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

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, PENNSYLVANIA, 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	631,856	7,407	110,562	140,953	371,614	1,320	3,920,977	40,133	884,596	671,504	2,315,207	9,537
Age												
5 and younger	139,504	7	8,311	0	131,186	0	846,644	14	54,869	0	791,761	0
6-14	158,698	9	21,971	0	136,718	0	1,109,646	16	190,640	0	918,990	0
15-20	114,250	7	14,220	0	99,989	34	709,780	11	120,666	0	588,941	162
21-44	158,626	7	29,645	124,722	3,679	573	846,696	11	233,329	594,472	15,464	3,420
45-64	53,265	18	36,319	16,218	0	710	367,801	88	284,778	76,997	0	5,938
65-74	2,839	2,730	96	10	0	3	15,197	14,846	314	20	0	17
75-84	2,384	2,382	0	2	0	0	13,444	13,431	0	13	0	0
85 and older	2,248	2,247	0	1	0	0	11,718	11,716	0	2	0	0
Unknown	42	0	0	0	42	0	51	0	0	0	51	0
Gender												
Female	352,903	4,928	51,770	106,674	188,211	1,320	2,136,695	26,568	425,928	513,370	1,161,292	9,537
Male	278,953	2,479	58,792	34,279	183,403	0	1,784,282	13,565	458,668	158,134	1,153,915	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	447,485	4,209	89,031	96,435	256,820	990	3,242,902	23,315	773,213	555,987	1,883,206	7,181
African American	100,983	1,506	12,393	24,479	62,407	198	374,141	9,798	64,922	61,665	236,285	1,471
Other/unknown	83,388	1,692	9,138	20,039	52,387	132	303,934	7,020	46,461	53,852	195,716	885
Use of Nursing Facilities^c												
Entire year	2,956	1,031	1,922	2	1	0	30,609	10,926	19,679	3	1	0
Part year	2,908	694	2,107	92	7	8	20,024	5,043	14,474	397	36	74
None	625,992	5,682	106,533	140,859	371,606	1,312	3,870,344	24,164	850,443	671,104	2,315,170	9,463
Maintenance Assistance Status												
Cash	226,208	1,636	65,325	64,660	94,587	0	1,436,429	12,407	584,022	302,231	537,769	0
Medically needy	27,016	9	331	7,265	19,411	0	155,039	91	1,596	48,399	104,953	0
Poverty-related	267,921	1,856	39,224	23,905	201,616	1,320	1,662,134	6,660	260,207	80,521	1,305,209	9,537
Other/unknown	110,711	3,906	5,682	45,123	56,000	0	667,375	20,975	38,771	240,353	367,276	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	378,647	5,883	77,917	73,461	220,131	1,255	3,339,668	36,322	787,698	541,247	1,965,221	9,180
FFS part year, with Rx claims	53,409	535	13,533	16,562	22,745	34	195,643	1,881	52,860	44,509	96,161	232
FFS part year, no Rx claims	199,800	989	19,112	50,930	128,738	31	385,666	1,930	44,038	85,748	253,825	125

Source: Data for this table are from the MAX 2005 file for Pennsylvania, released by CMS in 1/2009. 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, PENNSYLVANIA, 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	45.9	7.2	\$550	\$76	\$3,712	14.8	631,856
Age							
5 and younger	42.8	2.4	137	58	2,073	6.6	139,504
6-14	42.8	4.0	301	75	2,721	11.1	158,698
15-20	42.7	4.6	366	79	2,999	12.2	114,250
21-44	46.9	8.0	635	79	3,882	16.3	158,626
45-64	67.3	30.7	2,415	79	10,307	23.4	53,265
65-74	46.8	23.1	1,434	62	16,335	8.8	2,839
75-84	45.5	24.7	1,332	54	15,908	8.4	2,384
85 and older	38.9	21.1	1,057	50	14,480	7.3	2,248
Unknown	0.0	0.0	0	0	0	0.0	42
Basis of Eligibility^e							
Aged	43.9	23.1	1,281	56	15,698	8.2	7,407
Disabled	68.1	24.2	2,073	86	10,977	18.9	110,562
Adults	43.0	5.1	314	62	2,683	11.7	140,953
Children	40.3	2.7	160	60	1,685	9.5	371,614
Unknown	62.3	15.8	4,035	255	8,413	48.0	1,320
Gender							
Female	46.8	7.8	557	71	3,571	15.6	352,903
Male	44.7	6.5	542	83	3,889	13.9	278,953
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	55.3	9.0	685	76	3,770	18.2	447,485
African American	22.8	3.5	254	74	4,070	6.2	100,983
Other/unknown	23.5	2.4	186	79	2,962	6.3	83,388
Use of Nursing Facilities^f							
Entire year	96.7	98.4	6,274	64	68,319	9.2	2,956
Part year	93.6	60.6	4,267	70	44,380	9.6	2,908
None	45.4	6.6	506	77	3,218	15.7	625,992
Maintenance Assistance Status							
Cash	48.8	11.1	884	79	4,910	18.0	226,208
Medically needy	37.9	3.1	177	58	1,984	8.9	27,016
Poverty related	42.9	4.0	294	74	2,490	11.8	267,921
Other/unknown	49.0	8.2	581	71	4,641	12.5	110,711

Source: Data for this table are from the MAX 2005 file for Pennsylvania, released by CMS in 1/2009. 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, PENNSYLVANIA, 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	1.2	\$89	14.8	54.1	31.1	5.3	5.9	2.7	0.9	\$598	631,856	3,920,977
Age												
5 and younger	0.4	23	6.6	57.2	39.3	2.5	1.0	0.1	0.0	342	139,504	846,644
6-14	0.6	43	11.1	57.2	34.5	4.3	3.4	0.5	0.1	389	158,698	1,109,646
15-20	0.7	59	12.2	57.3	31.7	5.4	4.4	0.9	0.2	483	114,250	709,780
21-44	1.5	119	16.3	53.1	27.0	7.4	8.4	3.3	0.8	727	158,626	846,696
45-64	4.4	350	23.4	32.7	14.2	9.0	20.4	16.7	7.1	1,493	53,265	367,801
65-74	4.3	268	8.8	53.2	10.0	5.1	13.0	11.9	6.7	3,052	2,839	15,197
75-84	4.4	236	8.4	54.5	6.9	5.2	14.1	13.7	5.6	2,821	2,384	13,444
85 and older	4.0	203	7.3	61.1	4.8	4.0	13.0	12.5	4.5	2,778	2,248	11,718
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	42	51
Basis of Eligibility^e												
Aged	4.3	236	8.2	56.1	7.5	4.8	13.2	12.7	5.7	2,897	7,407	40,133
Disabled	3.0	259	18.9	31.9	24.2	10.6	17.9	11.1	4.3	1,372	110,562	884,596
Adults	1.1	66	11.7	57.0	27.0	6.9	6.8	2.1	0.3	563	140,953	671,504
Children	0.4	26	9.5	59.7	35.3	3.1	1.7	0.2	0.0	270	371,614	2,315,207
Unknown	2.2	559	48.0	37.7	26.1	10.5	15.9	8.6	1.1	1,164	1,320	9,537
Gender												
Female	1.3	92	15.6	53.2	31.3	5.5	6.0	3.0	1.1	590	352,903	2,136,695
Male	1.0	85	13.9	55.3	30.9	5.0	5.7	2.3	0.7	608	278,953	1,784,282
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.2	95	18.2	44.7	37.7	6.2	7.0	3.3	1.1	520	447,485	3,242,902
African American	0.9	69	6.2	77.2	14.2	3.0	3.3	1.6	0.7	1,099	100,983	374,141
Other/unknown	0.6	51	6.3	76.5	16.7	2.8	2.6	1.0	0.3	813	83,388	303,934
Use of Nursing Facilities^f												
Entire year	9.5	606	9.2	3.3	3.1	3.8	18.8	36.0	35.0	6,598	2,956	30,609
Part year	8.8	620	9.6	6.4	4.8	5.6	21.0	29.7	32.5	6,445	2,908	20,024
None	1.1	82	15.7	54.6	31.4	5.3	5.7	2.4	0.6	520	625,992	3,870,344
Maintenance Assistance Status												
Cash	1.8	139	18.0	51.2	28.2	6.2	8.1	4.6	1.7	773	226,208	1,436,429
Medically needy	0.5	31	8.9	62.1	30.2	4.6	2.7	0.3	0.1	346	27,016	155,039
Poverty related	0.6	47	11.8	57.1	34.4	4.0	3.3	1.0	0.2	401	267,921	1,662,134
Other/unknown	1.4	96	12.5	51.0	29.4	6.7	8.1	3.6	1.2	770	110,711	667,375

Source: Data for this table are from the MAX 2005 file for Pennsylvania, released by CMS in 1/2009. 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, PENNSYLVANIA, 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	1.2	\$89	\$76	0.5	\$66	\$140	0.0	\$5	\$102	0.6	\$17	\$27
Age												
5 and younger	0.4	23	58	0.1	18	138	0.0	1	50	0.2	4	17
6-14	0.6	43	75	0.3	35	114	0.0	2	81	0.2	6	24
15-20	0.7	59	79	0.3	47	136	0.0	3	70	0.4	9	25
21-44	1.5	119	79	0.5	85	157	0.1	8	114	0.9	25	29
45-64	4.4	350	79	1.7	250	147	0.2	21	127	2.6	78	30
65-74	4.3	268	62	1.7	200	120	0.1	10	74	2.5	58	23
75-84	4.4	236	54	1.7	176	105	0.2	7	48	2.5	53	21
85 and older	4.0	203	50	1.6	149	93	0.2	7	46	2.3	47	20
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	4.3	236	56	1.7	176	106	0.1	8	56	2.4	53	22
Disabled	3.0	259	86	1.3	195	154	0.1	15	118	1.6	50	30
Adults	1.1	66	62	0.4	44	122	0.0	5	98	0.7	17	26
Children	0.4	26	60	0.2	20	111	0.0	1	66	0.2	5	20
Unknown	2.2	559	255	0.8	458	552	0.1	28	315	1.2	49	39
Gender												
Female	1.3	92	71	0.5	67	135	0.1	5	95	0.7	20	27
Male	1.0	85	83	0.4	65	147	0.0	5	112	0.5	15	28
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	1.2	95	76	0.5	70	139	0.1	6	103	0.7	19	27
African American	0.9	69	74	0.4	52	140	0.0	3	98	0.5	13	25
Other/unknown	0.6	51	79	0.3	40	152	0.0	2	85	0.4	9	25
Use of Nursing Facilities^e												
Entire year	9.5	606	64	3.5	441	125	0.3	24	69	5.6	141	25
Part year	8.8	620	70	3.0	430	144	0.4	38	108	5.4	150	28
None	1.1	82	77	0.4	61	141	0.0	5	103	0.6	16	27
Maintenance Assistance Status												
Cash	1.8	139	79	0.7	102	147	0.1	8	112	1.0	28	29
Medically needy	0.5	31	58	0.2	21	108	0.0	2	70	0.3	7	24
Poverty related	0.6	47	74	0.3	37	135	0.0	2	84	0.3	8	25
Other/unknown	1.4	96	71	0.6	72	130	0.1	5	97	0.8	19	26

Source: Data for this table are from the MAX 2005 file for Pennsylvania, released by CMS in 1/2009. 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 Pennsylvania, 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.medispain.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, PENNSYLVANIA, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Total	Patented		Off-Brand-Name Generic	Total	Patented		Off-Brand-Name Generic	Total	Patented		Off-Brand-Name Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
		Brand-Name	Brand-Name			Brand-Name	Brand-Name			Brand-Name	Brand-Name						
Anti-infective Agents	0.3	0.1	0.0	0.2	\$16	\$9	\$2	\$4	\$60	\$152	\$73	\$25	484,073	\$28,911,790	181,481	28.7	1,829,810
Biologicals	0.2	0.2	0.0	0.0	136	114	5	17	762	727	722	1,155	10,587	8,068,795	5,761	0.9	59,272
Antineoplastic Agents	0.7	0.3	0.0	0.4	356	277	30	49	482	1,020	738	116	20,315	9,783,718	2,980	0.5	27,462
Endocrine/Metabolic Drugs	0.5	0.2	0.1	0.3	33	22	4	7	60	113	81	23	396,255	23,663,957	73,905	11.7	725,962
Cardiovascular Agents	1.3	0.5	0.0	0.8	56	42	0	13	43	79	34	17	566,852	24,226,789	46,433	7.3	434,753
Respiratory Agents	0.4	0.2	0.0	0.2	27	23	1	3	62	95	59	17	470,451	29,269,879	107,797	17.1	1,095,753
Gastrointestinal Agents	0.5	0.2	0.0	0.2	42	34	1	7	88	154	82	29	202,475	17,797,799	42,969	6.8	428,161
Genitourinary Agents	0.3	0.2	0.0	0.1	19	14	1	3	60	84	65	27	53,752	3,207,523	17,546	2.8	171,878
CNS Drugs	1.1	0.6	0.0	0.5	102	86	1	15	92	148	110	30	849,439	78,550,055	82,408	13.0	770,056
Stimulants/Anti-obesity/Anorexia	0.8	0.6	0.0	0.1	68	63	1	5	87	98	75	36	197,151	17,242,265	24,805	3.9	252,483
Miscellaneous Psychological/Neurological Agents	0.5	0.4	0.0	0.1	147	137	0	9	325	363	112	128	17,429	5,671,444	3,831	0.6	38,673
Analgesics and Anesthetics	0.6	0.1	0.0	0.5	36	14	7	14	62	182	228	31	511,435	31,685,422	93,526	14.8	891,981
Neuromuscular Agents	0.8	0.3	0.0	0.5	74	51	4	19	91	157	121	42	337,261	30,804,619	43,099	6.8	416,147
Nutritional Products	0.3	0.0	0.0	0.2	6	1	0	4	21	38	25	18	101,038	2,080,270	39,547	6.3	374,737
Hematological Agents	0.8	0.3	0.0	0.5	202	193	1	8	245	605	25	17	93,223	22,814,504	12,555	2.0	113,048
Topical Products	0.2	0.1	0.0	0.2	11	7	0	4	45	84	49	25	237,675	10,721,093	96,804	15.3	997,156
Miscellaneous Products	0.3	0.2	0.0	0.1	44	34	2	7	165	225	236	68	14,824	2,445,704	5,476	0.9	55,849
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	19	0	0	0	99	0	0	0	7,176	711,844	3,519	0.6	36,863
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.	4,571,411	347,657,470	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Pennsylvania, released by CMS in 1/2009. 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 Pennsylvania, 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, PENNSYLVANIA, 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	\$46,365,919	39,347	6.2	392,355	0.6	\$185	\$118
ANTICONVULSANT	26,630,992	33,795	5.3	336,677	0.7	110	79
ANTIDEPRESSANTS	25,859,506	76,548	12.1	742,965	0.5	65	35
ANTIASTHMATIC	19,802,824	85,301	13.5	875,128	0.3	71	23
ANALGESICS - Narcotic	19,757,676	97,933	15.5	973,633	0.3	59	20
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	17,161,417	28,739	4.5	300,780	0.7	87	57
ULCER DRUGS	12,602,045	45,151	7.1	458,363	0.4	65	27
ANTIDIABETIC	11,204,795	23,416	3.7	223,801	0.7	72	50
ANTIHYPERTENSIVE	11,052,059	20,338	3.2	205,129	0.6	92	54
HEMATOPOIETIC AGENTS	10,716,732	11,686	1.8	109,228	0.4	251	98
Total	201,153,965	462,254		4,618,059	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Pennsylvania, released by CMS in 1/2009. 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.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); 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, PENNSYLVANIA, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean 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	2,214,637	\$201,153,965	39,347	6.2	392,355	0.6	\$118	33,795	5.3	336,677	0.7	\$79
Female												
All Females	1,271,009	111,480,327	19,325	5.5	192,468	0.6	109	20,121	5.7	200,967	0.7	78
Female, Disabled												
All Ages	817,795	77,057,050	11,928	23.0	123,348	0.7	128	13,123	25.3	135,879	0.8	89
5 and younger	6,901	549,348	44	1.5	476	0.5	60	185	6.2	1,922	0.6	72
6-14	50,307	4,906,874	1,278	17.9	14,040	0.6	99	959	13.5	10,554	0.8	108
15-20	43,944	4,395,817	1,375	24.6	14,187	0.6	105	1,128	20.2	12,123	0.8	100
21-44	232,503	23,128,191	4,421	29.0	44,987	0.6	120	5,020	32.9	51,552	0.8	96
45-64	483,866	44,044,894	4,805	23.1	49,626	0.8	149	5,823	28.0	59,684	0.8	78
65-74	274	31,926	5	10.2	32	0.5	75	8	16.3	44	0.7	27
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	453,214	34,423,277	7,397	2.5	69,120	0.5	75	6,998	2.3	65,088	0.5	54
5 and younger	18,937	1,268,702	77	0.1	797	0.4	55	161	0.3	1,505	0.4	51
6-14	62,340	5,120,452	1,272	1.9	13,417	0.5	87	561	0.8	6,010	0.6	68
15-20	74,795	5,365,646	1,959	3.7	18,513	0.6	84	1,284	2.4	12,496	0.5	60
21-44	199,947	13,833,372	2,884	2.9	25,292	0.4	54	3,800	3.8	34,355	0.5	49
45-64	51,198	5,463,341	571	5.8	4,548	0.5	76	748	7.6	6,154	0.6	56
65-74	19,003	1,560,545	223	13.2	2,315	1.0	150	217	12.9	2,241	1.0	61
75-84	15,044	1,041,555	194	12.5	2,009	0.7	96	137	8.8	1,405	0.9	51
85 and older	11,950	769,664	217	12.9	2,229	0.7	95	90	5.4	922	0.8	39
Male												
All Males	943,628	89,673,638	20,022	7.2	199,887	0.7	127	13,674	4.9	135,710	0.8	81
Male, Disabled												
All Ages	609,680	61,461,141	12,835	21.8	133,135	0.7	137	9,643	16.4	99,412	0.8	90
5 and younger	12,753	1,040,659	166	3.1	1,773	0.4	60	237	4.5	2,497	0.7	78
6-14	123,494	12,120,765	3,873	26.1	42,956	0.6	105	1,662	11.2	18,342	0.7	85
15-20	71,184	7,654,865	2,345	27.2	25,047	0.7	123	1,269	14.7	13,911	0.8	94
21-44	148,381	16,954,980	3,651	25.4	35,531	0.7	166	3,306	23.0	33,390	0.9	103
45-64	253,615	23,668,312	2,796	18.0	27,798	0.8	167	3,161	20.3	31,214	0.8	77
65-74	253	21,560	4	8.5	30	0.4	63	8	17.0	58	1.3	120
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, PENNSYLVANIA, 2005

NON-PRESCRIPTION DRUGS, FENTANYL AND XANAX, 2005												
All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTICONVULSANT				
Beneficiary Characteristics	Number of Rx	Rx \$	Number of Users	Users	Benefit	Mean	Mean	Number of Users	Users	Benefit	Mean	Mean Rx \$ per Benefit Month
				as % of All Benes	Months Among Users	Rx per Benefit Month	Rx \$ per Benefit Month		as % of All Benes	Months Among Users	Rx per Benefit Month	
Male, Other Eligibles												
All Ages	333,948	28,212,497	7,187	3.3	66,752	0.6	108	4,031	1.8	36,298	0.6	58
5 and younger	29,575	2,121,731	162	0.2	1,788	0.4	64	196	0.3	1,970	0.5	70
6-14	112,057	9,952,366	2,469	3.6	25,982	0.6	109	715	1.0	7,637	0.6	66
15-20	77,118	7,025,360	2,541	5.5	23,346	0.7	118	960	2.1	9,243	0.6	59
21-44	61,102	4,873,291	1,326	4.6	9,924	0.4	84	1,392	4.8	10,930	0.5	54
45-64	30,188	2,558,977	373	5.3	2,646	0.5	102	500	7.1	3,769	0.6	52
65-74	10,185	747,473	113	10.7	1,076	0.9	143	129	12.2	1,352	1.1	63
75-84	8,551	581,300	111	13.3	1,077	0.9	127	94	11.3	960	1.0	42
85 and older	5,172	351,999	92	16.2	913	0.7	83	45	7.9	437	0.8	28
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 Pennsylvania, released by CMS in 1/2009. 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.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.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, PENNSYLVANIA, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIASTHMATIC					ANALGESICS - Narcotic				
	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	76,548	12.1	742,965	0.5	\$35	85,301	13.5	875,128	0.3	\$23	97,933	15.5	973,633	0.3	\$20
Female															
All Females	51,202	14.5	501,610	0.5	35	46,856	13.3	479,382	0.3	23	65,186	18.5	656,514	0.3	18
Female, Disabled															
All Ages	25,311	48.9	260,226	0.6	41	18,498	35.7	196,300	0.4	33	25,853	49.9	272,061	0.4	30
5 and younger	19	0.6	222	0.4	13	770	25.8	8,156	0.3	23	93	3.1	1,021	0.1	1
6-14	1,067	15.0	11,546	0.5	25	1,700	23.9	19,179	0.3	22	464	6.5	5,323	0.1	2
15-20	2,029	36.3	20,913	0.5	30	1,008	18.0	10,972	0.3	22	1,101	19.7	12,249	0.2	4
21-44	9,603	63.0	97,870	0.6	39	4,927	32.3	52,513	0.4	29	10,023	65.7	105,896	0.4	28
45-64	12,583	60.6	129,619	0.7	47	10,082	48.5	105,406	0.5	40	14,156	68.1	147,484	0.5	35
65-74	10	20.4	56	0.5	48	11	22.4	74	0.9	82	16	32.7	88	0.7	37
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	25,891	8.6	241,384	0.4	28	28,358	9.4	283,082	0.3	16	39,333	13.1	384,453	0.2	9
5 and younger	49	0.1	503	0.2	10	6,468	10.0	67,450	0.2	13	654	1.0	7,148	0.1	1
6-14	1,530	2.2	16,204	0.4	22	7,087	10.4	75,798	0.3	17	1,995	2.9	22,159	0.1	1
15-20	5,310	9.9	51,776	0.4	23	4,679	8.7	47,363	0.2	14	6,986	13.0	72,440	0.2	3
21-44	15,333	15.3	140,619	0.4	28	7,810	7.8	71,704	0.3	17	25,516	25.5	244,275	0.3	10
45-64	2,728	27.6	22,819	0.5	40	1,513	15.3	13,113	0.4	29	3,205	32.4	28,888	0.4	21
65-74	318	18.8	3,214	0.7	41	330	19.5	3,129	0.5	31	378	22.4	3,766	0.5	25
75-84	309	19.9	3,145	0.8	43	249	16.1	2,407	0.5	30	332	21.4	3,294	0.5	17
85 and older	314	18.7	3,104	0.8	42	222	13.2	2,118	0.4	24	267	15.9	2,483	0.5	20
Male															
All Males	25,346	9.1	241,355	0.6	34	38,445	13.8	395,746	0.3	22	32,747	11.7	317,119	0.4	26
Male, Disabled															
All Ages	14,612	24.9	146,703	0.6	37	13,186	22.4	139,536	0.4	30	15,459	26.3	155,629	0.5	37
5 and younger	56	1.1	591	0.4	13	1,470	27.6	15,707	0.3	24	200	3.8	2,193	0.1	1
6-14	2,218	14.9	24,401	0.5	26	3,538	23.8	39,662	0.3	22	730	4.9	8,411	0.1	2
15-20	2,137	24.8	22,627	0.6	32	1,566	18.1	17,309	0.3	21	1,129	13.1	12,782	0.2	3
21-44	4,759	33.1	45,939	0.6	39	1,985	13.8	20,662	0.4	30	5,549	38.5	55,422	0.5	36
45-64	5,436	35.0	53,113	0.7	43	4,616	29.7	46,127	0.5	43	7,843	50.5	76,785	0.6	49
65-74	6	12.8	32	0.5	29	11	23.4	69	1.1	109	8	17.0	36	0.6	12
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, PENNSYLVANIA, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIASTHMATIC					ANALGESICS - Narcotic				
	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	10,734	4.9	94,652	0.5	30	25,259	11.5	256,210	0.3	17	17,288	7.9	161,490	0.3	14
5 and younger	66	0.1	703	0.3	12	9,517	14.2	97,991	0.2	14	1,077	1.6	11,732	0.1	1
6-14	1,858	2.7	19,687	0.5	25	9,242	13.5	98,377	0.3	18	2,179	3.2	24,155	0.1	1
15-20	3,513	7.6	31,991	0.5	28	3,857	8.3	37,334	0.3	19	4,130	8.9	41,983	0.2	4
21-44	3,465	12.0	27,154	0.4	30	1,506	5.2	12,641	0.3	22	7,275	25.2	61,770	0.4	22
45-64	1,343	19.0	10,325	0.5	39	697	9.9	5,602	0.4	31	2,208	31.3	17,909	0.5	36
65-74	169	16.0	1,710	0.9	44	192	18.2	1,901	0.5	36	149	14.1	1,469	0.6	24
75-84	167	20.0	1,623	0.8	45	154	18.5	1,449	0.6	32	158	19.0	1,472	0.5	19
85 and older	153	26.9	1,459	0.8	44	94	16.5	915	0.3	24	112	19.7	1,000	0.6	28
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 Pennsylvania, released by CMS in 1/2009. 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.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); 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, PENNSYLVANIA, 2005

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ULCER DRUGS					ANTIDIABETIC				
	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
All	28,739	4.5	300,780	0.7	\$57	45,151	7.1	458,363	0.4	\$28	23,416	3.7	223,801	0.7	\$50
Female															
All Females	9,019	2.6	94,099	0.6	56	28,563	8.1	292,717	0.4	27	14,581	4.1	142,316	0.7	49
Female, Disabled															
All Ages	4,046	7.8	43,473	0.6	61	15,413	29.8	163,747	0.5	34	10,128	19.6	103,100	0.7	53
5 and younger	75	2.5	810	0.4	29	409	13.7	4,085	0.5	32	59	2.0	603	0.7	42
6-14	1,949	27.4	21,353	0.7	56	613	8.6	7,003	0.4	36	290	4.1	3,019	0.6	57
15-20	714	12.8	7,578	0.6	55	679	12.2	7,481	0.4	26	176	3.2	1,865	0.6	63
21-44	744	4.9	7,785	0.5	69	4,487	29.4	47,947	0.4	31	1,753	11.5	17,975	0.6	47
45-64	564	2.7	5,947	0.5	80	9,217	44.4	97,199	0.5	37	7,841	37.7	79,603	0.8	53
65-74	0	0.0	0	0.0	0	8	16.3	32	0.5	54	9	18.4	35	0.5	72
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	4,973	1.7	50,626	0.6	52	13,150	4.4	128,970	0.3	17	4,453	1.5	39,216	0.6	40
5 and younger	160	0.2	1,658	0.4	33	1,426	2.2	12,812	0.3	16	35	0.1	381	0.7	50
6-14	2,804	4.1	29,811	0.6	51	1,384	2.0	15,088	0.2	15	222	0.3	2,160	0.6	61
15-20	1,057	2.0	10,353	0.6	52	2,199	4.1	22,651	0.2	11	360	0.7	3,484	0.5	48
21-44	797	0.8	7,504	0.5	57	5,710	5.7	55,398	0.3	17	1,854	1.9	15,623	0.5	36
45-64	141	1.4	1,150	0.6	80	1,390	14.1	12,588	0.4	27	1,021	10.3	8,170	0.6	40
65-74	5	0.3	53	0.7	84	363	21.5	3,572	0.6	32	448	26.5	4,253	0.8	43
75-84	4	0.3	48	0.3	4	366	23.6	3,672	0.6	30	346	22.3	3,458	0.8	35
85 and older	5	0.3	49	0.7	12	312	18.6	3,189	0.6	31	167	9.9	1,687	0.8	41
Male															
All Males	19,720	7.1	206,681	0.7	58	16,588	5.9	165,646	0.4	29	8,835	3.2	81,485	0.7	52
Male, Disabled															
All Ages	9,386	16.0	101,308	0.7	60	9,368	15.9	97,215	0.5	34	6,400	10.9	61,755	0.7	53
5 and younger	291	5.5	3,090	0.5	30	606	11.4	5,931	0.5	38	58	1.1	553	0.6	38
6-14	6,287	42.3	68,102	0.7	57	849	5.7	9,770	0.4	39	335	2.3	3,525	0.6	54
15-20	2,124	24.6	23,178	0.7	68	750	8.7	8,227	0.4	30	243	2.8	2,649	0.7	74
21-44	495	3.4	4,982	0.6	70	2,503	17.4	26,096	0.5	32	1,221	8.5	11,627	0.7	53
45-64	189	1.2	1,956	0.5	73	4,649	29.9	47,126	0.6	35	4,537	29.2	43,368	0.7	52
65-74	0	0.0	0	0.0	0	11	23.4	65	0.5	27	6	12.8	33	0.4	15
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, PENNSYLVANIA, 2005

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ULCER DRUGS					ANTIDIABETIC				
	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	10,334	4.7	105,373	0.6	56	7,220	3.3	68,431	0.3	20	2,435	1.1	19,730	0.7	49
5 and younger	449	0.7	4,792	0.4	27	1,908	2.9	17,283	0.3	18	56	0.1	556	0.6	55
6-14	6,870	10.0	71,882	0.7	55	1,169	1.7	13,064	0.3	19	198	0.3	2,030	0.6	61
15-20	2,565	5.5	24,992	0.7	64	1,239	2.7	12,309	0.3	14	226	0.5	2,047	0.7	82
21-44	364	1.3	2,928	0.5	50	1,627	5.6	14,177	0.3	22	757	2.6	5,626	0.6	44
45-64	77	1.1	702	0.5	74	741	10.5	6,350	0.4	29	748	10.6	5,182	0.6	44
65-74	2	0.2	9	1.1	121	200	19.0	1,957	0.6	32	223	21.1	2,128	0.7	41
75-84	4	0.5	36	0.7	30	194	23.3	1,888	0.6	33	157	18.8	1,498	0.8	39
85 and older	3	0.5	32	0.4	6	142	25.0	1,403	0.7	27	70	12.3	663	0.8	31
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 Pennsylvania, released by CMS in 1/2009. 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, PENNSYLVANIA, 2005

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC					HEMATOPOIETIC 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	20,338	3.2	205,129	0.6	\$54	11,686	1.8	109,228	0.4	\$98	631,856	3,920,977
Female												
All Females	12,269	3.5	126,484	0.6	54	8,678	2.5	81,008	0.4	94	352,883	2,136,672
Female, Disabled												
All Ages	9,419	18.2	99,641	0.6	56	3,611	7.0	36,762	0.5	120	51,770	425,928
5 and younger	6	0.2	71	0.2	3	49	1.6	510	0.3	27	2,987	20,336
6-14	7	0.1	73	0.6	36	86	1.2	984	0.4	47	7,124	61,957
15-20	30	0.5	344	0.5	28	207	3.7	2,201	0.4	24	5,586	45,998
21-44	1,519	10.0	16,155	0.5	46	1,016	6.7	10,558	0.4	82	15,246	126,464
45-64	7,850	37.8	82,977	0.6	58	2,247	10.8	22,471	0.5	153	20,778	171,026
65-74	7	14.3	21	0.6	56	6	12.2	38	0.6	285	49	147
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	2,850	0.9	26,843	0.5	45	5,067	1.7	44,246	0.2	72	301,113	1,710,744
5 and younger	25	0.0	226	0.1	2	248	0.4	2,542	0.2	8	64,373	388,487
6-14	21	0.0	250	0.5	37	90	0.1	893	0.3	19	68,289	458,915
15-20	61	0.1	656	0.3	26	1,029	1.9	9,294	0.2	5	53,557	305,403
21-44	1,066	1.1	10,258	0.4	35	2,884	2.9	23,973	0.2	40	100,090	480,414
45-64	1,029	10.4	9,058	0.5	50	389	3.9	3,319	0.4	503	9,885	50,996
65-74	319	18.9	3,032	0.7	62	139	8.2	1,360	0.7	199	1,688	9,275
75-84	210	13.5	2,133	0.7	58	148	9.5	1,453	0.7	109	1,551	8,799
85 and older	119	7.1	1,230	0.7	56	140	8.3	1,412	0.6	37	1,680	8,455
Male												
All Males	8,069	2.9	78,645	0.6	54	3,008	1.1	28,220	0.5	110	278,931	1,784,254
Male, Disabled												
All Ages	6,053	10.3	61,442	0.6	56	2,072	3.5	19,341	0.5	139	58,792	458,668
5 and younger	9	0.2	98	0.2	7	70	1.3	737	0.3	20	5,324	34,533
6-14	23	0.2	268	0.5	28	95	0.6	1,046	0.4	47	14,847	128,683
15-20	51	0.6	548	0.4	22	78	0.9	778	0.5	129	8,634	74,668
21-44	1,268	8.8	13,034	0.5	49	437	3.0	4,170	0.5	174	14,399	106,865
45-64	4,696	30.2	47,459	0.6	59	1,390	8.9	12,596	0.6	143	15,541	113,752
65-74	6	12.8	35	0.4	30	2	4.3	14	0.2	40	47	167
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.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, PENNSYLVANIA, 2005

ANALYSIS OF BENEFIT FOR PATIENTS WITH CHRONIC KIDNEY DISEASE													
ANTIHYPERLIPIDEMIC						HEMATOPOIETIC AGENTS							
Beneficiary Characteristics	Number of Users	Users	Mean	Mean	Number of Users	Users	Mean	Mean	Number of Users	Mean	Mean	Number of Beneficiaries	Number of Benefit Months
		as % of All Benes	Benefit Among Users	Rx per Benefit Month		Rx \$ per Benefit Month	as % of All Benes	Benefit Among Users		Rx per Benefit Month	Rx \$ per Benefit Month		
Male, Other Eligibles													
All Ages	2,016	0.9	17,203	0.5	47	936	0.4	8,879	0.4	48	220,139	1,325,586	
5 and younger	29	0.0	286	0.1	5	295	0.4	3,035	0.2	5	66,820	403,288	
6-14	16	0.0	172	0.4	36	88	0.1	947	0.3	29	68,438	460,091	
15-20	56	0.1	555	0.4	31	68	0.1	688	0.4	3	46,473	283,711	
21-44	728	2.5	6,304	0.4	39	113	0.4	917	0.4	104	28,891	132,953	
45-64	857	12.1	6,771	0.5	50	120	1.7	888	0.4	86	7,061	32,027	
65-74	182	17.3	1,711	0.7	64	105	10.0	1,016	0.7	68	1,055	5,608	
75-84	111	13.3	1,063	0.7	66	71	8.5	654	0.6	103	833	4,645	
85 and older	37	6.5	341	0.8	66	76	13.4	734	0.7	94	568	3,263	
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	42	51	

Source: Data for this table are from the MAX 2005 file for Pennsylvania, released by CMS in 1/2009. 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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

Nondual Beneficiaries

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, PENNSYLVANIA, 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	\$606	9.5	2,956	30,609
Age				
0-64	717	10.5	1,925	19,707
65-74	524	9.3	274	3,001
75-84	399	7.8	345	3,647
85 and older	327	6.6	412	4,254
Unknown	0	0.0	0	0
Gender				
Female	599	9.5	1,680	17,829
Male	616	9.5	1,276	12,780
Unknown	0	0.0	0	0
Race				
White	613	9.7	1,849	18,635
African American	603	9.2	879	9,669
Other/unknown	561	9.1	228	2,305
Basis of Eligibility^c				
Aged	405	7.7	1,031	10,926
Disabled	718	10.5	1,922	19,679
Adults	445	8.3	2	3
Children	1,011	11.0	1	1
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2005 file for Pennsylvania, released by CMS in 1/2009. 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 2,908 beneficiaries who were in nursing facilities for part of their enrollment and their 20,024 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, PENNSYLVANIA, 2005

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

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, PENNSYLVANIA, 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	\$2,992,217	1,670	56.5	18,618	1.0	\$165	\$161
ANTICONVULSANT	1,753,994	1,719	58.2	19,336	1.3	71	91
ANTIDEPRESSANTS	1,381,736	2,244	75.9	24,601	1.0	58	56
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	1,184,222	555	18.8	6,035	0.9	222	196
ANALGESICS - Narcotic	883,593	1,730	58.5	17,672	1.0	51	50
HEMATOPOIETIC AGENTS	876,827	894	30.2	9,343	0.8	115	94
ULCER DRUGS	795,717	1,950	66.0	21,366	0.8	49	37
ANTIDIABETIC	756,109	1,496	50.6	15,964	1.0	45	47
DERMATOLOGICAL	666,697	4,221	142.8	47,852	0.3	41	14
ANTIHYPERLIPIDEMIC	603,556	806	27.3	8,876	0.9	76	68
Total	11,894,668	17,285		189,663	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Pennsylvania, released by CMS in 1/2009. 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 2,908 beneficiaries who were in nursing facilities for part of their enrollment and their 20,024 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, PENNSYLVANIA, 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	153,874	\$11,894,668	1,670	56.5	18,618	1.0	\$161	1,719	58.2	19,336	1.3	\$91
Female												
All Females	90,245	7,106,727	964	57.4	10,885	1.0	160	957	57.0	10,799	1.3	91
Female, Disabled												
All Ages	62,990	5,311,020	626	61.5	7,061	1.0	180	736	72.3	8,345	1.3	100
64 or younger	62,983	5,309,670	626	61.6	7,061	1.0	180	736	72.4	8,345	1.3	100
65-74	7	1,350	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	27,255	1,795,707	338	51.1	3,824	0.9	124	221	33.4	2,454	1.1	58
64 or younger	110	3,855	1	25.0	12	1.1	8	1	25.0	12	1.0	26
65-74	9,683	691,343	122	76.2	1,373	1.1	158	111	69.4	1,241	1.2	62
75-84	8,652	533,586	99	45.0	1,137	0.9	106	61	27.7	675	1.1	63
85 and older	8,810	566,923	116	41.7	1,302	0.8	106	48	17.3	526	0.9	46
Male												
All Males	63,629	4,787,941	706	55.3	7,733	1.0	161	762	59.7	8,537	1.3	91
Male, Disabled												
All Ages	48,853	3,781,663	534	59.1	5,942	1.0	171	621	68.7	6,952	1.3	99
64 or younger	48,797	3,776,391	533	59.1	5,930	1.0	171	619	68.6	6,928	1.3	99
65-74	56	5,272	1	50.0	12	0.5	90	2	100.0	24	1.7	162
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	14,776	1,006,278	172	46.2	1,791	0.9	130	141	37.9	1,585	1.1	54
64 or younger	87	3,574	0	0.0	0	0.0	0	1	33.3	12	1.9	34
65-74	5,353	343,519	55	50.0	569	0.9	137	71	64.5	800	1.2	69
75-84	5,286	364,222	64	51.2	659	1.1	155	52	41.6	580	1.1	45
85 and older	4,050	294,963	53	39.6	563	0.7	94	17	12.7	193	0.8	18
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 Pennsylvania, released by CMS in 1/2009. 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 2,908 beneficiaries who were in nursing facilities for part of their enrollment and their 20,024 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); 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, PENNSYLVANIA, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANALGESICS - Narcotic				
	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	2,244	75.9	24,601	1.0	\$56	555	18.8	6,035	0.9	\$196	1,730	58.5	17,672	1.0	\$50
Female															
All Females	1,334	79.4	14,765	1.0	57	352	21.0	3,889	0.9	199	991	59.0	10,501	0.9	50
Female, Disabled															
All Ages	891	87.5	9,871	1.0	62	152	14.9	1,717	0.9	326	699	68.7	7,449	1.0	58
64 or younger	891	87.7	9,871	1.0	62	152	15.0	1,717	0.9	326	698	68.7	7,448	1.0	58
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	1	3.0	254
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	443	66.9	4,894	0.9	48	200	30.2	2,172	0.9	99	292	44.1	3,052	0.7	30
64 or younger	1	25.0	12	1.1	71	0	0.0	0	0.0	0	2	50.0	2	3.0	36
65-74	129	80.6	1,445	0.9	47	31	19.4	349	0.9	112	94	58.8	1,000	1.0	46
75-84	147	66.8	1,647	0.9	49	62	28.2	680	1.0	99	102	46.4	1,073	0.6	17
85 and older	166	59.7	1,790	0.9	47	107	38.5	1,143	0.8	95	94	33.8	977	0.6	30
Male															
All Males	910	71.3	9,836	1.0	55	203	15.9	2,146	0.9	191	739	57.9	7,171	1.1	50
Male, Disabled															
All Ages	644	71.2	6,973	1.0	57	93	10.3	965	0.8	284	599	66.3	5,758	1.1	55
64 or younger	644	71.4	6,973	1.0	57	93	10.3	965	0.8	284	597	66.2	5,750	1.1	55
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	8	0.8	30
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	266	71.5	2,863	0.9	50	110	29.6	1,181	0.9	114	140	37.6	1,413	0.8	31
64 or younger	1	33.3	12	2.6	131	0	0.0	0	0.0	0	2	66.7	14	0.1	2
65-74	82	74.5	907	1.0	52	22	20.0	264	0.9	114	38	34.5	424	0.9	26
75-84	91	72.8	996	0.9	52	38	30.4	404	0.9	112	59	47.2	579	0.7	32
85 and older	92	68.7	948	0.9	46	50	37.3	513	1.0	117	41	30.6	396	0.8	37
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 Pennsylvania, released by CMS in 1/2009. 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 2,908 beneficiaries who were in nursing facilities for part of their enrollment and their 20,024 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.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, PENNSYLVANIA, 2005

Beneficiary Characteristics	HEMATOPOIETIC AGENTS					ULCER DRUGS					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	894	30.2	9,343	0.8	\$94	1,950	66.0	21,366	0.8	\$37	1,496	50.6	15,964	1.0	\$47
Female															
All Females	500	29.8	5,363	0.8	106	1,101	65.5	12,272	0.7	36	892	53.1	9,812	1.1	47
Female, Disabled															
All Ages	316	31.0	3,383	0.9	134	710	69.7	7,943	0.8	37	575	56.5	6,243	1.1	50
64 or younger	315	31.0	3,382	0.9	134	710	69.9	7,943	0.8	37	575	56.6	6,243	1.1	50
65-74	1	50.0	1	4.0	1,096	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	184	27.8	1,980	0.8	58	391	59.1	4,329	0.7	35	317	47.9	3,569	1.0	42
64 or younger	3	75.0	30	1.0	13	2	50.0	13	1.0	58	2	50.0	12	1.3	55
65-74	61	38.1	643	0.8	113	115	71.9	1,274	0.7	36	108	67.5	1,227	1.1	44
75-84	51	23.2	539	0.8	54	135	61.4	1,461	0.7	36	126	57.3	1,424	0.9	33
85 and older	69	24.8	768	0.7	17	139	50.0	1,581	0.7	32	81	29.1	906	1.0	52
Male															
All Males	394	30.9	3,980	0.8	78	849	66.5	9,094	0.8	38	604	47.3	6,152	1.0	48
Male, Disabled															
All Ages	282	31.2	2,817	0.8	73	618	68.4	6,613	0.8	40	446	49.3	4,479	1.0	50
64 or younger	282	31.3	2,817	0.8	73	617	68.4	6,609	0.8	40	446	49.4	4,479	1.0	50
65-74	0	0.0	0	0.0	0	1	50.0	4	0.8	15	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
Male, Other Eligibles															
All Ages	112	30.1	1,163	0.8	88	231	62.1	2,481	0.7	34	158	42.5	1,673	0.9	43
64 or younger	1	33.3	2	0.5	4	1	33.3	2	0.5	47	1	33.3	12	0.9	31
65-74	41	37.3	417	0.8	52	78	70.9	853	0.7	35	63	57.3	666	0.9	43
75-84	24	19.2	253	0.8	86	85	68.0	928	0.7	38	64	51.2	671	1.0	42
85 and older	46	34.3	491	0.8	120	67	50.0	698	0.8	29	30	22.4	324	1.0	43
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 Pennsylvania, released by CMS in 1/2009. 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 2,908 beneficiaries who were in nursing facilities for part of their enrollment and their 20,024 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.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, PENNSYLVANIA, 2005

Beneficiary Characteristics	DERMATOLOGICAL						ANTIHYPERTENSIVE						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-Year Nursing Facility Residents		
All	4,221	142.8	47,852	0.3	\$14	806	27.3	8,876	0.9	\$68	2,956	30,609	
Female													
All Females	2,420	144.0	27,712	0.3	14	493	29.3	5,541	0.9	69	1,680	17,829	
Female, Disabled													
All Ages	1,630	160.1	18,720	0.4	15	326	32.0	3,690	0.9	70	1,018	10,750	
64 or younger	1,630	160.4	18,720	0.4	15	326	32.1	3,690	0.9	70	1,016	10,748	
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	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	790	119.3	8,992	0.3	11	167	25.2	1,851	0.9	66	662	7,079	
64 or younger	2	50.0	24	0.1	3	1	25.0	6	0.8	110	4	31	
65-74	214	133.8	2,465	0.3	11	51	31.9	569	1.0	79	160	1,770	
75-84	254	115.5	2,915	0.3	11	63	28.6	696	0.9	61	220	2,340	
85 and older	320	115.1	3,588	0.3	11	52	18.7	580	0.8	59	278	2,938	
Male													
All Males	1,801	141.1	20,140	0.3	14	313	24.5	3,335	0.9	67	1,276	12,780	
Male, Disabled													
All Ages	1,365	151.0	15,203	0.3	15	224	24.8	2,414	0.9	68	904	8,929	
64 or younger	1,365	151.3	15,203	0.3	15	224	24.8	2,414	0.9	68	902	8,913	
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	16	
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	436	117.2	4,937	0.3	9	89	23.9	921	0.9	66	372	3,851	
64 or younger	1	33.3	12	0.1	1	2	66.7	14	1.2	78	3	15	
65-74	155	140.9	1,745	0.3	9	39	35.5	414	0.8	64	110	1,213	
75-84	138	110.4	1,544	0.3	10	32	25.6	336	0.8	60	125	1,307	
85 and older	142	106.0	1,636	0.3	9	16	11.9	157	0.9	85	134	1,316	
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 Pennsylvania, released by CMS in 1/2009. 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 2,908 beneficiaries who were in nursing facilities for part of their enrollment and their 20,024 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}
PENNSYLVANIA, 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	125,622	19.9	0.9	592,708	\$19	\$12,037,648	\$20	3.5	631,856
Age									
5 and younger	27,827	19.9	0.5	66,300	7	979,059	15	5.1	139,504
6-14	24,111	15.2	0.4	61,622	8	1,316,692	21	2.8	158,698
15-20	16,697	14.6	0.4	50,336	9	1,063,695	21	2.5	114,250
21-44	31,649	20.0	1.1	168,004	24	3,737,543	22	3.7	158,626
45-64	23,102	43.4	4.2	222,151	87	4,650,643	21	3.6	53,265
65-74	849	29.9	3.1	8,895	40	113,923	13	2.8	2,839
75-84	738	31.0	3.4	8,125	41	96,652	12	3.0	2,384
85 and older	649	28.9	3.2	7,275	35	79,441	11	3.3	2,248
Unknown	0	0.0	0.0	0	0	0	0	0.0	42
Basis of Eligibility^c									
Aged	2,212	29.9	3.3	24,145	39	287,440	12	3.0	7,407
Disabled	41,731	37.7	3.1	345,444	70	7,686,064	22	3.4	110,562
Adults	23,226	16.5	0.6	87,488	13	1,897,466	22	4.3	140,953
Children	58,064	15.6	0.4	133,497	6	2,129,687	16	3.6	371,614
Unknown	389	29.5	1.6	2,134	28	36,991	17	0.7	1,320
Gender									
Female	74,640	21.2	1.1	378,099	22	7,681,148	20	3.9	352,903
Male	50,982	18.3	0.8	214,609	16	4,356,500	20	2.9	278,953
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	108,486	24.2	1.2	524,296	24	10,865,273	21	3.5	447,485
African American	9,207	9.1	0.4	42,415	7	664,412	16	2.6	100,983
Other/unknown	7,929	9.5	0.3	25,997	6	507,963	20	3.3	83,388
Use of Nursing Facilities^d									
Entire year	2,327	78.7	12.4	36,744	171	505,384	14	2.7	2,956
Part year	2,221	76.4	8.0	23,333	162	470,057	20	3.8	2,908
None	121,074	19.3	0.9	532,631	18	11,062,207	21	3.5	625,992
Maintenance Assistance Status									
Cash	55,353	24.5	1.5	347,822	31	7,109,126	20	3.6	226,208
Medically needy	3,190	11.8	0.3	7,661	6	154,272	20	3.2	27,016
Poverty related	43,585	16.3	0.5	126,747	10	2,642,084	21	3.4	267,921
Other/unknown	23,494	21.2	1.0	110,478	19	2,132,166	19	3.3	110,711

Source: Data for this table are from the MAX 2005 file for Pennsylvania, released by CMS in 1/2009. 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}
PENNSYLVANIA, 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	0.2	\$3	\$20	\$0	\$1	3,920,977
Age						
5 and younger	0.1	1	15	0	0	846,644
6-14	0.1	1	21	0	0	1,109,646
15-20	0.1	1	21	0	0	709,780
21-44	0.2	4	22	0	2	846,696
45-64	0.6	13	21	0	4	367,801
65-74	0.6	7	13	0	2	15,197
75-84	0.6	7	12	0	2	13,444
85 and older	0.6	7	11	0	1	11,718
Unknown	0.0	0	0	0	0	51
Basis of Eligibility^c						
Aged	0.6	7	12	0	2	40,133
Disabled	0.4	9	22	0	3	884,596
Adults	0.1	3	22	0	1	671,504
Children	0.1	1	16	0	0	2,315,207
Unknown	0.2	4	17	0	1	9,537
Gender						
Female	0.2	4	20	0	1	2,136,695
Male	0.1	2	20	0	1	1,784,282
Unknown	0.0	0	0	0	0	0
Race						
White	0.2	3	21	0	1	3,242,902
African American	0.1	2	16	0	0	374,141
Other/unknown	0.1	2	20	0	0	303,934
Use of Nursing Facilities^d						
Entire year	1.2	17	14	0	4	30,609
Part year	1.2	23	20	0	5	20,024
None	0.1	3	21	0	1	3,870,344
Maintenance Assistance Status						
Cash	0.2	5	20	0	2	1,436,429
Medically needy	0.0	1	20	0	0	155,039
Poverty related	0.1	2	21	0	0	1,662,134
Other/unknown	0.2	3	19	0	1	667,375

Source: Data for this table are from the MAX 2005 file for Pennsylvania, released by CMS in 1/2009. 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}
PENNSYLVANIA, 2005

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a	Total Number Rx.	\$ per Rx	Number Rx as a
				Percentage of All Part D Excluded Rx \$			Percentage of All Part D Excluded Rx
All	171,243	\$70	\$12,037,648	100.0	592,708	\$20	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	80	214	17,145	0.1	198	87	0.0
Drugs for cosmetic purposes	424	28	12,033	0.1	712	17	0.1
Cough and cold medications	44,948	42	1,889,633	15.7	76,630	25	12.9
Vitamins and minerals	15,160	81	1,228,970	10.2	57,439	21	9.7
Non-prescription drugs	78,249	46	3,625,196	30.1	270,455	13	45.6
Barbiturates	1,169	62	72,171	0.6	10,286	7	1.7
Benzodiazepines	27,901	123	3,445,027	28.6	166,026	21	28.0
Other Part D Excl Rx Drugs	3,312	528	1,747,473	14.5	10,962	159	1.8

Source: Data for this table are from the MAX 2005 file for Pennsylvania, released by CMS in 1/2009. 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, PENNSYLVANIA, 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	1,621,601	14,197	321,560	325,451	959,073	1,320	16,137,904	119,632	3,508,395	2,936,856	9,563,222	9,799
Age												
5 and younger	368,791	7	19,571	0	349,213	0	3,578,029	15	206,623	0	3,371,391	0
6-14	442,331	11	65,689	0	376,631	0	4,682,051	39	743,832	0	3,938,180	0
15-20	265,671	8	40,572	0	225,057	34	2,655,175	17	451,298	0	2,203,692	168
21-44	377,997	16	86,069	283,210	8,129	573	3,552,001	52	928,387	2,570,107	49,896	3,559
45-64	152,398	37	109,510	42,141	0	710	1,550,094	209	1,177,642	366,188	0	6,055
65-74	7,370	7,144	149	74	0	3	69,309	68,260	613	419	0	17
75-84	4,212	4,190	0	22	0	0	34,376	34,255	0	121	0	0
85 and older	2,788	2,784	0	4	0	0	16,806	16,785	0	21	0	0
Unknown	43	0	0	0	43	0	63	0	0	0	63	0
Gender												
Female	912,576	9,363	156,949	257,012	487,932	1,320	9,089,338	78,653	1,729,340	2,390,799	4,880,747	9,799
Male	709,025	4,834	164,611	68,439	471,141	0	7,048,566	40,979	1,779,055	546,057	4,682,475	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	897,825	6,200	197,312	181,368	511,955	990	8,825,911	45,506	2,136,700	1,611,926	5,024,434	7,345
African American	460,356	3,302	79,386	93,150	284,320	198	4,764,174	30,346	883,788	889,729	2,958,760	1,551
Other/unknown	263,420	4,695	44,862	50,933	162,798	132	2,547,819	43,780	487,907	435,201	1,580,028	903
Use of Nursing Facilities^c												
Entire year	2,962	1,031	1,928	2	1	0	30,647	10,929	19,714	3	1	0
Part year	2,994	699	2,184	96	7	8	27,783	5,732	21,097	812	67	75
None	1,615,645	12,467	317,448	325,353	959,065	1,312	16,079,474	102,971	3,467,584	2,936,041	9,563,154	9,724
Maintenance Assistance Status												
Cash	725,734	5,522	235,510	156,797	327,905	0	7,599,158	56,232	2,673,126	1,489,032	3,380,768	0
Medically needy	48,795	9	414	15,149	33,223	0	447,923	92	3,794	152,048	291,989	0
Poverty related	552,849	4,064	76,430	32,970	438,065	1,320	5,225,693	34,012	746,471	207,243	4,228,168	9,799
Other/unknown	294,223	4,602	9,206	120,535	159,880	0	2,865,130	29,296	85,004	1,088,533	1,662,297	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	378,647	5,883	77,917	73,461	220,131	1,255	3,339,668	36,322	787,698	541,247	1,965,221	9,180
FFS part year, with Rx claims	53,409	535	13,533	16,562	22,745	34	495,436	5,024	132,502	135,288	222,258	364
FFS part year, no Rx claims	199,800	989	19,112	50,930	128,738	31	1,648,084	7,589	169,236	391,378	1,079,626	255
MC all year, with Rx claims	2,618	26	718	831	1,043	0	25,815	265	7,517	7,416	10,617	0
MC all year, no Rx claims	987,127	6,764	210,280	183,667	586,416	0	10,628,901	70,432	2,411,442	1,861,527	6,285,500	0

Source: Data for this table are from the MAX 2005 file for Pennsylvania, released by CMS in 1/2009. 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, PENNSYLVANIA, 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	1,621,601	16,137,904	631,856	3,920,977	0	12,216,927
Fee-for-service (FFS) all year	378,647	3,339,668	378,647	3,339,668	0	0
FFS part year, with Rx claims	53,409	495,436	53,409	195,643	0	299,793
FFS part year, with no Rx claims	199,800	1,648,084	199,800	385,666	0	1,262,418
Managed care (MC) all year, with Rx claims	2,618	25,815	0	0	0	25,815
MC all year, with no Rx claims	987,127	10,628,901	0	0	0	10,628,901

Source: Data for this table are from the MAX 2005 file for Pennsylvania, released by CMS in 1/2009. 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