

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2004 UNITED STATES

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, UNITED STATES, 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	35,483,047	281,084	4,235,657	10,259,716	20,685,655	20,935	276,797,838	2,554,223	43,212,217	71,725,363	159,123,331	182,704
Age												
5 and younger	8,863,072	70	209,263	952	8,652,784	3	65,184,516	379	2,032,396	4,445	63,147,283	13
6-14	8,748,611	54	544,019	2,230	8,202,308	0	72,728,991	269	5,784,308	11,977	66,932,437	0
15-20	5,100,223	110	401,390	1,022,533	3,675,804	386	39,400,491	712	4,180,252	6,899,774	28,317,217	2,536
21-44	9,595,502	519	1,315,548	8,212,269	59,545	7,621	71,113,160	2,948	13,448,225	57,323,052	277,759	61,176
45-64	2,752,963	1,580	1,728,135	1,009,753	672	12,823	24,959,167	11,744	17,382,074	7,443,970	3,401	117,978
65-74	173,186	140,401	31,477	1,198	11	99	1,639,119	1,303,222	327,944	6,898	69	986
75-84	93,512	88,596	4,684	225	7	0	866,405	818,363	46,763	1,235	44	0
85 and older	50,859	49,544	1,133	143	37	2	427,093	415,925	10,233	641	283	11
Unknown	105,119	210	8	10,413	94,487	1	478,896	661	22	33,371	444,838	4
Gender												
Female	21,037,837	183,943	2,138,668	8,351,091	10,343,213	20,922	163,272,036	1,677,776	22,114,590	59,647,227	79,649,859	182,584
Male	14,350,769	96,903	2,096,816	1,904,445	10,252,594	11	112,966,529	874,514	21,096,306	12,068,517	78,927,086	106
Unknown	94,441	238	173	4,180	89,848	2	559,273	1,933	1,321	9,619	546,386	14
Race												
White	15,316,973	98,997	2,020,744	4,377,811	8,808,123	11,298	123,956,795	877,253	20,467,613	31,048,386	71,469,267	94,276
African American	8,461,367	38,100	1,112,048	2,112,873	5,195,075	3,271	69,435,201	339,498	11,363,123	15,229,306	42,475,038	28,236
Other/unknown	11,704,707	143,987	1,102,865	3,769,032	6,682,457	6,366	83,405,842	1,337,472	11,381,481	25,447,671	45,179,026	60,192
Use of Nursing Facilities^c												
Entire year	76,716	18,699	57,547	240	224	6	804,570	186,813	613,979	1,769	1,953	56
Part year	80,321	10,672	65,355	3,271	968	55	770,890	97,397	639,473	26,371	7,119	530
None	35,326,010	251,713	4,112,755	10,256,205	20,684,463	20,874	275,222,378	2,270,013	41,958,765	71,697,223	159,114,259	182,118
Maintenance Assistance Status												
Cash	11,595,078	84,116	3,542,610	2,934,215	5,034,137	0	95,522,253	850,200	37,350,533	19,162,404	38,159,116	0
Medically needy	1,733,725	89,299	192,513	818,594	633,319	0	12,366,546	816,171	1,568,534	5,808,139	4,173,702	0
Poverty-related	12,610,950	38,254	171,644	1,253,412	11,126,705	20,935	96,826,929	306,649	1,361,731	6,590,337	88,385,508	182,704
Other/unknown	9,543,294	69,415	328,890	5,253,495	3,891,494	0	72,082,110	581,203	2,931,419	40,164,483	28,405,005	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	26,604,846	264,004	3,823,648	7,762,515	14,734,021	20,658	235,178,279	2,454,507	40,548,361	60,476,779	131,517,514	181,118
FFS part year, with Rx claims	2,848,950	7,418	187,875	928,411	1,725,055	191	11,078,563	35,385	953,053	3,454,351	6,634,677	1,097
FFS part year, no Rx claims	4,333,781	5,538	109,580	1,112,044	3,106,564	55	12,089,699	16,966	367,523	2,981,842	8,723,200	168
MC all year, with FFS Rx claims	1,695,470	4,124	114,554	456,746	1,120,015	31	18,451,297	47,365	1,343,280	4,812,391	12,247,940	321

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

- 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; MC = managed care; Rx = pharmacy benefit.

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, UNITED STATES, 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	55.5 %	7.3	\$504	\$69	\$3,092	16.3 %	35,483,047
Age							
5 and younger	57.7	3.6	166	46	1,885	8.8	8,863,072
6-14	52.5	4.1	291	72	1,741	16.7	8,748,611
15-20	50.2	4.3	302	70	2,522	12.0	5,100,223
21-44	54.0	7.9	568	72	3,600	15.8	9,595,502
45-64	73.4	31.5	2,315	73	9,891	23.4	2,752,963
65-74	70.5	26.0	1,649	64	9,528	17.3	173,186
75-84	62.7	24.3	1,431	59	9,638	14.9	93,512
85 and older	43.4	19.3	980	51	10,265	9.5	50,859
Unknown	10.0	0.5	19	43	521	3.7	105,119
Basis of Eligibility^e							
Aged	62.6	22.9	1,374	60	8,997	15.3	281,084
Disabled	77.4	29.0	2,457	85	13,301	18.5	4,235,657
Adults	50.5	5.7	316	56	1,970	16.1	10,259,716
Children	53.3	3.5	183	52	1,470	12.5	20,685,655
Unknown	75.9	16.7	1,636	98	10,204	16.0	20,935
Gender							
Female	56.4	7.8	485	62	2,874	16.9	21,037,837
Male	54.4	6.8	534	79	3,427	15.6	14,350,769
Unknown	11.8	0.6	34	57	691	4.9	94,441
Race							
White	61.6	9.6	644	67	3,547	18.2	15,316,973
African American	54.8	6.4	443	69	3,089	14.3	8,461,367
Other/unknown	47.9	5.1	363	72	2,497	14.6	11,704,707
Use of Nursing Facilities^f							
Entire year	90.8	79.4	5,383	68	62,036	8.7	76,716
Part year	94.2	63.3	4,724	75	56,315	8.4	80,321
None	55.3	7.1	483	69	2,843	17.0	35,326,010
Maintenance Assistance Status							
Cash	61.7	12.6	956	76	5,185	18.4	11,595,078
Medically needy	58.4	8.0	528	66	4,045	13.0	1,733,725
Poverty related	57.1	3.9	198	50	1,599	12.4	12,610,950
Other/unknown	45.3	5.4	354	65	2,347	15.1	9,543,294

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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, UNITED STATES, 2004

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ ^d	Number	
				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		Beneficiaries	Benefit Months
All	0.9	\$65	16.3 %	44.5 %	40.4 %	6.0 %	5.9 %	2.4 %	0.8 %	\$396	35,483,047	276,797,838
Age												
5 and younger	0.5	23	8.8	42.3	49.6	4.9	2.5	0.5	0.2	256	8,863,072	65,184,516
6-14	0.5	35	16.7	47.5	43.9	4.6	3.3	0.6	0.2	209	8,748,611	72,728,991
15-20	0.6	39	12.0	49.8	40.4	5.2	3.6	0.8	0.2	327	5,100,223	39,400,491
21-44	1.1	77	15.8	46.0	35.6	7.4	7.5	2.7	0.8	486	9,595,502	71,113,160
45-64	3.5	255	23.4	26.6	20.5	10.8	22.1	14.6	5.4	1,091	2,752,963	24,959,167
65-74	2.7	174	17.3	29.5	23.4	12.0	20.8	11.1	3.2	1,007	173,186	1,639,119
75-84	2.6	155	14.9	37.3	18.7	10.0	19.7	11.2	3.0	1,040	93,512	866,405
85 and older	2.3	117	9.5	56.6	9.4	5.8	13.9	11.1	3.1	1,222	50,859	427,093
Unknown	0.1	4	3.7	90.0	6.5	1.3	1.4	0.6	0.2	114	105,119	478,896
Basis of Eligibility^e												
Aged	2.5	151	15.3	37.4	20.3	10.5	18.7	10.3	2.9	990	281,084	2,554,223
Disabled	2.8	241	18.5	22.6	28.6	11.6	20.8	12.1	4.2	1,304	4,235,657	43,212,217
Adults	0.8	45	16.1	49.5	35.4	6.7	6.0	1.9	0.6	282	10,259,716	71,725,363
Children	0.5	24	12.5	46.7	45.6	4.5	2.5	0.5	0.2	191	20,685,655	159,123,331
Unknown	1.9	187	16.0	24.1	35.1	15.1	18.7	6.3	0.9	1,169	20,935	182,704
Gender												
Female	1.0	63	16.9	43.6	40.7	6.2	6.1	2.6	0.9	370	21,037,837	163,272,036
Male	0.9	68	15.6	45.6	40.3	5.8	5.6	2.0	0.7	435	14,350,769	112,966,529
Unknown	0.1	6	4.9	88.2	9.7	1.2	0.7	0.2	0.0	117	94,441	559,273
Race												
White	1.2	80	18.2	38.4	42.5	7.2	7.5	3.2	1.2	438	15,316,973	123,956,795
African American	0.8	54	14.3	45.2	42.0	5.5	4.9	1.9	0.6	377	8,461,367	69,435,201
Other/unknown	0.7	51	14.6	52.1	36.6	4.8	4.3	1.6	0.5	350	11,704,707	83,405,842
Use of Nursing Facilities^f												
Entire year	7.6	513	8.7	9.2	5.5	4.7	20.4	34.5	25.6	5,915	76,716	804,570
Part year	6.6	492	8.4	5.8	10.4	8.4	26.0	30.1	19.3	5,868	80,321	770,890
None	0.9	62	17.0	44.7	40.6	6.0	5.8	2.2	0.7	365	35,326,010	275,222,378
Maintenance Assistance Status												
Cash	1.5	116	18.4	38.3	38.3	7.6	9.6	4.6	1.6	629	11,595,078	95,522,253
Medically needy	1.1	74	13.0	41.6	38.9	7.9	7.8	2.9	0.9	567	1,733,725	12,366,546
Poverty related	0.5	26	12.4	42.9	47.8	5.2	3.1	0.7	0.3	208	12,610,950	96,826,929
Other/unknown	0.7	47	15.1	54.7	33.6	4.8	4.6	1.7	0.6	311	9,543,294	72,082,110

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

- 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, UNITED STATES, 2004

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	0.9	\$65	\$69	0.4	\$49	\$130	0.1	\$4	\$72	0.5	\$11	\$22
Age												
5 and younger	0.5	23	46	0.2	16	99	0.1	2	36	0.3	4	16
6-14	0.5	35	72	0.2	29	116	0.0	2	58	0.2	5	22
15-20	0.6	39	70	0.2	31	128	0.0	2	65	0.3	6	22
21-44	1.1	77	72	0.4	58	145	0.1	6	83	0.6	13	22
45-64	3.5	255	73	1.4	193	136	0.2	18	95	1.9	44	24
65-74	2.7	174	64	1.2	135	111	0.1	10	67	1.4	30	22
75-84	2.6	155	59	1.2	119	103	0.1	8	56	1.3	27	21
85 and older	2.3	117	51	0.9	86	95	0.1	7	47	1.2	24	19
Unknown	0.1	4	43	0.0	3	136	0.0	0	38	0.1	1	14
Basis of Eligibility^d												
Aged	2.5	151	60	1.1	117	105	0.1	8	60	1.3	26	21
Disabled	2.8	241	85	1.2	187	158	0.2	17	97	1.5	37	25
Adults	0.8	45	56	0.3	33	109	0.1	3	67	0.5	9	20
Children	0.5	24	52	0.2	18	97	0.0	2	43	0.2	4	18
Unknown	1.9	187	98	0.7	148	218	0.1	10	97	1.1	30	26
Gender												
Female	1.0	63	62	0.4	46	119	0.1	5	69	0.5	11	21
Male	0.9	68	79	0.4	54	145	0.1	4	79	0.4	10	23
Unknown	0.1	6	57	0.0	4	139	0.0	0	35	0.1	1	16
Race												
White	1.2	80	67	0.5	60	125	0.1	6	77	0.6	14	22
African American	0.8	54	69	0.3	42	135	0.0	3	66	0.4	9	21
Other/unknown	0.7	51	72	0.3	39	136	0.1	4	68	0.4	8	23
Use of Nursing Facilities^e												
Entire year	7.6	513	68	2.8	383	136	0.5	34	65	4.2	95	23
Part year	6.6	492	75	2.4	371	154	0.4	35	84	3.7	86	23
None	0.9	62	69	0.4	47	129	0.1	4	72	0.5	10	22
Maintenance Assistance Status												
Cash	1.5	116	76	0.6	89	145	0.1	8	87	0.8	19	23
Medically needy	1.1	74	66	0.4	56	127	0.1	5	73	0.6	14	22
Poverty related	0.5	26	50	0.2	19	95	0.0	2	43	0.3	5	18
Other/unknown	0.7	47	65	0.3	36	119	0.0	3	68	0.4	8	21

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

- 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 the U.S., 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.medispn.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, UNITED STATES, 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	\$19	\$14	\$2	\$3	\$71	\$143	\$81	\$21	32,823,044	\$2,326,143,089	12,408,453	35.0 %	121,747,325
Biologicals	0.3	0.3	0.0	0.0	359	316	4	40	1110	1,066	897	1,700	282,739	313,806,891	90,985	0.3	873,832
Antineoplastic Agents	0.5	0.1	0.0	0.3	148	113	8	28	292	794	334	81	631,977	184,686,783	121,528	0.3	1,246,829
Endocrine/Metabolic Drugs	0.5	0.2	0.1	0.2	26	18	3	5	57	102	41	24	22,680,297	1,297,977,617	5,072,271	14.3	50,053,535
Cardiovascular Agents	1.1	0.5	0.0	0.6	50	37	2	11	44	81	44	17	30,542,261	1,341,679,768	2,616,322	7.4	26,946,585
Respiratory Agents	0.4	0.2	0.0	0.2	22	18	1	3	52	85	30	18	36,774,645	1,910,995,198	8,620,638	24.3	85,718,797
Gastrointestinal Agents	0.4	0.2	0.0	0.2	39	32	2	5	87	140	87	25	13,217,079	1,151,378,028	2,892,623	8.2	29,493,098
Genitourinary Agents	0.2	0.1	0.0	0.1	12	9	2	2	53	76	43	24	3,257,876	171,637,396	1,450,818	4.1	13,987,220
CNS Drugs	0.9	0.4	0.0	0.4	89	74	5	11	99	168	98	26	38,177,078	3,762,068,869	4,182,933	11.8	42,073,643
Stimulants/Anti-obesity/Anorexia	0.7	0.5	0.0	0.1	57	52	1	4	88	98	81	40	7,266,879	640,898,847	1,086,132	3.1	11,153,431
Miscellaneous Psychological/																	
Neurological Agents	0.4	0.3	0.0	0.1	113	106	1	6	302	360	108	87	517,929	156,633,843	132,001	0.4	1,388,293
Analgesics and Anesthetics	0.4	0.1	0.0	0.3	19	12	1	6	45	156	228	17	30,675,660	1,370,228,960	7,307,998	20.6	71,883,885
Neuromuscular Agents	0.7	0.2	0.1	0.3	58	37	12	8	84	150	126	25	16,214,907	1,366,205,465	2,284,232	6.4	23,691,213
Nutritional Products	0.3	0.0	0.0	0.2	5	1	1	4	18	28	23	16	5,043,768	91,406,407	1,876,499	5.3	16,945,942
Hematological Agents	0.5	0.2	0.0	0.3	126	114	2	10	238	590	47	34	3,452,527	820,066,061	656,816	1.9	6,526,248
Topical Products	0.2	0.1	0.0	0.1	11	7	1	3	45	81	54	23	17,409,316	785,258,713	7,222,970	20.4	72,077,712
Miscellaneous Products	0.3	0.1	0.0	0.1	54	37	9	8	192	274	346	65	769,719	147,578,516	267,443	0.8	2,754,941
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	7	0	0	0	33	0	0	0	762,769	25,351,003	334,749	0.9	3,564,690
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.	260,500,470	17,864,001,454	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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

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

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

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In the U.S., 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispans.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26 2007).

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

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

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, UNITED STATES, 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	\$2,273,001,645	1,682,773	4.7 %	18,230,254	0.6	\$215	\$125
ANTICONVULSANT	1,181,845,606	1,619,833	4.6	17,360,104	0.6	108	68
ANTIASTHMATIC	1,166,845,340	6,001,760	16.9	61,663,779	0.3	67	19
ANTIDEPRESSANTS	1,151,093,277	3,566,675	10.1	36,900,788	0.5	66	31
ANTIVIRAL	1,086,453,408	591,792	1.7	6,134,720	0.4	418	177
ULCER DRUGS	881,711,516	2,667,982	7.5	27,735,309	0.4	88	32
ANALGESICS - Narcotic	651,606,247	6,239,797	17.6	63,023,808	0.3	38	10
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	627,046,736	1,278,155	3.6	13,512,247	0.5	89	46
ANTIDIABETIC	577,533,434	1,333,318	3.8	13,967,582	0.6	69	41
DERMATOLOGICAL	556,459,787	7,273,047	20.5	74,716,079	0.2	46	7
Total	10,153,596,996	32,255,132		333,244,670	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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.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); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement; n.a. = not applicable.

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, UNITED STATES, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	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	113,750,181	\$10,153,596,996	1,682,773	4.7 %	18,230,254	0.6	\$125	1,619,833	4.6 %	17,360,104	0.6	\$68
Female	67,647,793	5,564,046,548	877,041	4.2	9,487,112	0.5	113	977,529	4.7	10,448,748	0.6	64
Disabled	35,601,453	3,451,029,458	568,499	26.6	6,403,606	0.6	132	602,964	28.2	6,773,799	0.7	74
	354,504	29,160,973	1,119	1.3	12,354	0.4	73	8,794	10.3	97,265	0.7	85
5 and younger	1,317,872	138,637,750	24,639	13.5	277,609	0.5	106	33,633	18.4	383,467	0.8	101
6-14	1,171,864	125,694,165	29,991	19.6	334,709	0.6	113	32,349	21.1	364,891	0.8	103
15-20	10,770,965	1,155,203,173	233,689	34.4	2,617,064	0.6	129	231,792	34.1	2,594,798	0.7	80
21-44	21,637,432	1,975,084,494	274,633	27.1	3,112,150	0.6	139	292,596	28.9	3,291,058	0.6	63
45-64	312,493	24,775,968	3,943	19.2	44,473	0.7	143	3,432	16.7	38,222	0.7	46
65-74	31,802	2,201,280	425	13.9	4,671	0.7	123	320	10.5	3,579	0.6	37
75-84	4,521	271,655	60	7.6	576	0.7	98	48	6.1	519	0.6	35
85 and older	32,043,207	2,112,930,475	308,520	1.6	3,083,442	0.4	72	374,556	2.0	3,674,897	0.5	47
Other Eligibles	3,865,423	187,464,964	4,133	0.1	44,207	0.3	52	9,988	0.2	100,745	0.5	50
5 and younger	5,483,296	393,214,010	57,355	1.4	616,970	0.5	87	39,466	1.0	413,956	0.5	63
6-14	3,857,770	248,000,023	60,041	2.1	611,992	0.4	74	47,767	1.6	480,008	0.5	57
15-20	13,616,919	881,695,105	144,530	2.1	1,380,144	0.3	60	215,942	3.2	2,057,272	0.4	41
21-44	3,830,912	305,347,329	27,491	4.2	270,681	0.4	80	47,456	7.3	471,756	0.5	47
45-64	740,458	54,571,998	6,509	7.2	71,989	0.7	123	7,687	8.5	84,865	0.6	42
65-74	435,247	29,470,899	4,781	8.5	50,423	0.6	90	4,459	7.9	47,997	0.6	35
75-84	213,182	13,166,147	3,680	10.3	37,036	0.6	78	1,791	5.0	18,298	0.7	35
85 and older	46,083,257	4,588,607,006	805,607	5.6	8,742,052	0.6	138	642,169	4.5	6,910,243	0.7	74
Male	24,329,817	2,869,591,918	537,980	25.7	6,010,132	0.7	155	446,472	21.3	4,974,707	0.7	81
Disabled	559,469	46,550,787	4,042	3.3	44,781	0.5	78	11,852	9.5	131,294	0.7	84
5 and younger	3,101,690	330,499,108	82,375	22.8	929,903	0.6	115	58,741	16.3	667,390	0.7	89
6-14	1,896,287	224,784,061	59,766	24.1	671,566	0.6	136	45,107	18.2	510,094	0.8	101
15-20	7,601,342	1,040,183,632	223,127	35.1	2,481,255	0.7	170	173,498	27.3	1,930,774	0.8	90
21-44	11,013,726	1,213,850,176	166,171	23.2	1,854,806	0.7	165	155,402	21.7	1,714,445	0.7	63
45-64	137,654	12,254,087	2,187	20.0	24,364	0.8	159	1,657	15.1	18,311	0.7	50
65-74	17,587	1,357,144	281	17.3	3,144	0.7	144	191	11.7	2,146	0.7	38
75-84	2,062	112,923	31	9.0	313	0.4	54	24	7.0	253	0.5	26
85 and older	21,749,829	1,718,900,151	267,615	2.2	2,731,900	0.5	100	195,688	1.6	1,935,487	0.5	54
Other Eligibles	4,708,361	254,323,803	9,648	0.2	102,700	0.4	62	14,149	0.3	143,582	0.5	46
5 and younger	8,306,038	673,038,126	124,180	3.0	1,325,901	0.5	100	58,904	1.4	621,264	0.6	59
6-14	3,048,313	256,077,377	66,978	3.7	683,139	0.5	105	36,618	2.0	367,548	0.6	65
15-20	3,127,327	291,536,180	44,902	3.1	404,701	0.4	96	55,729	3.9	503,452	0.5	47
21-44	1,907,505	196,033,226	14,409	3.8	137,071	0.5	109	23,383	6.2	225,605	0.5	49
45-64	350,334	27,354,909	3,523	6.9	38,152	0.7	134	3,899	7.7	42,373	0.6	45
65-74	214,888	15,052,222	2,537	7.9	26,170	0.6	96	2,221	6.9	23,815	0.6	37
75-84	87,063	5,484,308	1,438	10.4	14,066	0.6	80	785	5.7	7,848	0.6	33
85 and older	25,875	1,144,994	159	0.1	1,174	0.7	112	153	0.1	1,214	0.6	48
Unknown												

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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, UNITED STATES, 2004

Beneficiary Characteristics	ANTIASTHMATIC					ANTIDEPRESSANTS					ANTIVIRAL				
	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	Mean Rx \$	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	6,001,760	16.9 %	61,663,779	0.3	\$19	3,566,675	10.1 %	36,900,788	0.5	\$31	591,792	1.7 %	6,134,720	0.4	\$177
Female	3,237,824	15.4	33,391,990	0.3	19	2,504,852	11.9	25,791,047	0.5	31	353,987	1.7	3,640,118	0.4	134
Disabled	937,233	43.8	10,585,962	0.4	28	1,108,858	51.8	12,414,478	0.5	37	128,757	6.0	1,444,609	0.5	213
5 and younger	43,201	50.8	478,648	0.3	25	721	0.8	7,927	0.4	14	1,273	1.5	14,438	0.4	73
6-14	60,380	33.1	692,245	0.3	25	22,237	12.2	250,803	0.5	26	4,667	2.6	53,661	0.6	214
15-20	36,046	23.5	410,963	0.3	21	39,111	25.5	435,159	0.5	30	4,261	2.8	48,412	0.4	132
21-44	246,636	36.3	2,786,229	0.4	23	396,236	58.3	4,413,734	0.5	35	58,335	8.6	648,056	0.5	211
45-64	542,021	53.5	6,118,999	0.4	31	643,750	63.5	7,230,448	0.6	38	59,742	5.9	674,619	0.5	225
65-74	8,104	39.5	89,533	0.5	30	6,140	29.9	69,030	0.6	33	437	2.1	4,951	0.3	145
75-84	752	24.6	8,335	0.5	30	558	18.3	6,254	0.6	32	34	1.1	376	0.2	74
85 and older	93	11.8	1,010	0.5	28	105	13.3	1,123	0.7	34	8	1.0	96	0.1	5
Other Eligibles	2,300,317	12.2	22,804,733	0.2	15	1,395,869	7.4	13,376,154	0.4	26	225,196	1.2	2,195,371	0.3	81
5 and younger	752,066	17.8	7,431,396	0.2	13	3,982	0.1	41,581	0.3	11	19,509	0.5	202,279	0.1	12
6-14	606,399	14.9	6,253,488	0.2	16	105,993	2.6	1,123,756	0.4	22	22,069	0.5	236,021	0.2	50
15-20	254,394	8.8	2,537,559	0.2	13	212,437	7.3	2,109,406	0.4	22	32,669	1.1	319,911	0.2	36
21-44	532,983	7.8	5,013,940	0.3	16	873,229	12.8	8,121,434	0.4	26	131,133	1.9	1,233,663	0.3	92
45-64	121,069	18.6	1,206,291	0.4	26	167,319	25.7	1,627,013	0.5	35	17,665	2.7	179,651	0.4	206
65-74	17,836	19.7	196,313	0.4	28	16,564	18.3	182,068	0.5	29	1,240	1.4	13,802	0.2	70
75-84	10,882	19.3	117,767	0.4	26	10,350	18.3	110,800	0.6	31	628	1.1	7,005	0.2	30
85 and older	4,688	13.1	47,979	0.4	22	5,995	16.7	60,096	0.7	36	283	0.8	3,039	0.1	10
Male	2,761,524	19.3	28,252,885	0.3	19	1,061,505	7.4	11,107,373	0.5	31	237,692	1.7	2,493,716	0.5	241
Disabled	592,812	28.3	6,620,228	0.4	27	580,258	27.7	6,392,401	0.5	34	139,980	6.7	1,510,158	0.6	294
5 and younger	71,805	57.8	797,767	0.3	25	1,775	1.4	19,901	0.4	14	1,482	1.2	16,752	0.3	55
6-14	125,676	34.8	1,437,175	0.3	24	54,253	15.0	613,969	0.5	27	5,589	1.5	64,051	0.5	188
15-20	49,934	20.1	572,257	0.3	22	49,592	20.0	557,317	0.5	34	3,331	1.3	37,623	0.4	167
21-44	101,960	16.0	1,135,684	0.4	23	209,282	32.9	2,287,381	0.5	36	60,630	9.5	635,969	0.6	279
45-64	239,264	33.5	2,631,835	0.5	33	262,660	36.7	2,883,887	0.5	35	68,573	9.6	751,680	0.7	329
65-74	3,598	32.9	39,271	0.5	33	2,357	21.5	26,191	0.6	34	347	3.2	3,777	0.5	238
75-84	510	31.3	5,543	0.4	28	288	17.7	3,212	0.6	33	26	1.6	292	0.1	44
85 and older	65	18.8	696	0.3	18	51	14.8	543	0.6	30	2	0.6	14	0.1	17
Other Eligibles	2,168,372	17.7	21,630,821	0.2	16	481,106	3.9	4,714,500	0.4	27	97,679	0.8	983,401	0.4	159
5 and younger	1,037,467	23.6	10,194,220	0.2	14	6,149	0.1	64,838	0.3	11	20,521	0.5	212,022	0.1	10
6-14	793,380	19.2	8,138,528	0.3	17	144,073	3.5	1,525,958	0.4	24	17,975	0.4	192,474	0.2	53
15-20	183,782	10.3	1,853,833	0.3	16	111,001	6.2	1,104,075	0.4	27	9,368	0.5	94,238	0.2	59
21-44	87,015	6.0	778,400	0.3	20	145,786	10.1	1,300,250	0.4	28	31,652	2.2	300,059	0.5	256
45-64	47,001	12.5	455,969	0.4	29	60,997	16.3	580,596	0.5	32	16,898	4.5	170,751	0.6	353
65-74	10,581	20.8	113,675	0.4	31	6,553	12.9	70,923	0.5	31	798	1.6	8,723	0.3	120
75-84	6,686	20.7	71,518	0.4	29	4,347	13.5	46,198	0.6	32	334	1.0	3,722	0.2	37
85 and older	2,460	17.8	24,678	0.4	24	2,200	16.0	21,662	0.7	36	133	1.0	1,412	0.1	17
Unknown	3,026	2.1	22,035	0.2	13	584	0.4	3,255	0.6	32	180	0.1	1,181	0.2	31

Table ND7B

Nondual Beneficiaries

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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 PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, UNITED STATES, 2004

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	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	2,667,982	7.5 %	27,735,309	0.4	\$32	6,239,797	17.6 %	63,023,808	0.3	\$10	1,278,155	3.6 %	13,512,247	0.5	\$46
Female	1,772,674	8.4	18,527,268	0.4	32	4,426,785	21.1	44,428,429	0.3	9	393,001	1.9	4,171,923	0.5	44
Disabled	764,114	35.7	8,640,660	0.4	42	1,305,088	61.0	14,672,860	0.4	19	89,365	4.2	1,010,448	0.5	49
5 and younger	13,336	15.7	141,799	0.4	26	6,613	7.8	74,910	0.1	2	2,208	2.6	24,028	0.4	37
6-14	16,347	9.0	188,568	0.4	36	19,287	10.6	222,784	0.1	2	40,175	22.0	453,571	0.6	48
15-20	19,640	12.8	224,503	0.3	27	41,353	27.0	471,957	0.2	4	13,759	9.0	156,308	0.5	47
21-44	212,411	31.2	2,405,172	0.4	35	479,112	70.4	5,380,628	0.3	17	17,591	2.6	198,802	0.4	50
45-64	492,463	48.6	5,569,510	0.5	45	748,684	73.9	8,411,007	0.4	22	15,565	1.5	176,991	0.5	55
65-74	8,812	42.9	98,968	0.5	45	8,899	43.4	98,968	0.4	13	62	0.3	688	0.4	41
75-84	941	30.8	10,411	0.5	43	983	32.2	10,967	0.3	9	5	0.2	60	0.5	37
85 and older	164	20.8	1,729	0.6	43	157	19.9	1,639	0.3	11	0	0.0	0	0.0	0
Other Eligibles	1,008,279	5.3	9,885,362	0.3	23	3,120,897	16.5	29,752,487	0.2	5	303,633	1.6	3,161,464	0.5	43
5 and younger	115,730	2.7	1,026,314	0.2	10	104,868	2.5	1,100,496	0.1	1	13,207	0.3	139,423	0.3	28
6-14	109,684	2.7	1,166,721	0.2	11	225,698	5.5	2,400,566	0.1	1	203,273	5.0	2,142,704	0.5	44
15-20	127,917	4.4	1,291,407	0.2	12	534,036	18.4	5,176,563	0.2	2	43,431	1.5	453,075	0.5	43
21-44	466,725	6.8	4,469,946	0.3	24	1,997,626	29.2	18,480,700	0.2	5	38,144	0.6	370,786	0.4	39
45-64	133,872	20.6	1,341,977	0.4	42	214,631	33.0	2,118,050	0.3	11	5,252	0.8	52,070	0.5	55
65-74	30,376	33.5	331,960	0.4	41	24,015	26.5	264,538	0.3	9	163	0.2	1,788	0.4	36
75-84	16,930	30.0	184,277	0.5	43	13,639	24.2	147,423	0.3	10	91	0.2	892	0.5	31
85 and older	7,045	19.6	72,760	0.6	46	6,384	17.8	64,151	0.4	15	72	0.2	726	0.6	32
Male	894,324	6.2	9,201,092	0.4	32	1,812,117	12.6	18,589,477	0.3	13	885,050	6.2	9,339,267	0.5	47
Disabled	417,182	19.9	4,615,044	0.5	41	741,929	35.4	8,116,217	0.4	22	213,666	10.2	2,403,195	0.6	51
5 and younger	17,318	13.9	185,741	0.4	27	11,094	8.9	126,198	0.1	1	8,020	6.5	88,632	0.4	30
6-14	23,394	6.5	270,224	0.4	36	32,844	9.1	380,779	0.1	2	143,879	39.8	1,618,001	0.6	51
15-20	20,514	8.3	234,405	0.4	33	44,124	17.8	503,507	0.2	4	42,976	17.3	488,566	0.6	53
21-44	119,778	18.9	1,330,175	0.4	39	259,416	40.8	2,828,264	0.4	20	13,030	2.1	144,492	0.5	54
45-64	231,937	32.4	2,547,430	0.5	45	390,352	54.6	4,232,571	0.5	29	5,732	0.8	63,206	0.5	58
65-74	3,673	33.6	40,731	0.5	45	3,571	32.6	39,053	0.4	15	24	0.2	254	0.4	49
75-84	488	30.0	5,470	0.5	48	454	27.9	5,042	0.3	11	4	0.2	32	0.3	16
85 and older	80	23.2	868	0.6	36	74	21.4	803	0.3	15	1	0.3	12	0.2	7
Other Eligibles	476,837	3.9	4,584,609	0.3	23	1,069,370	8.7	10,469,978	0.2	6	671,377	5.5	6,936,030	0.5	46
5 and younger	137,060	3.1	1,215,229	0.2	11	143,314	3.3	1,499,993	0.1	1	37,030	0.8	391,150	0.4	28
6-14	91,494	2.2	974,274	0.2	13	231,850	5.6	2,462,312	0.1	1	525,240	12.7	5,439,904	0.5	47
15-20	57,304	3.2	584,264	0.2	15	227,449	12.7	2,284,659	0.1	2	97,027	5.4	995,851	0.5	50
21-44	104,973	7.3	953,819	0.3	35	342,158	23.7	3,016,662	0.3	12	9,729	0.7	86,567	0.5	47
45-64	61,463	16.4	594,836	0.4	45	104,844	28.0	996,251	0.4	17	2,170	0.6	20,647	0.5	63
65-74	13,512	26.5	144,896	0.4	41	10,774	21.2	115,737	0.3	9	86	0.2	918	0.4	49
75-84	8,067	25.0	87,062	0.5	44	6,384	19.8	68,438	0.3	9	63	0.2	689	0.5	27
85 and older	2,964	21.5	30,229	0.6	45	2,597	18.8	25,926	0.4	14	32	0.2	304	0.5	22
Unknown	1,570	1.1	9,634	0.3	12	2,513	1.8	12,266	0.3	4	114	0.1	1,110	0.5	51

Table ND7C

Nondual Beneficiaries

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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, UNITED STATES, 2004

Beneficiary Characteristics	ANTIDIABETIC					DERMATOLOGICAL					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	1,333,318	3.8 %	13,967,582	0.6	\$41	7,273,047	20.5 %	74,716,079	0.2	\$7	35,483,047	276,797,838
Female	894,577	4.3	9,436,810	0.6	41	4,261,955	20.3	43,888,291	0.2	8	21,014,834	163,193,758
Disabled	550,961	25.8	6,176,037	0.6	43	836,947	39.1	9,633,488	0.2	10	2,138,665	22,114,582
	288	0.3	3,064	0.6	52	35,846	42.1	401,732	0.2	6	85,068	826,162
5 and younger	2,633	1.4	29,587	0.7	53	64,066	35.1	742,586	0.2	7	182,566	1,948,955
6-14	5,305	3.5	59,588	0.6	42	50,654	33.0	586,346	0.2	8	153,342	1,593,806
15-20	96,812	14.2	1,088,104	0.6	40	240,863	35.4	2,774,063	0.2	9	680,166	7,064,416
21-44	435,285	43.0	4,876,371	0.6	44	436,108	43.0	5,021,530	0.2	11	1,013,153	10,427,312
45-64	9,581	46.7	107,721	0.6	41	8,317	40.5	95,020	0.2	10	20,527	216,253
65-74	966	31.6	10,690	0.7	35	908	29.7	10,186	0.2	10	3,056	30,578
75-84	91	11.6	912	0.6	26	185	23.5	2,025	0.2	7	787	7,100
85 and older												
Other Eligibles	343,578	1.8	3,260,680	0.6	36	3,424,376	18.1	34,251,337	0.2	7	18,876,169	141,079,176
	1,848	0.0	18,088	0.7	47	1,318,575	31.2	12,826,002	0.1	5	4,227,949	30,838,570
5 and younger	14,591	0.4	145,423	0.7	51	849,000	20.9	8,949,705	0.1	7	4,069,582	33,200,018
6-14	20,166	0.7	194,114	0.5	40	417,624	14.4	4,250,547	0.2	8	2,906,882	21,594,777
15-20	155,682	2.3	1,401,543	0.5	32	660,075	9.7	6,343,127	0.2	8	6,838,640	48,846,857
21-44	101,876	15.7	971,802	0.6	40	126,451	19.5	1,298,212	0.2	11	650,064	4,927,467
45-64	30,110	33.2	322,772	0.6	36	27,060	29.8	303,424	0.2	10	90,724	849,689
65-74	15,271	27.1	165,107	0.6	32	16,671	29.5	185,915	0.2	10	56,441	523,069
75-84	4,034	11.2	41,831	0.6	29	8,920	24.9	94,405	0.2	9	35,887	298,729
85 and older												
Male	438,622	3.1	4,529,833	0.6	42	3,005,490	21.0	30,785,035	0.2	7	14,326,763	112,885,155
Disabled	279,357	13.3	3,050,687	0.6	42	583,095	27.8	6,641,736	0.2	10	2,096,813	21,096,297
	350	0.3	3,604	0.7	58	48,075	38.7	537,857	0.1	6	124,185	1,206,174
5 and younger	3,111	0.9	34,886	0.7	53	97,764	27.0	1,132,480	0.1	6	361,448	3,835,324
6-14	4,173	1.7	46,949	0.6	50	64,811	26.1	750,856	0.2	9	248,044	2,586,420
15-20	55,220	8.7	604,861	0.6	41	154,102	24.3	1,759,440	0.2	10	635,360	6,383,639
21-44	212,511	29.7	2,316,057	0.6	42	213,688	29.9	2,408,197	0.2	12	714,858	6,953,777
45-64	3,497	31.9	38,772	0.6	38	4,031	36.8	45,840	0.2	11	10,946	111,659
65-74	449	27.6	5,068	0.6	35	539	33.1	6,150	0.2	9	1,627	16,173
75-84	46	13.3	490	0.6	25	85	24.6	916	0.2	6	345	3,131
85 and older												
Other Eligibles	159,230	1.3	1,479,011	0.6	43	2,421,760	19.8	24,139,578	0.2	7	12,229,950	91,788,858
	2,127	0.0	20,620	0.6	47	1,272,891	29.0	12,291,940	0.1	5	4,391,332	32,088,148
5 and younger	11,683	0.3	115,398	0.7	56	669,415	16.2	7,061,552	0.1	6	4,134,110	33,736,974
6-14	10,439	0.6	99,903	0.7	61	272,514	15.2	2,792,401	0.2	10	1,791,603	13,622,792
15-20	47,587	3.3	408,037	0.6	41	117,626	8.2	1,079,704	0.2	11	1,441,175	8,817,155
21-44	64,908	17.3	596,888	0.6	42	61,881	16.5	612,355	0.2	13	374,727	2,649,372
45-64	13,510	26.5	142,323	0.6	35	14,205	27.9	157,586	0.2	10	50,911	460,861
65-74	7,205	22.3	77,662	0.6	33	9,236	28.6	102,270	0.2	9	32,306	295,868
75-84	1,771	12.8	18,180	0.6	32	3,992	29.0	41,770	0.2	9	13,786	117,688
85 and older												
Unknown	192	0.1	1,167	0.8	39	6,869	4.9	49,940	0.2	5	141,450	718,925

Table ND7D

Nondual Beneficiaries

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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, UNITED STATES, 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	\$513	7.6	76,716	804,570
Age				
0-64	569	8.0	55,366	589,245
65-74	456	7.2	6,890	73,465
75-84	353	6.6	6,954	70,108
85 and older	272	5.7	7,506	71,752
Unknown	0	0.0	0	0
Gender				
Female	517	8.0	40,822	431,682
Male	509	7.1	35,836	372,413
Unknown	404	7.2	58	475
Race				
White	526	8.2	43,237	445,565
African American	518	7.2	20,158	215,830
Other/unknown	465	6.2	13,321	143,175
Basis of Eligibility^c				
Aged	352	6.5	18,699	186,813
Disabled	562	7.9	57,547	613,979
Adults	884	5.4	240	1,769
Children	398	5.2	224	1,953
Unknown	703	11.3	6	56

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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 80,321 beneficiaries who were in nursing facilities for part of their enrollment and their 770,890 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, UNITED STATES, 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	0.6	0.3	0.0	0.3	\$81	\$68	\$6	\$8	\$133	\$216	\$128	\$31	298,477	\$39,626,518	45,089	58.8 %	486,652
Biologicals	0.1	0.1	0.0	0.0	39	25	3	11	342	392	2,560	217	4,237	1,448,674	3,266	4.3	37,288
Antineoplastic Agents	0.6	0.1	0.0	0.5	82	29	1	51	148	496	212	105	26,404	3,902,482	4,646	6.1	47,463
Endocrine/Metabolic Drugs	1.3	0.5	0.2	0.6	61	46	5	10	48	86	28	18	424,905	20,187,217	30,971	40.4	332,739
Cardiovascular Agents	2.1	0.6	0.1	1.4	69	43	3	23	33	71	36	16	1,008,001	33,007,352	45,121	58.8	477,449
Respiratory Agents	1.0	0.4	0.0	0.5	46	34	1	11	48	82	45	21	314,999	15,094,286	30,656	40.0	329,668
Gastrointestinal Agents	1.2	0.4	0.1	0.7	71	52	3	16	60	116	50	23	518,230	30,917,430	40,729	53.1	433,216
Genitourinary Agents	0.7	0.4	0.0	0.3	42	31	3	8	61	82	59	31	115,153	7,039,134	15,469	20.2	169,531
CNS Drugs	2.1	1.0	0.1	1.0	218	183	10	26	102	174	74	27	1,287,947	131,318,886	55,863	72.8	601,357
Stimulants/Anti-obesity/Anorexia	0.8	0.3	0.0	0.5	50	41	0	9	64	136	38	19	8,093	516,783	982	1.3	10,371
Miscellaneous Psychological/																	
Neurological Agents	0.9	0.9	0.0	0.0	171	170	0	1	197	198	106	82	73,337	14,433,308	7,907	10.3	84,418
Analgesics and Anesthetics	1.3	0.4	0.0	0.8	65	51	2	12	51	121	109	15	500,636	25,781,930	37,455	48.8	395,471
Neuromuscular Agents	1.6	0.4	0.3	0.9	112	58	25	30	68	131	95	32	694,146	47,540,618	38,493	50.2	424,214
Nutritional Products	0.8	0.0	0.1	0.8	17	1	1	14	20	45	24	19	189,716	3,783,056	21,624	28.2	227,547
Hematological Agents	1.2	0.4	0.1	0.7	99	88	3	8	83	241	24	12	295,556	24,444,624	23,789	31.0	245,822
Topical Products	0.6	0.2	0.1	0.3	27	16	4	8	43	73	54	22	276,149	11,809,591	39,941	52.1	438,403
Miscellaneous Products	0.4	0.0	0.0	0.4	19	6	1	13	48	165	153	35	25,760	1,249,344	6,179	8.1	64,984
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	14	0	0	0	30	0	0	0	29,214	873,239	5,776	7.5	64,113
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.	6,090,960	412,974,472	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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 80,321 beneficiaries who were in nursing facilities for part of their enrollment and their 770,890 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 the U.S., 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, UNITED STATES, 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	\$98,386,104	49,537	64.6 %	554,968	1.0	\$186	\$177
ANTICONVULSANT	38,773,816	41,712	54.4	464,550	1.1	76	83
ANTIDEPRESSANTS	26,233,861	47,568	62.0	516,853	0.9	59	51
ULCER DRUGS	24,242,746	40,294	52.5	432,098	0.8	72	56
ANTIVIRAL	21,861,819	6,549	8.5	70,897	0.9	337	308
ANTIDIABETIC	15,509,263	32,990	43.0	357,755	0.9	48	43
ANALGESICS - Narcotic	14,519,164	38,223	49.8	397,644	0.8	44	37
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	14,452,455	9,520	12.4	101,994	0.7	192	142
HEMATOPOIETIC AGENTS	11,311,116	15,954	20.8	169,126	0.7	94	67
ANTIHYPERTENSIVE	11,052,874	15,632	20.4	172,517	0.8	82	64
Total	276,343,218	297,979		3,238,402	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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 80,321 beneficiaries who were in nursing facilities for part of their enrollment and their 770,890 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, UNITED STATES, 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	2,866,801	\$276,343,218	49,537	64.6 %	554,968	1.0	\$177	41,712	54.4 %	464,550	1.1	\$84
Female	1,593,650	148,337,768	26,935	66.0	303,028	0.9	173	22,015	53.9	246,187	1.1	83
Disabled	1,248,932	121,634,730	21,000	74.8	239,211	1.0	185	18,542	66.0	208,734	1.1	87
64 or younge ^r	1,191,525	116,417,958	19,725	74.6	224,797	1.0	187	17,784	67.3	200,364	1.1	88
65-74	49,951	4,617,883	1,091	79.5	12,348	1.0	174	672	49.0	7,432	1.0	62
75-84	6,443	527,802	164	72.2	1,851	0.8	131	79	34.8	869	0.9	42
85 and older	1,013	71,087	20	35.7	215	0.9	117	7	12.5	69	1.0	55
Other Eligibles	344,718	26,703,038	5,935	46.6	63,817	0.8	127	3,473	27.3	37,453	1.0	57
64 or younge ^r	4,263	544,666	50	24.5	474	0.8	156	79	38.7	813	1.1	79
65-74	111,655	9,657,398	1,966	69.9	22,131	0.9	168	1,410	50.2	15,834	1.1	67
75-84	121,117	9,024,665	1,999	46.2	21,375	0.8	119	1,229	28.4	13,049	0.9	50
85 and older	107,683	7,476,309	1,920	35.6	19,837	0.7	90	755	14.0	7,757	0.9	43
Male	1,271,718	127,897,349	22,570	63.0	251,623	1.0	182	19,674	54.9	218,142	1.1	85
Disabled	1,104,693	113,888,271	19,590	66.5	220,249	1.0	188	17,832	60.5	198,463	1.1	87
64 or younge ^r	1,072,627	110,843,779	18,841	66.4	211,883	1.0	189	17,346	61.1	193,041	1.1	87
65-74	26,987	2,629,118	635	72.0	7,094	1.0	178	423	48.0	4,705	1.1	66
75-84	4,584	380,190	108	70.1	1,222	0.9	134	58	37.7	668	0.8	41
85 and older	495	35,184	6	22.2	50	0.8	109	5	18.5	49	0.8	16
Other Eligibles	167,025	14,009,078	2,980	46.7	31,374	0.8	140	1,842	28.8	19,679	1.0	61
64 or younge ^r	5,826	1,141,903	46	13.8	427	0.8	182	96	28.8	1,004	1.0	98
65-74	58,856	5,170,757	1,108	61.0	12,241	0.9	174	798	43.9	8,834	1.1	71
75-84	61,727	4,757,205	1,104	49.6	11,603	0.8	129	630	28.3	6,708	1.0	52
85 and older	40,616	2,939,213	722	35.9	7,103	0.7	98	318	15.8	3,133	0.8	41
Unknown	1,433	108,101	32	55.2	317	0.8	96	23	39.7	221	1.0	66

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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 80,321 beneficiaries who were in nursing facilities for part of their enrollment and their 770,890 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2004. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

d. The top 10 drug groups were determined based on total 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26 2007).

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

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

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANTIVIRAL				
	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	47,568	62.0 %	516,853	0.9	\$51	40,294	52.5 %	432,098	0.8	\$56	6,549	8.5 %	70,897	0.9	\$308
Female	27,570	67.5	301,016	0.9	52	21,911	53.7	237,144	0.8	56	2,528	6.2	28,022	0.8	238
Disabled	20,212	72.0	223,804	0.9	54	15,811	56.3	172,991	0.8	57	2,176	7.7	24,213	0.8	263
64 or younger	19,407	73.4	214,887	0.9	54	14,977	56.7	164,096	0.8	57	2,138	8.1	23,824	0.8	264
65-74	684	49.9	7,575	0.8	48	700	51.0	7,500	0.7	58	34	2.5	352	0.4	179
75-84	100	44.1	1,119	0.9	46	111	48.9	1,156	0.7	48	2	0.9	13	0.2	12
85 and older	21	37.5	223	0.9	44	23	41.1	239	0.8	60	2	3.6	24	0.1	8
Other Eligibles	7,358	57.8	77,212	0.8	47	6,100	47.9	64,153	0.8	54	352	2.8	3,809	0.3	77
64 or younger	58	28.4	553	1.0	59	96	47.1	934	0.8	52	60	29.4	634	0.8	344
65-74	1,867	66.4	20,702	0.9	52	1,518	54.0	16,648	0.8	57	62	2.2	682	0.3	75
75-84	2,620	60.6	27,418	0.8	47	2,096	48.5	21,983	0.8	55	115	2.7	1,285	0.1	12
85 and older	2,813	52.2	28,539	0.8	43	2,390	44.3	24,588	0.8	51	115	2.1	1,208	0.1	8
Male	19,960	55.7	215,499	0.8	49	18,358	51.2	194,740	0.8	56	4,019	11.2	42,851	1.0	355
Disabled	16,530	56.1	180,114	0.8	49	15,287	51.9	163,058	0.8	57	3,704	12.6	39,441	1.0	364
64 or younger	16,085	56.7	175,348	0.8	49	14,804	52.1	157,844	0.8	57	3,651	12.9	38,906	1.1	365
65-74	370	42.0	3,967	0.8	47	392	44.4	4,206	0.8	59	50	5.7	509	0.7	277
75-84	61	39.6	661	0.9	44	78	50.6	878	0.8	48	1	0.6	12	0.1	3
85 and older	14	51.9	138	1.0	33	13	48.1	130	0.8	46	2	7.4	14	0.1	17
Other Eligibles	3,430	53.7	35,385	0.8	47	3,071	48.1	31,682	0.8	55	315	4.9	3,410	0.7	249
64 or younger	73	21.9	631	0.8	47	96	28.8	995	0.8	65	179	53.8	1,898	1.2	411
65-74	1,037	57.1	11,291	0.9	51	920	50.6	9,872	0.8	56	34	1.9	394	0.3	116
75-84	1,270	57.1	13,210	0.8	46	1,121	50.4	11,552	0.8	57	48	2.2	525	0.1	29
85 and older	1,050	52.2	10,253	0.8	44	934	46.5	9,263	0.7	51	54	2.7	593	0.1	11
Unknown	38	65.5	338	0.8	39	25	43.1	214	0.7	40	2	3.4	24	0.4	12

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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 80,321 beneficiaries who were in nursing facilities for part of their enrollment and their 770,890 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, UNITED STATES, 2004

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - Narcotic					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	32,990	43.0 %	357,755	0.9	\$43	38,223	49.8 %	397,644	0.8	\$37	9,520	12.4 %	101,994	0.7	\$142
Female	19,652	48.1	214,028	0.9	44	22,024	54.0	233,064	0.8	35	5,722	14.0	61,825	0.8	161
Disabled	14,686	52.3	161,329	0.9	46	16,403	58.4	175,820	0.9	39	2,841	10.1	31,921	0.7	221
64 or younger	13,729	51.9	150,882	0.9	46	15,766	59.6	169,274	0.9	39	2,601	9.8	29,188	0.7	232
65-74	817	59.5	8,968	0.9	42	544	39.7	5,601	0.8	27	186	13.6	2,116	0.7	102
75-84	116	51.1	1,279	0.8	34	78	34.4	797	0.5	25	44	19.4	516	0.6	86
85 and older	24	42.9	200	0.7	22	15	26.8	148	0.5	12	10	17.9	101	0.5	66
Other Eligibles	4,966	39.0	52,699	0.9	38	5,621	44.1	57,244	0.6	25	2,881	22.6	29,904	0.8	97
64 or younger	38	18.6	340	0.9	54	66	32.4	565	0.9	55	14	6.9	133	0.5	155
65-74	1,772	63.0	19,556	0.9	42	1,399	49.8	14,975	0.7	29	477	17.0	5,197	0.8	101
75-84	1,882	43.5	19,839	0.8	37	1,968	45.5	20,098	0.7	25	1,109	25.6	11,543	0.8	95
85 and older	1,274	23.6	12,964	0.8	34	2,188	40.6	21,606	0.6	22	1,281	23.8	13,031	0.8	96
Male	13,326	37.2	143,611	0.9	43	16,174	45.1	164,368	0.9	38	3,764	10.5	39,850	0.7	113
Disabled	10,918	37.1	118,397	0.9	44	13,757	46.7	140,691	0.9	40	2,381	8.1	25,848	0.7	122
64 or younger	10,511	37.0	114,088	0.9	44	13,438	47.3	137,379	0.9	41	2,262	8.0	24,521	0.7	124
65-74	335	38.0	3,528	0.9	38	261	29.6	2,703	0.7	22	85	9.6	950	0.7	85
75-84	62	40.3	706	0.8	36	51	33.1	540	0.5	17	30	19.5	340	0.7	88
85 and older	10	37.0	75	0.8	20	7	25.9	69	0.5	7	4	14.8	37	0.7	95
Other Eligibles	2,408	37.7	25,214	0.8	38	2,417	37.9	23,677	0.6	26	1,383	21.7	14,002	0.8	95
64 or younger	38	11.4	367	0.9	46	73	21.9	657	0.5	61	15	4.5	134	0.3	34
65-74	878	48.3	9,528	0.8	40	679	37.4	7,065	0.6	24	292	16.1	3,063	0.7	97
75-84	984	44.2	10,228	0.8	36	869	39.1	8,481	0.7	27	561	25.2	5,753	0.8	94
85 and older	508	25.3	5,091	0.8	37	796	39.6	7,474	0.6	24	515	25.6	5,052	0.8	96
Unknown	12	20.7	116	0.7	24	25	43.1	212	0.5	9	34	58.6	319	0.7	98

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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 80,321 beneficiaries who were in nursing facilities for part of their enrollment and their 770,890 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.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, UNITED STATES, 2004

Beneficiary Characteristics	HEMATOPOIETIC AGENTS					ANTIHYPERLIPIDEMIC					Benefit Months Among All-Year Nursing Facility Residents	
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		
All	15,954	20.8 %	169,126	0.7	\$67	15,632	20.4 %	172,517	0.8	\$64	76,716	804,570
Female	8,277	20.3	88,997	0.7	67	8,844	21.7	98,089	0.8	65	40,822	431,682
Disabled	5,914	21.1	63,927	0.7	74	6,695	23.8	75,101	0.8	65	28,090	304,230
64 or younger	5,530	20.9	59,871	0.7	76	6,337	24.0	71,093	0.8	65	26,435	286,417
65-74	321	23.4	3,418	0.6	51	315	23.0	3,513	0.8	67	1,372	14,802
75-84	50	22.0	515	0.6	24	38	16.7	440	0.7	52	227	2,438
85 and older	13	23.2	123	0.6	14	5	8.9	55	0.8	57	56	573
Other Eligibles	2,363	18.6	25,070	0.7	51	2,149	16.9	22,988	0.8	63	12,732	127,452
64 or younger	28	13.7	253	0.6	101	16	7.8	140	0.9	78	204	1,672
65-74	576	20.5	6,302	0.7	74	741	26.4	8,275	0.8	66	2,811	30,053
75-84	836	19.3	8,997	0.7	44	865	20.0	9,149	0.8	63	4,325	43,610
85 and older	923	17.1	9,518	0.7	41	527	9.8	5,424	0.8	58	5,392	52,117
Male	7,667	21.4	80,046	0.7	66	6,779	18.9	74,366	0.8	63	35,836	372,413
Disabled	6,349	21.6	66,349	0.7	71	5,714	19.4	63,083	0.8	63	29,451	309,688
64 or younger	6,111	21.5	63,749	0.7	72	5,525	19.5	60,942	0.8	64	28,388	298,386
65-74	181	20.5	1,963	0.7	51	160	18.1	1,805	0.7	56	882	9,370
75-84	48	31.2	536	0.7	64	28	18.2	329	0.7	56	154	1,672
85 and older	9	33.3	101	0.6	124	1	3.7	7	0.1	19	27	260
Other Eligibles	1,318	20.6	13,697	0.7	42	1,065	16.7	11,283	0.8	61	6,385	62,725
64 or younger	32	9.6	283	0.5	44	31	9.3	299	0.8	61	333	2,709
65-74	356	19.6	3,795	0.7	35	387	21.3	4,212	0.8	64	1,817	19,180
75-84	480	21.6	5,099	0.7	43	450	20.2	4,788	0.8	60	2,225	22,197
85 and older	450	22.4	4,520	0.7	48	197	9.8	1,984	0.8	59	2,010	18,639
Unknown	10	17.2	83	0.6	4	9	15.5	62	1.1	77	58	475

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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 80,321 beneficiaries who were in nursing facilities for part of their enrollment and their 770,890 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.11
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
UNITED STATES, 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	9,353,036	26.4 %	1.1	38,285,105	\$18	\$652,297,872	\$17	3.7 %	35,483,047
Age									
5 and younger	3,088,141	34.8	1.1	9,697,961	17	147,708,498	15	10.0	8,863,072
6-14	1,941,990	22.2	0.6	4,976,076	13	111,339,110	22	4.4	8,748,611
15-20	873,687	17.1	0.4	2,227,646	10	49,484,760	22	3.2	5,100,223
21-44	2,074,927	21.6	1.0	9,146,469	17	159,729,771	17	2.9	9,595,502
45-64	1,238,384	45.0	4.0	11,063,996	62	170,597,882	15	2.7	2,752,963
65-74	77,943	45.0	3.9	673,810	45	7,749,618	12	2.7	173,186
75-84	36,709	39.3	3.5	326,631	40	3,738,116	11	2.8	93,512
85 and older	14,171	27.9	3.0	153,740	36	1,835,047	12	3.7	50,859
Unknown	7,084	6.7	0.2	18,776	1	115,070	6	5.6	105,119
Basis of Eligibility^c									
Aged	109,979	39.1	3.4	947,274	39	10,845,332	11	2.8	281,084
Disabled	1,873,524	44.2	3.7	15,715,530	76	321,789,997	20	3.1	4,235,657
Adults	1,959,956	19.1	0.7	6,750,836	9	93,487,415	14	2.9	10,259,716
Children	5,402,359	26.1	0.7	14,840,290	11	225,715,232	15	6.0	20,685,655
Unknown	7,218	34.5	1.5	31,175	22	459,896	15	1.3	20,935
Gender									
Female	5,612,351	26.7	1.1	23,681,288	19	390,283,852	16	3.8	21,037,837
Male	3,733,575	26.0	1.0	14,585,915	18	261,852,517	18	3.4	14,350,769
Unknown	7,110	7.5	0.2	17,902	2	161,503	9	5.1	94,441
Race									
White	4,087,092	26.7	1.2	18,136,378	21	321,550,228	18	3.3	15,316,973
African American	2,016,964	23.8	0.9	7,194,869	14	118,098,301	16	3.2	8,461,367
Other/unknown	3,248,980	27.8	1.1	12,953,858	18	212,649,343	16	5.0	11,704,707
Use of Nursing Facilities^d									
Entire year	50,415	65.7	13.0	994,722	170	13,078,258	13	3.2	76,716
Part year	60,724	75.6	9.5	759,679	161	12,934,736	17	3.4	80,321
None	9,241,897	26.2	1.0	36,530,704	18	626,284,878	17	3.7	35,326,010
Maintenance Assistance Status									
Cash	3,683,045	31.8	1.7	20,037,972	31	364,627,169	18	3.3	11,595,078
Medically needy	504,727	29.1	1.3	2,170,332	18	30,485,612	14	3.3	1,733,725
Poverty related	3,287,404	26.1	0.7	9,196,386	12	146,355,630	16	5.9	12,610,950
Other/unknown	1,877,860	19.7	0.7	6,880,415	12	110,829,461	16	3.3	9,543,294

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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 excluded 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 or 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}
UNITED STATES, 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	0.1	\$2	\$17	\$0	\$0	276,797,838
Age						
5 and younger	0.1	2	15	0	0	65,184,516
6-14	0.1	2	22	0	0	72,728,991
15-20	0.1	1	22	0	0	39,400,491
21-44	0.1	2	17	0	1	71,113,160
45-64	0.4	7	15	0	2	24,959,167
65-74	0.4	5	12	0	1	1,639,119
75-84	0.4	4	11	0	1	866,405
85 and older	0.4	4	12	0	1	427,093
Unknown	0.0	0	6	0	0	478,896
Basis of Eligibility^c						
Aged	0.4	4	11	0	1	2,554,223
Disabled	0.4	7	20	0	2	43,212,217
Adults	0.1	1	14	0	0	71,725,363
Children	0.1	1	15	0	0	159,123,331
Unknown	0.2	3	15	0	1	182,704
Gender						
Female	0.1	2	16	0	1	163,272,036
Male	0.1	2	18	0	0	112,966,529
Unknown	0.0	0	9	0	0	559,273
Race						
White	0.1	3	18	0	1	123,956,795
African American	0.1	2	16	0	0	69,435,201
Other/unknown	0.2	3	16	0	0	83,405,842
Use of Nursing Facilities^d						
Entire year	1.2	16	13	0	5	804,570
Part year	1.0	17	17	0	4	770,890
None	0.1	2	17	0	0	275,222,378
Maintenance Assistance Status						
Cash	0.2	4	18	0	1	95,522,253
Medically needy	0.2	2	14	0	1	12,366,546
Poverty related	0.1	2	16	0	0	96,826,929
Other/unknown	0.1	2	16	0	0	72,082,110

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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 excluded 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}
UNITED STATES, 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	12,025,882	\$54	\$652,297,872	100.0 %	38,285,105	\$17	100.0 %
Anorexia or weight loss/gain	8,208	174	1,425,207	0.2	22,322	64	0.1
Fertility drugs	650	129	84,042	0.0	1,200	70	0.0
Drugs for cosmetic purposes	7,494	17	130,330	0.0	11,163	12	0.0
Cough and cold medications	4,161,127	43	179,884,301	27.6	8,342,809	22	21.8
Vitamins and minerals	816,949	64	52,244,201	8.0	2,838,243	18	7.4
Non-prescription drugs	5,385,593	39	212,145,148	32.5	18,324,380	12	47.9
Barbiturates	69,420	61	4,252,778	0.7	565,358	8	1.5
Benzodiazepines	1,243,898	109	134,963,254	20.7	7,256,611	19	19.0
Other Part D Excl Rx Drugs	332,543	202	67,168,611	10.3	923,019	73	2.4

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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 excluded 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, UNITED STATES, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	47,083,636	317,007	5,044,218	13,002,057	28,698,527	21,827	438,484,594	2,994,231	54,261,846	109,482,213	271,553,747	192,557
Age												
5 and younger	11,872,444	94	249,385	1,038	11,621,924	3	108,512,474	719	2,649,790	5,854	105,856,098	13
6-14	12,501,970	112	692,465	2,365	11,807,028	0	125,145,159	1,139	7,833,196	15,189	117,295,635	0
15-20	6,734,253	143	490,851	1,174,129	5,068,724	406	61,995,813	1,237	5,417,414	9,274,289	47,300,136	2,737
21-44	12,013,064	579	1,550,928	10,351,385	102,280	7,892	104,409,426	3,787	16,659,105	87,085,145	597,093	64,296
45-64	3,494,299	1,796	2,018,604	1,459,692	791	13,416	34,420,046	14,318	21,254,893	13,021,609	4,794	124,432
65-74	200,432	162,524	35,784	2,008	11	105	1,978,540	1,577,165	384,962	15,279	76	1,058
75-84	104,649	99,332	5,011	299	7	0	1,002,904	949,355	51,561	1,935	53	0
85 and older	53,644	52,209	1,181	212	40	2	458,116	445,769	10,883	1,133	320	11
Unknown	108,881	218	9	10,929	97,722	3	562,116	742	42	61,780	499,542	10
Gender												
Female	27,468,346	207,184	2,552,352	10,369,646	14,317,352	21,812	254,123,432	1,964,292	27,781,454	88,531,231	135,654,024	192,431
Male	19,517,106	109,585	2,491,692	2,627,984	14,287,834	11	183,752,374	1,027,983	26,479,042	20,936,922	135,308,321	106
Unknown	98,184	238	174	4,427	93,341	4	608,788	1,956	1,350	14,060	591,402	20
Race												
White	19,293,102	107,397	2,356,784	5,430,319	11,387,078	11,524	178,985,372	975,414	25,032,543	45,468,158	107,412,083	97,174
African American	11,618,521	42,450	1,375,772	2,790,484	7,406,519	3,296	114,298,164	399,137	14,971,857	24,959,919	73,938,583	28,668
Other/unknown	16,172,013	167,160	1,311,662	4,781,254	9,904,930	7,007	145,201,058	1,619,680	14,257,446	39,054,136	90,203,081	66,715
Use of Nursing Facilities^c												
Entire year	77,350	18,866	57,994	255	229	6	812,427	188,880	619,596	1,879	2,016	56
Part year	81,972	10,788	66,572	3,474	1,081	57	826,537	101,148	681,748	33,110	9,974	557
None	46,924,314	287,353	4,919,652	12,998,328	28,697,217	21,764	436,845,630	2,704,203	52,960,502	109,447,224	271,541,757	191,944
Maintenance Assistance Status												
Cash	17,192,730	97,939	4,271,572	4,361,341	8,461,878	0	173,001,196	1,031,336	47,248,478	39,236,277	85,485,105	0
Medically needy	2,255,416	100,602	204,704	990,528	959,582	0	19,109,232	935,533	1,764,572	8,182,713	8,226,414	0
Poverty related	15,612,909	45,069	213,009	1,329,949	14,003,055	21,827	141,825,053	399,953	1,958,732	8,078,105	131,195,706	192,557
Other/unknown	12,022,581	73,397	354,933	6,320,239	5,274,012	0	104,549,113	627,409	3,290,064	53,985,118	46,646,522	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	26,604,846	264,004	3,823,648	7,762,515	14,734,021	20,658	235,203,732	2,454,546	40,548,794	60,478,319	131,540,832	181,241
FFS part year, with Rx claims	2,848,950	7,418	187,875	928,411	1,725,055	191	28,176,665	75,546	2,034,392	8,700,485	17,364,354	1,888
FFS part year, no Rx claims	4,333,848	5,538	109,591	1,112,097	3,106,567	55	39,597,584	50,384	1,114,625	9,641,168	28,790,928	479
MC all year, with Rx claims	2,104,415	6,766	279,651	554,259	1,263,692	47	22,961,140	77,372	3,275,120	5,804,440	13,803,715	493
MC all year, no Rx claims	11,190,223	33,280	643,421	2,644,656	7,867,995	871	112,542,542	336,382	7,288,872	24,857,462	80,051,403	8,423

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

- 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, UNITED STATES, 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	47,083,636	438,484,594	35,483,047	276,797,838	409,012	161,686,756
Fee-for-service (FFS) all year	26,604,846	235,203,732	26,604,846	235,178,279	0	25,453
FFS part year, with Rx claims	2,848,950	28,176,665	2,848,950	11,078,563	0	17,098,102
FFS part year, with no Rx claims	4,333,848	39,597,584	4,333,781	12,089,699	67	27,507,885
Managed care (MC) all year, with Rx claims	2,104,415	22,961,140	1,695,470	18,451,297	408,945	4,509,843
MC all year, with no Rx claims	11,190,223	112,542,542	0	0	0	112,542,542
Unknown	1354	2931	0	0	0	2931

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

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.

APPENDIX TABLE A.3
MANAGED CARE PENETRATION RATES, ALL STATES COMBINED AND BY STATE, BY BASIS OF ELIGIBILITY
NONDUAL BENEFICIARIES, UNITED STATES, 2004a,b

	All Nonduals		Aged/Disabled			Adults/Children		
	Number of Beneficiaries	Percentage of Beneficiaries Enrolled in MC all Year	Number of Beneficiaries	Number of Beneficiaries Enrolled in MC all Year	Percentage of Beneficiaries Enrolled in MC all Year	Number of Beneficiaries	Number of Beneficiaries Enrolled in MC all Year	Percentage of Beneficiaries Enrolled in MC all Year
All States	47,083,636	28.2 %	5,361,225	963,118	18.0 %	41,700,584	12,330,602	29.6 %
Alabama	732,938	0.0	111,448	26	0.0	621,124	2	0.0
Alaska	117,291	0.0	8,425	0	0.0	108,728	0	0.0
Arizona	1,164,203	76.5	82,535	42,193	51.1	1,081,668	848,741	78.5
Arkansas	609,734	0.0	69,844	0	0.0	539,475	0	0.0
California	8,520,405	33.8	687,491	149,955	21.8	7,826,057	2,726,864	34.8
Colorado	451,491	12.6	52,317	10,828	20.7	399,017	46,041	11.5
Connecticut	424,296	69.5	32,583	12	0.0	391,535	294,667	75.3
D.C.	141,661	93.7	11,641	11,605	99.7	129,976	121,157	93.2
Delaware	141,804	61.7	24,136	2,719	11.3	117,668	84,745	72.0
Florida	2,277,811	23.0	313,668	71,818	22.9	1,963,937	452,289	23.0
Georgia	1,503,848	0.0	160,634	0	0.0	1,340,490	0	0.0
Hawaii	194,463	61.3	16,489	1,566	9.5	177,936	117,707	66.2
Idaho	198,401	0.0	18,967	0	0.0	179,434	0	0.0
Illinois	1,839,605	6.4	195,741	29	0.0	1,643,390	117,170	7.1
Indiana	828,140	26.1	79,429	5,863	7.4	748,461	210,326	28.1
Iowa	323,627	8.6	34,500	0	0.0	289,127	27,846	9.6
Kansas	284,268	15.9	32,188	9	0.0	251,966	45,151	17.9
Kentucky	676,814	21.5	136,256	22,819	16.7	540,190	122,987	22.8
Louisiana	989,334	0.0	132,919	0	0.0	855,722	0	0.0
Maine	249,409	0.0	25,393	0	0.0	223,873	0	0.0
Maryland	719,460	59.6	90,673	56,657	62.5	628,458	372,029	59.2
Massachusetts	822,217	29.0	147,101	17,716	12.0	675,116	220,755	32.7
Michigan	1,426,885	46.5	181,766	110,682	60.9	1,244,273	552,422	44.4
Minnesota	603,358	38.0	58,503	2,219	3.8	544,855	226,757	41.6
Mississippi	615,137	0.0	95,827	0	0.0	519,155	0	0.0
Missouri	1,041,473	41.0	106,065	229	0.2	934,904	426,908	45.7
Montana	81,257	0.0	11,156	0	0.0	70,087	0	0.0
Nebraska	223,653	54.3	16,609	9,741	58.6	206,702	111,699	54.0
Nevada	218,793	27.2	23,586	0	0.0	195,063	59,408	30.5
New Hampshire	111,044	0.0	8,823	0	0.0	102,221	0	0.0
New Jersey	797,275	60.4	107,700	38,035	35.3	689,354	443,326	64.3
New Mexico	470,181	44.3	36,285	22,190	61.2	433,590	186,041	42.9
New York	3,734,091	46.7	470,851	79,905	17.0	3,262,517	1,664,006	51.0
North Carolina	1,227,366	0.8	152,927	349	0.2	1,074,439	9,068	0.8
North Dakota	59,940	1.0	4,876	0	0.0	55,064	622	1.1

Appendix Table A.3

Nondual Beneficiaries

	All Nonduals		Aged/Disabled			Adults/Children		
	Number of Beneficiaries	Percentage of Beneficiaries Enrolled in MC all Year	Number of Beneficiaries	Number of Beneficiaries Enrolled in MC all Year	Percentage of Beneficiaries Enrolled in MC all Year	Number of Beneficiaries	Number of Beneficiaries Enrolled in MC all Year	Percentage of Beneficiaries Enrolled in MC all Year
Ohio	1,772,259	24.0	217,771	1,912	0.9	1,554,488	423,793	27.3
Oklahoma	584,645	0.0	53,560	0	0.0	531,085	0	0.0
Oregon	381,247	50.9	40,822	24,138	59.1	340,180	169,778	49.9
Pennsylvania	1,529,848	58.9	318,009	203,906	64.1	1,210,766	697,416	57.6
Rhode Island	177,237	66.9	24,957	2,862	11.5	151,990	115,643	76.1
South Carolina	813,198	4.5	93,900	3,677	3.9	719,138	32,945	4.6
South Dakota	106,737	0.0	8,633	0	0.0	98,058	0	0.0
Tennessee	1,312,222	0.0	182,938	0	0.0	1,128,440	0	0.0
Texas	3,318,905	15.1	301,230	37,146	12.3	3,016,914	464,272	15.4
Utah	269,736	0.0	19,311	29	0.2	250,150	0	0.0
Vermont	128,292	0.0	9,222	0	0.0	118,995	0	0.0
Virginia	668,515	34.4	88,111	31,268	35.5	580,074	198,655	34.2
Washington	1,041,208	38.6	108,235	211	0.2	932,973	401,455	43.0
West Virginia	318,139	15.7	71,494	755	1.1	246,065	49,206	20.0
Wisconsin	771,691	37.4	78,774	49	0.1	692,640	288,705	41.7
Wyoming	68,084	0.0	4,906	0	0.0	63,056	0	0.0

Source: Data for this table are from the MAX 2004 file for the U.S., released by CMS in 03/2008. This table was produced on 09/25/2008.

a. Appendix Table A.3 was derived from data contained in Appendix Table A.1 for each state.

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.

CMS = Centers for Medicare & Medicaid Services; D.C. = District of Columbia; MAX = Medicaid Analytic Extract; MC = managed care.