

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2005 ALABAMA

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TABLE ND.2 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY  $^{a,\ b}$ NONDUAL BENEFICIARIES, ALABAMA, 2005

			Number of	Beneficiar	ies				Number of E	Benefit Mont	hs	
Beneficiary						Other/						Other/
Characteristics	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
All	756,938	741	111,797	201,770	442,273	357	7,577,314	6,811	1,201,035	2,091,115	4,275,200	3,153
Age												
5 and younger	191,809	1	6,716	2	185,090	0	1,807,519	9	71,800	10	1,735,700	0
6-14	200,521	0	17,851	22	182,648	0	2,041,385	0	203,989	111	1,837,285	0
15-20	105,070	0	13,267	17,781	74,022	0	1,002,952	0	147,976	155,805	699,171	0
21-44	213,400	0	32,745	180,027	513	115	2,259,615	0	352,118	1,903,482	3,044	971
45-64	44,137	1	39,965	3,931	0	240	445,760	12	411,913	31,657	0	2,178
65-74	933	97	829	5	0	2	9,527	831	8,650	42	0	4
75-84	643	320	322	1	0	0	6,613	3,058	3,551	4	0	0
85 and older	425	322	102	1	0	0	3,943	2,901	1,038	4	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	476,271	470	58,309	198,542	218,593	357	4,835,792	4,267	634,679	2,067,117	2,126,576	3,153
Male	274,319	269	53,486	3,228	217,336	0	2,705,029	2,526	566,332	23,998	2,112,173	0
Unknown	6,348	2	2	0	6,344	0	36,493	18	24	0	36,451	0
Race												
White	331,660	264	42,974	95,759	192,465	198	3,274,082	2,134	453,666	984,055	1,832,524	1,703
African American	374,424	383	55,938	98,411	219,546	146	3,828,588	3,774	618,048	1,045,015	2,160,409	1,342
Other/unknown	50,854	94	12,885	7,600	30,262	13	474,644	903	129,321	62,045	282,267	108
Use of Nursing Facilities <sup>c</sup>												
Entire year	1,229	174	1,054	1	0	0	12,822	1,637	11,180	5	0	0
Part year	870	71	797	0	1	1	8,863	597	8,252	0	11	3
None	754,839	496	109,946	201,769	442,272	356	7,555,629	4,577	1,181,603	2,091,110	4,275,189	3,150
Maintenance Assistance Statu	ıs											
Cash	191,934	408	110,653	29,009	51,864	0	1,987,280	4,286	1,191,018	274,227	517,749	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	402,345	11	23	24,276	377,678	357	3,831,223	90	160	183,854	3,643,966	3,153
Other/unknown	162,659	322	1,121	148,485	12,731	0	1,758,811	2,435	9,857	1,633,034	113,485	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	756,460	732	111,779	201,452	442,140	357	7,572,920	6,753	1,200,918	2,088,025	4,274,071	3,153
FFS part year, with Rx claims	443	6	15	304	118	0	4,125	49	100	2,966	1,010	0
FFS part year, no Rx claims	35	3	3	14	15	0	269	9	17	124	119	0

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

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

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

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

TABLE ND.3 ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Maan Dy f	¢ nor Dy	Mean \$, All Medicaid FFS \$c	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>d</sup>	Number of
All	59.6	7.8	Mean Rx \$	\$ per Rx \$57		19.4	Beneficiaries 756,938
Age	33.0	7.0	ΨΤΤΟ	ΨΟΙ	ΨΣ,Σ30	13.4	750,550
5 and younger	74.8	5.5	243	44	1,747	13.9	191,809
6-14	65.3	5.5	376	68	1,933	19.4	200,521
15-20	60.5	5.4	329	61	2,540	13.0	105,070
21-44	34.7	6.1	351	58	1,880	18.7	213,400
45-64	84.5	41.1	2,274	55	7,222	31.5	44,137
65-74	81.2	40.5	2,072	51	11,108	18.7	933
75-84	81.3	40.9	1,857	45	11,644	15.9	643
85 and older	68.5	30.7	1,505	49	13,572	11.1	425
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibilitye							
Aged	70.7	33.8	1,649	49	13,150	12.5	741
Disabled	81.5	27.5	1,896	69	6,579	28.8	111,797
Adults	28.6	3.1	112	36	1,097	10.2	201,770
Children	68.1	4.9	225	46	1,724	13.0	442,273
Unknown	86.8	24.2	1,620	67	10,995	14.7	357
Gender							
Female	54.2	7.8	397	51	2,101	18.9	476,271
Male	69.2	8.0	532	67	2,634	20.2	274,319
Unknown	50.3	2.4	122	51	1,566	7.8	6,348
Race							
White	63.8	9.5	539	57	2,483	21.7	331,660
African American	55.7	6.1	344	56	2,074	16.6	374,424
Other/unknown	60.6	9.1	552	61	2,616	21.1	50,854
Use of Nursing Facili	ties <sup>f</sup>						
Entire year	98.1	79.1	4,952	63	53,867	9.2	1,229
Part year	98.6	68.5	3,954	58	30,235	13.1	870
None	59.5	7.6	432	57	2,173	19.9	754,839
Maintenance Assista	nce Status						
Cash	77.4	19.3	1,233	64	4,522	27.3	191,934
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	67.7	4.8	211	44	1,598	13.2	402,345
Other/unknown	18.5	1.8	87	49	1,365	6.4	162,659

a. Table ND.3 includes beneficiaries represented by Cell K of Table 1.

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

c. In 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 fost care and adoptive services.

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

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

TABLE ND.4 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

				3112071		nber of Rx, F	Percentage v	vith:			Numb	er
Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$c	None		More than 1, but 2 or Less	More than 2, but 5 or Less		More than 10	Mean \$, All Medicaid FFS \$d	Beneficiaries	Benefit Months
All	0.8	\$44	19.4	40.4	46.0	6.0	5.1	2.1	0.4	\$229	756,938	7,577,314
Age												
5 and younger	0.6	26	13.9	25.2	65.8	6.8	2.1	0.1	0.0	185	191,809	1,807,519
6-14	0.5	37	19.4	34.7	56.0	5.6	3.3	0.4	0.0	190	200,521	2,041,385
15-20	0.6	35	13.0	39.5	50.8	5.7	3.4	0.5	0.0	266	105,070	1,002,952
21-44	0.6	33	18.7	65.3	22.7	4.5	5.3	1.9	0.3	178	213,400	2,259,615
45-64	4.1	225	31.5	15.5	17.7	11.7	28.1	21.8	5.2	715	44,137	445,760
65-74	4.0	203	18.7	18.8	15.3	9.3	26.8	23.9	5.9	1,088	933	9,527
75-84	4.0	181	15.9	18.7	14.9	10.9	27.1	23.5	5.0	1,132	643	6,613
85 and older	3.3	162	11.1	31.5	8.7	10.1	26.1	19.5	4.0	1,463	425	3,943
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility	/ <sup>e</sup>											
Aged	3.7	179	12.5	29.3	11.7	9.7	23.6	20.6	5.0	1,431	741	6,811
Disabled	2.6	177	28.8	18.5	33.7	12.1	20.9	12.2	2.6	612	111,797	1,201,035
Adults	0.3	11	10.2	71.4	22.1	3.2	2.7	0.7	0.1	106	201,770	2,091,115
Children	0.5	23	13.0	31.9	60.1	5.7	2.2	0.1	0.0	178	442,273	4,275,200
Unknown	2.7	183	14.7	13.2	26.3	21.6	28.9	9.8	0.3	1,245	357	3,153
Gender												
Female	0.8	39	18.9	45.8	41.0	5.4	5.0	2.4	0.5	207	476,271	4,835,792
Male	0.8	54	20.2	30.8	54.8	7.1	5.4	1.6	0.3	267	274,319	2,705,029
Unknown	0.4	21	7.8	49.7	43.4	5.3	1.5	0.0	0.0	272	6,348	36,493
Race												
White	1.0	55	21.7	36.2	46.6	7.4	6.4	2.7	0.6	252	331,660	3,274,082
African American	0.6	34	16.6	44.3	45.5	4.8	3.8	1.4	0.2	203	374,424	3,828,588
Other/unknown	1.0	59	21.1	39.4	45.9	5.5	5.6	3.0	0.7	280	50,854	474,644
Use of Nursing Fa	cilities <sup>f</sup>											
Entire year	7.6	475	9.2	1.9	4.0	5.9	25.8	38.8	23.7	5,163	1,229	12,822
Part year	6.7	388	13.1	1.4	6.4	7.6	29.4	39.0	16.2	2,968	870	8,863
None	0.8	43	19.9	40.5	46.1	6.0	5.0	2.0	0.4	217	754,839	7,555,629
Maintenance Assi	stance Status	3										
Cash	1.9	119	27.3	22.6	42.9	10.5	14.8	7.7	1.5	437	191,934	1,987,280
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.5	22	13.2	32.3	59.8	5.6	2.1	0.1	0.0	168	402,345	3,831,223
Other/unknown	0.2	8	6.4	81.5	15.6	1.5	1.0	0.3	0.1	126	162,659	1,758,811

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

b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
c. In 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 e. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability

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

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

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

TABLE ND.5

AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>A, b, c</sup>

NONDUAL BENEFICIARIES, ALABAMA, 2005

		All Rx		Patented	d Brand Drugs	d-Name	Off-Pater	nt Bran Drugs	id-Name	Gen	eric Dı	uas
Beneficiary	Number			Number			Number			Number		-9-
Characteristics	of Rx	Rx\$	\$ per Rx	of Rx	Rx\$	\$ per Rx	of Rx	Rx\$	\$ per Rx	of Rx	Rx\$	\$ per Rx
All	0.8	\$44	\$57	0.2	\$31	\$131	0.0	\$2	\$55	0.5	\$11	\$22
Age												
5 and younger	0.6	26	44	0.2	17	107	0.0	1	29	0.4	7	19
6-14	0.5	37	68	0.2	29	123	0.0	2	57	0.3	6	23
15-20	0.6	35	61	0.2	25	137	0.0	2	62	0.3	7	20
21-44	0.6	33	58	0.1	23	156	0.0	2	69	0.4	9	22
45-64	4.1	225	55	1.1	146	135	0.1	7	83	2.9	71	25
65-74	4.0	203	51	1.1	135	119	0.1	5	60	2.7	63	23
75-84	4.0	181	45	1.1	116	104	0.1	5	51	2.8	60	22
85 and older	3.3	162	49	1.0	106	106	0.1	6	54	2.2	50	23
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	(
Basis of Eligibility	rd .											
Aged	3.7	179	49	1.1	116	103	0.1	6	57	2.4	57	23
Disabled	2.6	177	69	0.8	127	165	0.1	7	91	1.7	42	25
Adults	0.3	11	36	0.1	6	95	0.0	1	43	0.2	4	18
Children	0.5	23	46	0.2	16	95	0.0	2	38	0.3	6	20
Unknown	2.7	183	67	0.8	132	174	0.1	7	81	1.9	44	24
Gender												
Female	0.8	39	51	0.2	26	121	0.0	2	53	0.5	11	22
Male	0.8	54	67	0.3	40	145	0.0	3	57	0.5	11	23
Unknown	0.4	21	51	0.1	16	188	0.0	1	24	0.3	5	16
Race												
White	1.0	55	57	0.3	38	126	0.0	3	53	0.6	14	23
African American	0.6	34	56	0.2	24	135	0.0	2	58	0.4	8	21
Other/unknown	1.0	59	61	0.3	42	147	0.0	2	49	0.6	15	23
Use of Nursing Fa	cilitiese											
Entire year	7.6	475	63	2.4	312	133	0.3	21	62	4.9	142	29
Part year	6.7	388	58	1.8	243	136	0.2	15	77	4.7	130	28
None	0.8	43	57	0.2	30	131	0.0	2	55	0.5	11	22
Maintenance Assi	stance Sta	tus										
Cash	1.9	119	64	0.5	85	155	0.1	5	78	1.3	30	24
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	(
Poverty related	0.5	22	44	0.2	15	93	0.0	2	37	0.3	6	19
Other/unknown	0.2	8	49	0.1	6	108	0.0	1	46	0.1	2	20

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

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

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Alabama, 0.1 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

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

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

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

TABLE ND.6

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>
NONDUAL BENEFICIARIES, ALABAMA, 2005

		nber of R Month Am			\$ per		Month Amers	nong		\$ per	·Rx					Userse	
Therapeutic Category	F Total	Patented Brand- Name	Off- Patent Brand- Name (	Seneric		atented Brand- Name		Seneric	F Total	Patented Brand- Name	Brand-	Generic	Total Number of Rx	Total Rx \$	Number of	of All	Number of Benefit Months
Anti-infective Agents	0.2	0.1	0.0	0.2	\$11	\$6	\$1	\$4	\$44	\$100	\$60	\$23	826,590	\$36,164,008	313,830	41.5	3,377,391
Biologicals	0.3	0.3	0.0	0.0	388	353	23	12	1180	1,143	2,233	1,247	7,775	9,172,601	2,468	0.3	23,617
Antineoplastic Agents	0.5	0.1	0.0	0.4	104	80	1	22	216	685	212	63	12,395	2,678,320	2,414	0.3	25,757
Endocrine/Metabolic Drugs	0.3	0.1	0.0	0.2	18	11	2	5	51	113	67	23	419,003	21,277,846	109,239	14.4	1,198,997
Cardiovascular Agents	1.1	0.3	0.0	0.8	43	28	0	15	39	93	47	18	678,034	26,183,546	55,344	7.3	603,190
Respiratory Agents	0.4	0.1	0.0	0.2	16	12	1	3	42	87	28	16	1,155,909	48,974,856	279,885	37.0	3,012,550
Gastrointestinal Agents	0.4	0.1	0.0	0.3	25	15	0	10	65	122	47	38	311,369	20,108,370	75,536	10.0	815,440
Genitourinary Agents	0.2	0.1	0.0	0.1	10	6	1	3	47	87	65	25	59,222	2,775,829	26,834	3.5	290,496
CNS Drugs	0.7	0.3	0.0	0.4	69	58	0	10	96	182	110	26	635,239	61,033,612	81,246	10.7	890,782
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.1	53	47	0	5	84	97	64	39	213,269	17,997,220	30,686	4.1	342,121
Miscellaneous Psychological/ Neurological Agents Analgesics and Anesthetics	0.5 0.4	0.4	0.0	0.1	161 11	158 4	0	3	299 30	372 172	0 187	23 17	6,991 630.731	2,090,894 18,668,528	1,179 163,689		12,979 1,776,129
Neuromuscular Agents	0.4	0.0	0.0	0.3	48	32	1	5 14	76	169	88	32	367,836	27,902,423	52,802		581,205
Nutritional Products	0.8	0.2		0.4	40 7	2	2		20	31	21	32 16	,	, ,	,		,
			0.0		•		0	4					133,229	2,661,723	38,333		401,008
Hematological Agents	0.4	0.1	0.0	0.2	103	98	1	4	265	842	27	17	75,601	20,049,084	18,361	2.4	194,727
Topical Products	0.2	0.1	0.0	0.1	8	4	0	3	39	86	38	23	368,002	14,444,189	172,144		1,860,342
Miscellaneous Products	0.7	0.1	0.2	0.4	150	77	54	19	214	520	360	48	15,672	3,354,342	2,219		22,318
Unknown Therapeutic Category TOTAL NO. OF RX AND RX \$	0.2	0.0	0.0	0.0	3	0	0	0	16	0	0	0	3,672	58,228	1,831	0.2	20,664
TO TAL NO. OF NA AND KA \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	5,920,539	335,595,619	n.a.	n.a.	n.a.

a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum

of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Alabama, 0.1 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26 2007)

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.

#### TABLE ND.7 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

			Users		An	nong Usei	'S
Top 10 Drug Groups	Total Medicaid Rx	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$42,176,931	31,064	4.1	349,205	0.5	\$224	\$121
ANTIASTHMATIC	28,291,122	162,698	21.5	1,793,188	0.2	65	16
ANTICONVULSANT	25,110,081	36,158	4.8	401,651	0.6	106	63
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	17,997,187	36,328	4.8	407,291	0.5	84	44
MISC. HEMATOLOGICAL	16,569,616	3,283	0.4	36,231	0.5	844	457
ANTIDEPRESSANTS	16,253,299	62,782	8.3	690,935	0.4	54	24
ULCER DRUGS	15,725,157	66,638	8.8	724,728	0.3	69	22
ANTIDIABETIC	10,952,956	27,503	3.6	304,352	0.6	64	36
ANTIHYPERLIPIDEMIC	10,211,314	16,611	2.2	186,342	0.5	103	55
COUGH/COLD/ALLERGY	9,553,782	303,448	40.1	3,341,643	0.1	20	3
Total	192,841,445	746,513		8,235,566	n.a.	n.a.	n.a.

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

a. Table ND.7 includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

<sup>=</sup> Medicaid reimbursement.

# TABLE ND.7A MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

	All Top 1	10 Drug Groups		ANTI	PSYCHOTIC	CS			1A	NTIASTHMA	ΓIC	
Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit I Months Among Users	Mean Number of Rx per Benefit Month		Number of Users	Users as % of All Benes	Number of Benefit N Months Among Users	Mean Number of Rx per Benefit Month	\$ per Benefit
All	2,369,178	\$192,841,445	31,064	4.1	349,205	0.5	\$121	162,698	21.5	1,793,188	0.2	\$16
Female												
All Females	1,362,106	100,580,830	16,808	3.5	188,777	0.5	111	81,940	17.2	906,552	0.2	15
Female, Disabled												
All Ages	826,602	71,998,181	12,621	21.6	143,667	0.6	126	25,940	44.5	296,696	0.3	20
5 and younger	14,226	1,057,078	57	2.0	669	0.5	71	1,848	63.3	21,325	0.3	23
6-14	47,034	5,074,986	748	12.5	8,708	0.5	100	2,558	42.6	30,257	0.3	22
15-20	31,335	3,994,969	818	16.7	9,486	0.5	111	1,294	26.4	15,049	0.3	19
21-44	210,799	19,787,338	4,822	25.9	54,502	0.5	119	6,222	33.5	71,392	0.3	16
45-64	509,540	40,994,506	5,963	23.8	67,984	0.6	138	13,728	54.9	155,654	0.4	22
65-74	9,732	788,561	156	27.7	1,695	0.6	133	212	37.6	2,202	0.4	21
75-84	3,130	240,645	36	15.5	408	0.7	126	59	25.3	634	0.3	18
85 and older	806	60,098	21	24.7	215	0.6	71	19	22.4	183	0.2	14
Female, Other Eligibles												
All Ages	535,504	28,582,649	4,187	1.0	45,110	0.4	61	56,000	13.4	609,856	0.2	13
5 and younger	158,554	5,603,024	160	0.2	1,835	0.3	44	22,536	25.8	245,522	0.2	12
6-14	169,299	9,979,178	1,061	1.2	12,002	0.5	78	19,805	21.7	218,829	0.2	15
15-20	67,713	4,289,678	970	1.7	10,538	0.4	67	6,387	11.1	69,044	0.2	12
21-44	116,555	7,100,116	1,735	1.0	18,198	0.3	47	6,507	3.7	68,663	0.2	10
45-64	18,686	1,300,497	198	5.6	1,896	0.3	53	665	18.7	6,791	0.3	19
65-74	557	42,822	7	12.1	68	0.9	165	12	20.7	141	0.3	29
75-84	2,180	139,564	25	12.5	267	0.6	74	50	25.0	510	0.4	25
85 and older	1,960	127,770	31	14.2	306	0.7	82	38	17.4	356	0.4	17
Male												
All Males	1,002,017	92,118,466	14,254	5.2	160,409	0.6	133	79,997	29.2	880,112	0.2	16
Male, Disabled												
All Ages	490,779	62,098,048	10,656	19.9	120,926	0.6	148	17,609	32.9	200,044	0.3	22
5 and younger	22,048	2,340,744	166	4.4	1,953	0.5	76	2,920	76.9	33,923	0.3	23
6-14	107,174	17,262,998	2,301	19.4	26,777	0.6	111	5,307	44.8	62,370	0.3	22
15-20	53,499	8,419,176	1,620	19.4	18,533	0.6	133	1,866	22.3	21,696	0.3	22
21-44	112,455	16,448,625	3,697	26.1	41,427	0.6	169	1,998	14.1	22,286	0.3	16
45-64	191,118	17,291,995	2,816	18.8	31,628	0.7	168	5,398	36.1	58,501	0.4	25
65-74	3,278	248,896	41	15.5	443	0.7	152	80	30.3	823	0.6	29
75-84	1,070	74,134	12	13.5	129	0.6	73	33	37.1	372	0.4	21
85 and older	137	11,480	3	17.6	36	0.6	83	7	41.2	73	0.1	6

# TABLE ND.7A MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

	All Top 10	Drug Groups		ANTI	PSYCHOTIC	S			А	NTIASTHMA	ГІС	
Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit N Months Among Users	Mean lumber of Rx per I Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Months Among	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	511,238	30,020,418	3,598	1.6	39,483	0.5	85	62,388	28.3	680,068	0.2	15
5 and younger	192,915	7,743,338	258	0.3	2,883	0.4	55	30,837	33.7	333,644	0.2	13
6-14	244,631	16,773,411	2,139	2.3	23,965	0.5	86	25,798	28.3	284,676	0.2	16
15-20	56,699	4,251,299	970	2.8	10,398	0.5	91	5,174	15.0	56,153	0.2	15
21-44	9,460	699,086	158	5.9	1,494	0.3	56	355	13.2	3,314	0.3	14
45-64	4,165	313,044	24	3.9	234	0.5	118	151	24.5	1,535	0.3	15
65-74	694	41,549	8	17.4	91	0.5	50	26	56.5	243	0.5	29
75-84	1,774	126,160	24	19.8	251	0.6	120	23	19.0	276	0.6	30
85 and older	900	72,531	17	16.7	167	0.6	134	24	23.5	227	0.3	22
Unknown	5,055	142,149	2	0.0	19	0.2	6	761	12.0	6,524	0.2	9

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

a. Table ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

### TABLE ND.7B MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,

## BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

MISC. HEMATOLOGICAL ANTICONVULSANT STIMULANTS/ANTI-OBESITY/ANOREXIANTS Number of Mean Number of Mean Number of Mean Users Benefit Number of Mean Users Benefit Number of Mean Users Benefit Number of Mean Rx per Rx \$ per as % Months as % Rx per Rx \$ per as % Months Rx per Rx \$ per Months Benefit Benefit Number of of All Among Benefit Benefit Number of of All Among Benefit Benefit Number of of All Among **Beneficiary Characteristics** Users Benes Month Users Benes Users Month Month Benes Users Month Month Users Users Month ΑII 36.158 4.8 401.651 0.6 \$63 36.328 4.8 407,291 0.5 \$44 3.283 0.4 36.231 0.5 \$457 Female All Females 22,929 4.8 255,032 0.6 59 10,990 2.3 123,490 0.5 43 2,033 0.4 22,913 0.5 114 Female, Disabled All Ages 16,623 28.5 188,401 0.6 67 3,052 5.2 35,543 0.5 52 1,879 3.2 21,305 0.5 112 0.7 85 5 and younger 294 10.1 3,374 95 3.3 1,103 0.4 29 0 0.0 0 0.0 0 2 6-14 1,189 19.8 13,871 0.8 112 1,602 26.7 18,771 0.6 49 0.0 24 1.0 20,226 15-20 915 18.7 10.512 0.7 98 533 10.9 6.282 0.5 46 7 0.1 82 0.7 8.641 2,223 21-44 5,973 32.1 67,656 0.6 70 429 2.3 4,930 0.4 61 196 1.1 0.4 43 45-64 8,097 32.4 91,351 0.6 54 392 1.6 4,446 0.5 66 1,598 6.4 18,134 0.5 57 40 25 40 65-74 114 20.2 1,199 0.7 0.2 11 0.2 7.1 427 0.7 71 47 0 62 75-84 30 12.9 328 0.6 0 0.0 0 0.0 25 10.7 283 0.6 24 0 57 85 and older 11 12.9 110 0.4 0 0.0 0.0 0 11 12.9 132 0.6 Female, Other Eligibles All Ages 6,306 1.5 66,631 0.4 37 7,938 1.9 87,947 0.5 39 154 0.0 1,608 0.5 148 316 0.4 3,488 0.4 43 474 5,342 0.3 20 6,368 0.5 0.0 11 8.0 5 and younger 6-14 887 1.0 9.978 0.5 54 6.030 66,979 0.5 41 0 0 0.0 0 6.6 0.0 15-20 1,063 1.9 11,559 0.4 48 1,002 1.7 11,080 0.4 37 5 0.0 53 0.1 1,641 21-44 3,600 2.0 37,248 0.4 30 400 0.2 4,254 0.3 34 69 0.0 728 0.4 41 45-64 382 10.7 3,754 0.4 33 29 8.0 262 0.4 44 39 1.1 376 0.6 66 65-74 8 13.8 83 0.5 19 0 0.0 0 0.0 0 1.7 12 10 1 0.1 75-84 23 230 0.5 25 8 6 15 7.5 169 61 11.5 0.5 0.4 0.7 85 and older 27 12.3 291 0.6 35 2 0.9 22 0.5 2 24 11.0 259 0.7 62 Male 13,223 All Males 146,551 25,334 9.2 283,753 0.5 45 1,249 13,311 1,048 4.8 0.6 69 0.5 0.6 Male, Disabled All Ages 10,554 118.175 74 89,918 50 12,375 1,094 19.7 0.7 7,715 14.4 0.6 1,157 2.2 0.6 477 12.6 0.6 66 269 7.1 3,097 28 131 5,348 5 and younger 5,480 0.4 11 0.3 0.7 6-14 1,853 15.6 21,602 0.7 88 5,424 45.8 63,377 0.6 50 22 0.2 260 1.2 26,541 15-20 1,285 15.4 14,717 0.7 100 1,648 19.7 19,309 0.5 52 12 0.1 140 0.6 15,384 21-44 3,522 24.9 82 271 3,002 55 96 982 2.662 39.090 0.7 1.9 0.5 0.7 0.6 45-64 3,338 22.3 36,421 0.6 50 102 0.7 1,121 0.5 59 988 6.6 10,578 0.5 108 65-74 62 23.5 698 0.8 42 0 0.0 0 0.0 0 20 7.6 198 0.6 64 75-84 14 15.7 147 0.9 40 1.1 12 0.1 5 7 7.9 74 0.5 36 17.6 0 0.0 0 12 85 and older 3 20 0.9 127 0 0.0 5.9 0.9 115

## TABLE ND.7B MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,

#### BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

		ANTIC	CONVULSAN	NT		STIMULA	NTS/ANT	I-OBESITY/	ANOREXIA	NTS		MISC. H	HEMATOLOG	ICAL	
		ı	Number of	Mean				Number of	Mean				Number of	Mean	
		Users	Benefit N	lumber of	Mean		Users	Benefit N	lumber of	Mean		Users	Benefit N	lumber of	Mean
		as %	Months	Rx per l	Rx \$ per		as %	Months	Rx per l	Rx \$ per		as %	Months	Rx per F	Rx \$ per
5 " 0	Number of	of All	Among	Benefit	Benefit	Number of	of All	Among	Benefit	Benefit	Number of	of All	Among	Benefit	
Beneficiary Characteristics	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month
Male, Other Eligibles															
All Ages	2,669	1.2	28,376	0.4	45	17,619	8.0	193,835	0.5	43	92	0.0	936	0.6	444
5 and younger	474	0.5	5,251	0.4	36	1,188	1.3	13,329	0.3	22	6	0.0	63	0.4	2,129
6-14	1,135	1.2	12,577	0.5	48	14,370	15.7	158,096	0.5	44	3	0.0	26	0.8	7,354
15-20	587	1.7	6,195	0.4	51	2,021	5.9	22,016	0.5	47	2	0.0	16	0.3	2,233
21-44	356	13.2	3,185	0.4	41	34	1.3	322	0.4	55	28	1.0	273	0.6	69
45-64	90	14.6	893	0.5	40	4	0.6	48	0.4	40	28	4.5	289	0.6	67
65-74	6	13.0	60	0.5	14	1	2.2	12	0.1	15	2	4.3	21	0.9	75
75-84	14	11.6	137	0.6	49	1	0.8	12	0.3	48	13	10.7	128	0.7	64
85 and older	7	6.9	78	0.7	30	0	0.0	0	0.0	0	10	9.8	120	0.6	57
Unknown	6	0.1	68	0.3	34	4	0.1	48	0.5	23	1	0.0	7	0.3	136

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

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

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

# ${\it TABLE~ND.7C}\\ {\it MEDICAID~PHARMACY~BENEFIT~USE~AND~REIMBURSEMENT~FOR~SIXTH~TO~EIGHTH~TOP~DRUG~GROUPS~SEPARATELY,}$

#### BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

		ANTIE	DEPRESSAN	TS			UL	CER DRUGS	S			AN	TIDIABETIC	)	
Beneficiary	Number of	Users as % of All	Number of Benefit N Months Among		Mean Rx \$ per Benefit	Number of	Users as % of All	Number of Benefit I Months Among		Rx \$ per	Number of	Users as % of All	Number of Benefit I Months Among	Mean Number of Rx per Benefit	Mean Rx \$ per Benefit
Characteristics	Users	Benes	Users	Month	Month	Users	Benes	Users	Month		Users	Benes	Users	Month	
All	62,782	8.3	690,935	0.4	\$24	66,638	8.8	724,728	0.3	\$22	27,503	3.6	304,352	0.6	\$36
Female															
All Females	45,605	9.6	502,193	0.4	23	44,211	9.3	486,587	0.3	22	20,671	4.3	230,111	0.6	35
Female, Disable	d														
All Ages	27,491	47.1	311,635	0.5	27	22,495	38.6	257,241	0.4	31	16,588	28.4	188,057	0.6	37
5 and younger	20	0.7	240	0.3	13	453	15.5	5,061	0.3	21	11	0.4	132	0.8	84
6-14	778	13.0	9,151	0.5	23	620	10.3	7,350	0.3	25	97	1.6	1,164	0.5	50
15-20	1,096	22.4	12,742	0.4	26	700	14.3	8,094	0.3	19	172	3.5	1,958	0.5	34
21-44	9,596	51.6	108,936	0.4	25	6,466	34.8	74,227	0.3	25	3,379	18.2	38,632	0.5	32
45-64	15,745	62.9	177,843	0.5	29	13,873	55.5	158,277	0.5	34	12,502	50.0	141,405	0.6	38
65-74	170	30.1	1,819	0.6	28	242	42.9	2,706	0.5	31	317	56.2	3,546	0.7	37
75-84	65	27.9	702	0.6	26	111	47.6	1,205	0.5	36	90	38.6	1,038	0.6	32
85 and older	21	24.7	202	0.5	26	30	35.3	321	0.6	37	20	23.5	182	0.6	33
Female, Other E	ligibles														
All Ages	18,114	4.3	190,558	0.3	17	21,716	5.2	229,346	0.2	13	4,083	1.0	42,054	0.5	29
5 and younger	87	0.1	977	0.3	10	5,103	5.8	49,875	0.2	9	31	0.0	341	0.6	50
6-14	2,207	2.4	24,697	0.4	16	4,639	5.1	52,051	0.2	11	335	0.4	3,720	0.6	60
15-20	3,817	6.7	40,690	0.3	16	3,917	6.8	42,365	0.2	10	544	0.9	5,690	0.4	34
21-44	10,846	6.1	112,606	0.3	16	7,077	4.0	75,194	0.2	16	2,399	1.3	24,726	0.4	22
45-64	1,043	29.3	10,430	0.4	23	825	23.2	8,296	0.4	28	648	18.2	6,253	0.5	30
65-74	16	27.6	174	0.7	53	17	29.3	177	0.6	33	14	24.1	141	0.6	19
75-84	45	22.5	450	0.5	22	68	34.0	716	0.6	35	66	33.0	699	0.8	37
85 and older	53	24.2	534	0.6	34	70	32.0	672	0.5	32	46	21.0	484	0.7	34
Male															
All Males	17,172	6.3	188,682	0.5	25	22,005	8.0	235,231	0.3	21	6,830	2.5	74,217	0.6	39
Male, Disabled															
All Ages	11,479	21.5	127,346	0.5	27	9,911	18.5	110,815	0.4	31	5,846	10.9	64,163	0.6	38
5 and younger	46	1.2	548	0.3	11	570	15.0	6,362	0.3	21	6	0.2	72	0.7	49
6-14	1,649	13.9	19,256	0.5	24	902	7.6	10,552	0.3	25	99	0.8	1,177	0.6	54
15-20	1,500	17.9	17,297	0.5	29	724	8.7	8,379	0.3	21	147	1.8	1,700	0.6	55
21-44	3,542	25.0	38,948	0.5	29	2,522	17.8	28,222	0.4	30	1,281	9.0	14,257	0.5	36
45-64	4,678	31.3	50,643	0.5	26	5,084	34.0	56,124	0.5	35	4,203	28.1	45,756	0.6	37
65-74	45	17.0	447	0.5	18	75	28.4	797	0.7	34	87	33.0	936	0.6	38
75-84	14	15.7	164	0.6	19	29	32.6	326	0.6	40	20	22.5	229	0.8	49
85 and older	5	29.4	43	0.4	14	5	29.4	53	0.6	26	3	17.6	36	0.3	22

## TABLE ND.7C MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,

#### BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

		ANTIE	DEPRESSAN	TS			UL	CER DRUGS				1A	NTIDIABETIC		
			Number of	Mean				Number of	Mean				Number of	Mean	
		Users		lumber of	Mean		Users		lumber of	Mean		Users		Number of	Mean
5 "		as %	Months		Rx \$ per		as %	Months		Rx \$ per		as %			Rx \$ per
Beneficiary	Number of	of All	Among	Benefit			of All	Among	Benefit	Benefit		of All		Benefit	
Characteristics	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month
Male, Other Elig	ibles														
All Ages	5,693	2.6	61,336	0.4	20	12,094	5.5	124,416	0.2	12	984	0.4	10,054	0.6	47
5 and younger	140	0.2	1,562	0.2	7	5,836	6.4	55,993	0.2	10	61	0.1	695	0.7	65
6-14	2,812	3.1	31,585	0.4	18	3,790	4.2	42,349	0.2	11	241	0.3	2,583	0.6	52
15-20	1,828	5.3	19,516	0.4	22	1,740	5.0	18,973	0.2	12	242	0.7	2,510	0.6	61
21-44	686	25.4	6,393	0.3	21	450	16.7	4,236	0.3	27	236	8.8	2,233	0.5	31
45-64	162	26.3	1,583	0.4	22	168	27.2	1,666	0.4	33	114	18.5	1,098	0.6	36
65-74	13	28.3	134	0.7	31	22	47.8	239	0.6	42	22	47.8	232	0.6	24
75-84	33	27.3	351	0.7	31	53	43.8	586	0.7	40	49	40.5	530	0.8	36
85 and older	19	18.6	212	0.7	36	35	34.3	374	0.6	38	19	18.6	173	0.8	44
Unknown	5	0.1	60	0.4	33	422	6.6	2,910	0.2	9	2	0.0	24	0.5	37

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

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

a. Table ND.7C includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

# SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

		ANTIH	YPERLIPIDE	MIC			COUGH	I/COLD/ALLE	RGY			
		Users	Number of	Mean lumber of	Mean		Users	Number of	Mean Jumber of	Mean		
		as %	Months	Rx per R			as %	Months		Rx \$ per		
Beneficiary	Number of	of All	Among		Benefit	Number of	of All	Among	Benefit		Number of	Number of
Characteristics	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month	Beneficiaries E	Benefit Months
All	16,611	2.2	186,342	0.5	\$55	303,448	40.1	3,341,643	0.1	\$3	756,938	7,577,314
Female												
All Females	11,628	2.4	131,491	0.5	54	167,693	35.2	1,853,596	0.1	3	476,271	4,835,792
Female, Disable	t											
All Ages	10,235	17.6	116,876	0.5	56	34,482	59.1	401,518	0.2	3	58,309	634,679
5 and younger	10	0.3	120	0.2	7	2,102	72.0	24,273	0.2	3	2,918	30,807
6-14	8	0.1	96	0.4	35	3,109	51.8	36,739	0.1	3	6,005	68,942
15-20	12	0.2	141	0.3	33	1,994	40.7	23,440	0.1	3	4,898	55,107
21-44	1,586	8.5	18,119	0.4	45	10,676	57.4	124,501	0.1	3	18,589	204,316
45-64	8,334	33.3	95,161	0.6	58	16,281	65.1	188,989	0.2	4	25,017	266,038
65-74	211	37.4	2,372	0.6	70	201	35.6	2,224	0.2	3	564	6,033
75-84	64	27.5	758	0.6	62	97	41.6	1,134	0.2	3	233	2,576
85 and older	10	11.8	109	0.6	68	22	25.9	218	0.2	6	85	860
Female, Other El	igibles											
All Ages	1,393	0.3	14,615	0.4	39	133,211	31.9	1,452,078	0.1	3	417,962	4,201,113
5 and younger	41	0.0	463	0.1	2	60,775	69.6	657,170	0.2	3	87,342	831,820
6-14	19	0.0	218	0.3	24	40,518	44.4	451,233	0.1	3	91,333	919,053
15-20	46	0.1	475	0.3	19	15,573	27.2	169,534	0.1	3	57,297	529,388
21-44	812	0.5	8,636	0.3	35	15,037	8.4	160,510	0.1	2	177,958	1,887,564
45-64	418	11.8	4,177	0.5	50	1,181	33.2	12,190	0.2	3	3,555	28,991
65-74	9	15.5	87	0.7	88	11	19.0	119	0.2	4	58	461
75-84	33	16.5	387	0.7	72	68	34.0	773	0.1	2	200	1,872
85 and older	15	6.8	172	0.7	74	48	21.9	549	0.2	3	219	1,964
Male												
All Males	4,980	1.8	54,820	0.6	57	133,840	48.8	1,472,119	0.1	3	274,319	2,705,029
Male, Disabled												
All Ages	4,510	8.4	50,079	0.6	58	19,168	35.8	222,445	0.2	3	53,486	566,332
5 and younger	7	0.2	81	0.2	3	2,900	76.4	33,909	0.2	3	3,798	40,993
6-14	15	0.1	165	0.3	21	5,714	48.2	67,512	0.1	3	11,846	135,047
15-20	27	0.3	319	0.6	43	2,454	29.3	28,677	0.1	3	8,369	92,869
21-44	920	6.5	10,399	0.5	50	3,534	25.0	40,840	0.1	3	14,155	147,790
45-64	3,465	23.2	38,289	0.6	60	4,479	30.0	50,521	0.2	4	14,948	145,875
65-74	55	20.8	587	0.7	72	67	25.4	746	0.1	3	264	2,605
75-84	20	22.5	227	0.8	84	17	19.1	204	0.2	8	89	975
85 and older	1	5.9	12	0.8	113	3	17.6	36	0.1	1	17	178

#### TABLE ND.7D

#### ${\tt MEDICAID\ PHARMACY\ BENEFIT\ USE\ AND\ REIMBURSEMENT\ FOR\ NINTH\ AND\ TENTH\ TOP\ DRUG\ GROUPS}$

# SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

		ANTIF	IYPERLIPIDEI	MIC			COUGH	H/COLD/ALLE	RGY			
			Number of	Mean				Number of	Mean			
		Users			Mean		Users		lumber of	Mean		
		as %			Rx \$ per		as %	Months	Rx per l			
Beneficiary	Number of	of All	- 3	Benefit		Number of	of All	Among	Benefit		Number of	Number of
Characteristics	Users	Benes	Users	Month	Month	Users	Benes	Users	Month	Month	Beneficiaries B	enefit Months
Male, Other Elig	ibles											
All Ages	470	0.2	4,741	0.4	38	114,672	51.9	1,249,674	0.1	3	220,833	2,138,697
5 and younger	57	0.1	654	0.1	2	65,403	71.5	705,229	0.2	3	91,439	867,736
6-14	27	0.0	311	0.2	12	38,722	42.4	430,985	0.1	3	91,305	918,055
15-20	32	0.1	339	0.2	27	9,546	27.7	103,737	0.1	3	34,506	325,588
21-44	182	6.7	1,718	0.4	38	729	27.0	6,968	0.1	3	2,697	19,933
45-64	128	20.7	1,230	0.5	56	219	35.5	2,167	0.2	3	617	4,856
65-74	10	21.7	111	0.7	64	16	34.8	171	0.1	4	46	416
75-84	26	21.5	284	0.6	64	21	17.4	250	0.2	2	121	1,190
85 and older	8	7.8	94	0.6	66	16	15.7	167	0.1	2	102	923
Unknown	3	0.0	31	0.4	31	1,915	30.2	15,928	0.2	3	6,348	36,493

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

a. Table ND.7D includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2005. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

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

#### TABLE ND.8 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>

### NONDUAL BENEFICIARIES, ALABAMA, 2005

D		North and Donas Daniell	Niverban of All Many Niverban	Benefit Months Among All-
Beneficiary	Dy C nor Donofit Month	•	Number of All-Year Nursing	Year Nursing Facility
Characteristics	Rx \$ per Benefit Month	Month	•	Residents
All	\$475	7.6	1,229	12,822
Age				
0-64	503	7.9	947	10,101
65-74	445	7.3	80	799
75-84	358	6.7	89	922
85 and older	323	5.6	113	1,000
Unknown	0	0.0	0	0
Gender				
Female	497	8.0	673	7,092
Male	448	7.1	555	5,724
Unknown	82	3.0	1	6
Race				
White	490	8	544	5,611
African American	450	7.1	578	6,008
Other/unknown	525	8.1	107	1,203
Basis of Eligibility	С			
Aged	354	6.3	174	1,637
Disabled	493	7.8	1,054	11,180
Adults	118	6.8	1	5
Children	0	0.0	0	0
Unknown	0	0.0	0	0

c. inedicate basis or eligibility is classified as, aged, disabled, adultis, and children't ne disabled group includes behaliciant or all yage 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 & Medicard Services; MAX = Medicard Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy; \$ = Medicard reimbursement.

Source: Data for this table are from the MAX 2005 file for Alabama, released by CMS in 10/2008. This table was produced on 04/23/2009.
a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2005 Medicaid enrollment. A total of 870 beneficiaries who were

in nursing facilities for part of their enrollment and their 8,863 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

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

# BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

Number of Rx per Benefit \$ per Benefit Month Among

Month Among Users Users \$ per Rx

														_			
																As a	
			Off-				Off-				Off-					Percentage of All-Year	
	F	Patented			F	atented			F	Patented	Patent					Nursing	Number of
Therapeutic		Brand-					Brand-			Brand-	Brand-		Total Number		Number of	Facility	Benefit
Category	Total	Name	Name (	Generic	Total	Name	Name G	Seneric	Total	Name	Name (	Generic	of Rx	Total Rx \$	Users	Residents	Months
Anti-infective Agents	0.4	0.1	0.0	0.3	\$30	\$12	\$7	\$12	\$77	\$235	\$141	\$40	3,516	\$272,198	820	66.7	8,977
Biologicals	0.1	0.1	0.0	0.0	2	1	0	1	20	16	0	30	134	2,740	106	8.6	1,213
Antineoplastic Agents	0.4	0.0	0.0	0.4	75	9	0	65	170	395	117	158	479	81,348	109	8.9	1,091
Endocrine/Metabolic Drugs	1.1	0.5	0.2	0.5	66	49	7	10	58	107	43	20	6,652	384,115	545	44.3	5,841
Cardiovascular Agents	2.1	0.5	0.0	1.6	74	43	0	30	35	87	49	19	17,286	604,105	787	64.0	8,215
Respiratory Agents	0.7	0.2	0.0	0.4	31	22	1	8	44	89	36	18	4,474	195,228	586	47.7	6,360
Gastrointestinal Agents	1.2	0.3	0.0	0.9	76	40	3	34	63	137	61	38	10,623	664,979	813	66.2	8,701
Genitourinary Agents	0.6	0.4	0.0	0.2	45	38	2	6	70	89	77	29	1,999	140,877	291	23.7	3,138
CNS Drugs	1.7	0.9	0.0	0.8	154	133	0	21	92	155	53	26	16,739	1,539,498	933	75.9	9,983
Stimulants/Anti-obesity/Anorexia	0.7	0.2	0.0	0.5	47	35	2	11	65	154	32	24	135	8,814	17	1.4	186
Miscellaneous Psychological/																	
Neurological Agents	1.0	1.0	0.0	0.0	160	160	0	0	165	165	0	48	1,592	262,111	153	12.4	1,640
Analgesics and Anesthetics	1.0	0.1	0.0	0.8	52	15	6	31	53	127	168	38	7,285	388,406	707	57.5	7,475
Neuromuscular Agents	1.6	0.4	0.2	1.0	118	67	7	44	73	157	47	42	12,507	911,351	694	56.5	7,735
Nutritional Products	0.8	0.0	0.0	0.8	14	2	1	11	17	70	30	15	4,797	81,563	534	43.4	5,825
Hematological Agents	1.0	0.3	0.1	0.6	78	66	2	10	79	221	20	17	4,096	322,255	404	32.9	4,148
Topical Products	0.5	0.2	0.0	0.3	26	16	1	9	47	82	42	26	4,495	213,246	745	60.6	8,211
Miscellaneous Products	0.3	0.1	0.0	0.2	14	5	0	9	45	76	243	36	263	11,921	80	6.5	851
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	6	0	0	0	13	0	0	0	119	1,548	24	2.0	267
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.	97,191	6,086,303	n.a.	n.a.	n.a.

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

In Alabama, 0.1 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

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

Users

a. Table ND.9 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 870 beneficiaries who were in nursing facilities for part of their enrollment and their 8,863 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2005. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

#### TABLE ND.10 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,

#### BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

	-		Users				Among Users
Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Monthsp	Number of Rx er Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$1,016,651	539	43.9	5,999	0.8	\$207	\$169
ANTICONVULSANT	785,969	826	67.2	9,332	1.0	84	84
ULCER DRUGS	469,438	787	64.0	8,566	0.8	72	55
ANTIDEPRESSANTS	444,638	830	67.5	9,201	0.8	60	48
ANTIDIABETIC	307,796	535	43.5	5,836	1.0	53	53
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	262,111	179	14.6	1,984	0.8	165	132
ANALGESICS - Narcotic	261,704		63.6	8,274	0.6	52	32
ANTIHYPERLIPIDEMIC	206,500	232	18.9	2,586	0.8	96	80
ANTIHYPERTENSIVE	165,075	582	47.4	6,369	0.9	30	26
HEMATOPOIETIC AGENTS	140,476	262	21.3	2,780	0.6	85	51
Total	4,060,358	5,554		60,927	n.a.	n.a.	n.a.

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

Source: Data for this table are from the MAX 2005 file for Alabama, released by CMS in 10/2008. This table was produced on 04/23/2009.
a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 870 beneficiaries who were in nursing facilities for part of their enrollment and their 8,863 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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#### TABLE ND.10A MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST

AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGEA, b, c, d NONDUAL BENEFICIARIES, ALABAMA, 2005

	All Top 10	Drug Groups		ANTIPS	/CHOTICS				ANTICO	NVULSANT		
Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months	Mean Number of Rx		Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	
All	49,915	\$4,060,358	539	43.9	5,999	0.8	\$170	826	67.2	9,332	1.0	\$84
Female												
All Females	28,910	2,378,399	321	47.7	3,613	0.8	171	426	63.3	4,904	1.0	84
Female, Disabled												
All Ages	25,982	2,148,653	278	49.0	3,166	0.8	180	403	71.1	4,661	1.0	87
64 or younger	23,058	1,941,231	239	48.8	2,768	0.8	184	376	76.7	4,393	1.0	89
65-74	1,823	131,546	24	55.8	250	1.0	181	19	44.2	190	1.0	40
75-84	690	46,977	6	30.0	58	0.7	90	3	15.0	30	0.8	31
85 and older	411	28,899	9	64.3	90	0.7	115	5	35.7	48	0.5	42
Female, Other Eligibles												
All Ages	2,928	229,746	43	40.6	447	0.8	104	23	21.7	243	0.7	40
64 or younger	14	319	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	479	42,115	5	38.5	45	1.3	240	5	38.5	50	0.6	27
75-84	997	66,896	13	44.8	153	0.7	108	7	24.1	70	0.8	56
85 and older	1,438	120,416	25	39.7	249	0.7	76	11	17.5	123	0.7	36
Male												
All Males	21,000	1,681,644	218	39.3	2,386	0.8	168	400	72.1	4,428	1.1	84
Male, Disabled												
All Ages	19,047	1,536,506	186	38.2	2,047	0.8	172	387	79.5	4,297	1.1	86
64 or younger	18,032	1,460,457	171	37.5	1,885	0.8	176	371	81.4	4,127	1.1	87
65-74	606	47,762	11	68.8	123	0.8	125	9	56.3	104	1.3	65
75-84	335	22,174	3	25.0	27	0.8	108	7	58.3	66	1.3	65
85 and older	74	6,113	1	33.3	12	1.0	109	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	1,953	145,138	32	47.1	339	0.7	141	13	19.1	131	0.7	32
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	313	17,324	5	62.5	60	0.4	31	1	12.5	12	0.9	15
75-84	905	68,848	15	53.6	152	0.8	165	6	21.4	47	0.6	37
85 and older	735	58,966	12	37.5	127	0.7	165	6	18.8	72	0.7	32
Unknown	5	315	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 Alabama, released by CMS in 10/2008. This table was produced on 04/23/2009.

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

a. Table ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 870 beneficiaries who were

a. Table No. To includes the beneficiales represented by Cell LO in the State of their enrollment and their 8,863 benefit and its were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

d. The top 10 drug groups were determined based on total 2005 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

#### TABLE ND.10B

#### MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY

AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE $^{a,\,b,\,c,\,d}$  NONDUAL BENEFICIARIES, ALABAMA, 2005

	NONDUAL BENEFICIARIES, ALABAMA, 2005  ULCER DRUGS ANTIDEPRESSANTS ANTIDIABETIC														
Beneficiary	Number of	Users as % of All-Year Nursing Facility	Benefit Months Among		Mean Rx \$	Number of	Users as % of All-Year Nursing Facility	Benefit Months Among	Mean Number		Number of	Users as % of All-Year Nursing Facility Residents	Benefit Months Among	Mean Number	
Characteristics All	Users 787	Residents 64.0			\$55	Users 830	Residents 67.5								
	181	64.0	8,566	0.8	<b>\$</b> 55	830	67.5	9,201	0.8	\$48	535	43.5	5,836	1.0	<b>\$</b> 53
Female															
All Females	441	65.5	4,820	0.8	54	519	77.1	5,829	0.8	50	342	50.8	3,762	1.0	53
Female, Disable															
All Ages	376	66.3	,		56		80.1	,			297	52.4		1.1	
64 or younger	331	67.6	,		57	404	82.4	4,655	0.8				, -	1.1	
65-74	19	44.2	201	0.7	45	25	58.1	275	0.8	43	36	83.7	389	1.0	51
75-84	18	90.0	176	0.7	46	15	75.0	146	0.8	47	12	60.0	131	0.8	30
85 and older	8	57.1	67	0.9	46	10	71.4	85	0.7	41	4	28.6	19	0.5	16
Female, Other E	ligibles														
All Ages	65	61.3	632	0.7	43	65	61.3	668	0.7	41	45	42.5	462	0.7	31
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	6	46.2	64	0.9	55	11	84.6	119	0.9	72	7	53.8	70	0.6	17
75-84	19	65.5	203	0.7	43	18	62.1	197	0.7	30	14	48.3	157	0.7	30
85 and older	40	63.5	365	0.7	41	36	57.1	352	0.7	36	24	38.1	235	0.7	35
Male															
All Males	346	62.3	3,746	0.8	56	311	56.0	3,372	0.8	46	193	34.8	2,074	1.0	52
Male, Disabled															
All Ages	313	64.3	3,377	0.8	56	280	57.5	3,017	0.8	47	171	35.1	1,860	1.0	53
64 or younger	297	65.1	3,235		57	271	59.4				160				
65-74	11	68.8		0.9	37	4	25.0			55			56	0.7	32
75-84	5	41.7		0.7	65	3	25.0	36	0.6				36	0.6	
85 and older	0	0.0			0		66.7				3				
Male, Other Elig															
All Ages	33	48.5	369	0.8	52	31	45.6	355	0.8	39	22	32.4	214	0.9	44
64 or younger	0	0.0			0		0.0								
65-74	9	112.5			61	4	50.0				5			0.7	
75-84	13	46.4		0.8	46	15	53.6					39.3			
85 and older	11	34.4			53		37.5								
Unknown	0	0.0			0		0.0								

a. Table ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 870 beneficiaries who were in nursing facilities for part of their enrollment and their 8,863 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

#### TABLE ND.10C

#### MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGEA, b, c, d

NONDUAL BENEFICIARIES, ALABAMA, 2005

	MISC		HERAPEUT OLOGICAL	IC AND			ANALGES	ICS - Narcot	tic			ANTIHYPI	ERLIPIDEMI	С	
Beneficiary Characteristics	Number of Users	Users as	Number of Benefit Months Among	Mean Number of Rx		Number of Users	Users as % of All- Year Nursing Facility	Number of Benefit Months	Mean Number		Number of Users	Users as	Number of Benefit Months Among	Mean	
All	179	14.6	1,984	0.8	\$132	782	63.6	8,274	0.6	\$32	232	18.9	2,586	0.8	
Female															
All Females	113	16.8	1,258	0.8	139	442	65.7	4,738	0.6	28	142	21.1	1,610	0.8	80
Female, Disable	ed														
All Ages	74	13.1	855	0.8	153	384	67.7	4,214	0.6	27	128	22.6	1,458	0.8	80
64 or younger	57	11.6	661	0.8	161	341	69.6	3,836	0.6	27	110	22.4	1,274	0.8	81
65-74	7	16.3	74	1.0	144	25	58.1	224	0.7	35	11	25.6	111	0.8	83
75-84	6	30.0	72	0.8	126	12	60.0	109	0.6	27	5	25.0	60	0.7	55
85 and older	4	28.6	48	0.9	96	6	42.9	45	0.8	9	2	14.3	13	0.8	72
Female, Other E	ligibles														
All Ages	39	36.8	403	0.8	110	58	54.7	524	0.5	36	14	13.2	152	0.9	81
64 or younger	0	0.0	0	0.0	0	1	100.0	5	0.2	2	0	0.0	0	0.0	0
65-74	5	38.5	60	0.7	107	6	46.2	66	0.5	43	4	30.8	40	0.9	101
75-84	8	27.6	83	0.7	92	23	79.3	236	0.7	55	5	17.2	60	1.0	54
85 and older	26	41.3	260	0.8	117	28	44.4	217	0.3	14	5	7.9	52	0.9	97
Male															
All Males	65	11.7	720	0.8	121	340	61.3	3,536	0.6	36	90	16.2	976	0.9	79
Male, Disabled															
All Ages	43	8.8	465	0.8	130	301	61.8	3,164	0.6	37	82	16.8	899	0.9	82
64 or younger	34	7.5	357	0.8	137	288	63.2	3,055	0.6	38	76	16.7	831	0.8	81
65-74	3	18.8	36	0.6	93	7	43.8	64	0.3	18	4	25.0	44	1.0	99
75-84	4	33.3	48	0.7	102	5	41.7	33	0.2	8	2	16.7	24	1.0	100
85 and older	2	66.7	24	1.0	134	1	33.3	12	0.2	3	0	0.0	0	0.0	0
Male, Other Elig	ibles														
All Ages	22	32.4	255	0.7	103	39	57.4	372	0.6	31	8	11.8	77	0.9	41
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	2	25.0	24	0.6	58	8	100.0	87	0.5	30	1	12.5	12	1.8	41
75-84	13	46.4	147	0.7	106	11	39.3	109	0.9	23	6	21.4	53	0.8	38
85 and older	7	21.9	84	0.8	112	20	62.5	176	0.6	36	1	3.1	12	0.7	54
Unknown	1	100.0	6	0.8	53	0	0.0	0	0.0	0	0	0.0	0	0.0	0

a. Table ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 870 beneficiaries who were in nursing facilities for part of their enrollment and their 8,863 benefit months were excluded from the analysis.

In hulasing racinities for part of their entolimiter and trainer and train (p.000 selenial minutes) were excluded inform 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 ND.10D

#### MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

**ANTIHYPERTENSIVE** 

HEMATOPOIETIC AGENTS

Beneficiary Characteristics	Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months Among	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Benefit Months	Mean Number of Rx		All-Year Nursing Facility Residents	Benefit Months Among All- Year Nursing Facility Residents
All	582	47.4	6,369	0.9	\$26	262	21.3	2,780	0.6	\$51	1,229	12,822
Female												
All Females	321	47.7	3,494	0.8	27	154	22.9	1,669	0.6	39	673	7,092
Female, Disable	d											
All Ages	281	49.6	3,153	0.8	27	123	21.7	1,373	0.6	34	567	6,113
64 or younger	231	47.1	2,623	0.8	28	103	21.0	1,154	0.6	32	490	5,335
65-74	29	67.4	314	0.9	24	13	30.2	144	0.4	20	43	441
75-84	11	55.0	112	0.7	15	5	25.0	60	0.5	85	20	211
85 and older	10	71.4	104	1.0	19	2	14.3	15	0.3	113	14	126
Female, Other E	ligibles											
All Ages	40	37.7	341	0.8	32	31	29.2	296	0.5	64	106	979
64 or younger	2	200.0	10	0.9	28	1	100.0	5	0.8	5	1	5
65-74	8	61.5	78	0.8	41	3	23.1	30	0.4	5	13	121
75-84	10	34.5	98	0.7	27	13	44.8	135	0.6	6	29	291
85 and older	20	31.7	155	0.9	31	14	22.2	126	0.5	142	63	562
Male												
All Males	261	47.0	2,875	0.9	24	108	19.5	1,111	0.7	68	555	5,724
Male, Disabled												
All Ages	228	46.8	2,488	0.9	25	93	19.1	957	0.7	78	487	5,067
64 or younger	214	46.9	2,328	0.9	24	83	18.2	863	0.7	78	456	4,761
65-74	8	50.0	88	1.1	32	7	43.8	67	0.6	103	16	147
75-84	5	41.7	60	1.0	17	3	25.0	27	0.9	12	12	134
85 and older	1	33.3	12	1.1	21	0	0.0	0	0.0	0	3	25
Male, Other Elig	ibles											
All Ages	33	48.5	387	0.8	22	15	22.1	154	0.5	4	68	657
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	3	37.5	33	0.9	12	0	0.0	0	0.0	0	8	90
75-84	16	57.1	192	0.7	16	8	28.6	96	0.4	3	28	286
85 and older	14	43.8	162	0.8	32	7	21.9	58	0.7	7	32	281
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	6

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

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

a. Table ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2005. A total of 870 beneficiaries who were in nursing facilities for part of their enrollment and their 8,863 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2005. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

d. The top 10 drug groups were determined based on total 2005 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.medispan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615 (October 26, 2007).

#### TABLE ND.11 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS, BY BENEFICIARY CHARACTERISTICa,b ALABAMA, 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	\$ per	Total Part D Excluded Rx \$	\$ per Part D F	Part D Excluded Rx \$ as a Percentage of All Nondual Rx \$	Total Number of Beneficiaries
All	235,114	31.1	1.0	773,653	\$20	\$15,449,129	\$20	4.6	756,938
Age									
5 and younger	86,897	45.3	1.1	212,586	19	3,726,080	18	8.0	191,809
6-14	63,550	31.7	0.7	145,194	19	3,902,932	27	5.2	200,521
15-20	25,613	24.4	0.6	61,052	14	1,473,368	24	4.3	105,070
21-44	33,487	15.7	0.7	142,663	13	2,738,981	19	3.7	213,400
45-64	24,491	55.5	4.6	202,375	79	3,469,534	17	3.5	44,137
65-74	516	55.3	4.9	4,550	72	67,429	15	3.5	933
75-84	364	56.6	5.4	3,461	67	43,360	13	3.6	643
85 and older	196	46.1	4.2	1,772	65	27,445	15	4.3	425
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility	С								
Aged	361	48.7	4.2	3,142	65	47,952	15	3.9	741
Disabled	52,657	47.1	3.1	349,500	75	8,403,520	24	4.0	111,797
Adults	22,751	11.3	0.3	65,035	5	942,212	14	4.2	201,770
Children	159,186	36.0	0.8	355,198	14	6,043,190	17	6.1	442,273
Unknown	159	44.5	2.2	778	34	12,255	16	2.1	357
Gender									
Female	134,828	28.3	1.0	477,853	19	9,129,534	19	4.8	476,271
Male	98,713	36.0	1.1	292,532	23	6,274,831	21	4.3	274,319
Unknown	1,573	24.8	0.5	3,268	7	44,764	14	5.8	6,348
Race									
White	115,691	34.9	1.2	402,576	24	8,006,418	20	4.5	331,660
African American	101,492	27.1	0.8	302,768	16	5,888,557	19	4.6	374,424
Other/unknown	17,931	35.3	1.3	68,309	31	1,554,154	23	5.5	50,854
Use of Nursing Fa	cilitiesd								
Entire year	978	79.6	10.5	12,926	164	201,689	16	3.3	1,229
Part year	748	86.0	8.7	7,549	182	158,007	21	4.6	870
None	233,388	30.9	1.0	753,178	20	15,089,433	20	4.6	754,839
Maintenance Assis	stance Status								
Cash	83,286	43.4	2.3	434,630	50	9,614,111	22	4.1	191,934
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	140,653	35.0	0.8	310,126	13	5,244,079	17	6.2	402,345
Other/unknown	11,175	6.9	0.2	28,897	4	590,939	20	4.2	162,659

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

a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month

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

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

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

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

# TABLE ND.12 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup> ALABAMA, 2005

Beneficiary I Characteristics	Number Rx per	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
All	0.1	\$2	\$20	\$0	\$0	7,577,314
Age						
5 and younger	0.1	2	18	0	0	1,807,519
6-14	0.1	2	27	0	0	2,041,385
15-20	0.1	1	24	0	0	1,002,952
21-44	0.1	1	19	0	0	2,259,615
45-64	0.5	8	17	0	2	445,760
65-74	0.5	7	15	0	1	9,527
75-84	0.5	7	13	0	1	6,613
85 and older	0.4	7	15	0	2	3,943
Unknown	0.0	0	0	0	0	0
Basis of Eligibility <sup>c</sup>						
Aged	0.5	7	15	0	1	6,811
Disabled	0.3	7	24	0	2	1,201,035
Adults	0.0	0	14	0	0	2,091,115
Children	0.1	1	17	0	0	4,275,200
Unknown	0.2	4	16	0	1	3,153
Gender						
Female	0.1	2	19	0	0	4,835,792
Male	0.1	2	21	0	0	2,705,029
Unknown	0.1	1	14	0	0	36,493
Race						
White	0.1	2	20	0	0	3,274,082
African American	0.1	2	19	0	0	3,828,588
Other/unknown	0.1	3	23	0	1	474,644
Use of Nursing Facil	lities <sup>d</sup>					
Entire year	1.0	16	16	1	5	12,822
Part year	0.9	18	21	0	5	8,863
None	0.1	2	20	0	0	7,555,629
Maintenance Assista	ance Status					
Cash	0.2	5	22	0	1	1,987,280
Medically needy	0.0	0	0	0	0	0
Poverty related	0.1	1	17	0	0	3,831,223
Other/unknown	0.0	0	20	0	0	1,758,811

a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 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 they 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 beneficaries of any age who were determined to be eligible because of disability

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

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

TABLE ND.13
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS $^{a,b,c}$  ALABAMA, 2005

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$	Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
All	302,610	\$51	\$15,449,129	100.0	773,653	\$20	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	8	58	465	0.0	9	52	0.0
Drugs for cosmetic purposes	74	14	1,045	0.0	92	11	0.0
Cough and cold medications	177,882	37	6,615,816	42.8	364,824	18	47.2
Vitamins and minerals	15,303	86	1,317,323	8.5	74,772	18	9.7
Non-prescription drugs	76,952	47	3,592,350	23.3	174,700	21	22.6
Barbiturates	1,919	58	110,681	0.7	14,599	8	1.9
Benzodiazepines	21,899	108	2,354,547	15.2	123,383	19	15.9
Other Part D Excl Rx Drugs	8,573	170	1,456,902	9.4	21,274	68	2.7

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

a. Table ND.13 includes the beneficaries represented by Cell K of Table 1. Beneficiaries include all nondual 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 sused drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table ND11.

b. Includes OTC drugs as well as prescription drugs.

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

APPENDIX TABLE A.1 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

			Number of	Beneficia	ries				Number of	Benefit Mor	nths	
Beneficiary Characteristics	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
AII	756,993	760	111,831	201,770	442,275	357	7,578,516	7,061	1,201,533	2,091,433	4,275,336	3,153
Age												
5 and younger	191,809	1	6,716	2	185,090	0	1,807,521	9	71,800	10	1,735,702	0
6-14	200,522	0	17,851	22	182,649	0	2,041,393	0	203,990	111	1,837,292	0
15-20	105,071	0	13,267	17,781	74,023	0	1,003,101	0	147,976	155,827	699,298	0
21-44	213,405	0	32,750	180,027	513	115	2,259,999	0	352,207	1,903,777	3,044	971
45-64	44,149	1	39,977	3,931	0	240	445,910	12	412,062	31,658	0	2,178
65-74	940	97	836	5	0	2	9,655	842	8,767	42	0	4
75-84	664	332	331	1	0	0	6,903	3,218	3,681	4	0	0
85 and older	433	329	103	1	0	0	4,034	2,980	1,050	4	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	476,300	479	58,327	198,542	218,595	357	4,836,651	4,402	634,949	2,067,435	2,126,712	3,153
Male	274,345	279	53,502	3,228	217,336	0	2,705,372	2,641	566,560	23,998	2,112,173	0
Unknown	6,348	2	2	0	6,344	0	36,493	18	24	0	36,451	0
Race												
White	331,670	267	42,979	95,759	192,467	198	3,274,401	2,152	453,752	984,194	1,832,600	1,703
African American	374,463	396	55,964	98,411	219,546	146	3,829,369	3,970	618,406	1,045,188	2,160,463	1,342
Other/unknown	50,860	97	12,888	7,600	30,262	13	474,746	939	129,375	62,051	282,273	108
Use of Nursing Facilities <sup>c</sup>												
Entire year	1,230	175	1,054	1	0	0	12,834	1,649	11,180	5	0	0
Part year	870	71	797	0	1	1	8,874	608	8,252	0	11	3
None	754,893	514	109,980	201,769	442,274	356	7,556,808	4,804	1,182,101	2,091,428	4,275,325	3,150
Maintenance Assistance Statu	S											
Cash	191,984	425	110,686	29,009	51,864	0	1,988,273	4,517	1,191,491	274,465	517,800	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	402,348	12	23	24,276	377,680	357	3,831,334	95	162	183,876	3,644,048	3,153
Other/unknown	162,661	323	1,122	148,485	12,731	0	1,758,909	2,449	9,880	1,633,092	113,488	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	756,460	732	111,779	201,452	442,140	357	7,572,920	6,753	1,200,918	2,088,025	4,274,071	3,153
FFS part year, with Rx claims	443	6	15	304	118	0	4,646	72	175	3,270	1,129	0
FFS part year, no Rx claims	35	3	3	14	15	0	339	31	36	138	134	0
MC all year, with Rx claims	46	18	28	0	0	0	536	204	332	0	0	0
MC all year, no Rx claims	9	1	6	0	2	0	75	1	72	0	2	0

a. Table A.1 includes the beneficiaries represented by Cell J of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.
b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability

or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories

are not consistent with basis of eligibility.

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

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

#### APPENDIX TABLE A.2

#### MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS<sup>a</sup> NONDUAL BENEFICIARIES, ALABAMA, 2005

#### Beneficiaries and Benefit Months in Cell J of Table 1 Included in Cell K of Table 1 Excluded from Cell K of Table 1 Number of Number of Number of Number of Number of Number of Beneficiaries Benefit Months Beneficiaries Benefit Months Beneficiaries Benefit Months ΑII 756,993 7,578,516 756,938 7,577,314 0 1,202 Fee-for-service (FFS) all year 756,460 7,572,920 0 0 756,460 7,572,920 FFS part year, with Rx claims 443 0 521 4,646 443 4,125 FFS part year, with no Rx claims 35 35 269 0 70 339 Managed care (MC) all year, with Rx claims 46 536 0 0 0 536 9 75 0 0 MC all year, with no Rx claims 0 75

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

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

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