

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2004 RHODE ISLAND

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, RHODE ISLAND, 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	58,731	915	21,180	13,999	22,348	289	351,569	9,219	220,254	38,223	81,789	2,084
Age												
5 and younger	8,603	0	877	1	7,725	0	28,802	0	7,769	5	21,028	0
6-14	13,010	0	2,586	2	10,422	0	67,774	0	25,199	5	42,570	0
15-20	6,865	0	1,658	1,040	4,159	8	34,867	0	15,383	1,619	17,834	31
21-44	18,968	0	7,517	11,307	40	104	112,298	0	80,477	30,838	333	650
45-64	10,211	0	8,392	1,642	2	175	96,977	0	89,815	5,747	24	1,391
65-74	621	492	122	6	0	1	6,190	4,874	1,305	8	0	3
75-84	322	296	25	1	0	0	3,361	3,090	270	1	0	0
85 and older	131	127	3	0	0	1	1,300	1,255	36	0	0	9
Unknown	0	0	0	0	0	0		0	0	0	0	0
Gender												
Female	32,761	591	11,026	10,018	10,837	289	192,193	5,986	116,966	27,937	39,220	2,084
Male	25,970	324	10,154	3,981	11,511	0	159,376	3,233	103,288	10,286	42,569	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Race												
White	23,540	202	11,386	5,044	6,683	225	169,156	2,101	121,917	13,789	29,728	1,621
African American	5,651	67	2,391	1,217	1,964	12	37,994	701	24,910	3,693	8,602	88
Other/unknown	29,540	646	7,403	7,738	13,701	52	144,419	6,417	73,427	20,741	43,459	375
Use of Nursing Facilities^c												
Entire year	441	55	386	0	0	0	5,140	584	4,556	0	0	0
Part year	330	32	298	0	0	0	3,480	291	3,189	0	0	0
None	57,960	828	20,496	13,999	22,348	289	342,949	8,344	212,509	38,223	81,789	2,084
Maintenance Assistance Status												
Cash	24,514	146	17,878	2,574	3,916	0	200,035	1,501	188,383	3,915	6,236	0
Medically needy	71	1	67	3	0	0	656	5	648	3	0	0
Poverty-related	7,852	1	1	828	6,733	289	22,163	12	12	1,228	18,827	2,084
Other/unknown	26,294	767	3,234	10,594	11,699	0	128,715	7,701	31,211	33,077	56,726	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	27,352	910	19,223	2,136	4,800	283	280,678	9,186	210,920	15,013	43,490	2,069
FFS part year, with Rx claims	5,351	4	1,224	1,984	2,137	2	25,351	27	6,732	7,953	10,630	9
FFS part year, no Rx claims	26,028	1	733	9,879	15,411	4	45,540	6	2,602	15,257	27,669	6

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. 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^{a, b}
NONDUAL BENEFICIARIES, RHODE ISLAND, 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	41.9 %	11.4	\$897	\$78	\$7,241	12.4 %	58,731
Age							
5 and younger	19.4	1.4	54	40	2,956	1.8	8,603
6-14	30.8	3.6	190	53	4,234	4.5	13,010
15-20	30.3	4.0	253	64	8,425	3.0	6,865
21-44	43.9	11.4	970	85	7,023	13.8	18,968
45-64	75.6	33.8	2,738	81	13,964	19.6	10,211
65-74	77.8	21.3	1,442	68	8,057	17.9	621
75-84	78.3	24.8	1,582	64	10,904	14.5	322
85 and older	77.1	30.4	1,736	57	20,248	8.6	131
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	78.0	21.3	1,380	65	9,794	14.1	915
Disabled	78.3	28.2	2,342	83	15,793	14.8	21,180
Adults	20.9	1.8	44	25	1,942	2.2	13,999
Children	18.8	1.3	43	34	2,369	1.8	22,348
Unknown	70.2	11.4	761	67	5,913	12.9	289
Gender							
Female	43.5	13.2	982	74	6,670	14.7	32,761
Male	40.0	9.2	790	86	7,962	9.9	25,970
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	53.7	18.4	1,434	78	10,653	13.5	23,540
African American	45.0	9.9	851	86	7,458	11.4	5,651
Other/unknown	32.0	6.2	477	77	4,481	10.7	29,540
Use of Nursing Facilities^f							
Entire year	85.0	61.6	4,828	78	131,936	3.7	441
Part year	96.1	67.2	5,101	76	87,263	5.8	330
None	41.3	10.7	843	78	5,837	14.4	57,960
Maintenance Assistance Status							
Cash	60.3	21.6	1,811	84	11,770	15.4	24,514
Medically needy	90.1	35.1	3,460	99	27,979	12.4	71
Poverty related	16.0	0.9	39	42	1,400	2.8	7,852
Other/unknown	32.5	5.1	293	58	4,708	6.2	26,294

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. 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^{a, b}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	Number of Rx, Percentage with:									Number		
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months
All	1.9	\$150	12.4 %	58.1 %	19.7 %	6.5 %	10.0 %	4.8 %	1.0 %	\$1,210	58,731	351,569
Age												
5 and younger	0.4	16	1.8	80.6	15.6	2.2	1.4	0.3	0.0	883	8,603	28,802
6-14	0.7	37	4.5	69.2	21.4	4.4	4.3	0.6	0.1	813	13,010	67,774
15-20	0.8	50	3.0	69.7	20.1	4.3	4.6	1.1	0.1	1,659	6,865	34,867
21-44	1.9	164	13.8	56.1	20.4	7.1	10.8	4.6	0.9	1,186	18,968	112,298
45-64	3.6	288	19.6	24.4	18.6	11.8	25.3	16.1	3.8	1,470	10,211	96,977
65-74	2.1	145	17.9	22.2	32.2	18.7	19.6	6.0	1.3	808	621	6,190
75-84	2.4	152	14.5	21.7	30.4	15.2	21.4	9.0	2.2	1,045	322	3,361
85 and older	3.1	175	8.6	22.9	17.6	11.5	25.2	20.6	2.3	2,040	131	1,300
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	2.1	137	14.1	22.0	32.9	17.3	18.9	7.7	1.3	972	915	9,219
Disabled	2.7	225	14.8	21.7	28.2	12.4	23.0	12.1	2.7	1,519	21,180	220,254
Adults	0.6	16	2.2	79.1	13.1	3.6	3.4	0.7	0.1	711	13,999	38,223
Children	0.3	12	1.8	81.2	15.1	2.1	1.4	0.2	0.0	647	22,348	81,789
Unknown	1.6	106	12.9	29.8	36.0	14.2	15.9	3.8	0.3	820	289	2,084
Gender												
Female	2.3	167	14.7	56.5	18.8	6.7	10.9	5.8	1.3	1,137	32,761	192,193
Male	1.5	129	9.9	60.0	20.9	6.2	8.8	3.4	0.6	1,297	25,970	159,376
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	2.6	200	13.5	46.3	20.8	8.3	14.4	8.3	2.0	1,483	23,540	169,156
African American	1.5	127	11.4	55.0	25.1	6.3	9.6	3.5	0.6	1,109	5,651	37,994
Other/unknown	1.3	98	10.7	68.0	17.9	5.0	6.6	2.2	0.3	917	29,540	144,419
Use of Nursing Facilities^f												
Entire year	5.3	414	3.7	15.0	6.8	7.5	28.6	29.5	12.7	11,320	441	5,140
Part year	6.4	484	5.8	3.9	7.6	7.6	28.5	35.5	17.0	8,275	330	3,480
None	1.8	142	14.4	58.7	19.9	6.5	9.7	4.4	0.8	987	57,960	342,949
Maintenance Assistance Status												
Cash	2.6	222	15.4	39.7	22.0	9.5	17.3	9.4	2.1	1,442	24,514	200,035
Medically needy	3.8	375	12.4	9.9	14.1	16.9	38.0	18.3	2.8	3,028	71	656
Poverty related	0.3	14	2.8	84.0	12.8	1.7	1.3	0.2	0.0	496	7,852	22,163
Other/unknown	1.0	60	6.2	67.5	19.7	5.0	5.7	1.8	0.3	962	26,294	128,715

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. 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^{a, b, c}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
Beneficiary 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	1.9	\$150	\$78	0.8	\$113	\$138	0.1	\$11	\$107	1.0	\$26	\$26
Age												
5 and younger	0.4	16	40	0.2	12	75	0.0	1	43	0.2	3	12
6-14	0.7	37	53	0.4	29	78	0.0	2	62	0.3	5	18
15-20	0.8	50	64	0.4	37	96	0.1	4	74	0.3	9	26
21-44	1.9	164	85	0.8	126	159	0.1	12	111	1.0	26	25
45-64	3.6	288	81	1.5	214	144	0.2	22	120	1.9	52	28
65-74	2.1	145	68	1.0	109	109	0.1	8	81	1.0	28	27
75-84	2.4	152	64	1.1	115	105	0.1	8	75	1.2	29	25
85 and older	3.1	175	57	1.3	127	100	0.2	11	68	1.6	36	22
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	2.1	137	65	1.0	104	106	0.1	7	76	1.0	26	25
Disabled	2.7	225	83	1.1	170	148	0.1	17	114	1.4	38	27
Adults	0.6	16	25	0.3	11	41	0.0	1	34	0.3	4	12
Children	0.3	12	34	0.2	9	50	0.0	1	40	0.1	2	14
Unknown	1.6	106	67	0.6	75	132	0.0	5	96	1.0	26	27
Gender												
Female	2.3	167	74	0.9	125	132	0.1	12	99	1.2	30	25
Male	1.5	129	86	0.7	98	148	0.1	10	122	0.8	20	27
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	2.6	200	78	1.1	148	137	0.1	16	114	1.3	35	27
African American	1.5	127	86	0.6	98	162	0.1	9	116	0.8	19	25
Other/unknown	1.3	98	77	0.6	76	134	0.1	6	88	0.6	16	25
Use of Nursing Facilities^e												
Entire year	5.3	414	78	2.2	308	140	0.4	35	87	2.7	70	26
Part year	6.4	484	76	2.5	366	149	0.4	35	97	3.5	82	23
None	1.8	142	78	0.8	108	138	0.1	11	109	0.9	24	26
Maintenance Assistance Status												
Cash	2.6	222	84	1.1	167	151	0.1	17	117	1.4	38	27
Medically needy	3.8	375	99	1.6	292	178	0.2	26	169	2.0	57	29
Poverty related	0.3	14	42	0.1	10	79	0.0	1	53	0.2	4	18
Other/unknown	1.0	60	58	0.5	46	94	0.1	4	72	0.5	10	20

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. 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 Rhode Island, 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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
- e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	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	0.3	0.1	0.0	0.2	\$39	\$32	\$2	\$4	\$122	\$235	\$129	\$26	44,069	\$5,386,666	13,075	22.3 %	139,669
Biologicals	0.3	0.2	0.0	0.1	657	410	0	247	1980	1,778	0	2,441	82	162,336	23	0.0	247
Antineoplastic Agents	0.5	0.2	0.0	0.3	130	109	1	21	254	624	98	63	2,063	523,207	385	0.7	4,012
Endocrine/Metabolic Drugs	0.6	0.2	0.1	0.3	37	27	3	8	66	123	45	27	45,962	3,011,504	7,609	13.0	80,768
Cardiovascular Agents	0.9	0.4	0.0	0.4	59	46	2	11	67	110	81	25	81,325	5,416,605	8,441	14.4	91,511
Respiratory Agents	0.7	0.4	0.0	0.2	36	32	0	3	55	74	58	16	68,699	3,745,730	9,705	16.5	103,339
Gastrointestinal Agents	0.6	0.3	0.0	0.3	56	40	3	13	95	149	100	45	45,212	4,299,234	7,013	11.9	77,256
Genitourinary Agents	0.3	0.2	0.0	0.1	18	14	2	2	56	77	46	19	6,947	386,273	1,997	3.4	21,850
CNS Drugs	1.3	0.6	0.1	0.6	118	91	7	20	94	166	97	31	163,444	15,363,639	12,173	20.7	130,057
Stimulants/Anti-obesity/Anorexia	0.7	0.5	0.0	0.2	42	35	1	5	57	66	56	29	15,466	880,276	2,140	3.6	21,162
Miscellaneous Psychological/																	
Neurological Agents	0.5	0.5	0.0	0.0	164	163	0	0	329	339	0	23	1,131	371,958	208	0.4	2,274
Analgesics and Anesthetics	0.7	0.2	0.0	0.5	39	25	4	9	58	153	327	18	87,434	5,039,625	12,038	20.5	129,208
Neuromuscular Agents	0.8	0.3	0.1	0.4	61	38	15	8	77	138	134	20	60,771	4,683,068	6,949	11.8	76,459
Nutritional Products	0.3	0.0	0.0	0.3	8	0	0	7	23	29	31	22	4,633	106,279	1,367	2.3	13,484
Hematological Agents	0.5	0.2	0.0	0.3	80	72	2	6	146	403	67	17	9,134	1,333,252	1,534	2.6	16,701
Topical Products	0.3	0.1	0.0	0.2	14	8	1	4	42	73	50	23	31,973	1,357,689	9,245	15.7	100,110
Miscellaneous Products	0.3	0.2	0.0	0.1	61	44	8	9	208	259	266	98	2,650	549,921	847	1.4	8,984
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	8	0	0	0	37	0	0	0	1,222	45,077	508	0.9	5,812
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.	672,217	52,662,339	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. 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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Rhode Island, 0.6 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.medispain.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^{a, b, c}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 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	\$9,059,776	6,342	10.8 %	71,155	0.6	\$198	\$127
ANTIDEPRESSANTS	5,162,012	13,250	22.6	146,165	0.6	64	35
ANTICONVULSANT	4,260,656	6,125	10.4	68,788	0.7	91	62
ANTIVIRAL	3,744,425	1,557	2.7	17,535	0.5	457	214
ULCER DRUGS	3,390,923	6,764	11.5	76,407	0.5	98	44
ANALGESICS - Narcotic	2,966,455	11,878	20.2	132,700	0.4	58	22
ANTIASTHMATIC	2,492,825	10,163	17.3	111,782	0.4	59	22
ANTIHYPERTENSIVE	2,209,029	4,141	7.1	46,888	0.5	88	47
ANTIDIABETIC	1,949,937	4,157	7.1	46,530	0.5	81	42
ANALGESICS - ANTI-INFLAMMATORY	1,373,081	8,668	14.8	97,203	0.3	51	14
Total	36,609,119	73,045		815,153	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. 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.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); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTIDEPRESSANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	385,654	\$36,609,119	6,342	10.8 %	71,155	0.6	\$127	13,250	22.6 %	146,165	0.6	\$35
Female	249,250	22,126,268	3,553	10.8	40,102	0.6	118	9,047	27.6	100,013	0.6	36
Disabled	231,474	21,269,264	3,342	30.3	38,083	0.6	121	8,076	73.2	91,491	0.6	37
	1,106	63,474	1	0.3	12	0.1	1	5	1.6	60	0.7	24
5 and younger	3,737	260,006	76	9.5	843	0.5	52	119	14.9	1,310	0.5	19
6-14	4,142	312,084	106	17.2	1,159	0.6	68	171	27.7	1,774	0.5	26
15-20	79,323	7,743,155	1,619	40.4	18,447	0.6	115	3,282	82.0	36,953	0.5	36
21-44	141,180	12,737,187	1,532	29.5	17,533	0.7	135	4,453	85.8	50,891	0.6	39
45-64	1,776	137,551	6	7.2	65	0.8	130	37	44.6	413	0.5	30
65-74	210	15,807	2	20.0	24	0.4	52	9	90.0	90	0.7	43
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	17,776	857,004	211	1.0	2,019	0.5	57	971	4.5	8,522	0.5	16
Other Eligibles	428	9,875	1	0.0	12	0.2	3	0	0.0	0	0.0	0
5 and younger	1,929	75,354	40	0.8	397	0.6	53	63	1.2	645	0.6	17
6-14	1,324	64,043	41	1.4	432	0.6	60	82	2.8	758	0.5	17
15-20	6,244	136,984	56	0.7	449	0.3	18	542	6.6	4,363	0.4	12
21-44	2,506	134,263	22	2.0	191	0.3	11	141	12.7	1,180	0.5	23
45-64	2,452	202,272	8	2.5	90	0.5	85	63	19.4	703	0.3	16
65-74	1,729	148,842	18	9.7	195	0.7	150	43	23.2	487	0.5	24
75-84	1,164	85,371	25	28.4	253	0.6	83	37	42.0	386	0.7	39
85 and older												
Male	136,404	14,482,851	2,789	10.7	31,053	0.7	140	4,203	16.2	46,152	0.6	35
Disabled	126,069	13,949,361	2,582	25.4	29,006	0.7	145	3,866	38.1	43,046	0.6	36
	1,480	81,082	12	2.2	142	0.4	34	8	1.4	94	0.3	7
5 and younger	8,809	640,149	294	16.4	3,153	0.6	70	309	17.3	3,267	0.6	22
6-14	5,360	426,234	185	17.8	2,002	0.6	88	212	20.4	2,298	0.6	27
15-20	46,277	5,818,139	1,271	36.2	14,340	0.7	162	1,646	46.9	18,446	0.5	39
21-44	63,150	6,904,968	812	25.4	9,283	0.7	158	1,676	52.4	18,768	0.6	37
45-64	633	52,278	7	17.9	74	0.5	71	11	28.2	125	0.7	60
65-74	360	26,511	1	6.7	12	0.1	5	4	26.7	48	0.4	9
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	10,335	533,490	207	1.3	2,047	0.6	67	337	2.1	3,106	0.6	24
Other Eligibles	829	19,149	3	0.1	21	0.7	29	0	0.0	0	0.0	0
5 and younger	3,088	138,165	94	1.8	981	0.6	60	113	2.1	1,120	0.6	23
6-14	1,501	115,632	56	2.4	546	0.7	106	82	3.6	778	0.6	31
15-20	1,395	37,168	20	0.6	133	0.2	19	72	2.3	532	0.4	14
21-44	776	16,930	2	0.3	10	0.5	10	17	2.4	105	0.4	8
45-64	1,304	99,110	11	6.3	132	0.4	67	25	14.3	275	0.4	18
65-74	1,116	76,846	10	8.9	113	0.3	34	21	18.8	231	0.7	35
75-84	326	30,490	11	27.5	111	0.4	34	7	17.5	65	0.8	37
85 and older												
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 Rhode Island, released by CMS in 02/2008. 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^{a, b, c}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	ANTICONVULSANT					ANTIVIRAL					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
All	6,125	10.4 %	68,788	0.7	\$62	1,557	2.7 %	17,535	0.5	\$214	6,764	11.5 %	76,407	0.5	\$44
Female	3,861	11.8	43,214	0.7	59	929	2.8	10,589	0.4	170	4,536	13.8	51,484	0.4	45
Disabled	3,600	32.7	40,827	0.7	62	830	7.5	9,644	0.4	183	3,993	36.2	46,091	0.5	47
5 and younger	43	13.4	501	0.5	42	6	1.9	58	1.1	205	47	14.6	521	0.5	24
6-14	143	18.0	1,596	0.7	61	10	1.3	120	0.4	101	78	9.8	895	0.4	38
15-20	149	24.1	1,647	0.7	70	11	1.8	123	0.2	7	74	12.0	855	0.3	38
21-44	1,569	39.2	17,724	0.7	67	462	11.5	5,364	0.4	170	1,228	30.7	14,088	0.4	41
45-64	1,680	32.4	19,173	0.7	57	341	6.6	3,979	0.5	208	2,515	48.4	29,148	0.5	51
65-74	15	18.1	174	0.9	38	0	0.0	0	0.0	0	46	55.4	533	0.5	47
75-84	1	10.0	12	0.3	21	0	0.0	0	0.0	0	5	50.0	51	0.5	70
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	261	1.2	2,387	0.5	18	99	0.5	945	0.3	37	543	2.5	5,393	0.3	23
5 and younger	4	0.1	38	0.6	12	6	0.2	26	0.3	21	24	0.6	176	0.4	12
6-14	36	0.7	363	0.7	25	7	0.1	71	0.4	56	30	0.6	297	0.3	32
15-20	27	0.9	292	0.4	16	10	0.3	94	0.2	5	32	1.1	334	0.2	19
21-44	120	1.5	935	0.4	9	60	0.7	577	0.3	6	202	2.4	1,873	0.2	7
45-64	28	2.5	256	0.4	13	8	0.7	87	0.4	289	82	7.4	814	0.3	20
65-74	15	4.6	171	0.5	35	5	1.5	58	0.1	10	87	26.9	954	0.4	41
75-84	15	8.1	180	0.6	49	2	1.1	20	0.1	7	50	27.0	574	0.4	33
85 and older	16	18.2	152	0.5	20	1	1.1	12	0.1	13	36	40.9	371	0.6	48
Male	2,264	8.7	25,574	0.7	66	628	2.4	6,946	0.5	280	2,228	8.6	24,923	0.5	44
Disabled	2,123	20.9	24,167	0.7	68	599	5.9	6,674	0.5	291	1,957	19.3	22,252	0.5	46
5 and younger	30	5.4	350	0.5	52	2	0.4	20	0.5	14	86	15.5	935	0.4	33
6-14	261	14.6	2,919	0.7	54	18	1.0	185	0.4	148	109	6.1	1,229	0.5	49
15-20	151	14.5	1,667	0.7	65	15	1.4	165	0.2	99	83	8.0	961	0.4	30
21-44	942	26.8	10,751	0.7	80	244	6.9	2,768	0.5	275	614	17.5	7,027	0.4	42
45-64	737	23.0	8,456	0.7	58	316	9.9	3,488	0.6	326	1,039	32.5	11,798	0.5	50
65-74	1	2.6	12	0.1	5	2	5.1	24	0.1	11	17	43.6	194	0.5	43
75-84	1	6.7	12	0.9	10	2	13.3	24	0.1	8	9	60.0	108	0.6	69
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	141	0.9	1,407	0.6	40	29	0.2	272	0.6	12	271	1.7	2,671	0.4	26
5 and younger	8	0.2	89	0.5	20	6	0.1	70	0.7	7	37	0.9	330	0.3	8
6-14	56	1.1	569	0.6	31	9	0.2	94	0.9	16	40	0.8	441	0.3	19
15-20	30	1.3	309	0.7	66	2	0.1	24	0.1	1	25	1.1	230	0.4	22
21-44	18	0.6	127	0.5	37	8	0.3	44	0.7	13	48	1.5	425	0.3	11
45-64	6	0.8	49	0.3	12	1	0.1	4	0.8	17	23	3.2	200	0.4	12
65-74	11	6.3	128	0.5	32	1	0.6	12	0.4	25	42	24.0	449	0.4	37
75-84	8	7.1	96	0.4	21	0	0.0	0	0.0	0	41	36.6	449	0.4	44
85 and older	4	10.0	40	0.7	113	2	5.0	24	0.1	9	15	37.5	147	0.6	71
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 Rhode Island, released by CMS in 02/2008. 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^{a, b, c}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIASTHMATIC					ANTIHYPERLIPIDEMIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	11,878	20.2 %	132,700	0.4	\$22	10,163	17.3 %	111,782	0.4	\$22	4,141	7.1 %	46,888	0.5	\$47
Female	7,727	23.6	86,570	0.4	19	6,650	20.3	74,075	0.4	23	2,630	8.0	30,036	0.5	48
Disabled	6,714	60.9	77,118	0.4	21	5,620	51.0	64,508	0.4	26	2,345	21.3	27,062	0.5	49
5 and younger	23	7.1	269	0.2	5	131	40.7	1,398	0.3	9	0	0.0	0	0.0	0
6-14	54	6.8	608	0.2	1	223	28.0	2,398	0.4	18	0	0.0	0	0.0	0
15-20	113	18.3	1,283	0.2	2	155	25.1	1,691	0.3	16	2	0.3	24	0.5	16
21-44	2,772	69.2	31,700	0.4	17	1,853	46.3	21,400	0.3	22	374	9.3	4,286	0.5	42
45-64	3,713	71.5	42,837	0.4	25	3,226	62.1	37,237	0.4	29	1,926	37.1	22,253	0.6	50
65-74	34	41.0	379	0.4	14	29	34.9	348	0.5	35	40	48.2	472	0.5	59
75-84	5	50.0	42	0.5	12	3	30.0	36	0.6	49	3	30.0	27	0.6	54
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	1,013	4.7	9,452	0.2	4	1,030	4.7	9,567	0.3	9	285	1.3	2,974	0.5	38
5 and younger	12	0.3	138	0.1	0	122	3.3	1,059	0.2	6	0	0.0	0	0.0	0
6-14	55	1.1	567	0.1	1	292	5.7	2,783	0.3	6	1	0.0	12	0.1	2
15-20	72	2.5	678	0.1	1	100	3.4	965	0.2	8	1	0.0	11	1.1	103
21-44	579	7.0	5,066	0.2	2	335	4.1	2,958	0.3	7	55	0.7	517	0.4	12
45-64	156	14.1	1,433	0.2	9	81	7.3	688	0.3	12	61	5.5	535	0.6	31
65-74	68	21.0	771	0.2	7	43	13.3	486	0.3	21	102	31.5	1,164	0.5	47
75-84	47	25.4	552	0.2	11	37	20.0	421	0.4	27	53	28.6	618	0.5	48
85 and older	24	27.3	247	0.3	17	20	22.7	207	0.5	23	12	13.6	117	0.5	44
Male	4,151	16.0	46,130	0.4	29	3,513	13.5	37,707	0.4	20	1,511	5.8	16,852	0.5	46
Disabled	3,733	36.8	42,176	0.4	31	2,641	26.0	29,489	0.4	24	1,331	13.1	15,059	0.5	47
5 and younger	24	4.3	264	0.1	1	235	42.3	2,533	0.3	10	1	0.2	12	0.3	9
6-14	117	6.5	1,344	0.1	2	511	28.5	5,577	0.3	17	2	0.1	24	0.3	28
15-20	116	11.1	1,286	0.1	1	218	20.9	2,404	0.3	11	4	0.4	48	0.3	7
21-44	1,565	44.5	17,866	0.4	21	587	16.7	6,711	0.3	23	305	8.7	3,512	0.5	36
45-64	1,882	58.8	21,101	0.5	43	1,060	33.1	11,934	0.5	32	995	31.1	11,205	0.6	51
65-74	22	56.4	231	0.5	44	17	43.6	178	0.5	29	17	43.6	174	0.4	44
75-84	7	46.7	84	0.6	40	13	86.7	152	0.5	32	7	46.7	84	0.8	74
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	418	2.6	3,954	0.2	4	872	5.5	8,218	0.3	8	180	1.1	1,793	0.5	32
5 and younger	15	0.4	162	0.1	1	255	6.4	2,293	0.2	6	0	0.0	0	0.0	0
6-14	71	1.3	753	0.1	1	393	7.4	3,824	0.3	6	1	0.0	12	0.4	8
15-20	79	3.5	768	0.1	1	88	3.8	815	0.2	8	1	0.0	12	0.6	20
21-44	123	3.9	976	0.3	7	63	2.0	552	0.2	4	35	1.1	302	0.5	13
45-64	47	6.6	386	0.3	5	12	1.7	72	0.2	5	45	6.3	383	0.5	13
65-74	42	24.0	463	0.2	11	27	15.4	283	0.4	25	59	33.7	638	0.5	44
75-84	31	27.7	333	0.3	8	22	19.6	264	0.4	32	35	31.3	399	0.6	43
85 and older	10	25.0	113	0.2	1	12	30.0	115	0.4	25	4	10.0	47	0.3	51
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 Rhode Island, released by CMS in 02/2008. 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^{a, b, c}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - ANTI-INFLAMMATORY					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		
All	4,157	7.1 %	46,530	0.5	\$42	8,668	14.8 %	97,203	0.3	\$14	58,731	351,569
Female	2,770	8.5	31,199	0.5	42	5,935	18.1	66,695	0.3	16	32,761	192,193
Disabled	2,479	22.5	28,382	0.5	44	4,856	44.0	56,079	0.3	17	11,026	116,966
	1	0.3	12	1.0	153	22	6.8	233	0.2	2	322	2,871
5 and younger	11	1.4	110	0.6	25	68	8.5	722	0.2	3	796	7,807
6-14	10	1.6	104	0.4	31	107	17.3	1,173	0.2	3	617	5,703
15-20	457	11.4	5,131	0.5	41	1,823	45.5	20,993	0.3	11	4,004	43,221
21-44	1,945	37.5	22,405	0.5	44	2,790	53.7	32,417	0.3	22	5,191	56,328
45-64	51	61.4	590	0.5	46	42	50.6	493	0.4	26	83	898
65-74	4	40.0	30	0.9	35	4	40.0	48	0.6	44	10	102
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	36
85 and older	291	1.3	2,817	0.5	31	1,079	5.0	10,616	0.2	7	21,735	75,227
Other Eligibles	2	0.1	4	0.8	17	41	1.1	371	0.2	1	3,718	10,180
5 and younger	8	0.2	48	0.8	28	90	1.8	940	0.1	1	5,124	20,615
6-14	10	0.3	112	0.6	21	97	3.3	909	0.2	2	2,920	9,786
15-20	54	0.7	488	0.5	14	518	6.3	4,848	0.2	2	8,270	23,892
21-44	55	5.0	406	0.5	29	139	12.6	1,366	0.3	8	1,106	4,750
45-64	104	32.1	1,125	0.4	36	124	38.3	1,374	0.3	21	324	3,215
65-74	42	22.7	454	0.6	38	51	27.6	594	0.3	26	185	1,903
75-84	16	18.2	180	0.6	41	19	21.6	214	0.4	34	88	886
85 and older												
Male	1,387	5.3	15,331	0.5	41	2,733	10.5	30,508	0.2	11	25,970	159,376
Disabled	1,229	12.1	13,770	0.5	43	2,290	22.6	26,182	0.3	12	10,154	103,288
	2	0.4	24	0.2	18	28	5.0	300	0.2	2	555	4,898
5 and younger	9	0.5	103	0.7	33	127	7.1	1,424	0.2	2	1,790	17,392
6-14	18	1.7	180	0.5	29	113	10.9	1,246	0.2	1	1,041	9,680
15-20	243	6.9	2,805	0.5	42	902	25.7	10,306	0.2	9	3,513	37,256
21-44	931	29.1	10,394	0.5	44	1,099	34.3	12,661	0.3	18	3,201	33,487
45-64	21	53.8	204	0.3	27	17	43.6	197	0.2	12	39	407
65-74	5	33.3	60	0.6	23	4	26.7	48	0.6	50	15	168
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	158	1.0	1,561	0.5	25	443	2.8	4,326	0.2	4	15,816	56,088
Other Eligibles	0	0.0	0	0.0	0	60	1.5	569	0.1	1	4,008	10,853
5 and younger	7	0.1	63	0.7	15	96	1.8	960	0.1	1	5,300	21,960
6-14	0	0.0	0	0.0	0	61	2.7	607	0.1	1	2,287	9,698
15-20	16	0.5	125	0.7	18	115	3.6	1,068	0.2	2	3,181	7,929
21-44	40	5.6	349	0.6	13	46	6.5	413	0.2	3	713	2,412
45-64	56	32.0	595	0.4	31	36	20.6	387	0.3	13	175	1,670
65-74	35	31.3	387	0.5	26	24	21.4	272	0.3	17	112	1,188
75-84	4	10.0	42	0.5	53	5	12.5	50	0.3	31	40	378
85 and older												
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 Rhode Island, released by CMS in 02/2008. 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^{a, b}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 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	\$414	5.3	441	5,140
Age				
0-64	422	5.1	378	4,460
65-74	334	6.0	14	152
75-84	422	7.2	24	258
85 and older	333	5.9	25	270
Unknown	0	0.0	0	0
Gender				
Female	443	5.7	218	2,542
Male	386	4.8	223	2,598
Unknown	0	0.0	0	0
Race				
White	412	5.3	341	4,004
African American	646	5.7	30	360
Other/unknown	319	4.9	70	776
Basis of Eligibility^c				
Aged	361	6.1	55	584
Disabled	421	5.2	386	4,556
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 Rhode Island, released by CMS in 02/2008. 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 330 beneficiaries who were in nursing facilities for part of their enrollment and their 3,480 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE ND.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 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	\$53	\$45	\$2	\$5	\$135	\$276	\$109	\$24	996	\$134,147	219	49.7 %	2,552
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	0.1	0.0	0.5	77	25	0	52	122	271	0	97	69	8,446	11	2.5	110
Endocrine/Metabolic Drugs	1.0	0.4	0.1	0.5	65	49	6	10	64	124	64	19	1,758	113,321	152	34.5	1,745
Cardiovascular Agents	1.7	0.6	0.1	1.1	58	39	2	18	34	69	32	16	3,444	117,860	176	39.9	2,020
Respiratory Agents	1.0	0.8	0.0	0.2	63	60	1	3	63	74	49	14	1,741	110,033	150	34.0	1,740
Gastrointestinal Agents	1.2	0.4	0.1	0.7	86	50	5	31	69	132	39	42	2,615	179,702	182	41.3	2,096
Genitourinary Agents	0.6	0.5	0.1	0.1	42	38	2	3	68	82	29	28	415	28,214	58	13.2	665
CNS Drugs	1.9	0.8	0.2	0.9	191	143	17	31	101	177	103	33	6,961	701,650	315	71.4	3,675
Stimulants/Anti-obesity/Anorexia	0.5	0.1	0.1	0.3	35	10	6	20	67	95	48	65	51	3,403	8	1.8	96
Miscellaneous Psychological/																	
Neurological Agents	0.9	0.9	0.0	0.0	161	161	0	0	186	186	0	0	167	31,001	17	3.9	193
Analgesics and Anesthetics	0.9	0.4	0.0	0.5	83	75	1	6	94	183	102	14	1,599	150,530	158	35.8	1,820
Neuromuscular Agents	1.5	0.7	0.2	0.6	152	106	27	20	102	159	136	32	3,980	407,441	226	51.2	2,677
Nutritional Products	0.6	0.0	0.0	0.6	12	0	2	10	20	3	80	18	290	5,930	46	10.4	503
Hematological Agents	1.1	0.2	0.1	0.9	50	40	2	8	45	260	28	9	915	41,463	75	17.0	832
Topical Products	0.7	0.2	0.1	0.4	30	18	3	9	45	76	52	25	2,033	91,882	257	58.3	3,020
Miscellaneous Products	0.2	0.1	0.0	0.1	7	4	0	3	38	52	0	27	32	1,214	14	3.2	162
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	11	0	0	0	37	0	0	0	79	2,956	23	5.2	262
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.	27,145	2,129,193	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. 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 330 beneficiaries who were in nursing facilities for part of their enrollment and their 3,480 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.medispanspan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In Rhode Island, 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 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	\$444,978	252	57.1 %	2,945	0.8	\$179	\$151
ANTICONVULSANT	386,482	270	61.2	3,215	1.1	113	120
ANTIDEPRESSANTS	220,853	292	66.2	3,412	0.9	71	65
ULCER DRUGS	130,521	163	37.0	1,876	0.8	85	70
ANALGESICS - Narcotic	102,303	117	26.5	1,326	0.7	113	77
ANTIVIRAL	75,656	20	4.5	240	0.6	522	315
DERMATOLOGICAL	67,326	467	105.9	5,502	0.3	48	12
ANTIASTHMATIC	63,192	121	27.4	1,410	0.6	69	45
ANTIHYPERLIPIDEMIC	54,781	79	17.9	937	0.8	72	58
MISC. ENDOCRINE	50,534	38	8.6	442	0.8	143	114
Total	1,596,626	1,819		21,305	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. 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 330 beneficiaries who were in nursing facilities for part of their enrollment and their 3,480 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 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 \$
All	15,048	\$1,596,626	252	57.1 %	2,945	0.8	\$151	270	61.2 %	3,215	1.1	\$120
Female	8,048	835,392	137	62.8	1,591	0.8	148	142	65.1	1,687	1.0	114
Disabled	6,903	738,880	116	63.0	1,358	0.8	143	131	71.2	1,561	1.0	119
64 or younger	6,731	726,392	114	64.0	1,334	0.8	145	130	73.0	1,549	1.0	119
65-74	48	2,346	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	124	10,142	2	100.0	24	0.4	52	1	50.0	12	0.3	21
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	1,145	96,512	21	61.8	233	0.8	175	11	32.4	126	0.8	58
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	161	12,450	1	33.3	10	1.0	268	1	33.3	12	1.6	230
75-84	373	43,350	9	75.0	103	0.8	216	3	25.0	36	0.9	74
85 and older	611	40,712	11	57.9	120	0.8	133	7	36.8	78	0.6	23
Male	7,000	761,234	115	51.6	1,354	0.9	155	128	57.4	1,528	1.1	127
Disabled	6,442	717,786	107	53.0	1,275	0.9	158	120	59.4	1,432	1.2	131
64 or younger	6,322	708,745	104	52.0	1,239	0.9	160	120	60.0	1,432	1.2	131
65-74	120	9,041	3	150.0	36	0.7	92	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	558	43,448	8	38.1	79	0.7	99	8	38.1	96	0.7	69
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	110	11,901	1	20.0	12	1.9	406	3	60.0	36	0.9	58
75-84	300	17,515	1	10.0	5	0.6	68	4	40.0	48	0.6	19
85 and older	148	14,032	6	100.0	62	0.5	43	1	16.7	12	0.8	301
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 Rhode Island, released by CMS in 02/2008. 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 330 beneficiaries who were in nursing facilities for part of their enrollment and their 3,480 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); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

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

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					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 \$
All	292	66.2 %	3,412	0.9	\$65	163	37.0 %	1,876	0.8	\$70	117	26.5 %	1,326	0.7	\$77
Female	164	75.2	1,917	0.9	59	72	33.0	826	0.8	60	70	32.1	795	0.8	67
Disabled	137	74.5	1,606	0.9	61	54	29.3	633	0.8	66	60	32.6	681	0.8	65
64 or younger	132	74.2	1,546	0.9	61	51	28.7	597	0.8	65	58	32.6	657	0.8	67
65-74	0	0.0	0	0.0	0	2	50.0	24	1.1	51	0	0.0	0	0.0	0
75-84	5	250.0	60	0.7	48	1	50.0	12	1.0	137	2	100.0	24	0.5	15
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	27	79.4	311	0.9	51	18	52.9	193	0.9	41	10	29.4	114	0.9	82
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	2	66.7	24	1.2	56	1	33.3	12	1.8	15	1	33.3	12	3.7	236
75-84	9	75.0	103	0.9	40	5	41.7	55	0.8	49	2	16.7	24	0.8	189
85 and older	16	84.2	184	0.9	56	12	63.2	126	0.9	41	7	36.8	78	0.5	25
Male	128	57.4	1,495	0.9	72	91	40.8	1,050	0.8	77	47	21.1	531	0.5	92
Disabled	115	56.9	1,349	0.9	76	76	37.6	881	0.8	76	41	20.3	477	0.5	101
64 or younger	113	56.5	1,325	0.9	76	73	36.5	845	0.8	78	41	20.5	477	0.5	101
65-74	2	100.0	24	1.0	75	3	150.0	36	0.9	37	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Other Eligibles	13	61.9	146	0.8	42	15	71.4	169	0.7	80	6	28.6	54	0.5	12
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	2	40.0	24	0.9	115	0	0.0	0	0.0	0
75-84	8	80.0	96	0.8	44	10	100.0	109	0.6	65	5	50.0	42	0.6	15
85 and older	5	83.3	50	0.7	39	3	50.0	36	0.9	102	1	16.7	12	0.1	1
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 Rhode Island, released by CMS in 02/2008. 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 330 beneficiaries who were in nursing facilities for part of their enrollment and their 3,480 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	ANTIVIRAL					DERMATOLOGICAL					ANTIASTHMATIC				
	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	20	4.5 %	240	0.6	\$315	467	105.9 %	5,502	0.3	\$12	121	27.4 %	1,410	0.6	\$45
Female	13	6.0	156	0.7	414	228	104.6	2,665	0.2	11	78	35.8	910	0.7	49
Disabled	13	7.1	156	0.7	414	192	104.3	2,269	0.2	12	61	33.2	717	0.7	51
64 or younger	13	7.3	156	0.7	414	183	102.8	2,161	0.2	12	59	33.1	693	0.7	50
65-74	0	0.0	0	0.0	0	3	75.0	36	0.3	7	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	6	300.0	72	0.2	10	2	100.0	24	0.8	74
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	0	0.0	0	0.0	0	36	105.9	396	0.2	9	17	50.0	193	0.7	40
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	33.3	12	1.3	78
75-84	0	0.0	0	0.0	0	9	75.0	108	0.1	6	9	75.0	103	0.8	58
85 and older	0	0.0	0	0.0	0	27	142.1	288	0.3	10	7	36.8	78	0.6	10
Male	7	3.1	84	0.5	131	239	107.2	2,837	0.3	13	43	19.3	500	0.6	38
Disabled	6	3.0	72	0.5	152	215	106.4	2,563	0.3	14	36	17.8	416	0.6	40
64 or younger	5	2.5	60	0.6	182	212	106.0	2,527	0.3	14	35	17.5	404	0.6	39
65-74	1	50.0	12	0.1	4	3	150.0	36	0.4	19	1	50.0	12	0.9	77
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	1	4.8	12	0.1	4	24	114.3	274	0.2	11	7	33.3	84	0.5	29
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	3	60.0	36	0.4	15	1	20.0	12	0.2	9
75-84	0	0.0	0	0.0	0	13	130.0	142	0.2	10	3	30.0	36	0.7	46
85 and older	1	16.7	12	0.1	4	8	133.3	96	0.2	12	3	50.0	36	0.4	19
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 Rhode Island, released by CMS in 02/2008. 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 330 beneficiaries who were in nursing facilities for part of their enrollment and their 3,480 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	ANTIHYPERTENSIVE					MISC. ENDOCRINE					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
All	79	17.9 %	937	0.8	\$59	38	8.6 %	442	0.8	\$114	441	5,140
Female	40	18.3	469	0.8	56	26	11.9	301	0.8	88	218	2,542
Disabled	37	20.1	438	0.8	58	20	10.9	237	0.9	98	184	2,168
64 or younger	35	19.7	414	0.8	56	20	11.2	237	0.9	98	178	2,096
65-74	1	25.0	12	1.0	73	0	0.0	0	0.0	0	4	48
75-84	1	50.0	12	1.1	104	0	0.0	0	0.0	0	2	24
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	3	8.8	31	0.7	32	6	17.6	64	0.7	52	34	374
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	1	33.3	12	0.5	34	2	66.7	22	0.8	59	3	34
75-84	1	8.3	7	1.0	64	0	0.0	0	0.0	0	12	132
85 and older	1	5.3	12	0.7	12	4	21.1	42	0.7	47	19	208
Male	39	17.5	468	0.8	61	12	5.4	141	0.7	171	223	2,598
Disabled	34	16.8	408	0.8	64	10	5.0	120	0.8	195	202	2,388
64 or younger	34	17.0	408	0.8	64	9	4.5	108	0.8	208	200	2,364
65-74	0	0.0	0	0.0	0	1	50.0	12	1.0	76	2	24
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	5	23.8	60	1.0	41	2	9.5	21	0.5	33	21	210
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	1	20.0	12	1.0	97	1	20.0	9	0.7	44	5	46
75-84	4	40.0	48	1.0	27	0	0.0	0	0.0	0	10	102
85 and older	0	0.0	0	0.0	0	1	16.7	12	0.3	25	6	62
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 Rhode Island, released by CMS in 02/2008. 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 330 beneficiaries who were in nursing facilities for part of their enrollment and their 3,480 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^{a,b}
RHODE ISLAND, 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
All	11,628	19.8 %	1.3	77,741	\$20	\$1,158,214	\$15	2.2 %	58,731
Age									
5 and younger	584	6.8	0.2	1,719	3	23,247	14	5.0	8,603
6-14	980	7.5	0.2	3,238	5	66,517	21	2.7	13,010
15-20	530	7.7	0.3	2,000	14	97,360	49	5.6	6,865
21-44	4,103	21.6	1.4	26,059	18	347,555	13	1.9	18,968
45-64	4,949	48.5	4.1	42,177	58	595,520	14	2.1	10,211
65-74	281	45.2	2.2	1,361	25	15,811	12	1.8	621
75-84	138	42.9	2.4	764	22	6,979	9	1.4	322
85 and older	63	48.1	3.2	423	40	5,225	12	2.3	131
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	397	43.4	2.1	1,923	22	20,161	10	1.6	915
Disabled	9,264	43.7	3.4	71,463	51	1,088,567	15	2.2	21,180
Adults	922	6.6	0.1	2,007	2	22,172	11	3.6	13,999
Children	957	4.3	0.1	1,987	1	22,916	12	2.4	22,348
Unknown	88	30.4	1.2	361	15	4,398	12	2.0	289
Gender									
Female	7,606	23.2	1.6	53,660	25	823,598	15	2.6	32,761
Male	4,022	15.5	0.9	24,081	13	334,616	14	1.6	25,970
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	6,446	27.4	2.2	52,387	35	826,773	16	2.4	23,540
African American	1,049	18.6	1.0	5,548	11	64,238	12	1.3	5,651
Other/unknown	4,133	14.0	0.7	19,806	9	267,203	13	1.9	29,540
Use of Nursing Facilities^d									
Entire year	300	68.0	8.9	3,908	90	39,890	10	1.9	441
Part year	257	77.9	8.0	2,639	99	32,570	12	1.9	330
None	11,071	19.1	1.2	71,194	19	1,085,754	15	2.2	57,960
Maintenance Assistance Status									
Cash	8,392	34.2	2.6	64,765	40	986,063	15	2.2	24,514
Medically needy	45	63.4	3.3	234	44	3,155	13	1.3	71
Poverty related	361	4.6	0.1	858	1	7,800	9	2.6	7,852
Other/unknown	2,830	10.8	0.5	11,884	6	161,196	14	2.1	26,294

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. 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^{a,b}
RHODE ISLAND, 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
All	0.2	\$3	\$15	\$0	\$2	351,569
Age						
5 and younger	0.1	1	14	0	0	28,802
6-14	0.0	1	21	0	0	67,774
15-20	0.1	3	49	0	1	34,867
21-44	0.2	3	13	0	2	112,298
45-64	0.4	6	14	0	3	96,977
65-74	0.2	3	12	0	0	6,190
75-84	0.2	2	9	0	1	3,361
85 and older	0.3	4	12	0	2	1,300
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.2	2	10	0	1	9,219
Disabled	0.3	5	15	0	2	220,254
Adults	0.1	1	11	0	0	38,223
Children	0.0	0	12	0	0	81,789
Unknown	0.2	2	12	0	1	2,084
Gender						
Female	0.3	4	15	0	2	192,193
Male	0.2	2	14	0	1	159,376
Unknown	0.0	0	0	0	0	0
Race						
White	0.3	5	16	0	2	169,156
African American	0.1	2	12	0	1	37,994
Other/unknown	0.1	2	13	0	1	144,419
Use of Nursing Facilities^d						
Entire year	0.8	8	10	0	3	5,140
Part year	0.8	9	12	0	4	3,480
None	0.2	3	15	0	1	342,949
Maintenance Assistance Status						
Cash	0.3	5	15	0	2	200,035
Medically needy	0.4	5	13	0	2	656
Poverty related	0.0	0	9	0	0	22,163
Other/unknown	0.1	1	14	0	1	128,715

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. 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^{a,b,c}
RHODE ISLAND, 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	16,835	\$69	\$1,158,214	100.0 %	77,741	\$15	100.0 %
Anorexia or weight loss/gain	13	221	2,874	0.2	38	76	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	33	12	404	0.0	48	8	0.1
Cough and cold medications	3,278	57	186,935	16.1	7,218	26	9.3
Vitamins and minerals	888	103	91,215	7.9	3,802	24	4.9
Non-prescription drugs	6,619	21	139,442	12.0	25,896	5	33.3
Barbiturates	229	73	16,790	1.4	2,350	7	3.0
Benzodiazepines	4,967	109	542,524	46.8	34,848	16	44.8
Other Part D Excl Rx Drugs	808	220	178,030	15.4	3,541	50	4.6

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. 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^{a, b}
NONDUAL BENEFICIARIES, RHODE ISLAND, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	177,237	915	24,042	53,511	98,479	290	1,793,050	9,239	266,266	521,410	994,005	2,130
Age												
5 and younger	36,818	0	1,390	2	35,426	0	357,267	0	15,235	17	342,015	0
6-14	48,056	0	3,896	4	44,156	0	509,779	0	45,162	33	464,584	0
15-20	23,968	0	2,403	2,755	18,802	8	239,412	0	27,258	25,445	186,670	39
21-44	51,990	0	7,741	44,052	92	105	517,619	0	85,300	430,954	700	665
45-64	15,319	0	8,462	6,679	3	175	157,951	0	91,700	64,801	36	1,414
65-74	633	492	122	18	0	1	6,357	4,890	1,305	159	0	3
75-84	322	296	25	1	0	0	3,365	3,094	270	1	0	0
85 and older	131	127	3	0	0	1	1,300	1,255	36	0	0	9
Unknown	0	0	0	0	0	0		0	0	0	0	0
Gender												
Female	101,598	591	12,164	40,005	48,548	290	1,036,129	5,994	135,935	399,985	492,085	2,130
Male	75,639	324	11,878	13,506	49,931	0	756,921	3,245	130,331	121,425	501,920	0
Unknown	0	0	0	0	0	0		0	0	0	0	0
Race												
White	64,820	202	12,437	21,794	30,161	226	673,897	2,105	138,853	217,267	314,023	1,649
African American	16,295	67	2,734	4,723	8,759	12	171,653	709	30,604	47,533	92,714	93
Other/unknown	96,122	646	8,871	26,994	59,559	52	947,500	6,425	96,809	256,610	587,268	388
Use of Nursing Facilities^c												
Entire year	441	55	386	0	0	0	5,140	584	4,556	0	0	0
Part year	330	32	298	0	0	0	3,500	291	3,209	0	0	0
None	176,466	828	23,358	53,511	98,479	290	1,784,410	8,364	258,501	521,410	994,005	2,130
Maintenance Assistance Status												
Cash	61,887	146	20,665	12,338	28,738	0	660,556	1,509	232,678	124,740	301,629	0
Medically needy	78	1	67	10	0	0	768	5	653	110	0	0
Poverty related	31,773	1	1	1,364	30,117	290	316,012	12	12	8,205	305,653	2,130
Other/unknown	83,499	767	3,309	39,799	39,624	0	815,714	7,713	32,923	388,355	386,723	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	27,352	910	19,223	2,136	4,800	283	280,678	9,186	210,920	15,013	43,490	2,069
FFS part year, with Rx claims	5,351	4	1,224	1,984	2,137	2	55,539	42	14,218	19,155	22,104	20
FFS part year, no Rx claims	26,028	1	733	9,879	15,411	4	215,863	11	7,854	78,776	129,193	29
MC all year, with Rx claims	1,744	0	126	945	673	0	18,389	0	1,432	9,802	7,155	0
MC all year, no Rx claims	116,762	0	2,736	38,567	75,458	1	1,222,581	0	31,842	398,664	792,063	12

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. 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^a
 NONDUAL BENEFICIARIES, RHODE ISLAND, 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
All	177,237	1,793,050	58,731	351,569	0	1,441,481
Fee-for-service (FFS) all year	27,352	280,678	27,352	280,678	0	0
FFS part year, with Rx claims	5,351	55,539	5,351	25,351	0	30,188
FFS part year, with no Rx claims	26,028	215,863	26,028	45,540	0	170,323
Managed care (MC) all year, with Rx claims	1,744	18,389	0	0	0	18,389
MC all year, with no Rx claims	116,762	1,222,581	0	0	0	1,222,581

Source: Data for this table are from the MAX 2004 file for Rhode Island, released by CMS in 02/2008. 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.