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

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TABLE ND.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^a, ^b
 NONDUAL BENEFICIARIES, ILLINOIS, 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	2,011,341	17,450	173,435	485,850	1,333,925	681	19,013,510	148,313	1,880,385	4,050,587	12,928,719	5,506
Age												
5 and younger	527,419	1	2,424	12	524,982	0	4,920,624	3	26,240	56	4,894,325	0
6-14	580,288	0	11,663	68	568,557	0	5,874,028	0	131,874	395	5,741,759	0
15-20	284,460	1	14,959	33,531	235,958	11	2,704,818	8	160,847	279,091	2,264,802	70
21-44	461,916	3	55,511	402,571	3,687	144	4,006,497	21	612,674	3,369,561	23,317	924
45-64	134,617	100	83,751	49,563	681	522	1,301,931	460	892,144	400,741	4,100	4,486
65-74	12,010	7,415	4,485	96	10	4	117,575	67,206	49,608	679	56	26
75-84	7,177	6,618	550	7	2	0	62,573	56,475	6,019	55	24	0
85 and older	3,408	3,312	92	2	2	0	25,136	24,140	979	9	8	0
Unknown	46	0	0	0	46	0	328	0	0	0	328	0
Gender												
Female	1,179,670	11,428	87,870	410,302	669,389	681	10,988,338	96,764	965,027	3,479,291	6,441,750	5,506
Male	831,671	6,022	85,565	75,548	664,536	0	8,025,172	51,549	915,358	571,296	6,486,969	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	727,123	6,769	63,743	208,535	447,630	446	6,781,808	51,265	676,517	1,720,512	4,329,663	3,851
African American	695,423	3,243	87,810	159,463	444,761	146	6,739,626	25,743	965,079	1,395,228	4,352,545	1,031
Other/unknown	588,795	7,438	21,882	117,852	441,534	89	5,492,076	71,305	238,789	934,847	4,246,511	624
Use of Nursing Facilities^c												
Entire year	7,525	803	6,705	14	2	1	84,353	8,310	75,973	47	22	1
Part year	6,603	700	5,685	194	22	2	68,483	6,532	59,846	1,861	228	16
None	1,997,213	15,947	161,045	485,642	1,333,901	678	18,860,674	133,471	1,744,566	4,048,679	12,928,469	5,489
Maintenance Assistance Status												
Cash	214,442	2,918	109,184	18,038	84,302	0	2,207,411	32,178	1,254,338	167,639	753,256	0
Medically needy	307,332	6,900	34,208	256,210	10,014	0	2,571,562	62,776	297,536	2,159,762	51,488	0
Poverty-related	1,197,319	1,296	8,487	33,379	1,153,476	681	11,570,521	12,138	81,671	204,415	11,266,791	5,506
Other/unknown	292,248	6,336	21,556	178,223	86,133	0	2,664,016	41,221	246,840	1,518,771	857,184	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	1,849,869	17,446	172,946	448,763	1,210,033	681	17,812,138	148,287	1,876,882	3,785,770	11,995,693	5,506
FFS part year, with Rx claims	74,538	0	358	19,966	54,214	0	440,727	0	2,540	116,763	321,424	0
FFS part year, no Rx claims	37,177	2	110	5,708	31,357	0	199,536	7	723	28,263	170,543	0

Source: Data for this table are from the MAX 2006 file for Illinois, 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.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; Rx = pharmacy benefit.

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

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS ^c	Rx \$ as a Percentage of All Medicaid FFS ^d	Number of Beneficiaries
All	61.7	6.9	\$435	\$63	\$2,861	15.2	2,011,341
Age							
5 and younger	64.8	3.4	162	48	1,928	8.4	527,419
6-14	54.0	3.3	237	71	1,090	21.7	580,288
15-20	56.6	4.3	301	70	1,971	15.3	284,460
21-44	67.2	9.0	547	61	3,668	14.9	461,916
45-64	75.7	32.3	2,144	66	12,235	17.5	134,617
65-74	63.1	25.6	1,467	57	10,550	13.9	12,010
75-84	45.5	14.4	755	52	6,974	10.8	7,177
85 and older	32.3	8.6	424	49	7,780	5.5	3,408
Unknown	45.7	1.8	91	51	1,446	6.3	46
Basis of Eligibility^e							
Aged	45.1	13.5	738	55	6,131	12.0	17,450
Disabled	77.5	32.0	2,486	78	16,148	15.4	173,435
Adults	65.7	7.3	335	46	1,889	17.7	485,850
Children	58.3	3.4	199	58	1,440	13.8	1,333,925
Unknown	79.0	24.9	2,832	114	11,708	24.2	681
Gender							
Female	63.9	7.5	414	56	2,631	15.7	1,179,670
Male	58.6	6.1	464	76	3,188	14.6	831,671
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	63.9	8.7	567	65	3,137	18.1	727,123
African American	60.7	6.8	436	65	3,472	12.6	695,423
Other/unknown	60.0	4.9	269	56	1,800	15.0	588,795
Use of Nursing Facilities^f							
Entire year	95.6	81.8	6,189	76	53,579	11.6	7,525
Part year	94.4	55.2	4,011	73	60,804	6.6	6,603
None	61.4	6.5	401	62	2,479	16.2	1,997,213
Maintenance Assistance Status							
Cash	72.2	17.8	1,256	71	6,411	19.6	214,442
Medically needy	65.7	10.3	591	58	4,636	12.8	307,332
Poverty related	59.2	3.5	195	56	1,410	13.8	1,197,319
Other/unknown	59.9	9.4	647	69	4,334	14.9	292,248

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

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 1 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.

Nondual Beneficiaries

TABLE ND.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, ILLINOIS, 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Rx \$ as a Percentage of All Medicaid FFS ^c	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 ^d	Beneficiaries	Benefit Months	
All	0.7	\$46	15.2	38.3	50.1	4.9	4.4	1.8	0.5	\$303	2,011,341	19,013,510
Age												
5 and younger	0.4	17	8.4	35.2	60.6	2.9	1.1	0.2	0.0	207	527,419	4,920,624
6-14	0.3	23	21.7	46.0	49.1	2.9	1.8	0.2	0.0	108	580,288	5,874,028
15-20	0.5	32	15.3	43.4	49.6	4.0	2.4	0.4	0.1	207	284,460	2,704,818
21-44	1.0	63	14.9	32.8	48.9	8.3	7.1	2.3	0.5	423	461,916	4,006,497
45-64	3.3	222	17.5	24.3	23.8	10.6	21.4	15.1	4.7	1,265	134,617	1,301,931
65-74	2.6	150	13.9	36.9	20.3	9.7	18.6	11.6	3.0	1,078	12,010	117,575
75-84	1.7	87	10.8	54.5	19.2	7.2	11.5	6.4	1.1	800	7,177	62,573
85 and older	1.2	58	5.5	67.7	15.9	4.9	7.1	3.6	0.7	1,055	3,408	25,136
Unknown	0.3	13	6.3	54.3	45.7	0.0	0.0	0.0	0.0	203	46	328
Basis of Eligibility^e												
Aged	1.6	87	12.0	54.9	19.1	7.6	11.9	5.6	1.0	721	17,450	148,313
Disabled	3.0	229	15.4	22.5	28.3	10.4	20.2	14.1	4.4	1,489	173,435	1,880,385
Adults	0.9	40	17.7	34.3	49.6	7.9	6.3	1.7	0.3	227	485,850	4,050,587
Children	0.4	21	13.8	41.7	53.6	3.0	1.5	0.2	0.0	149	1,333,925	12,928,719
Unknown	3.1	350	24.2	21.0	23.8	15.1	26.3	12.2	1.6	1,448	681	5,506
Gender												
Female	0.8	44	15.7	36.1	51.3	5.3	4.7	2.0	0.6	282	1,179,670	10,988,338
Male	0.6	48	14.6	41.4	48.5	4.2	3.9	1.6	0.4	330	831,671	8,025,172
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	0.9	61	18.1	36.1	49.1	6.0	5.7	2.5	0.7	336	727,123	6,781,808
African American	0.7	45	12.6	39.3	49.2	4.7	4.4	1.9	0.5	358	695,423	6,739,626
Other/unknown	0.5	29	15.0	40.0	52.4	3.7	2.7	0.9	0.2	193	588,795	5,492,076
Use of Nursing Facilities^f												
Entire year	7.3	552	11.6	4.4	7.0	4.9	22.2	38.9	22.7	4,780	7,525	84,353
Part year	5.3	387	6.6	5.6	15.2	10.6	28.4	28.7	11.4	5,863	6,603	68,483
None	0.7	43	16.2	38.6	50.4	4.9	4.2	1.6	0.4	263	1,997,213	18,860,674
Maintenance Assistance Status												
Cash	1.7	122	19.6	27.8	43.6	7.9	11.9	6.9	1.8	623	214,442	2,207,411
Medically needy	1.2	71	12.8	34.3	44.5	8.5	8.4	3.4	0.9	554	307,332	2,571,562
Poverty related	0.4	20	13.8	40.8	54.4	3.0	1.5	0.3	0.1	146	1,197,319	11,570,521
Other/unknown	1.0	71	14.9	40.1	43.2	6.6	6.4	2.7	0.9	476	292,248	2,664,016

Source: Data for this table are from the MAX 2006 file for Illinois, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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 1 of Table 1 for methodology used to determine nursing facility residence.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.5
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 NONDUAL BENEFICIARIES, ILLINOIS, 2006

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	0.7	\$46	\$63	0.2	\$34	\$159	0.0	\$3	\$99	0.5	\$9	\$19
Age												
5 and younger	0.4	17	48	0.1	12	156	0.0	1	55	0.3	4	15
6-14	0.3	23	71	0.1	19	142	0.0	1	71	0.2	4	20
15-20	0.5	32	70	0.2	25	162	0.0	1	86	0.3	6	20
21-44	1.0	63	61	0.3	46	166	0.0	4	104	0.7	13	18
45-64	3.3	222	66	0.9	159	168	0.1	18	129	2.3	45	20
65-74	2.6	150	57	0.8	105	126	0.1	13	116	1.7	32	19
75-84	1.7	87	52	0.5	60	112	0.1	9	108	1.0	18	17
85 and older	1.2	58	49	0.4	41	112	0.1	5	82	0.7	12	16
Unknown	0.3	13	51	0.1	10	151	0.0	1	22	0.2	2	15
Basis of Eligibility^d												
Aged	1.6	87	55	0.5	60	114	0.1	8	111	1.0	18	19
Disabled	3.0	229	78	0.9	174	194	0.1	15	123	1.9	40	21
Adults	0.9	40	46	0.2	26	122	0.0	4	104	0.6	11	17
Children	0.4	21	58	0.1	16	141	0.0	1	65	0.2	4	17
Unknown	3.1	350	114	0.9	273	309	0.2	28	167	2.0	50	24
Gender												
Female	0.8	44	56	0.2	31	144	0.0	3	100	0.5	10	18
Male	0.6	48	76	0.2	38	181	0.0	2	99	0.4	8	20
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.9	61	65	0.3	45	152	0.0	4	100	0.6	11	19
African American	0.7	45	65	0.2	33	177	0.0	3	104	0.5	9	19
Other/unknown	0.5	29	56	0.1	21	148	0.0	2	90	0.4	6	17
Use of Nursing Facilities^e												
Entire year	7.3	552	76	2.5	436	177	0.3	28	113	4.6	87	19
Part year	5.3	387	73	1.6	293	188	0.2	24	122	3.6	69	19
None	0.7	43	62	0.2	31	157	0.0	3	98	0.5	9	19
Maintenance Assistance Status												
Cash	1.7	122	71	0.5	92	185	0.1	8	116	1.2	22	19
Medically needy	1.2	71	58	0.3	50	151	0.0	5	113	0.9	16	19
Poverty related	0.4	20	56	0.1	15	140	0.0	1	71	0.2	4	18
Other/unknown	1.0	71	69	0.3	53	162	0.0	5	105	0.7	13	20

Source: Data for this table are from the MAX 2006 file for Illinois, 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 Illinois, 0.5 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.med-span.com/master-drug-database.aspx>.
 d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
 e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
 CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, ILLINOIS, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users								\$ per Rx				Users ^e	
	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 Benef	Number of Benefit Months	
																		\$13
Anti-infective Agents	0.2	0.0	0.0	0.2	\$13	\$9	\$1	\$4	\$58	\$244	\$70	\$21	2,035,004	\$117,574,699	820,484	40.8	8,809,852	
Biologicals	0.3	0.3	0.0	0.0	323	320	2	2	1156	1,202	3,261	127	21,874	25,282,714	7,661	0.4	78,177	
Antineoplastic Agents	0.5	0.2	0.0	0.4	222	190	3	28	411	1,064	386	80	39,418	16,198,668	6,872	0.3	72,949	
Endocrine/Metabolic Drugs	0.4	0.2	0.0	0.3	23	16	1	6	55	109	81	22	1,405,228	76,930,995	313,734	15.6	3,315,593	
Cardiovascular Agents	1.2	0.4	0.1	0.7	51	30	9	12	43	82	120	16	1,797,956	77,752,995	141,540	7.0	1,511,023	
Respiratory Agents	0.4	0.1	0.0	0.2	21	17	1	3	60	116	77	16	1,732,501	103,300,601	456,426	22.7	4,935,322	
Gastrointestinal Agents	0.4	0.1	0.0	0.3	20	13	3	5	58	151	248	18	534,968	30,896,500	141,798	7.0	1,527,203	
Genitourinary Agents	0.2	0.1	0.0	0.1	10	5	3	2	52	84	82	23	170,209	8,769,841	80,396	4.0	845,805	
CNS Drugs	0.8	0.3	0.1	0.5	77	63	5	8	92	205	80	18	1,757,131	160,814,008	195,176	9.7	2,097,621	
Stimulants/Anti-obesity/Anorexia	0.7	0.6	0.0	0.1	67	64	0	3	94	108	178	23	417,924	39,483,135	52,671	2.6	587,369	
Miscellaneous Psychological/Neurological Agents	0.3	0.2	0.0	0.1	100	86	0	14	333	443	138	132	32,902	10,966,164	9,943	0.5	109,615	
Analgesics and Anesthetics	0.3	0.0	0.0	0.3	9	4	1	4	28	196	288	14	1,653,023	46,750,420	490,060	24.4	5,229,347	
Neuromuscular Agents	0.6	0.2	0.0	0.4	50	38	1	11	80	169	87	28	772,307	62,004,786	114,571	5.7	1,247,246	
Nutritional Products	0.3	0.1	0.0	0.3	7	2	0	4	22	40	39	18	275,442	6,117,323	88,116	4.4	885,366	
Hematological Agents	0.6	0.2	0.0	0.4	131	122	0	9	216	658	35	21	219,440	47,425,553	33,659	1.7	363,160	
Topical Products	0.2	0.0	0.0	0.2	6	3	0	3	30	87	48	17	935,221	27,602,186	447,873	22.3	4,839,739	
Miscellaneous Products	0.2	0.1	0.0	0.0	27	25	1	2	177	199	288	62	85,701	15,152,567	50,910	2.5	553,519	
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	8	0	0	0	55	0	0	0	15,948	881,305	9,744	0.5	106,569	
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.	13,902,197	873,904,460	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Illinois, 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 Illinois, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2006.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

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

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$118,694,732	89,032	4.4	1,001,700	0.6	\$205	\$118
ANTIASTHMATIC	83,170,708	422,122	21.0	4,612,389	0.3	69	18
ANTICONVULSANT	57,297,281	77,091	3.8	853,766	0.6	107	67
ANTIVIRAL	55,669,651	28,583	1.4	309,887	0.4	451	180
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	39,483,135	61,140	3.0	685,462	0.6	94	58
ANTIDEPRESSANTS	37,919,088	163,830	8.1	1,764,068	0.4	49	21
ANTIHYPERLIPIDEMIC	33,826,860	60,397	3.0	661,447	0.5	96	51
ANTIDIABETIC	31,897,861	79,519	4.0	856,132	0.6	62	37
MISC. HEMATOLOGICAL	26,463,440	10,054	0.5	110,544	0.6	433	239
PASSIVE IMMUNIZING AGENTS	24,467,777	4,878	0.2	45,948	0.4	1,310	533
Total	508,890,533	996,646	n.a.	10,901,343	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Illinois, 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.med-span.com/master-drug-database.aspx>.

Benefit(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 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, ILLINOIS, 2006

Beneficiary Characteristics	All Top 10 Drug Groups								ANTIPSYCHOTICS				ANTIASTHMATIC				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of 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 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 Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	4,580,605	\$508,890,533	89,032	4.4	1,001,700	0.6	\$119	422,122	21.0	4,612,389	0.3	\$18					
Female																	
All Females	2,582,161	253,144,769	45,699	3.9	511,252	0.5	104	229,869	19.5	2,503,762	0.3	18					
Female, Disabled																	
All Ages	1,293,357	134,057,753	24,854	28.3	288,311	0.6	130	45,966	52.3	531,743	0.4	31					
5 and younger	3,232	1,222,181	8	0.8	91	0.4	60	544	56.0	6,181	0.3	22					
6-14	17,790	2,228,061	324	8.1	3,772	0.5	122	1,450	36.3	17,058	0.3	26					
15-20	26,008	3,518,239	779	13.5	8,938	0.6	118	1,522	26.3	17,667	0.3	24					
45-64	312,887	38,186,988	9,285	34.6	107,871	0.6	128	11,352	42.4	132,005	0.4	25					
45-64	883,453	84,803,103	13,863	29.6	160,770	0.7	133	29,648	63.2	342,089	0.5	35					
65-74	46,517	3,830,826	536	18.1	6,201	0.7	127	1,335	45.2	15,403	0.5	33					
75-84	3,173	249,997	50	13.0	571	0.7	110	103	26.8	1,216	0.5	33					
85 and older	297	18,358	9	13.2	97	0.6	55	12	17.6	124	0.6	15					
Female, Other Eligibles																	
All Ages	1,288,804	119,087,016	20,845	1.9	222,941	0.4	71	183,903	16.8	1,972,019	0.2	15					
5 and younger	128,527	17,847,383	185	0.1	2,097	0.3	51	56,888	21.8	610,625	0.2	12					
6-14	275,386	26,209,076	3,995	1.4	45,023	0.5	101	48,441	17.1	542,381	0.2	16					
15-20	157,902	15,863,051	4,640	3.0	51,540	0.4	86	20,806	13.4	228,903	0.2	14					
21-44	525,938	43,085,518	10,229	3.0	106,041	0.3	52	48,400	14.0	494,285	0.3	16					
45-64	154,089	12,625,962	1,440	4.2	14,475	0.4	68	8,280	24.3	81,753	0.4	28					
65-74	25,836	1,964,060	134	2.8	1,397	0.5	84	654	13.7	7,139	0.4	31					
75-84	16,866	1,197,108	119	2.8	1,285	0.4	61	494	11.6	5,435	0.4	26					
85 and older	4,260	294,858	103	4.3	1,083	0.5	50	140	5.8	1,498	0.3	22					
Male																	
All Males	1,998,444	255,745,764	43,333	5.2	490,448	0.6	133	192,253	23.1	2,108,627	0.3	18					
Male, Disabled																	
All Ages	944,083	138,119,534	25,812	30.2	298,144	0.7	146	26,744	31.3	305,763	0.4	30					
5 and younger	5,407	1,488,521	34	2.3	368	0.4	76	971	66.8	11,140	0.3	22					
6-14	45,263	8,550,948	1,103	14.4	12,840	0.6	128	3,135	40.9	36,739	0.3	23					
15-20	45,635	10,936,371	1,665	18.2	19,117	0.6	142	2,127	23.2	24,779	0.3	26					
21-44	300,713	50,018,290	11,330	39.5	131,220	0.7	155	5,857	20.4	67,450	0.4	25					
45-64	525,899	65,136,579	11,278	30.6	129,977	0.7	140	14,015	38.0	158,546	0.5	36					
65-74	19,544	1,833,690	366	23.9	4,212	0.8	131	587	38.4	6,523	0.5	32					
75-84	1,410	132,595	30	18.2	338	0.8	189	46	27.9	514	0.4	38					
85 and older	212	22,540	6	25.0	72	0.8	179	6	25.0	72	0.2	8					

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, ILLINOIS, 2006

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIASTHMATIC			
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months	Mean Rx \$ per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months	Mean Rx \$ per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	1,054,343	117,623,478	17,521	2.3	192,304	0.5	113	165,503	22.2	1,802,801	0.2	16
5 and younger	188,631	25,354,038	530	0.2	5,936	0.3	63	77,299	29.2	833,847	0.2	13
6-14	527,537	55,581,111	9,521	3.3	107,997	0.6	117	64,560	22.7	722,580	0.2	17
15-20	168,423	20,905,395	5,131	4.5	56,475	0.6	127	15,608	13.7	169,859	0.2	18
21-44	84,109	8,470,725	1,727	2.9	15,911	0.3	70	5,254	8.8	48,919	0.3	20
45-64	62,479	5,451,454	387	2.3	3,650	0.4	72	1,987	11.8	19,163	0.4	29
65-74	12,401	1,007,730	92	3.3	962	0.5	85	344	12.5	3,640	0.4	40
75-84	8,643	693,616	95	4.0	966	0.5	63	355	15.0	3,723	0.4	34
85 and older	2,120	159,409	38	4.1	407	0.5	68	96	10.5	1,070	0.3	27
Unknown	18	2,752	0	0.0	0	0.0	0	6	13.0	63	0.3	44

Source: Data for this table are from the MAX 2006 file for Illinois, 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.med-span.com/master-drug-database.aspx>.
 Benef(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Beneficiaries

TABLE ND.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, ILLINOIS, 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIVIRAL					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	77,091	3.8	853,766	0.6	\$67	28,583	1.4	309,887	0.4	\$180	61,140	3.0	685,462	0.6	\$58
Female															
All Females	46,088	3.9	508,222	0.6	61	18,927	1.6	203,251	0.3	127	18,734	1.6	209,098	0.6	55
Female, Disabled															
All Ages	23,211	26.4	268,437	0.7	70	4,695	5.3	54,023	0.5	276	1,583	1.8	18,367	0.6	58
5 and younger	97	10.0	1,120	0.7	81	6	0.6	69	0.1	4	24	2.5	267	0.5	118
6-14	509	12.7	6,001	0.8	114	61	1.5	732	0.7	314	471	11.8	5,468	0.6	61
15-20	798	13.8	9,278	0.8	117	144	2.5	1,678	0.5	277	285	4.9	3,314	0.6	57
21-44	7,945	29.6	92,424	0.7	88	1,867	7.0	21,507	0.5	264	406	1.5	4,768	0.6	53
45-64	13,286	28.3	152,977	0.7	56	2,574	5.5	29,535	0.6	288	388	0.8	4,448	0.6	54
65-74	529	17.9	6,084	0.7	47	43	1.5	502	0.3	81	7	0.2	84	1.0	124
75-84	38	9.9	456	0.5	25	0	0.0	0	0.0	0	2	0.5	18	0.6	4
85 and older	9	13.2	97	0.6	27	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	22,877	2.1	239,785	0.5	51	14,232	1.3	149,228	0.3	73	17,151	1.6	190,731	0.6	54
5 and younger	864	0.3	9,359	0.5	64	1,139	0.4	12,564	0.1	12	582	0.2	6,381	0.4	43
6-14	3,013	1.1	33,955	0.6	88	1,325	0.5	15,121	0.3	93	11,384	4.0	128,418	0.6	56
15-20	3,104	2.0	34,224	0.5	78	2,073	1.3	22,703	0.2	51	3,046	2.0	34,424	0.6	56
21-44	12,846	3.7	131,592	0.4	37	8,954	2.6	91,383	0.3	76	1,847	0.5	18,684	0.5	46
45-64	2,510	7.4	24,682	0.5	41	663	1.9	6,572	0.4	172	286	0.8	2,759	0.6	58
65-74	265	5.6	2,913	0.4	26	57	1.2	642	0.3	103	1	0.0	5	0.2	18
75-84	200	4.7	2,265	0.5	23	15	0.4	179	0.1	5	4	0.1	48	0.3	5
85 and older	75	3.1	795	0.5	21	6	0.3	64	0.1	35	1	0.0	12	0.7	5
Male															
All Males	31,003	3.7	345,544	0.7	76	9,656	1.2	106,636	0.5	280	42,406	5.1	476,364	0.6	59
Male, Disabled															
All Ages	18,638	21.8	214,142	0.8	79	5,945	6.9	66,619	0.7	397	3,445	4.0	39,813	0.7	60
5 and younger	120	8.3	1,329	0.7	84	17	1.2	190	0.5	106	53	3.6	617	0.4	37
6-14	914	11.9	10,677	0.8	108	93	1.2	1,108	0.7	208	1,746	22.8	20,253	0.7	61
15-20	1,256	13.7	14,454	0.8	115	110	1.2	1,260	0.4	198	961	10.5	11,111	0.7	63
21-44	7,616	26.5	88,132	0.8	95	2,296	8.0	25,236	0.7	379	494	1.7	5,692	0.7	62
45-64	8,428	22.9	96,090	0.7	58	3,391	9.2	38,376	0.7	423	167	0.5	2,099	0.7	49
65-74	277	18.1	3,141	0.7	46	38	2.5	449	0.7	361	4	0.3	41	1.4	43
75-84	27	16.4	319	0.8	20	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, ILLINOIS, 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIVIRAL					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Users	Users as %		Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as %		Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as %		Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
		Benes	Among Users				Benes	Among Users				Benes	Among Users		
Male, Other Eligibles															
All Ages	12,365	1.7	131,402	0.6	70	3,711	0.5	40,017	0.2	85	38,961	5.2	436,551	0.6	59
5 and younger	1,180	0.4	12,995	0.5	58	1,146	0.4	12,711	0.1	6	1,762	0.7	19,731	0.4	34
6-14	4,755	1.7	53,763	0.6	82	1,107	0.4	12,694	0.3	76	30,232	10.6	340,580	0.6	60
15-20	2,825	2.5	31,068	0.6	89	572	0.5	6,322	0.3	92	6,419	5.6	71,352	0.6	63
21-44	2,421	4.1	22,084	0.4	40	616	1.0	5,688	0.4	192	459	0.8	4,108	0.5	47
45-64	913	5.4	8,621	0.5	41	234	1.4	2,200	0.5	304	85	0.5	749	0.6	61
65-74	139	5.1	1,463	0.5	40	21	0.8	231	0.2	56	0	0.0	0	0.0	0
75-84	100	4.2	1,080	0.5	27	12	0.5	135	0.3	101	3	0.1	19	0.3	6
85 and older	32	3.5	328	0.4	28	3	0.3	36	0.1	14	1	0.1	12	0.3	3
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 Illinois, 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.med-span.com/master-drug-database.aspx>.
 Benef(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Beneficiaries

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

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIHYPERLIPIDEMIC					ANTIDIABETIC				
	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	163,830	8.1	1,764,068	0.4	\$22	60,397	3.0	661,447	0.5	\$51	79,519	4.0	856,132	0.6	\$37
Female															
All Females	120,598	10.2	1,293,383	0.4	21	37,989	3.2	418,804	0.5	50	53,265	4.5	575,985	0.6	37
Female, Disabled															
All Ages	41,331	47.0	477,577	0.5	26	23,647	26.9	274,937	0.6	55	28,744	32.7	331,817	0.6	40
5 and younger	3	0.3	36	0.2	1	2	0.2	24	0.4	17	0	0.0	0	0.0	0
6-14	178	4.5	2,073	0.4	15	4	0.1	48	0.6	37	41	1.0	479	0.7	83
15-20	809	14.0	9,275	0.4	20	30	0.5	347	0.4	31	159	2.7	1,876	0.6	56
21-44	12,453	46.5	144,277	0.5	24	2,686	10.0	31,447	0.5	47	4,127	15.4	47,889	0.6	35
45-64	27,008	57.6	311,719	0.6	27	19,403	41.4	225,170	0.6	56	22,638	48.3	260,874	0.7	41
65-74	824	27.9	9,544	0.6	25	1,398	47.3	16,435	0.6	60	1,647	55.7	19,202	0.7	38
75-84	52	13.5	605	0.5	20	112	29.1	1,327	0.5	50	127	33.0	1,451	0.5	26
85 and older	4	5.9	48	0.4	12	12	17.6	139	0.4	40	5	7.4	46	0.6	24
Female, Other Eligibles															
All Ages	79,267	7.3	815,806	0.4	19	14,342	1.3	143,867	0.4	41	24,521	2.2	244,168	0.5	33
5 and younger	89	0.0	1,006	0.3	9	41	0.0	463	0.1	4	136	0.1	1,486	0.6	60
6-14	4,530	1.6	50,920	0.4	16	70	0.0	798	0.3	25	1,077	0.4	11,906	0.7	62
15-20	10,468	6.7	114,774	0.3	15	159	0.1	1,707	0.3	28	1,226	0.8	13,164	0.5	44
21-44	54,246	15.6	551,896	0.3	19	6,497	1.9	65,592	0.4	34	13,176	3.8	130,204	0.5	29
45-64	8,874	26.1	85,480	0.5	24	5,345	15.7	50,530	0.5	46	6,312	18.5	58,780	0.6	34
65-74	505	10.6	5,559	0.4	20	1,307	27.4	14,308	0.5	52	1,554	32.6	16,949	0.6	30
75-84	384	9.0	4,293	0.5	20	772	18.1	8,772	0.5	53	876	20.6	9,842	0.5	26
85 and older	171	7.1	1,878	0.4	15	151	6.3	1,697	0.5	45	164	6.8	1,837	0.5	21
Male															
All Males	43,232	5.2	470,685	0.5	22	22,408	2.7	242,643	0.5	52	26,254	3.2	280,147	0.6	38
Male, Disabled															
All Ages	22,651	26.5	258,535	0.5	24	14,674	17.1	168,450	0.6	55	16,181	18.9	183,681	0.6	37
5 and younger	8	0.6	94	0.2	6	1	0.1	7	0.1	1	1	0.1	12	0.9	348
6-14	477	6.2	5,516	0.5	20	10	0.1	113	0.6	39	47	0.6	547	0.7	58
15-20	1,047	11.4	11,948	0.5	23	43	0.5	482	0.5	41	124	1.4	1,451	0.7	59
21-44	8,168	28.4	93,369	0.5	25	2,751	9.6	31,809	0.6	50	2,928	10.2	33,458	0.6	36
45-64	12,638	34.3	143,969	0.5	24	11,317	30.7	129,671	0.6	57	12,441	33.8	140,918	0.6	37
65-74	291	19.0	3,378	0.6	25	504	32.9	5,829	0.6	59	601	39.3	6,893	0.6	32
75-84	17	10.3	201	0.6	22	43	26.1	479	0.5	45	32	19.4	318	0.8	37
85 and older	5	20.8	60	0.5	27	5	20.8	60	0.2	16	7	29.2	84	0.8	42

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, ILLINOIS, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTHYPERLIPIDEMIC					ANTIDIABETIC				
	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
Male, Other Eligibles															
All Ages	20,581	2.8	212,150	0.4	19	7,734	1.0	74,193	0.5	46	10,073	1.4	96,466	0.6	39
5 and younger	184	0.1	2,117	0.3	7	45	0.0	506	0.2	8	173	0.1	1,866	0.7	55
6-14	6,319	2.2	71,630	0.4	17	99	0.0	1,118	0.3	25	950	0.3	10,416	0.7	61
15-20	5,164	4.5	55,647	0.4	19	160	0.1	1,722	0.3	33	806	0.7	8,473	0.7	66
21-44	6,386	10.7	58,602	0.4	20	2,950	4.9	27,467	0.4	38	3,324	5.6	30,024	0.5	33
45-64	2,119	12.6	19,832	0.5	23	3,413	20.3	31,620	0.5	51	3,661	21.8	33,223	0.6	35
65-74	195	7.1	2,097	0.4	15	595	21.6	6,496	0.6	54	690	25.1	7,323	0.6	28
75-84	155	6.6	1,601	0.5	22	395	16.7	4,391	0.5	54	382	16.2	4,179	0.5	26
85 and older	59	6.4	624	0.4	23	77	8.4	873	0.5	44	87	9.5	962	0.6	21
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 Illinois, 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.med-span.com/master-drug-database.aspx>.
 Benef(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Beneficiaries

TABLE ND.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, ILLINOIS, 2006

Beneficiary Characteristics	MISC. HEMATOLOGICAL					PASSIVE IMMUNIZING AGENTS					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes Among Users	Number of Benefit Months	Mean 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	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	10,054	0.5	110,544	0.6	\$239	4,878	0.2	45,948	0.4	\$533	2,011,341	19,013,510
Female												
All Females	5,591	0.5	62,168	0.6	71	2,431	0.2	22,712	0.4	490	1,179,647	10,988,179
Female, Disabled												
All Ages	4,109	4.7	47,015	0.6	75	110	0.1	1,197	0.5	800	87,870	965,027
5 and younger	2	0.2	24	0.9	16,476	91	9.4	977	0.4	579	971	10,423
6-14	2	0.1	24	0.1	7	0	0.0	0	0.0	0	3,997	44,793
15-20	4	0.1	48	0.5	49	2	0.0	24	0.1	74	5,787	60,350
21-44	282	1.1	3,201	0.5	54	11	0.0	132	0.5	1,932	26,800	302,226
45-64	3,469	7.4	39,666	0.6	68	6	0.0	64	0.5	2,107	46,907	509,108
65-74	312	10.6	3,606	0.6	67	0	0.0	0	0.0	0	2,955	33,196
75-84	34	8.8	403	0.5	48	0	0.0	0	0.0	0	385	4,220
85 and older	4	5.9	43	0.2	29	0	0.0	0	0.0	0	68	711
Female, Other Eligibles												
All Ages	1,482	0.1	15,153	0.5	59	2,321	0.2	21,515	0.4	472	1,091,777	10,023,152
5 and younger	9	0.0	99	0.1	15	2,060	0.8	19,050	0.4	504	259,975	2,402,125
6-14	6	0.0	67	0.2	69	6	0.0	72	0.4	1,087	283,901	2,840,509
15-20	11	0.0	128	0.1	330	75	0.0	753	0.1	20	155,786	1,456,475
21-44	467	0.1	4,689	0.4	50	177	0.1	1,612	0.2	98	346,628	2,946,635
45-64	545	1.6	5,234	0.5	61	3	0.0	28	1.0	10,980	34,054	280,498
65-74	181	3.8	2,005	0.5	61	0	0.0	0	0.0	0	4,773	43,758
75-84	183	4.3	2,092	0.5	58	0	0.0	0	0.0	0	4,262	36,104
85 and older	80	3.3	839	0.5	55	0	0.0	0	0.0	0	2,398	17,048
Male												
All Males	4,463	0.5	48,376	0.6	456	2,447	0.3	23,236	0.4	575	831,648	8,025,003
Male, Disabled												
All Ages	3,311	3.9	37,106	0.6	419	143	0.2	1,608	0.5	934	85,565	915,358
5 and younger	7	0.5	80	0.3	2,719	124	8.5	1,381	0.4	604	1,453	15,817
6-14	18	0.2	216	0.6	15,022	2	0.0	24	1.1	2,053	7,666	87,081
15-20	23	0.3	260	0.6	17,727	0	0.0	0	0.0	0	9,172	100,497
21-44	273	1.0	3,034	0.5	1,361	10	0.0	119	1.1	4,030	28,711	310,448
45-64	2,818	7.6	31,565	0.6	102	7	0.0	84	0.7	1,643	36,844	383,036
65-74	159	10.4	1,810	0.6	65	0	0.0	0	0.0	0	1,530	16,412
75-84	10	6.1	105	0.4	47	0	0.0	0	0.0	0	165	1,799
85 and older	3	12.5	36	0.9	82	0	0.0	0	0.0	0	24	268

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, ILLINOIS, 2006

Beneficiary Characteristics	MISC. HEMATOLOGICAL					PASSIVE IMMUNIZING AGENTS						
	Number of Users	Users as % of All Benes Among Users	Number of Benefit Months	Mean 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	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
Male, Other Eligibles												
All Ages	1,152	0.2	11,270	0.6	579	2,304	0.3	21,628	0.4	548	746,083	7,109,645
5 and younger	39	0.0	407	0.3	2,166	2,293	0.9	21,496	0.4	544	265,020	2,492,259
6-14	45	0.0	507	0.5	6,004	3	0.0	36	1.3	1,186	284,724	2,901,645
15-20	17	0.0	185	0.4	5,855	6	0.0	72	0.3	1,305	113,715	1,087,496
21-44	249	0.4	2,347	0.5	417	1	0.0	12	0.3	767	59,777	447,188
45-64	486	2.9	4,419	0.6	73	0	0.0	0	0.0	0	16,812	129,289
65-74	155	5.6	1,666	0.6	68	1	0.0	12	0.3	474	2,752	24,209
75-84	116	4.9	1,279	0.6	64	0	0.0	0	0.0	0	2,365	20,450
85 and older	45	4.9	460	0.4	44	0	0.0	0	0.0	0	918	7,109
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	46	328

Source: Data for this table are from the MAX 2006 file for Illinois, 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.med-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 ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, ILLINOIS, 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	\$552	7.3	7,525	84,353
Age				
0-64	613	7.9	6,045	68,509
65-74	406	6.2	696	7,643
75-84	229	4.0	398	4,150
85 and older	127	2.5	386	4,051
Unknown	0	0.0	0	0
Gender				
Female	559	7.6	3,324	37,175
Male	547	7.1	4,201	47,178
Unknown	0	0.0	0	0
Race				
White	561	7.6	3,851	43,094
African American	550	7	3,040	34,210
Other/unknown	510	7.1	634	7,049
Basis of Eligibility^c				
Aged	198	3.6	803	8,310
Disabled	591	7.7	6,705	75,973
Adults	476	5.4	14	47
Children	294	6.8	2	22
Unknown	0	0.0	1	1

Source: Data for this table are from the MAX 2006 file for Illinois, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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 6,603 beneficiaries who were in nursing facilities for part of their enrollment and their 68,483 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(t) = 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.

TABLE ND.9
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
 NONDUAL BENEFICIARIES, ILLINOIS, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users		As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months				
	Total	Patented Brand-Name	Off-Patent Brand-Name Generic	Total	Patented Brand-Name	Off-Patent Brand-Name Generic	Total	Patented Brand-Name	Off-Patent Brand-Name Generic	Total Number of Rx	Total Rx \$			Number of Users			
Anti-infective Agents	0.5	0.2	0.0	0.3	\$78	\$67	\$3	\$8	\$151	\$305	\$455	\$28	23,753	\$3,587,002	4,036	53.6	45,852
Biologicals	0.1	0.1	0.0	0.0	5	4	0	1	54	58	0	45	1,117	59,995	1,022	13.6	12,113
Antineoplastic Agents	0.6	0.1	0.0	0.5	107	60	2	45	182	1,065	298	85	3,235	587,627	498	6.6	5,488
Endocrine/Metabolic Drugs	1.2	0.4	0.0	0.8	55	39	5	11	47	108	163	15	38,746	1,831,179	2,939	39.1	33,356
Cardiovascular Agents	1.8	0.6	0.1	1.2	74	46	11	18	40	82	116	15	99,887	4,018,995	4,780	63.5	54,202
Respiratory Agents	0.9	0.3	0.0	0.6	41	32	2	7	48	115	77	12	27,235	1,297,277	2,806	37.3	31,732
Gastrointestinal Agents	1.0	0.5	0.0	0.4	78	71	2	5	82	139	200	11	40,373	3,317,701	3,767	50.1	42,394
Genitourinary Agents	0.6	0.3	0.1	0.2	38	26	5	7	68	86	96	35	9,510	643,126	1,478	19.6	16,777
CNS Drugs	2.6	1.0	0.1	1.5	273	233	9	31	106	229	80	21	181,221	19,150,546	6,117	81.3	70,181
Stimulants/Anti-obesity/Anorexia	1.1	0.1	0.0	1.0	29	16	0	13	26	113	12	13	850	21,817	65	0.9	743
Miscellaneous Psychological/Neurological Agents	0.8	0.7	0.0	0.0	154	150	0	3	202	206	339	106	6,326	1,279,198	717	9.5	8,293
Analgesics and Anesthetics	1.2	0.2	0.1	0.9	60	36	12	12	50	155	180	13	51,173	2,537,899	3,751	49.8	42,488
Neuromuscular Agents	1.4	0.4	0.0	1.0	87	58	1	27	63	157	172	27	68,880	4,311,167	4,315	57.3	49,829
Nutritional Products	0.7	0.0	0.0	0.7	12	0	1	11	17	47	15	16	13,964	232,743	1,770	23.5	19,570
Hematological Agents	1.1	0.3	0.0	0.8	103	92	0	11	96	299	13	14	31,489	3,026,131	2,654	35.3	29,433
Topical Products	0.4	0.1	0.0	0.3	13	7	1	5	31	71	58	17	14,463	447,921	2,928	38.9	33,480
Miscellaneous Products	0.4	0.1	0.0	0.3	24	12	1	12	67	160	330	41	2,731	182,184	694	9.2	7,485
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	19	0	0	0	88	0	0	0	466	40,960	192	2.6	2,201
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.	615,419	46,573,468	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Illinois, released by CMS in 6/2009. This table was produced on 02/12/2010.
 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 6,603 beneficiaries who were in nursing facilities for part of their enrollment and their 68,483 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 Illinois, 0.5 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, ILLINOIS, 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	\$16,892,597	9,206	122.3	107,915	1.0	\$160	\$157
ANTICONVULSANT	3,813,586	4,229	56.2	48,880	1.0	82	78
ULCER DRUGS	2,820,680	3,971	52.8	44,977	0.7	93	63
ANTIVIRAL	2,441,845	584	7.8	6,607	0.7	496	370
ANTIHYPERTENSIVE	2,120,394	2,697	35.8	31,408	0.7	91	68
ANTIDEPRESSANTS	1,931,646	4,839	64.3	55,802	0.8	45	35
ANTIDIABETIC	1,523,543	3,678	48.9	41,860	0.8	46	36
MIGRAINE PRODUCTS	1,450,715	964	12.8	11,342	0.8	157	128
HEMATOPOIETIC AGENTS	1,346,398	1,804	24.0	20,511	0.7	93	66
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	1,310,974	1,114	14.8	12,870	0.6	177	102
Total	35,652,378	33,086	n.a.	382,172	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Illinois, 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 6,603 beneficiaries who were in nursing facilities for part of their enrollment and their 68,483 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.med-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, ILLINOIS, 2006

Beneficiary Characteristics	All Top 10 Drug Groups							ANTIPSYCHOTICS				ANTICONVULSANTS		
	Number of Rx	Rx \$	Number of Users	Users as % of		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
				All-Year Nursing Facility Residents	All-Year Nursing Facility Residents					All-Year Nursing Facility Residents	All-Year Nursing Facility Residents			
All	318,260	\$35,652,378	9,206	122.3	107,915	1.0	\$157	4,229	56.2	48,880	1.0	\$78		
Female														
All Females	142,095	15,786,376	3,988	120.0	46,713	1.0	156	1,852	55.7	21,362	0.9	79		
Female, Disabled														
All Ages	135,165	15,196,566	3,850	136.5	45,175	1.0	159	1,789	63.4	20,697	0.9	80		
64 or younger	123,387	14,063,322	3,547	144.6	41,685	1.0	160	1,633	66.6	18,950	0.9	83		
65-74	10,447	1,013,198	267	91.4	3,069	0.9	146	142	48.6	1,580	0.9	52		
75-84	1,137	108,389	30	52.6	355	0.8	134	9	15.8	108	0.8	40		
85 and older	194	11,657	6	31.6	66	0.8	64	5	26.3	59	0.6	33		
Female, Other Eligibles														
All Ages	6,930	589,810	138	27.4	1,538	0.6	85	63	12.5	665	0.9	49		
64 or younger	93	11,551	3	30.0	27	1.0	223	4	40.0	21	1.6	159		
65-74	2,120	205,598	41	51.3	429	0.8	140	15	18.8	154	0.8	70		
75-84	2,356	193,739	39	24.7	448	0.5	75	21	13.3	252	1.0	51		
85 and older	2,361	178,922	55	21.6	634	0.5	49	23	9.0	238	0.7	23		
Male														
All Males	176,165	19,866,002	5,218	124.2	61,202	1.0	157	2,377	56.6	27,518	1.0	77		
Male, Disabled														
All Ages	172,066	19,495,975	5,112	131.6	60,060	1.0	158	2,327	59.9	27,005	1.0	77		
64 or younger	162,808	18,537,268	4,847	135.5	56,993	1.0	159	2,194	61.4	25,476	1.0	78		
65-74	8,218	833,123	238	93.7	2,765	0.9	128	119	46.9	1,361	0.9	64		
75-84	829	100,953	21	45.7	230	0.9	219	14	30.4	168	0.9	22		
85 and older	211	24,631	6	75.0	72	0.8	179	0	0.0	0	0.0	0		
Male, Other Eligibles														
All Ages	4,099	370,027	106	33.4	1,142	0.6	97	50	15.8	513	0.8	67		
64 or younger	67	9,228	3	50.0	34	0.8	219	3	50.0	4	1.0	189		
65-74	1,358	129,141	35	50.0	395	0.6	107	19	27.1	208	1.0	90		
75-84	1,815	168,776	46	33.6	469	0.6	91	20	14.6	205	0.8	65		
85 and older	859	62,882	22	21.2	244	0.6	76	8	7.7	96	0.3	16		
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 Illinois, 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 6,603 beneficiaries who were in nursing facilities for part of their enrollment and their 68,483 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.med-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, ILLINOIS, 2006

Beneficiary Characteristics	ULCER DRUGS					ANTIVIRAL					ANTIHYPERTENSIVE				
	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	3,971	52.8	44,977	0.7	\$63	584	7.8	6,607	0.7	\$370	2,697	35.8	31,408	0.7	\$68
Female															
All Females	1,777	53.5	20,157	0.7	63	228	6.9	2,584	0.7	314	1,214	36.5	14,138	0.7	69
Female, Disabled															
All Ages	1,603	56.8	18,246	0.7	64	216	7.7	2,460	0.7	327	1,125	39.9	13,128	0.8	70
64 or younger	1,430	58.3	16,319	0.7	65	211	8.6	2,402	0.7	334	997	40.6	11,621	0.8	70
65-74	151	51.7	1,675	0.7	64	5	1.7	58	0.4	40	108	37.0	1,278	0.8	68
75-84	19	33.3	216	0.6	64	0	0.0	0	0.0	0	16	28.1	185	0.7	65
85 and older	3	15.8	36	0.3	34	0	0.0	0	0.0	0	4	21.1	44	0.6	64
Female, Other Eligibles															
All Ages	174	34.6	1,911	0.5	52	12	2.4	124	0.3	58	89	17.7	1,010	0.7	59
64 or younger	1	10.0	3	0.7	7	0	0.0	0	0.0	0	2	20.0	24	0.5	51
65-74	43	53.8	475	0.7	69	5	6.3	40	0.6	149	21	26.3	226	0.9	87
75-84	54	34.2	586	0.6	50	5	3.2	60	0.1	2	41	25.9	475	0.7	57
85 and older	76	29.8	847	0.4	43	2	0.8	24	0.1	47	25	9.8	285	0.6	42
Male															
All Males	2,194	52.2	24,820	0.7	62	356	8.5	4,023	0.8	405	1,483	35.3	17,270	0.7	66
Male, Disabled															
All Ages	2,082	53.6	23,649	0.7	63	354	9.1	3,999	0.8	408	1,412	36.4	16,490	0.7	67
64 or younger	1,944	54.4	22,100	0.7	63	343	9.6	3,867	0.8	410	1,321	36.9	15,445	0.7	67
65-74	124	48.8	1,395	0.7	62	11	4.3	132	0.7	342	76	29.9	879	0.7	70
75-84	12	26.1	130	0.5	58	0	0.0	0	0.0	0	12	26.1	130	0.6	53
85 and older	2	25.0	24	0.6	13	0	0.0	0	0.0	0	3	37.5	36	0.2	11
Male, Other Eligibles															
All Ages	112	35.3	1,171	0.6	59	2	0.6	24	0.1	17	71	22.4	780	0.6	56
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	33.3	13	0.4	52
65-74	33	47.1	358	0.7	67	1	1.4	12	0.1	16	21	30.0	243	0.6	63
75-84	47	34.3	463	0.6	66	1	0.7	12	0.2	18	29	21.2	296	0.6	61
85 and older	32	30.8	350	0.6	41	0	0.0	0	0.0	0	19	18.3	228	0.5	44
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 Illinois, 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 6,603 beneficiaries who were in nursing facilities for part of their enrollment and their 68,483 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.med-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, ILLINOIS, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIDIABETIC					MIGRAINE PRODUCTS				
	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
	Number of Users					Number of Users					Number of Users				
All	4,839	64.3	55,802	0.8	\$35	3,678	48.9	41,860	0.8	\$36	964	12.8	11,342	0.8	\$128
Female															
All Females	2,308	69.4	26,586	0.8	37	1,822	54.8	20,809	0.8	37	397	11.9	4,654	0.8	116
Female, Disabled															
All Ages	2,140	75.9	24,758	0.8	37	1,655	58.7	18,967	0.8	38	391	13.9	4,591	0.8	117
64 or younger	1,982	80.8	22,965	0.8	38	1,437	58.6	16,566	0.8	38	366	14.9	4,291	0.8	117
65-74	134	45.9	1,516	0.8	37	186	63.7	2,066	0.8	37	22	7.5	264	0.8	108
75-84	21	36.8	241	0.6	27	30	52.6	311	0.6	33	3	5.3	36	1.1	140
85 and older	3	15.8	36	0.5	13	2	10.5	24	1.0	34	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	168	33.4	1,828	0.6	28	167	33.2	1,842	0.6	26	6	1.2	63	0.5	51
64 or younger	6	60.0	34	0.5	15	1	10.0	1	1.0	19	1	10.0	3	0.3	55
65-74	44	55.0	483	0.8	39	57	71.2	607	0.7	37	2	2.5	24	0.6	79
75-84	53	33.5	571	0.7	30	55	34.8	603	0.6	19	2	1.3	24	0.1	9
85 and older	65	25.5	740	0.5	20	54	21.2	631	0.5	21	1	0.4	12	0.9	78
Male															
All Males	2,531	60.2	29,216	0.8	33	1,856	44.2	21,051	0.8	36	567	13.5	6,688	0.8	136
Male, Disabled															
All Ages	2,441	62.8	28,236	0.8	33	1,787	46.0	20,322	0.8	37	566	14.6	6,676	0.8	136
64 or younger	2,326	65.0	26,891	0.8	33	1,640	45.9	18,705	0.8	37	551	15.4	6,504	0.8	138
65-74	105	41.3	1,225	0.8	36	124	48.8	1,389	0.7	31	13	5.1	156	0.7	95
75-84	6	13.0	72	0.7	32	17	37.0	156	0.8	30	2	4.3	16	0.3	48
85 and older	4	50.0	48	0.6	33	6	75.0	72	0.9	48	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	90	28.4	980	0.6	29	69	21.8	729	0.5	22	1	0.3	12	0.6	49
64 or younger	4	66.7	28	1.1	13	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	25	35.7	292	0.6	19	25	35.7	273	0.5	28	0	0.0	0	0.0	0
75-84	40	29.2	422	0.7	33	27	19.7	252	0.6	24	1	0.7	12	0.6	49
85 and older	21	20.2	238	0.6	34	17	16.3	204	0.5	12	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 Illinois, 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 6,603 beneficiaries who were in nursing facilities for part of their enrollment and their 68,483 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.100
 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, ILLINOIS, 2006

Beneficiary Characteristics	HEMATOPOIETIC AGENTS					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 \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	1,804	24.0	20,511	0.7	\$66	1,114	14.8	12,870	0.6	\$102	7,525	84,353
Female												
All Females	681	20.5	7,733	0.7	90	539	16.2	6,265	0.6	120	3,324	37,175
Female, Disabled												
All Ages	590	20.9	6,753	0.7	97	431	15.3	5,022	0.6	127	2,821	31,913
64 or younger	511	20.8	5,860	0.7	105	349	14.2	4,060	0.6	134	2,453	27,860
65-74	65	22.3	728	0.7	53	75	25.7	878	0.7	97	292	3,220
75-84	10	17.5	120	0.6	22	7	12.3	84	0.5	74	57	646
85 and older	4	21.1	45	0.6	4	0	0.0	0	0.0	0	19	187
Female, Other Eligibles												
All Ages	91	18.1	980	0.6	46	108	21.5	1,243	0.6	92	503	5,262
64 or younger	1	10.0	1	1.0	272	0	0.0	0	0.0	0	10	29
65-74	16	20.0	181	0.6	36	24	30.0	273	0.7	97	80	848
75-84	35	22.2	361	0.7	72	29	18.4	348	0.7	104	158	1,639
85 and older	39	15.3	437	0.6	29	55	21.6	622	0.6	83	255	2,746
Male												
All Males	1,123	26.7	12,778	0.7	51	575	13.7	6,605	0.6	85	4,201	47,178
Male, Disabled												
All Ages	1,066	27.4	12,183	0.7	53	510	13.1	5,886	0.6	85	3,884	44,060
64 or younger	993	27.8	11,330	0.7	52	442	12.4	5,091	0.5	83	3,576	40,591
65-74	61	24.0	727	0.7	50	55	21.7	653	0.6	94	254	2,855
75-84	12	26.1	126	0.7	124	8	17.4	82	0.8	114	46	518
85 and older	0	0.0	0	0.0	0	5	62.5	60	0.7	100	8	96
Male, Other Eligibles												
All Ages	57	18.0	595	0.6	13	65	20.5	719	0.6	82	317	3,118
64 or younger	1	16.7	1	1.0	8	0	0.0	0	0.0	0	6	29
65-74	16	22.9	172	0.7	11	17	24.3	191	0.5	73	70	720
75-84	23	16.8	245	0.6	17	38	27.7	425	0.6	92	137	1,347
85 and older	17	16.3	177	0.5	11	10	9.6	103	0.4	58	104	1,022
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 Illinois, released by CMS in 6/2009. This table was produced on 02/12/2010.
 a. Table ND.100 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 6,603 beneficiaries who were in nursing facilities for part of their enrollment and their 68,483 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.med-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); SOE = 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}
 ILLINOIS, 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 Nonduel Rx \$	Total Number of Beneficiaries
All	584,220	29.0	1.2	2,324,273	\$11	\$22,839,428	\$10	2.6	2,011,341
Age									
5 and younger	206,028	39.1	1.2	640,880	9	4,731,445	7	5.5	527,419
6-14	137,121	23.6	0.6	328,051	5	3,089,031	9	2.2	580,288
15-20	58,078	20.4	0.5	147,955	5	1,501,639	10	1.8	284,460
21-44	110,949	24.0	1.0	475,711	12	5,733,429	12	2.3	461,916
45-64	63,656	47.3	4.8	647,581	53	7,151,991	11	2.5	134,617
65-74	5,204	43.3	4.5	53,640	35	419,430	8	2.4	12,010
75-84	2,217	30.9	2.9	21,122	20	145,330	7	2.7	7,177
85 and older	952	27.9	2.7	9,304	20	66,983	7	4.6	3,408
Unknown	15	32.6	0.6	29	3	150	5	3.6	46
Basis of Eligibility^c									
Aged	5,092	29.2	2.5	44,216	18	313,642	7	2.4	17,450
Disabled	86,391	49.8	5.0	872,338	59	10,317,707	12	2.4	173,435
Adults	107,358	22.1	0.7	354,143	8	3,666,292	10	2.3	485,850
Children	385,100	28.9	0.8	1,052,064	6	8,522,584	8	3.2	1,333,925
Unknown	279	41.0	2.2	1,512	28	19,203	13	1.0	681
Gender									
Female	348,669	29.6	1.2	1,398,124	11	13,522,108	10	2.8	1,179,670
Male	235,551	28.3	1.1	926,149	11	9,317,320	10	2.4	831,671
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	164,791	22.7	1.0	730,537	10	7,516,205	10	1.8	727,123
African American	222,310	32.0	1.3	888,120	14	9,672,565	11	3.2	695,423
Other/unknown	197,119	33.5	1.2	705,616	10	5,650,658	8	3.6	588,795
Use of Nursing Facilities^d									
Entire year	6,430	85.4	14.1	105,959	121	909,345	9	2.0	7,525
Part year	5,549	84.0	9.5	62,554	142	934,660	15	3.5	6,603
None	572,241	28.7	1.1	2,155,760	11	20,995,423	10	2.6	1,997,213
Maintenance Assistance Status									
Cash	96,070	44.8	3.0	637,905	32	6,874,664	11	2.6	214,442
Medically needy	78,824	25.6	1.3	386,504	14	4,248,922	11	2.3	307,332
Poverty related	343,936	28.7	0.8	947,652	6	7,760,015	8	3.3	1,197,319
Other/unknown	65,390	22.4	1.2	352,212	14	3,955,827	11	2.1	292,248

Source: Data for this table are from the MAX 2006 file for Illinois, 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 nonduel Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2006.

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

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

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

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

TABLE ND.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 ILLINOIS, 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	\$1	\$10	\$0	\$0	19,013,510
Age						
5 and younger	0.1	1	7	0	0	4,920,624
6-14	0.1	1	9	0	0	5,874,028
15-20	0.1	1	10	0	0	2,704,818
21-44	0.1	1	12	0	0	4,006,497
45-64	0.5	5	11	0	1	1,301,931
65-74	0.5	4	8	0	1	117,575
75-84	0.3	2	7	0	0	62,573
85 and older	0.4	3	7	0	0	25,136
Unknown	0.1	0	5	0	0	328
Basis of Eligibility^c						
Aged	0.3	2	7	0	0	148,313
Disabled	0.5	5	12	0	1	1,880,385
Adults	0.1	1	10	0	0	4,050,587
Children	0.1	1	8	0	0	12,928,719
Unknown	0.3	3	13	0	1	5,506
Gender						
Female	0.1	1	10	0	0	10,988,338
Male	0.1	1	10	0	0	8,025,172
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	1	10	0	0	6,781,808
African American	0.1	1	11	0	0	6,739,626
Other/unknown	0.1	1	8	0	0	5,492,076
Use of Nursing Facilities^d						
Entire year	1.3	11	9	0	3	84,353
Part year	0.9	14	15	0	2	68,483
None	0.1	1	10	0	0	18,860,674
Maintenance Assistance Status						
Cash	0.3	3	11	0	1	2,207,411
Medically needy	0.2	2	11	0	0	2,571,562
Poverty related	0.1	1	8	0	0	11,570,521
Other/unknown	0.1	1	11	0	0	2,664,016

Source: Data for this table are from the MAX 2006 file for Illinois, 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 I 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}
 ILLINOIS, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$	Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
All	746,430	\$31	\$22,839,428	100.0	2,324,273	\$10	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	42	75	3,157	0.0	54	58	0.0
Drugs for cosmetic purposes	249	15	3,738	0.0	386	10	0.0
Cough and cold medications	147,766	20	2,910,950	12.7	215,704	13	9.3
Vitamins and minerals	24,265	105	2,538,357	11.1	124,044	20	5.3
Non-prescription drugs	479,146	25	11,840,410	51.8	1,530,699	8	65.9
Barbiturates	3,811	83	315,791	1.4	31,887	10	1.4
Benzodiazepines	69,098	52	3,568,171	15.6	371,536	10	16.0
Other Part D Excl Rx Drugs	22,053	75	1,658,854	7.3	49,963	33	2.1

Source: Data for this table are from the MAX 2006 file for Illinois, 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.

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

Nondual Beneficiaries

APPENDIX TABLE A.1
 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
 NONDUAL BENEFICIARIES, ILLINOIS, 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	2,048,050	17,455	173,440	489,819	1,366,655	681	20,007,258	148,381	1,882,578	4,215,137	13,755,656	5,506
Age												
5 and younger	535,110	1	2,424	12	532,673	0	5,186,822	3	26,653	56	5,160,110	0
6-14	598,899	0	11,665	70	587,164	0	6,299,560	0	132,715	420	6,166,425	0
15-20	290,942	1	14,959	33,585	242,386	11	2,854,048	8	161,175	291,832	2,400,963	70
21-44	465,405	3	55,513	406,056	3,689	144	4,147,553	21	613,106	3,509,969	23,533	924
45-64	135,045	100	83,751	49,990	682	522	1,313,551	460	892,309	412,114	4,182	4,486
65-74	12,012	7,416	4,485	97	10	4	117,592	67,218	49,610	682	56	26
75-84	7,181	6,621	551	7	2	0	62,624	56,514	6,031	55	24	0
85 and older	3,409	3,313	92	2	2	0	25,155	24,157	979	9	10	0
Unknown	47	0	0	0	47	0	353	0	0	0	353	0
Gender												
Female	1,198,971	11,432	87,873	413,901	685,084	681	11,556,210	96,810	966,181	3,634,773	6,852,940	5,506
Male	849,079	6,023	85,567	75,918	681,571	0	8,451,048	51,571	916,397	580,364	6,902,716	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	728,980	6,769	63,743	208,830	449,192	446	6,834,330	51,265	676,605	1,732,270	4,370,339	3,851
African American	722,198	3,248	87,815	162,508	468,481	146	7,432,369	25,811	967,089	1,517,044	4,921,394	1,031
Other/unknown	596,872	7,438	21,882	118,481	448,982	89	5,740,559	71,305	238,884	965,823	4,463,923	624
Use of Nursing Facilities^c												
Entire year	7,525	803	6,705	14	2	1	84,353	8,310	75,973	47	22	1
Part year	6,603	700	5,685	194	22	2	68,531	6,532	59,869	1,885	229	16
None	2,033,922	15,952	161,050	489,611	1,366,631	678	19,854,374	133,539	1,746,736	4,213,205	13,755,405	5,489
Maintenance Assistance Status												
Cash	218,750	2,918	109,185	18,271	88,376	0	2,337,104	32,195	1,255,978	185,838	863,093	0
Medically needy	310,196	6,904	34,211	259,046	10,035	0	2,669,352	62,815	297,996	2,255,790	52,751	0
Poverty related	1,225,885	1,297	8,488	33,441	1,181,978	681	12,284,821	12,150	81,761	207,338	11,978,066	5,506
Other/unknown	293,219	6,336	21,556	179,061	86,266	0	2,715,981	41,221	246,843	1,566,171	861,746	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	1,849,869	17,446	172,946	448,763	1,210,033	681	17,812,138	148,287	1,876,882	3,785,770	11,995,693	5,506
FFS part year, with Rx claims	74,538	0	358	19,966	54,214	0	849,115	0	4,189	221,340	623,586	0
FFS part year, no Rx claims	37,177	2	110	5,708	31,357	0	410,567	24	1,216	56,264	353,063	0
MC all year, with Rx claims	49,757	2	21	11,413	38,321	0	561,109	19	240	119,791	441,059	0
MC all year, no Rx claims	36,709	5	5	3,969	32,730	0	374,329	51	51	31,972	342,255	0

Source: Data for this table are from the MAX 2006 file for Illinois, 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 1 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, ILLINOIS, 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
All	2,048,050	20,007,258	2,011,341	19,013,510	0	993,748
Fee-for-service (FFS) all year	1,849,869	17,812,138	1,849,869	17,812,138	0	0
FFS part year, with Rx claims	74,538	849,115	74,538	440,727	0	408,388
FFS part year, with no Rx claims	37,177	410,567	37,177	199,536	0	211,031
Managed care (MC) all year, with Rx claims	49,757	561,109	49,757	561,109	0	0
MC all year, with no Rx claims	36,709	374,329	0	0	0	374,329

Source: Data for this table are from the MAX 2006 file for Illinois, 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(f)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