

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

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TABLE ND.2  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 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	
<b>All</b>	<b>604,843</b>	<b>1,642</b>	<b>95,092</b>	<b>101,354</b>	<b>406,755</b>	<b>0</b>	<b>5,581,035</b>	<b>13,591</b>	<b>956,760</b>	<b>784,261</b>	<b>3,826,423</b>	<b>0</b>	<b>5,581,035</b>	<b>13,591</b>	<b>956,760</b>	<b>784,261</b>	<b>3,826,423</b>	<b>0</b>	
<b>Age</b>																			
5 and younger	184,522	0	6,320	0	178,202	0	1,629,657	0	58,425	0	1,571,232	0	1,629,657	0	58,425	0	1,571,232	0	
6-14	181,387	0	15,528	56	165,803	0	1,824,927	0	162,310	247	1,662,370	0	1,824,927	0	162,310	247	1,662,370	0	
15-20	87,405	0	10,437	14,271	62,697	0	811,920	0	111,503	108,001	592,416	0	811,920	0	111,503	108,001	592,416	0	
21-44	111,491	26	28,539	82,874	52	0	931,039	209	289,320	641,114	396	0	931,039	209	289,320	641,114	396	0	
45-64	38,250	87	34,012	4,150	1	0	368,521	709	332,931	34,872	9	0	368,521	709	332,931	34,872	9	0	
65-74	814	600	211	3	0	0	7,148	5,224	1,897	27	0	0	7,148	5,224	1,897	27	0	0	
75-84	569	537	32	0	0	0	4,875	4,615	260	0	0	0	4,875	4,615	260	0	0	0	
85 and older	405	392	13	0	0	0	2,948	2,834	114	0	0	0	2,948	2,834	114	0	0	0	
Unknown	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
<b>Gender</b>																			
Female	344,861	1,031	49,589	96,573	197,668	0	3,171,353	8,443	507,208	749,843	1,905,859	0	3,171,353	8,443	507,208	749,843	1,905,859	0	
Male	248,487	599	45,497	4,779	197,612	0	2,380,289	5,044	449,518	34,414	1,891,313	0	2,380,289	5,044	449,518	34,414	1,891,313	0	
Unknown	11,495	12	6	2	11,475	0	29,393	104	34	4	29,251	0	29,393	104	34	4	29,251	0	
<b>Race</b>																			
White	189,814	753	24,312	34,808	129,941	0	1,672,601	5,860	249,520	245,679	1,171,542	0	1,672,601	5,860	249,520	245,679	1,171,542	0	
African American	362,793	720	45,344	61,600	255,129	0	3,553,146	6,362	490,276	513,807	2,542,701	0	3,553,146	6,362	490,276	513,807	2,542,701	0	
Other/unknown	52,236	169	25,436	4,946	21,685	0	355,288	1,369	216,964	24,775	112,180	0	355,288	1,369	216,964	24,775	112,180	0	
<b>Use of Nursing Facilities<sup>c</sup></b>																			
Entire year	773	164	609	0	0	0	7,960	1,585	6,375	0	0	0	7,960	1,585	6,375	0	0	0	
Part year	492	69	420	2	1	0	5,013	698	4,284	19	12	0	5,013	698	4,284	19	12	0	
None	603,578	1,409	94,063	101,352	406,754	0	5,568,062	11,308	946,101	784,242	3,826,411	0	5,568,062	11,308	946,101	784,242	3,826,411	0	
<b>Maintenance Assistance Status</b>																			
Cash	270,700	486	86,249	65,503	118,462	0	2,677,061	4,973	877,281	583,777	1,211,030	0	2,677,061	4,973	877,281	583,777	1,211,030	0	
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	320,301	745	6,595	28,284	284,677	0	2,800,042	5,639	57,363	160,622	2,576,398	0	2,800,042	5,639	57,363	160,622	2,576,398	0	
Other/unknown	13,842	411	2,248	7,567	3,616	0	103,932	2,979	22,096	39,862	38,995	0	103,932	2,979	22,096	39,862	38,995	0	
<b>Managed Care (MC) Status</b>																			
Fee-for-service (FFS) all year	604,843	1,642	95,092	101,354	406,755	0	5,581,035	13,591	956,760	784,261	3,826,423	0	5,581,035	13,591	956,760	784,261	3,826,423	0	
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2003 file for Mississippi, 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<sup>a, b</sup>  
NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ <sup>c</sup>	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>d</sup>	Number of Beneficiaries
All	69.0 %	7.4	\$398	\$54	\$2,439	16.3 %	604,843
<b>Age</b>							
5 and younger	69.1	5.4	223	41	1,744	12.8	184,522
6-14	64.4	4.6	257	56	1,274	20.1	181,387
15-20	66.0	5.3	271	51	2,050	13.2	87,405
21-44	74.7	9.7	553	57	3,840	14.4	111,491
45-64	80.4	27.3	1,702	62	7,844	21.7	38,250
65-74	68.1	24.4	1,444	59	8,449	17.1	814
75-84	63.8	25.4	1,331	53	7,670	17.3	569
85 and older	55.3	23.0	1,241	54	8,912	13.9	405
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>e</sup></b>							
Aged	62.7	23.7	1,344	57	8,044	16.7	1,642
Disabled	77.1	19.2	1,400	73	7,371	19.0	95,092
Adults	74.1	7.1	273	38	2,646	10.3	101,354
Children	65.8	4.6	191	41	1,211	15.7	406,755
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Gender</b>							
Female	72.7	8.2	412	50	2,573	16.0	344,861
Male	67.0	6.5	396	61	2,346	16.9	248,487
Unknown	2.1	0.1	6	72	416	1.4	11,495
<b>Race</b>							
White	75.5	9.2	523	57	2,764	18.9	189,814
African American	68.8	6.4	314	49	2,162	14.5	362,793
Other/unknown	47.0	7.5	522	70	3,182	16.4	52,236
<b>Use of Nursing Facilities<sup>f</sup></b>							
Entire year	97.8	72.2	4,514	63	48,277	9.3	773
Part year	98.2	53.1	3,589	68	42,681	8.4	492
None	68.9	7.3	390	54	2,347	16.6	603,578
<b>Maintenance Assistance Status</b>							
Cash	74.0	10.3	602	59	3,408	17.7	270,700
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	65.5	4.9	216	44	1,493	14.5	320,301
Other/unknown	51.7	8.5	611	72	5,364	11.4	13,842

Table ND3

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Mississippi, 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<sup>a,b</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

Beneficiary Characteristics	Number of Rx. Percentage with:										Beneficiaries	Number
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS <sup>c</sup>	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 <sup>d</sup>		
All	0.8	\$43	16.3 %	31.0 %	54.0 %	7.7 %	6.2 %	1.0 %	0.0 %	\$264	604,843	5,581,035
<b>Age</b>												
5 and younger	0.6	25	12.8	30.9	59.2	7.5	2.4	0.1	0.0	198	184,522	1,629,657
6-14	0.5	26	20.1	35.6	57.3	4.6	2.3	0.2	0.0	127	181,387	1,824,927
15-20	0.6	29	13.2	34.0	56.5	6.3	2.9	0.3	0.0	221	87,405	811,920
21-44	1.2	66	14.4	25.3	50.5	12.1	11.0	1.0	0.0	460	111,491	931,039
45-64	2.8	177	21.7	19.6	20.2	13.8	36.1	10.0	0.3	814	38,250	368,521
65-74	2.8	164	17.1	31.9	14.7	12.0	31.1	9.5	0.7	962	814	7,148
75-84	3.0	155	17.3	36.2	11.6	10.9	27.6	12.0	1.8	895	569	4,875
85 and older	3.2	170	13.9	44.7	8.4	7.4	26.2	11.9	1.5	1,224	405	2,948
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	2.9	162	16.7	37.3	12.4	11.0	28.3	9.8	1.3	972	1,642	13,591
Disabled	1.9	139	19.0	22.9	34.8	13.1	23.6	5.5	0.2	733	95,092	956,760
Adults	0.9	35	10.3	25.9	55.5	11.3	7.1	0.3	0.0	342	101,354	784,261
Children	0.5	20	15.7	34.2	58.3	5.6	1.9	0.1	0.0	129	406,755	3,826,423
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>												
Female	0.9	45	16.0	27.3	55.6	8.5	7.3	1.2	0.0	280	344,861	3,171,353
Male	0.7	41	16.9	33.0	54.2	7.0	5.0	0.7	0.0	245	248,487	2,380,289
Unknown	0.0	2	1.4	97.9	1.8	0.2	0.1	0.0	0.0	163	11,495	29,393
<b>Race</b>												
White	1.0	59	18.9	24.5	55.0	10.0	8.8	1.5	0.1	314	189,814	1,672,601
African American	0.7	32	14.5	31.2	56.9	6.6	4.6	0.6	0.0	221	362,793	3,553,146
Other/unknown	1.1	77	16.4	53.0	29.8	7.0	8.4	1.8	0.0	468	52,236	355,288
<b>Use of Nursing Facilities<sup>f</sup></b>												
Entire year	7.0	438	9.3	2.2	4.8	5.4	29.8	40.6	17.2	4,688	773	7,960
Part year	5.2	352	8.4	1.8	11.2	10.0	36.4	33.9	6.7	4,189	492	5,013
None	0.8	42	16.6	31.1	54.1	7.7	6.2	0.9	0.0	254	603,578	5,568,062
<b>Maintenance Assistance Status</b>												
Cash	1.0	61	17.7	26.0	52.5	9.4	10.2	1.8	0.1	345	270,700	2,677,061
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.6	25	14.5	34.5	56.1	6.4	2.9	0.2	0.0	171	320,301	2,800,042
Other/unknown	1.1	81	11.4	48.3	36.8	5.7	6.3	2.4	0.5	715	13,842	103,932

Source: Data for this table are from the MAX 2003 file for Mississippi, 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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

Beneficiary	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	Number of Rx	Rx \$	Number of Rx	Rx \$	Number of Rx	Rx \$	Number of Rx	Rx \$
<b>Beneficiary Characteristics</b>								
<b>All</b>	<b>0.8</b>	<b>\$43</b>	<b>0.4</b>	<b>\$33</b>	<b>0.0</b>	<b>\$1</b>	<b>0.4</b>	<b>\$22</b>
<b>Age</b>								
5 and younger	0.6	25	0.3	20	0.0	1	0.3	4
6-14	0.5	26	0.2	20	0.0	1	0.2	5
15-20	0.6	29	0.3	22	0.0	1	0.3	6
21-44	1.2	66	0.5	51	0.0	1	0.7	14
45-64	2.8	177	1.3	135	0.1	2	1.4	39
65-74	2.8	164	1.3	127	0.1	2	1.4	35
75-84	3.0	155	1.3	113	0.1	2	1.6	41
85 and older	3.2	170	1.4	125	0.1	2	1.7	43
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Basis of Eligibility<sup>d</sup></b>								
Aged	2.9	162	1.3	123	0.1	2	1.5	37
Disabled	1.9	139	0.9	110	0.0	2	1.0	26
Adults	0.9	35	0.4	25	0.0	1	0.5	10
Children	0.5	20	0.2	16	0.0	1	0.2	4
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Gender</b>								
Female	0.9	45	0.4	34	0.0	1	0.5	10
Male	0.7	41	0.3	33	0.0	1	0.3	8
Unknown	0.0	2	0.0	2	0.0	0	0.0	0
<b>Race</b>								
White	1.0	59	0.5	46	0.0	1	0.5	12
African American	0.7	32	0.3	24	0.0	1	0.3	7
Other/unknown	1.1	77	0.6	62	0.0	2	0.5	13
<b>Use of Nursing Facilities<sup>e</sup></b>								
Entire year	7.0	438	3.0	326	0.2	7	3.8	105
Part year	5.2	352	2.3	269	0.1	6	2.8	77
None	0.8	42	0.4	33	0.0	1	0.4	9
<b>Maintenance Assistance Status</b>								
Cash	1.0	61	0.5	47	0.0	1	0.5	13
Medically needy	0.0	0	0.0	0	0.0	0	0.0	0
Poverty related	0.6	25	0.3	19	0.0	1	0.3	5
Other/unknown	1.1	81	0.6	66	0.0	2	0.5	13

Source: Data for this table are from the MAX 2003 file for Mississippi, 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 Mississippi, 0.7 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				Users <sup>e</sup>								
	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	Total Number of Rx	Total Rx \$	Number of Users	Percentage of All Beneficiaries	As a Percentage of All Beneficiaries	Number of Benefit Months			
															Brand-Name	Brand-Name	Brand-Name
Anti-infective Agents	0.3	0.1	0.0	0.1	\$12	\$9	\$0	\$2	\$48	\$69	\$67	\$22	825,846	\$39,403,295	312,292	51.6 %	3,270,806
Biologicals	0.4	0.4	0.0	0.0	394	375	5	14	1065	1,046	1,917	1,588	7,120	7,584,170	2,100	0.3	19,238
Antineoplastic Agents	0.4	0.2	0.0	0.2	126	105	2	20	297	519	147	92	7,690	2,281,693	1,736	0.3	18,059
Endocrine/Metabolic Drugs	0.3	0.2	0.0	0.1	15	12	1	3	46	62	29	23	353,176	16,353,186	103,148	17.1	1,079,502
Cardiovascular Agents	0.9	0.4	0.0	0.5	37	27	0	10	41	62	23	21	447,751	18,167,927	46,232	7.6	491,203
Respiratory Agents	0.3	0.2	0.0	0.1	14	11	1	2	43	60	25	19	816,955	34,968,616	240,742	39.8	2,548,539
Gastrointestinal Agents	0.3	0.1	0.0	0.2	18	11	0	7	67	126	215	37	159,970	10,652,099	55,338	9.1	586,953
Genitourinary Agents	0.2	0.1	0.0	0.0	8	7	0	1	44	51	28	18	54,484	2,376,405	29,582	4.9	299,613
CNS Drugs	0.6	0.3	0.0	0.3	57	50	0	7	97	152	115	26	432,614	42,035,086	69,209	11.4	736,484
Stimulants/Anti-obesity/Anorexia	0.5	0.4	0.0	0.1	43	37	0	5	84	92	64	53	91,388	7,686,589	16,828	2.8	179,706
Miscellaneous Psychological/Neurological Agents	0.4	0.1	0.0	0.2	36	27	0	10	99	206	49	40	7,774	766,064	1,910	0.3	21,198
Analgesics and Anesthetics	0.3	0.0	0.0	0.2	8	4	0	4	29	124	45	15	494,129	14,396,918	169,702	28.1	1,789,714
Neuromuscular Agents	0.5	0.2	0.0	0.2	38	31	1	6	77	137	38	26	226,438	17,458,694	42,163	7.0	455,148
Nutritional Products	0.2	0.0	0.0	0.2	4	1	0	3	18	21	17	18	85,324	1,571,903	35,819	5.9	353,873
Hematological Agents	0.3	0.2	0.0	0.2	53	43	1	9	160	264	32	61	58,197	9,296,155	17,168	2.8	175,594
Topical Products	0.2	0.1	0.0	0.1	7	5	0	2	37	58	47	20	345,683	12,772,804	160,677	26.6	1,714,071
Miscellaneous Products	0.2	0.1	0.0	0.1	36	29	4	4	161	265	335	33	10,417	1,674,891	4,362	0.7	45,962
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	3	0	0	0	26	0	0	0	41,378	1,063,549	30,590	5.1	330,276
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	4,466,334	240,510,044	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Mississippi, 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 Mississippi, 0.7 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2003.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

Top 10 Drug Groups	Users			Among Users		
	Total Medicaid Rx \$	Number of Users	Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$26,051,132	24,457	4.0 %	271,236	0.5	\$208
ANTIASTHMATIC	19,371,845	115,036	19.0	1,245,039	0.2	73
ANTICONVULSANT	14,767,144	24,533	4.1	268,674	0.5	100
ANTIDEPRESSANTS	13,318,598	51,797	8.6	550,620	0.4	68
CEPHALOSPORINS	8,976,362	144,086	23.8	1,562,845	0.1	47
ANTIIDIABETIC	8,793,930	21,484	3.6	235,351	0.5	73
DERMATOLOGICAL	8,571,041	152,923	25.3	1,657,966	0.1	39
ANTIVIRAL	7,783,597	26,585	4.4	288,216	0.1	198
ULCER DRUGS	7,762,929	49,466	8.2	530,309	0.2	67
ANTIHISTAMINES	7,703,828	158,105	26.1	1,716,527	0.1	31
Total	123,100,406	768,472		8,326,783	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Mississippi, 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-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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

Beneficiary Characteristics	All Top 10 Drug Groups					ANTI-PSYCHOTICS					ANTI-ASTHMATIC						
	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 Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>1,667,010</b>	<b>\$123,100,406</b>	<b>24,457</b>	<b>4.0 %</b>	<b>271,236</b>	<b>0.5</b>	<b>\$96</b>	<b>115,036</b>	<b>19.0 %</b>	<b>1,245,039</b>	<b>0.2</b>	<b>\$16</b>					
<b>Female</b>	986,192	71,256,106	13,020	3.8	144,410	0.4	91	57,958	16.8	628,605	0.2	15					
<b>Disabled</b>	441,882	41,910,024	9,451	19.1	107,408	0.5	104	14,766	29.8	168,725	0.3	21					
5 and younger	11,923	799,454	16	0.6	171	0.5	64	1,514	57.0	16,869	0.2	22					
6-14	27,676	2,364,242	612	11.9	6,701	0.5	74	1,631	31.8	18,967	0.3	21					
15-20	23,087	2,260,198	691	18.1	7,835	0.5	89	735	19.3	8,559	0.3	18					
21-44	132,948	14,251,934	3,944	24.1	44,605	0.4	101	3,700	22.6	42,435	0.3	16					
45-64	244,822	22,129,879	4,162	19.4	47,869	0.5	115	7,155	33.3	81,575	0.3	23					
65-74	1,161	80,163	16	12.8	128	0.7	88	30	24.0	313	0.4	27					
75-84	234	23,067	10	35.7	99	0.8	142	1	3.6	7	0.7	29					
85 and older	31	1,087	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
<b>Other Eligibles</b>	544,310	29,346,082	3,569	1.2	37,002	0.3	51	43,192	14.6	459,880	0.2	13					
5 and younger	186,141	7,832,033	54	0.1	602	0.3	42	19,413	23.6	206,698	0.2	13					
6-14	136,375	7,530,295	859	1.0	9,481	0.3	52	12,196	14.6	134,910	0.2	14					
15-20	66,553	3,669,980	682	1.5	7,318	0.3	45	4,129	9.0	44,072	0.2	11					
21-44	134,046	8,733,102	1,736	2.2	17,083	0.2	48	6,675	8.4	66,082	0.2	11					
45-64	14,702	1,080,211	120	3.5	1,214	0.3	60	615	17.7	6,305	0.2	14					
65-74	2,774	243,413	48	13.5	550	0.6	136	86	24.2	984	0.3	25					
75-84	2,281	143,565	43	13.4	463	0.5	54	50	15.5	534	0.4	29					
85 and older	1,438	113,483	27	10.8	291	0.8	147	28	11.2	295	0.3	15					
<b>Male</b>	680,513	51,832,182	11,434	4.6	126,801	0.5	102	57,049	23.0	616,297	0.2	16					
<b>Disabled</b>	273,982	29,812,489	8,515	18.7	95,844	0.5	115	10,926	24.0	122,409	0.3	24					
5 and younger	18,351	1,379,635	87	2.4	904	0.4	56	2,417	66.0	26,983	0.3	29					
6-14	56,183	5,232,876	1,990	19.1	22,371	0.5	84	3,339	32.1	38,211	0.3	22					
15-20	32,982	3,564,516	1,299	19.6	14,671	0.5	108	1,170	17.7	13,461	0.3	20					
21-44	76,933	10,454,403	3,236	26.6	36,475	0.5	133	1,294	10.1	13,838	0.3	18					
45-64	88,866	9,119,448	1,876	15.0	21,143	0.6	126	2,738	21.9	29,623	0.4	27					
65-74	592	56,669	24	27.9	258	0.4	92	25	29.1	270	0.4	22					
75-84	6	349	0	0.0	0	0.0	0	1	25.0	6	0.7	38					
85 and older	69	4,593	3	50.0	22	0.7	92	2	33.3	17	0.1	2					
<b>Other Eligibles</b>	406,531	22,019,693	2,919	1.4	30,957	0.4	62	46,123	22.7	493,888	0.2	15					
5 and younger	210,712	9,725,634	135	0.2	1,484	0.3	44	26,923	31.8	284,678	0.2	14					
6-14	146,409	8,840,457	1,859	2.3	19,963	0.4	59	15,798	19.2	172,977	0.2	15					
15-20	36,010	2,302,527	681	2.2	7,271	0.4	64	2,916	9.4	31,564	0.2	13					
21-44	6,905	576,760	159	4.3	1,334	0.3	71	296	8.0	2,713	0.2	14					
45-64	2,458	242,735	23	3.0	223	0.3	69	93	12.0	891	0.3	22					
65-74	1,563	145,047	24	9.9	255	0.7	160	45	18.6	485	0.3	21					
75-84	1,369	115,576	19	9.1	213	0.7	163	32	15.3	379	0.4	25					
85 and older	1,105	70,957	19	13.4	214	0.6	77	20	14.1	201	0.4	29					
<b>Unknown</b>	305	12,118	3	0.0	25	0.4	56	29	0.3	137	0.4	23					

Source: Data for this table are from the MAX 2003 file for Mississippi, 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.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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

Beneficiary Characteristics	ANTICONVULSANT					ANTIDEPRESSANTS					CEPHALOSPORINS				
	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	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	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
<b>All</b>	<b>24,533</b>	<b>4.1 %</b>	<b>268,674</b>	<b>0.5</b>	<b>\$55</b>	<b>51,797</b>	<b>8.6 %</b>	<b>550,620</b>	<b>0.4</b>	<b>\$24</b>	<b>144,086</b>	<b>23.8 %</b>	<b>1,562,845</b>	<b>0.1</b>	<b>\$6</b>
<b>Female</b>	15,087	4.4	164,709	0.5	51	38,458	11.2	406,426	0.3	24	81,220	23.6	876,227	0.1	6
<b>Disabled</b>	10,332	20.8	116,678	0.6	59	18,948	38.2	213,185	0.4	29	11,258	22.7	130,054	0.1	5
5 and younger	227	8.5	2,517	0.6	58	16	0.6	180	0.3	13	1,160	43.7	13,058	0.1	7
6-14	745	14.5	8,477	0.7	72	671	13.1	7,418	0.4	24	1,448	28.3	16,779	0.1	8
15-20	687	18.0	7,809	0.7	89	960	25.2	10,919	0.4	27	894	23.4	10,481	0.1	5
21-44	4,019	24.6	45,201	0.6	63	7,376	45.1	82,701	0.4	27	3,627	22.2	42,061	0.1	4
45-64	4,635	21.6	52,490	0.5	50	9,885	46.0	111,576	0.5	31	4,108	19.1	47,445	0.1	5
65-74	14	11.2	129	0.5	44	36	28.8	347	0.6	31	17	13.6	182	0.1	5
75-84	4	14.3	43	0.7	37	3	10.7	32	0.6	66	3	10.7	36	0.1	15
85 and older	1	14.3	12	0.8	11	1	14.3	12	0.4	26	1	14.3	12	0.1	1
<b>Other Eligibles</b>	4,755	1.6	48,031	0.4	32	19,510	6.6	193,241	0.3	19	69,962	23.7	746,173	0.1	6
5 and younger	233	0.3	2,515	0.4	26	120	0.1	1,349	0.2	10	30,053	36.6	324,578	0.1	6
6-14	688	0.8	7,519	0.4	33	2,213	2.6	24,241	0.3	18	18,113	21.7	200,901	0.1	6
15-20	649	1.4	6,702	0.4	43	3,462	7.5	35,499	0.3	17	8,308	18.1	87,620	0.1	5
21-44	2,815	3.6	27,573	0.3	29	12,455	15.7	119,509	0.3	19	12,867	16.2	126,563	0.1	4
45-64	293	8.5	2,886	0.4	29	1,091	31.5	10,824	0.3	22	505	14.6	5,239	0.1	5
65-74	42	11.8	469	0.6	52	74	20.8	842	0.5	26	44	12.4	515	0.2	5
75-84	20	6.2	218	0.7	46	66	20.5	654	0.6	36	44	13.7	481	0.1	6
85 and older	15	6.0	149	0.6	38	29	11.6	323	0.7	41	28	11.2	276	0.1	8
<b>Male</b>	9,444	3.8	103,941	0.6	61	13,335	5.4	144,157	0.4	25	62,849	25.3	686,546	0.1	6
<b>Disabled</b>	7,273	16.0	81,213	0.7	68	7,820	17.2	86,114	0.4	28	8,441	18.6	96,812	0.1	6
5 and younger	262	7.2	2,858	0.6	59	46	1.3	471	0.3	17	1,586	43.3	17,979	0.1	7
6-14	1,417	13.6	16,164	0.7	71	1,596	15.3	17,767	0.4	25	2,608	25.1	30,302	0.1	7
15-20	910	13.7	10,298	0.7	80	1,104	16.7	12,422	0.4	30	1,105	16.7	12,846	0.1	6
21-44	2,573	21.1	28,624	0.7	77	2,469	20.3	27,095	0.4	29	1,627	13.4	18,626	0.1	5
45-64	2,098	16.7	23,133	0.6	50	2,589	20.7	28,202	0.4	28	1,502	12.0	16,922	0.1	5
65-74	11	12.8	112	0.6	60	13	15.1	134	0.5	25	12	14.0	132	0.1	4
75-84	0	0.0	0	0.0	0	1	25.0	6	0.3	20	0	0.0	0	0.0	0
85 and older	2	33.3	24	0.5	39	2	33.3	17	0.7	37	1	16.7	5	0.2	3
<b>Other Eligibles</b>	2,171	1.1	22,728	0.4	36	5,515	2.7	58,043	0.3	20	54,408	26.8	589,734	0.1	6
5 and younger	335	0.4	3,560	0.4	25	162	0.2	1,727	0.2	11	32,894	38.9	353,383	0.1	6
6-14	979	1.2	10,534	0.4	39	3,059	3.7	33,396	0.3	20	16,994	20.6	188,068	0.1	6
15-20	428	1.4	4,509	0.4	34	1,332	4.3	13,946	0.3	20	3,911	12.6	42,489	0.1	4
21-44	303	8.2	2,794	0.4	37	683	18.4	6,202	0.3	22	451	12.1	4,163	0.1	4
45-64	70	9.1	672	0.3	36	181	23.4	1,651	0.4	24	76	9.8	714	0.1	4
65-74	23	9.5	267	0.6	45	39	16.1	436	0.5	38	33	13.6	353	0.1	5
75-84	18	8.6	216	0.7	41	28	13.4	330	0.5	34	22	10.5	259	0.1	5
85 and older	15	10.6	176	0.5	32	31	21.8	355	0.6	29	27	19.0	295	0.1	6
<b>Unknown</b>	2	0.0	24	0.2	12	4	0.0	37	0.3	16	17	0.1	72	0.2	7

Source: Data for this table are from the MAX 2003 file for Mississippi, 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(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<sup>a,b,c</sup>  
NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

Beneficiary Characteristics	ANTIDIABETIC					DERMATOLOGICAL					ANTIVIRAL				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean of Rx Benefit per Month	Mean of Rx Benefit per Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean of Rx Benefit per Month	Mean of Rx Benefit per Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean of Rx Benefit per Month	Mean of Rx Benefit per Month
<b>All</b>	<b>21,484</b>	<b>3.6 %</b>	<b>235,351</b>	<b>0.5</b>	<b>\$37</b>	<b>152,923</b>	<b>25.3 %</b>	<b>1,657,966</b>	<b>0.1</b>	<b>\$5</b>	<b>26,585</b>	<b>4.4 %</b>	<b>288,216</b>	<b>0.1</b>	<b>\$27</b>
<b>Female</b>	16,657	4.8	183,570	0.5	37	88,592	25.7	958,741	0.1	5	14,953	4.3	161,289	0.1	28
<b>Disabled</b>	12,355	24.9	140,857	0.5	40	12,550	25.3	145,564	0.1	6	2,518	5.1	28,892	0.2	83
5 and younger	3	0.1	36	0.9	158	1,192	44.9	13,303	0.1	5	169	6.4	1,909	0.1	5
6-14	60	1.2	660	0.6	42	1,736	33.9	20,224	0.1	6	313	6.1	3,693	0.2	37
15-20	112	2.9	1,284	0.5	46	1,224	32.1	14,459	0.1	6	196	5.1	2,268	0.1	12
21-44	2,563	15.7	29,578	0.4	34	3,738	22.9	43,652	0.1	6	1,088	6.7	12,359	0.3	117
45-64	9,549	44.5	108,581	0.5	41	4,617	21.5	53,451	0.1	6	748	3.5	8,615	0.2	92
65-74	63	50.4	661	0.6	38	40	32.0	443	0.2	7	3	2.4	36	0.2	70
75-84	5	17.9	57	0.6	31	3	10.7	32	0.1	7	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	14.3	12	0.1	11
<b>Other Eligibles</b>	4,302	1.5	42,713	0.4	28	76,042	25.8	813,177	0.1	5	12,435	4.2	132,397	0.1	16
5 and younger	27	0.0	246	0.4	19	36,074	43.9	383,366	0.1	4	3,736	4.6	40,773	0.1	5
6-14	239	0.3	2,603	0.6	39	19,744	23.6	220,789	0.1	6	4,024	4.8	43,823	0.1	8
15-20	374	0.8	3,841	0.5	30	8,910	19.4	95,852	0.1	6	1,922	4.2	20,754	0.1	10
21-44	2,685	3.4	26,124	0.4	25	10,577	13.3	105,480	0.1	6	2,642	3.3	25,983	0.2	46
45-64	738	21.3	7,302	0.5	32	546	15.8	5,606	0.2	6	97	2.8	899	0.2	134
65-74	124	34.8	1,397	0.6	40	60	16.9	677	0.2	7	4	1.1	48	0.1	5
75-84	75	23.3	813	0.6	32	74	23.0	789	0.2	9	5	1.6	60	0.1	5
85 and older	40	16.1	387	0.7	36	57	22.9	618	0.2	12	5	2.0	57	0.1	4
<b>Male</b>	4,826	1.9	51,769	0.5	38	64,246	25.9	698,973	0.1	5	11,629	4.7	126,909	0.1	26
<b>Disabled</b>	4,075	9.0	44,207	0.5	39	9,097	20.0	103,996	0.1	6	2,287	5.0	25,568	0.3	105
5 and younger	5	0.1	60	0.5	31	1,529	41.7	17,047	0.1	5	201	5.5	2,268	0.1	11
6-14	41	0.4	468	0.7	50	2,657	25.5	30,776	0.1	5	569	5.5	6,583	0.1	22
15-20	94	1.4	1,033	0.5	45	1,496	22.6	17,282	0.2	7	275	4.2	3,198	0.1	16
21-44	883	7.2	9,679	0.5	34	1,775	14.6	20,344	0.2	7	734	6.0	8,033	0.4	155
45-64	3,028	24.2	32,706	0.5	39	1,624	13.0	18,388	0.2	8	507	4.0	5,474	0.4	221
65-74	22	25.6	237	0.5	42	14	16.3	142	0.1	3	1	1.2	12	0.1	2
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	2	33.3	24	0.6	25	2	33.3	17	0.2	4	0	0.0	0	0.0	0
<b>Other Eligibles</b>	751	0.4	7,562	0.5	38	55,149	27.2	594,977	0.1	5	9,342	4.6	101,341	0.1	6
5 and younger	28	0.0	271	0.6	28	34,568	40.8	365,549	0.1	5	4,107	4.9	44,515	0.1	4
6-14	163	0.2	1,720	0.5	34	15,916	19.3	178,614	0.1	5	4,026	4.9	43,995	0.1	6
15-20	133	0.4	1,328	0.6	54	4,187	13.5	46,113	0.1	7	1,100	3.6	11,845	0.1	8
21-44	176	4.7	1,624	0.5	34	282	7.6	2,613	0.1	6	86	2.3	753	0.2	55
45-64	129	16.7	1,218	0.5	34	82	10.6	767	0.1	7	19	2.5	188	0.4	299
65-74	54	22.3	628	0.6	39	37	15.3	427	0.2	8	2	0.8	24	1.2	622
75-84	50	23.9	569	0.6	39	37	17.7	431	0.2	6	1	0.5	9	0.1	7
85 and older	18	12.7	204	0.8	34	40	28.2	463	0.3	21	1	0.7	12	0.2	8
<b>Unknown</b>	1	0.0	12	0.9	64	85	0.7	252	0.3	10	3	0.0	18	0.2	8

Table ND7C

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Mississippi, 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.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.7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

Beneficiary Characteristics	ULCER DRUGS					ANTIHIISTAMINES						
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean of Rx Benefit per Month	Mean of Rx Benefit per \$ per Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean of Rx Benefit per Month	Mean of Rx Benefit per \$ per Month	Number of Beneficiaries	Number of Benefit Months
<b>All</b>	<b>49,466</b>	<b>8.2 %</b>	<b>530,309</b>	<b>0.2</b>	<b>\$15</b>	<b>158,105</b>	<b>26.1 %</b>	<b>1,716,527</b>	<b>0.1</b>	<b>\$5</b>	<b>604,843</b>	<b>5,581,035</b>
<b>Female</b>	33,313	9.7	358,866	0.2	15	88,384	25.6	954,976	0.1	4	344,861	3,171,353
<b>Disabled</b>	13,539	27.3	155,743	0.3	23	12,044	24.3	138,923	0.2	6	49,589	507,208
5 and younger	257	9.7	2,681	0.3	17	1,107	41.7	12,576	0.1	4	2,656	24,601
6-14	464	9.1	5,369	0.3	20	1,803	35.2	20,986	0.2	7	5,124	54,143
15-20	483	12.7	5,588	0.2	18	1,049	27.5	12,253	0.2	7	3,813	41,133
21-44	4,108	25.1	47,241	0.2	18	3,575	21.9	41,188	0.2	5	16,356	167,976
45-64	8,183	38.1	94,371	0.3	27	4,482	20.9	51,622	0.2	8	21,480	217,931
65-74	32	25.6	372	0.4	29	26	20.8	278	0.1	6	125	1,129
75-84	10	35.7	97	0.6	25	2	7.1	20	0.2	6	28	227
85 and older	2	28.6	24	0.6	21	0	0.0	0	0.0	0	7	68
<b>Other Eligibles</b>	19,774	6.7	203,123	0.2	9	76,340	25.9	816,053	0.1	4	295,272	2,664,145
5 and younger	4,500	5.5	43,409	0.2	5	32,581	39.7	351,406	0.1	3	82,093	761,122
6-14	3,666	4.4	40,720	0.1	6	22,229	26.6	246,934	0.1	5	83,524	840,111
15-20	3,065	6.7	32,655	0.1	7	9,030	19.6	95,195	0.1	5	46,025	410,177
21-44	7,489	9.5	75,346	0.2	11	11,861	15.0	115,886	0.1	4	79,238	615,368
45-64	831	24.0	8,524	0.2	18	529	15.3	5,432	0.2	5	3,465	29,741
65-74	90	25.3	1,015	0.3	31	41	11.5	469	0.2	6	356	3,226
75-84	83	25.8	917	0.5	33	38	11.8	400	0.2	7	322	2,726
85 and older	50	20.1	537	0.5	40	31	12.4	331	0.2	7	249	1,674
<b>Male</b>	16,112	6.5	171,323	0.2	14	69,681	28.0	761,413	0.1	5	248,487	2,380,289
<b>Disabled</b>	6,111	13.4	68,445	0.3	24	8,687	19.1	99,072	0.2	7	45,497	449,518
5 and younger	391	10.7	4,242	0.3	15	1,628	44.4	18,212	0.1	4	3,664	33,824
6-14	640	6.2	7,422	0.2	16	3,358	32.3	38,714	0.2	7	10,404	108,167
15-20	459	6.9	5,312	0.2	19	1,212	18.3	14,108	0.2	8	6,624	70,370
21-44	1,639	13.5	18,571	0.3	25	1,230	10.1	14,075	0.2	7	12,181	121,329
45-64	2,963	23.7	32,701	0.4	27	1,247	10.0	13,840	0.2	7	12,528	114,981
65-74	17	19.8	180	0.3	30	9	10.5	87	0.3	9	86	768
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	33
85 and older	2	33.3	17	0.1	9	3	50.0	36	0.2	4	6	46
<b>Other Eligibles</b>	10,001	4.9	102,878	0.2	7	60,994	30.0	662,341	0.1	4	202,990	1,930,771
5 and younger	5,028	5.9	48,964	0.2	6	34,816	41.1	374,046	0.1	3	84,642	780,917
6-14	3,070	3.7	33,936	0.1	7	21,941	26.7	242,771	0.1	6	82,330	822,475
15-20	1,244	4.0	13,494	0.1	7	3,851	12.4	41,881	0.1	6	30,940	290,213
21-44	395	10.6	3,748	0.2	18	258	7.0	2,356	0.2	5	3,712	26,347
45-64	136	17.6	1,289	0.3	28	53	6.9	472	0.1	5	773	5,849
65-74	51	21.1	579	0.5	33	32	13.2	361	0.2	5	242	1,991
75-84	46	22.0	545	0.4	43	24	11.5	252	0.2	6	209	1,820
85 and older	31	21.8	323	0.6	35	19	13.4	202	0.4	16	142	1,159
<b>Unknown</b>	41	0.4	120	0.5	16	40	0.3	138	0.4	7	11,495	29,393

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Mississippi, 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<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
<b>All</b>	<b>\$438</b>	<b>7.0</b>	<b>773</b>	<b>7,960</b>
<b>Age</b>				
0-64	462	7.3	591	6,219
65-74	408	6.3	46	442
75-84	354	6.2	62	617
85 and older	315	5.4	74	682
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	462	7.2	421	4,442
Male	408	6.8	350	3,505
Unknown	510	11.2	2	13
<b>Race</b>				
White	486	7.8	340	3,453
African American	395	6.3	369	3,855
Other/unknown	447	6.8	64	652
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	359	6.0	164	1,585
Disabled	458	7.3	609	6,375
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2003 file for Mississippi, 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 492 beneficiaries who were in nursing facilities for part of their enrollment and their 5,013 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

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

TABLE ND.9  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 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		
Anti-infective Agents	0.4	0.2	0.0	0.2	\$29	\$0	\$6	\$72	\$108	\$87	\$31	2,161	\$155,654	500	64.7 %	5,358
Biologicals	0.1	0.0	0.0	0.1	2	0	2	28	28	0	28	17	469	17	2.2	190
Antineoplastic Agents	0.6	0.0	0.0	0.6	96	14	81	154	797	215	135	545	84,050	88	11.4	872
Endocrine/Metabolic Drugs	1.2	0.7	0.0	0.4	57	46	11	49	67	18	25	4,036	198,780	326	42.2	3,462
Cardiovascular Agents	2.1	0.7	0.0	1.3	74	47	0	36	66	14	21	11,464	413,849	526	68.0	5,568
Respiratory Agents	0.8	0.3	0.0	0.4	39	26	0	50	76	30	29	2,710	135,494	332	42.9	3,519
Gastrointestinal Agents	1.1	0.3	0.0	0.9	56	28	0	49	99	31	32	5,341	260,380	438	56.7	4,653
Genitourinary Agents	0.7	0.5	0.0	0.2	48	43	0	68	80	0	30	1,105	75,674	148	19.1	1,587
CNS Drugs	1.7	1.0	0.0	0.7	174	153	3	101	152	109	27	10,828	1,093,607	588	76.1	6,297
Stimulants/Anti-obesity/Anorexia	0.4	0.1	0.0	0.3	25	18	0	65	238	34	23	41	2,657	9	1.2	105
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	116	115	0	145	148	0	50	721	104,390	83	10.7	899
Analgesics and Anesthetics	0.9	0.3	0.0	0.7	48	36	0	51	141	33	18	3,694	188,014	369	47.7	3,896
Neuromuscular Agents	1.4	0.5	0.1	0.7	95	64	4	69	122	36	37	6,063	419,117	400	51.7	4,404
Nutritional Products	0.8	0.0	0.0	0.7	14	0	0	19	17	23	19	1,697	31,796	215	27.8	2,259
Hematological Agents	1.0	0.4	0.1	0.5	74	65	2	72	146	25	14	3,017	217,997	281	36.4	2,928
Topical Products	0.5	0.2	0.0	0.2	22	15	2	48	64	64	26	2,086	99,521	420	54.3	4,556
Miscellaneous Products	0.3	0.1	0.0	0.1	7	3	0	25	23	0	27	83	2,094	29	3.8	321
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	8	0	0	28	0	0	0	200	5,545	61	7.9	672
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>55,809</b>	<b>3,489,088</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2003 file for Mississippi, 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 492 beneficiaries who were in nursing facilities for part of their enrollment and their 5,013 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 Mississippi, 0.7 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

	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
Top 10 Drug Groups in Nursing Facilities	\$773,998	483	62.5 %	5,347	0.8	\$181	\$145
ANTIPTYCHOTICS	345,082	408	52.8	4,513	1.0	76	76
ANTICONVULSANT	258,329	437	56.5	4,702	0.9	64	55
ANTIDEPRESSANTS	196,070	420	54.3	4,558	0.7	59	43
ULCER DRUGS	178,766	368	47.6	4,021	0.8	54	44
ANTIIDIABETIC	137,632	372	48.1	3,919	0.9	41	35
ANTIHYPERTENSIVE	131,038	397	51.4	4,231	0.6	54	31
ANALGESICS - Narcotic	114,683	129	16.7	1,372	0.8	103	84
MISC. HEMATOLOGICAL	106,247	96	12.4	1,061	0.7	139	100
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	102,717	279	36.1	2,946	0.6	63	35
ANTIASTHMATIC							
Total	2,344,562	3,389		36,670	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Mississippi, 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 492 beneficiaries who were in nursing facilities for part of their enrollment and their 5,013 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<sup>a, b, c, d</sup> NONDUAL BENEFICIARIES, MISSISSIPPI, 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
<b>All</b>	<b>28,842</b>	<b>\$2,344,562</b>	<b>483</b>	<b>62.5 %</b>	<b>5,347</b>	<b>0.8</b>	<b>\$145</b>	<b>408</b>	<b>52.8 %</b>	<b>4,513</b>	<b>1.0</b>	<b>\$77</b>				
<b>Female</b>	16,536	1,415,136	267	63.4	3,008	0.9	164	211	50.1	2,383	1.1	81				
<b>Disabled</b>	13,822	1,190,816	215	67.0	2,434	0.9	170	190	59.2	2,143	1.1	82				
64 or younger	13,483	1,162,248	208	68.0	2,372	0.9	172	187	61.1	2,107	1.1	83				
65-74	268	22,032	5	41.7	38	0.9	123	2	16.7	24	0.8	78				
75-84	71	6,536	2	66.7	24	1.0	118	1	33.3	12	0.9	47				
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
<b>Other Eligibles</b>	2,714	224,320	52	52.0	574	0.9	140	21	21.0	240	0.9	63				
64 or younger	72	2,715	0	0.0	0	0.0	0	1	100.0	12	0.1	15				
65-74	612	60,737	13	72.2	156	1.0	186	8	44.4	93	1.0	101				
75-84	1,114	74,599	19	51.4	202	0.7	71	6	16.2	70	1.0	52				
85 and older	916	86,269	20	45.5	216	0.9	170	6	13.6	65	0.7	31				
<b>Male</b>	12,247	926,458	214	61.1	2,326	0.7	120	196	56.0	2,118	0.9	72				
<b>Disabled</b>	10,674	786,128	174	60.4	1,885	0.7	116	183	63.5	1,963	0.9	75				
64 or younger	10,622	783,787	173	60.9	1,873	0.7	115	183	64.4	1,963	0.9	75				
65-74	52	2,341	1	25.0	12	1.1	168	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				
<b>Other Eligibles</b>	1,573	140,330	40	64.5	441	0.7	140	13	21.0	155	0.7	40				
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0				
65-74	486	44,548	14	116.7	150	0.7	151	3	25.0	36	0.6	38				
75-84	472	50,233	12	57.1	129	0.8	203	5	23.8	60	1.0	60				
85 and older	615	45,549	14	48.3	162	0.7	78	5	17.2	59	0.6	20				
<b>Unknown</b>	59	2,968	2	100.0	13	0.3	34	1	50.0	12	0.2	4				

Source: Data for this table are from the MAX 2003 file for Mississippi, 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 492 beneficiaries who were in nursing facilities for part of their enrollment and their 5,013 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2003. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.10B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANTIDIABETIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>437</b>	<b>56.5 %</b>	<b>4,702</b>	<b>0.9</b>	<b>\$55</b>	<b>420</b>	<b>54.3 %</b>	<b>4,558</b>	<b>0.7</b>	<b>\$43</b>	<b>368</b>	<b>47.6 %</b>	<b>4,021</b>	<b>0.8</b>	<b>\$45</b>
<b>Female</b>	249	59.1	2,744	0.9	58	227	53.9	2,521	0.7	44	229	54.4	2,558	0.9	48
<b>Disabled</b>	209	65.1	2,339	0.9	58	184	57.3	2,068	0.7	45	181	56.4	2,063	0.9	49
64 or younger	206	67.3	2,303	0.9	57	176	57.5	1,979	0.7	45	177	57.8	2,026	0.9	49
65-74	3	25.0	36	1.0	63	6	50.0	65	0.5	45	4	33.3	37	1.3	50
75-84	0	0.0	0	0.0	0	2	66.7	24	0.8	51	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	40	40.0	405	0.9	62	43	43.0	453	0.7	40	48	48.0	495	0.8	41
64 or younger	0	0.0	0	0.0	0	2	200.0	24	0.5	12	2	200.0	24	1.3	60
65-74	7	38.9	75	1.0	52	5	27.8	60	0.7	20	6	33.3	63	0.5	21
75-84	19	51.4	177	0.9	70	23	62.2	226	0.7	43	23	62.2	232	0.8	37
85 and older	14	31.8	153	0.8	58	13	29.5	143	0.8	49	17	38.6	176	0.8	51
<b>Male</b>	186	53.1	1,945	0.8	51	192	54.9	2,025	0.8	42	139	39.7	1,463	0.8	39
<b>Disabled</b>	155	53.8	1,599	0.8	52	159	55.2	1,679	0.8	43	129	44.8	1,346	0.8	38
64 or younger	153	53.9	1,575	0.8	53	159	56.0	1,679	0.8	43	129	45.4	1,346	0.8	38
65-74	2	50.0	24	1.2	11	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	31	50.0	346	0.7	44	33	53.2	346	0.7	36	10	16.1	117	0.9	46
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	10	83.3	102	0.8	59	11	91.7	107	0.8	27	3	25.0	36	1.0	42
75-84	7	33.3	79	0.7	43	10	47.6	116	0.5	32	5	23.8	60	0.9	59
85 and older	14	48.3	165	0.6	36	12	41.4	123	0.8	47	2	6.9	21	0.8	18
<b>Unknown</b>	2	100.0	13	0.2	12	1	50.0	12	0.7	65	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2003 file for Mississippi, 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 492 beneficiaries who were in nursing facilities for part of their enrollment and their 5,013 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2003. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0ffed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Table ND10B

Nondual Beneficiaries

TABLE ND.10C

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY  
AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANALGESICS - Narcotic					MISC. HEMATOLOGICAL				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>372</b>	<b>48.1 %</b>	<b>3,919</b>	<b>0.9</b>	<b>\$35</b>	<b>397</b>	<b>51.4 %</b>	<b>4,231</b>	<b>0.6</b>	<b>\$31</b>	<b>129</b>	<b>16.7 %</b>	<b>1,372</b>	<b>0.8</b>	<b>\$84</b>
<b>Female</b>															
<b>Disabled</b>	207	49.2	2,165	0.9	39	216	51.3	2,318	0.5	35	63	15.0	649	0.8	86
64 or younger	168	52.3	1,788	0.9	42	178	55.5	1,948	0.6	38	40	12.5	422	0.8	87
65-74	161	52.6	1,752	0.9	42	171	55.9	1,886	0.6	38	40	13.1	422	0.8	87
75-84	6	50.0	24	0.8	40	6	50.0	50	0.6	56	0	0.0	0	0.0	0
85 and older	1	33.3	12	0.1	0	1	33.3	12	0.1	1	0	0.0	0	0.0	0
<b>Other Eligibles</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younger	39	39.0	377	0.8	27	38	38.0	370	0.4	22	23	23.0	227	0.8	84
65-74	0	0.0	0	0.0	0	3	300.0	36	0.4	13	1	100.0	12	0.9	29
75-84	7	38.9	81	0.9	26	7	38.9	84	0.6	75	2	11.1	24	0.6	66
85 and older	19	51.4	176	0.7	28	20	54.1	190	0.3	5	13	35.1	108	0.8	77
<b>Male</b>	13	29.5	120	0.8	27	8	18.2	60	0.3	9	7	15.9	83	0.9	107
<b>Disabled</b>	165	47.1	1,754	0.8	30	180	51.4	1,901	0.6	26	66	18.9	723	0.8	81
64 or younger	142	49.3	1,532	0.8	30	152	52.8	1,590	0.7	27	57	19.8	619	0.8	80
65-74	141	49.6	1,520	0.8	31	152	53.5	1,590	0.7	27	57	20.1	619	0.8	80
75-84	1	25.0	12	0.9	5	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younger	23	37.1	222	0.8	30	28	45.2	311	0.3	18	9	14.5	104	0.8	92
65-74	5	41.7	58	0.8	22	5	41.7	53	0.7	54	1	8.3	12	1.2	139
75-84	9	42.9	80	0.8	37	7	33.3	80	0.2	2	5	23.8	60	0.7	76
85 and older	9	31.0	84	0.9	29	16	55.2	178	0.3	15	3	10.3	32	0.9	105
<b>Unknown</b>	0	0.0	0	0.0	0	1	50.0	12	1.5	16	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2003 file for Mississippi, 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 492 beneficiaries who were in nursing facilities for part of their enrollment and their 5,013 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 ND10C

Nondual Beneficiaries

TABLE ND.10D

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup> NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				ANTI-ASTHMATIC				Benefit Months Among All-Nursing Facility Residents		
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users		Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>96</b>	<b>12.4 %</b>	<b>1,061</b>	<b>0.7</b>	<b>\$100</b>	<b>279</b>	<b>36.1 %</b>	<b>2,946</b>	<b>0.6</b>	<b>\$35</b>	<b>7,960</b>
<b>Female</b>	58	13.8	640	0.7	101	144	34.2	1,541	0.5	32	4,442
<b>Disabled</b>	37	11.5	423	0.7	106	116	36.1	1,276	0.6	33	3,469
64 or younger	33	10.8	375	0.7	106	112	36.6	1,228	0.6	33	3,338
65-74	2	16.7	24	1.0	134	4	33.3	48	0.6	31	95
75-84	2	66.7	24	0.6	80	0	0.0	0	0.0	0	36
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0
<b>Other Eligibles</b>	21	21.0	217	0.8	92	28	28.0	265	0.5	30	973
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	12
65-74	6	33.3	69	0.8	71	4	22.2	48	0.3	20	184
75-84	8	21.6	79	0.7	91	12	32.4	99	0.8	48	367
85 and older	7	15.9	69	0.9	114	12	27.3	118	0.3	19	410
<b>Male</b>	37	10.6	420	0.7	99	131	37.4	1,357	0.6	38	3,505
<b>Disabled</b>	29	10.1	330	0.7	96	106	36.8	1,086	0.6	40	2,906
64 or younger	29	10.2	330	0.7	96	106	37.3	1,086	0.6	40	2,869
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	37
75-84	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
<b>Other Eligibles</b>	8	12.9	90	0.8	108	25	40.3	271	0.4	30	599
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0
65-74	1	8.3	12	0.7	88	10	83.3	95	0.5	35	126
75-84	2	9.5	19	0.7	103	5	23.8	56	0.1	5	202
85 and older	5	17.2	59	0.8	113	10	34.5	120	0.4	37	271
<b>Unknown</b>	1	50.0	1	1.0	139	4	200.0	48	0.5	25	13

Source: Data for this table are from the MAX 2003 file for Mississippi, 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 492 beneficiaries who were in nursing facilities for part of their enrollment and their 5,013 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<sup>a,b</sup>  
 MISSISSIPPI, 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 All Nondual Rx \$		Total Number of Beneficiaries
				Part D Excluded Rx	Rx \$ per Beneficiary			Excluded Rx	%	
<b>All</b>	<b>193,259</b>	<b>32.0 %</b>	<b>0.8</b>	<b>493,832</b>	<b>\$15</b>	<b>\$8,943,709</b>	<b>\$18</b>	<b>3.7 %</b>	<b>604,843</b>	
<b>Age</b>										
5 and younger	79,844	43.3	1.1	196,557	14	2,652,912	13	6.5	184,522	
6-14	48,650	26.8	0.5	93,698	11	1,934,473	21	4.2	181,387	
15-20	19,562	22.4	0.4	38,725	11	946,229	24	4.0	87,405	
21-44	29,867	26.8	0.8	87,510	16	1,757,408	20	2.8	111,491	
45-64	14,761	38.6	1.9	73,973	42	1,594,203	22	2.4	38,250	
65-74	272	33.4	1.7	1,370	32	25,713	19	2.2	814	
75-84	184	32.3	2.0	1,159	36	20,323	18	2.7	569	
85 and older	119	29.4	2.1	840	31	12,448	15	2.5	405	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
<b>Basis of Eligibility<sup>c</sup></b>										
Aged	513	31.2	1.9	3,064	33	53,891	18	2.4	1,642	
Disabled	33,819	35.6	1.5	144,113	42	4,007,986	28	3.0	95,092	
Adults	24,887	24.6	0.6	56,423	8	852,270	15	3.1	101,354	
Children	134,040	33.0	0.7	290,232	10	4,029,562	14	5.2	406,755	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
<b>Gender</b>										
Female	113,825	33.0	0.9	296,610	15	5,266,428	18	3.7	344,861	
Male	79,375	31.9	0.8	197,101	15	3,675,616	19	3.7	248,487	
Unknown	59	0.5	0.0	121	0	1,665	14	2.5	11,495	
<b>Race</b>										
White	63,141	33.3	0.9	167,887	17	3,223,990	19	3.2	189,814	
African American	118,539	32.7	0.8	288,797	13	4,545,775	16	4.0	362,793	
Other/unknown	11,579	22.2	0.7	37,148	22	1,173,944	32	4.3	52,236	
<b>Use of Nursing Facilities<sup>d</sup></b>										
Entire year	527	68.2	7.5	5,808	123	95,383	16	2.7	773	
Part year	334	67.9	4.7	2,331	118	58,199	25	3.3	492	
None	192,398	31.9	0.8	485,693	15	8,790,127	18	3.7	603,578	
<b>Maintenance Assistance Status</b>										
Cash	94,104	34.8	1.0	280,569	21	5,714,742	20	3.5	270,700	
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0	
Poverty related	96,478	30.1	0.6	203,521	9	2,892,696	14	4.2	320,301	
Other/unknown	2,677	19.3	0.7	9,742	24	336,271	35	4.0	13,842	

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Mississippi, 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<sup>a,b</sup>  
 MISSISSIPPI, 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	\$2	\$18	\$0	\$0	5,581,035
<b>Age</b>						
5 and younger	0.1	2	13	0	0	1,629,657
6-14	0.1	1	21	0	0	1,824,927
15-20	0.0	1	24	0	0	811,920
21-44	0.1	2	20	0	1	931,039
45-64	0.2	4	22	0	1	368,521
65-74	0.2	4	19	0	1	7,148
75-84	0.2	4	18	0	1	4,875
85 and older	0.3	4	15	0	1	2,948
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.2	4	18	0	1	13,591
Disabled	0.2	4	28	0	1	956,760
Adults	0.1	1	15	0	0	784,261
Children	0.1	1	14	0	0	3,826,423
Unknown	0.0	0	0	0	0	0
<b>Gender</b>						
Female	0.1	2	18	0	0	3,171,353
Male	0.1	2	19	0	0	2,380,289
Unknown	0.0	0	14	0	0	29,393
<b>Race</b>						
White	0.1	2	19	0	1	1,672,601
African American	0.1	1	16	0	0	3,553,146
Other/unknown	0.1	3	32	0	1	355,288
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.7	12	16	0	5	7,960
Part year	0.5	12	25	0	3	5,013
None	0.1	2	18	0	0	5,568,062
<b>Maintenance Assistance Status</b>						
Cash	0.1	2	20	0	0	2,677,061
Medically needy	0.0	0	0	0	0	0
Poverty related	0.1	1	14	0	0	2,800,042
Other/unknown	0.1	3	35	0	1	103,932

Source: Data for this table are from the MAX 2003 file for Mississippi, 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<sup>a,b,c</sup>  
 MISSISSIPPI, 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 %
<b>All</b>	<b>241,908</b>	<b>\$37</b>	<b>\$8,943,709</b>	<b>0</b>	<b>100.0 %</b>	<b>493,832</b>	<b>\$18</b>	<b>100.0 %</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	0	0	0	0.0	0.0	0	0	0.0	0.0
Fertility drugs	3	251	752	0.0	0.0	3	251	0.0	0.0
Drugs for cosmetic purposes	97	22	2,121	0.0	0.0	230	9	0.0	0.0
Cough and cold medications	140,214	29	4,083,017	45.7	45.7	256,718	16	52.0	52.0
Vitamins and minerals	13,337	65	860,306	9.6	9.6	41,008	21	8.3	8.3
Non-prescription drugs	60,585	26	1,565,385	17.5	17.5	96,603	16	19.6	19.6
Barbiturates	1,583	51	81,464	0.9	0.9	11,162	7	2.3	2.3
Benzodiazepines	14,359	94	1,351,067	15.1	15.1	67,056	20	13.6	13.6
Other Part D Excl Rx Drugs	11,730	85	999,597	11.2	11.2	21,052	47	4.3	4.3

Source: Data for this table are from the MAX 2003 file for Mississippi, 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<sup>a, b</sup>  
NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

Beneficiary Characteristics	Number of Beneficiaries					Number of Benefit Months				
	All	Aged	Disabled	Adults	Unknown	All	Aged	Disabled	Adults	Unknown
<b>All</b>	<b>604,843</b>	<b>1,642</b>	<b>95,092</b>	<b>101,354</b>	<b>0</b>	<b>5,581,035</b>	<b>13,591</b>	<b>956,760</b>	<b>784,261</b>	<b>0</b>
<b>Age</b>										
5 and younger	184,522	0	6,320	0	178,202	1,629,657	0	58,425	0	1,571,232
6-14	181,387	0	15,528	56	165,803	1,824,927	0	162,310	247	1,662,370
15-20	87,405	0	10,437	14,271	62,697	811,920	0	111,503	108,001	592,416
21-44	111,491	26	28,539	82,874	52	931,039	209	289,320	641,114	396
45-64	38,250	87	34,012	4,150	1	368,521	709	332,931	34,872	9
65-74	814	600	211	3	0	7,148	5,224	1,897	27	0
75-84	569	537	32	0	0	4,875	4,615	260	0	0
85 and older	405	392	13	0	0	2,948	2,834	114	0	0
Unknown	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>										
Female	344,861	1,031	49,589	96,573	197,668	3,171,353	8,443	507,208	749,843	1,905,859
Male	248,487	599	45,497	4,779	197,612	2,380,289	5,044	449,518	34,414	1,891,313
Unknown	11,495	12	6	2	11,475	29,393	104	34	4	29,251
<b>Race</b>										
White	189,814	753	24,312	34,808	129,941	1,672,601	5,860	249,520	245,679	1,171,542
African American	362,793	720	45,344	61,600	255,129	3,553,146	6,362	490,276	513,807	2,542,701
Other/unknown	52,236	169	25,436	4,946	21,685	355,288	1,369	216,964	24,775	112,180
<b>Use of Nursing Facilities<sup>c</sup></b>										
Entire year	773	164	609	0	0	7,960	1,585	6,375	0	0
Part year	492	69	420	2	1	5,013	698	4,284	19	12
None	603,578	1,409	94,063	101,352	406,754	5,568,062	11,308	946,101	784,242	3,826,411
<b>Maintenance Assistance Status</b>										
Cash	270,700	486	86,249	65,503	118,462	2,677,061	4,973	877,281	583,777	1,211,030
Medically needy	0	0	0	0	0	0	0	0	0	0
Poverty related	320,301	745	6,595	28,284	284,677	2,800,042	5,639	57,383	160,622	2,576,398
Other/unknown	13,842	411	2,248	7,567	3,616	103,932	2,979	22,096	39,862	38,995
<b>Managed Care (MC) Status</b>										
Fee-for-service (FFS) all year	604,843	1,642	95,092	101,354	406,755	5,581,035	13,591	956,760	784,261	3,826,423
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2003 file for Mississippi, 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<sup>a</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2003

	Beneficiaries and		Beneficiaries		Beneficiaries	
	Benefit Months in Cell J of Table 1	Number of Beneficiaries	Benefit Months in Cell K of Table 1	Number of Beneficiaries	Benefit Months in Cell L of Table 1	Number of Beneficiaries
<b>All</b>	<b>604,843</b>	<b>5,581,035</b>	<b>604,843</b>	<b>604,843</b>	<b>5,581,035</b>	<b>0</b>
Fee-for-service (FFS) all year	604,843	5,581,035	604,843	604,843	5,581,035	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2003 file for Mississippi, 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.