

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2005 NORTH CAROLINA

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TABLE D.2

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

-			umber of Be			NORTH CAL	ROLINA, 200		ber of Bene	fit Month		
Beneficiary						Other/					-	Other/
Characteristics	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	240,333	135,468	102,854	1,986	25	0	2,550,559	1,424,220	1,108,640	17,453	246	0
Age												
5 and younger	20	0	17	0	3	0	195	0	176	0	19	0
6-14	35	0	28	0	7	0	352	0	290	0	62	0
15-20	411	0	393	4	14	0	4,543	0	4,346	37	160	0
21-44	39,427	2	38,076	1,348	1	0	422,255	8	410,380	11,862	5	0
45-64	64,421	11	63,819	591	0	0	693,643	99	688,384	5,160	0	0
65-74	54,721	54,352	329	40	0	0	585,811	582,447	3,001	363	0	0
75-84	49,947	49,801	143	3	0	0	528,515	526,951	1,533	31	0	0
85 and older	31,351	31,302	49	0	0	0	315,245	314,715	530	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	159,995	103,177	55,444	1,361	13	0	1,699,378	1,088,174	598,912	12,154	138	0
Male	80,338	32,291	47,410	625	12	0	851,181	336,046	509,728	5,299	108	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	124,331	70,395	52,817	1,113	6	0	1,286,797	718,893	558,211	9,634	59	0
African American	89,643	48,062	40,843	725	13	0	979,777	523,145	449,899	6,602	131	0
Other/unknown	26,359	17,011	9,194	148	6	0	283,985	182,182	100,530	1,217	56	0
Use of Nursing Facilities ^c												
Entire year	13,343	12,091	1,252	0	0	0	140,356	126,384	13,972	0	0	0
Part year	13,501	12,030	1,470	1	0	0	129,067	113,971	15,084	12	0	0
None	213,489	111,347	100,132	1,985	25	0	2,281,136	1,183,865	1,079,584	17,441	246	0
Maintenance Assistance Status												
Cash	110,451	60,377	48,537	1,534	3	0	1,209,974	658,382	537,478	14,081	33	0
Medically needy	7,533	5,992	1,466	75	0	0	69,963	54,693	14,643	627	0	0
Poverty-related	122,085	69,071	52,832	172	10	0	1,268,675	711,049	556,463	1,070	93	0
Other/unknown	264	28	19	205	12	0	1,947	96	56	1,675	120	0
Dual Medicare Status ^d												
Full dual, all year	233,353	131,729	99,637	1,962	25	0	2,475,190	1,384,320	1,073,399	17,225	246	0
Full dual, part year	6,980	3,739	3,217	24	0	0	75,369	39,900	35,241	228	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	226,702	128,045	96,795	1,841	21	0	2,502,179	1,398,928	1,086,185	16,843	223	0
FFS part year, with Rx claims	12,941	7,101	5,695	141	4	0	45,862	24,138	21,099	602	23	0
FFS part year, no Rx claims	690	322	364	4	0	0	2,518	1,154	1,356	8	0	0

a. Table D.2 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

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

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 2005. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eliability status.

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

TABLE D.3

ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}

DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of	Maan Dy f	¢ nor Dv	Mean \$, All	Rx \$ as a Percentage of All Medicaid FFS \$d	Number of
All	92.1	54.9	Mean Rx \$	\$ per RX	Medicaid FFS \$c \$12,879	30.1	Beneficiaries 240,333
Age	J2.1	04.3	ψ5,57 σ	Ψ	Ψ12,013	30.1	240,000
5 and younger	95.0	46.9	3,713	79	29,598	12.5	20
6-14	97.1	61.6	9,152	149	31,960	28.6	35
15-20	81.8	22.5	2,287	102	13,753	16.6	411
21-44	87.6	38.1	3,945	104	11,935	33.1	39,427
45-64	92.1	59.1	4,709	80	12,938	36.4	64,421
65-74	92.0	57.3	3,642	64	10,084	36.1	54,721
75-84	93.9	59.4	3,513	59	13,246	26.5	49,947
85 and older	95.4		3,076	55	18,198	16.9	31,351
Unknown	0.0	0.0	0,010	0	0	0.0	0
Basis of Eligibility		0.0	ŭ	Ü	· ·	0.0	· ·
Aged	93.5	57.9	3,465	60	13,119	26.4	135,468
Disabled	90.3	51.2	4,420	86	12,620	35.0	102,854
Adults	90.9	39.7	3,648	92	9,672	37.7	1,986
Children	96.0	32.1	5,013	156	36,181	13.9	25
Unknown	0.0	0.0	0	0	0	0.0	0
Gender							
Female	94.2	60.2	4,034	67	13,126	30.7	159,995
Male	87.9	44.2	3,560	81	12,389	28.7	80,338
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	92.5	60.9	4,347	71	14,201	30.6	124,331
African American	91.5	46.9	3,295	70	11,879	27.7	89,643
Other/unknown	92.0	53.3	3,631	68	10,048	36.1	26,359
Use of Nursing Fa	cilities ^f						
Entire year	97.4	81.2	5,009	62	45,130	11.1	13,343
Part year	98.1	65.4	4,150	63	25,453	16.3	13,501
None	91.4	52.5	3,787	72	10,068	37.6	213,489
Maintenance Assi	stance Status						
Cash	92.7	55.5	3,993	72	10,734	37.2	110,451
Medically needy	89.7	60.3	3,945	65	29,758	13.3	7,533
Poverty related	91.7	54.0	3,769	70	13,793	27.3	122,085
Other/unknown	78.0	27.2	2,255	83	6,358	35.5	264

a. Table D.3 includes beneficiaries represented by Cell G of Table 1.

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

c. In eight states (DE, IA, IL, 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 eight states (DE, IA, IL, 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

e, interuction dates or engoting to classificate data. Age, unactively during a continuous periodical serior and age who were determined to be engote because or disability or blindness. The children's group includes children's group includes children's group includes children's and adoptive services.

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

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

TABLE D.4

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}

DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

			_		Num	ber of Rx, P	ercentage w	ith:			Numb	er
Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	None		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	5.2	\$365	30.1	7.9	13.2	9.6	30.3	27.0	12.0	\$1,214	240,333	2,550,559
Age												
5 and younger	4.8	381	12.5	5.0	5.0	5.0	55.0	20.0	10.0	3,036	20	195
6-14	6.1	910	28.6	2.9	2.9	0.0	40.0	45.7	8.6	3,178	35	352
15-20	2.0	207	16.6	18.2	38.9	10.9	22.9	7.5	1.5	1,244	411	4,543
21-44	3.6	368	33.1	12.4	25.0	12.5	26.9	16.1	7.0	1,114	39,427	422,255
45-64	5.5	437	36.4	7.9	12.6	9.2	28.9	27.0	14.4	1,202	64,421	693,643
65-74	5.4	340	36.1	8.0	11.7	9.1	30.7	28.1	12.3	942	54,721	585,811
75-84	5.6	332	26.5	6.1	9.2	8.6	32.1	31.4	12.7	1,252	49,947	528,515
85 and older	5.6	306	16.9	4.6	8.6	8.7	34.2	32.2	11.6	1,810	31,351	315,245
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility	/e											
Aged	5.5	330	26.4	6.5	10.1	8.8	32.0	30.3	12.3	1,248	135,468	1,424,220
Disabled	4.8	410	35.0	9.7	17.3	10.4	28.0	22.9	11.6	1,171	102,854	1,108,640
Adults	4.5	415	37.7	9.1	17.8	13.3	31.2	19.7	8.8	1,101	1,986	17,453
Children	3.3	509	13.9	4.0	28.0	12.0	36.0	12.0	8.0	3,677	25	246
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Gender												
Female	5.7	380	30.7	5.8	10.4	8.9	31.3	29.9	13.7	1,236	159,995	1,699,378
Male	4.2	336	28.7	12.1	18.9	10.9	28.4	21.3	8.4	1,169	80,338	851,181
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	5.9	420	30.6	7.5	10.4	8.0	28.6	29.4	16.1	1,372	124,331	1,286,797
African American	4.3	301	27.7	8.5	16.9	11.5	32.4	24.0	6.8	1,087	89,643	979,777
Other/unknown	4.9	337	36.1	8.0	14.3	10.0	31.4	26.2	10.2	933	26,359	283,985
Use of Nursing Fa	cilities ^f											
Entire year	7.7	476	11.1	2.6	3.2	4.5	24.8	40.3	24.7	4,290	13,343	140,356
Part year	6.8	434	16.3	1.9	6.0	7.4	29.9	37.2	17.5	2,663	13,501	129,067
None	4.9	355	37.6	8.6	14.3	10.0	30.7	25.6	10.8	942	213,489	2,281,136
Maintenance Assi	stance Status	3										
Cash	5.1	365	37.2	7.3	14.0	9.6	30.5	27.1	11.5	980	110,451	1,209,974
Medically needy	6.5	425	13.3	10.3	7.7	6.6	25.4	31.6	18.5	3,204	7,533	69,963
Poverty related	5.2	363	27.3	8.3	12.9	9.7	30.5	26.7	12.0	1,327	122,085	1,268,675
Other/unknown	3.7	306	35.5	22.0	16.7	15.5	24.2	15.2	6.4	862	264	1,947

a. Table D.4 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. In eight states (DE, IA, IL, 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 eight states (DE, IA, IL, 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 D.5

AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{A, b, c}

DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

		All Do		Patente		d-Name	Off-Pater		d-Name	0	: ' - D.	
		All Rx			Drugs			Drugs			eric Dr	ugs
Beneficiary Characteristics	Number of Rx	Rx\$	\$ per Rx	Number of Rx	Rx\$	\$ per Rx	Number of Rx	Rx\$	\$ per Rx	Number of Rx	Rx\$	\$ per Rx
All	5.2	\$365	\$71	2.2	\$282	\$127	0.3	\$18	\$69	2.7	\$65	\$24
Age												
5 and younger	4.8	381	79	2.0	273	140	0.4	25	68	2.5	84	34
6-14	6.1	910	149	3.0	791	261	0.3	37	123	2.8	81	29
15-20	2.0	207	102	0.9	170	187	0.1	9	90	1.0	28	28
21-44	3.6	368	104	1.5	292	192	0.2	21	118	1.9	55	30
45-64	5.5	437	80	2.4	336	141	0.3	24	96	2.8	77	27
65-74	5.4	340	64	2.4	264	112	0.2	14	57	2.7	62	23
75-84	5.6	332	59	2.4	256	105	0.3	13	45	2.9	62	22
85 and older	5.6	306	55	2.2	227	102	0.3	14	41	3.0	64	2
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	(
Basis of Eligibility	rd											
Aged	5.5	330	60	2.4	253	107	0.3	14	48	2.8	62	22
Disabled	4.8	410	86	2.1	319	155	0.2	23	102	2.5	68	28
Adults	4.5	415	92	1.8	310	169	0.2	26	141	2.5	78	3′
Children	3.3	509	156	1.7	455	274	0.1	11	84	1.5	43	30
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	(
Gender												
Female	5.7	380	67	2.4	291	120	0.3	19	63	2.9	70	24
Male	4.2	336	81	1.8	263	145	0.2	16	87	2.2	56	26
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	(
Race												
White	5.9	420	71	2.5	318	128	0.3	23	72	3.1	78	26
African American	4.3	301	70	1.9	241	127	0.2	12	63	2.2	49	22
Other/unknown	4.9	337	68	2.2	260	120	0.2	16	67	2.5	61	24
Use of Nursing Fa	cilitiese											
Entire year	7.7	476	62	3.0	348	115	0.5	24	46	4.1	104	25
Part year	6.8	434	63	2.7	323	118	0.4	21	49	3.7	90	25
None	4.9	355	72	2.1	276	128	0.2	17	74	2.5	61	24
Maintenance Assi	stance Sta	tus										
Cash	5.1	365	72	2.2	286	129	0.2	16	69	2.6	62	24
Medically needy	6.5	425	65	2.6	314	121	0.4	22	53	3.5	88	26
Poverty related	5.2	363	70	2.2	277	125	0.3	19	70	2.7	67	25
Other/unknown	3.7	306	83	1.5	231	152	0.1	18	128	2.0	57	28

a. Table D.5 includes the beneficiaries represented by Cell G of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability

or hidness. 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 D.6 ${\tt MEDICAID\ PHARMACY\ BENEFIT\ USE\ AND\ REIMBURSEMENT,\ BY\ BRAND\ STATUS\ AND\ THERAPEUTIC\ CATEGORY^{a,\ b,\ c,\ d}}$ DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

			x per Ben ong User			Benefit M Use	onth Amo		,	\$ pei				_		Userse	
Therapeutic Category	P	atented Brand- Name		Seneric	F Total	Patented Brand- Name	Off- Patent Brand- Name G	Seneric	F Total	atented Brand- Name	Brand-	Generic	Total Number of Rx	Total Rx \$		As a Percentage of Dual Benes	Number of Benefit Months
Anti-infective Agents	0.4	0.1	0.0	0.2	\$34	\$26	\$3	\$5	\$95	\$228	\$85	\$22	544,815	\$51,685,659	139,582	58.1	1,527,834
Biologicals	0.6	0.0	0.3	0.3	2,057	4	1,144	908	3407	295	4,194	2,871	332	1,131,077	51	0.0	550
Antineoplastic Agents	0.5	0.1	0.0	0.4	89	59	0	30	185	473	141	84	53,211	9,850,815	10,445	4.3	110,446
Endocrine/Metabolic Drugs	1.0	0.4	0.2	0.5	59	45	5	8	57	109	33	18	1,320,693	75,238,468	117,206	48.8	1,275,724
Cardiovascular Agents	2.0	0.9	0.0	1.0	86	69	1	16	44	77	23	16	3,661,083	160,625,557	170,954	71.1	1,856,989
Respiratory Agents	0.8	0.4	0.1	0.2	51	42	4	5	67	94	66	20	970,783	65,358,793	116,975	48.7	1,282,574
Gastrointestinal Agents	8.0	0.5	0.0	0.3	87	76	1	11	107	156	71	34	1,070,328	114,790,957	120,708	50.2	1,315,089
Genitourinary Agents	0.5	0.4	0.0	0.1	38	33	1	4	75	88	71	34	205,638	15,320,275	36,977	15.4	404,477
CNS Drugs	1.3	0.6	0.0	0.7	124	106	2	16	97	175	155	24	1,819,627	176,787,189	131,829	54.9	1,422,425
Stimulants/Anti-obesity/Anorexia	0.5	0.3	0.0	0.2	79	70	2	7	143	204	112	37	15,037	2,155,201	2,511	1.0	27,414
Miscellaneous Psychological/ Neurological Agents	0.7	0.7	0.0	0.0	132	130	0	2	177	181	98	80	156,339	27,607,357	19,704	8.2	208,861
Analgesics and Anesthetics	8.0	0.2	0.0	0.6	55	26	10	19	69	174	228	32	1,263,556	86,687,715	143,733	59.8	1,570,365
Neuromuscular Agents	0.9	0.2	0.1	0.6	69	39	4	25	81	172	74	45	733,083	59,055,028	78,820	32.8	861,781
Nutritional Products	0.6	0.0	0.0	0.6	10	0	0	10	17	21	16	17	360,726	6,030,059	54,294	22.6	589,996
Hematological Agents	8.0	0.3	0.1	0.3	73	64	3	6	93	191	26	17	459,287	42,518,156	54,136	22.5	583,291
Topical Products	0.4	0.2	0.0	0.2	27	21	1	5	61	90	55	27	495,014	30,032,935	101,108	42.1	1,116,539
Miscellaneous Products	0.5	0.2	0.0	0.2	103	85	4	14	215	359	194	63	25,624	5,520,696	4,977	2.1	53,388
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	10	0	0	0	35	0	0	0	29,631	1,031,217	9,507	4.0	104,846
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.	13,184,807	931,427,154	n.a.	n.a.	n.a.

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

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

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

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 North Carolina, 25,854.1 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

Bene(s) = beneficiary who had at least one prescription filled in a given therapeutic category during 2005.

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 D.7 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c} DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

	-		Users		Am	nong User	'S
Top 10 Drug Groups	Total Medicaid Rx	Number of Users	As a Percentage of Dual Beneficiaries	Number of Benefit Months		\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$100,333,565	57,251	23.8	631,260	0.7	\$239	\$159
ULCER DRUGS	91,463,393	119,345	49.7	1,324,076	0.6	114	69
ANTIHYPERLIPIDEMIC	62,466,316	90,693	37.7	1,015,464	0.6	98	62
ANTIDIABETIC	50,514,670	101,161	42.1	1,126,472	0.7	67	45
ANTIDEPRESSANTS	47,798,500	113,108	47.1	1,244,022	0.6	65	38
ANTICONVULSANT	46,084,691	62,470	26.0	692,419	0.7	99	67
ANALGESICS - Narcotic	44,805,694	179,656	74.8	2,020,825	0.4	59	22
ANTIHYPERTENSIVE	38,273,693	131,927	54.9	1,468,129	0.6	40	26
ANTIASTHMATIC	36,588,062	93,025	38.7	1,035,719	0.4	84	35
ANALGESICS - ANTI-INFLAMMATORY	28,618,493	76,878	32.0	874,862	0.4	92	33
Total	546,947,077	1,025,514		11,433,248	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for North Carolina, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table D.7 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. 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.

b. Medicaid relinious entent amounts presented in this table do not relied receitally equired residates from roug manufacturers to the state.

C. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx/2contentId=0980f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

⁼ Medicaid reimbursement; n.a. = not applicable.

TABLE D.7A MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c} DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

All Top 10 Drug Groups ANTIPSYCHOTICS ULCER DRUGS

Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users		Number of Benefit Months Among Users	of Rx	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	of Rx	Mean Rx \$ per Benefit Month
All	6,265,752	\$546,947,077	57,251	23.8	631,260	0.7	\$159	119,345	49.7	1,324,076	0.6	\$69
Female												
All Females	4,461,125	374,986,739	34,977	21.9	384,384	0.6	141	86,727	54.2	962,940	0.6	70
Female, Disabled												
All Ages	1,686,868	166,865,211	17,564	31.7	197,837	0.6	162	31,525	56.9	354,816	0.6	71
5 and younger	30	1,289	0	0.0	0	0.0	0	3	60.0	29	0.7	37
6-14	72	4,122	0	0.0	0	0.0	0	3	42.9	31	0.8	80
15-20	1,439	164,857	35	21.0	398	0.5	153	48	28.7	532	0.3	31
21-44	403,864	45,352,991	7,045	39.8	79,822	0.6	158	7,852	44.3	89,085	0.5	61
45-64	1,271,699	120,569,962	10,438	28.1	117,102	0.7	164	23,432	63.0	263,154	0.6	74
65-74	5,641	457,700	20	9.2	203	0.8	191	112	51.6	1,144	0.7	80
75-84	3,308	256,596	23	20.9	276	0.6	114	55	50.0	613	0.6	63
85 and older	815	57,694	3	7.1	36	0.7	137	20	47.6	228	0.6	68
Female, Other Eligibles												
All Ages	2,774,257	208,121,528	17,413	16.7	186,547	0.7	119	55,202	52.8	608,124	0.6	70
5 and younger	14	423	0	0.0	0	0.0	0	1	100.0	12	0.9	33
6-14	23	1,651	0	0.0	0	0.0	0	1	33.3	12	0.1	22
15-20	113	8,768	5	38.5	60	0.5	93	2	15.4	22	0.3	14
21-44	19,450	2,105,637	315	31.3	3,334	0.4	108	443	44.0	4,604	0.4	51
45-64	9,424	822,798	57	16.8	592	0.4	66	173	51.0	1,771	0.5	65
65-74	1,109,213	87,111,068	4,991	13.5	55,420	0.7	145	20,378	55.1	229,210	0.6	73
75-84	1,053,265	77,672,930	6,464	16.6	69,458	0.7	117	20,528	52.6	227,336	0.6	69
85 and older	582,755	40,398,253	5,581	20.5	57,683	0.6	98	13,676	50.2	145,157	0.7	65
Male												
All Males	1,804,627	171,960,338	22,274	27.7	246,876	0.7	187	32,618	40.6	361,136	0.6	67
Male, Disabled												
All Ages	1,052,366	114,143,938	16,729	35.3	188,042	0.7	204	17,587	37.1	196,708	0.6	67
5 and younger	87	5,882	0		0		0	8	66.7	96	0.7	31
6-14	246	22,651	1		12		548	16	76.2	190	0.5	
15-20	2,055	267,790	62		739	0.6	174	35	15.5	409	0.5	
21-44	353,919	44,939,159	8,367		94,125		202	6,032	29.6	67,673	0.5	
45-64	692,982	68,681,621	8,269		92,893		206	11,422	42.9	127,651	0.6	
65-74	2,102	158,227	21		165	0.7	140	48	42.9	412	0.6	
75-84	778	55,938	6		72		23	20	60.6	208	0.4	
85 and older	197	12,670	3		36		86	6	85.7	69	0.4	
oo ana olaei	191	12,070	3	72.3	30	0.0	30	0	00.7	09	0.4	39

TABLE D.7A MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c} DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

All Top 10 Drug Groups ANTIPSYCHOTICS ULCER DRUGS

				Users as %	Number of Benefit Months	of Rx	Mean Rx \$ per		Users as %	Number of Benefit Months	of Rx	Mean Rx \$ per
Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	of Dual Benes	Among Users	Benefit Month	Benefit Month	Number of Users	of Dual Benes	Among Users	Benefit Month	Benefit Month
Male, Other Eligibles	Trumber of TCX	πνφ	03013	Delies	03013	WOTH	WOTHER	03013	Deries	03013	WOTH	IVIOITI
All Ages	752,261	57,816,400	5,545	16.8	58,834	0.7	134	15,031	45.6	164,428	0.6	66
5 and younger	2	30	0	0.0	0	0.0	0	1	50.0	4	0.5	8
6-14	28	1,683	0	0.0	0	0.0	0	3	75.0	26	0.4	36
15-20	52	6,117	0	0.0	0	0.0	0	4	80.0	44	0.5	94
21-44	7,292	825,411	64	18.6	646	0.4	98	141	41.0	1,469	0.5	76
45-64	5,862	572,656	28	10.6	289	0.4	110	100	38.0	1,016	0.5	68
65-74	426,393	33,730,066	2,666	15.3	29,415	0.7	155	7,841	45.0	87,749	0.6	68
75-84	238,475	17,531,631	1,914	17.7	19,926	0.7	123	5,013	46.5	54,294	0.6	64
85 and older	74,157	5,148,806	873	21.4	8,558	0.6	93	1,928	47.3	19,826	0.7	61
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

a. Table D.7A includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. 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 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

TABLE D.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} DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

		ANTIH'	YPERLIPIDE	MIC			A۱	ITIDIABETIC				ANTI	DEPRESSAN	TS	
Beneficiary Characteristics	Number of Users		Number of Benefit N Months Among Users	Mean Number of Rx per F Benefit Month		Number of Users	Users as % of Dual Benes	Number of Benefit N Months Among Users	Mean Number of Rx per Benefit Month		Number of Users		Number of Benefit N Months Among Users	Mean Number of Rx per Benefit Month	Rx \$ per Benefit
AII	90,693	37.7	1,015,464	0.6	\$62	101,161	42.1	1,126,472	0.7	\$45	113,108	47.1	1,244,022	0.6	\$38
Female															
All Females	64,626	40.4	724,308	0.6	62	73,639	46.0	821,901	0.7	45	83,983	52.5	924,005	0.6	39
Female, Disabled															
All Ages	20,568	37.1	230,808	0.6	56	24,724	44.6	278,180	0.6	48	40,388	72.8	452,304	0.5	40
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	14.3	12	1.0	35	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	5	3.0	46	0.9	66	15	9.0	170	0.3	19	44	26.3	510	0.4	30
21-44	2,836	16.0	31,994	0.5	48	4,266	24.1	48,323	0.6	46	12,273	69.3	138,537	0.5	39
45-64	17,543	47.2	196,765	0.6	58	20,233	54.4	227,349	0.6	49	27,933	75.1	311,822	0.6	41
65-74	111	51.2	1,162	0.7	67	138	63.6	1,500	0.7	49	77	35.5	740	0.7	44
75-84	60	54.5	685	0.6	58	61	55.5	715	0.7	51	49	44.5	560	0.6	35
85 and older	12	28.6	144	0.5	49	11	26.2	123	0.8	66	12	28.6	135	0.7	38
Female, Other Eligibles															
All Ages	44,058	42.1	493,500	0.7	64	48,915	46.8	543,721	0.7	43	43,595	41.7	471,701	0.6	38
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0) (
6-14	1	33.3	12	0.6	38	0	0.0	0	0.0	0	1	33.3	12	0.4	42
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	15.4	24	0.6	59
21-44	128	12.7	1,327	0.4	38	186	18.5	1,839	0.5	32	910	90.4	9,078	0.4	38
45-64	133	39.2	1,350	0.5	50	153	45.1	1,556	0.6	44	326	96.2	3,273	0.5	39
65-74	20,466	55.4	231,044	0.6	63	22,337	60.4	252,119	0.7	46	15,589	42.2	173,849	0.6	36
75-84	17,382	44.6	194,658	0.7	66	18,494	47.4	205,333	0.7	42	15,565	39.9	169,319	0.7	38
85 and older	5,948	21.8	65,109	0.7	66	7,745	28.5	82,874	0.7	37	11,202	41.2	116,146	0.7	39
Male															
All Males	26,067	32.4	291,156	0.6	61	27,522	34.3	304,571	0.7	45	29,125	36.3	320,017	0.6	37
Male, Disabled															
All Ages	13,819	29.1	154,820	0.6	58	14,298	30.2	159,774	0.6	47	19,233	40.6	214,388	0.6	37
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0) C
6-14	2	9.5	24	0.3	12	2	9.5	24	0.5	55	0	0.0	0	0.0	0
15-20	8	3.5	91	0.4	34	9	4.0	99	0.6	58	68	30.1	776	0.4	30
21-44	3,440	16.9	38,678	0.6	52	3,439	16.9	38,583	0.6	47	8,103	39.8	90,687	0.5	37
45-64	10,299	38.7	115,363	0.6	60	10,764	40.4	120,295	0.7	47	11,017	41.4	122,522	0.6	37
65-74	55	49.1	495	0.6	56	68	60.7	605	0.6	49	34	30.4	279	0.5	31
75-84	12	36.4	133	0.8	86	15	45.5	156	0.6	47	9	27.3	100	0.6	24
85 and older	3	42.9	36	0.7	73	1	14.3	12	0.8	13	2	28.6	24	0.4	29

TABLE D.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}
DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

		ANTIHY	PERLIPIDE	MIC			AN	TIDIABETIC				ANTI	DEPRESSAN	TS	
			Number of	Mean				Number of	Mean				Number of	Mean	
		Users		lumber of	Mean		Users		lumber of	Mean		Users		Number of	Mean
	Number of	as % of Dual	Months Among	Benefit	Rx \$ per Benefit	Number of	as % of Dual	Months Among	Benefit	Rx \$ per Benefit	Number of	as % of Dual	Months Among	Benefit	Rx \$ per Benefit
Beneficiary Characteristics	Users		Users	Month				Users	Month			Benes	0	Month	
Male, Other Eligibles															
All Ages	12,248	37.2	136,336	0.7	65	13,224	40.2	144,797	0.7	43	9,892	30.0	105,629	0.6	36
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	25.0	7	0.3	2
15-20	1	20.0	12	0.9	89	1	20.0	10	0.5	37	0	0.0	0	0.0	0
21-44	90	26.2	868	0.5	42	93	27.0	875	0.5	53	241	70.1	2,439	0.4	33
45-64	110	41.8	1,060	0.5	47	116	44.1	1,115	0.6	38	157	59.7	1,553	0.4	32
65-74	7,528	43.2	84,500	0.6	64	7,856	45.0	87,624	0.7	45	4,940	28.3	54,485	0.6	36
75-84	3,758	34.8	41,732	0.7	67	4,091	37.9	44,371	0.7	40	3,173	29.4	33,586	0.6	38
85 and older	761	18.7	8,164	0.7	64	1,067	26.2	10,802	0.7	36	1,380	33.8	13,559	0.7	38
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for North Carolina, released by CMS in 10/2008. This table was produced on 04/23/2009.

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.

a. Table D.7B includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. 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 2005. 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).

TABLE D.7C MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c} DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

-		ANTI	CONVULSAN					ESICS - Naro				ANTIF	IYPERTENS	SIVE	
Beneficiary Characteristics	Number of Users		Number of Benefit N Months Among Users		Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit N Months Among Users			Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users		Rx \$ per Benefit
All	62,470	26.0	692,419	0.7	\$67	179,656	74.8	2,020,825	0.4	\$22	131,927	54.9	1,468,129	0.6	\$26
Female															
All Females	41,439	25.9	459,258	0.6	64	128,538	80.3	1,447,630	0.4	21	94,613	59.1	1,053,987	0.7	2
Female, Disable	d														
All Ages	22,659	40.9	253,476	0.7	79	57,062	102.9	648,816	0.4	27	25,696	46.3	289,145	0.6	25
5 and younger	0	0.0	0	0.0	0	2	40.0	17	0.2	1	2	40.0	17	0.4	11
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	42.9	36	0.5	16
15-20	31	18.6	347	0.7	117	107	64.1	1,250	0.1	2	37	22.2	410	0.4	. 11
21-44	7,770	43.9	87,328	0.7	91	17,314	97.7	197,684	0.4	26	4,246	24.0	47,880	0.5	21
45-64	14,790	39.8	165,136	0.7	73	39,393	106.0	447,245	0.4	28	21,169	56.9	238,161	0.6	26
65-74	47	21.7	440	0.7	46	150	69.1	1,527	0.4	15	132	60.8	1,420	0.6	2
75-84	20	18.2	222	0.6	28	76	69.1	862	0.4	21	79	71.8	911	0.7	2
85 and older	1	2.4	3	1.0	98	20	47.6	231	0.3	4	28	66.7	310	0.7	3
Female, Other El	ligibles														
All Ages	18,780	18.0	205,782	0.6	45	71,476	68.4	798,814	0.4	15	68,917	65.9	764,842	0.7	28
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	(
6-14	0	0.0	0	0.0	0	1	33.3	12	0.1	1	1	33.3	9	0.6	
15-20	3	23.1	36	0.4	26	18	138.5	207	0.2	2	1	7.7	10	0.4	. 4
21-44	455	45.2	4,484	0.5	70	1,244	123.5	12,810	0.4	36	219	21.7	2,204	0.5	19
45-64	137	40.4	1,438	0.6	76	412	121.5	4,376	0.4	32	176	51.9	1,795	0.6	28
65-74	7,799	21.1	87,587	0.6	49	27,995	75.8	319,095	0.4	15	26,596	72.0	299,865	0.7	28
75-84	6,702	17.2	73,404	0.6	42	26,097	66.9	293,735	0.4	14	26,781	68.6	298,901	0.7	28
85 and older	3,684	13.5	38,833	0.6	36	15,709	57.7	168,579	0.4	15	15,143	55.6	162,058	0.7	27
Male															
All Males	21,031	26.2	233,161	0.7	72	51,118	63.6	573,195	0.4	26	37,314	46.4	414,142	0.6	23
Male, Disabled															
All Ages	15,166	32.0	169,256	0.7	81	32,539	68.6	367,654	0.4	32	18,271	38.5	204,287	0.6	23
5 and younger	2	16.7	24	0.4	110	2	16.7	15	0.3	2	1	8.3	12	0.2	
6-14	1	4.8	12	0.1	37	9	42.9	102	0.1	1	14	66.7	149	0.6	10
15-20	55	24.3	653	0.7	96	87	38.5	1,029	0.2	2	45	19.9	528	0.4	- 13
21-44	6,584	32.3	73,640	0.7	89	12,621	62.0	143,305	0.4	32	4,833	23.7	54,019	0.5	2
45-64	8,499	31.9	94,694	0.7	74	19,734	74.1	222,364	0.4	31	13,281	49.9	148,608	0.6	24
65-74	20	17.9	173	0.7	53	56	50.0	506	0.5	15	67	59.8	630	0.5	18
75-84	4	12.1	48	0.4	31	26	78.8	285	0.3	15	26	78.8	293	0.5	19
85 and older	1	14.3	12	0.1	9	4	57.1	48	0.5	7	4	57.1	48	0.9	24

TABLE D.7C MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS

SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

	-	ANTI	CONVULSAN	IT			ANALG	ESICS - Nard	cotic			ANTIF	HYPERTENSI	VE	
			Number of	Mean				Number of	Mean				Number of	Mean	
		Users	Benefit N	lumber of	Mean		Users	Benefit N	lumber of	Mean		Users	Benefit N	lumber of	Mean
		as %	Months	Rx per	Rx \$ per		as %	Months	Rx per	Rx \$ per		as %	Months	Rx per f	Rx \$ per
Beneficiary	Number of	of Dual	Among	Benefit	Benefit	Number of	of Dual	Among	Benefit	Benefit	Number of	of Dual	Among	Benefit	Benefit
Characteristics	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month
Male, Other Elig	ibles														
All Ages	5,865	17.8	63,905	0.7	49	18,579	56.4	205,541	0.4	17	19,043	57.8	209,855	0.7	24
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	25.0	7	0.6	5
15-20	0	0.0	0	0.0	0	3	60.0	36	0.1	1	2	40.0	24	0.3	15
21-44	138	40.1	1,433	0.5	67	415	120.6	4,192	0.6	68	117	34.0	1,191	0.5	22
45-64	103	39.2	1,024	0.5	56	302	114.8	3,009	0.5	63	131	49.8	1,251	0.5	22
65-74	3,388	19.4	37,588	0.7	54	10,368	59.5	117,215	0.4	18	10,513	60.3	117,685	0.6	24
75-84	1,698	15.7	18,300	0.7	41	5,616	52.0	61,670	0.3	12	6,347	58.8	69,558	0.7	23
85 and older	538	13.2	5,560	0.7	39	1,875	46.0	19,419	0.3	11	1,932	47.4	20,139	0.7	21
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

a. Table D.7C includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. 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 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

TABLE D.7D MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS

SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

ANALGESICS - ANTI-INFLAMMATORY ANTIASTHMATIC Number of Mean Number of Mean Users Benefit Number of Mean Users Benefit Number of Mean Rx per Rx \$ per Rx per Rx \$ per as % Months as % Months Benefit Benefit Number of Beneficiary Number of of Dual Among Benefit Number of of Dual Among Benefit Number of Characteristics Benes Users Month Beneficiaries Benefit Months Users Users Month Month Benes Users Month ΑII 93.025 38.7 1.035.719 0.4 \$35 76.878 32.0 874.862 0.4 \$33 240.333 2.550.559 Female All Females 66,059 41.3 736,837 0.4 35 56,291 35.2 640,791 0.4 36 159,995 1,699,378 Female, Disabled All Ages 28,265 51.0 319,845 0.4 33 23,528 42.4 269,204 0.3 36 55,444 598,912 0.2 1 0.0 0 5 and younger 1 20.0 12 0 0 0.0 5 46 3 7 6-14 42.9 36 0.4 18 0 0.0 0 0.0 0 60 15-20 43 25.7 516 0.2 14 40 24.0 465 0.2 25 167 1.821 6,751 17,717 21-44 38.1 76,646 0.3 28 6,638 37.5 76,345 0.3 26 191,799 45-64 21,333 57.4 241,229 0.4 34 16,749 45.0 191,287 0.4 40 37,179 401,542 65-74 69 31.8 705 0.4 33 63 29.0 667 0.4 61 217 2,017 58 624 332 75-84 52.7 0.5 46 29 26.4 0.5 41 110 1,178 7 77 36 21.4 33 42 85 and older 16.7 0.5 9 108 0.5 449 Female, Other Eligibles All Ages 37,794 36.1 416,992 0.4 36 32,763 31.3 371,587 0.4 36 104,551 1,100,466 100.0 12 0.3 3 0.0 0 0 12 0 0.0 5 and younger 1 1 6-14 1 33.3 3 1.3 124 0 0.0 0 0.0 0 3 24 15-20 0 0.0 0 0.0 0 7 53.8 82 0.1 1 13 139 0.3 21-44 393 39.0 4,092 33 447 44.4 4,613 0.3 24 1,007 8,897 45-64 189 55.8 1,981 0.3 34 178 52.5 1,883 0.3 19 339 3,080 65-74 16.355 44.3 184.111 0.4 38 13.694 37.1 156,847 0.4 35 36.953 397,860 75-84 13,208 33.9 145,794 0.4 37 12,077 137,578 36 39,013 415,144 31.0 0.4 85 and older 7,647 28.1 80,999 0.4 31 6,360 23.4 70,584 0.4 36 27,222 275,310 Male All Males 26,966 33.6 298,882 37 20,587 25.6 234,071 0.3 25 80,338 851,181 0.4 Male. Disabled All Ages 13,008 27.4 146,701 34 12,397 23 47,410 509,728 0.4 26.1 141,414 0.3 4 33.3 48 0.1 6 0.0 0 0.0 0 12 130 5 and younger 0 6-14 10 47.6 120 0.3 15 4.8 12 0.2 1 21 230 1 15-20 41 18.1 463 0.3 20 32 14.2 375 0.2 6 226 2,525 21-44 3,749 18.4 42.752 27 4.676 23.0 53.272 0.3 18 20.359 218,581 0.4 45-64 9,158 34.4 102,860 0.4 37 7,651 28.7 87,355 0.3 27 26,640 286,842 65-74 27 24.1 248 0.3 25 27 24.1 280 0.5 32 112 984 33 75-84 16 48.5 174 0.6 49 6 18.2 72 0.5 38 355 3 42.9 36 10 57.1 48 0.5 31 7 81 85 and older 0.1 4

TABLE D.7D MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS

SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c} DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

ANALGESICS - ANTI-INFLAMMATORY **ANTIASTHMATIC** Number of Mean Number of Mean Users Benefit Number of Mean Users Benefit Number of Mean as % Months Rx per Rx \$ per Rx per Rx \$ per as % Months Beneficiary Number of of Dual Among Benefit Benefit Number of of Dual Among Benefit Benefit Number of Number of Characteristics Month Users Month Beneficiaries Benefit Months Users Benes Users Month Benes Users Month Male, Other Eligibles 27 32,928 All Ages 13,958 42.4 152,181 0.5 40 8,190 24.9 92,657 0.4 341,453 5 and younger 0 0.0 0 0.0 0 0 0.0 0 0.0 0 2 7 23 4 6-14 3 75.0 31 0.4 0 0.0 0 0.0 0 38 2 5 15-20 40.0 24 0.1 6 0 0.0 0 0.0 0 58 21-44 105 30.5 1.097 0.4 57 112 32.6 1.183 0.3 15 344 2.978 263 29 2,179 45-64 95 36.1 983 0.3 30 93 35.4 926 0.4 17,439 184,950 27 65-74 7,549 43.3 83,481 0.5 42 4,705 27.0 53,796 0.4 42.9 27 10,791 111,838 75-84 4,625 50,183 0.5 39 2,495 23.1 28,112 0.4 38.7 35 32 4,080 39,405 16,382 0.4 19.2 0.4 85 and older 1,579 785 8,640 0 0.0 0 0.0 0 0 0.0 0 0.0 0 0 0 Unknown

Source: Data for this table are from the MAX 2005 file for North Carolina, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table D.7D includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. 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 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

TABLE D.8 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,

BY BENEFICIARY CHARACTERISTIC^{a, b} DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

Deneficient		Number of Dynas Deposit	Number of All Veer Number	Benefit Months Among All-
Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Year Nursing Facility Residents
All	\$476	7.7	'	140,356
Age	Ψ10	7.1	10,040	140,000
0-64	619	8.4	1,219	13,604
65-74	557	8.2	•	21,140
75-84	504	8.2	•	46,062
85 and older	394	7.0	5,789	59,550
Unknown	0	0.0	0	0
Gender				
Female	471	7.8	10,445	110,043
Male	495	7.4	2,898	30,313
Unknown	0	0.0	0	0
Race				
White	499	8.2	8,684	89,013
African American	431	6.8	3,787	41,778
Other/unknown	462	7.4	872	9,565
Basis of Eligibility				
Aged	461	7.6	12,091	126,384
Disabled	614	8.4	1,252	13,972
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2005 file for North Carolina, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2005 Medicaid enrollment. A total of 13,501 beneficiaries who were in nursing facilities for part of their enrollment and their 129,067 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible ebecause of disability

or blindness. The children's group includes children receiving foster care and adoptive services.

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

TABLE D.9 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,

BY BRAND STATUS AND THERAPEUTIC CATEGORYA, b, c, d, e DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

Number of Rx per Benefit \$ per Benefit Month Among Month Among Users Users \$ per Rx Users

Therapeutic			Brand-	.		atented I	Brand-			atented Brand-	Brand-	2	Total Number	Tatal Do f	Number of	Facility	Number of Benefit
Category	Total 0.4	Name 0.1	Name 0	0.2		Name \$14	Name G \$6	\$6	\$62	Name \$109	Name (\$25		Total Rx \$		Residents 73.1	Months
Anti-infective Agents					•	•		фо	•		•		-,	* , ,	- / -		104,217
Biologicals	0.1	0.1	0.0	0.0	11	9	0	1	90	142	27	23	9	807	7	0.1	75
Antineoplastic Agents	0.6	0.1	0.0	0.5	85	30	0	55	152	366	53	116	-,-	837,821	970	7.3	9,859
Endocrine/Metabolic Drugs	1.3	0.5	0.3	0.5	67	48	11	8	51	93	34	16	98,062	4,970,095	6,960	52.2	74,195
Cardiovascular Agents	2.3	0.7	0.1	1.5	74	51	1	22	33	72	15	15	248,134	8,097,563	10,340	77.5	109,576
Respiratory Agents	0.7	0.4	0.0	0.2	46	39	3	4	66	95	63	18	49,225	3,270,625	6,604	49.5	70,609
Gastrointestinal Agents	1.1	0.4	0.0	0.7	75	51	1	22	67	133	38	32	96,016	6,398,483	7,948	59.6	85,156
Genitourinary Agents	0.6	0.4	0.0	0.2	45	37	1	8	72	88	59	39	22,307	1,602,584	3,266	24.5	35,377
CNS Drugs	1.7	0.9	0.0	0.8	149	127	1	21	88	137	65	28	180,453	15,804,545	10,025	75.1	106,273
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.0	0.4	54	49	0	4	87	201	7	12	764	66,246	113	0.8	1,236
Miscellaneous Psychological/ Neurological Agents	1.0	1.0	0.0	0.0	159	159	0	0	152	153	118	56	37,443	5,698,511	3,371	25.3	35,866
Analgesics and Anesthetics	0.9	0.2	0.1	0.7	55	20	9	27	59	109	133	39	71,800	4,233,686	7,229	54.2	76,874
Neuromuscular Agents	1.3	0.3	0.1	0.8	87	43	7	37	69	133	51	46	63,712	4,375,809	4,637	34.8	50,101
Nutritional Products	0.8	0.0	0.0	0.8	14	0	0	14	18	18	17	18	40,183	718,070	4,659	34.9	49,743
Hematological Agents	1.2	0.4	0.2	0.6	92	82	3	7	76	199	14	12	59,763	4,535,743	4,619	34.6	49,118
Topical Products	0.7	0.3	0.0	0.3	35	26	2	7	54	80	51	25	60,720	3,259,891	8,562	64.2	92,601
Miscellaneous Products	0.3	0.1	0.0	0.2	25	17	0	8	80	211	175	35	2,844	228,104	849	6.4	9,155
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	8	0	0	0	25	0	0	0	2,992	73,912	839	6.3	9,070
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.	1,083,242	66,835,384	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for North Carolina, released by CMS in 10/2008. This table was produced on 04/23/2009.

In North Carolina, 25,854.1 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.

a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 13,501 beneficiaries who were

in nursing facilities for part of their enrollment and their 129,067 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 2005. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

TABLE D.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}

DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

			Users				Among Users
Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Monthsp	Number of Rx er Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$8,292,317	5,311	39.8	57,900	0.8	\$183	\$143
ANTIDEPRESSANTS	5,543,266	9,508	71.3	103,033	0.8	66	54
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	5,410,675	4,236	31.7	45,662	0.8	152	118
ULCER DRUGS	4,802,647	7,572	56.7	82,226	0.8	75	58
ANTICONVULSANT	3,254,160	4,348	32.6	47,823	0.9	75	68
ANTIDIABETIC	3,262,443	6,015	45.1	65,762	0.9	53	50
ANALGESICS - Narcotic	2,533,039	7,334	55.0	79,865	0.6	54	32
ANTIHYPERLIPIDEMIC	2,237,721	2,741	20.5	30,013	0.8	92	75
ANTIASTHMATIC	2,126,652	5,205	39.0	57,069	0.5	83	37
MISC. HEMATOLOGICAL	2,148,778	2,001	15.0	21,761	0.8	118	99
Total	39,611,698	54,271		591,114	n.a.	n.a.	n.a.

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.

Source: Data for this table are from the MAX 2005 file for North Carolina, released by CMS in 10/2008. This table was produced on 04/23/2009.
a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 13,501 beneficiaries who were in nursing facilities for part of their enrollment and their 129,067 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 2005. 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.

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TABLE D.10A

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST

AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

All Top	10 Drug Groups			ANTIPS	YCHOTICS				ANTIDEP	RESSANTS		
Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months Among	Mean Number of Rx		Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months Among	Mean Number of Rx	
All	449,081	\$39,611,698	5,311	39.8	57,900	0.8	\$143	9,508	71.3	103,033	0.8	\$54
Female												
All Females	351,023	30,644,163	4,113	39.4	44,927	0.8	140	7,610	72.9	82,725	0.8	54
Female, Disabled												
All Ages	29,510	2,935,165	269	41.2	3,081	0.9	208	571	87.4	6,485	0.8	65
64 or younger	28,400	2,832,723	256	41.0	2,925	0.9	210	550	88.0	6,250	0.8	65
65-74	555	48,240	6	46.2	72	0.9	216	8	61.5	88	1.0	53
75-84	431	44,499	7	70.0	84	0.7	146	11	110.0	132	0.8	66
85 and older	124	9,703	0	0.0	0	0.0	0	2	40.0	15	1.1	78
Female, Other Eligibles												
All Ages	321,513	27,708,998	3,844	39.3	41,846	0.8	135	7,039	71.9	76,240	0.8	53
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	(
65-74	52,226	4,728,494	552	46.5	6,218	0.9	174	937	78.9	10,646	0.8	57
75-84	130,018	11,347,987	1,520	43.9	16,581	0.8	138	2,680	77.5	29,211	0.8	54
85 and older	139,269	11,632,517	1,772	34.4	19,047	0.7	119	3,422	66.5	36,383	0.8	50
Male												
All Males	98,058	8,967,535	1,198	41.3	12,973	0.8	155	1,898	65.5	20,308	0.8	54
Male, Disabled												
All Ages	23,185	2,353,707	256	42.7	2,977	0.9	196	409	68.3	4,587	0.8	59
64 or younger	23,003	2,339,633	251	42.3	2,917	0.9	198	405	68.2	4,539	0.8	59
65-74	71	5,006	2	100.0	24	0.5	64	1	50.0	12	1.1	85
75-84	43	2,281	1	100.0	12	0.1	1	1	100.0	12	0.8	62
85 and older	68	6,787	2	100.0	24	0.7	128	2	100.0	24	0.4	29
Male, Other Eligibles												
All Ages	74,873	6,613,828	942	41.0	9,996	0.7	143	1,489	64.8	15,721	0.8	53
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	(
65-74	28,503	2,630,158	311	42.3	3,456	0.8	163	502	68.2	5,548	0.8	56
75-84	29,686	2,580,749	366	39.5	3,885	0.8	148	594	64.1	6,269	0.8	53
85 and older	16,684	1,402,921	265	41.6	2,655	0.7	110	393	61.7	3,904	0.8	48
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	(

a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 13,501 beneficiaries who were in nursing facilities for part of their enrollment and their 129,067 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 2005. 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.

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

TABLE D.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} DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

	MISC		HERAPEUT OLOGICAL	IC AND			ULCE	R DRUGS				ANTICO	NVULSANT		
Beneficiary Characteristics	Number of Users	Year Nursing Facility		Mean Number of Rx		Number of Users	Users as % of All- Year Nursing Facility Residents				Number of Users	Year Nursing Facility	Number of Benefit Months Among Users	Mean Number of Rx	
All	4,236	31.7	45,662	0.8	\$119	7,572	56.7	82,226	0.8	\$58	4,348	32.6	47,823	0.9	\$68
Female															
All Females	3,502	33.5	37,924	0.8	117	5,883	56.3	63,892	0.8	59	3,132	30.0	34,360	0.9	64
Female, Disable	ed														
All Ages	75	11.5	822	0.7	206	396	60.6	4,513	0.8	61	462	70.8	5,190	1.1	106
64 or younger	67	10.7	726	0.7	219	387	61.9	4,407	0.8	61	452	72.3	5,087	1.1	107
65-74	2	15.4	24	0.8	118	3	23.1	36	1.0	79	8	61.5	88	0.9	45
75-84	3	30.0	36	0.7	102	3	30.0	34	0.7	37	1	10.0	12	0.8	56
85 and older	3	60.0	36	0.7	98	3	60.0	36	0.8	19	1	20.0	3	1.0	98
Female, Other E	Eligibles														
All Ages	3,427	35.0	37,102	0.8	116	5,487	56.0	59,379	0.8	58	2,670	27.3	29,170	0.9	57
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	C
65-74	329	27.7	3,651	0.8	135	703	59.2	7,817	0.8	62	606	51.0	6,767	1.0	71
75-84	1,391	40.2	15,063	0.8	117	2,024	58.5	22,073	0.8	59	1,093	31.6	11,934	0.9	59
85 and older	1,707	33.2	18,388	0.8	111	2,760	53.6	29,489	0.8	57	971	18.9	10,469	0.8	45
Male															
All Males	734	25.3	7,738	0.8	124	1,689	58.3	18,334	0.8	58	1,216	42.0	13,463	1.0	78
Male, Disabled															
All Ages	57	9.5	659	0.7	210	345	57.6	3,870	0.7	59	395	65.9	4,484	1.0	104
64 or younger	55	9.3	635	0.7	218	340	57.2	3,819	0.7	59	393	66.2	4,460	1.0	105
65-74	1	50.0	12	0.1	4	1	50.0	3	1.0	96	1	50.0	12	1.0	7
75-84	0	0.0	0	0.0	0	2	200.0	24	0.7	43	1	100.0	12	0.5	32
85 and older	1	50.0	12	0.1	13	2	100.0	24	0.5	45	0	0.0	0	0.0	C
Male, Other Elig	jibles														
All Ages	677	29.4	7,079	0.8	116	1,344	58.5	14,464	0.8	58	821	35.7	8,979	0.9	65
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	(
65-74	178	24.2	1,968	0.8	120	445	60.5	4,979	0.8	59	401	54.5	4,480	1.0	73
75-84	268	28.9	2,768	0.8	112	558	60.3	5,971	0.8	58	272	29.4	2,959	0.9	60
85 and older	231	36.3	2,343	0.8	117	341	53.5	3,514	0.8	55	148	23.2	1,540	0.8	52
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	C

Source: Data for this table are from the MAX 2005 file for North Carolina, released by CMS in 10/2008. This table was produced on 04/23/2009.

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.

a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 13,501 beneficiaries who were in nursing facilities for part of their enrollment and their 129,067 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 2005. 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 2005 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

TABLE D.10C MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND $AGE^{a, b, c, d}$

DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

		ANTID	IABETIC	ANALGESICS - Narcotic							ANTIHYPERLIPIDEMIC				
Beneficiary Characteristics	Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months Among			Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months Among			Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months Among	Mean Number of Rx	
All	6,015	45.1	65,762	0.9	\$50	7,334	55.0	79,865	0.6	\$32	2,741	20.5	30,013	0.8	\$75
Female															
All Females	4,697	45.0	51,441	0.9	49	5,932	56.8	64,761	0.6	32	2,107	20.2	23,083	0.8	74
Female, Disable	ed														
All Ages	393	60.2	4,366	1.0	58	430	65.8	4,953	0.7	56	186	28.5	2,066	0.8	77
64 or younger	368	58.9	4,066	1.0	57	416	66.6	4,796	0.7	55	182	29.1	2,018	0.8	77
65-74	13	100.0	156	1.2	60	5	38.5	60	0.8	83	1	7.7	12	0.7	73
75-84	9	90.0	108	0.9	87	7	70.0	82	0.7	55	2	20.0	24	1.0	78
85 and older	3	60.0	36	0.8	66	2	40.0	15	0.3	4	1	20.0	12	1.0	80
Female, Other E	Eligibles														
All Ages	4,304	44.0	47,075	0.9	48	5,502	56.2	59,808	0.6	30	1,921	19.6	21,017	0.8	74
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	811	68.3	9,083	1.0	54	767	64.6	8,607	0.6	31	430	36.2	4,830	0.8	76
75-84	1,869	54.0	20,279	1.0	49	2,024	58.5	22,227	0.6	34	871	25.2	9,500	0.8	77
85 and older	1,624	31.6	17,713	0.9	44	2,711	52.7	28,974	0.5	27	620	12.1	6,687	0.8	69
Male															
All Males	1,318	45.5	14,321	0.9	52	1,402	48.4	15,104	0.6	30	634	21.9	6,930	0.8	75
Male, Disabled															
All Ages	258	43.1	2,908	1.1	66	301	50.3	3,478	0.7	55	154	25.7	1,726	0.8	76
64 or younger	256	43.1	2,893	1.1	66	295	49.7	3,415	0.7	56	152	25.6	1,702	0.8	75
65-74	1	50.0	3	0.3	11	3	150.0	27	0.6	15	1	50.0	12	0.9	127
75-84	0	0.0	0	0.0	0	1	100.0	12	0.8	10	0	0.0	0	0.0	0
85 and older	1	50.0	12	0.8	13	2	100.0	24	0.3	3	1	50.0	12	0.8	121
Male, Other Elig	gibles														
All Ages	1,060	46.1	11,413	0.9	49	1,101	47.9	11,626	0.5	23	480	20.9	5,204	0.8	75
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	426	57.9	4,696	0.9	56	364	49.5	4,054	0.6	30	202	27.4	2,194	0.8	81
75-84	421	45.5	4,518	0.9	45	450	48.6	4,699	0.5	21	210	22.7	2,296	0.8	72
85 and older	213	33.4	2,199	0.9	42	287	45.1	2,873	0.5	17	68	10.7	714	0.8	70
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for North Carolina, released by CMS in 10/2008. This table was produced on 04/23/2009.

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.

a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 13,501 beneficiaries who were in nursing facilities for part of their enrollment and their 129,067 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 2005. 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.

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TABLE D.10D

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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 $AGE^{a, b, c, d}$

MISC. HEMATOLOGICAL

DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

Beneficiary Characteristics	Number of Users	Users as % of All-Year Nursing Facility Residents		Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months	Mean Number of Rx		All-Year Nursing Facility Residents	Benefit Months Among All- Year Nursing Facility Residents
All	5,205	39.0		0.5	\$37	2,001	15.0	21,761	0.8	\$99	13,343	140,356
Female												
All Females	3,994	38.2	43,922	0.4	36	1,518	14.5	16,570	0.8	100	10,445	110,043
Female, Disable	ed											
All Ages	215	32.9	2,476	0.5	45	72	11.0	834	0.8	97	653	7,299
64 or younger	210	33.6	2,426	0.5	45	67	10.7	774	0.8	100	625	6,982
65-74	3	23.1	28	0.4	34	3	23.1	36	0.8	63	13	148
75-84	1	10.0	10	0.4	52	2	20.0	24	1.0	69	10	118
85 and older	1	20.0	12	0.6	55	0	0.0	0	0.0	0	5	51
Female, Other E	ligibles											
All Ages	3,779	38.6	41,446	0.4	35	1,446	14.8	15,736	0.8	100	9,792	102,744
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	431	36.3	4,812	0.5	42	219	18.4	2,465	0.8	101	1,188	13,021
75-84	1,405	40.6	15,426	0.5	41	531	15.4	5,821	0.9	104	3,459	36,397
85 and older	1,943	37.8	21,208	0.4	30	696	13.5	7,450	0.8	96	5,145	53,326
Male												
All Males	1,211	41.8	13,147	0.5	42	483	16.7	5,191	0.8	96	2,898	30,313
Male, Disabled												
All Ages	178	29.7	2,033	0.6	41	63	10.5	732	0.8	95	599	6,673
64 or younger	175	29.5	2,006	0.6	42	63	10.6	732	0.8	95	594	6,622
65-74	1	50.0	3	0.3	22	0	0.0	0	0.0	0	2	15
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
85 and older	2	100.0	24	0.1	6	0	0.0	0	0.0	0	2	24
Male, Other Elig	ibles											
All Ages	1,033	44.9	11,114	0.5	42	420	18.3	4,459	0.8	96	2,299	23,640
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	307	41.7	3,472	0.6	50	144	19.6	1,602	0.8	102	736	7,956
75-84	449	48.5	4,815	0.5	43	165	17.8	1,765	0.8	94	926	9,535
85 and older	277	43.5	2,827	0.4	31	111	17.4	1,092	0.8	91	637	6,149
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 13,501 beneficiaries who were in nursing facilities for part of their enrollment and their 129,067 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 2005. 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 2005 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

TABLE D.11 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS, BY BENEFICIARY CHARACTERISTIC^{a,b} NORTH CAROLINA, 2005

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	D Excluded Rx	Total Number Part D Excluded Rx	\$ per	Total Part D Excluded Rx \$	\$ per Part D Pe		Total Number of Beneficiaries
All	130,501	54.3	4.4	1,063,394	\$88	\$21,187,937	\$20	2.3	240,333
Age									
5 and younger	15	75.0	4.4	88	423	8,453	96	11.4	20
6-14	21	60.0	4.7	166	165	5,787	35	1.8	35
15-20	154	37.5	1.7	715	75	30,907	43	3.3	411
21-44	18,601	47.2	3.4	135,447	85	3,336,005	25	2.1	39,427
45-64	36,976	57.4	5.0	321,666	108	6,984,629	22	2.3	64,421
65-74	29,046	53.1	4.3	234,585	80	4,364,812	19	2.2	54,721
75-84	27,677	55.4	4.5	224,438	79	3,934,760	18	2.2	49,947
85 and older	18,011	57.4	4.7	146,289	80	2,522,584	17	2.6	31,351
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility	С								
Aged	74,452	55.0	4.5	602,988	80	10,776,957	18	2.3	135,468
Disabled	54,980	53.5	4.4	453,413	100	10,262,039	23	2.3	102,854
Adults	1,056	53.2	3.5	6,930	73	144,408	21	2.0	1,986
Children	13	52.0	2.5	63	181	4,533	72	3.6	25
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Gender									
Female	94,774	59.2	5.0	793,170	99	15,815,171	20	2.5	159,995
Male	35,727	44.5	3.4	270,224	67	5,372,766	20	1.9	80,338
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	73,734	59.3	5.3	663,425	104	12,945,227	20	2.4	124,331
African American	42,693	47.6	3.2	289,585	66	5,913,516	20	2.0	89,643
Other/unknown	14,074	53.4	4.2	110,384	88	2,329,194	21	2.4	26,359
Use of Nursing Fa	cilities ^d								
Entire year	8,588	64.4	6.9	92,524	125	1,672,825	18	2.5	13,343
Part year	9,564	70.8	5.5	74,609	98	1,317,597	18	2.4	13,501
None	112,349	52.6	4.2	896,261	85	18,197,515	20	2.3	213,489
Maintenance Assis	stance Status								
Cash	59,659	54.0	4.5	497,326	91	9,998,427	20	2.3	110,451
Medically needy	4,475	59.4	5.0	37,954	108	811,942	21	2.7	7,533
Poverty related	66,253	54.3	4.3	527,520	85	10,365,721	20	2.3	122,085
Other/unknown	114	43.2	2.3	594	45	11,847	20	2.0	264

a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2005.

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

c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability

or blindness. The children's group includes children receiving foster care and adoptive services.

d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

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

TABLE D.12 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b} NORTH CAROLINA, 2005

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazapine \$ per Benefit Month	Number of Benefit Months
All	0.4	\$8	\$20	\$0	\$3	2,550,559
Age						
5 and younger	0.5	43	96	0	11	195
6-14	0.5	16	35	0	1	352
15-20	0.2	7	43	0	3	4,543
21-44	0.3	8	25	0	4	422,255
45-64	0.5	10	22	0	4	693,643
65-74	0.4	7	19	0	2	585,811
75-84	0.4	7	18	0	2	528,515
85 and older	0.5	8	17	0	2	315,245
Unknown	0.0	0	0	0	0	0
Basis of Eligibility	vc					
Aged	0.4	8	18	0	2	1,424,220
Disabled	0.4	9	23	0	4	1,108,640
Adults	0.4	8	21	0	4	17,453
Children	0.3	18	72	0	0	246
Unknown	0.0	0	0	0	0	0
Gender						
Female	0.5	9	20	0	3	1,699,378
Male	0.3	6	20	0	2	851,181
Unknown	0.0	0	0	0	0	0
Race						
White	0.5	10	20	0	4	1,286,797
African American	0.3	6	20	0	1	979,777
Other/unknown	0.4	8	21	0	2	283,985
Use of Nursing Fa	cilitiesd					
Entire year	0.7	12	18	0	4	140,356
Part year	0.6	10	18	0	3	129,067
None	0.4	8	20	0	3	2,281,136
Maintenance Assi	stance Status					
Cash	0.4	8	20	0	3	1,209,974
Medically needy	0.5	12	21	0	3	69,963
Poverty related	0.4	8	20	0	3	1,268,675
Other/unknown	0.3	6	20	0	2	1,947

Source: Data for this table are from the MAX 2005 file for North Carolina, released by CMS in 10/2008. This table was produced on 04/23/2009.

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.

a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2005.

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

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

d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

TABLE D.13 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS a,b,c NORTH CAROLINA, 2005

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	191,958	\$110	\$21,187,937	100.0	1,063,394	\$20	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	94	23	2,196	0.0	192	11	0.0
Cough and cold medications	51,525	97	5,000,759	23.6	142,047	35	13.4
Vitamins and minerals	52,514	111	5,840,053	27.6	348,584	17	32.8
Non-prescription drugs	12,909	88	1,130,848	5.3	54,806	21	5.2
Barbiturates	2,372	75	176,874	0.8	22,685	8	2.1
Benzodiazepines	66,623	111	7,406,009	35.0	474,253	16	44.6
Other Part D Excl Rx Drugs	5,921	275	1,631,198	7.7	20,827	78	2.0

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.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2005. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2005. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table D11.
b. Includes OTC drugs as well as prescription drugs.

c. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription strains 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.

SUPPLEMENTAL TABLE 1 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES^{a, b} NORTH CAROLINA, 2005

Total Number of Dual Eligible Beneficiaries: 240,333

Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$931,427,154

Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$3,875

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	18,966	7.9	\$0	0.0
1-500	30,070	12.5	6,416,289	0.7
501-1,000	19,942	8.3	14,880,624	1.6
1,001-1,500	17,483	7.3	21,764,855	2.3
1,501-2,000	16,303	6.8	28,506,865	3.1
2,001-2,500	15,344	6.4	34,434,441	3.7
2,501-3,000	13,943	5.8	38,310,365	4.1
3,001-3,500	12,775	5.3	41,490,052	4.5
3,501-4,000	11,331	4.7	42,478,744	4.6
4,001-4,500	10,146	4.2	43,089,824	4.6
4,501-5,000	8,894	3.7	42,216,236	4.5
5,001-5,500	7,846	3.3	41,146,987	4.4
5,501-6,000	6,864	2.9	39,424,563	4.2
6,001-6,500	6,142	2.6	38,360,660	4.1
6,501-7,000	5,222	2.2	35,216,647	3.8
7,001-7,500	4,582	1.9	33,186,343	3.6
7,501-8,000	4,049	1.7	31,350,457	3.4
8,001-8,500	3,504	1.5	28,900,845	3.1
8,501-9,000	3,100	1.3	27,118,844	2.9
9,001-9,500	2,696	1.1	24,931,727	2.7
9,501-10,000	2,266	0.9	22,076,022	2.4
10,001+	18,865	7.8	296,125,764	31.8

Source: Data for this table are from the MAX 2005 file for North Carolina, released by CMS in 10/2008. This table was produced on 04/23/2009.

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

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

SUPPLEMENTAL TABLE 1A MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE $65^{\rm a},\,{\rm b},\,{\rm c}$ NORTH CAROLINA, 2005

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 102,333

Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$452,931,874

Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$4,426

		Percent of Disabled Dual Beneficiaries,		Percent of Total Pharmacy
Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Age < 65	Pharmacy Reimbursement	Reimbursement
\$0	9,902	9.7	0	0.0
1-500	14,833	14.5	2,953,051	0.7
501-1,000	8,174	8.0	6,046,751	1.3
1,001-1,500	6,568	6.4	8,170,112	1.8
1,501-2,000	5,895	5.8	10,289,508	2.3
2,001-2,500	5,343	5.2	11,977,761	2.6
2,501-3,000	4,845	4.7	13,312,424	2.9
3,001-3,500	4,375	4.3	14,196,850	3.1
3,501-4,000	3,879	3.8	14,535,987	3.2
4,001-4,500	3,593	3.5	15,258,542	3.4
4,501-5,000	3,252	3.2	15,438,640	3.4
5,001-5,500	2,929	2.9	15,364,975	3.4
5,501-6,000	2,644	2.6	15,184,143	3.4
6,001-6,500	2,481	2.4	15,502,843	3.4
6,501-7,000	2,084	2.0	14,062,842	3.1
7,001-7,500	1,951	1.9	14,135,298	3.1
7,501-8,000	1,783	1.7	13,819,039	3.1
8,001-8,500	1,636	1.6	13,496,990	3.0
8,501-9,000	1,501	1.5	13,131,660	2.9
9,001-9,500	1,288	1.3	11,908,747	2.6
9,501-10,000	1,184	1.2	11,540,211	2.5
10,001+	12,193	11.9	202,605,500	44.7

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

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

SUPPLEMENTAL TABLE 1B MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER^{A, b} NORTH CAROLINA, 2005

Total Number of Dual Eligible Beneficiaries, Age 65+: 136,019

Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$471,207,668

Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$3,464

	İ	Percent of Dual Beneficiaries, Age 65		Percent of Total Pharmacy	
Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	+	Pharmacy Reimbursement	Reimbursement	
\$0	8,889	6.5	0	0.0	
1-500	14,846	10.9	3,383,680	0.7	
501-1,000	11,550	8.5	8,673,542	1.8	
1,001-1,500	10,748	7.9	13,389,206	2.8	
1,501-2,000	10,290	7.6	18,012,062	3.8	
2,001-2,500	9,899	7.3	22,226,991	4.7	
2,501-3,000	8,998	6.6	24,723,039	5.2	
3,001-3,500	8,316	6.1	27,020,052	5.7	
3,501-4,000	7,385	5.4	27,691,411	5.9	
4,001-4,500	6,495	4.8	27,584,153	5.9	
4,501-5,000	5,595	4.1	26,554,054	5.6	
5,001-5,500	4,858	3.6	25,470,562	5.4	
5,501-6,000	4,186	3.1	24,045,932	5.1	
6,001-6,500	3,618	2.7	22,589,558	4.8	
6,501-7,000	3,110	2.3	20,965,404	4.4	
7,001-7,500	2,606	1.9	18,869,650	4.0	
7,501-8,000	2,240	1.6	17,328,969	3.7	
8,001-8,500	1,853	1.4	15,279,576	3.2	
8,501-9,000	1,572	1.2	13,751,245	2.9	
9,001-9,500	1,389	1.0	12,846,391	2.7	
9,501-10,000	1,070	0.8	10,419,125	2.2	
10,001+	6,506	4.8	90,383,066	19.2	

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2005.

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

SUPPLEMENTAL TABLE 1C MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74^{a, b} NORTH CAROLINA, 2005

Total Number of Dual Eligible Beneficiaries, Age 65-74: 54,721

Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$199,300,520

Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$3,642

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement		
\$0	4,405	8.0	0	0.0		
1-500	6,237	11.4	1,371,200	0.7		
501-1,000	4,412	8.1	3,291,668	1.7		
1,001-1,500	3,995	7.3	4,989,816	2.5		
1,501-2,000	3,795	6.9	6,634,361	3.3		
2,001-2,500	3,677	6.7	8,277,291	4.2		
2,501-3,000	3,301	6.0	9,085,972	4.6		
3,001-3,500	3,135	5.7	10,192,557	5.1		
3,501-4,000	2,769	5.1	10,380,353	5.2		
4,001-4,500	2,512	4.6	10,670,188	5.4		
4,501-5,000	2,205	4.0	10,469,121	5.3		
5,001-5,500	1,944	3.6	10,193,916	5.1		
5,501-6,000	1,649	3.0	9,471,289	4.8		
6,001-6,500	1,400	2.6	8,745,082	4.4		
6,501-7,000	1,272	2.3	8,572,374	4.3		
7,001-7,500	1,024	1.9	7,420,530	3.7		
7,501-8,000	933	1.7	7,225,305	3.6		
8,001-8,500	804	1.5	6,635,080	3.3		
8,501-9,000	687	1.3	6,004,521	3.0		
9,001-9,500	613	1.1	5,668,334	2.8		
9,501-10,000	495	0.9	4,820,776	2.4		
10,001+	3,457	6.3	49,180,786	24.7		

Source: Data for this table are from the MAX 2005 file for North Carolina, released by CMS in 10/2008. This table was produced on 04/23/2009.

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

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

SUPPLEMENTAL TABLE 1D MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84^{a, b} NORTH CAROLINA, 2005

Total Number of Dual Eligible Beneficiaries, Age 75-84: 49,947

Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$175,483,405

Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$3,513

				Percent of Total Pharmacy
Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries Percent of Dual Be	neficiaries, Age 75-84	Pharmacy Reimbursement	Reimbursement
\$0	3,039	6.1	0	0.0
1-500	4,939	9.9	1,135,339	0.6
501-1,000	4,005	8.0	3,014,682	1.7
1,001-1,500	3,891	7.8	4,846,566	2.8
1,501-2,000	3,824	7.7	6,695,159	3.8
2,001-2,500	3,697	7.4	8,288,822	4.7
2,501-3,000	3,494	7.0	9,592,480	5.5
3,001-3,500	3,140	6.3	10,205,185	5.8
3,501-4,000	2,844	5.7	10,662,961	6.1
4,001-4,500	2,526	5.1	10,728,092	6.1
4,501-5,000	2,090	4.2	9,918,866	5.7
5,001-5,500	1,867	3.7	9,792,073	5.6
5,501-6,000	1,644	3.3	9,446,158	5.4
6,001-6,500	1,410	2.8	8,803,787	5.0
6,501-7,000	1,184	2.4	7,983,154	4.5
7,001-7,500	1,013	2.0	7,330,560	4.2
7,501-8,000	867	1.7	6,703,703	3.8
8,001-8,500	693	1.4	5,708,585	3.3
8,501-9,000	610	1.2	5,339,390	3.0
9,001-9,500	538	1.1	4,974,708	2.8
9,501-10,000	399	0.8	3,884,335	2.2
10,001+	2,233	4.5	30,428,800	17.3

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2005.

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

SUPPLEMENTAL TABLE 1E MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER^{a, b} NORTH CAROLINA, 2005

Total Number of Dual Eligible Beneficiaries, Age 85+: 31,351
Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$96,423,743
Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$3,075

	Р	ercent of Dual Beneficiaries, Age 85		Percent of Total Pharmacy
Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	+	Pharmacy Reimbursement	Reimbursement
\$0	1,445	4.6	0	0.0
1-500	3,670	11.7	877,141	0.9
501-1,000	3,133	10.0	2,367,192	2.5
1,001-1,500	2,862	9.1	3,552,824	3.7
1,501-2,000	2,671	8.5	4,682,542	4.9
2,001-2,500	2,525	8.1	5,660,878	5.9
2,501-3,000	2,203	7.0	6,044,587	6.3
3,001-3,500	2,041	6.5	6,622,310	6.9
3,501-4,000	1,772	5.7	6,648,097	6.9
4,001-4,500	1,457	4.6	6,185,873	6.4
4,501-5,000	1,300	4.1	6,166,067	6.4
5,001-5,500	1,047	3.3	5,484,573	5.7
5,501-6,000	893	2.8	5,128,485	5.3
6,001-6,500	808	2.6	5,040,689	5.2
6,501-7,000	654	2.1	4,409,876	4.6
7,001-7,500	569	1.8	4,118,560	4.3
7,501-8,000	440	1.4	3,399,961	3.5
8,001-8,500	356	1.1	2,935,911	3.0
8,501-9,000	275	0.9	2,407,334	2.5
9,001-9,500	238	0.8	2,203,349	2.3
9,501-10,000	176	0.6	1,714,014	1.8
10,001+	816	2.6	10,773,480	11.2

Source: Data for this table are from the MAX 2005 file for North Carolina, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2005.

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

APPENDIX TABLE A.3

CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b} DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

		Number of Beneficiaries							Number of Benefit Months			
Beneficiary Characteristics	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	240,536	135,618	102,903	1,990	25	0	2,657,603	1,482,860	1,156,167	18,305	271	0
Age												
5 and younger	20	0	17	0	3	0	213	0	185	0	28	0
6-14	35	0	28	0	7	0	376	0	300	0	76	0
15-20	411	0	393	4	14	0	4,627	0	4,428	37	162	0
21-44	39,448	2	38,094	1,351	1	0	440,418	14	427,900	12,499	5	0
45-64	64,453	11	63,850	592	0	0	723,628	103	718,153	5,372	0	0
65-74	54,760	54,391	329	40	0	0	608,087	604,628	3,093	366	0	0
75-84	50,013	49,867	143	3	0	0	550,143	548,552	1,560	31	0	0
85 and older	31,396	31,347	49	0	0	0	330,111	329,563	548	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	160,130	103,284	55,468	1,365	13	0	1,772,179	1,133,801	625,431	12,800	147	0
Male	80,406	32,334	47,435	625	12	0	885,424	349,059	530,736	5,505	124	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	124,474	70,512	52,843	1,113	6	0	1,359,938	758,916	590,701	10,262	59	0
African American	89,684	48,082	40,860	729	13	0	1,005,123	536,563	461,636	6,784	140	0
Other/unknown	26,378	17,024	9,200	148	6	0	292,542	187,381	103,830	1,259	72	0
Use of Nursing Facilities ^c												
Entire year	13,376	12,123	1,253	0	0	0	147,977	133,332	14,645	0	0	0
Part year	13,524	12,053	1,470	1	0	0	134,808	119,096	15,700	12	0	0
None	213,636	111,442	100,180	1,989	25	0	2,374,818	1,230,432	1,125,822	18,293	271	0
Maintenance Assistance Statu	s											
Cash	110,493	60,397	48,555	1,538	3	0	1,253,125	681,063	557,229	14,800	33	0
Medically needy	7,553	6,011	1,467	75	0	0	73,939	58,131	15,159	649	0	0
Poverty related	122,226	69,182	52,862	172	10	0	1,328,512	743,570	583,714	1,119	109	0
Other/unknown	264	28	19	205	12	0	2,027	96	65	1,737	129	0
Dual Status ^d												
Full dual, all year	233,556	131,879	99,686	1,966	25	0	2,580,455	1,441,947	1,120,162	18,075	271	0
Full dual, part year	6,980	3,739	3,217	24	0	0	77,148	40,913	36,005	230	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	226,702	128,045	96,795	1,841	21	0	2,502,179	1,398,928	1,086,185	16,843	223	0
FFS part year, with Rx claims	12,941	7,101	5,695	141	4	0	147,219	79,993	65,752	1,426	48	0
FFS part year, no Rx claims	690	322	364	4	0	0	7,157	3,236	3,899	22	0	0
MC all year, with Rx claims	147	105	40	2	0	0	835	565	265	5	0	0
MC all year, no Rx claims	56	45	9	2	0	0	213	138	66	9	0	0

a. Table A.3 includes the beneficiaries represented by Cell F of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability

or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

are not consistent with basis or engionity.

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

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2005. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status. Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.4

MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a DUAL ELIGIBLE BENEFICIARIES, NORTH CAROLINA, 2005

Beneficiaries and Benefit Months in Cell F of Table 1 Included in Cell G of Table 1 Excluded from Cell G of Table 1 Number of Number of Number of Number of Number of Number of **Beneficiary Characteristics** Beneficiaries Benefit Months Beneficiaries Benefit Months Beneficiaries Benefit Months 240,333 107,044 ΑII 240,536 2,657,603 2,550,559 0 226,702 2,502,179 226,702 2,502,179 0 0 Fee-for-service (FFS) all year FFS part year, with Rx claims 12,941 147,219 45,862 12,941 0 101,357 FFS part year, with no Rx claims 690 7,157 690 2,518 4,639 Managed care (MC) all year, with Rx claims 147 835 0 0 835 0 213 0 0 MC all year, with no Rx claims 56 0 213

Source: Data for this table are from the MAX 2005 file for North Carolina, released by CMS in 10/2008. This table was produced on 04/23/2009.

a. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

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