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

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TABLE ND.2  
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
NONDUAL BENEFICIARIES, OKLAHOMA, 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>647,824</b>	<b>1,558</b>	<b>56,357</b>	<b>116,735</b>	<b>466,544</b>	<b>6,630</b>	<b>5,932,143</b>	<b>14,531</b>	<b>589,815</b>	<b>848,789</b>	<b>4,439,054</b>	<b>39,954</b>
<b>Age</b>												
5 and younger	191,722	0	2,875	0	188,847	0	1,759,170	0	30,141	0	1,729,029	0
6-14	203,239	0	7,742	20	195,477	0	2,037,883	0	85,582	111	1,952,190	0
15-20	100,225	0	5,692	12,431	81,650	452	906,885	0	61,187	87,905	754,648	3,145
21-44	120,332	2	17,058	98,808	568	3,896	925,182	13	177,496	719,809	3,164	24,700
45-64	30,598	15	22,842	5,470	2	2,269	287,107	107	233,993	40,929	23	12,055
65-74	1,038	874	147	4	0	13	9,991	8,511	1,404	22	0	54
75-84	456	454	1	1	0	0	4,289	4,276	12	1	0	0
85 and older	214	213	0	1	0	0	1,636	1,624	0	12	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	377,193	1,033	29,337	108,879	231,314	6,630	3,365,722	9,846	309,524	799,681	2,206,717	39,954
Male	270,631	525	27,020	7,856	235,230	0	2,566,421	4,685	280,291	49,108	2,232,337	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	378,660	789	38,010	76,191	258,923	4,747	3,436,237	7,099	397,097	558,486	2,444,936	28,619
African American	102,626	256	10,689	16,927	74,128	626	984,497	2,520	112,463	132,149	733,590	3,775
Other/unknown	166,538	513	7,658	23,617	133,493	1,257	1,511,409	4,912	80,255	158,154	1,260,528	7,560
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	1,314	249	1,055	5	4	1	13,215	2,416	10,716	33	48	2
Part year	900	94	791	11	2	2	8,778	839	7,816	81	24	18
None	645,610	1,215	54,511	116,719	466,538	6,627	5,910,150	11,276	571,283	848,675	4,438,982	39,934
<b>Maintenance Assistance Status</b>												
Cash	129,682	762	43,551	41,465	43,904	0	1,227,456	7,863	465,550	318,307	435,736	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	458,818	223	5,623	40,281	406,061	6,630	4,180,404	1,619	46,179	260,996	3,831,656	39,954
Other/unknown	59,324	573	7,183	34,989	16,579	0	524,283	5,049	78,086	269,486	171,662	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	647,824	1,558	56,357	116,735	466,544	6,630	5,932,143	14,531	589,815	848,789	4,439,054	39,954
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2006 file for Oklahoma, released by CMS in 7/2009. 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, OKLAHOMA, 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>61.2</b>	<b>6.3</b>	<b>\$452</b>	<b>\$72</b>	<b>\$3,023</b>	<b>15.0</b>		<b>647,824</b>
<b>Age</b>								
5 and younger	64.1	3.7	204	55	2,070	9.8		191,722
6-14	57.5	4.3	367	85	1,883	19.5		203,239
15-20	61.3	5.4	421	77	2,936	14.3		100,225
21-44	58.1	8.2	544	66	4,124	13.2		120,332
45-64	78.4	30.4	2,262	75	12,002	18.8		30,598
65-74	70.2	27.4	1,864	68	13,350	14.0		1,038
75-84	56.6	17.2	977	57	10,613	9.2		456
85 and older	47.7	13.8	589	43	11,386	5.2		214
Unknown	0.0	0.0	0	0	0	0.0		0
<b>Basis of Eligibility<sup>e</sup></b>								
Aged	62.6	23.1	1,445	63	12,772	11.3		1,558
Disabled	82.0	27.1	2,560	95	13,493	19.0		56,357
Adults	54.8	5.7	262	46	2,462	10.6		116,735
Children	60.3	3.9	244	62	1,854	13.1		466,544
Unknown	58.6	6.3	363	58	3,887	9.3		6,630
<b>Gender</b>								
Female	61.5	6.6	409	62	2,947	13.9		377,193
Male	60.7	5.9	512	87	3,129	16.4		270,631
Unknown	0.0	0.0	0	0	0	0.0		0
<b>Race</b>								
White	64.2	7.4	545	73	3,348	16.3		378,660
African American	55.8	5.5	395	72	2,859	13.8		102,626
Other/unknown	57.6	4.4	277	63	2,385	11.6		166,538
<b>Use of Nursing Facilities<sup>f</sup></b>								
Entire year	94.8	89.7	5,985	67	47,916	12.5		1,314
Part year	95.7	67.6	5,014	74	52,012	9.6		900
None	61.1	6.1	435	72	2,863	15.2		645,610
<b>Maintenance Assistance Status</b>								
Cash	71.4	12.7	1,050	83	4,656	22.6		129,682
Medically needy	0.0	0.0	0	0	0	0.0		0
Poverty related	60.8	4.0	236	59	1,954	12.1		458,818
Other/unknown	41.3	10.2	816	80	7,721	10.6		59,324

Source: Data for this table are from the MAX 2006 file for Oklahoma, released by CMS in 7/2009. 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, OKLAHOMA, 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>0.7</b>	<b>\$49</b>	<b>15.0</b>	<b>38.8</b>	<b>49.0</b>	<b>5.5</b>	<b>5.2</b>	<b>1.3</b>	<b>0.2</b>	<b>\$330</b>	<b>647,824</b>	<b>5,932,143</b>
<b>Age</b>												
5 and younger	0.4	22	9.8	35.9	59.2	3.5	1.2	0.1	0.0	226	191,722	1,759,170
6-14	0.4	37	19.5	42.5	50.4	4.1	2.7	0.3	0.0	188	203,239	2,037,883
15-20	0.6	47	14.3	38.7	51.0	6.0	3.7	0.6	0.1	325	100,225	906,885
21-44	1.1	71	13.2	41.9	37.1	9.0	9.8	2.0	0.2	536	120,332	925,182
45-64	3.2	241	18.8	21.6	18.1	11.9	32.1	14.1	2.3	1,279	30,598	287,107
65-74	2.9	194	14.0	29.8	18.3	11.2	27.4	10.3	3.1	1,387	1,038	9,991
75-84	1.8	104	9.2	43.4	24.1	6.8	16.4	7.5	1.8	1,128	456	4,289
85 and older	1.8	77	5.2	52.3	17.3	8.4	9.8	9.3	2.8	1,489	214	1,636
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	2.5	155	11.3	37.4	19.8	9.3	20.9	9.6	3.0	1,369	1,558	14,531
Disabled	2.6	245	19.0	18.0	29.7	12.7	27.1	10.8	1.8	1,289	56,357	589,815
Adults	0.8	36	10.6	45.2	38.6	8.1	7.2	1.0	0.0	339	116,735	848,789
Children	0.4	26	13.1	39.7	54.3	3.9	1.9	0.2	0.0	195	466,544	4,439,054
Unknown	1.0	60	9.3	41.4	35.0	10.6	11.3	1.6	0.0	645	6,630	39,954
<b>Gender</b>												
Female	0.7	46	13.9	38.5	48.3	5.8	5.7	1.5	0.2	330	377,193	3,365,722
Male	0.6	54	16.4	39.3	50.1	5.1	4.5	1.0	0.1	330	270,631	2,566,421
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	60	16.3	35.8	49.5	6.4	6.4	1.7	0.2	369	378,660	3,436,237
African American	0.6	41	13.8	44.2	45.7	5.0	4.1	0.9	0.1	298	102,626	984,497
Other/unknown	0.5	31	11.6	42.4	50.2	3.9	2.9	0.6	0.1	263	166,538	1,511,409
<b>Use of Nursing Facilities<sup>f</sup></b>												
Entire year	8.9	595	12.5	5.2	4.8	3.4	16.8	35.2	34.6	4,764	1,314	13,215
Part year	6.9	514	9.6	4.3	7.0	5.6	25.2	40.6	17.3	5,333	900	8,778
None	0.7	48	15.2	38.9	49.2	5.5	5.1	1.2	0.1	313	645,610	5,910,150
<b>Maintenance Assistance Status</b>												
Cash	1.3	111	22.6	28.6	42.3	10.1	15.2	3.7	0.1	492	129,682	1,227,456
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.4	26	12.1	39.2	53.9	4.4	2.3	0.3	0.0	215	458,818	4,180,404
Other/unknown	1.1	92	10.6	58.7	26.4	3.9	5.4	4.0	1.6	874	59,324	524,283

Source: Data for this table are from the MAX 2006 file for Oklahoma, released by CMS in 7/2009. 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, OKLAHOMA, 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>0.7</b>	<b>\$49</b>	<b>\$72</b>	<b>0.2</b>	<b>\$38</b>	<b>\$167</b>	<b>0.0</b>	<b>\$2</b>	<b>\$91</b>	<b>0.4</b>	<b>\$9</b>	<b>\$21</b>
<b>Age</b>												
5 and younger	0.4	22	55	0.1	16	125	0.0	1	48	0.3	5	18
6-14	0.4	37	85	0.2	30	158	0.0	1	75	0.2	5	23
15-20	0.6	47	77	0.2	37	187	0.0	2	109	0.4	7	19
21-44	1.1	71	66	0.3	51	183	0.0	4	123	0.8	16	21
45-64	3.2	241	75	0.9	176	186	0.1	12	129	2.2	53	24
65-74	2.9	194	68	0.9	147	160	0.1	10	109	1.8	37	20
75-84	1.8	104	57	0.6	75	132	0.1	7	104	1.2	21	18
85 and older	1.8	77	43	0.6	54	87	0.1	4	60	1.1	19	17
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	2.5	155	63	0.8	116	145	0.1	8	99	1.6	31	19
Disabled	2.6	245	95	0.9	193	226	0.1	10	125	1.7	41	25
Adults	0.8	36	46	0.2	23	129	0.0	3	125	0.6	10	17
Children	0.4	26	62	0.2	20	130	0.0	1	62	0.2	5	20
Unknown	1.0	60	58	0.3	41	160	0.0	4	132	0.8	15	20
<b>Gender</b>												
Female	0.7	46	62	0.2	33	150	0.0	3	97	0.5	10	21
Male	0.6	54	87	0.2	44	188	0.0	2	82	0.4	8	23
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	0.8	60	73	0.3	46	167	0.0	3	94	0.5	11	22
African American	0.6	41	72	0.2	32	178	0.0	2	95	0.4	8	20
Other/unknown	0.5	31	63	0.1	23	155	0.0	2	77	0.3	6	20
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	8.9	595	67	2.7	439	161	0.3	26	82	5.9	129	22
Part year	6.9	514	74	1.9	365	190	0.2	17	87	4.8	131	27
None	0.7	48	72	0.2	36	166	0.0	2	91	0.4	9	21
<b>Maintenance Assistance Status</b>												
Cash	1.3	111	83	0.4	87	205	0.0	5	118	0.9	19	22
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.4	26	59	0.1	19	130	0.0	1	71	0.3	5	19
Other/unknown	1.1	92	80	0.4	70	178	0.0	4	102	0.7	19	26

Source: Data for this table are from the MAX 2006 file for Oklahoma, released by CMS in 7/2009. 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 Oklahoma, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

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

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

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

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users <sup>e</sup>				
	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	Total	Patented	Off-Patent	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
		Brand-Name	Brand-Name			Brand-Name	Brand-Name			Brand-Name	Brand-Name						
Anti-infective Agents	0.2	0.0	0.0	0.2	\$10	\$5	\$1	\$4	\$42	\$161	\$49	\$22	701,921	\$29,724,862	277,082	42.8	2,898,491
Biologicals	0.3	0.3	0.0	0.0	398	394	2	2	1230	1,236	2,811	452	6,484	7,977,820	2,079	0.3	20,059
Antineoplastic Agents	0.5	0.2	0.0	0.3	146	130	0	16	303	732	152	51	8,865	2,689,991	1,755	0.3	18,451
Endocrine/Metabolic Drugs	0.3	0.1	0.0	0.2	20	14	1	6	63	133	68	28	322,623	20,447,021	98,417	15.2	1,022,305
Cardiovascular Agents	0.8	0.2	0.0	0.5	35	24	3	9	46	118	136	16	300,059	13,814,110	37,452	5.8	390,228
Respiratory Agents	0.4	0.2	0.0	0.2	29	25	0	3	72	105	77	22	585,588	41,990,812	137,277	21.2	1,458,288
Gastrointestinal Agents	0.4	0.1	0.0	0.2	27	20	3	4	75	145	294	19	201,586	15,077,253	53,324	8.2	554,081
Genitourinary Agents	0.2	0.1	0.0	0.1	10	6	1	3	49	103	109	22	45,084	2,221,277	21,973	3.4	216,845
CNS Drugs	0.7	0.3	0.0	0.4	82	69	5	7	113	226	118	20	549,148	61,900,715	72,994	11.3	756,121
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.2	58	53	1	4	89	115	279	24	160,238	14,285,033	22,617	3.5	247,793
Miscellaneous Psychological/ Neurological Agents	0.3	0.2	0.0	0.0	76	70	0	7	298	336	153	136	8,109	2,417,151	3,025	0.5	31,675
Analgesics and Anesthetics	0.4	0.0	0.0	0.4	13	5	0	7	34	239	170	20	529,881	17,847,869	135,395	20.9	1,367,760
Neuromuscular Agents	0.6	0.2	0.0	0.4	50	40	1	9	85	187	81	25	251,585	21,444,810	40,835	6.3	426,665
Nutritional Products	0.3	0.1	0.0	0.2	8	5	0	3	30	57	33	17	74,711	2,244,213	30,617	4.7	284,195
Hematological Agents	0.5	0.2	0.0	0.3	379	371	0	8	809	2,056	100	27	27,036	21,878,853	5,553	0.9	57,680
Topical Products	0.2	0.1	0.0	0.1	9	6	0	2	44	92	55	18	298,200	13,119,236	141,027	21.8	1,507,261
Miscellaneous Products	0.1	0.1	0.0	0.0	23	21	1	1	167	173	661	65	21,244	3,550,835	13,798	2.1	152,053
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	8	0	0	0	54	0	0	0	7,433	400,098	4,608	0.7	50,204
<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>4,099,795</b>	<b>293,031,959</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 Oklahoma, released by CMS in 7/2009. 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 Oklahoma, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.  
 For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.  
 e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2006.  
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE ND.7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, OKLAHOMA, 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	\$44,116,513	29,390	4.5	322,011	0.5	\$272	\$137	
ANTIASTHMATIC	33,694,989	145,363	22.4	1,569,817	0.3	79	21	
ANTICONVULSANT	19,062,747	26,150	4.0	281,823	0.6	117	68	
MISC. HEMATOLOGICAL	18,019,220	1,989	0.3	21,856	0.5	1,782	824	
ANTIDEPRESSANTS	14,469,894	58,562	9.0	609,007	0.4	60	24	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	14,285,095	26,457	4.1	291,815	0.5	89	49	
ANALGESICS - Narcotic	10,680,392	157,540	24.3	1,601,344	0.2	27	7	
ULCER DRUGS	10,299,030	45,737	7.1	479,375	0.3	72	21	
DERMATOLOGICAL	8,473,360	107,549	16.6	1,173,634	0.1	49	7	
ANTIDIABETIC	7,993,931	17,664	2.7	185,711	0.5	83	43	
<b>Total</b>	<b>181,095,171</b>	<b>616,401</b>	<b>n.a.</b>	<b>6,536,393</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 Oklahoma, released by CMS in 7/2009. 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, OKLAHOMA, 2006

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIASTHMATIC			
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months 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>1,967,327</b>	<b>\$181,095,171</b>	<b>29,390</b>	<b>4.5</b>	<b>322,011</b>	<b>0.5</b>	<b>\$137</b>	<b>145,363</b>	<b>22.4</b>	<b>1,569,817</b>	<b>0.3</b>	<b>\$22</b>
<b>Female</b>												
All Females	1,131,988	86,255,337	15,145	4.0	163,628	0.5	123	72,516	19.2	775,754	0.3	21
<b>Female, Disabled</b>												
All Ages	478,203	46,097,836	8,068	27.5	91,054	0.5	156	13,162	44.9	148,391	0.4	31
5 and younger	6,732	613,612	16	1.3	192	0.3	72	733	59.3	8,320	0.4	36
6-14	25,009	2,837,613	488	18.0	5,598	0.6	135	1,102	40.6	12,615	0.4	35
15-20	22,463	2,663,364	570	25.1	6,548	0.6	149	698	30.7	8,051	0.3	28
21-44	138,375	14,154,479	3,218	34.2	35,981	0.5	145	3,234	34.3	36,397	0.3	24
45-64	284,651	25,738,603	3,765	27.6	42,616	0.6	170	7,366	54.1	82,691	0.4	34
65-74	973	90,165	11	13.6	119	0.7	153	29	35.8	317	0.4	39
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	653,785	40,157,501	7,077	2.0	72,574	0.4	80	59,354	17.1	627,363	0.2	18
5 and younger	97,682	5,748,433	110	0.1	1,240	0.4	56	21,028	22.8	226,967	0.2	16
6-14	165,099	12,927,147	1,855	1.9	20,819	0.4	101	20,106	20.9	223,269	0.3	21
15-20	115,880	7,405,076	1,773	3.2	19,061	0.3	81	8,250	15.0	86,969	0.3	17
21-44	231,560	11,185,136	2,861	3.0	27,056	0.3	62	8,686	9.0	78,235	0.2	14
45-64	33,318	2,134,724	354	5.5	3,108	0.3	70	1,055	16.3	9,448	0.3	25
65-74	7,573	598,573	82	14.1	893	0.8	194	172	29.6	1,881	0.4	42
75-84	1,847	111,718	22	7.6	205	0.8	132	41	14.2	429	0.2	13
85 and older	826	46,694	20	12.0	192	0.7	83	16	9.6	165	0.2	19
<b>Male</b>												
All Males	835,339	94,839,834	14,245	5.3	158,383	0.6	152	72,847	26.9	794,063	0.3	22
<b>Male, Disabled</b>												
All Ages	338,137	49,399,208	7,652	28.3	85,995	0.6	185	9,146	33.8	102,519	0.4	34
5 and younger	9,949	1,225,306	63	3.8	737	0.5	100	1,170	71.4	13,361	0.3	30
6-14	57,704	11,216,707	1,605	31.9	18,426	0.6	147	2,258	44.9	25,944	0.4	36
15-20	36,524	10,744,176	1,156	33.8	13,146	0.6	177	1,024	29.9	11,765	0.4	29
21-44	93,325	12,743,286	2,825	37.0	31,328	0.6	197	1,373	18.0	15,376	0.4	25
45-64	140,124	13,433,196	2,000	21.7	22,322	0.6	205	3,294	35.7	35,833	0.4	39
65-74	500	36,290	3	4.5	36	0.6	155	27	40.9	240	0.5	49
75-84	11	247	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, OKLAHOMA, 2006

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS					ANTIASTHMATIC				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months 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	497,202	45,440,626	6,593	2.7	72,388	0.5	113	63,701	26.1	691,544	0.3	21	
5 and younger	127,001	8,840,887	316	0.3	3,595	0.4	78	29,652	30.7	319,741	0.2	18	
6-14	256,096	26,922,955	4,044	4.1	45,477	0.5	115	27,103	27.3	299,163	0.3	23	
15-20	88,586	7,971,060	1,867	4.7	20,091	0.5	116	6,318	16.0	67,154	0.3	21	
21-44	14,908	861,527	209	3.2	1,708	0.3	85	396	6.0	3,364	0.3	18	
45-64	6,064	431,863	65	5.1	496	0.3	61	141	11.0	1,251	0.4	35	
65-74	3,273	330,599	70	22.7	805	0.8	208	61	19.7	564	0.4	32	
75-84	951	61,317	16	9.6	176	0.5	82	20	12.0	199	0.3	24	
85 and older	323	20,418	6	12.8	40	1.0	67	10	21.3	108	0.4	55	
<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 Oklahoma, released by CMS in 7/2009. 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>.

Ben(es) = 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, OKLAHOMA, 2006

Beneficiary Characteristics	ANTICONVULSANT					MISC. HEMATOLOGICAL					ANTIDEPRESSANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>26,150</b>	<b>4.0</b>	<b>281,823</b>	<b>0.6</b>	<b>\$68</b>	<b>1,989</b>	<b>0.3</b>	<b>21,856</b>	<b>0.5</b>	<b>\$825</b>	<b>58,562</b>	<b>9.0</b>	<b>609,007</b>	<b>0.4</b>	<b>\$24</b>
<b>Female</b>															
All Females	16,386	4.3	174,869	0.5	62	1,103	0.3	12,178	0.4	66	41,996	11.1	428,725	0.4	24
<b>Female, Disabled</b>															
All Ages	9,386	32.0	105,488	0.6	72	932	3.2	10,500	0.4	64	15,840	54.0	178,096	0.4	29
5 and younger	157	12.7	1,785	0.8	105	2	0.2	20	0.8	85	5	0.4	60	0.4	12
6-14	569	21.0	6,500	0.8	133	4	0.1	42	0.4	21	408	15.0	4,647	0.5	23
15-20	565	24.9	6,496	0.7	122	1	0.0	12	0.1	6	777	34.2	8,897	0.5	28
21-44	3,462	36.8	38,669	0.6	79	78	0.8	877	0.4	54	5,516	58.6	61,780	0.4	27
45-64	4,623	33.9	51,935	0.6	52	840	6.2	9,465	0.4	65	9,106	66.9	102,418	0.4	30
65-74	10	12.3	103	0.5	30	7	8.6	84	0.5	92	28	34.6	294	0.4	29
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	7,000	2.0	69,381	0.4	46	171	0.0	1,678	0.4	75	26,156	7.5	250,629	0.3	21
5 and younger	320	0.3	3,542	0.5	62	2	0.0	18	0.3	27	107	0.1	1,225	0.2	7
6-14	931	1.0	10,435	0.5	61	0	0.0	0	0.0	0	2,832	2.9	31,677	0.4	18
15-20	1,260	2.3	13,468	0.4	60	2	0.0	24	0.2	949	5,942	10.8	62,224	0.3	19
21-44	3,787	3.9	35,402	0.4	36	48	0.0	455	0.3	69	15,134	15.7	136,148	0.3	21
45-64	576	8.9	5,157	0.4	33	83	1.3	798	0.4	50	1,927	29.8	17,098	0.4	26
65-74	85	14.6	941	0.7	41	24	4.1	272	0.6	78	150	25.8	1,615	0.5	27
75-84	27	9.3	292	0.4	25	8	2.8	86	0.4	92	43	14.9	462	0.6	30
85 and older	14	8.4	144	0.7	33	4	2.4	25	0.8	103	21	12.6	180	0.5	15
<b>Male</b>															
All Males	9,764	3.6	106,954	0.6	78	886	0.3	9,678	0.5	1,779	16,566	6.1	180,282	0.4	23
<b>Male, Disabled</b>															
All Ages	6,697	24.8	74,879	0.7	86	748	2.8	8,287	0.5	1,398	8,333	30.8	92,893	0.5	27
5 and younger	220	13.4	2,493	0.7	102	7	0.4	74	0.8	4,060	34	2.1	405	0.3	14
6-14	993	19.7	11,460	0.7	118	18	0.4	213	0.7	19,645	1,037	20.6	11,945	0.5	22
15-20	800	23.4	9,168	0.7	103	11	0.3	103	1.1	57,362	990	28.9	11,230	0.5	29
21-44	2,453	32.1	27,139	0.7	98	61	0.8	660	0.4	968	2,771	36.3	30,714	0.5	29
45-64	2,222	24.1	24,524	0.6	51	649	7.0	7,221	0.5	77	3,494	37.9	38,523	0.5	27
65-74	9	13.6	95	0.6	25	2	3.0	16	0.8	55	7	10.6	76	0.4	18
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, OKLAHOMA, 2006

Beneficiary Characteristics	ANTICONVULSANT					MISC. HEMATOLOGICAL					ANTIDEPRESSANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>Male, Other Eligibles</b>															
All Ages	3,067	1.3	32,075	0.5	58	138	0.1	1,391	0.6	4,049	8,233	3.4	87,389	0.4	20
5 and younger	399	0.4	4,449	0.4	53	16	0.0	180	0.5	3,779	200	0.2	2,262	0.3	8
6-14	1,311	1.3	14,641	0.5	62	21	0.0	230	1.1	19,693	3,936	4.0	44,133	0.4	19
15-20	854	2.2	8,835	0.5	62	11	0.0	126	0.6	2,945	3,046	7.7	32,161	0.4	21
21-44	336	5.1	2,662	0.4	40	27	0.4	233	0.4	56	721	10.9	5,701	0.3	19
45-64	116	9.0	906	0.4	25	37	2.9	320	0.4	62	235	18.3	2,108	0.4	23
65-74	37	12.0	431	0.8	69	15	4.9	170	0.5	67	62	20.1	677	0.7	39
75-84	10	6.0	111	0.6	28	9	5.4	108	0.6	66	24	14.5	261	0.6	37
85 and older	4	8.5	40	0.4	5	2	4.3	24	0.4	13	9	19.1	86	0.6	25
<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 Oklahoma, released by CMS in 7/2009. 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>.

Ben(e)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, OKLAHOMA, 2006

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANALGESICS - Narcotic					ULCER DRUGS				
	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>26,457</b>	<b>4.1</b>	<b>291,815</b>	<b>0.5</b>	<b>\$49</b>	<b>157,540</b>	<b>24.3</b>	<b>1,601,344</b>	<b>0.2</b>	<b>\$7</b>	<b>45,737</b>	<b>7.1</b>	<b>479,375</b>	<b>0.3</b>	<b>\$22</b>
<b>Female</b>															
All Females	7,726	2.0	85,171	0.5	48	114,123	30.3	1,135,546	0.3	6	30,086	8.0	313,133	0.3	22
<b>Female, Disabled</b>															
All Ages	1,227	4.2	14,020	0.6	61	24,069	82.0	269,960	0.4	17	9,802	33.4	111,027	0.4	35
5 and younger	27	2.2	301	0.4	37	167	13.5	1,941	0.1	1	190	15.4	2,163	0.4	33
6-14	602	22.2	6,895	0.7	58	516	19.0	6,033	0.1	1	314	11.6	3,586	0.5	41
15-20	246	10.8	2,822	0.6	56	1,106	48.7	12,623	0.2	2	397	17.5	4,594	0.3	28
21-44	188	2.0	2,116	0.5	60	8,674	92.1	97,498	0.3	14	2,793	29.7	31,729	0.4	29
45-64	164	1.2	1,886	0.5	82	13,562	99.6	151,407	0.5	21	6,078	44.6	68,623	0.5	37
65-74	0	0.0	0	0.0	0	44	54.3	458	0.3	7	30	37.0	332	0.5	51
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	6,499	1.9	71,151	0.5	46	90,054	25.9	865,586	0.2	3	20,284	5.8	202,106	0.2	14
5 and younger	324	0.4	3,521	0.4	37	4,709	5.1	52,706	0.1	1	3,652	4.0	35,354	0.2	9
6-14	4,726	4.9	52,179	0.5	46	10,140	10.6	113,662	0.1	1	3,997	4.2	44,878	0.2	12
15-20	1,027	1.9	11,289	0.5	47	21,501	39.0	219,969	0.2	1	4,475	8.1	47,099	0.2	12
21-44	379	0.4	3,742	0.4	47	49,816	51.5	444,353	0.3	4	6,903	7.1	63,403	0.3	18
45-64	43	0.7	420	0.5	55	3,440	53.2	30,085	0.4	14	1,003	15.5	8,674	0.4	32
65-74	0	0.0	0	0.0	0	325	55.8	3,498	0.4	12	164	28.2	1,784	0.5	37
75-84	0	0.0	0	0.0	0	93	32.2	1,011	0.3	4	69	23.9	749	0.5	25
85 and older	0	0.0	0	0.0	0	30	18.0	302	0.4	24	21	12.6	165	0.7	19
<b>Male</b>															
All Males	18,731	6.9	206,644	0.6	49	43,417	16.0	465,798	0.2	8	15,651	5.8	166,242	0.3	21
<b>Male, Disabled</b>															
All Ages	3,055	11.3	34,936	0.6	59	13,278	49.1	146,193	0.4	19	5,523	20.4	61,560	0.5	35
5 and younger	122	7.4	1,406	0.4	30	267	16.3	3,092	0.1	2	280	17.1	3,125	0.3	27
6-14	2,063	41.0	23,597	0.6	60	783	15.6	9,225	0.1	2	469	9.3	5,436	0.4	35
15-20	676	19.8	7,737	0.6	61	1,191	34.8	13,500	0.2	7	410	12.0	4,741	0.4	31
21-44	142	1.9	1,624	0.6	60	4,171	54.6	45,694	0.4	17	1,569	20.5	17,641	0.5	36
45-64	52	0.6	572	0.6	83	6,843	74.2	74,435	0.5	25	2,786	30.2	30,531	0.5	36
65-74	0	0.0	0	0.0	0	21	31.8	223	0.4	6	8	12.1	74	0.5	51
75-84	0	0.0	0	0.0	0	2	200.0	24	0.4	4	1	100.0	12	0.1	11
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, OKLAHOMA, 2006

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS						ANALGESICS - Narcotic					ULCER DRUGS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of		Mean Rx \$ Benefit	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	
		Month		Month	Month			Month		Month	Month		Month		Month	
<b>Male, Other Eligibles</b>																
All Ages	15,676	6.4	171,708	0.5	47	30,139	12.4	319,605	0.1	2	10,128	4.2	104,682	0.2	13	
5 and younger	935	1.0	10,474	0.3	26	6,562	6.8	73,110	0.1	1	4,458	4.6	43,533	0.2	11	
6-14	12,298	12.4	135,168	0.6	48	10,195	10.3	114,180	0.1	1	3,219	3.2	36,205	0.2	13	
15-20	2,409	6.1	25,804	0.5	51	10,098	25.6	106,418	0.1	1	1,826	4.6	19,618	0.2	17	
21-44	32	0.5	246	0.4	37	2,520	38.2	19,080	0.4	13	372	5.6	2,942	0.3	28	
45-64	2	0.2	16	0.4	5	630	49.0	5,399	0.5	30	156	12.1	1,360	0.4	31	
65-74	0	0.0	0	0.0	0	94	30.4	990	0.4	15	71	23.0	764	0.6	31	
75-84	0	0.0	0	0.0	0	31	18.7	342	0.4	8	18	10.8	183	0.6	40	
85 and older	0	0.0	0	0.0	0	9	19.1	86	0.4	24	8	17.0	77	0.6	48	
<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 Oklahoma, released by CMS in 7/2009. 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, OKLAHOMA, 2006

Beneficiary Characteristics	DERMATOLOGICAL					ANTIDIABETIC					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month		
<b>All</b>	<b>107,549</b>	<b>16.6</b>	<b>1,173,634</b>	<b>0.1</b>	<b>\$7</b>	<b>17,664</b>	<b>2.7</b>	<b>185,711</b>	<b>0.5</b>	<b>\$43</b>	<b>647,824</b>	<b>5,932,143</b>
<b>Female</b>												
All Females	61,140	16.2	664,581	0.1	8	12,599	3.3	131,780	0.5	41	377,193	3,365,722
<b>Female, Disabled</b>												
All Ages	7,579	25.8	87,149	0.2	11	7,668	26.1	86,011	0.5	43	29,337	309,524
5 and younger	491	39.7	5,677	0.1	5	3	0.2	36	0.1	5	1,237	12,735
6-14	826	30.4	9,607	0.2	9	37	1.4	441	0.6	80	2,714	29,941
15-20	612	27.0	7,133	0.2	9	83	3.7	950	0.5	47	2,270	24,481
21-44	2,093	22.2	24,267	0.2	10	1,489	15.8	16,690	0.5	40	9,416	99,092
45-64	3,546	26.0	40,355	0.2	13	6,024	44.2	67,512	0.5	43	13,619	142,471
65-74	11	13.6	110	0.2	11	32	39.5	382	0.5	50	81	804
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	53,561	15.4	577,432	0.1	7	4,931	1.4	45,769	0.5	38	347,856	3,056,198
5 and younger	23,172	25.1	250,376	0.1	5	42	0.0	418	0.7	101	92,409	845,963
6-14	16,471	17.1	186,036	0.1	8	394	0.4	4,299	0.6	74	96,100	962,064
15-20	7,246	13.1	78,578	0.1	9	601	1.1	6,238	0.5	51	55,157	486,650
21-44	5,889	6.1	54,892	0.2	10	2,647	2.7	23,399	0.4	28	96,681	707,237
45-64	585	9.0	5,460	0.2	12	902	13.9	7,535	0.5	33	6,471	44,441
65-74	132	22.7	1,455	0.2	13	272	46.7	3,041	0.6	38	582	5,735
75-84	41	14.2	378	0.4	14	55	19.0	645	0.6	35	289	2,816
85 and older	25	15.0	257	0.3	13	18	10.8	194	0.6	21	167	1,292
<b>Male</b>												
All Males	46,409	17.1	509,053	0.1	7	5,065	1.9	53,931	0.6	48	270,631	2,566,421
<b>Male, Disabled</b>												
All Ages	5,872	21.7	67,107	0.2	11	3,801	14.1	41,619	0.5	43	27,020	280,291
5 and younger	593	36.2	6,849	0.2	6	6	0.4	63	0.6	201	1,638	17,406
6-14	1,267	25.2	14,894	0.2	8	45	0.9	514	0.6	74	5,028	55,641
15-20	819	23.9	9,467	0.2	14	70	2.0	799	0.5	68	3,422	36,706
21-44	1,326	17.4	15,283	0.2	9	800	10.5	8,736	0.5	41	7,642	78,404
45-64	1,857	20.1	20,511	0.2	14	2,862	31.0	31,299	0.5	43	9,223	91,522
65-74	9	13.6	91	0.3	11	18	27.3	208	0.5	40	66	600
75-84	1	100.0	12	0.1	1	0	0.0	0	0.0	0	1	12
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

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, OKLAHOMA, 2006

Beneficiary Characteristics	DERMATOLOGICAL						ANTIDIABETIC					
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
<b>Male, Other Eligibles</b>												
All Ages	40,537	16.6	441,946	0.1	6	1,264	0.5	12,312	0.6	65	243,611	2,286,130
5 and younger	22,127	22.9	236,700	0.1	5	45	0.0	490	0.5	51	96,438	883,066
6-14	13,344	13.4	150,822	0.1	7	360	0.4	3,912	0.7	86	99,397	990,237
15-20	4,691	11.9	51,137	0.2	12	304	0.8	3,125	0.6	86	39,376	359,048
21-44	206	3.1	1,637	0.2	14	252	3.8	1,992	0.4	37	6,593	40,449
45-64	89	6.9	821	0.2	13	177	13.8	1,455	0.5	36	1,285	8,673
65-74	46	14.9	495	0.3	12	81	26.2	867	0.6	39	309	2,852
75-84	26	15.7	269	0.2	12	34	20.5	379	0.5	24	166	1,461
85 and older	8	17.0	65	0.6	27	11	23.4	92	0.4	17	47	344
<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 Oklahoma, released by CMS in 7/2009. This table was produced on 02/11/2010.

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

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

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

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

Nondual Medicaid Beneficiaries

TABLE ND.8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, OKLAHOMA, 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>\$595</b>	<b>8.9</b>	<b>1,314</b>	<b>13,215</b>
<b>Age</b>				
0-64	657	9.7	1,063	10,775
65-74	492	7.3	107	1,123
75-84	212	4.4	76	725
85 and older	132	3.3	68	592
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	627	9.4	757	7,779
Male	550	8.3	557	5,436
Unknown	0	0.0	0	0
<b>Race</b>				
White	605	9.1	983	9,878
African American	611	8.7	192	1,949
Other/unknown	505	7.7	139	1,388
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	321	5.5	249	2,416
Disabled	655	9.7	1,055	10,716
Adults	1,040	7.8	5	33
Children	670	7.3	4	48
Unknown	999	8.0	1	2

Source: Data for this table are from the MAX 2006 file for Oklahoma, released by CMS in 7/2009. 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 900 beneficiaries who were in nursing facilities for part of their enrollment and their 8,778 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, OKLAHOMA, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	Total	Patented Brand-Name	Off-Brand-Name	Generic	Total	Patented Brand-Name	Off-Brand-Name	Generic	Total	Patented Brand-Name	Off-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
		Name	Name	Name		Name	Name	Name		Name							
Anti-infective Agents	0.5	0.1	0.0	0.4	\$42	\$31	\$0	\$11	\$85	\$254	\$98	\$30	4,568	\$386,857	860	65.4	9,103
Biologicals	0.1	0.0	0.0	0.1	3	1	0	2	32	27	0	34	21	670	21	1.6	233
Antineoplastic Agents	0.5	0.0	0.0	0.5	55	20	0	34	111	493	0	76	576	63,707	111	8.4	1,162
Endocrine/Metabolic Drugs	1.4	0.6	0.0	0.8	71	59	1	11	50	100	52	14	10,033	500,315	659	50.2	7,047
Cardiovascular Agents	2.1	0.5	0.1	1.6	66	39	6	22	31	83	92	14	18,985	594,695	866	65.9	9,011
Respiratory Agents	0.8	0.4	0.0	0.4	58	48	1	9	71	123	74	22	5,437	385,217	637	48.5	6,653
Gastrointestinal Agents	1.2	0.3	0.0	1.0	56	37	1	18	46	142	141	19	10,748	490,387	850	64.7	8,826
Genitourinary Agents	0.7	0.4	0.0	0.2	47	35	5	6	72	91	115	29	2,354	168,584	337	25.6	3,618
CNS Drugs	2.3	1.1	0.1	1.1	265	230	11	23	117	217	97	21	25,428	2,966,777	1,070	81.4	11,199
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.2	99	97	0	2	152	197	0	11	96	14,630	13	1.0	148
Miscellaneous Psychological/Neurological Agents	0.9	0.9	0.0	0.0	205	204	0	0	240	240	0	130	1,171	280,647	127	9.7	1,371
Analgesics and Anesthetics	1.4	0.1	0.0	1.2	63	21	1	41	46	162	111	33	12,533	581,991	875	66.6	9,170
Neuromuscular Agents	1.5	0.4	0.0	1.1	100	69	1	30	66	160	54	28	12,208	800,879	753	57.3	8,039
Nutritional Products	0.8	0.0	0.0	0.8	11	0	1	10	14	61	20	13	3,743	51,193	452	34.4	4,664
Hematological Agents	1.0	0.4	0.0	0.6	85	74	0	11	87	197	0	19	3,237	283,061	316	24.0	3,329
Topical Products	0.7	0.1	0.2	0.4	32	10	13	9	44	81	68	22	6,201	272,814	783	59.6	8,401
Miscellaneous Products	0.3	0.1	0.0	0.2	8	6	0	3	25	54	7	12	341	8,647	95	7.2	1,019
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	13	0	0	0	53	0	0	0	241	12,716	88	6.7	982
<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.	117,921	7,863,787	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Oklahoma, released by CMS in 7/2009. 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 900 beneficiaries who were in nursing facilities for part of their enrollment and their 8,778 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 Oklahoma, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.  
 Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, OKLAHOMA, 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	\$2,288,710	905	68.9	9,975	0.9	\$246	\$229	
ANTICONVULSANT	699,984	869	66.1	9,485	0.9	79	74	
ANTIDEPRESSANTS	521,393	1,087	82.7	11,768	0.8	54	44	
ANTIDIABETIC	384,852	765	58.2	8,189	0.9	54	47	
ANALGESICS - Narcotic	368,014	1,093	83.2	11,418	0.8	42	32	
ULCER DRUGS	348,273	841	64.0	8,831	0.8	51	39	
ANTIASTHMATIC	314,324	656	49.9	7,015	0.5	89	45	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	284,363	178	13.5	1,951	0.7	223	146	
ANTIHYPERTENSIVE	272,965	347	26.4	3,838	0.8	89	71	
DERMATOLOGICAL	218,458	1,221	92.9	13,308	0.4	45	16	
<b>Total</b>	<b>5,701,336</b>	<b>7,962</b>	<b>n.a.</b>	<b>85,778</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 Oklahoma, released by CMS in 7/2009. 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 900 beneficiaries who were in nursing facilities for part of their enrollment and their 8,778 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, OKLAHOMA, 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>63,237</b>	<b>\$5,701,336</b>	<b>905</b>	<b>68.9</b>	<b>9,975</b>	<b>0.9</b>	<b>\$229</b>	<b>869</b>	<b>66.1</b>	<b>9,485</b>	<b>0.9</b>	<b>\$74</b>
<b>Female</b>												
All Females	39,368	3,619,387	565	74.6	6,311	0.9	228	498	65.8	5,482	0.9	76
<b>Female, Disabled</b>												
All Ages	34,997	3,243,409	497	84.7	5,615	0.9	233	450	76.7	4,940	0.9	77
64 or younger	34,984	3,237,711	496	84.6	5,603	0.9	233	450	76.8	4,940	0.9	77
65-74	13	5,698	1	100.0	12	1.0	470	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	4,371	375,978	68	40.0	696	0.9	186	48	28.2	542	0.9	65
64 or younger	125	18,798	1	20.0	2	0.5	5	4	80.0	48	1.4	243
65-74	2,603	247,623	37	59.7	401	1.0	229	27	43.5	317	1.0	55
75-84	941	70,150	16	30.8	151	0.8	167	7	13.5	68	0.8	33
85 and older	702	39,407	14	27.5	142	0.8	86	10	19.6	109	0.8	34
<b>Male</b>												
All Males	23,869	2,081,949	340	61.0	3,664	0.9	232	371	66.6	4,003	0.9	71
<b>Male, Disabled</b>												
All Ages	21,267	1,866,313	286	61.1	3,109	0.9	246	343	73.3	3,671	1.0	70
64 or younger	21,267	1,866,313	286	61.1	3,109	0.9	246	343	73.3	3,671	1.0	70
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>Male, Other Eligibles</b>												
All Ages	2,602	215,636	54	60.7	555	0.8	156	28	31.5	332	0.9	77
64 or younger	217	12,163	4	100.0	12	0.4	102	3	75.0	36	1.3	59
65-74	1,501	148,882	32	72.7	375	0.9	184	19	43.2	225	0.9	95
75-84	573	35,941	12	50.0	128	0.7	107	5	20.8	59	0.9	34
85 and older	311	18,650	6	35.3	40	1.0	67	1	5.9	12	0.8	8
<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 Oklahoma, released by CMS in 7/2009. 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 900 beneficiaries who were in nursing facilities for part of their enrollment and their 8,778 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, OKLAHOMA, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIDIABETIC					ANALGESICS - Narcotic				
	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>1,087</b>	<b>82.7</b>	<b>11,768</b>	<b>0.8</b>	<b>\$44</b>	<b>765</b>	<b>58.2</b>	<b>8,189</b>	<b>0.9</b>	<b>\$47</b>	<b>1,093</b>	<b>83.2</b>	<b>11,418</b>	<b>0.8</b>	<b>\$32</b>
<b>Female</b>															
All Females	680	89.8	7,430	0.8	44	507	67.0	5,571	0.9	49	653	86.3	6,955	0.8	36
<b>Female, Disabled</b>															
All Ages	598	101.9	6,580	0.8	45	433	73.8	4,779	0.9	51	583	99.3	6,208	0.8	36
64 or younger	597	101.9	6,568	0.8	45	433	73.9	4,779	0.9	51	583	99.5	6,208	0.8	36
65-74	1	100.0	12	0.1	5	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	82	48.2	850	0.8	37	74	43.5	792	0.8	38	70	41.2	747	0.6	31
64 or younger	4	80.0	28	0.7	19	3	60.0	6	0.5	22	0	0.0	0	0.0	0
65-74	41	66.1	462	0.9	45	52	83.9	584	0.8	45	36	58.1	410	0.7	40
75-84	20	38.5	210	0.9	37	9	17.3	100	0.8	31	18	34.6	176	0.4	8
85 and older	17	33.3	150	0.5	15	10	19.6	102	0.8	11	16	31.4	161	0.6	33
<b>Male</b>															
All Males	407	73.1	4,338	0.8	44	258	46.3	2,618	0.8	43	440	79.0	4,463	0.8	27
<b>Male, Disabled</b>															
All Ages	365	78.0	3,892	0.8	44	223	47.6	2,259	0.8	46	397	84.8	4,017	0.8	28
64 or younger	365	78.0	3,892	0.8	44	223	47.6	2,259	0.8	46	397	84.8	4,017	0.8	28
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	42	47.2	446	0.9	48	35	39.3	359	0.6	26	43	48.3	446	0.6	20
64 or younger	2	50.0	24	0.5	4	2	50.0	7	0.4	27	3	75.0	27	1.0	15
65-74	20	45.5	219	0.9	52	17	38.6	198	0.7	39	23	52.3	238	0.4	19
75-84	12	50.0	129	0.9	60	9	37.5	95	0.5	10	9	37.5	107	0.9	22
85 and older	8	47.1	74	0.7	29	7	41.2	59	0.4	10	8	47.1	74	0.5	26
<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 Oklahoma, released by CMS in 7/2009. 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 900 beneficiaries who were in nursing facilities for part of their enrollment and their 8,778 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, OKLAHOMA, 2006

Beneficiary Characteristics	ULCER DRUGS					ANTIASTHMATIC					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>841</b>	<b>64.0</b>	<b>8,831</b>	<b>0.8</b>	<b>\$39</b>	<b>656</b>	<b>49.9</b>	<b>7,015</b>	<b>0.5</b>	<b>\$45</b>	<b>178</b>	<b>13.5</b>	<b>1,951</b>	<b>0.7</b>	<b>\$146</b>
<b>Female</b>															
All Females	487	64.3	5,186	0.8	38	437	57.7	4,729	0.5	49	113	14.9	1,217	0.7	161
<b>Female, Disabled</b>															
All Ages	417	71.0	4,468	0.8	37	401	68.3	4,348	0.5	47	86	14.7	934	0.6	166
64 or younger	417	71.2	4,468	0.8	37	401	68.4	4,348	0.5	47	86	14.7	934	0.6	166
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	70	41.2	718	0.8	47	36	21.2	381	0.4	61	27	15.9	283	0.8	144
64 or younger	3	60.0	26	1.0	227	1	20.0	12	0.1	1	0	0.0	0	0.0	0
65-74	28	45.2	336	0.9	49	17	27.4	204	0.6	105	5	8.1	60	0.8	326
75-84	24	46.2	252	0.7	38	9	17.3	84	0.2	8	12	23.1	125	0.8	101
85 and older	15	29.4	104	0.7	18	9	17.6	81	0.2	13	10	19.6	98	0.8	86
<b>Male</b>															
All Males	354	63.6	3,645	0.8	41	219	39.3	2,286	0.4	37	65	11.7	734	0.6	120
<b>Male, Disabled</b>															
All Ages	319	68.2	3,279	0.8	41	193	41.2	2,021	0.4	36	50	10.7	563	0.6	131
64 or younger	319	68.2	3,279	0.8	41	193	41.2	2,021	0.4	36	50	10.7	563	0.6	131
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	35	39.3	366	0.9	42	26	29.2	265	0.5	43	15	16.9	171	0.7	86
64 or younger	3	75.0	19	0.9	27	2	50.0	24	0.8	51	0	0.0	0	0.0	0
65-74	22	50.0	247	0.9	41	11	25.0	101	0.5	42	8	18.2	96	0.7	103
75-84	5	20.8	54	0.9	47	8	33.3	87	0.3	20	3	12.5	30	0.7	73
85 and older	5	29.4	46	0.7	51	5	29.4	53	0.6	81	4	23.5	45	0.8	58
<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 Oklahoma, released by CMS in 7/2009. 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 900 beneficiaries who were in nursing facilities for part of their enrollment and their 8,778 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, OKLAHOMA, 2006

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC					DERMATOLOGICAL					Benefit Months Among All-Year Nursing Facility Residents	
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Nursing Facility Residents
<b>All</b>	<b>347</b>	<b>26.4</b>	<b>3,838</b>	<b>0.8</b>	<b>\$71</b>	<b>1,221</b>	<b>92.9</b>	<b>13,308</b>	<b>0.4</b>	<b>\$16</b>	<b>1,314</b>	<b>13,215</b>
<b>Female</b>												
All Females	211	27.9	2,355	0.8	68	721	95.2	7,951	0.4	17	757	7,779
<b>Female, Disabled</b>												
All Ages	185	31.5	2,098	0.8	67	633	107.8	7,069	0.4	17	587	6,138
64 or younger	185	31.6	2,098	0.8	67	633	108.0	7,069	0.4	17	586	6,126
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	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>Female, Other Eligibles</b>												
All Ages	26	15.3	257	0.9	76	88	51.8	882	0.3	11	170	1,641
64 or younger	1	20.0	2	0.5	57	5	100.0	30	0.3	15	5	40
65-74	14	22.6	160	0.9	82	49	79.0	527	0.2	9	62	667
75-84	8	15.4	74	1.0	68	19	36.5	159	0.6	16	52	488
85 and older	3	5.9	21	0.9	55	15	29.4	166	0.4	14	51	446
<b>Male</b>												
All Males	136	24.4	1,483	0.8	76	500	89.8	5,357	0.4	16	557	5,436
<b>Male, Disabled</b>												
All Ages	122	26.1	1,315	0.8	78	445	95.1	4,778	0.4	16	468	4,578
64 or younger	122	26.1	1,315	0.8	78	445	95.1	4,778	0.4	16	468	4,578
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>Male, Other Eligibles</b>												
All Ages	14	15.7	168	0.8	56	55	61.8	579	0.4	22	89	858
64 or younger	0	0.0	0	0.0	0	9	225.0	99	0.9	65	4	31
65-74	11	25.0	132	0.8	66	23	52.3	255	0.3	9	44	444
75-84	2	8.3	24	0.9	23	16	66.7	167	0.2	14	24	237
85 and older	1	5.9	12	1.2	21	7	41.2	58	0.6	30	17	146
<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 Oklahoma, released by CMS in 7/2009. 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 900 beneficiaries who were in nursing facilities for part of their enrollment and their 8,778 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>  
 OKLAHOMA, 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>52,080</b>	<b>8.0</b>	<b>0.3</b>	<b>197,165</b>	<b>\$5</b>	<b>\$3,163,687</b>	<b>\$16</b>	<b>1.1</b>	<b>647,824</b>
<b>Age</b>									
5 and younger	5,086	2.7	0.1	12,409	2	321,175	26	0.8	191,722
6-14	15,637	7.7	0.2	40,756	4	770,428	19	1.0	203,239
15-20	7,965	7.9	0.2	19,557	3	312,271	16	0.7	100,225
21-44	12,701	10.6	0.5	57,140	7	854,870	15	1.3	120,332
45-64	10,282	33.6	2.1	64,592	29	873,502	14	1.3	30,598
65-74	256	24.7	1.7	1,801	20	20,484	11	1.1	1,038
75-84	98	21.5	1.4	649	18	8,282	13	1.9	456
85 and older	55	25.7	1.2	261	13	2,675	10	2.1	214
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>									
Aged	373	23.9	1.6	2,516	19	29,513	12	1.3	1,558
Disabled	16,253	28.8	1.8	102,446	30	1,664,622	16	1.2	56,357
Adults	8,950	7.7	0.3	31,460	4	440,843	14	1.4	116,735
Children	25,717	5.5	0.1	58,583	2	1,004,926	17	0.9	466,544
Unknown	787	11.9	0.3	2,160	4	23,783	11	1.0	6,630
<b>Gender</b>									
Female	32,821	8.7	0.3	127,733	5	2,005,753	16	1.3	377,193
Male	19,259	7.1	0.3	69,432	4	1,157,934	17	0.8	270,631
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Race</b>									
White	36,449	9.6	0.4	147,161	6	2,389,634	16	1.2	378,660
African American	6,382	6.2	0.2	21,605	3	315,318	15	0.8	102,626
Other/unknown	9,249	5.6	0.2	28,399	3	458,735	16	1.0	166,538
<b>Use of Nursing Facilities<sup>d</sup></b>									
Entire year	859	65.4	7.6	9,970	97	127,432	13	1.6	1,314
Part year	642	71.3	5.7	5,168	75	67,583	13	1.5	900
None	50,579	7.8	0.3	182,027	5	2,968,672	16	1.1	645,610
<b>Maintenance Assistance Status</b>									
Cash	20,985	16.2	0.8	98,609	13	1,623,113	16	1.2	129,682
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	25,787	5.6	0.1	60,106	2	978,647	16	0.9	458,818
Other/unknown	5,308	8.9	0.6	38,450	9	561,927	15	1.2	59,324

Source: Data for this table are from the MAX 2006 file for Oklahoma, released by CMS in 7/2009. This table was produced on 02/11/2010.

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

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

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

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

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

TABLE ND.12  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 OKLAHOMA, 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>0.0</b>	<b>\$1</b>	<b>\$16</b>	<b>\$0</b>	<b>\$0</b>	<b>5,932,143</b>
<b>Age</b>						
5 and younger	0.0	0	26	0	0	1,759,170
6-14	0.0	0	19	0	0	2,037,883
15-20	0.0	0	16	0	0	906,885
21-44	0.1	1	15	0	1	925,182
45-64	0.2	3	14	0	2	287,107
65-74	0.2	2	11	0	1	9,991
75-84	0.2	2	13	0	1	4,289
85 and older	0.2	2	10	0	1	1,636
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.2	2	12	0	1	14,531
Disabled	0.2	3	16	0	1	589,815
Adults	0.0	1	14	0	0	848,789
Children	0.0	0	17	0	0	4,439,054
Unknown	0.1	1	11	0	0	39,954
<b>Gender</b>						
Female	0.0	1	16	0	0	3,365,722
Male	0.0	0	17	0	0	2,566,421
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	0.0	1	16	0	0	3,436,237
African American	0.0	0	15	0	0	984,497
Other/unknown	0.0	0	16	0	0	1,511,409
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.8	10	13	0	4	13,215
Part year	0.6	8	13	0	4	8,778
None	0.0	1	16	0	0	5,910,150
<b>Maintenance Assistance Status</b>						
Cash	0.1	1	16	0	1	1,227,456
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	0	16	0	0	4,180,404
Other/unknown	0.1	1	15	0	0	524,283

Source: Data for this table are from the MAX 2006 file for Oklahoma, released by CMS in 7/2009. 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>  
 OKLAHOMA, 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>57,339</b>	<b>\$55</b>	<b>\$3,163,687</b>	<b>100.0</b>		<b>197,165</b>	<b>\$16</b>	<b>100.0</b>	
Anorexia or weight loss/gain	0	0	0	0.0		0	0	0.0	
Fertility drugs	6	68	406	0.0		6	68	0.0	
Drugs for cosmetic purposes	190	16	3,062	0.1		283	11	0.1	
Cough and cold medications	560	55	30,559	1.0		935	33	0.5	
Vitamins and minerals	7,119	55	393,251	12.4		24,651	16	12.5	
Non-prescription drugs	24,097	46	1,111,744	35.1		55,254	20	28.0	
Barbiturates	983	61	59,772	1.9		7,723	8	3.9	
Benzodiazepines	20,835	58	1,207,162	38.2		99,224	12	50.3	
Other Part D Excl Rx Drugs	3,549	101	357,731	11.3		9,089	39	4.6	

Source: Data for this table are from the MAX 2006 file for Oklahoma, released by CMS in 7/2009. 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, OKLAHOMA, 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>647,824</b>	<b>1,558</b>	<b>56,357</b>	<b>116,735</b>	<b>466,544</b>	<b>6,630</b>	<b>5,932,143</b>	<b>14,531</b>	<b>589,815</b>	<b>848,789</b>	<b>4,439,054</b>	<b>39,954</b>
<b>Age</b>												
5 and younger	191,722	0	2,875	0	188,847	0	1,759,170	0	30,141	0	1,729,029	0
6-14	203,239	0	7,742	20	195,477	0	2,037,883	0	85,582	111	1,952,190	0
15-20	100,225	0	5,692	12,431	81,650	452	906,885	0	61,187	87,905	754,648	3,145
21-44	120,332	2	17,058	98,808	568	3,896	925,182	13	177,496	719,809	3,164	24,700
45-64	30,598	15	22,842	5,470	2	2,269	287,107	107	233,993	40,929	23	12,055
65-74	1,038	874	147	4	0	13	9,991	8,511	1,404	22	0	54
75-84	456	454	1	1	0	0	4,289	4,276	12	1	0	0
85 and older	214	213	0	1	0	0	1,636	1,624	0	12	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	377,193	1,033	29,337	108,879	231,314	6,630	3,365,722	9,846	309,524	799,681	2,206,717	39,954
Male	270,631	525	27,020	7,856	235,230	0	2,566,421	4,685	280,291	49,108	2,232,337	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	378,660	789	38,010	76,191	258,923	4,747	3,436,237	7,099	397,097	558,486	2,444,936	28,619
African American	102,626	256	10,689	16,927	74,128	626	984,497	2,520	112,463	132,149	733,590	3,775
Other/unknown	166,538	513	7,658	23,617	133,493	1,257	1,511,409	4,912	80,255	158,154	1,260,528	7,560
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	1,314	249	1,055	5	4	1	13,215	2,416	10,716	33	48	2
Part year	900	94	791	11	2	2	8,778	839	7,816	81	24	18
None	645,610	1,215	54,511	116,719	466,538	6,627	5,910,150	11,276	571,283	848,675	4,438,982	39,934
<b>Maintenance Assistance Status</b>												
Cash	129,682	762	43,551	41,465	43,904	0	1,227,456	7,863	465,550	318,307	435,736	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	458,818	223	5,623	40,281	406,061	6,630	4,180,404	1,619	46,179	260,996	3,831,656	39,954
Other/unknown	59,324	573	7,183	34,989	16,579	0	524,283	5,049	78,086	269,486	171,662	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	647,824	1,558	56,357	116,735	466,544	6,630	5,932,143	14,531	589,815	848,789	4,439,054	39,954
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2006 file for Oklahoma, released by CMS in 7/2009. This table was produced on 02/11/2010.

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

APPENDIX TABLE A.2  
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS<sup>a</sup>  
 NONDUAL BENEFICIARIES, OKLAHOMA, 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>647,824</b>	<b>5,932,143</b>	<b>647,824</b>	<b>5,932,143</b>	<b>0</b>	<b>0</b>
Fee-for-service (FFS) all year	647,824	5,932,143	647,824	5,932,143	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2006 file for Oklahoma, released by CMS in 7/2009. 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