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

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CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
NONDUAL BENEFICIARIES, MICHIGAN, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>843,083</b>	<b>3,789</b>	<b>67,616</b>	<b>249,633</b>	<b>520,754</b>	<b>1,291</b>	<b>4,090,410</b>	<b>24,782</b>	<b>460,029</b>	<b>1,023,651</b>	<b>2,570,405</b>	<b>11,543</b>
<b>Age</b>												
5 and younger	207,116	0	4,886	0	202,230	0	925,362	0	41,393	0	883,969	0
6-14	217,024	0	10,494	1	206,529	0	1,185,977	0	88,087	5	1,097,885	0
15-20	144,066	0	8,592	27,839	107,615	20	781,318	0	72,439	134,539	574,178	162
21-44	225,577	1	18,048	202,770	4,243	515	958,797	1	116,810	823,826	14,032	4,128
45-64	45,266	12	25,478	18,985	47	744	213,563	39	141,057	65,147	124	7,196
65-74	1,530	1,366	118	34	0	12	10,942	10,520	243	122	0	57
75-84	1,240	1,238	0	2	0	0	8,489	8,485	0	4	0	0
85 and older	1,176	1,172	0	2	2	0	5,753	5,737	0	8	8	0
Unknown	88	0	0	0	88	0	209	0	0	0	209	0
<b>Gender</b>												
Female	495,036	2,355	30,737	204,440	256,213	1,291	2,369,033	14,832	209,464	872,896	1,260,298	11,543
Male	348,047	1,434	36,879	45,193	264,541	0	1,721,377	9,950	250,565	150,755	1,310,107	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	533,544	2,244	40,066	167,154	323,080	1,000	2,720,792	13,527	284,191	702,245	1,711,974	8,855
African American	234,892	962	23,256	65,303	145,175	196	995,768	6,760	143,476	245,871	597,781	1,880
Other/unknown	74,647	583	4,294	17,176	52,499	95	373,850	4,495	32,362	75,535	260,650	808
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	1,417	267	1,145	4	1	0	15,283	2,713	12,551	18	1	0
Part year	1,708	202	1,468	33	4	1	12,864	1,760	10,906	161	25	12
None	839,958	3,320	65,003	249,596	520,749	1,290	4,062,263	20,309	436,572	1,023,472	2,570,379	11,531
<b>Maintenance Assistance Status</b>												
Cash	169,728	1,054	42,900	49,554	76,220	0	813,899	9,810	334,858	192,733	276,498	0
Medically needy	77,477	295	3,020	52,055	22,107	0	278,592	1,289	11,988	180,476	84,839	0
Poverty-related	379,937	1,072	12,413	47,090	318,071	1,291	1,957,201	6,524	62,199	243,031	1,633,904	11,543
Other/unknown	215,941	1,368	9,283	100,934	104,356	0	1,040,718	7,159	50,984	407,411	575,164	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	351,277	3,551	36,071	120,774	189,602	1,279	2,455,129	23,923	337,171	607,606	1,474,953	11,476
FFS part year, with Rx claims	182,235	102	21,452	71,412	89,259	10	719,334	400	88,080	262,613	368,179	62
FFS part year, no Rx claims	309,571	136	10,093	57,447	241,893	2	915,947	459	34,778	153,432	727,273	5

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.2 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; Rx = pharmacy benefit.

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

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ <sup>c</sup>	Rx \$ as a Percentage of All Medicaid		Number of Beneficiaries
						FFS \$ <sup>d</sup>		
<b>All</b>	<b>39.4</b>	<b>3.7</b>	<b>\$265</b>	<b>\$72</b>	<b>\$2,400</b>	<b>11.1</b>		<b>843,083</b>
<b>Age</b>								
5 and younger	32.8	1.4	79	56	1,880	4.2		207,116
6-14	32.4	2.7	268	100	1,400	19.1		217,024
15-20	38.3	3.3	292	89	1,828	16.0		144,066
21-44	48.7	4.5	260	58	2,668	9.7		225,577
45-64	62.8	16.3	1,062	65	9,806	10.8		45,266
65-74	29.1	6.3	298	47	4,447	6.7		1,530
75-84	19.2	2.8	114	41	4,542	2.5		1,240
85 and older	11.3	0.8	23	28	7,123	0.3		1,176
Unknown	0.0	0.0	0	0	0	0.0		88
<b>Basis of Eligibility<sup>e</sup></b>								
Aged	19.8	3.5	150	43	5,252	2.9		3,789
Disabled	67.7	18.0	1,714	95	12,321	13.9		67,616
Adults	47.7	3.5	148	42	2,029	7.3		249,633
Children	31.9	1.9	131	71	1,247	10.5		520,754
Unknown	81.6	18.9	1,452	77	10,853	13.4		1,291
<b>Gender</b>								
Female	41.9	3.8	220	58	2,239	9.8		495,036
Male	35.9	3.5	329	94	2,627	12.5		348,047
Unknown	0.0	0.0	0	0	0	0.0		0
<b>Race</b>								
White	43.3	4.3	289	68	2,328	12.4		533,544
African American	32.2	2.7	240	90	2,738	8.8		234,892
Other/unknown	34.7	2.6	174	66	1,845	9.4		74,647
<b>Use of Nursing Facilities<sup>f</sup></b>								
Entire year	84.1	84.2	4,786	57	63,133	7.6		1,417
Part year	89.6	54.5	3,256	60	51,224	6.4		1,708
None	39.3	3.4	252	73	2,198	11.4		839,958
<b>Maintenance Assistance Status</b>								
Cash	45.8	6.9	604	87	4,370	13.8		169,728
Medically needy	45.1	4.2	234	56	2,397	9.8		77,477
Poverty related	35.1	2.2	144	65	1,704	8.4		379,937
Other/unknown	40.0	3.5	224	64	2,076	10.8		215,941

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.3 includes beneficiaries represented by Cell K of Table 1.

b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. In ten states (DE, IA, IL, NC, NE, NY, TN, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.

d. In ten states (DE, IA, IL, NC, NE, NY, TN, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.

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

f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

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

TABLE ND.4  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, MICHIGAN, 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>c</sup>	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ <sup>d</sup>	Beneficiaries	Benefit Months
<b>All</b>	<b>0.8</b>	<b>\$55</b>	<b>11.1</b>	<b>60.6</b>	<b>26.9</b>	<b>4.7</b>	<b>4.6</b>	<b>2.0</b>	<b>1.3</b>	<b>\$495</b>	<b>843,083</b>	<b>4,090,410</b>
<b>Age</b>												
5 and younger	0.3	18	4.2	67.2	28.9	2.5	1.2	0.2	0.0	421	207,116	925,362
6-14	0.5	49	19.1	67.6	23.7	3.4	3.2	1.2	0.8	256	217,024	1,185,977
15-20	0.6	54	16.0	61.7	28.1	4.6	3.8	1.2	0.6	337	144,066	781,318
21-44	1.1	61	9.7	51.3	29.4	7.1	7.3	3.0	2.0	628	225,577	958,797
45-64	3.5	225	10.8	37.2	17.9	9.3	16.5	11.3	7.8	2,078	45,266	213,563
65-74	0.9	42	6.7	70.9	14.4	4.1	5.6	3.4	1.5	622	1,530	10,942
75-84	0.4	17	2.5	80.8	13.5	2.1	2.7	0.8	0.1	664	1,240	8,489
85 and older	0.2	5	0.3	88.7	9.8	0.8	0.7	0.1	0.0	1,456	1,176	5,753
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	88	209
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	0.5	23	2.9	80.2	12.7	2.2	3.0	1.3	0.5	803	3,789	24,782
Disabled	2.7	252	13.9	32.3	24.1	9.8	16.3	10.2	7.3	1,811	67,616	460,029
Adults	0.9	36	7.3	52.3	30.3	6.8	6.6	2.5	1.5	495	249,633	1,023,651
Children	0.4	27	10.5	68.1	25.7	3.0	2.1	0.6	0.4	253	520,754	2,570,405
Unknown	2.1	162	13.4	18.4	35.7	15.6	23.5	6.1	0.6	1,214	1,291	11,543
<b>Gender</b>												
Female	0.8	46	9.8	58.1	28.7	5.0	4.8	2.1	1.4	468	495,036	2,369,033
Male	0.7	67	12.5	64.1	24.3	4.3	4.4	1.8	1.2	531	348,047	1,721,377
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	0.8	57	12.4	56.7	29.0	5.1	5.3	2.3	1.6	457	533,544	2,720,792
African American	0.6	57	8.8	67.8	22.3	4.0	3.5	1.4	0.9	646	234,892	995,768
Other/unknown	0.5	35	9.4	65.3	26.4	3.5	3.1	1.1	0.6	369	74,647	373,850
<b>Use of Nursing Facilities<sup>f</sup></b>												
Entire year	7.8	444	7.6	15.9	6.4	3.2	13.8	30.8	29.8	5,854	1,417	15,283
Part year	7.2	432	6.4	10.4	9.7	5.6	19.4	28.0	26.9	6,801	1,708	12,864
None	0.7	52	11.4	60.7	27.0	4.7	4.6	1.9	1.2	454	839,958	4,062,263
<b>Maintenance Assistance Status</b>												
Cash	1.4	126	13.8	54.2	25.7	6.3	7.3	3.8	2.7	911	169,728	813,899
Medically needy	1.2	65	9.8	54.9	23.6	7.5	8.6	3.5	1.9	667	77,477	278,592
Poverty related	0.4	28	8.4	64.9	28.3	3.1	2.3	0.8	0.5	331	379,937	1,957,201
Other/unknown	0.7	47	10.8	60.0	26.5	5.2	5.2	2.0	1.2	431	215,941	1,040,718

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.4 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. In ten states (DE, IA, IL, NC, NE, NY, TN, TX, UT, and WV) the expenditures in this column include only Rx drug expenditures for those enrolled in capitated managed care plans, and not expenditures for other services covered by the plans or long-term-care services not covered by the plans. As a result, the amounts shown in this column for all Medicaid fee-for-service expenditures are lower than they would otherwise be.

d. In ten states (DE, IA, IL, NC, NE, NY, TN, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.

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

f. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.5  
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MICHIGAN, 2006

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>0.8</b>	<b>\$55</b>	<b>\$72</b>	<b>0.3</b>	<b>\$45</b>	<b>\$168</b>	<b>0.0</b>	<b>\$2</b>	<b>\$101</b>	<b>0.5</b>	<b>\$8</b>	<b>\$16</b>
<b>Age</b>												
5 and younger	0.3	18	56	0.1	14	151	0.0	1	56	0.2	3	14
6-14	0.5	49	100	0.3	44	165	0.0	1	90	0.2	4	19
15-20	0.6	54	89	0.2	46	186	0.0	2	107	0.3	6	17
21-44	1.1	61	58	0.3	47	166	0.0	4	110	0.7	11	14
45-64	3.5	225	65	1.0	173	166	0.1	12	114	2.3	40	17
65-74	0.9	42	47	0.3	34	113	0.0	1	79	0.6	7	12
75-84	0.4	17	41	0.1	13	100	0.0	1	72	0.3	3	12
85 and older	0.2	5	28	0.0	4	117	0.0	0	17	0.1	1	8
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	0.5	23	43	0.2	18	108	0.0	1	69	0.3	4	11
Disabled	2.7	252	95	1.0	212	216	0.1	10	116	1.6	31	19
Adults	0.9	36	42	0.2	25	127	0.0	3	111	0.6	8	13
Children	0.4	27	71	0.2	23	136	0.0	1	71	0.2	3	16
Unknown	2.1	162	77	0.6	132	204	0.1	10	155	1.4	21	15
<b>Gender</b>												
Female	0.8	46	58	0.2	35	146	0.0	3	105	0.5	8	15
Male	0.7	67	94	0.3	58	193	0.0	2	94	0.4	7	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	0.8	57	68	0.3	46	152	0.0	3	102	0.5	8	16
African American	0.6	57	90	0.2	48	233	0.0	2	96	0.4	7	16
Other/unknown	0.5	35	66	0.2	28	161	0.0	2	102	0.3	5	16
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	7.8	444	57	2.4	333	141	0.3	19	72	5.2	92	18
Part year	7.2	432	60	1.9	317	164	0.3	22	83	5.0	94	19
None	0.7	52	73	0.3	43	169	0.0	2	103	0.4	7	16
<b>Maintenance Assistance Status</b>												
Cash	1.4	126	87	0.5	105	205	0.0	5	115	0.9	16	18
Medically needy	1.2	65	56	0.3	50	151	0.0	4	97	0.8	12	15
Poverty related	0.4	28	65	0.2	23	144	0.0	1	96	0.3	4	15
Other/unknown	0.7	47	64	0.3	38	144	0.0	2	88	0.4	7	15

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.5 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Michigan, 0.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

e. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.

CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.6  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, MICHIGAN, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx			Users <sup>e</sup>					
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.0	0.0	0.2	\$14	\$10	\$1	\$4	\$49	\$265	\$47	\$15	356,975	\$17,502,561	168,829	20.0	1,280,847
Biologicals	0.5	0.5	0.0	0.0	795	777	7	11	1519	1,505	1,304	6,002	1,974	2,999,093	475	0.1	3,772
Antineoplastic Agents	0.6	0.2	0.0	0.4	130	115	0	14	234	662	124	38	10,025	2,345,608	2,076	0.2	18,072
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	33	25	1	7	71	157	83	23	227,987	16,199,153	67,471	8.0	496,731
Cardiovascular Agents	1.0	0.2	0.0	0.7	32	21	2	8	34	85	100	12	246,154	8,264,229	37,434	4.4	257,933
Respiratory Agents	0.5	0.3	0.0	0.2	35	31	0	4	72	113	54	17	273,556	19,733,016	73,456	8.7	568,909
Gastrointestinal Agents	0.5	0.2	0.0	0.2	43	33	7	3	87	137	304	15	145,874	12,705,889	38,372	4.6	296,559
Genitourinary Agents	0.3	0.1	0.0	0.2	11	7	1	3	41	84	66	18	38,019	1,563,561	18,325	2.2	141,820
CNS Drugs	1.2	0.5	0.1	0.7	103	88	7	9	84	185	83	13	669,489	56,318,361	91,616	10.9	544,209
Stimulants/Anti-obesity/Anorexia	1.0	0.8	0.0	0.2	73	69	1	3	72	83	293	16	204,081	14,730,520	29,433	3.5	202,940
Miscellaneous Psychological/Neurological Agents	0.4	0.3	0.0	0.1	153	145	0	9	389	477	71	96	7,323	2,847,913	2,517	0.3	18,563
Analgesics and Anesthetics	0.5	0.0	0.0	0.4	15	7	1	7	31	170	388	16	346,053	10,622,393	103,149	12.2	711,522
Neuromuscular Agents	0.9	0.5	0.0	0.5	80	68	2	10	84	146	119	21	278,759	23,458,896	44,840	5.3	294,312
Nutritional Products	0.3	0.0	0.0	0.3	3	0	0	3	11	16	23	10	86,493	939,598	40,392	4.8	288,089
Hematological Agents	0.6	0.2	0.0	0.4	368	360	0	8	642	1,988	57	21	38,465	24,708,419	9,020	1.1	67,154
Topical Products	0.2	0.0	0.0	0.2	8	4	0	3	31	88	61	16	154,928	4,872,154	82,935	9.8	643,972
Miscellaneous Products	0.4	0.2	0.0	0.1	85	72	7	6	234	340	276	48	16,167	3,776,607	4,806	0.6	44,351
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	12	0	0	0	50	0	0	0	1,560	77,930	857	0.1	6,576
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>3,103,882</b>	<b>223,665,901</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.  
 a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.  
 b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.  
 c. For information about these therapeutic categories, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Michigan, 0.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2006.  
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MICHIGAN, 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	\$26,200,886	22,808	2.7	198,804	0.6	\$212	\$132	
MISC. HEMATOLOGICAL	19,893,193	2,716	0.3	19,619	0.5	1,864	1,014	
ANTICONVULSANT	17,658,800	24,945	3.0	216,867	0.7	114	81	
ANTIASTHMATIC	13,832,940	81,902	9.7	665,998	0.3	69	21	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	10,806,926	21,690	2.6	201,577	0.7	82	54	
ANTIDEPRESSANTS	10,255,183	48,867	5.8	383,026	0.5	53	27	
ULCER DRUGS	7,885,830	36,019	4.3	275,291	0.4	75	29	
MISC. ENDOCRINE	7,539,903	3,723	0.4	35,626	0.5	413	212	
ANTIDIABETIC	6,009,996	18,058	2.1	128,432	0.6	75	47	
ANALGESICS - Narcotic	5,662,006	93,762	11.1	672,788	0.3	25	8	
Total	125,745,663	354,490	n.a.	2,798,028	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.7 includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Nondual Medicaid Beneficiaries



TABLE ND.7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MICHIGAN, 2006

Beneficiary Characteristics	All Top 10 Drug Groups							ANTIPSYCHOTICS			MISC. HEMATOLOGICAL		
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	
<b>All</b>	<b>1,244,751</b>	<b>\$125,745,663</b>	<b>22,808</b>	<b>2.7</b>	<b>198,804</b>	<b>0.6</b>	<b>\$132</b>	<b>2,716</b>	<b>0.3</b>	<b>19,619</b>	<b>0.5</b>	<b>\$1,014</b>	
<b>Female</b>													
All Females	690,257	53,035,294	11,088	2.2	93,258	0.6	117	1,317	0.3	9,479	0.5	91	
<b>Female, Disabled</b>													
All Ages	282,395	25,839,177	4,813	15.7	42,478	0.7	144	929	3.0	7,148	0.6	66	
5 and younger	8,114	880,327	27	1.3	285	0.4	76	1	0.0	12	1.3	1,227	
6-14	24,223	3,105,462	360	9.6	3,898	0.6	123	2	0.1	17	2.5	1,164	
15-20	24,446	3,059,601	590	18.2	6,057	0.7	146	3	0.1	36	0.4	25	
21-44	69,429	6,697,220	1,767	21.3	14,583	0.6	146	92	1.1	690	0.4	48	
45-64	156,072	12,086,540	2,067	15.5	17,644	0.7	148	828	6.2	6,385	0.6	63	
65-74	111	10,027	2	3.4	11	0.5	95	3	5.2	8	0.8	111	
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
<b>Female, Other Eligibles</b>													
All Ages	407,862	27,196,117	6,275	1.4	50,780	0.5	94	388	0.1	2,331	0.5	169	
5 and younger	22,838	1,789,017	59	0.1	572	0.5	77	2	0.0	24	0.7	6,508	
6-14	77,628	7,149,062	1,186	1.2	11,740	0.6	111	3	0.0	28	0.4	3,957	
15-20	79,113	6,700,276	2,026	2.5	18,953	0.6	114	5	0.0	47	0.3	34	
21-44	189,373	9,167,110	2,539	1.5	16,079	0.4	69	155	0.1	871	0.4	48	
45-64	36,335	2,235,419	450	3.5	3,289	0.4	54	194	1.5	1,085	0.5	60	
65-74	1,926	121,475	10	1.2	87	0.4	32	21	2.6	192	0.6	70	
75-84	549	28,361	4	0.5	48	0.1	8	7	1.0	72	0.7	69	
85 and older	100	5,397	1	0.1	12	0.3	40	1	0.1	12	0.3	42	
<b>Male</b>													
All Males	554,494	72,710,369	11,720	3.4	105,546	0.7	145	1,399	0.4	10,140	0.6	1,877	
<b>Male, Disabled</b>													
All Ages	258,465	41,102,090	6,043	16.4	54,142	0.7	160	993	2.7	7,700	0.6	1,878	
5 and younger	12,146	1,718,450	60	2.2	607	0.5	141	4	0.1	40	2.2	12,025	
6-14	51,799	15,133,899	1,176	17.4	12,049	0.7	146	20	0.3	227	0.8	37,292	
15-20	41,402	8,148,342	1,243	23.3	12,928	0.7	162	20	0.4	209	0.5	11,942	
21-44	58,802	8,117,705	1,939	19.9	15,265	0.7	172	111	1.1	924	0.5	2,154	
45-64	94,229	7,977,836	1,625	13.4	13,293	0.7	159	838	6.9	6,300	0.5	164	
65-74	87	5,858	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	

Nondual Medicaid Beneficiaries

TABLE ND.7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MICHIGAN, 2006

Beneficiary Characteristics	All Top 10 Drug Groups								ANTIPSYCHOTICS				MISC. HEMATOLOGICAL	
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
<b>Male, Other Eligibles</b>														
All Ages	296,029	31,608,279	5,677	1.8	51,404	0.6	129	406	0.1	2,440	0.5	1,871		
5 and younger	35,216	3,577,192	152	0.1	1,458	0.5	94	16	0.0	167	0.5	5,149		
6-14	138,803	15,231,222	2,666	2.5	25,715	0.7	128	21	0.0	214	0.7	8,078		
15-20	69,210	9,728,252	2,134	3.8	20,183	0.6	140	13	0.0	140	0.6	12,411		
21-44	38,309	2,181,725	581	1.5	3,117	0.4	96	133	0.3	642	0.5	251		
45-64	13,107	794,576	130	1.8	794	0.5	94	199	2.8	1,030	0.5	62		
65-74	898	63,357	7	1.2	72	0.5	101	14	2.3	139	0.7	70		
75-84	378	25,039	7	1.4	65	0.3	39	7	1.4	72	0.3	70		
85 and older	108	6,916	0	0.0	0	0.0	0	3	0.9	36	0.1	8		
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Medicaid Beneficiaries

TABLE ND.7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MICHIGAN, 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIASTHMATIC					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
<b>All</b>	<b>24,945</b>	<b>3.0</b>	<b>216,867</b>	<b>0.7</b>	<b>\$81</b>	<b>81,902</b>	<b>9.7</b>	<b>665,998</b>	<b>0.3</b>	<b>\$21</b>	<b>21,690</b>	<b>2.6</b>	<b>201,577</b>	<b>0.7</b>	<b>\$54</b>
<b>Female</b>															
All Females	14,295	2.9	120,095	0.7	77	43,768	8.8	346,326	0.3	21	6,764	1.4	62,870	0.6	51
<b>Female, Disabled</b>															
All Ages	6,663	21.7	62,747	0.8	89	9,509	30.9	85,795	0.4	30	1,014	3.3	10,508	0.7	64
5 and younger	217	10.3	2,468	0.7	97	1,059	50.5	11,540	0.3	27	39	1.9	413	0.3	62
6-14	813	21.8	9,064	0.8	122	1,109	29.7	12,183	0.4	29	492	13.2	5,185	0.7	56
15-20	789	24.3	8,428	0.8	114	764	23.5	8,184	0.4	31	240	7.4	2,561	0.7	66
21-44	2,107	25.4	18,919	0.8	96	1,748	21.1	14,574	0.4	25	158	1.9	1,494	0.6	69
45-64	2,732	20.5	23,857	0.8	61	4,821	36.2	39,279	0.4	32	85	0.6	855	0.6	96
65-74	5	8.6	11	0.9	31	8	13.8	35	0.7	72	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>															
All Ages	7,632	1.6	57,348	0.6	63	34,259	7.4	260,531	0.3	18	5,750	1.2	52,362	0.6	48
5 and younger	273	0.3	2,637	0.6	79	7,787	7.9	61,562	0.2	16	156	0.2	1,344	0.4	44
6-14	1,015	1.0	10,051	0.7	91	8,553	8.4	74,636	0.3	19	3,663	3.6	33,867	0.6	47
15-20	1,457	1.8	13,302	0.6	72	5,615	7.1	47,915	0.2	16	1,395	1.8	13,357	0.6	48
21-44	4,104	2.4	26,034	0.5	50	10,552	6.2	65,988	0.3	17	467	0.3	3,263	0.5	59
45-64	739	5.8	4,912	0.5	44	1,692	13.3	9,820	0.4	28	68	0.5	519	0.6	64
65-74	35	4.3	304	0.4	14	52	6.4	518	0.4	39	1	0.1	12	0.5	99
75-84	6	0.8	72	0.3	27	7	1.0	84	0.2	17	0	0.0	0	0.0	0
85 and older	3	0.4	36	0.6	9	1	0.1	8	0.1	6	0	0.0	0	0.0	0
<b>Male</b>															
All Males	10,650	3.1	96,772	0.8	88	38,134	11.0	319,672	0.3	21	14,926	4.3	138,707	0.7	55
<b>Male, Disabled</b>															
All Ages	6,621	18.0	63,448	0.8	95	8,880	24.1	84,527	0.4	29	2,648	7.2	27,041	0.7	63
5 and younger	358	12.8	3,889	0.7	84	1,587	56.9	17,153	0.3	27	84	3.0	878	0.3	50
6-14	1,262	18.7	13,924	0.8	126	2,248	33.2	24,501	0.4	31	1,602	23.7	16,171	0.7	61
15-20	1,070	20.0	11,345	0.8	116	1,055	19.7	11,467	0.4	30	748	14.0	8,022	0.7	69
21-44	1,917	19.6	17,153	0.9	91	1,061	10.9	9,261	0.4	21	178	1.8	1,678	0.7	57
45-64	2,010	16.5	17,121	0.8	62	2,921	24.0	22,107	0.4	29	36	0.3	292	0.6	54
65-74	4	6.7	16	0.6	56	8	13.3	38	0.6	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

Nondual Medicaid Beneficiaries

TABLE ND.7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MICHIGAN, 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIASTHMATIC					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
<b>Male, Other Eligibles</b>															
All Ages	4,029	1.3	33,324	0.6	74	29,254	9.4	235,145	0.3	18	12,278	3.9	111,666	0.7	53
5 and younger	340	0.3	3,265	0.6	76	11,682	11.3	90,172	0.2	17	366	0.4	3,322	0.4	42
6-14	1,381	1.3	13,852	0.7	82	11,499	11.0	100,229	0.3	19	9,022	8.6	81,821	0.7	52
15-20	1,020	1.8	9,196	0.6	79	3,793	6.8	32,955	0.3	18	2,690	4.8	25,332	0.6	58
21-44	993	2.6	5,229	0.6	52	1,683	4.4	8,504	0.3	22	184	0.5	1,083	0.6	68
45-64	281	4.0	1,637	0.6	44	547	7.8	2,782	0.4	29	16	0.2	108	0.7	86
65-74	6	1.0	63	0.4	18	33	5.5	333	0.4	28	0	0.0	0	0.0	0
75-84	5	1.0	60	0.4	2	16	3.1	158	0.2	14	0	0.0	0	0.0	0
85 and older	3	0.9	22	0.5	56	1	0.3	12	0.9	205	0	0.0	0	0.0	0
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.7B includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Medicaid Beneficiaries

TABLE ND.7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MICHIGAN, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					MISC. ENDOCRINE				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>48,867</b>	<b>5.8</b>	<b>383,026</b>	<b>0.5</b>	<b>\$27</b>	<b>36,019</b>	<b>4.3</b>	<b>275,291</b>	<b>0.4</b>	<b>\$29</b>	<b>3,723</b>	<b>0.4</b>	<b>35,626</b>	<b>0.5</b>	<b>\$212</b>
<b>Female</b>															
All Females	34,115	6.9	259,908	0.5	27	23,206	4.7	175,517	0.4	27	1,985	0.4	18,499	0.5	147
<b>Female, Disabled</b>															
All Ages	9,147	29.8	79,369	0.6	33	6,809	22.2	60,219	0.5	40	975	3.2	9,629	0.6	147
5 and younger	14	0.7	162	0.5	4	460	21.9	4,890	0.4	29	46	2.2	518	0.7	202
6-14	320	8.6	3,492	0.6	20	416	11.1	4,749	0.5	46	106	2.8	1,189	0.6	413
15-20	701	21.6	7,288	0.6	28	436	13.4	4,703	0.4	38	65	2.0	712	0.6	405
21-44	2,964	35.8	25,189	0.6	31	1,573	19.0	13,410	0.5	37	150	1.8	1,492	0.6	93
45-64	5,140	38.6	43,215	0.7	36	3,917	29.4	32,446	0.5	43	607	4.6	5,715	0.6	69
65-74	8	13.8	23	0.4	33	7	12.1	21	0.6	51	1	1.7	3	0.7	48
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>															
All Ages	24,968	5.4	180,539	0.4	25	16,397	3.5	115,298	0.3	19	1,010	0.2	8,870	0.4	148
5 and younger	36	0.0	351	0.3	7	1,932	2.0	12,113	0.3	18	48	0.0	474	0.5	192
6-14	1,655	1.6	15,951	0.5	17	1,385	1.4	13,075	0.3	21	449	0.4	4,075	0.4	182
15-20	5,092	6.4	45,410	0.4	21	2,775	3.5	24,171	0.2	14	121	0.2	1,276	0.5	271
21-44	15,853	9.4	103,007	0.4	26	8,551	5.1	54,829	0.3	19	125	0.1	860	0.4	57
45-64	2,276	17.9	15,287	0.5	36	1,637	12.9	9,891	0.4	35	214	1.7	1,653	0.5	39
65-74	43	5.3	421	0.4	20	80	9.9	816	0.4	34	36	4.4	333	0.5	37
75-84	11	1.5	98	0.4	12	27	3.7	293	0.4	24	16	2.2	187	0.5	40
85 and older	2	0.2	14	0.3	14	10	1.2	110	0.4	20	1	0.1	12	0.4	30
<b>Male</b>															
All Males	14,752	4.2	123,118	0.5	26	12,813	3.7	99,774	0.4	32	1,738	0.5	17,127	0.5	281
<b>Male, Disabled</b>															
All Ages	6,370	17.3	55,618	0.6	27	5,440	14.8	49,133	0.5	41	634	1.7	6,634	0.6	285
5 and younger	22	0.8	246	0.4	5	587	21.1	6,326	0.4	34	51	1.8	557	0.6	178
6-14	767	11.3	8,114	0.6	19	554	8.2	6,307	0.5	48	190	2.8	2,118	0.6	408
15-20	947	17.7	10,037	0.6	28	523	9.8	5,743	0.5	39	143	2.7	1,563	0.6	449
21-44	1,985	20.3	15,952	0.6	27	1,260	12.9	10,754	0.5	41	134	1.4	1,305	0.7	117
45-64	2,646	21.8	21,254	0.6	30	2,510	20.6	19,969	0.5	41	116	1.0	1,091	0.5	67
65-74	3	5.0	15	0.3	11	6	10.0	34	0.7	83	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 Medicaid Beneficiaries

TABLE ND.7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, MICHIGAN, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS						ULCER DRUGS					MISC. ENDOCRINE			
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean	
				Rx per Month	Mean Rx \$ per Benefit				Rx per Month	Mean Rx \$ per Benefit				Rx per Month	Mean Rx \$ per Benefit
<b>Male, Other Eligibles</b>															
All Ages	8,382	2.7	67,500	0.5	25	7,373	2.4	50,641	0.3	25	1,104	0.4	10,493	0.5	279
5 and younger	101	0.1	971	0.4	8	2,483	2.4	15,945	0.3	21	78	0.1	747	0.4	282
6-14	2,535	2.4	25,051	0.5	20	1,200	1.1	11,414	0.3	26	803	0.8	7,529	0.4	215
15-20	2,758	4.9	25,162	0.5	27	1,101	2.0	9,584	0.3	20	191	0.3	1,973	0.5	547
21-44	2,367	6.1	12,676	0.5	28	1,842	4.8	9,378	0.4	29	13	0.0	93	0.4	57
45-64	592	8.4	3,362	0.5	31	673	9.5	3,596	0.5	34	10	0.1	65	0.4	47
65-74	20	3.3	182	0.4	10	38	6.3	359	0.5	48	2	0.3	24	1.0	75
75-84	6	1.2	63	0.4	33	28	5.5	279	0.3	26	6	1.2	53	0.3	23
85 and older	3	0.9	33	0.2	3	8	2.3	86	0.8	29	1	0.3	9	0.2	1
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.7C includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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 Medicaid Beneficiaries

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

Beneficiary Characteristics	ANTIDIABETIC					ANALGESICS - Narcotic					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ Benefit per Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ Benefit per Month		
<b>All</b>	<b>18,058</b>	<b>2.1</b>	<b>128,432</b>	<b>0.6</b>	<b>\$47</b>	<b>93,762</b>	<b>11.1</b>	<b>672,788</b>	<b>0.3</b>	<b>\$8</b>	<b>843,083</b>	<b>4,090,410</b>
<b>Female</b>												
All Females	11,375	2.3	81,189	0.6	45	67,203	13.6	481,913	0.3	8	494,988	2,368,923
<b>Female, Disabled</b>												
All Ages	4,889	15.9	38,906	0.7	44	12,062	39.2	99,579	0.5	23	30,737	209,464
5 and younger	14	0.7	168	0.8	99	171	8.2	1,938	0.1	1	2,098	18,403
6-14	96	2.6	1,123	0.7	66	396	10.6	4,584	0.2	2	3,731	32,895
15-20	159	4.9	1,725	0.5	57	738	22.7	7,933	0.2	3	3,247	27,638
21-44	731	8.8	5,801	0.6	43	3,711	44.8	29,153	0.5	20	8,284	53,961
45-64	3,879	29.1	30,055	0.7	43	7,038	52.8	55,946	0.6	30	13,319	76,444
65-74	10	17.2	34	0.6	40	8	13.8	25	0.8	77	58	123
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Female, Other Eligibles</b>												
All Ages	6,486	1.4	42,283	0.6	46	55,141	11.9	382,334	0.3	4	464,251	2,159,459
5 and younger	70	0.1	663	0.8	68	980	1.0	8,938	0.1	1	98,884	431,079
6-14	653	0.6	6,668	0.7	78	2,263	2.2	21,308	0.1	1	101,834	539,159
15-20	783	1.0	7,091	0.6	66	9,142	11.5	75,302	0.2	1	79,492	410,349
21-44	3,484	2.1	19,413	0.5	34	38,798	23.0	251,799	0.3	4	168,940	715,218
45-64	1,352	10.6	7,049	0.6	32	3,859	30.3	23,966	0.4	12	12,732	48,748
65-74	110	13.6	1,036	0.5	27	77	9.5	770	0.3	5	809	6,250
75-84	30	4.1	319	0.5	11	19	2.6	215	0.2	3	729	4,974
85 and older	4	0.5	44	0.3	30	3	0.4	36	0.1	1	831	3,682
<b>Male</b>												
All Males	6,683	1.9	47,243	0.6	50	26,559	7.6	190,875	0.4	11	348,007	1,721,278
<b>Male, Disabled</b>												
All Ages	3,360	9.1	25,190	0.6	40	9,561	25.9	77,104	0.5	19	36,879	250,565
5 and younger	12	0.4	126	0.6	35	307	11.0	3,488	0.1	1	2,788	22,990
6-14	102	1.5	1,153	0.7	67	626	9.3	7,117	0.2	2	6,763	55,192
15-20	127	2.4	1,437	0.6	61	850	15.9	9,207	0.2	7	5,345	44,801
21-44	657	6.7	5,080	0.6	38	2,627	26.9	19,391	0.5	22	9,764	62,849
45-64	2,461	20.2	17,392	0.6	36	5,143	42.3	37,866	0.6	25	12,159	64,613
65-74	1	1.7	2	2.5	168	8	13.3	35	0.6	15	60	120
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Nondual Medicaid Beneficiaries

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

ANTIDIABETIC						ANALGESICS - Narcotic						
Beneficiary Characteristics	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Beneficiaries	Number of Benefit Months
				Rx per Month	Mean Rx \$ per Benefit				Rx per Month	Mean Rx \$ per Benefit		
<b>Male, Other Eligibles</b>												
All Ages	3,323	1.1	22,053	0.7	62	16,998	5.5	113,771	0.3	5	311,128	1,470,713
5 and younger	135	0.1	1,329	0.7	64	1,482	1.4	13,796	0.1	1	103,346	452,890
6-14	626	0.6	6,386	0.8	80	2,267	2.2	21,719	0.1	1	104,696	558,731
15-20	469	0.8	4,432	0.7	90	3,756	6.7	30,951	0.2	1	55,982	298,530
21-44	1,145	3.0	5,141	0.6	39	7,779	20.2	38,402	0.5	10	38,589	126,769
45-64	877	12.4	4,052	0.6	35	1,657	23.5	8,372	0.5	15	7,056	23,758
65-74	41	6.8	412	0.7	35	39	6.5	366	0.2	1	603	4,449
75-84	26	5.1	267	0.4	17	17	3.3	153	0.2	1	511	3,515
85 and older	4	1.2	34	0.3	9	1	0.3	12	0.1	0	345	2,071
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	88	209

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.7D includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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; \$ = Medicaid reimbursement.

Nondual Medicaid Beneficiaries



TABLE ND.8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, MICHIGAN, 2006

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
<b>All</b>	<b>\$444</b>	<b>7.8</b>	<b>1,417</b>	<b>15,283</b>
<b>Age</b>				
0-64	538	9.4	1,150	12,570
65-74	27	0.8	39	412
75-84	2	0.2	77	788
85 and older	2	0.2	151	1,513
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	450	8.0	784	8,502
Male	436	7.6	633	6,781
Unknown	0	0.0	0	0
<b>Race</b>				
White	436	7.7	792	8,356
African American	459	8	546	6,114
Other/unknown	414	7.6	79	813
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	5	0.3	267	2,713
Disabled	539	9.4	1,145	12,551
Adults	154	5.8	4	18
Children	313	8.0	1	1
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2006 Medicaid enrollment. A total of 1,708 beneficiaries who were in nursing facilities for part of their enrollment and their 12,864 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

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

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

Nondual Medicaid Beneficiaries

TABLE ND.9  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>  
 NONDUAL BENEFICIARIES, MICHIGAN, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users								Total Rx \$	Number of 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					
Anti-infective Agents	0.5	0.1	0.0	0.4	\$53	\$38	\$0	\$15	\$98	\$301	\$97	\$36	4,548	\$447,972	751	53.0	8,448
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.5	0.0	0.0	0.4	38	16	0	21	80	482	86	48	376	29,932	71	5.0	797
Endocrine/Metabolic Drugs	1.4	0.6	0.0	0.8	67	57	2	9	47	95	73	11	8,983	422,880	568	40.1	6,280
Cardiovascular Agents	2.3	0.6	0.0	1.7	69	47	4	18	30	79	104	11	21,988	656,937	861	60.8	9,519
Respiratory Agents	0.9	0.3	0.0	0.6	43	36	0	7	47	107	14	12	4,468	208,416	437	30.8	4,868
Gastrointestinal Agents	1.3	0.5	0.0	0.8	72	63	1	8	56	121	159	10	10,725	595,329	743	52.4	8,262
Genitourinary Agents	0.7	0.4	0.0	0.3	41	36	1	4	56	84	26	15	2,493	139,619	296	20.9	3,431
CNS Drugs	1.8	0.8	0.1	1.0	151	129	9	14	83	165	92	15	19,519	1,619,579	962	67.9	10,714
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.2	72	71	0	1	116	155	0	8	45	5,210	6	0.4	72
Miscellaneous Psychological/Neurological Agents	0.8	0.8	0.0	0.0	253	252	0	1	307	311	70	87	1,703	522,589	182	12.8	2,068
Analgesics and Anesthetics	1.9	0.2	0.0	1.7	72	25	1	45	38	145	47	27	14,542	553,528	699	49.3	7,730
Neuromuscular Agents	1.8	0.5	0.0	1.3	102	71	1	31	58	146	122	24	14,658	847,352	736	51.9	8,293
Nutritional Products	0.7	0.0	0.1	0.6	8	0	1	7	13	13	12	13	2,570	32,925	354	25.0	3,913
Hematological Agents	1.1	0.3	0.0	0.8	71	58	0	13	63	209	9	16	6,290	397,604	518	36.6	5,609
Topical Products	0.7	0.1	0.2	0.4	34	13	13	8	47	98	67	20	5,947	281,312	722	51.0	8,213
Miscellaneous Products	0.3	0.1	0.0	0.2	11	7	0	3	41	143	0	17	497	20,514	171	12.1	1,905
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	4	0	0	0	15	0	0	0	30	451	9	0.6	108
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	119,382	6,782,149	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.  
 a. Table ND.9 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 1,708 beneficiaries who were in nursing facilities for part of their enrollment and their 12,864 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 Michigan, 0.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.  
 Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, MICHIGAN, 2006

Top 10 Drug Groups in Nursing Facilities	Users				Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
ANTIPSYCHOTICS	\$1,136,014	565	39.9	6,505	0.9	\$189	\$175	
ANTICONVULSANT	760,033	876	61.8	9,955	1.1	68	76	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	523,733	224	15.8	2,533	0.7	301	207	
ANTIDEPRESSANTS	448,476	943	66.5	10,667	0.9	48	42	
ULCER DRUGS	423,277	761	53.7	8,612	0.7	70	49	
ANALGESICS - Narcotic	376,750	892	62.9	9,908	1.2	31	38	
ANTIDIABETIC	363,648	616	43.5	6,824	1.1	51	53	
ANTHYPERLIPIDEMIC	293,127	372	26.3	4,246	0.8	84	69	
DERMATOLOGICAL	235,282	1,443	101.8	16,614	0.3	46	14	
ANTIVIRAL	194,307	72	5.1	853	0.6	413	228	
Total	4,754,647	6,764	n.a.	76,717	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 1,708 beneficiaries who were in nursing facilities for part of their enrollment and their 12,864 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.

d. The top 10 drug groups were determined based on total 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

Nondual Medicaid Beneficiaries

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

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	
<b>All</b>	<b>62,607</b>	<b>\$4,754,647</b>	<b>565</b>	<b>39.9</b>	<b>6,505</b>	<b>0.9</b>	<b>\$175</b>	<b>876</b>	<b>61.8</b>	<b>9,955</b>	<b>1.1</b>	<b>\$76</b>	
<b>Female</b>													
All Females	35,645	2,730,274	313	39.9	3,597	0.9	175	459	58.5	5,249	1.1	75	
<b>Female, Disabled</b>													
All Ages	35,521	2,726,541	312	50.3	3,585	0.9	176	457	73.7	5,225	1.1	75	
64 or younger	35,521	2,726,541	312	50.3	3,585	0.9	176	457	73.7	5,225	1.1	75	
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
<b>Female, Other Eligibles</b>													
All Ages	124	3,733	1	0.6	12	0.1	13	2	1.2	24	0.6	25	
64 or younger	36	1,182	0	0.0	0	0.0	0	1	20.0	12	1.1	47	
65-74	27	817	0	0.0	0	0.0	0	1	5.0	12	0.1	3	
75-84	10	353	1	2.2	12	0.1	13	0	0.0	0	0.0	0	
85 and older	51	1,381	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
<b>Male</b>													
All Males	26,962	2,024,373	252	39.8	2,908	0.9	174	417	65.9	4,706	1.2	78	
<b>Male, Disabled</b>													
All Ages	26,766	2,015,365	250	47.6	2,884	0.9	174	414	78.9	4,670	1.2	78	
64 or younger	26,754	2,014,540	250	47.7	2,884	0.9	174	414	79.0	4,670	1.2	78	
65-74	12	825	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
<b>Male, Other Eligibles</b>													
All Ages	196	9,008	2	1.9	24	0.7	129	3	2.8	36	0.3	30	
64 or younger	3	26	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
65-74	104	6,635	2	11.1	24	0.7	129	2	11.1	24	0.4	30	
75-84	28	989	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	61	1,358	0	0.0	0	0.0	0	1	1.8	12	0.1	31	
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.  
 a. Table ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 1,708 beneficiaries who were in nursing facilities for part of their enrollment and their 12,864 benefit months were excluded from the analysis.  
 b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.  
 c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.  
 d. The top 10 drug groups were determined based on total 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

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

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIDEPRESSANTS					ULCER DRUGS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>224</b>	<b>15.8</b>	<b>2,533</b>	<b>0.7</b>	<b>\$207</b>	<b>943</b>	<b>66.5</b>	<b>10,667</b>	<b>0.9</b>	<b>\$42</b>	<b>761</b>	<b>53.7</b>	<b>8,612</b>	<b>0.7</b>	<b>\$49</b>
<b>Female</b>															
All Females	125	15.9	1,412	0.7	273	546	69.6	6,213	0.9	44	414	52.8	4,748	0.7	49
<b>Female, Disabled</b>															
All Ages	121	19.5	1,364	0.7	282	542	87.4	6,177	0.9	44	406	65.5	4,663	0.7	50
64 or younger	121	19.5	1,364	0.7	282	542	87.4	6,177	0.9	44	406	65.5	4,663	0.7	50
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>															
All Ages	4	2.4	48	0.1	21	4	2.4	36	0.2	7	8	4.9	85	0.3	6
64 or younger	0	0.0	0	0.0	0	1	20.0	3	0.3	2	1	20.0	1	1.0	2
65-74	1	5.0	12	0.1	11	2	10.0	21	0.1	2	3	15.0	36	0.2	7
75-84	1	2.2	12	0.1	12	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	2	2.1	24	0.2	30	1	1.1	12	0.3	16	4	4.3	48	0.4	5
<b>Male</b>															
All Males	99	15.6	1,121	0.6	123	397	62.7	4,454	0.8	39	347	54.8	3,864	0.7	49
<b>Male, Disabled</b>															
All Ages	95	18.1	1,076	0.6	126	392	74.7	4,406	0.8	39	339	64.6	3,786	0.7	50
64 or younger	95	18.1	1,076	0.6	126	392	74.8	4,406	0.8	39	338	64.5	3,784	0.7	50
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	2	1.0	124
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Male, Other Eligibles</b>															
All Ages	4	3.7	45	0.4	42	5	4.6	48	0.6	7	8	7.4	78	0.8	13
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	11.1	24	0.5	40	3	16.7	27	0.9	10	3	16.7	27	0.3	10
75-84	1	3.1	9	0.9	85	0	0.0	0	0.0	0	2	6.3	18	0.4	9
85 and older	1	1.8	12	0.1	12	2	3.5	21	0.2	4	3	5.3	33	1.5	17
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.  
 a. Table ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 1,708 beneficiaries who were in nursing facilities for part of their enrollment and their 12,864 benefit months were excluded from the analysis.  
 b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.  
 c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.  
 d. The top 10 drug groups were determined based on total 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

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

Beneficiary Characteristics	ANALGESICS - Narcotic						ANTIDIABETIC					ANTIHYPERLIPIDEMIC					
	Number of Users	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents		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 \$
		Residents	Benefit Months					Residents	Benefit Months				Residents	Benefit Months			
<b>All</b>	<b>892</b>	<b>62.9</b>	<b>9,908</b>	<b>1.2</b>	<b>\$38</b>	<b>616</b>	<b>43.5</b>	<b>6,824</b>	<b>1.1</b>	<b>\$53</b>	<b>372</b>	<b>26.3</b>	<b>4,246</b>	<b>0.8</b>	<b>\$69</b>		
<b>Female</b>																	
All Females	524	66.8	5,867	1.2	42	346	44.1	3,883	1.1	58	200	25.5	2,310	0.8	67		
<b>Female, Disabled</b>																	
All Ages	518	83.5	5,827	1.2	42	340	54.8	3,829	1.1	58	197	31.8	2,283	0.8	68		
64 or younger	518	83.5	5,827	1.2	42	340	54.8	3,829	1.1	58	197	31.8	2,283	0.8	68		
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
<b>Female, Other Eligibles</b>																	
All Ages	6	3.7	40	0.3	2	6	3.7	54	0.2	2	3	1.8	27	0.2	21		
64 or younger	4	80.0	19	0.5	4	2	40.0	6	0.8	9	1	20.0	3	1.3	113		
65-74	1	5.0	9	0.3	1	3	15.0	36	0.1	2	1	5.0	12	0.1	12		
75-84	1	2.2	12	0.1	0	1	2.2	12	0.1	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	1	1.1	12	0.1	6		
<b>Male</b>																	
All Males	368	58.1	4,041	1.2	33	270	42.7	2,941	0.9	48	172	27.2	1,936	0.8	71		
<b>Male, Disabled</b>																	
All Ages	363	69.1	4,013	1.2	33	268	51.0	2,923	0.9	48	170	32.4	1,921	0.8	72		
64 or younger	362	69.1	4,011	1.2	33	267	51.0	2,921	0.9	47	170	32.4	1,921	0.8	72		
65-74	1	100.0	2	0.5	10	1	100.0	2	2.5	168	0	0.0	0	0.0	0		
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
<b>Male, Other Eligibles</b>																	
All Ages	5	4.6	28	0.4	3	2	1.9	18	1.2	59	2	1.9	15	0.4	14		
64 or younger	1	100.0	1	3.0	26	0	0.0	0	0.0	0	0	0.0	0	0.0	0		
65-74	4	22.2	27	0.3	2	1	5.6	12	1.3	86	1	5.6	3	1.3	17		
75-84	0	0.0	0	0.0	0	1	3.1	6	1.0	5	0	0.0	0	0.0	0		
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1.8	12	0.2	13		
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0		

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.  
 a. Table ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 1,708 beneficiaries who were in nursing facilities for part of their enrollment and their 12,864 benefit months were excluded from the analysis.  
 b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.  
 c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.  
 d. The top 10 drug groups were determined based on total 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

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

Beneficiary Characteristics	DERMATOLOGICAL					ANTIVIRAL						
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
<b>All</b>	<b>1,443</b>	<b>101.8</b>	<b>16,614</b>	<b>0.3</b>	<b>\$14</b>	<b>72</b>	<b>5.1</b>	<b>853</b>	<b>0.6</b>	<b>\$228</b>	<b>1,417</b>	<b>15,283</b>
<b>Female</b>												
All Females	842	107.4	9,719	0.3	13	42	5.4	493	0.3	122	784	8,502
<b>Female, Disabled</b>												
All Ages	821	132.4	9,487	0.3	14	42	6.8	493	0.3	122	620	6,844
64 or younger	821	132.4	9,487	0.3	14	42	6.8	493	0.3	122	620	6,844
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Female, Other Eligibles</b>												
All Ages	21	12.8	232	0.2	2	0	0.0	0	0.0	0	164	1,658
64 or younger	2	40.0	4	0.8	33	0	0.0	0	0.0	0	5	20
65-74	5	25.0	60	0.2	3	0	0.0	0	0.0	0	20	231
75-84	5	11.1	60	0.1	1	0	0.0	0	0.0	0	45	484
85 and older	9	9.6	108	0.2	2	0	0.0	0	0.0	0	94	923
<b>Male</b>												
All Males	601	94.9	6,895	0.3	15	30	4.7	360	0.8	373	633	6,781
<b>Male, Disabled</b>												
All Ages	592	112.8	6,795	0.3	15	30	5.7	360	0.8	373	525	5,707
64 or younger	590	112.6	6,791	0.3	15	30	5.7	360	0.8	373	524	5,705
65-74	2	200.0	4	1.0	56	0	0.0	0	0.0	0	1	2
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
<b>Male, Other Eligibles</b>												
All Ages	9	8.3	100	0.2	3	0	0.0	0	0.0	0	108	1,074
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1
65-74	4	22.2	45	0.1	4	0	0.0	0	0.0	0	18	179
75-84	4	12.5	43	0.1	1	0	0.0	0	0.0	0	32	304
85 and older	1	1.8	12	0.3	2	0	0.0	0	0.0	0	57	590
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.  
 a. Table ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 1,708 beneficiaries who were in nursing facilities for part of their enrollment and their 12,864 benefit months were excluded from the analysis.  
 b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.  
 c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.  
 d. The top 10 drug groups were determined based on total 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.11  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 MICHIGAN, 2006

Beneficiary Characteristics	Number of Beneficiaries with at Least One Part D Excluded Rx	Percentage of Beneficiaries with at Least One Part D Excluded Rx	Number of Part D Excluded Rx per Beneficiary	Total Number Part D Excluded Rx	Part D Excluded Rx \$ per Beneficiary	Total Part D Excluded Rx \$	\$ per Part D Excluded Rx	Part D Excluded Rx \$ as a Percentage of All Nondual Rx \$	Total Number of Beneficiaries	
<b>All</b>	<b>89,910</b>	<b>10.7</b>	<b>0.4</b>	<b>332,785</b>	<b>\$4</b>	<b>\$3,162,143</b>	<b>\$10</b>	<b>1.4</b>	<b>843,083</b>	
<b>Age</b>										
5 and younger	13,812	6.7	0.1	28,348	2	376,682	13	2.3	207,116	
6-14	12,155	5.6	0.2	36,560	2	517,572	14	0.9	217,024	
15-20	12,471	8.7	0.3	36,601	3	489,492	13	1.2	144,066	
21-44	35,961	15.9	0.6	132,989	4	987,777	7	1.7	225,577	
45-64	14,705	32.5	2.0	91,626	17	757,517	8	1.6	45,266	
65-74	356	23.3	2.1	3,213	10	15,924	5	3.5	1,530	
75-84	266	21.5	1.9	2,389	9	11,072	5	7.8	1,240	
85 and older	184	15.6	0.9	1,059	5	6,107	6	23.1	1,176	
Unknown	0	0.0	0.0	0	0	0	0	0.0	88	
<b>Basis of Eligibility<sup>c</sup></b>										
Aged	769	20.3	1.7	6,562	9	32,501	5	5.7	3,789	
Disabled	21,055	31.1	2.1	141,237	24	1,594,599	11	1.4	67,616	
Adults	37,409	15.0	0.5	115,977	3	779,209	7	2.1	249,633	
Children	30,219	5.8	0.1	66,896	1	739,660	11	1.1	520,754	
Unknown	458	35.5	1.6	2,113	13	16,174	8	0.9	1,291	
<b>Gender</b>										
Female	60,681	12.3	0.4	220,121	4	1,915,251	9	1.8	495,036	
Male	29,229	8.4	0.3	112,664	4	1,246,892	11	1.1	348,047	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
<b>Race</b>										
White	60,020	11.2	0.5	240,194	4	2,312,094	10	1.5	533,544	
African American	22,477	9.6	0.3	70,599	2	585,636	8	1.0	234,892	
Other/unknown	7,413	9.9	0.3	21,992	4	264,413	12	2.0	74,647	
<b>Use of Nursing Facilities<sup>d</sup></b>										
Entire year	952	67.2	7.8	11,000	64	90,879	8	1.3	1,417	
Part year	1,270	74.4	6.1	10,398	49	83,363	8	1.5	1,708	
None	87,688	10.4	0.4	311,387	4	2,987,901	10	1.4	839,958	
<b>Maintenance Assistance Status</b>										
Cash	28,258	16.6	0.8	143,172	8	1,348,886	9	1.3	169,728	
Medically needy	11,124	14.4	0.5	39,839	3	269,321	7	1.5	77,477	
Poverty related	27,352	7.2	0.2	72,048	2	796,797	11	1.5	379,937	
Other/unknown	23,176	10.7	0.4	77,726	3	747,139	10	1.5	215,941	

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2006.

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

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

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

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

Nondual Medicaid Beneficiaries



TABLE ND.12  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 MICHIGAN, 2006

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
<b>All</b>	<b>0.1</b>	<b>\$1</b>	<b>\$10</b>	<b>\$0</b>	<b>\$0</b>	<b>4,090,410</b>
<b>Age</b>						
5 and younger	0.0	0	13	0	0	925,362
6-14	0.0	0	14	0	0	1,185,977
15-20	0.0	1	13	0	0	781,318
21-44	0.1	1	7	0	0	958,797
45-64	0.4	4	8	0	1	213,563
65-74	0.3	1	5	0	0	10,942
75-84	0.3	1	5	0	0	8,489
85 and older	0.2	1	6	0	0	5,753
Unknown	0.0	0	0	0	0	209
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.3	1	5	0	0	24,782
Disabled	0.3	3	11	0	1	460,029
Adults	0.1	1	7	0	0	1,023,651
Children	0.0	0	11	0	0	2,570,405
Unknown	0.2	1	8	0	1	11,543
<b>Gender</b>						
Female	0.1	1	9	0	0	2,369,033
Male	0.1	1	11	0	0	1,721,377
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	0.1	1	10	0	0	2,720,792
African American	0.1	1	8	0	0	995,768
Other/unknown	0.1	1	12	0	0	373,850
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.7	6	8	0	2	15,283
Part year	0.8	6	8	0	2	12,864
None	0.1	1	10	0	0	4,062,263
<b>Maintenance Assistance Status</b>						
Cash	0.2	2	9	0	1	813,899
Medically needy	0.1	1	7	0	0	278,592
Poverty related	0.0	0	11	0	0	1,957,201
Other/unknown	0.1	1	10	0	0	1,040,718

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

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

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

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

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

TABLE ND.13  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS<sup>a,b,c</sup>  
 MICHIGAN, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a		Total Number Rx.	\$ per Rx	Number Rx as a	
				Percentage of All Part D Excluded Rx \$	Percentage of All Part D Excluded Rx				
<b>All</b>	<b>103,330</b>	<b>\$31</b>	<b>\$3,162,143</b>	<b>100.0</b>		<b>332,785</b>	<b>\$10</b>	<b>100.0</b>	
Anorexia or weight loss/gain	2	13	26	0.0		2	13	0.0	
Fertility drugs	2	203	406	0.0		2	203	0.0	
Drugs for cosmetic purposes	224	10	2,196	0.1		269	8	0.1	
Cough and cold medications	669	115	76,893	2.4		1,729	44	0.5	
Vitamins and minerals	8,320	42	346,357	11.0		25,243	14	7.6	
Non-prescription drugs	56,354	21	1,181,284	37.4		136,765	9	41.1	
Barbiturates	1,496	38	56,223	1.8		10,758	5	3.2	
Benzodiazepines	34,139	26	899,810	28.5		153,535	6	46.1	
Other Part D Excl Rx Drugs	2,124	282	598,948	18.9		4,482	134	1.3	

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2006. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2006. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table ND11.

b. Includes OTC drugs as well as prescription drugs.

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

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

Nondual Medicaid Beneficiaries

APPENDIX TABLE A.1  
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
NONDUAL BENEFICIARIES, MICHIGAN, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>1,556,670</b>	<b>3,836</b>	<b>177,663</b>	<b>361,352</b>	<b>1,012,528</b>	<b>1,291</b>	<b>14,949,467</b>	<b>26,668</b>	<b>1,951,607</b>	<b>2,872,717</b>	<b>10,086,893</b>	<b>11,582</b>
<b>Age</b>												
5 and younger	371,736	0	6,522	0	365,214	0	3,595,569	0	72,450	0	3,523,119	0
6-14	455,085	0	22,700	1	432,384	0	4,774,630	0	261,989	5	4,512,636	0
15-20	258,879	0	19,954	32,275	206,630	20	2,486,453	0	226,097	252,489	2,007,703	164
21-44	359,682	1	54,485	296,553	8,128	515	3,006,002	1	604,444	2,354,768	42,635	4,154
45-64	107,130	13	73,812	32,479	82	744	1,059,079	63	786,008	265,218	583	7,207
65-74	1,640	1,398	190	40	0	12	13,021	12,120	619	225	0	57
75-84	1,251	1,249	0	2	0	0	8,701	8,697	0	4	0	0
85 and older	1,179	1,175	0	2	2	0	5,803	5,787	0	8	8	0
Unknown	88	0	0	0	88	0	209	0	0	0	209	0
<b>Gender</b>												
Female	887,252	2,379	87,672	296,709	499,201	1,291	8,396,564	15,925	972,424	2,406,601	4,990,032	11,582
Male	669,418	1,457	89,991	64,643	513,327	0	6,552,903	10,743	979,183	466,116	5,096,861	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	898,870	2,278	92,278	227,258	576,056	1,000	8,368,115	14,649	998,159	1,710,981	5,635,438	8,888
African American	527,272	969	75,594	110,971	339,542	196	5,367,285	7,222	847,148	989,899	3,521,130	1,886
Other/unknown	130,528	589	9,791	23,123	96,930	95	1,214,067	4,797	106,300	171,837	930,325	808
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	1,417	267	1,145	4	1	0	15,295	2,713	12,562	19	1	0
Part year	1,742	202	1,501	34	4	1	17,092	1,784	14,952	308	36	12
None	1,553,511	3,367	175,017	361,314	1,012,523	1,290	14,917,080	22,171	1,924,093	2,872,390	10,086,856	11,570
<b>Maintenance Assistance Status</b>												
Cash	409,298	1,093	144,076	80,025	184,104	0	4,310,758	11,039	1,663,201	722,816	1,913,702	0
Medically needy	106,584	295	3,206	71,823	31,260	0	750,539	1,300	17,199	500,390	231,650	0
Poverty related	641,506	1,073	16,242	50,598	572,302	1,291	6,075,797	6,828	148,425	329,972	5,578,990	11,582
Other/unknown	399,282	1,375	14,139	158,906	224,862	0	3,812,373	7,501	122,782	1,319,539	2,362,551	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	351,277	3,551	36,071	120,774	189,602	1,279	2,455,129	23,923	337,171	607,606	1,474,953	11,476
FFS part year, with Rx claims	182,235	102	21,452	71,412	89,259	10	1,834,955	960	227,976	677,578	928,347	94
FFS part year, no Rx claims	309,571	136	10,093	57,447	241,893	2	3,021,528	1,254	102,112	495,697	2,422,453	12
MC all year, with Rx claims	121,503	10	55,023	31,085	35,385	0	1,372,441	116	648,426	328,359	395,540	0
MC all year, no Rx claims	592,084	37	55,024	80,634	456,389	0	6,265,414	415	635,922	763,477	4,865,600	0

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Table A.1 includes the beneficiaries represented by Cell J of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.  
b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.  
c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.  
Benefit(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.2  
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS<sup>a</sup>  
 NONDUAL BENEFICIARIES, MICHIGAN, 2006

	Beneficiaries and		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Benefit Months in Cell J of Table 1					
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
<b>All</b>	<b>1,556,670</b>	<b>14,949,467</b>	<b>843,083</b>	<b>4,090,410</b>	<b>0</b>	<b>10,859,057</b>
Fee-for-service (FFS) all year	351,277	2,455,129	351,277	2,455,129	0	0
FFS part year, with Rx claims	182,235	1,834,955	182,235	719,334	0	1,115,621
FFS part year, with no Rx claims	309,571	3,021,528	309,571	915,947	0	2,105,581
Managed care (MC) all year, with Rx claims	121,503	1,372,441	0	0	0	1,372,441
MC all year, with no Rx claims	592,084	6,265,414	0	0	0	6,265,414

Source: Data for this table are from the MAX 2006 file for Michigan, released by CMS in 9/2009. This table was produced on 02/11/2010.

a. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract;

MC = managed care; Rx = pharmacy benefit.

Nondual Medicaid Beneficiaries