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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, TENNESSEE, 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	1,281,414	2,928	175,695	395,253	705,608	1,930	12,979,252	29,419	1,983,796	3,690,024	7,257,795	18,218
Age												
5 and younger	261,258	0	7,711	2	253,545	0	2,590,182	0	84,480	5	2,505,697	0
6-14	305,676	1	20,176	13	285,486	0	3,294,577	7	234,644	49	3,059,877	0
15-20	179,878	6	17,034	670	162,121	47	1,863,562	64	198,203	1,912	1,663,019	364
21-44	364,361	11	61,335	297,711	4,456	848	3,560,015	118	698,423	2,824,975	29,202	7,297
45-64	164,867	151	67,688	95,993	0	1,035	1,618,916	1,626	749,741	856,992	0	10,557
65-74	3,383	1,189	1,348	846	0	0	32,192	12,191	13,960	6,041	0	0
75-84	1,322	992	316	14	0	0	13,659	10,193	3,421	45	0	0
85 and older	668	577	87	4	0	0	6,141	5,212	924	5	0	0
Unknown	1	1	0	0	0	0	8	8	0	0	0	0
Gender												
Female	741,933	1,798	85,631	295,358	357,222	1,924	7,506,459	18,023	971,892	2,828,345	3,670,025	18,174
Male	539,480	1,130	90,064	99,895	348,385	6	5,472,781	11,396	1,011,904	861,679	3,587,758	44
Unknown	1	0	0	0	1	0	12	0	0	0	12	0
Race												
White	791,556	1,353	95,339	277,887	416,051	926	7,889,936	12,715	1,067,196	2,561,931	4,238,680	9,414
African American	390,432	605	47,641	103,691	238,326	169	4,116,072	5,979	545,164	1,034,019	2,529,267	1,643
Other/unknown	99,426	970	32,715	13,675	51,231	835	973,244	10,725	371,436	94,074	489,848	7,161
Use of Nursing Facilities^c												
Entire year	1,691	294	1,395	2	0	0	16,989	2,715	14,272	2	0	0
Part year	1,295	147	1,111	33	1	3	12,775	1,297	11,132	311	12	23
None	1,278,428	2,487	173,189	395,218	705,607	1,927	12,949,488	25,407	1,958,392	3,689,711	7,257,783	18,195
Maintenance Assistance Status												
Cash	519,953	767	162,654	111,204	245,328	0	5,649,894	8,507	1,869,529	1,141,198	2,630,660	0
Medically needy	108,759	1,204	6,825	46,280	54,450	0	1,080,725	13,008	62,939	471,841	532,937	0
Poverty-related	262,160	115	42	23,798	236,275	1,930	2,459,598	956	414	172,752	2,267,258	18,218
Other/unknown	390,542	842	6,174	213,971	169,555	0	3,789,035	6,948	50,914	1,904,233	1,826,940	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	1,281,414	2,928	175,695	395,253	705,608	1,930	12,979,252	29,419	1,983,796	3,690,024	7,257,795	18,218
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2005 file for Tennessee, released by CMS in 12/2008. 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, TENNESSEE, 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	71.0	12.2	\$733	\$60	\$3,519	20.8	1,281,414
Age							
5 and younger	67.4	4.2	258	61	1,924	13.4	261,258
6-14	62.1	4.9	353	72	1,864	19.0	305,676
15-20	67.2	6.7	370	55	2,854	13.0	179,878
21-44	76.2	15.4	888	58	4,340	20.5	364,361
45-64	85.5	36.1	2,210	61	7,848	28.2	164,867
65-74	80.9	32.0	1,679	52	7,801	21.5	3,383
75-84	74.8	38.9	1,899	49	9,705	19.6	1,322
85 and older	72.2	39.2	1,682	43	13,274	12.7	668
Unknown	100.0	15.0	968	65	2,189	44.2	1
Basis of Eligibility^e							
Aged	76.6	35.0	1,721	49	8,773	19.6	2,928
Disabled	76.0	31.6	2,300	73	10,541	21.8	175,695
Adults	79.5	16.7	889	53	3,526	25.2	395,253
Children	64.9	4.7	249	53	1,725	14.4	705,608
Unknown	86.2	24.8	1,528	62	10,851	14.1	1,930
Gender							
Female	75.0	14.1	774	55	3,642	21.3	741,933
Male	65.5	9.5	676	71	3,350	20.2	539,480
Unknown	100.0	7.0	487	70	1,358	35.9	1
Race							
White	76.3	14.6	867	59	3,756	23.1	791,556
African American	62.3	7.2	406	56	2,688	15.1	390,432
Other/unknown	62.6	12.0	951	80	4,896	19.4	99,426
Use of Nursing Facilities^f							
Entire year	98.2	108.6	6,135	57	49,937	12.3	1,691
Part year	98.3	78.7	4,447	57	46,950	9.5	1,295
None	70.9	12.0	722	60	3,414	21.1	1,278,428
Maintenance Assistance Status							
Cash	72.6	15.7	1,009	64	4,913	20.5	519,953
Medically needy	68.4	11.4	594	52	2,747	21.6	108,759
Poverty related	65.4	4.7	236	50	1,867	12.6	262,160
Other/unknown	73.4	12.7	737	58	2,988	24.7	390,542

Source: Data for this table are from the MAX 2005 file for Tennessee, released by CMS in 12/2008. 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, TENNESSEE, 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	\$72	20.8	29.0	48.4	8.0	9.6	4.3	0.7	\$347	1,281,414	12,979,252
Age												
5 and younger	0.4	26	13.4	32.6	62.4	3.7	1.2	0.1	0.0	194	261,258	2,590,182
6-14	0.5	33	19.0	37.9	54.5	4.5	2.8	0.3	0.0	173	305,676	3,294,577
15-20	0.6	36	13.0	32.8	55.0	7.4	4.2	0.6	0.0	276	179,878	1,863,562
21-44	1.6	91	20.5	23.8	43.6	12.5	14.6	5.0	0.6	444	364,361	3,560,015
45-64	3.7	225	28.2	14.5	19.3	12.3	29.7	20.3	3.9	799	164,867	1,618,916
65-74	3.4	177	21.5	19.1	17.1	12.4	28.4	19.1	3.8	820	3,383	32,192
75-84	3.8	184	19.6	25.2	13.2	9.2	26.6	19.3	6.5	939	1,322	13,659
85 and older	4.3	183	12.7	27.8	10.3	6.3	24.1	22.2	9.3	1,444	668	6,141
Unknown	1.9	121	44.2	0.0	0.0	100.0	0.0	0.0	0.0	274	1	8
Basis of Eligibility^e												
Aged	3.5	171	19.6	23.4	16.5	10.8	26.2	17.5	5.6	873	2,928	29,419
Disabled	2.8	204	21.8	24.0	26.5	9.5	20.8	15.8	3.4	934	175,695	1,983,796
Adults	1.8	95	25.2	20.5	41.1	13.4	17.9	6.4	0.7	378	395,253	3,690,024
Children	0.5	24	14.4	35.1	58.0	4.6	2.1	0.2	0.0	168	705,608	7,257,795
Unknown	2.6	162	14.1	13.8	32.8	14.2	27.4	11.0	0.8	1,150	1,930	18,218
Gender												
Female	1.4	77	21.3	25.0	48.9	9.1	10.9	5.2	0.9	360	741,933	7,506,459
Male	0.9	67	20.2	34.5	47.6	6.5	7.8	3.1	0.4	330	539,480	5,472,781
Unknown	0.6	41	35.9	0.0	100.0	0.0	0.0	0.0	0.0	113	1	12
Race												
White	1.5	87	23.1	23.7	48.3	9.5	12.1	5.5	0.9	377	791,556	7,889,936
African American	0.7	39	15.1	37.7	49.8	5.7	5.0	1.6	0.2	255	390,432	4,116,072
Other/unknown	1.2	97	19.4	37.4	43.6	5.8	7.8	4.6	0.9	500	99,426	973,244
Use of Nursing Facilities^f												
Entire year	10.8	611	12.3	1.8	1.6	2.4	14.8	34.0	45.3	4,971	1,691	16,989
Part year	8.0	451	9.5	1.7	6.3	5.3	26.9	34.1	25.7	4,759	1,295	12,775
None	1.2	71	21.1	29.1	48.5	8.0	9.6	4.2	0.6	337	1,278,428	12,949,488
Maintenance Assistance Status												
Cash	1.4	93	20.5	27.4	47.1	7.9	10.5	5.9	1.1	452	519,953	5,649,894
Medically needy	1.1	60	21.6	31.6	45.7	8.9	9.9	3.5	0.4	276	108,759	1,080,725
Poverty related	0.5	25	12.6	34.6	57.3	5.4	2.4	0.2	0.0	199	262,160	2,459,598
Other/unknown	1.3	76	24.7	26.6	44.8	9.8	13.1	5.0	0.7	308	390,542	3,789,035

Source: Data for this table are from the MAX 2005 file for Tennessee, released by CMS in 12/2008. 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, TENNESSEE, 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	\$72	\$60	0.5	\$56	\$124	0.0	\$3	\$73	0.7	\$13	\$19
Age												
5 and younger	0.4	26	61	0.2	21	128	0.0	1	44	0.2	4	17
6-14	0.5	33	72	0.2	28	123	0.0	1	68	0.2	4	19
15-20	0.6	36	55	0.2	28	124	0.0	2	56	0.4	6	16
21-44	1.6	91	58	0.5	68	131	0.1	4	77	1.0	19	18
45-64	3.7	225	61	1.5	174	118	0.1	9	82	2.1	43	20
65-74	3.4	177	52	1.4	138	101	0.1	5	54	1.9	33	17
75-84	3.8	184	49	1.4	142	104	0.1	6	42	2.3	37	16
85 and older	4.3	183	43	1.5	134	91	0.2	7	41	2.6	42	16
Unknown	1.9	121	65	0.9	111	127	0.0	0	0	1.0	10	10
Basis of Eligibility^d												
Aged	3.5	171	49	1.3	132	99	0.1	6	48	2.0	34	17
Disabled	2.8	204	73	1.1	160	150	0.1	8	95	1.7	36	22
Adults	1.8	95	53	0.7	72	111	0.1	4	68	1.1	19	18
Children	0.5	24	53	0.2	19	105	0.0	1	54	0.3	4	16
Unknown	2.6	162	62	1.0	128	129	0.1	6	63	1.5	28	18
Gender												
Female	1.4	77	55	0.5	58	116	0.0	3	66	0.8	15	18
Male	0.9	67	71	0.4	53	138	0.0	3	88	0.5	11	21
Unknown	0.6	41	70	0.5	39	79	0.0	0	0	0.1	1	15
Race												
White	1.5	87	59	0.6	67	119	0.1	4	73	0.9	16	19
African American	0.7	39	56	0.2	30	126	0.0	1	65	0.4	7	17
Other/unknown	1.2	97	80	0.5	80	162	0.0	3	82	0.7	14	20
Use of Nursing Facilities^e												
Entire year	10.8	611	57	3.6	461	128	0.4	24	55	6.8	124	18
Part year	8.0	451	57	2.6	330	125	0.3	19	65	5.0	102	20
None	1.2	71	60	0.4	55	124	0.0	3	73	0.7	13	19
Maintenance Assistance Status												
Cash	1.4	93	64	0.5	72	137	0.0	4	82	0.9	17	20
Medically needy	1.1	60	52	0.4	45	112	0.0	3	69	0.7	13	18
Poverty related	0.5	25	50	0.2	20	105	0.0	1	49	0.3	5	15
Other/unknown	1.3	76	58	0.5	60	112	0.0	3	66	0.7	13	18

Source: Data for this table are from the MAX 2005 file for Tennessee, released by CMS in 12/2008. 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 Tennessee, 0.2 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, TENNESSEE, 2005

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
													Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
	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					
Anti-infective Agents	0.3	0.1	0.0	0.2	\$14	\$8	\$2	\$4	\$54	\$143	\$68	\$21	1,815,874	\$97,322,205	648,692	50.6	7,117,044
Biologicals	0.3	0.3	0.0	0.0	388	376	7	6	1192	1,179	2,353	1,404	20,049	23,906,018	5,996	0.5	61,590
Antineoplastic Agents	0.5	0.1	0.0	0.3	111	94	2	15	242	689	140	50	31,558	7,635,462	6,448	0.5	68,499
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	23	17	2	4	48	92	42	18	1,551,066	75,078,994	300,363	23.4	3,244,032
Cardiovascular Agents	1.1	0.5	0.0	0.6	49	40	0	9	44	83	25	14	2,168,978	95,065,600	186,216	14.5	1,945,513
Respiratory Agents	0.4	0.2	0.0	0.2	23	20	0	2	58	87	43	15	1,781,084	103,251,486	409,234	31.9	4,508,647
Gastrointestinal Agents	0.4	0.3	0.0	0.2	35	32	0	3	79	125	58	15	982,390	77,286,225	204,900	16.0	2,194,923
Genitourinary Agents	0.2	0.1	0.0	0.1	10	7	1	2	50	82	64	21	173,999	8,752,556	77,665	6.1	847,496
CNS Drugs	0.8	0.4	0.0	0.4	64	55	0	8	79	145	92	20	2,241,668	176,484,980	258,339	20.2	2,776,973
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.1	64	60	0	4	103	115	76	41	316,181	32,692,372	45,220	3.5	510,413
Miscellaneous Psychological/Neurological Agents	0.4	0.4	0.0	0.0	134	132	0	1	330	357	79	33	26,188	8,643,441	5,987	0.5	64,723
Analgesics and Anesthetics	0.5	0.0	0.0	0.4	17	8	2	7	37	177	245	18	2,213,330	81,756,127	447,351	34.9	4,854,253
Neuromuscular Agents	0.5	0.1	0.0	0.4	36	23	2	12	67	161	89	31	1,015,277	67,910,574	172,855	13.5	1,875,973
Nutritional Products	0.3	0.0	0.0	0.3	5	1	0	3	15	29	17	13	261,790	4,021,036	80,830	6.3	853,288
Hematological Agents	0.5	0.2	0.0	0.2	95	90	1	4	187	393	39	15	197,975	37,028,484	36,885	2.9	390,844
Topical Products	0.2	0.1	0.0	0.1	10	7	0	3	49	104	58	21	740,018	36,588,080	328,130	25.6	3,640,263
Miscellaneous Products	0.2	0.1	0.0	0.0	29	22	3	4	168	185	268	96	33,104	5,550,772	17,213	1.3	194,419
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	5	0	0	0	19	0	0	0	8,203	151,874	3,056	0.2	33,158
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.	15,578,732	939,126,286	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Tennessee, released by CMS in 12/2008. 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 Tennessee, 0.2 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, TENNESSEE, 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	\$91,403,251	78,370	6.1	871,514	0.5	\$224	\$105
ANTIASTHMATIC	71,286,038	320,333	25.0	3,552,331	0.3	73	20
ANTIDEPRESSANTS	65,405,620	237,136	18.5	2,556,203	0.4	63	26
ULCER DRUGS	62,815,658	212,299	16.6	2,292,204	0.3	82	27
ANTICONVULSANT	58,739,562	102,425	8.0	1,121,799	0.5	101	52
ANTIHYPERLIPIDEMIC	46,999,962	97,884	7.6	1,017,450	0.5	99	46
ANALGESICS - Narcotic	45,541,882	514,587	40.2	5,639,069	0.3	32	8
ANTIDIABETIC	38,108,544	101,150	7.9	1,062,753	0.5	67	36
ANTIVIRAL	35,591,439	39,554	3.1	432,971	0.2	353	82
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	32,692,855	54,782	4.3	622,061	0.5	103	53
Total	548,584,811	1,758,520		19,168,355	n.a.	n.a.	n.a.

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

Beneficiary Characteristics	All Top 10 Drug Groups			ANTI-PSYCHOTICS				ANTI-ASTHMATIC				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Months Among Users	Mean Rx per Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Months Among Users	Mean Rx per Month	Mean Rx \$ per Benefit Month
All	6,667,578	\$548,584,811	78,370	6.1	871,514	0.5	\$105	320,333	25.0	3,552,331	0.3	\$20
Female												
All Females	4,250,797	326,398,306	45,474	6.1	508,116	0.4	95	186,761	25.2	2,067,772	0.3	20
Female, Disabled												
All Ages	1,644,122	145,761,330	21,269	24.8	248,670	0.5	123	45,995	53.7	537,092	0.4	28
5 and younger	11,319	1,075,583	37	1.1	430	0.5	115	1,618	48.6	18,893	0.3	25
6-14	40,597	4,642,534	829	11.4	9,728	0.5	121	2,186	30.1	25,819	0.3	24
15-20	39,021	4,145,232	950	15.7	11,168	0.5	108	1,317	21.7	15,695	0.3	18
21-44	488,830	46,514,138	9,047	30.6	106,376	0.5	116	12,711	43.0	149,747	0.3	23
45-64	1,045,652	88,041,770	10,229	26.7	119,017	0.6	131	27,719	72.3	322,382	0.4	30
65-74	14,106	1,005,963	118	15.0	1,289	0.7	136	350	44.6	3,502	0.4	28
75-84	3,698	286,157	49	22.1	555	0.7	159	74	33.3	835	0.4	33
85 and older	899	49,953	10	16.7	107	0.8	82	20	33.3	219	0.5	31
Female, Other Eligibles												
All Ages	2,606,668	180,636,174	24,205	3.7	259,446	0.4	68	140,766	21.4	1,530,680	0.2	17
5 and younger	79,085	5,310,491	118	0.1	1,359	0.3	52	26,487	21.3	297,725	0.2	14
6-14	197,629	14,819,597	2,003	1.4	23,107	0.4	84	27,817	19.7	319,617	0.2	16
15-20	198,732	11,207,442	2,900	3.2	32,774	0.3	58	14,154	15.8	159,862	0.2	12
21-44	1,329,338	87,005,590	14,642	6.2	157,899	0.3	62	47,717	20.1	517,007	0.2	16
45-64	775,472	60,549,581	4,355	7.1	42,522	0.4	87	24,007	39.2	230,774	0.4	29
65-74	14,270	1,025,424	64	5.1	631	0.7	99	346	27.8	3,256	0.4	33
75-84	7,768	475,281	60	10.7	599	0.9	121	157	28.0	1,664	0.4	26
85 and older	4,374	242,768	63	16.1	555	0.6	70	81	20.7	775	0.5	27
Male												
All Males	2,416,779	222,186,318	32,896	6.1	363,398	0.5	119	133,571	24.8	1,484,547	0.3	20
Male, Disabled												
All Ages	1,083,965	111,320,760	18,139	20.1	210,324	0.6	140	30,030	33.3	346,731	0.4	29
5 and younger	18,425	1,790,418	146	3.3	1,715	0.5	92	2,610	59.6	30,555	0.3	28
6-14	99,515	11,745,228	2,620	20.3	30,847	0.6	131	4,270	33.1	50,581	0.3	26
15-20	71,235	9,096,663	2,194	20.0	25,895	0.6	148	2,018	18.4	24,006	0.3	26
21-44	318,056	36,248,736	7,267	22.9	84,265	0.5	143	5,980	18.8	69,115	0.3	21
45-64	566,830	51,733,277	5,821	19.8	66,671	0.6	141	14,836	50.6	169,190	0.5	33
65-74	7,876	591,243	72	12.8	723	0.6	110	260	46.2	2,649	0.4	35
75-84	1,643	93,833	12	12.8	131	0.9	124	50	53.2	579	0.5	30
85 and older	385	21,362	7	25.9	77	0.4	37	6	22.2	56	0.2	9

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, TENNESSEE, 2005

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS					ANTIASTHMATIC				
	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	1,332,814	110,865,558	14,757	3.3	153,074	0.4	90	103,541	23.0	1,137,816	0.2	18	
5 and younger	114,951	8,254,255	323	0.2	3,737	0.4	82	37,660	29.1	421,903	0.2	15	
6-14	331,318	28,471,140	4,522	3.1	52,131	0.5	95	36,820	25.6	421,637	0.2	18	
15-20	142,474	10,773,185	2,809	3.8	31,497	0.4	82	10,195	13.9	115,784	0.2	15	
21-44	344,889	29,087,401	5,010	7.7	46,627	0.4	87	8,818	13.5	85,802	0.3	19	
45-64	382,250	33,089,702	1,961	5.5	17,835	0.4	94	9,597	26.7	88,284	0.4	32	
65-74	8,471	628,175	39	4.9	387	0.8	138	227	28.7	2,075	0.5	39	
75-84	5,733	390,741	49	11.0	448	0.7	122	154	34.5	1,613	0.5	33	
85 and older	2,728	170,959	44	23.3	412	0.7	91	70	37.0	718	0.6	25	
Unknown	9	989	0	0.0	0	0.0	0	1	50.0	12	0.2	16	

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

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANTICONVULSANT				
	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	237,136	18.5	2,556,203	0.4	\$26	212,299	16.6	2,292,204	0.3	\$27	102,425	8.0	1,121,799	0.5	\$52
Female															
All Females	175,749	23.7	1,904,549	0.4	26	146,379	19.7	1,591,369	0.3	27	67,368	9.1	741,810	0.5	49
Female, Disabled															
All Ages	51,010	59.6	593,962	0.5	29	43,752	51.1	510,941	0.4	33	27,174	31.7	316,936	0.6	61
5 and younger	28	0.8	330	0.3	11	585	17.6	6,503	0.3	22	326	9.8	3,745	0.8	89
6-14	610	8.4	7,187	0.5	20	602	8.3	7,079	0.4	27	1,136	15.6	13,422	0.7	106
15-20	1,311	21.6	15,459	0.4	24	913	15.1	10,893	0.3	21	1,108	18.3	13,064	0.7	110
21-44	18,832	63.7	220,765	0.4	28	13,386	45.3	157,963	0.3	28	10,478	35.5	122,789	0.6	63
45-64	29,843	77.8	346,120	0.5	31	27,726	72.3	322,582	0.4	36	13,950	36.4	162,001	0.6	51
65-74	291	37.1	2,993	0.6	25	409	52.1	4,415	0.5	34	142	18.1	1,534	0.6	35
75-84	74	33.3	867	0.6	24	106	47.7	1,218	0.5	34	31	14.0	345	0.6	20
85 and older	21	35.0	241	0.8	37	25	41.7	288	0.5	31	3	5.0	36	0.8	50
Female, Other Eligibles															
All Ages	124,739	19.0	1,310,587	0.4	24	102,627	15.6	1,080,428	0.3	24	40,194	6.1	424,874	0.4	40
5 and younger	120	0.1	1,398	0.3	8	4,589	3.7	46,781	0.2	9	375	0.3	4,222	0.4	46
6-14	3,360	2.4	38,664	0.4	16	5,960	4.2	68,969	0.2	10	1,551	1.1	17,674	0.5	60
15-20	10,756	12.0	120,813	0.3	17	9,771	10.9	110,330	0.2	9	2,978	3.3	33,421	0.4	48
21-44	78,154	32.9	839,373	0.3	23	52,843	22.2	571,778	0.3	21	25,111	10.6	270,674	0.4	37
45-64	31,736	51.9	304,552	0.5	32	28,524	46.6	273,196	0.5	42	9,942	16.2	96,587	0.5	43
65-74	331	26.6	2,912	0.6	32	544	43.7	5,167	0.5	39	141	11.3	1,302	0.6	39
75-84	151	27.0	1,679	0.7	32	241	43.0	2,687	0.5	36	65	11.6	699	0.6	29
85 and older	131	33.4	1,196	0.7	35	155	39.5	1,520	0.6	43	31	7.9	295	0.7	41
Male															
All Males	61,387	11.4	651,654	0.4	25	65,920	12.2	700,835	0.4	29	35,057	6.5	379,989	0.6	59
Male, Disabled															
All Ages	26,330	29.2	302,915	0.5	26	25,142	27.9	289,550	0.4	33	18,749	20.8	216,692	0.6	68
5 and younger	49	1.1	586	0.4	14	721	16.5	8,146	0.4	26	445	10.2	5,162	0.7	80
6-14	1,535	11.9	18,117	0.5	22	890	6.9	10,552	0.4	32	2,022	15.7	23,857	0.7	94
15-20	1,832	16.7	21,744	0.5	26	1,088	9.9	12,889	0.3	25	1,704	15.5	20,178	0.7	104
21-44	9,821	30.9	112,941	0.4	26	7,863	24.7	91,330	0.4	30	7,106	22.4	82,069	0.6	73
45-64	12,934	44.1	147,875	0.5	27	14,294	48.7	163,523	0.4	35	7,379	25.2	84,564	0.6	46
65-74	128	22.7	1,288	0.6	29	223	39.6	2,394	0.5	35	75	13.3	670	0.7	51
75-84	19	20.2	226	0.7	30	46	48.9	531	0.5	25	12	12.8	128	0.9	30
85 and older	12	44.4	138	0.9	41	17	63.0	185	0.6	36	6	22.2	64	0.4	15

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, TENNESSEE, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANTICONVULSANT				
	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	35,057	7.8	348,739	0.4	24	40,778	9.1	411,285	0.3	27	16,308	3.6	163,297	0.5	47
5 and younger	164	0.1	1,938	0.3	8	5,476	4.2	56,295	0.2	10	539	0.4	6,122	0.4	42
6-14	4,405	3.1	50,545	0.4	17	5,295	3.7	61,397	0.2	12	2,274	1.6	26,039	0.5	59
15-20	4,924	6.7	55,346	0.3	20	4,587	6.3	51,989	0.2	11	1,832	2.5	20,587	0.4	56
21-44	14,867	22.8	142,124	0.4	25	12,622	19.3	123,581	0.3	31	7,119	10.9	68,106	0.4	42
45-64	10,399	28.9	95,961	0.5	30	12,264	34.1	112,725	0.5	45	4,421	12.3	41,222	0.5	44
65-74	144	18.2	1,279	0.5	22	259	32.7	2,432	0.5	39	64	8.1	624	0.6	27
75-84	91	20.4	931	0.7	33	186	41.7	1,986	0.5	36	44	9.9	452	0.5	24
85 and older	63	33.3	615	0.8	35	89	47.1	880	0.6	40	15	7.9	145	0.7	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 Tennessee, released by CMS in 12/2008. 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).

Benef(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, TENNESSEE, 2005

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANALGESICS - Narcotic					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	97,884	7.6	1,017,450	0.5	\$46	514,587	40.2	5,639,069	0.3	\$8	101,150	7.9	1,062,753	0.5	\$36
Female															
All Females	60,095	8.1	633,040	0.5	45	360,027	48.5	3,969,184	0.2	7	66,197	8.9	706,791	0.5	34
Female, Disabled															
All Ages	24,066	28.1	280,367	0.5	46	72,041	84.1	840,212	0.4	16	26,808	31.3	311,357	0.6	37
5 and younger	17	0.5	200	0.2	5	421	12.6	4,977	0.1	1	6	0.2	70	0.5	24
6-14	11	0.2	132	0.2	12	1,117	15.4	13,265	0.1	1	122	1.7	1,424	0.6	52
15-20	43	0.7	512	0.4	29	2,529	41.7	30,059	0.2	2	261	4.3	3,067	0.5	37
21-44	4,389	14.8	51,796	0.4	38	28,556	96.6	335,259	0.3	14	5,497	18.6	64,706	0.5	35
45-64	19,215	50.1	223,400	0.5	48	38,789	101.1	449,827	0.4	20	20,345	53.0	235,663	0.6	38
65-74	307	39.1	3,355	0.6	62	491	62.5	5,281	0.4	12	463	59.0	5,112	0.6	34
75-84	74	33.3	853	0.6	57	95	42.8	1,063	0.4	14	100	45.0	1,156	0.6	33
85 and older	10	16.7	119	0.6	56	43	71.7	481	0.3	6	14	23.3	159	0.7	32
Female, Other Eligibles															
All Ages	36,028	5.5	352,665	0.4	44	287,985	43.9	3,128,964	0.2	5	39,389	6.0	395,434	0.5	32
5 and younger	190	0.2	2,074	0.1	4	7,834	6.3	90,798	0.1	1	93	0.1	1,080	0.8	56
6-14	52	0.0	605	0.2	17	18,121	12.8	210,066	0.1	1	876	0.6	10,061	0.6	48
15-20	259	0.3	2,956	0.3	24	43,041	48.0	480,554	0.1	1	1,708	1.9	19,104	0.4	32
21-44	10,861	4.6	115,718	0.4	35	180,353	75.9	1,967,296	0.2	5	15,803	6.6	166,829	0.4	29
45-64	23,883	39.0	223,757	0.5	50	37,761	61.7	371,451	0.3	11	20,092	32.8	190,217	0.5	34
65-74	583	46.9	5,356	0.6	57	481	38.7	4,693	0.3	8	520	41.8	4,986	0.6	32
75-84	155	27.7	1,750	0.5	55	246	43.9	2,724	0.4	8	218	38.9	2,384	0.6	27
85 and older	45	11.5	449	0.7	58	148	37.8	1,382	0.5	7	79	20.2	773	0.8	34
Male															
All Males	37,789	7.0	384,410	0.5	48	154,560	28.6	1,669,885	0.3	11	34,953	6.5	355,962	0.6	39
Male, Disabled															
All Ages	15,165	16.8	174,105	0.5	48	48,202	53.5	552,939	0.4	19	14,051	15.6	159,591	0.6	38
5 and younger	21	0.5	240	0.1	4	727	16.6	8,600	0.1	1	13	0.3	130	0.7	58
6-14	12	0.1	144	0.3	23	1,945	15.1	23,132	0.1	3	84	0.7	1,000	0.7	60
15-20	103	0.9	1,220	0.4	32	3,071	28.0	36,593	0.2	3	194	1.8	2,265	0.6	43
21-44	3,351	10.5	38,929	0.4	41	18,815	59.2	216,567	0.3	15	3,029	9.5	34,654	0.5	38
45-64	11,454	39.0	131,264	0.5	50	23,316	79.5	264,681	0.4	26	10,449	35.6	118,517	0.6	37
65-74	195	34.6	1,977	0.6	57	278	49.4	2,815	0.4	22	244	43.3	2,581	0.6	34
75-84	24	25.5	280	0.6	55	42	44.7	482	0.4	4	38	40.4	444	0.8	41
85 and older	5	18.5	51	0.8	84	8	29.6	69	0.7	8	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, TENNESSEE, 2005

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANALGESICS - Narcotic					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	22,624	5.0	210,305	0.5	48	106,358	23.7	1,116,946	0.2	7	20,902	4.7	196,371	0.6	40
5 and younger	205	0.2	2,269	0.1	3	10,171	7.9	117,474	0.1	1	85	0.1	968	0.8	55
6-14	92	0.1	1,058	0.3	25	18,474	12.8	213,959	0.1	1	635	0.4	7,177	0.7	59
15-20	252	0.3	2,863	0.3	29	21,451	29.3	240,561	0.1	1	761	1.0	8,704	0.6	62
21-44	5,911	9.0	57,253	0.4	38	37,293	57.1	366,300	0.3	11	5,681	8.7	53,859	0.5	39
45-64	15,607	43.4	141,556	0.5	53	18,436	51.2	173,263	0.4	17	13,191	36.7	120,317	0.6	37
65-74	391	49.4	3,486	0.6	60	276	34.9	2,681	0.3	5	369	46.6	3,507	0.6	35
75-84	132	29.6	1,462	0.6	64	167	37.4	1,773	0.5	7	137	30.7	1,434	0.6	31
85 and older	34	18.0	358	0.5	56	90	47.6	935	0.5	16	43	22.8	405	0.8	42
Unknown	1	50.0	8	0.8	100	1	50.0	8	0.1	1	0	0.0	0	0.0	0

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

Beneficiary Characteristics	ANTIVIRAL					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					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	39,554	3.1	432,971	0.2	\$82	54,782	4.3	622,061	0.5	\$53	1,281,414	12,979,252
Female												
All Females	26,468	3.6	291,934	0.2	58	19,136	2.6	215,845	0.5	53	741,932	7,506,451
Female, Disabled												
All Ages	4,378	5.1	51,109	0.3	117	3,701	4.3	43,513	0.5	63	85,631	971,892
5 and younger	80	2.4	946	0.3	32	79	2.4	858	0.3	54	3,329	36,392
6-14	180	2.5	2,139	0.3	61	1,334	18.4	15,740	0.6	55	7,265	84,659
15-20	204	3.4	2,425	0.2	45	553	9.1	6,537	0.5	51	6,060	70,301
21-44	1,888	6.4	22,076	0.3	129	901	3.0	10,631	0.4	68	29,556	338,826
45-64	2,007	5.2	23,332	0.3	121	832	2.2	9,733	0.5	78	38,354	430,427
65-74	16	2.0	155	0.3	61	2	0.3	14	1.5	237	785	8,259
75-84	2	0.9	24	0.1	7	0	0.0	0	0.0	0	222	2,373
85 and older	1	1.7	12	0.1	2	0	0.0	0	0.0	0	60	655
Female, Other Eligibles												
All Ages	22,090	3.4	240,825	0.2	46	15,435	2.4	172,332	0.5	51	656,301	6,534,559
5 and younger	1,489	1.2	17,187	0.1	10	454	0.4	5,233	0.3	28	124,090	1,226,626
6-14	2,748	1.9	31,935	0.1	8	8,174	5.8	93,154	0.5	48	141,423	1,515,496
15-20	2,759	3.1	31,188	0.2	17	1,955	2.2	22,189	0.4	47	89,717	911,644
21-44	12,173	5.1	131,991	0.2	56	3,735	1.6	40,720	0.4	57	237,677	2,302,155
45-64	2,868	4.7	27,985	0.3	92	1,106	1.8	10,926	0.5	77	61,198	558,299
65-74	34	2.7	329	0.2	11	2	0.2	18	0.8	194	1,244	11,186
75-84	11	2.0	131	0.1	4	4	0.7	48	0.4	114	560	5,784
85 and older	8	2.0	79	0.1	6	5	1.3	44	0.3	36	392	3,369
Male												
All Males	13,086	2.4	141,037	0.3	133	35,646	6.6	406,216	0.5	52	539,480	5,472,781
Male, Disabled												
All Ages	3,725	4.1	42,958	0.4	232	7,790	8.6	91,871	0.6	58	90,064	1,011,904
5 and younger	105	2.4	1,250	0.2	24	280	6.4	3,246	0.4	34	4,382	48,088
6-14	293	2.3	3,492	0.2	47	4,662	36.1	55,086	0.6	57	12,911	149,985
15-20	176	1.6	2,107	0.2	58	1,806	16.5	21,458	0.6	61	10,974	127,902
21-44	1,639	5.2	18,862	0.4	241	698	2.2	8,116	0.5	57	31,779	359,597
45-64	1,500	5.1	17,107	0.5	299	342	1.2	3,945	0.5	76	29,334	319,314
65-74	11	2.0	128	0.1	8	2	0.4	20	0.5	81	563	5,701
75-84	1	1.1	12	0.3	44	0	0.0	0	0.0	0	94	1,048
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	27	269

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, TENNESSEE, 2005

NONDRUG BENEFICIARIES, TENNESSEE, 2003												
Beneficiary Characteristics	ANTIVIRAL					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					Number of Beneficiaries	Number of Benefit Months
	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	9,361	2.1	98,079	0.2	89	27,856	6.2	314,345	0.5	50	449,416	4,460,877
5 and younger	1,509	1.2	17,409	0.1	6	1,357	1.0	15,445	0.3	28	129,456	1,279,064
6-14	2,598	1.8	30,097	0.1	10	20,677	14.4	235,686	0.5	51	144,077	1,544,437
15-20	1,121	1.5	12,657	0.1	19	4,176	5.7	47,367	0.5	51	73,127	753,715
21-44	2,469	3.8	22,909	0.4	191	1,161	1.8	11,146	0.4	58	65,349	559,437
45-64	1,625	4.5	14,602	0.4	250	479	1.3	4,644	0.5	80	35,981	310,876
65-74	16	2.0	148	0.2	7	5	0.6	48	0.6	141	791	7,046
75-84	15	3.4	167	0.3	128	0	0.0	0	0.0	0	446	4,454
85 and older	8	4.2	90	0.1	6	1	0.5	9	1.0	190	189	1,848
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	20

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

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy; \$ = 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, TENNESSEE, 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	\$611	10.8	1,691	16,989
Age				
0-64	667	11.4	1,282	13,091
65-74	477	8.7	109	1,063
75-84	452	9.2	136	1,381
85 and older	350	8.3	164	1,454
Unknown	0	0.0	0	0
Gender				
Female	654	11.3	879	9,015
Male	562	10.2	812	7,974
Unknown	0	0.0	0	0
Race				
White	643	11.5	1,066	10,503
African American	530	9.1	506	5,173
Other/unknown	670	11.6	119	1,313
Basis of Eligibility^c				
Aged	411	8.9	294	2,715
Disabled	649	11.2	1,395	14,272
Adults	746	9.0	2	2
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2005 file for Tennessee, released by CMS in 12/2008. 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 1,295 beneficiaries who were in nursing facilities for part of their enrollment and their 12,775 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, TENNESSEE, 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	0.6	0.2	0.1	0.4	\$54	\$35	\$8	\$11	\$90	\$191	\$141	\$30	7,823	\$704,828	1,237	73.2	12,995
Biologicals	0.1	0.1	0.0	0.0	3	1	0	1	23	19	0	33	199	4,607	155	9.2	1,722
Antineoplastic Agents	0.5	0.0	0.0	0.4	44	6	1	37	96	416	121	85	622	59,758	134	7.9	1,347
Endocrine/Metabolic Drugs	1.4	0.6	0.2	0.6	64	49	6	10	46	82	34	15	12,953	595,531	874	51.7	9,237
Cardiovascular Agents	2.5	0.6	0.0	1.8	76	50	1	25	31	77	25	14	30,874	942,304	1,213	71.7	12,432
Respiratory Agents	1.0	0.3	0.0	0.6	38	30	0	8	40	94	48	13	8,912	354,985	892	52.7	9,260
Gastrointestinal Agents	1.4	0.5	0.0	0.8	70	57	1	12	51	112	27	14	16,448	839,928	1,160	68.6	12,002
Genitourinary Agents	0.6	0.3	0.0	0.3	34	26	1	6	53	82	35	22	2,804	148,731	407	24.1	4,418
CNS Drugs	2.7	1.2	0.0	1.5	222	195	2	25	81	158	51	17	40,984	3,308,140	1,424	84.2	14,914
Stimulants/Anti-obesity/Anorexia	0.6	0.3	0.0	0.3	59	56	0	3	100	167	0	12	108	10,762	18	1.1	183
Miscellaneous Psychological/Neurological Agents	1.1	1.1	0.0	0.0	166	166	0	0	152	152	0	0	3,228	490,859	276	16.3	2,964
Analgesics and Anesthetics	1.6	0.3	0.1	1.3	58	29	6	23	36	114	106	17	19,294	689,467	1,150	68.0	11,936
Neuromuscular Agents	1.9	0.5	0.1	1.3	106	62	5	40	57	135	58	30	19,253	1,104,692	961	56.8	10,381
Nutritional Products	0.8	0.0	0.1	0.7	15	0	3	12	18	16	29	17	5,389	99,557	629	37.2	6,580
Hematological Agents	1.2	0.4	0.1	0.6	104	96	1	7	90	232	14	10	7,682	694,875	677	40.0	6,658
Topical Products	0.6	0.2	0.1	0.3	26	16	3	7	46	83	54	23	6,037	279,576	1,010	59.7	10,731
Miscellaneous Products	0.3	0.1	0.0	0.3	12	4	0	8	35	57	0	30	645	22,779	181	10.7	1,895
Unknown Therapeutic Category	0.5	0.0	0.0	0.0	26	0	0	0	56	0	0	0	393	22,117	78	4.6	838
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.	183,648	10,373,496	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Tennessee, released by CMS in 12/2008. 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 1,295 beneficiaries who were in nursing facilities for part of their enrollment and their 12,775 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 Tennessee, 0.2 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, TENNESSEE, 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	\$2,316,947	1,133	67.0	12,256	1.0	\$193	\$189
ANTICONSULSANT	956,763	1,126	66.6	12,389	1.2	65	77
ANTIDEPRESSANTS	803,538	1,597	94.4	17,204	0.9	52	47
ULCER DRUGS	636,526	1,416	83.7	15,122	0.7	59	42
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	490,859	337	19.9	3,609	0.9	152	136
ANTIDIABETIC	484,160	1,035	61.2	10,847	0.9	48	45
ANALGESICS - Narcotic	398,664	1,336	79.0	13,770	1.0	28	29
ANTHYPERLIPIDEMIC	359,877	450	26.6	4,853	0.9	87	74
HEMATOPOIETIC AGENTS	340,507	449	26.6	4,617	0.7	109	74
ANTIASTHMATIC	273,130	1,015	60.0	10,408	0.5	50	26
Total	7,060,971	9,894		105,075	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2005 file for Tennessee, released by CMS in 12/2008. 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 1,295 beneficiaries who were in nursing facilities for part of their enrollment and their 12,775 benefit months were excluded from the analysis.

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

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

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

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

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, TENNESSEE, 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	93,185	\$7,060,971	1,133	67.0	12,256	1.0	\$189	1,126	66.6	12,389	1.2	\$77
Female												
All Females	51,834	4,074,060	622	70.8	6,840	1.0	200	597	67.9	6,585	1.2	78
Female, Disabled												
All Ages	45,515	3,684,444	560	79.3	6,229	1.0	207	544	77.1	6,047	1.2	80
64 or younger	42,311	3,438,102	515	81.0	5,711	1.1	208	517	81.3	5,758	1.2	81
65-74	2,052	156,158	24	60.0	280	1.2	228	17	42.5	180	1.0	56
75-84	842	68,557	16	69.6	184	0.9	173	9	39.1	97	0.9	32
85 and older	310	21,627	5	71.4	54	0.8	91	1	14.3	12	1.0	119
Female, Other Eligibles												
All Ages	6,319	389,616	62	35.8	611	0.9	134	53	30.6	538	0.9	57
64 or younger	5	89	0	0.0	0	0.0	0	1	50.0	1	1.0	29
65-74	859	60,440	12	63.2	130	0.9	143	16	84.2	181	0.8	50
75-84	2,830	172,108	28	45.9	313	1.1	159	18	29.5	192	0.9	59
85 and older	2,625	156,979	22	24.2	168	0.7	81	18	19.8	164	0.9	64
Male												
All Males	41,351	2,986,911	511	62.9	5,416	0.9	175	529	65.1	5,804	1.2	77
Male, Disabled												
All Ages	36,637	2,667,989	445	64.6	4,818	0.9	179	501	72.7	5,536	1.2	78
64 or younger	34,876	2,537,490	415	64.5	4,514	0.9	181	476	74.0	5,314	1.2	78
65-74	1,168	96,647	24	75.0	234	0.8	164	20	62.5	170	1.1	88
75-84	346	24,106	3	37.5	36	1.0	138	2	25.0	24	1.1	56
85 and older	247	9,746	3	50.0	34	0.4	10	3	50.0	28	0.6	7
Male, Other Eligibles												
All Ages	4,714	318,922	66	53.7	598	0.9	144	28	22.8	268	0.9	44
64 or younger	1	72	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	681	55,561	12	66.7	111	1.2	209	7	38.9	76	1.1	42
75-84	2,160	147,906	29	65.9	266	0.8	148	9	20.5	79	0.8	47
85 and older	1,872	115,383	25	41.7	221	0.8	107	12	20.0	113	0.8	42
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 Tennessee, released by CMS in 12/2008. 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 1,295 beneficiaries who were in nursing facilities for part of their enrollment and their 12,775 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, TENNESSEE, 2005

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	1,597	94.4	17,204	0.9	\$47	1,416	83.7	15,122	0.7	\$42	337	19.9	3,609	0.9	\$136
Female															
All Females	891	101.4	9,709	0.9	48	749	85.2	8,186	0.7	43	199	22.6	2,157	0.9	148
Female, Disabled															
All Ages	765	108.4	8,441	0.9	48	626	88.7	6,907	0.7	42	139	19.7	1,569	0.9	161
64 or younger	707	111.2	7,799	0.9	49	581	91.4	6,427	0.7	42	111	17.5	1,263	0.9	169
65-74	30	75.0	314	0.8	35	30	75.0	308	0.7	40	16	40.0	181	1.0	129
75-84	19	82.6	220	0.9	35	11	47.8	124	0.7	56	7	30.4	65	1.1	157
85 and older	9	128.6	108	0.9	47	4	57.1	48	0.6	11	5	71.4	60	0.8	101
Female, Other Eligibles															
All Ages	126	72.8	1,268	0.9	47	123	71.1	1,279	0.7	47	60	34.7	588	0.8	112
64 or younger	0	0.0	0	0.0	0	1	50.0	1	1.0	14	0	0.0	0	0.0	0
65-74	13	68.4	129	1.0	49	12	63.2	143	0.6	35	4	21.1	44	0.9	120
75-84	48	78.7	551	0.9	52	52	85.2	576	0.7	41	21	34.4	215	0.8	101
85 and older	65	71.4	588	0.9	43	58	63.7	559	0.8	55	35	38.5	329	0.8	118
Male															
All Males	706	86.9	7,495	0.9	46	667	82.1	6,936	0.7	41	138	17.0	1,452	0.9	119
Male, Disabled															
All Ages	618	89.7	6,621	0.9	46	568	82.4	5,945	0.7	41	93	13.5	1,029	0.9	118
64 or younger	584	90.8	6,271	0.9	46	535	83.2	5,583	0.7	41	83	12.9	912	0.9	121
65-74	20	62.5	183	0.8	37	22	68.8	238	0.7	35	7	21.9	82	0.8	89
75-84	8	100.0	96	0.9	51	2	25.0	24	0.8	30	2	25.0	24	0.9	129
85 and older	6	100.0	71	1.2	54	9	150.0	100	0.6	36	1	16.7	11	0.9	73
Male, Other Eligibles															
All Ages	88	71.5	874	0.9	45	99	80.5	991	0.8	46	45	36.6	423	1.0	120
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	12	66.7	120	0.7	46	13	72.2	147	0.7	33	5	27.8	60	1.0	120
75-84	40	90.9	401	0.9	45	47	106.8	490	0.8	48	19	43.2	191	1.0	123
85 and older	36	60.0	353	1.0	45	39	65.0	354	0.8	48	21	35.0	172	0.9	116
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 Tennessee, released by CMS in 12/2008. 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 1,295 beneficiaries who were in nursing facilities for part of their enrollment and their 12,775 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, TENNESSEE, 2005

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - Narcotic					ANTIHYPERLIPIDEMIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	1,035	61.2	10,847	0.9	\$45	1,336	79.0	13,770	1.0	\$29	450	26.6	4,853	0.9	\$74
Female															
All Females	579	65.9	6,206	1.0	46	719	81.8	7,571	1.0	28	224	25.5	2,493	0.9	75
Female, Disabled															
All Ages	495	70.1	5,365	1.0	48	605	85.7	6,458	1.0	30	203	28.8	2,259	0.9	76
64 or younger	435	68.4	4,678	1.0	49	570	89.6	6,096	1.1	31	190	29.9	2,106	0.9	77
65-74	41	102.5	465	0.9	45	27	67.5	285	0.9	9	7	17.5	81	1.0	91
75-84	13	56.5	156	0.7	32	7	30.4	65	0.4	3	5	21.7	60	0.5	36
85 and older	6	85.7	66	1.0	47	1	14.3	12	0.1	0	1	14.3	12	0.3	24
Female, Other Eligibles															
All Ages	84	48.6	841	1.0	32	114	65.9	1,113	0.9	17	21	12.1	234	0.9	64
64 or younger	1	50.0	1	2.0	40	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	17	89.5	175	0.8	20	16	84.2	161	0.6	9	7	36.8	75	0.7	54
75-84	35	57.4	355	1.0	27	46	75.4	475	1.1	26	6	9.8	72	1.0	71
85 and older	31	34.1	310	1.0	44	52	57.1	477	0.9	11	8	8.8	87	1.1	67
Male															
All Males	456	56.2	4,641	0.9	43	617	76.0	6,199	1.0	31	226	27.8	2,360	0.8	73
Male, Disabled															
All Ages	401	58.2	4,117	0.9	43	537	77.9	5,442	1.1	31	203	29.5	2,115	0.8	73
64 or younger	373	58.0	3,813	0.9	44	514	79.9	5,239	1.1	32	193	30.0	2,032	0.8	73
65-74	19	59.4	196	0.8	27	14	43.8	111	0.7	19	7	21.9	56	0.9	83
75-84	9	112.5	108	1.0	40	5	62.5	60	0.2	1	1	12.5	12	1.1	82
85 and older	0	0.0	0	0.0	0	4	66.7	32	0.8	5	2	33.3	15	0.7	50
Male, Other Eligibles															
All Ages	55	44.7	524	0.9	47	80	65.0	757	0.9	24	23	18.7	245	0.8	77
64 or younger	0	0.0	0	0.0	0	1	100.0	1	1.0	72	0	0.0	0	0.0	0
65-74	11	61.1	124	0.7	30	7	38.9	38	0.7	20	7	38.9	84	0.7	60
75-84	25	56.8	261	1.0	50	32	72.7	309	1.1	16	12	27.3	124	0.9	84
85 and older	19	31.7	139	1.0	54	40	66.7	409	0.8	31	4	6.7	37	0.8	94
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 Tennessee, released by CMS in 12/2008. 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 1,295 beneficiaries who were in nursing facilities for part of their enrollment and their 12,775 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, TENNESSEE, 2005

Beneficiary Characteristics	HEMATOPOIETIC AGENTS						ANTIASTHMATIC					
	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	Benefit Months Among All-Year Nursing Facility Residents
All	449	26.6	4,617	0.7	\$74	1,015	60.0	10,408	0.5	\$26	1,691	16,989
Female												
All Females	241	27.4	2,573	0.7	91	549	62.5	5,716	0.5	26	879	9,015
Female, Disabled												
All Ages	201	28.5	2,187	0.7	98	488	69.1	5,158	0.5	27	706	7,424
64 or younger	188	29.6	2,032	0.7	105	455	71.5	4,804	0.5	27	636	6,698
65-74	8	20.0	95	0.5	3	22	55.0	228	0.3	19	40	410
75-84	4	17.4	48	0.8	10	6	26.1	72	0.4	14	23	238
85 and older	1	14.3	12	0.3	1	5	71.4	54	0.3	3	7	78
Female, Other Eligibles												
All Ages	40	23.1	386	0.7	47	61	35.3	558	0.6	23	173	1,591
64 or younger	0	0.0	0	0.0	0	1	50.0	1	1.0	6	2	2
65-74	6	31.6	51	0.6	104	5	26.3	51	0.5	36	19	182
75-84	16	26.2	188	0.6	26	24	39.3	237	0.6	23	61	617
85 and older	18	19.8	147	0.8	53	31	34.1	269	0.6	21	91	790
Male												
All Males	208	25.6	2,044	0.7	53	466	57.4	4,692	0.5	26	812	7,974
Male, Disabled												
All Ages	185	26.9	1,822	0.7	57	377	54.7	3,801	0.5	27	689	6,848
64 or younger	173	26.9	1,709	0.7	57	360	56.0	3,608	0.5	27	643	6,390
65-74	8	25.0	66	0.6	29	13	40.6	145	0.7	49	32	299
75-84	1	12.5	12	0.3	260	3	37.5	36	0.5	15	8	96
85 and older	3	50.0	35	0.6	3	1	16.7	12	0.3	4	6	63
Male, Other Eligibles												
All Ages	23	18.7	222	0.6	21	89	72.4	891	0.5	22	123	1,126
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
65-74	3	16.7	25	0.7	4	7	38.9	68	0.4	30	18	172
75-84	12	27.3	121	0.6	35	39	88.6	409	0.4	18	44	430
85 and older	8	13.3	76	0.6	3	43	71.7	414	0.7	25	60	523
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 Tennessee, released by CMS in 12/2008. 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 1,295 beneficiaries who were in nursing facilities for part of their enrollment and their 12,775 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.medispans.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}
TENNESSEE, 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	393,860	30.7	1.4	1,813,825	\$18	\$23,441,796	\$13	2.5	1,281,414
Age									
5 and younger	64,663	24.8	0.5	131,756	5	1,239,302	9	1.8	261,258
6-14	65,289	21.4	0.5	147,861	7	2,126,215	14	2.0	305,676
15-20	43,323	24.1	0.6	112,500	9	1,603,420	14	2.4	179,878
21-44	129,395	35.5	1.8	659,539	27	9,766,178	15	3.0	364,361
45-64	88,503	53.7	4.5	737,734	51	8,470,534	11	2.3	164,867
65-74	1,624	48.0	3.9	13,261	39	131,688	10	2.3	3,383
75-84	711	53.8	5.5	7,295	50	66,486	9	2.6	1,322
85 and older	352	52.7	5.8	3,879	57	37,973	10	3.4	668
Unknown	0	0.0	0.0	0	0	0	0	0.0	1
Basis of Eligibility^c									
Aged	1,447	49.4	4.6	13,432	42	121,681	9	2.4	2,928
Disabled	81,957	46.6	4.2	729,427	58	10,161,905	14	2.5	175,695
Adults	148,032	37.5	1.8	724,165	24	9,467,796	13	2.7	395,253
Children	161,605	22.9	0.5	342,269	5	3,635,526	11	2.1	705,608
Unknown	819	42.4	2.3	4,532	28	54,888	12	1.9	1,930
Gender									
Female	257,346	34.7	1.7	1,253,386	22	16,108,415	13	2.8	741,933
Male	136,514	25.3	1.0	560,439	14	7,333,381	13	2.0	539,480
Unknown	0	0.0	0.0	0	0	0	0	0.0	1
Race									
White	270,679	34.2	1.7	1,347,480	23	18,145,377	13	2.6	791,556
African American	94,241	24.1	0.8	317,057	8	3,107,761	10	2.0	390,432
Other/unknown	28,940	29.1	1.5	149,288	22	2,188,658	15	2.3	99,426
Use of Nursing Facilities^d									
Entire year	1,362	80.5	15.4	25,999	161	272,258	10	2.6	1,691
Part year	1,091	84.2	10.8	13,981	119	153,460	11	2.7	1,295
None	391,407	30.6	1.4	1,773,845	18	23,016,078	13	2.5	1,278,428
Maintenance Assistance Status									
Cash	181,666	34.9	2.0	1,030,580	26	13,674,565	13	2.6	519,953
Medically needy	30,364	27.9	1.2	129,332	16	1,773,983	14	2.7	108,759
Poverty related	58,690	22.4	0.5	126,369	5	1,262,878	10	2.0	262,160
Other/unknown	123,140	31.5	1.4	527,544	17	6,730,370	13	2.3	390,542

Source: Data for this table are from the MAX 2005 file for Tennessee, released by CMS in 12/2008. 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}
TENNESSEE, 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	\$13	\$0	\$1	12,979,252
Age						
5 and younger	0.1	0	9	0	0	2,590,182
6-14	0.0	1	14	0	0	3,294,577
15-20	0.1	1	14	0	0	1,863,562
21-44	0.2	3	15	0	1	3,560,015
45-64	0.5	5	11	0	2	1,618,916
65-74	0.4	4	10	0	1	32,192
75-84	0.5	5	9	0	1	13,659
85 and older	0.6	6	10	0	1	6,141
Unknown	0.0	0	0	0	0	8
Basis of Eligibility^c						
Aged	0.5	4	9	0	1	29,419
Disabled	0.4	5	14	0	2	1,983,796
Adults	0.2	3	13	0	1	3,690,024
Children	0.0	1	11	0	0	7,257,795
Unknown	0.2	3	12	0	1	18,218
Gender						
Female	0.2	2	13	0	1	7,506,459
Male	0.1	1	13	0	1	5,472,781
Unknown	0.0	0	0	0	0	12
Race						
White	0.2	2	13	0	1	7,889,936
African American	0.1	1	10	0	0	4,116,072
Other/unknown	0.2	2	15	0	1	973,244
Use of Nursing Facilities^d						
Entire year	1.5	16	10	0	6	16,989
Part year	1.1	12	11	0	5	12,775
None	0.1	2	13	0	1	12,949,488
Maintenance Assistance Status						
Cash	0.2	2	13	0	1	5,649,894
Medically needy	0.1	2	14	0	1	1,080,725
Poverty related	0.1	1	10	0	0	2,459,598
Other/unknown	0.1	2	13	0	1	3,789,035

Source: Data for this table are from the MAX 2005 file for Tennessee, released by CMS in 12/2008. 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}
TENNESSEE, 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	515,617	\$45	\$23,441,796	100.0	1,813,825	\$13	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	613	39	24,146	0.1	1,116	22	0.1
Cough and cold medications	66,174	28	1,861,111	7.9	96,033	19	5.3
Vitamins and minerals	30,862	71	2,178,354	9.3	134,134	16	7.4
Non-prescription drugs	293,402	24	7,185,195	30.7	884,687	8	48.8
Barbiturates	2,542	43	109,386	0.5	19,364	6	1.1
Benzodiazepines	100,915	99	9,947,307	42.4	622,340	16	34.3
Other Part D Excl Rx Drugs	21,109	101	2,136,297	9.1	56,151	38	3.1

Source: Data for this table are from the MAX 2005 file for Tennessee, released by CMS in 12/2008. 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, TENNESSEE, 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	1,281,414	2,928	175,695	395,253	705,608	1,930	12,979,252	29,419	1,983,796	3,690,024	7,257,795	18,218
Age												
5 and younger	261,258	0	7,711	2	253,545	0	2,590,182	0	84,480	5	2,505,697	0
6-14	305,676	1	20,176	13	285,486	0	3,294,577	7	234,644	49	3,059,877	0
15-20	179,878	6	17,034	670	162,121	47	1,863,562	64	198,203	1,912	1,663,019	364
21-44	364,361	11	61,335	297,711	4,456	848	3,560,015	118	698,423	2,824,975	29,202	7,297
45-64	164,867	151	67,688	95,993	0	1,035	1,618,916	1,626	749,741	856,992	0	10,557
65-74	3,383	1,189	1,348	846	0	0	32,192	12,191	13,960	6,041	0	0
75-84	1,322	992	316	14	0	0	13,659	10,193	3,421	45	0	0
85 and older	668	577	87	4	0	0	6,141	5,212	924	5	0	0
Unknown	1	1	0	0	0	0	8	8	0	0	0	0
Gender												
Female	741,933	1,798	85,631	295,358	357,222	1,924	7,506,459	18,023	971,892	2,828,345	3,670,025	18,174
Male	539,480	1,130	90,064	99,895	348,385	6	5,472,781	11,396	1,011,904	861,679	3,587,758	44
Unknown	1	0	0	0	1	0	12	0	0	0	12	0
Race												
White	791,556	1,353	95,339	277,887	416,051	926	7,889,936	12,715	1,067,196	2,561,931	4,238,680	9,414
African American	390,432	605	47,641	103,691	238,326	169	4,116,072	5,979	545,164	1,034,019	2,529,267	1,643
Other/unknown	99,426	970	32,715	13,675	51,231	835	973,244	10,725	371,436	94,074	489,848	7,161
Use of Nursing Facilities^c												
Entire year	1,691	294	1,395	2	0	0	16,989	2,715	14,272	2	0	0
Part year	1,295	147	1,111	33	1	3	12,775	1,297	11,132	311	12	23
None	1,278,428	2,487	173,189	395,218	705,607	1,927	12,949,488	25,407	1,958,392	3,689,711	7,257,783	18,195
Maintenance Assistance Status												
Cash	519,953	767	162,654	111,204	245,328	0	5,649,894	8,507	1,869,529	1,141,198	2,630,660	0
Medically needy	108,759	1,204	6,825	46,280	54,450	0	1,080,725	13,008	62,939	471,841	532,937	0
Poverty related	262,160	115	42	23,798	236,275	1,930	2,459,598	956	414	172,752	2,267,258	18,218
Other/unknown	390,542	842	6,174	213,971	169,555	0	3,789,035	6,948	50,914	1,904,233	1,826,940	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	1,281,414	2,928	175,695	395,253	705,608	1,930	12,979,252	29,419	1,983,796	3,690,024	7,257,795	18,218
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2005 file for Tennessee, released by CMS in 12/2008. 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, TENNESSEE, 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	1,281,414	12,979,252	1,281,414	12,979,252	0	0
Fee-for-service (FFS) all year	1,281,414	12,979,252	1,281,414	12,979,252	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

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

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

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

MC = managed care; Rx = pharmacy benefit.

Nondual Beneficiaries