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

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TABLE ND.2  
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>140,271</b>	<b>3,336</b>	<b>29,733</b>	<b>37,850</b>	<b>69,096</b>	<b>256</b>	<b>633,363</b>	<b>32,224</b>	<b>304,834</b>	<b>95,697</b>	<b>198,001</b>	<b>2,607</b>
<b>Age</b>												
5 and younger	24,935	0	0	0	24,935	0	65,479	0	0	0	65,479	0
6-14	25,484	0	1	1	25,482	0	74,968	0	12	1	74,955	0
15-20	19,242	1	937	1,715	16,589	0	63,796	4	8,018	3,928	51,846	0
21-44	45,317	0	11,278	31,916	2,062	61	201,859	0	116,582	79,082	5,668	527
45-64	21,850	2	17,429	4,205	28	186	194,269	16	179,569	12,630	53	2,001
65-74	1,871	1,763	87	12	0	9	18,236	17,463	641	53	0	79
75-84	1,065	1,063	1	1	0	0	10,302	10,287	12	3	0	0
85 and older	507	507	0	0	0	0	4,454	4,454	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	82,773	2,317	16,379	29,130	34,692	255	370,734	22,549	172,867	74,742	97,972	2,604
Male	57,498	1,019	13,354	8,720	34,404	1	262,629	9,675	131,967	20,955	100,029	3
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	55,765	1,360	13,487	15,935	24,797	186	263,953	12,844	136,722	39,929	72,511	1,947
African American	30,302	562	6,734	7,483	15,488	35	141,408	5,366	68,518	20,662	46,504	358
Other/unknown	54,204	1,414	9,512	14,432	28,811	35	228,002	14,014	99,594	35,106	78,986	302
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	1,283	401	856	2	24	0	13,545	4,033	9,234	3	275	0
Part year	1,362	166	1,162	13	20	1	13,695	1,626	11,812	93	152	12
None	137,626	2,769	27,715	37,835	69,052	255	606,123	26,565	283,788	95,601	197,574	2,595
<b>Maintenance Assistance Status</b>												
Cash	68,968	431	5,795	26,016	36,726	0	239,913	4,913	64,426	70,564	100,010	0
Medically needy	5,487	343	2,458	777	1,909	0	29,745	2,568	19,160	2,149	5,868	0
Poverty-related	31,967	16	46	8,240	23,409	256	85,671	93	300	16,611	66,060	2,607
Other/unknown	33,849	2,546	21,434	2,817	7,052	0	278,034	24,650	220,948	6,373	26,063	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	55,680	3,333	29,180	9,861	13,053	253	421,484	32,212	301,558	30,063	55,059	2,592
FFS part year, with Rx claims	16,833	2	411	7,155	9,262	3	52,611	9	2,682	20,869	29,036	15
FFS part year, no Rx claims	67,758	1	142	20,834	46,781	0	159,268	3	594	44,765	113,906	0

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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.

TABLE ND.3  
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ <sup>c</sup>	Rx \$ as a Percentage of All Medicaid		Number of Beneficiaries
						FFS \$ <sup>d</sup>		
<b>All</b>	<b>34.5</b>	<b>11.4</b>	<b>\$1,094</b>	<b>\$96</b>	<b>\$7,135</b>	<b>15.3</b>		<b>140,271</b>
<b>Age</b>								
5 and younger	14.9	0.4	18	50	2,879	0.6		24,935
6-14	15.3	1.1	110	99	2,165	5.1		25,484
15-20	23.7	2.2	229	105	3,661	6.3		19,242
21-44	37.1	9.9	1,068	108	8,147	13.1		45,317
45-64	77.3	44.4	4,163	94	17,364	24.0		21,850
65-74	76.5	31.9	2,245	70	13,623	16.5		1,871
75-84	73.7	27.5	1,655	60	14,247	11.6		1,065
85 and older	65.5	21.4	1,065	50	27,907	3.8		507
Unknown	0.0	0.0	0	0	0	0.0		0
<b>Basis of Eligibility<sup>e</sup></b>								
Aged	74.2	29.1	1,886	65	16,140	11.7		3,336
Disabled	85.3	46.0	4,565	99	22,516	20.3		29,733
Adults	23.4	1.6	126	77	2,292	5.5		37,850
Children	16.7	1.0	90	93	2,704	3.3		69,096
Unknown	81.3	20.2	2,061	102	15,423	13.4		256
<b>Gender</b>								
Female	36.2	12.2	1,088	89	6,537	16.6		82,773
Male	32.2	10.2	1,103	108	7,996	13.8		57,498
Unknown	0.0	0.0	0	0	0	0.0		0
<b>Race</b>								
White	37.7	14.0	1,316	94	8,880	14.8		55,765
African American	35.0	10.7	1,081	101	7,323	14.8		30,302
Other/unknown	31.0	9.2	875	96	5,234	16.7		54,204
<b>Use of Nursing Facilities<sup>f</sup></b>								
Entire year	87.6	83.2	7,498	90	94,810	7.9		1,283
Part year	95.5	82.1	7,546	92	73,295	10.3		1,362
None	33.4	10.0	971	97	5,663	17.1		137,626
<b>Maintenance Assistance Status</b>								
Cash	25.3	6.0	563	95	4,039	13.9		68,968
Medically needy	50.1	16.6	1,636	99	8,883	18.4		5,487
Poverty related	18.0	0.9	85	89	3,256	2.6		31,967
Other/unknown	66.4	31.5	3,043	97	16,823	18.1		33,849

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Number of Rx, Percentage with:							Mean \$, All Medicaid FFS \$ <sup>d</sup>	Number	
			Rx \$ as a Percentage of All Medicaid FFS \$ <sup>c</sup>	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
<b>All</b>	<b>2.5</b>	<b>\$242</b>	<b>15.3</b>	<b>65.5</b>	<b>15.1</b>	<b>4.8</b>	<b>7.7</b>	<b>5.0</b>	<b>1.9</b>	<b>\$1,580</b>	<b>140,271</b>	<b>633,363</b>
<b>Age</b>												
5 and younger	0.1	7	0.6	85.1	12.7	1.6	0.6	0.1	0.0	1,096	24,935	65,479
6-14	0.4	38	5.1	84.7	11.1	2.1	1.6	0.4	0.1	736	25,484	74,968
15-20	0.7	69	6.3	76.3	16.3	3.2	3.0	1.0	0.2	1,104	19,242	63,796
21-44	2.2	240	13.1	62.9	17.8	5.7	8.1	4.1	1.5	1,829	45,317	201,859
45-64	5.0	468	24.0	22.7	14.5	9.7	24.0	20.5	8.5	1,953	21,850	194,269
65-74	3.3	230	16.5	23.5	22.5	12.5	24.4	12.9	4.2	1,398	1,871	18,236
75-84	2.8	171	11.6	26.3	23.0	12.9	23.4	11.6	2.8	1,473	1,065	10,302
85 and older	2.4	121	3.8	34.5	25.6	9.3	17.9	9.9	2.8	3,177	507	4,454
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	3.0	195	11.7	25.8	23.4	12.3	23.0	12.0	3.5	1,671	3,336	32,224
Disabled	4.5	445	20.3	14.7	19.7	11.1	26.0	20.3	8.2	2,196	29,733	304,834
Adults	0.6	50	5.5	76.6	15.1	3.9	3.3	0.9	0.2	906	37,850	95,697
Children	0.3	31	3.3	83.3	12.6	2.1	1.5	0.4	0.1	944	69,096	198,001
Unknown	2.0	202	13.4	18.8	37.5	15.2	23.0	5.5	0.0	1,515	256	2,607
<b>Gender</b>												
Female	2.7	243	16.6	63.8	15.8	4.9	8.0	5.4	2.2	1,459	82,773	370,734
Male	2.2	242	13.8	67.8	14.1	4.6	7.4	4.6	1.6	1,751	57,498	262,629
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	2.9	278	14.8	62.3	15.0	5.2	8.7	6.1	2.7	1,876	55,765	263,953
African American	2.3	232	14.8	65.0	16.3	4.9	7.6	4.6	1.7	1,569	30,302	141,408
Other/unknown	2.2	208	16.7	69.0	14.5	4.3	6.8	4.2	1.2	1,244	54,204	228,002
<b>Use of Nursing Facilities<sup>f</sup></b>												
Entire year	7.9	710	7.9	12.4	8.8	3.5	15.0	31.5	28.8	8,981	1,283	13,545
Part year	8.2	750	10.3	4.5	7.5	6.4	21.7	33.1	26.9	7,289	1,362	13,695
None	2.3	220	17.1	66.6	15.2	4.8	7.5	4.5	1.4	1,286	137,626	606,123
<b>Maintenance Assistance Status</b>												
Cash	1.7	162	13.9	74.7	13.8	3.5	4.5	2.6	1.0	1,161	68,968	239,913
Medically needy	3.1	302	18.4	49.9	16.8	7.4	13.7	9.1	3.0	1,639	5,487	29,745
Poverty related	0.4	32	2.6	82.0	13.6	2.4	1.6	0.4	0.1	1,215	31,967	85,671
Other/unknown	3.8	371	18.1	33.6	19.0	9.2	19.0	13.8	5.4	2,048	33,849	278,034

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 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
<b>All</b>	<b>2.5</b>	<b>\$242</b>	<b>\$96</b>	<b>1.0</b>	<b>\$185</b>	<b>\$182</b>	<b>0.1</b>	<b>\$15</b>	<b>\$148</b>	<b>1.4</b>	<b>\$42</b>	<b>\$30</b>
<b>Age</b>												
5 and younger	0.1	7	50	0.0	5	139	0.0	0	93	0.1	2	19
6-14	0.4	38	99	0.2	28	174	0.0	1	86	0.2	7	33
15-20	0.7	69	105	0.3	57	203	0.0	3	101	0.4	10	28
21-44	2.2	240	108	0.9	188	210	0.1	13	147	1.2	38	31
45-64	5.0	468	94	2.0	352	176	0.2	31	157	2.8	85	30
65-74	3.3	230	70	1.4	175	126	0.1	13	105	1.8	43	24
75-84	2.8	171	60	1.2	130	107	0.1	10	81	1.5	31	21
85 and older	2.4	121	50	0.9	87	95	0.1	9	81	1.4	26	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	3.0	195	65	1.3	148	117	0.1	11	94	1.6	36	22
Disabled	4.5	445	99	1.8	341	188	0.2	27	152	2.5	77	31
Adults	0.6	50	77	0.2	35	169	0.0	5	187	0.4	11	25
Children	0.3	31	93	0.1	24	180	0.0	1	90	0.2	5	28
Unknown	2.0	202	102	0.8	150	193	0.1	17	198	1.1	35	31
<b>Gender</b>												
Female	2.7	243	89	1.1	184	170	0.1	16	143	1.5	44	28
Male	2.2	242	108	0.9	188	203	0.1	13	156	1.2	40	33
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	2.9	278	94	1.2	204	175	0.1	20	159	1.7	54	32
African American	2.3	232	101	0.9	182	202	0.1	12	143	1.3	37	29
Other/unknown	2.2	208	96	0.9	165	181	0.1	10	131	1.2	32	27
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	7.9	710	90	2.9	535	182	0.4	43	120	4.6	132	29
Part year	8.2	750	92	3.0	557	188	0.3	51	167	4.9	142	29
None	2.3	220	97	0.9	169	182	0.1	13	149	1.3	38	30
<b>Maintenance Assistance Status</b>												
Cash	1.7	162	95	0.7	125	178	0.1	9	145	0.9	28	29
Medically needy	3.1	302	99	1.2	222	184	0.1	22	177	1.7	54	31
Poverty related	0.4	32	89	0.1	24	171	0.0	2	153	0.2	5	27
Other/unknown	3.8	371	97	1.5	283	184	0.2	23	146	2.1	64	30

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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 Connecticut, 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.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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users <sup>e</sup>				
	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
		Brand-Name	Brand-Name			Brand-Name	Brand-Name			Brand-Name	Brand-Name						
Anti-infective Agents	0.5	0.2	0.0	0.3	\$101	\$89	\$1	\$11	\$224	\$522	\$152	\$40	95,921	\$21,503,459	23,621	16.8	212,235
Biologicals	0.1	0.1	0.0	0.0	112	99	13	0	756	759	2,222	40	552	417,491	377	0.3	3,732
Antineoplastic Agents	0.5	0.2	0.0	0.3	146	125	0	21	291	734	168	63	4,406	1,279,967	848	0.6	8,779
Endocrine/Metabolic Drugs	0.9	0.4	0.0	0.5	64	49	2	12	69	139	83	23	140,353	9,675,860	15,711	11.2	152,105
Cardiovascular Agents	1.5	0.6	0.1	0.9	74	50	6	18	49	85	101	20	274,774	13,342,166	17,302	12.3	179,844
Respiratory Agents	0.7	0.4	0.0	0.3	55	46	2	6	74	117	74	19	116,926	8,620,340	17,322	12.3	158,151
Gastrointestinal Agents	0.7	0.5	0.0	0.2	80	69	6	6	116	150	537	25	102,701	11,886,871	14,313	10.2	147,840
Genitourinary Agents	0.4	0.2	0.0	0.2	27	20	3	4	65	86	95	26	18,322	1,184,948	4,415	3.1	43,370
CNS Drugs	1.7	0.8	0.1	0.8	195	159	9	27	115	197	104	34	380,683	43,946,930	22,685	16.2	225,780
Stimulants/Anti-obesity/Anorexia	0.7	0.5	0.0	0.2	83	74	2	7	120	147	157	41	8,596	1,033,055	1,673	1.2	12,457
Miscellaneous Psychological/ Neurological Agents	0.6	0.6	0.0	0.0	236	235	0	0	371	372	0	57	5,411	2,007,250	787	0.6	8,522
Analgesics and Anesthetics	0.8	0.1	0.0	0.6	58	22	17	19	77	217	365	32	159,262	12,257,216	21,940	15.6	211,282
Neuromuscular Agents	1.1	0.4	0.0	0.7	88	57	2	28	83	156	90	43	161,616	13,468,339	14,806	10.6	153,650
Nutritional Products	0.6	0.0	0.1	0.5	18	3	1	14	32	59	15	32	24,627	783,614	5,325	3.8	43,598
Hematological Agents	0.7	0.2	0.0	0.5	142	128	0	13	192	665	45	24	34,487	6,606,263	4,478	3.2	46,679
Topical Products	0.4	0.1	0.0	0.2	25	17	1	7	64	129	61	29	63,081	4,018,528	16,410	11.7	158,768
Miscellaneous Products	0.4	0.2	0.0	0.2	96	82	2	12	253	418	242	68	4,979	1,259,705	1,534	1.1	13,141
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	32	0	0	0	143	0	0	0	1,484	212,194	612	0.4	6,716
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>1,598,181</b>	<b>153,504,196</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.  
 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 Connecticut, 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.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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Top 10 Drug Groups	Total Medicaid Rx \$	Users		Among Users				
		Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
ANTIPSYCHOTICS	\$30,808,663	15,806	11.3	166,214	0.9	\$216	\$185	
ANTIVIRAL	17,917,542	4,799	3.4	50,556	0.6	567	354	
ANTICONVULSANT	12,095,806	13,413	9.6	142,180	0.8	102	85	
ANTIDEPRESSANTS	9,081,937	22,102	15.8	227,850	0.7	61	40	
ULCER DRUGS	9,006,179	13,482	9.6	143,238	0.5	119	63	
ANALGESICS - Narcotic	8,021,437	24,024	17.1	244,644	0.4	79	33	
ANTIDIABETIC	6,882,447	12,651	9.0	135,081	0.7	75	51	
ANTIHYPERLIPIDEMIC	6,425,356	9,910	7.1	108,569	0.6	95	59	
ANTIASTHMATIC	6,377,958	19,443	13.9	185,345	0.4	83	34	
HEMATOPOIETIC AGENTS	3,291,799	3,938	2.8	39,925	0.4	189	82	
Total	109,909,124	139,568	n.a.	1,443,602	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS					ANTIVIRAL				
	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	
<b>All</b>	<b>871,661</b>	<b>\$109,909,124</b>	<b>15,806</b>	<b>11.3</b>	<b>166,214</b>	<b>0.9</b>	<b>\$185</b>	<b>4,799</b>	<b>3.4</b>	<b>50,556</b>	<b>0.6</b>	<b>\$354</b>	
<b>Female</b>													
All Females	544,506	63,273,350	8,925	10.8	94,943	0.8	166	2,583	3.1	27,051	0.6	312	
<b>Female, Disabled</b>													
All Ages	474,473	56,449,879	7,524	45.9	84,247	0.8	171	2,145	13.1	24,198	0.6	328	
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
15-20	3,044	372,224	124	30.5	1,221	0.6	142	12	3.0	107	0.3	74	
21-44	136,900	17,699,447	3,076	54.4	34,170	0.8	163	868	15.3	9,792	0.6	313	
45-64	333,672	38,286,660	4,315	42.0	48,766	0.9	177	1,264	12.3	14,292	0.6	340	
65-74	857	91,548	9	18.4	90	0.6	242	1	2.0	7	0.1	2	
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
<b>Female, Other Eligibles</b>													
All Ages	70,033	6,823,471	1,401	2.1	10,696	0.7	127	438	0.7	2,853	0.4	180	
5 and younger	1,054	71,093	1	0.0	2	0.5	100	9	0.1	22	0.4	15	
6-14	4,622	518,870	106	0.9	691	0.7	149	7	0.1	42	0.4	153	
15-20	6,655	868,453	309	3.0	2,142	0.8	176	69	0.7	357	0.4	113	
21-44	18,333	1,747,863	549	2.1	3,484	0.6	110	231	0.9	1,311	0.5	214	
45-64	9,440	984,518	173	6.3	1,402	0.5	85	74	2.7	577	0.5	242	
65-74	18,965	1,833,510	166	13.5	1,942	0.8	154	28	2.3	323	0.3	118	
75-84	7,799	587,731	56	7.8	608	0.6	90	10	1.4	120	0.2	61	
85 and older	3,165	211,433	41	10.8	425	0.5	51	10	2.6	101	0.1	7	
<b>Male</b>													
All Males	327,155	46,635,774	6,881	12.0	71,271	0.9	211	2,216	3.9	23,505	0.7	403	
<b>Male, Disabled</b>													
All Ages	293,347	42,528,376	5,912	44.3	64,385	0.9	214	2,084	15.6	22,610	0.7	408	
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
6-14	55	3,704	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
15-20	4,460	766,540	187	35.2	1,830	0.9	251	5	0.9	37	0.3	168	
21-44	104,872	16,143,156	2,955	52.6	32,022	0.9	220	630	11.2	6,597	0.7	404	
45-64	183,475	25,562,806	2,763	38.6	30,449	0.9	204	1,446	20.2	15,940	0.7	411	
65-74	485	52,170	7	18.4	84	1.6	258	3	7.9	36	0.5	4	
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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS					ANTIVIRAL			
	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
<b>Male, Other Eligibles</b>												
All Ages	33,808	4,107,398	969	2.2	6,886	0.8	190	132	0.3	895	0.5	279
5 and younger	1,454	95,560	8	0.1	18	0.7	178	6	0.0	11	0.5	11
6-14	8,609	1,182,090	320	2.4	2,175	0.8	210	14	0.1	95	0.2	24
15-20	7,696	1,122,697	409	5.2	2,992	0.9	199	34	0.4	225	0.4	251
21-44	3,196	360,787	115	1.5	545	0.9	150	37	0.5	185	0.5	292
45-64	2,198	367,324	27	1.6	166	0.9	242	27	1.6	231	0.8	556
65-74	6,358	615,067	56	10.1	635	0.7	178	10	1.8	100	0.2	24
75-84	3,603	305,614	24	6.9	267	0.5	53	4	1.2	48	0.3	115
85 and older	694	58,259	10	7.9	88	0.4	45	0	0.0	0	0.0	0
<b>Unknown</b>	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 Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIDEPRESSANTS					ULCER DRUGS				
	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
<b>All</b>	<b>13,413</b>	<b>9.6</b>	<b>142,180</b>	<b>0.8</b>	<b>\$85</b>	<b>22,102</b>	<b>15.8</b>	<b>227,850</b>	<b>0.7</b>	<b>\$40</b>	<b>13,482</b>	<b>9.6</b>	<b>143,238</b>	<b>0.5</b>	<b>\$63</b>
<b>Female</b>															
All Females	8,165	9.9	86,821	0.8	80	14,912	18.0	154,464	0.6	41	8,945	10.8	96,059	0.5	61
<b>Female, Disabled</b>															
All Ages	6,727	41.1	75,424	0.8	80	12,038	73.5	134,663	0.7	41	7,115	43.4	80,210	0.5	63
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	117	28.8	1,188	0.7	92	103	25.4	1,034	0.4	25	52	12.8	558	0.3	41
21-44	2,603	46.0	29,194	0.9	94	3,977	70.3	44,403	0.6	39	1,754	31.0	19,923	0.5	54
45-64	4,000	39.0	44,976	0.8	70	7,939	77.3	89,048	0.7	43	5,286	51.5	59,533	0.5	66
65-74	7	14.3	66	1.0	115	19	38.8	178	0.5	35	23	46.9	196	0.5	72
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>															
All Ages	1,438	2.2	11,397	0.7	79	2,874	4.3	19,801	0.6	35	1,830	2.8	15,849	0.5	52
5 and younger	25	0.2	127	0.6	60	0	0.0	0	0.0	0	96	0.8	394	0.5	49
6-14	176	1.4	1,728	0.9	134	85	0.7	566	0.6	31	97	0.8	912	0.5	61
15-20	230	2.2	1,805	0.9	142	309	3.0	1,769	0.6	35	116	1.1	902	0.5	59
21-44	568	2.2	3,445	0.6	66	1,484	5.6	8,160	0.5	35	508	1.9	3,044	0.4	40
45-64	180	6.5	1,387	0.6	51	471	17.1	3,455	0.6	40	262	9.5	2,104	0.4	50
65-74	157	12.8	1,801	0.7	46	306	24.9	3,518	0.6	36	431	35.1	4,958	0.5	58
75-84	76	10.6	816	0.5	24	130	18.1	1,413	0.5	24	236	32.9	2,643	0.5	52
85 and older	26	6.8	288	0.7	19	89	23.4	920	0.6	26	84	22.1	892	0.6	56
<b>Male</b>															
All Males	5,248	9.1	55,359	0.9	93	7,190	12.5	73,386	0.7	38	4,537	7.9	47,179	0.6	67
<b>Male, Disabled</b>															
All Ages	4,462	33.4	48,878	0.9	91	6,249	46.8	67,657	0.7	39	3,719	27.8	40,373	0.6	67
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	2	200.0	24	1.5	52	0	0.0	0	0.0	0	1	100.0	12	1.6	205
15-20	124	23.4	1,286	1.0	139	114	21.5	1,008	0.7	40	46	8.7	439	0.6	73
21-44	2,072	36.9	22,793	0.9	107	2,409	42.9	25,965	0.7	40	1,179	21.0	12,847	0.6	66
45-64	2,257	31.5	24,704	0.8	74	3,720	51.9	40,619	0.7	38	2,483	34.7	26,988	0.6	67
65-74	7	18.4	71	0.7	65	6	15.8	65	0.6	50	10	26.3	87	0.6	64
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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIDEPRESSANTS					ULCER DRUGS				
	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
<b>Male, Other Eligibles</b>															
All Ages	786	1.8	6,481	0.9	113	941	2.1	5,729	0.6	32	818	1.9	6,806	0.5	68
5 and younger	20	0.2	139	1.2	142	4	0.0	38	1.1	51	111	0.9	502	0.5	34
6-14	277	2.1	2,553	0.9	137	147	1.1	954	0.7	28	153	1.2	1,574	0.7	113
15-20	248	3.2	2,078	1.0	129	312	4.0	1,838	0.6	33	101	1.3	849	0.5	62
21-44	103	1.3	463	0.7	74	227	2.9	861	0.6	38	114	1.5	492	0.4	48
45-64	53	3.2	297	0.6	47	109	6.6	506	0.6	44	68	4.1	392	0.4	46
65-74	58	10.4	649	0.8	53	86	15.5	905	0.6	30	146	26.3	1,622	0.5	57
75-84	22	6.4	251	0.7	39	39	11.3	451	0.5	25	102	29.5	1,124	0.5	55
85 and older	5	3.9	51	0.9	25	17	13.4	176	0.4	10	23	18.1	251	0.5	74
<b>Unknown</b>	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 Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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.

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIDIABETIC					ANTIHYPERLIPIDEMIC				
	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	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	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
<b>All</b>	<b>24,024</b>	<b>17.1</b>	<b>244,644</b>	<b>0.4</b>	<b>\$33</b>	<b>12,651</b>	<b>9.0</b>	<b>135,081</b>	<b>0.7</b>	<b>\$51</b>	<b>9,910</b>	<b>7.1</b>	<b>108,569</b>	<b>0.6</b>	<b>\$59</b>
<b>Female</b>															
All Females	16,136	19.5	165,381	0.4	28	8,328	10.1	90,261	0.7	52	6,284	7.6	69,686	0.6	59
<b>Female, Disabled</b>															
All Ages	12,177	74.3	138,192	0.4	31	6,716	41.0	75,582	0.7	54	5,126	31.3	57,941	0.6	60
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	103	25.4	1,087	0.2	4	11	2.7	103	0.4	30	0	0.0	0	0.0	0
21-44	3,888	68.7	44,267	0.3	29	1,009	17.8	11,440	0.7	47	610	10.8	7,026	0.6	53
45-64	8,160	79.5	92,597	0.4	33	5,663	55.2	63,715	0.7	55	4,494	43.8	50,687	0.6	61
65-74	26	53.1	241	0.4	18	33	67.3	324	0.6	46	22	44.9	228	0.6	67
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>															
All Ages	3,959	6.0	27,189	0.3	15	1,612	2.4	14,679	0.6	43	1,158	1.7	11,745	0.6	56
5 and younger	15	0.1	63	0.2	2	1	0.0	3	0.3	49	1	0.0	12	0.1	7
6-14	83	0.7	552	0.2	2	26	0.2	181	0.6	48	1	0.0	12	0.2	13
15-20	403	3.9	2,247	0.2	3	53	0.5	279	0.5	42	4	0.0	28	0.6	32
21-44	2,204	8.4	12,132	0.4	17	284	1.1	1,476	0.6	46	122	0.5	709	0.6	46
45-64	557	20.2	4,364	0.4	21	268	9.7	1,856	0.7	48	190	6.9	1,522	0.6	57
65-74	410	33.4	4,680	0.3	14	653	53.2	7,320	0.7	45	528	43.0	5,961	0.6	58
75-84	214	29.8	2,409	0.2	7	260	36.2	2,832	0.6	34	253	35.2	2,846	0.6	55
85 and older	73	19.2	742	0.4	18	67	17.6	732	0.6	34	59	15.5	655	0.6	49
<b>Male</b>															
All Males	7,888	13.7	79,263	0.5	42	4,323	7.5	44,820	0.7	49	3,626	6.3	38,883	0.6	60
<b>Male, Disabled</b>															
All Ages	6,672	50.0	71,838	0.5	44	3,593	26.9	38,904	0.7	51	3,139	23.5	34,542	0.7	60
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	83	15.6	838	0.2	8	22	4.1	191	0.6	50	6	1.1	60	0.5	57
21-44	2,204	39.2	23,662	0.4	32	698	12.4	7,420	0.7	49	615	10.9	6,902	0.7	55
45-64	4,371	61.0	47,248	0.5	51	2,862	39.9	31,196	0.7	51	2,502	34.9	27,422	0.7	61
65-74	14	36.8	90	0.4	24	11	28.9	97	0.5	26	16	42.1	158	0.6	76
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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic						ANTIDIABETIC					ANTIHYPERLIPIDEMIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of		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				Rx per Benefit Month	Mean Rx \$ per Benefit				Rx per Benefit Month	Mean Rx \$ per Benefit	
<b>Male, Other Eligibles</b>																
All Ages	1,216	2.8	7,425	0.3	20	730	1.7	5,916	0.6	40	487	1.1	4,341	0.6	59	
5 and younger	23	0.2	114	0.2	1	5	0.0	9	0.8	101	0	0.0	0	0.0	0	
6-14	117	0.9	917	0.2	2	12	0.1	57	0.7	47	3	0.0	9	0.6	69	
15-20	255	3.2	1,481	0.2	4	40	0.5	182	0.8	81	5	0.1	12	0.4	52	
21-44	468	6.0	1,786	0.5	46	134	1.7	445	0.6	44	59	0.8	275	0.4	46	
45-64	147	8.8	847	0.4	43	130	7.8	613	0.6	34	111	6.7	595	0.5	51	
65-74	112	20.1	1,221	0.3	16	244	43.9	2,736	0.6	39	187	33.6	2,079	0.6	61	
75-84	75	21.7	861	0.3	5	147	42.5	1,678	0.6	37	104	30.1	1,169	0.6	63	
85 and older	19	15.0	198	0.2	4	18	14.2	196	0.5	32	18	14.2	202	0.5	61	
<b>Unknown</b>	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 Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Beneficiary Characteristics	ANTIASTHMATIC					HEMATOPOIETIC AGENTS					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit per Month	Mean Rx \$ per Benefit per Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit per Month	Mean Rx \$ per Benefit per Month		
<b>All</b>	<b>19,443</b>	<b>13.9</b>	<b>185,345</b>	<b>0.4</b>	<b>\$34</b>	<b>3,938</b>	<b>2.8</b>	<b>39,925</b>	<b>0.4</b>	<b>\$82</b>	<b>140,271</b>	<b>633,363</b>
<b>Female</b>												
All Females	13,274	16.0	131,440	0.4	34	2,659	3.2	26,647	0.4	76	82,773	370,734
<b>Female, Disabled</b>												
All Ages	9,725	59.4	110,020	0.4	36	1,907	11.6	21,501	0.4	82	16,379	172,867
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
15-20	114	28.1	1,031	0.3	24	17	4.2	185	0.3	1	406	3,477
21-44	2,638	46.6	30,048	0.4	32	620	11.0	7,038	0.4	51	5,659	60,339
45-64	6,952	67.7	78,778	0.4	38	1,268	12.4	14,260	0.4	98	10,265	108,672
65-74	21	42.9	163	0.5	44	2	4.1	18	0.5	1	49	379
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
<b>Female, Other Eligibles</b>												
All Ages	3,549	5.3	21,420	0.4	27	752	1.1	5,146	0.4	54	66,394	197,867
5 and younger	480	3.9	1,711	0.4	22	32	0.3	141	0.4	38	12,184	31,874
6-14	735	5.9	3,452	0.4	27	19	0.2	109	0.4	22	12,402	36,042
15-20	452	4.3	2,237	0.4	27	105	1.0	495	0.3	1	10,433	30,273
21-44	1,003	3.8	5,263	0.4	23	344	1.3	1,737	0.3	12	26,290	66,869
45-64	333	12.1	2,564	0.4	28	53	1.9	477	0.3	156	2,759	10,194
65-74	330	26.9	3,769	0.4	33	84	6.8	962	0.4	136	1,228	12,347
75-84	167	23.3	1,889	0.4	30	63	8.8	702	0.5	14	718	6,943
85 and older	49	12.9	535	0.3	11	52	13.7	523	0.6	65	380	3,325
<b>Male</b>												
All Males	6,169	10.7	53,905	0.4	34	1,279	2.2	13,278	0.5	95	57,498	262,629
<b>Male, Disabled</b>												
All Ages	3,684	27.6	40,175	0.4	35	1,120	8.4	11,958	0.5	98	13,354	131,967
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
15-20	66	12.4	614	0.5	30	8	1.5	88	0.3	149	531	4,541
21-44	1,151	20.5	12,573	0.4	28	294	5.2	3,084	0.5	85	5,619	56,243
45-64	2,465	34.4	26,979	0.5	39	815	11.4	8,760	0.5	102	7,164	70,897
65-74	2	5.3	9	0.2	38	3	7.9	26	0.6	2	38	262
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Beneficiary Characteristics	ANTIASTHMATIC						HEMATOPOIETIC AGENTS						
	Number of Users	Users	Number of Benefit Months Among Users	Mean	Mean Rx \$ Benefit per Benefit Month		Number of Users	Users	Number of Benefit Months Among Users	Mean	Mean Rx \$ Benefit per Benefit Month	Number of Beneficiaries	Number of Benefit Months
		as % of All Benes		Number of				Rx per		as % of All Benes			
<b>Male, Other Eligibles</b>													
All Ages	2,485	5.6	13,730	0.4	32	159	0.4	1,320	0.4	69	44,144	130,662	
5 and younger	639	5.0	2,490	0.4	21	25	0.2	90	0.3	2	12,751	33,605	
6-14	1,016	7.8	5,433	0.4	30	23	0.2	189	0.3	13	13,081	38,914	
15-20	371	4.7	2,118	0.4	24	10	0.1	69	0.7	241	7,872	25,505	
21-44	148	1.9	570	0.4	25	9	0.1	35	0.4	194	7,749	18,408	
45-64	62	3.7	321	0.5	53	15	0.9	110	0.4	359	1,662	4,506	
65-74	133	23.9	1,495	0.4	57	29	5.2	326	0.4	17	556	5,248	
75-84	97	28.0	1,098	0.5	40	36	10.4	372	0.5	51	346	3,347	
85 and older	19	15.0	205	0.6	63	12	9.4	129	0.4	4	127	1,129	
<b>Unknown</b>	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 Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 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
<b>All</b>	<b>\$710</b>	<b>7.9</b>	<b>1,283</b>	<b>13,545</b>
<b>Age</b>				
0-64	897	9.4	880	9,498
65-74	564	7.8	105	1,160
75-84	224	4.4	105	1,005
85 and older	118	2.3	193	1,882
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	695	7.8	732	7,818
Male	731	8.0	551	5,727
Unknown	0	0.0	0	0
<b>Race</b>				
White	635	7.6	812	8,372
African American	939	8.8	277	3,012
Other/unknown	683	7.6	194	2,161
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	271	4.4	401	4,033
Disabled	922	9.6	856	9,234
Adults	672	8.0	2	3
Children	30	0.5	24	275
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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 1,362 beneficiaries who were in nursing facilities for part of their enrollment and their 13,695 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<sup>a, b, c, d, e</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users								Users				
									\$ per Rx								
	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	0.7	0.3	0.0	0.4	\$148	\$131	\$0	\$16	\$214	\$419	\$138	\$43	4,903	\$1,047,516	644	50.2	7,095
Biologicals	0.1	0.1	0.0	0.0	4	3	0	1	35	36	0	33	34	1,187	29	2.3	317
Antineoplastic Agents	0.7	0.2	0.0	0.5	70	33	0	37	106	199	0	76	239	25,439	40	3.1	366
Endocrine/Metabolic Drugs	1.4	0.6	0.0	0.8	82	64	3	15	57	108	68	19	8,346	476,009	532	41.5	5,819
Cardiovascular Agents	2.2	0.6	0.1	1.5	75	44	5	27	35	72	76	18	16,990	590,924	716	55.8	7,844
Respiratory Agents	0.8	0.5	0.0	0.3	61	53	2	6	76	109	75	20	3,650	275,871	418	32.6	4,533
Gastrointestinal Agents	1.3	0.7	0.0	0.6	113	90	7	17	90	131	406	30	9,286	834,737	683	53.2	7,362
Genitourinary Agents	0.7	0.4	0.0	0.2	45	36	4	5	64	84	77	23	2,013	128,382	253	19.7	2,830
CNS Drugs	2.4	1.1	0.1	1.1	301	251	10	40	127	220	98	35	24,398	3,088,624	943	73.5	10,269
Stimulants/Anti-obesity/Anorexia	0.8	0.5	0.0	0.2	102	98	0	4	136	191	0	16	142	19,309	18	1.4	189
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	290	290	0	0	348	348	0	0	1,048	364,523	114	8.9	1,257
Analgesics and Anesthetics	1.7	0.3	0.2	1.2	122	42	49	32	72	130	231	27	10,023	723,840	549	42.8	5,912
Neuromuscular Agents	1.7	0.5	0.0	1.2	126	68	1	57	76	151	25	49	11,601	880,934	626	48.8	6,991
Nutritional Products	0.8	0.0	0.0	0.7	17	0	0	16	22	19	12	22	2,359	50,997	288	22.4	3,078
Hematological Agents	1.4	0.3	0.0	1.1	169	152	0	17	122	523	0	15	6,404	779,184	429	33.4	4,614
Topical Products	0.6	0.2	0.1	0.3	38	22	8	9	60	119	62	27	4,985	300,657	702	54.7	7,845
Miscellaneous Products	0.3	0.1	0.0	0.2	37	28	3	6	120	322	189	28	252	30,339	72	5.6	822
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	16	0	0	0	37	0	0	0	51	1,874	12	0.9	119
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	106,724	9,620,346	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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 1,362 beneficiaries who were in nursing facilities for part of their enrollment and their 13,695 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 Connecticut, 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 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Number of Users	Users				Among 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	\$2,359,113	904	70.5	10,154	1.0	\$231	\$232	
ANTICONVULSANT	751,448	750	58.5	8,411	1.0	88	89	
ANTIVIRAL	735,952	219	17.1	2,416	0.6	470	305	
HEMATOPOIETIC AGENTS	567,741	275	21.4	2,969	0.8	244	191	
ANTIDEPRESSANTS	536,146	960	74.8	10,714	0.8	59	50	
ULCER DRUGS	530,485	642	50.0	6,924	0.8	91	77	
ANALGESICS - Narcotic	468,805	581	45.3	6,257	1.2	63	75	
ANTIDIABETIC	378,872	663	51.7	7,464	0.9	57	51	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	364,523	126	9.8	1,373	0.8	348	265	
ANTIHYPERLIPIDEMIC	266,303	320	24.9	3,685	0.9	84	72	
Total	6,959,388	5,440	n.a.	60,367	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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 1,362 beneficiaries who were in nursing facilities for part of their enrollment and their 13,695 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 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 \$
<b>All</b>	<b>55,768</b>	<b>\$6,959,388</b>	<b>904</b>	<b>70.5</b>	<b>10,154</b>	<b>1.0</b>	<b>\$232</b>	<b>750</b>	<b>58.5</b>	<b>8,411</b>	<b>1.0</b>	<b>\$89</b>
<b>Female</b>												
All Females	31,974	3,971,566	510	69.7	5,833	1.0	228	420	57.4	4,773	1.0	92
<b>Female, Disabled</b>												
All Ages	25,653	3,430,105	409	94.9	4,691	1.0	249	359	83.3	4,070	1.0	100
64 or younger	25,653	3,430,105	409	94.9	4,691	1.0	249	359	83.3	4,070	1.0	100
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>												
All Ages	6,321	541,461	101	33.6	1,142	0.8	145	61	20.3	703	1.0	50
64 or younger	13	519	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	3,161	320,370	49	73.1	579	0.9	203	32	47.8	376	1.1	72
75-84	1,370	89,430	18	26.1	203	0.9	137	15	21.7	163	0.8	28
85 and older	1,777	131,142	34	22.1	360	0.6	55	14	9.1	164	0.9	22
<b>Male</b>												
All Males	23,794	2,987,822	394	71.5	4,321	1.0	238	330	59.9	3,638	1.0	85
<b>Male, Disabled</b>												
All Ages	21,959	2,826,382	364	85.6	4,007	1.0	245	305	71.8	3,392	1.0	89
64 or younger	21,924	2,822,973	363	85.8	3,995	1.0	245	305	72.1	3,392	1.0	89
65-74	35	3,409	1	50.0	12	1.1	211	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
<b>Male, Other Eligibles</b>												
All Ages	1,835	161,440	30	23.8	314	0.8	148	25	19.8	246	0.9	40
64 or younger	30	502	0	0.0	0	0.0	0	2	13.3	13	1.0	11
65-74	1,021	102,471	20	55.6	216	0.9	186	12	33.3	120	0.9	54
75-84	657	51,215	6	16.7	72	0.6	62	7	19.4	74	0.9	30
85 and older	127	7,252	4	10.3	26	0.5	72	4	10.3	39	0.7	26
<b>Unknown</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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 1,362 beneficiaries who were in nursing facilities for part of their enrollment and their 13,695 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Beneficiary Characteristics	ANTIVIRAL					HEMATOPOIETIC AGENTS					ANTIDEPRESSANTS				
	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 \$
<b>All</b>	<b>219</b>	<b>17.1</b>	<b>2,416</b>	<b>0.6</b>	<b>\$305</b>	<b>275</b>	<b>21.4</b>	<b>2,969</b>	<b>0.8</b>	<b>\$191</b>	<b>960</b>	<b>74.8</b>	<b>10,714</b>	<b>0.8</b>	<b>\$50</b>
<b>Female</b>															
All Females	115	15.7	1,346	0.6	241	156	21.3	1,719	0.8	222	548	74.9	6,236	0.8	48
<b>Female, Disabled</b>															
All Ages	99	23.0	1,170	0.6	274	89	20.6	1,007	0.8	334	401	93.0	4,582	0.9	52
64 or younger	99	23.0	1,170	0.6	274	89	20.6	1,007	0.8	334	401	93.0	4,582	0.9	52
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
<b>Female, Other Eligibles</b>															
All Ages	16	5.3	176	0.1	19	67	22.3	712	0.8	64	147	48.8	1,654	0.7	38
64 or younger	0	0.0	0	0.0	0	1	9.1	1	1.0	5	0	0.0	0	0.0	0
65-74	7	10.4	84	0.1	33	16	23.9	190	0.7	103	64	95.5	762	0.8	44
75-84	2	2.9	24	0.1	8	20	29.0	223	0.7	4	30	43.5	340	0.6	31
85 and older	7	4.5	68	0.1	6	30	19.5	298	0.8	85	53	34.4	552	0.7	34
<b>Male</b>															
All Males	104	18.9	1,070	0.7	385	119	21.6	1,250	0.8	149	412	74.8	4,478	0.9	53
<b>Male, Disabled</b>															
All Ages	99	23.3	1,018	0.8	404	100	23.5	1,049	0.8	161	372	87.5	4,079	0.9	55
64 or younger	99	23.4	1,018	0.8	404	100	23.6	1,049	0.8	161	370	87.5	4,055	0.9	55
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	100.0	24	0.4	20
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
<b>Male, Other Eligibles</b>															
All Ages	5	4.0	52	0.1	5	19	15.1	201	0.7	87	40	31.7	399	0.7	35
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	6.7	12	1.0	27
65-74	4	11.1	40	0.1	5	4	11.1	46	0.5	77	21	58.3	193	0.8	43
75-84	1	2.8	12	0.1	6	11	30.6	112	0.7	123	12	33.3	144	0.6	34
85 and older	0	0.0	0	0.0	0	4	10.3	43	0.7	4	6	15.4	50	0.4	8
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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 1,362 beneficiaries who were in nursing facilities for part of their enrollment and their 13,695 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Beneficiary Characteristics	ULCER DRUGS					ANALGESICS - Narcotic					ANTIDIABETIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>642</b>	<b>50.0</b>	<b>6,924</b>	<b>0.8</b>	<b>\$77</b>	<b>581</b>	<b>45.3</b>	<b>6,257</b>	<b>1.2</b>	<b>\$75</b>	<b>663</b>	<b>51.7</b>	<b>7,464</b>	<b>0.9</b>	<b>\$51</b>
<b>Female</b>															
All Females	353	48.2	3,894	0.8	75	322	44.0	3,553	1.1	64	398	54.4	4,536	0.9	52
<b>Female, Disabled</b>															
All Ages	258	59.9	2,865	0.9	78	246	57.1	2,734	1.3	73	284	65.9	3,255	1.0	57
64 or younger	258	59.9	2,865	0.9	78	246	57.1	2,734	1.3	73	284	65.9	3,255	1.0	57
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
<b>Female, Other Eligibles</b>															
All Ages	95	31.6	1,029	0.7	66	76	25.2	819	0.6	34	114	37.9	1,281	0.8	41
64 or younger	2	18.2	2	1.0	61	1	9.1	1	9.0	325	1	9.1	1	1.0	68
65-74	34	50.7	385	0.8	78	29	43.3	340	0.7	33	63	94.0	754	0.9	50
75-84	22	31.9	245	0.7	59	18	26.1	205	0.5	21	27	39.1	275	0.7	32
85 and older	37	24.0	397	0.7	59	28	18.2	273	0.7	44	23	14.9	251	0.6	23
<b>Male</b>															
All Males	289	52.5	3,030	0.8	79	259	47.0	2,704	1.3	90	265	48.1	2,928	0.9	48
<b>Male, Disabled</b>															
All Ages	258	60.7	2,714	0.9	79	237	55.8	2,488	1.4	96	209	49.2	2,311	0.9	52
64 or younger	257	60.8	2,702	0.8	80	237	56.0	2,488	1.4	96	209	49.4	2,311	0.9	52
65-74	1	50.0	12	1.1	33	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
<b>Male, Other Eligibles</b>															
All Ages	31	24.6	316	0.7	75	22	17.5	216	0.4	15	56	44.4	617	0.6	35
64 or younger	0	0.0	0	0.0	0	2	13.3	24	0.2	1	0	0.0	0	0.0	0
65-74	17	47.2	173	0.8	84	9	25.0	86	0.4	17	30	83.3	319	0.7	39
75-84	10	27.8	111	0.6	58	7	19.4	84	0.6	19	24	66.7	288	0.6	31
85 and older	4	10.3	32	0.7	83	4	10.3	22	0.2	5	2	5.1	10	0.2	10
<b>Unknown</b>	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 Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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 1,362 beneficiaries who were in nursing facilities for part of their enrollment and their 13,695 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 2006

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL						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 \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
<b>All</b>	<b>126</b>	<b>9.8</b>	<b>1,373</b>	<b>0.8</b>	<b>\$266</b>		<b>320</b>	<b>24.9</b>	<b>3,685</b>	<b>0.9</b>	<b>\$72</b>	<b>1,283</b>	<b>13,545</b>
<b>Female</b>													
All Females	87	11.9	931	0.7	305		185	25.3	2,123	0.9	73	732	7,818
<b>Female, Disabled</b>													
All Ages	39	9.0	436	0.9	550		135	31.3	1,540	0.9	76	431	4,773
64 or younger	39	9.0	436	0.9	550		135	31.3	1,540	0.9	76	431	4,773
65-74	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
<b>Female, Other Eligibles</b>													
All Ages	48	15.9	495	0.6	89		50	16.6	583	0.8	64	301	3,045
64 or younger	0	0.0	0	0.0	0		0	0.0	0	0.0	0	11	111
65-74	9	13.4	108	0.7	169		24	35.8	286	0.9	80	67	769
75-84	13	18.8	136	0.6	74		14	20.3	161	0.7	49	69	659
85 and older	26	16.9	251	0.6	62		12	7.8	136	0.6	49	154	1,506
<b>Male</b>													
All Males	39	7.1	442	0.8	183		135	24.5	1,562	0.8	72	551	5,727
<b>Male, Disabled</b>													
All Ages	26	6.1	293	0.8	227		121	28.5	1,403	0.9	72	425	4,461
64 or younger	26	6.1	293	0.8	227		121	28.6	1,403	0.9	72	423	4,447
65-74	0	0.0	0	0.0	0		0	0.0	0	0.0	0	2	14
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
<b>Male, Other Eligibles</b>													
All Ages	13	10.3	149	0.8	97		14	11.1	159	0.8	67	126	1,266
64 or younger	0	0.0	0	0.0	0		0	0.0	0	0.0	0	15	167
65-74	7	19.4	82	1.1	124		7	19.4	75	0.8	68	36	377
75-84	4	11.1	48	0.5	71		6	16.7	72	0.8	75	36	346
85 and older	2	5.1	19	0.3	42		1	2.6	12	0.3	13	39	376
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>		<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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 1,362 beneficiaries who were in nursing facilities for part of their enrollment and their 13,695 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<sup>a,b</sup>  
CONNECTICUT, 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	
<b>All</b>	<b>20,546</b>	<b>14.6</b>	<b>1.2</b>	<b>164,085</b>	<b>\$37</b>	<b>\$5,194,563</b>	<b>\$32</b>	<b>3.4</b>	<b>140,271</b>	
<b>Age</b>										
5 and younger	874	3.5	0.1	1,484	2	58,737	40	13.0	24,935	
6-14	818	3.2	0.2	4,951	21	523,493	106	18.6	25,484	
15-20	940	4.9	0.2	4,266	14	263,088	62	6.0	19,242	
21-44	6,595	14.6	1.1	49,491	33	1,504,771	30	3.1	45,317	
45-64	10,140	46.4	4.4	95,719	122	2,656,079	28	2.9	21,850	
65-74	652	34.8	2.5	4,617	58	108,090	23	2.6	1,871	
75-84	370	34.7	2.2	2,378	54	57,380	24	3.3	1,065	
85 and older	157	31.0	2.3	1,179	45	22,925	19	4.2	507	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
<b>Basis of Eligibility<sup>c</sup></b>										
Aged	1,142	34.2	2.4	7,959	55	184,378	23	2.9	3,336	
Disabled	14,854	50.0	4.7	140,127	138	4,107,259	29	3.0	29,733	
Adults	2,033	5.4	0.2	6,206	4	141,877	23	3.0	37,850	
Children	2,411	3.5	0.1	9,344	11	747,055	80	12.1	69,096	
Unknown	106	41.4	1.8	449	55	13,994	31	2.7	256	
<b>Gender</b>										
Female	13,384	16.2	1.3	106,225	35	2,924,629	28	3.2	82,773	
Male	7,162	12.5	1.0	57,860	39	2,269,934	39	3.6	57,498	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
<b>Race</b>										
White	9,094	16.3	1.5	85,323	47	2,594,152	30	3.5	55,765	
African American	4,277	14.1	1.0	30,688	35	1,056,215	34	3.2	30,302	
Other/unknown	7,175	13.2	0.9	48,074	28	1,544,196	32	3.3	54,204	
<b>Use of Nursing Facilities<sup>d</sup></b>										
Entire year	678	52.8	5.8	7,438	122	156,135	21	1.6	1,283	
Part year	990	72.7	8.0	10,953	222	302,244	28	2.9	1,362	
None	18,878	13.7	1.1	145,694	34	4,736,184	33	3.5	137,626	
<b>Maintenance Assistance Status</b>										
Cash	6,192	9.0	0.7	46,981	19	1,316,545	28	3.4	68,968	
Medically needy	1,248	22.7	1.6	8,536	40	216,814	25	2.4	5,487	
Poverty related	1,141	3.6	0.1	3,054	6	198,919	65	7.4	31,967	
Other/unknown	11,965	35.3	3.1	105,514	102	3,462,285	33	3.4	33,849	

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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<sup>a,b</sup>  
 CONNECTICUT, 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
<b>All</b>	<b>0.3</b>	<b>\$8</b>	<b>\$32</b>	<b>\$0</b>	<b>\$2</b>	<b>633,363</b>
<b>Age</b>						
5 and younger	0.0	1	40	0	0	65,479
6-14	0.1	7	106	0	0	74,968
15-20	0.1	4	62	0	1	63,796
21-44	0.2	7	30	0	2	201,859
45-64	0.5	14	28	0	4	194,269
65-74	0.3	6	23	0	2	18,236
75-84	0.2	6	24	0	1	10,302
85 and older	0.3	5	19	0	2	4,454
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.2	6	23	0	1	32,224
Disabled	0.5	13	29	0	4	304,834
Adults	0.1	1	23	0	1	95,697
Children	0.0	4	80	0	0	198,001
Unknown	0.2	5	31	0	2	2,607
<b>Gender</b>						
Female	0.3	8	28	0	2	370,734
Male	0.2	9	39	0	2	262,629
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	0.3	10	30	0	3	263,953
African American	0.2	7	34	0	1	141,408
Other/unknown	0.2	7	32	0	1	228,002
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.5	12	21	0	7	13,545
Part year	0.8	22	28	0	6	13,695
None	0.2	8	33	0	2	606,123
<b>Maintenance Assistance Status</b>						
Cash	0.2	5	28	0	1	239,913
Medically needy	0.3	7	25	0	2	29,745
Poverty related	0.0	2	65	0	0	85,671
Other/unknown	0.4	12	33	0	3	278,034

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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<sup>a,b,c</sup>  
CONNECTICUT, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$	Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
<b>All</b>	<b>29,422</b>	<b>\$177</b>	<b>\$5,194,563</b>	<b>100.0</b>	<b>164,085</b>	<b>\$32</b>	<b>100.0</b>
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	5	80	400	0.0	6	67	0.0
Drugs for cosmetic purposes	23	15	335	0.0	38	9	0.0
Cough and cold medications	4,919	57	278,831	5.4	10,422	27	6.4
Vitamins and minerals	3,195	125	398,766	7.7	18,956	21	11.6
Non-prescription drugs	10,895	233	2,534,307	48.8	56,563	45	34.5
Barbiturates	412	67	27,477	0.5	4,202	7	2.6
Benzodiazepines	9,067	153	1,387,533	26.7	69,645	20	42.4
Other Part D Excl Rx Drugs	906	626	566,914	10.9	4,253	133	2.6

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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<sup>a, b</sup>  
NONDUAL BENEFICIARIES, CONNECTICUT, 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
<b>All</b>	<b>433,597</b>	<b>3,336</b>	<b>29,820</b>	<b>115,917</b>	<b>284,268</b>	<b>256</b>	<b>4,234,018</b>	<b>32,248</b>	<b>308,569</b>	<b>1,073,583</b>	<b>2,816,997</b>	<b>2,621</b>
<b>Age</b>												
5 and younger	94,903	0	0	0	94,903	0	904,580	0	0	0	904,580	0
6-14	119,862	0	1	1	119,860	0	1,246,263	0	12	1	1,246,250	0
15-20	66,515	1	947	2,093	63,474	0	641,320	4	9,560	12,830	618,926	0
21-44	115,288	0	11,306	97,977	5,944	61	1,075,491	0	117,709	910,507	46,734	541
45-64	33,561	2	17,478	15,808	87	186	333,047	16	180,635	149,888	507	2,001
65-74	1,896	1,763	87	37	0	9	18,554	17,481	641	353	0	79
75-84	1,065	1,063	1	1	0	0	10,309	10,293	12	4	0	0
85 and older	507	507	0	0	0	0	4,454	4,454	0	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	252,790	2,317	16,436	91,839	141,943	255	2,473,965	22,564	175,299	862,265	1,411,219	2,618
Male	180,807	1,019	13,384	24,078	142,325	1	1,760,053	9,684	133,270	211,318	1,405,778	3
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	171,316	1,360	13,546	50,012	106,212	186	1,650,753	12,844	138,448	462,372	1,035,136	1,953
African American	101,474	562	6,745	25,107	69,025	35	1,015,962	5,381	69,303	242,273	698,645	360
Other/unknown	160,807	1,414	9,529	40,798	109,031	35	1,567,303	14,023	100,818	368,938	1,083,216	308
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	1,285	401	858	2	24	0	13,569	4,033	9,258	3	275	0
Part year	1,368	166	1,168	13	20	1	13,912	1,626	11,938	122	214	12
None	430,944	2,769	27,794	115,902	284,224	255	4,206,537	26,589	287,373	1,073,458	2,816,508	2,609
<b>Maintenance Assistance Status</b>												
Cash	252,574	431	5,817	86,725	159,601	0	2,597,768	4,922	64,946	858,834	1,669,066	0
Medically needy	6,170	343	2,462	994	2,371	0	45,121	2,568	19,474	6,025	17,054	0
Poverty related	94,817	16	46	9,877	84,622	256	844,939	93	311	48,764	793,150	2,621
Other/unknown	80,036	2,546	21,495	18,321	37,674	0	746,190	24,665	223,838	159,960	337,727	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	55,680	3,333	29,180	9,861	13,053	253	421,484	32,212	301,558	30,063	55,059	2,592
FFS part year, with Rx claims	16,833	2	411	7,155	9,262	3	153,291	24	4,573	61,868	86,797	29
FFS part year, no Rx claims	67,758	1	142	20,834	46,781	0	586,025	12	1,430	170,418	414,165	0
MC all year, with Rx claims	1,108	0	71	355	682	0	12,745	0	826	4,139	7,780	0
MC all year, no Rx claims	292,218	0	16	77,712	214,490	0	3,060,473	0	182	807,095	2,253,196	0

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.

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<sup>a</sup>  
 NONDUAL BENEFICIARIES, CONNECTICUT, 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
<b>All</b>	<b>433,597</b>	<b>4,234,018</b>	<b>140,271</b>	<b>633,363</b>	<b>0</b>	<b>3,600,655</b>
Fee-for-service (FFS) all year	55,680	421,484	55,680	421,484	0	0
FFS part year, with Rx claims	16,833	153,291	16,833	52,611	0	100,680
FFS part year, with no Rx claims	67,758	586,025	67,758	159,268	0	426,757
Managed care (MC) all year, with Rx claims	1,108	12,745	0	0	0	12,745
MC all year, with no Rx claims	292,218	3,060,473	0	0	0	3,060,473

Source: Data for this table are from the MAX 2006 file for Connecticut, released by CMS in 6/2009. This table was produced on 02/11/2010.  
 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