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**STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2005
RHODE ISLAND**

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TABLE D.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	30,014	13,335	16,252	404	0	23	326,750	140,156	185,062	1,301	0	231
Age												
5 and younger	2	0	2	0	0	0	7	0	7	0	0	0
6-14	1	0	1	0	0	0	12	0	12	0	0	0
15-20	45	0	44	1	0	0	457	0	445	12	0	0
21-44	5,400	0	5,160	236	0	4	59,182	0	58,362	783	0	37
45-64	7,529	1	7,372	142	0	14	84,330	6	83,721	456	0	147
65-74	6,322	3,662	2,635	20	0	5	70,234	39,482	30,661	44	0	47
75-84	6,039	5,184	850	5	0	0	65,427	55,613	9,808	6	0	0
85 and older	4,676	4,488	188	0	0	0	47,101	45,055	2,046	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	19,502	10,100	9,158	221	0	23	212,292	106,785	104,597	679	0	231
Male	10,512	3,235	7,094	183	0	0	114,458	33,371	80,465	622	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	18,812	7,571	11,006	215	0	20	207,808	80,620	126,230	762	0	196
African American	1,813	480	1,299	34	0	0	20,232	5,414	14,717	101	0	0
Other/unknown	9,389	5,284	3,947	155	0	3	98,710	54,122	44,115	438	0	35
Use of Nursing Facilities^c												
Entire year	4,255	2,989	1,266	0	0	0	47,649	32,677	14,972	0	0	0
Part year	2,782	2,253	528	1	0	0	25,774	20,128	5,644	2	0	0
None	22,977	8,093	14,458	403	0	23	253,327	87,351	164,446	1,299	0	231
Maintenance Assistance Status												
Cash	15,536	4,484	11,035	17	0	0	177,197	50,184	126,958	55	0	0
Medically needy	303	190	113	0	0	0	3,181	2,018	1,163	0	0	0
Poverty-related	220	92	94	11	0	23	2,147	940	936	40	0	231
Other/unknown	13,955	8,569	5,010	376	0	0	144,225	87,014	56,005	1,206	0	0
Dual Medicare Status^d												
Full dual, all year	29,517	13,009	16,087	398	0	23	321,479	136,613	183,360	1,275	0	231
Full dual, part year	497	326	165	6	0	0	5,271	3,543	1,702	26	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	29,418	13,312	16,046	38	0	22	324,264	140,025	183,766	247	0	226
FFS part year, with Rx claims	398	15	171	211	0	1	2,082	90	1,163	824	0	5
FFS part year, no Rx claims	198	8	35	155	0	0	404	41	133	230	0	0

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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 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; Rx = pharmacy benefit.

TABLE D.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2005

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid FFS \$ ^d	Number of Beneficiaries
All	89.8	47.0	\$3,579	\$76	\$21,620	16.6	30,014
Age							
5 and younger	100.0	9.0	155	17	1,008	15.3	2
6-14	100.0	23.0	230	10	230	100.0	1
15-20	71.1	15.1	893	59	11,910	7.5	45
21-44	85.5	36.5	3,761	103	20,968	17.9	5,400
45-64	90.5	52.3	4,882	93	26,249	18.6	7,529
65-74	89.3	44.8	3,114	70	14,454	21.5	6,322
75-84	90.9	48.5	2,986	62	18,784	15.9	6,039
85 and older	93.3	51.7	2,691	52	28,380	9.5	4,676
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	90.4	47.6	2,792	59	20,911	13.3	13,335
Disabled	90.2	47.4	4,295	91	22,659	19.0	16,252
Adults	56.4	10.7	733	69	3,675	19.9	404
Children	0.0	0.0	0	0	0	0.0	0
Unknown	95.7	34.8	3,555	102	14,248	24.9	23
Gender							
Female	92.4	50.9	3,570	70	20,404	17.5	19,502
Male	85.1	39.6	3,596	91	23,877	15.1	10,512
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	91.4	52.3	4,006	77	26,062	15.4	18,812
African American	88.5	38.5	3,264	85	12,771	25.6	1,813
Other/unknown	86.9	37.9	2,784	74	14,430	19.3	9,389
Use of Nursing Facilities^f							
Entire year	94.1	73.8	4,506	61	80,612	5.6	4,255
Part year	95.3	56.7	3,239	57	30,842	10.5	2,782
None	88.4	40.8	3,448	85	9,579	36.0	22,977
Maintenance Assistance Status							
Cash	89.3	42.3	3,490	83	14,126	24.7	15,536
Medically needy	96.0	62.0	3,932	63	33,077	11.9	303
Poverty related	79.1	22.5	1,785	79	4,348	41.1	220
Other/unknown	90.4	52.2	3,698	71	29,988	12.3	13,955

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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

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

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

TABLE D.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2005

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ ^d	Number	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10		Beneficiaries	Benefit Months
All	4.3	\$329	16.6	10.2	16.1	11.9	31.4	23.9	6.5	\$1,986	30,014	326,750
Age												
5 and younger	2.6	44	15.3	0.0	0.0	50.0	50.0	0.0	0.0	288	2	7
6-14	1.9	19	100.0	0.0	0.0	100.0	0.0	0.0	0.0	19	1	12
15-20	1.5	88	7.5	28.9	35.6	15.6	15.6	4.4	0.0	1,173	45	457
21-44	3.3	343	17.9	14.5	24.8	12.6	27.1	17.0	3.9	1,913	5,400	59,182
45-64	4.7	436	18.6	9.5	13.2	11.1	32.7	25.8	7.7	2,344	7,529	84,330
65-74	4.0	280	21.5	10.7	17.7	13.5	31.1	20.9	6.1	1,301	6,322	70,234
75-84	4.5	276	15.9	9.1	13.9	11.8	32.5	26.0	6.7	1,734	6,039	65,427
85 and older	5.1	267	9.5	6.7	11.1	10.4	33.2	30.5	8.1	2,817	4,676	47,101
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	4.5	266	13.3	9.6	14.5	11.8	31.4	25.6	7.2	1,990	13,335	140,156
Disabled	4.2	377	19.0	9.8	17.5	12.1	31.7	22.9	6.0	1,990	16,252	185,062
Adults	3.3	228	19.9	43.6	11.1	11.1	18.3	12.6	3.2	1,141	404	1,301
Children	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Unknown	3.5	354	24.9	4.3	30.4	8.7	43.5	8.7	4.3	1,419	23	231
Gender												
Female	4.7	328	17.5	7.6	14.0	11.7	32.8	26.3	7.5	1,874	19,502	212,292
Male	3.6	330	15.1	14.9	19.9	12.4	28.8	19.4	4.6	2,193	10,512	114,458
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	4.7	363	15.4	8.6	13.6	11.1	31.7	27.1	7.9	2,359	18,812	207,808
African American	3.5	293	25.6	11.5	23.2	13.4	31.2	17.0	3.8	1,144	1,813	20,232
Other/unknown	3.6	265	19.3	13.1	19.7	13.4	30.8	18.8	4.1	1,373	9,389	98,710
Use of Nursing Facilities^f												
Entire year	6.6	402	5.6	5.9	3.7	5.4	28.3	40.2	16.5	7,199	4,255	47,649
Part year	6.1	350	10.5	4.7	6.9	7.7	32.1	37.6	11.0	3,329	2,782	25,774
None	3.7	313	36.0	11.6	19.5	13.7	31.9	19.2	4.1	869	22,977	253,327
Maintenance Assistance Status												
Cash	3.7	306	24.7	10.7	19.8	13.8	31.8	19.6	4.3	1,239	15,536	177,197
Medically needy	5.9	375	11.9	4.0	11.2	10.2	26.7	34.7	13.2	3,151	303	3,181
Poverty related	2.3	183	41.1	20.9	31.4	13.2	25.5	8.2	0.9	446	220	2,147
Other/unknown	5.1	358	12.3	9.6	11.9	9.8	31.1	28.7	8.9	2,902	13,955	144,225

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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, RHODE ISLAND, 2005

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	4.3	\$329	\$76	1.8	\$247	\$135	0.1	\$16	\$108	2.3	\$66	\$28
Age												
5 and younger	2.6	44	17	1.1	23	20	0.0	0	0	1.4	21	15
6-14	1.9	19	10	0.9	8	9	0.0	0	0	1.0	11	11
15-20	1.5	88	59	0.6	70	117	0.0	3	94	0.9	15	18
21-44	3.3	343	103	1.4	262	187	0.1	21	142	1.8	60	34
45-64	4.7	436	93	2.0	326	164	0.2	24	136	2.5	86	34
65-74	4.0	280	70	1.8	210	118	0.1	12	96	2.1	59	28
75-84	4.5	276	62	1.9	208	108	0.1	9	73	2.4	58	24
85 and older	5.1	267	52	2.0	196	98	0.2	11	67	3.0	60	20
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	4.5	266	59	1.9	199	106	0.1	10	73	2.5	56	23
Disabled	4.2	377	91	1.8	283	159	0.2	21	130	2.2	73	33
Adults	3.3	228	69	1.4	165	120	0.1	16	114	1.8	46	26
Children	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Unknown	3.5	354	102	1.5	282	188	0.1	10	82	1.8	61	33
Gender												
Female	4.7	328	70	2.0	244	125	0.2	16	94	2.6	68	27
Male	3.6	330	91	1.6	252	160	0.1	17	145	1.9	61	32
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	4.7	363	77	2.0	269	136	0.2	19	111	2.6	75	29
African American	3.5	293	85	1.4	225	156	0.1	15	128	1.9	53	28
Other/unknown	3.6	265	74	1.6	205	130	0.1	10	93	1.9	50	26
Use of Nursing Facilities^e												
Entire year	6.6	402	61	2.7	305	115	0.2	13	66	3.7	84	23
Part year	6.1	350	57	2.4	256	108	0.2	16	87	3.6	78	22
None	3.7	313	85	1.6	235	146	0.1	16	123	2.0	61	31
Maintenance Assistance Status												
Cash	3.7	306	83	1.6	230	143	0.1	15	116	2.0	61	31
Medically needy	5.9	375	63	2.4	278	116	0.2	20	99	3.3	78	23
Poverty related	2.3	183	79	1.0	141	140	0.1	6	82	1.2	36	29
Other/unknown	5.1	358	71	2.1	268	129	0.2	18	102	2.8	72	26

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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

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

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

TABLE D.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Total	Off-Brand-		Generic	Total	Off-Brand-		Generic	Total	Off-Brand-		Generic	Total Number of Rx	Total Rx \$	Number	As a Percentage of Dual Benes	Number of Benefit Months
		Patented Brand-Name	Patent Brand-Name			Patented Brand-Name	Patent Brand-Name			Patented Brand-Name	Patent Brand-Name						
Anti-infective Agents	0.3	0.1	0.0	0.2	\$34	\$25	\$4	\$5	\$106	\$266	\$98	\$25	56,987	\$6,024,949	15,695	52.3	178,083
Biologicals	0.7	0.0	0.0	0.7	1,923	0	0	1,923	2884	0	0	2,884	16	46,140	2	0.0	24
Antineoplastic Agents	0.6	0.2	0.0	0.4	113	89	0	23	194	414	168	64	5,582	1,081,991	884	2.9	9,587
Endocrine/Metabolic Drugs	0.8	0.3	0.1	0.4	51	36	5	10	63	114	61	24	118,925	7,517,502	13,176	43.9	148,707
Cardiovascular Agents	1.4	0.6	0.0	0.7	76	59	1	17	55	94	82	22	302,073	16,641,373	19,461	64.8	217,759
Respiratory Agents	0.8	0.5	0.0	0.2	53	47	3	3	68	90	70	13	97,319	6,607,003	10,951	36.5	124,938
Gastrointestinal Agents	0.8	0.4	0.0	0.4	67	51	1	15	89	142	122	39	110,401	9,867,482	13,056	43.5	146,704
Genitourinary Agents	0.5	0.4	0.0	0.1	38	34	0	4	69	81	64	29	27,919	1,929,714	4,560	15.2	51,195
CNS Drugs	1.5	0.6	0.0	0.8	142	114	2	26	97	177	155	32	286,765	27,877,578	17,623	58.7	196,690
Stimulants/Anti-obesity/Anorexia	0.7	0.4	0.0	0.3	81	68	2	11	120	182	95	39	4,163	498,830	537	1.8	6,176
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	134	134	0	0	163	164	0	28	20,235	3,302,602	2,284	7.6	24,560
Analgesics and Anesthetics	0.8	0.1	0.1	0.6	48	19	11	18	63	146	204	31	130,509	8,203,205	15,135	50.4	169,946
Neuromuscular Agents	0.9	0.3	0.0	0.6	79	49	4	25	84	172	100	41	98,675	8,246,785	9,229	30.7	104,797
Nutritional Products	0.5	0.0	0.0	0.5	8	0	0	8	16	23	27	16	18,430	293,193	3,254	10.8	35,591
Hematological Agents	0.9	0.3	0.0	0.6	79	71	1	7	93	249	66	12	51,728	4,803,567	5,503	18.3	60,646
Topical Products	0.5	0.2	0.0	0.3	25	17	1	6	49	79	61	24	75,080	3,699,567	13,200	44.0	150,538
Miscellaneous Products	0.3	0.2	0.0	0.1	67	52	3	12	201	290	208	86	3,621	727,659	968	3.2	10,846
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	9	0	0	0	38	0	0	0	1,144	42,905	429	1.4	4,864
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.	1,409,572	107,412,045	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Rhode Island, 0.4 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Dual Eligible Beneficiaries

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

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of Dual Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$17,320,121	9,552	31.8	107,993	0.8	\$213	\$160
ANTIDEPRESSANTS	8,504,070	18,910	63.0	212,644	0.7	60	40
ULCER DRUGS	8,221,281	12,490	41.6	140,780	0.6	97	58
ANTIHYPERLIPIDEMIC	7,463,356	11,198	37.3	128,597	0.7	87	58
ANTICONVULSANT	7,238,674	8,415	28.0	95,814	0.8	99	76
ANTIDIABETIC	4,806,401	10,069	33.5	114,367	0.6	75	42
ANTIASTHMATIC	4,725,420	12,346	41.1	140,580	0.5	74	34
ANALGESICS - Narcotic	4,657,719	15,673	52.2	176,428	0.4	59	26
ANTIHYPERTENSIVE	3,956,020	13,312	44.4	150,944	0.4	60	26
ANTIVIRAL	3,715,504	1,565	5.2	17,937	0.4	487	207
Total	70,608,566	113,530		1,286,084	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. 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.

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

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

Dual Eligible Beneficiaries

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, RHODE ISLAND, 2005

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS			
	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Rx \$ per Month	Mean Benefit per Rx \$ per Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Rx \$ per Month	Mean Benefit per Rx \$ per Month
All	747,602	\$70,608,566	9,552	31.8	107,993	0.8	\$160	18,910	63.0	212,644	0.7	\$40
Female												
All Females	509,470	44,029,252	5,765	29.6	64,784	0.7	139	13,507	69.3	151,838	0.7	40
Female, Disabled												
All Ages	276,477	27,514,714	3,438	37.5	40,112	0.8	166	7,401	80.8	85,987	0.7	44
5 and younger	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	0.0	0
15-20	110	5,535	2	11.8	24	0.2	28	7	41.2	81	0.4	30
21-44	60,029	6,967,866	1,272	55.0	14,912	0.7	165	1,945	84.2	22,465	0.6	46
45-64	141,446	14,299,124	1,675	40.5	19,512	0.8	177	3,942	95.2	45,892	0.7	46
65-74	53,617	4,555,972	313	16.8	3,643	0.8	144	1,096	58.9	12,809	0.6	35
75-84	17,694	1,408,037	135	20.4	1,587	0.7	109	323	48.9	3,748	0.6	33
85 and older	3,581	278,180	41	24.4	434	0.6	103	88	52.4	992	0.7	37
Female, Other Eligibles												
All Ages	232,993	16,514,538	2,327	22.5	24,672	0.6	94	6,106	59.0	65,851	0.7	35
5 and younger	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	0.0	0
15-20	25	1,353	0	0.0	0	0.0	0	2	200.0	24	0.5	51
21-44	737	62,624	25	16.2	164	0.6	132	52	33.8	298	0.6	35
45-64	592	47,463	8	10.4	53	0.6	75	36	46.8	229	0.6	46
65-74	56,936	4,540,770	368	15.3	4,132	0.7	116	1,214	50.5	13,635	0.7	37
75-84	92,005	6,622,695	843	21.9	9,112	0.6	100	2,138	55.4	23,511	0.7	35
85 and older	82,698	5,239,633	1,083	28.1	11,211	0.6	81	2,664	69.2	28,154	0.7	34
Male												
All Males	238,132	26,579,314	3,787	36.0	43,209	0.8	193	5,403	51.4	60,806	0.7	40
Male, Disabled												
All Ages	174,160	21,844,657	3,092	43.6	36,040	0.9	211	3,958	55.8	45,865	0.7	43
5 and younger	2	70	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	3	74	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	199	18,879	13	48.1	130	0.4	80	10	37.0	120	0.4	9
21-44	59,238	8,429,451	1,446	50.8	16,955	0.8	211	1,636	57.4	19,000	0.6	43
45-64	91,880	11,334,442	1,466	45.3	17,020	0.9	217	1,961	60.7	22,637	0.7	44
65-74	18,693	1,711,805	125	16.1	1,455	0.8	164	277	35.8	3,273	0.6	37
75-84	3,978	333,617	38	20.1	441	0.7	136	70	37.0	796	0.7	34
85 and older	167	16,319	4	20.0	39	0.8	230	4	20.0	39	0.4	15

Dual Eligible Beneficiaries

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, RHODE ISLAND, 2005

All Top 10 Drug Groups			ANTIPSYCHOTICS						ANTIDEPRESSANTS			
Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean	Mean \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean	Mean \$ per Benefit Month
						Number of Rx per Benefit Month					Number of Rx per Benefit Month	
Male, Other Eligibles												
All Ages	63,972	4,734,657	695	20.3	7,169	0.7	106	1,445	42.3	14,941	0.7	32
5 and younger	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	0.0	0
15-20	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	694	34,780	7	8.1	77	1.1	47	32	37.2	257	0.6	22
45-64	445	31,473	4	5.0	33	0.6	71	19	23.8	125	0.7	35
65-74	23,587	1,938,891	198	15.4	2,113	0.7	148	410	32.0	4,513	0.6	32
75-84	27,174	1,942,876	289	21.7	3,031	0.6	93	576	43.3	6,052	0.7	33
85 and older	12,072	786,637	197	30.8	1,915	0.6	82	408	63.8	3,994	0.7	30
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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.

Dual Eligible Beneficiaries

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, RHODE ISLAND, 2005

Beneficiary Characteristics	ULCER DRUGS					ANTIHYPERTENSIVE					ANTICONVULSANT				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	12,490	41.6	140,780	0.6	\$58	11,198	37.3	128,597	0.7	\$58	8,415	28.0	95,814	0.8	\$76
Female															
All Females	8,972	46.0	101,044	0.6	59	7,675	39.4	88,215	0.7	59	5,410	27.7	61,382	0.7	71
Female, Disabled															
All Ages	4,460	48.7	51,984	0.6	63	3,752	41.0	43,913	0.7	59	3,601	39.3	41,822	0.8	82
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	0	0.0	0	0.0	0
15-20	2	11.8	24	0.2	13	0	0.0	0	0.0	0	3	17.6	36	0.4	20
21-44	827	35.8	9,638	0.5	59	340	14.7	3,936	0.6	51	1,170	50.6	13,570	0.8	100
45-64	2,137	51.6	24,952	0.6	67	1,888	45.6	21,993	0.7	59	1,852	44.7	21,552	0.8	80
65-74	1,045	56.2	12,227	0.6	57	1,128	60.6	13,308	0.7	61	410	22.0	4,742	0.7	54
75-84	364	55.1	4,192	0.6	59	351	53.1	4,148	0.7	63	126	19.1	1,490	0.6	40
85 and older	85	50.6	951	0.6	63	45	26.8	528	0.6	54	40	23.8	432	0.5	31
Female, Other Eligibles															
All Ages	4,512	43.6	49,060	0.6	55	3,923	37.9	44,302	0.7	58	1,809	17.5	19,560	0.7	49
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	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	12	0.7	8
21-44	21	13.6	126	0.5	41	3	1.9	12	1.2	69	31	20.1	171	0.8	64
45-64	12	15.6	107	0.6	55	11	14.3	47	1.0	84	15	19.5	105	0.6	56
65-74	1,006	41.8	11,449	0.6	55	1,354	56.3	15,446	0.6	57	459	19.1	5,186	0.7	59
75-84	1,690	43.8	18,761	0.6	57	1,751	45.4	19,950	0.7	58	713	18.5	7,832	0.7	47
85 and older	1,783	46.3	18,617	0.7	53	804	20.9	8,847	0.8	59	590	15.3	6,254	0.7	41
Male															
All Males	3,518	33.5	39,736	0.6	58	3,523	33.5	40,382	0.7	57	3,005	28.6	34,432	0.8	84
Male, Disabled															
All Ages	2,250	31.7	26,168	0.6	60	2,297	32.4	26,781	0.7	57	2,474	34.9	28,835	0.8	90
5 and younger	1	100.0	2	1.0	35	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	100.0	12	0.3	6	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	9	33.3	108	0.2	13	1	3.7	12	0.1	3	5	18.5	51	0.6	98
21-44	686	24.1	8,016	0.5	56	535	18.8	6,218	0.6	51	1,042	36.6	12,193	0.8	97
45-64	1,140	35.3	13,201	0.6	64	1,279	39.6	14,864	0.7	58	1,252	38.7	14,532	0.8	87
65-74	328	42.4	3,865	0.6	55	406	52.5	4,793	0.7	60	145	18.7	1,715	0.7	60
75-84	79	41.8	910	0.6	61	74	39.2	881	0.7	61	27	14.3	317	0.9	90
85 and older	6	30.0	54	0.7	49	2	10.0	13	0.2	10	3	15.0	27	0.9	25

Dual Eligible Beneficiaries

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, RHODE ISLAND, 2005

Beneficiary Characteristics	ULCER DRUGS					ANTIHYPERTENSIVE					ANTICONVULSANT				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	1,268	37.1	13,568	0.6	53	1,226	35.9	13,601	0.7	57	531	15.5	5,597	0.7	53
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	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	9	10.5	70	0.6	31	17	19.8	142	0.7	32	9	10.5	66	1.0	49
45-64	6	7.5	41	0.7	62	17	21.3	113	0.6	44	6	7.5	30	0.5	82
65-74	443	34.6	4,913	0.6	53	563	43.9	6,403	0.6	56	210	16.4	2,287	0.8	63
75-84	536	40.3	5,785	0.6	51	500	37.6	5,629	0.7	59	209	15.7	2,281	0.7	48
85 and older	274	42.9	2,759	0.7	57	129	20.2	1,314	0.7	55	97	15.2	933	0.7	39
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 Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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.medspan.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.

Dual Eligible Beneficiaries

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, RHODE ISLAND, 2005

Beneficiary Characteristics	ANTIDIABETIC					ANTIASTHMATIC					ANALGESICS - Narcotic				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	10,069	33.5	114,367	0.6	\$42	12,346	41.1	140,580	0.5	\$34	15,673	52.2	176,428	0.4	\$26
Female															
All Females	7,085	36.3	80,517	0.6	42	8,853	45.4	100,855	0.4	33	10,887	55.8	122,419	0.4	24
Female, Disabled															
All Ages	3,256	35.6	38,052	0.5	47	5,153	56.3	60,115	0.4	33	6,333	69.2	73,703	0.5	26
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	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	1	5.9	12	0.1	2	9	52.9	102	0.4	11
21-44	322	13.9	3,753	0.6	55	1,104	47.8	12,754	0.4	24	1,631	70.6	18,948	0.4	20
45-64	1,515	36.6	17,624	0.5	48	2,517	60.8	29,335	0.5	34	3,099	74.9	36,010	0.5	32
65-74	1,051	56.5	12,349	0.5	45	1,106	59.4	12,962	0.5	38	1,132	60.8	13,243	0.5	22
75-84	317	48.0	3,743	0.5	39	360	54.5	4,280	0.4	35	387	58.5	4,548	0.4	20
85 and older	51	30.4	583	0.5	41	65	38.7	772	0.4	33	75	44.6	852	0.5	21
Female, Other Eligibles															
All Ages	3,829	37.0	42,465	0.6	37	3,700	35.8	40,740	0.5	35	4,554	44.0	48,716	0.4	20
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	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	1	100.0	12	0.2	2	1	100.0	12	0.2	1
21-44	10	6.5	62	0.4	23	29	18.8	162	0.5	27	42	27.3	304	0.4	19
45-64	12	15.6	32	1.1	81	18	23.4	153	0.5	37	35	45.5	283	0.4	14
65-74	1,117	46.4	12,606	0.5	42	1,096	45.6	12,461	0.5	37	1,116	46.4	12,677	0.4	23
75-84	1,656	42.9	18,709	0.6	37	1,408	36.5	15,574	0.4	34	1,711	44.3	18,833	0.4	17
85 and older	1,034	26.9	11,056	0.7	32	1,148	29.8	12,378	0.4	33	1,649	42.8	16,607	0.5	21
Male															
All Males	2,984	28.4	33,850	0.5	43	3,493	33.2	39,725	0.5	34	4,786	45.5	54,009	0.5	33
Male, Disabled															
All Ages	1,781	25.1	20,693	0.5	47	2,368	33.4	27,402	0.5	34	3,616	51.0	41,827	0.5	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	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	4	14.8	48	0.2	8	8	29.6	92	0.1	1
21-44	359	12.6	4,163	0.5	49	708	24.9	8,210	0.4	26	1,451	50.9	16,865	0.4	32
45-64	982	30.4	11,327	0.5	47	1,145	35.4	13,123	0.5	36	1,736	53.7	19,955	0.5	43
65-74	377	48.7	4,469	0.5	47	400	51.7	4,738	0.5	40	352	45.5	4,151	0.4	32
75-84	62	32.8	722	0.4	33	104	55.0	1,221	0.5	37	67	35.4	740	0.3	8
85 and older	1	5.0	12	0.4	8	7	35.0	62	0.2	7	2	10.0	24	0.5	4

Dual Eligible Beneficiaries

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, RHODE ISLAND, 2005

Beneficiary Characteristics	ANTIDIABETIC					ANTIASTHMATIC					ANALGESICS - Narcotic				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	1,203	35.2	13,157	0.6	37	1,125	32.9	12,323	0.5	36	1,170	34.2	12,182	0.4	22
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	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	10	11.6	88	0.7	23	5	5.8	50	0.4	12	23	26.7	172	0.6	32
45-64	15	18.8	102	0.7	47	8	10.0	59	0.4	15	16	20.0	71	0.7	61
65-74	487	38.0	5,372	0.5	39	420	32.8	4,727	0.5	37	423	33.0	4,679	0.4	25
75-84	532	40.0	5,983	0.6	35	487	36.6	5,422	0.5	36	467	35.1	4,950	0.4	19
85 and older	159	24.9	1,612	0.7	38	205	32.1	2,065	0.4	33	241	37.7	2,310	0.5	20
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 Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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

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

Dual Eligible Beneficiaries

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, RHODE ISLAND, 2005

DOSE ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2009												
Beneficiary Characteristics	ANTIHYPERTENSIVE						ANTIVIRAL					
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
All	13,312	44.4	150,944	0.4	\$26	1,565	5.2	17,937	0.4	\$207	30,014	326,750
Female												
All Females	9,219	47.3	104,533	0.4	27	890	4.6	10,182	0.3	108	19,502	212,292
Female, Disabled												
All Ages	3,638	39.7	42,617	0.4	27	525	5.7	6,151	0.4	169	9,158	104,597
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	5
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	3	17.6	33	0.3	8	1	5.9	12	0.1	0	17	194
21-44	309	13.4	3,631	0.3	20	191	8.3	2,221	0.4	175	2,311	26,049
45-64	1,629	39.4	18,976	0.4	26	261	6.3	3,066	0.4	183	4,139	47,153
65-74	1,179	63.4	13,864	0.4	29	53	2.8	627	0.3	138	1,861	21,700
75-84	438	66.3	5,162	0.4	30	13	2.0	153	0.1	10	661	7,644
85 and older	80	47.6	951	0.5	30	6	3.6	72	0.1	5	168	1,852
Female, Other Eligibles												
All Ages	5,581	54.0	61,916	0.5	27	365	3.5	4,031	0.1	16	10,344	107,695
5 and younger	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	0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
21-44	8	5.2	36	0.4	16	4	2.6	26	0.2	55	154	508
45-64	15	19.5	87	0.3	24	1	1.3	1	3.0	3,118	77	326
65-74	1,432	59.5	16,227	0.4	28	51	2.1	565	0.1	33	2,405	26,116
75-84	2,279	59.1	25,723	0.5	28	118	3.1	1,350	0.1	20	3,858	41,674
85 and older	1,847	48.0	19,843	0.6	25	191	5.0	2,089	0.1	7	3,849	39,059
Male												
All Males	4,093	38.9	46,411	0.4	24	675	6.4	7,755	0.6	337	10,512	114,458
Male, Disabled												
All Ages	2,290	32.3	26,620	0.4	25	616	8.7	7,130	0.6	360	7,094	80,465
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	2
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
15-20	4	14.8	48	0.5	10	0	0.0	0	0.0	0	27	251
21-44	445	15.6	5,169	0.4	23	264	9.3	3,109	0.6	333	2,849	32,313
45-64	1,219	37.7	14,103	0.4	25	323	10.0	3,673	0.7	398	3,233	36,568
65-74	501	64.7	5,878	0.3	26	25	3.2	300	0.5	226	774	8,961
75-84	113	59.8	1,328	0.4	25	4	2.1	48	0.1	12	189	2,164
85 and older	8	40.0	94	0.3	29	0	0.0	0	0.0	0	20	194

Dual Eligible Beneficiaries

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, RHODE ISLAND, 2005

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIVIRAL					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month		
Male, Other Eligibles												
All Ages	1,803	52.8	19,791	0.5	24	59	1.7	625	0.2	73	3,418	33,993
5 and younger	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	0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
21-44	10	11.6	92	0.5	20	4	4.7	28	0.6	203	86	312
45-64	21	26.3	149	0.5	18	3	3.8	21	0.2	102	80	283
65-74	714	55.7	7,990	0.4	25	15	1.2	172	0.3	135	1,282	13,457
75-84	758	56.9	8,479	0.5	24	25	1.9	279	0.1	50	1,331	13,945
85 and older	300	46.9	3,081	0.6	21	12	1.9	125	0.1	8	639	5,996
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. 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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Dual Eligible Beneficiaries

TABLE D.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2005

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	\$402	6.6	4,255	47,649
Age				
0-64	452	5.1	981	11,655
65-74	489	7.3	485	5,527
75-84	416	7.5	1,088	11,941
85 and older	337	6.7	1,701	18,526
Unknown	0	0.0	0	0
Gender				
Female	396	6.9	3,010	33,499
Male	417	5.9	1,245	14,150
Unknown	0	0.0	0	0
Race				
White	409	6.6	3,036	34,709
African American	457	6.9	91	1,048
Other/unknown	378	6.7	1,128	11,892
Basis of Eligibility^c				
Aged	374	7.1	2,989	32,677
Disabled	464	5.5	1,266	14,972
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 Rhode Island, released by CMS in 12/2008. 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 2,782 beneficiaries who were in nursing facilities for part of their enrollment and their 25,774 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

Dual Eligible Beneficiaries

TABLE D.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of Dual All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	\$14	\$9	\$2	\$4	\$47	\$108	\$78	\$19	9,522	\$451,100	2,741	64.4	31,261
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.7	0.2	0.0	0.5	103	71	0	32	152	358	0	66	1,314	199,949	175	4.1	1,938
Endocrine/Metabolic Drugs	1.2	0.4	0.2	0.6	49	32	8	9	42	84	48	14	26,425	1,108,378	1,991	46.8	22,615
Cardiovascular Agents	2.1	0.7	0.0	1.5	63	43	0	20	30	66	33	14	70,535	2,109,320	2,969	69.8	33,240
Respiratory Agents	0.8	0.6	0.0	0.1	58	53	3	2	73	88	65	14	12,321	897,833	1,349	31.7	15,432
Gastrointestinal Agents	1.0	0.4	0.0	0.6	70	49	0	21	70	119	54	36	25,283	1,778,495	2,227	52.3	25,233
Genitourinary Agents	0.7	0.5	0.0	0.2	47	42	0	5	67	78	56	32	8,741	587,674	1,096	25.8	12,445
CNS Drugs	1.7	0.8	0.0	0.9	149	124	1	24	89	155	72	28	61,489	5,449,370	3,242	76.2	36,638
Stimulants/Anti-obesity/Anorexia	1.0	0.3	0.0	0.7	59	50	1	8	58	163	45	12	584	33,909	50	1.2	574
Miscellaneous Psychological/Neurological Agents	1.0	1.0	0.0	0.0	146	146	0	0	147	147	0	106	10,669	1,570,258	971	22.8	10,752
Analgesics and Anesthetics	0.9	0.2	0.1	0.6	50	22	9	18	56	96	107	32	17,957	1,012,838	1,807	42.5	20,250
Neuromuscular Agents	1.3	0.5	0.0	0.8	117	79	3	35	91	170	81	45	22,375	2,043,444	1,507	35.4	17,462
Nutritional Products	0.7	0.0	0.0	0.6	9	0	1	9	14	4	28	13	5,931	82,536	803	18.9	8,969
Hematological Agents	1.3	0.3	0.0	1.0	61	53	0	8	45	165	31	8	18,550	837,745	1,221	28.7	13,741
Topical Products	0.7	0.3	0.0	0.4	31	21	1	8	44	69	73	23	21,630	956,949	2,691	63.2	31,014
Miscellaneous Products	0.2	0.1	0.0	0.1	20	11	0	9	86	124	0	62	516	44,135	191	4.5	2,193
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	7	0	0	0	31	0	0	0	297	9,334	110	2.6	1,254
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.	314,139	19,173,267	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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 2,782 beneficiaries who were in nursing facilities for part of their enrollment and their 25,774 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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

In Rhode Island, 0.4 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.

Dual Eligible Beneficiaries

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, RHODE ISLAND, 2005

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Users			Among Users		
		Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months per	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$3,317,463	1,977	46.5	22,611	0.8	\$183	\$147
ANTIDEPRESSANTS	1,937,981	3,749	88.1	42,571	0.8	55	46
ANTICONVULSANT	1,781,986	1,557	36.6	18,148	1.0	103	98
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	1,570,258	1,158	27.2	12,855	0.8	147	122
ULCER DRUGS	1,440,589	1,903	44.7	21,596	0.8	81	67
ANTHYPERLIPIDEMIC	770,595	1,058	24.9	12,121	0.9	73	64
ANTIASTHMATIC	673,522	1,401	32.9	15,949	0.5	80	42
DERMATOLOGICAL	640,733	4,137	97.2	48,214	0.3	48	13
ANTIDIABETIC	575,701	1,284	30.2	14,605	0.9	43	39
ANALGESICS - Narcotic	531,808	1,428	33.6	15,762	0.7	50	34
Total	13,240,636	19,652		224,432	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. 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 2,782 beneficiaries who were in nursing facilities for part of their enrollment and their 25,774 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); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

Dual Eligible Beneficiaries

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, RHODE ISLAND, 2005

All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIDEPRESSANTS				
Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	155,054	\$13,240,636	1,977	46.5	22,611	0.8	\$147	3,749	88.1	42,571	0.8	\$46
Female												
All Females	110,266	9,029,732	1,364	45.3	15,492	0.8	132	2,841	94.4	32,256	0.8	44
Female, Disabled												
All Ages	25,449	2,726,744	339	55.3	3,985	0.9	193	498	81.2	5,920	0.9	61
64 or younger	15,940	1,903,841	214	51.4	2,541	0.9	211	302	72.6	3,613	1.0	69
65-74	5,322	492,280	64	64.6	738	1.0	190	95	96.0	1,121	0.9	57
75-84	2,757	224,651	41	69.5	486	0.9	142	60	101.7	710	0.8	49
85 and older	1,430	105,972	20	51.3	220	0.6	111	41	105.1	476	0.8	36
Female, Other Eligibles												
All Ages	84,817	6,302,988	1,025	42.8	11,507	0.7	111	2,343	97.7	26,336	0.8	40
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	9,171	760,614	109	59.2	1,244	0.9	146	200	108.7	2,276	0.8	49
75-84	30,207	2,230,016	370	50.6	4,186	0.7	123	761	104.1	8,544	0.8	40
85 and older	45,439	3,312,358	546	36.8	6,077	0.6	96	1,382	93.3	15,516	0.8	38
Male												
All Males	44,788	4,210,904	613	49.2	7,119	0.9	178	908	72.9	10,315	0.8	51
Male, Disabled												
All Ages	22,895	2,537,681	332	50.8	3,951	1.0	222	375	57.4	4,452	0.9	65
64 or younger	19,621	2,221,875	286	50.6	3,399	1.0	227	313	55.4	3,727	0.9	69
65-74	1,735	176,119	24	48.0	288	1.0	207	34	68.0	408	0.8	47
75-84	1,435	128,089	19	54.3	228	0.8	165	26	74.3	293	0.8	40
85 and older	104	11,598	3	100.0	36	0.8	249	2	66.7	24	0.6	21
Male, Other Eligibles												
All Ages	21,893	1,673,223	281	47.5	3,168	0.8	122	533	90.0	5,863	0.8	40
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	5,823	496,368	77	50.7	871	0.8	152	117	77.0	1,298	0.8	40
75-84	9,902	715,069	131	49.8	1,465	0.8	117	225	85.6	2,489	0.8	43
85 and older	6,168	461,786	73	41.2	832	0.7	101	191	107.9	2,076	0.8	37
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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 2,782 beneficiaries who were in nursing facilities for part of their enrollment and their 25,774 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.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, RHODE ISLAND, 2005

Beneficiary Characteristics	ANTICONVULSANT					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ULCER DRUGS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	1,557	36.6	18,148	1.0	\$98	1,158	27.2	12,855	0.8	\$122	1,903	44.7	21,596	0.8	\$67
Female															
All Females	987	32.8	11,508	0.9	86	931	30.9	10,381	0.8	124	1,376	45.7	15,548	0.8	65
Female, Disabled															
All Ages	370	60.4	4,416	1.0	128	100	16.3	1,158	0.9	258	264	43.1	3,090	0.8	69
64 or younger	266	63.9	3,186	1.1	147	61	14.7	716	0.9	333	138	33.2	1,632	0.8	75
65-74	59	59.6	701	0.9	96	15	15.2	161	1.0	210	66	66.7	773	0.8	67
75-84	28	47.5	334	0.8	65	12	20.3	144	0.8	104	35	59.3	415	0.8	55
85 and older	17	43.6	195	0.6	42	12	30.8	137	0.7	83	25	64.1	270	0.6	56
Female, Other Eligibles															
All Ages	617	25.7	7,092	0.9	60	831	34.7	9,223	0.8	107	1,112	46.4	12,458	0.8	64
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	105	57.1	1,247	1.0	89	54	29.3	626	0.9	115	85	46.2	978	0.8	63
75-84	235	32.1	2,679	0.9	59	256	35.0	2,743	0.8	108	360	49.2	4,048	0.8	66
85 and older	277	18.7	3,166	0.8	49	521	35.2	5,854	0.8	105	667	45.0	7,432	0.8	62
Male															
All Males	570	45.8	6,640	1.0	119	227	18.2	2,474	0.8	115	527	42.3	6,048	0.8	72
Male, Disabled															
All Ages	378	57.9	4,507	1.1	140	44	6.7	510	0.9	134	223	34.2	2,651	0.8	79
64 or younger	346	61.2	4,123	1.0	141	33	5.8	388	0.9	142	183	32.4	2,181	0.8	81
65-74	18	36.0	216	1.1	142	4	8.0	48	0.9	92	19	38.0	228	0.8	66
75-84	12	34.3	144	1.2	139	7	20.0	74	0.9	121	19	54.3	218	0.9	79
85 and older	2	66.7	24	1.0	27	0	0.0	0	0.0	0	2	66.7	24	1.0	59
Male, Other Eligibles															
All Ages	192	32.4	2,133	0.9	74	183	30.9	1,964	0.8	111	304	51.4	3,397	0.8	67
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	75	49.3	838	1.0	98	26	17.1	279	0.8	153	79	52.0	901	0.8	70
75-84	78	29.7	884	0.8	63	78	29.7	835	0.8	101	139	52.9	1,527	0.8	61
85 and older	39	22.0	411	0.8	47	79	44.6	850	0.8	106	86	48.6	969	0.9	75
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 Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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 2,782 beneficiaries who were in nursing facilities for part of their enrollment and their 25,774 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.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, RHODE ISLAND, 2005

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIASTHMATIC					DERMATOLOGICAL				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	1,058	24.9	12,121	0.9	\$64	1,401	32.9	15,949	0.5	\$42	4,137	97.2	48,214	0.3	\$13
Female															
All Females	736	24.5	8,424	0.9	63	1,007	33.5	11,481	0.5	40	2,747	91.3	31,910	0.3	14
Female, Disabled															
All Ages	173	28.2	2,047	0.9	74	163	26.6	1,935	0.6	51	726	118.4	8,646	0.3	13
64 or younger	99	23.8	1,181	0.9	77	64	15.4	763	0.6	57	532	127.9	6,360	0.3	13
65-74	47	47.5	552	0.9	73	47	47.5	564	0.6	51	106	107.1	1,242	0.3	12
75-84	21	35.6	249	0.9	72	34	57.6	400	0.5	45	60	101.7	712	0.2	11
85 and older	6	15.4	65	0.7	39	18	46.2	208	0.4	39	28	71.8	332	0.2	8
Female, Other Eligibles															
All Ages	563	23.5	6,377	0.9	59	844	35.2	9,546	0.5	38	2,021	84.3	23,264	0.3	14
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	86	46.7	994	0.8	59	84	45.7	935	0.6	48	167	90.8	1,962	0.3	12
75-84	234	32.0	2,629	0.9	60	274	37.5	3,079	0.5	41	648	88.6	7,422	0.3	15
85 and older	243	16.4	2,754	0.9	58	486	32.8	5,532	0.5	35	1,206	81.4	13,880	0.3	14
Male															
All Males	322	25.9	3,697	0.9	66	394	31.6	4,468	0.6	47	1,390	111.6	16,304	0.3	12
Male, Disabled															
All Ages	172	26.3	2,047	0.9	71	137	21.0	1,607	0.7	59	813	124.5	9,709	0.3	12
64 or younger	146	25.8	1,735	0.9	70	107	18.9	1,247	0.7	57	694	122.8	8,291	0.3	12
65-74	15	30.0	180	0.9	77	16	32.0	192	0.6	69	63	126.0	756	0.3	11
75-84	11	31.4	132	0.9	70	13	37.1	156	0.8	65	55	157.1	650	0.3	15
85 and older	0	0.0	0	0.0	0	1	33.3	12	0.1	1	1	33.3	12	0.9	6
Male, Other Eligibles															
All Ages	150	25.3	1,650	0.8	60	257	43.4	2,861	0.5	40	577	97.5	6,595	0.3	12
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	51	33.6	588	0.8	58	58	38.2	663	0.5	43	154	101.3	1,794	0.2	11
75-84	70	26.6	775	0.8	61	117	44.5	1,275	0.6	39	259	98.5	2,952	0.3	13
85 and older	29	16.4	287	0.8	60	82	46.3	923	0.5	41	164	92.7	1,849	0.3	13
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 Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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 2,782 beneficiaries who were in nursing facilities for part of their enrollment and their 25,774 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.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 DUAL ELIGIBLE BENEFICIARIES, RHODE ISLAND, 2005

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - Narcotic					All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		
All	1,284	30.2	14,605	0.9	\$39	1,428	33.6	15,762	0.7	\$34	4,255	47,649
Female												
All Females	947	31.5	10,765	0.9	38	1,106	36.7	12,163	0.7	36	3,010	33,499
Female, Disabled												
All Ages	149	24.3	1,746	0.9	48	179	29.2	2,078	0.8	36	613	7,235
64 or younger	60	14.4	711	1.0	57	83	20.0	972	0.8	32	416	4,952
65-74	50	50.5	582	0.9	45	45	45.5	528	1.0	50	99	1,153
75-84	24	40.7	288	0.9	39	28	47.5	317	0.7	22	59	686
85 and older	15	38.5	165	0.9	33	23	59.0	261	0.7	43	39	444
Female, Other Eligibles												
All Ages	798	33.3	9,019	0.9	36	927	38.7	10,085	0.7	36	2,397	26,264
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	93	50.5	997	0.9	40	75	40.8	857	1.0	66	184	2,089
75-84	337	46.1	3,797	1.0	38	308	42.1	3,368	0.7	32	731	7,998
85 and older	368	24.8	4,225	0.9	34	544	36.7	5,860	0.6	34	1,482	16,177
Male												
All Males	337	27.1	3,840	0.9	43	322	25.9	3,599	0.6	26	1,245	14,150
Male, Disabled												
All Ages	100	15.3	1,148	0.9	56	128	19.6	1,496	0.5	26	653	7,737
64 or younger	81	14.3	930	0.9	55	108	19.1	1,265	0.5	28	565	6,703
65-74	9	18.0	108	1.3	88	12	24.0	144	0.4	16	50	597
75-84	10	28.6	110	0.8	26	8	22.9	87	0.3	3	35	401
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	36
Male, Other Eligibles												
All Ages	237	40.0	2,692	0.9	37	194	32.8	2,103	0.7	25	592	6,413
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	60	39.5	673	0.9	41	39	25.7	440	0.8	34	152	1,688
75-84	122	46.4	1,400	0.9	34	93	35.4	986	0.6	24	263	2,856
85 and older	55	31.1	619	0.9	43	62	35.0	677	0.6	22	177	1,869
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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 2,782 beneficiaries who were in nursing facilities for part of their enrollment and their 25,774 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.medspan.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}
RHODE ISLAND, 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	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Dual Rx \$	Total Number of Beneficiaries
All	17,587	58.6	5.5	165,933	\$65	\$1,939,639	\$12	1.8	30,014
Age									
5 and younger	1	50.0	3.5	7	39	77	11	24.9	2
6-14	0	0.0	0.0	0	0	0	0	0.0	1
15-20	13	28.9	1.2	53	10	442	8	1.1	45
21-44	2,781	51.5	4.7	25,612	66	357,959	14	1.8	5,400
45-64	4,877	64.8	6.9	52,315	94	709,977	14	1.9	7,529
65-74	3,744	59.2	5.3	33,281	58	367,501	11	1.9	6,322
75-84	3,463	57.3	5.0	30,418	48	292,506	10	1.6	6,039
85 and older	2,708	57.9	5.2	24,247	45	211,177	9	1.7	4,676
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	7,446	55.8	4.7	63,305	46	609,341	10	1.6	13,335
Disabled	10,029	61.7	6.3	102,050	81	1,322,741	13	1.9	16,252
Adults	98	24.3	1.2	473	12	4,930	10	1.7	404
Children	0	0.0	0.0	0	0	0	0	0.0	0
Unknown	14	60.9	4.6	105	114	2,627	25	3.2	23
Gender									
Female	12,358	63.4	6.1	119,207	73	1,427,693	12	2.1	19,502
Male	5,229	49.7	4.4	46,726	49	511,946	11	1.4	10,512
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	11,528	61.3	6.4	119,874	78	1,467,427	12	1.9	18,812
African American	983	54.2	4.3	7,822	44	78,974	10	1.3	1,813
Other/unknown	5,076	54.1	4.1	38,237	42	393,238	10	1.5	9,389
Use of Nursing Facilities^d									
Entire year	2,650	62.3	8.1	34,543	71	301,890	9	1.6	4,255
Part year	1,884	67.7	5.4	15,145	52	144,307	10	1.6	2,782
None	13,053	56.8	5.1	116,245	65	1,493,442	13	1.9	22,977
Maintenance Assistance Status									
Cash	9,316	60.0	5.6	86,943	67	1,033,353	12	1.9	15,536
Medically needy	205	67.7	6.4	1,938	63	19,170	10	1.6	303
Poverty related	81	36.8	2.5	553	41	9,060	16	2.3	220
Other/unknown	7,985	57.2	5.5	76,499	63	878,056	11	1.7	13,955

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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 the manufacturer.

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

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

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

TABLE D.12
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
RHODE ISLAND, 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	0.5	\$6	\$12	\$0	\$3	326,750
Age						
5 and younger	1.0	11	11	0	0	7
6-14	0.0	0	0	0	0	12
15-20	0.1	1	8	0	0	457
21-44	0.4	6	14	0	3	59,182
45-64	0.6	8	14	0	4	84,330
65-74	0.5	5	11	0	2	70,234
75-84	0.5	4	10	0	2	65,427
85 and older	0.5	4	9	0	1	47,101
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.5	4	10	0	2	140,156
Disabled	0.6	7	13	0	3	185,062
Adults	0.4	4	10	0	2	1,301
Children	0.0	0	0	0	0	0
Unknown	0.5	11	25	0	8	231
Gender						
Female	0.6	7	12	0	3	212,292
Male	0.4	4	11	0	2	114,458
Unknown	0.0	0	0	0	0	0
Race						
White	0.6	7	12	0	3	207,808
African American	0.4	4	10	0	1	20,232
Other/unknown	0.4	4	10	0	1	98,710
Use of Nursing Facilities^d						
Entire year	0.7	6	9	0	2	47,649
Part year	0.6	6	10	0	2	25,774
None	0.5	6	13	0	3	253,327
Maintenance Assistance Status						
Cash	0.5	6	12	0	3	177,197
Medically needy	0.6	6	10	0	2	3,181
Poverty related	0.3	4	16	0	2	2,147
Other/unknown	0.5	6	11	0	2	144,225

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

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

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

TABLE D.13
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS^{a,b,c}
RHODE ISLAND, 2005

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D		\$ per Rx	Number Rx as a Percentage of All Part D	
				Excluded Rx \$	Total Number Rx.		Excluded Rx	
All	26,762	\$72	\$1,939,639	100.0	165,933	\$12	100.0	
Anorexia or weight loss/gain	11	379	4,169	0.2	42	99	0.0	
Fertility drugs	0	0	0	0.0	0	0	0.0	
Drugs for cosmetic purposes	31	25	785	0.0	63	12	0.0	
Cough and cold medications	3,641	72	262,487	13.5	9,626	27	5.8	
Vitamins and minerals	3,143	91	286,648	14.8	18,167	16	10.9	
Non-prescription drugs	11,157	34	380,470	19.6	75,240	5	45.3	
Barbiturates	220	87	19,172	1.0	2,576	7	1.6	
Benzodiazepines	7,819	106	832,203	42.9	56,809	15	34.2	
Other Part D Excl Rx Drugs	740	208	153,705	7.9	3,410	45	2.1	

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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 vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

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

Dual Eligible Beneficiaries

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

Total Number of Dual Eligible Beneficiaries: 30,014
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$107,412,045
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$3,578

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	3,054	10.2	\$0	0.0
1-500	4,259	14.2	894,310	0.8
501-1,000	2,647	8.8	1,964,188	1.8
1,001-1,500	2,361	7.9	2,949,904	2.7
1,501-2,000	2,056	6.9	3,571,522	3.3
2,001-2,500	1,892	6.3	4,245,923	4.0
2,501-3,000	1,661	5.5	4,569,957	4.3
3,001-3,500	1,430	4.8	4,648,785	4.3
3,501-4,000	1,279	4.3	4,786,479	4.5
4,001-4,500	1,125	3.7	4,773,051	4.4
4,501-5,000	998	3.3	4,729,202	4.4
5,001-5,500	848	2.8	4,442,571	4.1
5,501-6,000	758	2.5	4,348,789	4.0
6,001-6,500	657	2.2	4,102,772	3.8
6,501-7,000	591	2.0	3,983,534	3.7
7,001-7,500	500	1.7	3,625,452	3.4
7,501-8,000	418	1.4	3,238,833	3.0
8,001-8,500	409	1.4	3,375,298	3.1
8,501-9,000	358	1.2	3,125,289	2.9
9,001-9,500	294	1.0	2,719,258	2.5
9,501-10,000	236	0.8	2,298,441	2.1
10,001+	2,183	7.3	35,018,487	32.6

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. 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.

SUPPLEMENTAL TABLE 1A
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65^{a, b, c}
 RHODE ISLAND, 2005

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 12,579
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$56,736,040
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$4,510

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries,		Percent of Total Pharmacy Reimbursement
		Age < 65	Pharmacy Reimbursement	
\$0	1,351	10.7	0	0.0
1-500	1,869	14.9	363,740	0.6
501-1,000	976	7.8	716,701	1.3
1,001-1,500	849	6.7	1,060,089	1.9
1,501-2,000	695	5.5	1,202,741	2.1
2,001-2,500	649	5.2	1,455,751	2.6
2,501-3,000	552	4.4	1,519,845	2.7
3,001-3,500	481	3.8	1,561,262	2.8
3,501-4,000	451	3.6	1,687,616	3.0
4,001-4,500	397	3.2	1,684,374	3.0
4,501-5,000	366	2.9	1,734,401	3.1
5,001-5,500	327	2.6	1,715,048	3.0
5,501-6,000	294	2.3	1,689,160	3.0
6,001-6,500	271	2.2	1,692,744	3.0
6,501-7,000	274	2.2	1,849,351	3.3
7,001-7,500	218	1.7	1,581,415	2.8
7,501-8,000	205	1.6	1,589,074	2.8
8,001-8,500	221	1.8	1,823,849	3.2
8,501-9,000	208	1.7	1,817,391	3.2
9,001-9,500	155	1.2	1,435,421	2.5
9,501-10,000	156	1.2	1,518,379	2.7
10,001+	1,614	12.8	27,037,688	47.7

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. 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.

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}
 RHODE ISLAND, 2005

Total Number of Dual Eligible Beneficiaries, Age 65+: 17,037
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$50,302,934
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$2,952

Annual Pharmacy Reimbursement per Beneficiary	Percent of Dual Beneficiaries, Age 65		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
	Number of Beneficiaries	+ Pharmacy Reimbursement		
\$0	1,541	9.0	0	0.0
1-500	2,276	13.4	508,811	1.0
501-1,000	1,638	9.6	1,222,856	2.4
1,001-1,500	1,493	8.8	1,867,590	3.7
1,501-2,000	1,352	7.9	2,352,547	4.7
2,001-2,500	1,231	7.2	2,762,784	5.5
2,501-3,000	1,096	6.4	3,014,784	6.0
3,001-3,500	943	5.5	3,067,713	6.1
3,501-4,000	823	4.8	3,079,647	6.1
4,001-4,500	727	4.3	3,084,585	6.1
4,501-5,000	628	3.7	2,976,317	5.9
5,001-5,500	519	3.0	2,717,335	5.4
5,501-6,000	462	2.7	2,648,214	5.3
6,001-6,500	381	2.2	2,379,379	4.7
6,501-7,000	316	1.9	2,127,194	4.2
7,001-7,500	281	1.6	2,036,638	4.0
7,501-8,000	210	1.2	1,626,369	3.2
8,001-8,500	186	1.1	1,534,778	3.1
8,501-9,000	150	0.9	1,307,898	2.6
9,001-9,500	138	0.8	1,274,624	2.5
9,501-10,000	80	0.5	780,062	1.6
10,001+	566	3.3	7,932,809	15.8

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. 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.

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

Total Number of Dual Eligible Beneficiaries, Age 65-74: 6,322
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$19,688,844
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$3,114

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
		65-74			
\$0	676	10.7		0	0.0
1-500	836	13.2		180,941	0.9
501-1,000	581	9.2		434,597	2.2
1,001-1,500	529	8.4		660,039	3.4
1,501-2,000	483	7.6		837,846	4.3
2,001-2,500	395	6.2		887,496	4.5
2,501-3,000	395	6.2		1,084,768	5.5
3,001-3,500	316	5.0		1,028,423	5.2
3,501-4,000	309	4.9		1,157,667	5.9
4,001-4,500	259	4.1		1,098,583	5.6
4,501-5,000	220	3.5		1,042,518	5.3
5,001-5,500	189	3.0		987,882	5.0
5,501-6,000	142	2.2		816,655	4.1
6,001-6,500	158	2.5		983,990	5.0
6,501-7,000	116	1.8		782,280	4.0
7,001-7,500	104	1.6		753,993	3.8
7,501-8,000	81	1.3		628,286	3.2
8,001-8,500	69	1.1		568,760	2.9
8,501-9,000	56	0.9		488,517	2.5
9,001-9,500	66	1.0		608,316	3.1
9,501-10,000	40	0.6		389,969	2.0
10,001+	302	4.8		4,267,318	21.7

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. 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.

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

Total Number of Dual Eligible Beneficiaries, Age 75-84: 6,039
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$18,033,431
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$2,986

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	552	9.1	0	0.0
1-500	732	12.1	163,218	0.9
501-1,000	549	9.1	409,848	2.3
1,001-1,500	507	8.4	633,101	3.5
1,501-2,000	502	8.3	875,076	4.9
2,001-2,500	463	7.7	1,038,782	5.8
2,501-3,000	391	6.5	1,077,217	6.0
3,001-3,500	349	5.8	1,135,499	6.3
3,501-4,000	305	5.1	1,139,115	6.3
4,001-4,500	269	4.5	1,141,492	6.3
4,501-5,000	228	3.8	1,082,474	6.0
5,001-5,500	192	3.2	1,008,270	5.6
5,501-6,000	180	3.0	1,031,267	5.7
6,001-6,500	132	2.2	827,752	4.6
6,501-7,000	120	2.0	806,111	4.5
7,001-7,500	120	2.0	869,045	4.8
7,501-8,000	85	1.4	658,930	3.7
8,001-8,500	64	1.1	528,822	2.9
8,501-9,000	56	0.9	489,202	2.7
9,001-9,500	50	0.8	462,436	2.6
9,501-10,000	19	0.3	185,062	1.0
10,001+	174	2.9	2,470,712	13.7

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. 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.

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

Total Number of Dual Eligible Beneficiaries, Age 85+: 4,676
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$12,580,659
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$2,690

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85		Percent of Total Pharmacy Reimbursement
			+ Pharmacy Reimbursement	
\$0	313	6.7	0	0.0
1-500	708	15.1	164,652	1.3
501-1,000	508	10.9	378,411	3.0
1,001-1,500	457	9.8	574,450	4.6
1,501-2,000	367	7.8	639,625	5.1
2,001-2,500	373	8.0	836,506	6.6
2,501-3,000	310	6.6	852,799	6.8
3,001-3,500	278	5.9	903,791	7.2
3,501-4,000	209	4.5	782,865	6.2
4,001-4,500	199	4.3	844,510	6.7
4,501-5,000	180	3.8	851,325	6.8
5,001-5,500	138	3.0	721,183	5.7
5,501-6,000	140	3.0	800,292	6.4
6,001-6,500	91	1.9	567,637	4.5
6,501-7,000	80	1.7	538,803	4.3
7,001-7,500	57	1.2	413,600	3.3
7,501-8,000	44	0.9	339,153	2.7
8,001-8,500	53	1.1	437,196	3.5
8,501-9,000	38	0.8	330,179	2.6
9,001-9,500	22	0.5	203,872	1.6
9,501-10,000	21	0.4	205,031	1.6
10,001+	90	1.9	1,194,779	9.5

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. 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, RHODE ISLAND, 2005

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	31,321	13,335	16,347	1,612	4	23	344,652	140,256	187,208	16,910	40	238
Age												
5 and younger	2	0	2	0	0	0	7	0	7	0	0	0
6-14	2	0	2	0	0	0	24	0	24	0	0	0
15-20	71	0	67	1	3	0	812	0	764	12	36	0
21-44	6,109	0	5,218	886	1	4	69,079	0	59,648	9,390	4	37
45-64	8,017	1	7,385	617	0	14	90,900	12	84,247	6,487	0	154
65-74	6,399	3,662	2,635	97	0	5	71,207	39,570	30,664	926	0	47
75-84	6,043	5,184	850	9	0	0	65,498	55,619	9,808	71	0	0
85 and older	4,678	4,488	188	2	0	0	47,125	45,055	2,046	24	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	20,200	10,100	9,208	866	3	23	222,136	106,844	105,817	9,209	28	238
Male	11,121	3,235	7,139	746	1	0	122,516	33,412	81,391	7,701	12	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	19,592	7,571	11,065	935	1	20	218,483	80,675	127,559	10,034	12	203
African American	1,913	480	1,312	120	1	0	21,642	5,418	14,947	1,273	4	0
Other/unknown	9,816	5,284	3,970	557	2	3	104,527	54,163	44,702	5,603	24	35
Use of Nursing Facilities^c												
Entire year	4,255	2,989	1,266	0	0	0	47,649	32,677	14,972	0	0	0
Part year	2,782	2,253	528	1	0	0	25,791	20,128	5,651	12	0	0
None	24,284	8,093	14,553	1,611	4	23	271,212	87,451	166,585	16,898	40	238
Maintenance Assistance Status												
Cash	15,659	4,484	11,119	56	0	0	179,318	50,225	128,495	598	0	0
Medically needy	303	190	113	0	0	0	3,233	2,018	1,215	0	0	0
Poverty related	223	92	95	12	1	23	2,326	955	1,030	91	12	238
Other/unknown	15,136	8,569	5,020	1,544	3	0	159,775	87,058	56,468	16,221	28	0
Dual Status^d												
Full dual, all year	30,823	13,009	16,181	1,606	4	23	339,235	136,698	185,405	16,854	40	238
Full dual, part year	498	326	166	6	0	0	5,417	3,558	1,803	56	0	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	29,418	13,312	16,046	38	0	22	324,264	140,025	183,766	247	0	226
FFS part year, with Rx claims	398	15	171	211	0	1	4,415	166	1,978	2,259	0	12
FFS part year, no Rx claims	198	8	35	155	0	0	1,768	65	350	1,353	0	0
MC all year, with Rx claims	94	0	6	88	0	0	1,041	0	72	969	0	0
MC all year, no Rx claims	1,213	0	89	1,120	4	0	13,164	0	1,042	12,082	40	0

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. This table was produced on 04/23/2009.

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.

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, RHODE ISLAND, 2005

Beneficiary Characteristics	Beneficiaries and Benefit Months in Cell F of		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	Table 1					
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	31,321	344,652	30,014	326,750	0	17,902
Fee-for-service (FFS) all year	29,418	324,264	29,418	324,264	0	0
FFS part year, with Rx claims	398	4,415	398	2,082	0	2,333
FFS part year, with no Rx claims	198	1,768	198	404	0	1,364
Managed care (MC) all year, with Rx claims	94	1,041	0	0	0	1,041
MC all year, with no Rx claims	1,213	13,164	0	0	0	13,164

Source: Data for this table are from the MAX 2005 file for Rhode Island, released by CMS in 12/2008. 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.

Dual Eligible Beneficiaries