,153	38,096			
15-20	0.4	42	5.2	91.0	6.4	1.4	0.9	0.3	0.0	797	9,579	23,325			
21-44	1.2	121	11.2	83.3	8.1	2.9	3.6	1.6	0.4	1,079	29,616	86,830			
45-64	3.5	254	23.1	48.7	13.3	7.6	16.4	11.2	2.9	1,098	12,463	75,840			
65-74	2.3	129	22.9	27.3	26.8	15.4	20.7	9.1	0.9	564	1,016	9,273			
75-84	2.4	124	19.9	23.4	28.3	11.1	27.4	9.6	0.2	626	470	4,549			
85 and older	2.6	150	8.5	24.2	19.5	14.1	30.9	10.1	1.3	1,758	149	1,433			
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0			
Basis of Eligibility^e															
Aged	2.3	129	19.0	25.5	27.3	13.9	23.9	8.7	0.6	681	1,571	14,630			
Disabled	3.1	253	21.5	19.6	27.6	11.6	23.2	14.4	3.6	1,178	13,078	128,386			
Adults	0.1	7	0.7	92.1	4.9	1.7	1.1	0.3	0.1	1,043	34,610	63,512			
Children	0.0	3	0.5	96.9	2.4	0.5	0.2	0.0	0.0	703	34,857	63,684			
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0			
Gender															
Female	1.8	124	12.1	82.0	7.3	2.9	4.5	2.7	0.7	1,025	43,622	136,210			
Male	1.5	135	13.7	81.2	8.4	2.9	4.6	2.4	0.5	989	40,494	134,002			
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0			
Race															
White	2.1	183	18.0	77.4	8.8	3.3	5.8	3.6	1.0	1,016	21,745	75,399			
African American	1.5	124	15.2	81.7	9.3	2.5	4.1	1.6	0.8	816	1,655	5,191			
Other/unknown	1.5	109	10.8	83.1	7.4	2.8	4.1	2.1	0.4	1,009	60,716	189,622			
Use of Nursing Facilities^f															
Entire year	4.8	277	3.6	5.3	8.2	9.1	40.4	33.2	3.8	7,722	208	2,127			
Part year	5.2	376	7.1	10.8	14.3	11.0	30.5	25.1	8.3	5,311	554	4,498			
None	1.5	124	14.1	82.2	7.8	2.9	4.3	2.3	0.5	880	83,354	263,587			
Maintenance Assistance Status															
Cash	2.1	165	17.9	76.1	9.2	3.6	6.5	3.8	0.9	921	44,370	176,421			
Medically needy	3.5	273	7.7	38.0	14.5	7.5	22.0	15.7	2.4	3,560	255	1,631			
Poverty related	1.4	113	9.2	82.9	7.6	2.8	4.0	2.2	0.4	1,233	14,554	45,237			
Other/unknown	0.2	10	1.0	90.9	5.5	1.9	1.3	0.3	0.1	1,024	24,937	46,923			

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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, HAWAII, 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	1.6	\$130	\$80	0.7	\$101	\$155	0.0	\$3	\$52	0.9	\$26	\$28
Age												
5 and younger	0.3	28	84	0.1	24	213	0.0	1	64	0.2	4	17
6-14	0.3	38	110	0.1	30	220	0.0	1	67	0.2	7	35
15-20	0.4	42	109	0.2	35	203	0.0	1	52	0.2	6	31
21-44	1.2	121	99	0.5	99	200	0.0	2	55	0.7	19	28
45-64	3.5	254	72	1.3	189	140	0.1	5	51	2.1	59	29
65-74	2.3	129	57	1.2	104	90	0.0	1	24	1.1	24	23
75-84	2.4	124	52	1.2	98	81	0.0	1	32	1.1	24	22
85 and older	2.6	150	58	1.3	121	93	0.1	2	32	1.2	27	22
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	2.3	129	57	1.2	104	89	0.0	1	28	1.1	24	22
Disabled	3.1	253	82	1.2	197	163	0.1	5	54	1.8	51	29
Adults	0.1	7	46	0.0	5	110	0.0	0	36	0.1	2	20
Children	0.0	3	68	0.0	3	177	0.0	0	51	0.0	1	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	1.8	124	70	0.7	95	132	0.1	3	47	1.0	27	27
Male	1.5	135	91	0.6	107	183	0.0	2	59	0.9	25	30
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	2.1	183	88	0.8	141	185	0.1	4	56	1.3	38	31
African American	1.5	124	84	0.6	102	171	0.0	1	43	0.8	20	24
Other/unknown	1.5	109	75	0.6	85	139	0.0	2	50	0.8	21	27
Use of Nursing Facilities^e												
Entire year	4.8	277	58	1.8	202	113	0.3	12	41	2.7	63	24
Part year	5.2	376	72	1.9	278	146	0.2	11	55	3.1	86	28
None	1.5	124	80	0.6	97	156	0.0	2	53	0.9	25	28
Maintenance Assistance Status												
Cash	2.1	165	80	0.8	128	155	0.1	3	53	1.2	34	29
Medically needy	3.5	273	78	1.4	218	151	0.1	7	51	1.9	49	25
Poverty related	1.4	113	82	0.6	91	161	0.0	2	49	0.8	20	26
Other/unknown	0.2	10	50	0.1	7	114	0.0	0	35	0.1	3	20

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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 Hawaii, 0.4 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, HAWAII, 2003

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users ^e							
	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 Beneficiaries	Number of Benefit Months			
															Generic	Generic	Generic
Anti-infective Agents	0.4	0.1	0.0	0.2	\$39	\$33	\$0	\$6	\$108	\$231	\$124	\$27	29,078	\$3,139,797	8,388	10.0 %	80,643
Biologics	0.1	0.1	0.0	0.0	54	35	0	19	388	301	0	833	957	371,190	624	0.7	6,821
Antineoplastic Agents	0.7	0.3	0.1	0.3	300	266	3	31	402	763	56	90	2,995	1,205,397	421	0.5	4,024
Endocrine/Metabolic Drugs	0.8	0.4	0.1	0.4	52	40	2	10	63	103	26	29	42,033	2,665,199	5,139	6.1	51,367
Cardiovascular Agents	1.4	0.6	0.0	0.7	61	44	0	17	45	71	22	23	77,567	3,472,300	5,697	6.8	57,248
Respiratory Agents	0.6	0.3	0.0	0.4	31	24	0	8	49	87	48	21	39,556	1,928,903	6,126	7.3	61,375
Gastrointestinal Agents	0.5	0.2	0.0	0.4	39	30	1	8	76	193	136	23	19,788	1,494,599	3,727	4.4	38,583
Genitourinary Agents	0.4	0.2	0.0	0.1	21	18	1	2	59	77	84	20	4,057	238,578	1,080	1.3	11,140
CNS Drugs	1.2	0.6	0.0	0.6	132	113	1	18	108	186	126	30	81,636	8,803,655	6,779	8.1	66,577
Stimulants/Anti-obesity/Anorexia	0.7	0.2	0.0	0.5	43	17	3	23	66	103	95	50	2,109	138,330	324	0.4	3,228
Miscellaneous Psychological/Neurological Agents	0.5	0.4	0.0	0.0	73	71	0	2	153	165	0	40	910	138,882	176	0.2	1,894
Analgesics and Anesthetics	0.8	0.1	0.0	0.6	55	31	2	23	68	207	94	35	59,238	4,001,412	7,718	9.2	72,695
Neuromuscular Agents	0.9	0.4	0.1	0.4	73	56	6	11	79	141	50	27	39,626	3,139,753	4,257	5.1	43,265
Nutritional Products	0.4	0.0	0.0	0.4	8	0	1	7	18	25	29	17	7,939	140,956	2,012	2.4	18,772
Hematological Agents	0.7	0.3	0.0	0.4	199	191	1	7	289	661	35	19	10,077	2,915,520	1,483	1.8	14,639
Topical Products	0.4	0.1	0.0	0.2	13	8	0	5	37	67	51	21	20,608	772,497	5,579	6.6	57,914
Miscellaneous Products	0.7	0.3	0.0	0.4	137	108	4	25	210	371	338	72	1,879	394,022	290	0.3	2,867
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	19	0	0	0	95	0	0	0	998	95,073	474	0.6	4,961
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.	441,051	35,056,063	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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 Hawaii, 0.4 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^{a, b, c}
 NONDUAL BENEFICIARIES, HAWAII, 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	\$6,134,638	3,753	4.5 %	39,732	0.7	\$224
ANALGESICS - Narcotic	3,024,218	7,803	9.3	76,105	0.5	79
ANTICONVULSANT	2,733,959	3,530	4.2	36,762	0.7	101
MISC. HEMATOLOGICAL	2,026,281	505	0.6	5,242	0.6	675
ANTIDEPRESSANTS	1,949,081	4,976	5.9	49,762	0.6	68
ANTIVIRAL	1,826,260	817	1.0	8,607	0.5	437
ANTI-DIABETIC	1,571,262	3,514	4.2	35,817	0.6	71
ANTIHYPERLIPIDEMIC	1,493,227	2,890	3.4	30,799	0.6	85
ASTHMATIC	1,454,220	5,974	7.1	61,167	0.4	60
ANTINEOPLASTICS	1,198,010	566	0.7	5,501	0.5	401
Total	23,411,156	34,328		349,494	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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.medispan.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); 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, HAWAII, 2003

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANALGESICS - Narcotic				
	Number of Rx	Rx \$	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
All	194,822	\$23,411,156	3,753	4.5 %	39,732	0.7	\$154	7,803	9.3 %	76,105	0.5	\$40	
Female	103,298	10,389,746	1,794	4.1	19,301	0.7	137	4,055	9.3	40,437	0.5	35	
Disabled	94,474	9,705,152	1,670	26.6	18,488	0.7	139	3,381	53.9	36,824	0.5	37	
5 and younger	1,146	109,382	1	0.4	12	0.6	43	8	2.9	94	0.1	1	
6-14	1,509	162,116	16	4.4	147	0.5	103	29	8.0	320	0.1	2	
15-20	1,355	148,333	38	13.3	356	0.6	142	46	16.1	495	0.2	3	
21-44	25,815	2,880,893	718	34.8	7,943	0.7	142	983	47.6	10,586	0.4	29	
45-64	64,158	6,367,161	890	27.4	9,951	0.7	138	2,289	70.6	25,081	0.5	42	
65-74	420	32,165	7	19.4	79	0.5	100	19	52.8	174	0.3	5	
75-84	36	1,902	0	0.0	0	0.0	0	7	87.5	74	0.1	1	
85 and older	35	3,200	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
Other Eligibles	8,824	684,594	124	0.3	813	0.5	83	674	1.8	3,613	0.3	9	
5 and younger	131	6,773	0	0.0	0	0.0	0	2	0.0	5	0.4	2	
6-14	170	17,605	2	0.0	24	0.6	269	6	0.1	28	0.2	1	
15-20	227	28,380	9	0.2	51	0.9	190	45	0.9	90	0.7	20	
21-44	889	47,317	43	0.3	129	0.4	84	264	1.8	590	0.6	10	
45-64	997	72,850	31	1.1	153	0.3	33	142	4.9	557	0.5	16	
65-74	4,039	338,578	26	4.2	307	0.7	99	146	23.6	1,582	0.2	7	
75-84	1,887	135,914	10	3.3	113	0.3	32	50	16.5	581	0.2	4	
85 and older	484	37,177	3	3.5	36	0.9	30	19	22.4	180	0.3	7	
Male	91,524	13,021,410	1,959	4.8	20,431	0.7	171	3,748	9.3	35,668	0.5	46	
Disabled	85,551	12,503,610	1,803	26.5	19,800	0.7	173	3,060	45.0	32,881	0.5	48	
5 and younger	1,727	310,895	2	0.6	21	0.3	67	23	6.6	258	0.1	1	
6-14	2,712	517,440	67	11.0	687	0.6	130	56	9.2	609	0.1	2	
15-20	1,883	377,645	86	18.5	883	0.6	112	58	12.4	639	0.2	5	
21-44	25,838	5,067,686	863	39.3	9,356	0.7	187	827	37.7	8,659	0.5	32	
45-64	52,777	6,180,166	783	24.9	8,829	0.7	166	2,082	66.1	22,559	0.6	58	
65-74	587	47,837	2	5.6	24	1.0	239	13	36.1	145	0.9	30	
75-84	10	637	0	0.0	0	0.0	0	1	33.3	12	0.3	6	
85 and older	17	1,304	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
Other Eligibles	5,973	517,800	156	0.5	631	0.6	124	688	2.0	2,787	0.4	16	
5 and younger	241	8,913	1	0.0	12	0.8	94	1	0.0	2	0.5	3	
6-14	250	60,134	5	0.1	17	1.0	159	4	0.1	20	0.3	2	
15-20	239	27,972	18	0.5	71	0.5	146	48	1.3	193	0.4	15	
21-44	1,226	78,525	87	0.8	217	0.6	108	339	3.1	829	0.6	21	
45-64	846	54,808	24	0.8	80	0.6	114	174	5.5	428	0.6	22	
65-74	1,771	152,000	8	2.5	88	0.7	201	76	23.3	799	0.3	10	
75-84	922	84,095	9	5.8	99	0.5	80	32	20.5	368	0.2	10	
85 and older	478	51,353	4	6.5	47	0.8	130	14	22.6	148	0.3	26	
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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.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 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, HAWAII, 2003

Beneficiary Characteristics	ANTICONVULSANT					MISC. HEMATOLOGICAL					ANTIDEPRESSANTS				
	Number of Users	Users as % of All Benefes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	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	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	Mean of Rx per Benefit Month
All	3,530	4.2 %	36,762	0.7	\$74	505	0.6 %	5,242	0.6	\$387	4,976	5.9 %	49,762	0.6	\$39
Female	1,788	4.1	18,785	0.7	70	250	0.6	2,644	0.6	65	2,829	6.5	28,788	0.6	40
Disabled	1,638	26.1	17,882	0.7	71	184	2.9	1,979	0.6	66	2,504	39.9	27,134	0.6	41
5 and younger	28	10.2	311	0.8	147	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	56	15.5	619	0.6	40	1	0.3	12	0.3	15	21	5.8	186	0.8	46
15-20	65	22.8	696	0.8	92	0	0.0	0	0.0	0	34	11.9	330	0.4	31
21-44	594	28.8	6,459	0.8	80	25	1.2	264	0.5	50	764	37.0	8,292	0.6	41
45-64	888	27.4	9,727	0.7	63	154	4.7	1,661	0.6	68	1,678	51.7	18,261	0.6	41
65-74	6	16.7	58	0.7	62	3	8.3	30	0.6	71	6	16.7	53	0.6	40
75-84	1	12.5	12	0.8	19	0	0.0	0	0.0	0	1	12.5	12	0.1	1
85 and older	0	0.0	0	0.0	0	1	100.0	12	0.8	98	0	0.0	0	0.0	0
Other Eligibles	150	0.4	903	0.6	58	66	0.2	665	0.6	63	325	0.9	1,654	0.4	25
5 and younger	2	0.0	9	0.9	31	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	7	0.1	74	0.9	97	0	0.0	0	0.0	0	5	0.1	36	0.4	14
15-20	10	0.2	56	1.2	263	0	0.0	0	0.0	0	11	0.2	40	0.4	23
21-44	45	0.3	102	0.6	40	1	0.0	2	0.5	37	115	0.8	277	0.5	32
45-64	40	1.4	157	0.6	35	7	0.2	17	0.6	79	113	3.9	399	0.5	32
65-74	29	4.7	327	0.4	41	31	5.0	333	0.4	50	51	8.3	564	0.4	21
75-84	12	4.0	131	0.6	42	19	6.3	217	0.8	89	23	7.6	267	0.4	18
85 and older	5	5.9	47	0.9	42	8	9.4	96	0.4	51	7	8.2	71	0.5	32
Male	1,742	4.3	17,977	0.7	79	255	0.6	2,598	0.6	714	2,147	5.3	20,974	0.6	38
Disabled	1,600	23.5	17,262	0.8	81	211	3.1	2,230	0.6	802	1,884	27.7	19,930	0.6	38
5 and younger	43	12.4	457	0.7	196	3	0.9	19	1.9	6,623	4	1.2	39	0.2	2
6-14	117	19.2	1,282	0.8	96	6	1.0	70	0.7	3,307	47	7.7	470	0.4	29
15-20	76	16.3	839	0.8	81	3	0.6	26	1.1	6,246	55	11.8	547	0.5	39
21-44	610	27.8	6,539	0.8	91	24	1.1	244	1.0	4,750	599	27.3	6,263	0.6	37
45-64	752	23.9	8,121	0.7	64	171	5.4	1,826	0.5	57	1,173	37.3	12,547	0.6	39
65-74	2	5.6	24	0.6	50	4	11.1	45	0.7	139	6	16.7	64	0.6	23
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	142	0.4	715	0.6	39	44	0.1	368	0.5	177	263	0.8	1,044	0.6	34
5 and younger	3	0.0	26	0.9	30	1	0.0	12	0.3	5	0	0.0	0	0.0	0
6-14	11	0.1	106	0.5	38	1	0.0	12	0.7	3,762	8	0.1	33	0.8	54
15-20	10	0.3	28	0.7	99	0	0.0	0	0.0	0	11	0.3	56	0.8	100
21-44	64	0.6	165	0.6	42	0	0.0	0	0.0	0	118	1.1	291	0.6	29
45-64	25	0.8	83	0.6	33	11	0.3	20	0.6	64	83	2.6	224	0.6	32
65-74	14	4.3	140	0.7	32	12	3.7	130	0.6	79	16	4.9	160	0.5	29
75-84	5	3.2	60	0.7	33	16	10.3	168	0.5	39	12	7.7	121	0.5	20
85 and older	10	16.1	107	0.4	37	3	4.8	26	0.7	77	15	24.2	159	0.6	30
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table ND7B

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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.medispan.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.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, HAWAII, 2003

Beneficiary Characteristics	ANTIVIRAL				ANTI-DIABETIC				ANTI-HYPERLIPIDEMIC						
	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	817	1.0 %	8,607	0.5	\$212	3,514	4.2 %	35,817	0.6	\$44	2,890	3.4 %	30,799	0.6	\$49
Female	313	0.7	3,340	0.4	135	1,985	4.6	20,695	0.6	44	1,622	3.7	17,509	0.6	49
Disabled	278	4.4	3,065	0.4	145	1,597	25.5	17,566	0.6	46	1,206	19.2	13,370	0.6	49
5 and younger	4	1.5	41	0.1	3	1	0.4	12	0.1	0	1	0.4	12	0.2	6
6-14	23	6.4	269	0.7	129	10	2.8	97	0.8	60	2	0.6	24	0.5	32
15-20	5	1.8	58	0.3	14	5	1.8	60	0.5	25	1	0.4	11	0.2	4
21-44	73	3.5	774	0.5	226	267	12.9	2,951	0.6	40	169	8.2	1,832	0.6	43
45-64	171	5.3	1,906	0.3	122	1,288	39.7	14,170	0.6	47	1,019	31.4	11,348	0.6	50
65-74	1	2.8	5	0.2	12	20	55.6	204	0.5	30	13	36.1	131	0.6	50
75-84	1	12.5	12	0.1	13	2	25.0	24	0.2	11	1	12.5	12	0.2	17
85 and older	0	0.0	0	0.0	0	4	400.0	48	0.5	42	0	0.0	0	0.0	0
Other Eligibles	35	0.1	275	0.2	29	388	1.0	3,129	0.6	35	416	1.1	4,139	0.5	50
5 and younger	1	0.0	1	1.0	46	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	2	0.0	3	0.7	50	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	0.0	1	2.0	27	3	0.1	10	0.4	18	1	0.0	4	0.3	18
21-44	8	0.1	39	0.3	102	47	0.3	114	0.5	30	12	0.1	28	0.6	52
45-64	4	0.1	15	0.3	44	79	2.7	212	0.6	30	38	1.3	110	0.6	56
65-74	12	1.9	138	0.1	11	175	28.3	1,877	0.6	38	245	39.6	2,637	0.5	48
75-84	7	2.3	78	0.2	20	72	23.8	793	0.6	29	106	35.0	1,208	0.6	53
85 and older	0	0.0	0	0.0	0	12	14.1	123	0.8	52	14	16.5	152	0.7	75
Male	504	1.2	5,267	0.6	261	1,529	3.8	15,122	0.6	44	1,268	3.1	13,290	0.6	48
Disabled	471	6.9	5,077	0.6	268	1,268	18.6	13,565	0.6	45	1,067	15.7	11,702	0.6	49
5 and younger	9	2.6	88	0.3	40	2	0.6	24	0.1	3	2	0.6	16	0.3	10
6-14	6	1.0	72	0.2	3	7	1.1	70	0.5	22	1	0.2	12	0.8	58
15-20	4	0.9	44	0.1	2	8	1.7	86	0.3	20	3	0.6	33	0.2	15
21-44	193	8.8	1,982	0.6	258	274	12.5	2,810	0.6	42	224	10.2	2,444	0.5	42
45-64	259	8.2	2,891	0.6	293	958	30.4	10,347	0.6	45	826	26.2	9,070	0.6	50
65-74	0	0.0	0	0.0	0	19	52.8	228	0.7	58	10	27.8	120	0.8	87
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	1	100.0	7	0.4	30
Other Eligibles	33	0.1	190	0.3	66	261	0.8	1,557	0.6	37	201	0.6	1,588	0.5	42
5 and younger	4	0.1	7	0.6	12	0	0.0	0	0.0	0	1	0.0	2	0.5	52
6-14	0	0.0	0	0.0	0	1	0.0	3	0.7	29	0	0.0	0	0.0	0
15-20	1	0.0	12	0.1	2	3	0.1	15	0.8	33	0	0.0	0	0.0	0
21-44	12	0.1	46	0.6	189	71	0.6	189	0.6	23	26	0.2	98	0.5	40
45-64	5	0.2	10	0.5	148	79	2.5	226	0.6	32	48	1.5	130	0.6	40
65-74	5	1.5	54	0.1	16	79	24.2	831	0.5	43	84	25.8	892	0.5	45
75-84	3	1.9	30	0.3	47	18	11.5	196	0.6	28	33	21.2	383	0.5	37
85 and older	3	4.8	31	0.1	2	10	16.1	97	0.6	40	9	14.5	83	0.6	40
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table ND7C

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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.medisp.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, HAWAII, 2003

Beneficiary Characteristics	ANTI-ASTHMATIC				ANTI-NEOPLASTIC							
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Mean of Rx per Benefit Month	Mean of Rx per Benefit Month	Number of Benefit Months Among Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Mean of Rx per Benefit Month	Number of Beneficiaries
All	5,374	7.1 %	61,167	0.4	\$24	566	0.7 %	5,501	0.5	\$218	84,116	270,212
Female	3,454	7.9	35,736	0.4	23	354	0.8	3,519	0.5	188	43,622	136,210
Disabled	2,931	46.7	32,643	0.4	24	289	4.6	2,980	0.6	202	6,274	61,270
5 and younger	243	88.4	2,625	0.3	22	4	1.5	40	1.0	153	275	2,520
6-14	126	34.9	1,376	0.4	22	10	2.8	102	1.0	408	361	3,747
15-20	69	24.2	792	0.3	17	5	1.8	59	0.8	100	285	2,641
21-44	688	33.3	7,602	0.3	18	65	3.1	651	0.5	99	2,064	19,156
45-64	1,783	55.0	20,032	0.4	26	202	6.2	2,101	0.5	230	3,244	32,795
65-74	19	52.8	180	0.3	14	2	5.6	15	0.3	23	36	322
75-84	3	37.5	36	0.1	9	1	12.5	12	0.2	52	8	77
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
Other Eligibles	523	1.4	3,093	0.4	21	65	0.2	539	0.4	108	37,348	74,940
5 and younger	84	1.2	300	0.4	22	0	0.0	0	0.0	0	6,764	12,075
6-14	45	0.6	224	0.3	15	0	0.0	0	0.0	0	7,319	13,524
15-20	24	0.5	107	0.3	9	0	0.0	0	0.0	0	5,093	9,180
21-44	138	1.0	312	0.5	24	9	0.1	29	0.6	44	14,280	25,187
45-64	63	2.2	240	0.6	31	27	0.9	197	0.4	97	2,886	5,477
65-74	103	16.7	1,162	0.3	22	16	2.6	174	0.5	181	618	5,727
75-84	52	17.2	595	0.3	17	8	2.6	89	0.4	22	303	2,969
85 and older	14	16.5	153	0.3	23	5	5.9	50	0.6	91	85	801
Male	2,520	6.2	25,431	0.4	25	212	0.5	1,982	0.5	271	40,494	134,002
Disabled	2,054	30.2	22,795	0.4	24	162	2.4	1,542	0.6	314	6,804	67,116
5 and younger	311	89.6	3,385	0.4	25	9	2.6	92	0.9	50	347	3,217
6-14	220	36.1	2,468	0.3	21	9	1.5	108	0.7	37	609	6,345
15-20	90	19.3	1,007	0.3	14	3	0.6	33	0.3	258	466	4,465
21-44	372	17.0	4,135	0.3	20	49	2.2	437	0.6	562	2,194	21,256
45-64	1,043	33.1	11,599	0.5	26	90	2.9	854	0.5	258	3,148	31,426
65-74	12	33.3	144	0.7	32	2	5.6	18	0.1	26	36	364
75-84	3	100.0	36	0.2	16	0	0.0	0	0.0	0	3	36
85 and older	3	300.0	21	0.7	52	0	0.0	0	0.0	0	1	7
Other Eligibles	466	1.4	2,636	0.5	29	50	0.1	440	0.5	120	33,690	66,886
5 and younger	100	1.4	418	0.4	14	3	0.0	24	0.8	31	7,284	13,054
6-14	76	1.0	325	0.4	19	1	0.0	2	0.5	64	7,864	14,480
15-20	20	0.5	75	0.3	16	3	0.1	30	1.2	154	3,735	7,039
21-44	80	0.7	200	0.6	23	5	0.0	17	0.8	38	11,078	21,231
45-64	56	1.8	236	0.5	29	4	0.1	20	0.6	223	3,185	6,142
65-74	74	22.7	713	0.4	33	10	3.1	80	0.3	79	326	2,860
75-84	43	27.6	481	0.5	45	12	7.7	135	0.4	140	156	1,467
85 and older	17	27.4	188	0.4	34	12	19.4	132	0.4	129	62	613
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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, HAWAII, 2003

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Benefit Months Among All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	\$277	4.8	208	2,127
Age				
0-64	301	5.0	143	1,475
65-74	247	3.4	14	142
75-84	245	5.6	14	159
85 and older	204	3.8	37	351
Unknown	0	0.0	0	0
Gender				
Female	280	4.8	94	1,004
Male	275	4.7	114	1,123
Unknown	0	0.0	0	0
Race				
White	324	5.1	43	406
African American	13	0.6	2	16
Other/unknown	269	4.7	163	1,705
Basis of Eligibility^c				
Aged	226	4.2	63	636
Disabled	300	5.0	136	1,476
Adults	212	7.3	9	15
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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 554 beneficiaries who were in nursing facilities for part of their enrollment and their 4,498 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, HAWAII, 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	\$41	\$37	\$0	\$4	\$94	\$147	\$56	\$23	591	\$55,317	129	62.0 %	1,350
Biologicals	0.1	0.1	0.0	0.0	2	1	0	1	16	13	0	37	21	340	18	8.7	202
Antineoplastic Agents	0.4	0.0	0.0	0.4	56	17	0	40	143	665	6	109	47	6,702	14	6.7	119
Endocrine/Metabolic Drugs	1.0	0.5	0.2	0.4	40	29	3	8	39	62	16	21	971	37,392	87	41.8	931
Cardiovascular Agents	1.5	0.4	0.0	1.0	52	30	1	22	35	68	32	21	1,923	66,915	120	57.7	1,279
Respiratory Agents	0.8	0.4	0.0	0.4	57	40	0	17	71	110	7	39	625	44,588	73	35.1	784
Gastrointestinal Agents	0.9	0.3	0.0	0.6	54	37	0	17	59	138	21	26	995	59,141	104	50.0	1,091
Genitourinary Agents	0.7	0.3	0.2	0.3	36	11	23	3	50	40	133	9	134	6,718	17	8.2	188
CNS Drugs	1.2	0.6	0.0	0.6	102	88	0	14	85	159	46	21	1,576	133,272	124	59.6	1,310
Stimulants/Anti-obesity/Anorexia	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Miscellaneous Psychological/Neurological Agents	0.6	0.6	0.0	0.0	72	72	0	0	115	115	0	0	61	7,044	10	4.8	98
Analgesics and Anesthetics	0.6	0.2	0.0	0.4	39	35	1	4	64	148	41	10	429	27,423	73	35.1	701
Neuromuscular Agents	1.1	0.4	0.3	0.4	71	44	12	15	63	100	45	35	1,187	74,221	96	46.2	1,046
Nutritional Products	0.6	0.0	0.1	0.5	10	0	2	8	16	16	30	15	413	6,660	68	32.7	679
Hematological Agents	0.7	0.3	0.0	0.4	60	55	0	6	89	206	12	14	308	27,383	47	22.6	454
Topical Products	0.5	0.2	0.0	0.3	22	13	1	8	44	78	113	24	787	34,499	142	68.3	1,583
Miscellaneous Products	0.2	0.0	0.0	0.2	8	3	0	4	41	108	0	26	23	933	13	6.3	124
Unknown Therapeutic Category	0.6	0.0	0.0	0.0	18	0	0	0	33	0	0	0	36	1,180	6	2.9	64
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.	10,127	589,728	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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 554 beneficiaries who were in nursing facilities for part of their enrollment and their 4,498 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).

Table ND9

Nondual Beneficiaries

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 Hawaii, 0.4 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, HAWAII, 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	\$83,634	49	23.6 %	564	0.7	\$214	\$148
ANTICONVULSANT	56,911	97	46.6	1,068	0.8	63	53
ULCER DRUGS	38,952	91	43.8	985	0.6	65	40
ANTIASTHMATIC	38,825	90	43.3	1,013	0.5	73	38
ANTIDEPRESSANTS	37,571	89	42.8	953	0.7	59	39
DERMATOLOGICAL	31,733	315	151.4	3,579	0.2	38	9
ANTIDIABETIC	26,277	67	32.2	684	0.8	48	38
ANTIHYPERTENSIVE	22,730	73	35.1	805	0.8	37	28
ANTIHYPERLIPIDEMIC	18,011	32	15.4	343	0.8	68	53
ANALGESICS - Narcotic	17,563	58	27.9	540	0.4	81	33
Total	372,207	961		10,534	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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 554 beneficiaries who were in nursing facilities for part of their enrollment and their 4,498 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); 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, HAWAII, 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	5,559	\$372,207	49	23.6 %	564	0.7	\$148	97	46.6 %	1,068	0.8	\$53					
Female	2,569	164,597	16	17.0	191	0.6	141	38	40.4	430	0.8	53					
Disabled	1,951	130,902	12	19.4	143	0.6	136	30	48.4	347	0.9	55					
64 or younger	1,951	130,902	12	19.7	143	0.6	136	30	49.2	347	0.9	55					
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Other Eligibles	618	33,695	4	12.5	48	0.8	154	8	25.0	83	0.7	46					
64 or younger	6	357	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	86	10,063	3	75.0	36	0.8	183	2	50.0	24	0.3	10					
75-84	279	11,242	0	0.0	0	0.0	0	4	44.4	44	0.9	49					
85 and older	247	12,033	1	5.6	12	0.8	65	2	11.1	15	0.9	97					
Male	2,990	207,610	33	28.9	373	0.7	152	59	51.8	638	0.9	54					
Disabled	2,140	151,123	22	29.7	250	0.7	143	45	60.8	502	0.9	59					
64 or younger	2,132	149,813	22	30.1	250	0.7	143	45	61.6	502	0.9	59					
65-74	8	1,310	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
Other Eligibles	850	56,487	11	27.5	123	0.8	171	14	35.0	136	0.9	33					
64 or younger	43	878	0	0.0	0	0.0	0	1	12.5	2	1.0	12					
65-74	269	19,283	7	87.5	76	0.6	141	7	87.5	68	0.9	31					
75-84	158	12,688	2	40.0	24	1.0	313	2	40.0	24	1.4	58					
85 and older	380	23,638	2	10.5	23	1.0	124	4	21.1	42	0.5	23					
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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 554 beneficiaries who were in nursing facilities for part of their enrollment and their 4,498 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.medspan.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, HAWAII, 2003

Beneficiary Characteristics	ULCER DRUGS					ANTI-ASTHMATIC					ANTI-DEPRESSANTS				
	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	91	43.8 %	985	0.6	\$40	90	43.3 %	1,013	0.5	\$38	89	42.8 %	953	0.7	\$39
Female															
Disabled	39	41.5	410	0.6	43	48	51.1	552	0.5	30	31	33.0	360	0.6	45
64 or younger	28	45.2	319	0.6	48	38	61.3	439	0.5	32	24	38.7	283	0.7	51
65-74	28	45.9	319	0.6	48	38	62.3	439	0.5	32	24	39.3	283	0.7	51
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	11	34.4	91	0.7	27	10	31.3	113	0.3	22	7	21.9	77	0.5	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	1	25.0	12	0.1	1	2	50.0	24	0.1	2	1	25.0	12	1.0	93
75-84	3	33.3	34	0.9	25	4	44.4	48	0.3	11	5	55.6	60	0.4	7
85 and older	7	38.9	45	0.7	34	4	22.2	41	0.6	46	1	5.6	5	0.6	33
Male															
Disabled	52	45.6	575	0.6	37	42	36.8	461	0.6	48	58	50.9	593	0.7	36
64 or younger	38	51.4	426	0.6	39	36	48.6	404	0.6	48	36	48.6	379	0.7	39
65-74	38	52.1	426	0.6	39	36	49.3	404	0.6	48	35	47.9	375	0.7	39
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	4	0.8	53
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	14	35.0	149	0.6	29	6	15.0	57	0.5	52	22	55.0	214	0.7	32
64 or younger	1	12.5	2	0.5	7	1	12.5	2	0.5	3	2	25.0	4	1.3	34
65-74	4	50.0	40	0.7	29	0	0.0	0	0.0	0	6	75.0	64	0.6	42
75-84	2	40.0	24	1.0	27	0	0.0	0	0.0	0	2	40.0	23	0.7	9
85 and older	7	36.8	83	0.5	31	5	26.3	55	0.5	53	12	63.2	123	0.7	31
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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 554 beneficiaries who were in nursing facilities for part of their enrollment and their 4,498 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, HAWAII, 2003

Beneficiary Characteristics	DERMATOLOGICAL					ANTI-DIABETIC					ANTI-HYPERTENSIVE				
	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	315	151.4 %	3,579	0.2	\$9	67	32.2 %	684	0.8	\$38	73	35.1 %	805	0.8	\$28
Female	149	158.5	1,699	0.2	6	38	40.4	421	0.9	46	39	41.5	446	0.8	30
Disabled	108	174.2	1,251	0.2	6	26	41.9	311	0.8	47	26	41.9	307	0.8	32
64 or younger	108	177.0	1,251	0.2	6	26	42.6	311	0.8	47	26	42.6	307	0.8	32
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
Other Eligibles	41	128.1	448	0.2	7	12	37.5	110	0.9	46	13	40.6	139	0.7	28
64 or younger	0	0.0	0	0.0	0	1	100.0	1	2.0	65	0	0.0	0	0.0	0
65-74	7	175.0	84	0.3	12	0	0.0	0	0.0	0	1	25.0	12	1.0	91
75-84	14	155.6	168	0.2	4	7	77.8	82	0.9	46	5	55.6	60	0.7	21
85 and older	20	111.1	196	0.2	8	4	22.2	27	1.0	43	7	38.9	67	0.8	22
Male	166	145.6	1,880	0.2	11	29	25.4	263	0.7	26	34	29.8	359	0.8	26
Disabled	122	164.9	1,390	0.2	11	15	20.3	160	0.7	23	22	29.7	255	0.8	27
64 or younger	122	167.1	1,390	0.2	11	15	20.5	160	0.7	23	22	30.1	255	0.8	27
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
Other Eligibles	44	110.0	490	0.3	12	14	35.0	103	0.7	30	12	30.0	104	0.8	22
64 or younger	1	12.5	3	0.3	2	3	37.5	4	1.5	79	4	50.0	8	1.4	12
65-74	8	100.0	96	0.4	6	4	50.0	30	0.7	36	4	50.0	48	0.7	18
75-84	10	200.0	120	0.3	13	1	20.0	12	1.1	52	0	0.0	0	0.0	0
85 and older	25	131.6	271	0.2	15	6	31.6	57	0.6	19	4	21.1	48	0.9	27
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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 554 beneficiaries who were in nursing facilities for part of their enrollment and their 4,498 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, HAWAII, 2003

Beneficiary Characteristics	ANTHYPERLIPIDEMIC				ANALGESICS - Narcotic				Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx							
All	32	15.4 %	343	0.8	53	58	27.9 %	540	0.4	\$33	208	2,127			
Female	15	16.0	170	0.8	62	30	31.9	302	0.4	34	94	1,004			
Disabled	11	17.7	129	0.8	62	18	29.0	205	0.3	44	62	700			
64 or younger	11	18.0	129	0.8	62	18	29.5	205	0.3	44	61	688			
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			
Other Eligibles	4	12.5	41	0.8	63	12	37.5	97	0.4	13	32	304			
64 or younger	0	0.0	0	0.0	0	1	100.0	1	4.0	292	1	1			
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	48			
75-84	2	22.2	24	0.7	55	4	44.4	48	0.3	5	9	100			
85 and older	2	11.1	17	0.9	75	7	38.9	48	0.5	16	18	155			
Male	17	14.9	173	0.7	43	28	24.6	238	0.5	30	114	1,123			
Disabled	10	13.5	114	0.8	51	14	18.9	150	0.4	23	74	776			
64 or younger	10	13.7	114	0.8	51	13	17.8	146	0.4	16	73	772			
65-74	0	0.0	0	0.0	0	1	100.0	4	1.3	275	1	4			
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0			
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0			
Other Eligibles	7	17.5	59	0.6	28	14	35.0	88	0.5	44	40	347			
64 or younger	1	12.5	2	1.0	60	7	87.5	14	1.0	12	8	14			
65-74	1	12.5	12	0.6	19	0	0.0	0	0.0	0	8	78			
75-84	1	20.0	12	0.3	2	2	40.0	24	0.4	32	5	59			
85 and older	4	21.1	33	0.7	39	5	26.3	50	0.4	58	19	196			
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0			

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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 554 beneficiaries who were in nursing facilities for part of their enrollment and their 4,498 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^{a,b}
 HAWAII, 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		Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx as a Percentage of Total Number of Beneficiaries	
				Part D Excluded Rx	Rx \$ per Beneficiary			All Nondual Rx \$	3.8 %
All	9,734	11.6 %	1.0	84,926	\$16	\$1,322,197	\$16	\$16	84,116
Age									
5 and younger	706	4.8	0.2	3,582	10	143,260	40	40	14,670
6-14	677	4.2	0.2	3,572	10	161,557	45	45	16,153
15-20	370	3.9	0.2	1,789	7	70,806	40	40	9,579
21-44	2,497	8.4	0.6	17,696	9	260,449	15	15	29,616
45-64	4,517	36.2	4.0	49,806	50	618,610	12	12	12,463
65-74	574	56.5	4.3	4,338	35	35,703	8	8	1,016
75-84	295	62.8	5.3	2,490	41	19,163	8	8	470
85 and older	98	65.8	10.4	1,553	85	12,649	8	8	149
Unknown	0	0.0	0.0	0	0	0	0	0	0
Basis of Eligibility^c									
Aged	926	58.9	5.0	7,882	41	63,873	8	8	1,571
Disabled	7,506	57.4	5.7	74,611	94	1,235,602	17	17	13,078
Adults	775	2.2	0.0	1,484	0	13,231	9	9	34,610
Children	527	1.5	0.0	849	0	9,491	11	11	34,857
Unknown	0	0.0	0.0	0	0	0	0	0	0
Gender									
Female	5,295	12.1	1.1	48,661	17	723,635	15	15	43,622
Male	4,439	11.0	0.9	36,165	15	598,562	17	17	40,494
Unknown	0	0.0	0.0	0	0	0	0	0	0
Race									
White	2,893	13.3	1.3	28,701	22	489,175	17	17	21,745
African American	160	9.7	0.7	1,235	9	14,591	12	12	1,655
Other/unknown	6,681	11.0	0.9	54,890	13	818,431	15	15	60,716
Use of Nursing Facilities^d									
Entire year	196	94.2	25.3	5,263	274	56,967	11	11	208
Part year	464	83.8	10.6	5,848	188	104,244	18	18	554
None	9,074	10.9	0.9	73,715	14	1,160,986	16	16	83,354
Maintenance Assistance Status									
Cash	7,212	16.3	1.5	68,349	23	1,006,986	15	15	44,370
Medically needy	130	51.0	7.3	1,850	64	16,304	9	9	255
Poverty related	1,689	11.6	0.9	12,943	19	283,211	22	22	14,554
Other/unknown	703	2.8	0.1	1,684	1	15,696	9	9	24,937

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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}
 HAWAII, 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	0.3	\$5	\$16	\$0	\$2	270,212
Age						
5 and younger	0.1	5	40	0	4	30,866
6-14	0.1	4	45	0	1	38,096
15-20	0.1	3	40	0	1	23,325
21-44	0.2	3	15	0	1	86,830
45-64	0.7	8	12	0	3	75,840
65-74	0.5	4	8	0	0	9,273
75-84	0.5	4	8	0	0	4,549
85 and older	1.1	9	8	0	0	1,433
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.5	4	8	0	0	14,630
Disabled	0.6	10	17	0	4	128,386
Adults	0.0	0	9	0	0	63,512
Children	0.0	0	11	0	0	63,684
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.4	5	15	0	2	136,210
Male	0.3	4	17	0	2	134,002
Unknown	0.0	0	0	0	0	0
Race						
White	0.4	6	17	0	3	75,399
African American	0.2	3	12	0	1	5,191
Other/unknown	0.3	4	15	0	2	189,622
Use of Nursing Facilities^d						
Entire year	2.5	27	11	1	5	2,127
Part year	1.3	23	18	0	12	4,498
None	0.3	4	16	0	2	263,587
Maintenance Assistance Status						
Cash	0.4	6	15	0	2	176,421
Medically needy	1.1	10	9	0	1	1,631
Poverty related	0.3	6	22	0	3	45,237
Other/unknown	0.0	0	9	0	0	46,923

Table ND12

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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}
 HAWAII, 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	
			Total Rx \$	Excluded Rx \$	Excluded Rx %	Part D Excluded Rx %				
All	15,683	\$84	\$1,322,197	100.0 %	84,826	\$16	100.0 %	80	0.0	
Anorexia or weight loss/gain	9	141	1,272	0.1	16	80	0.0	0	0.0	
Fertility drugs	0	0	0	0.0	0	0	0.0	14	0.0	
Drugs for cosmetic purposes	2	93	185	0.0	13	22	8.7	18	8.4	
Cough and cold medications	2,728	59	162,140	12.3	7,421	6	52.0	8	2.4	
Vitamins and minerals	1,761	71	125,669	9.5	7,138	26	25.1	68	3.4	
Non-prescription drugs	7,263	38	273,348	20.7	44,070	26	25.1	68	3.4	
Barbiturates	231	74	16,983	1.3	2,030	8	2.4	26	25.1	
Benzodiazepines	2,973	184	547,085	41.4	21,257	26	25.1	68	3.4	
Other Part D Excl Rx Drugs	716	273	195,515	14.8	2,881	68	3.4			

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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, HAWAII, 2003

Beneficiary Characteristics	Number of Beneficiaries					Number of Benefit Months					
	All	Aged	Disabled	Adults	Unknown	All	Aged	Disabled	Adults	Unknown	
All	187,914	1,571	14,638	72,454	99,251	1,790,394	14,874	156,692	633,804	985,024	0
Age											
5 and younger	39,454	0	622	0	38,832	374,165	0	6,357	0	367,808	0
6-14	45,266	0	979	0	44,287	469,678	0	10,761	0	458,917	0
15-20	22,541	0	797	5,619	16,125	213,655	0	8,388	46,996	158,271	0
21-44	57,147	2	5,109	52,029	7	504,583	15	53,892	450,648	28	0
45-64	21,858	24	7,045	14,789	0	212,667	195	76,437	136,035	0	0
65-74	1,029	939	73	17	0	9,661	8,811	725	125	0	0
75-84	470	459	11	0	0	4,550	4,437	113	0	0	0
85 and older	149	147	2	0	0	1,435	1,416	19	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Gender											
Female	99,718	1,029	7,263	43,029	48,397	962,252	9,861	78,347	393,288	480,756	0
Male	88,196	542	7,375	29,425	50,854	828,142	5,013	78,345	240,516	504,268	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	42,880	99	5,001	19,601	18,179	392,537	937	52,741	165,462	173,397	0
African American	3,221	5	293	1,383	1,540	28,487	49	3,007	11,178	14,253	0
Other/unknown	141,813	1,467	9,344	51,470	79,532	1,369,370	13,888	100,944	457,164	797,374	0
Use of Nursing Facilities^c											
Entire year	208	63	136	9	0	2,129	636	1,478	15	0	0
Part year	562	51	396	96	19	5,366	529	3,974	702	161	0
None	187,144	1,457	14,106	72,349	99,232	1,782,899	13,709	151,240	633,087	984,863	0
Maintenance Assistance Status											
Cash	93,947	872	10,505	28,984	53,586	940,815	8,800	117,269	274,257	540,489	0
Medically needy	259	60	184	13	2	1,784	491	1,261	30	2	0
Poverty related	35,539	622	2,121	0	32,796	337,466	5,561	20,732	0	311,173	0
Other/unknown	58,169	17	1,828	43,457	12,867	510,329	22	17,430	359,517	133,360	0
Managed Care (MC) Status											
Fee-for-service (FFS) all year	18,793	1,523	10,918	3,965	2,387	146,654	14,398	118,048	7,778	6,430	0
FFS part year, with Rx claims	5,003	29	1,334	2,575	1,065	47,798	312	14,788	22,287	10,411	0
FFS part year, no Rx claims	60,320	19	826	28,070	31,405	535,581	164	8,187	236,031	291,199	0
MC all year, with Rx claims	351	0	264	48	39	3,930	0	3,069	438	423	0
MC all year, no Rx claims	103,447	0	1,296	37,796	64,355	1,056,431	0	12,600	367,270	676,561	0

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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, HAWAII, 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
All	187,914	84,116	0
Fee-for-service (FFS) all year	18,793	18,793	0
FFS part year, with Rx claims	5,003	5,003	0
FFS part year, with no Rx claims	60,320	60,320	0
Managed care (MC) all year, with Rx claims	351	0	0
MC all year, with no Rx claims	103,447	0	0
	1,790,394	270,212	1,520,182
	146,654	146,529	125
	47,798	16,505	31,293
	535,581	107,178	428,403
	3,930	0	3,930
	1,056,431	0	1,056,431

Source: Data for this table are from the MAX 2003 file for Hawaii, released by CMS in 05/2007. 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.