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

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TABLE ND.2  
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
NONDUAL BENEFICIARIES, NEVADA, 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>144,307</b>	<b>336</b>	<b>22,231</b>	<b>31,490</b>	<b>90,076</b>	<b>174</b>	<b>737,301</b>	<b>2,531</b>	<b>213,324</b>	<b>116,315</b>	<b>403,787</b>	<b>1,344</b>
<b>Age</b>												
5 and younger	44,553	0	1,466	0	43,087	0	190,876	0	13,572	0	177,304	0
6-14	37,551	0	3,509	0	34,042	0	197,362	0	35,387	0	161,975	0
15-20	18,182	0	2,313	3,084	12,782	3	98,700	0	22,754	12,184	63,751	11
21-44	32,725	0	6,300	26,289	111	25	157,317	0	60,681	95,867	642	127
45-64	10,867	4	8,596	2,114	11	142	90,131	18	80,635	8,248	52	1,178
65-74	244	194	45	1	0	4	1,777	1,476	271	2	0	28
75-84	107	103	2	2	0	0	864	826	24	14	0	0
85 and older	35	35	0	0	0	0	211	211	0	0	0	0
Unknown	43	0	0	0	43	0	63	0	0	0	63	0
<b>Gender</b>												
Female	81,518	200	11,105	25,663	44,376	174	405,199	1,481	108,446	95,646	198,282	1,344
Male	62,245	136	11,126	5,824	45,159	0	330,759	1,050	104,878	20,660	204,171	0
Unknown	544	0	0	3	541	0	1,343	0	0	9	1,334	0
<b>Race</b>												
White	63,391	133	12,435	15,829	34,873	121	382,004	973	118,873	67,459	193,768	931
African American	28,769	32	5,378	6,322	17,024	13	130,322	242	52,087	16,988	60,912	93
Other/unknown	52,147	171	4,418	9,339	38,179	40	224,975	1,316	42,364	31,868	149,107	320
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	290	27	262	0	1	0	2,802	227	2,563	0	12	0
Part year	390	21	358	7	4	0	3,828	182	3,565	43	38	0
None	143,627	288	21,611	31,483	90,071	174	730,671	2,122	207,196	116,272	403,737	1,344
<b>Maintenance Assistance Status</b>												
Cash	88,106	274	20,533	21,845	45,454	0	459,863	2,194	196,343	78,239	183,087	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	29,241	5	1	4,044	25,017	174	111,401	30	6	13,819	96,202	1,344
Other/unknown	26,960	57	1,697	5,601	19,605	0	166,037	307	16,975	24,257	124,498	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	74,804	336	21,694	13,007	39,593	174	548,046	2,531	209,930	66,465	267,776	1,344
FFS part year, with Rx claims	16,638	0	363	7,078	9,197	0	54,348	0	2,486	21,093	30,769	0
FFS part year, no Rx claims	52,865	0	174	11,405	41,286	0	134,907	0	908	28,757	105,242	0

Source: Data for this table are from the MAX 2006 file for Nevada, 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, NEVADA, 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 FFS \$ <sup>d</sup>	Number of Beneficiaries
<b>All</b>	<b>37.4</b>	<b>5.9</b>	<b>\$495</b>	<b>\$85</b>	<b>\$4,237</b>	<b>11.7</b>	<b>144,307</b>
<b>Age</b>							
5 and younger	28.8	1.2	130	105	2,398	5.4	44,553
6-14	28.0	2.2	246	111	2,209	11.1	37,551
15-20	37.0	3.2	321	100	4,392	7.3	18,182
21-44	46.9	7.2	613	86	5,089	12.0	32,725
45-64	75.6	37.4	2,771	74	15,475	17.9	10,867
65-74	63.5	21.7	1,247	57	18,747	6.7	244
75-84	59.8	18.9	778	41	17,288	4.5	107
85 and older	42.9	12.7	493	39	16,687	3.0	35
Unknown	0.0	0.0	0	0	110	0.0	43
<b>Basis of Eligibility<sup>e</sup></b>							
Aged	61.3	19.5	907	47	16,549	5.5	336
Disabled	75.5	28.4	2,602	92	16,008	16.3	22,231
Adults	40.6	2.8	124	45	2,054	6.0	31,490
Children	26.6	1.3	102	79	2,025	5.0	90,076
Unknown	77.0	17.7	1,340	76	16,635	8.1	174
<b>Gender</b>							
Female	39.6	6.4	476	74	3,920	12.2	81,518
Male	34.6	5.1	524	102	4,681	11.2	62,245
Unknown	8.6	0.2	6	28	744	0.8	544
<b>Race</b>							
White	47.0	8.8	730	83	5,434	13.4	63,391
African American	32.2	4.9	403	82	4,002	10.1	28,769
Other/unknown	28.5	2.8	260	94	2,910	8.9	52,147
<b>Use of Nursing Facilities<sup>f</sup></b>							
Entire year	93.8	92.6	5,587	60	73,042	7.6	290
Part year	98.2	82.5	5,002	61	98,528	5.1	390
None	37.1	5.5	473	86	3,842	12.3	143,627
<b>Maintenance Assistance Status</b>							
Cash	40.4	7.8	660	85	4,411	15.0	88,106
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	25.7	0.9	51	54	1,779	2.8	29,241
Other/unknown	40.2	4.8	440	91	6,333	6.9	26,960

Source: Data for this table are from the MAX 2006 file for Nevada, 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, NEVADA, 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>c</sup>	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ <sup>d</sup>	Beneficiaries	Benefit Months
<b>All</b>	<b>1.1</b>	<b>\$97</b>	<b>11.7</b>	<b>62.6</b>	<b>25.1</b>	<b>4.3</b>	<b>4.8</b>	<b>2.3</b>	<b>0.7</b>	<b>\$829</b>	<b>144,307</b>	<b>737,301</b>
<b>Age</b>												
5 and younger	0.3	30	5.4	71.2	25.5	2.3	1.0	0.1	0.0	560	44,553	190,876
6-14	0.4	47	11.1	72.0	22.8	2.9	2.1	0.3	0.0	420	37,551	197,362
15-20	0.6	59	7.3	63.0	29.1	4.3	3.0	0.5	0.1	809	18,182	98,700
21-44	1.5	128	12.0	53.1	28.0	7.0	8.1	3.1	0.6	1,059	32,725	157,317
45-64	4.5	334	17.9	24.4	16.6	9.4	23.3	19.0	7.3	1,866	10,867	90,131
65-74	3.0	171	6.7	36.5	21.7	9.8	18.0	8.2	5.7	2,574	244	1,777
75-84	2.3	96	4.5	40.2	23.4	9.3	17.8	5.6	3.7	2,141	107	864
85 and older	2.1	82	3.0	57.1	22.9	2.9	5.7	8.6	2.9	2,768	35	211
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	75	43	63
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	2.6	120	5.5	38.7	23.8	9.8	16.7	7.4	3.6	2,197	336	2,531
Disabled	3.0	271	16.3	24.5	29.0	10.1	19.4	12.7	4.3	1,668	22,231	213,324
Adults	0.8	34	6.0	59.4	28.2	5.9	5.0	1.3	0.2	556	31,490	116,315
Children	0.3	23	5.0	73.4	23.1	2.3	1.1	0.1	0.0	452	90,076	403,787
Unknown	2.3	174	8.1	23.0	27.0	18.4	24.7	6.3	0.6	2,154	174	1,344
<b>Gender</b>												
Female	1.3	96	12.2	60.4	26.3	4.5	5.2	2.7	0.9	789	81,518	405,199
Male	1.0	99	11.2	65.4	23.7	4.1	4.5	1.9	0.5	881	62,245	330,759
Unknown	0.1	2	0.8	91.4	7.9	0.7	0.0	0.0	0.0	302	544	1,343
<b>Race</b>												
White	1.5	121	13.4	53.0	29.7	5.5	7.0	3.6	1.2	902	63,391	382,004
African American	1.1	89	10.1	67.8	21.1	4.3	4.3	1.9	0.6	883	28,769	130,322
Other/unknown	0.6	60	8.9	71.5	21.8	3.0	2.6	1.0	0.2	675	52,147	224,975
<b>Use of Nursing Facilities<sup>f</sup></b>												
Entire year	9.6	578	7.6	6.2	3.8	4.5	18.6	31.4	35.5	7,560	290	2,802
Part year	8.4	510	5.1	1.8	8.2	4.9	20.3	32.6	32.3	10,038	390	3,828
None	1.1	93	12.3	62.9	25.2	4.3	4.8	2.2	0.6	755	143,627	730,671
<b>Maintenance Assistance Status</b>												
Cash	1.5	126	15.0	59.6	24.6	5.0	6.4	3.4	1.0	845	88,106	459,863
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.2	13	2.8	74.3	22.6	2.1	0.9	0.1	0.0	467	29,241	111,401
Other/unknown	0.8	71	6.9	59.8	29.6	4.7	4.1	1.3	0.5	1,028	26,960	166,037

Source: Data for this table are from the MAX 2006 file for Nevada, 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, NEVADA, 2006

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>1.1</b>	<b>\$97</b>	<b>\$85</b>	<b>0.4</b>	<b>\$71</b>	<b>\$202</b>	<b>0.0</b>	<b>\$6</b>	<b>\$155</b>	<b>0.8</b>	<b>\$20</b>	<b>\$26</b>
<b>Age</b>												
5 and younger	0.3	30	105	0.1	26	333	0.0	1	51	0.2	4	19
6-14	0.4	47	111	0.2	40	206	0.0	1	97	0.2	6	25
15-20	0.6	59	100	0.2	49	209	0.0	2	121	0.3	8	24
21-44	1.5	128	86	0.4	94	219	0.0	7	162	1.0	27	26
45-64	4.5	334	74	1.3	221	174	0.2	30	180	3.1	83	27
65-74	3.0	171	57	0.9	118	127	0.1	14	144	2.0	39	20
75-84	2.3	96	41	0.8	68	85	0.1	4	74	1.5	24	16
85 and older	2.1	82	39	0.6	55	93	0.1	8	124	1.5	19	13
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	2.6	120	47	0.8	82	104	0.1	7	99	1.7	31	18
Disabled	3.0	271	92	0.9	199	215	0.1	19	171	1.9	54	28
Adults	0.8	34	45	0.2	20	123	0.0	2	120	0.6	12	21
Children	0.3	23	79	0.1	19	181	0.0	1	72	0.2	4	20
Unknown	2.3	174	76	0.6	137	225	0.0	4	91	1.6	32	20
<b>Gender</b>												
Female	1.3	96	74	0.4	68	180	0.0	6	146	0.9	22	25
Male	1.0	99	102	0.3	76	233	0.0	6	170	0.6	17	28
Unknown	0.1	2	28	0.0	1	69	0.0	0	33	0.1	1	17
<b>Race</b>												
White	1.5	121	83	0.4	88	195	0.1	8	153	1.0	26	27
African American	1.1	89	82	0.3	65	197	0.0	6	193	0.7	18	25
Other/unknown	0.6	60	94	0.2	47	233	0.0	3	132	0.4	10	24
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	9.6	578	60	2.6	399	152	0.3	30	87	6.6	149	23
Part year	8.4	510	61	2.0	333	166	0.3	34	120	6.1	141	23
None	1.1	93	86	0.3	69	205	0.0	6	159	0.7	18	26
<b>Maintenance Assistance Status</b>												
Cash	1.5	126	85	0.4	91	204	0.1	9	167	1.0	27	27
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.2	13	54	0.1	10	159	0.0	1	67	0.2	3	18
Other/unknown	0.8	71	91	0.3	58	198	0.0	3	106	0.5	11	24

Source: Data for this table are from the MAX 2006 file for Nevada, 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 Nevada, 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, NEVADA, 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	0.1	0.0	0.2	\$27	\$20	\$1	\$6	\$89	\$333	\$118	\$25	80,075	\$7,163,432	31,338	21.7	262,067
Biologicals	0.3	0.3	0.0	0.0	439	439	0	0	1324	1,355	0	32	1,868	2,473,599	612	0.4	5,633
Antineoplastic Agents	0.6	0.1	0.0	0.4	142	121	1	20	256	871	127	49	2,643	676,421	484	0.3	4,762
Endocrine/Metabolic Drugs	0.6	0.2	0.0	0.4	37	28	1	8	60	126	47	21	66,754	3,979,516	12,121	8.4	107,244
Cardiovascular Agents	1.2	0.3	0.1	0.9	50	28	8	15	40	86	125	17	109,692	4,412,953	9,156	6.3	87,778
Respiratory Agents	0.5	0.2	0.0	0.3	34	28	0	6	65	119	44	20	89,737	5,866,745	20,443	14.2	173,406
Gastrointestinal Agents	0.5	0.2	0.0	0.4	39	30	3	6	74	203	218	17	39,017	2,870,593	7,573	5.2	72,944
Genitourinary Agents	0.3	0.1	0.0	0.1	21	12	4	4	63	88	97	29	9,398	594,119	3,470	2.4	28,791
CNS Drugs	1.1	0.4	0.0	0.6	128	109	4	15	115	250	115	23	150,380	17,233,683	14,051	9.7	134,195
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.1	71	65	1	5	110	125	134	40	18,236	2,004,327	2,717	1.9	28,089
Miscellaneous Psychological/Neurological Agents	0.4	0.4	0.0	0.0	177	175	0	2	436	469	71	68	2,324	1,012,820	555	0.4	5,710
Analgesics and Anesthetics	0.7	0.1	0.0	0.6	51	18	10	23	72	272	423	37	122,724	8,850,727	20,251	14.0	173,376
Neuromuscular Agents	0.8	0.3	0.0	0.5	75	55	3	17	89	192	124	32	80,735	7,148,129	9,839	6.8	95,563
Nutritional Products	0.3	0.1	0.0	0.3	8	2	0	5	22	34	17	20	16,425	365,393	6,443	4.5	48,342
Hematological Agents	0.7	0.2	0.0	0.5	172	157	2	13	241	709	61	29	16,548	3,982,557	2,379	1.6	23,210
Topical Products	0.3	0.1	0.0	0.2	15	10	0	4	55	122	63	24	35,880	1,977,491	15,068	10.4	133,207
Miscellaneous Products	0.6	0.3	0.1	0.3	207	164	18	25	327	519	305	98	2,189	716,294	334	0.2	3,453
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	50	0	0	0	267	0	0	0	432	115,128	230	0.2	2,281
<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>845,057</b>	<b>71,443,927</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 Nevada, 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 Nevada, 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, NEVADA, 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	\$13,224,054	7,869	5.5	82,165	0.6	\$275	\$161	
ANALGESICS - Narcotic	6,908,952	23,741	16.5	214,747	0.4	76	32	
ANTICONVULSANT	6,109,037	7,509	5.2	76,955	0.7	120	79	
ANTIASTHMATIC	4,245,735	17,342	12.0	158,231	0.4	76	27	
ANTIVIRAL	3,567,262	1,707	1.2	16,290	0.5	428	219	
MISC. HEMATOLOGICAL	2,782,198	823	0.6	8,255	0.6	547	337	
ANTIDEPRESSANTS	2,736,664	10,449	7.2	103,950	0.5	51	26	
PASSIVE IMMUNIZING AGENTS	2,468,029	414	0.3	3,374	0.5	1,494	731	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	2,004,357	3,072	2.1	32,116	0.6	110	62	
ANTIDIABETIC	1,911,518	4,721	3.3	45,003	0.6	66	42	
Total	45,957,806	77,647	n.a.	741,086	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Nevada, 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, NEVADA, 2006

Beneficiary Characteristics	All Top 10 Drug Groups							ANTIPSYCHOTICS			ANALGESICS - Narcotic		
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	
<b>All</b>	<b>362,113</b>	<b>\$45,957,806</b>	<b>7,869</b>	<b>5.5</b>	<b>82,165</b>	<b>0.6</b>	<b>\$161</b>	<b>23,741</b>	<b>16.5</b>	<b>214,747</b>	<b>0.4</b>	<b>\$32</b>	
<b>Female</b>													
All Females	214,514	23,097,574	4,050	5.0	41,647	0.6	145	16,483	20.2	146,253	0.4	30	
<b>Female, Disabled</b>													
All Ages	165,320	19,177,912	2,904	26.2	31,746	0.6	162	8,293	74.7	89,850	0.5	44	
5 and younger	2,045	799,065	5	0.8	60	0.7	155	56	9.0	628	0.1	1	
6-14	6,141	825,421	177	14.5	1,983	0.5	143	153	12.6	1,741	0.1	2	
15-20	5,396	783,620	166	19.9	1,849	0.6	151	272	32.6	2,972	0.2	3	
21-44	46,923	5,960,813	1,137	33.7	12,293	0.6	169	2,778	82.4	30,287	0.4	34	
45-64	104,524	10,777,529	1,417	28.2	15,537	0.6	160	5,018	99.8	54,060	0.6	53	
65-74	259	30,423	1	3.7	12	0.8	535	14	51.9	138	0.5	62	
75-84	32	1,041	1	50.0	12	0.1	18	2	100.0	24	0.4	10	
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	49,194	3,919,662	1,146	1.6	9,901	0.4	91	8,190	11.6	56,403	0.3	8	
5 and younger	2,978	648,962	23	0.1	252	0.5	87	196	1.0	1,737	0.1	1	
6-14	8,866	928,063	292	1.7	3,191	0.5	102	462	2.7	4,103	0.1	2	
15-20	7,331	667,352	246	2.5	2,353	0.4	106	1,316	13.6	10,235	0.2	2	
21-44	24,542	1,366,707	502	2.3	3,493	0.4	76	5,526	25.7	35,346	0.3	10	
45-64	4,591	261,522	71	4.4	496	0.4	59	633	39.4	4,456	0.4	15	
65-74	529	27,409	6	5.4	58	0.2	21	38	34.2	348	0.2	7	
75-84	294	17,169	6	9.2	58	0.7	68	17	26.2	163	0.2	1	
85 and older	63	2,478	0	0.0	0	0.0	0	2	8.0	15	0.3	4	
<b>Male</b>													
All Males	147,585	22,859,857	3,819	6.1	40,518	0.6	177	7,256	11.7	68,470	0.4	37	
<b>Male, Disabled</b>													
All Ages	112,598	18,198,247	2,696	24.2	29,315	0.7	196	4,781	43.0	50,397	0.5	48	
5 and younger	2,635	1,831,453	27	3.2	265	0.5	110	80	9.5	863	0.1	1	
6-14	12,652	2,358,632	493	21.5	5,415	0.5	153	215	9.4	2,428	0.1	1	
15-20	8,584	1,502,330	387	26.2	4,237	0.5	152	285	19.3	3,140	0.2	4	
21-44	33,309	5,975,162	1,072	36.6	11,680	0.8	239	1,325	45.3	13,791	0.4	43	
45-64	55,287	6,517,985	714	20.0	7,700	0.7	187	2,870	80.4	30,130	0.6	59	
65-74	131	12,685	3	16.7	18	0.2	101	6	33.3	45	0.7	21	
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, NEVADA, 2006

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANALGESICS - Narcotic				
	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	34,987	4,661,610	1,123	2.2	11,203	0.5	129	2,475	4.8	18,073	0.3	8
5 and younger	5,150	950,838	55	0.3	613	0.5	124	281	1.3	2,372	0.1	1
6-14	16,329	2,268,651	596	3.5	6,209	0.5	128	466	2.7	4,049	0.1	1
15-20	7,415	1,068,476	364	5.9	3,571	0.5	143	530	8.6	4,537	0.2	2
21-44	3,707	207,319	72	1.5	480	0.4	72	955	19.3	5,512	0.4	14
45-64	1,384	107,142	22	3.3	172	0.3	63	197	29.6	1,143	0.6	42
65-74	617	40,641	9	10.2	108	0.8	167	29	33.0	280	0.8	19
75-84	342	15,532	5	12.5	50	0.5	62	14	35.0	149	0.6	18
85 and older	43	3,011	0	0.0	0	0.0	0	3	30.0	31	0.4	7
<b>Unknown</b>	14	375	0	0.0	0	0.0	0	2	0.3	24	0.1	1

Source: Data for this table are from the MAX 2006 file for Nevada, 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, NEVADA, 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIASTHMATIC					ANTIVIRAL				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of	
				Rx per Month	Mean Rx \$ per Benefit Month				Rx per Month	Mean Rx \$ per Benefit Month				Rx per Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>7,509</b>	<b>5.2</b>	<b>76,955</b>	<b>0.7</b>	<b>\$79</b>	<b>17,342</b>	<b>12.0</b>	<b>158,231</b>	<b>0.4</b>	<b>\$27</b>	<b>1,707</b>	<b>1.2</b>	<b>16,290</b>	<b>0.5</b>	<b>\$219</b>
<b>Female</b>															
All Females	4,484	5.5	45,457	0.6	73	9,590	11.8	88,491	0.4	28	1,001	1.2	9,275	0.4	156
<b>Female, Disabled</b>															
All Ages	3,402	30.6	37,071	0.7	76	5,118	46.1	55,936	0.4	33	564	5.1	6,104	0.5	208
5 and younger	70	11.2	747	0.7	114	330	52.8	3,544	0.2	26	12	1.9	133	0.4	68
6-14	220	18.1	2,434	0.7	86	391	32.1	4,385	0.4	24	14	1.2	158	0.5	206
15-20	219	26.3	2,377	0.7	130	206	24.7	2,332	0.3	33	21	2.5	234	0.3	79
21-44	1,244	36.9	13,593	0.7	85	1,132	33.6	12,419	0.4	27	216	6.4	2,208	0.4	186
45-64	1,647	32.8	17,897	0.7	58	3,045	60.6	33,124	0.5	38	300	6.0	3,359	0.6	239
65-74	2	7.4	23	0.5	35	14	51.9	132	0.5	55	1	3.7	12	0.1	6
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>															
All Ages	1,082	1.5	8,386	0.5	61	4,472	6.4	32,555	0.3	18	437	0.6	3,171	0.3	55
5 and younger	38	0.2	350	0.4	39	1,248	6.1	9,082	0.2	15	34	0.2	292	0.1	4
6-14	144	0.9	1,451	0.5	82	1,089	6.5	8,315	0.3	19	52	0.3	468	0.3	106
15-20	160	1.7	1,510	0.5	78	543	5.6	4,392	0.3	14	71	0.7	598	0.3	102
21-44	631	2.9	4,292	0.5	52	1,348	6.3	8,802	0.3	18	259	1.2	1,617	0.3	38
45-64	92	5.7	638	0.5	48	205	12.8	1,571	0.5	31	17	1.1	149	0.2	9
65-74	11	9.9	82	0.6	57	20	18.0	206	0.3	15	3	2.7	35	0.1	2
75-84	5	7.7	51	0.7	32	17	26.2	179	0.5	31	1	1.5	12	0.1	17
85 and older	1	4.0	12	1.0	22	2	8.0	8	0.5	9	0	0.0	0	0.0	0
<b>Male</b>															
All Males	3,025	4.9	31,498	0.7	89	7,743	12.4	69,681	0.3	26	706	1.1	7,015	0.6	302
<b>Male, Disabled</b>															
All Ages	2,430	21.8	26,114	0.7	91	3,422	30.8	36,940	0.4	33	593	5.3	6,184	0.7	329
5 and younger	93	11.1	977	0.7	81	421	50.1	4,514	0.3	23	6	0.7	67	0.3	33
6-14	349	15.2	3,851	0.7	100	775	33.8	8,654	0.3	26	27	1.2	297	0.5	106
15-20	278	18.8	3,107	0.8	165	289	19.5	3,246	0.3	23	12	0.8	136	0.6	158
21-44	851	29.1	9,193	0.8	103	501	17.1	5,415	0.4	42	249	8.5	2,430	0.7	331
45-64	855	24.0	8,959	0.7	52	1,428	40.0	15,057	0.5	39	299	8.4	3,254	0.7	361
65-74	4	22.2	27	0.6	43	8	44.4	54	0.6	57	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, NEVADA, 2006

Beneficiary Characteristics	ANTICONVULSANT						ANTIASTHMATIC					ANTIVIRAL			
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month	
				Rx per Month	Mean Rx \$ per Benefit Month				Rx per Month	Mean Rx \$ per Benefit Month				Rx per Month	Mean Rx \$ per Benefit Month
<b>Male, Other Eligibles</b>															
All Ages	595	1.2	5,384	0.5	76	4,321	8.5	32,741	0.3	18	113	0.2	831	0.3	105
5 and younger	60	0.3	551	0.4	40	2,109	9.6	15,312	0.2	16	30	0.1	191	0.2	9
6-14	235	1.4	2,392	0.6	76	1,537	8.9	12,474	0.3	20	27	0.2	220	0.4	75
15-20	145	2.3	1,441	0.5	117	399	6.4	3,291	0.3	19	22	0.4	236	0.3	220
21-44	111	2.2	602	0.4	35	200	4.0	1,079	0.3	18	28	0.6	133	0.3	90
45-64	29	4.4	241	0.5	56	39	5.9	228	0.4	23	4	0.6	27	0.6	196
65-74	11	12.5	116	0.4	10	23	26.1	219	0.2	13	2	2.3	24	0.1	7
75-84	4	10.0	41	0.5	53	7	17.5	69	0.2	13	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	7	70.0	69	0.4	33	0	0.0	0	0.0	0
<b>Unknown</b>	0	0.0	0	0.0	0	9	1.6	59	0.2	6	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Nevada, 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, NEVADA, 2006

Beneficiary Characteristics	MISC. HEMATOLOGICAL					ANTIDEPRESSANTS					PASSIVE IMMUNIZING AGENTS				
	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>823</b>	<b>0.6</b>	<b>8,255</b>	<b>0.6</b>	<b>\$337</b>	<b>10,449</b>	<b>7.2</b>	<b>103,950</b>	<b>0.5</b>	<b>\$26</b>	<b>414</b>	<b>0.3</b>	<b>3,374</b>	<b>0.5</b>	<b>\$732</b>
<b>Female</b>															
All Females	446	0.5	4,527	0.6	78	7,408	9.1	72,475	0.5	26	205	0.3	1,741	0.5	787
<b>Female, Disabled</b>															
All Ages	400	3.6	4,197	0.6	80	4,743	42.7	51,544	0.6	30	95	0.9	959	0.5	945
5 and younger	0	0.0	0	0.0	0	3	0.5	36	0.4	4	89	14.2	887	0.5	677
6-14	1	0.1	12	0.3	3,244	89	7.3	1,012	0.4	15	1	0.1	12	0.3	432
15-20	1	0.1	12	0.1	427	145	17.4	1,587	0.4	22	0	0.0	0	0.0	0
21-44	47	1.4	486	0.4	38	1,566	46.4	16,998	0.5	29	3	0.1	36	1.1	5,881
45-64	347	6.9	3,652	0.7	74	2,931	58.3	31,815	0.6	31	2	0.0	24	2.4	3,720
65-74	4	14.8	35	0.6	76	7	25.9	72	0.6	42	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	2	100.0	24	0.4	18	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	46	0.1	330	0.5	56	2,665	3.8	20,931	0.4	18	110	0.2	782	0.4	593
5 and younger	0	0.0	0	0.0	0	12	0.1	122	0.4	10	101	0.5	750	0.4	617
6-14	0	0.0	0	0.0	0	223	1.3	2,386	0.4	16	0	0.0	0	0.0	0
15-20	1	0.0	3	0.3	43	412	4.3	3,952	0.4	17	1	0.0	3	0.7	72
21-44	15	0.1	101	0.4	55	1,716	8.0	12,281	0.4	18	8	0.0	29	0.3	44
45-64	15	0.9	84	0.5	46	286	17.8	2,035	0.5	23	0	0.0	0	0.0	0
65-74	7	6.3	64	0.7	64	8	7.2	74	0.5	19	0	0.0	0	0.0	0
75-84	6	9.2	69	0.5	56	6	9.2	57	0.1	2	0	0.0	0	0.0	0
85 and older	2	8.0	9	0.8	100	2	8.0	24	1.0	35	0	0.0	0	0.0	0
<b>Male</b>															
All Males	377	0.6	3,728	0.6	652	3,041	4.9	31,475	0.5	26	209	0.3	1,633	0.5	672
<b>Male, Disabled</b>															
All Ages	333	3.0	3,457	0.6	561	2,247	20.2	24,262	0.6	29	93	0.8	870	0.5	727
5 and younger	2	0.2	18	0.9	59,041	7	0.8	79	0.4	21	89	10.6	823	0.5	653
6-14	4	0.2	48	0.5	10,163	147	6.4	1,690	0.4	16	2	0.1	23	0.6	884
15-20	2	0.1	24	0.1	8	180	12.2	2,037	0.5	26	1	0.1	12	1.0	461
21-44	32	1.1	310	0.5	527	794	27.1	8,562	0.6	36	0	0.0	0	0.0	0
45-64	290	8.1	3,026	0.6	73	1,116	31.3	11,876	0.6	27	1	0.0	12	0.8	5,786
65-74	3	16.7	31	0.7	88	3	16.7	18	0.7	14	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, NEVADA, 2006

Beneficiary Characteristics	MISC. HEMATOLOGICAL					ANTIDEPRESSANTS					PASSIVE IMMUNIZING AGENTS				
	Number of Users	Users as %	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as %	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as %	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month	
		Benes		Month	Month		Month		Month	Benes		Month		Month	Month
<b>Male, Other Eligibles</b>															
All Ages	44	0.1	271	0.5	1,812	794	1.6	7,213	0.4	17	116	0.2	763	0.5	610
5 and younger	1	0.0	12	0.9	9,452	20	0.1	231	0.4	30	116	0.5	763	0.5	610
6-14	2	0.0	15	0.9	24,382	267	1.6	2,692	0.4	15	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	280	4.5	2,745	0.4	17	0	0.0	0	0.0	0
21-44	13	0.3	51	0.4	41	159	3.2	994	0.4	18	0	0.0	0	0.0	0
45-64	13	2.0	47	0.4	47	46	6.9	328	0.5	19	0	0.0	0	0.0	0
65-74	9	10.2	97	0.5	45	13	14.8	127	0.4	16	0	0.0	0	0.0	0
75-84	5	12.5	42	0.6	63	9	22.5	96	1.0	27	0	0.0	0	0.0	0
85 and older	1	10.0	7	0.6	74	0	0.0	0	0.0	0	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 Nevada, 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>.  
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Medicaid Beneficiaries

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

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIDIABETIC						
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per 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 Month	Mean Rx \$ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
<b>All</b>	<b>3,072</b>	<b>2.1</b>	<b>32,116</b>	<b>0.6</b>	<b>\$62</b>	<b>4,721</b>	<b>3.3</b>	<b>45,003</b>	<b>0.6</b>	<b>\$43</b>	<b>144,307</b>	<b>737,301</b>
<b>Female</b>												
All Females	908	1.1	9,575	0.6	65	3,158	3.9	30,119	0.6	41	81,499	405,173
<b>Female, Disabled</b>												
All Ages	358	3.2	4,016	0.6	73	2,440	22.0	26,159	0.6	42	11,105	108,446
5 and younger	11	1.8	122	0.5	19	0	0.0	0	0.0	0	625	5,792
6-14	149	12.2	1,624	0.6	68	18	1.5	215	1.0	97	1,217	12,252
15-20	61	7.3	700	0.5	56	24	2.9	269	0.7	47	834	8,288
21-44	75	2.2	844	0.5	89	410	12.2	4,496	0.6	37	3,373	33,068
45-64	62	1.2	726	0.5	93	1,976	39.3	21,084	0.6	43	5,027	48,835
65-74	0	0.0	0	0.0	0	10	37.0	71	0.5	24	27	187
75-84	0	0.0	0	0.0	0	2	100.0	24	0.5	7	2	24
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	550	0.8	5,559	0.6	59	718	1.0	3,960	0.6	37	70,394	296,727
5 and younger	16	0.1	167	0.4	49	4	0.0	23	1.1	77	20,610	85,500
6-14	367	2.2	3,756	0.6	58	39	0.2	258	0.7	75	16,830	79,634
15-20	103	1.1	1,100	0.6	62	45	0.5	329	0.7	68	9,671	43,756
21-44	55	0.3	445	0.4	62	412	1.9	1,973	0.5	32	21,476	79,255
45-64	9	0.6	91	0.5	64	157	9.8	773	0.7	35	1,606	7,084
65-74	0	0.0	0	0.0	0	47	42.3	456	0.5	23	111	849
75-84	0	0.0	0	0.0	0	11	16.9	124	0.5	13	65	506
85 and older	0	0.0	0	0.0	0	3	12.0	24	0.5	14	25	143
<b>Male</b>												
All Males	2,164	3.5	22,541	0.6	61	1,563	2.5	14,884	0.7	45	62,228	330,734
<b>Male, Disabled</b>												
All Ages	832	7.5	9,124	0.5	63	1,285	11.5	13,221	0.7	43	11,126	104,878
5 and younger	28	3.3	287	0.4	29	3	0.4	36	0.8	131	841	7,780
6-14	527	23.0	5,772	0.5	58	18	0.8	205	0.6	84	2,292	23,135
15-20	196	13.3	2,161	0.5	75	27	1.8	290	0.7	70	1,479	14,466
21-44	57	1.9	646	0.6	68	217	7.4	2,214	0.7	46	2,927	27,613
45-64	24	0.7	258	0.7	101	1,018	28.5	10,452	0.7	41	3,569	31,800
65-74	0	0.0	0	0.0	0	2	11.1	24	0.6	113	18	84
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, b, c</sup>  
 NONDUAL BENEFICIARIES, NEVADA, 2006

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS						ANTIDIABETIC					
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Mean Rx \$ Benefit per Benefit Month		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	1,332	2.6	13,417	0.6	61	278	0.5	1,663	0.7	55	51,102	225,856
5 and younger	52	0.2	577	0.4	33	8	0.0	38	0.5	50	21,946	90,489
6-14	993	5.8	9,976	0.6	59	36	0.2	221	0.8	79	17,210	82,336
15-20	271	4.4	2,785	0.5	71	32	0.5	273	0.9	96	6,196	32,185
21-44	15	0.3	67	0.4	48	107	2.2	515	0.6	43	4,947	17,375
45-64	1	0.2	12	0.1	9	70	10.5	353	0.7	43	665	2,412
65-74	0	0.0	0	0.0	0	19	21.6	196	0.5	34	88	657
75-84	0	0.0	0	0.0	0	6	15.0	67	0.9	22	40	334
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	10	68
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	580	1,394

Source: Data for this table are from the MAX 2006 file for Nevada, 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, NEVADA, 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>\$578</b>	<b>9.6</b>	<b>290</b>	<b>2,802</b>
<b>Age</b>				
0-64	603	9.9	262	2,572
65-74	407	7.4	13	101
75-84	261	4.2	8	66
85 and older	174	4.7	7	63
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	623	10.4	128	1,272
Male	541	8.9	162	1,530
Unknown	0	0.0	0	0
<b>Race</b>				
White	558	9.3	218	2,043
African American	589	10.4	40	453
Other/unknown	699	10.3	32	306
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	305	5.8	27	227
Disabled	602	9.9	262	2,563
Adults	0	0.0	0	0
Children	743	6.7	1	12
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2006 file for Nevada, 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 390 beneficiaries who were in nursing facilities for part of their enrollment and their 3,828 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, NEVADA, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	1.2	0.5	0.0	0.7	\$164	\$135	\$1	\$29	\$139	\$259	\$86	\$44	2,152	\$298,070	176	60.7	1,813
Biologicals	0.1	0.0	0.0	0.1	4	0	0	4	33	0	0	33	6	198	6	2.1	55
Antineoplastic Agents	0.9	0.1	0.0	0.8	68	29	0	39	76	324	0	49	142	10,759	16	5.5	158
Endocrine/Metabolic Drugs	1.2	0.4	0.1	0.7	52	40	3	9	42	94	26	13	1,471	62,133	117	40.3	1,194
Cardiovascular Agents	2.3	0.4	0.2	1.7	75	28	21	26	33	70	125	15	3,811	126,547	170	58.6	1,680
Respiratory Agents	1.3	0.5	0.0	0.8	61	48	0	12	47	98	33	16	1,441	68,067	110	37.9	1,125
Gastrointestinal Agents	1.4	0.2	0.0	1.1	48	25	4	18	34	105	111	16	2,456	83,972	175	60.3	1,762
Genitourinary Agents	0.7	0.3	0.1	0.3	46	25	14	7	69	89	130	25	365	25,117	54	18.6	544
CNS Drugs	2.1	0.8	0.1	1.2	173	143	5	25	82	172	71	21	4,535	370,886	214	73.8	2,144
Stimulants/Anti-obesity/Anorexia	0.3	0.0	0.0	0.3	3	0	0	3	9	0	0	9	2	18	2	0.7	6
Miscellaneous Psychological/Neurological Agents	1.1	1.1	0.0	0.0	161	160	0	0	148	150	0	23	416	61,742	35	12.1	384
Analgesics and Anesthetics	1.9	0.2	0.0	1.7	75	24	3	47	38	108	104	28	3,048	117,184	162	55.9	1,569
Neuromuscular Agents	1.9	0.5	0.0	1.4	123	75	0	47	64	154	0	33	3,398	216,702	171	59.0	1,765
Nutritional Products	0.8	0.0	0.0	0.8	12	1	0	11	15	42	8	14	592	8,839	73	25.2	751
Hematological Agents	1.7	0.3	0.0	1.3	101	82	0	19	60	247	0	14	2,028	122,227	125	43.1	1,213
Topical Products	0.5	0.2	0.1	0.3	25	12	7	6	48	76	66	23	865	41,437	150	51.7	1,628
Miscellaneous Products	0.4	0.1	0.0	0.4	16	14	0	3	37	179	0	8	115	4,300	27	9.3	261
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	14	0	0	0	80	0	0	0	25	2,007	14	4.8	141
<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>26,868</b>	<b>1,620,205</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 Nevada, 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 390 beneficiaries who were in nursing facilities for part of their enrollment and their 3,828 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 Nevada, 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</sup>, b, c, d  
 NONDUAL BENEFICIARIES, NEVADA, 2006

Top 10 Drug Groups in Nursing Facilities	Users				Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
ANTIPSYCHOTICS	\$273,633	126	43.4	1,364	1.0	\$203	\$201	
ANTICONVULSANT	193,715	201	69.3	2,097	1.2	74	92	
MISC. ANTI-INFECTIVES	164,209	149	51.4	1,603	0.5	214	102	
ANALGESICS - Narcotic	104,146	201	69.3	1,979	1.4	37	53	
ANTICOAGULANTS	79,942	94	32.4	928	1.7	52	86	
ANTIDEPRESSANTS	75,167	179	61.7	1,868	0.9	44	40	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	61,780	43	14.8	488	0.9	148	127	
ANTHYPERLIPIDEMIC	60,202	85	29.3	940	0.7	88	64	
ANTIASTHMATIC	57,477	149	51.4	1,533	0.7	51	37	
ANTIVIRAL	53,283	18	6.2	202	0.9	279	264	
<b>Total</b>	<b>1,123,554</b>	<b>1,245</b>	<b>n.a.</b>	<b>13,002</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 Nevada, 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 390 beneficiaries who were in nursing facilities for part of their enrollment and their 3,828 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, NEVADA, 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>13,181</b>	<b>\$1,123,554</b>	<b>126</b>	<b>43.4</b>	<b>1,364</b>	<b>1.0</b>	<b>\$201</b>	<b>201</b>	<b>69.3</b>	<b>2,097</b>	<b>1.2</b>	<b>\$92</b>
<b>Female</b>												
All Females	6,372	544,613	45	35.2	517	1.0	233	90	70.3	939	1.4	89
<b>Female, Disabled</b>												
All Ages	6,206	532,909	45	39.1	517	1.0	233	88	76.5	925	1.4	90
64 or younger	6,206	532,909	45	39.1	517	1.0	233	88	76.5	925	1.4	90
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	166	11,704	0	0.0	0	0.0	0	2	15.4	14	1.1	23
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	24	633	0	0.0	0	0.0	0	1	33.3	2	2.0	27
75-84	40	6,559	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	102	4,512	0	0.0	0	0.0	0	1	20.0	12	1.0	22
<b>Male</b>												
All Males	6,809	578,941	81	50.0	847	1.0	181	111	68.5	1,158	1.2	95
<b>Male, Disabled</b>												
All Ages	6,280	538,313	74	50.3	768	1.0	180	103	70.1	1,067	1.2	94
64 or younger	6,278	538,277	74	50.7	768	1.0	180	102	69.9	1,064	1.2	95
65-74	2	36	0	0.0	0	0.0	0	1	100.0	3	0.7	12
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	529	40,628	7	46.7	79	1.0	189	8	53.3	91	1.1	104
64 or younger	66	8,622	0	0.0	0	0.0	0	3	300.0	36	1.8	239
65-74	342	25,593	5	55.6	60	1.0	203	4	44.4	48	0.6	8
75-84	121	6,413	2	66.7	19	0.9	144	1	33.3	7	1.0	64
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Unknown</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>

Source: Data for this table are from the MAX 2006 file for Nevada, 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 390 beneficiaries who were in nursing facilities for part of their enrollment and their 3,828 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, NEVADA, 2006

Beneficiary Characteristics	MISC. ANTI-INFECTIVES					ANALGESICS - Narcotic					ANTICOAGULANTS				
	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>149</b>	<b>51.4</b>	<b>1,603</b>	<b>0.5</b>	<b>\$102</b>	<b>201</b>	<b>69.3</b>	<b>1,979</b>	<b>1.4</b>	<b>\$53</b>	<b>94</b>	<b>32.4</b>	<b>928</b>	<b>1.7</b>	<b>\$86</b>
<b>Female</b>															
All Females	71	55.5	759	0.5	100	91	71.1	911	1.5	54	40	31.3	405	1.8	102
<b>Female, Disabled</b>															
All Ages	69	60.0	735	0.5	96	85	73.9	874	1.6	56	36	31.3	369	1.8	111
64 or younger	69	60.0	735	0.5	96	85	73.9	874	1.6	56	36	31.3	369	1.8	111
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	2	15.4	24	0.6	219	6	46.2	37	0.7	15	4	30.8	36	1.2	11
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	2	66.7	4	3.5	116	0	0.0	0	0.0	0
75-84	1	20.0	12	1.1	438	2	40.0	18	0.4	1	3	60.0	24	0.1	4
85 and older	1	20.0	12	0.1	1	2	40.0	15	0.3	4	1	20.0	12	3.3	27
<b>Male</b>															
All Males	78	48.1	844	0.5	104	110	67.9	1,068	1.3	51	54	33.3	523	1.6	74
<b>Male, Disabled</b>															
All Ages	73	49.7	784	0.5	111	102	69.4	982	1.2	52	48	32.7	462	1.7	81
64 or younger	73	50.0	784	0.5	111	102	69.9	982	1.2	52	48	32.9	462	1.7	81
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>Male, Other Eligibles</b>															
All Ages	5	33.3	60	0.1	15	8	53.3	86	2.1	40	6	40.0	61	0.7	20
64 or younger	0	0.0	0	0.0	0	1	100.0	12	0.2	1	0	0.0	0	0.0	0
65-74	4	44.4	48	0.1	18	5	55.6	50	2.7	61	4	44.4	37	0.7	7
75-84	1	33.3	12	0.1	1	2	66.7	24	1.8	16	2	66.7	24	0.6	41
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>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 Nevada, 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 390 beneficiaries who were in nursing facilities for part of their enrollment and their 3,828 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, NEVADA, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIHYPERLIPIDEMIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	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>179</b>	<b>61.7</b>	<b>1,868</b>	<b>0.9</b>	<b>\$40</b>	<b>43</b>	<b>14.8</b>	<b>488</b>	<b>0.9</b>	<b>\$127</b>	<b>85</b>	<b>29.3</b>	<b>940</b>	<b>0.7</b>	<b>\$64</b>
<b>Female</b>															
All Females	90	70.3	946	0.9	47	21	16.4	240	0.9	141	37	28.9	430	0.8	63
<b>Female, Disabled</b>															
All Ages	87	75.7	920	0.9	47	20	17.4	228	0.9	141	35	30.4	406	0.8	63
64 or younger	87	75.7	920	0.9	47	20	17.4	228	0.9	141	35	30.4	406	0.8	63
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	3	23.1	26	1.1	33	1	7.7	12	1.0	145	2	15.4	24	0.5	58
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	1	33.3	2	2.5	13	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	1	20.0	12	0.3	9
85 and older	2	40.0	24	1.0	35	1	20.0	12	1.0	145	1	20.0	12	0.8	107
<b>Male</b>															
All Males	89	54.9	922	0.9	33	22	13.6	248	0.9	113	48	29.6	510	0.7	65
<b>Male, Disabled</b>															
All Ages	84	57.1	862	0.9	34	16	10.9	176	0.9	117	47	32.0	498	0.7	66
64 or younger	84	57.5	862	0.9	34	16	11.0	176	0.9	117	47	32.2	498	0.7	66
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>Male, Other Eligibles</b>															
All Ages	5	33.3	60	0.9	31	6	40.0	72	0.7	104	1	6.7	12	0.3	28
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	3	33.3	36	0.7	36	4	44.4	48	0.9	129	1	11.1	12	0.3	28
75-84	2	66.7	24	1.1	23	2	66.7	24	0.4	52	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>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 Nevada, 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 390 beneficiaries who were in nursing facilities for part of their enrollment and their 3,828 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, NEVADA, 2006

Beneficiary Characteristics	ANTIASTHMATIC						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>149</b>	<b>51.4</b>	<b>1,533</b>	<b>0.7</b>	<b>\$38</b>	<b>18</b>	<b>6.2</b>	<b>202</b>	<b>0.9</b>	<b>\$264</b>	<b>290</b>	<b>2,802</b>
<b>Female</b>												
All Females	67	52.3	693	0.8	40	13	10.2	142	1.0	287	128	1,272
<b>Female, Disabled</b>												
All Ages	63	54.8	655	0.8	40	13	11.3	142	1.0	287	115	1,160
64 or younger	63	54.8	655	0.8	40	13	11.3	142	1.0	287	115	1,160
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	4	30.8	38	0.4	31	0	0.0	0	0.0	0	13	112
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	1	33.3	2	0.5	44	0	0.0	0	0.0	0	3	17
75-84	3	60.0	36	0.4	30	0	0.0	0	0.0	0	5	44
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	51
<b>Male</b>												
All Males	82	50.6	840	0.7	36	5	3.1	60	0.8	210	162	1,530
<b>Male, Disabled</b>												
All Ages	76	51.7	768	0.8	38	5	3.4	60	0.8	210	147	1,403
64 or younger	76	52.1	768	0.8	38	5	3.4	60	0.8	210	146	1,400
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	3
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	6	40.0	72	0.3	15	0	0.0	0	0.0	0	15	127
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
65-74	4	44.4	48	0.3	21	0	0.0	0	0.0	0	9	81
75-84	2	66.7	24	0.2	2	0	0.0	0	0.0	0	3	22
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	12
<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 Nevada, 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 390 beneficiaries who were in nursing facilities for part of their enrollment and their 3,828 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>  
 NEVADA, 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>17,260</b>	<b>12.0</b>	<b>0.6</b>	<b>86,551</b>	<b>\$9</b>	<b>\$1,312,269</b>	<b>\$15</b>	<b>1.8</b>	<b>144,307</b>	
<b>Age</b>										
5 and younger	3,475	7.8	0.1	6,050	2	82,809	14	1.4	44,553	
6-14	2,638	7.0	0.2	6,157	3	106,893	17	1.2	37,551	
15-20	1,372	7.5	0.2	4,087	4	67,097	16	1.1	18,182	
21-44	4,736	14.5	0.8	25,027	12	391,594	16	2.0	32,725	
45-64	4,916	45.2	4.1	44,420	60	654,096	15	2.2	10,867	
65-74	80	32.8	2.2	529	28	6,881	13	2.3	244	
75-84	33	30.8	1.6	167	13	1,358	8	1.6	107	
85 and older	10	28.6	3.3	114	44	1,541	14	8.9	35	
Unknown	0	0.0	0.0	0	0	0	0	0.0	43	
<b>Basis of Eligibility<sup>c</sup></b>										
Aged	104	31.0	2.0	678	25	8,390	12	2.8	336	
Disabled	8,511	38.3	3.1	68,412	48	1,058,351	15	1.8	22,231	
Adults	2,820	9.0	0.2	7,504	3	108,272	14	2.8	31,490	
Children	5,762	6.4	0.1	9,643	1	133,748	14	1.5	90,076	
Unknown	63	36.2	1.8	314	20	3,508	11	1.5	174	
<b>Gender</b>										
Female	10,481	12.9	0.7	55,494	10	851,037	15	2.2	81,518	
Male	6,770	10.9	0.5	31,045	7	461,056	15	1.4	62,245	
Unknown	9	1.7	0.0	12	0	176	15	5.7	544	
<b>Race</b>										
White	10,405	16.4	0.9	58,655	14	895,425	15	1.9	63,391	
African American	2,670	9.3	0.5	13,579	7	201,246	15	1.7	28,769	
Other/unknown	4,185	8.0	0.3	14,317	4	215,598	15	1.6	52,147	
<b>Use of Nursing Facilities<sup>d</sup></b>										
Entire year	205	70.7	9.8	2,845	123	35,567	13	2.2	290	
Part year	327	83.8	9.5	3,723	129	50,135	13	2.6	390	
None	16,728	11.6	0.6	79,983	9	1,226,567	15	1.8	143,627	
<b>Maintenance Assistance Status</b>										
Cash	12,686	14.4	0.8	71,205	12	1,092,696	15	1.9	88,106	
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0	
Poverty related	1,570	5.4	0.1	2,488	1	34,733	14	2.3	29,241	
Other/unknown	3,004	11.1	0.5	12,858	7	184,840	14	1.6	26,960	

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

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



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

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
<b>All</b>	<b>0.1</b>	<b>\$2</b>	<b>\$15</b>	<b>\$0</b>	<b>\$1</b>	<b>737,301</b>
<b>Age</b>						
5 and younger	0.0	0	14	0	0	190,876
6-14	0.0	1	17	0	0	197,362
15-20	0.0	1	16	0	0	98,700
21-44	0.2	2	16	0	1	157,317
45-64	0.5	7	15	0	4	90,131
65-74	0.3	4	13	0	1	1,777
75-84	0.2	2	8	0	1	864
85 and older	0.5	7	14	0	3	211
Unknown	0.0	0	0	0	0	63
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.3	3	12	0	1	2,531
Disabled	0.3	5	15	0	2	213,324
Adults	0.1	1	14	0	0	116,315
Children	0.0	0	14	0	0	403,787
Unknown	0.2	3	11	0	2	1,344
<b>Gender</b>						
Female	0.1	2	15	0	1	405,199
Male	0.1	1	15	0	1	330,759
Unknown	0.0	0	15	0	0	1,343
<b>Race</b>						
White	0.2	2	15	0	1	382,004
African American	0.1	2	15	0	1	130,322
Other/unknown	0.1	1	15	0	0	224,975
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	1.0	13	13	1	7	2,802
Part year	1.0	13	13	0	6	3,828
None	0.1	2	15	0	1	730,671
<b>Maintenance Assistance Status</b>						
Cash	0.2	2	15	0	1	459,863
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	0	14	0	0	111,401
Other/unknown	0.1	1	14	0	0	166,037

Source: Data for this table are from the MAX 2006 file for Nevada, 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>  
 NEVADA, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$	Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
<b>All</b>	<b>22,765</b>	<b>\$58</b>	<b>\$1,312,269</b>	<b>100.0</b>	<b>86,551</b>	<b>\$15</b>	<b>100.0</b>
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	6	50	299	0.0	10	30	0.0
Drugs for cosmetic purposes	15	16	247	0.0	22	11	0.0
Cough and cold medications	7,431	35	256,847	19.6	12,063	21	13.9
Vitamins and minerals	2,389	86	204,728	15.6	9,069	23	10.5
Non-prescription drugs	5,844	33	192,833	14.7	21,057	9	24.3
Barbiturates	338	60	20,324	1.5	2,539	8	2.9
Benzodiazepines	6,218	90	558,760	42.6	40,223	14	46.5
Other Part D Excl Rx Drugs	524	149	78,231	6.0	1,568	50	1.8

Source: Data for this table are from the MAX 2006 file for Nevada, 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, NEVADA, 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>210,088</b>	<b>336</b>	<b>22,231</b>	<b>45,059</b>	<b>142,288</b>	<b>174</b>	<b>1,688,084</b>	<b>2,531</b>	<b>215,837</b>	<b>315,161</b>	<b>1,153,211</b>	<b>1,344</b>
<b>Age</b>												
5 and younger	69,553	0	1,466	0	68,087	0	542,640	0	14,509	0	528,131	0
6-14	57,825	0	3,509	0	54,316	0	502,392	0	36,313	0	466,079	0
15-20	25,962	0	2,313	3,960	19,686	3	209,489	0	22,880	28,499	158,099	11
21-44	44,276	0	6,300	37,840	111	25	325,366	0	61,038	263,543	658	127
45-64	12,008	4	8,596	3,253	13	142	105,202	18	80,802	23,073	131	1,178
65-74	246	194	45	3	0	4	1,795	1,476	271	20	0	28
75-84	108	103	2	3	0	0	876	826	24	26	0	0
85 and older	35	35	0	0	0	0	211	211	0	0	0	0
Unknown	75	0	0	0	75	0	113	0	0	0	113	0
<b>Gender</b>												
Female	118,661	200	11,105	37,039	70,143	174	949,374	1,481	109,730	265,062	571,757	1,344
Male	90,216	136	11,126	8,017	70,937	0	734,005	1,050	106,107	50,083	576,765	0
Unknown	1,211	0	0	3	1,208	0	4,705	0	0	16	4,689	0
<b>Race</b>												
White	85,075	133	12,435	21,574	50,812	121	684,640	973	119,687	150,612	412,437	931
African American	45,876	32	5,378	10,071	30,382	13	395,719	242	53,215	75,374	266,795	93
Other/unknown	79,137	171	4,418	13,414	61,094	40	607,725	1,316	42,935	89,175	473,979	320
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	290	27	262	0	1	0	2,802	227	2,563	0	12	0
Part year	390	21	358	7	4	0	3,854	182	3,569	55	48	0
None	209,408	288	21,611	45,052	142,283	174	1,681,428	2,122	209,705	315,106	1,153,151	1,344
<b>Maintenance Assistance Status</b>												
Cash	123,920	274	20,533	29,908	73,205	0	1,012,346	2,194	198,822	207,356	603,974	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	46,431	5	1	5,187	41,064	174	349,195	30	6	29,481	318,334	1,344
Other/unknown	39,737	57	1,697	9,964	28,019	0	326,543	307	17,009	78,324	230,903	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	74,804	336	21,694	13,007	39,593	174	548,046	2,531	209,930	66,465	267,776	1,344
FFS part year, with Rx claims	16,638	0	363	7,078	9,197	0	148,608	0	4,057	58,905	85,646	0
FFS part year, no Rx claims	52,865	0	174	11,405	41,286	0	459,517	0	1,850	91,774	365,893	0
MC all year, with Rx claims	21	0	0	7	14	0	161	0	0	61	100	0
MC all year, no Rx claims	65,760	0	0	13,562	52,198	0	531,752	0	0	97,956	433,796	0

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

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

APPENDIX TABLE A.2  
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS<sup>a</sup>  
 NONDUAL BENEFICIARIES, NEVADA, 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>210,088</b>	<b>1,688,084</b>	<b>144,307</b>	<b>737,301</b>	<b>0</b>	<b>950,783</b>
Fee-for-service (FFS) all year	74,804	548,046	74,804	548,046	0	0
FFS part year, with Rx claims	16,638	148,608	16,638	54,348	0	94,260
FFS part year, with no Rx claims	52,865	459,517	52,865	134,907	0	324,610
Managed care (MC) all year, with Rx claims	21	161	0	0	0	161
MC all year, with no Rx claims	65,760	531,752	0	0	0	531,752

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