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

LIST OF TABLES

OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

FOR ALL MEDICAID BENEFICIARIES

TABLE 2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE 3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE 4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE 5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC

TABLE 6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE 7. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

FOR ALL NONDUAL BENEFICIARIES

TABLE ND.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE ND.3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE ND.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE ND.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND

BENEFICIARY CHARACTERISTIC

TABLE ND.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE ND.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

TABLE ND.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC

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

THERAPEUTIC CATEGORY

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

BY TOP 10 DRUG GROUP

TABLE ND.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS, BY

BENEFICIARY CHARACTERISTIC

TABLE ND.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS PER BENEFIT MONTH,

BY BENEFICIARY CHARACTERISTIC

TABLE ND.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES

AMONG NONDUALS

FOR DUAL ELIGIBLE BENEFICIARIES

TABLE D.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY

TABLE D.3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC

TABLE D.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC

TABLE D.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND

BENEFICIARY CHARACTERISTIC

TABLE D.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY

TABLE D.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

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

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

THERAPEUTIC CATEGORY

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

BY TOP 10 DRUG GROUP

TABLE D.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS, BY BENEFICIARY CHARACTERISTIC

TABLE D.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS PER BENEFIT MONTH, BY

BENEFICIARY CHARACTERISTIC

TABLE D.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS

SUPPLEMENTAL TABLES

SUPPLEMENTAL TABLE 1. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES

SUPPLEMENTAL TABLE 1A. MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65

SUPPLEMENTAL TABLE 1B. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER

SUPPLEMENTAL TABLE 1C. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74

SUPPLEMENTAL TABLE 1D. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84

SUPPLEMENTAL TABLE 1E. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER

APPENDIX TABLES

APPENDIX TABLE A.1. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, NONDUAL BENEFICIARIES

APPENDIX TABLE A.2. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, NONDUAL BENEFICIARIES
APPENDIX TABLE A.3. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, DUAL ELIGIBLE BENEFICIARIES
APPENDIX TABLE A.4. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, DUAL ELIGIBLE BENEFICIARIES

TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, IOWA, 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	350,966	1,162	33,410	95,088	221,082	224	3,010,347	8,681	354,724	666,501	1,978,273	2,168
Age												
5 and younger	92,889	0	2,096	192	90,601	0	799,059	0	20,804	1,528	776,727	0
6-14	95,301	0	5,558	83	89,660	0	914,557	0	62,302	753	851,502	0
15-20	50,029	0	4,238	6,948	38,843	0	433,908	0	46,855	50,481	336,572	0
21-44	88,367	0	10,268	76,118	1,931	50	667,603	0	110,241	543,784	13,115	463
45-64	23,143	0	11,186	11,739	45	173	186,062	0	114,105	69,901	355	1,701
65-74	441	372	60	7	1	1	3,798	3,374	377	42	1	4
75-84	365	363	2	0	0	0	2,925	2,909	16	0	0	0
85 and older	430	427	2	1	0	0	2,434	2,398	24	12	0	0
Unknown	1	0	0	0	1	0	1	0	0	0	1	0
Gender												
Female	198,812	738	16,916	71,186	109,748	224	1,688,616	5,441	180,950	519,111	980,946	2,168
Male	152,154	424	16,494	23,902	111,334	0	1,321,731	3,240	173,774	147,390	997,327	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	209,850	581	23,193	59,044	127,001	31	1,873,822	4,144	255,636	442,270	1,171,474	298
African American	27,655	38	3,053	7,055	17,506	3	251,701	367	32,371	53,526	165,407	30
Other/unknown	113,461	543	7,164	28,989	76,575	190	884,824	4,170	66,717	170,705	641,392	1,840
Use of Nursing Facilities^c												
Entire year	559	168	385	3	3	0	5,924	1,708	4,172	8	36	0
Part year	547	102	412	21	11	1	5,380	795	4,254	210	109	12
None	349,860	892	32,613	95,064	221,068	223	2,999,043	6,178	346,298	666,283	1,978,128	2,156
Maintenance Assistance Status												
Cash	136,768	320	25,120	45,752	65,576	0	1,242,804	3,333	268,106	364,237	607,128	0
Medically needy	6,642	104	478	4,979	1,081	0	50,530	879	2,821	38,042	8,788	0
Poverty-related	125,126	1	12	13,956	110,933	224	1,033,438	12	88	77,533	953,637	2,168
Other/unknown	82,430	737	7,800	30,401	43,492	0	683,575	4,457	83,709	186,689	408,720	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	320,768	1,162	33,238	87,145	199,000	223	2,749,421	8,681	353,149	604,184	1,781,245	2,162
FFS part year, with Rx claims	19,494	0	160	5,837	13,496	1	172,893	0	1,492	47,073	124,322	6
FFS part year, no Rx claims	7,759	0	12	1,244	6,503	0	58,221	0	83	7,347	50,791	0

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

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

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

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

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

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, IOWA, 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	64.9	8.0	\$529	\$66	\$3,499	15.1	350,966
Age							
5 and younger	69.2	3.9	201	52	2,116	9.5	92,889
6-14	60.4	5.3	436	82	2,318	18.8	95,301
15-20	63.5	6.9	496	72	4,003	12.4	50,029
21-44	67.5	10.2	623	61	4,547	13.7	88,367
45-64	59.7	28.5	1,905	67	8,475	22.5	23,143
65-74	69.6	32.2	1,650	51	10,672	15.5	441
75-84	58.4	31.9	1,467	46	10,427	14.1	365
85 and older	45.6	22.5	844	38	9,206	9.2	430
Unknown	0.0	0.0	0	0	0	0.0	1
Basis of Eligibility^e							
Aged	57.7	28.9	1,314	45	10,079	13.0	1,162
Disabled	85.3	34.0	2,831	83	18,580	15.2	33,410
Adults	61.7	7.1	344	48	2,404	14.3	95,088
Children	63.2	4.3	256	59	1,643	15.6	221,082
Unknown	89.7	27.8	1,891	68	16,827	11.2	224
Gender							
Female	67.7	8.8	520	59	3,332	15.6	198,812
Male	61.2	6.9	541	78	3,717	14.6	152,154
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	69.0	9.8	664	68	4,088	16.3	209,850
African American	62.5	6.0	405	68	2,742	14.8	27,655
Other/unknown	57.9	5.1	310	60	2,595	11.9	113,461
Use of Nursing Facilities^f							
Entire year	92.8	89.1	5,405	61	55,371	9.8	559
Part year	97.1	77.8	4,915	63	50,794	9.7	547
None	64.8	7.8	515	66	3,342	15.4	349,860
Maintenance Assistance Status							
Cash	73.1	11.7	786	67	4,372	18.0	136,768
Medically needy	45.7	7.1	419	59	3,446	12.1	6,642
Poverty related	59.4	3.5	177	51	1,386	12.7	125,126
Other/unknown	61.3	8.8	648	74	5,264	12.3	82,430

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

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 foster care and adoptive services.

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

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

TABLE ND.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, IOWA, 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	0.9	\$62	15.1	35.1	49.8	6.6	5.8	2.1	0.6	\$408	350,966	3,010,347
Age												
5 and younger	0.5	23	9.5	30.8	63.9	3.8	1.3	0.2	0.0	246	92,889	799,059
6-14	0.6	45	18.8	39.6	50.5	5.1	4.1	0.7	0.1	242	95,301	914,557
15-20	0.8	57	12.4	36.5	48.8	7.4	5.8	1.3	0.1	462	50,029	433,908
21-44	1.3	83	13.7	32.5	44.0	10.3	9.4	3.0	0.7	602	88,367	667,603
45-64	3.5	237	22.5	40.3	16.1	7.8	16.9	13.4	5.5	1,054	23,143	186,062
65-74	3.7	192	15.5	30.4	19.3	8.8	18.4	16.3	6.8	1,239	441	3,798
75-84	4.0	183	14.1	41.6	9.6	6.3	17.8	18.1	6.6	1,301	365	2,925
85 and older	4.0	149	9.2	54.4	5.3	6.5	15.6	14.4	3.7	1,626	430	2,434
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	1
Basis of Eligibility^e												
Aged	3.9	176	13.0	42.3	11.1	7.4	17.5	16.4	5.4	1,349	1,162	8,681
Disabled	3.2	267	15.2	14.7	30.4	12.2	23.3	14.3	5.0	1,750	33,410	354,724
Adults	1.0	49	14.3	38.3	43.1	9.4	7.2	1.8	0.3	343	95,088	666,501
Children	0.5	29	15.6	36.8	55.8	4.5	2.5	0.3	0.0	184	221,082	1,978,273
Unknown	2.9	195	11.2	10.3	30.8	19.6	25.9	11.6	1.8	1,739	224	2,168
Gender												
Female	1.0	61	15.6	32.3	50.9	7.4	6.2	2.5	0.8	392	198,812	1,688,616
Male	0.8	62	14.6	38.8	48.3	5.5	5.3	1.7	0.4	428	152,154	1,321,731
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.1	74	16.3	31.0	50.5	7.6	7.3	2.8	0.8	458	209,850	1,873,822
African American	0.7	44	14.8	37.5	51.6	5.2	4.0	1.4	0.3	301	27,655	251,701
Other/unknown	0.7	40	11.9	42.1	47.9	5.0	3.6	1.1	0.3	333	113,461	884,824
Use of Nursing Facilities^f												
Entire year	8.4	510	9.8	7.2	3.4	4.1	19.3	35.2	30.8	5,225	559	5,924
Part year	7.9	500	9.7	2.9	5.5	6.6	22.7	37.3	25.0	5,164	547	5,380
None	0.9	60	15.4	35.2	49.9	6.6	5.8	2.0	0.5	390	349,860	2,999,043
Maintenance Assistance Status												
Cash	1.3	87	18.0	26.9	51.8	8.1	8.4	3.6	1.2	481	136,768	1,242,804
Medically needy	0.9	55	12.1	54.3	27.5	6.9	7.4	3.3	0.5	453	6,642	50,530
Poverty related	0.4	21	12.7	40.6	52.9	4.4	1.9	0.2	0.0	168	125,126	1,033,438
Other/unknown	1.1	78	12.3	38.7	43.6	7.3	7.4	2.4	0.5	635	82,430	683,575

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

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 services, including services provided in capitated managed care plans and long-term-care services, were included.

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

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

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

TABLE ND.5
AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
NONDUAL BENEFICIARIES, IOWA, 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	0.9	\$62	\$66	0.3	\$46	\$135	0.1	\$6	\$78	0.5	\$9	\$18
Age												
5 and younger	0.5	23	52	0.1	17	122	0.0	2	54	0.3	5	17
6-14	0.6	45	82	0.3	38	137	0.0	3	82	0.2	5	19
15-20	0.8	57	72	0.3	44	139	0.1	6	63	0.4	7	18
21-44	1.3	83	61	0.4	59	139	0.1	10	75	0.8	14	17
45-64	3.5	237	67	1.3	168	134	0.2	27	112	2.0	41	20
65-74	3.7	192	51	1.3	136	105	0.3	19	73	2.2	37	17
75-84	4.0	183	46	1.3	128	95	0.3	18	62	2.3	37	16
85 and older	4.0	149	38	1.1	92	82	0.3	17	53	2.5	40	16
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	3.9	176	45	1.3	121	95	0.3	17	62	2.3	37	16
Disabled	3.2	267	83	1.3	204	163	0.2	25	103	1.7	37	22
Adults	1.0	49	48	0.3	33	114	0.1	7	66	0.6	9	15
Children	0.5	29	59	0.2	22	114	0.0	3	64	0.2	4	17
Unknown	2.9	195	68	1.0	145	152	0.2	15	91	1.8	35	20
Gender												
Female	1.0	61	59	0.3	44	126	0.1	7	71	0.6	10	17
Male	0.8	62	78	0.3	49	147	0.1	5	95	0.4	8	20
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	1.1	74	68	0.4	56	135	0.1	8	80	0.6	11	19
African American	0.7	44	68	0.2	34	151	0.0	4	84	0.4	7	17
Other/unknown	0.7	40	60	0.2	29	131	0.1	4	72	0.4	7	17
Use of Nursing Facilities^e												
Entire year	8.4	510	61	2.7	346	128	0.7	61	86	4.9	103	21
Part year	7.9	500	63	2.5	334	134	0.6	60	97	4.8	106	22
None	0.9	60	66	0.3	45	135	0.1	6	78	0.5	9	18
Maintenance Assistance Status												
Cash	1.3	87	67	0.5	64	139	0.1	9	86	0.7	14	19
Medically needy	0.9	55	59	0.3	38	128	0.1	7	90	0.6	10	18
Poverty related	0.4	21	51	0.1	15	106	0.0	2	59	0.2	4	16
Other/unknown	1.1	78	74	0.4	61	142	0.1	7	75	0.5	10	19

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

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 Iowa, 0.3 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^{a, b, c, d}
NONDUAL BENEFICIARIES, IOWA, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Total	Off-Brand-Name		Generic	Total	Off-Brand-Name		Generic	Total	Off-Brand-Name		Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
		Patented	Patent			Patented	Patent			Patented	Patent	Off-Brand-Name					
Anti-infective Agents	0.3	0.1	0.0	0.2	\$11	\$6	\$2	\$3	\$42	\$89	\$66	\$18	422,939	\$17,872,330	163,217	46.5	1,644,899
Biologicals	0.2	0.2	0.0	0.0	224	220	2	3	915	929	1,347	367	5,476	5,008,995	2,183	0.6	22,365
Antineoplastic Agents	0.6	0.2	0.0	0.4	170	148	2	21	281	838	230	49	5,385	1,510,882	866	0.2	8,868
Endocrine/Metabolic Drugs	0.4	0.1	0.1	0.2	24	14	7	3	55	107	56	16	247,004	13,496,290	56,009	16.0	564,859
Cardiovascular Agents	1.1	0.4	0.0	0.7	39	29	2	8	37	79	53	12	258,983	9,513,092	23,748	6.8	245,897
Respiratory Agents	0.3	0.1	0.0	0.2	18	14	0	3	51	102	39	16	348,977	17,971,492	98,676	28.1	1,010,724
Gastrointestinal Agents	0.4	0.2	0.0	0.3	31	25	1	5	73	160	95	20	127,156	9,303,139	28,921	8.2	296,396
Genitourinary Agents	0.3	0.1	0.1	0.1	15	9	3	2	58	93	55	21	29,186	1,681,381	11,508	3.3	115,291
CNS Drugs	1.0	0.5	0.0	0.4	92	78	5	9	97	157	107	21	509,654	49,292,344	52,982	15.1	535,800
Stimulants/Anti-obesity/Anorexia	0.8	0.6	0.0	0.1	75	68	4	3	99	110	92	32	163,313	16,176,167	20,202	5.8	215,193
Miscellaneous Psychological/Neurological Agents	0.5	0.5	0.0	0.0	235	234	0	1	461	476	0	43	3,719	1,714,700	694	0.2	7,310
Analgesics and Anesthetics	0.4	0.0	0.0	0.4	18	8	5	5	43	171	274	15	284,446	12,089,756	69,408	19.8	687,764
Neuromuscular Agents	0.6	0.3	0.1	0.3	60	43	6	11	93	172	113	32	162,322	15,151,824	24,071	6.9	251,575
Nutritional Products	0.3	0.0	0.0	0.3	6	1	1	4	18	33	39	15	44,823	794,436	14,797	4.2	134,418
Hematological Agents	0.6	0.2	0.1	0.4	165	156	4	6	263	839	42	16	25,302	6,661,043	3,988	1.1	40,336
Topical Products	0.2	0.1	0.0	0.1	7	4	1	2	38	81	55	16	158,858	5,984,427	80,508	22.9	831,503
Miscellaneous Products	0.4	0.2	0.0	0.2	79	58	8	14	195	335	279	66	7,387	1,441,433	1,720	0.5	18,163
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	6	0	0	0	30	0	0	0	3,834	114,558	1,860	0.5	20,012
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.	2,808,764	185,778,289	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

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 Iowa, 0.3 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.

Nondual Beneficiaries

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, IOWA, 2005

Top 10 Drug Groups	Users			Among Users			
	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	\$30,230,183	20,402	5.8	221,862	0.6	\$211	\$136
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	15,930,578	23,072	6.6	249,378	0.6	99	64
ANTIDEPRESSANTS	15,898,640	49,865	14.2	512,447	0.5	61	31
ANTICONVULSANT	13,714,742	15,043	4.3	162,613	0.7	122	84
ANTIASTHMATIC	12,526,809	64,752	18.4	679,749	0.3	66	18
ULCER DRUGS	6,108,452	24,862	7.1	257,715	0.3	70	24
ANALGESICS - Narcotic	5,990,931	68,187	19.4	688,150	0.3	34	9
MISC. HEMATOLOGICAL	5,056,345	1,086	0.3	11,626	0.6	730	435
ANTIDIABETIC	4,945,488	10,001	2.8	104,357	0.7	71	47
PASSIVE IMMUNIZING AGENTS	4,909,290	939	0.3	8,463	0.5	1,193	580
Total	115,311,458	278,209		2,896,360	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. 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; \$ = Medicaid reimbursement.

Nondual Beneficiaries

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

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	1,208,495	\$115,311,458	20,402	5.8	221,862	0.6	\$136	23,072	6.6	249,378	0.6	\$64
Female												
All Females	702,905	58,252,649	10,207	5.1	110,227	0.6	120	7,490	3.8	80,823	0.6	59
Female, Disabled												
All Ages	330,734	32,372,523	5,148	30.4	58,347	0.7	156	1,250	7.4	14,349	0.7	70
5 and younger	4,194	1,125,445	8	0.9	72	0.3	83	17	2.0	201	0.5	33
6-14	19,040	2,280,374	410	21.6	4,674	0.7	139	591	31.1	6,757	0.7	71
15-20	18,741	2,173,118	466	29.0	5,324	0.7	145	282	17.5	3,291	0.7	78
45-64	103,556	10,673,194	2,098	37.8	23,734	0.7	156	233	4.2	2,637	0.6	63
45-64	184,766	16,088,300	2,160	31.1	24,483	0.8	163	127	1.8	1,463	0.6	67
65-74	434	32,064	6	16.7	60	1.0	89	0	0.0	0	0.0	0
75-84	3	28	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	372,171	25,880,126	5,059	2.8	51,880	0.4	79	6,240	3.4	66,474	0.6	57
5 and younger	21,563	2,591,466	65	0.1	707	0.4	71	263	0.6	2,806	0.4	29
6-14	71,860	6,250,861	1,234	2.8	13,661	0.6	113	3,940	8.9	42,770	0.6	59
15-20	59,823	4,236,587	1,224	4.7	12,634	0.5	85	1,155	4.4	12,163	0.6	61
21-44	186,477	10,608,442	2,260	3.8	22,030	0.3	55	828	1.4	8,208	0.4	48
45-64	24,877	1,720,955	195	2.8	1,974	0.4	68	54	0.8	527	0.6	83
65-74	3,073	202,158	31	13.4	343	1.0	129	0	0.0	0	0.0	0
75-84	2,577	170,813	30	13.5	335	0.9	132	0	0.0	0	0.0	0
85 and older	1,921	98,844	20	6.9	196	0.7	80	0	0.0	0	0.0	0
Male												
All Males	505,590	57,058,809	10,195	6.7	111,635	0.7	152	15,582	10.2	168,555	0.7	66
Male, Disabled												
All Ages	233,327	30,935,048	5,348	32.4	60,866	0.8	183	3,173	19.2	36,495	0.7	77
5 and younger	7,016	1,498,545	50	4.1	563	0.5	75	102	8.3	1,115	0.5	38
6-14	48,304	8,820,588	1,342	36.7	15,543	0.7	159	1,952	53.3	22,490	0.8	77
15-20	35,569	5,107,909	1,100	41.8	12,710	0.8	181	849	32.3	9,808	0.8	86
21-44	66,611	8,385,477	1,834	38.9	20,749	0.8	205	219	4.6	2,527	0.7	68
45-64	75,534	7,095,009	1,018	24.0	11,264	0.8	185	51	1.2	555	0.7	75
65-74	293	27,520	4	16.7	37	0.8	197	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

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

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	272,263	26,123,761	4,847	3.6	50,769	0.6	115	12,409	9.1	132,060	0.6	63
5 and younger	34,029	4,352,070	169	0.4	1,852	0.4	74	631	1.4	6,810	0.4	31
6-14	134,618	13,230,316	2,582	5.7	28,409	0.6	121	9,238	20.3	99,215	0.7	63
15-20	51,763	5,077,766	1,388	7.1	14,300	0.6	123	2,251	11.6	23,368	0.7	73
21-44	37,096	2,434,586	580	3.0	5,028	0.4	80	266	1.4	2,429	0.5	56
45-64	10,859	806,301	84	1.7	786	0.5	77	23	0.5	238	0.4	46
65-74	1,404	96,577	12	8.0	95	1.0	161	0	0.0	0	0.0	0
75-84	1,408	76,134	14	10.0	153	1.1	136	0	0.0	0	0.0	0
85 and older	1,086	50,011	18	12.9	146	0.7	65	0	0.0	0	0.0	0
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 Iowa, released by CMS in 11/2008. 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.

Nondual Beneficiaries

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IOWA, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTICONVULSANT					ANTIASTHMATIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean \$ per Benefit Month
All	49,865	14.2	512,447	0.5	\$31	15,043	4.3	162,613	0.7	\$84	64,752	18.4	679,749	0.3	\$18
Female															
All Females	35,991	18.1	367,189	0.5	31	9,311	4.7	100,009	0.7	79	36,282	18.2	379,767	0.3	18
Female, Disabled															
All Ages	10,782	63.7	121,259	0.6	41	5,111	30.2	57,944	0.8	100	8,434	49.9	94,871	0.4	32
5 and younger	8	0.9	93	0.4	12	116	13.4	1,332	0.7	91	434	50.3	4,817	0.3	23
6-14	368	19.4	4,221	0.6	27	447	23.6	5,183	0.8	128	539	28.4	6,184	0.4	28
15-20	664	41.3	7,631	0.6	34	424	26.4	4,865	0.9	128	431	26.8	4,970	0.3	25
21-44	4,029	72.5	45,528	0.6	40	1,908	34.3	21,524	0.8	111	2,507	45.1	28,254	0.4	26
45-64	5,703	82.0	63,709	0.7	43	2,209	31.8	24,974	0.8	80	4,510	64.9	50,544	0.5	38
65-74	10	27.8	77	0.8	46	7	19.4	66	0.9	111	13	36.1	102	0.7	38
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	25,209	13.9	245,930	0.4	26	4,200	2.3	42,065	0.5	50	27,848	15.3	284,896	0.2	14
5 and younger	84	0.2	876	0.3	12	105	0.2	1,094	0.4	53	7,530	16.9	78,379	0.2	10
6-14	2,251	5.1	24,521	0.5	22	468	1.1	5,175	0.5	63	6,164	13.9	66,750	0.2	16
15-20	4,752	18.1	48,293	0.4	23	634	2.4	6,531	0.5	58	3,972	15.1	40,873	0.2	13
21-44	16,366	27.7	155,136	0.4	27	2,616	4.4	25,509	0.4	44	9,114	15.4	88,410	0.3	14
45-64	1,556	22.2	15,055	0.5	35	315	4.5	3,128	0.5	59	928	13.3	8,970	0.4	27
65-74	74	32.0	761	0.6	30	26	11.3	261	0.7	62	61	26.4	662	0.5	32
75-84	63	28.3	654	0.8	37	17	7.6	159	0.8	45	44	19.7	480	0.5	41
85 and older	63	21.9	634	0.8	39	19	6.6	208	0.8	30	35	12.2	372	0.2	13
Male															
All Males	13,874	9.1	145,258	0.6	31	5,732	3.8	62,604	0.7	93	28,470	18.7	299,982	0.3	19
Male, Disabled															
All Ages	5,571	33.8	62,264	0.7	37	3,775	22.9	42,810	0.8	108	5,108	31.0	57,294	0.4	32
5 and younger	23	1.9	253	0.5	12	157	12.7	1,824	0.7	114	765	62.0	8,468	0.3	29
6-14	880	24.0	10,205	0.6	30	718	19.6	8,344	0.8	103	1,141	31.2	13,286	0.3	27
15-20	898	34.1	10,340	0.7	37	631	24.0	7,275	0.9	128	545	20.7	6,361	0.3	27
21-44	1,866	39.6	20,854	0.7	40	1,412	30.0	16,055	1.0	119	909	19.3	10,352	0.4	28
45-64	1,901	44.9	20,586	0.6	39	855	20.2	9,290	0.8	76	1,739	41.1	18,766	0.5	42
65-74	3	12.5	26	0.8	48	2	8.3	22	0.5	99	9	37.5	61	0.6	65
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IOWA, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTICONVULSANT					ANTIASTHMATIC				
	Number of Users	Users as % of All Benes	Number of Months Among Users	Mean Number of Rx per Month	Mean Benefit \$ per Month	Number of Users	Users as % of All Benes	Number of Months Among Users	Mean Number of Rx per Month	Mean Benefit \$ per Month	Number of Users	Users as % of All Benes	Number of Months Among Users	Mean Number of Rx per Month	Mean Benefit \$ per Month
Male, Other Eligibles															
All Ages	8,303	6.1	82,994	0.5	26	1,957	1.4	19,794	0.5	60	23,362	17.2	242,688	0.2	15
5 and younger	136	0.3	1,480	0.3	9	160	0.3	1,714	0.4	54	10,892	23.5	112,481	0.2	12
6-14	3,027	6.7	32,948	0.5	23	625	1.4	6,887	0.6	62	8,302	18.3	89,096	0.3	18
15-20	2,253	11.6	22,648	0.5	30	441	2.3	4,517	0.6	71	2,299	11.8	24,124	0.3	16
21-44	2,265	11.9	19,985	0.4	26	560	2.9	4,932	0.5	51	1,456	7.7	13,034	0.3	20
45-64	537	10.8	5,084	0.5	31	147	3.0	1,494	0.5	64	312	6.3	2,894	0.4	26
65-74	25	16.7	266	0.6	24	12	8.0	121	0.6	55	50	33.3	531	0.5	30
75-84	28	20.0	309	0.9	38	8	5.7	91	0.9	32	33	23.6	364	0.5	26
85 and older	32	22.9	274	0.9	40	4	2.9	38	0.7	15	18	12.9	164	0.3	19
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 Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

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.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.

Nondual Beneficiaries

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

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					MISC. HEMATOLOGICAL				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	24,862	7.1	257,715	0.3	\$24	68,187	19.4	688,150	0.3	\$9	1,086	0.3	11,626	0.6	\$435
Female															
All Females	16,956	8.5	176,693	0.3	22	50,110	25.2	504,972	0.3	8	590	0.3	6,443	0.6	70
Female, Disabled															
All Ages	6,392	37.8	72,274	0.5	33	10,602	62.7	119,467	0.4	22	447	2.6	5,019	0.6	70
5 and younger	179	20.7	1,952	0.5	36	77	8.9	915	0.1	2	0	0.0	0	0.0	0
6-14	251	13.2	2,951	0.5	59	236	12.4	2,725	0.1	1	3	0.2	33	0.5	17
15-20	276	17.2	3,197	0.4	27	407	25.3	4,669	0.1	3	3	0.2	26	0.2	682
21-44	1,901	34.2	21,722	0.4	28	4,045	72.8	45,631	0.3	17	43	0.8	465	0.5	52
45-64	3,778	54.3	42,396	0.5	34	5,822	83.7	65,395	0.5	28	398	5.7	4,495	0.6	69
65-74	6	16.7	44	0.8	34	14	38.9	120	0.6	34	0	0.0	0	0.0	0
75-84	1	100.0	12	0.2	2	1	100.0	12	0.1	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	10,564	5.8	104,419	0.2	15	39,508	21.7	385,505	0.2	4	143	0.1	1,424	0.5	70
5 and younger	1,184	2.7	10,444	0.2	13	1,275	2.9	13,725	0.1	1	3	0.0	36	0.3	313
6-14	963	2.2	10,627	0.2	13	2,239	5.1	24,673	0.1	1	2	0.0	21	0.3	38
15-20	1,790	6.8	18,399	0.2	10	6,610	25.1	65,752	0.1	1	5	0.0	54	0.5	49
21-44	5,730	9.7	55,935	0.2	15	27,381	46.3	261,726	0.2	4	45	0.1	458	0.5	54
45-64	690	9.9	6,811	0.4	29	1,755	25.1	17,047	0.3	12	51	0.7	490	0.5	64
65-74	91	39.4	1,007	0.5	20	111	48.1	1,198	0.4	17	11	4.8	122	0.7	74
75-84	64	28.7	667	0.5	21	66	29.6	683	0.4	18	15	6.7	130	0.7	87
85 and older	52	18.1	529	0.6	23	71	24.7	701	0.5	21	11	3.8	113	0.6	77
Male															
All Males	7,906	5.2	81,022	0.4	27	18,077	11.9	183,178	0.3	11	496	0.3	5,183	0.6	889
Male, Disabled															
All Ages	3,275	19.9	36,357	0.5	38	5,078	30.8	55,871	0.4	25	357	2.2	3,857	0.7	891
5 and younger	238	19.3	2,603	0.5	40	132	10.7	1,497	0.1	1	4	0.3	43	0.6	339
6-14	281	7.7	3,270	0.5	58	330	9.0	3,886	0.1	2	11	0.3	132	0.9	21,521
15-20	264	10.0	2,982	0.5	50	449	17.1	5,165	0.1	2	6	0.2	58	0.6	5,014
21-44	1,001	21.2	11,289	0.5	32	1,625	34.5	17,941	0.3	15	35	0.7	391	0.6	109
45-64	1,485	35.1	16,175	0.5	36	2,535	59.9	27,316	0.5	41	299	7.1	3,209	0.7	77
65-74	6	25.0	38	0.7	13	7	29.2	66	0.2	2	2	8.3	24	0.5	68
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

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

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					MISC. HEMATOLOGICAL				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles															
All Ages	4,631	3.4	44,665	0.3	17	12,999	9.6	127,307	0.2	5	139	0.1	1,326	0.5	881
5 and younger	1,481	3.2	13,226	0.2	14	1,800	3.9	19,271	0.1	1	9	0.0	103	0.3	5,722
6-14	808	1.8	8,801	0.2	14	2,205	4.8	24,100	0.1	1	9	0.0	98	0.6	4,879
15-20	644	3.3	6,695	0.2	12	2,596	13.3	26,282	0.1	1	4	0.0	37	0.2	787
21-44	1,278	6.7	11,869	0.3	24	5,320	28.0	47,458	0.3	7	36	0.2	319	0.6	70
45-64	306	6.2	2,909	0.4	29	947	19.1	8,864	0.4	19	59	1.2	551	0.5	61
65-74	42	28.0	447	0.5	32	42	28.0	435	0.3	5	10	6.7	92	0.8	76
75-84	36	25.7	414	0.6	22	40	28.6	433	0.4	18	8	5.7	86	0.8	71
85 and older	36	25.7	304	0.6	15	49	35.0	464	0.5	12	4	2.9	40	0.8	65
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 Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

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.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.

Nondual Beneficiaries

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IOWA, 2005

Beneficiary Characteristics	ANTIDIABETIC					PASSIVE IMMUNIZING AGENTS					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	10,001	2.8	104,357	0.7	\$47	939	0.3	8,463	0.5	\$580	350,966	3,010,347
Female												
All Females	6,880	3.5	72,363	0.7	46	440	0.2	3,994	0.5	562	198,811	1,688,615
Female, Disabled												
All Ages	3,934	23.3	44,141	0.7	51	135	0.8	1,403	0.5	577	16,916	180,950
5 and younger	1	0.1	12	0.3	18	133	15.4	1,379	0.5	587	863	8,573
6-14	25	1.3	276	0.7	82	1	0.1	12	0.2	17	1,898	21,213
15-20	53	3.3	607	0.6	41	0	0.0	0	0.0	0	1,608	17,767
21-44	843	15.2	9,500	0.6	47	0	0.0	0	0.0	0	5,557	59,979
45-64	3,001	43.2	33,663	0.7	53	1	0.0	12	0.1	10	6,952	73,190
65-74	11	30.6	83	0.8	76	0	0.0	0	0.0	0	36	204
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
Female, Other Eligibles												
All Ages	2,946	1.6	28,222	0.5	38	305	0.2	2,591	0.5	553	181,895	1,507,665
5 and younger	11	0.0	123	0.7	56	302	0.7	2,556	0.5	558	44,506	381,693
6-14	168	0.4	1,841	0.7	59	2	0.0	24	0.1	42	44,254	419,501
15-20	232	0.9	2,364	0.5	43	0	0.0	0	0.0	0	26,314	219,703
21-44	1,883	3.2	17,424	0.5	33	1	0.0	11	0.5	640	59,078	437,636
45-64	444	6.3	4,266	0.6	40	0	0.0	0	0.0	0	7,001	43,660
65-74	91	39.4	1,044	0.7	46	0	0.0	0	0.0	0	231	2,174
75-84	86	38.6	846	0.8	45	0	0.0	0	0.0	0	223	1,766
85 and older	31	10.8	314	0.7	38	0	0.0	0	0.0	0	288	1,532
Male												
All Males	3,121	2.1	31,994	0.7	51	499	0.3	4,469	0.5	597	152,154	1,321,731
Male, Disabled												
All Ages	1,903	11.5	20,357	0.7	49	154	0.9	1,571	0.5	588	16,494	173,774
5 and younger	4	0.3	38	0.3	38	144	11.7	1,459	0.5	574	1,233	12,231
6-14	21	0.6	252	0.8	69	7	0.2	77	0.5	601	3,660	41,089
15-20	41	1.6	492	0.6	52	1	0.0	12	0.1	10	2,630	29,088
21-44	406	8.6	4,434	0.7	55	1	0.0	11	1.0	708	4,711	50,262
45-64	1,415	33.4	14,979	0.7	47	1	0.0	12	0.7	2,669	4,234	40,915
65-74	16	66.7	162	0.9	66	0	0.0	0	0.0	0	24	173
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	4
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12

Nondual Beneficiaries

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, IOWA, 2005

Beneficiary Characteristics	ANTIDIABETIC					PASSIVE IMMUNIZING AGENTS					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
Male, Other Eligibles												
All Ages	1,218	0.9	11,637	0.7	53	345	0.3	2,898	0.5	601	135,660	1,147,957
5 and younger	27	0.1	297	0.4	30	344	0.7	2,889	0.5	602	46,287	396,562
6-14	159	0.3	1,711	0.8	74	0	0.0	0	0.0	0	45,489	432,754
15-20	121	0.6	1,249	0.8	79	0	0.0	0	0.0	0	19,477	167,350
21-44	492	2.6	4,408	0.6	46	1	0.0	9	0.4	293	19,021	119,726
45-64	324	6.5	2,970	0.6	43	0	0.0	0	0.0	0	4,956	28,297
65-74	43	28.7	447	0.9	65	0	0.0	0	0.0	0	150	1,247
75-84	24	17.1	264	0.7	32	0	0.0	0	0.0	0	140	1,143
85 and older	28	20.0	291	0.8	45	0	0.0	0	0.0	0	140	878
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. 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.

Nondual Beneficiaries

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, IOWA, 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	\$510	8.4	559	5,924
Age				
0-64	591	9.2	389	4,211
65-74	574	9.4	26	253
75-84	337	6.5	54	525
85 and older	225	5.8	90	935
Unknown	0	0.0	0	0
Gender				
Female	514	8.5	315	3,388
Male	505	8.3	244	2,536
Unknown	0	0.0	0	0
Race				
White	535	8.5	389	4,232
African American	515	7	18	189
Other/unknown	439	8.4	152	1,503
Basis of Eligibility^c				
Aged	310	6.5	168	1,708
Disabled	592	9.2	385	4,172
Adults	323	9.0	3	8
Children	574	8.2	3	36
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. 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 547 beneficiaries who were in nursing facilities for part of their enrollment and their 5,380 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.

Nondual Beneficiaries

TABLE ND.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 NONDUAL BENEFICIARIES, IOWA, 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 All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.5	0.1	0.1	0.3	\$37	\$25	\$6	\$6	\$81	\$192	\$113	\$22	1,948	\$157,936	385	68.9	4,254
Biologicals	0.1	0.1	0.0	0.0	4	3	0	1	37	40	0	32	85	3,149	68	12.2	788
Antineoplastic Agents	0.8	0.1	0.0	0.7	220	171	0	49	262	1,191	0	70	111	29,059	13	2.3	132
Endocrine/Metabolic Drugs	1.5	0.6	0.2	0.7	75	53	12	10	49	85	62	14	4,694	228,322	278	49.7	3,050
Cardiovascular Agents	2.2	0.6	0.1	1.5	66	43	4	18	30	70	50	12	8,279	244,517	346	61.9	3,717
Respiratory Agents	1.1	0.6	0.0	0.5	72	62	1	10	64	104	33	19	2,966	189,781	240	42.9	2,643
Gastrointestinal Agents	1.3	0.2	0.0	1.0	51	26	5	20	39	107	140	19	4,961	192,515	341	61.0	3,739
Genitourinary Agents	0.7	0.4	0.1	0.2	53	41	7	5	74	96	69	27	1,117	82,964	136	24.3	1,556
CNS Drugs	2.1	1.0	0.1	1.0	172	140	10	22	83	141	86	23	9,171	761,033	407	72.8	4,429
Stimulants/Anti-obesity/Anorexia	1.2	0.3	0.0	0.9	48	35	0	13	41	110	0	15	113	4,627	8	1.4	96
Miscellaneous Psychological/Neurological Agents	1.1	1.1	0.0	0.0	267	267	0	0	244	244	0	0	575	140,020	46	8.2	525
Analgesics and Anesthetics	1.2	0.1	0.2	0.9	70	19	33	19	61	171	193	21	3,948	239,695	311	55.6	3,407
Neuromuscular Agents	1.8	0.5	0.2	1.1	153	93	18	43	84	182	86	39	6,036	506,901	298	53.3	3,312
Nutritional Products	0.9	0.0	0.2	0.6	22	0	9	13	25	5	41	20	1,283	32,581	138	24.7	1,493
Hematological Agents	1.3	0.2	0.3	0.8	59	44	5	10	46	211	18	13	1,711	79,131	128	22.9	1,339
Topical Products	0.6	0.2	0.1	0.4	25	14	4	7	42	88	52	19	2,283	96,255	348	62.3	3,883
Miscellaneous Products	0.6	0.2	0.0	0.3	59	37	7	15	105	162	140	53	261	27,465	40	7.2	464
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	10	0	0	0	20	0	0	0	257	5,170	47	8.4	526
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.	49,799	3,021,121	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

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 547 beneficiaries who were in nursing facilities for part of their enrollment and their 5,380 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 Iowa, 0.3 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.

Nondual Beneficiaries

TABLE ND.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NONDUAL BENEFICIARIES, IOWA, 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	\$494,196	245	43.8	2,823	1.0	\$176	\$175
ANTICONVULSANT	388,517	309	55.3	3,493	1.2	90	111
ANTIDEPRESSANTS	229,727	394	70.5	4,349	0.9	56	53
ANTIASTHMATIC	163,149	257	46.0	2,884	0.8	70	57
ANTIDIABETIC	152,793	218	39.0	2,387	1.2	55	64
ANALGESICS - Narcotic	152,346	306	54.7	3,390	0.8	57	45
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	140,020	54	9.7	625	0.9	244	224
ULCER DRUGS	129,994	353	63.1	3,882	0.8	44	33
ANTIHYPERLIPIDEMIC	83,443	113	20.2	1,243	0.9	79	67
MUSCULOSKELETAL THERAPY AGENTS	67,247	97	17.4	1,064	0.9	72	63
Total	2,001,432	2,346		26,140	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. 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 547 beneficiaries who were in nursing facilities for part of their enrollment and their 5,380 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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Nondual Beneficiaries

TABLE ND.10A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST
 AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IOWA, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	24,428	\$2,001,432	245	43.8	2,823	1.0	\$175	309	55.3	3,493	1.2	\$111
Female												
All Females	13,533	1,123,958	143	45.4	1,655	1.0	157	169	53.7	1,895	1.2	102
Female, Disabled												
All Ages	10,448	914,364	107	52.5	1,251	1.0	161	146	71.6	1,660	1.2	109
64 or younger	10,448	914,364	107	52.7	1,251	1.0	161	146	71.9	1,660	1.2	109
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	3,085	209,594	36	32.4	404	0.9	142	23	20.7	235	1.0	56
64 or younger	67	2,801	0	0.0	0	0.0	0	2	66.7	13	1.2	32
65-74	802	61,694	8	53.3	88	0.9	204	5	33.3	57	1.1	126
75-84	947	71,192	18	51.4	205	1.0	137	3	8.6	25	1.8	56
85 and older	1,269	73,907	10	17.2	111	0.8	103	13	22.4	140	0.8	30
Male												
All Males	10,895	877,474	102	41.8	1,168	1.0	201	140	57.4	1,598	1.3	122
Male, Disabled												
All Ages	9,119	767,508	84	46.4	966	1.1	218	130	71.8	1,483	1.3	129
64 or younger	9,078	765,479	83	46.1	963	1.1	219	130	72.2	1,483	1.3	129
65-74	41	2,029	1	100.0	3	1.3	89	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	1,776	109,966	18	28.6	202	1.0	120	10	15.9	115	0.9	27
64 or younger	122	12,054	0	0.0	0	0.0	0	4	133.3	48	0.9	35
65-74	285	16,400	3	33.3	36	1.4	202	2	22.2	24	0.8	24
75-84	648	40,672	8	42.1	96	1.1	139	4	21.1	43	0.9	20
85 and older	721	40,840	7	21.9	70	0.6	52	0	0.0	0	0.0	0
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 Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

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 547 beneficiaries who were in nursing facilities for part of their enrollment and their 5,380 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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IOWA, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIASTHMATIC					ANTIDIABETIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	394	70.5	4,349	0.9	\$53	257	46.0	2,884	0.8	\$57	218	39.0	2,387	1.2	\$64
Female															
All Females	226	71.7	2,508	1.0	56	118	37.5	1,287	0.6	44	144	45.7	1,577	1.2	71
Female, Disabled															
All Ages	159	77.9	1,808	1.0	58	83	40.7	910	0.8	57	104	51.0	1,173	1.2	74
64 or younger	159	78.3	1,808	1.0	58	83	40.9	910	0.8	57	104	51.2	1,173	1.2	74
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	67	60.4	700	0.9	49	35	31.5	377	0.2	13	40	36.0	404	1.1	64
64 or younger	0	0.0	0	0.0	0	1	33.3	12	0.2	3	0	0.0	0	0.0	0
65-74	11	73.3	126	0.9	66	8	53.3	72	0.3	19	14	93.3	146	1.2	64
75-84	18	51.4	170	1.0	54	8	22.9	83	0.4	19	18	51.4	176	1.1	59
85 and older	38	65.5	404	0.9	41	18	31.0	210	0.2	10	8	13.8	82	1.0	75
Male															
All Males	168	68.9	1,841	0.9	49	139	57.0	1,597	1.0	67	74	30.3	810	1.1	50
Male, Disabled															
All Ages	137	75.7	1,494	0.9	51	115	63.5	1,330	1.0	71	51	28.2	547	1.1	49
64 or younger	136	75.6	1,491	0.9	51	112	62.2	1,321	1.0	71	48	26.7	538	1.1	48
65-74	1	100.0	3	1.3	59	3	300.0	9	1.3	97	3	300.0	9	1.6	67
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	31	49.2	347	0.9	40	24	38.1	267	0.6	43	23	36.5	263	1.2	53
64 or younger	0	0.0	0	0.0	0	3	100.0	36	1.8	212	0	0.0	0	0.0	0
65-74	4	44.4	45	0.9	36	8	88.9	81	0.5	14	2	22.2	24	3.0	142
75-84	13	68.4	156	0.9	45	5	26.3	55	0.5	12	8	42.1	91	0.8	19
85 and older	14	43.8	146	0.9	36	8	25.0	95	0.3	23	13	40.6	148	1.1	59
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 Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

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 547 beneficiaries who were in nursing facilities for part of their enrollment and their 5,380 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 ND.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IOWA, 2005

Beneficiary Characteristics	ANALGESICS - Narcotic					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	306	54.7	3,390	0.8	\$45	54	9.7	625	0.9	\$224	353	63.1	3,882	0.8	\$34
Female															
All Females	182	57.8	2,016	0.8	52	33	10.5	380	0.9	288	186	59.0	2,060	0.7	31
Female, Disabled															
All Ages	121	59.3	1,377	0.7	59	17	8.3	204	0.8	418	134	65.7	1,494	0.7	33
64 or younger	121	59.6	1,377	0.7	59	17	8.4	204	0.8	418	134	66.0	1,494	0.7	33
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	61	55.0	639	0.9	38	16	14.4	176	1.0	137	52	46.8	566	0.7	25
64 or younger	3	100.0	19	0.9	12	0	0.0	0	0.0	0	2	66.7	7	0.3	26
65-74	15	100.0	169	1.3	57	0	0.0	0	0.0	0	13	86.7	149	0.6	26
75-84	8	22.9	76	0.9	38	7	20.0	76	1.0	139	10	28.6	106	0.9	24
85 and older	35	60.3	375	0.7	31	9	15.5	100	0.9	122	27	46.6	304	0.7	25
Male															
All Males	124	50.8	1,374	0.8	34	21	8.6	245	0.9	126	167	68.4	1,822	0.8	37
Male, Disabled															
All Ages	95	52.5	1,047	0.8	37	5	2.8	60	1.1	148	140	77.3	1,518	0.8	38
64 or younger	94	52.2	1,044	0.8	37	5	2.8	60	1.1	148	139	77.2	1,515	0.8	38
65-74	1	100.0	3	1.0	16	0	0.0	0	0.0	0	1	100.0	3	1.3	22
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	29	46.0	327	0.8	25	16	25.4	185	0.9	118	27	42.9	304	0.7	29
64 or younger	1	33.3	1	1.0	20	0	0.0	0	0.0	0	2	66.7	13	1.1	209
65-74	2	22.2	24	1.6	18	0	0.0	0	0.0	0	4	44.4	48	0.4	41
75-84	8	42.1	96	0.7	49	7	36.8	84	0.9	110	8	42.1	91	0.9	11
85 and older	18	56.3	206	0.7	14	9	28.1	101	0.9	125	13	40.6	152	0.6	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 Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

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 547 beneficiaries who were in nursing facilities for part of their enrollment and their 5,380 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 ND.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, IOWA, 2005

Beneficiary Characteristics	ANTIHYPERTENSIVE					MUSCULOSKELETAL THERAPY AGENTS					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	113	20.2	1,243	0.9	\$67	97	17.4	1,064	0.9	\$63	559	5,924
Female												
All Females	70	22.2	761	0.9	68	53	16.8	592	1.0	56	315	3,388
Female, Disabled												
All Ages	53	26.0	591	0.9	69	50	24.5	562	1.0	58	204	2,256
64 or younger	53	26.1	591	0.9	69	50	24.6	562	1.0	58	203	2,254
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	2
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	17	15.3	170	0.8	66	3	2.7	30	0.5	16	111	1,132
64 or younger	0	0.0	0	0.0	0	1	33.3	12	1.1	38	3	19
65-74	4	26.7	45	0.9	92	1	6.7	12	0.1	1	15	160
75-84	9	25.7	77	0.8	61	0	0.0	0	0.0	0	35	345
85 and older	4	6.9	48	0.7	50	1	1.7	6	0.2	1	58	608
Male												
All Males	43	17.6	482	0.8	66	44	18.0	472	0.8	73	244	2,536
Male, Disabled												
All Ages	36	19.9	398	0.9	68	43	23.8	466	0.8	74	181	1,916
64 or younger	36	20.0	398	0.9	68	43	23.9	466	0.8	74	180	1,913
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	3
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Male, Other Eligibles												
All Ages	7	11.1	84	0.8	56	1	1.6	6	0.3	2	63	620
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	25
65-74	0	0.0	0	0.0	0	1	11.1	6	0.3	2	9	88
75-84	3	15.8	36	0.7	57	0	0.0	0	0.0	0	19	180
85 and older	4	12.5	48	0.8	55	0	0.0	0	0.0	0	32	327
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 Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

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 547 beneficiaries who were in nursing facilities for part of their enrollment and their 5,380 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 ND.11
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
IOWA, 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 Nondual Rx \$	Total Number of Beneficiaries
All	95,631	27.2	0.9	303,358	\$14	\$4,898,496	\$16	2.6	350,966
Age									
5 and younger	30,019	32.3	0.6	59,564	13	1,196,318	20	6.4	92,889
6-14	20,501	21.5	0.5	43,523	9	868,664	20	2.1	95,301
15-20	11,894	23.8	0.6	29,535	9	448,324	15	1.8	50,029
21-44	24,653	27.9	1.1	95,133	15	1,298,109	14	2.4	88,367
45-64	8,063	34.8	3.0	70,415	45	1,035,692	15	2.3	23,143
65-74	193	43.8	3.9	1,737	41	18,020	10	2.5	441
75-84	141	38.6	4.0	1,463	37	13,328	9	2.5	365
85 and older	167	38.8	4.6	1,988	47	20,041	10	5.5	430
Unknown	0	0.0	0.0	0	0	0	0	0.0	1
Basis of Eligibility^c									
Aged	477	41.0	4.3	4,987	42	49,054	10	3.2	1,162
Disabled	15,855	47.5	3.6	121,707	63	2,091,618	17	2.2	33,410
Adults	22,714	23.9	0.7	66,133	9	858,804	13	2.6	95,088
Children	56,480	25.5	0.5	110,056	9	1,892,925	17	3.3	221,082
Unknown	105	46.9	2.1	475	27	6,095	13	1.4	224
Gender									
Female	58,661	29.5	1.0	195,473	15	2,960,892	15	2.9	198,812
Male	36,970	24.3	0.7	107,885	13	1,937,604	18	2.4	152,154
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	61,887	29.5	1.0	217,634	17	3,472,298	16	2.5	209,850
African American	6,699	24.2	0.6	17,603	10	275,027	16	2.5	27,655
Other/unknown	27,045	23.8	0.6	68,121	10	1,151,171	17	3.3	113,461
Use of Nursing Facilities^d									
Entire year	481	86.0	17.0	9,510	239	133,422	14	4.4	559
Part year	480	87.8	10.8	5,929	191	104,577	18	3.9	547
None	94,670	27.1	0.8	287,919	13	4,660,497	16	2.6	349,860
Maintenance Assistance Status									
Cash	46,193	33.8	1.3	177,654	20	2,707,044	15	2.5	136,768
Medically needy	1,227	18.5	0.7	4,865	12	78,790	16	2.8	6,642
Poverty related	26,988	21.6	0.4	48,669	6	804,418	17	3.6	125,126
Other/unknown	21,223	25.7	0.9	72,170	16	1,308,244	18	2.4	82,430

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. 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 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 ND.12
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
IOWA, 2005

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
All	0.1	\$2	\$16	\$0	\$0	3,010,347
Age						
5 and younger	0.1	1	20	0	0	799,059
6-14	0.0	1	20	0	0	914,557
15-20	0.1	1	15	0	0	433,908
21-44	0.1	2	14	0	1	667,603
45-64	0.4	6	15	0	2	186,062
65-74	0.5	5	10	0	1	3,798
75-84	0.5	5	9	0	1	2,925
85 and older	0.8	8	10	0	1	2,434
Unknown	0.0	0	0	0	0	1
Basis of Eligibility^c						
Aged	0.6	6	10	0	1	8,681
Disabled	0.3	6	17	0	3	354,724
Adults	0.1	1	13	0	0	666,501
Children	0.1	1	17	0	0	1,978,273
Unknown	0.2	3	13	0	1	2,168
Gender						
Female	0.1	2	15	0	0	1,688,616
Male	0.1	1	18	0	0	1,321,731
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	2	16	0	1	1,873,822
African American	0.1	1	16	0	0	251,701
Other/unknown	0.1	1	17	0	0	884,824
Use of Nursing Facilities^d						
Entire year	1.6	23	14	1	8	5,924
Part year	1.1	19	18	0	4	5,380
None	0.1	2	16	0	0	2,999,043
Maintenance Assistance Status						
Cash	0.1	2	15	0	1	1,242,804
Medically needy	0.1	2	16	0	1	50,530
Poverty related	0.0	1	17	0	0	1,033,438
Other/unknown	0.1	2	18	0	1	683,575

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

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 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.

TABLE ND.13
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
IOWA, 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	119,083	\$41	\$4,898,496	100.0	303,358	\$16	100.0	
Anorexia or weight loss/gain	20	45	908	0.0	20	45	0.0	
Fertility drugs	1	62	62	0.0	1	62	0.0	
Drugs for cosmetic purposes	246	19	4,580	0.1	315	15	0.1	
Cough and cold medications	60,160	33	2,001,521	40.9	100,893	20	33.3	
Vitamins and minerals	3,391	120	408,015	8.3	17,648	23	5.8	
Non-prescription drugs	38,877	23	906,811	18.5	95,995	9	31.6	
Barbiturates	583	86	50,284	1.0	5,404	9	1.8	
Benzodiazepines	14,276	91	1,302,339	26.6	79,260	16	26.1	
Other Part D Excl Rx Drugs	1,529	146	223,976	4.6	3,822	59	1.3	

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 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 ND11.

b. Includes OTC drugs as well as prescription drugs.

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

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

Nondual Beneficiaries

APPENDIX TABLE A.1
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, IOWA, 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	352,789	1,162	33,410	95,415	222,578	224	3,067,982	8,681	355,078	679,971	2,022,083	2,169
Age												
5 and younger	93,406	0	2,096	193	91,117	0	815,842	0	20,927	1,551	793,364	0
6-14	96,024	0	5,558	83	90,383	0	934,655	0	62,405	754	871,496	0
15-20	50,288	0	4,238	6,959	39,091	0	441,991	0	46,889	51,497	343,605	0
21-44	88,673	0	10,268	76,415	1,940	50	679,585	0	110,313	555,553	13,255	464
45-64	23,161	0	11,186	11,757	45	173	186,751	0	114,127	70,562	361	1,701
65-74	441	372	60	7	1	1	3,798	3,374	377	42	1	4
75-84	365	363	2	0	0	0	2,925	2,909	16	0	0	0
85 and older	430	427	2	1	0	0	2,434	2,398	24	12	0	0
Unknown	1	0	0	0	1	0	1	0	0	0	1	0
Gender												
Female	199,788	738	16,916	71,415	110,495	224	1,721,893	5,441	181,119	529,993	1,003,171	2,169
Male	153,001	424	16,494	24,000	112,083	0	1,346,089	3,240	173,959	149,978	1,018,912	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	210,715	581	23,193	59,210	127,700	31	1,905,588	4,144	255,761	450,868	1,194,517	298
African American	28,167	38	3,053	7,122	17,951	3	264,997	367	32,491	56,315	175,793	31
Other/unknown	113,907	543	7,164	29,083	76,927	190	897,397	4,170	66,826	172,788	651,773	1,840
Use of Nursing Facilities^c												
Entire year	559	168	385	3	3	0	5,924	1,708	4,172	8	36	0
Part year	547	102	412	21	11	1	5,389	795	4,255	212	115	12
None	351,683	892	32,613	95,391	222,564	223	3,056,669	6,178	346,651	679,751	2,021,932	2,157
Maintenance Assistance Status												
Cash	137,371	320	25,120	45,918	66,013	0	1,267,433	3,333	268,441	372,593	623,066	0
Medically needy	6,642	104	478	4,979	1,081	0	50,805	879	2,823	38,258	8,845	0
Poverty related	126,022	1	12	14,014	111,771	224	1,055,651	12	88	79,228	974,154	2,169
Other/unknown	82,754	737	7,800	30,504	43,713	0	694,093	4,457	83,726	189,892	416,018	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	320,768	1,162	33,238	87,145	199,000	223	2,749,421	8,681	353,149	604,184	1,781,245	2,162
FFS part year, with Rx claims	19,494	0	160	5,837	13,496	1	206,211	0	1,812	57,320	147,072	7
FFS part year, no Rx claims	7,759	0	12	1,244	6,503	0	70,574	0	117	9,192	61,265	0
MC all year, with Rx claims	2,945	0	0	862	2,083	0	29,812	0	0	7,897	21,915	0
MC all year, no Rx claims	1,823	0	0	327	1,496	0	11,964	0	0	1,378	10,586	0

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. This table was produced on 04/23/2009.

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

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

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

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

APPENDIX TABLE A.2
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 NONDUAL BENEFICIARIES, IOWA, 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 Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	352,789	3,067,982	350,966	3,010,347	0	57,635
Fee-for-service (FFS) all year	320,768	2,749,421	320,768	2,749,421	0	0
FFS part year, with Rx claims	19,494	206,211	19,494	172,893	0	33,318
FFS part year, with no Rx claims	7,759	70,574	7,759	58,221	0	12,353
Managed care (MC) all year, with Rx claims	2,945	29,812	2,945	29,812	0	0
MC all year, with no Rx claims	1,823	11,964	0	0	0	11,964

Source: Data for this table are from the MAX 2005 file for Iowa, released by CMS in 11/2008. 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.

Nondual Beneficiaries