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

LIST OF TABLES

TABLE ND.2

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY[a,b]

NONDUAL BENEFICIARIES, OHIO, 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	**1,337,271**	**11,000**	**197,832**	**342,280**	**786,159**	**0**	**11,015,245**	**117,302**	**2,038,498**	**2,397,954**	**6,461,491**	**0**
Age												
5 and younger	304,710	0	6,659	0	298,051	0	2,439,352	0	67,053	0	2,372,299	0
6-14	359,772	0	23,510	0	336,262	0	3,135,875	0	249,743	0	2,886,132	0
15-20	182,183	0	16,510	17,249	148,424	0	1,464,468	0	170,471	110,286	1,183,711	0
21-44	370,854	0	67,686	299,805	3,363	0	2,820,310	0	693,747	2,107,352	19,211	0
45-64	108,309	0	83,136	25,173	0	0	1,034,347	0	854,286	180,061	0	0
65-74	6,894	6,567	298	29	0	0	74,155	71,182	2,831	142	0	0
75-84	2,536	2,498	28	10	0	0	25,980	25,604	331	45	0	0
85 and older	1,952	1,934	5	13	0	0	20,613	20,511	36	66	0	0
Unknown	61	1	0	1	59	0	145	5	0	2	138	0
Gender												
Female	760,974	7,650	105,010	253,750	394,564	0	6,220,403	82,591	1,105,674	1,795,103	3,237,035	0
Male	576,297	3,350	92,822	88,530	391,595	0	4,794,842	34,711	932,824	602,851	3,224,456	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	965,055	6,484	130,095	262,762	565,714	0	8,272,602	69,230	1,344,038	1,945,150	4,914,184	0
African American	321,672	3,039	61,940	67,246	189,447	0	2,382,281	32,679	636,585	385,041	1,327,976	0
Other/unknown	50,544	1,477	5,797	12,272	30,998	0	360,362	15,393	57,875	67,763	219,331	0
Use of Nursing Facilities[c]												
Entire year	5,071	1,352	3,718	1	0	0	51,938	13,937	37,999	2	0	0
Part year	5,410	589	4,704	93	24	0	52,586	5,835	45,780	760	211	0
None	1,326,790	9,059	189,410	342,186	786,135	0	10,910,721	97,530	1,954,719	2,397,192	6,461,280	0
Maintenance Assistance Status												
Cash	273,360	6,581	136,292	40,335	90,152	0	2,599,036	75,458	1,535,520	273,445	714,613	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	312,974	53	274	37,268	275,379	0	2,401,601	465	2,037	193,132	2,205,967	0
Other/unknown	750,937	4,366	61,266	264,677	420,628	0	6,014,608	41,379	500,941	1,931,377	3,540,911	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	1,062,077	11,000	190,805	260,356	599,916	0	9,828,014	117,302	1,995,228	2,072,959	5,642,525	0
FFS part year, with Rx claims	115,808	0	4,703	42,277	68,828	0	659,279	0	32,064	212,045	415,170	0
FFS part year, no Rx claims	159,386	0	2,324	39,647	117,415	0	527,952	0	11,206	112,950	403,796	0

Nondual Beneficiaries

Table ND2

Source: Data for this table are from the MAX 2003 file for Ohio, 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 ND2

Nondual Beneficiaries

TABLE ND.3

ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC[a,b]
NONDUAL BENEFICIARIES, OHIO, 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	**64.2 %**	**11.1**	**$635**	**$57**	**$3,716**	**17.1 %**	**1,337,271**
Age							
5 and younger	61.7	3.7	158	43	1,913	8.3	304,710
6-14	57.4	4.7	304	64	1,700	17.9	359,772
15-20	60.9	6.0	348	58	2,546	13.7	182,183
21-44	69.0	13.5	774	57	4,574	16.9	370,854
45-64	82.0	49.3	2,900	59	13,165	22.0	108,309
65-74	86.7	53.9	2,798	52	17,686	15.8	6,894
75-84	79.7	44.2	2,190	50	16,995	12.9	2,536
85 and older	41.7	21.8	955	44	12,345	7.7	1,952
Unknown	1.6	0.0	0	5	6	1.4	61
Basis of Eligibility[e]							
Aged	78.4	46.8	2,374	51	16,708	14.2	11,000
Disabled	83.6	41.0	2,688	66	14,381	18.7	197,832
Adults	65.8	8.8	398	45	2,417	16.4	342,280
Children	58.5	4.0	197	49	1,416	13.9	786,159
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	67.4	12.7	677	53	3,790	17.9	760,974
Male	60.1	8.9	579	65	3,619	16.0	576,297
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	68.5	12.0	682	57	3,683	18.5	965,055
African American	53.5	8.8	525	59	3,954	13.3	321,672
Other/unknown	52.2	6.9	419	61	2,830	14.8	50,544
Use of Nursing Facilities[f]							
Entire year	98.5	106.7	6,059	57	64,888	9.3	5,071
Part year	97.8	83.7	4,808	57	56,543	8.5	5,410
None	64.0	10.4	597	57	3,267	18.3	1,326,790
Maintenance Assistance Status							
Cash	75.4	27.2	1,706	63	8,694	19.6	273,360
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	56.7	3.7	178	48	1,458	12.2	312,974
Other/unknown	63.3	8.2	435	53	2,845	15.3	750,937

Nondual Beneficiaries

Table ND3

Source: Data for this table are from the MAX 2003 file for Ohio, 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 fost 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, OHIO, 2003

| Beneficiary Characteristics | Mean Number of Rx | Mean Rx $ | Rx $ as a Percentage of All Medicaid FFS $[c] | Number of Rx, Percentage with: | | | | | | Mean $, All Medicaid FFS $[d] | Number | |
				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	Benefit Months
All	1.3	$77	17.1 %	35.8 %	45.2 %	7.1 %	7.1 %	3.5 %	1.4 %	$451	1,337,271	11,015,245
Age												
5 and younger	0.5	20	8.3	38.3	56.1	4.0	1.4	0.1	0.0	239	304,710	2,439,352
6-14	0.5	35	17.9	42.6	48.6	4.9	3.3	0.5	0.0	195	359,772	3,135,875
15-20	0.8	43	13.7	39.1	48.0	7.3	4.6	0.9	0.1	317	182,183	1,464,468
21-44	1.8	102	16.9	31.0	40.8	10.8	11.5	4.5	1.4	601	370,854	2,820,310
45-64	5.2	304	22.0	18.0	16.8	9.3	22.8	21.7	11.3	1,379	108,309	1,034,347
65-74	5.0	260	15.8	13.3	15.2	10.4	25.7	24.6	10.8	1,644	6,894	74,155
75-84	4.3	214	12.9	20.3	14.5	9.8	25.2	22.1	8.2	1,659	2,536	25,980
85 and older	2.1	90	7.7	58.3	6.0	4.1	13.8	13.7	4.0	1,169	1,952	20,613
Unknown	0.0	0	1.4	98.4	1.6	0.0	0.0	0.0	0.0	3	61	145
Basis of Eligibility[e]												
Aged	4.4	223	14.2	21.6	13.7	9.4	23.9	22.5	9.0	1,567	11,000	117,302
Disabled	4.0	261	18.7	16.4	26.7	10.6	21.3	16.8	8.2	1,396	197,832	2,038,498
Adults	1.3	57	16.4	34.2	42.9	10.5	9.3	2.6	0.5	345	342,280	2,397,954
Children	0.5	24	13.9	41.5	51.3	4.6	2.3	0.2	0.0	172	786,159	6,461,491
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	1.6	83	17.9	32.6	45.6	7.9	7.9	4.2	1.8	464	760,974	6,220,403
Male	1.1	70	16.0	39.9	44.7	6.0	6.0	2.6	0.9	435	576,297	4,794,842
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.4	80	18.5	31.5	48.0	7.6	7.6	3.7	1.6	430	965,055	8,272,602
African American	1.2	71	13.3	46.5	37.9	5.6	5.8	3.0	1.1	534	321,672	2,382,281
Other/unknown	1.0	59	14.8	47.8	39.0	5.2	5.4	2.1	0.5	397	50,544	360,362
Use of Nursing Facilities[f]												
Entire year	10.4	592	9.3	1.5	2.3	2.5	16.2	36.6	40.9	6,335	5,071	51,938
Part year	8.6	495	8.5	2.2	6.1	6.5	22.9	33.1	29.1	5,817	5,410	52,586
None	1.3	73	18.3	36.0	45.5	7.1	7.0	3.2	1.1	397	1,326,790	10,910,721
Maintenance Assistance Status												
Cash	2.9	180	19.6	24.6	37.5	8.9	13.9	10.2	4.9	914	273,360	2,599,036
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.5	23	12.2	43.3	49.3	4.8	2.3	0.2	0.0	190	312,974	2,401,601
Other/unknown	1.0	54	15.3	36.7	46.3	7.4	6.6	2.4	0.7	355	750,937	6,014,608

Nondual Beneficiaries

Table ND4

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

AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC[a, b, c]

NONDUAL BENEFICIARIES, OHIO, 2003

Beneficiary Characteristics	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	**1.3**	**$77**	**$57**	**0.6**	**$64**	**$102**	**0.1**	**$3**	**$54**	**0.7**	**$11**	**$16**
Age												
5 and younger	0.5	20	43	0.2	16	84	0.0	1	50	0.3	3	10
6-14	0.5	35	64	0.3	30	97	0.0	2	70	0.2	3	15
15-20	0.8	43	58	0.4	35	94	0.0	2	67	0.3	5	16
21-44	1.8	102	57	0.8	84	107	0.1	3	52	0.9	14	16
45-64	5.2	304	59	2.4	249	106	0.2	8	48	2.6	46	18
65-74	5.0	260	52	2.3	212	91	0.2	6	36	2.5	42	17
75-84	4.3	214	50	2.0	174	86	0.2	5	31	2.1	34	16
85 and older	2.1	90	44	0.9	72	80	0.1	3	30	1.1	16	15
Unknown	0.0	0	5	0.0	0	0	0.0	0	0	0.0	0	5
Basis of Eligibility[d]												
Aged	4.4	223	51	2.0	181	89	0.2	6	34	2.2	36	16
Disabled	4.0	261	66	1.9	217	117	0.1	8	55	2.0	35	18
Adults	1.3	57	45	0.5	45	85	0.0	2	46	0.7	9	14
Children	0.5	24	49	0.2	20	81	0.0	1	61	0.2	3	13
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	1.6	83	53	0.7	68	95	0.1	3	49	0.8	12	16
Male	1.1	70	65	0.5	58	114	0.0	3	64	0.5	9	16
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	1.4	80	57	0.7	66	100	0.1	3	54	0.7	11	16
African American	1.2	71	59	0.5	59	109	0.0	2	54	0.6	10	16
Other/unknown	1.0	59	61	0.5	49	107	0.0	2	53	0.5	8	16
Use of Nursing Facilities[e]												
Entire year	10.4	592	57	4.3	482	112	0.4	16	37	5.6	93	17
Part year	8.6	495	57	3.5	397	115	0.3	15	43	4.8	81	17
None	1.3	73	57	0.6	60	101	0.0	3	55	0.6	10	16
Maintenance Assistance Status												
Cash	2.9	180	63	1.3	148	112	0.1	6	55	1.4	25	18
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.5	23	48	0.2	19	80	0.0	1	59	0.2	3	12
Other/unknown	1.0	54	53	0.5	45	94	0.0	2	53	0.5	8	15

Nondual Beneficiaries

Table ND5

Source: Data for this table are from the MAX 2003 file for Ohio, 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 Ohio, 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, OHIO, 2003

Therapeutic Category	Number of Rx per Benefit Month Among Users				$ per Benefit Month Among Users				$ per Rx				Total Number of Rx	Total Rx $	Users[e]		Number of Benefit Months
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic			Number of Users	As a Percentage of All Benes	
Anti-infective Agents	0.3	0.1	0.0	0.1	$13	$10	$1	$2	$48	$83	$76	$12	1,641,146	$78,297,751	590,404	44.1 %	5,995,580
Biologicals	0.4	0.4	0.0	0.0	508	458	9	42	1171	1,123	1,529	2,014	11,984	14,028,592	2,965	0.2	27,607
Antineoplastic Agents	0.5	0.2	0.0	0.2	142	128	4	10	290	555	198	40	28,716	8,331,768	5,633	0.4	58,824
Endocrine/Metabolic Drugs	0.5	0.3	0.1	0.2	24	20	2	3	46	72	26	15	1,228,290	56,597,878	226,926	17.0	2,319,915
Cardiovascular Agents	1.3	0.5	0.0	0.8	49	38	1	10	38	73	43	13	1,730,231	65,042,222	127,227	9.5	1,331,899
Respiratory Agents	0.5	0.3	0.0	0.2	22	18	0	3	47	71	63	16	2,146,968	100,126,184	440,555	32.9	4,543,946
Gastrointestinal Agents	0.6	0.3	0.0	0.2	49	41	1	7	88	125	159	31	859,685	75,749,571	147,884	11.1	1,541,403
Genitourinary Agents	0.3	0.2	0.0	0.1	14	13	0	1	51	62	40	11	176,055	8,980,456	64,754	4.8	658,444
CNS Drugs	1.0	0.6	0.0	0.4	84	76	1	7	83	131	97	16	2,298,931	191,099,959	222,957	16.7	2,279,456
Stimulants/Anti-obesity/Anorexia	0.7	0.5	0.1	0.1	51	44	5	2	75	83	69	29	380,965	28,656,254	54,282	4.1	564,401
Miscellaneous Psychological/ Neurological Agents	0.3	0.2	0.0	0.1	44	39	0	5	149	190	0	53	33,541	5,002,207	10,602	0.8	114,174
Analgesics and Anesthetics	0.5	0.1	0.0	0.4	20	14	0	6	37	136	61	13	1,911,668	71,211,334	349,504	26.1	3,527,527
Neuromuscular Agents	0.7	0.4	0.0	0.3	52	44	2	6	73	123	49	19	988,898	71,770,910	131,410	9.8	1,380,280
Nutritional Products	0.4	0.0	0.0	0.3	7	2	1	5	20	47	25	16	307,284	6,055,878	84,249	6.3	816,691
Hematological Agents	0.6	0.2	0.1	0.3	92	83	2	7	145	344	30	21	204,969	29,733,301	31,132	2.3	322,639
Topical Products	0.2	0.1	0.0	0.1	10	7	1	2	40	65	54	15	758,044	30,284,215	302,703	22.6	3,150,611
Miscellaneous Products	0.6	0.2	0.0	0.4	67	48	11	7	113	307	252	19	48,279	5,444,697	8,134	0.6	81,517
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	11	0	0	0	53	0	0	0	41,128	2,184,002	18,327	1.4	196,855
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.	14,796,782	848,597,179	n.a.	n.a.	n.a.

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

Nondual Beneficiaries

Table ND6

TABLE ND.7
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP[a, b, c]
NONDUAL BENEFICIARIES, OHIO, 2003

		Users			Among Users		
Top 10 Drug Groups	Total Medicaid Rx $	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	$ per Rx	Rx $ per Benefit Month
ANTIPSYCHOTICS	$107,260,738	88,114	6.6 %	958,167	0.6	$179	$112
ANTIDEPRESSANTS	71,379,343	219,940	16.4	2,278,593	0.5	65	31
ULCER DRUGS	64,856,054	148,114	11.1	1,561,176	0.4	97	42
ANTICONVULSANT	61,592,288	91,833	6.9	985,125	0.7	91	63
ANTIASTHMATIC	56,196,517	281,023	21.0	2,956,743	0.3	58	19
ANALGESICS - Narcotic	34,650,468	382,723	28.6	3,964,748	0.3	30	9
ANTIDIABETIC	29,097,888	71,641	5.4	766,905	0.6	59	38
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	28,655,478	69,018	5.2	730,482	0.5	75	39
ANTIHYPERLIPIDEMIC	27,887,990	49,452	3.7	540,612	0.6	88	52
ANALGESICS - ANTI-INFLAMMATORY	23,649,137	252,844	18.9	2,638,830	0.2	39	9
Total	505,225,901	1,654,702		17,381,381	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Ohio, 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(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 ND7

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, OHIO, 2003

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	Number of Rx	Rx $	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	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
All	**6,948,218**	**$505,225,901**	**88,114**	**6.6 %**	**958,167**	**0.6**	**$112**	**219,940**	**16.4 %**	**2,278,593**	**0.5**	**$31**
Female	4,403,871	304,232,346	47,925	6.3	522,549	0.6	102	159,194	20.9	1,643,331	0.5	31
Disabled	2,686,659	208,898,134	31,672	30.2	358,842	0.7	119	70,356	67.0	791,784	0.6	38
5 and younger	11,943	953,379	29	1.1	309	0.6	93	28	1.0	306	0.4	15
6-14	58,259	5,164,516	992	12.9	10,978	0.6	100	961	12.5	10,707	0.5	24
15-20	55,430	4,820,343	1,276	19.9	14,042	0.6	102	1,719	26.9	18,917	0.5	31
21-44	827,131	66,858,452	14,039	37.6	158,265	0.6	113	27,418	73.4	306,507	0.5	35
45-64	1,730,483	130,863,428	15,303	30.2	174,893	0.7	127	40,162	79.3	454,630	0.6	40
65-74	3,386	235,111	33	17.3	355	0.9	94	68	35.6	717	0.7	39
75-84	1	4	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	26	2,901	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	1,717,212	95,334,212	16,253	2.5	163,707	0.4	63	88,838	13.5	851,547	0.4	26
5 and younger	77,525	3,716,750	184	0.1	1,996	0.4	46	269	0.2	2,725	0.3	15
6-14	215,569	14,136,374	2,958	1.8	31,582	0.5	76	5,821	3.5	61,311	0.4	24
15-20	197,918	10,460,674	3,289	3.5	33,390	0.4	64	12,485	13.1	124,246	0.3	22
21-44	944,627	48,004,244	7,839	3.5	75,995	0.3	46	62,007	27.4	583,093	0.4	26
45-64	117,744	7,526,424	620	4.1	5,595	0.4	58	5,640	37.4	50,858	0.5	34
65-74	121,381	8,621,254	917	20.3	10,466	0.9	134	1,762	38.9	20,358	0.6	36
75-84	30,965	2,156,784	269	16.3	2,929	0.7	107	537	32.4	5,919	0.7	38
85 and older	11,483	711,708	177	11.9	1,754	0.6	79	317	21.3	3,037	0.7	37
Male	2,544,347	200,993,555	40,189	7.0	435,618	0.7	125	60,746	10.5	635,262	0.5	31
Disabled	1,540,743	133,036,371	26,338	28.4	292,584	0.7	141	33,285	35.9	365,546	0.6	35
5 and younger	19,483	1,481,513	153	3.8	1,641	0.5	69	62	1.6	718	0.4	16
6-14	145,870	13,962,636	3,904	24.7	43,584	0.6	113	2,462	15.6	27,375	0.5	28
15-20	84,410	8,722,069	2,503	24.8	27,686	0.6	126	2,114	20.9	23,170	0.5	34
21-44	514,128	48,219,610	11,507	37.9	127,706	0.8	152	13,194	43.5	144,040	0.6	36
45-64	775,666	60,553,718	8,250	25.4	91,785	0.8	147	15,428	47.5	170,023	0.6	36
65-74	1,125	93,960	19	17.8	158	0.6	115	24	22.4	208	0.4	26
75-84	15	837	0	0.0	0	0.0	0	1	7.7	12	0.8	4
85 and older	46	2,028	2	100.0	24	1.5	54	0	0.0	0	0.0	0
Other Eligibles	1,003,604	67,957,184	13,851	2.9	143,034	0.5	90	27,461	5.7	269,716	0.4	26
5 and younger	115,520	6,136,070	426	0.3	4,629	0.4	57	406	0.3	4,314	0.2	13
6-14	392,903	29,802,495	7,107	4.2	75,937	0.5	91	8,394	4.9	89,474	0.4	24
15-20	147,194	10,864,057	3,637	5.2	36,806	0.6	99	6,011	8.5	59,485	0.4	28
21-44	225,915	12,612,783	1,834	2.4	16,749	0.4	62	9,729	12.7	87,999	0.4	25
45-64	62,965	4,344,209	266	2.6	2,485	0.4	77	2,061	20.5	18,982	0.4	30
65-74	42,733	3,085,377	388	18.7	4,439	0.9	145	562	27.1	6,373	0.6	34
75-84	13,002	898,210	136	15.9	1,439	0.6	83	226	26.5	2,388	0.6	32
85 and older	3,372	213,983	57	12.5	550	0.7	80	72	15.8	701	0.7	31
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

Table ND7A

Source: Data for this table are from the MAX 2003 file for Ohio, 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-ad778d7b66615 (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.

Nondual Beneficiaries

Table ND7A

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, OHIO, 2003

Beneficiary Characteristics	ULCER DRUGS					ANTICONVULSANT					ANTIASTHMATIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean 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	Mean 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	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	**148,114**	**11.1 %**	**1,561,176**	**0.4**	**$42**	**91,833**	**6.9 %**	**985,125**	**0.7**	**$63**	**281,023**	**21.0 %**	**2,956,743**	**0.3**	**$19**
Female	101,188	13.3	1,072,342	0.4	41	56,794	7.5	608,805	0.7	59	164,536	21.6	1,735,604	0.3	20
Disabled	49,473	47.1	560,628	0.5	54	35,314	33.6	398,205	0.8	69	63,571	60.5	719,990	0.5	28
5 and younger	509	19.0	5,419	0.4	36	328	12.2	3,565	0.8	97	1,667	62.1	18,114	0.3	19
6-14	764	9.9	8,872	0.5	46	1,638	21.3	18,510	0.9	94	2,616	34.0	29,509	0.3	21
15-20	1,073	16.8	12,174	0.4	32	1,365	21.3	15,215	0.9	96	1,848	28.9	20,905	0.3	18
21-44	15,833	42.4	179,500	0.5	45	14,552	39.0	163,512	0.7	73	19,119	51.2	216,867	0.4	24
45-64	31,227	61.6	353,996	0.6	60	17,403	34.3	197,099	0.7	60	38,261	75.5	434,033	0.5	32
65-74	67	35.1	667	0.7	58	28	14.7	304	0.8	65	60	31.4	562	0.7	31
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	51,715	7.9	511,714	0.3	27	21,480	3.3	210,600	0.5	41	100,965	15.4	1,015,614	0.2	14
5 and younger	3,733	2.6	34,175	0.2	11	552	0.4	5,597	0.5	46	24,443	16.8	251,422	0.2	10
6-14	4,276	2.6	46,570	0.2	13	2,301	1.4	23,830	0.6	54	22,634	13.6	238,404	0.2	14
15-20	6,890	7.2	70,620	0.2	13	2,794	2.9	27,882	0.5	50	12,233	12.9	124,230	0.2	11
21-44	29,840	13.2	288,662	0.3	29	13,325	5.9	127,593	0.4	36	34,732	15.3	331,002	0.3	15
45-64	3,484	23.1	32,225	0.4	47	1,298	8.6	12,075	0.5	39	3,791	25.1	34,953	0.4	23
65-74	2,434	53.8	27,985	0.6	56	880	19.4	10,148	0.9	52	2,302	50.9	26,699	0.5	30
75-84	755	45.6	8,356	0.6	52	236	14.3	2,539	0.7	37	590	35.6	6,512	0.5	29
85 and older	303	20.3	3,121	0.6	52	94	6.3	936	0.7	30	240	16.1	2,392	0.3	13
Male	46,926	8.1	488,834	0.4	42	35,039	6.1	376,320	0.7	68	116,487	20.2	1,221,139	0.3	18
Disabled	24,858	26.8	273,306	0.6	53	24,121	26.0	268,165	0.8	77	33,552	36.1	371,164	0.4	27
5 and younger	603	15.2	6,506	0.5	34	492	12.4	5,370	0.7	79	2,631	66.2	28,567	0.3	21
6-14	1,029	6.5	11,807	0.5	41	2,935	18.6	33,132	0.8	82	5,402	34.2	61,118	0.3	20
15-20	1,071	10.6	12,190	0.4	35	1,968	19.5	21,924	0.8	98	2,392	23.7	26,764	0.3	19
21-44	8,345	27.5	91,790	0.5	49	10,130	33.4	112,737	0.9	84	7,105	23.4	78,673	0.4	24
45-64	13,777	42.4	150,730	0.6	58	8,579	26.4	94,862	0.7	61	15,989	49.3	175,777	0.6	33
65-74	32	29.9	271	0.6	57	16	15.0	128	0.7	37	32	29.9	253	0.4	19
75-84	0	0.0	0	0.0	0	1	7.7	12	0.1	1	0	0.0	0	0.0	0
85 and older	1	50.0	12	0.3	19	0	0.0	0	0.0	0	1	50.0	12	0.6	42
Other Eligibles	22,068	4.6	215,528	0.3	28	10,918	2.3	108,155	0.5	47	82,935	17.2	849,975	0.2	14
5 and younger	4,663	3.1	43,282	0.2	13	806	0.5	8,269	0.5	40	35,322	23.2	361,963	0.2	12
6-14	3,477	2.0	38,241	0.2	16	3,648	2.1	38,303	0.6	53	29,963	17.6	313,903	0.3	15
15-20	2,922	4.1	29,883	0.2	16	2,105	3.0	20,615	0.5	55	8,345	11.8	85,064	0.3	13
21-44	7,923	10.3	73,038	0.4	39	3,204	4.2	29,289	0.4	36	6,312	8.2	58,164	0.3	17
45-64	1,763	17.5	16,479	0.5	51	679	6.7	6,426	0.5	43	1,588	15.8	15,388	0.4	26
65-74	903	43.6	10,120	0.6	51	342	16.5	3,875	0.9	54	984	47.5	11,004	0.6	33
75-84	330	38.7	3,627	0.6	52	98	11.5	1,032	0.7	41	323	37.9	3,511	0.5	30
85 and older	87	19.0	858	0.7	62	36	7.9	346	0.7	35	98	21.4	978	0.5	23
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

Table ND7B

Source: Data for this table are from the MAX 2003 file for Ohio, 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[a,b,c]
NONDUAL BENEFICIARIES, OHIO, 2003

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIDIABETIC					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean 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	Mean 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	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	**382,723**	**28.6 %**	**3,964,748**	**0.3**	**$9**	**71,641**	**5.4 %**	**766,905**	**0.6**	**$38**	**69,018**	**5.2 %**	**730,482**	**0.5**	**$39**
Female	271,123	35.6	2,813,688	0.3	8	48,854	6.4	527,014	0.6	38	19,677	2.6	209,547	0.5	37
Disabled	92,742	88.3	1,052,755	0.4	15	34,088	32.5	384,141	0.7	40	3,831	3.6	43,223	0.5	42
5 and younger	219	8.2	2,490	0.1	1	10	0.4	110	0.9	57	88	3.3	991	0.4	22
6-14	803	10.4	9,308	0.2	3	98	1.3	1,098	0.7	45	1,964	25.5	21,935	0.6	42
15-20	2,245	35.1	25,195	0.2	3	216	3.4	2,360	0.6	35	598	9.3	6,819	0.5	41
21-44	37,071	99.3	419,198	0.3	12	6,861	18.4	77,602	0.6	36	709	1.9	8,057	0.5	43
45-64	52,315	103.2	595,661	0.4	17	26,834	53.0	302,299	0.7	41	472	0.9	5,421	0.5	45
65-74	88	46.1	891	0.4	15	66	34.6	645	0.7	41	0	0.0	0	0.0	0
75-84	1	6.7	12	0.1	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	3	100.0	27	0.7	61	0	0.0	0	0.0	0
Other Eligibles	178,381	27.2	1,760,933	0.2	4	14,766	2.3	142,873	0.6	33	15,846	2.4	166,324	0.5	36
5 and younger	3,374	2.3	36,282	0.1	1	116	0.1	1,189	0.6	37	635	0.4	6,853	0.3	22
6-14	9,596	5.8	104,336	0.1	1	695	0.4	6,883	0.7	44	11,823	7.1	125,248	0.5	36
15-20	26,734	28.1	270,162	0.1	1	939	1.0	9,070	0.6	36	2,115	2.2	21,969	0.5	38
21-44	126,817	56.0	1,230,027	0.2	4	7,475	3.3	68,738	0.5	30	1,141	0.5	10,990	0.4	34
45-64	7,852	52.0	74,652	0.3	9	2,246	14.9	19,721	0.6	35	112	0.7	1,033	0.5	41
65-74	2,897	64.0	33,384	0.4	10	2,460	54.4	28,186	0.7	36	15	0.3	172	0.7	19
75-84	782	47.3	8,759	0.4	11	635	38.4	7,038	0.7	32	4	0.2	47	0.4	6
85 and older	329	22.1	3,331	0.5	17	200	13.4	2,048	0.7	29	1	0.1	12	0.2	3
Male	111,600	19.4	1,151,060	0.3	11	22,787	4.0	239,891	0.6	38	49,341	8.6	520,935	0.5	40
Disabled	48,619	52.4	532,979	0.4	18	16,225	17.5	178,334	0.7	39	10,782	11.6	119,588	0.6	45
5 and younger	356	9.0	4,037	0.1	1	24	0.6	256	0.7	37	334	8.4	3,730	0.4	26
6-14	1,431	9.1	16,480	0.1	3	82	0.5	896	0.7	47	7,483	47.3	82,702	0.6	45
15-20	2,131	21.1	23,969	0.2	4	176	1.7	1,975	0.6	39	2,107	20.8	23,707	0.6	47
21-44	19,388	63.9	210,899	0.4	16	3,618	11.9	39,840	0.6	38	625	2.1	6,923	0.6	43
45-64	25,274	77.9	277,249	0.5	22	12,302	37.9	135,178	0.7	39	232	0.7	2,514	0.6	41
65-74	39	36.4	345	0.8	26	23	21.5	189	0.7	46	1	0.9	12	2.0	65
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	62,981	13.0	618,081	0.2	5	6,562	1.4	61,557	0.6	36	38,559	8.0	401,347	0.5	39
5 and younger	4,754	3.1	51,462	0.1	1	136	0.1	1,300	0.6	38	1,697	1.1	18,079	0.4	24
6-14	9,635	5.7	104,900	0.1	1	614	0.4	6,105	0.7	44	31,353	18.4	326,964	0.5	39
15-20	11,374	16.1	114,429	0.1	1	480	0.7	4,575	0.7	50	4,989	7.1	51,491	0.5	43
21-44	31,220	40.8	287,627	0.3	7	2,585	3.4	22,342	0.6	35	467	0.6	4,334	0.4	36
45-64	4,465	44.3	42,692	0.3	15	1,514	15.0	13,414	0.6	35	45	0.4	388	0.4	28
65-74	1,104	53.3	12,420	0.4	10	868	41.9	9,755	0.7	32	5	0.2	58	0.2	13
75-84	335	39.3	3,663	0.3	10	310	36.3	3,508	0.7	30	3	0.4	33	0.5	11
85 and older	94	20.6	888	0.5	9	55	12.0	558	0.6	22	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

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

Nondual Beneficiaries

Table ND7C

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, OHIO, 2003

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC					ANALGESICS - ANTI-INFLAMMATORY						
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean 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	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
All	**49,452**	**3.7 %**	**540,612**	**0.6**	**$52**	**252,844**	**18.9 %**	**2,638,830**	**0.2**	**$9**	**1,337,271**	**11,015,245**
Female	31,300	4.1	345,608	0.6	52	174,974	23.0	1,822,954	0.2	10	760,952	6,220,352
Disabled	23,234	22.1	264,065	0.6	54	57,388	54.7	657,129	0.3	17	105,010	1,105,674
5 and younger	11	0.4	130	0.3	10	289	10.8	3,273	0.1	1	2,684	27,096
6-14	14	0.2	155	0.3	19	1,037	13.5	11,900	0.2	5	7,702	82,055
15-20	32	0.5	357	0.4	37	1,949	30.4	22,038	0.2	7	6,402	67,072
21-44	4,001	10.7	45,636	0.5	45	20,802	55.7	236,212	0.3	11	37,339	393,202
45-64	19,126	37.7	217,277	0.6	56	33,251	65.6	383,066	0.4	23	50,674	534,218
65-74	50	26.2	510	0.8	66	59	30.9	631	0.5	40	191	1,834
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	15	175
85 and older	0	0.0	0	0.0	0	1	33.3	9	0.9	140	3	22
Other Eligibles	8,066	1.2	81,543	0.5	44	117,586	17.9	1,165,825	0.2	5	655,942	5,114,678
5 and younger	105	0.1	983	0.2	5	8,126	5.6	85,209	0.1	1	145,548	1,157,204
6-14	54	0.0	600	0.3	28	11,657	7.0	124,750	0.1	2	165,943	1,422,014
15-20	125	0.1	1,313	0.3	23	20,080	21.1	202,335	0.2	2	95,080	733,626
21-44	3,664	1.6	35,481	0.4	34	68,767	30.3	661,556	0.2	5	226,601	1,610,592
45-64	1,724	11.4	15,636	0.5	45	5,550	36.8	52,675	0.3	12	15,099	108,562
65-74	1,871	41.3	21,651	0.7	59	2,512	55.5	29,234	0.4	33	4,526	49,737
75-84	445	26.9	5,064	0.7	61	681	41.1	7,784	0.4	35	1,655	17,065
85 and older	78	5.2	815	0.7	52	213	14.3	2,282	0.5	36	1,490	15,878
Male	18,152	3.1	195,004	0.6	51	77,870	13.5	815,876	0.2	8	576,258	4,794,748
Disabled	13,007	14.0	145,356	0.6	54	28,464	30.7	319,205	0.3	13	92,822	932,824
5 and younger	11	0.3	106	0.2	11	459	11.5	5,007	0.2	2	3,975	39,957
6-14	14	0.1	164	0.3	16	1,696	10.7	19,375	0.2	2	15,808	167,688
15-20	51	0.5	586	0.4	32	1,861	18.4	20,821	0.2	3	10,108	103,399
21-44	3,092	10.2	34,755	0.6	47	10,226	33.7	113,397	0.3	10	30,347	300,545
45-64	9,825	30.3	109,611	0.6	57	14,203	43.8	160,423	0.3	19	32,462	320,068
65-74	14	13.1	134	0.8	75	18	16.8	170	0.4	97	107	997
75-84	0	0.0	0	0.0	0	1	7.7	12	0.4	65	13	156
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	14
Other Eligibles	5,145	1.1	49,648	0.5	43	49,406	10.2	496,671	0.2	4	483,436	3,861,924
5 and younger	131	0.1	1,257	0.1	5	9,144	6.0	95,903	0.1	1	152,503	1,215,095
6-14	93	0.1	949	0.3	20	10,005	5.9	108,180	0.1	1	170,319	1,464,118
15-20	92	0.1	922	0.3	25	10,045	14.2	102,217	0.1	2	70,593	560,371
21-44	2,434	3.2	22,391	0.4	38	16,500	21.5	152,914	0.2	5	76,567	515,971
45-64	1,506	14.9	14,051	0.5	47	2,618	26.0	25,134	0.3	12	10,074	71,499
65-74	638	30.8	7,272	0.7	60	796	38.5	9,044	0.4	30	2,070	21,587
75-84	231	27.1	2,575	0.6	55	240	28.1	2,690	0.4	30	853	8,584
85 and older	20	4.4	231	0.8	77	58	12.7	589	0.6	40	457	4,699
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	61	145

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Ohio, 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, OHIO, 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
All	**$592**	**10.4**	**5,071**	**51,938**
Age				
0-64	645	11.1	3,693	37,771
65-74	552	9.8	621	6,833
75-84	404	8.3	397	3,992
85 and older	288	6.6	360	3,342
Unknown	0	0.0	0	0
Gender				
Female	599	10.7	2,897	30,474
Male	581	10.0	2,174	21,464
Unknown	0	0.0	0	0
Race				
White	602	10.7	3,601	36,591
African American	565	9.6	1,401	14,642
Other/unknown	619	10.3	69	705
Basis of Eligibility[c]				
Aged	447	8.6	1,352	13,937
Disabled	645	11.1	3,718	37,999
Adults	808	29.0	1	2
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2003 file for Ohio, 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 5,410 beneficiaries who were in nursing facilities for part of their enrollment and their 52,586 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.

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, OHIO, 2003

Therapeutic Category	Number of Rx per Benefit Month Among Users				$ per Benefit Month Among Users				$ per Rx				Total Number of Rx	Total Rx $	Users		Number of Benefit Months
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic			Number of Users	As a Percentage of All-Year Nursing Facility Residents	
Anti-infective Agents	0.7	0.4	0.0	0.3	$52	$41	$3	$8	$72	$110	$74	$25	27,526	$1,981,052	3,644	71.9 %	38,342
Biologicals	0.1	0.1	0.0	0.1	18	1	0	17	159	20	0	287	113	18,007	88	1.7	993
Antineoplastic Agents	0.6	0.2	0.0	0.4	131	93	5	33	221	620	160	80	2,191	484,224	364	7.2	3,691
Endocrine/Metabolic Drugs	1.4	0.7	0.1	0.6	54	45	2	7	39	69	20	11	38,170	1,502,965	2,612	51.5	27,615
Cardiovascular Agents	2.3	0.6	0.1	1.6	64	42	2	20	28	66	34	13	83,924	2,368,272	3,534	69.7	36,730
Respiratory Agents	1.0	0.4	0.0	0.6	44	29	1	13	43	68	57	23	31,338	1,347,650	2,929	57.8	30,795
Gastrointestinal Agents	1.3	0.6	0.0	0.7	82	70	1	11	64	115	68	17	43,114	2,770,206	3,267	64.4	33,904
Genitourinary Agents	0.7	0.5	0.0	0.2	39	35	1	3	56	74	43	13	10,575	588,075	1,393	27.5	15,229
CNS Drugs	2.5	1.4	0.1	1.0	240	217	4	19	95	151	53	19	111,972	10,646,965	4,220	83.2	44,340
Stimulants/Anti-obesity/Anorexia	1.0	0.1	0.0	0.9	22	10	0	12	22	93	0	14	793	17,522	73	1.4	781
Miscellaneous Psychological/ Neurological Agents	0.8	0.8	0.0	0.0	126	125	0	0	164	165	0	56	5,033	823,759	615	12.1	6,562
Analgesics and Anesthetics	1.4	0.4	0.0	0.9	56	46	0	9	40	103	19	10	46,155	1,845,147	3,201	63.1	33,107
Neuromuscular Agents	1.8	0.7	0.1	1.0	107	82	3	22	59	111	36	22	61,085	3,577,393	3,097	61.1	33,505
Nutritional Products	1.2	0.0	0.1	1.0	24	3	3	18	21	75	24	18	22,152	462,348	1,870	36.9	19,098
Hematological Agents	1.2	0.3	0.1	0.7	67	57	3	7	55	175	18	10	23,846	1,317,199	1,968	38.8	19,661
Topical Products	0.7	0.3	0.1	0.4	23	14	3	6	33	53	42	17	24,406	806,324	3,265	64.4	35,063
Miscellaneous Products	0.7	0.0	0.0	0.7	12	6	0	6	17	115	42	9	6,134	101,776	845	16.7	8,394
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	10	0	0	0	25	0	0	0	2,603	65,098	589	11.6	6,417
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.	541,130	30,723,982	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Ohio, 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 5,410 beneficiaries who were in nursing facilities for part of their enrollment and their 52,586 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).

Nondual Beneficiaries

Table ND9

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 Ohio, 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.

Nondual Beneficiaries

Table ND9

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, OHIO, 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	$7,678,451	3,964	78.2 %	44,080	1.0	$182	$174
ANTICONVULSANT	3,013,191	3,562	70.2	39,075	1.2	66	77
ANTIDEPRESSANTS	2,482,480	4,346	85.7	46,685	0.9	61	53
ULCER DRUGS	2,252,985	3,282	64.7	34,044	0.8	84	66
ANTIDIABETIC	1,173,028	2,939	58.0	31,250	0.9	42	38
ANALGESICS - Narcotic	1,012,416	3,703	73.0	37,416	0.9	32	27
ANTIASTHMATIC	891,846	3,024	59.6	31,530	0.6	48	28
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	843,553	742	14.6	7,782	0.7	153	108
ANTIHYPERLIPIDEMIC	809,538	1,203	23.7	13,264	0.8	76	61
DERMATOLOGICAL	742,476	8,814	173.8	96,629	0.3	25	8
Total	20,899,964	35,579		381,755	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Ohio, 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 5,410 beneficiaries who were in nursing facilities for part of their enrollment and their 52,586 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.

Nondual Beneficiaries

Table ND10

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, OHIO, 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 $
All	**279,921**	**$20,899,964**	**3,964**	**78.2 %**	**44,080**	**1.0**	**$174**	**3,562**	**70.2 %**	**39,075**	**1.2**	**$77**
Female	167,971	12,595,938	2,409	83.2	27,098	1.0	175	2,010	69.4	22,331	1.2	73
Disabled	123,585	9,536,411	1,747	90.0	19,856	1.0	186	1,558	80.2	17,347	1.2	79
64 or younger	122,765	9,480,139	1,731	90.0	19,681	1.0	187	1,549	80.5	17,254	1.2	79
65-74	820	56,272	16	94.1	175	0.8	113	9	52.9	93	1.0	71
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	44,386	3,059,527	662	69.3	7,242	0.9	144	452	47.3	4,984	1.0	54
64 or younger	23	471	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	25,428	1,853,256	390	97.0	4,426	1.0	166	282	70.1	3,215	1.2	62
75-84	11,295	756,546	164	60.5	1,748	0.8	119	118	43.5	1,236	0.9	42
85 and older	7,640	449,254	108	38.4	1,068	0.7	93	52	18.5	533	0.8	32
Male	111,950	8,304,026	1,555	71.5	16,982	0.9	173	1,552	71.4	16,744	1.2	82
Disabled	95,226	7,073,916	1,282	72.2	13,974	1.0	177	1,362	76.7	14,668	1.2	84
64 or younger	94,954	7,061,381	1,278	72.3	13,944	1.0	177	1,359	76.9	14,650	1.2	84
65-74	272	12,535	4	50.0	30	0.8	126	3	37.5	18	1.3	32
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	16,724	1,230,110	273	68.6	3,008	0.9	157	190	47.7	2,076	1.1	70
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	9,935	808,559	166	85.6	1,928	1.0	193	125	64.4	1,436	1.2	79
75-84	4,747	306,480	72	57.6	743	0.7	94	44	35.2	449	0.9	54
85 and older	2,042	115,071	35	44.3	337	0.7	96	21	26.6	191	0.8	35
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 Ohio, 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 5,410 beneficiaries who were in nursing facilities for part of their enrollment and their 52,586 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.

Nondual Beneficiaries

Table ND10A

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, OHIO, 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 $
All	**4,346**	**85.7 %**	**46,685**	**0.9**	**$53**	**3,282**	**64.7 %**	**34,044**	**0.8**	**$66**	**2,939**	**58.0 %**	**31,250**	**0.9**	**$38**
Female	2,633	90.9	28,585	0.9	54	1,880	64.9	20,024	0.8	67	1,893	65.3	20,421	0.9	37
Disabled	1,887	97.2	20,605	0.9	56	1,323	68.1	14,101	0.8	67	1,307	67.3	14,024	0.9	38
64 or younger	1,873	97.3	20,462	0.9	56	1,308	68.0	13,946	0.8	67	1,295	67.3	13,918	0.9	38
65-74	14	82.4	143	1.0	64	15	88.2	155	0.7	55	12	70.6	106	1.0	41
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	746	78.1	7,980	0.8	49	557	58.3	5,923	0.8	68	586	61.4	6,397	0.9	35
64 or younger	1	100.0	2	1.0	67	2	200.0	4	0.8	9	0	0.0	0	0.0	0
65-74	345	85.8	3,907	0.8	51	264	65.7	2,952	0.8	72	346	86.1	3,899	0.9	38
75-84	215	79.3	2,310	0.9	50	153	56.5	1,582	0.8	68	152	56.1	1,589	0.8	31
85 and older	185	65.8	1,761	0.8	42	138	49.1	1,385	0.8	59	88	31.3	909	0.8	27
Male	1,713	78.8	18,100	0.9	53	1,402	64.5	14,020	0.8	65	1,046	48.1	10,829	0.9	38
Disabled	1,440	81.1	15,148	0.9	54	1,180	66.4	11,672	0.8	65	876	49.3	9,022	0.9	40
64 or younger	1,435	81.2	15,115	0.9	54	1,177	66.6	11,652	0.8	65	872	49.3	8,993	0.9	40
65-74	5	62.5	33	1.1	78	3	37.5	20	0.8	9	4	50.0	29	0.8	21
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	273	68.6	2,952	0.8	46	222	55.8	2,348	0.7	67	170	42.7	1,807	0.8	27
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	140	72.2	1,592	0.9	50	107	55.2	1,178	0.8	73	105	54.1	1,150	0.8	26
75-84	89	71.2	906	0.9	44	80	64.0	853	0.7	61	47	37.6	495	0.9	32
85 and older	44	55.7	454	0.7	36	35	44.3	317	0.8	64	18	22.8	162	0.8	22
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 Ohio, 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 5,410 beneficiaries who were in nursing facilities for part of their enrollment and their 52,586 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.

Nondual Beneficiaries

Table ND10B

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[a, b, c, d]

NONDUAL BENEFICIARIES, OHIO, 2003

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIASTHMATIC					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	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	**3,703**	**73.0 %**	**37,416**	**0.9**	**$27**	**3,024**	**59.6 %**	**31,530**	**0.6**	**$28**	**742**	**14.6 %**	**7,782**	**0.7**	**$108**
Female	2,128	73.5	22,163	0.8	24	1,850	63.9	19,668	0.6	29	420	14.5	4,546	0.7	113
Disabled	1,594	82.1	16,657	0.8	24	1,276	65.7	13,498	0.6	32	237	12.2	2,648	0.6	113
64 or younger	1,578	82.0	16,484	0.8	24	1,271	66.1	13,438	0.6	32	235	12.2	2,624	0.6	114
65-74	16	94.1	173	0.4	9	5	29.4	60	1.1	41	2	11.8	24	0.6	50
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	534	55.9	5,506	0.7	24	574	60.1	6,170	0.5	22	183	19.2	1,898	0.8	113
64 or younger	3	300.0	6	1.8	40	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	226	56.2	2,461	0.8	19	280	69.7	3,194	0.6	26	54	13.4	601	0.8	114
75-84	158	58.3	1,630	0.6	26	162	59.8	1,658	0.5	23	67	24.7	696	0.9	117
85 and older	147	52.3	1,409	0.7	30	132	47.0	1,318	0.3	11	62	22.1	601	0.9	106
Male	1,575	72.4	15,253	0.9	32	1,174	54.0	11,862	0.6	27	322	14.8	3,236	0.7	102
Disabled	1,353	76.2	12,920	1.0	34	954	53.7	9,520	0.6	29	244	13.7	2,441	0.7	104
64 or younger	1,344	76.0	12,829	1.0	34	952	53.8	9,504	0.6	29	243	13.7	2,439	0.7	104
65-74	9	112.5	91	0.8	9	2	25.0	16	0.6	10	1	12.5	2	1.0	127
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	222	55.8	2,333	0.6	21	220	55.3	2,342	0.5	21	78	19.6	795	0.7	97
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	107	55.2	1,161	0.6	19	118	60.8	1,295	0.5	23	25	12.9	279	0.6	83
75-84	74	59.2	765	0.7	31	69	55.2	715	0.4	21	39	31.2	374	0.8	102
85 and older	41	51.9	407	0.6	9	33	41.8	332	0.4	12	14	17.7	142	0.9	111
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 Ohio, 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 5,410 beneficiaries who were in nursing facilities for part of their enrollment and their 52,586 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.

Nondual Beneficiaries

Table ND10C

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, OHIO, 2003

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC					DERMATOLOGICAL					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	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	1,203	23.7 %	13,264	0.8	$61	8,814	173.8 %	96,629	0.3	$8	5,071	51,938
Female	753	26.0	8,344	0.8	63	5,151	177.8	57,309	0.3	8	2,897	30,474
Disabled	537	27.7	5,955	0.8	63	3,700	190.5	41,464	0.3	9	1,942	20,603
64 or younger	534	27.8	5,930	0.8	63	3,674	191.0	41,175	0.3	9	1,924	20,420
65-74	3	17.6	25	0.8	40	26	152.9	289	0.3	6	17	171
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	216	22.6	2,389	0.8	63	1,451	151.9	15,845	0.3	7	955	9,871
64 or younger	0	0.0	0	0.0	0	2	200.0	4	1.8	16	1	2
65-74	137	34.1	1,567	0.8	67	680	169.2	7,743	0.3	7	402	4,489
75-84	57	21.0	613	0.8	58	397	146.5	4,283	0.3	7	271	2,748
85 and older	22	7.8	209	0.8	50	372	132.4	3,815	0.3	6	281	2,632
Male	450	20.7	4,920	0.8	57	3,663	168.5	39,320	0.3	7	2,174	21,464
Disabled	377	21.2	4,086	0.8	58	2,995	168.6	32,157	0.3	7	1,776	17,396
64 or younger	377	21.3	4,086	0.8	58	2,980	168.6	32,038	0.3	7	1,768	17,349
65-74	0	0.0	0	0.0	0	15	187.5	119	0.5	30	8	47
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	73	18.3	834	0.8	52	668	167.8	7,163	0.3	7	398	4,068
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	38	19.6	435	0.8	57	334	172.2	3,768	0.3	8	194	2,126
75-84	27	21.6	303	0.8	47	209	167.2	2,135	0.3	6	125	1,232
85 and older	8	10.1	96	0.7	45	125	158.2	1,260	0.3	7	79	710
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 Ohio, 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 5,410 beneficiaries who were in nursing facilities for part of their enrollment and their 52,586 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.

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC[a,b]
OHIO, 2003

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx $ per Beneficiary	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
All	**419,319**	**31.4 %**	**1.6**	**2,098,296**	**$23**	**$30,338,003**	**$14**	**3.6 %**	**1,337,271**
Age									
5 and younger	100,379	32.9	0.8	237,274	10	3,095,747	13	6.4	304,710
6-14	87,217	24.2	0.5	194,298	10	3,560,493	18	3.3	359,772
15-20	43,467	23.9	0.6	114,314	13	2,348,478	21	3.7	182,183
21-44	119,769	32.3	1.8	659,933	27	10,128,786	15	3.5	370,854
45-64	61,908	57.2	7.3	789,257	95	10,281,183	13	3.3	108,309
65-74	4,426	64.2	9.8	67,774	92	631,679	9	3.3	6,894
75-84	1,479	58.3	9.2	23,356	78	199,003	9	3.6	2,536
85 and older	674	34.5	6.2	12,090	47	92,634	8	5.0	1,952
Unknown	0	0.0	0.0	0	0	0	0	0.0	61
Basis of Eligibility[c]									
Aged	6,427	58.4	9.2	101,213	82	903,743	9	3.5	11,000
Disabled	106,602	53.9	6.1	1,215,411	90	17,797,697	15	3.3	197,832
Adults	95,547	27.9	1.0	333,675	15	5,172,434	16	3.8	342,280
Children	210,743	26.8	0.6	447,997	8	6,464,129	14	4.2	786,159
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Gender									
Female	259,584	34.1	1.8	1,385,018	26	19,955,951	14	3.9	760,974
Male	159,735	27.7	1.2	713,278	18	10,382,052	15	3.1	576,297
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	327,912	34.0	1.7	1,614,982	25	23,998,615	15	3.6	965,055
African American	78,912	24.5	1.3	434,231	17	5,600,884	13	3.3	321,672
Other/unknown	12,495	24.7	1.0	49,083	15	738,504	15	3.5	50,544
Use of Nursing Facilities[d]									
Entire year	4,831	95.3	30.2	152,957	294	1,490,963	10	4.9	5,071
Part year	4,983	92.1	17.0	91,729	240	1,300,082	14	5.0	5,410
None	409,505	30.9	1.4	1,853,610	21	27,546,958	15	3.5	1,326,790
Maintenance Assistance Status									
Cash	124,463	45.5	4.2	1,139,751	58	15,929,222	14	3.4	273,360
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	70,612	22.6	0.4	140,778	7	2,242,847	16	4.0	312,974
Other/unknown	224,244	29.9	1.1	817,767	16	12,165,934	15	3.7	750,937

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Ohio, 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]
OHIO, 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	**0.2**	**$3**	**$14**	**$0**	**$1**	**11,015,245**
Age						
5 and younger	0.1	1	13	0	0	2,439,352
6-14	0.1	1	18	0	0	3,135,875
15-20	0.1	2	21	0	0	1,464,468
21-44	0.2	4	15	0	1	2,820,310
45-64	0.8	10	13	0	3	1,034,347
65-74	0.9	9	9	0	2	74,155
75-84	0.9	8	9	0	1	25,980
85 and older	0.6	4	8	0	1	20,613
Unknown	0.0	0	0	0	0	145
Basis of Eligibility[c]						
Aged	0.9	8	9	0	1	117,302
Disabled	0.6	9	15	0	2	2,038,498
Adults	0.1	2	16	0	0	2,397,954
Children	0.1	1	14	0	0	6,461,491
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.2	3	14	0	1	6,220,403
Male	0.1	2	15	0	0	4,794,842
Unknown	0.0	0	0	0	0	0
Race						
White	0.2	3	15	0	1	8,272,602
African American	0.2	2	13	0	0	2,382,281
Other/unknown	0.1	2	15	0	0	360,362
Use of Nursing Facilities[d]						
Entire year	2.9	29	10	0	6	51,938
Part year	1.7	25	14	0	4	52,586
None	0.2	3	15	0	1	10,910,721
Maintenance Assistance Status						
Cash	0.4	6	14	0	2	2,599,036
Medically needy	0.0	0	0	0	0	0
Poverty related	0.1	1	16	0	0	2,401,601
Other/unknown	0.1	2	15	0	0	6,014,608

Nondual Beneficiaries

Table ND12

Source: Data for this table are from the MAX 2003 file for Ohio, released by CMS in 05/2007. This table was produced on 11/01/2007.

a. Table ND.12 includes the beneficaries 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 beneficaries 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.

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
FOR SELECTED DRUG CATEGORIES AMONG NONDUALS[a,b,c]
OHIO, 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
All	**573,408**	**$53**	**$30,338,003**	**100.0 %**	**2,098,296**	**$14**	**100.0 %**
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	8	83	664	0.0	8	83	0.0
Drugs for cosmetic purposes	0	0	0	0.0	0	0	0.0
Cough and cold medications	263,063	40	10,604,304	35.0	531,884	20	25.3
Vitamins and minerals	38,380	79	3,027,813	10.0	199,977	15	9.5
Non-prescription drugs	185,469	35	6,414,196	21.1	814,106	8	38.8
Barbiturates	2,870	52	149,462	0.5	28,984	5	1.4
Benzodiazepines	69,377	93	6,448,734	21.3	458,044	14	21.8
Other Part D Excl Rx Drugs	14,241	259	3,692,830	12.2	65,293	57	3.1

Source: Data for this table are from the MAX 2003 file for Ohio, 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, OHIO, 2003

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	1,695,954	11,000	199,470	435,982	1,049,502	0	16,354,737	117,401	2,091,734	3,758,924	10,386,678	0
Age												
5 and younger	403,467	0	6,887	0	396,580	0	3,880,875	0	76,357	0	3,804,518	0
6-14	481,961	0	24,358	0	457,603	0	5,006,049	0	274,315	0	4,731,734	0
15-20	230,963	0	17,035	22,769	191,159	0	2,201,767	0	182,413	194,771	1,824,583	0
21-44	452,577	0	67,715	380,762	4,100	0	4,012,576	0	699,279	3,287,596	25,701	0
45-64	115,533	0	83,144	32,389	0	0	1,132,412	0	856,172	276,240	0	0
65-74	6,899	6,567	298	34	0	0	74,235	71,213	2,831	191	0	0
75-84	2,536	2,498	28	10	0	0	26,008	25,631	331	46	0	0
85 and older	1,956	1,934	5	17	0	0	20,666	20,552	36	78	0	0
Unknown	62	1	0	1	60	0	149	5	0	2	142	0
Gender												
Female	970,690	7,650	105,593	330,718	526,729	0	9,368,501	82,664	1,127,763	2,934,976	5,223,098	0
Male	725,264	3,350	93,877	105,264	522,773	0	6,986,236	34,737	963,971	823,948	5,163,580	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	1,100,449	6,484	130,720	300,891	662,354	0	10,366,597	69,302	1,362,762	2,524,667	6,409,866	0
African American	524,921	3,039	62,873	117,655	341,354	0	5,340,291	32,704	668,591	1,096,748	3,542,248	0
Other/unknown	70,584	1,477	5,877	17,436	45,794	0	647,849	15,395	60,381	137,509	434,564	0
Use of Nursing Facilities[c]												
Entire year	5,071	1,352	3,718	1	0	0	51,938	13,937	37,999	2	0	0
Part year	5,410	589	4,704	93	24	0	52,860	5,869	45,896	861	234	0
None	1,685,473	9,059	191,048	435,888	1,049,478	0	16,249,939	97,595	2,007,839	3,758,061	10,386,444	0
Maintenance Assistance Status												
Cash	341,045	6,581	137,923	55,904	140,637	0	3,646,917	75,458	1,570,274	526,710	1,474,475	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	390,076	53	274	41,917	347,832	0	3,523,757	503	2,251	261,107	3,259,896	0
Other/unknown	964,833	4,366	61,273	338,161	561,033	0	9,184,063	41,440	519,209	2,971,107	5,652,307	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	1,062,077	11,000	190,805	260,356	599,916	0	9,828,313	117,401	1,995,428	2,072,959	5,642,525	0
FFS part year, with Rx claims	115,808	0	4,703	42,277	68,828	0	1,225,771	0	53,978	422,948	748,845	0
FFS part year, no Rx claims	159,386	0	2,324	39,647	117,415	0	1,550,669	0	24,905	353,687	1,172,077	0
MC all year, with Rx claims	44	0	2	9	33	0	393	0	22	56	315	0
MC all year, no Rx claims	358,639	0	1,636	93,693	263,310	0	3,749,591	0	17,401	909,274	2,822,916	0

Nondual Beneficiaries

Appendix Table A.1

Source: Data for this table are from the MAX 2003 file for Ohio, 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(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.1

APPENDIX TABLE A.2

MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS[a]

NONDUAL BENEFICIARIES, OHIO, 2003

	Beneficiaries and Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	**1,695,954**	**16,354,737**	**1,337,271**	**11,015,245**	**0**	**5,339,492**
Fee-for-service (FFS) all year	1,062,077	9,828,313	1,062,077	9,828,014	0	299
FFS part year, with Rx claims	115,808	1,225,771	115,808	659,279	0	566,492
FFS part year, with no Rx claims	159,386	1,550,669	159,386	527,952	0	1,022,717
Managed care (MC) all year, with Rx claims	44	393	0	0	0	393
MC all year, with no Rx claims	358,639	3,749,591	0	0	0	3,749,591

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