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**STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2006
COLORADO**

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, COLORADO, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	458,139	3,800	41,041	91,504	321,533	261	3,410,228	31,845	350,705	617,238	2,408,194	2,246
Age												
5 and younger	153,411	0	2,689	0	150,722	0	1,134,368	0	23,638	0	1,110,730	0
6-14	124,039	0	5,801	1	118,237	0	964,697	0	52,924	4	911,769	0
15-20	56,135	0	4,778	1	51,356	0	420,656	0	41,134	3	379,519	0
21-44	98,064	0	12,977	83,852	1,209	26	684,195	0	110,185	567,654	6,126	230
45-64	22,468	0	14,617	7,619	2	230	173,402	0	121,997	49,396	9	2,000
65-74	2,157	1,963	177	12	0	5	17,678	16,778	815	69	0	16
75-84	1,278	1,273	2	3	0	0	10,946	10,916	12	18	0	0
85 and older	566	564	0	2	0	0	4,165	4,151	0	14	0	0
Unknown	21	0	0	14	7	0	121	0	0	80	41	0
Gender												
Female	263,015	2,393	21,675	75,538	163,148	261	1,947,570	20,131	185,336	520,979	1,218,878	2,246
Male	195,122	1,407	19,365	15,966	158,384	0	1,462,634	11,714	165,357	96,259	1,189,304	0
Unknown	2	0	1	0	1	0	24	0	12	0	12	0
Race												
White	135,747	1,116	15,377	22,278	96,920	56	1,063,605	9,505	141,421	149,212	762,954	513
African American	30,393	80	2,060	3,925	24,328	0	226,376	635	16,274	25,567	183,900	0
Other/unknown	291,999	2,604	23,604	65,301	200,285	205	2,120,247	21,705	193,010	442,459	1,461,340	1,733
Use of Nursing Facilities^c												
Entire year	749	178	571	0	0	0	6,820	1,566	5,254	0	0	0
Part year	587	104	480	2	0	1	5,076	817	4,233	20	0	6
None	456,803	3,518	39,990	91,502	321,533	260	3,398,332	29,462	341,218	617,218	2,408,194	2,240
Maintenance Assistance Status												
Cash	217,941	3,335	36,173	65,324	113,109	0	1,639,318	28,655	307,878	439,270	863,515	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	180,528	12	2	12,127	168,126	261	1,259,954	115	24	68,439	1,189,130	2,246
Other/unknown	59,670	453	4,866	14,053	40,298	0	510,956	3,075	42,803	109,529	355,549	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	343,315	2,740	29,595	71,581	239,138	261	2,748,114	25,127	287,002	500,071	1,933,668	2,246
FFS part year, with Rx claims	47,732	611	7,836	11,202	28,083	0	305,694	3,987	45,489	72,230	183,988	0
FFS part year, no Rx claims	67,092	449	3,610	8,721	54,312	0	356,420	2,731	18,214	44,937	290,538	0

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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.

Nondual Medicaid Beneficiaries

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, COLORADO, 2006

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	46.3	5.3	\$409	\$77	\$3,103	13.2	458,139
Age							
5 and younger	42.4	2.0	127	62	1,806	7.0	153,411
6-14	38.8	2.9	260	90	1,860	14.0	124,039
15-20	48.8	4.8	439	91	3,609	12.2	56,135
21-44	55.1	8.0	587	73	4,308	13.6	98,064
45-64	68.9	29.0	2,212	76	11,359	19.5	22,468
65-74	61.1	18.2	1,067	59	7,618	14.0	2,157
75-84	52.0	16.4	836	51	9,145	9.1	1,278
85 and older	26.0	7.7	395	52	9,449	4.2	566
Unknown	23.8	0.8	24	30	731	3.3	21
Basis of Eligibility^e							
Aged	53.8	16.5	917	56	8,409	10.9	3,800
Disabled	71.3	25.7	2,456	96	14,955	16.4	41,041
Adults	52.7	6.0	318	53	2,506	12.7	91,504
Children	41.2	2.4	166	69	1,685	9.9	321,533
Unknown	84.3	21.7	1,759	81	18,479	9.5	261
Gender							
Female	49.1	6.0	408	69	3,069	13.3	263,015
Male	42.6	4.5	410	91	3,149	13.0	195,122
Unknown	50.0	0.5	5	9	2,117	0.2	2
Race							
White	50.9	6.8	563	83	3,554	15.8	135,747
African American	41.2	3.9	329	84	2,686	12.2	30,393
Other/unknown	44.8	4.8	345	72	2,937	11.8	291,999
Use of Nursing Facilities^f							
Entire year	84.4	75.7	6,110	81	60,352	10.1	749
Part year	87.9	71.0	5,095	72	57,893	8.8	587
None	46.2	5.1	393	77	2,939	13.4	456,803
Maintenance Assistance Status							
Cash	50.3	7.5	578	77	3,588	16.1	217,941
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	39.2	1.9	118	61	1,554	7.6	180,528
Other/unknown	53.5	7.7	670	87	6,018	11.1	59,670

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 ten states (DE, IA, IL, NC, NE, NY, TN, 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 ten states (DE, IA, IL, NC, NE, NY, TN, 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, COLORADO, 2006

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Rx, Percentage with:							Mean \$, All Medicaid FFS \$ ^d	Number	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Beneficiaries		Benefit Months	
All	0.7	\$55	13.2	53.7	35.7	4.3	4.1	1.8	0.6	\$417	458,139	3,410,228	
Age													
5 and younger	0.3	17	7.0	57.6	39.3	2.1	0.9	0.1	0.0	244	153,411	1,134,368	
6-14	0.4	33	14.0	61.2	32.9	3.0	2.4	0.4	0.0	239	124,039	964,697	
15-20	0.6	59	12.2	51.2	38.4	5.1	4.2	1.0	0.1	482	56,135	420,656	
21-44	1.1	84	13.6	44.9	36.7	7.4	7.3	3.0	0.8	618	98,064	684,195	
45-64	3.8	287	19.5	31.1	18.2	9.2	18.6	15.9	7.1	1,472	22,468	173,402	
65-74	2.2	130	14.0	38.9	20.8	10.2	18.2	9.7	2.2	930	2,157	17,678	
75-84	1.9	98	9.1	48.0	18.0	7.4	15.3	9.6	1.7	1,068	1,278	10,946	
85 and older	1.0	54	4.2	74.0	10.8	2.5	7.8	3.5	1.4	1,284	566	4,165	
Unknown	0.1	4	3.3	76.2	23.8	0.0	0.0	0.0	0.0	127	21	121	
Basis of Eligibility^e													
Aged	2.0	109	10.9	46.2	18.8	8.3	16.1	8.8	1.9	1,003	3,800	31,845	
Disabled	3.0	287	16.4	28.7	24.9	10.0	18.4	12.9	5.1	1,750	41,041	350,705	
Adults	0.9	47	12.7	47.3	37.4	7.0	6.0	1.9	0.4	372	91,504	617,238	
Children	0.3	22	9.9	58.8	36.8	2.7	1.5	0.2	0.0	225	321,533	2,408,194	
Unknown	2.5	204	9.5	15.7	30.7	17.6	23.8	10.0	2.3	2,147	261	2,246	
Gender													
Female	0.8	55	13.3	50.9	37.2	4.7	4.5	2.1	0.7	415	263,015	1,947,570	
Male	0.6	55	13.0	57.4	33.7	3.6	3.5	1.4	0.4	420	195,122	1,462,634	
Unknown	0.0	0	0.2	50.0	50.0	0.0	0.0	0.0	0.0	176	2	24	
Race													
White	0.9	72	15.8	49.1	37.5	5.1	5.3	2.3	0.7	454	135,747	1,063,605	
African American	0.5	44	12.2	58.8	32.9	3.6	3.3	1.1	0.2	361	30,393	226,376	
Other/unknown	0.7	48	11.8	55.2	35.1	3.9	3.6	1.6	0.5	404	291,999	2,120,247	
Use of Nursing Facilities^f													
Entire year	8.3	671	10.1	15.6	5.6	2.9	16.3	29.2	30.3	6,628	749	6,820	
Part year	8.2	589	8.8	12.1	7.5	4.9	15.7	27.8	32.0	6,695	587	5,076	
None	0.7	53	13.4	53.8	35.8	4.3	4.0	1.7	0.5	395	456,803	3,398,332	
Maintenance Assistance Status													
Cash	1.0	77	16.1	49.7	35.1	5.3	5.9	3.0	0.9	477	217,941	1,639,318	
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
Poverty related	0.3	17	7.6	60.8	35.5	2.4	1.2	0.1	0.0	223	180,528	1,259,954	
Other/unknown	0.9	78	11.1	46.5	38.5	5.8	6.2	2.3	0.8	703	59,670	510,956	

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 ten states (DE, IA, IL, NC, NE, NY, TN, 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 ten states (DE, IA, IL, NC, NE, NY, TN, 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, COLORADO, 2006

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs			
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	0.7	\$55	\$77	0.2	\$41	\$177	0.0	\$3	\$103	0.5	\$12	\$25
Age												
5 and younger	0.3	17	62	0.1	13	193	0.0	1	47	0.2	4	18
6-14	0.4	33	90	0.2	28	167	0.0	1	81	0.2	5	24
15-20	0.6	59	91	0.2	46	194	0.0	3	117	0.4	9	25
21-44	1.1	84	73	0.3	59	183	0.0	6	126	0.8	20	25
45-64	3.8	287	76	1.2	198	170	0.1	14	114	2.5	75	30
65-74	2.2	130	59	0.8	93	117	0.1	5	92	1.4	32	23
75-84	1.9	98	51	0.7	68	99	0.1	4	79	1.2	26	22
85 and older	1.0	54	52	0.3	38	111	0.0	2	70	0.7	13	20
Unknown	0.1	4	30	0.0	2	46	0.0	1	70	0.1	2	19
Basis of Eligibility^d												
Aged	2.0	109	56	0.7	77	110	0.1	5	85	1.2	27	23
Disabled	3.0	287	96	1.1	218	206	0.1	12	112	1.8	57	31
Adults	0.9	47	53	0.2	29	134	0.0	4	128	0.6	14	22
Children	0.3	22	69	0.1	17	162	0.0	1	74	0.2	4	20
Unknown	2.5	204	81	0.8	145	190	0.1	17	168	1.7	43	26
Gender												
Female	0.8	55	69	0.2	39	163	0.0	3	110	0.5	13	25
Male	0.6	55	91	0.2	43	196	0.0	2	88	0.4	10	27
Unknown	0.0	0	9	0.0	0	0	0.0	0	0	0.0	0	9
Race												
White	0.9	72	83	0.3	54	174	0.0	3	101	0.5	14	27
African American	0.5	44	84	0.2	35	189	0.0	2	97	0.3	8	24
Other/unknown	0.7	48	72	0.2	34	178	0.0	3	104	0.4	11	24
Use of Nursing Facilities^e												
Entire year	8.3	671	81	2.7	488	179	0.3	26	95	5.3	156	30
Part year	8.2	589	72	2.5	408	164	0.3	30	111	5.4	151	28
None	0.7	53	77	0.2	39	177	0.0	3	103	0.4	11	25
Maintenance Assistance Status												
Cash	1.0	77	77	0.3	56	180	0.0	4	109	0.7	17	27
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.3	17	61	0.1	12	164	0.0	1	90	0.2	4	19
Other/unknown	0.9	78	87	0.4	61	175	0.0	3	93	0.5	14	26

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 Colorado, 0.1 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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, COLORADO, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	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	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.0	0.0	0.2	\$13	\$7	\$1	\$5	\$49	\$210	\$50	\$23	315,972	\$15,537,824	129,929	28.4	1,215,146
Biologicals	0.6	0.6	0.0	0.0	863	858	5	0	1396	1,398	1,112	0	4,806	6,709,766	902	0.2	7,777
Antineoplastic Agents	0.6	0.2	0.0	0.4	183	159	1	23	289	766	220	54	5,767	1,668,114	980	0.2	9,135
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	31	22	1	8	59	132	47	23	223,337	13,229,897	45,751	10.0	423,604
Cardiovascular Agents	1.1	0.3	0.0	0.7	49	33	2	13	46	102	90	19	223,529	10,368,644	23,190	5.1	212,753
Respiratory Agents	0.4	0.2	0.0	0.2	28	22	0	5	63	109	57	21	316,156	19,842,933	75,546	16.5	715,350
Gastrointestinal Agents	0.5	0.2	0.0	0.3	39	25	8	6	84	146	355	21	116,373	9,720,279	26,777	5.8	251,336
Genitourinary Agents	0.3	0.1	0.0	0.2	15	8	3	4	54	94	87	25	34,236	1,843,722	13,093	2.9	122,458
CNS Drugs	1.0	0.5	0.1	0.5	121	98	8	15	118	216	109	30	391,883	46,181,273	41,676	9.1	382,417
Stimulants/Anti-obesity/Anorexia	0.8	0.6	0.0	0.2	82	75	1	6	107	128	122	33	68,916	7,343,924	9,375	2.0	89,940
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	0.0	348	347	0	1	629	641	127	80	5,888	3,706,355	1,124	0.2	10,650
Analgesics and Anesthetics	0.5	0.0	0.0	0.5	24	10	1	14	45	209	167	28	321,253	14,522,674	65,259	14.2	595,621
Neuromuscular Agents	0.8	0.3	0.0	0.5	85	65	2	18	103	186	106	39	185,113	18,982,621	23,684	5.2	223,002
Nutritional Products	0.4	0.1	0.0	0.3	11	4	0	7	26	43	26	21	47,649	1,227,395	12,827	2.8	112,788
Hematological Agents	0.8	0.2	0.0	0.5	280	263	1	17	360	1,079	45	32	22,498	8,100,817	3,103	0.7	28,891
Topical Products	0.2	0.1	0.0	0.2	10	6	0	4	40	105	63	20	150,569	6,051,331	65,104	14.2	620,804
Miscellaneous Products	0.8	0.3	0.0	0.4	225	184	16	25	294	590	322	63	6,704	1,973,831	920	0.2	8,785
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	10	0	0	0	55	0	0	0	3,279	181,658	1,837	0.4	18,507
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	2,443,928	187,193,058	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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.medi-span.com/master-drug-database.aspx>.

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 Colorado, 0.1 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2006.

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

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, COLORADO, 2006

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	\$32,446,794	18,243	4.0	175,835	0.7	\$250	\$185
ANTICONVULSANT	16,704,482	17,115	3.7	165,188	0.8	131	101
ANTIASTHMATIC	12,483,771	58,111	12.7	548,362	0.3	73	23
ANTIDEPRESSANTS	10,839,476	34,811	7.6	323,302	0.5	64	34
ANALGESICS - Narcotic	8,360,607	74,412	16.2	696,932	0.3	36	12
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	7,315,362	10,533	2.3	102,570	0.7	107	71
PASSIVE IMMUNIZING AGENTS	6,689,138	891	0.2	7,683	0.6	1,401	871
ANTIDIABETIC	5,295,642	11,509	2.5	104,221	0.7	74	51
ULCER DRUGS	5,123,686	23,386	5.1	221,110	0.4	65	23
ANTIVIRAL	5,013,141	6,502	1.4	62,536	0.3	294	80
Total	110,272,099	255,513	n.a.	2,407,739	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Nondual Medicaid 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, COLORADO, 2006

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 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	1,072,261	\$110,272,099	18,243	4.0	175,835	0.7	\$185	17,115	3.7	165,188	0.8	\$101
Female												
All Females	659,096	58,883,581	9,496	3.6	90,209	0.7	158	10,672	4.1	101,901	0.7	93
Female, Disabled												
All Ages	307,949	32,766,854	4,911	22.7	46,432	0.8	202	5,881	27.1	57,466	0.9	114
5 and younger	4,354	1,238,684	11	0.9	97	0.6	141	132	11.2	1,329	0.8	129
6-14	12,442	1,863,680	247	11.0	2,511	0.7	194	431	19.2	4,534	0.9	162
15-20	15,030	2,221,041	402	20.0	4,081	0.8	236	422	21.0	4,502	1.0	160
21-44	95,773	10,797,232	1,996	27.5	18,571	0.8	190	2,192	30.2	21,137	0.9	126
45-64	179,924	16,612,046	2,246	25.3	21,103	0.8	207	2,694	30.3	25,903	0.8	88
65-74	426	34,171	9	8.1	69	0.7	193	10	9.0	61	0.8	59
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	351,145	26,116,677	4,585	1.9	43,777	0.5	111	4,791	2.0	44,435	0.5	65
5 and younger	22,995	3,340,841	37	0.1	368	0.4	116	162	0.2	1,518	0.6	81
6-14	50,770	5,016,798	902	1.5	9,329	0.7	173	531	0.9	5,423	0.7	94
15-20	47,463	3,923,474	1,162	3.9	11,661	0.6	131	631	2.1	6,028	0.6	86
21-44	189,792	11,254,162	2,115	3.0	19,179	0.4	71	2,942	4.1	26,653	0.5	56
45-64	27,383	1,795,405	246	4.6	2,076	0.4	79	405	7.7	3,619	0.6	60
65-74	8,047	542,243	75	5.9	719	0.9	174	70	5.5	693	0.7	43
75-84	3,579	179,735	33	4.4	306	0.6	75	43	5.8	426	0.7	49
85 and older	1,116	64,019	15	3.9	139	0.7	147	7	1.8	75	0.8	16
Male												
All Males	413,165	51,388,518	8,747	4.5	85,626	0.8	213	6,443	3.3	63,287	0.8	114
Male, Disabled												
All Ages	208,012	29,038,025	5,023	25.9	48,618	0.9	246	4,330	22.4	43,122	0.9	130
5 and younger	6,593	1,700,929	31	2.1	286	0.6	137	181	12.0	1,862	0.8	108
6-14	27,755	4,033,819	801	22.5	8,063	0.8	211	633	17.8	6,688	0.9	149
15-20	24,843	4,008,432	904	32.7	9,371	0.9	238	557	20.1	5,700	1.0	158
21-44	66,626	10,058,245	1,941	33.9	18,493	1.0	264	1,676	29.3	16,655	1.0	147
45-64	82,081	9,228,312	1,341	23.4	12,381	0.9	248	1,282	22.3	12,205	0.8	88
65-74	114	8,288	5	7.6	24	0.7	133	1	1.5	12	0.8	28
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 Medicaid 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, COLORADO, 2006

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 Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	205,153	22,350,493	3,724	2.1	37,008	0.7	170	2,113	1.2	20,165	0.6	80
5 and younger	35,407	4,825,462	114	0.1	1,196	0.5	93	224	0.3	2,132	0.5	66
6-14	90,375	9,731,021	1,786	3.0	18,011	0.7	182	758	1.3	7,572	0.7	91
15-20	43,351	5,282,110	1,476	6.9	14,731	0.7	175	550	2.6	5,465	0.7	100
21-44	22,520	1,453,389	241	1.8	2,099	0.4	83	382	2.8	3,214	0.5	49
45-64	7,973	649,898	44	1.7	379	0.4	71	131	5.1	1,095	0.5	56
65-74	3,268	278,002	33	4.7	319	0.7	259	46	6.5	462	0.5	53
75-84	2,018	115,349	25	4.7	232	0.5	56	19	3.6	203	0.4	20
85 and older	241	15,262	5	2.8	41	0.4	61	3	1.7	22	0.9	56
Unknown	2	50	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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 Medicaid 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, COLORADO, 2006

Beneficiary Characteristics	ANTIASTHMATIC					ANTIDEPRESSANTS					ANALGESICS - Narcotic				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean	
				Rx per Benefit Month	Mean Rx \$ per Benefit Month				Rx per Benefit Month	Mean Rx \$ per Benefit Month				Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	58,111	12.7	548,362	0.3	\$23	34,811	7.6	323,302	0.5	\$34	74,412	16.2	696,932	0.3	\$12
Female															
All Females	30,869	11.7	290,287	0.3	22	26,148	9.9	241,197	0.5	33	56,817	21.6	530,329	0.3	11
Female, Disabled															
All Ages	6,984	32.2	68,203	0.4	37	9,156	42.2	87,192	0.6	42	12,712	58.6	125,944	0.5	30
5 and younger	423	35.9	4,266	0.3	26	4	0.3	39	0.2	4	90	7.6	941	0.1	1
6-14	511	22.8	5,070	0.4	43	168	7.5	1,709	0.6	20	250	11.1	2,705	0.1	2
15-20	463	23.0	4,691	0.4	34	404	20.1	4,111	0.6	36	536	26.6	5,434	0.2	5
21-44	1,741	24.0	16,970	0.4	30	3,121	43.1	29,636	0.6	41	4,695	64.8	45,893	0.5	28
45-64	3,832	43.2	37,122	0.5	42	5,446	61.3	51,583	0.7	44	7,125	80.2	70,862	0.6	35
65-74	14	12.6	84	0.5	52	13	11.7	114	0.7	37	16	14.4	109	0.5	17
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	23,884	9.9	222,078	0.3	18	16,992	7.0	154,005	0.4	29	44,105	18.3	404,385	0.3	6
5 and younger	6,612	9.0	62,253	0.2	15	29	0.0	304	0.3	10	1,202	1.6	11,957	0.1	1
6-14	6,578	11.3	62,127	0.3	21	953	1.6	9,680	0.5	26	2,433	4.2	24,269	0.1	1
15-20	3,164	10.5	29,591	0.3	17	2,453	8.1	23,590	0.4	24	7,246	24.1	68,323	0.2	2
21-44	6,533	9.1	59,030	0.3	17	11,694	16.3	104,120	0.4	29	30,259	42.3	272,449	0.3	6
45-64	747	14.1	6,628	0.4	27	1,555	29.4	13,229	0.5	35	2,309	43.6	20,588	0.4	12
65-74	160	12.5	1,581	0.4	32	194	15.2	1,955	0.5	26	416	32.6	4,362	0.3	10
75-84	72	9.7	681	0.5	35	87	11.7	861	0.5	21	187	25.2	1,918	0.3	6
85 and older	18	4.6	187	0.3	23	27	7.0	266	0.8	36	53	13.7	519	0.5	12
Male															
All Males	27,242	14.0	258,075	0.3	23	8,663	4.4	82,105	0.6	34	17,595	9.0	166,603	0.3	14
Male, Disabled															
All Ages	4,569	23.6	45,261	0.4	35	4,290	22.2	41,297	0.7	40	6,110	31.6	59,016	0.5	29
5 and younger	667	44.1	6,737	0.3	26	16	1.1	176	0.4	7	149	9.9	1,553	0.1	2
6-14	1,140	32.1	11,867	0.4	34	372	10.5	3,872	0.7	31	293	8.2	3,149	0.1	2
15-20	563	20.4	5,657	0.4	31	447	16.2	4,569	0.7	39	513	18.6	5,199	0.2	5
21-44	742	13.0	7,335	0.4	30	1,469	25.7	14,121	0.7	44	1,956	34.2	18,886	0.5	24
45-64	1,453	25.3	13,633	0.5	45	1,981	34.5	18,534	0.7	40	3,193	55.6	30,186	0.7	41
65-74	4	6.1	32	0.3	17	5	7.6	25	0.7	29	6	9.1	43	0.3	5
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 Medicaid 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, COLORADO, 2006

Beneficiary Characteristics	ANTIASTHMATIC					ANTIDEPRESSANTS					ANALGESICS - Narcotic				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month	
				Month	Month				Month	Month				Month	Month
Male, Other Eligibles															
All Ages	22,673	12.9	212,814	0.3	21	4,373	2.5	40,808	0.5	28	11,485	6.5	107,587	0.2	6
5 and younger	9,967	12.9	94,208	0.2	17	56	0.1	568	0.4	15	1,748	2.3	17,617	0.1	1
6-14	9,375	15.6	88,200	0.3	24	1,315	2.2	13,285	0.5	27	2,523	4.2	25,348	0.1	1
15-20	2,360	11.1	22,054	0.3	21	1,589	7.5	14,975	0.5	29	2,795	13.1	26,478	0.2	1
21-44	641	4.7	5,376	0.3	21	989	7.3	8,285	0.4	27	3,354	24.8	28,560	0.4	12
45-64	184	7.2	1,564	0.4	28	301	11.8	2,546	0.5	31	752	29.4	6,358	0.5	20
65-74	75	10.6	754	0.4	33	67	9.5	627	0.6	32	188	26.7	1,934	0.3	11
75-84	58	10.9	579	0.3	29	43	8.1	416	0.5	24	109	20.5	1,160	0.3	9
85 and older	13	7.3	79	0.4	37	13	7.3	106	0.7	39	16	9.0	132	0.4	12
Unknown	1	4.3	6	0.2	1	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.
 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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.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, COLORADO, 2006

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS					PASSIVE IMMUNIZING AGENTS					ANTIDIABETIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean	
				Rx per Month	Mean Rx \$ per Benefit Month				Rx per Month	Mean Rx \$ per Benefit Month				Rx per Month	Mean Rx \$ per Benefit Month
All	10,533	2.3	102,570	0.7	\$71	891	0.2	7,683	0.6	\$871	11,509	2.5	104,221	0.7	\$51
Female															
All Females	3,286	1.2	32,141	0.6	71	413	0.2	3,517	0.6	834	8,144	3.1	73,705	0.7	49
Female, Disabled															
All Ages	688	3.2	6,965	0.6	88	106	0.5	1,078	0.6	925	4,233	19.5	39,673	0.7	55
5 and younger	10	0.8	82	0.4	25	94	8.0	951	0.6	883	2	0.2	24	0.3	36
6-14	191	8.5	1,948	0.7	76	5	0.2	59	0.5	1,076	31	1.4	300	0.8	92
15-20	100	5.0	996	0.7	79	2	0.1	24	1.1	1,055	68	3.4	697	0.7	57
21-44	183	2.5	1,859	0.6	85	3	0.0	29	0.4	848	855	11.8	7,871	0.6	48
45-64	204	2.3	2,080	0.6	109	2	0.0	15	2.8	2,918	3,256	36.7	30,652	0.8	57
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	21	18.9	129	0.7	34
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	2,598	1.1	25,176	0.6	67	307	0.1	2,439	0.6	793	3,911	1.6	34,032	0.6	41
5 and younger	84	0.1	838	0.4	31	304	0.4	2,403	0.6	798	49	0.1	452	0.8	67
6-14	1,496	2.6	14,594	0.6	64	0	0.0	0	0.0	0	189	0.3	1,767	0.9	88
15-20	484	1.6	4,755	0.6	68	1	0.0	12	0.8	1,317	247	0.8	2,158	0.7	55
21-44	480	0.7	4,470	0.5	79	2	0.0	24	0.1	13	2,140	3.0	18,156	0.5	36
45-64	48	0.9	447	0.7	119	0	0.0	0	0.0	0	639	12.1	5,342	0.6	41
65-74	4	0.3	48	0.1	2	0	0.0	0	0.0	0	418	32.8	3,878	0.6	39
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	195	26.2	1,918	0.6	27
85 and older	2	0.5	24	0.1	1	0	0.0	0	0.0	0	34	8.8	361	0.6	38
Male															
All Males	7,247	3.7	70,429	0.7	71	478	0.2	4,166	0.6	902	3,365	1.7	30,516	0.7	56
Male, Disabled															
All Ages	1,386	7.2	13,806	0.8	81	106	0.5	1,105	0.7	1,112	2,016	10.4	18,899	0.8	56
5 and younger	25	1.7	250	0.5	65	102	6.7	1,067	0.7	1,052	7	0.5	42	1.0	95
6-14	737	20.7	7,289	0.7	76	3	0.1	28	0.8	2,002	36	1.0	392	0.8	78
15-20	362	13.1	3,696	0.8	89	0	0.0	0	0.0	0	45	1.6	417	1.0	93
21-44	177	3.1	1,745	0.8	88	1	0.0	10	1.3	5,059	407	7.1	3,819	0.8	58
45-64	85	1.5	826	0.7	78	0	0.0	0	0.0	0	1,514	26.4	14,203	0.8	54
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	7	10.6	26	0.6	22
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Medicaid 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, COLORADO, 2006

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS						PASSIVE IMMUNIZING AGENTS					ANTIDIABETIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		
				Rx per Month	Mean Rx \$ per Benefit				Rx per Month	Mean Rx \$ per Benefit				Rx per Month	Mean Rx \$ per Benefit	
Male, Other Eligibles																
All Ages	5,861	3.3	56,623	0.7	69	372	0.2	3,061	0.6	826	1,349	0.8	11,617	0.7	56	
5 and younger	210	0.3	2,038	0.5	47	368	0.5	3,022	0.6	813	39	0.1	374	0.7	57	
6-14	4,359	7.3	41,955	0.7	68	3	0.0	31	1.1	2,013	198	0.3	1,800	0.9	85	
15-20	1,178	5.5	11,619	0.7	78	0	0.0	0	0.0	0	121	0.6	1,034	0.9	99	
21-44	85	0.6	763	0.5	64	1	0.0	8	1.4	1,183	394	2.9	3,206	0.6	47	
45-64	23	0.9	179	0.6	68	0	0.0	0	0.0	0	323	12.6	2,640	0.7	45	
65-74	4	0.6	47	0.8	73	0	0.0	0	0.0	0	174	24.7	1,608	0.6	41	
75-84	2	0.4	22	0.5	15	0	0.0	0	0.0	0	96	18.0	922	0.7	42	
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	2.2	33	0.3	6	
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 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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 Medicaid 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, COLORADO, 2006

Beneficiary Characteristics	ULCER DRUGS					ANTIVIRAL					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	23,386	5.1	221,110	0.4	\$23	6,502	1.4	62,536	0.3	\$80	458,139	3,410,228
Female												
All Females	15,954	6.1	150,673	0.3	22	4,313	1.6	41,279	0.3	60	262,999	1,947,468
Female, Disabled												
All Ages	6,003	27.7	58,965	0.5	31	887	4.1	8,738	0.4	140	21,675	185,336
5 and younger	216	18.4	2,203	0.5	43	27	2.3	245	0.4	24	1,177	10,341
6-14	203	9.0	2,182	0.5	40	66	2.9	705	0.3	88	2,245	20,261
15-20	226	11.2	2,295	0.4	26	35	1.7	360	0.2	23	2,013	17,283
21-44	1,673	23.1	16,207	0.4	30	362	5.0	3,447	0.4	167	7,249	61,307
45-64	3,664	41.3	35,938	0.5	31	393	4.4	3,935	0.4	146	8,879	75,610
65-74	21	18.9	140	0.4	15	4	3.6	46	0.2	10	111	527
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	7
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	9,950	4.1	91,704	0.3	16	3,426	1.4	32,541	0.2	39	241,324	1,762,132
5 and younger	1,443	2.0	12,270	0.3	18	503	0.7	4,918	0.1	9	73,715	542,562
6-14	928	1.6	9,064	0.2	16	515	0.9	5,189	0.2	20	58,263	448,757
15-20	1,348	4.5	12,908	0.2	11	469	1.6	4,357	0.2	24	30,101	222,044
21-44	4,953	6.9	45,522	0.3	15	1,766	2.5	16,487	0.3	55	71,547	493,006
45-64	750	14.2	6,608	0.3	24	138	2.6	1,215	0.3	74	5,292	35,570
65-74	348	27.3	3,465	0.4	26	13	1.0	149	0.2	6	1,275	10,955
75-84	147	19.8	1,534	0.4	19	14	1.9	139	0.2	7	743	6,407
85 and older	33	8.5	333	0.5	17	8	2.1	87	0.2	36	388	2,831
Male												
All Males	7,432	3.8	70,437	0.4	26	2,189	1.1	21,257	0.3	119	195,117	1,462,615
Male, Disabled												
All Ages	3,357	17.3	33,091	0.5	34	726	3.7	6,864	0.5	288	19,365	165,357
5 and younger	301	19.9	2,948	0.5	36	33	2.2	328	0.4	113	1,512	13,297
6-14	321	9.0	3,513	0.5	43	82	2.3	914	0.2	21	3,556	32,663
15-20	235	8.5	2,479	0.5	42	40	1.4	450	0.2	44	2,765	23,851
21-44	881	15.4	8,696	0.5	36	257	4.5	2,217	0.6	306	5,727	48,866
45-64	1,610	28.1	15,383	0.5	29	314	5.5	2,955	0.7	414	5,738	46,387
65-74	9	13.6	72	0.5	37	0	0.0	0	0.0	0	66	288
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	5
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Nondual Medicaid 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, COLORADO, 2006

Beneficiary Characteristics	ULCER DRUGS						ANTIVIRAL					
	Number of Users	Users as %	Number of Benefit Months Among Users	Mean		Number of Users	Users as %	Number of Benefit Months Among Users	Mean		Number of Beneficiaries	Number of Benefit Months
		of All Benes		Rx per Month	Benefit per Month		Rx per Month		of All Benes	Rx per Month		
Male, Other Eligibles												
All Ages	4,075	2.3	37,346	0.3	19	1,463	0.8	14,393	0.2	39	175,752	1,297,258
5 and younger	1,687	2.2	14,767	0.3	19	559	0.7	5,482	0.2	9	77,007	568,168
6-14	759	1.3	7,589	0.2	17	572	1.0	5,775	0.2	18	59,974	463,004
15-20	493	2.3	4,792	0.2	11	177	0.8	1,740	0.3	99	21,256	157,478
21-44	674	5.0	5,818	0.3	23	104	0.8	920	0.3	99	13,540	81,004
45-64	198	7.7	1,707	0.4	28	35	1.4	298	0.6	452	2,559	15,835
65-74	152	21.6	1,557	0.3	21	7	1.0	78	0.2	31	705	5,908
75-84	101	18.9	1,020	0.4	20	9	1.7	100	0.1	15	533	4,527
85 and older	11	6.2	96	0.4	29	0	0.0	0	0.0	0	178	1,334
Unknown	1	4.3	4	0.3	11	0	0.0	0	0.0	0	23	145

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 2006. 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 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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 Medicaid Beneficiaries

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, COLORADO, 2006

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	\$671	8.3	749	6,820
Age				
0-64	805	9.6	568	5,233
65-74	404	5.9	54	492
75-84	190	4.4	61	561
85 and older	107	2.4	66	534
Unknown	0	0.0	0	0
Gender				
Female	705	8.7	385	3,602
Male	633	7.9	364	3,218
Unknown	0	0.0	0	0
Race				
White	731	8.2	328	3,240
African American	633	8.8	21	194
Other/unknown	616	8.4	400	3,386
Basis of Eligibility^c				
Aged	225	4.2	178	1,566
Disabled	804	9.5	571	5,254
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2006 Medicaid enrollment. A total of 587 beneficiaries who were in nursing facilities for part of their enrollment and their 5,076 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 Medicaid 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, COLORADO, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.5	0.2	0.0	0.4	\$69	\$48	\$3	\$18	\$132	\$294	\$300	\$52	2,068	\$273,838	393	52.5	3,941
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.9	0.3	0.0	0.6	68	40	0	29	80	147	0	49	160	12,875	18	2.4	188
Endocrine/Metabolic Drugs	1.6	0.5	0.1	1.0	78	56	3	19	49	102	48	20	5,193	254,680	326	43.5	3,258
Cardiovascular Agents	2.0	0.6	0.0	1.4	75	46	4	25	37	80	86	18	8,370	309,144	424	56.6	4,146
Respiratory Agents	0.9	0.6	0.0	0.3	69	59	1	8	73	98	75	26	2,339	170,615	245	32.7	2,469
Gastrointestinal Agents	1.2	0.2	0.0	0.9	42	24	2	16	36	107	157	17	4,145	148,568	357	47.7	3,542
Genitourinary Agents	0.8	0.4	0.2	0.3	53	28	15	10	63	79	90	31	1,450	91,585	163	21.8	1,733
CNS Drugs	2.5	1.2	0.1	1.2	354	291	13	50	140	240	105	41	13,414	1,874,532	529	70.6	5,299
Stimulants/Anti-obesity/Aorexia	0.7	0.4	0.0	0.2	66	60	3	3	100	153	119	14	187	18,638	28	3.7	284
Miscellaneous Psychological/Neurological Agents	1.1	1.1	0.0	0.0	483	483	0	0	452	453	0	21	639	289,108	60	8.0	598
Analgesics and Anesthetics	1.7	0.3	0.0	1.4	105	58	3	45	63	209	121	33	6,323	399,872	391	52.2	3,803
Neuromuscular Agents	1.8	0.5	0.0	1.3	140	78	2	60	76	152	167	46	6,684	508,275	360	48.1	3,633
Nutritional Products	0.8	0.0	0.0	0.8	15	0	0	15	19	29	11	19	1,645	30,754	203	27.1	2,002
Hematological Agents	1.6	0.2	0.0	1.3	79	62	0	17	50	258	0	13	2,160	108,636	143	19.1	1,372
Topical Products	0.6	0.1	0.1	0.3	26	14	5	7	47	104	68	21	1,659	78,674	290	38.7	2,988
Miscellaneous Products	0.3	0.0	0.0	0.3	7	4	0	2	23	138	184	9	143	3,305	49	6.5	505
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	6	0	0	0	23	0	0	0	131	2,975	42	5.6	460
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.	56,710	4,576,074	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 2006. A total of 587 beneficiaries who were in nursing facilities for part of their enrollment and their 5,076 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 2006. 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.medi-span.com/master-drug-database.aspx>.

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.medi-span.com/master-drug-database.aspx>.

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

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

Nondual Medicaid 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, COLORADO, 2006

Top 10 Drug Groups in Nursing Facilities	Users				Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
ANTIPSYCHOTICS	\$1,518,996	495	66.1	5,227	1.2	\$233	\$291	
ANTICONVULSANT	400,479	364	48.6	3,687	1.2	88	109	
ANTIDEPRESSANTS	304,255	508	67.8	5,172	0.9	65	59	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	289,108	71	9.5	719	0.9	452	402	
ANALGESICS - Narcotic	180,305	472	63.0	4,574	1.1	36	39	
ANTIDIABETIC	180,846	340	45.4	3,332	1.0	53	54	
ANTIHYPERTENSIVE	155,306	225	30.0	2,211	0.8	84	70	
ANTIASTHMATIC	137,773	261	34.8	2,680	0.6	86	51	
ANTIVIRAL	132,764	68	9.1	728	0.3	567	182	
MIGRAINE PRODUCTS	130,850	79	10.5	831	1.0	162	157	
Total	3,430,682	2,883	n.a.	29,161	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 2006. A total of 587 beneficiaries who were in nursing facilities for part of their enrollment and their 5,076 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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; n.a. = not applicable.

Nondual Medicaid 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, COLORADO, 2006

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	29,259	\$3,430,682	495	66.1	5,227	1.2	\$291	364	48.6	3,687	1.2	\$109
Female												
All Females	16,358	1,905,838	262	68.1	2,766	1.2	290	208	54.0	2,110	1.2	109
Female, Disabled												
All Ages	14,306	1,748,888	222	81.0	2,391	1.3	309	185	67.5	1,883	1.2	115
64 or younger	14,249	1,741,543	221	81.0	2,379	1.3	309	183	67.0	1,859	1.2	115
65-74	57	7,345	1	100.0	12	1.1	209	2	200.0	24	0.9	95
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	2,052	156,950	40	36.0	375	1.0	172	23	20.7	227	1.0	63
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	952	92,106	19	61.3	183	1.1	256	10	32.3	90	1.1	85
75-84	525	31,726	13	36.1	117	0.8	74	10	27.8	110	0.8	55
85 and older	575	33,118	8	18.2	75	0.8	121	3	6.8	27	1.1	22
Male												
All Males	12,901	1,524,844	233	64.0	2,461	1.3	291	156	42.9	1,577	1.3	108
Male, Disabled												
All Ages	11,994	1,445,157	217	73.1	2,308	1.3	297	146	49.2	1,479	1.3	112
64 or younger	11,979	1,443,416	216	73.2	2,304	1.3	297	146	49.5	1,479	1.3	112
65-74	15	1,741	1	50.0	4	0.8	242	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	907	79,687	16	23.9	153	0.7	206	10	14.9	98	0.7	38
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	416	46,740	7	35.0	78	0.6	281	7	35.0	63	0.8	45
75-84	444	29,447	8	32.0	71	0.9	122	3	12.0	35	0.6	26
85 and older	47	3,500	1	4.5	4	0.8	227	0	0.0	0	0.0	0
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 2006. A total of 587 beneficiaries who were in nursing facilities for part of their enrollment and their 5,076 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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, COLORADO, 2006

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 Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean	
				Number	Rx \$				Number	Rx \$				Number	Rx \$
All	508	67.8	5,172	0.9	\$59	71	9.5	719	0.9	\$402	472	63.0	4,574	1.1	\$39
Female															
All Females	296	76.9	3,086	0.9	58	44	11.4	454	0.9	527	270	70.1	2,761	1.0	38
Female, Disabled															
All Ages	253	92.3	2,624	0.9	60	31	11.3	340	0.8	666	217	79.2	2,231	1.1	42
64 or younger	252	92.3	2,612	0.9	60	30	11.0	328	0.8	687	216	79.1	2,219	1.1	42
65-74	1	100.0	12	0.9	91	1	100.0	12	0.8	114	1	100.0	12	0.1	1
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	43	38.7	462	0.9	44	13	11.7	114	1.0	110	53	47.7	530	0.8	22
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	18	58.1	198	1.0	61	0	0.0	0	0.0	0	16	51.6	165	1.0	41
75-84	12	33.3	131	0.6	21	6	16.7	60	1.2	142	12	33.3	121	0.8	16
85 and older	13	29.5	133	0.9	42	7	15.9	54	0.8	74	25	56.8	244	0.7	13
Male															
All Males	212	58.2	2,086	0.9	61	27	7.4	265	0.9	189	202	55.5	1,813	1.2	42
Male, Disabled															
All Ages	193	65.0	1,899	1.0	62	17	5.7	165	1.0	233	174	58.6	1,531	1.2	44
64 or younger	192	65.1	1,894	1.0	62	17	5.8	165	1.0	233	173	58.6	1,526	1.2	44
65-74	1	50.0	5	0.4	26	0	0.0	0	0.0	0	1	50.0	5	0.2	1
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	19	28.4	187	0.7	46	10	14.9	100	0.9	115	28	41.8	282	0.7	30
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	8	40.0	81	0.8	55	5	25.0	50	0.7	109	8	40.0	84	0.6	26
75-84	8	32.0	95	0.6	37	4	16.0	46	1.1	123	15	60.0	177	0.7	29
85 and older	3	13.6	11	0.9	56	1	4.5	4	0.8	111	5	22.7	21	1.3	52
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 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.
 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 2006. A total of 587 beneficiaries who were in nursing facilities for part of their enrollment and their 5,076 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 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, COLORADO, 2006

Beneficiary Characteristics	ANTIDIABETIC					ANTIHYPERTENSIVE					ANTIASTHMATIC				
	Number of Users	Users as %	Number of	Mean	Mean Rx \$	Number of Users	Users as %	Number of	Mean	Mean Rx \$	Number of Users	Users as %	Number of	Mean	Mean Rx \$
		of All-Year Nursing Facility Residents					Benefit Months Among Users					of Rx			
All	340	45.4	3,332	1.0	\$54	225	30.0	2,211	0.8	\$70	261	34.8	2,680	0.6	\$51
Female															
All Females	184	47.8	1,828	1.0	51	120	31.2	1,167	0.8	71	153	39.7	1,685	0.6	50
Female, Disabled															
All Ages	149	54.4	1,481	1.1	56	105	38.3	1,031	0.8	71	137	50.0	1,511	0.6	51
64 or younger	149	54.6	1,481	1.1	56	105	38.5	1,031	0.8	71	137	50.2	1,511	0.6	51
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	35	31.5	347	0.8	31	15	13.5	136	1.0	71	16	14.4	174	0.4	40
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	15	48.4	145	0.8	39	9	29.0	86	1.1	76	11	35.5	129	0.4	32
75-84	8	22.2	85	0.7	20	3	8.3	26	0.9	56	3	8.3	30	0.1	4
85 and older	12	27.3	117	0.8	29	3	6.8	24	0.8	67	2	4.5	15	1.5	174
Male															
All Males	156	42.9	1,504	1.0	58	105	28.8	1,044	0.8	69	108	29.7	995	0.6	54
Male, Disabled															
All Ages	134	45.1	1,278	1.1	62	95	32.0	959	0.8	69	99	33.3	937	0.6	56
64 or younger	132	44.7	1,270	1.1	62	94	31.9	955	0.8	69	99	33.6	937	0.6	56
65-74	2	100.0	8	0.6	24	1	50.0	4	1.0	111	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	22	32.8	226	0.9	36	10	14.9	85	0.9	73	9	13.4	58	0.4	19
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	13	65.0	127	1.0	48	5	25.0	44	0.9	68	2	10.0	7	0.9	77
75-84	9	36.0	99	0.8	21	5	20.0	41	0.9	79	4	16.0	42	0.3	3
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	13.6	9	0.4	48
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 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.
 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 2006. A total of 587 beneficiaries who were in nursing facilities for part of their enrollment and their 5,076 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 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, COLORADO, 2006

Beneficiary Characteristics	ANTIVIRAL					MIGRAINE PRODUCTS					All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		
All	68	9.1	728	0.3	\$182	79	10.5	831	1.0	\$158	749	6,820
Female												
All Females	42	10.9	457	0.2	41	43	11.2	444	1.0	159	385	3,602
Female, Disabled												
All Ages	30	10.9	334	0.2	46	39	14.2	415	1.0	163	274	2,620
64 or younger	29	10.6	322	0.2	48	39	14.3	415	1.0	163	273	2,608
65-74	1	100.0	12	0.1	8	0	0.0	0	0.0	0	1	12
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	12	10.8	123	0.2	27	4	3.6	29	0.9	100	111	982
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	2	6.5	23	0.1	5	2	6.5	16	1.3	150	31	281
75-84	3	8.3	25	0.2	3	1	2.8	11	0.5	39	36	309
85 and older	7	15.9	75	0.3	42	1	2.3	2	1.0	33	44	392
Male												
All Males	26	7.1	271	0.5	421	36	9.9	387	0.9	156	364	3,218
Male, Disabled												
All Ages	21	7.1	218	0.7	523	33	11.1	361	1.0	166	297	2,634
64 or younger	21	7.1	218	0.7	523	33	11.2	361	1.0	166	295	2,625
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	9
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	5	7.5	53	0.1	3	3	4.5	26	0.3	16	67	584
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	0	0.0	0	0.0	0	2	10.0	15	0.3	19	20	190
75-84	5	20.0	53	0.1	3	1	4.0	11	0.4	11	25	252
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	22	142
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 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 2006. A total of 587 beneficiaries who were in nursing facilities for part of their enrollment and their 5,076 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 2006. 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 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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}
COLORADO, 2006

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	33,742	7.4	0.3	136,430	\$6	\$2,920,475	\$21	1.6	458,139	
Age										
5 and younger	8,795	5.7	0.1	19,119	3	453,853	24	2.3	153,411	
6-14	6,361	5.1	0.1	14,918	3	357,683	24	1.1	124,039	
15-20	3,571	6.4	0.2	10,754	5	296,458	28	1.2	56,135	
21-44	8,499	8.7	0.4	43,557	9	890,275	20	1.5	98,064	
45-64	5,865	26.1	2.0	44,750	39	874,284	20	1.8	22,468	
65-74	378	17.5	0.9	1,912	14	31,192	16	1.4	2,157	
75-84	212	16.6	0.8	1,077	10	12,563	12	1.2	1,278	
85 and older	60	10.6	0.6	341	7	4,143	12	1.9	566	
Unknown	1	4.8	0.1	2	1	24	12	4.7	21	
Basis of Eligibility^c										
Aged	627	16.5	0.8	3,189	12	45,665	14	1.3	3,800	
Disabled	9,635	23.5	1.8	75,441	43	1,750,530	23	1.7	41,041	
Adults	6,461	7.1	0.3	26,005	5	452,799	17	1.6	91,504	
Children	16,933	5.3	0.1	31,373	2	666,210	21	1.2	321,533	
Unknown	86	33.0	1.6	422	20	5,271	12	1.1	261	
Gender										
Female	20,890	7.9	0.3	89,187	7	1,874,557	21	1.7	263,015	
Male	12,852	6.6	0.2	47,243	5	1,045,918	22	1.3	195,122	
Unknown	0	0.0	0.0	0	0	0	0	0.0	2	
Race										
White	11,784	8.7	0.4	53,067	9	1,177,575	22	1.5	135,747	
African American	1,249	4.1	0.1	3,956	3	90,679	23	0.9	30,393	
Other/unknown	20,709	7.1	0.3	79,407	6	1,652,221	21	1.6	291,999	
Use of Nursing Facilities^d										
Entire year	379	50.6	5.3	3,973	99	73,972	19	1.6	749	
Part year	357	60.8	5.2	3,070	94	55,355	18	1.9	587	
None	33,006	7.2	0.3	129,387	6	2,791,148	22	1.6	456,803	
Maintenance Assistance Status										
Cash	20,372	9.3	0.5	98,113	10	2,075,789	21	1.6	217,941	
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0	
Poverty related	8,263	4.6	0.1	14,508	2	306,083	21	1.4	180,528	
Other/unknown	5,107	8.6	0.4	23,809	9	538,603	23	1.3	59,670	

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 2006.

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}
 COLORADO, 2006

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	0.0	\$1	\$21	\$0	\$0	3,410,228
Age						
5 and younger	0.0	0	24	0	0	1,134,368
6-14	0.0	0	24	0	0	964,697
15-20	0.0	1	28	0	0	420,656
21-44	0.1	1	20	0	1	684,195
45-64	0.3	5	20	0	3	173,402
65-74	0.1	2	16	0	1	17,678
75-84	0.1	1	12	0	1	10,946
85 and older	0.1	1	12	0	0	4,165
Unknown	0.0	0	12	0	0	121
Basis of Eligibility^c						
Aged	0.1	1	14	0	1	31,845
Disabled	0.2	5	23	0	3	350,705
Adults	0.0	1	17	0	0	617,238
Children	0.0	0	21	0	0	2,408,194
Unknown	0.2	2	12	0	2	2,246
Gender						
Female	0.0	1	21	0	0	1,947,570
Male	0.0	1	22	0	0	1,462,634
Unknown	0.0	0	0	0	0	24
Race						
White	0.0	1	22	0	0	1,063,605
African American	0.0	0	23	0	0	226,376
Other/unknown	0.0	1	21	0	0	2,120,247
Use of Nursing Facilities^d						
Entire year	0.6	11	19	0	6	6,820
Part year	0.6	11	18	0	7	5,076
None	0.0	1	22	0	0	3,398,332
Maintenance Assistance Status						
Cash	0.1	1	21	0	1	1,639,318
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	0	21	0	0	1,259,954
Other/unknown	0.0	1	23	0	0	510,956

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 2006.

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}
COLORADO, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a		Number Rx as a	
				Percentage of All Part D Excluded Rx \$	Total Number Rx. \$ per Rx	Percentage of All Part D Excluded Rx	
All	36,944	\$79	\$2,920,475	100.0	136,430	\$21	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	161	14	2,247	0.1	268	8	0.2
Cough and cold medications	17,160	32	556,563	19.1	28,001	20	20.5
Vitamins and minerals	3,244	133	431,265	14.8	21,141	20	15.5
Non-prescription drugs	1,933	55	105,973	3.6	7,095	15	5.2
Barbiturates	527	61	32,091	1.1	3,915	8	2.9
Benzodiazepines	12,663	100	1,262,879	43.2	69,321	18	50.8
Other Part D Excl Rx Drugs	1,256	422	529,457	18.1	6,689	79	4.9

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 2006. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2006. 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 Medicaid 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, COLORADO, 2006

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	476,925	3,985	44,526	93,758	334,395	261	4,109,362	39,114	455,720	714,415	2,897,867	2,246
Age												
5 and younger	158,660	0	2,777	0	155,883	0	1,356,619	0	27,740	0	1,328,879	0
6-14	129,922	0	6,114	1	123,807	0	1,178,444	0	64,669	4	1,113,771	0
15-20	58,496	0	5,067	1	53,428	0	499,283	0	51,050	3	448,230	0
21-44	101,214	0	14,032	85,888	1,268	26	806,621	0	143,550	655,909	6,932	230
45-64	24,416	0	16,350	7,834	2	230	227,996	0	167,716	58,269	11	2,000
65-74	2,276	2,074	184	13	0	5	22,048	20,965	983	84	0	16
75-84	1,333	1,328	2	3	0	0	13,364	13,334	12	18	0	0
85 and older	585	583	0	2	0	0	4,832	4,815	0	17	0	0
Unknown	23	0	0	16	7	0	155	0	0	111	44	0
Gender												
Female	273,525	2,516	23,646	77,558	169,544	261	2,344,205	24,775	244,382	607,018	1,465,784	2,246
Male	203,398	1,469	20,879	16,200	164,850	0	1,765,133	14,339	211,326	107,397	1,432,071	0
Unknown	2	0	1	0	1	0	24	0	12	0	12	0
Race												
White	142,773	1,160	16,806	22,941	101,810	56	1,254,667	11,010	180,792	168,587	893,765	513
African American	31,850	93	2,415	4,040	25,302	0	295,661	952	25,747	32,502	236,460	0
Other/unknown	302,302	2,732	25,305	66,777	207,283	205	2,559,034	27,152	249,181	513,326	1,767,642	1,733
Use of Nursing Facilities^c												
Entire year	786	183	603	0	0	0	7,755	1,734	6,021	0	0	0
Part year	618	110	505	2	0	1	6,104	999	5,079	20	0	6
None	475,521	3,692	43,418	93,756	334,395	260	4,095,503	36,381	444,620	714,395	2,897,867	2,240
Maintenance Assistance Status												
Cash	227,629	3,513	39,429	66,866	117,821	0	2,018,465	35,703	406,550	511,646	1,064,566	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	187,262	12	2	12,355	174,632	261	1,503,685	119	24	75,927	1,425,369	2,246
Other/unknown	62,034	460	5,095	14,537	41,942	0	587,212	3,292	49,146	126,842	407,932	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	343,315	2,740	29,595	71,581	239,138	261	2,748,114	25,127	287,002	500,071	1,933,668	2,246
FFS part year, with Rx claims	47,732	611	7,836	11,202	28,083	0	520,890	7,052	90,915	117,010	305,913	0
FFS part year, no Rx claims	67,092	449	3,610	8,721	54,312	0	685,961	4,953	40,150	82,011	558,847	0
MC all year, with Rx claims	153	0	14	15	124	0	923	0	81	65	777	0
MC all year, no Rx claims	18,633	185	3,471	2,239	12,738	0	153,474	1,982	37,572	15,258	98,662	0

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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, COLORADO, 2006

	Beneficiaries and		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Benefit Months in Cell J 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	476,925	4,109,362	458,139	3,410,228	0	699,134
Fee-for-service (FFS) all year	343,315	2,748,114	343,315	2,748,114	0	0
FFS part year, with Rx claims	47,732	520,890	47,732	305,694	0	215,196
FFS part year, with no Rx claims	67,092	685,961	67,092	356,420	0	329,541
Managed care (MC) all year, with Rx claims	153	923	0	0	0	923
MC all year, with no Rx claims	18,633	153,474	0	0	0	153,474

Source: Data for this table are from the MAX 2006 file for Colorado, released by CMS in 9/2009. This table was produced on 03/22/2010.

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 Medicaid Beneficiaries