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

LIST OF TABLES

OVERVIEW OF STUDY POPULATION

TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION

FOR ALL MEDICAID BENEFICIARIES

TABLE 2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY
TABLE 3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC
TABLE 4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
TABLE 5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC
TABLE 6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY
TABLE 7. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP

FOR ALL NONDUAL BENEFICIARIES

TABLE ND.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY
TABLE ND.3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC
TABLE ND.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
TABLE ND.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC
TABLE ND.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY
TABLE ND.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP
TABLE ND.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC
TABLE ND.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY
TABLE ND.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP
TABLE ND.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC
TABLE ND.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
TABLE ND.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS

FOR DUAL ELIGIBLE BENEFICIARIES

TABLE D.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY
TABLE D.3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC
TABLE D.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
TABLE D.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC
TABLE D.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY
TABLE D.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP
TABLE D.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC
TABLE D.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY
TABLE D.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP
TABLE D.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS, BY BENEFICIARY CHARACTERISTIC
TABLE D.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC
TABLE D.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS

SUPPLEMENTAL TABLES

SUPPLEMENTAL TABLE 1. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES
SUPPLEMENTAL TABLE 1A. MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65
SUPPLEMENTAL TABLE 1B. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER
SUPPLEMENTAL TABLE 1C. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74
SUPPLEMENTAL TABLE 1D. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84
SUPPLEMENTAL TABLE 1E. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER

APPENDIX TABLES

APPENDIX TABLE A.1. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, NONDUAL BENEFICIARIES
APPENDIX TABLE A.2. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, NONDUAL BENEFICIARIES
APPENDIX TABLE A.3. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, DUAL ELIGIBLE BENEFICIARIES
APPENDIX TABLE A.4. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, DUAL ELIGIBLE BENEFICIARIES

TABLE NO.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	105,380	145	9,944	47,613	47,644	34	1,027,310	1,533	111,861	424,381	489,287	248
Age												
5 and younger	22,623	0	663	3	21,957	0	229,499	0	7,351	27	222,121	0
6-14	20,697	1	2,235	2	18,459	0	220,650	12	25,728	13	194,897	0
15-20	12,280	1	1,454	3,616	7,209	0	121,147	8	16,521	32,489	72,129	0
21-44	36,471	5	2,412	34,029	14	11	330,618	30	26,784	303,672	101	31
45-64	12,909	1	3,147	9,733	5	23	121,456	6	35,129	86,065	39	217
65-74	261	61	33	167	0	0	2,512	668	348	1,496	0	0
75-84	89	40	0	49	0	0	912	431	0	481	0	0
85 and older	50	36	0	14	0	0	516	378	0	138	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	66,344	106	4,955	36,800	24,449	34	638,624	1,109	55,718	330,747	250,802	248
Male	39,036	39	4,989	10,813	23,195	0	388,686	424	56,143	93,634	238,485	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	47,015	58	4,767	23,709	18,459	22	452,252	571	53,248	211,295	186,970	168
African American	44,394	50	4,280	19,401	20,651	12	438,222	549	48,520	173,224	215,849	80
Other/unknown	13,971	37	897	4,503	8,534	0	136,836	413	10,093	39,862	86,468	0
Use of Nursing Facilities^c												
Entire year	132	26	106	0	0	0	1,420	266	1,154	0	0	0
Part year	117	18	91	8	0	0	1,141	173	892	76	0	0
None	105,131	101	9,747	47,605	47,644	34	1,024,749	1,094	109,815	424,305	489,287	248
Maintenance Assistance Status												
Cash	62,310	103	8,585	19,341	34,281	0	645,917	1,147	96,630	191,992	356,148	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	4,308	7	10	287	3,970	34	39,101	39	38	1,710	37,066	248
Other/unknown	38,762	35	1,349	27,985	9,393	0	342,292	347	15,193	230,679	96,073	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	2,944	1	2	2,883	58	0	22,050	11	13	21,697	329	0
FFS part year, with Rx claims	4,189	5	16	4,089	77	2	16,496	25	42	16,126	297	6
FFS part year, no Rx claims	1,465	7	9	1,387	60	2	7,542	44	39	7,181	275	3

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.

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.

Benef(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 NO.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Beneficiaries
All	94.9	12.2	\$848	\$69	\$984	86.2	105,380
Age							
5 and younger	97.5	5.7	312	55	312	100.0	22,623
6-14	98.2	7.9	609	78	609	100.0	20,697
15-20	96.2	8.6	584	68	717	81.3	12,280
21-44	91.0	13.3	859	65	1,158	74.2	36,471
45-64	94.8	30.9	2,365	77	2,496	94.8	12,909
65-74	98.1	31.0	1,976	64	2,007	98.5	261
75-84	92.1	25.2	1,723	68	1,784	96.6	89
85 and older	88.0	17.1	807	47	1,200	67.3	50
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	86.9	29.0	1,806	62	2,184	82.7	145
Disabled	99.5	33.1	3,163	96	3,172	99.7	9,944
Adults	91.3	14.0	848	61	1,137	74.6	47,613
Children	97.6	6.1	362	59	371	97.6	47,644
Unknown	91.2	17.2	1,545	90	1,700	90.9	34
Gender							
Female	92.9	12.7	801	63	1,016	78.9	66,344
Male	98.4	11.5	928	81	930	99.8	39,036
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	95.6	15.5	1,091	70	1,233	88.4	47,015
African American	94.4	10.0	690	69	829	83.3	44,394
Other/unknown	94.4	8.5	536	63	638	84.0	13,971
Use of Nursing Facilities^f							
Entire year	100.0	78.9	5,431	69	5,431	100.0	132
Part year	96.6	54.3	4,024	74	5,069	79.4	117
None	94.9	12.1	839	69	974	86.2	105,131
Maintenance Assistance Status							
Cash	98.0	12.1	834	69	894	93.3	62,310
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	96.8	5.5	302	55	374	80.7	4,308
Other/unknown	89.8	13.3	931	70	1,196	77.9	38,762

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.

a. Table NO.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 1 of Table 1 for methodology used to determine nursing facility residence.

Benef(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 NO.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS ^c				More than 0, but 1 or More than 1, but 2, but 5 or 5, but 10 or			Mean \$, All Medicaid FFS ^d	Beneficiaries	Benefit Months
			None	Less	2 or Less	Less	Less	More than 10				
All	1.3	\$87	86.2	5.1	69.5	10.2	10.4	3.7	1.1	\$101	105,380	1,027,310
Age												
5 and younger	0.6	31	100.0	2.5	90.2	5.4	1.8	0.1	0.0	31	22,623	229,499
6-14	0.7	57	100.0	1.8	84.0	8.2	5.3	0.6	0.0	57	20,697	220,650
15-20	0.9	59	81.3	3.8	78.7	9.5	6.7	1.0	0.3	73	12,280	121,147
21-44	1.5	95	74.2	9.0	58.9	12.9	13.2	4.4	1.6	128	36,471	330,618
45-64	3.3	251	94.8	5.2	32.1	15.1	28.7	15.2	3.8	265	12,909	121,456
65-74	3.2	205	98.5	1.9	33.7	14.6	30.3	16.5	3.1	209	261	2,512
75-84	2.5	168	96.6	7.9	39.3	18.0	24.7	7.9	2.2	174	89	912
85 and older	1.7	78	67.3	12.0	56.0	12.0	12.0	8.0	0.0	116	50	516
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^e												
Aged	2.7	171	82.7	13.1	33.1	10.3	29.7	11.0	2.8	207	145	1,533
Disabled	2.9	281	99.7	0.5	41.8	15.0	26.1	13.2	3.4	282	9,944	111,861
Adults	1.6	95	74.6	8.7	56.6	13.1	14.7	5.2	1.6	128	47,613	424,381
Children	0.6	35	97.6	2.4	88.3	6.4	2.7	0.2	0.0	36	47,644	489,287
Unknown	2.4	212	90.9	8.8	41.2	14.7	26.5	8.8	0.0	233	34	248
Gender												
Female	1.3	83	78.9	7.1	66.4	10.3	10.6	4.2	1.5	106	66,344	638,624
Male	1.2	93	99.8	1.6	74.8	10.2	10.1	2.9	0.4	93	39,036	388,686
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.6	113	88.4	4.4	62.5	12.3	14.0	5.3	1.6	128	47,015	452,252
African American	1.0	70	83.3	5.6	74.3	8.9	8.0	2.5	0.7	84	44,394	438,222
Other/unknown	0.9	55	84.0	5.6	77.9	7.8	6.2	2.0	0.5	65	13,971	136,836
Use of Nursing Facilities^f												
Entire year	7.3	505	100.0	0.0	9.8	4.5	23.5	36.4	25.8	505	132	1,420
Part year	5.6	413	79.4	3.4	16.2	10.3	33.3	23.9	12.8	520	117	1,141
None	1.2	86	86.2	5.1	69.6	10.3	10.4	3.6	1.0	100	105,131	1,024,749
Maintenance Assistance Status												
Cash	1.2	81	93.3	2.0	76.3	9.2	8.5	3.1	0.8	86	62,310	645,917
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.6	33	80.7	3.2	86.7	6.8	2.8	0.5	0.1	41	4,308	39,101
Other/unknown	1.5	106	77.9	10.2	56.6	12.3	14.2	5.1	1.6	135	38,762	342,292

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 a. Table NO.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 1 of Table 1 for methodology used to determine nursing facility residence.
 Beneficiaries = beneficiary (or beneficiaries); Base Month = 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 NO.5
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	1.3	\$87	\$69	0.5	\$64	\$140	0.1	\$6	\$109	0.7	\$17	\$23
Age												
5 and younger	0.6	31	55	0.2	23	153	0.0	1	46	0.4	7	17
6-14	0.7	57	78	0.4	48	128	0.0	2	68	0.3	8	22
15-20	0.9	59	68	0.4	46	127	0.0	3	90	0.5	10	21
21-44	1.5	95	65	0.5	67	138	0.1	7	113	0.9	21	23
45-64	3.3	251	77	1.2	182	150	0.1	20	135	1.9	49	25
65-74	3.2	205	64	1.2	144	120	0.2	22	118	1.8	40	22
75-84	2.5	168	68	1.0	128	127	0.1	13	104	1.3	27	21
85 and older	1.7	78	47	0.6	56	95	0.1	6	80	1.0	17	17
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	2.7	171	62	1.0	126	124	0.1	14	109	1.6	30	19
Disabled	2.9	281	96	1.2	224	185	0.1	14	115	1.6	43	27
Adults	1.6	95	61	0.5	65	122	0.1	8	124	1.0	22	23
Children	0.6	35	59	0.2	27	120	0.0	1	59	0.3	7	20
Unknown	2.4	212	90	0.9	163	186	0.1	13	110	1.4	36	27
Gender												
Female	1.3	83	63	0.5	60	128	0.1	6	105	0.8	18	22
Male	1.2	93	81	0.5	72	159	0.0	5	119	0.7	16	24
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	1.6	113	70	0.6	83	136	0.1	8	114	0.9	23	25
African American	1.0	70	69	0.4	53	148	0.0	4	104	0.6	13	21
Other/unknown	0.9	55	63	0.3	41	135	0.0	4	96	0.5	11	20
Use of Nursing Facilities^e												
Entire year	7.3	505	69	2.1	368	172	0.3	32	98	4.9	105	22
Part year	5.6	413	74	1.9	323	168	0.2	15	71	3.4	75	22
None	1.2	86	69	0.5	64	140	0.1	6	109	0.7	17	23
Maintenance Assistance Status												
Cash	1.2	81	69	0.4	60	142	0.0	5	102	0.7	16	23
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.6	33	55	0.2	25	120	0.0	2	64	0.4	7	18
Other/unknown	1.5	106	70	0.6	78	138	0.1	8	120	0.9	20	23

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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 Delaware, 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 1 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 NO.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users ^e							
	Patented Brand-Name	Off-Patent Brand-Name		Patented Brand-Name	Off-Patent Brand-Name		Patented Brand-Name	Off-Patent Brand-Name		Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months			
		Generic	Total		Generic	Total		Generic	Total								
Anti-infective Agents	0.2	0.1	0.0	0.2	\$21	\$16	\$2	\$4	\$86	\$269	\$125	\$22	159,151	\$13,723,027	62,590	59.4	643,047
Biologicals	0.3	0.3	0.0	0.0	340	340	0	0	1124	1,134	0	27	1,739	1,954,704	580	0.6	5,746
Antineoplastic Agents	0.4	0.2	0.0	0.3	150	133	0	17	338	824	0	62	2,419	818,718	529	0.5	5,449
Endocrine/Metabolic Drugs	0.4	0.2	0.0	0.2	24	16	1	6	58	102	72	27	122,509	7,063,389	29,222	27.7	294,537
Cardiovascular Agents	0.9	0.4	0.1	0.5	47	31	7	9	50	83	122	17	146,251	7,271,430	15,681	14.9	155,848
Respiratory Agents	0.4	0.2	0.0	0.2	22	18	1	3	58	103	71	17	171,433	9,959,356	43,136	40.9	445,668
Gastrointestinal Agents	0.4	0.2	0.0	0.2	36	31	1	4	92	146	229	21	57,549	5,266,627	14,555	13.8	148,049
Genitourinary Agents	0.2	0.1	0.0	0.1	11	7	1	3	54	77	80	30	15,269	821,928	7,168	6.8	72,519
CNS Drugs	0.8	0.4	0.1	0.4	68	53	7	8	83	147	101	22	194,967	16,269,935	24,046	22.8	240,538
Stimulants/Anti-obesity/Anorexia	0.7	0.6	0.0	0.1	62	58	0	4	91	101	222	37	46,238	4,217,696	6,285	6.0	68,025
Miscellaneous Psychological/Neurological Agents	0.3	0.2	0.0	0.1	158	152	0	6	543	632	0	120	1,747	947,766	586	0.6	5,994
Analgesics and Anesthetics	0.5	0.0	0.0	0.4	20	7	2	11	42	210	317	26	176,436	7,455,692	37,648	35.7	375,581
Neuromuscular Agents	0.5	0.2	0.0	0.3	43	31	1	11	78	150	89	33	83,570	6,538,962	15,092	14.3	152,046
Nutritional Products	0.2	0.1	0.0	0.1	6	4	0	2	27	46	29	15	17,194	467,893	7,646	7.3	78,117
Hematological Agents	0.4	0.2	0.0	0.2	82	78	0	4	192	382	32	19	13,987	2,690,367	3,208	3.0	32,611
Topical Products	0.2	0.1	0.0	0.1	9	6	0	3	41	90	69	19	76,308	3,160,995	34,819	33.0	364,024
Miscellaneous Products	0.2	0.1	0.0	0.0	35	31	1	2	218	250	330	79	3,435	750,520	2,002	1.9	21,614
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	5	0	0	0	39	0	0	0	303	11,725	236	0.2	2,512
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	1,290,505	89,390,730	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.

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 Delaware, 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.

TABLE NO.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIVIRAL	\$7,890,888	3,364	3.2	34,749	0.4	\$518	\$227
ANTIPSYCHOTICS	7,713,825	7,519	7.1	78,853	0.5	201	98
ANTIASTHMATIC	5,757,189	33,135	31.4	348,556	0.2	66	17
ANTIDEPRESSANTS	5,202,183	18,769	17.8	187,862	0.4	66	28
ANTICONVULSANT	4,758,519	7,960	7.6	82,452	0.5	107	58
ANALGESICS - Narcotic	4,106,175	36,762	34.9	371,430	0.3	39	11
ULCER DRUGS	3,886,419	11,049	10.5	112,948	0.3	106	34
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	3,865,833	6,724	6.4	73,452	0.6	91	53
ANTIHYPERTENSIVE	2,978,038	6,561	6.2	67,550	0.4	104	44
ANTIDIABETIC	2,764,098	6,664	6.3	66,363	0.6	75	42
Total	48,923,167	138,507	n.a.	1,424,215	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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.

TABLE ND.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	All Top 10 Drug Groups							ANTIVIRAL			ANTIPSYCHOTICS		
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes Among Users	Number of Benefit Months	Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes Among Users	Number of Benefit Months	Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	
All	513,887	\$48,923,167	3,364	3.2	34,749	0.4	\$227	7,519	7.1	78,853	0.5	\$98	
Female													
All Females	312,638	27,108,245	2,220	3.3	22,681	0.4	153	4,204	6.3	43,934	0.4	86	
Female, Disabled													
All Ages	88,335	9,851,667	563	11.4	6,360	0.6	295	1,401	28.3	16,053	0.6	119	
5 and younger	1,524	119,853	8	2.8	94	0.9	130	5	1.7	60	0.5	60	
6-14	6,698	717,474	24	3.5	288	0.7	331	117	17.1	1,347	0.5	100	
15-20	5,169	543,142	18	3.1	192	0.2	89	133	23.1	1,546	0.5	100	
45-64	23,566	2,931,336	228	16.3	2,505	0.6	294	538	38.4	6,114	0.5	113	
45-64	50,722	5,495,317	284	14.3	3,269	0.6	311	606	30.6	6,962	0.6	132	
65-74	656	44,545	1	4.3	12	0.1	16	2	8.7	24	0.5	45	
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
Female, Other Eligibles													
All Ages	224,303	17,256,578	1,657	2.7	16,321	0.3	97	2,803	4.6	27,881	0.4	68	
5 and younger	9,874	639,477	43	0.4	471	0.2	19	6	0.1	65	0.3	65	
6-14	19,096	1,590,297	88	0.9	968	0.1	23	232	2.5	2,570	0.5	91	
15-20	16,300	1,215,385	190	2.6	1,929	0.2	47	356	4.9	3,692	0.4	74	
21-44	113,272	8,088,697	1,077	3.9	10,401	0.3	83	1,679	6.1	16,356	0.3	58	
45-64	63,402	5,547,991	257	4.0	2,530	0.4	240	521	8.1	5,091	0.4	81	
65-74	1,772	128,568	0	0.0	0	0.0	0	5	3.0	59	0.8	79	
75-84	372	29,816	1	1.7	12	0.1	15	1	1.7	12	0.1	26	
85 and older	215	16,347	1	2.6	10	0.1	18	3	7.9	36	0.6	115	
Male													
All Males	201,249	21,814,922	1,144	2.9	12,068	0.6	367	3,315	8.5	34,919	0.5	112	
Male, Disabled													
All Ages	69,880	9,522,373	565	11.3	6,367	0.7	419	1,452	29.1	16,587	0.6	134	
5 and younger	2,700	207,387	5	1.3	60	0.1	4	8	2.1	86	0.6	101	
6-14	16,821	1,807,040	26	1.7	312	0.5	130	438	28.3	5,073	0.6	107	
15-20	9,039	1,022,405	15	1.7	174	0.3	105	278	31.7	3,203	0.6	130	
21-44	16,718	2,926,640	217	21.5	2,493	0.7	457	412	40.8	4,682	0.7	170	
45-64	24,402	3,536,674	301	25.8	3,324	0.7	442	310	26.6	3,479	0.6	130	
65-74	200	22,227	1	10.0	4	0.3	64	6	60.0	64	0.5	150	
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	

Nondual Beneficiaries

TABLE ND.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	All Top 10 Drug Groups						ANTIVIRAL		ANTIPSYCHOTICS			
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes Among	Number of Benefit Months	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes Among	Number of Benefit Months	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	131,369	12,292,549	579	1.7	5,701	0.5	309	1,863	5.5	18,332	0.5	92
5 and younger	13,519	904,572	58	0.5	638	0.1	4	25	0.2	286	0.5	83
6-14	35,650	3,287,997	68	0.7	727	0.3	67	554	6.0	6,013	0.5	102
15-20	12,032	1,183,977	37	1.0	374	0.3	125	311	8.7	3,168	0.5	115
21-44	37,982	3,479,480	242	3.6	2,258	0.5	333	690	10.3	6,264	0.4	77
45-64	31,196	3,330,817	168	5.0	1,635	0.7	541	272	8.1	2,504	0.4	84
65-74	544	73,514	6	10.0	69	0.7	400	4	6.7	23	0.3	40
75-84	387	29,874	0	0.0	0	0.0	0	6	19.4	62	0.3	62
85 and older	59	2,318	0	0.0	0	0.0	0	1	8.3	12	0.6	11
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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.

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	ANTIASTHMATIC					ANTIDEPRESSANTS					ANTICONVULSANTS				
	Number of Users	Users as %	Number of	Mean	Mean Rx	Number of Users	Users as %	Number of	Mean	Mean Rx	Number of Users	Users as %	Number of	Mean	Mean Rx
		of All Benes	Benefit Months Among Users	Number of Rx per Benefit Month	\$ per Benefit Month		of All Benes	Benefit Months Among Users	Number of Rx per Benefit Month	\$ per Benefit Month		of All Benes	Benefit Months Among Users	Number of Rx per Benefit Month	\$ per Benefit Month
All	33,135	31.4	348,556	0.2	\$17	18,769	17.8	187,862	0.4	\$28	7,960	7.6	82,452	0.5	\$58
Female															
All Females	18,464	27.8	193,297	0.2	17	13,861	20.9	139,322	0.4	28	5,194	7.8	53,593	0.5	53
Female, Disabled															
All Ages	2,669	53.9	30,564	0.3	23	2,523	50.9	28,692	0.5	32	1,556	31.4	17,794	0.7	77
5 and younger	220	76.7	2,432	0.3	19	0	0.0	0	0.0	0	39	13.6	431	0.6	66
6-14	387	56.4	4,512	0.3	21	74	10.8	865	0.5	19	163	23.8	1,857	0.7	91
15-20	231	40.0	2,648	0.3	15	159	27.6	1,833	0.5	24	133	23.1	1,579	0.7	97
21-44	592	42.2	6,731	0.3	17	861	61.4	9,646	0.5	29	553	39.4	6,205	0.7	83
45-64	1,224	61.8	14,076	0.4	29	1,413	71.4	16,156	0.5	35	659	33.3	7,614	0.7	65
65-74	15	65.2	165	0.4	25	16	69.6	192	0.5	30	9	39.1	108	0.6	65
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	15,795	25.7	162,733	0.2	15	11,338	18.5	110,630	0.4	27	3,638	5.9	35,799	0.4	42
5 and younger	4,225	39.0	44,987	0.2	12	3	0.0	34	0.1	7	35	0.3	386	0.3	26
6-14	3,547	38.2	38,079	0.2	15	257	2.8	2,815	0.4	18	129	1.4	1,421	0.4	51
15-20	1,466	20.3	15,096	0.2	12	943	13.0	9,798	0.3	18	264	3.6	2,721	0.4	53
21-44	4,683	17.1	46,186	0.2	15	7,413	27.1	71,856	0.4	26	2,314	8.5	22,341	0.4	40
45-64	1,819	28.4	17,860	0.3	27	2,673	41.8	25,612	0.5	35	878	13.7	8,751	0.5	43
65-74	43	25.6	399	0.5	34	39	23.2	399	0.4	26	14	8.3	142	0.5	23
75-84	6	10.3	54	0.2	26	6	10.3	68	0.4	33	3	5.2	25	0.2	14
85 and older	6	15.8	72	0.2	3	4	10.5	48	1.0	32	1	2.6	12	0.3	9
Male															
All Males	14,671	37.6	155,259	0.2	17	4,908	12.6	48,540	0.4	27	2,766	7.1	28,859	0.6	66
Male, Disabled															
All Ages	2,182	43.7	24,993	0.3	22	1,237	24.8	13,939	0.5	28	1,212	24.3	13,789	0.7	85
5 and younger	388	103.2	4,369	0.3	24	1	0.3	12	0.3	2	66	17.6	767	0.6	58
6-14	837	54.0	9,735	0.3	18	161	10.4	1,870	0.5	19	253	16.3	2,896	0.8	107
15-20	342	39.0	3,980	0.3	15	195	22.2	2,254	0.5	24	184	21.0	2,095	0.7	80
21-44	227	22.5	2,586	0.3	24	389	38.5	4,328	0.5	29	383	37.9	4,385	0.8	96
45-64	386	33.1	4,315	0.4	32	489	41.9	5,451	0.5	32	321	27.5	3,586	0.7	62
65-74	2	20.0	8	0.3	3	2	20.0	24	0.8	37	5	50.0	60	1.0	41
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	ANTIASTHMATIC					ANTIDEPRESSANTS					ANTICONVULSANT				
	Number of Users	Users	Number of Benefit Months	Number of	Mean Rx	Number of Users	Users	Number of Benefit Months	Number of	Mean Rx	Number of Users	Users	Number of Benefit Months	Number of	Mean Rx
		as % of All Benes		Rx per Benefit Month	Rx per Benefit Month		as % of All Benes		Rx per Benefit Month	Rx per Benefit Month		as % of All Benes		Rx per Benefit Month	Rx per Benefit Month
Male, Other Eligibles															
All Ages	12,489	36.7	130,266	0.2	16	3,671	10.8	34,601	0.4	26	1,554	4.6	15,070	0.5	48
5 and younger	5,317	47.8	56,477	0.2	13	6	0.1	72	0.3	5	46	0.4	536	0.4	41
6-14	4,415	48.1	47,067	0.3	17	331	3.6	3,552	0.5	21	190	2.1	2,116	0.5	79
15-20	1,058	29.5	10,877	0.2	13	379	10.6	3,748	0.4	26	149	4.1	1,473	0.6	73
21-44	1,044	15.6	9,654	0.3	18	1,914	28.6	17,464	0.4	26	705	10.5	6,504	0.4	39
45-64	642	19.1	6,060	0.4	28	1,021	30.4	9,563	0.4	29	448	13.3	4,286	0.5	41
65-74	3	5.0	33	1.0	122	11	18.3	109	0.4	21	6	10.0	51	0.3	11
75-84	10	32.3	98	0.6	47	7	22.6	69	0.5	32	9	29.0	92	0.6	23
85 and older	0	0.0	0	0.0	0	2	16.7	24	0.5	38	1	8.3	12	0.6	8
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 a. Table ND.7B includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE NO.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic					ULCER DRUGS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	36,762	34.9	371,430	0.3	\$11	11,049	10.5	112,948	0.3	\$34	6,724	6.4	73,452	0.6	\$53
Female															
All Females	26,270	39.6	267,912	0.3	10	7,504	11.3	76,867	0.3	33	2,075	3.1	22,546	0.5	48
Female, Disabled															
All Ages	3,269	66.0	37,357	0.4	20	1,581	31.9	18,075	0.4	46	399	8.1	4,617	0.6	56
5 and younger	30	10.5	358	0.1	1	75	26.1	812	0.4	30	13	4.5	146	0.4	31
6-14	72	10.5	842	0.1	1	102	14.9	1,193	0.5	42	229	33.4	2,618	0.7	57
15-20	170	29.5	1,961	0.1	2	70	12.1	799	0.4	42	127	22.0	1,495	0.6	58
21-44	1,135	81.0	12,851	0.4	18	419	29.9	4,735	0.4	37	23	1.6	275	0.6	56
45-64	1,840	92.9	21,081	0.4	23	906	45.8	10,428	0.5	52	7	0.4	83	0.5	42
65-74	22	95.7	264	0.4	8	9	39.1	108	0.5	29	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	23,001	37.5	230,555	0.3	8	5,923	9.6	58,792	0.3	29	1,676	2.7	17,929	0.5	46
5 and younger	251	2.3	2,810	0.1	1	433	4.0	3,982	0.2	15	43	0.4	498	0.3	24
6-14	565	6.1	6,228	0.1	1	316	3.4	3,447	0.2	16	1,000	10.8	10,940	0.5	49
15-20	2,401	33.2	24,268	0.2	2	495	6.8	5,001	0.2	14	365	5.0	3,793	0.5	45
21-44	15,744	57.5	157,080	0.3	8	3,063	11.2	30,218	0.3	26	242	0.9	2,432	0.5	40
45-64	3,955	61.8	39,282	0.4	16	1,527	23.9	15,206	0.4	47	26	0.4	266	0.5	44
65-74	52	31.0	522	0.3	6	54	32.1	565	0.4	35	0	0.0	0	0.0	0
75-84	25	43.1	274	0.2	3	25	43.1	266	0.3	33	0	0.0	0	0.0	0
85 and older	8	21.1	91	0.2	4	10	26.3	107	0.4	44	0	0.0	0	0.0	0
Male															
All Males	10,492	26.9	103,518	0.3	14	3,545	9.1	36,081	0.3	37	4,649	11.9	50,906	0.6	55
Male, Disabled															
All Ages	1,746	35.0	19,549	0.4	24	940	18.8	10,646	0.4	47	1,327	26.6	15,367	0.6	55
5 and younger	30	8.0	348	0.1	1	119	31.6	1,332	0.4	27	22	5.9	249	0.5	38
6-14	151	9.7	1,779	0.1	1	143	9.2	1,655	0.4	51	915	59.1	10,593	0.6	55
15-20	203	23.1	2,330	0.1	2	83	9.5	962	0.4	34	358	40.8	4,157	0.6	56
21-44	491	48.6	5,438	0.4	22	211	20.9	2,401	0.4	46	29	2.9	339	0.8	70
45-64	866	74.2	9,632	0.5	36	383	32.8	4,291	0.5	55	3	0.3	29	0.3	24
65-74	5	50.0	22	1.0	167	1	10.0	5	0.2	27	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

Nondual Beneficiaries

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic					ULCER DRUGS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Users	Users	Number of	Mean	Mean Rx \$	Number of Users	Users	Number of	Mean	Mean Rx \$	Number of Users	Users	Number of	Mean	Mean Rx \$
		as %		Benefit Months			Rx per		Benefit Month			as %		Benefit Months	
Male, Other Eligibles															
All Ages	8,746	25.7	83,969	0.3	12	2,605	7.7	25,435	0.3	33	3,322	9.8	35,539	0.6	54
5 and younger	356	3.2	3,967	0.1	1	558	5.0	5,311	0.2	14	144	1.3	1,578	0.4	32
6-14	532	5.8	5,790	0.1	1	278	3.0	3,007	0.2	24	2,475	27.0	26,650	0.6	56
15-20	1,005	28.0	10,204	0.1	2	168	4.7	1,676	0.2	17	579	16.1	6,147	0.6	56
21-44	4,585	68.5	42,149	0.3	14	894	13.4	8,554	0.3	36	108	1.6	1,021	0.5	48
45-64	2,238	66.6	21,562	0.4	19	691	20.6	6,736	0.4	51	16	0.5	143	0.4	59
65-74	17	28.3	158	0.3	22	9	15.0	70	0.6	79	0	0.0	0	0.0	0
75-84	11	35.5	124	0.1	2	6	19.4	69	0.6	49	0	0.0	0	0.0	0
85 and older	2	16.7	15	0.1	1	1	8.3	12	0.3	43	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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.

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC					ANTIDIABETIC					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes Among Users	Number of Benefit Months	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes Among Users	Number of Benefit Months	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	6,561	6.2	67,550	0.4	\$44	6,664	6.3	66,363	0.6	\$42	105,380	1,027,310
Female												
All Females	4,100	6.2	42,407	0.4	44	4,360	6.6	44,063	0.5	40	66,344	638,624
Female, Disabled												
All Ages	1,181	23.8	13,657	0.5	47	1,198	24.2	13,799	0.6	45	4,955	55,718
5 and younger	0	0.0	0	0.0	0	1	0.3	12	0.1	0	287	3,151
6-14	3	0.4	35	0.2	7	9	1.3	108	0.5	61	686	7,878
15-20	4	0.7	48	0.2	19	19	3.3	218	0.5	39	577	6,513
21-44	173	12.3	1,995	0.4	41	210	15.0	2,359	0.5	36	1,402	15,599
45-64	982	49.6	11,356	0.5	48	937	47.3	10,838	0.6	47	1,980	22,306
65-74	19	82.6	223	0.4	56	22	95.7	264	0.7	33	23	271
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	2,919	4.8	28,750	0.4	42	3,162	5.2	30,264	0.5	38	61,389	582,906
5 and younger	2	0.0	24	0.1	7	7	0.1	68	0.6	37	10,839	109,890
6-14	1	0.0	12	0.2	3	70	0.8	717	0.5	63	9,286	98,325
15-20	21	0.3	224	0.3	33	110	1.5	1,163	0.5	44	7,234	68,669
21-44	944	3.4	9,256	0.3	34	1,300	4.8	12,181	0.5	36	27,386	246,451
45-64	1,850	28.9	18,207	0.4	46	1,561	24.4	14,995	0.6	39	6,400	56,972
65-74	73	43.5	729	0.5	57	84	50.0	810	0.7	40	168	1,624
75-84	23	39.7	247	0.4	47	24	41.4	261	0.4	16	58	585
85 and older	5	13.2	51	0.6	52	6	15.8	69	0.6	36	38	390
Male												
All Males	2,461	6.3	25,143	0.4	45	2,304	5.9	22,300	0.6	44	39,036	388,686
Male, Disabled												
All Ages	695	13.9	7,946	0.5	47	613	12.3	6,978	0.6	48	4,989	56,143
5 and younger	0	0.0	0	0.0	0	4	1.1	48	0.5	32	376	4,200
6-14	2	0.1	24	0.5	46	31	2.0	355	0.7	77	1,549	17,850
15-20	10	1.1	111	0.3	21	29	3.3	347	0.8	91	877	10,008
21-44	157	15.5	1,808	0.5	42	121	12.0	1,374	0.6	44	1,010	11,185
45-64	524	44.9	5,986	0.5	49	424	36.3	4,814	0.6	44	1,167	12,823
65-74	2	20.0	17	0.5	43	4	40.0	40	1.3	112	10	77
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Nondual Beneficiaries

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^a, b, c
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	ANTHYPERLIPIDEMIC					ANTIDIABETIC					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes Among	Number of Benefit Months	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes Among	Number of Benefit Months	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month		
Male, Other Eligibles												
All Ages	1,766	5.2	17,197	0.4	44	1,691	5.0	15,322	0.6	42	34,047	332,543
5 and younger	3	0.0	33	0.1	8	5	0.0	35	0.3	28	11,121	112,258
6-14	6	0.1	69	0.2	16	38	0.4	405	0.5	64	9,176	96,597
15-20	15	0.4	165	0.3	33	40	1.1	368	0.7	74	3,592	35,957
21-44	612	9.1	5,986	0.4	39	579	8.7	5,137	0.6	44	6,693	57,383
45-64	1,087	32.3	10,492	0.4	46	979	29.1	8,907	0.6	40	3,362	29,355
65-74	29	48.3	290	0.6	68	30	50.0	242	0.6	40	60	540
75-84	13	41.9	150	0.5	50	18	58.1	204	0.5	30	31	327
85 and older	1	8.3	12	0.3	18	2	16.7	24	1.0	18	12	126
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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 Beneficiaries

TABLE NO. 8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	\$505	7.3	132	1,420
Age				
0-64	601	8.4	101	1,102
65-74	323	6.0	10	95
75-84	198	3.9	7	70
85 and older	67	1.7	14	153
Unknown	0	0.0	0	0
Gender				
Female	482	7.5	66	715
Male	528	7.1	66	705
Unknown	0	0.0	0	0
Race				
White	565	8.3	53	535
African American	465	7.1	63	706
Other/unknown	482	5.3	16	179
Basis of Eligibility^c				
Aged	110	2.7	26	266
Disabled	596	8.4	106	1,154
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 a. Table NO. 8 includes the beneficiaries represented by Cell 1 of Table 1, those who resided in nursing facilities throughout their 2006 Medicaid enrollment. A total of 117 beneficiaries who were in nursing facilities for part of their enrollment and their 1,141 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

Nondual Beneficiaries

TABLE NO.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users						\$ per Rx		Users					
	Patented Brand-Name	Off-Patent Brand-Name	Generic	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			
				Total	Name	Total	Name	Total	Name						Total	Name	
Anti-infective Agents	0.7	0.3	0.0	0.4	\$192	\$180	\$0	\$12	\$263	\$525	\$34	\$31	689	\$180,898	85	64.4	942
Biologicals	0.1	0.0	0.0	0.1	3	1	0	2	24	19	0	28	9	214	8	6.1	85
Antineoplastic Agents	0.6	0.4	0.0	0.3	155	151	0	4	240	382	0	17	31	7,454	4	3.0	48
Endocrine/Metabolic Drugs	1.0	0.5	0.1	0.5	48	36	5	7	47	80	48	15	573	27,006	51	38.6	563
Cardiovascular Agents	1.7	0.4	0.0	1.3	48	26	4	18	27	71	114	14	1,617	44,454	85	64.4	930
Respiratory Agents	1.2	0.3	0.0	0.9	46	32	3	11	37	95	72	12	667	24,641	50	37.9	540
Gastrointestinal Agents	1.4	0.4	0.0	1.0	55	38	0	16	39	88	23	17	1,265	49,003	82	62.1	898
Genitourinary Agents	0.6	0.2	0.0	0.3	25	16	3	7	44	73	69	22	179	7,957	27	20.5	315
CNS Drugs	1.4	0.6	0.1	0.8	102	83	4	14	70	133	70	19	1,491	104,569	98	74.2	1,030
Stimulants/Anti-obesity/Anorexia	3.2	0.1	0.0	3.1	36	2	0	34	11	25	0	11	35	397	1	0.8	11
Miscellaneous Psychological/Neurological Agents	0.5	0.5	0.0	0.0	356	356	0	0	734	734	0	0	33	24,208	6	4.5	68
Analgesics and Anesthetics	1.1	0.1	0.1	0.9	87	28	35	25	77	297	307	27	878	67,308	72	54.5	775
Neuromuscular Agents	1.5	0.4	0.1	1.1	118	68	3	47	76	176	37	44	1,405	107,239	83	62.9	911
Nutritional Products	0.7	0.0	0.0	0.7	8	0	0	8	11	4	17	11	279	3,130	35	26.5	392
Hematological Agents	1.3	0.4	0.1	0.8	77	65	1	10	59	169	11	13	690	40,850	50	37.9	533
Topical Products	0.6	0.2	0.0	0.4	28	18	2	8	49	107	55	22	552	27,006	85	64.4	960
Miscellaneous Products	0.2	0.1	0.0	0.2	6	4	0	3	31	68	0	18	16	490	8	6.1	76
Unknown Therapeutic Category	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	10,409	716,824	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 a. Table NO.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 117 beneficiaries who were in nursing facilities for part of their enrollment and their 1,141 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 Delaware, 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Top 10 Drug Groups in Nursing Facilities	Users				Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year		Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
			Nursing Facility Residents	Number of Benefit Months				
ANTIVIRAL	\$122,648	27	20.5	286	0.8	\$557	\$429	
ANTICONVULSANT	86,371	95	72.0	1,068	1.0	80	81	
ANTIPSYCHOTICS	60,806	51	38.6	552	0.7	164	110	
ANALGESICS - Narcotic	46,937	90	68.2	981	0.7	69	48	
ULCER DRUGS	37,129	77	58.3	848	0.7	67	44	
ANTIDEPRESSANTS	37,547	78	59.1	825	0.7	62	46	
ANTIFUNGALS	27,550	13	9.8	139	0.4	510	198	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	24,208	6	4.5	68	0.5	734	356	
DERMATOLOGICAL	21,678	136	103.0	1,529	0.3	54	14	
ANTIASTHMATIC	18,577	64	48.5	667	0.8	35	28	
Total	483,451	637	n.a.	6,963	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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 117 beneficiaries who were in nursing facilities for part of their enrollment and their 1,141 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.meds-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 Beneficiaries

TABLE ND.10A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST
 AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	All Top 10 Drug Groups							ANTIVIRAL		ANTICONSULSANT		
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	4,525	\$483,451	27	20.5	286	0.8	\$429	95	72.0	1,068	1.0	\$81
Female												
All Females	2,445	215,789	8	12.1	78	0.5	125	47	71.2	518	1.0	88
Female, Disabled												
All Ages	2,310	206,097	8	16.7	78	0.5	125	46	95.8	510	1.0	89
64 or younger	2,216	200,053	8	17.8	78	0.5	125	44	97.8	486	1.0	90
65-74	94	6,044	0	0.0	0	0.0	0	2	66.7	24	0.5	77
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	135	9,692	0	0.0	0	0.0	0	1	5.6	8	0.1	5
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	32	1,589	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	18	1,210	0	0.0	0	0.0	0	1	25.0	8	0.1	5
85 and older	85	6,893	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male												
All Males	2,080	267,662	19	28.8	208	0.9	543	48	72.7	550	1.0	75
Male, Disabled												
All Ages	2,020	264,954	19	32.8	208	0.9	543	46	79.3	526	1.0	78
64 or younger	1,983	259,840	19	33.9	208	0.9	543	46	82.1	526	1.0	78
65-74	37	5,114	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
Male, Other Eligibles												
All Ages	60	2,708	0	0.0	0	0.0	0	2	25.0	24	0.5	9
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	10	313	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	34	2,154	0	0.0	0	0.0	0	1	33.3	12	0.4	11
85 and older	16	241	0	0.0	0	0.0	0	1	25.0	12	0.6	8
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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 117 beneficiaries who were in nursing facilities for part of their enrollment and their 1,141 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.meds-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	ANTIPSYCHOTICS						ANALGESICS - Narcotic					ULCER DRUGS				
	Number of Users	Users as % of	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of	Number of Benefit Months Among Users	Mean		
		All-Year Nursing Facility Residents		Rx	Mean Rx \$		All-Year Nursing Facility Residents		Rx	Mean Rx \$		All-Year Nursing Facility Residents		Rx	Mean Rx \$	
All	51	38.6	552	0.7	\$110	90	68.2	981	0.7	\$48	77	58.3	848	0.7	\$44	
Female																
All Females	25	37.9	294	0.6	119	52	78.8	587	0.7	52	36	54.5	413	0.7	49	
Female, Disabled																
All Ages	21	43.8	246	0.7	124	48	100.0	547	0.7	55	32	66.7	365	0.8	52	
64 or younger	20	44.4	234	0.6	126	46	102.2	523	0.7	57	29	64.4	329	0.8	54	
65-74	1	33.3	12	0.9	89	2	66.7	24	0.8	6	3	100.0	36	0.5	34	
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
Female, Other Eligibles																
All Ages	4	22.2	48	0.4	93	4	22.2	40	0.3	2	4	22.2	48	0.4	27	
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
75-84	1	25.0	12	0.1	26	3	75.0	28	0.4	3	1	25.0	12	0.2	1	
85 and older	3	30.0	36	0.6	115	1	10.0	12	0.2	1	3	30.0	36	0.4	36	
Male																
All Males	26	39.4	258	0.7	100	38	57.6	394	0.7	42	41	62.1	435	0.6	39	
Male, Disabled																
All Ages	25	43.1	246	0.7	105	32	55.2	338	0.7	48	39	67.2	419	0.6	39	
64 or younger	23	41.1	230	0.7	102	31	55.4	334	0.7	42	39	69.6	419	0.6	39	
65-74	2	100.0	16	0.8	145	1	50.0	4	3.3	616	0	0.0	0	0.0	0	
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
Male, Other Eligibles																
All Ages	1	12.5	12	0.6	11	6	75.0	56	0.2	7	2	25.0	16	0.5	44	
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
65-74	0	0.0	0	0.0	0	2	200.0	8	0.8	32	1	100.0	4	0.8	11	
75-84	0	0.0	0	0.0	0	4	133.3	48	0.1	3	1	33.3	12	0.4	55	
85 and older	1	25.0	12	0.6	11	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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 117 beneficiaries who were in nursing facilities for part of their enrollment and their 1,141 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.meds-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIFUNGALS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	78	59.1	825	0.7	\$46	13	9.8	139	0.4	\$198	6	4.5	68	0.5	\$356
Female															
All Females	48	72.7	532	0.8	49	5	7.6	55	0.1	1	5	7.6	56	0.4	386
Female, Disabled															
All Ages	42	87.5	478	0.8	50	5	10.4	55	0.1	1	4	8.3	48	0.4	444
64 or younger	40	88.9	454	0.8	50	5	11.1	55	0.1	1	4	8.9	48	0.4	444
65-74	2	66.7	24	0.6	50	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	6	33.3	54	0.8	36	0	0.0	0	0.0	0	1	5.6	8	0.1	38
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	2	50.0	6	0.5	35	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	1	25.0	12	0.2	33	0	0.0	0	0.0	0	1	25.0	8	0.1	38
85 and older	3	30.0	36	1.0	36	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male															
All Males	30	45.5	293	0.6	40	8	12.1	84	0.6	327	1	1.5	12	0.9	218
Male, Disabled															
All Ages	28	48.3	269	0.7	43	7	12.1	80	0.6	343	1	1.7	12	0.9	218
64 or younger	28	50.0	269	0.7	43	7	12.5	80	0.6	343	1	1.8	12	0.9	218
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
Male, Other Eligibles															
All Ages	2	25.0	24	0.1	1	1	12.5	4	0.3	3	0	0.0	0	0.0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	1	100.0	4	0.3	3	0	0.0	0	0.0	0
75-84	1	33.3	12	0.1	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	1	25.0	12	0.2	2	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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 117 beneficiaries who were in nursing facilities for part of their enrollment and their 1,141 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.meds-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	DERMATOLOGICAL					ANTIASTHMATIC						
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	136	103.0	1,529	0.3	\$14	64	48.5	667	0.8	\$28	132	1,420
Female												
All Females	61	92.4	690	0.3	24	32	48.5	354	0.9	32	66	715
Female, Disabled												
All Ages	55	114.6	640	0.3	23	27	56.3	294	1.0	39	48	537
64 or younger	50	111.1	580	0.3	25	27	60.0	294	1.0	39	45	501
65-74	5	166.7	60	0.4	10	0	0.0	0	0.0	0	3	36
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	6	33.3	50	0.6	29	5	27.8	60	0.2	2	18	178
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	5	125.0	42	0.7	33	0	0.0	0	0.0	0	4	39
75-84	1	25.0	8	0.1	8	0	0.0	0	0.0	0	4	34
85 and older	0	0.0	0	0.0	0	5	50.0	60	0.2	2	10	105
Male												
All Males	75	113.6	839	0.2	6	32	48.5	313	0.7	23	66	705
Male, Disabled												
All Ages	73	125.9	815	0.2	7	30	51.7	289	0.7	21	58	617
64 or younger	71	126.8	799	0.2	6	28	50.0	281	0.7	21	56	601
65-74	2	100.0	16	0.6	19	2	100.0	8	0.3	3	2	16
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Male, Other Eligibles												
All Ages	2	25.0	24	0.2	5	2	25.0	24	0.6	47	8	88
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	4
75-84	2	66.7	24	0.2	5	2	66.7	24	0.6	47	3	36
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	48
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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 117 beneficiaries who were in nursing facilities for part of their enrollment and their 1,141 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.meds-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DELAWARE, 2006

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Nondual Rx \$	Total Number of Beneficiaries
All	38,200	36.2	1.3	132,484	\$17	\$1,841,959	\$14	2.1	105,380
Age									
5 and younger	8,498	37.6	0.7	15,552	10	216,774	14	3.1	22,623
6-14	5,941	28.7	0.6	12,185	9	179,321	15	1.4	20,697
15-20	3,526	28.7	0.7	8,369	10	126,996	15	1.8	12,280
21-44	13,343	36.6	1.4	51,710	20	711,370	14	2.3	36,471
45-64	6,686	51.8	3.4	43,309	46	593,792	14	1.9	12,909
65-74	129	49.4	3.4	875	35	9,259	11	1.8	261
75-84	45	50.6	3.1	276	28	2,534	9	1.7	89
85 and older	32	64.0	4.2	208	38	1,913	9	4.7	50
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Basis of Eligibility^c									
Aged	91	62.8	4.6	665	48	6,989	11	2.7	145
Disabled	5,088	51.2	3.6	35,736	47	470,211	13	1.5	9,944
Adults	17,570	36.9	1.4	68,141	20	961,265	14	2.4	47,613
Children	15,440	32.4	0.6	27,866	8	402,679	14	2.3	47,644
Unknown	11	32.4	2.2	76	24	815	11	1.6	34
Gender									
Female	24,941	37.6	1.4	90,837	19	1,239,550	14	2.3	66,344
Male	13,259	34.0	1.1	41,647	15	602,409	14	1.7	39,036
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	17,621	37.5	1.6	75,611	23	1,081,170	14	2.1	47,015
African American	15,095	34.0	1.0	43,678	13	585,150	13	1.9	44,394
Other/unknown	5,484	39.3	0.9	13,195	13	175,639	13	2.3	13,971
Use of Nursing Facilities^d									
Entire year	77	58.3	6.3	833	66	8,649	10	1.2	132
Part year	82	70.1	5.6	654	73	8,504	13	1.8	117
None	38,041	36.2	1.2	130,997	17	1,824,806	14	2.1	105,131
Maintenance Assistance Status									
Cash	23,657	38.0	1.3	80,270	17	1,078,902	13	2.1	62,310
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	1,347	31.3	0.5	2,335	8	35,238	15	2.7	4,308
Other/unknown	13,196	34.0	1.3	49,879	19	727,819	15	2.0	38,762

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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.
 Beneficiaries = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 DELAWARE, 2006

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
All	0.1	\$2	\$14	\$0	\$1	1,027,310
Age						
5 and younger	0.1	1	14	0	0	229,499
6-14	0.1	1	15	0	0	220,650
15-20	0.1	1	15	0	0	121,147
21-44	0.2	2	14	0	1	330,618
45-64	0.4	5	14	0	2	121,456
65-74	0.3	4	11	0	1	2,512
75-84	0.3	3	9	0	1	912
85 and older	0.4	4	9	0	1	516
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.4	5	11	0	2	1,533
Disabled	0.3	4	13	0	2	111,861
Adults	0.2	2	14	0	1	424,381
Children	0.1	1	14	0	0	489,287
Unknown	0.3	3	11	0	2	248
Gender						
Female	0.1	2	14	0	1	638,624
Male	0.1	2	14	0	0	388,686
Unknown	0.0	0	0	0	0	0
Race						
White	0.2	2	14	0	1	452,252
African American	0.1	1	13	0	0	438,222
Other/unknown	0.1	1	13	0	0	136,836
Use of Nursing Facilities^d						
Entire year	0.6	6	10	1	3	1,420
Part year	0.6	7	13	0	4	1,141
None	0.1	2	14	0	1	1,024,749
Maintenance Assistance Status						
Cash	0.1	2	13	0	0	645,917
Medically needy	0.0	0	0	0	0	0
Poverty related	0.1	1	15	0	0	39,101
Other/unknown	0.1	2	15	0	1	342,292

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.

a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2006.

b. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines, barbiturates, nonprescription (OTC) medications, prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations), and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility, those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.

c. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.

d. Please refer to footnote f on Table 1 for methodology used to determine use of nursing facilities.

TABLE ND.13
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
 DELAWARE, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D		Number Rx as a Percentage of All Part D Excluded Rx	
				Excluded Rx \$	Total Number Rx. \$ per Rx	Excluded Rx	Total Number Rx. \$ per Rx
All	48,703	\$38	\$1,841,959	100.0	132,484	\$14	100.0
Anorexia or weight loss/gain	1	34	34	0.0	1	34	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	69	11	733	0.0	82	9	0.1
Cough and cold medications	16,107	40	644,839	35.0	27,119	24	20.5
Vitamins and minerals	3,151	36	114,258	6.2	7,923	14	6.0
Non-prescription drugs	19,235	22	420,780	22.8	47,545	9	35.9
Barbiturates	209	57	11,924	0.6	1,859	6	1.4
Benzodiazepines	8,943	60	536,160	29.1	45,282	12	34.2
Other Part D Excl Rx Drugs	988	115	113,231	6.1	2,673	42	2.0

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.

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.

Benefit(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Beneficiaries

APPENDIX TABLE A.1
 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
 NONDUAL BENEFICIARIES, DELAWARE, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	153,218	206	11,921	63,973	77,060	58	1,414,104	2,104	130,403	561,696	719,556	345
Age												
5 and younger	33,697	0	809	4	32,884	0	307,231	0	8,462	39	298,730	0
6-14	34,111	1	2,730	3	31,377	0	336,134	12	30,716	28	305,378	0
15-20	20,064	1	1,987	5,305	12,768	3	184,054	8	21,855	46,974	115,209	8
21-44	48,850	7	2,920	45,875	24	24	437,767	62	31,543	405,903	180	79
45-64	15,965	1	3,437	12,490	7	30	143,980	12	37,437	106,217	59	255
65-74	335	78	38	218	0	1	3,034	841	390	1,800	0	3
75-84	118	59	0	59	0	0	1,156	589	0	567	0	0
85 and older	78	59	0	19	0	0	748	580	0	168	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	89,137	154	5,644	44,409	38,872	58	843,579	1,558	62,086	415,285	364,305	345
Male	64,080	52	6,277	19,564	38,187	0	570,519	546	68,317	146,411	355,245	0
Unknown	1	0	0	0	1	0	6	0	0	0	6	0
Race												
White	64,123	83	5,608	30,459	27,934	39	585,216	792	60,833	267,687	255,675	229
African American	67,289	75	5,255	27,156	34,786	17	631,734	797	58,040	238,721	334,065	111
Other/unknown	21,806	48	1,058	6,358	14,340	2	197,154	515	11,530	55,288	129,816	5
Use of Nursing Facilities^c												
Entire year	159	44	115	0	0	0	1,614	414	1,200	0	0	0
Part year	120	19	93	8	0	0	1,193	200	907	86	0	0
None	152,939	143	11,713	63,965	77,060	58	1,411,297	1,490	128,296	561,610	719,556	345
Maintenance Assistance Status												
Cash	90,958	134	10,265	25,174	55,385	0	877,523	1,474	112,379	240,373	523,297	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	6,920	7	10	426	6,419	58	56,215	70	91	2,677	53,032	345
Other/unknown	55,340	65	1,646	38,373	15,256	0	480,366	560	17,933	318,646	143,227	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	2,944	1	2	2,883	58	0	22,050	11	13	21,697	329	0
FFS part year, with Rx claims	4,189	5	16	4,089	77	2	45,214	50	180	44,160	805	19
FFS part year, no Rx claims	1,465	7	9	1,387	60	2	14,464	73	85	13,729	569	8
MC all year, with Rx claims	96,782	132	9,917	39,254	47,449	30	981,222	1,453	111,767	379,377	488,386	239
MC all year, no Rx claims	47,838	61	1,977	16,360	29,416	24	351,154	517	18,358	102,733	229,467	79

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.

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 I of Table 1 for methodology used to determine nursing facility residence.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.2
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 NONDUAL BENEFICIARIES, DELAWARE, 2006

	Beneficiaries and		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Benefit Months in Cell J of Table 1					
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	153,218	1,414,104	105,380	1,027,310	0	386,794
Fee-for-service (FFS) all year	2,944	22,050	2,944	22,050	0	0
FFS part year, with Rx claims	4,189	45,214	4,189	16,496	0	28,718
FFS part year, with no Rx claims	1,465	14,464	1,465	7,542	0	6,922
Managed care (MC) all year, with Rx claims	96,782	981,222	96,782	981,222	0	0
MC all year, with no Rx claims	47,838	351,154	0	0	0	351,154

Source: Data for this table are from the MAX 2006 file for Delaware, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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.

All Medicaid Beneficiaries