

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2003 RHODE ISLAND

LIST OF TABLES

OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

FOR ALL MEDICAID BENEFICIARIES

- TABLE 2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY
- TABLE 3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC
- TABLE 4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
- TABLE 5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC
- TABLE 6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY
- TABLE 7. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

FOR ALL NONDUAL BENEFICIARIES

- TABLE ND.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY
- TABLE ND.3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC
- TABLE ND.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
- TABLE ND.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC
- TABLE ND.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY
- TABLE ND.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP
- TABLE ND.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC
- TABLE ND.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY
- TABLE ND.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP
- TABLE ND.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC
- TABLE ND.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
- TABLE ND.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS

FOR DUAL ELIGIBLE BENEFICIARIES

TABLE D.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE D.3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE D.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT *PER BENEFIT MONTH*, BY BENEFICIARY CHARACTERISTIC

TABLE D.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE D.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE D.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

TABLE D.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

TABLE D.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE D.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP

TABLE D.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS, BY BENEFICIARY CHARACTERISTIC

TABLE D.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE D.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS

SUPPLEMENTAL TABLES

SUPPLEMENTAL TABLE 1. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES

SUPPLEMENTAL TABLE 1A. MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65

SUPPLEMENTAL TABLE 1B. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER

SUPPLEMENTAL TABLE 1C. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74

SUPPLEMENTAL TABLE 1D. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84

SUPPLEMENTAL TABLE 1E. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER

APPENDIX TABLES

APPENDIX TABLE A.1. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, NONDUAL BENEFICIARIES

APPENDIX TABLE A.2. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, NONDUAL BENEFICIARIES

APPENDIX TABLE A.3. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, DUAL ELIGIBLE BENEFICIARIES

APPENDIX TABLE A.4. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, DUAL ELIGIBLE BENEFICIARIES

TABLE ND.2

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a,b}
NONDUAL BENEFICIARIES, RHODE ISLAND, 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	60,726	1,108	22,845	14,116	22,657	0	369,932	10,409	243,370	33,748	82,405	0
Age												
5 and younger	8,886	0	1,310	0	7,576	0	32,955	0	12,376	0	20,579	0
6-14	14,303	0	3,567	2	10,734	0	80,874	0	36,950	3	43,921	0
15-20	7,624	6	2,246	1,118	4,254	0	42,207	50	23,092	1,761	17,304	0
21-44	19,177	115	7,574	11,401	87	0	110,756	852	82,095	27,247	562	0
45-64	9,741	150	7,994	1,592	5	0	93,211	1,263	87,176	4,734	38	0
65-74	573	443	128	2	0	0	5,538	4,143	1,393	2	0	0
75-84	295	273	21	1	0	0	3,104	2,867	236	1	0	0
85 and older	126	121	5	0	0	0	1,286	1,234	52	0	0	0
Unknown	1	0	0	0	1	1	0	0	0	0	1	0
Gender												
Female	33,505	803	11,626	10,090	10,986	0	196,605	7,427	125,280	24,458	39,440	0
Male	27,221	305	11,219	4,026	11,671	0	173,327	2,982	118,090	9,290	42,965	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	25,691	431	12,166	5,411	7,683	0	181,749	3,930	131,941	12,453	33,425	0
African American	5,975	74	2,576	1,173	2,152	0	40,724	719	27,595	2,956	9,454	0
Other/unknown	29,060	603	8,103	7,532	12,822	0	147,459	5,760	83,834	18,339	39,526	0
Use of Nursing Facilities^c												
Entire year	438	52	386	0	0	0	5,031	537	4,494	0	0	0
Part year	350	45	305	0	0	0	3,660	448	3,212	0	0	0
None	59,938	1,011	22,154	14,116	22,657	0	361,241	9,424	235,664	33,748	82,405	0
Maintenance Assistance Status												
Cash	26,436	145	19,553	2,773	3,965	0	222,293	1,529	210,819	4,131	5,814	0
Medically needy	55	2	51	2	0	0	469	20	446	3	0	0
Poverty-related	7,921	271	2	872	6,776	0	20,400	2,165	14	1,323	16,898	0
Other/unknown	26,314	690	3,239	10,469	11,916	0	126,770	6,695	32,091	28,291	59,693	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	27,327	1,092	20,008	1,633	4,594	0	285,535	10,322	221,751	10,969	42,493	0
FFS part year, with Rx claims	7,375	11	2,189	2,518	2,657	0	38,070	71	17,172	8,145	12,682	0
FFS part year, no Rx claims	26,024	5	648	9,965	15,406	0	46,327	16	4,447	14,634	27,230	0

Table ND2

Nondual Beneficiaries

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

- a. Table ND.2 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
- c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.3

ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a,b}
NONDUAL BENEFICIARIES, RHODE ISLAND, 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	43.6 %	10.8	\$797	\$74	\$7,023	11.4 %	60,726
Age							
5 and younger	23.7	1.8	111	61	3,988	2.8	8,886
6-14	35.5	4.1	233	56	4,621	5.0	14,303
15-20	35.5	4.4	289	66	8,923	3.2	7,624
21-44	44.6	10.8	866	80	6,663	13.0	19,177
45-64	75.1	32.7	2,451	75	12,235	20.0	9,741
65-74	76.8	20.8	1,327	64	7,642	17.4	573
75-84	77.3	23.3	1,404	60	11,079	12.7	295
85 and older	76.2	32.0	1,780	56	18,218	9.8	126
Unknown	0.0	0.0	0	0	0	0.0	1
Basis of Eligibility^e							
Aged	75.5	18.0	1,104	61	8,119	13.6	1,108
Disabled	78.3	25.7	1,986	77	14,643	13.6	22,845
Adults	22.4	1.4	38	28	1,949	1.9	14,116
Children	20.4	1.4	57	42	2,446	2.3	22,657
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	44.8	12.4	871	70	6,403	13.6	33,505
Male	42.3	8.9	706	79	7,786	9.1	27,221
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	53.3	16.6	1,218	74	9,891	12.3	25,691
African American	45.3	9.2	739	80	7,038	10.5	5,975
Other/unknown	34.8	6.1	437	72	4,483	9.7	29,060
Use of Nursing Facilities^f							
Entire year	84.0	54.3	4,005	74	123,862	3.2	438
Part year	95.1	64.8	4,828	75	78,202	6.2	350
None	43.1	10.2	750	74	5,753	13.0	59,938
Maintenance Assistance Status							
Cash	61.4	19.8	1,546	78	11,122	13.9	26,436
Medically needy	90.9	35.0	4,381	125	30,345	14.4	55
Poverty related	16.3	0.8	38	45	1,299	2.9	7,921
Other/unknown	33.9	4.7	266	56	4,579	5.8	26,314

Table ND3

Nondual Beneficiaries

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

- a. Table ND.3 includes beneficiaries represented by Cell K of Table 1.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. In seven states (DE, IA, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.
- d. In seven states (DE, IA, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.
- e. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2003

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of		Number of Rx, Percentage with:						Mean \$, All Medicaid FFS ^d	Beneficiaries	Benefit Months
			All Medicaid	FFS ^c	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10			
All	1.8	\$131	11.4 %	56.4 %	21.7 %	7.1 %	9.9 %	4.2 %	0.9 %	\$1,153	60,726	369,932	
Age													
5 and younger	0.5	30	2.8	76.3	18.4	3.1	1.9	0.3	0.0	1,075	8,886	32,955	
6-14	0.7	41	5.0	64.5	24.8	5.6	4.6	0.4	0.0	817	14,303	80,874	
15-20	0.8	52	3.2	64.5	23.8	5.5	5.2	0.9	0.1	1,612	7,624	42,207	
21-44	1.9	150	13.0	55.4	20.9	7.7	10.7	4.4	0.8	1,154	19,177	110,756	
45-64	3.4	256	20.0	24.9	19.2	11.9	25.6	14.8	3.5	1,279	9,741	93,211	
65-74	2.2	137	17.4	23.2	32.6	17.1	19.4	6.3	1.4	791	573	5,538	
75-84	2.2	134	12.7	22.7	29.2	15.9	21.4	9.8	1.0	1,053	295	3,104	
85 and older	3.1	174	9.8	23.8	15.1	13.5	27.8	18.3	1.6	1,785	126	1,286	
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	1	
Basis of Eligibility^e													
Aged	1.9	118	13.6	24.5	34.6	16.0	18.2	6.1	0.6	864	1,108	10,409	
Disabled	2.4	186	13.6	21.7	31.3	12.8	21.8	10.2	2.2	1,375	22,845	243,370	
Adults	0.6	16	1.9	77.6	14.0	4.3	3.1	0.7	0.1	815	14,116	33,748	
Children	0.4	16	2.3	79.6	16.1	2.5	1.6	0.2	0.0	673	22,657	82,405	
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
Gender													
Female	2.1	149	13.6	55.2	20.6	7.2	10.5	5.2	1.2	1,091	33,505	196,605	
Male	1.4	111	9.1	57.7	22.9	6.9	9.1	2.9	0.5	1,223	27,221	173,327	
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
Race													
White	2.3	172	12.3	46.7	22.2	8.6	13.8	7.0	1.6	1,398	25,691	181,749	
African American	1.4	109	10.5	54.7	26.0	7.1	8.5	3.0	0.6	1,033	5,975	40,724	
Other/unknown	1.2	86	9.7	65.2	20.3	5.7	6.6	1.9	0.3	884	29,060	147,459	
Use of Nursing Facilities^f													
Entire year	4.7	349	3.2	16.0	7.5	7.8	34.2	26.3	8.2	10,784	438	5,031	
Part year	6.2	462	6.2	4.9	9.7	9.1	28.9	28.6	18.9	7,478	350	3,660	
None	1.7	125	13.0	56.9	21.8	7.1	9.6	3.9	0.7	955	59,938	361,241	
Maintenance Assistance Status													
Cash	2.4	184	13.9	38.6	25.1	9.9	16.6	8.1	1.7	1,323	26,436	222,293	
Medically needy	4.1	514	14.4	9.1	21.8	12.7	30.9	21.8	3.6	3,559	55	469	
Poverty related	0.3	15	2.9	83.7	12.6	2.2	1.2	0.2	0.0	504	7,921	20,400	
Other/unknown	1.0	55	5.8	66.1	20.9	5.7	5.7	1.4	0.2	950	26,314	126,770	

Table ND4

Nondual Beneficiaries

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

- a. Table ND.4 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 - b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - c. In seven states (DE, IA, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.
 - d. In seven states (DE, IA, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.
 - e. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
 - f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.5
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2003

Beneficiary	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	1.8	\$131	\$74	0.9	\$107	\$124	0.0	\$3	\$74	0.9	\$21	\$24
Age												
5 and younger	0.5	30	61	0.2	27	118	0.0	0	32	0.3	3	12
6-14	0.7	41	56	0.4	33	81	0.0	2	93	0.3	6	21
15-20	0.8	52	66	0.4	41	95	0.0	2	82	0.3	9	27
21-44	1.9	150	80	0.9	124	141	0.0	4	75	0.9	22	24
45-64	3.4	256	75	1.6	207	128	0.1	5	72	1.7	43	25
65-74	2.2	137	64	1.1	109	100	0.0	2	52	1.0	26	26
75-84	2.2	134	60	1.1	105	95	0.0	2	47	1.1	26	25
85 and older	3.1	174	56	1.5	137	89	0.1	4	60	1.5	33	22
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	1.9	118	61	1.0	94	98	0.0	2	51	0.9	21	23
Disabled	2.4	186	77	1.2	152	131	0.1	4	77	1.2	30	25
Adults	0.6	16	28	0.3	12	45	0.0	0	34	0.3	4	12
Children	0.4	16	42	0.2	12	61	0.0	0	57	0.2	3	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Gender												
Female	2.1	149	70	1.0	120	119	0.0	3	70	1.0	25	24
Male	1.4	111	79	0.7	92	132	0.0	3	82	0.7	17	25
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	2.3	172	74	1.1	139	124	0.1	5	78	1.2	28	24
African American	1.4	109	80	0.6	90	142	0.0	2	63	0.7	16	23
Other/unknown	1.2	86	72	0.6	71	118	0.0	2	68	0.6	14	24
Use of Nursing Facilities^e												
Entire year	4.7	349	74	2.2	279	124	0.2	12	59	2.3	58	25
Part year	6.2	462	75	2.8	381	136	0.2	9	53	3.2	71	22
None	1.7	125	74	0.8	102	123	0.0	3	76	0.8	20	24
Maintenance Assistance Status												
Cash	2.4	184	78	1.1	150	133	0.1	4	79	1.2	30	25
Medically needy	4.1	514	125	2.0	463	233	0.1	7	61	2.0	43	22
Poverty related	0.3	15	45	0.1	12	85	0.0	0	45	0.2	2	14
Other/unknown	1.0	55	56	0.5	45	88	0.0	1	56	0.4	9	19

Source: Data for this table are from the MAX 2003 file for Rhode Island, 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 Rhode Island, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2003

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users ^e				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	Percentage of All Beneficiaries	As a Percentage of All Beneficiaries	Number of Benefit Months
Anti-infective Agents	0.3	0.2	0.0	0.1	\$35	\$113	\$194	\$71	\$23	\$5,209,938	14,348	23.6%	23.6%	150,015
Biologicals	0.5	0.4	0.0	0.0	604	1268	1,175	2,500	2,040	564,306	96	0.2	0.2	935
Antineoplastic Agents	0.5	0.3	0.0	0.2	145	285	463	53	75	567,426	369	0.6	0.6	3,912
Endocrine/Metabolic Drugs	0.5	0.3	0.0	0.2	34	63	95	34	25	2,722,626	7,628	12.6	12.6	79,800
Cardiovascular Agents	0.8	0.4	0.0	0.4	50	60	96	73	26	4,374,665	8,076	13.3	13.3	87,699
Respiratory Agents	0.6	0.4	0.0	0.2	32	4	50	68	16	3,745,197	11,052	18.2	18.2	115,662
Gastrointestinal Agents	0.6	0.3	0.0	0.3	53	37	2	137	291	3,861,031	6,634	10.9	10.9	72,829
Genitourinary Agents	0.3	0.2	0.0	0.1	15	49	61	47	14	323,114	1,973	3.2	3.2	21,024
CNS Drugs	1.2	0.6	0.0	0.6	107	88	140	124	27	14,033,770	12,330	20.3	20.3	130,812
Stimulants/Anti-obesity/Anorexia	0.7	0.5	0.0	0.2	39	57	68	55	33	1,014,709	2,565	4.2	4.2	25,689
Miscellaneous Psychological/Neurological Agents	0.5	0.4	0.0	0.0	70	151	165	0	34	98,712	128	0.2	0.2	1,404
Analgesics and Anesthetics	0.6	0.2	0.0	0.5	34	53	158	59	15	4,391,055	12,070	19.9	19.9	127,958
Neuromuscular Agents	0.8	0.4	0.0	0.4	57	72	130	63	18	4,355,766	6,942	11.4	11.4	76,040
Nutritional Products	0.4	0.0	0.0	0.3	8	24	30	36	23	107,707	1,378	2.3	2.3	12,731
Hematological Agents	0.5	0.2	0.0	0.3	82	158	437	30	18	1,270,472	1,413	2.3	2.3	15,480
Topical Products	0.3	0.1	0.0	0.2	12	40	61	48	22	1,262,321	9,667	15.9	15.9	102,761
Miscellaneous Products	0.2	0.2	0.0	0.1	39	158	199	220	56	425,640	1,031	1.7	1.7	10,892
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	9	46	0	0	0	77,738	836	1.4	1.4	8,797
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	48,406,193	n.a.	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Rhode Island, 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 Rhode Island, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

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

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

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2003

Top 10 Drug Groups	Users			Among Users		
	Total Medicaid Rx \$	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	Rx \$ per Benefit
						Month
ANTIPSYCHOTICS	\$7,892,133	6,169	10.2 %	69,276	0.6	\$183
ANTIDEPRESSANTS	5,099,414	13,096	21.6	144,136	0.6	64
ANTICONVULSANT	3,962,433	6,207	10.2	69,710	0.7	85
ANTIVIRAL	3,407,963	1,472	2.4	16,491	0.5	445
ULCER DRUGS	3,030,303	6,420	10.6	72,432	0.4	94
ANALGESICS - Narcotic	2,608,477	11,215	18.5	125,098	0.4	53
ANTIASTHMATIC	2,293,464	10,660	17.6	117,448	0.4	53
ANTHYPERLIPIDEMIC	1,774,164	3,375	5.6	38,243	0.5	86
ANTIDIABETIC	1,731,234	3,869	6.4	43,551	0.5	77
ANALGESICS - ANTI-INFLAMMATORY	1,182,847	8,541	14.1	95,037	0.3	46
Total	32,982,432	71,024		791,422	n.a.	n.a.

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

a. Table ND.7 includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2003. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE ND.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2003

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	
All	370,298	\$32,982,432	6,169	10.2 %	69,276	\$114	13,096	21.6 %	144,136	\$35					
Female															
Disabled	235,610	19,913,006	3,442	10.3	38,695	106	8,692	25.9	96,049	35					
5 and younger	220,807	19,134,836	3,240	27.9	36,803	108	7,816	67.2	88,635	37					
6-14	1,300	73,938	3	0.6	33	39	5	1.0	60	7					
15-20	5,146	386,474	88	7.7	939	73	181	15.8	1,911	26					
21-44	5,367	364,161	123	14.8	1,357	55	260	31.3	2,779	29					
45-64	75,503	6,901,534	1,572	38.7	17,698	100	3,206	78.8	35,996	36					
65-74	131,278	11,234,516	1,439	28.9	16,622	123	4,126	82.8	47,450	39					
75-84	1,996	160,735	14	16.7	142	97	32	38.1	367	30					
85 and older	217	13,478	1	11.1	12	106	6	66.7	72	36					
0	0	0	0	0.0	0	0	0	0.0	0	0					
Other Eligibles	14,803	778,170	202	0.9	1,892	71	876	4.0	7,414	19					
5 and younger	388	10,696	1	0.0	12	103	4	0.1	38	8					
6-14	1,855	81,675	34	0.7	336	77	76	1.5	809	21					
15-20	1,528	96,410	51	1.7	499	73	106	3.5	939	20					
21-44	4,443	132,536	40	0.5	278	29	440	5.3	3,186	13					
45-64	2,047	95,110	26	2.5	223	15	142	13.4	1,220	25					
65-74	1,939	158,176	8	2.8	77	128	41	14.2	469	23					
75-84	1,436	114,275	19	11.7	212	135	34	20.9	389	23					
85 and older	1,167	89,292	23	27.7	255	79	33	39.8	364	40					
Male															
Disabled	134,688	13,069,426	2,727	10.0	30,581	123	4,404	16.2	48,087	35					
5 and younger	124,433	12,477,395	2,523	22.5	28,541	126	3,978	35.5	44,121	36					
6-14	2,558	136,728	12	1.5	123	47	16	2.0	150	20					
15-20	11,666	825,871	335	13.8	3,698	79	479	19.8	5,128	27					
21-44	7,364	661,815	257	18.2	2,800	100	304	21.5	3,259	33					
45-64	45,697	5,177,722	1,218	34.7	13,945	135	1,686	48.1	18,820	39					
65-74	56,198	5,605,521	694	23.1	7,898	143	1,477	49.1	16,572	37					
75-84	653	48,456	5	11.4	60	89	11	25.0	132	51					
85 and older	287	20,765	1	8.3	12	6	5	41.7	60	39					
10	10	517	1	50.0	5	8	0	0.0	0	0					
Other Eligibles	10,255	592,031	204	1.3	2,040	86	426	2.7	3,966	26					
5 and younger	901	28,600	7	0.2	74	15	4	0.1	43	39					
6-14	3,799	242,406	113	2.0	1,234	88	173	3.1	1,770	28					
15-20	1,447	100,237	46	2.0	402	113	96	4.1	928	29					
21-44	1,178	34,547	14	0.4	105	57	77	2.3	517	16					
45-64	481	18,463	2	0.3	10	44	21	3.0	105	26					
65-74	1,072	71,630	10	6.4	110	75	17	10.8	198	18					
75-84	975	63,191	6	5.4	48	43	26	23.4	285	27					
85 and older	402	32,957	6	15.8	57	79	12	31.6	120	26					
Unknown	0	0	0	0.0	0	0	0	0.0	0	0					

Table ND7A

Nondual Beneficiaries

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

a. Table ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2003. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a,b,c}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2003

Beneficiary Characteristics	ANTICONVULSANT				ANTIVIRAL				ULCER DRUGS			
	Number of Users	Users as % of All Benefes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Number of Users	Users as % of All Benefes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month	Number of Users	Users as % of All Benefes	Number of Benefit Months Among Users	Mean of Rx per Benefit Month
All	6,207	10.2 %	69,710	0.7	1,472	2.4 %	16,491	0.5	6,420	10.6 %	72,432	0.4
Female	3,721	11.1	41,741	0.7	822	2.5	9,215	0.4	4,321	12.9	48,919	0.4
Disabled	3,493	30.0	39,770	0.7	760	6.5	8,708	0.4	3,858	33.2	44,373	0.4
5 and younger	35	7.0	402	0.3	11	2.2	117	1.0	68	13.5	694	0.3
6-14	203	17.7	2,244	0.7	9	0.8	108	0.4	81	7.1	891	0.4
15-20	172	20.7	1,914	0.7	16	1.9	180	0.1	123	14.8	1,377	0.3
21-44	1,521	37.4	17,242	0.7	398	9.8	4,570	0.4	1,176	28.9	13,426	0.4
45-64	1,544	31.0	17,783	0.7	324	6.5	3,709	0.5	2,368	47.5	27,506	0.5
65-74	16	19.0	161	1.0	2	2.4	24	0.7	36	42.9	407	0.6
75-84	2	22.2	24	0.1	0	0.0	0	0.0	6	66.7	72	0.5
85 and older	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
Other Eligibles	228	1.0	1,971	0.5	62	0.3	507	0.2	463	2.1	4,546	0.3
5 and younger	3	0.1	36	0.4	0	0.0	0	0.0	14	0.4	128	0.2
6-14	33	0.6	339	0.6	11	0.2	118	0.1	26	0.5	276	0.3
15-20	37	1.2	343	0.5	8	0.3	84	0.2	30	1.0	248	0.4
21-44	85	1.0	558	0.5	34	0.4	244	0.3	158	1.9	1,406	0.2
45-64	25	2.4	220	0.4	7	0.7	50	0.2	72	6.8	687	0.3
65-74	13	4.5	142	0.4	2	0.7	11	0.3	82	28.5	887	0.3
75-84	22	13.5	213	0.6	0	0.0	0	0.0	46	28.2	516	0.4
85 and older	10	12.0	120	0.6	0	0.0	0	0.0	35	42.2	398	0.6
Male	2,486	9.1	27,969	0.7	650	2.4	7,276	0.5	2,099	7.7	23,513	0.5
Disabled	2,331	20.8	26,418	0.7	627	5.6	7,050	0.5	1,874	16.7	21,354	0.5
5 and younger	63	7.8	700	0.5	7	0.9	84	0.3	17	13.7	1,190	0.4
6-14	345	14.2	3,894	0.6	23	0.9	267	0.3	108	4.5	1,242	0.5
15-20	230	16.3	2,549	0.7	14	1.0	166	0.3	94	6.6	1,035	0.5
21-44	967	27.6	10,990	0.7	273	7.8	2,992	0.5	572	16.3	6,605	0.4
45-64	722	24.0	8,237	0.6	309	10.3	3,529	0.5	962	32.0	10,975	0.5
65-74	2	4.5	24	0.7	1	2.3	12	0.1	17	38.6	204	0.4
75-84	2	16.7	24	0.6	0	0.0	0	0.0	9	75.0	98	0.6
85 and older	0	0.0	0	0.0	0	0.0	0	0.0	1	50.0	5	0.2
Other Eligibles	155	1.0	1,551	0.6	23	0.1	226	0.7	225	1.4	2,159	0.4
5 and younger	5	0.1	55	0.4	3	0.1	36	0.9	28	0.7	236	0.3
6-14	65	1.2	715	0.7	7	0.1	83	1.2	42	0.8	433	0.3
15-20	36	1.5	347	0.6	5	0.2	34	0.2	25	0.9	203	0.2
21-44	22	0.7	155	0.3	3	0.1	29	0.4	13	1.0	275	0.4
45-64	8	1.2	66	0.3	3	0.4	20	0.3	12	2.6	114	0.4
65-74	8	5.1	93	0.7	1	0.6	12	0.3	12	23.6	409	0.4
75-84	7	6.3	78	0.5	1	0.9	12	0.1	17	25.2	312	0.5
85 and older	4	10.5	42	0.8	0	0.0	0	0.0	16	42.1	177	0.6
Unknown	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

Table ND7B

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Rhode Island, 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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a,b,c}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2003

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIASTHMATIC					ANTHYPERLIPIDEMIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Mean Number of Rx per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Mean Number of Rx per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx \$ per Benefit Month	Mean Number of Rx per Benefit Month
All	11,215	18.5 %	125,098	\$21	0.4	10,660	17.6 %	117,448	\$20	0.4	3,375	5.6 %	38,243	\$46	0.5
Female	7,202	21.5	80,469	19	0.4	6,728	20.1	74,960	20	0.4	2,165	6.5	24,670	48	0.5
Disabled	6,334	54.5	72,663	20	0.4	5,818	50.0	66,528	22	0.4	1,965	16.9	22,690	49	0.5
5 and younger	25	5.0	263	1	0.1	217	43.2	2,264	11	0.3	1	0.2	12	0.2	0.2
6-14	66	5.8	720	1	0.2	340	29.7	3,727	0.3	0.3	1	0.1	8	0.1	0
15-20	158	19.0	1,743	4	0.2	192	23.1	2,058	13	0.3	4	0.5	46	0.2	0.2
21-44	2,686	66.1	30,579	17	0.4	1,870	46.0	21,409	19	0.3	302	7.4	3,404	0.5	0.4
45-64	3,369	67.6	39,018	24	0.4	3,159	63.4	36,609	25	0.4	1,618	32.5	18,761	0.6	0.5
65-74	25	29.8	280	32	0.7	40	47.6	461	36	0.5	36	42.9	423	0.7	0.6
75-84	5	55.6	60	2	0.2	0	0.0	0	0	0.0	3	33.3	36	0.7	0.6
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	868	4.0	7,806	5	0.2	910	4.2	8,432	9	0.3	200	0.9	1,980	0.5	0.3
5 and younger	18	0.5	167	1	0.1	129	3.4	1,110	7	0.2	0	0.0	0	0.0	0
6-14	48	0.9	506	4	0.1	256	4.9	2,551	7	0.3	0	0.0	0	0.0	0
15-20	92	3.0	887	3	0.1	111	3.7	1,064	10	0.2	0	0.0	0	0.0	0
21-44	441	5.3	3,620	2	0.2	279	3.4	2,291	7	0.3	40	0.5	293	0.5	0.1
45-64	140	13.3	1,262	8	0.2	61	5.8	562	16	0.3	38	3.6	331	0.5	0.3
65-74	61	21.2	655	2	0.2	23	8.0	264	18	0.3	79	27.4	858	0.4	0.4
75-84	41	25.2	437	15	0.2	30	18.4	365	15	0.2	33	20.2	388	0.5	0.4
85 and older	27	32.5	272	36	0.5	21	25.3	235	19	0.4	10	12.0	110	0.7	0.4
Male	4,013	14.7	44,629	25	0.4	3,932	14.4	42,488	18	0.4	1,210	4.4	13,573	0.5	0.4
Disabled	3,635	32.4	41,159	27	0.4	3,122	27.8	34,865	20	0.4	1,076	9.6	12,311	0.5	0.4
5 and younger	47	5.8	526	3	0.1	406	50.2	4,246	12	0.3	1	0.1	12	0.2	0.2
6-14	160	6.6	1,740	1	0.1	763	31.5	8,393	14	0.3	2	0.1	20	0.2	0.2
15-20	181	12.8	1,962	2	0.1	276	19.5	3,001	17	0.3	2	0.1	16	0.3	0.3
21-44	1,499	42.7	17,050	23	0.4	623	17.8	7,156	20	0.3	253	7.2	2,947	0.4	0.3
45-64	1,724	57.3	19,609	36	0.5	1,030	34.2	11,818	27	0.5	797	26.5	9,068	0.6	0.4
65-74	15	34.1	171	34	0.6	19	43.2	201	24	0.5	16	36.4	188	0.4	0.4
75-84	8	66.7	96	14	0.4	5	41.7	50	34	0.6	5	41.7	60	1.0	0.7
85 and older	1	50.0	5	1	0.2	0	0.0	0	0	0.0	0	0.0	0	0.0	0
Other Eligibles	378	2.4	3,470	4	0.2	810	5.1	7,623	10	0.3	134	0.8	1,262	0.5	0.3
5 and younger	18	0.5	180	1	0.1	235	6.2	2,080	10	0.3	0	0.0	0	0.0	0
6-14	69	1.2	737	1	0.1	366	6.6	3,564	9	0.3	0	0.0	0	0.0	0
15-20	60	2.6	569	1	0.1	90	3.8	840	8	0.2	1	0.0	1	1.0	0.3
21-44	117	3.6	872	4	0.3	57	1.7	467	7	0.3	30	0.9	227	0.4	0.4
45-64	34	4.9	241	10	0.3	5	0.7	20	16	0.4	33	4.8	232	0.5	0.5
65-74	46	29.3	488	8	0.2	24	15.3	283	19	0.4	40	25.5	451	0.4	0.4
75-84	21	18.9	245	4	0.2	18	16.2	204	26	0.4	24	21.6	285	0.6	0.5
85 and older	13	34.2	138	4	0.2	15	39.5	165	14	0.4	6	15.8	66	0.4	0.4
Unknown	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0.0	0

Table ND7C

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Rhode Island, 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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2003

Beneficiary Characteristics	ANTI-DIABETIC				ANALGESICS - ANTI-INFLAMMATORY							
	Number of Users	Users as % of All Beneficiaries	Number of Months Among Users	Mean of Rx per Benefit Month	Users as % of All Beneficiaries	Number of Months Among Users	Mean of Rx per Benefit Month	Number of Beneficiaries	Number of Benefit Months			
										0.5	\$40	8,541
All	3,869	6.4 %	43,551	0.5	\$40	8,541	14.1 %	95,037	0.3	\$12	60,726	369,932
Female	2,612	7.8	29,583	0.5	41	5,812	17.3	64,758	0.3	14	33,504	196,604
Disabled	2,361	20.3	27,176	0.5	42	4,879	42.0	56,117	0.3	15	11,626	125,280
5 and younger	3	0.6	36	0.2	6	56	11.2	570	0.2	3	502	4,747
6-14	13	1.1	143	0.6	34	129	11.3	1,379	0.2	8	1,145	11,796
15-20	16	1.9	178	0.4	24	177	21.3	1,936	0.2	3	832	8,562
21-44	435	10.7	4,933	0.5	38	1,795	44.1	20,626	0.3	10	4,066	44,051
45-64	1,845	37.0	21,329	0.5	43	2,686	53.9	31,187	0.3	20	4,985	55,063
65-74	42	50.0	473	0.6	46	33	39.3	383	0.6	36	84	923
75-84	7	77.8	84	0.8	37	3	33.3	36	0.4	27	9	102
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	36
Other Eligibles	251	1.1	2,407	0.5	30	933	4.3	8,641	0.2	7	21,878	71,324
5 and younger	2	0.1	2	1.5	31	38	1.0	346	0.1	1	3,758	10,159
6-14	6	0.1	56	0.7	21	106	2.0	1,030	0.2	2	5,185	20,933
15-20	5	0.2	33	1.0	48	99	3.3	908	0.2	1	3,026	9,809
21-44	60	0.7	505	0.5	19	410	4.9	3,443	0.2	2	8,319	21,120
45-64	38	3.6	303	0.5	25	115	10.9	1,093	0.3	7	1,056	4,039
65-74	85	29.5	884	0.5	36	102	35.4	1,118	0.3	22	288	2,702
75-84	39	23.9	451	0.6	32	46	28.2	516	0.3	20	163	1,746
85 and older	16	19.3	173	0.6	34	17	20.5	187	0.3	19	83	816
Male	1,257	4.6	13,968	0.5	38	2,729	10.0	30,279	0.2	9	27,221	173,327
Disabled	1,120	10.0	12,706	0.5	39	2,341	20.9	26,642	0.3	10	11,219	118,090
5 and younger	6	0.7	72	0.5	29	74	9.2	761	0.2	3	808	7,629
6-14	15	0.6	176	0.7	38	198	8.2	2,091	0.2	2	2,422	25,154
15-20	12	0.8	131	0.6	56	157	11.1	1,689	0.2	2	1,414	14,530
21-44	231	6.6	2,649	0.5	39	817	23.3	9,403	0.2	5	3,508	38,044
45-64	835	27.8	9,441	0.5	40	1,076	35.8	12,477	0.3	15	3,009	32,113
65-74	16	36.4	184	0.6	30	11	25.0	132	0.4	19	44	470
75-84	4	33.3	48	0.5	16	7	58.3	84	0.3	26	12	134
85 and older	1	50.0	5	0.4	11	1	50.0	5	0.6	43	2	16
Other Eligibles	137	0.9	1,262	0.5	25	388	2.4	3,637	0.2	5	16,002	55,237
5 and younger	2	0.1	24	0.3	5	51	1.3	439	0.2	1	3,818	10,420
6-14	3	0.1	18	0.8	23	91	1.6	904	0.2	2	5,551	22,991
15-20	3	0.1	22	0.8	50	64	2.7	616	0.1	1	2,352	9,306
21-44	21	0.6	126	0.7	20	86	2.6	733	0.2	3	3,284	7,541
45-64	25	3.6	185	0.6	17	34	4.9	263	0.2	11	691	1,996
65-74	43	27.4	444	0.4	30	36	22.9	382	0.3	14	157	1,443
75-84	34	30.6	383	0.5	25	23	20.7	264	0.3	20	111	1,122
85 and older	6	15.8	60	0.4	32	3	7.9	36	0.7	42	38	418
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Rhode Island, 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, RHODE ISLAND, 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	\$349	4.7	438	5,031
Age				
0-64	354	4.6	377	4,386
65-74	273	6.2	11	132
75-84	280	5.1	22	229
85 and older	350	5.8	28	284
Unknown	0	0.0	0	0
Gender				
Female	377	5.1	219	2,512
Male	321	4.3	219	2,519
Unknown	0	0.0	0	0
Race				
White	345	4.8	339	3,926
African American	528	5.6	31	366
Other/unknown	281	4.1	68	739
Basis of Eligibility^c				
Aged	324	5.5	52	537
Disabled	352	4.6	386	4,494
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 Rhode Island, 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 350 beneficiaries who were in nursing facilities for part of their enrollment and their 3,660 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE ND.9

**MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
NONDUAL BENEFICIARIES, RHODE ISLAND, 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	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	
																	Patented Brand-Name
Anti-infective Agents	0.3	0.2	0.0	0.2	\$23	\$17	\$0	\$6	\$72	\$102	\$140	\$40	792	\$57,154	212	48.4 %	2,449
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.5	0.0	0.0	0.5	63	0	0	63	120	0	0	120	53	6,337	10	2.3	101
Endocrine/Metabolic Drugs	0.9	0.4	0.1	0.4	57	47	2	8	63	112	32	18	1,554	98,220	147	33.6	1,735
Cardiovascular Agents	1.6	0.6	0.0	1.0	57	41	1	15	36	73	26	16	3,040	109,784	169	38.6	1,922
Respiratory Agents	0.8	0.6	0.1	0.1	49	42	5	2	60	67	74	15	1,424	84,834	150	34.2	1,748
Gastrointestinal Agents	1.1	0.4	0.0	0.6	79	51	3	26	71	115	132	40	2,210	157,160	173	39.5	1,993
Genitourinary Agents	0.6	0.5	0.0	0.1	39	37	1	1	66	72	62	17	344	22,840	50	11.4	585
CNS Drugs	1.8	0.9	0.0	0.8	173	145	4	24	97	156	131	29	6,140	595,399	295	67.4	3,438
Stimulants/Anti-obesity/Anorexia	0.7	0.0	0.0	0.7	18	0	0	18	25	0	0	25	18	457	3	0.7	26
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	99	99	0	0	122	122	0	0	88	10,718	10	2.3	108
Analgesics and Anesthetics	0.8	0.3	0.0	0.4	70	64	1	5	87	191	30	12	1,334	116,288	144	32.9	1,652
Neuromuscular Agents	1.5	0.8	0.1	0.6	144	121	4	19	97	153	51	31	3,696	358,910	213	48.6	2,489
Nutritional Products	0.7	0.0	0.0	0.7	13	0	2	11	17	0	113	15	307	5,250	37	8.4	417
Hematological Agents	1.0	0.2	0.2	0.6	52	44	3	5	51	211	15	8	775	39,149	66	15.1	748
Topical Products	0.7	0.3	0.1	0.3	31	20	4	7	46	67	66	23	1,962	89,863	250	57.1	2,921
Miscellaneous Products	0.4	0.1	0.0	0.3	19	11	0	9	48	74	0	33	31	1,478	7	1.6	76
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	4	0	0	0	37	0	0	0	8	293	6	1.4	72
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.	23,776	1,754,134	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2003 file for Rhode Island, 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 350 beneficiaries who were in nursing facilities for part of their enrollment and their 3,660 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.medisp.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 Rhode Island, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

TABLE ND.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 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	\$375,498	215	49.1 %	2,512	0.9	\$168	\$149	
ANTICONVULSANT	339,267	270	61.6	3,187	1.0	106	106	
ANTIDEPRESSANTS	188,417	257	58.7	2,983	0.9	73	63	
ULCER DRUGS	121,179	154	35.2	1,783	0.8	88	68	
ANALGESICS - Narcotic	87,875	97	22.1	1,099	0.7	116	80	
DERMATOLOGICAL	59,285	404	92.2	4,751	0.3	45	12	
ANTIHYPERTENSIVE	49,912	70	16.0	807	0.8	81	62	
MISC. ENDOCRINE	43,446	34	7.8	400	0.7	147	109	
ANTIASTHMATIC	37,983	98	22.4	1,147	0.5	63	33	
ANTIHISTAMINES	30,376	90	20.5	1,075	0.5	60	28	
Total	1,333,238	1,689		19,744	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2003 file for Rhode Island, 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 350 beneficiaries who were in nursing facilities for part of their enrollment and their 3,660 benefit months were excluded from the analysis.
 - b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2003. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 - c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - d. The top 10 drug groups were determined based on total 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10A

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d} NONDUAL BENEFICIARIES, RHODE ISLAND, 2003

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTICONVULSANT						
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	13,491	\$1,333,238	215	49.1 %	2,512	0.9	\$150	270	61.6 %	3,187	1.0	\$107					
Female	7,294	722,422	124	56.6	1,454	0.9	152	142	64.8	1,668	1.0	102					
Disabled	6,374	639,620	102	54.8	1,202	0.9	157	130	69.9	1,540	1.0	107					
64 or younger	6,262	634,736	102	56.7	1,202	0.9	157	130	72.2	1,540	1.0	107					
65-74	88	4,472	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
75-84	24	412	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	920	82,802	22	66.7	252	0.7	129	12	36.4	128	0.7	45					
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	23	3,566	1	100.0	12	1.0	240	0	0.0	0	0.0	0					
75-84	268	29,179	8	72.7	96	0.6	159	7	63.6	68	0.7	39					
85 and older	629	50,057	13	61.9	144	0.7	99	5	23.8	60	0.8	52					
Male	6,197	610,816	91	41.6	1,058	0.9	146	128	58.4	1,519	1.0	111					
Disabled	5,725	576,328	83	41.5	975	0.9	148	123	61.5	1,459	1.0	112					
64 or younger	5,588	567,473	79	40.1	927	0.9	153	122	61.9	1,447	1.0	113					
65-74	137	8,855	4	133.3	48	0.5	45	1	33.3	12	1.0	41					
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	472	34,488	8	42.1	83	0.8	122	5	26.3	60	1.0	79					
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	80	7,207	1	50.0	12	1.6	343	2	100.0	24	1.5	59					
75-84	219	12,472	3	30.0	26	0.4	60	2	20.0	24	0.5	10					
85 and older	173	14,809	4	57.1	45	0.9	100	1	14.3	12	0.9	255					
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 Rhode Island, 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 350 beneficiaries who were in nursing facilities for part of their enrollment and their 3,660 benefit months were excluded from the analysis.
- b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2003. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- d. The top 10 drug groups were determined based on total 2003 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

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

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANALGESICS - Narcotic				
	Number of Users	% of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	% of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	% of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	257	58.7 %	2,983	0.9	\$63	154	35.2 %	1,783	0.8	\$68	97	22.1 %	1,099	0.7	\$80
Female	145	66.2	1,704	0.8	60	72	32.9	845	0.8	66	58	26.5	660	0.8	86
Disabled	121	65.1	1,426	0.9	63	56	30.1	665	0.7	68	48	25.8	564	0.8	81
64 or younger	119	66.1	1,402	0.9	63	52	28.9	617	0.7	71	44	24.4	516	0.8	89
65-74	2	40.0	24	0.2	14	2	40.0	24	1.0	51	1	20.0	12	0.2	1
75-84	0	0.0	0	0.0	0	2	200.0	24	0.5	10	3	300.0	36	0.2	3
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	24	72.7	278	0.8	47	16	48.5	180	0.9	58	10	30.3	96	0.8	110
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	7	63.6	84	0.6	33	6	54.5	72	0.8	33	2	18.2	16	0.9	254
85 and older	17	81.0	194	0.9	53	10	47.6	108	0.9	74	8	38.1	80	0.7	81
Male	112	51.1	1,279	0.9	67	82	37.4	938	0.8	70	39	17.8	439	0.6	72
Disabled	101	50.5	1,159	0.9	70	72	36.0	827	0.8	70	35	17.5	401	0.6	78
64 or younger	99	50.3	1,135	0.9	70	69	35.0	791	0.8	71	35	17.8	401	0.6	78
65-74	2	66.7	24	1.0	74	3	100.0	36	0.9	37	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	11	57.9	120	0.8	38	10	52.6	111	0.7	71	4	21.1	38	0.2	3
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1	50.0	12	0.1	0	2	100.0	24	0.7	55	0	0.0	0	0.0	0
75-84	6	60.0	60	0.9	48	5	50.0	54	0.7	71	1	10.0	8	0.8	3
85 and older	4	57.1	48	0.9	36	3	42.9	33	0.7	82	3	42.9	30	0.1	3
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 Rhode Island, 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 350 beneficiaries who were in nursing facilities for part of their enrollment and their 3,660 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 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, RHODE ISLAND, 2003

Beneficiary Characteristics	DERMATOLOGICAL					ANTIHYPERLIPIDEMIC					MISC. ENDOCRINE				
	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	404	92.2 %	4,751	0.3	\$13	70	16.0 %	807	0.8	\$62	34	7.8 %	400	0.7	\$109
Female	203	92.7	2,367	0.3	13	36	16.4	413	0.8	59	26	11.9	309	0.8	80
Disabled	171	91.9	2,040	0.3	14	33	17.7	387	0.8	60	19	10.2	228	0.8	94
64 or younger	163	90.6	1,944	0.3	14	31	17.2	363	0.8	61	19	10.6	228	0.8	94
65-74	6	120.0	72	0.2	6	2	40.0	24	0.6	48	0	0.0	0	0.0	0
75-84	2	200.0	24	0.2	3	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	32	97.0	327	0.2	11	3	9.1	26	0.7	44	7	21.2	81	0.7	41
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	12	0.9	57
75-84	9	81.8	108	0.1	4	0	0.0	0	0.0	0	2	18.2	24	0.6	41
85 and older	23	109.5	219	0.3	14	3	14.3	26	0.7	44	4	19.0	45	0.6	37
Male	201	91.8	2,384	0.3	12	34	15.5	394	0.8	65	8	3.7	91	0.6	206
Disabled	187	93.5	2,238	0.3	12	31	15.5	361	0.7	65	7	3.5	79	0.6	232
64 or younger	184	93.4	2,202	0.3	12	30	15.2	349	0.7	64	7	3.6	79	0.6	232
65-74	3	100.0	36	0.2	9	1	33.3	12	0.8	79	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	14	73.7	146	0.3	12	3	15.8	33	1.1	64	1	5.3	12	0.6	40
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	10	100.0	98	0.4	13	2	20.0	24	1.2	66	0	0.0	0	0.0	0
85 and older	4	57.1	48	0.2	11	1	14.3	9	1.0	59	1	14.3	12	0.6	40
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2003 file for Rhode Island, 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 350 beneficiaries who were in nursing facilities for part of their enrollment and their 3,660 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^{a, b, c, d} NONDUAL BENEFICIARIES, RHODE ISLAND, 2003

Beneficiary Characteristics	ANTI-ASTHMATIC					ANTI-HISTAMINES						
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	98	22.4 %	1,147	0.5	\$33	90	20.5 %	1,075	0.5	\$28	438	5,031
Female	62	28.3	721	0.5	33	41	18.7	492	0.4	24	219	2,512
Disabled	50	26.9	588	0.5	37	39	21.0	468	0.4	23	186	2,178
64 or younger	49	27.2	576	0.5	36	38	21.1	456	0.4	23	180	2,106
65-74	1	20.0	12	1.5	78	1	20.0	12	0.9	35	5	60
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	12	36.4	133	0.4	16	2	6.1	24	0.5	30	33	334
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
75-84	3	27.3	36	0.4	17	1	9.1	12	0.1	8	11	116
85 and older	9	42.9	97	0.4	15	1	4.8	12	0.9	51	21	206
Male	36	16.4	426	0.6	34	49	22.4	583	0.5	32	219	2,519
Disabled	29	14.5	348	0.6	37	45	22.5	535	0.6	33	200	2,316
64 or younger	28	14.2	336	0.6	35	44	22.3	523	0.5	33	197	2,280
65-74	1	33.3	12	1.1	86	1	33.3	12	1.0	64	3	36
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	7	36.8	78	0.6	22	4	21.1	48	0.4	20	19	203
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	1	50.0	12	0.6	30	0	0.0	0	0.0	0	2	24
75-84	3	30.0	30	0.8	27	3	30.0	36	0.2	8	10	101
85 and older	3	42.9	36	0.4	15	1	14.3	12	0.9	56	7	78
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 Rhode Island, 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 350 beneficiaries who were in nursing facilities for part of their enrollment and their 3,660 benefit months were excluded from the analysis.

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

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

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

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

TABLE ND.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 RHODE ISLAND, 2003

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx	
								All Nondual Rx \$	2.4 %
All	11,894	19.6 %	1.2	74,914	\$19	\$1,167,458	\$16		60,726
Age									
5 and younger	846	9.5	0.3	2,598	4	32,107	12		8,886
6-14	1,426	10.0	0.3	3,988	7	95,866	24		14,303
15-20	726	9.5	0.3	2,470	14	104,799	42		7,624
21-44	3,937	20.5	1.3	25,000	18	341,862	14		19,177
45-64	4,561	46.8	4.0	38,739	58	569,529	15		9,741
65-74	231	40.3	1.9	1,097	20	11,572	11		573
75-84	112	38.0	2.1	632	22	6,568	10		295
85 and older	55	43.7	3.1	390	41	5,155	13		126
Unknown	0	0.0	0.0	0	0	0	0		1
Basis of Eligibility^c									
Aged	393	35.5	1.6	1,824	19	21,586	12		1,108
Disabled	9,531	41.7	3.0	69,174	48	1,099,676	16		22,845
Adults	844	6.0	0.1	1,762	2	22,994	13		14,116
Children	1,126	5.0	0.1	2,154	1	23,202	11		22,657
Unknown	0	0.0	0.0	0	0	0	0		0
Gender									
Female	7,550	22.5	1.5	50,769	24	818,254	16		33,505
Male	4,344	16.0	0.9	24,145	13	349,204	14		27,221
Unknown	0	0.0	0.0	0	0	0	0		0
Race									
White	6,678	26.0	2.0	51,625	33	836,164	16		25,691
African American	1,042	17.4	0.9	5,371	11	66,781	12		5,975
Other/unknown	4,174	14.4	0.6	17,918	9	264,513	15		29,060
Use of Nursing Facilities^d									
Entire year	284	64.8	7.5	3,293	76	33,234	10		438
Part year	270	77.1	7.4	2,587	96	33,566	13		350
None	11,340	18.9	1.2	69,034	18	1,100,658	16		59,938
Maintenance Assistance Status									
Cash	8,612	32.6	2.4	63,077	38	1,013,775	16		26,436
Medically needy	26	47.3	2.5	138	43	2,360	17		55
Poverty related	383	4.8	0.1	840	1	7,618	9		7,921
Other/unknown	2,873	10.9	0.4	10,859	5	143,705	13		26,314

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Rhode Island, 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}
 RHODE ISLAND, 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	\$16	\$0	\$1	369,932
Age						
5 and younger	0.1	1	12	0	0	32,955
6-14	0.0	1	24	0	0	80,874
15-20	0.1	2	42	0	0	42,207
21-44	0.2	3	14	0	2	110,756
45-64	0.4	6	15	0	3	93,211
65-74	0.2	2	11	0	1	5,538
75-84	0.2	2	10	0	1	3,104
85 and older	0.3	4	13	0	2	1,286
Unknown	0.0	0	0	0	0	1
Basis of Eligibility^c						
Aged	0.2	2	12	0	1	10,409
Disabled	0.3	5	16	0	2	243,370
Adults	0.1	1	13	0	0	33,748
Children	0.0	0	11	0	0	82,405
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.3	4	16	0	2	196,605
Male	0.1	2	14	0	1	173,327
Unknown	0.0	0	0	0	0	0
Race						
White	0.3	5	16	0	2	181,749
African American	0.1	2	12	0	1	40,724
Other/unknown	0.1	2	15	0	1	147,459
Use of Nursing Facilities^d						
Entire year	0.7	7	10	0	3	5,031
Part year	0.7	9	13	0	3	3,660
None	0.2	3	16	0	1	361,241
Maintenance Assistance Status						
Cash	0.3	5	16	0	2	222,293
Medically needy	0.3	5	17	0	3	469
Poverty related	0.0	0	9	0	0	20,400
Other/unknown	0.1	1	13	0	0	126,770

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

- a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2003.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
- c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.13
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
 RHODE ISLAND, 2003

Drug Category	Number of Users	Rx \$ per User	Rx \$ as a Percentage of All Part D		Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D	
			Total Rx \$	Excluded Rx \$			Excluded Rx	Excluded Rx
All	16,991	\$69	\$1,167,458	100.0 %	74,914	\$16	100.0 %	
Anorexia or weight loss/gain	15	197	2,952	0.3	40	74	0.1	
Fertility drugs	1	7	7	0.0	1	7	0.0	
Drugs for cosmetic purposes	25	12	296	0.0	34	9	0.0	
Cough and cold medications	4,346	55	237,861	20.4	9,669	25	12.9	
Vitamins and minerals	811	110	89,532	7.7	3,698	24	4.9	
Non-prescription drugs	6,033	17	100,350	8.6	21,820	5	29.1	
Barbiturates	286	62	17,810	1.5	2,741	6	3.7	
Benzodiazepines	4,699	112	527,044	45.1	33,497	16	44.7	
Other Part D Excl Rx Drugs	775	247	191,606	16.4	3,414	56	4.6	

Source: Data for this table are from the MAX 2003 file for Rhode Island, 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, RHODE ISLAND, 2003

Beneficiary Characteristics	Number of Beneficiaries					Number of Benefit Months					
	All	Aged	Disabled	Adults	Unknown	All	Aged	Disabled	Adults	Unknown	
All	172,947	1,108	23,569	52,112	96,158	1,742,810	10,484	263,277	503,501	965,548	0
Age											
5 and younger	36,214	0	1,459	0	34,755	349,077	0	15,884	0	333,193	0
6-14	47,673	0	3,780	3	43,890	503,264	0	43,795	29	459,440	0
15-20	22,573	6	2,303	2,873	17,391	224,563	52	25,949	26,486	172,076	0
21-44	51,066	115	7,785	43,051	115	505,164	866	86,700	416,814	784	0
45-64	14,412	150	8,088	6,168	6	150,622	1,289	89,268	60,011	54	0
65-74	587	443	128	16	0	5,727	4,176	1,393	158	0	0
75-84	295	273	21	1	0	3,106	2,867	236	3	0	0
85 and older	126	121	5	0	0	1,286	1,234	52	0	0	0
Unknown	1	0	0	0	1	0	0	0	0	1	0
Gender											
Female	99,256	803	12,033	39,098	47,322	1,007,632	7,485	135,468	387,497	477,182	0
Male	73,691	305	11,536	13,014	48,836	735,178	2,999	127,809	116,004	488,366	0
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	66,485	431	12,431	21,889	31,734	687,154	3,942	139,638	215,639	327,935	0
African American	16,358	74	2,659	4,641	8,984	171,334	724	30,093	46,311	94,206	0
Other/unknown	90,104	603	8,479	25,582	55,440	884,322	5,818	93,546	241,551	543,407	0
Use of Nursing Facilities^c											
Entire year	438	52	386	0	0	5,031	537	4,494	0	0	0
Part year	350	45	305	0	0	3,669	448	3,221	0	0	0
None	172,159	1,011	22,878	52,112	96,158	1,734,110	9,499	255,562	503,501	965,548	0
Maintenance Assistance Status											
Cash	65,060	145	20,272	14,036	30,607	696,846	1,533	230,283	143,285	321,745	0
Medically needy	64	2	51	11	0	602	20	451	131	0	0
Poverty related	29,829	271	2	1,355	28,201	293,752	2,207	14	7,997	283,534	0
Other/unknown	77,994	690	3,244	36,710	37,350	751,610	6,724	32,529	352,088	360,269	0
Managed Care (MC) Status											
Fee-for-service (FFS) all year	27,327	1,092	20,008	1,633	4,594	285,535	10,322	221,751	10,969	42,493	0
FFS part year, with Rx claims	7,375	11	2,189	2,518	2,657	75,897	117	25,733	23,322	26,725	0
FFS part year, no Rx claims	26,024	5	648	9,965	15,406	212,661	45	7,329	78,265	127,022	0
MC all year, with Rx claims	1,958	0	42	1,092	824	19,949	0	484	10,986	8,479	0
MC all year, no Rx claims	110,263	0	682	36,904	72,677	1,148,768	0	7,980	379,959	760,829	0

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

- a. Table A.1 includes the beneficiaries represented by Cell J of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.
 - b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
 - c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
- Bene Mo(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.2
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2003

	Beneficiaries and			Excluded from Cell K of Table 1	
	Benefit Months in Cell J of Table 1 Number of Beneficiaries	Number of Benefit Months	Included in Cell K of Table 1 Number of Beneficiaries	Number of Beneficiaries	Number of Benefit Months
All	172,947	1,742,810	60,726	0	1,372,878
Fee-for-service (FFS) all year	27,327	285,535	27,327	0	0
FFS part year, with Rx claims	7,375	75,897	7,375	0	37,827
FFS part year, with no Rx claims	26,024	212,661	26,024	0	166,334
Managed care (MC) all year, with Rx claims	1,958	19,949	0	0	19,949
MC all year, with no Rx claims	110,263	1,148,768	0	0	1,148,768

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