# STATISTICAL COMPENDIUM:
# MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2004
# WASHINGTON

## LIST OF TABLES

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

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| Beneficiary Characteristics | Number of Beneficiaries | | | | | | | Number of Benefit Months | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | All | Aged | Disabled | Adults | Children | Other/ Unknown | | All | Aged | Disabled | Adults | Children | Other/ Unknown |
| **All** | **101,583** | **57,080** | **43,706** | **779** | **18** | **0** | | **1,079,506** | **594,141** | **479,450** | **5,730** | **185** | **0** |
| **Age** | | | | | | | | | | | | | |
| 5 and younger | 9 | 0 | 7 | 0 | 2 | 0 | | 100 | 0 | 76 | 0 | 24 | 0 |
| 6-14 | 20 | 0 | 14 | 0 | 6 | 0 | | 209 | 0 | 152 | 0 | 57 | 0 |
| 15-20 | 174 | 0 | 161 | 4 | 9 | 0 | | 1,927 | 0 | 1,806 | 28 | 93 | 0 |
| 21-44 | 19,596 | 3 | 18,999 | 593 | 1 | 0 | | 213,906 | 25 | 209,428 | 4,442 | 11 | 0 |
| 45-64 | 24,566 | 24 | 24,375 | 167 | 0 | 0 | | 268,227 | 195 | 266,895 | 1,137 | 0 | 0 |
| 65-74 | 21,283 | 21,121 | 148 | 14 | 0 | 0 | | 229,970 | 228,782 | 1,075 | 113 | 0 | 0 |
| 75-84 | 20,283 | 20,280 | 2 | 1 | 0 | 0 | | 211,858 | 211,830 | 18 | 10 | 0 | 0 |
| 85 and older | 15,652 | 15,652 | 0 | 0 | 0 | 0 | | 153,309 | 153,309 | 0 | 0 | 0 | 0 |
| Unknown | 0 | 0 | 0 | 0 | 0 | 0 | | | 0 | 0 | 0 | 0 | 0 |
| **Gender** | | | | | | | | | | | | | |
| Female | 63,373 | 40,536 | 22,308 | 517 | 12 | 0 | | 674,881 | 424,473 | 246,370 | 3,915 | 123 | 0 |
| Male | 38,210 | 16,544 | 21,398 | 262 | 6 | 0 | 0 | 404,625 | 169,668 | 233,080 | 1,815 | 62 | 0 |
| Unknown | 0 | 0 | 0 | 0 | 0 | 0 | | | 0 | 0 | 0 | 0 | 0 |
| **Race** | | | | | | | | | | | | | |
| White | 77,625 | 41,192 | 35,901 | 520 | 12 | 0 | | 821,164 | 421,289 | 395,900 | 3,850 | 125 | 0 |
| African American | 4,772 | 1,780 | 2,936 | 55 | 1 | 0 | 0 | 50,806 | 19,063 | 31,306 | 425 | 12 | 0 |
| Other/unknown | 19,186 | 14,108 | 4,869 | 204 | 5 | 0 | | 207,536 | 153,789 | 52,244 | 1,455 | 48 | 0 |
| **Use of Nursing Facilities[c]** | | | | | | | | | | | | | |
| Entire year | 8,532 | 7,694 | 838 | 0 | 0 | 0 | | 87,225 | 78,013 | 9,212 | 0 | 0 | 0 |
| Part year | 7,370 | 6,398 | 971 | 1 | 0 | 0 | | 69,047 | 58,986 | 10,049 | 12 | 0 | 0 |
| None | 85,681 | 42,988 | 41,897 | 778 | 18 | 0 | | 923,234 | 457,142 | 460,189 | 5,718 | 185 | 0 |
| **Maintenance Assistance Status** | | | | | | | | | | | | | |
| Cash | 51,079 | 23,417 | 27,490 | 170 | 2 | 0 | | 566,336 | 263,834 | 301,347 | 1,136 | 19 | 0 |
| Medically needy | 2,250 | 834 | 1,416 | 0 | 0 | 0 | | 23,469 | 8,472 | 14,997 | 0 | 0 | 0 |
| Poverty-related | 3,326 | 1,424 | 1,757 | 138 | 7 | 0 | | 28,477 | 11,069 | 16,150 | 1,199 | 59 | 0 |
| Other/unknown | 44,928 | 31,405 | 13,043 | 471 | 9 | 0 | | 461,224 | 310,766 | 146,956 | 3,395 | 107 | 0 |
| **Dual Medicare Status[d]** | | | | | | | | | | | | | |
| Full dual, all year | 96,613 | 54,709 | 41,158 | 728 | 18 | 0 | | 1,028,762 | 570,819 | 452,565 | 5,193 | 185 | 0 |
| Full dual, part year | 4,970 | 2,371 | 2,548 | 51 | 0 | 0 | | 50,744 | 23,322 | 26,885 | 537 | 0 | 0 |
| **Managed Care (MC) Status** | | | | | | | | | | | | | |
| Fee-for-service (FFS) all year | 101,044 | 57,015 | 43,426 | 588 | 15 | 0 | | 1,076,725 | 593,770 | 477,814 | 4,978 | 163 | 0 |
| FFS part year, with Rx claims | 456 | 47 | 246 | 160 | 3 | 0 | | 2,445 | 283 | 1,473 | 667 | 22 | 0 |
| FFS part year, no Rx claims | 83 | 18 | 34 | 31 | 0 | 0 | | 336 | 88 | 163 | 85 | 0 | 0 |

Source:  Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.2 includes the beneficiaries represented by Cell G 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.

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 2004.  The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment.  Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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.

*ANNUAL* MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC[a, b]

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| 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** | **89.5 %** | **51.3** | **$2,896** | **$56** | **$12,157** | **23.8 %** | **101,583** |
| **Age** | | | | | | | |
| 5 and younger | 100.0 | 42.9 | 8,751 | 204 | 112,324 | 7.8 | 9 |
| 6-14 | 100.0 | 39.8 | 8,764 | 220 | 22,654 | 38.7 | 20 |
| 15-20 | 78.2 | 18.2 | 2,191 | 120 | 10,476 | 20.9 | 174 |
| 21-44 | 84.6 | 35.9 | 3,081 | 86 | 8,799 | 35.0 | 19,596 |
| 45-64 | 89.4 | 58.6 | 3,945 | 67 | 11,674 | 33.8 | 24,566 |
| 65-74 | 88.4 | 53.0 | 2,556 | 48 | 9,065 | 28.2 | 21,283 |
| 75-84 | 91.7 | 55.6 | 2,454 | 44 | 13,798 | 17.8 | 20,283 |
| 85 and older | 94.3 | 51.7 | 2,053 | 40 | 19,147 | 10.7 | 15,652 |
| Unknown | 0.0 | 0.0 | 0 | 0 | 0 | 0.0 | 0 |
| **Basis of Eligibility[e]** | | | | | | | |
| Aged | 91.2 | 53.6 | 2,384 | 45 | 13,511 | 17.6 | 57,080 |
| Disabled | 87.5 | 48.9 | 3,597 | 74 | 10,544 | 34.1 | 43,706 |
| Adults | 68.2 | 16.0 | 1,114 | 70 | 3,110 | 35.8 | 779 |
| Children | 88.9 | 28.7 | 3,263 | 114 | 26,532 | 12.3 | 18 |
| Unknown | 0.0 | 0.0 | 0 | 0 | 0 | 0.0 | 0 |
| **Gender** | | | | | | | |
| Female | 92.1 | 57.1 | 2,967 | 52 | 12,835 | 23.1 | 63,373 |
| Male | 85.0 | 41.8 | 2,780 | 67 | 11,034 | 25.2 | 38,210 |
| Unknown | 0.0 | 0.0 | 0 | 0 | 0 | 0.0 | 0 |
| **Race** | | | | | | | |
| White | 89.8 | 53.8 | 3,094 | 58 | 13,261 | 23.3 | 77,625 |
| African American | 88.0 | 46.9 | 2,711 | 58 | 10,261 | 26.4 | 4,772 |
| Other/unknown | 88.6 | 42.5 | 2,143 | 50 | 8,164 | 26.2 | 19,186 |
| **Use of Nursing Facilities[f]** | | | | | | | |
| Entire year | 97.7 | 68.4 | 3,270 | 48 | 41,264 | 7.9 | 8,532 |
| Part year | 98.1 | 62.8 | 3,052 | 49 | 24,002 | 12.7 | 7,370 |
| None | 87.9 | 48.6 | 2,846 | 59 | 8,240 | 34.5 | 85,681 |
| **Maintenance Assistance Status** | | | | | | | |
| Cash | 89.1 | 45.1 | 2,718 | 60 | 5,784 | 47.0 | 51,079 |
| Medically needy | 94.5 | 53.2 | 3,986 | 75 | 9,270 | 43.0 | 2,250 |
| Poverty related | 47.5 | 13.4 | 818 | 61 | 2,065 | 39.6 | 3,326 |
| Other/unknown | 92.8 | 61.1 | 3,199 | 52 | 20,295 | 15.8 | 44,928 |

Source:  Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.3 includes beneficiaries represented by Cell G 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 D.4

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT *PER BENEFIT MONTH*, BY BENEFICIARY CHARACTERISTIC[a, b]

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| 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 Beneficiaries | Benefit Months |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | 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** | **4.8** | **$273** | **23.8 %** | **10.5 %** | **14.9 %** | **9.9 %** | **28.2 %** | **27.3 %** | **9.2 %** | **$1,144** | **101,583** | **1,079,506** |
| **Age** | | | | | | | | | | | | |
| 5 and younger | 3.9 | 788 | 7.8 | 0.0 | 11.1 | 33.3 | 0.0 | 55.6 | 0.0 | 10,109 | 9 | 100 |
| 6-14 | 3.8 | 839 | 38.7 | 0.0 | 10.0 | 40.0 | 30.0 | 20.0 | 0.0 | 2,168 | 20 | 209 |
| 15-20 | 1.6 | 198 | 20.9 | 21.8 | 39.7 | 11.5 | 23.0 | 3.4 | 0.6 | 946 | 174 | 1,927 |
| 21-44 | 3.3 | 282 | 35.0 | 15.4 | 26.2 | 12.7 | 25.0 | 15.9 | 4.8 | 806 | 19,596 | 213,906 |
| 45-64 | 5.4 | 361 | 33.8 | 10.6 | 13.2 | 8.8 | 26.2 | 28.3 | 12.9 | 1,069 | 24,566 | 268,227 |
| 65-74 | 4.9 | 237 | 28.2 | 11.6 | 13.9 | 9.4 | 28.4 | 27.1 | 9.6 | 839 | 21,283 | 229,970 |
| 75-84 | 5.3 | 235 | 17.8 | 8.3 | 11.0 | 8.9 | 29.5 | 32.3 | 9.9 | 1,321 | 20,283 | 211,858 |
| 85 and older | 5.3 | 210 | 10.7 | 5.7 | 9.8 | 9.6 | 33.3 | 34.2 | 7.4 | 1,955 | 15,652 | 153,309 |
| Unknown | 0.0 | 0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0 | 0 | 0 |
| **Basis of Eligibility[e]** | | | | | | | | | | | | |
| Aged | 5.2 | 229 | 17.6 | 8.8 | 11.7 | 9.3 | 30.2 | 30.9 | 9.1 | 1,298 | 57,080 | 594,141 |
| Disabled | 4.5 | 328 | 34.1 | 12.5 | 18.9 | 10.5 | 25.8 | 23.0 | 9.4 | 961 | 43,706 | 479,450 |
| Adults | 2.2 | 151 | 35.8 | 31.8 | 24.5 | 12.2 | 16.7 | 10.8 | 4.0 | 423 | 779 | 5,730 |
| Children | 2.8 | 318 | 12.3 | 11.1 | 11.1 | 27.8 | 33.3 | 16.7 | 0.0 | 2,582 | 18 | 185 |
| Unknown | 0.0 | 0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0 | 0 | 0 |
| **Gender** | | | | | | | | | | | | |
| Female | 5.4 | 279 | 23.1 | 7.9 | 12.4 | 9.3 | 28.7 | 30.8 | 11.0 | 1,205 | 63,373 | 674,881 |
| Male | 3.9 | 263 | 25.2 | 15.0 | 19.2 | 10.8 | 27.2 | 21.6 | 6.2 | 1,042 | 38,210 | 404,625 |
| Unknown | 0.0 | 0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0 | 0 | 0 |
| **Race** | | | | | | | | | | | | |
| White | 5.1 | 293 | 23.3 | 10.2 | 13.9 | 9.3 | 27.3 | 28.8 | 10.4 | 1,254 | 77,625 | 821,164 |
| African American | 4.4 | 255 | 26.4 | 12.0 | 19.0 | 10.0 | 27.3 | 23.8 | 7.9 | 964 | 4,772 | 50,806 |
| Other/unknown | 3.9 | 198 | 26.2 | 11.4 | 17.9 | 12.2 | 31.8 | 22.3 | 4.4 | 755 | 19,186 | 207,536 |
| **Use of Nursing Facilities[f]** | | | | | | | | | | | | |
| Entire year | 6.7 | 320 | 7.9 | 2.3 | 5.9 | 7.1 | 27.4 | 40.8 | 16.5 | 4,036 | 8,532 | 87,225 |
| Part year | 6.7 | 326 | 12.7 | 1.9 | 6.3 | 7.2 | 30.7 | 39.1 | 14.8 | 2,562 | 7,370 | 69,047 |
| None | 4.5 | 264 | 34.5 | 12.1 | 16.6 | 10.4 | 28.0 | 25.0 | 8.0 | 765 | 85,681 | 923,234 |
| **Maintenance Assistance Status** | | | | | | | | | | | | |
| Cash | 4.1 | 245 | 47.0 | 10.9 | 19.7 | 11.5 | 29.5 | 22.2 | 6.2 | 522 | 51,079 | 566,336 |
| Medically needy | 5.1 | 382 | 43.0 | 5.5 | 13.1 | 11.5 | 30.2 | 30.2 | 9.5 | 889 | 2,250 | 23,469 |
| Poverty related | 1.6 | 96 | 39.6 | 52.5 | 19.8 | 8.5 | 12.6 | 5.8 | 0.9 | 241 | 3,326 | 28,477 |
| Other/unknown | 5.9 | 312 | 15.8 | 7.2 | 9.2 | 8.0 | 27.7 | 34.7 | 13.2 | 1,977 | 44,928 | 461,224 |

Source:  Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.4 includes the beneficiaries represented by Cell G 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]

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| Beneficiary | All Rx | | | Patented Brand-Name Drugs | | | Off-Patent Brand-Name Drugs | | | Generic Drugs | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Characteristics | 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** | **4.8** | **$273** | **$56** | **1.6** | **$198** | **$120** | **0.2** | **$17** | **$76** | **2.9** | **$57** | **$19** |
| **Age** | | | | | | | | | | | | |
| 5 and younger | 3.9 | 788 | 204 | 1.8 | 597 | 334 | 0.2 | 46 | 271 | 1.9 | 144 | 77 |
| 6-14 | 3.8 | 839 | 220 | 1.5 | 752 | 507 | 0.2 | 10 | 42 | 2.1 | 59 | 29 |
| 15-20 | 1.6 | 198 | 120 | 0.7 | 164 | 232 | 0.1 | 8 | 59 | 0.8 | 26 | 32 |
| 21-44 | 3.3 | 282 | 86 | 1.2 | 218 | 181 | 0.2 | 19 | 111 | 1.9 | 45 | 24 |
| 45-64 | 5.4 | 361 | 67 | 1.8 | 261 | 143 | 0.3 | 27 | 103 | 3.3 | 73 | 22 |
| 65-74 | 4.9 | 237 | 48 | 1.7 | 169 | 100 | 0.2 | 13 | 65 | 3.0 | 55 | 18 |
| 75-84 | 5.3 | 235 | 44 | 1.8 | 168 | 92 | 0.2 | 12 | 50 | 3.2 | 55 | 17 |
| 85 and older | 5.3 | 210 | 40 | 1.7 | 147 | 88 | 0.3 | 11 | 40 | 3.3 | 52 | 16 |
| Unknown | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 |
| **Basis of Eligibility[d]** | | | | | | | | | | | | |
| Aged | 5.2 | 229 | 45 | 1.7 | 163 | 94 | 0.2 | 12 | 52 | 3.2 | 54 | 17 |
| Disabled | 4.5 | 328 | 74 | 1.6 | 243 | 156 | 0.2 | 24 | 106 | 2.7 | 61 | 23 |
| Adults | 2.2 | 151 | 70 | 0.7 | 104 | 156 | 0.1 | 17 | 131 | 1.4 | 31 | 22 |
| Children | 2.8 | 318 | 114 | 1.0 | 250 | 251 | 0.2 | 15 | 86 | 1.6 | 52 | 32 |
| Unknown | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 |
| **Gender** | | | | | | | | | | | | |
| Female | 5.4 | 279 | 52 | 1.8 | 199 | 110 | 0.3 | 18 | 71 | 3.3 | 61 | 19 |
| Male | 3.9 | 263 | 67 | 1.4 | 197 | 142 | 0.2 | 16 | 87 | 2.4 | 50 | 21 |
| Unknown | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0 |
| **Race** | | | | | | | | | | | | |
| White | 5.1 | 293 | 58 | 1.7 | 212 | 123 | 0.2 | 19 | 78 | 3.1 | 61 | 20 |
| African American | 4.4 | 255 | 58 | 1.5 | 189 | 130 | 0.2 | 15 | 72 | 2.7 | 51 | 18 |
| Other/unknown | 3.9 | 198 | 50 | 1.4 | 146 | 103 | 0.1 | 10 | 65 | 2.3 | 42 | 18 |
| **Use of Nursing Facilities[e]** | | | | | | | | | | | | |
| Entire year | 6.7 | 320 | 48 | 2.2 | 225 | 102 | 0.4 | 23 | 51 | 4.0 | 71 | 18 |
| Part year | 6.7 | 326 | 49 | 2.2 | 232 | 105 | 0.4 | 21 | 54 | 4.1 | 73 | 18 |
| None | 4.5 | 264 | 59 | 1.6 | 193 | 124 | 0.2 | 16 | 84 | 2.8 | 54 | 20 |
| **Maintenance Assistance Status** | | | | | | | | | | | | |
| Cash | 4.1 | 245 | 60 | 1.4 | 181 | 126 | 0.2 | 14 | 88 | 2.5 | 49 | 20 |
| Medically needy | 5.1 | 382 | 75 | 1.8 | 290 | 158 | 0.3 | 29 | 113 | 3.0 | 63 | 21 |
| Poverty related | 1.6 | 96 | 61 | 0.5 | 68 | 132 | 0.1 | 9 | 99 | 1.0 | 19 | 20 |
| Other/unknown | 5.9 | 312 | 52 | 2.0 | 222 | 113 | 0.3 | 21 | 66 | 3.6 | 68 | 19 |

Source:  Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.5 includes the beneficiaries represented by Cell G 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 Washington, 0.3 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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY[a, b, c, d]

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| 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 | As a Percentage of Dual Benes | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Anti-infective Agents | 0.4 | 0.1 | 0.0 | 0.2 | $30 | $22 | $2 | $6 | $80 | $182 | $97 | $24 | 222,521 | $17,752,932 | 53,914 | 53.1 % | 599,279 |
| Biologicals | 0.1 | 0.1 | 0.0 | 0.0 | 9 | 2 | 0 | 8 | 91 | 22 | 26 | 278 | 2,155 | 197,088 | 1,898 | 1.9 | 21,598 |
| Antineoplastic Agents | 0.5 | 0.1 | 0.0 | 0.4 | 84 | 55 | 0 | 29 | 154 | 479 | 95 | 68 | 18,425 | 2,842,694 | 3,192 | 3.1 | 33,798 |
| Endocrine/Metabolic Drugs | 1.1 | 0.4 | 0.1 | 0.6 | 46 | 34 | 2 | 10 | 41 | 82 | 25 | 15 | 570,551 | 23,160,319 | 46,370 | 45.6 | 508,462 |
| Cardiovascular Agents | 1.9 | 0.5 | 0.0 | 1.3 | 57 | 37 | 1 | 19 | 30 | 69 | 25 | 14 | 1,285,212 | 38,347,238 | 61,559 | 60.6 | 670,348 |
| Respiratory Agents | 0.7 | 0.4 | 0.0 | 0.3 | 39 | 34 | 0 | 5 | 57 | 89 | 44 | 16 | 280,948 | 16,033,857 | 36,618 | 36.0 | 408,960 |
| Gastrointestinal Agents | 0.7 | 0.3 | 0.0 | 0.3 | 51 | 44 | 1 | 6 | 71 | 127 | 50 | 17 | 354,305 | 25,312,713 | 44,974 | 44.3 | 496,350 |
| Genitourinary Agents | 0.5 | 0.3 | 0.0 | 0.2 | 29 | 24 | 1 | 4 | 54 | 80 | 48 | 20 | 97,226 | 5,223,876 | 16,149 | 15.9 | 179,268 |
| CNS Drugs | 1.4 | 0.6 | 0.1 | 0.8 | 118 | 93 | 6 | 19 | 84 | 165 | 79 | 25 | 891,883 | 74,785,707 | 58,420 | 57.5 | 635,084 |
| Stimulants/Anti-obesity/Anorexia | 0.7 | 0.2 | 0.0 | 0.4 | 53 | 32 | 3 | 18 | 79 | 130 | 101 | 46 | 10,151 | 798,661 | 1,373 | 1.4 | 15,204 |
| Miscellaneous Psychological/ Neurological Agents | 0.8 | 0.8 | 0.0 | 0.0 | 158 | 158 | 0 | 0 | 204 | 206 | 0 | 14 | 44,779 | 9,151,617 | 5,450 | 5.4 | 57,808 |
| Analgesics and Anesthetics | 0.9 | 0.2 | 0.0 | 0.7 | 46 | 29 | 2 | 15 | 51 | 145 | 211 | 21 | 566,149 | 28,807,070 | 57,080 | 56.2 | 625,773 |
| Neuromuscular Agents | 1.0 | 0.3 | 0.2 | 0.5 | 79 | 40 | 25 | 15 | 80 | 145 | 125 | 29 | 361,105 | 28,751,438 | 32,619 | 32.1 | 361,662 |
| Nutritional Products | 0.7 | 0.0 | 0.0 | 0.6 | 12 | 0 | 1 | 11 | 18 | 16 | 15 | 18 | 132,216 | 2,318,032 | 18,759 | 18.5 | 201,192 |
| Hematological Agents | 0.8 | 0.3 | 0.1 | 0.5 | 60 | 52 | 2 | 6 | 71 | 201 | 27 | 12 | 152,585 | 10,902,102 | 16,963 | 16.7 | 181,283 |
| Topical Products | 0.4 | 0.1 | 0.0 | 0.3 | 18 | 11 | 1 | 6 | 42 | 77 | 53 | 22 | 202,484 | 8,426,317 | 41,709 | 41.1 | 469,707 |
| Miscellaneous Products | 0.2 | 0.1 | 0.0 | 0.1 | 35 | 24 | 3 | 7 | 145 | 213 | 283 | 64 | 8,160 | 1,181,859 | 3,046 | 3.0 | 33,772 |
| Unknown Therapeutic Category | 0.3 | 0.0 | 0.0 | 0.0 | 6 | 0 | 0 | 0 | 20 | 0 | 0 | 0 | 11,589 | 235,768 | 3,277 | 3.2 | 36,799 |
| 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. | 5,212,444 | 294,229,288 | n.a. | n.a. | n.a. |

Source:  Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.6 includes the beneficiaries represented by Cell G of Table 1.  A beneficiary who used drugs from two or more categories 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. 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 Washington, 0.3 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 2004.

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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP[a, b, c]

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| Top 10 Drug Groups | Total Medicaid Rx $ | Users | | | Among Users | | |
|---|---|---|---|---|---|---|---|
| | | Number of Users | As a Percentage of Dual Beneficiaries | Number of Benefit Months | Number of Rx per Benefit Month | $ per Rx | Rx $ per Benefit Month |
| ANTIPSYCHOTICS | $47,534,380 | 29,722 | 29.3 % | 327,859 | 0.8 | $187 | $145 |
| ANTIDEPRESSANTS | 24,546,002 | 60,154 | 59.2 | 660,833 | 0.7 | 54 | 37 |
| ANTICONVULSANT | 24,116,508 | 26,405 | 26.0 | 294,105 | 0.8 | 101 | 82 |
| ULCER DRUGS | 20,321,675 | 46,175 | 45.5 | 513,352 | 0.6 | 65 | 40 |
| ANALGESICS - Narcotic | 15,624,252 | 67,928 | 66.9 | 749,001 | 0.5 | 43 | 21 |
| ANTIHYPERLIPIDEMIC | 15,381,386 | 28,400 | 28.0 | 319,375 | 0.7 | 68 | 48 |
| ANTIDIABETIC | 13,765,334 | 32,656 | 32.1 | 361,211 | 0.8 | 50 | 38 |
| ANTIASTHMATIC | 12,145,713 | 37,234 | 36.7 | 414,567 | 0.4 | 67 | 29 |
| ANALGESICS - ANTI-INFLAMMATORY | 10,271,971 | 34,729 | 34.2 | 396,475 | 0.4 | 69 | 26 |
| NEUROLOGICAL | 9,149,528 | 6,215 | 6.1 | 66,352 | 0.7 | 204 | 138 |
| Total | 192,856,749 | 369,618 | | 4,103,130 | n.a. | n.a. | n.a. |

Source:  Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.7 includes the beneficiaries represented by Cell G of Table 1.  A user is a beneficiary who had at least one prescription filled in a given drug group during 2004.  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 2004.  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; n.a. = not applicable.

TABLE D.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]

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| Beneficiary Characteristics | All Top 10 Drug Groups | | ANTIPSYCHOTICS | | | | | ANTIDEPRESSANTS | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Number of Rx | Rx $ | Number of Users | Users as % of Dual 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 Dual Benes | Number of Benefit Months Among Users | Mean Number of Rx per Benefit Month | Mean Rx $ per Benefit Month |
| **All** | **2,505,817** | **$192,856,749** | **29,722** | **29.3 %** | **327,859** | **0.8** | **$145** | **60,154** | **59.2 %** | **660,833** | **0.7** | **$37** |
| **Female** | 1,688,590 | 122,792,540 | 17,118 | 27.0 | 188,212 | 0.7 | 123 | 42,094 | 66.4 | 463,415 | 0.7 | 38 |
| **Disabled** | 708,296 | 61,496,054 | 8,665 | 38.8 | 98,710 | 0.8 | 145 | 19,202 | 86.1 | 217,368 | 0.7 | 41 |
| 5 and younger | 39 | 2,675 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 6-14 | 62 | 2,725 | 0 | 0.0 | 0 | 0.0 | 0 | 1 | 12.5 | 12 | 1.0 | 67 |
| 15-20 | 649 | 53,810 | 19 | 27.1 | 221 | 0.4 | 79 | 31 | 44.3 | 367 | 0.6 | 34 |
| 21-44 | 205,082 | 19,269,434 | 3,729 | 45.0 | 42,426 | 0.7 | 139 | 6,335 | 76.4 | 71,523 | 0.6 | 41 |
| 45-64 | 500,929 | 42,088,795 | 4,905 | 35.4 | 55,950 | 0.8 | 150 | 12,795 | 92.3 | 145,114 | 0.7 | 42 |
| 65-74 | 1,535 | 78,615 | 12 | 15.4 | 113 | 1.1 | 47 | 40 | 51.3 | 352 | 0.7 | 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** | 980,294 | 61,296,486 | 8,453 | 20.6 | 89,502 | 0.7 | 99 | 22,892 | 55.7 | 246,047 | 0.7 | 34 |
| 5 and younger | 13 | 732 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 6-14 | 1 | 5 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 15-20 | 63 | 2,870 | 1 | 11.1 | 9 | 0.1 | 1 | 1 | 11.1 | 12 | 0.9 | 13 |
| 21-44 | 2,954 | 216,216 | 59 | 13.8 | 558 | 0.4 | 78 | 176 | 41.3 | 1,440 | 0.4 | 31 |
| 45-64 | 1,238 | 115,126 | 14 | 13.6 | 105 | 0.7 | 144 | 54 | 52.4 | 411 | 0.6 | 43 |
| 65-74 | 361,643 | 23,648,472 | 2,117 | 15.6 | 23,534 | 0.7 | 113 | 7,444 | 54.9 | 83,728 | 0.7 | 33 |
| 75-84 | 360,386 | 22,352,096 | 3,098 | 21.5 | 33,013 | 0.7 | 101 | 8,007 | 55.7 | 86,276 | 0.7 | 34 |
| 85 and older | 253,996 | 14,960,969 | 3,164 | 25.1 | 32,283 | 0.7 | 87 | 7,210 | 57.3 | 74,180 | 0.8 | 35 |
| **Male** | 817,227 | 70,064,209 | 12,604 | 33.0 | 139,647 | 0.8 | 174 | 18,060 | 47.3 | 197,418 | 0.7 | 36 |
| **Disabled** | 491,562 | 49,697,750 | 9,706 | 45.4 | 110,064 | 0.9 | 193 | 11,244 | 52.5 | 126,140 | 0.7 | 39 |
| 5 and younger | 34 | 1,736 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 6-14 | 11 | 519 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 15-20 | 744 | 91,068 | 26 | 28.6 | 312 | 0.7 | 167 | 18 | 19.8 | 210 | 0.7 | 50 |
| 21-44 | 206,910 | 23,386,840 | 5,382 | 50.3 | 61,141 | 0.8 | 190 | 5,275 | 49.3 | 59,708 | 0.6 | 39 |
| 45-64 | 282,877 | 26,149,223 | 4,287 | 40.8 | 48,513 | 0.9 | 197 | 5,927 | 56.3 | 65,981 | 0.7 | 39 |
| 65-74 | 986 | 68,364 | 11 | 15.7 | 98 | 0.9 | 195 | 24 | 34.3 | 241 | 0.6 | 35 |
| 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** | 325,665 | 20,366,459 | 2,898 | 17.2 | 29,583 | 0.7 | 105 | 6,816 | 40.5 | 71,278 | 0.7 | 32 |
| 5 and younger | 7 | 231 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 6-14 | 10 | 849 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 15-20 | 7 | 902 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 21-44 | 1,848 | 142,828 | 32 | 18.7 | 299 | 0.4 | 60 | 87 | 50.9 | 745 | 0.5 | 27 |
| 45-64 | 907 | 93,178 | 11 | 12.5 | 91 | 0.5 | 65 | 43 | 48.9 | 289 | 0.4 | 27 |
| 65-74 | 155,378 | 9,979,927 | 1,007 | 13.3 | 10,892 | 0.8 | 137 | 2,819 | 37.2 | 31,298 | 0.6 | 30 |
| 75-84 | 115,446 | 7,066,466 | 1,092 | 18.5 | 11,055 | 0.7 | 91 | 2,404 | 40.7 | 24,903 | 0.7 | 33 |
| 85 and older | 52,062 | 3,082,078 | 756 | 24.7 | 7,246 | 0.7 | 81 | 1,463 | 47.7 | 14,043 | 0.7 | 33 |
| **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 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.7A includes the beneficiaries represented by Cell G of Table 1.  A user is a beneficiary who had at least one prescription filled in a given drug group during 2004.  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 2004.  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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS

SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c]

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| Beneficiary Characteristics | ANTICONVULSANT | | | | | ULCER DRUGS | | | | | ANALGESICS - Narcotic | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Number of Users | Users as % of Dual 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 Dual 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 Dual Benes | Number of Benefit Months Among Users | Mean Number of Rx per Benefit Month | Mean Rx $ per Benefit Month |
| **All** | **26,405** | **26.0 %** | **294,105** | **0.8** | **$82** | **46,175** | **45.5 %** | **513,352** | **0.6** | **$40** | **67,928** | **66.9 %** | **749,001** | **0.5** | **$21** |
| **Female** | 16,644 | 26.3 | 185,375 | 0.8 | 79 | 32,130 | 50.7 | 357,913 | 0.6 | 40 | 47,120 | 74.4 | 520,751 | 0.5 | 21 |
| **Disabled** | 9,529 | 42.7 | 108,213 | 0.8 | 97 | 11,093 | 49.7 | 126,322 | 0.6 | 41 | 20,686 | 92.7 | 235,564 | 0.5 | 26 |
| 5 and younger | 0 | 0.0 | 0 | 0.0 | 0 | 2 | 50.0 | 24 | 1.0 | 69 | 1 | 25.0 | 12 | 0.1 | 0 |
| 6-14 | 1 | 12.5 | 12 | 0.7 | 5 | 5 | 62.5 | 60 | 0.7 | 31 | 2 | 25.0 | 24 | 0.1 | 1 |
| 15-20 | 13 | 18.6 | 153 | 0.7 | 96 | 14 | 20.0 | 158 | 0.5 | 32 | 34 | 48.6 | 375 | 0.2 | 2 |
| 21-44 | 3,722 | 44.9 | 42,134 | 0.8 | 102 | 3,181 | 38.4 | 36,159 | 0.5 | 34 | 6,990 | 84.3 | 79,715 | 0.5 | 21 |
| 45-64 | 5,780 | 41.7 | 65,788 | 0.8 | 94 | 7,867 | 56.8 | 89,721 | 0.6 | 44 | 13,616 | 98.3 | 155,065 | 0.6 | 29 |
| 65-74 | 13 | 16.7 | 126 | 1.0 | 47 | 24 | 30.8 | 200 | 0.7 | 39 | 43 | 55.1 | 373 | 0.7 | 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** | 7,115 | 17.3 | 77,162 | 0.8 | 53 | 21,037 | 51.2 | 231,591 | 0.6 | 40 | 26,434 | 64.4 | 285,187 | 0.5 | 17 |
| 5 and younger | 0 | 0.0 | 0 | 0.0 | 0 | 2 | 200.0 | 24 | 0.4 | 30 | 2 | 200.0 | 24 | 0.1 | 1 |
| 6-14 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 1 | 25.0 | 12 | 0.1 | 0 |
| 15-20 | 2 | 22.2 | 22 | 0.8 | 41 | 4 | 44.4 | 30 | 0.3 | 23 | 4 | 44.4 | 33 | 0.5 | 15 |
| 21-44 | 78 | 18.3 | 657 | 0.6 | 76 | 78 | 18.3 | 711 | 0.3 | 19 | 279 | 65.5 | 2,427 | 0.4 | 10 |
| 45-64 | 26 | 25.2 | 201 | 0.7 | 75 | 27 | 26.2 | 219 | 0.5 | 27 | 57 | 55.3 | 468 | 0.7 | 54 |
| 65-74 | 2,667 | 19.7 | 29,949 | 0.7 | 64 | 7,569 | 55.8 | 86,371 | 0.6 | 40 | 9,229 | 68.1 | 104,419 | 0.5 | 17 |
| 75-84 | 2,669 | 18.6 | 28,860 | 0.8 | 48 | 7,516 | 52.3 | 83,009 | 0.6 | 40 | 9,133 | 63.5 | 99,305 | 0.5 | 16 |
| 85 and older | 1,673 | 13.3 | 17,473 | 0.8 | 41 | 5,841 | 46.4 | 61,227 | 0.7 | 39 | 7,729 | 61.4 | 78,499 | 0.5 | 18 |
| **Male** | 9,761 | 25.5 | 108,730 | 0.8 | 88 | 14,045 | 36.8 | 155,439 | 0.6 | 39 | 20,808 | 54.5 | 228,250 | 0.5 | 20 |
| **Disabled** | 7,301 | 34.1 | 82,716 | 0.9 | 98 | 6,799 | 31.8 | 76,927 | 0.6 | 40 | 12,613 | 58.9 | 141,841 | 0.5 | 24 |
| 5 and younger | 1 | 33.3 | 12 | 0.6 | 16 | 1 | 33.3 | 12 | 0.2 | 16 | 1 | 33.3 | 12 | 0.1 | 1 |
| 6-14 | 0 | 0.0 | 0 | 0.0 | 0 | 1 | 16.7 | 12 | 0.2 | 9 | 2 | 33.3 | 24 | 0.1 | 1 |
| 15-20 | 18 | 19.8 | 216 | 0.6 | 86 | 13 | 14.3 | 153 | 0.3 | 26 | 39 | 42.9 | 455 | 0.2 | 2 |
| 21-44 | 3,542 | 33.1 | 40,299 | 0.8 | 104 | 2,762 | 25.8 | 31,624 | 0.6 | 38 | 5,898 | 55.1 | 67,068 | 0.4 | 19 |
| 45-64 | 3,727 | 35.4 | 42,068 | 0.9 | 94 | 4,001 | 38.0 | 44,936 | 0.6 | 42 | 6,635 | 63.1 | 74,006 | 0.5 | 29 |
| 65-74 | 13 | 18.6 | 121 | 0.8 | 63 | 21 | 30.0 | 190 | 0.7 | 53 | 38 | 54.3 | 276 | 0.7 | 18 |
| 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** | 2,460 | 14.6 | 26,014 | 0.7 | 54 | 7,246 | 43.1 | 78,512 | 0.6 | 37 | 8,195 | 48.7 | 86,409 | 0.4 | 14 |
| 5 and younger | 0 | 0.0 | 0 | 0.0 | 0 | 1 | 100.0 | 12 | 0.5 | 18 | 1 | 100.0 | 12 | 0.1 | 1 |
| 6-14 | 0 | 0.0 | 0 | 0.0 | 0 | 1 | 50.0 | 12 | 0.8 | 71 | 0 | 0.0 | 0 | 0.0 | 0 |
| 15-20 | 0 | 0.0 | 0 | 0.0 | 0 | 1 | 25.0 | 12 | 0.6 | 75 | 0 | 0.0 | 0 | 0.0 | 0 |
| 21-44 | 45 | 26.3 | 388 | 0.6 | 69 | 45 | 26.3 | 394 | 0.5 | 35 | 112 | 65.5 | 1,001 | 0.5 | 23 |
| 45-64 | 15 | 17.0 | 107 | 0.5 | 62 | 10 | 11.4 | 92 | 0.3 | 24 | 57 | 64.8 | 431 | 0.8 | 117 |
| 65-74 | 1,144 | 15.1 | 12,596 | 0.7 | 61 | 3,286 | 43.4 | 36,844 | 0.6 | 37 | 3,761 | 49.7 | 41,773 | 0.4 | 14 |
| 75-84 | 870 | 14.7 | 9,100 | 0.7 | 48 | 2,649 | 44.9 | 28,651 | 0.6 | 37 | 2,725 | 46.1 | 28,584 | 0.4 | 12 |
| 85 and older | 386 | 12.6 | 3,823 | 0.8 | 41 | 1,253 | 40.9 | 12,495 | 0.7 | 39 | 1,539 | 50.2 | 14,608 | 0.4 | 12 |
| **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 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.7B includes the beneficiaries represented by Cell G of Table 1.  A user is a beneficiary who had at least one prescription filled in a given drug group during 2004.  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 2004.  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 D.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]

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| Beneficiary Characteristics | ANTIHYPERLIPIDEMIC | | | | | ANTIDIABETIC | | | | | ANTIASTHMATIC | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Number of Users | Users as % of Dual 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 Dual 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 Dual Benes | Number of Benefit Months Among Users | Mean Number of Rx per Benefit Month | Mean Rx $ per Benefit Month |
| **All** | **28,400** | **28.0 %** | **319,375** | **0.7** | **$48** | **32,656** | **32.1 %** | **361,211** | **0.8** | **$38** | **37,234** | **36.7 %** | **414,567** | **0.4** | **$29** |
| **Female** | 18,533 | 29.2 | 208,893 | 0.7 | 48 | 21,991 | 34.7 | 244,571 | 0.8 | 38 | 25,485 | 40.2 | 285,006 | 0.4 | 29 |
| **Disabled** | 5,738 | 25.7 | 65,521 | 0.7 | 48 | 6,898 | 30.9 | 78,158 | 0.8 | 46 | 10,930 | 49.0 | 124,577 | 0.4 | 27 |
| 5 and younger | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 3 | 75.0 | 36 | 0.4 | 28 |
| 6-14 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 1 | 12.5 | 12 | 0.1 | 1 |
| 15-20 | 3 | 4.3 | 36 | 0.3 | 18 | 2 | 2.9 | 24 | 0.5 | 5 | 18 | 25.7 | 214 | 0.2 | 9 |
| 21-44 | 914 | 11.0 | 10,466 | 0.6 | 42 | 1,321 | 15.9 | 15,066 | 0.7 | 42 | 3,145 | 37.9 | 36,009 | 0.3 | 22 |
| 45-64 | 4,796 | 34.6 | 54,819 | 0.7 | 49 | 5,554 | 40.1 | 62,904 | 0.8 | 47 | 7,720 | 55.7 | 87,942 | 0.4 | 29 |
| 65-74 | 25 | 32.1 | 200 | 0.7 | 43 | 21 | 26.9 | 164 | 0.8 | 31 | 43 | 55.1 | 364 | 0.7 | 51 |
| 75-84 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 85 and older | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| **Other Eligibles** | 12,795 | 31.2 | 143,372 | 0.7 | 48 | 15,093 | 36.8 | 166,413 | 0.8 | 34 | 14,555 | 35.4 | 160,429 | 0.4 | 30 |
| 5 and younger | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 6-14 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 15-20 | 1 | 11.1 | 3 | 0.7 | 45 | 1 | 11.1 | 9 | 0.7 | 51 | 0 | 0.0 | 0 | 0.0 | 0 |
| 21-44 | 7 | 1.6 | 46 | 0.5 | 24 | 30 | 7.0 | 257 | 0.4 | 35 | 99 | 23.2 | 867 | 0.3 | 13 |
| 45-64 | 17 | 16.5 | 164 | 0.6 | 42 | 24 | 23.3 | 194 | 0.8 | 55 | 18 | 17.5 | 129 | 0.3 | 11 |
| 65-74 | 5,943 | 43.8 | 67,840 | 0.7 | 49 | 6,526 | 48.1 | 73,839 | 0.8 | 38 | 6,041 | 44.6 | 68,484 | 0.5 | 32 |
| 75-84 | 4,955 | 34.5 | 55,449 | 0.7 | 48 | 5,772 | 40.2 | 63,618 | 0.8 | 33 | 5,066 | 35.2 | 55,814 | 0.4 | 31 |
| 85 and older | 1,872 | 14.9 | 19,870 | 0.8 | 47 | 2,740 | 21.8 | 28,496 | 0.8 | 28 | 3,331 | 26.5 | 35,135 | 0.4 | 25 |
| **Male** | 9,867 | 25.8 | 110,482 | 0.7 | 49 | 10,665 | 27.9 | 116,640 | 0.8 | 38 | 11,749 | 30.7 | 129,561 | 0.5 | 31 |
| **Disabled** | 4,353 | 20.3 | 49,429 | 0.7 | 49 | 4,572 | 21.4 | 50,991 | 0.8 | 45 | 5,559 | 26.0 | 62,673 | 0.4 | 29 |
| 5 and younger | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 3 | 100.0 | 36 | 0.7 | 38 |
| 6-14 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 2 | 33.3 | 24 | 0.3 | 17 |
| 15-20 | 6 | 6.6 | 69 | 0.7 | 60 | 1 | 1.1 | 12 | 0.2 | 2 | 12 | 13.2 | 144 | 0.1 | 3 |
| 21-44 | 1,280 | 12.0 | 14,624 | 0.6 | 45 | 1,262 | 11.8 | 14,240 | 0.8 | 46 | 2,052 | 19.2 | 23,338 | 0.4 | 22 |
| 45-64 | 3,054 | 29.0 | 34,616 | 0.7 | 51 | 3,288 | 31.3 | 36,565 | 0.8 | 44 | 3,474 | 33.0 | 39,011 | 0.5 | 34 |
| 65-74 | 13 | 18.6 | 120 | 0.7 | 46 | 21 | 30.0 | 174 | 0.6 | 32 | 16 | 22.9 | 120 | 0.5 | 32 |
| 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** | 5,514 | 32.8 | 61,053 | 0.7 | 48 | 6,093 | 36.2 | 65,649 | 0.8 | 33 | 6,190 | 36.8 | 66,888 | 0.5 | 32 |
| 5 and younger | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 6-14 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 15-20 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 21-44 | 18 | 10.5 | 149 | 0.7 | 43 | 14 | 8.2 | 88 | 0.8 | 30 | 43 | 25.1 | 408 | 0.3 | 19 |
| 45-64 | 20 | 22.7 | 143 | 0.6 | 59 | 30 | 34.1 | 242 | 0.6 | 35 | 9 | 10.2 | 68 | 0.2 | 6 |
| 65-74 | 3,001 | 39.6 | 33,895 | 0.7 | 48 | 3,112 | 41.1 | 34,528 | 0.8 | 37 | 2,938 | 38.8 | 33,014 | 0.5 | 35 |
| 75-84 | 1,955 | 33.1 | 21,532 | 0.7 | 48 | 2,153 | 36.5 | 23,145 | 0.8 | 31 | 2,194 | 37.2 | 23,452 | 0.5 | 31 |
| 85 and older | 520 | 17.0 | 5,334 | 0.7 | 44 | 784 | 25.6 | 7,646 | 0.7 | 26 | 1,006 | 32.8 | 9,946 | 0.4 | 28 |
| **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 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.7C includes the beneficiaries represented by Cell G of Table 1.  A user is a beneficiary who had at least one prescription filled in a given drug group during 2004.  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 2004.  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 D.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]
DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| Beneficiary Characteristics | ANALGESICS - ANTI-INFLAMMATORY | | | | | MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Number of Users | Users as % of Dual 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 Dual 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** | **34,729** | **34.2 %** | **396,475** | **0.4** | **$26** | **6,215** | **6.1 %** | **66,352** | **0.7** | **$138** | **101,583** | **1,079,506** |
| **Female** | 24,213 | 38.2 | 276,807 | 0.4 | 29 | 4,522 | 7.1 | 48,718 | 0.7 | 139 | 63,373 | 674,881 |
| **Disabled** | 10,215 | 45.8 | 117,600 | 0.4 | 28 | 508 | 2.3 | 5,864 | 0.7 | 490 | 22,308 | 246,370 |
| 5 and younger | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 4 | 40 |
| 6-14 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 8 | 90 |
| 15-20 | 15 | 21.4 | 168 | 0.1 | 2 | 1 | 1.4 | 12 | 0.1 | 19 | 70 | 773 |
| 21-44 | 3,335 | 40.2 | 38,338 | 0.3 | 18 | 127 | 1.5 | 1,459 | 0.6 | 472 | 8,293 | 91,602 |
| 45-64 | 6,841 | 49.4 | 78,846 | 0.4 | 33 | 379 | 2.7 | 4,385 | 0.7 | 498 | 13,855 | 153,286 |
| 65-74 | 24 | 30.8 | 248 | 0.5 | 29 | 1 | 1.3 | 8 | 0.4 | 30 | 78 | 579 |
| 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** | 13,998 | 34.1 | 159,207 | 0.4 | 30 | 4,014 | 9.8 | 42,854 | 0.7 | 91 | 41,065 | 428,511 |
| 5 and younger | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 1 | 12 |
| 6-14 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 4 | 43 |
| 15-20 | 2 | 22.2 | 21 | 0.1 | 1 | 0 | 0.0 | 0 | 0.0 | 0 | 9 | 84 |
| 21-44 | 84 | 19.7 | 765 | 0.2 | 16 | 3 | 0.7 | 28 | 0.3 | 247 | 426 | 3,282 |
| 45-64 | 31 | 30.1 | 230 | 0.3 | 47 | 1 | 1.0 | 12 | 0.4 | 508 | 103 | 730 |
| 65-74 | 5,989 | 44.2 | 69,507 | 0.4 | 30 | 570 | 4.2 | 6,267 | 0.6 | 122 | 13,560 | 148,000 |
| 75-84 | 4,900 | 34.1 | 56,178 | 0.4 | 30 | 1,718 | 12.0 | 18,467 | 0.7 | 87 | 14,376 | 151,621 |
| 85 and older | 2,992 | 23.8 | 32,506 | 0.5 | 29 | 1,722 | 13.7 | 18,080 | 0.7 | 85 | 12,586 | 124,739 |
| **Male** | 10,516 | 27.5 | 119,668 | 0.3 | 19 | 1,693 | 4.4 | 17,634 | 0.7 | 134 | 38,210 | 404,625 |
| **Disabled** | 5,870 | 27.4 | 66,880 | 0.3 | 17 | 310 | 1.4 | 3,578 | 0.7 | 331 | 21,398 | 233,080 |
| 5 and younger | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 3 | 36 |
| 6-14 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 6 | 62 |
| 15-20 | 19 | 20.9 | 223 | 0.2 | 2 | 0 | 0.0 | 0 | 0.0 | 0 | 91 | 1,033 |
| 21-44 | 2,667 | 24.9 | 30,451 | 0.3 | 14 | 107 | 1.0 | 1,250 | 0.7 | 415 | 10,706 | 117,826 |
| 45-64 | 3,174 | 30.2 | 36,111 | 0.4 | 20 | 201 | 1.9 | 2,312 | 0.7 | 287 | 10,520 | 113,609 |
| 65-74 | 10 | 14.3 | 95 | 0.6 | 26 | 2 | 2.9 | 16 | 0.7 | 61 | 70 | 496 |
| 75-84 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 2 | 18 |
| 85 and older | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0 |
| **Other Eligibles** | 4,646 | 27.6 | 52,788 | 0.4 | 20 | 1,383 | 8.2 | 14,056 | 0.7 | 85 | 16,812 | 171,545 |
| 5 and younger | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 1 | 12 |
| 6-14 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 2 | 14 |
| 15-20 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 4 | 37 |
| 21-44 | 54 | 31.6 | 432 | 0.3 | 55 | 1 | 0.6 | 5 | 0.4 | 130 | 171 | 1,196 |
| 45-64 | 19 | 21.6 | 168 | 0.4 | 17 | 0 | 0.0 | 0 | 0.0 | 0 | 88 | 602 |
| 65-74 | 2,412 | 31.8 | 27,903 | 0.3 | 18 | 278 | 3.7 | 2,964 | 0.6 | 88 | 7,575 | 80,895 |
| 75-84 | 1,577 | 26.7 | 18,099 | 0.4 | 21 | 659 | 11.2 | 6,769 | 0.7 | 84 | 5,905 | 60,219 |
| 85 and older | 584 | 19.0 | 6,186 | 0.4 | 25 | 445 | 14.5 | 4,318 | 0.7 | 83 | 3,066 | 28,570 |
| **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 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.7D includes the beneficiaries represented by Cell G of Table 1.  A user is a beneficiary who had at least one prescription filled in a given drug group during 2004.  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 2004.  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 D.8

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,

BY BENEFICIARY CHARACTERISTIC[a, b]

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| 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** | **$320** | **6.7** | **8,532** | **87,225** |
| **Age** | | | | |
| 0-64 | 523 | 8.0 | 829 | 9,125 |
| 65-74 | 425 | 7.9 | 982 | 10,250 |
| 75-84 | 320 | 6.9 | 2,770 | 28,063 |
| 85 and older | 246 | 5.9 | 3,951 | 39,787 |
| Unknown | 0 | 0.0 | 0 | 0 |
| **Gender** | | | | |
| Female | 313 | 6.7 | 6,174 | 63,910 |
| Male | 339 | 6.6 | 2,358 | 23,315 |
| Unknown | 0 | 0.0 | 0 | 0 |
| **Race** | | | | |
| White | 319 | 6.7 | 7,562 | 77,227 |
| African American | 356 | 6.6 | 201 | 2,166 |
| Other/unknown | 314 | 6.3 | 769 | 7,832 |
| **Basis of Eligibility[c]** | | | | |
| Aged | 296 | 6.5 | 7,694 | 78,013 |
| Disabled | 522 | 8.0 | 838 | 9,212 |
| 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 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2004 Medicaid enrollment.  A total of 7,370 beneficiaries who were in nursing facilities for part of their enrollment and their 69,047 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 ebecause 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 D.9

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,

BY BRAND STATUS AND THERAPEUTIC CATEGORY [a, b, c, d, e]

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| 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 Dual All-Year Nursing Facility Residents | |
| Anti-infective Agents | 0.4 | 0.2 | 0.0 | 0.3 | $20 | $14 | $2 | $5 | $47 | $90 | $73 | $19 | 25,936 | $1,210,684 | 5,681 | 66.6 % | 60,655 |
| Biologicals | 0.1 | 0.0 | 0.0 | 0.1 | 3 | 1 | 0 | 2 | 27 | 25 | 15 | 29 | 310 | 8,374 | 293 | 3.4 | 3,130 |
| Antineoplastic Agents | 0.6 | 0.1 | 0.0 | 0.5 | 88 | 41 | 0 | 47 | 148 | 540 | 51 | 91 | 2,113 | 311,736 | 359 | 4.2 | 3,541 |
| Endocrine/Metabolic Drugs | 1.3 | 0.5 | 0.2 | 0.6 | 44 | 33 | 3 | 8 | 34 | 70 | 19 | 12 | 60,439 | 2,060,436 | 4,507 | 52.8 | 47,150 |
| Cardiovascular Agents | 2.1 | 0.4 | 0.0 | 1.6 | 47 | 25 | 1 | 21 | 23 | 60 | 20 | 13 | 126,401 | 2,861,233 | 5,973 | 70.0 | 61,495 |
| Respiratory Agents | 0.6 | 0.3 | 0.0 | 0.3 | 36 | 30 | 0 | 7 | 59 | 87 | 26 | 25 | 17,088 | 1,012,066 | 2,620 | 30.7 | 27,865 |
| Gastrointestinal Agents | 0.9 | 0.3 | 0.0 | 0.5 | 45 | 35 | 1 | 9 | 52 | 110 | 32 | 18 | 41,086 | 2,135,476 | 4,479 | 52.5 | 47,114 |
| Genitourinary Agents | 0.6 | 0.3 | 0.0 | 0.3 | 30 | 22 | 2 | 7 | 48 | 73 | 41 | 23 | 15,360 | 733,878 | 2,242 | 26.3 | 24,083 |
| CNS Drugs | 1.6 | 0.8 | 0.1 | 0.7 | 117 | 93 | 10 | 15 | 74 | 123 | 71 | 21 | 105,866 | 7,845,292 | 6,402 | 75.0 | 66,781 |
| Stimulants/Anti-obesity/Anorexia | 0.8 | 0.0 | 0.0 | 0.8 | 16 | 0 | 1 | 15 | 20 | 74 | 28 | 19 | 705 | 13,848 | 80 | 0.9 | 844 |
| Miscellaneous Psychological/ Neurological Agents | 0.9 | 0.9 | 0.0 | 0.0 | 142 | 142 | 0 | 0 | 159 | 159 | 0 | 14 | 10,644 | 1,692,741 | 1,149 | 13.5 | 11,911 |
| Analgesics and Anesthetics | 1.2 | 0.3 | 0.0 | 0.8 | 48 | 34 | 1 | 12 | 41 | 105 | 52 | 15 | 57,052 | 2,349,822 | 4,806 | 56.3 | 49,272 |
| Neuromuscular Agents | 1.3 | 0.3 | 0.3 | 0.7 | 82 | 34 | 23 | 25 | 63 | 106 | 88 | 34 | 43,870 | 2,755,625 | 3,133 | 36.7 | 33,661 |
| Nutritional Products | 0.8 | 0.0 | 0.1 | 0.7 | 14 | 0 | 1 | 13 | 17 | 17 | 14 | 18 | 21,201 | 369,172 | 2,594 | 30.4 | 26,764 |
| Hematological Agents | 1.1 | 0.3 | 0.1 | 0.8 | 61 | 52 | 1 | 7 | 53 | 187 | 13 | 10 | 28,491 | 1,507,417 | 2,415 | 28.3 | 24,831 |
| Topical Products | 0.5 | 0.2 | 0.0 | 0.3 | 20 | 12 | 1 | 7 | 39 | 70 | 46 | 22 | 24,479 | 956,093 | 4,434 | 52.0 | 48,169 |
| Miscellaneous Products | 0.2 | 0.0 | 0.0 | 0.2 | 11 | 4 | 1 | 7 | 47 | 91 | 150 | 35 | 839 | 39,034 | 344 | 4.0 | 3,574 |
| Unknown Therapeutic Category | 0.4 | 0.0 | 0.0 | 0.0 | 7 | 0 | 0 | 0 | 16 | 0 | 0 | 0 | 2,107 | 34,223 | 460 | 5.4 | 5,109 |
| 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. | 583,987 | 27,897,150 | n.a. | n.a. | n.a. |

Source: Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007. This table was produced on 04/10/2008.

a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 7,370 beneficiaries who were in nursing facilities for part of their enrollment and their 69,047 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 2004. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

e. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired.  Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired.  Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder.  For information about this classification method, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

In Washington, 0.3 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.

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]

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| Top 10 Drug Groups in Nursing Facilities | Total Medicaid Rx $ | Users | | | Among Users | | |
|---|---|---|---|---|---|---|---|
| | | 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 | $4,535,513 | 3,507 | 41.1 % | 37,761 | 0.8 | $150 | $120 |
| ANTIDEPRESSANTS | 3,108,590 | 6,469 | 75.8 | 68,927 | 0.9 | 52 | 45 |
| ANTICONVULSANT | 2,000,829 | 2,641 | 31.0 | 28,848 | 1.0 | 71 | 69 |
| ULCER DRUGS | 1,855,735 | 4,264 | 50.0 | 45,404 | 0.8 | 52 | 41 |
| MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL | 1,692,741 | 1,300 | 15.2 | 13,702 | 0.8 | 159 | 124 |
| ANALGESICS - Narcotic | 1,493,766 | 5,143 | 60.3 | 52,506 | 0.8 | 34 | 28 |
| ANTIDIABETIC | 1,096,497 | 2,909 | 34.1 | 30,702 | 0.9 | 38 | 36 |
| ANTIHYPERLIPIDEMIC | 860,042 | 1,492 | 17.5 | 15,820 | 0.8 | 66 | 54 |
| MISC. ENDOCRINE | 837,399 | 1,567 | 18.4 | 17,087 | 0.7 | 70 | 49 |
| ANTIASTHMATIC | 807,580 | 2,710 | 31.8 | 29,028 | 0.4 | 64 | 28 |
| | | | | | | | |
| Total | 18,288,692 | 32,002 | | 339,785 | n.a. | n.a. | n.a. |

Source:  Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004.  A total of 7,370 beneficiaries who were in nursing facilities for part of their enrollment and their 69,047 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 2004.  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 2004 Medicaid reimbursement for all-year nursing facility residents in this state.  For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

TABLE D.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]
DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| Beneficiary Characteristics | All Top 10 Drug Groups | | ANTIPSYCHOTICS | | | | | ANTIDEPRESSANTS | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 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** | **275,050** | **$18,288,692** | **3,507** | **41.1 %** | **37,761** | **0.8** | **$120** | **6,469** | **75.8 %** | **68,927** | **0.9** | **$45** |
| **Female** | 200,995 | 13,134,681 | 2,492 | 40.4 | 27,052 | 0.8 | 117 | 4,770 | 77.3 | 51,291 | 0.9 | 45 |
| **Disabled** | 18,485 | 1,575,506 | 191 | 48.1 | 2,205 | 0.9 | 160 | 370 | 93.2 | 4,163 | 0.9 | 50 |
| 64 or younger | 18,296 | 1,567,617 | 189 | 48.0 | 2,185 | 0.9 | 161 | 368 | 93.4 | 4,139 | 0.9 | 50 |
| 65-74 | 189 | 7,889 | 2 | 66.7 | 20 | 2.8 | 93 | 2 | 66.7 | 24 | 1.0 | 55 |
| 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** | 182,510 | 11,559,175 | 2,301 | 39.8 | 24,847 | 0.8 | 113 | 4,400 | 76.2 | 47,128 | 0.9 | 44 |
| 64 or younger | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 65-74 | 26,264 | 1,964,890 | 303 | 51.4 | 3,376 | 0.9 | 145 | 507 | 86.1 | 5,525 | 0.9 | 49 |
| 75-84 | 69,679 | 4,404,019 | 875 | 45.1 | 9,535 | 0.8 | 117 | 1,555 | 80.2 | 16,635 | 0.9 | 44 |
| 85 and older | 86,567 | 5,190,266 | 1,123 | 34.6 | 11,936 | 0.7 | 100 | 2,338 | 72.0 | 24,968 | 0.9 | 43 |
| **Male** | 74,055 | 5,154,011 | 1,015 | 43.0 | 10,709 | 0.8 | 129 | 1,699 | 72.1 | 17,636 | 0.9 | 47 |
| **Disabled** | 19,065 | 1,683,167 | 229 | 51.9 | 2,581 | 0.8 | 175 | 359 | 81.4 | 4,014 | 0.9 | 55 |
| 64 or younger | 18,855 | 1,669,460 | 226 | 52.0 | 2,552 | 0.8 | 175 | 356 | 81.8 | 3,980 | 0.9 | 55 |
| 65-74 | 210 | 13,707 | 3 | 50.0 | 29 | 1.3 | 204 | 3 | 50.0 | 34 | 0.8 | 56 |
| 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** | 54,990 | 3,470,844 | 786 | 41.0 | 8,128 | 0.8 | 114 | 1,340 | 69.9 | 13,622 | 0.9 | 45 |
| 64 or younger | 0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 65-74 | 14,715 | 998,493 | 172 | 44.8 | 1,909 | 0.9 | 155 | 286 | 74.5 | 3,106 | 0.9 | 49 |
| 75-84 | 24,177 | 1,503,950 | 348 | 41.9 | 3,579 | 0.8 | 106 | 603 | 72.6 | 6,131 | 0.9 | 45 |
| 85 and older | 16,098 | 968,401 | 266 | 37.9 | 2,640 | 0.8 | 97 | 451 | 64.2 | 4,385 | 0.9 | 41 |
| **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 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004.  A total of 7,370 beneficiaries who were in nursing facilities for part of their enrollment and their 69,047 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 2004.  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 2004 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.

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]

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| Beneficiary Characteristics | ANTICONVULSANT | | | | | ULCER DRUGS | | | | | 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** | **2,641** | **31.0 %** | **28,848** | **1.0** | **$69** | **4,264** | **50.0 %** | **45,404** | **0.8** | **$41** | **1,300** | **15.2 %** | **13,702** | **0.8** | **$124** |
| **Female** | 1,787 | 28.9 | 19,580 | 1.0 | 63 | 3,059 | 49.5 | 32,745 | 0.8 | 40 | 936 | 15.2 | 10,119 | 0.8 | 126 |
| **Disabled** | 268 | 67.5 | 3,089 | 1.1 | 88 | 205 | 51.6 | 2,276 | 0.8 | 48 | 41 | 10.3 | 483 | 0.8 | 536 |
| r | 265 | 67.3 | 3,061 | 1.1 | 88 | 205 | 52.0 | 2,276 | 0.8 | 48 | 40 | 10.2 | 475 | 0.8 | 545 |
| 64 or younge | 3 | 100.0 | 28 | 1.8 | 88 | 0 | 0.0 | 0 | 0.0 | 0 | 1 | 33.3 | 8 | 0.4 | 30 |
| 65-74 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 75-84 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 85 and older **Other Eligibles** | 1,519 | 26.3 | 16,491 | 0.9 | 59 | 2,854 | 49.4 | 30,469 | 0.8 | 39 | 895 | 15.5 | 9,636 | 0.8 | 106 |
| r | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 64 or younge | 311 | 52.8 | 3,419 | 1.0 | 80 | 326 | 55.3 | 3,549 | 0.8 | 43 | 61 | 10.4 | 688 | 0.9 | 245 |
| 65-74 | 636 | 32.8 | 6,924 | 0.9 | 58 | 997 | 51.4 | 10,570 | 0.8 | 40 | 375 | 19.3 | 4,000 | 0.8 | 103 |
| 75-84 | 572 | 17.6 | 6,148 | 0.9 | 48 | 1,531 | 47.1 | 16,350 | 0.8 | 38 | 459 | 14.1 | 4,948 | 0.8 | 89 |
| 85 and older | | | | | | | | | | | | | | | |
| **Male** | 854 | 36.2 | 9,268 | 1.0 | 82 | 1,205 | 51.1 | 12,659 | 0.8 | 44 | 364 | 15.4 | 3,583 | 0.8 | 116 |
| **Disabled** | 328 | 74.4 | 3,657 | 1.2 | 117 | 260 | 59.0 | 2,897 | 0.8 | 56 | 18 | 4.1 | 201 | 0.8 | 518 |
| r | 326 | 74.9 | 3,635 | 1.2 | 118 | 256 | 58.9 | 2,859 | 0.8 | 56 | 18 | 4.1 | 201 | 0.8 | 518 |
| 64 or younge | 2 | 33.3 | 22 | 1.1 | 66 | 4 | 66.7 | 38 | 0.8 | 45 | 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 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 85 and older **Other Eligibles** | 526 | 27.4 | 5,611 | 0.9 | 60 | 945 | 49.3 | 9,762 | 0.8 | 40 | 346 | 18.0 | 3,382 | 0.8 | 92 |
| r | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 64 or younge | 170 | 44.3 | 1,869 | 1.0 | 71 | 213 | 55.5 | 2,290 | 0.8 | 46 | 47 | 12.2 | 496 | 0.7 | 88 |
| 65-74 | 230 | 27.7 | 2,452 | 1.0 | 56 | 426 | 51.3 | 4,426 | 0.8 | 37 | 178 | 21.4 | 1,713 | 0.8 | 94 |
| 75-84 | 126 | 17.9 | 1,290 | 0.9 | 49 | 306 | 43.6 | 3,046 | 0.8 | 41 | 121 | 17.2 | 1,173 | 0.8 | 90 |
| 85 and older | | | | | | | | | | | | | | | |
| **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 2004 file for Washington, released by CMS in 00/2007. This table was produced on 04/10/2008.

a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 7,370 beneficiaries who were in nursing facilities for part of their enrollment and their 69,047 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 2004. 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 2004 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 D.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]

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| Beneficiary Characteristics | ANALGESICS - Narcotic | | | | | ANTIDIABETIC | | | | | ANTIHYPERLIPIDEMIC | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Number of Users | Users as % of All-Year Nursing Facility Residents | Number of Benefit Months Among Users | Mean Number of Rx | Mean Rx $ | Number of Users | Users as % of All-Year Nursing Facility Residents | Number of Benefit Months Among Users | Mean Number of Rx | Mean Rx $ | Number of Users | Users as % of All-Year Nursing Facility Residents | Number of Benefit Months Among Users | Mean Number of Rx | Mean Rx $ |
| **All** | **5,143** | **60.3 %** | **52,506** | **0.8** | **$28** | **2,909** | **34.1 %** | **30,702** | **0.9** | **$36** | **1,492** | **17.5 %** | **15,820** | **0.8** | **$54** |
| **Female** | 3,941 | 63.8 | 40,667 | 0.8 | 30 | 2,047 | 33.2 | 22,077 | 0.9 | 37 | 984 | 15.9 | 10,604 | 0.8 | 54 |
| **Disabled** | 254 | 64.0 | 2,829 | 1.1 | 38 | 156 | 39.3 | 1,750 | 1.2 | 61 | 97 | 24.4 | 1,113 | 0.8 | 57 |
| r | 254 | 64.5 | 2,829 | 1.1 | 38 | 152 | 38.6 | 1,706 | 1.2 | 61 | 97 | 24.6 | 1,113 | 0.8 | 57 |
| 64 or younge | 0 | 0.0 | 0 | 0.0 | 0 | 4 | 133.3 | 44 | 1.1 | 40 | 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 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 85 and older | | | | | | | | | | | | | | | |
| **Other Eligibles** | 3,687 | 63.8 | 37,838 | 0.8 | 29 | 1,891 | 32.7 | 20,327 | 0.9 | 35 | 887 | 15.4 | 9,491 | 0.8 | 54 |
| r | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 64 or younger | 398 | 67.6 | 4,146 | 1.1 | 41 | 321 | 54.5 | 3,581 | 0.9 | 43 | 169 | 28.7 | 1,864 | 0.8 | 60 |
| 65-74 | 1,283 | 66.2 | 13,253 | 0.8 | 29 | 828 | 42.7 | 8,845 | 0.9 | 34 | 412 | 21.2 | 4,369 | 0.8 | 53 |
| 75-84 | 2,006 | 61.7 | 20,439 | 0.7 | 27 | 742 | 22.8 | 7,901 | 0.9 | 31 | 306 | 9.4 | 3,258 | 0.8 | 52 |
| 85 and older | | | | | | | | | | | | | | | |
| **Male** | 1,202 | 51.0 | 11,839 | 0.8 | 23 | 862 | 36.6 | 8,625 | 0.9 | 33 | 508 | 21.5 | 5,216 | 0.8 | 55 |
| **Disabled** | 234 | 53.1 | 2,546 | 1.1 | 40 | 129 | 29.3 | 1,316 | 1.0 | 42 | 92 | 20.9 | 998 | 0.9 | 70 |
| r | 229 | 52.6 | 2,496 | 1.1 | 40 | 128 | 29.4 | 1,306 | 1.0 | 42 | 91 | 20.9 | 986 | 0.9 | 70 |
| 64 or younge | 5 | 83.3 | 50 | 1.2 | 10 | 1 | 16.7 | 10 | 1.4 | 84 | 1 | 16.7 | 12 | 0.8 | 59 |
| 65-74 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 75-84 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 85 and older | | | | | | | | | | | | | | | |
| **Other Eligibles** | 968 | 50.5 | 9,293 | 0.7 | 19 | 733 | 38.2 | 7,309 | 0.9 | 32 | 416 | 21.7 | 4,218 | 0.8 | 51 |
| r | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 |
| 64 or younger | 193 | 50.3 | 2,113 | 1.0 | 28 | 189 | 49.2 | 2,004 | 1.1 | 38 | 124 | 32.3 | 1,325 | 0.8 | 56 |
| 65-74 | 397 | 47.8 | 3,798 | 0.6 | 16 | 353 | 42.5 | 3,494 | 0.9 | 31 | 197 | 23.7 | 1,948 | 0.8 | 47 |
| 75-84 | 378 | 53.8 | 3,382 | 0.6 | 17 | 191 | 27.2 | 1,811 | 0.8 | 26 | 95 | 13.5 | 945 | 0.9 | 53 |
| 85 and older | | | | | | | | | | | | | | | |
| **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 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004.  A total of 7,370 beneficiaries who were in nursing facilities for part of their enrollment and their 69,047 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 2004.  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 2004 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.

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]
DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| Beneficiary Characteristics | MISC. ENDOCRINE | | | | | ANTIASTHMATIC | | | | | 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 | 1,567 | 18.4 % | 17,087 | 0.7 | $49 | 2,710 | 31.8 % | 29,028 | 0.4 | $28 | 8,532 | 87,225 |
| Female | 1,375 | 22.3 | 15,075 | 0.7 | 50 | 1,887 | 30.6 | 20,598 | 0.4 | 26 | 6,174 | 63,910 |
| Disabled | 68 | 17.1 | 781 | 0.6 | 55 | 133 | 33.5 | 1,500 | 0.5 | 35 | 397 | 4,472 |
| 64 or younger | 67 | 17.0 | 773 | 0.6 | 55 | 132 | 33.5 | 1,492 | 0.5 | 35 | 394 | 4,440 |
| 65-74 | 1 | 33.3 | 8 | 0.8 | 31 | 1 | 33.3 | 8 | 0.1 | 2 | 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 | 1,307 | 22.6 | 14,294 | 0.7 | 49 | 1,754 | 30.4 | 19,098 | 0.4 | 25 | 5,777 | 59,438 |
| 64 or younger | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0 |
| 65-74 | 118 | 20.0 | 1,260 | 0.8 | 61 | 251 | 42.6 | 2,692 | 0.5 | 36 | 589 | 6,200 |
| 75-84 | 424 | 21.9 | 4,598 | 0.7 | 49 | 610 | 31.5 | 6,642 | 0.4 | 27 | 1,939 | 19,999 |
| 85 and older | 765 | 23.5 | 8,436 | 0.7 | 47 | 893 | 27.5 | 9,764 | 0.4 | 21 | 3,249 | 33,239 |
| Male | 192 | 8.1 | 2,012 | 0.7 | 46 | 823 | 34.9 | 8,430 | 0.5 | 32 | 2,358 | 23,315 |
| Disabled | 50 | 11.3 | 565 | 0.6 | 46 | 134 | 30.4 | 1,489 | 0.6 | 44 | 441 | 4,740 |
| 64 or younger | 50 | 11.5 | 565 | 0.6 | 46 | 132 | 30.3 | 1,465 | 0.6 | 44 | 435 | 4,685 |
| 65-74 | 0 | 0.0 | 0 | 0.0 | 0 | 2 | 33.3 | 24 | 0.4 | 29 | 6 | 55 |
| 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 | 142 | 7.4 | 1,447 | 0.7 | 45 | 689 | 35.9 | 6,941 | 0.5 | 30 | 1,917 | 18,575 |
| 64 or younger | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0.0 | 0 | 0.0 | 0 | 0 | 0 |
| 65-74 | 19 | 4.9 | 218 | 0.7 | 48 | 146 | 38.0 | 1,535 | 0.5 | 32 | 384 | 3,963 |
| 75-84 | 70 | 8.4 | 673 | 0.6 | 42 | 313 | 37.7 | 3,164 | 0.5 | 31 | 831 | 8,064 |
| 85 and older | 53 | 7.5 | 556 | 0.8 | 49 | 230 | 32.8 | 2,242 | 0.4 | 27 | 702 | 6,548 |
| 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 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004.  A total of 7,370 beneficiaries who were in nursing facilities for part of their enrollment and their 69,047 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 2004.  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 2004 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 D.11

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG DUALS, BY BENEFICIARY CHARACTERISTIC[a,b]
WASHINGTON, 2004

| 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 Dual Rx $ | Total Number of Beneficiaries |
|---|---|---|---|---|---|---|---|---|---|
| All | 66,949 | 65.9 % | 9.0 | 911,106 | $99 | $10,097,856 | $11 | 3.4 % | 101,583 |
| **Age** | | | | | | | | | |
| 5 and younger | 9 | 100.0 | 24.1 | 217 | 565 | 5,085 | 23 | 6.5 | 9 |
| 6-14 | 17 | 85.0 | 18.5 | 370 | 336 | 6,716 | 18 | 3.8 | 20 |
| 15-20 | 67 | 38.5 | 3.2 | 563 | 56 | 9,720 | 17 | 2.5 | 174 |
| 21-44 | 10,444 | 53.3 | 5.3 | 104,435 | 69 | 1,353,531 | 13 | 2.2 | 19,596 |
| 45-64 | 16,498 | 67.2 | 9.5 | 233,258 | 119 | 2,913,918 | 12 | 3.0 | 24,566 |
| 65-74 | 14,560 | 68.4 | 9.7 | 207,071 | 103 | 2,190,390 | 11 | 4.0 | 21,283 |
| 75-84 | 14,309 | 70.5 | 10.3 | 208,659 | 103 | 2,082,488 | 10 | 4.2 | 20,283 |
| 85 and older | 11,045 | 70.6 | 10.0 | 156,533 | 98 | 1,536,008 | 10 | 4.8 | 15,652 |
| Unknown | 0 | 0.0 | 0.0 | 0 | 0 | 0 | 0 | 0.0 | 0 |
| **Basis of Eligibility[c]** | | | | | | | | | |
| Aged | 39,851 | 69.8 | 10.0 | 571,622 | 102 | 5,801,576 | 10 | 4.3 | 57,080 |
| Disabled | 26,793 | 61.3 | 7.7 | 337,715 | 98 | 4,274,745 | 13 | 2.7 | 43,706 |
| Adults | 291 | 37.4 | 2.1 | 1,604 | 25 | 19,512 | 12 | 2.2 | 779 |
| Children | 14 | 77.8 | 9.2 | 165 | 112 | 2,023 | 12 | 3.4 | 18 |
| Unknown | 0 | 0.0 | 0.0 | 0 | 0 | 0 | 0 | 0.0 | 0 |
| **Gender** | | | | | | | | | |
| Female | 44,731 | 70.6 | 10.1 | 637,830 | 110 | 6,954,165 | 11 | 3.7 | 63,373 |
| Male | 22,218 | 58.1 | 7.2 | 273,276 | 82 | 3,143,691 | 12 | 3.0 | 38,210 |
| Unknown | 0 | 0.0 | 0.0 | 0 | 0 | 0 | 0 | 0.0 | 0 |
| **Race** | | | | | | | | | |
| White | 50,679 | 65.3 | 9.0 | 697,196 | 102 | 7,953,034 | 11 | 3.3 | 77,625 |
| African American | 3,073 | 64.4 | 8.1 | 38,472 | 91 | 436,611 | 11 | 3.4 | 4,772 |
| Other/unknown | 13,197 | 68.8 | 9.1 | 175,438 | 89 | 1,708,211 | 10 | 4.2 | 19,186 |
| **Use of Nursing Facilities[d]** | | | | | | | | | |
| Entire year | 5,232 | 61.3 | 5.9 | 50,213 | 96 | 815,892 | 16 | 2.9 | 8,532 |
| Part year | 5,679 | 77.1 | 9.2 | 67,605 | 115 | 848,134 | 13 | 3.8 | 7,370 |
| None | 56,038 | 65.4 | 9.3 | 793,288 | 98 | 8,433,830 | 11 | 3.5 | 85,681 |
| **Maintenance Assistance Status** | | | | | | | | | |
| Cash | 32,361 | 63.4 | 7.7 | 394,967 | 84 | 4,315,309 | 11 | 3.1 | 51,079 |
| Medically needy | 1,511 | 67.2 | 7.1 | 16,031 | 92 | 207,178 | 13 | 2.3 | 2,250 |
| Poverty related | 906 | 27.2 | 1.8 | 5,973 | 23 | 78,104 | 13 | 2.9 | 3,326 |
| Other/unknown | 32,171 | 71.6 | 11.0 | 494,135 | 122 | 5,497,265 | 11 | 3.8 | 44,928 |

Source:  Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a.  Table D.11 includes the beneficiaries represented by Cell G of Table 1.  Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2004.

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 D.12

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC[a,b]
WASHINGTON, 2004

| Beneficiary Characteristics | Number Rx per Benefit Month | Rx $ per Benefit Month | $ per Rx | Barbiturate $ per Benefit Month | Benzodiazapine $ per Benefit Month | Number of Benefit Months |
|---|---|---|---|---|---|---|
| **All** | **0.8** | **$9** | **$11** | **$0** | **$2** | **1,079,506** |
| **Age** | | | | | | |
| 5 and younger | 2.2 | 51 | 23 | 0 | 2 | 100 |
| 6-14 | 1.8 | 32 | 18 | 0 | 2 | 209 |
| 15-20 | 0.3 | 5 | 17 | 0 | 0 | 1,927 |
| 21-44 | 0.5 | 6 | 13 | 0 | 2 | 213,906 |
| 45-64 | 0.9 | 11 | 12 | 0 | 3 | 268,227 |
| 65-74 | 0.9 | 10 | 11 | 0 | 1 | 229,970 |
| 75-84 | 1.0 | 10 | 10 | 0 | 1 | 211,858 |
| 85 and older | 1.0 | 10 | 10 | 0 | 1 | 153,309 |
| Unknown | 0.0 | 0 | 0 | 0 | 0 | 0 |
| **Basis of Eligibility[c]** | | | | | | |
| Aged | 1.0 | 10 | 10 | 0 | 1 | 594,141 |
| Disabled | 0.7 | 9 | 13 | 0 | 2 | 479,450 |
| Adults | 0.3 | 3 | 12 | 0 | 1 | 5,730 |
| Children | 0.9 | 11 | 12 | 0 | 1 | 185 |
| Unknown | 0.0 | 0 | 0 | 0 | 0 | 0 |
| **Gender** | | | | | | |
| Female | 0.9 | 10 | 11 | 0 | 2 | 674,881 |
| Male | 0.7 | 8 | 12 | 0 | 1 | 404,625 |
| Unknown | 0.0 | 0 | 0 | 0 | 0 | 0 |
| **Race** | | | | | | |
| White | 0.8 | 10 | 11 | 0 | 2 | 821,164 |
| African American | 0.8 | 9 | 11 | 0 | 1 | 50,806 |
| Other/unknown | 0.8 | 8 | 10 | 0 | 1 | 207,536 |
| **Use of Nursing Facilities[d]** | | | | | | |
| Entire year | 0.6 | 9 | 16 | 0 | 2 | 87,225 |
| Part year | 1.0 | 12 | 13 | 0 | 2 | 69,047 |
| None | 0.9 | 9 | 11 | 0 | 2 | 923,234 |
| **Maintenance Assistance Status** | | | | | | |
| Cash | 0.7 | 8 | 11 | 0 | 1 | 566,336 |
| Medically needy | 0.7 | 9 | 13 | 0 | 2 | 23,469 |
| Poverty related | 0.2 | 3 | 13 | 0 | 1 | 28,477 |
| Other/unknown | 1.1 | 12 | 11 | 0 | 2 | 461,224 |

Source:  Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a.  Table D.12 includes the beneficiaries represented by Cell G of Table 1.  Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2004.

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.

TABLE D.13

USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
FOR SELECTED DRUG CATEGORIES AMONG DUALS[a,b,c]
WASHINGTON, 2004

| 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** | **108,832** | **$93** | **$10,097,856** | **100.0 %** | **911,106** | **$11** | **100.0 %** |
| Anorexia or weight loss/gain | 0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Fertility drugs | 0 | 0 | 0 | 0.0 | 0 | 0 | 0.0 |
| Drugs for cosmetic purposes | 65 | 22 | 1,418 | 0.0 | 134 | 11 | 0.0 |
| Cough and cold medications | 11,123 | 46 | 513,601 | 5.1 | 29,466 | 17 | 3.2 |
| Vitamins and minerals | 18,376 | 125 | 2,295,332 | 22.7 | 130,840 | 18 | 14.4 |
| Non-prescription drugs | 52,564 | 96 | 5,029,556 | 49.8 | 579,256 | 9 | 63.6 |
| Barbiturates | 715 | 77 | 54,725 | 0.5 | 7,394 | 7 | 0.8 |
| Benzodiazepines | 22,988 | 81 | 1,871,632 | 18.5 | 152,632 | 12 | 16.8 |
| Other Part D Excl Rx Drugs | 3,001 | 110 | 331,592 | 3.3 | 11,384 | 29 | 1.2 |

Source: Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007. This table was produced on 04/10/2008.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2004. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2004. 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 D11.

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.

## SUPPLEMENTAL TABLE 1
## MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES[a, b]
## WASHINGTON, 2004

| | |
|---|---|
| Total Number of Dual Eligible Beneficiaries | 101,583 |
| Total Pharmacy Reimbursement for Dual Eligible Beneficiaries | $294,229,288 |
| Mean Pharmacy Reimbursement per Dual Eligible Beneficiary | $2,896 |

| Annual Pharmacy Reimbursement per Beneficiary | Number of Beneficiaries | Percent of Dual Beneficiaries | Pharmacy Reimbursement | Percent of Total Pharmacy Reimbursement |
|---|---|---|---|---|
| $0 | 10,705 | 10.5 % | $0 | 0.0 % |
| 1-500 | 18,123 | 17.8 | 3,726,997 | 1.3 |
| 501-1,000 | 10,693 | 10.5 | 7,936,233 | 2.7 |
| 1,001-1,500 | 8,838 | 8.7 | 11,000,328 | 3.7 |
| 1,501-2,000 | 7,515 | 7.4 | 13,102,104 | 4.5 |
| 2,001-2,500 | 6,536 | 6.4 | 14,687,337 | 5.0 |
| 2,501-3,000 | 5,510 | 5.4 | 15,126,718 | 5.1 |
| 3,001-3,500 | 4,742 | 4.7 | 15,392,916 | 5.2 |
| 3,501-4,000 | 4,132 | 4.1 | 15,475,983 | 5.3 |
| 4,001-4,500 | 3,533 | 3.5 | 14,991,354 | 5.1 |
| 4,501-5,000 | 2,977 | 2.9 | 14,118,532 | 4.8 |
| 5,001-5,500 | 2,468 | 2.4 | 12,937,536 | 4.4 |
| 5,501-6,000 | 2,146 | 2.1 | 12,327,122 | 4.2 |
| 6,001-6,500 | 1,819 | 1.8 | 11,355,064 | 3.9 |
| 6,501-7,000 | 1,520 | 1.5 | 10,240,468 | 3.5 |
| 7,001-7,500 | 1,295 | 1.3 | 9,380,932 | 3.2 |
| 7,501-8,000 | 1,080 | 1.1 | 8,360,866 | 2.8 |
| 8,001-8,500 | 970 | 1.0 | 7,999,688 | 2.7 |
| 8,501-9,000 | 770 | 0.8 | 6,738,779 | 2.3 |
| 9,001-9,500 | 695 | 0.7 | 6,419,441 | 2.2 |
| 9,501-10,000 | 633 | 0.6 | 6,160,350 | 2.1 |
| 10,001+ | 4,883 | 4.8 | 76,750,540 | 26.1 |

Source: Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a.  This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2004.

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

# SUPPLEMENTAL TABLE 1A
## MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65[a, b, c]
## WASHINGTON, 2004

| | |
|---|---|
| Total Number of Disabled Dual Eligible Beneficiaries, Age < 65 | 43,556 |
| Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65 | $156,957,586 |
| Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65 | $3,604 |

| Annual Pharmacy Reimbursement per Beneficiary | Number of Beneficiaries | Percent of Disabled Dual Beneficiaries, Age < 65 | Pharmacy Reimbursement | Percent of Total Pharmacy Reimbursement |
|---|---|---|---|---|
| $0 | 5,400 | 12.4 % | 0 | 0.0 % |
| 1-500 | 8,028 | 18.4 | 1,511,871 | 1.0 |
| 501-1,000 | 3,793 | 8.7 | 2,794,142 | 1.8 |
| 1,001-1,500 | 2,974 | 6.8 | 3,697,554 | 2.4 |
| 1,501-2,000 | 2,528 | 5.8 | 4,408,702 | 2.8 |
| 2,001-2,500 | 2,216 | 5.1 | 4,985,249 | 3.2 |
| 2,501-3,000 | 1,912 | 4.4 | 5,258,025 | 3.3 |
| 3,001-3,500 | 1,669 | 3.8 | 5,428,099 | 3.5 |
| 3,501-4,000 | 1,540 | 3.5 | 5,770,054 | 3.7 |
| 4,001-4,500 | 1,377 | 3.2 | 5,851,588 | 3.7 |
| 4,501-5,000 | 1,217 | 2.8 | 5,769,942 | 3.7 |
| 5,001-5,500 | 1,092 | 2.5 | 5,729,494 | 3.7 |
| 5,501-6,000 | 1,034 | 2.4 | 5,939,296 | 3.8 |
| 6,001-6,500 | 916 | 2.1 | 5,716,664 | 3.6 |
| 6,501-7,000 | 767 | 1.8 | 5,170,350 | 3.3 |
| 7,001-7,500 | 738 | 1.7 | 5,349,315 | 3.4 |
| 7,501-8,000 | 623 | 1.4 | 4,823,485 | 3.1 |
| 8,001-8,500 | 565 | 1.3 | 4,659,744 | 3.0 |
| 8,501-9,000 | 481 | 1.1 | 4,208,385 | 2.7 |
| 9,001-9,500 | 441 | 1.0 | 4,073,354 | 2.6 |
| 9,501-10,000 | 422 | 1.0 | 4,108,647 | 2.6 |
| 10,001+ | 3,823 | 8.8 | 61,703,626 | 39.3 |

Source: Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007. This table was produced on 04/10/2008.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2004.

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

c. This table is limited to dual eligible beneficiaries who were under age 65 and also indicated as disabled in the MAX files. Therefore, dual eligible beneficiaries under age 65 in "adults" or "children" basis-of-eligibility categories in Table D.2 are excluded because they were not classified as disabled in the MAX files. Disabled dual eligible beneficiaries age 65 and older are included in Supplemental Tables 1B through 1E, depending on their age.

SUPPLEMENTAL TABLE 1B
MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER[a, b]
WASHINGTON, 2004

| | |
|---|---|
| Total Number of Dual Eligible Beneficiaries, Age 65+ | 57,218 |
| Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+ | $136,305,204 |
| Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+ | $2,382 |

| Annual Pharmacy Reimbursement per Beneficiary | Number of Beneficiaries | Percent of Dual Beneficiaries, Age 65+ | Pharmacy Reimbursement | Percent of Total Pharmacy Reimbursement |
|---|---|---|---|---|
| $0 | 5,051 | 8.8 % | 0 | 0.0 % |
| 1-500 | 9,831 | 17.2 | 2,169,552 | 1.6 |
| 501-1,000 | 6,822 | 11.9 | 5,085,532 | 3.7 |
| 1,001-1,500 | 5,809 | 10.2 | 7,234,472 | 5.3 |
| 1,501-2,000 | 4,952 | 8.7 | 8,634,332 | 6.3 |
| 2,001-2,500 | 4,301 | 7.5 | 9,661,044 | 7.1 |
| 2,501-3,000 | 3,582 | 6.3 | 9,823,961 | 7.2 |
| 3,001-3,500 | 3,062 | 5.4 | 9,929,030 | 7.3 |
| 3,501-4,000 | 2,577 | 4.5 | 9,650,024 | 7.1 |
| 4,001-4,500 | 2,146 | 3.8 | 9,097,353 | 6.7 |
| 4,501-5,000 | 1,754 | 3.1 | 8,320,284 | 6.1 |
| 5,001-5,500 | 1,370 | 2.4 | 7,176,345 | 5.3 |
| 5,501-6,000 | 1,110 | 1.9 | 6,376,776 | 4.7 |
| 6,001-6,500 | 898 | 1.6 | 5,607,145 | 4.1 |
| 6,501-7,000 | 750 | 1.3 | 5,049,866 | 3.7 |
| 7,001-7,500 | 552 | 1.0 | 3,995,274 | 2.9 |
| 7,501-8,000 | 455 | 0.8 | 3,522,110 | 2.6 |
| 8,001-8,500 | 403 | 0.7 | 3,323,198 | 2.4 |
| 8,501-9,000 | 287 | 0.5 | 2,513,055 | 1.8 |
| 9,001-9,500 | 254 | 0.4 | 2,346,087 | 1.7 |
| 9,501-10,000 | 209 | 0.4 | 2,032,580 | 1.5 |
| 10,001+ | 1,043 | 1.8 | 14,757,184 | 10.8 |

Source: Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a.  This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2004.

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

## SUPPLEMENTAL TABLE 1C
## MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74 [a, b]
## WASHINGTON, 2004

| | |
|---|---|
| Total Number of Dual Eligible Beneficiaries, Age 65-74 | 21,283 |
| Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74 | $54,390,177 |
| Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74 | $2,556 |

| Annual Pharmacy Reimbursement per Beneficiary | Number of Beneficiaries | Percent of Dual Beneficiaries, Age 65-74 | Pharmacy Reimbursement | Percent of Total Pharmacy Reimbursement |
|---|---|---|---|---|
| $0 | 2,466 | 11.6 % | 0 | 0.0 % |
| 1-500 | 3,523 | 16.6 | 742,285 | 1.4 |
| 501-1,000 | 2,335 | 11.0 | 1,749,268 | 3.2 |
| 1,001-1,500 | 1,963 | 9.2 | 2,448,315 | 4.5 |
| 1,501-2,000 | 1,737 | 8.2 | 3,026,292 | 5.6 |
| 2,001-2,500 | 1,506 | 7.1 | 3,389,011 | 6.2 |
| 2,501-3,000 | 1,187 | 5.6 | 3,258,807 | 6.0 |
| 3,001-3,500 | 1,023 | 4.8 | 3,318,874 | 6.1 |
| 3,501-4,000 | 868 | 4.1 | 3,253,100 | 6.0 |
| 4,001-4,500 | 756 | 3.6 | 3,210,516 | 5.9 |
| 4,501-5,000 | 657 | 3.1 | 3,125,541 | 5.7 |
| 5,001-5,500 | 522 | 2.5 | 2,735,074 | 5.0 |
| 5,501-6,000 | 436 | 2.0 | 2,503,809 | 4.6 |
| 6,001-6,500 | 363 | 1.7 | 2,267,083 | 4.2 |
| 6,501-7,000 | 305 | 1.4 | 2,055,446 | 3.8 |
| 7,001-7,500 | 239 | 1.1 | 1,730,140 | 3.2 |
| 7,501-8,000 | 228 | 1.1 | 1,766,253 | 3.2 |
| 8,001-8,500 | 196 | 0.9 | 1,613,793 | 3.0 |
| 8,501-9,000 | 147 | 0.7 | 1,284,087 | 2.4 |
| 9,001-9,500 | 122 | 0.6 | 1,127,896 | 2.1 |
| 9,501-10,000 | 105 | 0.5 | 1,022,052 | 1.9 |
| 10,001+ | 599 | 2.8 | 8,762,535 | 16.1 |

Source: Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2004.
b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

# SUPPLEMENTAL TABLE 1D
## MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84[a, b]
### WASHINGTON, 2004

| | |
|---|---|
| Total Number of Dual Eligible Beneficiaries, Age 75-84 | 20,283 |
| Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84 | $49,776,983 |
| Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84 | $2,454 |

| Annual Pharmacy Reimbursement per Beneficiary | Number of Beneficiaries | Percent of Dual Beneficiaries, Age 75-84 | Pharmacy Reimbursement | Percent of Total Pharmacy Reimbursement |
|---|---|---|---|---|
| $0 | 1,693 | 8.3 % | 0 | 0.0 % |
| 1-500 | 3,213 | 15.8 | 716,800 | 1.4 |
| 501-1,000 | 2,323 | 11.5 | 1,734,455 | 3.5 |
| 1,001-1,500 | 1,979 | 9.8 | 2,464,200 | 5.0 |
| 1,501-2,000 | 1,730 | 8.5 | 3,021,016 | 6.1 |
| 2,001-2,500 | 1,546 | 7.6 | 3,475,991 | 7.0 |
| 2,501-3,000 | 1,397 | 6.9 | 3,832,876 | 7.7 |
| 3,001-3,500 | 1,189 | 5.9 | 3,857,256 | 7.7 |
| 3,501-4,000 | 1,019 | 5.0 | 3,815,771 | 7.7 |
| 4,001-4,500 | 828 | 4.1 | 3,508,885 | 7.0 |
| 4,501-5,000 | 666 | 3.3 | 3,158,773 | 6.3 |
| 5,001-5,500 | 534 | 2.6 | 2,796,035 | 5.6 |
| 5,501-6,000 | 445 | 2.2 | 2,556,949 | 5.1 |
| 6,001-6,500 | 353 | 1.7 | 2,205,206 | 4.4 |
| 6,501-7,000 | 278 | 1.4 | 1,870,583 | 3.8 |
| 7,001-7,500 | 204 | 1.0 | 1,474,881 | 3.0 |
| 7,501-8,000 | 162 | 0.8 | 1,252,264 | 2.5 |
| 8,001-8,500 | 134 | 0.7 | 1,108,330 | 2.2 |
| 8,501-9,000 | 93 | 0.5 | 817,203 | 1.6 |
| 9,001-9,500 | 88 | 0.4 | 811,750 | 1.6 |
| 9,501-10,000 | 77 | 0.4 | 748,305 | 1.5 |
| 10,001+ | 332 | 1.6 | 4,549,454 | 9.1 |

Source: Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2004.

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

# SUPPLEMENTAL TABLE 1E
## MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER[a, b]
### WASHINGTON, 2004

| | |
|---|---|
| Total Number of Dual Eligible Beneficiaries, Age 85+ | 15,652 |
| Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+ | $32,138,044 |
| Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+ | $2,053 |

| Annual Pharmacy Reimbursement per Beneficiary | Number of Beneficiaries | Percent of Dual Beneficiaries, Age 85+ | Pharmacy Reimbursement | Percent of Total Pharmacy Reimbursement |
|---|---|---|---|---|
| $0 | 892 | 5.7 % | 0 | 0.0 % |
| 1-500 | 3,095 | 19.8 | 710,467 | 2.2 |
| 501-1,000 | 2,164 | 13.8 | 1,601,809 | 5.0 |
| 1,001-1,500 | 1,867 | 11.9 | 2,321,957 | 7.2 |
| 1,501-2,000 | 1,485 | 9.5 | 2,587,024 | 8.0 |
| 2,001-2,500 | 1,249 | 8.0 | 2,796,042 | 8.7 |
| 2,501-3,000 | 998 | 6.4 | 2,732,278 | 8.5 |
| 3,001-3,500 | 850 | 5.4 | 2,752,900 | 8.6 |
| 3,501-4,000 | 690 | 4.4 | 2,581,153 | 8.0 |
| 4,001-4,500 | 562 | 3.6 | 2,377,952 | 7.4 |
| 4,501-5,000 | 431 | 2.8 | 2,035,970 | 6.3 |
| 5,001-5,500 | 314 | 2.0 | 1,645,236 | 5.1 |
| 5,501-6,000 | 229 | 1.5 | 1,316,018 | 4.1 |
| 6,001-6,500 | 182 | 1.2 | 1,134,856 | 3.5 |
| 6,501-7,000 | 167 | 1.1 | 1,123,837 | 3.5 |
| 7,001-7,500 | 109 | 0.7 | 790,253 | 2.5 |
| 7,501-8,000 | 65 | 0.4 | 503,593 | 1.6 |
| 8,001-8,500 | 73 | 0.5 | 601,075 | 1.9 |
| 8,501-9,000 | 47 | 0.3 | 411,765 | 1.3 |
| 9,001-9,500 | 44 | 0.3 | 406,441 | 1.3 |
| 9,501-10,000 | 27 | 0.2 | 262,223 | 0.8 |
| 10,001+ | 112 | 0.7 | 1,445,195 | 4.5 |

Source: Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a.  This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2004.

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

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY[a, b]

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| Beneficiary Characteristics | Number of Beneficiaries | | | | | | | Number of Benefit Months | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | All | Aged | Disabled | Adults | Children | Unknown | | All | Aged | Disabled | Adults | Children | Unknown |
| **All** | 102,039 | 57,224 | 43,730 | 1,066 | 19 | 0 | | 1,087,285 | 596,048 | 481,184 | 9,845 | 208 | 0 |
| **Age** | | | | | | | | | | | | | |
| 5 and younger | 9 | 0 | 7 | 0 | 2 | 0 | | 108 | 0 | 84 | 0 | 24 | 0 |
| 6-14 | 20 | 0 | 14 | 0 | 6 | 0 | | 227 | 0 | 168 | 0 | 59 | 0 |
| 15-20 | 176 | 0 | 161 | 5 | 10 | 0 | | 1,964 | 0 | 1,810 | 40 | 114 | 0 |
| 21-44 | 19,802 | 3 | 19,003 | 795 | 1 | 0 | | 217,935 | 25 | 210,477 | 7,422 | 11 | 0 |
| 45-64 | 24,667 | 24 | 24,395 | 248 | 0 | 0 | | 269,969 | 195 | 267,552 | 2,222 | 0 | 0 |
| 65-74 | 21,328 | 21,163 | 148 | 17 | 0 | 0 | | 230,588 | 229,362 | 1,075 | 151 | 0 | 0 |
| 75-84 | 20,344 | 20,341 | 2 | 1 | 0 | 0 | | 212,665 | 212,637 | 18 | 10 | 0 | 0 |
| 85 and older | 15,693 | 15,693 | 0 | 0 | 0 | 0 | | 153,829 | 153,829 | 0 | 0 | 0 | 0 |
| Unknown | 0 | 0 | 0 | 0 | 0 | 0 | | | 0 | 0 | 0 | 0 | 0 |
| **Gender** | | | | | | | | | | | | | |
| Female | 63,669 | 40,635 | 22,324 | 698 | 12 | 0 | | 679,893 | 425,741 | 247,523 | 6,495 | 134 | 0 |
| Male | 38,370 | 16,589 | 21,406 | 368 | 7 | 0 | 0 | 407,392 | 170,307 | 233,661 | 3,350 | 74 | 0 |
| Unknown | 0 | 0 | 0 | 0 | 0 | 0 | | | 0 | 0 | 0 | 0 | 0 |
| **Race** | | | | | | | | | | | | | |
| White | 77,939 | 41,281 | 35,916 | 730 | 12 | 0 | | 826,652 | 422,472 | 397,154 | 6,899 | 127 | 0 |
| African American | 4,849 | 1,814 | 2,941 | 92 | 2 | 0 | 0 | 51,955 | 19,528 | 31,520 | 883 | 24 | 0 |
| Other/unknown | 19,251 | 14,129 | 4,873 | 244 | 5 | 0 | | 208,678 | 154,048 | 52,510 | 2,063 | 57 | 0 |
| **Use of Nursing Facilities[c]** | | | | | | | | | | | | | |
| Entire year | 8,532 | 7,694 | 838 | 0 | 0 | 0 | | 87,226 | 78,014 | 9,212 | 0 | 0 | 0 |
| Part year | 7,370 | 6,398 | 971 | 1 | 0 | 0 | | 69,121 | 59,054 | 10,055 | 12 | 0 | 0 |
| None | 86,137 | 43,132 | 41,921 | 1,065 | 19 | 0 | | 930,938 | 458,980 | 461,917 | 9,833 | 208 | 0 |
| **Maintenance Assistance Status** | | | | | | | | | | | | | |
| Cash | 51,262 | 23,419 | 27,500 | 340 | 3 | 0 | | 570,033 | 263,925 | 302,581 | 3,494 | 33 | 0 |
| Medically needy | 2,250 | 834 | 1,416 | 0 | 0 | 0 | | 23,659 | 8,485 | 15,174 | 0 | 0 | 0 |
| Poverty related | 3,328 | 1,424 | 1,758 | 139 | 7 | 0 | | 28,686 | 11,069 | 16,268 | 1,281 | 68 | 0 |
| Other/unknown | 45,199 | 31,547 | 13,056 | 587 | 9 | 0 | | 464,907 | 312,569 | 147,161 | 5,070 | 107 | 0 |
| **Dual Status[d]** | | | | | | | | | | | | | |
| Full dual, all year | 97,069 | 54,853 | 41,182 | 1,015 | 19 | 0 | | 1,036,349 | 572,702 | 454,137 | 9,302 | 208 | 0 |
| Full dual, part year | 4,970 | 2,371 | 2,548 | 51 | 0 | 0 | | 50,936 | 23,346 | 27,047 | 543 | 0 | 0 |
| **Managed Care (MC) Status** | | | | | | | | | | | | | |
| Fee-for-service (FFS) all year | 101,044 | 57,015 | 43,426 | 588 | 15 | 0 | | 1,076,725 | 593,770 | 477,814 | 4,978 | 163 | 0 |
| FFS part year, with Rx claims | 456 | 47 | 246 | 160 | 3 | 0 | | 4,936 | 525 | 2,760 | 1,618 | 33 | 0 |
| FFS part year, no Rx claims | 83 | 18 | 34 | 31 | 0 | 0 | | 750 | 190 | 332 | 228 | 0 | 0 |
| MC all year, with Rx claims | 116 | 1 | 8 | 107 | 0 | 0 | | 1,315 | 12 | 88 | 1,215 | 0 | 0 |
| MC all year, no Rx claims | 340 | 143 | 16 | 180 | 1 | 0 | | 3,559 | 1,551 | 190 | 1,806 | 12 | 0 |

Source:  Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

a. Table A.3 includes the beneficiaries represented by Cell F 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.

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2004.  The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment.  Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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.4

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

DUAL ELIGIBLE BENEFICIARIES, WASHINGTON, 2004

| Beneficiary Characteristics | Beneficiaries and Benefit Months in Cell F of Table 1 | | Included in Cell G of Table 1 | | Excluded from Cell G 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** | **102,039** | **1,087,285** | **101,583** | **1,079,506** | **0** | **7,779** |
| Fee-for-service (FFS) all year | 101,044 | 1,076,725 | 101,044 | 1,076,725 | 0 | 0 |
| FFS part year, with Rx claims | 456 | 4,936 | 456 | 2,445 | 0 | 2,491 |
| FFS part year, with no Rx claims | 83 | 750 | 83 | 336 | 0 | 414 |
| Managed care (MC) all year, with Rx claims | 116 | 1,315 | 0 | 0 | 0 | 1,315 |
| MC all year, with no Rx claims | 340 | 3,559 | 0 | 0 | 0 | 3,559 |

Source:  Data for this table are from the MAX 2004 file for Washington, released by CMS in 00/2007.  This table was produced on 04/10/2008.

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 and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.