

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

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TABLE ND.2  
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>615,137</b>	<b>1,328</b>	<b>94,499</b>	<b>121,942</b>	<b>397,213</b>	<b>155</b>	<b>5,955,238</b>	<b>13,348</b>	<b>1,021,080</b>	<b>1,071,444</b>	<b>3,848,213</b>	<b>1,153</b>
<b>Age</b>												
5 and younger	175,609	0	6,146	4	169,459	0	1,628,365	0	64,970	38	1,563,357	0
6-14	179,560	0	15,288	98	164,174	0	1,845,141	0	173,498	611	1,671,032	0
15-20	91,727	1	10,810	17,458	63,458	0	885,653	12	121,129	151,459	613,053	0
21-44	127,996	0	27,794	100,033	122	47	1,181,341	0	298,966	881,316	771	288
45-64	38,685	18	34,211	4,348	0	108	399,053	214	359,966	38,008	0	865
65-74	707	496	210	1	0	0	7,233	5,094	2,127	12	0	0
75-84	487	458	29	0	0	0	4,882	4,567	315	0	0	0
85 and older	366	355	11	0	0	0	3,570	3,461	109	0	0	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
<b>Gender</b>												
Female	353,156	772	48,960	116,955	186,315	154	3,421,910	7,589	533,075	1,032,475	1,847,630	1,141
Male	236,934	516	45,496	4,987	185,935	0	2,358,605	5,289	487,555	38,969	1,826,792	0
Unknown	25,047	40	43	0	24,963	1	174,723	470	450	0	173,791	12
<b>Race</b>												
White	186,542	630	26,959	38,795	120,081	77	1,742,652	6,303	283,380	321,875	1,130,514	580
African American	356,011	587	49,283	66,167	239,904	70	3,594,820	5,991	541,635	605,861	2,440,822	511
Other/unknown	72,584	111	18,257	16,980	37,228	8	617,766	1,054	196,065	143,708	276,877	62
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	785	166	619	0	0	0	8,427	1,712	6,715	0	0	0
Part year	539	76	458	4	1	0	5,529	742	4,732	43	12	0
None	613,813	1,086	93,422	121,938	397,212	155	5,941,282	10,894	1,009,633	1,071,401	3,848,201	1,153
<b>Maintenance Assistance Status</b>												
Cash	274,149	374	88,056	66,658	119,061	0	2,806,084	3,918	956,831	611,537	1,233,798	0
Medically needy	0	0	0	0	0	0		0	0	0	0	0
Poverty-related	301,207	603	3,881	22,346	274,222	155	2,767,363	6,064	39,890	147,950	2,572,306	1,153
Other/unknown	39,781	351	2,562	32,938	3,930	0	381,791	3,366	24,359	311,957	42,109	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	615,137	1,328	94,499	121,942	397,213	155	5,955,238	13,348	1,021,080	1,071,444	3,848,213	1,153
FFS part year, with Rx claims	0	0	0	0	0	0		0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0		0	0	0	0	0

0  
0

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

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

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

TABLE ND.3  
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ <sup>c</sup>	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>d</sup>	Number of Beneficiaries
<b>All</b>	<b>64.7 %</b>	<b>7.3</b>	<b>\$437</b>	<b>\$60</b>	<b>\$2,462</b>	<b>17.8 %</b>	<b>615,137</b>
<b>Age</b>							
5 and younger	62.9	4.9	227	46	1,411	16.1	175,609
6-14	61.5	4.6	294	64	1,379	21.3	179,560
15-20	63.5	5.2	303	58	2,170	14.0	91,727
21-44	67.9	9.0	541	60	3,614	15.0	127,996
45-64	80.0	28.7	1,977	69	8,831	22.4	38,685
65-74	70.4	28.2	1,757	62	10,408	16.9	707
75-84	66.5	29.5	1,721	58	8,863	19.4	487
85 and older	61.7	27.3	1,666	61	11,318	14.7	366
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>e</sup></b>							
Aged	65.7	28.8	1,794	62	10,750	16.7	1,328
Disabled	76.4	20.3	1,613	80	8,034	20.1	94,499
Adults	66.1	6.5	266	41	2,411	11.0	121,942
Children	61.5	4.3	205	47	1,120	18.3	397,213
Unknown	78.7	14.1	1,122	79	13,105	8.6	155
<b>Gender</b>							
Female	68.9	8.1	449	55	2,590	17.3	353,156
Male	64.8	6.7	462	69	2,472	18.7	236,934
Unknown	4.8	0.3	25	72	555	4.5	25,047
<b>Race</b>							
White	73.0	9.5	607	64	3,017	20.1	186,542
African American	66.3	6.5	358	55	2,235	16.0	356,011
Other/unknown	35.3	5.3	390	74	2,148	18.2	72,584
<b>Use of Nursing Facilities<sup>f</sup></b>							
Entire year	98.2	78.1	5,464	70	53,620	10.2	785
Part year	98.5	55.9	4,144	74	48,164	8.6	539
None	64.6	7.1	428	60	2,356	18.1	613,813
<b>Maintenance Assistance Status</b>							
Cash	73.1	10.7	694	65	3,680	18.9	274,149
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	60.5	4.5	223	49	1,310	17.0	301,207
Other/unknown	38.7	4.1	287	69	2,791	10.3	39,781

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table ND.3 includes beneficiaries represented by Cell K of Table 1.

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

c. In seven states (DE, IA, NE, NY, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.

d. In seven states (DE, IA, NE, NY, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.

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

f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.4  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT *PER BENEFIT MONTH*, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Beneficiary Characteristics	Number of Rx, Percentage with:									Number		
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>c</sup>	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ <sup>d</sup>	Beneficiaries	Benefit Months
<b>All</b>	<b>0.8</b>	<b>\$45</b>	<b>17.8 %</b>	<b>35.3 %</b>	<b>50.8 %</b>	<b>6.8 %</b>	<b>5.9 %</b>	<b>1.2 %</b>	<b>0.0 %</b>	<b>\$254</b>	<b>615,137</b>	<b>5,955,238</b>
<b>Age</b>												
5 and younger	0.5	25	16.1	37.1	54.8	6.0	2.1	0.1	0.0	152	175,609	1,628,365
6-14	0.4	29	21.3	38.5	54.2	4.5	2.5	0.2	0.0	134	179,560	1,845,141
15-20	0.5	31	14.0	36.5	54.4	5.8	2.9	0.3	0.0	225	91,727	885,653
21-44	1.0	59	15.0	32.1	47.3	10.1	9.4	1.1	0.0	392	127,996	1,181,341
45-64	2.8	192	22.4	20.0	20.9	12.6	34.0	12.1	0.4	856	38,685	399,053
65-74	2.8	172	16.9	29.6	13.4	12.4	31.0	11.5	2.1	1,017	707	7,233
75-84	2.9	172	19.4	33.5	12.7	7.8	29.2	14.8	2.1	884	487	4,882
85 and older	2.8	171	14.7	38.3	9.6	9.6	26.2	13.9	2.5	1,160	366	3,570
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	2.9	179	16.7	34.3	11.9	9.6	28.8	13.0	2.5	1,070	1,328	13,348
Disabled	1.9	149	20.1	23.6	34.8	12.3	22.6	6.5	0.2	744	94,499	1,021,080
Adults	0.7	30	11.0	33.9	50.9	8.9	6.0	0.3	0.0	274	121,942	1,071,444
Children	0.4	21	18.3	38.5	54.7	4.8	1.9	0.1	0.0	116	397,213	3,848,213
Unknown	1.9	151	8.6	21.3	32.3	18.7	24.5	3.2	0.0	1,762	155	1,153
<b>Gender</b>												
Female	0.8	46	17.3	31.1	53.0	7.5	6.9	1.5	0.0	267	353,156	3,421,910
Male	0.7	46	18.7	35.2	52.3	6.5	5.2	0.8	0.1	248	236,934	2,358,605
Unknown	0.0	4	4.5	95.2	4.2	0.3	0.2	0.1	0.0	80	25,047	174,723
<b>Race</b>												
White	1.0	65	20.1	27.0	53.2	9.1	8.7	1.8	0.1	323	186,542	1,742,652
African American	0.6	35	16.0	33.7	54.8	6.1	4.7	0.8	0.0	221	356,011	3,594,820
Other/unknown	0.6	46	18.2	64.7	24.7	4.2	5.0	1.3	0.0	252	72,584	617,766
<b>Use of Nursing Facilities<sup>f</sup></b>												
Entire year	7.3	509	10.2	1.8	3.9	5.1	27.8	41.4	20.0	4,995	785	8,427
Part year	5.5	404	8.6	1.5	7.2	10.8	37.7	36.0	6.9	4,695	539	5,529
None	0.7	44	18.1	35.4	50.9	6.8	5.9	1.1	0.0	243	613,813	5,941,282
<b>Maintenance Assistance Status</b>												
Cash	1.0	68	18.9	26.9	51.4	9.1	10.3	2.2	0.1	360	274,149	2,806,084
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.5	24	17.0	39.5	52.5	5.3	2.5	0.3	0.0	143	301,207	2,767,363
Other/unknown	0.4	30	10.3	61.3	32.7	2.6	2.3	0.9	0.2	291	39,781	381,791

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

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

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



TABLE ND.5

AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Beneficiary Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>0.8</b>	<b>\$45</b>	<b>\$60</b>	<b>0.3</b>	<b>\$33</b>	<b>\$106</b>	<b>0.1</b>	<b>\$3</b>	<b>\$52</b>	<b>0.4</b>	<b>\$9</b>	<b>\$23</b>
<b>Age</b>												
5 and younger	0.5	25	46	0.2	18	81	0.1	2	32	0.2	4	17
6-14	0.4	29	64	0.2	23	98	0.0	2	49	0.2	5	24
15-20	0.5	31	58	0.2	22	104	0.0	2	47	0.3	7	25
21-44	1.0	59	60	0.3	42	124	0.1	4	61	0.6	13	23
45-64	2.8	192	69	1.2	139	120	0.2	13	82	1.5	40	27
65-74	2.8	172	62	1.2	126	104	0.1	9	64	1.4	36	26
75-84	2.9	172	58	1.2	119	98	0.2	11	67	1.5	41	27
85 and older	2.8	171	61	1.2	123	105	0.2	9	55	1.4	38	26
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	2.9	179	62	1.2	129	105	0.2	10	65	1.5	38	26
Disabled	1.9	149	80	0.8	113	139	0.1	9	83	0.9	27	29
Adults	0.7	30	41	0.2	19	83	0.1	3	43	0.4	8	19
Children	0.4	21	47	0.2	16	78	0.0	2	35	0.2	4	20
Unknown	1.9	151	79	0.6	112	179	0.1	5	53	1.2	33	28
<b>Gender</b>												
Female	0.8	46	55	0.3	33	100	0.1	4	51	0.4	10	22
Male	0.7	46	69	0.3	36	115	0.1	3	54	0.3	8	26
Unknown	0.0	4	72	0.0	3	153	0.0	0	33	0.0	1	19
<b>Race</b>												
White	1.0	65	64	0.4	48	109	0.1	5	62	0.5	12	25
African American	0.6	35	55	0.3	26	100	0.1	3	44	0.3	7	22
Other/unknown	0.6	46	74	0.3	36	127	0.0	3	63	0.3	7	25
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	7.3	509	70	2.8	363	128	0.4	29	70	4.0	115	29
Part year	5.5	404	74	2.1	291	137	0.3	29	93	3.0	83	28
None	0.7	44	60	0.3	32	106	0.1	3	52	0.4	9	23
<b>Maintenance Assistance Status</b>												
Cash	1.0	68	65	0.4	50	117	0.1	5	61	0.5	13	25
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.5	24	49	0.2	18	82	0.0	2	39	0.2	5	21
Other/unknown	0.4	30	69	0.2	23	122	0.0	2	52	0.2	5	24

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

- a. Table ND.5 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
- b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
- c. Brand-name drugs, sometimes called “innovator single-source drugs,” are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called “innovator multiple-source drugs,” are brand-name drugs whose patents have expired. Generic drugs, sometimes called “non-innovator multiple-source drugs,” are off-patent drugs manufactured and sold by companies other than the original patent holder. In Mississippi, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.6  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users <sup>e</sup>				
	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	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
Anti-infective Agents	0.2	0.1	0.0	0.1	\$12	\$8	\$1	\$3	\$51	\$85	\$65	\$22	730,797	\$37,501,702	283,305	46.1 %	3,049,916
Biologicals	0.4	0.4	0.0	0.0	457	418	4	35	1215	1,155	1,813	2,936	5,310	6,449,096	1,439	0.2	14,108
Antineoplastic Agents	0.4	0.1	0.0	0.3	116	89	2	25	281	751	161	90	7,949	2,230,229	1,768	0.3	19,205
Endocrine/Metabolic Drugs	0.3	0.1	0.1	0.1	17	11	2	3	51	90	35	25	374,454	19,211,894	105,869	17.2	1,145,110
Cardiovascular Agents	0.9	0.4	0.0	0.5	40	30	1	9	44	69	40	20	487,031	21,328,468	47,993	7.8	527,685
Respiratory Agents	0.3	0.2	0.0	0.1	17	14	1	2	50	73	22	20	805,048	40,032,358	217,040	35.3	2,355,752
Gastrointestinal Agents	0.3	0.1	0.0	0.2	20	14	1	5	74	153	77	31	164,086	12,170,710	55,053	8.9	600,561
Genitourinary Agents	0.2	0.1	0.0	0.1	8	5	1	2	47	69	42	25	58,187	2,717,957	30,589	5.0	321,167
CNS Drugs	0.6	0.3	0.0	0.3	61	52	2	8	104	172	90	29	454,877	47,251,830	70,223	11.4	769,810
Stimulants/Anti-obesity/Anorexia	0.5	0.5	0.0	0.1	49	45	0	3	90	97	78	49	117,633	10,632,457	19,596	3.2	217,075
Miscellaneous Psychological/																	
Neurological Agents	0.4	0.2	0.0	0.2	73	66	0	6	196	308	109	42	10,019	1,966,369	2,382	0.4	26,884
Analgesics and Anesthetics	0.3	0.0	0.0	0.2	9	5	0	4	32	134	97	15	518,883	16,776,103	165,307	26.9	1,787,437
Neuromuscular Agents	0.5	0.2	0.1	0.3	43	27	9	7	86	149	132	28	232,897	20,005,347	41,629	6.8	460,029
Nutritional Products	0.2	0.1	0.0	0.2	5	1	0	4	22	26	21	21	83,464	1,841,124	33,192	5.4	343,728
Hematological Agents	0.4	0.2	0.0	0.2	80	64	2	13	209	369	50	81	53,477	11,152,589	13,074	2.1	139,354
Topical Products	0.2	0.1	0.0	0.1	9	5	1	3	45	77	49	25	337,687	15,245,544	154,441	25.1	1,689,423
Miscellaneous Products	0.4	0.1	0.1	0.2	91	48	28	14	242	447	540	67	7,706	1,867,391	1,938	0.3	20,611
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	4	0	0	0	25	0	0	0	20,836	518,733	11,755	1.9	130,794
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>4,470,341</b>	<b>268,899,901</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Mississippi, 0.6 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.medispans.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.

TABLE ND.7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Top 10 Drug Groups	Total Medicaid Rx \$	Users			Among Users		
		Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$29,947,658	25,877	4.2 %	295,305	0.5	\$224	\$101
ANTIASTHMATIC	23,931,833	114,377	18.6	1,266,905	0.2	81	19
ANTICONVULSANT	17,112,863	25,197	4.1	283,560	0.5	112	60
ANTIDEPRESSANTS	14,292,674	52,652	8.6	577,390	0.4	70	25
DERMATOLOGICAL	10,806,132	153,025	24.9	1,696,442	0.1	49	6
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	10,632,457	24,660	4.0	275,279	0.4	90	39
ANTIDIABETIC	10,172,602	22,244	3.6	249,836	0.5	79	41
ULCER DRUGS	8,389,783	48,920	8.0	538,392	0.2	68	16
CEPHALOSPORINS	8,148,316	124,087	20.2	1,374,334	0.1	50	6
ANTIHYPERTENSIVE	8,037,582	35,128	5.7	393,370	0.5	43	20
Total	141,471,900	626,167		6,950,813	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

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

TABLE ND.7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIASTHMATIC				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>1,727,451</b>	<b>\$141,471,900</b>	<b>25,877</b>	<b>4.2 %</b>	<b>295,305</b>	<b>0.5</b>	<b>\$101</b>	<b>114,377</b>	<b>18.6 %</b>	<b>1,266,905</b>	<b>0.2</b>	<b>\$19</b>
<b>Female</b>	1,012,310	79,687,728	13,510	3.8	154,008	0.4	96	57,632	16.3	638,498	0.2	18
<b>Disabled</b>	534,406	48,494,305	9,575	19.6	111,865	0.5	112	15,117	30.9	176,521	0.3	24
	11,011	891,806	21	0.8	243	0.4	54	1,455	56.2	16,987	0.3	26
5 and younger	30,980	2,851,665	596	11.9	7,063	0.4	79	1,750	34.9	20,614	0.3	26
6-14	24,787	2,699,672	748	18.6	8,800	0.5	97	803	20.0	9,349	0.3	22
15-20	140,064	14,407,284	3,813	24.2	44,435	0.4	109	3,687	23.4	43,192	0.3	18
21-44	325,537	27,492,981	4,371	20.4	51,048	0.5	122	7,394	34.5	86,084	0.3	26
45-64	1,722	125,563	23	17.3	245	0.6	119	22	16.5	223	0.3	31
65-74	231	19,683	3	16.7	31	0.8	237	2	11.1	24	0.1	3
75-84	74	5,651	0	0.0	0	0.0	0	4	50.0	48	0.3	27
85 and older												
<b>Other Eligibles</b>	477,904	31,193,423	3,935	1.3	42,143	0.3	53	42,515	14.0	461,977	0.2	15
	124,154	7,215,505	63	0.1	733	0.2	30	17,428	24.4	191,268	0.2	16
5 and younger	125,402	8,902,383	990	1.2	11,234	0.3	59	12,959	15.6	144,260	0.2	18
6-14	56,754	3,707,499	734	1.5	7,978	0.3	51	4,272	8.7	46,159	0.2	13
15-20	141,276	9,274,881	1,882	2.0	19,373	0.2	47	7,042	7.3	71,900	0.2	12
21-44	21,787	1,484,972	150	4.1	1,526	0.3	66	655	18.1	6,590	0.2	18
45-64	3,549	270,668	45	16.2	517	0.7	119	82	29.5	965	0.5	34
65-74	3,033	189,844	41	14.9	438	0.5	67	42	15.2	444	0.4	29
75-84	1,949	147,671	30	14.2	344	0.7	129	35	16.5	391	0.4	27
85 and older												
<b>Male</b>	711,936	61,573,342	12,346	5.2	141,045	0.5	107	56,487	23.8	625,974	0.2	20
<b>Disabled</b>	343,563	35,136,133	9,079	20.0	105,360	0.5	121	11,391	25.0	132,179	0.3	28
	17,692	1,598,235	75	2.1	876	0.4	74	2,432	68.4	28,315	0.3	31
5 and younger	79,358	7,807,187	2,115	20.6	24,834	0.5	90	3,643	35.5	43,025	0.3	27
6-14	38,199	4,315,117	1,477	21.8	17,276	0.5	100	1,219	18.0	14,287	0.3	26
15-20	84,258	10,767,954	3,328	27.7	38,513	0.5	142	1,250	10.4	14,388	0.3	22
21-44	123,122	10,579,253	2,078	16.3	23,789	0.6	137	2,820	22.1	31,848	0.4	29
45-64	864	64,510	6	7.8	72	0.5	185	24	31.2	280	0.6	41
65-74	26	1,465	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	44	2,412	0	0.0	0	0.0	0	3	100.0	36	0.3	21
85 and older												
<b>Other Eligibles</b>	368,373	26,437,209	3,267	1.7	35,685	0.4	66	45,096	23.6	493,795	0.2	18
	143,754	9,197,810	134	0.2	1,500	0.3	48	24,506	33.5	267,964	0.2	18
5 and younger	167,841	12,864,217	2,085	2.6	23,195	0.4	64	16,856	20.7	185,813	0.2	19
6-14	38,905	3,007,671	817	2.6	8,764	0.4	71	3,242	10.2	35,222	0.2	17
15-20	8,723	709,102	149	3.7	1,390	0.3	71	311	7.8	2,990	0.2	14
21-44	4,139	291,864	33	3.9	291	0.3	71	93	10.9	832	0.3	23
45-64	1,838	141,653	17	8.5	204	0.7	142	36	17.9	420	0.3	24
65-74	1,957	141,988	17	10.2	184	0.7	174	30	18.0	308	0.4	28
75-84	1,216	82,904	15	11.0	157	0.6	75	22	16.2	246	0.3	28
85 and older												
<b>Unknown</b>	3,205	210,830	21	0.1	252	0.7	167	258	1.0	2,433	0.2	17

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Beneficiary Characteristics	ANTICONVULSANT					ANTIDEPRESSANTS					DERMATOLOGICAL				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>25,197</b>	<b>4.1 %</b>	<b>283,560</b>	<b>0.5</b>	<b>\$60</b>	<b>52,652</b>	<b>8.6 %</b>	<b>577,390</b>	<b>0.4</b>	<b>\$25</b>	<b>153,025</b>	<b>24.9 %</b>	<b>1,696,442</b>	<b>0.1</b>	<b>\$6</b>
<b>Female</b>	15,781	4.5	176,857	0.5	56	39,329	11.1	428,338	0.3	25	89,446	25.3	989,865	0.1	7
<b>Disabled</b>	10,571	21.6	122,633	0.6	65	18,743	38.3	218,046	0.4	30	12,917	26.4	152,048	0.1	8
216	216	8.3	2,522	0.6	62	14	0.5	151	0.4	15	1,237	47.8	14,436	0.1	8
5 and younger	728	14.5	8,545	0.7	76	609	12.2	7,188	0.4	22	1,832	36.6	21,690	0.1	7
6-14	723	18.0	8,442	0.7	99	947	23.6	11,123	0.4	27	1,284	31.9	15,153	0.1	8
15-20	3,897	24.7	45,214	0.6	68	7,032	44.6	81,757	0.4	28	3,781	24.0	44,486	0.1	8
21-44	4,985	23.3	57,678	0.5	57	10,109	47.2	117,459	0.5	32	4,758	22.2	56,009	0.1	8
45-64	17	12.8	172	0.3	35	27	20.3	308	0.5	25	22	16.5	238	0.2	8
65-74	3	16.7	36	0.6	51	3	16.7	36	0.5	43	1	5.6	12	0.1	5
75-84	2	25.0	24	0.3	6	2	25.0	24	0.2	17	2	25.0	24	0.3	48
85 and older	5,210	1.7	54,224	0.4	36	20,586	6.8	210,292	0.3	19	76,529	25.2	837,817	0.1	6
<b>Other Eligibles</b>	225	0.3	2,514	0.4	29	81	0.1	905	0.2	8	33,408	46.8	366,114	0.1	6
5 and younger	692	0.8	7,643	0.4	42	2,111	2.5	23,513	0.3	18	21,596	26.0	243,281	0.1	7
6-14	707	1.4	7,522	0.4	45	3,510	7.1	36,989	0.3	17	9,336	19.0	102,017	0.1	7
15-20	3,185	3.3	32,492	0.3	33	13,571	14.1	135,977	0.3	19	11,346	11.8	117,440	0.1	6
21-44	323	8.9	3,232	0.4	39	1,160	32.0	11,222	0.4	26	656	18.1	6,873	0.1	8
45-64	33	11.9	346	0.9	82	57	20.5	640	0.6	34	70	25.2	784	0.2	11
65-74	28	10.1	300	0.6	42	54	19.6	583	0.6	41	56	20.3	615	0.2	9
75-84	17	8.0	175	0.6	41	42	19.8	463	0.6	41	61	28.8	693	0.2	9
85 and older															
<b>Male</b>	9,388	4.0	106,367	0.6	67	13,291	5.6	148,678	0.4	25	62,912	26.6	700,687	0.1	6
<b>Disabled</b>	7,206	15.8	83,152	0.6	75	8,037	17.7	92,372	0.4	27	9,812	21.6	114,722	0.1	7
259	259	7.3	3,048	0.7	80	40	1.1	475	0.3	15	1,674	47.1	19,510	0.1	6
5 and younger	1,281	12.5	15,022	0.7	81	1,470	14.3	17,294	0.4	23	2,859	27.8	33,994	0.1	6
6-14	905	13.3	10,598	0.7	89	1,139	16.8	13,334	0.4	27	1,531	22.6	18,074	0.2	9
15-20	2,535	21.1	29,175	0.7	84	2,602	21.7	29,658	0.4	30	1,934	16.1	22,394	0.2	8
21-44	2,215	17.3	25,204	0.6	54	2,769	21.7	31,423	0.4	28	1,799	14.1	20,599	0.2	9
45-64	11	14.3	105	0.7	41	13	16.9	140	0.6	33	13	16.9	127	0.3	10
65-74	0	0.0	0	0.0	0	1	10.0	12	0.1	0	2	20.0	24	0.1	3
75-84	0	0.0	0	0.0	0	3	100.0	36	0.4	25	0	0.0	0	0.0	0
85 and older	2,182	1.1	23,215	0.4	41	5,254	2.7	56,306	0.3	21	53,100	27.7	585,965	0.1	6
<b>Other Eligibles</b>	278	0.4	3,072	0.4	30	111	0.2	1,242	0.2	9	31,453	43.0	344,200	0.1	6
5 and younger	996	1.2	10,978	0.4	41	2,784	3.4	30,773	0.3	20	16,653	20.5	187,462	0.1	6
6-14	443	1.4	4,578	0.4	40	1,366	4.3	14,704	0.3	21	4,484	14.2	49,207	0.1	8
15-20	323	8.1	3,147	0.4	43	680	17.0	6,374	0.3	23	311	7.8	2,997	0.1	7
21-44	81	9.5	739	0.5	46	216	25.3	2,123	0.3	25	104	12.2	1,024	0.1	9
45-64	29	14.4	341	0.7	61	40	19.9	469	0.5	38	27	13.4	321	0.2	11
65-74	20	12.0	229	0.8	69	33	19.8	368	0.5	35	40	24.0	444	0.2	8
75-84	12	8.8	131	0.7	59	24	17.6	253	0.5	32	28	20.6	310	0.2	17
85 and older															
<b>Unknown</b>	28	0.1	336	0.6	58	32	0.1	374	0.6	44	667	2.7	5,890	0.2	6

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table ND.7B includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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 ND.7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIDIABETIC					ULCER DRUGS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>24,660</b>	<b>4.0 %</b>	<b>275,279</b>	<b>0.4</b>	<b>\$39</b>	<b>22,244</b>	<b>3.6 %</b>	<b>249,836</b>	<b>0.5</b>	<b>\$41</b>	<b>48,920</b>	<b>8.0 %</b>	<b>538,392</b>	<b>0.2</b>	<b>\$16</b>
<b>Female</b>	6,893	2.0	77,106	0.4	37	17,111	4.8	192,389	0.5	41	33,444	9.5	368,971	0.2	16
<b>Disabled</b>	1,799	3.7	21,111	0.4	40	12,454	25.4	145,193	0.5	43	13,422	27.4	157,114	0.3	24
5 and younger	52	2.0	617	0.3	22	4	0.2	45	0.5	124	298	11.5	3,331	0.3	20
6-14	1,043	20.8	12,238	0.4	39	72	1.4	838	0.6	39	488	9.7	5,767	0.3	23
15-20	318	7.9	3,763	0.4	38	119	3.0	1,406	0.5	43	557	13.9	6,546	0.2	17
21-44	193	1.2	2,257	0.3	52	2,588	16.4	30,384	0.5	39	3,995	25.3	46,841	0.3	19
45-64	193	0.9	2,236	0.4	45	9,601	44.9	111,763	0.5	45	8,022	37.5	93,942	0.3	28
65-74	0	0.0	0	0.0	0	61	45.9	649	0.6	42	51	38.3	560	0.4	33
75-84	0	0.0	0	0.0	0	9	50.0	108	0.6	40	6	33.3	67	0.4	26
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	62.5	60	0.4	39
<b>Other Eligibles</b>	5,094	1.7	55,995	0.4	36	4,657	1.5	47,196	0.4	31	20,022	6.6	211,857	0.2	9
5 and younger	324	0.5	3,646	0.3	21	23	0.0	257	0.6	27	3,660	5.1	37,543	0.2	6
6-14	3,899	4.7	43,182	0.4	38	266	0.3	2,912	0.6	41	4,028	4.9	45,045	0.1	8
15-20	484	1.0	5,252	0.4	37	425	0.9	4,376	0.5	34	3,216	6.5	34,694	0.1	7
21-44	365	0.4	3,675	0.3	34	2,931	3.0	29,494	0.4	28	8,132	8.5	84,170	0.2	11
45-64	19	0.5	204	0.3	44	800	22.1	7,855	0.5	37	782	21.6	8,175	0.3	19
65-74	1	0.4	12	0.8	292	108	38.8	1,140	0.6	41	71	25.5	773	0.4	37
75-84	0	0.0	0	0.0	0	72	26.1	785	0.6	37	80	29.0	925	0.5	34
85 and older	2	0.9	24	0.2	18	32	15.1	377	0.7	42	53	25.0	532	0.5	45
<b>Male</b>	17,764	7.5	198,137	0.4	39	5,114	2.2	57,221	0.5	42	15,276	6.4	167,787	0.2	16
<b>Disabled</b>	5,545	12.2	65,175	0.5	42	4,265	9.4	48,592	0.5	41	6,127	13.5	70,526	0.3	25
5 and younger	196	5.5	2,301	0.3	29	3	0.1	36	0.5	28	446	12.5	5,004	0.3	19
6-14	4,197	40.8	49,358	0.5	42	53	0.5	636	0.6	53	671	6.5	7,954	0.2	19
15-20	985	14.5	11,625	0.4	41	90	1.3	1,031	0.6	51	514	7.6	6,029	0.3	19
21-44	110	0.9	1,248	0.5	61	918	7.6	10,612	0.5	39	1,548	12.9	17,941	0.3	26
45-64	57	0.4	643	0.4	40	3,171	24.8	35,961	0.5	42	2,924	22.9	33,326	0.4	28
65-74	0	0.0	0	0.0	0	29	37.7	304	0.4	37	20	26.0	224	0.4	34
75-84	0	0.0	0	0.0	0	1	10.0	12	0.7	40	2	20.0	24	0.5	33
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	66.7	24	0.4	20
<b>Other Eligibles</b>	12,219	6.4	132,962	0.4	38	849	0.4	8,629	0.6	43	9,149	4.8	97,261	0.2	9
5 and younger	762	1.0	8,528	0.3	23	23	0.0	266	0.5	35	3,962	5.4	40,642	0.1	7
6-14	10,253	12.6	111,424	0.4	39	163	0.2	1,760	0.6	42	3,160	3.9	35,205	0.1	8
15-20	1,157	3.7	12,536	0.4	40	149	0.5	1,507	0.6	55	1,337	4.2	14,462	0.2	8
21-44	36	0.9	355	0.3	35	227	5.7	2,159	0.5	40	419	10.5	4,117	0.2	20
45-64	8	0.9	86	0.3	32	165	19.3	1,529	0.5	39	148	17.4	1,442	0.3	24
65-74	0	0.0	0	0.0	0	49	24.4	582	0.5	35	46	22.9	529	0.5	36
75-84	1	0.6	12	0.3	5	53	31.7	607	0.7	47	37	22.2	419	0.5	37
85 and older	2	1.5	21	0.2	27	20	14.7	219	0.6	37	40	29.4	445	0.5	36
<b>Unknown</b>	3	0.0	36	0.9	211	19	0.1	226	0.8	50	200	0.8	1,634	0.2	10

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table ND.7C includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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 ND.7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Beneficiary Characteristics	CEPHALOSPORINS					ANTIHYPERTENSIVE					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
<b>All</b>	<b>124,087</b>	<b>20.2 %</b>	<b>1,374,334</b>	<b>0.1</b>	<b>\$6</b>	<b>35,128</b>	<b>5.7 %</b>	<b>393,370</b>	<b>0.5</b>	<b>\$20</b>	<b>615,137</b>	<b>5,955,238</b>
<b>Female</b>	71,212	20.2	784,313	0.1	6	24,289	6.9	271,129	0.5	21	353,156	3,421,910
<b>Disabled</b>	10,390	21.2	122,317	0.1	5	16,410	33.5	191,370	0.5	23	48,960	533,075
	1,054	40.7	12,375	0.1	7	57	2.2	668	0.5	7	2,590	27,176
5 and younger	1,382	27.6	16,340	0.1	8	249	5.0	2,942	0.5	10	5,012	57,129
6-14	908	22.6	10,715	0.1	6	147	3.7	1,737	0.4	9	4,021	44,948
15-20	3,282	20.8	38,690	0.1	5	3,288	20.8	38,468	0.4	19	15,774	170,927
21-44	3,746	17.5	43,997	0.1	5	12,567	58.7	146,411	0.5	25	21,404	231,222
45-64	14	10.5	152	0.1	4	87	65.4	966	0.6	28	133	1,394
65-74	2	11.1	24	0.1	1	11	61.1	132	0.6	21	18	195
75-84	2	25.0	24	0.1	4	4	50.0	46	0.2	5	8	84
85 and older	60,822	20.0	661,996	0.1	6	7,879	2.6	79,759	0.4	16	304,196	2,888,835
<b>Other Eligibles</b>	24,489	34.3	271,091	0.1	6	90	0.71	994	0.3	5	71,334	687,284
5 and younger	15,695	18.9	175,672	0.1	7	437	0.5	4,916	0.4	6	83,006	846,611
6-14	7,578	15.4	81,528	0.1	5	385	0.8	4,138	0.3	10	49,264	463,352
15-20	12,431	12.9	127,180	0.1	4	5,209	5.4	52,090	0.3	14	96,206	852,013
21-44	520	14.4	5,279	0.1	5	1,402	38.7	13,701	0.5	23	3,620	32,058
45-64	43	15.5	503	0.2	5	144	51.8	1,568	0.5	24	278	2,808
65-74	30	10.9	344	0.1	4	147	53.3	1,644	0.6	27	276	2,749
75-84	36	17.0	399	0.1	7	65	30.7	708	0.6	24	212	1,960
85 and older												
<b>Male</b>	52,598	22.2	587,276	0.1	6	10,806	4.6	121,847	0.5	19	236,934	2,358,605
<b>Disabled</b>	7,901	17.4	92,836	0.1	6	8,408	18.5	96,331	0.5	21	45,496	487,555
	1,524	42.9	17,867	0.1	7	94	2.6	1,087	0.5	6	3,555	37,790
5 and younger	2,389	23.2	28,354	0.1	7	846	8.2	9,954	0.5	10	10,276	116,369
6-14	1,050	15.5	12,422	0.1	5	333	4.9	3,902	0.5	13	6,789	76,181
15-20	1,501	12.5	17,634	0.1	5	1,703	14.2	19,614	0.5	22	12,017	128,014
21-44	1,431	11.2	16,502	0.1	5	5,388	42.2	61,316	0.5	24	12,769	128,335
45-64	4	5.2	33	0.1	7	41	53.2	422	0.6	25	77	733
65-74	1	10.0	12	0.1	1	2	20.0	24	0.1	5	10	108
75-84	1	33.3	12	0.1	11	1	33.3	12	0.5	11	3	25
85 and older	44,697	23.3	494,440	0.1	6	2,398	1.3	25,516	0.4	13	191,438	1,871,050
<b>Other Eligibles</b>	26,303	35.9	290,742	0.1	7	172	0.2	1,955	0.3	5	73,171	702,370
5 and younger	14,203	17.5	158,434	0.1	6	1,057	1.3	11,766	0.4	7	81,263	825,006
6-14	3,608	11.4	39,494	0.1	4	318	1.0	3,419	0.4	11	31,651	301,148
15-20	438	11.0	4,224	0.1	4	381	9.5	3,584	0.4	19	3,996	30,362
21-44	91	10.7	933	0.1	5	259	30.4	2,372	0.5	23	853	7,017
45-64	17	8.5	199	0.1	5	67	33.3	799	0.6	25	201	2,092
65-74	17	10.2	189	0.2	4	91	54.5	1,036	0.6	24	167	1,638
75-84	20	14.7	225	0.1	4	53	39.0	585	0.6	30	136	1,417
85 and older												
<b>Unknown</b>	277	1.1	2,745	0.1	6	33	0.1	394	0.7	24	25,047	174,723

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table ND.7D includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 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
<b>All</b>	<b>\$509</b>	<b>7.3</b>	<b>785</b>	<b>8,427</b>
<b>Age</b>				
0-64	531	7.4	614	6,680
65-74	521	7.7	50	512
75-84	429	7.1	49	493
85 and older	357	5.6	72	742
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	521	7.5	415	4,483
Male	498	7.1	364	3,872
Unknown	388	7.1	6	72
<b>Race</b>				
White	559	8.1	343	3,710
African American	470	6.6	391	4,177
Other/unknown	466	7	51	540
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	458	6.8	166	1,712
Disabled	522	7.4	619	6,715
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 Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2004 Medicaid enrollment. A total of 539 beneficiaries who were in nursing facilities for part of their enrollment and their 5,529 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE ND.9  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 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		
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic			Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.4	0.2	0.0	0.2	\$29	\$18	\$3	\$8	\$74	\$113	\$123	\$38	2,367	\$176,284	545	69.4 %	5,987
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.6	0.0	0.0	0.5	84	8	0	77	151	581	0	140	513	77,320	88	11.2	917
Endocrine/Metabolic Drugs	1.2	0.6	0.1	0.5	69	51	4	14	59	86	39	29	4,623	271,805	357	45.5	3,927
Cardiovascular Agents	2.1	0.7	0.1	1.4	80	50	2	28	37	72	33	20	12,573	470,520	542	69.0	5,906
Respiratory Agents	0.7	0.3	0.0	0.3	37	29	1	7	55	84	53	23	2,814	155,839	382	48.7	4,208
Gastrointestinal Agents	1.1	0.2	0.1	0.8	60	31	2	27	54	127	41	33	5,454	296,586	452	57.6	4,952
Genitourinary Agents	0.7	0.5	0.0	0.2	53	44	2	6	74	88	79	32	1,288	95,130	160	20.4	1,809
CNS Drugs	1.7	1.0	0.1	0.7	190	162	5	23	110	170	80	32	11,456	1,256,284	597	76.1	6,616
Stimulants/Anti-obesity/Anorexia	0.8	0.3	0.0	0.5	43	32	0	11	56	121	0	22	58	3,232	7	0.9	75
Miscellaneous Psychological/																	
Neurological Agents	0.9	0.8	0.0	0.0	155	153	0	1	178	186	0	31	1,031	183,434	106	13.5	1,186
Analgesics and Anesthetics	0.9	0.3	0.0	0.6	53	42	0	11	57	138	30	18	4,263	244,864	421	53.6	4,592
Neuromuscular Agents	1.4	0.4	0.2	0.8	108	55	22	31	77	143	95	40	6,675	517,037	428	54.5	4,795
Nutritional Products	0.8	0.0	0.0	0.8	17	0	1	16	20	12	33	20	1,902	38,259	207	26.4	2,308
Hematological Agents	1.0	0.4	0.1	0.5	104	90	6	8	100	220	57	15	3,042	304,990	269	34.3	2,936
Topical Products	0.5	0.2	0.1	0.2	28	16	4	8	54	75	63	33	2,481	133,004	437	55.7	4,829
Miscellaneous Products	0.4	0.2	0.0	0.2	163	151	0	12	368	765	0	48	130	47,809	28	3.6	293
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	14	0	0	0	25	0	0	0	646	16,470	111	14.1	1,192
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>61,316</b>	<b>4,288,867</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table ND.9 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 539 beneficiaries who were in nursing facilities for part of their enrollment and their 5,529 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.medispn.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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In Mississippi, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

TABLE ND.10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 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	\$887,435	489	62.3 %	5,469	0.8	\$193	\$162
ANTICONVULSANT	424,013	465	59.2	5,266	1.0	84	81
ANTIDEPRESSANTS	314,136	498	63.4	5,697	0.8	69	55
ANTIDIABETIC	244,798	448	57.1	4,929	0.9	58	50
ULCER DRUGS	213,944	439	55.9	4,812	0.7	63	44
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	184,204	132	16.8	1,450	0.7	175	127
ANTIHYPERTENSIVE	147,979	428	54.5	4,643	0.8	39	32
ANALGESICS - Narcotic	138,903	445	56.7	4,872	0.6	52	29
MISC. HEMATOLOGICAL	138,487	132	16.8	1,490	0.8	112	93
HEMATOPOIETIC AGENTS	119,759	146	18.6	1,653	0.7	104	72
Total	2,813,658	3,622		40,281	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 539 beneficiaries who were in nursing facilities for part of their enrollment and their 5,529 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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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



TABLE ND.10A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST  
 AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>31,651</b>	<b>\$2,813,658</b>	<b>489</b>	<b>62.3 %</b>	<b>5,469</b>	<b>0.8</b>	<b>\$162</b>	<b>465</b>	<b>59.2 %</b>	<b>5,266</b>	<b>1.0</b>	<b>\$81</b>
<b>Female</b>	17,493	1,576,716	257	61.9	2,863	0.9	165	241	58.1	2,738	1.0	80
<b>Disabled</b>	13,872	1,254,304	201	64.6	2,220	0.9	170	212	68.2	2,432	1.0	79
64 or younger	13,653	1,230,864	193	63.7	2,144	0.9	169	210	69.3	2,418	1.0	79
65-74	219	23,440	8	100.0	76	0.9	199	2	25.0	14	0.8	60
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	3,621	322,412	56	53.8	643	0.9	148	29	27.9	306	1.1	84
64 or younger	161	22,559	1	50.0	12	1.0	572	1	50.0	12	2.0	242
65-74	1,134	108,024	19	70.4	218	0.9	168	12	44.4	117	1.4	135
75-84	1,213	89,075	18	60.0	206	0.6	71	9	30.0	108	0.8	37
85 and older	1,113	102,754	18	40.0	207	1.0	177	7	15.6	69	0.8	45
<b>Male</b>	13,873	1,214,886	226	62.1	2,534	0.8	162	215	59.1	2,420	0.9	82
<b>Disabled</b>	11,969	1,060,283	200	65.4	2,240	0.8	160	197	64.4	2,217	0.9	81
64 or younger	11,924	1,058,846	200	65.6	2,240	0.8	160	197	64.6	2,217	0.9	81
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	45	1,437	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	1,904	154,603	26	44.8	294	0.8	172	18	31.0	203	0.9	88
64 or younger	98	7,305	2	100.0	24	0.8	147	0	0.0	0	0.0	0
65-74	579	56,624	10	76.9	120	0.8	190	6	46.2	72	0.9	102
75-84	560	44,382	5	26.3	54	1.1	312	5	26.3	60	1.0	92
85 and older	667	46,292	9	37.5	96	0.8	77	7	29.2	71	0.9	71
<b>Unknown</b>	285	22,056	6	100.0	72	0.6	63	9	150.0	108	0.8	72

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 539 beneficiaries who were in nursing facilities for part of their enrollment and their 5,529 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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.10B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIDIABETIC					ULCER DRUGS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>498</b>	<b>63.4 %</b>	<b>5,697</b>	<b>0.8</b>	<b>\$55</b>	<b>448</b>	<b>57.1 %</b>	<b>4,929</b>	<b>0.9</b>	<b>\$50</b>	<b>439</b>	<b>55.9 %</b>	<b>4,812</b>	<b>0.7</b>	<b>\$45</b>
<b>Female</b>	290	69.9	3,327	0.8	57	264	63.6	2,911	0.8	50	235	56.6	2,560	0.7	47
<b>Disabled</b>	229	73.6	2,642	0.8	59	213	68.5	2,348	0.9	50	182	58.5	1,981	0.7	49
64 or younge	227	74.9	2,618	0.8	59	208	68.6	2,323	0.9	50	175	57.8	1,936	0.7	49
65-74	2	25.0	24	0.8	30	5	62.5	25	1.1	47	7	87.5	45	0.8	57
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	61	58.7	685	0.8	51	51	49.0	563	0.7	50	53	51.0	579	0.7	40
64 or younge	3	150.0	36	1.0	56	3	150.0	36	0.6	64	2	100.0	24	0.6	9
65-74	18	66.7	216	0.8	39	8	29.6	74	0.9	51	11	40.7	121	0.8	52
75-84	23	76.7	258	0.7	51	22	73.3	241	0.7	44	21	70.0	248	0.6	34
85 and older	17	37.8	175	0.9	64	18	40.0	212	0.7	55	19	42.2	186	0.7	46
<b>Male</b>	202	55.5	2,298	0.8	53	183	50.3	2,006	0.9	50	203	55.8	2,240	0.7	41
<b>Disabled</b>	172	56.2	1,971	0.8	53	158	51.6	1,749	0.9	49	170	55.6	1,895	0.7	42
64 or younge	170	55.7	1,947	0.8	54	158	51.8	1,749	0.9	49	168	55.1	1,871	0.7	43
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	2	200.0	24	0.4	22	0	0.0	0	0.0	0	2	200.0	24	0.4	20
<b>Other Eligibles</b>	30	51.7	327	0.7	55	25	43.1	257	0.9	52	33	56.9	345	0.7	36
64 or younge	2	100.0	24	0.8	58	3	150.0	36	1.0	52	2	100.0	24	0.5	11
65-74	8	61.5	96	0.9	75	5	38.5	60	0.9	72	9	69.2	98	0.8	31
75-84	9	47.4	101	0.5	39	9	47.4	83	1.1	58	8	42.1	79	0.9	26
85 and older	11	45.8	106	0.8	52	8	33.3	78	0.5	32	14	58.3	144	0.6	49
<b>Unknown</b>	6	100.0	72	0.5	10	1	16.7	12	0.7	24	1	16.7	12	1.0	57

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 539 beneficiaries who were in nursing facilities for part of their enrollment and their 5,529 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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.10C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIHYPERTENSIVE					ANALGESICS - Narcotic				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>132</b>	<b>16.8 %</b>	<b>1,450</b>	<b>0.7</b>	<b>\$127</b>	<b>428</b>	<b>54.5 %</b>	<b>4,643</b>	<b>0.8</b>	<b>\$32</b>	<b>445</b>	<b>56.7 %</b>	<b>4,872</b>	<b>0.6</b>	<b>\$29</b>
<b>Female</b>	76	18.3	825	0.8	126	227	54.7	2,458	0.8	36	241	58.1	2,635	0.5	30
<b>Disabled</b>	45	14.5	499	0.7	138	178	57.2	1,936	0.9	38	188	60.5	2,039	0.5	30
64 or younger	44	14.5	487	0.7	138	175	57.8	1,922	0.9	38	184	60.7	2,013	0.5	31
65-74	1	12.5	12	1.1	160	3	37.5	14	1.0	59	4	50.0	26	0.3	6
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Other Eligibles</b>	31	29.8	326	0.9	107	49	47.1	522	0.8	29	53	51.0	596	0.5	29
64 or younger	0	0.0	0	0.0	0	1	50.0	12	1.1	43	3	150.0	36	0.4	4
65-74	5	18.5	54	1.2	85	12	44.4	138	0.8	25	16	59.3	192	0.8	63
75-84	11	36.7	124	0.8	117	20	66.7	232	0.7	29	19	63.3	209	0.4	17
85 and older	15	33.3	148	0.8	106	16	35.6	140	0.9	33	15	33.3	159	0.5	12
<b>Male</b>	50	13.7	553	0.7	138	199	54.7	2,161	0.8	27	201	55.2	2,201	0.6	27
<b>Disabled</b>	41	13.4	453	0.7	147	172	56.2	1,882	0.8	27	163	53.3	1,817	0.6	26
64 or younger	41	13.4	453	0.7	147	171	56.1	1,870	0.8	27	162	53.1	1,805	0.6	26
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	1	100.0	12	0.5	11	1	100.0	12	1.6	26
<b>Other Eligibles</b>	9	15.5	100	0.7	95	27	46.6	279	0.9	28	38	65.5	384	0.6	32
64 or younger	0	0.0	0	0.0	0	1	50.0	12	1.0	23	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	8	61.5	96	1.0	37	5	38.5	55	1.1	103
75-84	2	10.5	24	0.3	39	9	47.4	84	0.9	29	11	57.9	106	0.8	30
85 and older	7	29.2	76	0.8	113	9	37.5	87	0.7	16	22	91.7	223	0.3	15
<b>Unknown</b>	6	100.0	72	0.5	59	2	33.3	24	0.9	25	3	50.0	36	0.4	19

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 539 beneficiaries who were in nursing facilities for part of their enrollment and their 5,529 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 ND.10D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Beneficiary Characteristics	MISC. HEMATOLOGICAL					HEMATOPOIETIC AGENTS					Benefit Months	
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Among All-Year Nursing Facility Residents
<b>All</b>	<b>132</b>	<b>16.8 %</b>	<b>1,490</b>	<b>0.8</b>	<b>\$93</b>	<b>146</b>	<b>18.6 %</b>	<b>1,653</b>	<b>0.7</b>	<b>\$72</b>	<b>785</b>	<b>8,427</b>
<b>Female</b>	66	15.9	746	0.8	93	80	19.3	905	0.7	96	415	4,483
<b>Disabled</b>	38	12.2	435	0.9	102	55	17.7	613	0.7	105	311	3,412
	38	12.5	435	0.9	102	51	16.8	589	0.7	109	303	3,341
64 or younger	0	0.0	0	0.0	0	4	50.0	24	0.9	5	8	71
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	28	26.9	311	0.7	81	25	24.0	292	0.6	77	104	1,071
<b>Other Eligibles</b>	1	50.0	12	1.0	102	2	100.0	24	0.6	265	2	24
64 or younger	4	14.8	37	0.9	82	11	40.7	132	0.7	108	27	266
65-74	14	46.7	158	0.7	76	4	13.3	48	0.6	33	30	328
75-84	9	20.0	104	0.7	87	8	17.8	88	0.5	3	45	453
85 and older												
<b>Male</b>	64	17.6	720	0.8	92	66	18.1	748	0.7	45	364	3,872
<b>Disabled</b>	52	17.0	582	0.9	94	55	18.0	622	0.7	51	306	3,279
	52	17.0	582	0.9	94	54	17.7	610	0.7	52	305	3,267
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	1	100.0	12	0.1	0	1	12
85 and older	12	20.7	138	0.8	83	11	19.0	126	0.7	11	58	593
<b>Other Eligibles</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
64 or younger	3	23.1	36	0.9	74	1	7.7	12	0.9	6	13	151
65-74	4	21.1	42	1.0	106	3	15.8	36	0.5	3	19	165
75-84	5	20.8	60	0.7	71	7	29.2	78	0.8	16	24	253
85 and older												
<b>Unknown</b>	2	33.3	24	0.9	107	0	0.0	0	0.0	0	6	72

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2004. A total of 539 beneficiaries who were in nursing facilities for part of their enrollment and their 5,529 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 ND.11  
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
MISSISSIPPI, 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 Nondual Rx \$	Total Number of Beneficiaries
<b>All</b>	<b>173,805</b>	<b>28.3 %</b>	<b>0.8</b>	<b>473,013</b>	<b>\$15</b>	<b>\$9,463,660</b>	<b>\$20</b>	<b>3.5 %</b>	<b>615,137</b>
<b>Age</b>									
5 and younger	67,490	38.4	1.0	170,559	14	2,463,795	14	6.2	175,609
6-14	40,929	22.8	0.4	80,371	11	2,043,546	25	3.9	179,560
15-20	17,828	19.4	0.4	36,541	9	842,493	23	3.0	91,727
21-44	31,412	24.5	0.8	97,588	16	1,992,445	20	2.9	127,996
45-64	15,617	40.4	2.2	84,407	53	2,060,822	24	2.7	38,685
65-74	241	34.1	2.0	1,426	37	26,228	18	2.1	707
75-84	164	33.7	2.4	1,174	39	19,052	16	2.3	487
85 and older	124	33.9	2.6	947	42	15,279	16	2.5	366
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>									
Aged	446	33.6	2.4	3,149	40	52,845	17	2.2	1,328
Disabled	33,744	35.7	1.7	156,410	51	4,801,829	31	3.2	94,499
Adults	26,789	22.0	0.5	64,820	8	992,742	15	3.1	121,942
Children	112,780	28.4	0.6	248,487	9	3,613,586	15	4.4	397,213
Unknown	46	29.7	0.9	147	17	2,658	18	1.5	155
<b>Gender</b>									
Female	105,011	29.7	0.8	291,325	16	5,620,659	19	3.5	353,156
Male	68,190	28.8	0.8	180,205	16	3,823,570	21	3.5	236,934
Unknown	604	2.4	0.1	1,483	1	19,431	13	3.1	25,047
<b>Race</b>									
White	58,239	31.2	0.9	171,319	21	3,874,686	23	3.4	186,542
African American	104,243	29.3	0.7	264,494	12	4,439,356	17	3.5	356,011
Other/unknown	11,323	15.6	0.5	37,200	16	1,149,618	31	4.1	72,584
<b>Use of Nursing Facilities<sup>d</sup></b>									
Entire year	537	68.4	7.9	6,235	130	102,069	16	2.4	785
Part year	406	75.3	5.2	2,778	113	61,085	22	2.7	539
None	172,862	28.2	0.8	464,000	15	9,300,506	20	3.5	613,813
<b>Maintenance Assistance Status</b>									
Cash	92,314	33.7	1.1	295,208	24	6,579,747	22	3.5	274,149
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	77,351	25.7	0.5	165,508	8	2,475,550	15	3.7	301,207
Other/unknown	4,140	10.4	0.3	12,297	10	408,363	33	3.6	39,781

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

- a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 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 ND.12  
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
MISSISSIPPI, 2004

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
<b>All</b>	<b>0.1</b>	<b>\$2</b>	<b>\$20</b>	<b>\$0</b>	<b>\$0</b>	<b>5,955,238</b>
<b>Age</b>						
5 and younger	0.1	2	14	0	0	1,628,365
6-14	0.0	1	25	0	0	1,845,141
15-20	0.0	1	23	0	0	885,653
21-44	0.1	2	20	0	1	1,181,341
45-64	0.2	5	24	0	2	399,053
65-74	0.2	4	18	0	1	7,233
75-84	0.2	4	16	0	1	4,882
85 and older	0.3	4	16	0	1	3,570
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.2	4	17	0	1	13,348
Disabled	0.2	5	31	0	1	1,021,080
Adults	0.1	1	15	0	0	1,071,444
Children	0.1	1	15	0	0	3,848,213
Unknown	0.1	2	18	0	1	1,153
<b>Gender</b>						
Female	0.1	2	19	0	0	3,421,910
Male	0.1	2	21	0	0	2,358,605
Unknown	0.0	0	13	0	0	174,723
<b>Race</b>						
White	0.1	2	23	0	1	1,742,652
African American	0.1	1	17	0	0	3,594,820
Other/unknown	0.1	2	31	0	0	617,766
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.7	12	16	0	4	8,427
Part year	0.5	11	22	0	4	5,529
None	0.1	2	20	0	0	5,941,282
<b>Maintenance Assistance Status</b>						
Cash	0.1	2	22	0	1	2,806,084
Medically needy	0.0	0	0	0	0	0
Poverty related	0.1	1	15	0	0	2,767,363
Other/unknown	0.0	1	33	0	0	381,791

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

- a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 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 ND.13  
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
FOR SELECTED DRUG CATEGORIES AMONG NONDUALS<sup>a,b,c</sup>  
MISSISSIPPI, 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
<b>All</b>	<b>219,880</b>	<b>\$43</b>	<b>\$9,463,660</b>	<b>100.0 %</b>	<b>473,013</b>	<b>\$20</b>	<b>100.0 %</b>
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	119	15	1,762	0.0	188	9	0.0
Cough and cold medications	116,594	32	3,707,876	39.2	217,149	17	45.9
Vitamins and minerals	12,752	68	870,510	9.2	41,126	21	8.7
Non-prescription drugs	62,281	29	1,791,720	18.9	108,321	17	22.9
Barbiturates	1,449	54	78,159	0.8	10,638	7	2.2
Benzodiazepines	15,451	108	1,662,043	17.6	74,968	22	15.8
Other Part D Excl Rx Drugs	11,234	120	1,351,590	14.3	20,623	66	4.4

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 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 ND11.

b. Includes OTC drugs as well as prescription drugs.

c. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

APPENDIX TABLE A.1  
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>615,137</b>	<b>1,328</b>	<b>94,499</b>	<b>121,942</b>	<b>397,213</b>	<b>155</b>	<b>5,955,238</b>	<b>13,348</b>	<b>1,021,080</b>	<b>1,071,444</b>	<b>3,848,213</b>	<b>1,153</b>
<b>Age</b>												
5 and younger	175,609	0	6,146	4	169,459	0	1,628,365	0	64,970	38	1,563,357	0
6-14	179,560	0	15,288	98	164,174	0	1,845,141	0	173,498	611	1,671,032	0
15-20	91,727	1	10,810	17,458	63,458	0	885,653	12	121,129	151,459	613,053	0
21-44	127,996	0	27,794	100,033	122	47	1,181,341	0	298,966	881,316	771	288
45-64	38,685	18	34,211	4,348	0	108	399,053	214	359,966	38,008	0	865
65-74	707	496	210	1	0	0	7,233	5,094	2,127	12	0	0
75-84	487	458	29	0	0	0	4,882	4,567	315	0	0	0
85 and older	366	355	11	0	0	0	3,570	3,461	109	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	353,156	772	48,960	116,955	186,315	154	3,421,910	7,589	533,075	1,032,475	1,847,630	1,141
Male	236,934	516	45,496	4,987	185,935	0	2,358,605	5,289	487,555	38,969	1,826,792	0
Unknown	25,047	40	43	0	24,963	1	174,723	470	450	0	173,791	12
<b>Race</b>												
White	186,542	630	26,959	38,795	120,081	77	1,742,652	6,303	283,380	321,875	1,130,514	580
African American	356,011	587	49,283	66,167	239,904	70	3,594,820	5,991	541,635	605,861	2,440,822	511
Other/unknown	72,584	111	18,257	16,980	37,228	8	617,766	1,054	196,065	143,708	276,877	62
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	785	166	619	0	0	0	8,427	1,712	6,715	0	0	0
Part year	539	76	458	4	1	0	5,529	742	4,732	43	12	0
None	613,813	1,086	93,422	121,938	397,212	155	5,941,282	10,894	1,009,633	1,071,401	3,848,201	1,153
<b>Maintenance Assistance Status</b>												
Cash	274,149	374	88,056	66,658	119,061	0	2,806,084	3,918	956,831	611,537	1,233,798	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	301,207	603	3,881	22,346	274,222	155	2,767,363	6,064	39,890	147,950	2,572,306	1,153
Other/unknown	39,781	351	2,562	32,938	3,930	0	381,791	3,366	24,359	311,957	42,109	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	615,137	1,328	94,499	121,942	397,213	155	5,955,238	13,348	1,021,080	1,071,444	3,848,213	1,153
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

0  
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Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

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

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

APPENDIX TABLE A.2  
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS<sup>a</sup>  
 NONDUAL BENEFICIARIES, MISSISSIPPI, 2004

	Beneficiaries and Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
<b>All</b>	<b>615,137</b>	<b>5,955,238</b>	<b>615,137</b>	<b>5,955,238</b>	<b>0</b>	<b>0</b>
Fee-for-service (FFS) all year	615,137	5,955,238	615,137	5,955,238	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2004 file for Mississippi, released by CMS in 01/2008. This table was produced on 03/25/2008.

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