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**STATISTICAL COMPENDIUM:  
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2006  
D.C.**

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CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
NONDUAL BENEFICIARIES, D.C., 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>51,501</b>	<b>1,021</b>	<b>21,690</b>	<b>9,516</b>	<b>19,274</b>	<b>0</b>	<b>360,515</b>	<b>9,714</b>	<b>212,353</b>	<b>42,073</b>	<b>96,375</b>	<b>0</b>
<b>Age</b>												
5 and younger	8,239	0	569	8	7,662	0	34,517	0	4,319	30	30,168	0
6-14	8,407	0	1,674	3	6,730	0	51,113	0	15,309	16	35,788	0
15-20	6,966	0	1,450	746	4,770	0	46,182	0	13,750	2,525	29,907	0
21-44	13,601	1	6,327	7,174	99	0	92,597	4	61,542	30,677	374	0
45-64	12,721	7	11,142	1,572	0	0	120,929	46	112,144	8,739	0	0
65-74	841	451	379	11	0	0	8,321	4,398	3,841	82	0	0
75-84	445	350	94	1	0	0	4,365	3,439	925	1	0	0
85 and older	268	212	55	1	0	0	2,353	1,827	523	3	0	0
Unknown	13	0	0	0	13	0	138	0	0	0	138	0
<b>Gender</b>												
Female	27,134	671	9,861	7,176	9,426	0	179,916	6,390	99,269	27,448	46,809	0
Male	24,366	350	11,829	2,339	9,848	0	180,597	3,324	113,084	14,623	49,566	0
Unknown	1	0	0	1	0	0	2	0	0	2	0	0
<b>Race</b>												
White	1,241	59	883	170	129	0	10,352	585	8,039	1,097	631	0
African American	43,723	672	19,142	8,282	15,627	0	311,600	6,194	188,070	35,182	82,154	0
Other/unknown	6,537	290	1,665	1,064	3,518	0	38,563	2,935	16,244	5,794	13,590	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	512	204	297	11	0	0	5,505	2,162	3,227	116	0	0
Part year	479	65	402	11	1	0	4,758	592	4,053	101	12	0
None	50,510	752	20,991	9,494	19,273	0	350,252	6,960	205,073	41,856	96,363	0
<b>Maintenance Assistance Status</b>												
Cash	26,724	237	15,737	5,759	4,991	0	207,819	2,461	162,207	26,616	16,535	0
Medically needy	13,590	295	5,383	3,003	4,909	0	74,943	2,497	44,901	11,069	16,476	0
Poverty-related	5,821	141	529	291	4,860	0	23,657	1,340	4,858	1,066	16,393	0
Other/unknown	5,366	348	41	463	4,514	0	54,096	3,416	387	3,322	46,971	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	31,239	1,014	20,193	3,051	6,981	0	291,122	9,677	204,366	21,955	55,124	0
FFS part year, with Rx claims	4,474	3	715	1,732	2,024	0	18,893	17	4,390	6,158	8,328	0
FFS part year, no Rx claims	15,788	4	782	4,733	10,269	0	50,500	20	3,597	13,960	32,923	0

Source: Data for this table are from the MAX 2006 file for D.C., released by CMS in 4/2009. 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, D.C., 2006

Beneficiary Characteristics	Percentage with at Least		Mean Number		Mean \$, All Medicaid		Rx \$ as a Percentage		Number of Beneficiaries
	One Rx	of Rx	of Rx	Mean Rx \$	\$ per Rx	FFS \$ <sup>c</sup>	of All Medicaid FFS \$ <sup>d</sup>		
<b>All</b>	<b>43.3</b>	<b>12.5</b>	<b>12.5</b>	<b>\$1,270</b>	<b>\$101</b>	<b>\$12,308</b>	<b>10.3</b>	<b>51,501</b>	
<b>Age</b>									
5 and younger	21.1	0.9	0.9	74	85	5,852	1.3	8,239	
6-14	25.1	2.5	2.5	264	107	5,140	5.1	8,407	
15-20	30.6	2.9	2.9	315	110	8,538	3.7	6,966	
21-44	46.1	11.3	11.3	1,374	121	11,908	11.5	13,601	
45-64	72.2	32.2	32.2	3,112	97	22,484	13.8	12,721	
65-74	62.7	27.0	27.0	1,763	65	23,185	7.6	841	
75-84	52.4	18.3	18.3	1,074	59	19,624	5.5	445	
85 and older	35.4	11.1	11.1	499	45	25,287	2.0	268	
Unknown	0.0	0.0	0.0	0	0	0	0.0	13	
<b>Basis of Eligibility<sup>e</sup></b>									
Aged	53.8	20.0	20.0	1,116	56	21,579	5.2	1,021	
Disabled	66.5	24.6	24.6	2,469	101	20,612	12.0	21,690	
Adults	33.5	6.6	6.6	824	126	5,708	14.4	9,516	
Children	21.4	1.5	1.5	149	97	5,731	2.6	19,274	
Unknown	0.0	0.0	0.0	0	0	0	0.0	0	
<b>Gender</b>									
Female	44.4	13.1	13.1	1,202	92	11,290	10.6	27,134	
Male	42.0	11.9	11.9	1,345	113	13,443	10.0	24,366	
Unknown	0.0	0.0	0.0	0	0	0	0.0	1	
<b>Race</b>									
White	50.7	19.9	19.9	2,270	114	18,232	12.4	1,241	
African American	44.9	12.9	12.9	1,288	100	12,674	10.2	43,723	
Other/unknown	31.3	8.7	8.7	959	110	8,739	11.0	6,537	
<b>Use of Nursing Facilities<sup>f</sup></b>									
Entire year	86.3	61.6	61.6	4,353	71	80,973	5.4	512	
Part year	87.7	43.8	43.8	3,783	86	108,634	3.5	479	
None	42.4	11.7	11.7	1,215	104	10,699	11.4	50,510	
<b>Maintenance Assistance Status</b>									
Cash	51.5	17.7	17.7	1,821	103	14,442	12.6	26,724	
Medically needy	35.2	8.4	8.4	797	95	11,450	7.0	13,590	
Poverty related	19.0	2.7	2.7	245	91	3,458	7.1	5,821	
Other/unknown	49.1	7.8	7.8	833	107	13,455	6.2	5,366	

Source: Data for this table are from the MAX 2006 file for D.C., released by CMS in 4/2009. 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, D.C., 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	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	Mean \$, All Medicaid FFS \$ <sup>d</sup>	Beneficiaries	Benefit Months
<b>All</b>	<b>1.8</b>	<b>\$181</b>	<b>10.3</b>	<b>56.7</b>	<b>21.0</b>	<b>5.5</b>	<b>9.7</b>	<b>5.7</b>	<b>1.3</b>	<b>\$1,758</b>	<b>51,501</b>	<b>360,515</b>
<b>Age</b>												
5 and younger	0.2	18	1.3	78.9	18.7	1.6	0.7	0.1	0.0	1,397	8,239	34,517
6-14	0.4	43	5.1	74.9	19.3	2.9	2.5	0.4	0.0	845	8,407	51,113
15-20	0.4	48	3.7	69.4	24.8	2.7	2.6	0.6	0.1	1,288	6,966	46,182
21-44	1.7	202	11.5	53.9	23.7	6.7	9.8	5.0	0.9	1,749	13,601	92,597
45-64	3.4	327	13.8	27.8	19.1	10.0	23.3	15.8	4.0	2,365	12,721	120,929
65-74	2.7	178	7.6	37.3	18.5	7.6	19.4	13.6	3.6	2,343	841	8,321
75-84	1.9	110	5.5	47.6	19.1	6.3	17.3	8.3	1.3	2,001	445	4,365
85 and older	1.3	57	2.0	64.6	14.2	4.1	11.2	4.5	1.5	2,880	268	2,353
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	13	138
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	2.1	117	5.2	46.2	18.5	6.4	17.6	9.0	2.3	2,268	1,021	9,714
Disabled	2.5	252	12.0	33.5	25.1	9.1	18.4	11.2	2.8	2,105	21,690	212,353
Adults	1.5	186	14.4	66.5	18.8	4.3	5.9	3.9	0.6	1,291	9,516	42,073
Children	0.3	30	2.6	78.6	17.7	2.0	1.5	0.2	0.0	1,146	19,274	96,375
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>												
Female	2.0	181	10.6	55.6	21.4	5.7	9.8	5.9	1.6	1,703	27,134	179,916
Male	1.6	182	10.0	58.0	20.5	5.3	9.6	5.4	1.1	1,814	24,366	180,597
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	2
<b>Race</b>												
White	2.4	272	12.4	49.3	17.1	7.0	15.2	9.1	2.3	2,186	1,241	10,352
African American	1.8	181	10.2	55.1	21.9	5.8	10.0	5.8	1.4	1,778	43,723	311,600
Other/unknown	1.5	163	11.0	68.7	15.6	3.5	7.1	4.5	0.7	1,481	6,537	38,563
<b>Use of Nursing Facilities<sup>f</sup></b>												
Entire year	5.7	405	5.4	13.7	7.6	4.5	28.5	31.6	14.1	7,531	512	5,505
Part year	4.4	381	3.5	12.3	13.4	13.2	31.7	22.1	7.3	10,937	479	4,758
None	1.7	175	11.4	57.6	21.2	5.5	9.3	5.3	1.1	1,543	50,510	350,252
<b>Maintenance Assistance Status</b>												
Cash	2.3	234	12.6	48.5	21.9	6.6	12.8	8.2	2.1	1,857	26,724	207,819
Medically needy	1.5	145	7.0	64.8	17.2	5.2	8.0	4.0	0.8	2,076	13,590	74,943
Poverty related	0.7	60	7.1	81.0	13.2	1.8	2.6	1.2	0.2	851	5,821	23,657
Other/unknown	0.8	83	6.2	50.9	34.7	5.2	6.7	2.4	0.1	1,335	5,366	54,096

Source: Data for this table are from the MAX 2006 file for D.C., released by CMS in 4/2009. 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, D.C., 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>1.8</b>	<b>\$181</b>	<b>\$101</b>	<b>0.8</b>	<b>\$142</b>	<b>\$188</b>	<b>0.0</b>	<b>\$6</b>	<b>\$125</b>	<b>1.0</b>	<b>\$33</b>	<b>\$34</b>
<b>Age</b>												
5 and younger	0.2	18	85	0.1	14	217	0.0	0	50	0.1	3	23
6-14	0.4	43	107	0.2	37	155	0.0	1	92	0.2	6	36
15-20	0.4	48	110	0.2	39	189	0.0	2	146	0.2	6	30
21-44	1.7	202	121	0.8	167	211	0.0	6	141	0.8	29	34
45-64	3.4	327	97	1.3	248	184	0.1	12	126	1.9	68	35
65-74	2.7	178	65	1.0	127	127	0.1	7	78	1.6	44	27
75-84	1.9	110	59	0.7	76	109	0.1	6	89	1.1	28	25
85 and older	1.3	57	45	0.5	41	80	0.0	3	67	0.7	13	19
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	2.1	117	56	0.8	82	106	0.1	5	67	1.3	31	25
Disabled	2.5	252	101	1.0	193	193	0.1	9	130	1.4	50	35
Adults	1.5	186	126	0.9	166	185	0.0	4	119	0.6	17	30
Children	0.3	30	97	0.2	24	163	0.0	1	90	0.1	5	31
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Gender</b>												
Female	2.0	181	92	0.8	137	178	0.1	7	120	1.1	37	32
Male	1.6	182	113	0.7	146	198	0.0	5	133	0.8	30	36
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	2.4	272	114	1.0	204	208	0.1	15	151	1.3	53	41
African American	1.8	181	100	0.8	140	186	0.0	6	125	1.0	34	34
Other/unknown	1.5	163	110	0.7	135	193	0.0	4	110	0.7	24	32
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	5.7	405	71	1.9	273	142	0.2	20	108	3.6	111	31
Part year	4.4	381	86	1.5	276	185	0.1	10	79	2.8	95	34
None	1.7	175	104	0.7	138	190	0.0	6	128	0.9	31	34
<b>Maintenance Assistance Status</b>												
Cash	2.3	234	103	1.0	184	192	0.1	8	131	1.3	42	34
Medically needy	1.5	145	95	0.6	108	183	0.0	5	110	0.9	32	36
Poverty related	0.7	60	91	0.3	45	176	0.0	2	122	0.4	13	34
Other/unknown	0.8	83	107	0.4	70	165	0.0	2	106	0.3	10	32

Source: Data for this table are from the MAX 2006 file for D.C., released by CMS in 4/2009. 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 D.C., 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.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, D.C., 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users <sup>e</sup>				
	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 Benes	Number of Benefit Months
Anti-infective Agents	0.9	0.7	0.0	0.3	\$162	\$143	\$1	\$19	\$171	\$213	\$162	\$68	110,948	\$18,965,396	11,432	22.2	116,796
Biologicals	0.3	0.3	0.0	0.0	357	357	0	0	1203	1,228	0	34	237	285,078	104	0.2	798
Antineoplastic Agents	0.4	0.1	0.0	0.3	107	70	1	36	271	786	284	119	2,196	594,026	525	1.0	5,558
Endocrine/Metabolic Drugs	0.7	0.3	0.0	0.4	51	37	3	11	70	132	177	25	43,504	3,027,657	5,740	11.1	59,756
Cardiovascular Agents	1.4	0.5	0.0	0.9	70	46	4	20	49	91	104	23	130,685	6,344,324	8,544	16.6	91,078
Respiratory Agents	0.6	0.3	0.0	0.3	43	33	1	9	70	112	75	29	52,186	3,675,800	8,269	16.1	85,140
Gastrointestinal Agents	0.4	0.2	0.0	0.2	43	31	5	7	97	162	482	30	24,498	2,383,194	5,152	10.0	55,202
Genitourinary Agents	0.3	0.1	0.1	0.1	22	12	5	5	72	92	100	41	5,600	405,174	1,772	3.4	18,103
CNS Drugs	1.0	0.5	0.1	0.4	162	139	7	16	160	279	103	36	96,531	15,469,236	8,811	17.1	95,633
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.1	67	64	0	3	114	126	100	38	6,704	766,314	1,084	2.1	11,364
Miscellaneous Psychological/Neurological Agents	0.4	0.3	0.0	0.1	112	102	0	10	293	328	149	146	1,856	544,397	436	0.8	4,852
Analgesics and Anesthetics	0.5	0.0	0.0	0.5	28	9	3	16	53	231	344	33	53,952	2,845,309	9,854	19.1	103,247
Neuromuscular Agents	0.7	0.2	0.0	0.5	65	44	1	20	88	178	57	42	50,100	4,399,941	6,208	12.1	67,947
Nutritional Products	0.4	0.0	0.0	0.4	6	0	0	6	14	24	25	14	18,145	254,638	4,074	7.9	41,840
Hematological Agents	0.6	0.2	0.0	0.4	100	88	0	11	175	471	27	29	15,201	2,653,161	2,484	4.8	26,621
Topical Products	0.4	0.1	0.0	0.2	23	13	2	8	62	110	82	35	30,572	1,891,036	7,937	15.4	81,742
Miscellaneous Products	0.4	0.2	0.0	0.2	155	133	1	21	416	622	232	138	2,038	848,811	526	1.0	5,463
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	35	0	0	0	146	0	0	0	301	44,059	113	0.2	1,265
<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>645,254</b>	<b>65,397,551</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 D.C., released by CMS in 4/2009. 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 D.C., 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.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.

Nondual Medicaid Beneficiaries



TABLE ND.7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, D.C., 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
ANTIVIRAL	\$16,655,860	5,757	11.2	62,712	1.2	\$213	\$266
ANTIPSYCHOTICS	12,453,262	6,748	13.1	75,366	0.6	292	165
ANTICONVULSANT	4,038,634	5,355	10.4	59,080	0.6	112	68
ANTIASTHMATIC	2,331,218	7,391	14.4	77,478	0.4	85	30
ANTIDEPRESSANTS	2,285,989	7,239	14.1	79,271	0.5	64	29
ANTHYPERLIPIDEMIC	2,201,866	3,582	7.0	39,490	0.5	102	56
ANTIDIABETIC	2,118,243	4,900	9.5	52,773	0.6	66	40
ANALGESICS - Narcotic	1,725,510	8,769	17.0	94,455	0.3	55	18
ANTIHYPERTENSIVE	1,566,256	7,140	13.9	77,332	0.5	38	20
ULCER DRUGS	1,395,723	4,481	8.7	48,360	0.3	89	29
Total	46,772,561	61,362	n.a.	666,317	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for D.C., released by CMS in 4/2009. 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, D.C., 2006

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIVIRAL				ANTIPSYCHOTICS			
	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>362,190</b>	<b>\$46,772,561</b>	<b>5,757</b>	<b>11.2</b>	<b>62,712</b>	<b>1.2</b>	<b>\$266</b>	<b>6,748</b>	<b>13.1</b>	<b>75,366</b>	<b>0.6</b>	<b>\$165</b>
<b>Female</b>												
All Females	192,399	22,723,069	2,294	8.5	24,985	1.1	244	3,502	12.9	39,213	0.5	157
<b>Female, Disabled</b>												
All Ages	163,792	19,310,210	1,600	16.2	18,042	1.1	248	2,986	30.3	33,829	0.5	160
5 and younger	279	20,926	13	5.1	123	0.7	42	1	0.4	4	0.5	46
6-14	1,124	122,782	15	2.9	180	0.9	127	48	9.2	499	0.4	80
15-20	1,515	251,061	24	4.6	269	0.6	178	93	18.0	985	0.5	125
21-44	36,467	5,113,510	666	22.8	7,363	1.0	201	1,096	37.5	12,308	0.5	144
45-64	119,896	13,427,952	880	16.5	10,083	1.1	289	1,702	31.9	19,519	0.6	175
65-74	3,966	332,145	0	0.0	0	0.0	0	38	18.2	419	0.8	154
75-84	415	35,735	2	3.0	24	0.2	15	7	10.4	83	0.6	83
85 and older	130	6,099	0	0.0	0	0.0	0	1	2.6	12	0.6	105
<b>Female, Other Eligibles</b>												
All Ages	28,607	3,412,859	694	4.0	6,943	1.3	235	516	3.0	5,384	0.6	135
5 and younger	674	46,588	12	0.3	117	1.3	62	2	0.1	24	0.2	39
6-14	2,185	265,360	16	0.5	164	0.9	97	123	3.7	1,260	0.6	132
15-20	3,358	444,593	39	1.3	381	0.6	99	198	6.5	2,196	0.5	119
21-44	8,817	1,275,850	379	6.8	3,601	1.3	240	95	1.7	858	0.7	195
45-64	7,264	979,097	234	24.3	2,512	1.5	277	45	4.7	466	0.7	154
65-74	3,487	223,402	13	4.8	156	0.4	58	31	11.4	350	0.7	115
75-84	2,137	139,666	1	0.4	12	0.1	3	14	6.0	145	0.9	125
85 and older	685	38,303	0	0.0	0	0.0	0	8	4.8	85	0.5	35
<b>Male</b>												
All Males	169,791	24,049,492	3,463	14.2	37,727	1.3	280	3,246	13.3	36,153	0.6	175
<b>Male, Disabled</b>												
All Ages	133,239	18,453,900	2,214	18.7	24,401	1.2	283	2,628	22.2	29,339	0.6	180
5 and younger	477	47,759	4	1.3	48	0.7	49	2	0.6	11	0.3	41
6-14	2,784	330,628	42	3.6	398	1.2	170	124	10.8	1,282	0.5	100
15-20	2,541	410,244	30	3.2	318	0.9	170	147	15.8	1,502	0.6	160
21-44	32,859	5,114,528	829	24.4	9,073	1.2	227	907	26.7	10,082	0.5	166
45-64	92,409	12,325,833	1,299	22.3	14,444	1.3	326	1,417	24.4	16,090	0.6	196
65-74	2,014	214,208	10	5.9	120	1.0	219	29	17.1	348	0.7	231
75-84	113	7,902	0	0.0	0	0.0	0	1	3.7	12	1.0	225
85 and older	42	2,798	0	0.0	0	0.0	0	1	6.3	12	0.1	2

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, D.C., 2006

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIVIRAL				ANTIPSYCHOTICS				
	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	36,552	5,595,592	1,249	10.0	13,326	1.5	273	618	4.9	6,814	0.6	152
5 and younger	818	58,188	16	0.4	166	1.2	81	5	0.1	60	0.4	37
6-14	4,097	573,298	12	0.4	144	1.2	131	244	7.2	2,731	0.6	145
15-20	2,845	399,429	13	0.5	149	0.4	96	181	7.3	1,913	0.6	132
21-44	14,737	2,591,591	688	39.8	7,327	1.5	286	112	6.5	1,272	0.7	191
45-64	11,153	1,737,075	511	82.7	5,433	1.5	273	39	6.3	438	0.8	195
65-74	1,865	158,681	9	4.7	107	0.7	132	25	13.2	262	0.7	135
75-84	838	65,609	0	0.0	0	0.0	0	8	6.8	91	0.9	178
85 and older	199	11,721	0	0.0	0	0.0	0	4	8.7	47	0.9	52
<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 D.C., released by CMS in 4/2009. 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, D.C., 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIASTHMATIC					ANTIDEPRESSANTS				
	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>5,355</b>	<b>10.4</b>	<b>59,080</b>	<b>0.6</b>	<b>\$68</b>	<b>7,391</b>	<b>14.4</b>	<b>77,478</b>	<b>0.4</b>	<b>\$30</b>	<b>7,239</b>	<b>14.1</b>	<b>79,271</b>	<b>0.5</b>	<b>\$29</b>
<b>Female</b>															
All Females	2,942	10.8	32,436	0.6	64	4,646	17.1	49,413	0.4	32	4,542	16.7	49,520	0.4	29
<b>Female, Disabled</b>															
All Ages	2,579	26.2	28,845	0.6	65	3,613	36.6	40,840	0.4	34	3,933	39.9	43,906	0.4	29
5 and younger	3	1.2	33	0.4	26	53	20.9	476	0.2	24	1	0.4	12	0.3	6
6-14	30	5.7	309	0.4	49	102	19.5	1,094	0.3	26	25	4.8	253	0.4	23
15-20	49	9.5	520	0.7	108	65	12.5	690	0.2	10	53	10.2	575	0.4	23
21-44	776	26.5	8,691	0.6	73	782	26.7	8,780	0.3	23	1,217	41.6	13,548	0.4	27
45-64	1,669	31.3	18,707	0.6	60	2,528	47.4	28,938	0.4	38	2,585	48.5	28,914	0.5	30
65-74	46	22.0	513	0.6	64	70	33.5	739	0.6	48	48	23.0	561	0.6	38
75-84	4	6.0	48	0.4	61	10	14.9	87	0.2	23	4	6.0	43	0.7	40
85 and older	2	5.1	24	0.5	16	3	7.7	36	0.5	39	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>															
All Ages	363	2.1	3,591	0.6	64	1,033	6.0	8,573	0.3	22	609	3.5	5,614	0.5	29
5 and younger	6	0.2	33	0.8	61	201	5.4	1,435	0.3	20	1	0.0	12	0.1	7
6-14	45	1.3	464	0.5	69	204	6.1	1,753	0.2	14	84	2.5	901	0.5	24
15-20	80	2.6	831	0.5	62	233	7.7	2,300	0.2	16	196	6.5	2,099	0.4	24
21-44	113	2.0	1,063	0.7	82	208	3.8	1,397	0.4	30	164	3.0	1,101	0.5	37
45-64	70	7.3	650	0.7	55	99	10.3	728	0.5	40	96	10.0	756	0.5	36
65-74	34	12.5	375	0.8	47	40	14.7	420	0.5	33	37	13.6	421	0.7	39
75-84	10	4.3	118	0.4	19	36	15.4	402	0.5	35	22	9.4	242	0.5	22
85 and older	5	3.0	57	0.5	22	12	7.2	138	0.3	15	9	5.4	82	0.6	40
<b>Male</b>															
All Males	2,413	9.9	26,644	0.6	73	2,745	11.3	28,065	0.3	27	2,697	11.1	29,751	0.5	29
<b>Male, Disabled</b>															
All Ages	2,108	17.8	23,335	0.6	69	1,965	16.6	21,411	0.4	29	2,243	19.0	24,874	0.5	28
5 and younger	6	1.9	52	0.3	40	105	33.2	1,044	0.3	38	0	0.0	0	0.0	0
6-14	57	5.0	593	0.6	99	276	24.0	2,950	0.3	19	52	4.5	546	0.5	23
15-20	61	6.5	642	0.7	88	104	11.2	1,174	0.3	21	64	6.9	660	0.5	35
21-44	675	19.8	7,430	0.6	77	341	10.0	3,717	0.3	22	686	20.2	7,544	0.4	27
45-64	1,289	22.2	14,385	0.6	63	1,112	19.1	12,226	0.4	34	1,410	24.3	15,773	0.5	29
65-74	19	11.2	221	0.8	39	22	12.9	240	0.4	34	29	17.1	332	0.5	37
75-84	1	3.7	12	0.6	7	5	18.5	60	0.5	24	1	3.7	7	0.6	3
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	6.3	12	0.4	33

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, D.C., 2006

Beneficiary Characteristics	ANTICONVULSANT						ANTIASTHMATIC					ANTIDEPRESSANTS				
	Number of Users	Users	Number of Benefit Months	Mean		Number of Users	Users	Number of Benefit Months	Mean		Number of Users	Users	Number of Benefit Months	Mean		
		as % of All Benes		Among Users	Rx per Benefit Month		Mean Rx \$ per Benefit Month		as % of All Benes	Among Users		Rx per Benefit Month		Mean Rx \$ per Benefit Month	as % of All Benes	Among Users
<b>Male, Other Eligibles</b>																
All Ages	305	2.4	3,309	0.8	103	780	6.2	6,654	0.3	22	454	3.6	4,877	0.5	31	
5 and younger	6	0.2	62	0.7	78	237	6.0	1,742	0.2	18	2	0.1	24	0.8	7	
6-14	75	2.2	790	0.7	87	268	8.0	2,083	0.3	18	134	4.0	1,466	0.5	29	
15-20	55	2.2	589	0.6	107	122	4.9	1,193	0.3	20	130	5.2	1,364	0.5	27	
21-44	86	5.0	968	0.9	149	72	4.2	764	0.3	21	95	5.5	1,021	0.5	36	
45-64	50	8.1	543	0.8	62	33	5.3	316	0.2	11	64	10.4	701	0.6	38	
65-74	25	13.2	271	1.1	72	25	13.2	296	0.5	59	18	9.5	196	0.6	37	
75-84	8	6.8	86	0.7	69	16	13.7	176	0.7	56	8	6.8	85	0.7	39	
85 and older	0	0.0	0	0.0	0	7	15.2	84	0.5	37	3	6.5	20	0.2	6	
<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 D.C., released by CMS in 4/2009. 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, D.C., 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE						ANTIDIABETIC					ANALGESICS - Narcotic			
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Benefit	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Benefit	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Benefit
		Benes	Month	Month	Month		Benes	Month	Month	Month		Benes	Month	Month	Month
<b>All</b>	<b>3,582</b>	<b>7.0</b>	<b>39,490</b>	<b>0.5</b>	<b>\$56</b>	<b>4,900</b>	<b>9.5</b>	<b>52,773</b>	<b>0.6</b>	<b>\$40</b>	<b>8,769</b>	<b>17.0</b>	<b>94,455</b>	<b>0.3</b>	<b>\$18</b>
<b>Female</b>															
All Females	2,021	7.4	22,363	0.5	57	2,958	10.9	31,784	0.6	41	5,225	19.3	56,050	0.3	18
<b>Female, Disabled</b>															
All Ages	1,777	18.0	19,968	0.5	57	2,544	25.8	28,369	0.6	42	4,530	45.9	50,814	0.3	20
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	1.2	20	0.2	2
6-14	0	0.0	0	0.0	0	2	0.4	24	0.8	83	17	3.3	188	0.2	2
15-20	0	0.0	0	0.0	0	3	0.6	35	0.2	6	56	10.8	595	0.1	2
21-44	175	6.0	1,927	0.5	48	354	12.1	3,970	0.5	37	1,304	44.6	14,545	0.3	17
45-64	1,514	28.4	17,069	0.6	58	2,089	39.2	23,263	0.6	42	3,059	57.4	34,404	0.4	22
65-74	70	33.5	784	0.6	60	88	42.1	1,001	0.8	58	76	36.4	889	0.3	15
75-84	16	23.9	167	0.6	58	5	7.5	40	0.8	53	9	13.4	101	0.3	8
85 and older	2	5.1	21	0.4	36	3	7.7	36	0.4	5	6	15.4	72	0.5	6
<b>Female, Other Eligibles</b>															
All Ages	244	1.4	2,395	0.6	54	414	2.4	3,415	0.7	36	695	4.0	5,236	0.2	6
5 and younger	0	0.0	0	0.0	0	3	0.1	20	0.3	23	2	0.1	24	0.1	1
6-14	0	0.0	0	0.0	0	8	0.2	77	0.4	33	17	0.5	172	0.1	1
15-20	0	0.0	0	0.0	0	15	0.5	80	0.6	39	90	3.0	823	0.1	1
21-44	43	0.8	311	0.5	50	111	2.0	689	0.5	30	378	6.8	2,244	0.2	6
45-64	68	7.1	594	0.5	54	117	12.2	798	0.7	50	112	11.7	912	0.3	10
65-74	68	25.0	765	0.6	55	90	33.1	992	0.7	30	46	16.9	494	0.3	10
75-84	51	21.8	579	0.6	57	55	23.5	611	0.7	37	39	16.7	446	0.2	6
85 and older	14	8.4	146	0.6	49	15	9.0	148	0.9	38	11	6.6	121	0.2	3
<b>Male</b>															
All Males	1,561	6.4	17,127	0.5	55	1,942	8.0	20,989	0.6	38	3,544	14.5	38,405	0.3	18
<b>Male, Disabled</b>															
All Ages	1,381	11.7	15,345	0.5	54	1,766	14.9	19,367	0.6	39	3,224	27.3	35,355	0.3	19
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	1.9	65	0.1	1
6-14	1	0.1	12	0.2	19	1	0.1	3	2.0	319	28	2.4	318	0.1	1
15-20	2	0.2	18	0.7	68	11	1.2	125	0.4	30	48	5.2	519	0.2	5
21-44	234	6.9	2,583	0.5	46	260	7.6	2,824	0.5	37	839	24.7	9,255	0.3	15
45-64	1,107	19.0	12,297	0.5	56	1,450	24.9	15,931	0.6	39	2,264	38.9	24,783	0.4	21
65-74	35	20.6	411	0.6	63	44	25.9	484	0.7	43	34	20.0	360	0.5	32
75-84	2	7.4	24	1.0	104	0	0.0	0	0.0	0	3	11.1	31	0.2	2
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	12.5	24	0.7	23

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, D.C., 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE						ANTIDIABETIC					ANALGESICS - Narcotic				
	Number of Users	Users as %		Mean Number of		Number of Users	Benes	Users as %		Mean Number of		Number of Users	Users as %		Mean Number of	
		Benes	Among Users	Rx per Benefit Month	Mean Rx \$ per Benefit			Benes	Among Users	Rx per Benefit Month	Mean Rx \$ per Benefit		Benes	Among Users	Rx per Benefit Month	Mean Rx \$ per Benefit
<b>Male, Other Eligibles</b>																
All Ages	180	1.4	1,782	0.6	57	176	1.4	1,622	0.6	33	320	2.6	3,050	0.2	5	
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	0.1	32	0.1	1	
6-14	0	0.0	0	0.0	0	1	0.0	12	1.3	96	17	0.5	161	0.1	1	
15-20	0	0.0	0	0.0	0	10	0.4	94	0.6	62	61	2.4	618	0.1	1	
21-44	50	2.9	477	0.7	60	35	2.0	281	0.6	30	139	8.0	1,235	0.1	2	
45-64	77	12.5	733	0.6	56	80	12.9	676	0.7	37	58	9.4	551	0.2	11	
65-74	33	17.4	360	0.6	54	31	16.3	359	0.5	24	27	14.2	295	0.3	11	
75-84	16	13.7	165	0.6	59	17	14.5	184	0.5	22	12	10.3	134	0.4	17	
85 and older	4	8.7	47	0.5	41	2	4.3	16	0.5	7	2	4.3	24	0.1	1	
<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 D.C., released by CMS in 4/2009. 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, D.C., 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE						ULCER DRUGS					
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Benefit	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Benefit	Number of Beneficiaries	Number of Benefit Months
<b>All</b>	<b>7,140</b>	<b>13.9</b>	<b>77,332</b>	<b>0.5</b>	<b>\$20</b>	<b>4,481</b>	<b>8.7</b>	<b>48,360</b>	<b>0.3</b>	<b>\$29</b>	<b>51,501</b>	<b>360,515</b>
<b>Female</b>												
All Females	3,998	14.7	43,247	0.6	22	2,676	9.9	29,021	0.3	30	27,128	179,853
<b>Female, Disabled</b>												
All Ages	3,480	35.3	38,725	0.5	22	2,271	23.0	25,457	0.3	30	9,861	99,269
5 and younger	1	0.4	12	0.3	3	18	7.1	143	0.4	23	253	1,928
6-14	11	2.1	103	0.5	4	14	2.7	150	0.5	52	523	4,756
15-20	3	0.6	26	0.7	29	23	4.4	260	0.1	8	518	4,973
21-44	464	15.9	5,074	0.4	14	469	16.0	5,280	0.3	23	2,924	29,232
45-64	2,864	53.8	31,988	0.6	23	1,677	31.5	18,838	0.3	32	5,328	55,228
65-74	111	53.1	1,245	0.6	26	56	26.8	631	0.4	44	209	2,108
75-84	21	31.3	220	0.5	21	10	14.9	107	0.3	44	67	653
85 and older	5	12.8	57	0.5	19	4	10.3	48	0.1	13	39	391
<b>Female, Other Eligibles</b>												
All Ages	518	3.0	4,522	0.6	20	405	2.3	3,564	0.3	27	17,267	80,584
5 and younger	1	0.0	12	0.7	5	44	1.2	282	0.4	26	3,695	14,491
6-14	27	0.8	311	0.6	6	7	0.2	66	0.3	14	3,367	17,696
15-20	6	0.2	72	0.4	10	45	1.5	467	0.1	8	3,026	16,766
21-44	117	2.1	744	0.4	14	107	1.9	729	0.3	22	5,545	20,751
45-64	151	15.7	1,057	0.6	22	71	7.4	537	0.4	32	961	4,486
65-74	104	38.2	1,100	0.7	26	64	23.5	712	0.4	32	272	2,638
75-84	85	36.3	953	0.6	23	50	21.4	582	0.4	34	234	2,335
85 and older	27	16.2	273	0.6	22	17	10.2	189	0.5	51	167	1,421
<b>Male</b>												
All Males	3,142	12.9	34,085	0.5	19	1,805	7.4	19,339	0.3	28	24,359	180,522
<b>Male, Disabled</b>												
All Ages	2,798	23.7	30,632	0.5	19	1,566	13.2	17,161	0.3	28	11,829	113,084
5 and younger	0	0.0	0	0.0	0	30	9.5	228	0.3	16	316	2,391
6-14	42	3.6	442	0.4	6	8	0.7	87	0.1	24	1,151	10,553
15-20	12	1.3	131	0.5	14	14	1.5	154	0.2	14	932	8,777
21-44	435	12.8	4,739	0.5	17	314	9.2	3,464	0.3	23	3,403	32,310
45-64	2,245	38.6	24,625	0.5	19	1,170	20.1	12,907	0.3	30	5,814	56,916
65-74	58	34.1	631	0.5	23	29	17.1	309	0.4	21	170	1,733
75-84	3	11.1	36	0.8	30	0	0.0	0	0.0	0	27	272
85 and older	3	18.8	28	0.3	8	1	6.3	12	0.9	133	16	132

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, D.C., 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE						ULCER DRUGS					
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Benefit	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Benefit	Number of Beneficiaries	Number of Benefit Months
<b>Male, Other Eligibles</b>												
All Ages	344	2.7	3,453	0.5	18	239	1.9	2,178	0.4	26	12,530	67,438
5 and younger	4	0.1	27	0.3	3	65	1.6	352	0.3	16	3,974	15,705
6-14	72	2.1	803	0.5	7	12	0.4	126	0.2	15	3,366	18,108
15-20	16	0.6	169	0.5	11	16	0.6	192	0.2	9	2,490	15,666
21-44	56	3.2	518	0.5	19	43	2.5	452	0.3	20	1,729	10,304
45-64	94	15.2	851	0.6	25	48	7.8	466	0.4	25	618	4,299
65-74	65	34.2	707	0.5	21	35	18.4	385	0.5	49	190	1,842
75-84	26	22.2	265	0.7	25	15	12.8	158	0.6	47	117	1,105
85 and older	11	23.9	113	0.5	25	5	10.9	47	0.5	26	46	409
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	14	140

Source: Data for this table are from the MAX 2006 file for D.C., released by CMS in 4/2009. 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, D.C., 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>\$405</b>	<b>5.7</b>	<b>512</b>	<b>5,505</b>
<b>Age</b>				
0-64	546	7.0	292	3,164
65-74	305	5.4	90	977
75-84	246	4.1	59	647
85 and older	61	1.8	71	717
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	358	5.6	254	2,706
Male	450	5.8	258	2,799
Unknown	0	0.0	0	0
<b>Race</b>				
White	273	5.1	29	296
African American	427	5.8	426	4,602
Other/unknown	304	5.2	57	607
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	201	3.9	204	2,162
Disabled	539	7.0	297	3,227
Adults	459	6.0	11	116
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2006 file for D.C., released by CMS in 4/2009. 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 479 beneficiaries who were in nursing facilities for part of their enrollment and their 4,758 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, D.C., 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	0.7	0.3	0.0	0.3	\$135	\$108	\$1	\$27	\$194	\$309	\$339	\$77	1,688	\$328,018	223	43.6	2,429
Biologicals	0.1	0.0	0.0	0.1	11	9	0	2	128	316	0	34	3	384	3	0.6	36
Antineoplastic Agents	0.5	0.0	0.0	0.5	72	9	0	63	131	234	0	123	149	19,466	26	5.1	271
Endocrine/Metabolic Drugs	1.2	0.5	0.0	0.7	82	44	27	12	71	92	882	18	1,968	140,031	158	30.9	1,699
Cardiovascular Agents	2.0	0.7	0.0	1.3	80	52	2	27	40	74	65	21	7,270	291,465	333	65.0	3,639
Respiratory Agents	0.7	0.3	0.0	0.5	32	22	0	9	44	90	80	20	959	42,147	119	23.2	1,312
Gastrointestinal Agents	1.0	0.4	0.0	0.6	63	47	0	16	63	116	28	27	2,557	161,743	236	46.1	2,582
Genitourinary Agents	0.7	0.3	0.1	0.3	45	25	9	10	64	81	113	34	381	24,301	47	9.2	544
CNS Drugs	1.5	0.6	0.1	0.8	128	98	7	24	86	164	84	29	4,727	406,153	286	55.9	3,167
Stimulants/Anti-obesity/Anorexia	0.9	0.0	0.0	0.9	16	0	0	16	18	0	0	18	56	996	6	1.2	61
Miscellaneous Psychological/Neurological Agents	0.9	0.9	0.0	0.0	113	113	0	0	130	130	0	0	386	50,083	40	7.8	444
Analgesics and Anesthetics	1.4	0.1	0.0	1.3	72	21	2	49	52	301	63	38	2,731	142,841	181	35.4	1,981
Neuromuscular Agents	1.5	0.4	0.1	0.9	112	69	3	41	77	155	35	43	3,822	292,943	237	46.3	2,613
Nutritional Products	0.7	0.0	0.0	0.7	13	0	1	12	19	0	53	18	1,016	18,985	133	26.0	1,460
Hematological Agents	1.1	0.4	0.0	0.7	106	88	0	17	94	231	15	24	2,310	218,120	194	37.9	2,067
Topical Products	0.5	0.2	0.1	0.3	29	15	6	8	54	86	77	27	1,375	74,322	233	45.5	2,584
Miscellaneous Products	0.3	0.1	0.0	0.2	51	38	0	13	147	337	0	54	104	15,272	26	5.1	300
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	6	0	0	0	24	0	0	0	59	1,393	19	3.7	226
<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>31,561</b>	<b>2,228,663</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 D.C., released by CMS in 4/2009. 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 479 beneficiaries who were in nursing facilities for part of their enrollment and their 4,758 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 D.C., 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.  
 Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

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, D.C., 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	\$273,284	184	35.9	2,043	0.8	\$159	\$134	
ANTICONVULSANT	257,177	271	52.9	2,991	1.0	85	86	
ANTIVIRAL	241,886	48	9.4	511	1.0	470	473	
ULCER DRUGS	107,543	198	38.7	2,157	0.7	74	50	
ANTIDEPRESSANTS	104,924	209	40.8	2,331	0.8	58	45	
ANALGESICS - Narcotic	102,257	195	38.1	2,119	1.0	47	48	
HEMATOPOIETIC AGENTS	100,572	139	27.1	1,500	0.7	90	67	
ANTHYPERLIPIDEMIC	95,137	130	25.4	1,468	0.8	86	65	
ANTIDIABETIC	95,467	203	39.6	2,272	0.9	46	42	
ANTIHYPERTENSIVE	70,145	246	48.0	2,736	0.7	36	26	
<b>Total</b>	<b>1,448,392</b>	<b>1,823</b>	<b>n.a.</b>	<b>20,128</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 D.C., released by CMS in 4/2009. 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 479 beneficiaries who were in nursing facilities for part of their enrollment and their 4,758 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, D.C., 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>16,921</b>	<b>\$1,448,392</b>	<b>184</b>	<b>35.9</b>	<b>2,043</b>	<b>0.8</b>	<b>\$134</b>	<b>271</b>	<b>52.9</b>	<b>2,991</b>	<b>1.0</b>	<b>\$86</b>
<b>Female</b>												
All Females	8,086	621,498	99	39.0	1,087	0.8	123	106	41.7	1,178	0.9	73
<b>Female, Disabled</b>												
All Ages	5,262	451,064	51	45.1	549	0.8	131	77	68.1	856	1.0	82
64 or younger	5,050	427,390	46	42.2	489	0.8	134	75	68.8	832	1.0	76
65-74	201	23,075	4	133.3	48	1.0	124	2	66.7	24	1.3	281
75-84	11	599	1	100.0	12	0.9	50	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	2,824	170,434	48	34.0	538	0.8	115	29	20.6	322	0.9	48
64 or younger	133	9,443	2	50.0	24	0.6	245	2	50.0	24	0.7	14
65-74	1,585	101,895	26	57.8	305	0.8	120	21	46.7	228	1.0	62
75-84	654	40,073	13	37.1	136	0.9	123	5	14.3	58	0.5	9
85 and older	452	19,023	7	12.3	73	0.5	40	1	1.8	12	1.0	35
<b>Male</b>												
All Males	8,835	826,894	85	32.9	956	0.9	146	165	64.0	1,813	1.1	95
<b>Male, Disabled</b>												
All Ages	7,308	711,413	67	36.4	766	0.9	148	137	74.5	1,505	1.1	101
64 or younger	6,956	684,144	63	36.8	718	0.9	149	132	77.2	1,452	1.1	104
65-74	326	23,121	3	25.0	36	1.2	116	5	41.7	53	0.6	16
75-84	26	4,148	1	100.0	12	1.0	225	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	1,527	115,481	18	24.3	190	1.0	136	28	37.8	308	1.1	67
64 or younger	334	36,460	1	12.5	12	1.0	175	5	62.5	60	1.2	54
65-74	734	43,839	11	36.7	106	0.9	95	17	56.7	179	1.2	66
75-84	417	34,520	5	22.7	60	1.1	222	6	27.3	69	0.8	80
85 and older	42	662	1	7.1	12	0.9	25	0	0.0	0	0.0	0
<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 D.C., released by CMS in 4/2009. 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 479 beneficiaries who were in nursing facilities for part of their enrollment and their 4,758 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, D.C., 2006

Beneficiary Characteristics	ANTIVIRAL					ULCER DRUGS					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>48</b>	<b>9.4</b>	<b>511</b>	<b>1.0</b>	<b>\$473</b>	<b>198</b>	<b>38.7</b>	<b>2,157</b>	<b>0.7</b>	<b>\$50</b>	<b>209</b>	<b>40.8</b>	<b>2,331</b>	<b>0.8</b>	<b>\$45</b>
<b>Female</b>															
All Females	17	6.7	190	0.9	409	88	34.6	976	0.7	49	107	42.1	1,205	0.8	42
<b>Female, Disabled</b>															
All Ages	14	12.4	154	1.1	503	62	54.9	690	0.7	47	66	58.4	764	0.7	45
64 or younger	14	12.8	154	1.1	503	62	56.9	690	0.7	47	63	57.8	728	0.7	41
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	100.0	36	0.8	113
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	2.1	36	0.1	4	26	18.4	286	0.7	56	41	29.1	441	0.8	37
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	100.0	38	0.6	28
65-74	2	4.4	24	0.2	5	10	22.2	111	0.7	57	24	53.3	265	0.9	40
75-84	1	2.9	12	0.1	3	6	17.1	70	1.0	78	6	17.1	70	1.0	43
85 and older	0	0.0	0	0.0	0	10	17.5	105	0.6	40	7	12.3	68	0.5	21
<b>Male</b>															
All Males	31	12.0	321	1.1	512	110	42.6	1,181	0.7	50	102	39.5	1,126	0.8	49
<b>Male, Disabled</b>															
All Ages	28	15.2	285	1.0	540	89	48.4	956	0.6	50	85	46.2	952	0.8	50
64 or younger	28	16.4	285	1.0	540	85	49.7	915	0.6	51	75	43.9	845	0.8	49
65-74	0	0.0	0	0.0	0	4	33.3	41	0.5	22	10	83.3	107	0.6	53
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	3	4.1	36	1.6	286	21	28.4	225	0.8	54	17	23.0	174	0.8	42
64 or younger	3	37.5	36	1.6	286	4	50.0	48	0.6	39	3	37.5	36	0.9	59
65-74	0	0.0	0	0.0	0	7	23.3	75	0.8	66	6	20.0	63	1.0	47
75-84	0	0.0	0	0.0	0	9	40.9	98	0.8	55	6	27.3	67	0.7	33
85 and older	0	0.0	0	0.0	0	1	7.1	4	0.3	10	2	14.3	8	0.3	5
<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 D.C., released by CMS in 4/2009. 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 479 beneficiaries who were in nursing facilities for part of their enrollment and their 4,758 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, D.C., 2006

Beneficiary Characteristics	ANALGESICS - Narcotic					HEMATOPOIETIC AGENTS					ANTIHYPERLIPIDEMIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>195</b>	<b>38.1</b>	<b>2,119</b>	<b>1.0</b>	<b>\$48</b>	<b>139</b>	<b>27.1</b>	<b>1,500</b>	<b>0.7</b>	<b>\$67</b>	<b>130</b>	<b>25.4</b>	<b>1,468</b>	<b>0.8</b>	<b>\$65</b>
<b>Female</b>															
All Females	86	33.9	938	1.2	56	63	24.8	682	0.8	66	66	26.0	740	0.7	57
<b>Female, Disabled</b>															
All Ages	65	57.5	717	1.3	69	34	30.1	379	0.9	107	46	40.7	511	0.7	55
64 or younger	65	59.6	717	1.3	69	34	31.2	379	0.9	107	43	39.4	475	0.7	54
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	100.0	36	0.8	75
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	21	14.9	221	0.6	14	29	20.6	303	0.7	14	20	14.2	229	0.8	62
64 or younger	1	25.0	12	1.6	20	1	25.0	7	0.7	4	0	0.0	0	0.0	0
65-74	11	24.4	111	0.8	16	12	26.7	119	0.6	9	9	20.0	108	0.9	79
75-84	6	17.1	62	0.5	16	3	8.6	36	0.9	6	6	17.1	63	0.8	59
85 and older	3	5.3	36	0.1	2	13	22.8	141	0.7	21	5	8.8	58	0.7	33
<b>Male</b>															
All Males	109	42.2	1,181	0.9	42	76	29.5	818	0.7	68	64	24.8	728	0.8	73
<b>Male, Disabled</b>															
All Ages	100	54.3	1,091	0.9	42	51	27.7	549	0.7	75	53	28.8	604	0.8	78
64 or younger	94	55.0	1,033	0.9	43	47	27.5	514	0.7	78	48	28.1	544	0.8	74
65-74	6	50.0	58	0.2	14	4	33.3	35	0.5	29	4	33.3	48	0.9	106
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	12	1.2	120
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	9	12.2	90	0.8	48	25	33.8	269	0.7	55	11	14.9	124	0.6	48
64 or younger	1	12.5	12	0.8	25	2	25.0	24	1.3	419	2	25.0	24	0.7	64
65-74	4	13.3	40	0.8	48	11	36.7	124	0.8	22	7	23.3	76	0.5	41
75-84	4	18.2	38	0.9	55	8	36.4	83	0.6	21	2	9.1	24	0.6	53
85 and older	0	0.0	0	0.0	0	4	28.6	38	0.6	6	0	0.0	0	0.0	0
<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 D.C., released by CMS in 4/2009. 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 479 beneficiaries who were in nursing facilities for part of their enrollment and their 4,758 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, D.C., 2006

Beneficiary Characteristics	ANTIDIABETIC					ANTIHYPERTENSIVE					Benefit Months Among All-Year Nursing Facility Residents	
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		All-Year Nursing Facility Residents
<b>All</b>	<b>203</b>	<b>39.6</b>	<b>2,272</b>	<b>0.9</b>	<b>\$42</b>	<b>246</b>	<b>48.0</b>	<b>2,736</b>	<b>0.7</b>	<b>\$26</b>	<b>512</b>	<b>5,505</b>
<b>Female</b>												
All Females	114	44.9	1,283	0.9	39	127	50.0	1,389	0.8	27	254	2,706
<b>Female, Disabled</b>												
All Ages	62	54.9	696	0.8	39	71	62.8	793	0.8	26	113	1,227
64 or younger	59	54.1	660	0.8	37	68	62.4	757	0.8	26	109	1,179
65-74	3	100.0	36	1.2	75	3	100.0	36	0.7	25	3	36
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
<b>Female, Other Eligibles</b>												
All Ages	52	36.9	587	1.0	39	56	39.7	596	0.8	27	141	1,479
64 or younger	1	25.0	12	1.8	75	3	75.0	36	0.9	28	4	43
65-74	31	68.9	356	1.0	40	24	53.3	255	0.8	33	45	467
75-84	12	34.3	134	0.8	34	18	51.4	194	0.7	25	35	396
85 and older	8	14.0	85	1.0	36	11	19.3	111	0.7	19	57	573
<b>Male</b>												
All Males	89	34.5	989	0.9	46	119	46.1	1,347	0.7	25	258	2,799
<b>Male, Disabled</b>												
All Ages	78	42.4	866	1.0	50	88	47.8	1,008	0.7	21	184	2,000
64 or younger	74	43.3	818	1.0	49	83	48.5	948	0.7	21	171	1,857
65-74	4	33.3	48	1.1	58	5	41.7	60	0.7	31	12	131
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
<b>Male, Other Eligibles</b>												
All Ages	11	14.9	123	0.6	23	31	41.9	339	0.6	35	74	799
64 or younger	1	12.5	12	0.6	21	9	112.5	108	0.7	44	8	85
65-74	5	16.7	60	0.5	21	14	46.7	151	0.7	34	30	343
75-84	4	18.2	47	0.7	27	5	22.7	60	0.6	30	22	227
85 and older	1	7.1	4	0.3	6	3	21.4	20	0.2	2	14	144
<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 D.C., released by CMS in 4/2009. 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 479 beneficiaries who were in nursing facilities for part of their enrollment and their 4,758 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>  
 D.C., 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>8,632</b>	<b>16.8</b>	<b>1.0</b>	<b>52,753</b>	<b>\$14</b>	<b>\$719,517</b>	<b>\$14</b>	<b>1.1</b>	<b>51,501</b>	
<b>Age</b>										
5 and younger	462	5.6	0.1	735	1	10,768	15	1.8	8,239	
6-14	228	2.7	0.1	442	1	8,540	19	0.4	8,407	
15-20	272	3.9	0.1	515	1	7,302	14	0.3	6,966	
21-44	2,105	15.5	0.8	10,414	12	165,988	16	0.9	13,601	
45-64	5,032	39.6	2.9	36,379	38	481,104	13	1.2	12,721	
65-74	312	37.1	2.9	2,476	32	26,500	11	1.8	841	
75-84	150	33.7	2.7	1,198	31	13,764	11	2.9	445	
85 and older	71	26.5	2.2	594	21	5,551	9	4.2	268	
Unknown	0	0.0	0.0	0	0	0	0	0.0	13	
<b>Basis of Eligibility<sup>c</sup></b>										
Aged	327	32.0	2.6	2,680	28	28,283	11	2.5	1,021	
Disabled	6,813	31.4	2.1	45,362	29	627,459	14	1.2	21,690	
Adults	796	8.4	0.4	3,572	5	46,951	13	0.6	9,516	
Children	696	3.6	0.1	1,139	1	16,824	15	0.6	19,274	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
<b>Gender</b>										
Female	4,990	18.4	1.1	30,474	16	427,841	14	1.3	27,134	
Male	3,642	14.9	0.9	22,279	12	291,676	13	0.9	24,366	
Unknown	0	0.0	0.0	0	0	0	0	0.0	1	
<b>Race</b>										
White	280	22.6	2.1	2,586	40	49,937	19	1.8	1,241	
African American	7,498	17.1	1.0	45,061	14	604,992	13	1.1	43,723	
Other/unknown	854	13.1	0.8	5,106	10	64,588	13	1.0	6,537	
<b>Use of Nursing Facilities<sup>d</sup></b>										
Entire year	279	54.5	6.2	3,168	80	40,766	13	1.8	512	
Part year	290	60.5	4.3	2,046	55	26,202	13	1.4	479	
None	8,063	16.0	0.9	47,539	13	652,549	14	1.1	50,510	
<b>Maintenance Assistance Status</b>										
Cash	5,974	22.4	1.5	40,694	21	562,250	14	1.2	26,724	
Medically needy	1,815	13.4	0.7	8,905	8	112,865	13	1.0	13,590	
Poverty related	333	5.7	0.2	1,321	4	21,926	17	1.5	5,821	
Other/unknown	510	9.5	0.3	1,833	4	22,476	12	0.5	5,366	

Source: Data for this table are from the MAX 2006 file for D.C., released by CMS in 4/2009. 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>  
 D.C., 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>0.1</b>	<b>\$2</b>	<b>\$14</b>	<b>\$0</b>	<b>\$1</b>	<b>360,515</b>
<b>Age</b>						
5 and younger	0.0	0	15	0	0	34,517
6-14	0.0	0	19	0	0	51,113
15-20	0.0	0	14	0	0	46,182
21-44	0.1	2	16	0	1	92,597
45-64	0.3	4	13	0	1	120,929
65-74	0.3	3	11	0	1	8,321
75-84	0.3	3	11	0	1	4,365
85 and older	0.3	2	9	0	0	2,353
Unknown	0.0	0	0	0	0	138
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.3	3	11	0	1	9,714
Disabled	0.2	3	14	0	1	212,353
Adults	0.1	1	13	0	0	42,073
Children	0.0	0	15	0	0	96,375
Unknown	0.0	0	0	0	0	0
<b>Gender</b>						
Female	0.2	2	14	0	1	179,916
Male	0.1	2	13	0	0	180,597
Unknown	0.0	0	0	0	0	2
<b>Race</b>						
White	0.2	5	19	0	2	10,352
African American	0.1	2	13	0	1	311,600
Other/unknown	0.1	2	13	0	0	38,563
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.6	7	13	0	2	5,505
Part year	0.4	6	13	0	2	4,758
None	0.1	2	14	0	1	350,252
<b>Maintenance Assistance Status</b>						
Cash	0.2	3	14	0	1	207,819
Medically needy	0.1	2	13	0	0	74,943
Poverty related	0.1	1	17	0	0	23,657
Other/unknown	0.0	0	12	0	0	54,096

Source: Data for this table are from the MAX 2006 file for D.C., released by CMS in 4/2009. 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>  
 D.C., 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	Total Number Rx. \$ per Rx
<b>All</b>	<b>11,876</b>	<b>\$61</b>	<b>\$719,517</b>	<b>100.0</b>	<b>52,753</b>	<b>\$14</b>	<b>100.0</b>
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	7	179	1,256	0.2	22	57	0.0
Cough and cold medications	2,246	77	172,851	24.0	4,650	37	8.8
Vitamins and minerals	3,323	71	234,578	32.6	16,578	14	31.4
Non-prescription drugs	3,562	19	65,913	9.2	16,263	4	30.8
Barbiturates	238	66	15,796	2.2	2,253	7	4.3
Benzodiazepines	2,183	93	202,825	28.2	12,162	17	23.1
Other Part D Excl Rx Drugs	317	83	26,298	3.7	825	32	1.6

Source: Data for this table are from the MAX 2006 file for D.C., released by CMS in 4/2009. 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, D.C., 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>144,065</b>	<b>1,021</b>	<b>24,442</b>	<b>38,328</b>	<b>80,274</b>	<b>0</b>	<b>1,494,902</b>	<b>9,758</b>	<b>254,308</b>	<b>395,212</b>	<b>835,624</b>	<b>0</b>
<b>Age</b>												
5 and younger	29,382	0	818	10	28,554	0	286,985	0	8,310	64	278,611	0
6-14	36,958	0	2,963	8	33,987	0	404,537	0	34,040	58	370,439	0
15-20	21,719	0	2,565	1,764	17,390	0	230,887	0	28,879	17,559	184,449	0
21-44	35,715	1	6,425	28,960	329	0	364,486	4	63,888	298,619	1,975	0
45-64	18,695	7	11,143	7,544	1	0	192,464	46	113,891	78,515	12	0
65-74	865	451	379	35	0	0	8,626	4,442	3,852	332	0	0
75-84	450	350	94	6	0	0	4,425	3,439	925	61	0	0
85 and older	268	212	55	1	0	0	2,354	1,827	523	4	0	0
Unknown	13	0	0	0	13	0	138	0	0	0	138	0
<b>Gender</b>												
Female	84,018	671	10,802	32,310	40,235	0	880,190	6,413	114,617	337,889	421,271	0
Male	60,046	350	13,640	6,017	40,039	0	614,710	3,345	139,691	57,321	414,353	0
Unknown	1	0	0	1	0	0	2	0	0	2	0	0
<b>Race</b>												
White	1,622	59	887	358	318	0	14,913	585	8,127	3,370	2,831	0
African American	125,898	672	21,732	34,602	68,892	0	1,314,429	6,235	227,800	357,251	723,143	0
Other/unknown	16,545	290	1,823	3,368	11,064	0	165,560	2,938	18,381	34,591	109,650	0
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	512	204	297	11	0	0	5,505	2,162	3,227	116	0	0
Part year	479	65	402	11	1	0	4,795	592	4,079	112	12	0
None	143,074	752	23,743	38,306	80,273	0	1,484,602	7,004	247,002	394,984	835,612	0
<b>Maintenance Assistance Status</b>												
Cash	73,984	237	18,480	22,469	32,798	0	800,068	2,461	203,003	238,317	356,287	0
Medically needy	38,069	295	5,392	13,086	19,296	0	365,503	2,497	45,949	131,394	185,663	0
Poverty related	23,893	141	529	519	22,704	0	245,675	1,340	4,962	4,233	235,140	0
Other/unknown	8,119	348	41	2,254	5,476	0	83,656	3,460	394	21,268	58,534	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	31,239	1,014	20,193	3,051	6,981	0	291,122	9,677	204,366	21,955	55,124	0
FFS part year, with Rx claims	4,474	3	715	1,732	2,024	0	44,188	36	8,405	16,282	19,465	0
FFS part year, no Rx claims	15,788	4	782	4,733	10,269	0	145,806	45	8,919	42,745	94,097	0
MC all year, with Rx claims	118	0	5	51	62	0	1,093	0	60	441	592	0
MC all year, no Rx claims	92,446	0	2,747	28,761	60,938	0	1,012,693	0	32,558	313,789	666,346	0

Source: Data for this table are from the MAX 2006 file for D.C., released by CMS in 4/2009. 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, D.C., 2006

	Beneficiaries and Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
<b>All</b>	<b>144,065</b>	<b>1,494,902</b>	<b>51,501</b>	<b>360,515</b>	<b>0</b>	<b>1,134,387</b>
Fee-for-service (FFS) all year	31,239	291,122	31,239	291,122	0	0
FFS part year, with Rx claims	4,474	44,188	4,474	18,893	0	25,295
FFS part year, with no Rx claims	15,788	145,806	15,788	50,500	0	95,306
Managed care (MC) all year, with Rx claims	118	1,093	0	0	0	1,093
MC all year, with no Rx claims	92,446	1,012,693	0	0	0	1,012,693

Source: Data for this table are from the MAX 2006 file for D.C., released by CMS in 4/2009. 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