

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2004 TEXAS

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, TEXAS, 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	3,159,111	4,585	292,063	462,711	2,398,996	756	23,005,662	43,813	2,960,024	2,456,066	17,540,239	5,520
Age												
5 and younger	1,176,204	0	18,134	8	1,158,062	0	8,552,656	0	179,275	27	8,373,354	0
6-14	988,824	0	45,927	360	942,537	0	7,544,648	0	490,139	1,924	7,052,585	0
15-20	405,680	0	29,391	78,003	298,274	12	2,824,577	0	309,486	401,348	2,113,682	61
21-44	442,967	3	83,707	358,849	103	305	2,745,585	32	852,259	1,890,840	539	1,915
45-64	140,686	31	114,779	25,429	11	436	1,293,425	162	1,128,176	161,509	50	3,528
65-74	2,194	2,017	118	53	3	3	20,718	19,681	643	364	14	16
75-84	1,460	1,452	5	3	0	0	13,815	13,763	36	16	0	0
85 and older	1,090	1,082	2	6	0	0	10,223	10,175	10	38	0	0
Unknown	6	0	0	0	6	0	15	0	0	0	15	0
Gender												
Female	1,752,936	3,009	146,723	421,068	1,181,380	756	12,418,748	29,041	1,505,132	2,225,677	8,653,378	5,520
Male	1,406,130	1,570	145,340	41,643	1,217,577	0	10,586,632	14,739	1,454,892	230,389	8,886,612	0
Unknown	45	6	0	0	39	0	282	33	0	0	249	0
Race												
White	747,563	1,932	94,430	140,104	510,744	353	5,368,123	18,430	954,519	734,531	3,658,112	2,531
African American	576,300	742	73,242	96,666	405,528	122	4,023,586	7,197	736,598	500,386	2,778,527	878
Other/unknown	1,835,248	1,911	124,391	225,941	1,482,724	281	13,613,953	18,186	1,268,907	1,221,149	11,103,600	2,111
Use of Nursing Facilities^c												
Entire year	4,913	1,136	3,775	1	1	0	50,653	11,117	39,530	3	3	0
Part year	3,936	494	3,390	42	10	0	38,039	4,603	33,051	303	82	0
None	3,150,262	2,955	284,898	462,668	2,398,985	756	22,916,970	28,093	2,887,443	2,455,760	17,540,154	5,520
Maintenance Assistance Status												
Cash	594,832	2,642	285,505	100,643	206,042	0	5,054,871	25,622	2,893,223	507,423	1,628,603	0
Medically needy	82,492	0	0	81,980	512	0	525,888	0	0	523,974	1,914	0
Poverty-related	2,117,661	19	21	227,916	1,888,949	756	14,724,014	178	196	1,044,824	13,673,296	5,520
Other/unknown	364,126	1,924	6,537	52,172	303,493	0	2,700,889	18,013	66,605	379,845	2,236,426	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	2,026,852	3,988	240,721	314,512	1,466,880	751	17,392,543	38,241	2,496,701	1,933,508	12,918,609	5,484
FFS part year, with Rx claims	541,100	148	16,955	89,331	434,661	5	1,601,626	526	78,314	237,817	1,284,933	36
FFS part year, no Rx claims	249,530	14	2,258	21,159	226,099	0	707,883	63	9,716	50,202	647,902	0
MC all year, with FFS Rx claims	341,629	435	32,129	37,709	271,356	0	3,303,610	4,983	375,293	234,539	2,688,795	0

Source: Data for this table are from the MAX 2004 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

- 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, TEXAS, 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	73.1 %	6.7	\$398	\$59	\$2,463	16.1 %	3,159,111
Age							
5 and younger	77.2	6.1	202	33	1,942	10.4	1,176,204
6-14	67.6	5.0	307	61	1,377	22.3	988,824
15-20	67.8	5.2	335	65	2,168	15.4	405,680
21-44	76.5	7.9	621	79	4,120	15.1	442,967
45-64	80.7	23.1	2,086	90	9,693	21.5	140,686
65-74	80.4	24.9	1,881	75	11,648	16.1	2,194
75-84	84.0	37.4	2,391	64	14,500	16.5	1,460
85 and older	88.9	46.6	2,619	56	18,865	13.9	1,090
Unknown	16.7	0.2	2	9	1,100	0.1	6
Basis of Eligibility^e							
Aged	83.5	34.3	2,234	65	14,280	15.6	4,585
Disabled	80.8	20.1	2,045	102	11,305	18.1	292,063
Adults	76.9	5.7	282	50	2,409	11.7	462,711
Children	71.3	5.2	216	42	1,370	15.7	2,398,996
Unknown	82.8	10.9	1,015	93	16,876	6.0	756
Gender							
Female	74.7	6.9	389	57	2,455	15.8	1,752,936
Male	71.0	6.5	409	63	2,474	16.5	1,406,130
Unknown	44.4	6.1	384	63	2,911	13.2	45
Race							
White	73.4	8.0	581	73	3,247	17.9	747,563
African American	67.6	6.2	393	63	2,379	16.5	576,300
Other/unknown	74.6	6.3	325	51	2,170	15.0	1,835,248
Use of Nursing Facilities^f							
Entire year	98.4	85.4	5,844	68	41,847	14.0	4,913
Part year	98.2	60.6	4,438	73	42,059	10.6	3,936
None	73.0	6.5	384	59	2,352	16.3	3,150,262
Maintenance Assistance Status							
Cash	76.3	12.7	1,117	88	6,067	18.4	594,832
Medically needy	70.6	6.5	411	63	2,694	15.2	82,492
Poverty related	71.8	5.0	199	40	1,298	15.3	2,117,661
Other/unknown	75.3	6.8	377	56	3,301	11.4	364,126

Source: Data for this table are from the MAX 2004 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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, TEXAS, 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	0.9	\$55	16.1 %	26.9 %	51.7 %	10.1 %	7.6 %	2.4 %	1.3 %	\$338	3,159,111	23,005,662
Age												
5 and younger	0.8	28	10.4	22.8	56.4	10.3	6.9	2.3	1.3	267	1,176,204	8,552,656
6-14	0.7	40	22.3	32.4	52.4	7.3	5.5	1.6	0.8	180	988,824	7,544,648
15-20	0.7	48	15.4	32.2	50.2	8.1	6.4	2.1	0.9	311	405,680	2,824,577
21-44	1.3	100	15.1	23.5	47.3	14.0	10.1	3.3	1.9	665	442,967	2,745,585
45-64	2.5	227	21.5	19.3	26.9	21.1	22.4	6.4	4.0	1,054	140,686	1,293,425
65-74	2.6	199	16.1	19.6	25.8	19.2	21.4	9.6	4.4	1,234	2,194	20,718
75-84	4.0	253	16.5	16.0	19.6	14.6	22.7	19.9	7.1	1,532	1,460	13,815
85 and older	5.0	279	13.9	11.1	11.5	11.8	29.1	27.1	9.4	2,012	1,090	10,223
Unknown	0.1	1	0.1	83.3	16.7	0.0	0.0	0.0	0.0	440	6	15
Basis of Eligibility^e												
Aged	3.6	234	15.6	16.5	20.4	15.9	23.7	17.1	6.5	1,494	4,585	43,813
Disabled	2.0	202	18.1	19.2	36.3	17.7	18.6	5.3	2.9	1,115	292,063	2,960,024
Adults	1.1	53	11.7	23.1	49.8	13.3	9.0	3.1	1.7	454	462,711	2,456,066
Children	0.7	30	15.7	28.7	54.0	8.5	5.9	1.9	1.0	187	2,398,996	17,540,239
Unknown	1.5	139	6.0	17.2	38.0	32.9	11.9	0.0	0.0	2,311	756	5,520
Gender												
Female	1.0	55	15.8	25.3	52.2	10.6	7.9	2.6	1.4	347	1,752,936	12,418,748
Male	0.9	54	16.5	29.0	51.1	9.5	7.1	2.1	1.2	329	1,406,130	10,586,632
Unknown	1.0	61	13.2	55.6	28.9	2.2	6.7	6.7	0.0	465	45	282
Race												
White	1.1	81	17.9	26.6	49.1	11.0	9.0	2.7	1.6	452	747,563	5,368,123
African American	0.9	56	16.5	32.4	46.8	8.7	7.7	2.8	1.6	341	576,300	4,023,586
Other/unknown	0.9	44	15.0	25.4	54.3	10.1	7.0	2.1	1.1	293	1,835,248	13,613,953
Use of Nursing Facilities^f												
Entire year	8.3	567	14.0	1.6	2.5	3.6	22.9	42.8	26.6	4,059	4,913	50,653
Part year	6.3	459	10.6	1.8	7.0	8.7	35.4	31.5	15.6	4,352	3,936	38,039
None	0.9	53	16.3	27.0	51.8	10.1	7.5	2.3	1.2	323	3,150,262	22,916,970
Maintenance Assistance Status												
Cash	1.5	131	18.4	23.7	43.5	14.0	12.9	3.7	2.2	714	594,832	5,054,871
Medically needy	1.0	64	15.2	29.4	45.5	16.2	8.1	0.5	0.3	423	82,492	525,888
Poverty related	0.7	29	15.3	28.2	53.3	8.9	6.3	2.2	1.2	187	2,117,661	14,724,014
Other/unknown	0.9	51	11.4	24.7	57.3	9.1	6.2	1.9	0.9	445	364,126	2,700,889

Source: Data for this table are from the MAX 2004 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

- 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, TEXAS, 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	0.9	\$55	\$59	0.3	\$41	\$119	0.1	\$5	\$50	0.5	\$9	\$18
Age												
5 and younger	0.8	28	33	0.2	17	70	0.1	4	32	0.5	7	14
6-14	0.7	40	61	0.3	32	110	0.1	3	45	0.3	5	18
15-20	0.7	48	65	0.3	38	122	0.0	3	60	0.4	7	19
21-44	1.3	100	79	0.5	78	167	0.1	7	83	0.7	15	21
45-64	2.5	227	90	1.1	178	166	0.1	17	113	1.3	33	25
65-74	2.6	199	75	1.2	157	131	0.2	11	76	1.3	31	24
75-84	4.0	253	64	1.7	196	113	0.3	15	59	2.0	42	21
85 and older	5.0	279	56	2.1	212	103	0.3	17	53	2.6	50	19
Unknown	0.1	1	9	0.0	0	0	0.0	0	0	0.1	1	9
Basis of Eligibility^d												
Aged	3.6	234	65	1.6	181	116	0.2	14	61	1.8	39	22
Disabled	2.0	202	102	0.9	164	186	0.1	14	105	1.0	24	25
Adults	1.1	53	50	0.4	38	106	0.1	4	54	0.6	11	18
Children	0.7	30	42	0.3	21	83	0.1	3	35	0.4	6	16
Unknown	1.5	139	93	0.6	114	199	0.1	6	69	0.8	19	23
Gender												
Female	1.0	55	57	0.4	41	115	0.1	5	51	0.5	10	18
Male	0.9	54	63	0.3	42	125	0.1	4	49	0.4	8	18
Unknown	1.0	61	63	0.4	49	110	0.0	2	33	0.5	11	23
Race												
White	1.1	81	73	0.5	63	135	0.1	6	69	0.6	12	21
African American	0.9	56	63	0.3	44	127	0.1	4	58	0.5	8	18
Other/unknown	0.9	44	51	0.3	32	107	0.1	4	42	0.5	8	17
Use of Nursing Facilities^e												
Entire year	8.3	567	68	3.3	434	130	0.5	39	73	4.4	94	21
Part year	6.3	459	73	2.4	351	146	0.4	35	89	3.5	73	21
None	0.9	53	59	0.3	40	119	0.1	4	50	0.5	9	18
Maintenance Assistance Status												
Cash	1.5	131	88	0.6	105	168	0.1	9	85	0.8	17	23
Medically needy	1.0	64	63	0.4	48	130	0.1	4	78	0.6	12	20
Poverty related	0.7	29	40	0.2	20	80	0.1	3	35	0.4	6	16
Other/unknown	0.9	51	56	0.4	39	109	0.1	4	45	0.5	8	17

Source: Data for this table are from the MAX 2004 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

- 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 Texas, 0.8 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).
- 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, TEXAS, 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	\$14	\$10	\$2	\$3	\$49	\$84	\$64	\$20	3,963,636	\$192,769,664	1,595,518	50.5 %	13,504,239
Biologicals	0.6	0.1	0.0	0.5	####	1,010	26	968	3256	19,553	914	1,810	298	970,277	46	0.0	484
Antineoplastic Agents	0.4	0.1	0.0	0.3	109	86	5	19	277	820	182	71	29,645	8,223,407	7,626	0.2	75,261
Endocrine/Metabolic Drugs	0.3	0.1	0.1	0.1	21	15	2	4	70	152	36	26	1,154,182	81,290,508	442,996	14.0	3,817,577
Cardiovascular Agents	0.7	0.3	0.0	0.4	42	33	1	8	59	113	61	20	1,109,077	64,949,078	160,098	5.1	1,550,068
Respiratory Agents	0.4	0.2	0.1	0.2	17	12	2	3	40	82	29	14	5,316,882	215,217,482	1,441,787	45.6	12,341,678
Gastrointestinal Agents	0.3	0.2	0.0	0.1	24	21	2	2	79	126	72	17	757,806	59,897,387	271,762	8.6	2,459,002
Genitourinary Agents	0.2	0.1	0.1	0.1	12	8	2	2	51	76	42	27	229,409	11,747,273	125,897	4.0	943,102
CNS Drugs	0.6	0.3	0.0	0.3	78	68	3	7	121	207	117	24	1,807,104	219,489,221	305,350	9.7	2,820,854
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.1	60	56	1	3	100	109	90	40	567,331	56,813,209	101,121	3.2	953,687
Miscellaneous Psychological/																	
Neurological Agents	0.4	0.3	0.0	0.1	133	127	2	4	327	377	127	75	22,298	7,296,589	5,450	0.2	54,774
Analgesics and Anesthetics	0.3	0.0	0.0	0.3	11	7	1	3	36	177	100	14	2,416,753	86,530,340	945,747	29.9	8,169,365
Neuromuscular Agents	0.6	0.2	0.1	0.3	61	44	10	7	104	182	156	25	861,533	89,868,817	152,421	4.8	1,474,814
Nutritional Products	0.2	0.1	0.0	0.2	5	2	1	2	20	34	27	13	484,562	9,621,090	260,021	8.2	1,959,001
Hematological Agents	0.3	0.2	0.0	0.1	92	86	2	5	291	557	76	33	172,871	50,360,855	67,575	2.1	548,690
Topical Products	0.2	0.1	0.0	0.1	10	7	1	3	42	71	49	19	2,192,973	91,811,641	1,007,529	31.9	8,784,575
Miscellaneous Products	0.4	0.2	0.1	0.2	165	118	29	17	367	689	471	79	23,076	8,465,741	5,056	0.2	51,442
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	3	0	0	0	23	0	0	0	38,138	861,602	29,689	0.9	276,703
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.	21,147,574	1,256,184,181	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Texas, 0.8 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2004.

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

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, TEXAS, 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	\$139,876,506	104,533	3.3 %	1,086,237	0.5	\$275	\$129
ANTIASTHMATIC	101,574,603	712,109	22.5	6,554,153	0.2	66	15
ANTICONVULSANT	78,907,616	101,483	3.2	1,046,919	0.5	139	75
DERMATOLOGICAL	61,182,495	1,054,172	33.4	9,773,971	0.2	41	6
ANTIDEPRESSANTS	57,575,063	195,016	6.2	1,858,457	0.4	82	31
COUGH/COLD/ALLERGY	55,326,798	1,619,498	51.3	14,944,922	0.2	21	4
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	54,955,026	119,014	3.8	1,153,487	0.5	101	48
ANALGESICS - ANTI-INFLAMMATORY	42,857,545	668,526	21.2	6,154,886	0.2	35	7
CEPHALOSPORINS	41,953,218	613,133	19.4	5,727,231	0.1	52	7
ULCER DRUGS	39,319,577	201,227	6.4	1,883,823	0.3	82	21
Total	673,528,447	5,388,711		50,184,086	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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^{a, b, c}
 NONDUAL BENEFICIARIES, TEXAS, 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
All	10,477,567	\$673,528,447	104,533	3.3 %	1,086,237	0.5	\$129	712,109	22.5 %	6,554,153	0.2	\$16
Female	5,460,017	347,662,662	50,619	2.9	518,714	0.4	121	340,180	19.4	3,121,743	0.2	15
Disabled	1,343,196	164,008,454	31,774	21.7	348,249	0.5	139	45,784	31.2	505,322	0.3	24
	57,503	3,568,826	155	2.1	1,594	0.4	79	4,890	64.8	53,375	0.3	25
5 and younger	143,839	13,800,297	2,551	16.3	28,108	0.5	106	6,131	39.3	69,464	0.3	24
6-14	95,583	11,079,949	2,479	21.5	27,285	0.5	119	2,956	25.6	33,641	0.3	21
15-20	377,781	53,230,757	12,695	29.1	137,539	0.4	143	9,613	22.0	105,617	0.3	20
21-44	667,963	82,271,582	13,884	20.3	153,663	0.5	145	22,163	32.4	243,012	0.3	26
45-64	522	56,485	10	15.2	60	1.2	296	31	47.0	213	0.4	43
65-74	5	558	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	4,116,821	183,654,208	18,845	1.2	170,465	0.4	85	294,396	18.3	2,616,421	0.2	13
Other Eligibles	1,899,941	59,567,822	628	0.1	6,357	0.4	67	148,358	26.2	1,359,517	0.2	12
5 and younger	1,166,575	59,840,472	6,216	1.3	63,289	0.5	95	90,660	19.4	827,300	0.2	15
6-14	442,579	24,814,028	4,786	2.1	45,089	0.5	88	25,684	11.5	217,893	0.2	14
15-20	513,487	31,062,438	5,868	1.8	43,042	0.3	68	26,482	8.1	183,734	0.3	14
21-44	59,202	5,393,678	661	3.7	5,506	0.3	74	2,293	13.0	18,413	0.3	21
45-64	11,375	1,082,763	197	15.5	2,108	0.6	150	326	25.7	3,434	0.3	25
65-74	11,606	963,283	234	25.1	2,465	0.6	105	299	32.0	3,017	0.4	23
75-84	12,056	929,724	255	30.9	2,609	0.6	88	294	35.6	3,113	0.3	17
85 and older	5,017,449	325,857,260	53,909	3.8	567,495	0.5	136	371,923	26.5	3,432,364	0.2	16
Male	1,125,845	142,144,117	34,535	23.8	378,778	0.5	151	38,478	26.5	424,374	0.3	24
Disabled	88,815	5,954,497	525	5.0	5,700	0.4	75	7,734	73.0	85,038	0.3	26
5 and younger	309,280	32,508,573	8,122	26.8	90,167	0.5	112	12,390	40.9	139,838	0.3	23
6-14	142,615	18,342,058	4,606	25.8	51,177	0.5	138	4,256	23.8	48,462	0.3	23
15-20	282,072	48,170,091	13,041	32.5	142,209	0.5	178	4,319	10.8	47,300	0.3	21
21-44	302,717	37,133,989	8,234	17.7	89,491	0.5	162	9,762	21.0	103,642	0.3	27
45-64	323	33,396	7	13.5	34	0.6	94	14	26.9	76	0.5	21
65-74	12	877	0	0.0	0	0.0	0	1	50.0	12	0.2	2
75-84	11	636	0	0.0	0	0.0	0	2	100.0	6	0.3	4
85 and older	3,891,604	183,713,143	19,374	1.5	188,717	0.5	104	333,445	26.4	3,007,990	0.2	15
Other Eligibles	2,149,076	72,098,187	1,394	0.2	13,829	0.4	69	195,180	33.0	1,772,718	0.2	13
5 and younger	1,341,742	82,410,273	11,994	2.5	119,061	0.5	107	115,219	24.2	1,034,869	0.3	17
6-14	324,518	22,775,131	4,755	3.1	45,655	0.5	112	20,170	13.2	178,003	0.3	16
15-20	45,101	3,684,633	717	2.3	5,456	0.3	80	1,802	5.7	12,989	0.3	18
21-44	17,172	1,471,201	181	2.2	1,350	0.3	70	657	8.0	5,122	0.3	22
45-64	6,377	640,486	131	16.3	1,425	0.6	129	201	24.9	2,186	0.3	22
65-74	4,939	432,604	128	24.8	1,224	0.6	101	124	24.0	1,186	0.3	17
75-84	2,679	200,628	74	28.4	717	0.6	74	92	35.2	917	0.4	19
85 and older	101	8,525	5	9.8	28	0.6	77	6	11.8	46	0.3	43
Unknown												

Source: Data for this table are from the MAX 2004 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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, TEXAS, 2004

Beneficiary Characteristics	ANTICONVULSANT					DERMATOLOGICAL					ANTIDEPRESSANTS				
	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	101,483	3.2 %	1,046,919	0.5	\$75	1,054,172	33.4 %	9,773,971	0.2	\$6	195,016	6.2 %	1,858,457	0.4	\$31
Female	58,514	3.3	594,849	0.5	72	571,440	32.6	5,255,743	0.2	7	134,635	7.7	1,249,050	0.4	32
Disabled	37,773	25.7	418,306	0.5	80	48,814	33.3	549,171	0.2	8	58,184	39.7	636,878	0.4	36
921	921	12.2	9,990	0.6	80	4,532	60.1	50,116	0.2	6	88	1.2	909	0.4	17
5 and younger	3,296	21.1	37,189	0.7	106	7,710	49.4	88,221	0.1	7	2,315	14.8	25,513	0.4	27
6-14	2,959	25.6	33,226	0.7	113	4,569	39.6	52,558	0.1	8	3,243	28.1	35,671	0.4	31
15-20	13,960	32.0	153,958	0.6	88	12,328	28.3	138,545	0.2	9	19,803	45.4	214,550	0.4	36
21-44	16,627	24.3	183,888	0.5	62	19,655	28.8	219,608	0.2	9	32,714	47.9	360,092	0.4	37
45-64	10	15.2	55	0.5	52	19	28.8	111	0.3	19	21	31.8	143	0.9	55
65-74	0	0.0	0	0.0	0	1	33.3	12	0.1	4	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	20,741	1.3	176,543	0.4	52	522,626	32.5	4,706,572	0.2	6	76,451	4.8	612,172	0.3	27
Other Eligibles	1,184	0.2	11,036	0.5	55	279,244	49.3	2,532,691	0.2	5	524	0.1	5,302	0.3	12
5 and younger	4,080	0.9	39,464	0.5	64	147,758	31.6	1,399,619	0.1	7	11,258	2.4	110,771	0.4	23
6-14	3,945	1.8	35,315	0.5	62	51,567	23.1	453,520	0.2	9	17,110	7.6	148,223	0.4	24
15-20	9,553	2.9	72,983	0.4	43	39,729	12.1	280,640	0.2	8	41,475	12.7	296,099	0.3	29
21-44	1,474	8.3	12,416	0.3	39	2,919	16.5	24,911	0.2	8	4,942	27.9	39,944	0.3	32
45-64	223	17.6	2,438	0.7	45	475	37.4	5,176	0.2	8	326	25.7	3,447	0.5	38
65-74	159	17.0	1,622	0.6	41	464	49.7	5,006	0.2	9	392	42.0	4,029	0.6	42
75-84	123	14.9	1,269	0.7	43	470	56.9	5,009	0.2	10	424	51.3	4,357	0.7	44
85 and older															
Male	42,966	3.1	452,050	0.6	80	482,722	34.3	4,518,154	0.2	6	60,378	4.3	609,392	0.4	30
Disabled	30,418	20.9	335,918	0.6	88	41,935	28.9	469,676	0.2	8	32,036	22.0	347,225	0.4	33
1,283	1,283	12.1	13,992	0.7	92	6,062	57.2	66,756	0.1	6	222	2.1	2,444	0.3	15
5 and younger	5,884	19.4	65,723	0.7	92	11,483	37.9	130,463	0.1	7	5,385	17.8	59,777	0.4	26
6-14	3,905	21.9	43,786	0.7	112	6,097	34.2	69,801	0.2	9	3,943	22.1	43,670	0.4	31
15-20	10,956	27.3	121,462	0.6	99	8,689	21.7	98,272	0.2	10	10,536	26.3	113,574	0.4	38
21-44	8,379	18.0	90,891	0.5	60	9,584	20.6	104,243	0.2	10	11,932	25.7	127,636	0.4	34
45-64	10	19.2	61	0.7	65	16	30.8	129	0.4	76	17	32.7	112	0.6	33
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	12	0.2	18
75-84	1	50.0	3	0.3	102	4	200.0	12	0.6	25	0	0.0	0	0.0	0
85 and older	12,548	1.0	116,132	0.5	57	440,787	35.0	4,048,478	0.1	6	28,342	2.2	262,167	0.4	25
Other Eligibles	1,819	0.3	16,748	0.5	44	277,507	46.9	2,518,623	0.2	5	802	0.1	8,146	0.3	13
5 and younger	5,735	1.2	55,860	0.5	60	120,172	25.3	1,139,243	0.1	6	14,387	3.0	139,956	0.4	24
6-14	2,723	1.8	25,070	0.5	70	38,438	25.2	352,041	0.2	10	8,415	5.5	76,815	0.4	27
15-20	1,482	4.7	11,432	0.4	47	2,945	9.3	22,644	0.2	9	3,170	10.0	24,122	0.3	29
21-44	537	6.5	4,313	0.3	35	1,064	12.9	8,934	0.2	8	1,130	13.7	8,717	0.3	28
45-64	131	16.3	1,461	0.6	58	272	33.7	2,957	0.2	12	188	23.3	1,950	0.5	37
65-74	90	17.4	917	0.6	41	249	48.3	2,576	0.2	10	162	31.4	1,609	0.6	41
75-84	31	11.9	331	0.5	34	140	53.6	1,460	0.2	9	88	33.7	852	0.6	33
85 and older															
Unknown	3	5.9	20	0.6	49	10	19.6	74	0.2	16	3	5.9	15	1.0	68

Source: Data for this table are from the MAX 2004 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, TEXAS, 2004

Beneficiary Characteristics	COUGH/COLD/ALLERGY					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANALGESICS - ANTI-INFLAMMATORY				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of 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	1,619,498	51.3 %	14,944,922	0.2	\$4	119,014	3.8 %	1,153,487	0.5	\$48	668,526	21.2 %	6,154,886	0.2	\$7
Female	842,814	48.1	7,735,488	0.2	4	33,846	1.9	330,816	0.5	46	394,859	22.5	3,539,884	0.2	9
Disabled	59,729	40.7	673,120	0.2	4	7,233	4.9	80,229	0.4	50	52,841	36.0	590,241	0.2	31
5 and younger	6,512	86.3	72,326	0.2	4	324	4.3	3,433	0.3	39	1,564	20.7	17,532	0.2	3
6-14	9,434	60.4	108,314	0.1	4	4,163	26.7	46,282	0.5	48	3,669	23.5	42,174	0.2	7
15-20	5,223	45.3	60,125	0.1	3	1,128	9.8	12,556	0.4	47	2,968	25.7	33,689	0.2	9
21-44	15,707	36.0	175,691	0.1	4	935	2.1	10,335	0.4	55	14,110	32.4	156,037	0.2	25
45-64	22,839	33.4	256,540	0.2	5	682	1.0	7,621	0.4	66	30,509	44.6	340,637	0.3	41
65-74	14	21.2	124	0.2	13	1	1.5	2	0.5	11	20	30.3	160	0.3	33
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	33.3	12	0.3	41
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	783,085	48.8	7,062,368	0.2	4	26,613	1.7	250,587	0.5	45	342,018	21.3	2,949,643	0.2	4
5 and younger	446,737	78.8	4,043,152	0.2	4	1,841	0.3	18,159	0.3	35	112,112	19.8	1,056,305	0.2	3
6-14	211,185	45.2	1,997,630	0.1	4	19,570	4.2	185,656	0.5	46	93,545	20.0	889,721	0.2	3
15-20	60,112	26.9	538,042	0.1	4	3,733	1.7	35,655	0.4	46	51,704	23.1	424,010	0.2	3
21-44	59,773	18.3	437,830	0.2	4	1,324	0.4	9,912	0.4	48	77,007	23.5	513,691	0.2	8
45-64	4,574	25.9	38,030	0.2	4	129	0.7	1,045	0.4	51	6,624	37.4	54,836	0.2	25
65-74	362	28.5	3,892	0.2	5	2	0.2	24	0.4	67	517	40.7	5,557	0.3	36
75-84	197	21.1	2,167	0.2	5	7	0.7	52	0.4	16	288	30.8	3,122	0.4	47
85 and older	145	17.6	1,625	0.2	4	7	0.8	84	0.6	59	221	26.8	2,401	0.5	45
Male	776,676	55.2	7,209,366	0.2	4	85,167	6.1	822,663	0.5	48	273,665	19.5	2,614,989	0.2	5
Disabled	47,952	33.0	540,574	0.2	4	20,272	13.9	224,455	0.5	51	30,204	20.8	336,715	0.2	16
5 and younger	9,753	92.1	107,843	0.2	3	1,033	9.8	11,275	0.4	35	2,377	22.4	26,565	0.2	3
6-14	16,131	53.2	184,324	0.1	4	14,703	48.5	162,445	0.5	52	5,819	19.2	66,450	0.2	4
15-20	6,298	35.3	72,285	0.1	4	3,470	19.4	38,866	0.4	50	3,283	18.4	37,437	0.2	7
21-44	7,912	19.7	89,283	0.2	4	822	2.1	9,165	0.4	57	6,679	16.7	73,476	0.2	17
45-64	7,855	16.9	86,809	0.2	5	243	0.5	2,692	0.4	60	12,041	25.9	132,741	0.3	27
65-74	3	5.8	30	0.1	2	1	1.9	12	0.4	83	5	9.6	46	0.3	20
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	728,724	57.8	6,668,792	0.2	4	64,895	5.1	598,208	0.5	47	243,461	19.3	2,278,274	0.2	3
5 and younger	482,981	81.7	4,362,924	0.2	4	5,271	0.9	51,165	0.3	31	120,460	20.4	1,131,099	0.2	3
6-14	200,319	42.1	1,891,001	0.1	4	51,856	10.9	475,691	0.5	48	86,872	18.3	828,830	0.2	2
15-20	39,578	25.9	368,792	0.1	4	7,514	4.9	69,329	0.5	52	27,432	18.0	250,351	0.2	3
21-44	4,315	13.6	32,699	0.2	4	217	0.7	1,722	0.4	49	6,091	19.2	45,740	0.2	13
45-64	1,191	14.5	9,744	0.2	4	31	0.4	241	0.3	46	2,129	25.9	17,073	0.2	21
65-74	196	24.3	2,100	0.1	4	2	0.2	24	0.4	79	257	31.9	2,779	0.3	36
75-84	105	20.3	1,113	0.2	5	2	0.4	19	0.2	18	151	29.3	1,637	0.3	35
85 and older	39	14.9	419	0.2	5	2	0.8	17	0.2	38	69	26.4	765	0.4	36
Unknown	8	15.7	68	0.1	4	1	2.0	8	0.1	11	2	3.9	13	0.2	3

Source: Data for this table are from the MAX 2004 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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, TEXAS, 2004

Beneficiary Characteristics	CEPHALOSPORINS					ULCER DRUGS					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	613,133	19.4 %	5,727,231	0.1	\$7	201,227	6.4 %	1,883,823	0.3	\$21	3,159,111	23,005,662
Female	330,124	18.8	3,033,916	0.1	7	127,915	7.3	1,187,601	0.3	22	1,752,935	12,418,745
Disabled	27,380	18.7	308,950	0.1	6	40,443	27.6	448,510	0.4	35	146,723	1,505,132
3 and younger	3,396	45.0	37,713	0.1	8	1,282	17.0	13,367	0.3	22	7,545	74,159
6-14	4,731	30.3	54,141	0.1	9	1,688	10.8	19,306	0.3	32	15,618	167,714
15-20	2,552	22.1	29,245	0.1	7	1,693	14.7	19,143	0.3	28	11,539	122,089
21-44	6,978	16.0	78,197	0.1	5	10,009	22.9	110,845	0.3	30	43,616	449,513
45-64	9,719	14.2	109,613	0.1	5	25,740	37.7	285,615	0.4	38	68,336	691,241
65-74	3	4.5	29	0.1	11	31	47.0	234	0.4	41	66	393
75-84	1	33.3	12	0.1	1	0	0.0	0	0.0	0	3	23
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles	302,744	18.8	2,724,966	0.1	7	87,472	5.4	739,091	0.2	14	1,606,212	10,913,613
3 and younger	151,808	26.8	1,424,704	0.1	7	20,476	3.6	175,415	0.2	7	566,977	4,097,116
6-14	79,605	17.0	756,945	0.1	9	20,107	4.3	193,857	0.1	9	467,365	3,503,753
15-20	30,537	13.7	255,027	0.1	6	14,531	6.5	125,765	0.2	12	223,683	1,446,931
21-44	38,350	11.7	266,379	0.2	6	27,272	8.3	198,835	0.2	20	327,469	1,721,470
45-64	1,919	10.8	16,223	0.1	6	3,801	21.5	31,797	0.3	31	17,688	115,082
65-74	142	11.2	1,536	0.1	7	473	37.2	5,020	0.4	35	1,270	12,436
75-84	163	17.5	1,761	0.1	7	412	44.1	4,254	0.6	44	934	8,972
85 and older	220	26.6	2,391	0.1	7	400	48.4	4,148	0.6	52	826	7,853
Male	283,003	20.1	2,693,268	0.1	7	73,311	5.2	696,217	0.3	20	1,406,125	10,586,620
Disabled	23,954	16.5	268,735	0.1	7	22,521	15.5	244,801	0.4	35	145,340	1,454,892
3 and younger	4,784	45.2	52,804	0.1	8	1,591	15.0	16,601	0.3	24	10,589	105,116
6-14	7,227	23.8	82,051	0.1	8	2,290	7.6	26,086	0.3	32	30,309	322,425
15-20	3,022	16.9	34,528	0.1	7	1,655	9.3	18,749	0.3	32	17,852	187,397
21-44	4,369	10.9	49,244	0.1	6	5,663	14.1	61,904	0.4	36	40,091	402,746
45-64	4,548	9.8	50,084	0.1	6	11,304	24.3	121,329	0.4	38	46,443	436,935
65-74	4	7.7	24	0.2	14	16	30.8	117	0.8	75	52	250
75-84	0	0.0	0	0.0	0	1	50.0	12	0.7	54	2	13
85 and older	0	0.0	0	0.0	0	1	50.0	3	0.3	2	2	10
Other Eligibles	259,049	20.5	2,424,533	0.1	8	50,790	4.0	451,416	0.2	11	1,260,785	9,131,728
3 and younger	166,336	28.1	1,555,635	0.1	7	23,272	3.9	197,512	0.2	8	591,076	4,276,190
6-14	72,887	15.3	692,831	0.1	8	15,865	3.3	153,315	0.2	9	475,516	3,550,620
15-20	16,665	10.9	150,962	0.1	6	6,585	4.3	60,640	0.2	14	152,600	1,068,122
21-44	2,297	7.2	17,436	0.2	6	3,090	9.7	23,174	0.3	30	31,791	171,856
45-64	649	7.9	5,380	0.1	5	1,416	17.2	10,967	0.3	32	8,219	50,167
65-74	97	12.0	1,043	0.1	8	255	31.6	2,745	0.4	36	806	7,639
75-84	72	14.0	749	0.1	7	198	38.4	2,001	0.5	45	516	4,786
85 and older	46	17.6	497	0.1	7	109	41.8	1,062	0.5	43	261	2,348
Unknown	6	11.8	47	0.2	7	1	2.0	5	1.0	98	51	297

Source: Data for this table are from the MAX 2004 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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, TEXAS, 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	\$567	8.3	4,913	50,653
Age				
0-64	612	8.6	3,758	39,414
65-74	500	7.6	256	2,561
75-84	431	7.4	407	3,924
85 and older	344	6.4	492	4,754
Unknown	0	0.0	0	0
Gender				
Female	581	8.6	2,765	29,018
Male	548	7.9	2,145	21,620
Unknown	494	6.3	3	15
Race				
White	574	8.5	2,764	27,879
African American	547	8.1	961	10,183
Other/unknown	567	8	1,188	12,591
Basis of Eligibility^c				
Aged	409	7.0	1,136	11,117
Disabled	611	8.6	3,775	39,530
Adults	819	13.0	1	3
Children	633	11.7	1	3
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2004 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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 3,936 beneficiaries who were in nursing facilities for part of their enrollment and their 38,039 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, TEXAS, 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	0.1	0.2	\$42	\$30	\$6	\$6	\$100	\$184	\$115	\$30	15,815	\$1,588,987	3,477	70.8 %	37,444
Biologicals	0.8	0.0	0.0	0.8	###	0	0	####	1977	0	0	####	10	19,769	1	0.0	12
Antineoplastic Agents	0.5	0.0	0.0	0.4	81	22	1	58	174	454	186	141	1,864	324,979	390	7.9	4,012
Endocrine/Metabolic Drugs	1.3	0.6	0.2	0.6	67	50	5	12	51	89	29	21	33,785	1,730,393	2,430	49.5	25,828
Cardiovascular Agents	2.1	0.7	0.0	1.4	78	53	2	23	37	78	39	16	76,755	2,803,195	3,456	70.3	36,105
Respiratory Agents	0.7	0.3	0.0	0.4	36	28	1	7	48	89	46	17	22,242	1,077,151	2,797	56.9	30,135
Gastrointestinal Agents	1.2	0.5	0.1	0.6	77	62	4	11	63	115	46	18	41,026	2,574,248	3,152	64.2	33,414
Genitourinary Agents	0.6	0.4	0.0	0.2	40	31	3	6	67	84	72	33	7,270	490,226	1,111	22.6	12,114
CNS Drugs	2.0	1.1	0.1	0.8	208	182	8	18	106	169	75	23	84,022	8,869,952	4,007	81.6	42,611
Stimulants/Anti-obesity/Anorexia	0.6	0.4	0.0	0.2	64	56	0	7	104	152	38	31	597	61,947	89	1.8	974
Miscellaneous Psychological/																	
Neurological Agents	0.8	0.8	0.0	0.0	144	142	0	1	170	171	106	112	6,449	1,094,403	717	14.6	7,612
Analgesics and Anesthetics	1.1	0.4	0.0	0.7	60	48	1	11	54	129	179	15	33,455	1,810,938	2,864	58.3	30,317
Neuromuscular Agents	1.5	0.4	0.2	0.9	109	56	24	29	73	143	121	32	46,272	3,367,898	2,819	57.4	30,826
Nutritional Products	0.7	0.0	0.0	0.7	12	1	1	11	16	40	45	15	12,400	196,465	1,566	31.9	16,567
Hematological Agents	1.0	0.4	0.1	0.5	98	89	3	6	99	209	59	11	17,068	1,691,408	1,675	34.1	17,297
Topical Products	0.6	0.3	0.1	0.2	28	18	4	6	49	69	55	25	19,171	935,183	3,045	62.0	33,266
Miscellaneous Products	0.3	0.0	0.0	0.3	17	11	0	7	66	967	102	26	928	61,000	322	6.6	3,521
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	7	0	0	0	29	0	0	0	504	14,852	184	3.7	2,030
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.	419,633	28,712,994	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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 3,936 beneficiaries who were in nursing facilities for part of their enrollment and their 38,039 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 Texas, 0.8 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, TEXAS, 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	\$6,200,073	3,375	68.7 %	37,381	0.8	\$211	\$166
ANTICONVULSANT	2,838,262	3,273	66.6	36,289	0.9	83	78
ANTIDEPRESSANTS	2,129,828	3,850	78.4	41,422	0.8	66	51
ULCER DRUGS	1,933,677	3,268	66.5	34,990	0.7	77	55
ANTIDIABETIC	1,417,414	2,824	57.5	30,236	0.9	51	47
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	1,094,403	857	17.4	9,132	0.7	170	120
ANTIHYPERLIPIDEMIC	960,546	1,222	24.9	13,151	0.7	98	73
ANALGESICS - Narcotic	772,497	3,055	62.2	32,286	0.7	37	24
ANTIHYPERTENSIVE	735,623	2,679	54.5	27,868	0.8	35	26
MISC. HEMATOLOGICAL	722,595	833	17.0	8,897	0.8	106	81
Total	18,804,918	25,236		271,652	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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 3,936 beneficiaries who were in nursing facilities for part of their enrollment and their 38,039 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, TEXAS, 2003

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	214,181	\$18,804,918	3,375	68.7 %	37,381	0.8	\$166	3,273	66.6 %	36,289	0.9	\$78
Female	126,639	11,201,865	1,935	70.0	21,763	0.8	166	1,803	65.2	20,196	0.9	79
Disabled	99,762	9,107,647	1,533	79.2	17,426	0.8	177	1,571	81.1	17,711	1.0	83
64 or younger	99,401	9,066,428	1,528	79.3	17,379	0.8	177	1,569	81.5	17,687	1.0	83
65-74	361	41,219	5	50.0	47	1.3	364	2	20.0	24	0.6	100
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	26,877	2,094,218	402	48.5	4,337	0.7	121	232	28.0	2,485	0.9	50
64 or younger	51	3,791	1	25.0	1	1.0	189	2	50.0	6	1.2	92
65-74	6,082	511,941	99	68.8	1,090	0.8	168	84	58.3	940	1.0	59
75-84	9,957	763,882	147	51.2	1,627	0.7	118	78	27.2	822	0.8	46
85 and older	10,787	814,604	155	39.3	1,619	0.7	93	68	17.3	717	0.8	44
Male	87,475	7,596,725	1,436	66.9	15,598	0.8	165	1,470	68.5	16,093	0.9	77
Disabled	77,617	6,809,884	1,236	67.2	13,566	0.8	173	1,361	74.0	14,919	0.9	78
64 or younger	77,486	6,799,401	1,230	67.3	13,535	0.8	173	1,357	74.3	14,900	0.9	78
65-74	131	10,483	6	50.0	31	0.6	98	4	33.3	19	0.8	61
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	9,858	786,841	200	65.4	2,032	0.7	117	109	35.6	1,174	0.8	68
64 or younger	15	977	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	3,809	318,530	81	90.0	910	0.7	124	55	61.1	616	0.9	77
75-84	3,750	311,992	77	65.8	728	0.7	125	38	32.5	390	0.8	67
85 and older	2,284	155,342	42	42.9	394	0.7	88	16	16.3	168	0.8	36
Unknown	67	6,328	4	133.3	20	0.8	99	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2003 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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 2003. A total of 3,936 beneficiaries who were in nursing facilities for part of their enrollment and their 38,039 benefit months were excluded from the analysis.

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

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

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

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

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

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANTIDIABETIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	3,850	78.4 %	41,422	0.8	\$51	3,268	66.5 %	34,990	0.7	\$55	2,824	57.5 %	30,236	0.9	\$47
Female	2,317	83.8	25,135	0.8	53	1,826	66.0	19,777	0.7	56	1,733	62.7	18,622	0.9	48
Disabled	1,747	90.2	19,153	0.8	54	1,351	69.8	14,771	0.7	56	1,386	71.6	15,032	1.0	50
64 or younger	1,738	90.2	19,067	0.8	54	1,350	70.1	14,759	0.7	56	1,379	71.6	14,970	1.0	50
65-74	9	90.0	86	1.0	59	1	10.0	12	0.5	7	7	70.0	62	1.1	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	570	68.8	5,982	0.8	50	475	57.3	5,006	0.7	53	347	41.9	3,590	0.8	41
64 or younger	1	25.0	3	1.0	66	2	50.0	6	1.5	178	4	100.0	7	1.3	66
65-74	121	84.0	1,301	0.8	49	81	56.3	860	0.7	57	84	58.3	845	0.9	45
75-84	209	72.8	2,203	0.8	50	176	61.3	1,865	0.7	52	143	49.8	1,528	0.8	44
85 and older	239	60.7	2,475	0.7	49	216	54.8	2,275	0.7	53	116	29.4	1,210	0.8	34
Male	1,530	71.3	16,272	0.8	49	1,441	67.2	15,208	0.7	55	1,091	50.9	11,614	0.9	45
Disabled	1,334	72.5	14,306	0.8	49	1,274	69.3	13,471	0.7	55	947	51.5	10,106	0.9	45
64 or younger	1,324	72.5	14,251	0.8	49	1,269	69.5	13,441	0.7	55	943	51.6	10,098	0.9	45
65-74	10	83.3	55	0.8	36	5	41.7	30	0.9	106	4	33.3	8	0.9	45
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	196	64.1	1,966	0.7	43	167	54.6	1,737	0.7	51	144	47.1	1,508	0.9	41
64 or younger	1	100.0	4	0.3	13	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	68	75.6	718	0.7	47	51	56.7	557	0.7	42	48	53.3	549	1.0	46
75-84	78	66.7	775	0.7	45	64	54.7	671	0.8	63	65	55.6	632	0.8	38
85 and older	49	50.0	469	0.7	36	52	53.1	509	0.7	45	31	31.6	327	0.8	36
Unknown	3	100.0	15	1.0	68	1	33.3	5	1.0	98	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2003 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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 2003. A total of 3,936 beneficiaries who were in nursing facilities for part of their enrollment and their 38,039 benefit months were excluded from the analysis.

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

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

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

Bene Mo(s) = benefit month(s); 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, TEXAS, 2003

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIHYPERLIPIDEMIC					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	857	17.4 %	9,132	0.7	\$120	1,222	24.9 %	13,151	0.7	\$73	3,055	62.2 %	32,286	0.7	\$24
Female	525	19.0	5,665	0.7	132	736	26.6	7,980	0.8	74	1,882	68.1	20,229	0.6	23
Disabled	255	13.2	2,770	0.7	168	580	30.0	6,339	0.8	75	1,422	73.5	15,426	0.7	26
64 or younger	250	13.0	2,719	0.7	169	578	30.0	6,315	0.8	75	1,416	73.5	15,376	0.7	26
65-74	5	50.0	51	0.9	122	2	20.0	24	1.1	102	6	60.0	50	0.3	8
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	270	32.6	2,895	0.7	98	156	18.8	1,641	0.7	70	460	55.5	4,803	0.5	14
64 or younger	2	50.0	2	1.0	134	1	25.0	2	1.0	30	4	100.0	10	1.4	83
65-74	31	21.5	349	0.6	85	40	27.8	426	0.7	68	78	54.2	840	0.4	13
75-84	83	28.9	872	0.7	103	67	23.3	711	0.7	72	165	57.5	1,734	0.5	14
85 and older	154	39.1	1,672	0.7	98	48	12.2	502	0.7	70	213	54.1	2,219	0.5	15
Male	329	15.3	3,452	0.7	100	485	22.6	5,166	0.7	72	1,173	54.7	12,057	0.7	25
Disabled	229	12.5	2,485	0.7	101	433	23.5	4,632	0.7	72	1,039	56.5	10,695	0.7	26
64 or younger	229	12.5	2,485	0.7	101	433	23.7	4,632	0.7	72	1,034	56.6	10,662	0.7	26
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	41.7	33	0.4	15
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	100	32.7	967	0.7	96	52	17.0	534	0.8	73	134	43.8	1,362	0.6	16
64 or younger	0	0.0	0	0.0	0	1	100.0	4	1.3	136	0	0.0	0	0.0	0
65-74	21	23.3	217	0.8	106	21	23.3	226	0.8	79	42	46.7	416	0.8	17
75-84	48	41.0	479	0.7	96	21	17.9	218	0.7	65	51	43.6	535	0.5	9
85 and older	31	31.6	271	0.7	87	9	9.2	86	0.8	73	41	41.8	411	0.6	22
Unknown	3	100.0	15	1.0	133	1	33.3	5	1.0	73	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2003 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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 2003. A total of 3,936 beneficiaries who were in nursing facilities for part of their enrollment and their 38,039 benefit months were excluded from the analysis.

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

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

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

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

TABLE ND.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, TEXAS, 2003

Beneficiary Characteristics	ANTIHYPERTENSIVE					MISC. HEMATOLOGICAL					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	2,679	54.5 %	27,868	0.8	\$26	833	17.0 %	8,897	0.8	\$81	4,913	50,653
Female	1,515	54.8	16,019	0.8	26	485	17.5	5,167	0.8	81	2,765	29,018
Disabled	1,053	54.4	11,246	0.8	26	315	16.3	3,359	0.8	82	1,936	20,747
	1,049	54.5	11,216	0.8	26	313	16.3	3,335	0.8	82	1,926	20,670
64 or younger	4	40.0	30	0.9	30	2	20.0	24	0.6	75	10	77
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	462	55.7	4,773	0.8	26	170	20.5	1,808	0.8	79	829	8,271
Other Eligibles	1	25.0	2	1.0	7	1	25.0	2	1.0	79	4	9
64 or younger	97	67.4	999	0.7	24	37	25.7	397	0.7	74	144	1,502
65-74	162	56.4	1,658	0.8	25	57	19.9	622	0.8	85	287	2,846
75-84	202	51.3	2,114	0.7	27	75	19.0	787	0.8	76	394	3,914
85 and older												
Male	1,161	54.1	11,834	0.8	27	348	16.2	3,730	0.8	82	2,145	21,620
Disabled	1,005	54.6	10,274	0.8	27	290	15.8	3,159	0.8	83	1,839	18,783
	1,002	54.8	10,253	0.8	27	290	15.9	3,159	0.8	83	1,827	18,731
64 or younger	3	25.0	21	0.4	13	0	0.0	0	0.0	0	12	52
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	156	51.0	1,560	0.7	24	58	19.0	571	0.8	77	306	2,837
Other Eligibles	2	200.0	8	1.1	48	0	0.0	0	0.0	0	1	4
64 or younger	49	54.4	511	0.7	24	19	21.1	176	0.8	92	90	930
65-74	58	49.6	575	0.7	21	24	20.5	232	0.7	71	117	1,063
75-84	47	48.0	466	0.7	28	15	15.3	163	0.7	69	98	840
85 and older												
Unknown	3	100.0	15	0.8	32	0	0.0	0	0.0	0	3	15

Source: Data for this table are from the MAX 2003 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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 2003. A total of 3,936 beneficiaries who were in nursing facilities for part of their enrollment and their 38,039 benefit months were excluded from the analysis.

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

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

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

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

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

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Nondual Rx \$	Total Number of Beneficiaries
All	1,485,943	47.0 %	1.8	5,750,146	\$31	\$96,471,405	\$17	7.7 %	3,159,111
Age									
5 and younger	735,317	62.5	2.9	3,426,888	42	49,527,924	14	20.8	1,176,204
6-14	418,893	42.4	1.3	1,244,603	25	24,787,147	20	8.2	988,824
15-20	125,637	31.0	0.8	307,319	16	6,630,583	22	4.9	405,680
21-44	143,100	32.3	1.0	429,393	19	8,348,267	19	3.0	442,967
45-64	60,816	43.2	2.3	328,511	49	6,953,428	21	2.4	140,686
65-74	921	42.0	2.1	4,703	40	87,978	19	2.1	2,194
75-84	682	46.7	3.2	4,625	53	76,883	17	2.2	1,460
85 and older	577	52.9	3.8	4,104	54	59,195	14	2.1	1,090
Unknown	0	0.0	0.0	0	0	0	0	0.0	6
Basis of Eligibility^c									
Aged	2,106	45.9	2.9	13,182	48	219,584	17	2.1	4,585
Disabled	133,529	45.7	2.4	713,388	56	16,495,252	23	2.8	292,063
Adults	140,873	30.4	0.7	316,737	11	5,291,158	17	4.1	462,711
Children	1,209,185	50.4	2.0	4,706,263	31	74,453,748	16	14.4	2,398,996
Unknown	250	33.1	0.8	576	15	11,663	20	1.5	756
Gender									
Female	812,098	46.3	1.7	3,038,185	29	51,401,368	17	7.5	1,752,936
Male	673,832	47.9	1.9	2,711,929	32	45,068,760	17	7.8	1,406,130
Unknown	13	28.9	0.7	32	28	1,277	40	7.4	45
Race									
White	296,214	39.6	1.2	902,839	24	18,304,855	20	4.2	747,563
African American	208,357	36.2	1.1	620,880	19	10,892,559	18	4.8	576,300
Other/unknown	981,372	53.5	2.3	4,226,427	37	67,273,991	16	11.3	1,835,248
Use of Nursing Facilities^d									
Entire year	3,271	66.6	7.2	35,563	124	611,629	17	2.1	4,913
Part year	2,814	71.5	5.3	20,740	96	376,025	18	2.2	3,936
None	1,479,858	47.0	1.8	5,693,843	30	95,483,751	17	7.9	3,150,262
Maintenance Assistance Status									
Cash	275,162	46.3	2.2	1,327,939	44	25,913,902	20	3.9	594,832
Medically needy	25,610	31.0	0.8	68,695	16	1,322,365	19	3.9	82,492
Poverty related	997,654	47.1	1.7	3,625,989	28	58,408,148	16	13.9	2,117,661
Other/unknown	187,517	51.5	2.0	727,523	30	10,826,990	15	7.9	364,126

Table ND11

Nondual Beneficiaries

Source: Data for this table are from the MAX 2003 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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

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

TABLE ND.12
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
TEXAS, 2003

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
All	0.2	\$4	\$17	\$0	\$0	23,005,662
Age						
5 and younger	0.4	6	14	0	0	8,552,656
6-14	0.2	3	20	0	0	7,544,648
15-20	0.1	2	22	0	0	2,824,577
21-44	0.2	3	19	0	1	2,745,585
45-64	0.3	5	21	0	2	1,293,425
65-74	0.2	4	19	0	1	20,718
75-84	0.3	6	17	0	2	13,815
85 and older	0.4	6	14	0	1	10,223
Unknown	0.0	0	0	0	0	15
Basis of Eligibility^c						
Aged	0.3	5	17	0	1	43,813
Disabled	0.2	6	23	0	2	2,960,024
Adults	0.1	2	17	0	0	2,456,066
Children	0.3	4	16	0	0	17,540,239
Unknown	0.1	2	20	0	1	5,520
Gender						
Female	0.2	4	17	0	0	12,418,748
Male	0.3	4	17	0	0	10,586,632
Unknown	0.1	5	40	0	3	282
Race						
White	0.2	3	20	0	1	5,368,123
African American	0.2	3	18	0	0	4,023,586
Other/unknown	0.3	5	16	0	0	13,613,953
Use of Nursing Facilities^d						
Entire year	0.7	12	17	0	6	50,653
Part year	0.5	10	18	0	5	38,039
None	0.2	4	17	0	0	22,916,970
Maintenance Assistance Status						
Cash	0.3	5	20	0	1	5,054,871
Medically needy	0.1	3	19	0	1	525,888
Poverty related	0.2	4	16	0	0	14,724,014
Other/unknown	0.3	4	15	0	0	2,700,889

Source: Data for this table are from the MAX 2003 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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

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

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

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$	Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
All	2,209,946	\$44	\$96,471,405	100.0 %	5,750,146	\$17	100.0 %
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	51	79	4,008	0.0	67	60	0.0
Drugs for cosmetic purposes	601	13	8,025	0.0	782	10	0.0
Cough and cold medications	1,090,577	49	53,373,659	55.3	2,483,558	21	43.2
Vitamins and minerals	124,743	25	3,178,784	3.3	252,922	13	4.4
Non-prescription drugs	875,063	33	29,011,861	30.1	2,560,379	11	44.5
Barbiturates	5,617	54	303,059	0.3	36,342	8	0.6
Benzodiazepines	80,362	110	8,821,019	9.1	363,155	24	6.3
Other Part D Excl Rx Drugs	32,932	54	1,770,990	1.8	52,941	33	0.9

Source: Data for this table are from the MAX 2003 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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 2003. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2003. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table ND11.

b. Includes OTC drugs as well as prescription drugs.

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

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

APPENDIX TABLE A.1
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, TEXAS, 2003

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	3,318,905	4,652	296,578	476,478	2,540,436	761	28,822,045	45,519	3,130,044	3,038,661	22,602,132	5,689
Age												
5 and younger	1,239,199	0	18,383	8	1,220,808	0	10,930,859	0	195,108	60	10,735,691	0
6-14	1,047,444	0	46,841	367	1,000,236	0	9,677,641	0	526,062	2,481	9,149,098	0
15-20	429,250	0	30,026	79,961	319,251	12	3,564,732	0	326,968	521,159	2,716,544	61
21-44	455,935	3	85,360	370,149	117	306	3,239,618	32	903,884	2,333,029	679	1,994
45-64	142,250	31	115,838	25,928	15	438	1,362,644	162	1,177,308	181,479	83	3,612
65-74	2,245	2,060	123	56	3	3	21,921	20,828	668	388	21	16
75-84	1,479	1,471	5	3	0	0	14,270	14,207	36	27	0	0
85 and older	1,095	1,087	2	6	0	0	10,338	10,290	10	38	0	0
Unknown	8	0	0	0	6	2	22	0	0	0	16	6
Gender												
Female	1,835,780	3,053	148,397	433,517	1,250,054	759	15,542,662	30,138	1,584,367	2,777,163	11,145,311	5,683
Male	1,483,076	1,593	148,181	42,961	1,290,341	0	13,279,079	15,348	1,545,677	261,498	11,456,556	0
Unknown	49	6	0	0	41	2	304	33	0	0	265	6
Race												
White	778,487	1,947	95,310	143,479	537,398	353	6,406,831	18,782	993,122	883,922	4,508,406	2,599
African American	615,772	757	75,478	100,654	438,760	123	5,503,648	7,533	807,914	678,322	4,008,957	922
Other/unknown	1,924,646	1,948	125,790	232,345	1,564,278	285	16,911,566	19,204	1,329,008	1,476,417	14,084,769	2,168
Use of Nursing Facilities^c												
Entire year	4,913	1,136	3,775	1	1	0	50,714	11,117	39,589	3	5	0
Part year	3,937	495	3,390	42	10	0	39,528	4,679	34,454	309	86	0
None	3,310,055	3,021	289,413	476,435	2,540,425	761	28,731,803	29,723	3,056,001	3,038,349	22,602,041	5,689
Maintenance Assistance Status												
Cash	611,628	2,707	289,976	103,780	215,165	0	5,897,314	27,258	3,061,626	667,392	2,141,038	0
Medically needy	82,492	0	0	81,980	512	0	547,706	0	0	545,089	2,617	0
Poverty related	2,224,292	19	21	234,915	1,988,576	761	19,173,474	186	213	1,357,860	17,809,526	5,689
Other/unknown	400,493	1,926	6,581	55,803	336,183	0	3,203,551	18,075	68,205	468,320	2,648,951	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	2,026,852	3,988	240,721	314,512	1,466,880	751	17,392,669	38,241	2,496,701	1,933,511	12,918,609	5,607
FFS part year, with Rx claims	541,100	148	16,955	89,331	434,661	5	5,136,982	1,465	187,058	699,775	4,248,635	49
FFS part year, no Rx claims	249,530	14	2,258	21,159	226,099	0	1,989,701	140	22,772	120,804	1,845,985	0
MC all year, with Rx claims	341,629	435	32,129	37,709	271,356	0	3,303,610	4,983	375,293	234,539	2,688,795	0
MC all year, no Rx claims	159,789	67	4,515	13,767	141,440	0	999,050	690	48,220	50,032	900,108	0

Source: Data for this table are from the MAX 2003 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

- 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, TEXAS, 2003

	Beneficiaries and Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	3,318,905	28,822,045	3,159,111	23,005,662	0	5,816,383
Fee-for-service (FFS) all year	2,026,852	17,392,669	2,026,852	17,392,543	0	126
FFS part year, with Rx claims	541,100	5,136,982	541,100	1,601,626	0	3,535,356
FFS part year, with no Rx claims	249,530	1,989,701	249,530	707,883	0	1,281,818
Managed care (MC) all year, with Rx claims	341,629	3,303,610	341,629	3,303,610	0	0
MC all year, with no Rx claims	159,789	999,050	0	0	0	999,050

Source: Data for this table are from the MAX 2003 file for Texas, released by CMS in 00/2007. This table was produced on 04/11/2008.

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.