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

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CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	177,543	406	17,773	41,437	117,531	396	883,917	2,928	140,044	168,921	568,508	3,516
Age												
5 and younger	52,475	0	751	0	51,724	0	229,379	0	5,740	0	223,639	0
6-14	47,562	0	1,977	10	45,575	0	255,550	0	17,350	39	238,161	0
15-20	26,432	0	1,906	4,699	19,826	1	137,160	0	16,048	16,570	104,533	9
21-44	39,739	1	5,685	33,567	400	86	182,123	12	43,079	136,257	2,162	613
45-64	10,917	28	7,423	3,158	1	307	76,816	251	57,640	16,038	6	2,881
65-74	202	172	28	0	0	2	1,295	1,120	162	0	0	13
75-84	127	123	2	2	0	0	944	917	13	14	0	0
85 and older	88	82	1	1	4	0	647	628	12	3	4	0
Unknown	1	0	0	0	1	0	3	0	0	0	3	0
Gender												
Female	101,993	233	8,732	34,442	58,190	396	496,652	1,697	70,788	138,876	281,775	3,516
Male	75,550	173	9,041	6,995	59,341	0	387,265	1,231	69,256	30,045	286,733	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	120,996	259	14,837	32,477	73,088	335	638,868	2,044	117,313	133,934	382,568	3,009
African American	7,136	19	635	1,648	4,824	10	26,956	87	3,879	4,120	18,783	87
Other/unknown	49,411	128	2,301	7,312	39,619	51	218,093	797	18,852	30,867	167,157	420
Use of Nursing Facilities^c												
Entire year	259	45	214	0	0	0	2,374	399	1,975	0	0	0
Part year	448	22	411	13	1	1	3,472	165	3,197	92	12	6
None	176,836	339	17,148	41,424	117,530	395	878,071	2,364	134,872	168,829	568,496	3,510
Maintenance Assistance Status												
Cash	63,793	171	13,196	17,635	32,791	0	338,716	1,389	117,432	68,808	151,087	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	72,330	0	7	11,851	60,076	396	289,945	0	27	34,090	252,312	3,516
Other/unknown	41,420	235	4,570	11,951	24,664	0	255,256	1,539	22,585	66,023	165,109	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	82,812	297	13,253	16,486	52,388	388	673,055	2,508	123,455	117,445	426,177	3,470
FFS part year, with Rx claims	22,074	58	2,910	9,354	9,744	8	76,846	256	12,032	25,091	39,421	46
FFS part year, no Rx claims	72,657	51	1,610	15,597	55,399	0	134,016	164	4,557	26,385	102,910	0

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

Nondual Medicaid Beneficiaries

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

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid		Number of Beneficiaries
						FFS \$ ^d		
All	37.5	4.8	\$336	\$71	\$3,468	9.7		177,543
Age								
5 and younger	27.7	1.0	41	40	2,249	1.8		52,475
6-14	29.4	2.2	203	93	1,894	10.7		47,562
15-20	39.8	3.5	231	67	3,111	7.4		26,432
21-44	49.9	6.8	502	73	4,574	11.0		39,739
45-64	69.4	29.2	1,974	68	12,669	15.6		10,917
65-74	48.0	14.1	822	59	11,930	6.9		202
75-84	36.2	6.2	216	35	13,232	1.6		127
85 and older	37.5	4.1	63	16	14,884	0.4		88
Unknown	0.0	0.0	0	0	847	0.0		1
Basis of Eligibility^e								
Aged	44.3	10.2	583	57	12,217	4.8		406
Disabled	67.8	25.2	2,198	87	13,557	16.2		17,773
Adults	47.5	4.9	226	46	3,433	6.6		41,437
Children	29.2	1.5	88	57	1,886	4.6		117,531
Unknown	83.3	20.7	1,471	71	15,096	9.7		396
Gender								
Female	40.1	5.3	316	60	3,511	9.0		101,993
Male	33.9	4.0	362	90	3,410	10.6		75,550
Unknown	0.0	0.0	0	0	0	0.0		0
Race								
White	42.1	5.8	414	71	3,750	11.0		120,996
African American	26.1	2.8	194	70	3,364	5.8		7,136
Other/unknown	28.0	2.4	165	69	2,795	5.9		49,411
Use of Nursing Facilities^f								
Entire year	86.5	67.4	4,178	62	65,528	6.4		259
Part year	94.2	58.7	3,853	66	57,421	6.7		448
None	37.3	4.5	321	71	3,241	9.9		176,836
Maintenance Assistance Status								
Cash	43.4	8.3	651	79	4,593	14.2		63,793
Medically needy	0.0	0.0	0	0	0	0.0		0
Poverty related	27.3	1.2	51	42	1,808	2.8		72,330
Other/unknown	46.3	5.5	347	63	4,636	7.5		41,420

Source: Data for this table are from the MAX 2006 file for Oregon, 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^{a, b}
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months
All	1.0	\$67	9.7	62.5	25.1	4.1	4.7	2.3	1.3	\$697	177,543	883,917
Age												
5 and younger	0.2	9	1.8	72.3	25.9	1.2	0.5	0.1	0.0	515	52,475	229,379
6-14	0.4	38	10.7	70.6	23.4	2.8	2.2	0.6	0.3	353	47,562	255,550
15-20	0.7	44	7.4	60.2	28.2	5.0	4.3	1.5	0.8	599	26,432	137,160
21-44	1.5	110	11.0	50.1	26.4	7.8	9.1	4.2	2.4	998	39,739	182,123
45-64	4.1	281	15.6	30.6	16.2	8.9	20.6	15.1	8.6	1,801	10,917	76,816
65-74	2.2	128	6.9	52.0	19.3	6.9	8.4	10.4	3.0	1,861	202	1,295
75-84	0.8	29	1.6	63.8	21.3	4.7	4.7	2.4	3.1	1,780	127	944
85 and older	0.6	9	0.4	62.5	27.3	2.3	5.7	1.1	1.1	2,024	88	647
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	282	1	3
Basis of Eligibility^e												
Aged	1.4	81	4.8	55.7	22.4	5.4	8.1	5.7	2.7	1,694	406	2,928
Disabled	3.2	279	16.2	32.2	21.5	9.2	18.0	12.3	6.8	1,721	17,773	140,044
Adults	1.2	56	6.6	52.5	26.9	7.5	7.9	3.3	2.0	842	41,437	168,921
Children	0.3	18	4.6	70.8	25.0	2.2	1.5	0.4	0.2	390	117,531	568,508
Unknown	2.3	166	9.7	16.7	32.6	17.4	26.0	6.6	0.8	1,700	396	3,516
Gender												
Female	1.1	65	9.0	59.9	25.8	4.7	5.3	2.7	1.6	721	101,993	496,652
Male	0.8	71	10.6	66.1	24.1	3.4	3.9	1.7	0.9	665	75,550	387,265
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.1	78	11.0	57.9	26.9	4.9	5.7	2.9	1.6	710	120,996	638,868
African American	0.7	51	5.8	73.9	16.8	3.4	3.5	1.4	1.1	891	7,136	26,956
Other/unknown	0.5	37	5.9	72.0	22.0	2.3	2.3	0.9	0.5	633	49,411	218,093
Use of Nursing Facilities^f												
Entire year	7.3	456	6.4	13.5	8.5	3.9	15.8	33.6	24.7	7,149	259	2,374
Part year	7.6	497	6.7	5.8	9.2	6.5	20.3	33.0	25.2	7,409	448	3,472
None	0.9	65	9.9	62.7	25.2	4.1	4.6	2.2	1.2	653	176,836	878,071
Maintenance Assistance Status												
Cash	1.6	123	14.2	56.6	24.1	5.4	7.3	4.2	2.4	865	63,793	338,716
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.3	13	2.8	72.7	23.1	2.3	1.4	0.4	0.1	451	72,330	289,945
Other/unknown	0.9	56	7.5	53.7	30.0	5.5	6.4	2.8	1.7	752	41,420	255,256

Source: Data for this table are from the MAX 2006 file for Oregon, 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 CHARACTERISTICS^{a, b, c}
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	1.0	\$67	\$71	0.3	\$50	\$178	0.0	\$3	\$99	0.6	\$14	\$22
Age												
5 and younger	0.2	9	40	0.0	7	148	0.0	1	41	0.2	2	13
6-14	0.4	38	93	0.2	33	187	0.0	1	64	0.2	4	19
15-20	0.7	44	67	0.2	35	140	0.0	2	80	0.4	8	19
21-44	1.5	110	73	0.4	80	206	0.1	6	113	1.1	24	23
45-64	4.1	281	68	1.1	192	170	0.1	14	123	2.9	75	26
65-74	2.2	128	59	0.6	89	151	0.0	3	135	1.6	36	23
75-84	0.8	29	35	0.2	19	103	0.0	2	61	0.6	9	14
85 and older	0.6	9	16	0.1	3	42	0.0	1	31	0.5	5	11
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	1.4	81	57	0.4	59	161	0.0	2	82	1.0	20	20
Disabled	3.2	279	87	1.0	210	213	0.1	12	122	2.1	57	27
Adults	1.2	56	46	0.3	35	131	0.0	4	97	0.9	16	19
Children	0.3	18	57	0.1	14	134	0.0	1	59	0.2	3	16
Unknown	2.3	166	71	0.7	126	186	0.1	7	107	1.6	32	20
Gender												
Female	1.1	65	60	0.3	45	152	0.0	4	101	0.8	16	21
Male	0.8	71	90	0.3	56	216	0.0	2	95	0.5	12	24
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	1.1	78	71	0.3	58	176	0.0	4	103	0.7	17	23
African American	0.7	51	70	0.2	38	169	0.0	1	73	0.5	12	24
Other/unknown	0.5	37	69	0.1	28	197	0.0	2	78	0.4	8	20
Use of Nursing Facilities^e												
Entire year	7.3	456	62	2.0	294	146	0.2	15	68	5.1	144	28
Part year	7.6	497	66	2.0	335	171	0.2	18	93	5.4	143	26
None	0.9	65	71	0.3	48	179	0.0	3	99	0.6	14	22
Maintenance Assistance Status												
Cash	1.6	123	79	0.5	91	199	0.1	6	114	1.1	26	25
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.3	13	42	0.1	9	118	0.0	1	69	0.2	3	15
Other/unknown	0.9	56	63	0.3	42	150	0.0	3	80	0.6	12	21

Source: Data for this table are from the MAX 2006 file for Oregon, 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 Oregon, 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, OREGON, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users ^e							
	Total	Patented Brand-Name	Off-Patent Brand-Name Generic	Total	Patented Brand-Name	Off-Patent Brand-Name Generic	Total	Patented Brand-Name	Off-Patent Brand-Name Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months			
Anti-infective Agents	0.3	0.0	0.0	0.2	\$12	\$7	\$1	\$4	\$48	\$253	\$47	\$19	78,224	\$3,722,870	34,022	19.2	308,347
Biologicals	0.2	0.2	0.0	0.0	101	101	0	0	584	617	0	35	968	565,279	575	0.3	5,604
Antineoplastic Agents	0.6	0.2	0.0	0.4	142	128	0	15	238	541	0	40	2,721	648,660	453	0.3	4,553
Endocrine/Metabolic Drugs	0.6	0.2	0.0	0.4	29	22	1	7	51	112	43	19	68,989	3,487,182	13,754	7.7	118,247
Cardiovascular Agents	1.1	0.3	0.0	0.8	43	30	2	11	40	105	82	15	84,310	3,366,421	8,556	4.8	78,611
Respiratory Agents	0.4	0.2	0.0	0.2	26	22	0	4	59	113	42	15	69,379	4,102,538	17,068	9.6	157,950
Gastrointestinal Agents	0.5	0.1	0.0	0.3	30	21	4	5	65	152	237	16	32,303	2,104,861	7,416	4.2	69,483
Genitourinary Agents	0.3	0.1	0.0	0.2	14	7	3	4	50	102	95	20	8,332	413,397	3,226	1.8	29,705
CNS Drugs	1.3	0.5	0.1	0.7	109	85	8	16	86	182	97	22	201,118	17,362,589	22,668	12.8	158,953
Stimulants/Anti-obesity/Anorexia	0.8	0.6	0.0	0.2	77	70	1	6	92	110	135	32	34,177	3,144,223	4,807	2.7	40,991
Miscellaneous Psychological/Neurological Agents	0.3	0.2	0.0	0.1	107	104	0	3	360	448	0	51	1,904	686,012	646	0.4	6,383
Analgesics and Anesthetics	0.7	0.0	0.0	0.6	34	10	3	21	51	218	285	35	126,572	6,434,321	22,231	12.5	189,609
Neuromuscular Agents	0.8	0.3	0.0	0.5	68	54	1	13	85	167	97	27	68,039	5,757,823	9,333	5.3	85,123
Nutritional Products	0.3	0.0	0.0	0.3	3	0	0	3	10	41	14	9	28,221	271,194	10,475	5.9	92,268
Hematological Agents	0.6	0.2	0.0	0.4	403	394	0	9	655	2,516	27	20	9,330	6,106,747	1,599	0.9	15,149
Topical Products	0.2	0.0	0.0	0.2	6	3	0	2	29	89	38	16	26,737	784,489	14,792	8.3	138,311
Miscellaneous Products	0.6	0.3	0.0	0.3	179	126	4	49	282	423	340	151	1,959	552,992	322	0.2	3,082
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	13	0	0	0	59	0	0	0	926	54,481	425	0.2	4,251
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	844,209	59,566,079	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Oregon, 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 Oregon, 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^{a, b, c}
 NONDUAL BENEFICIARIES, OREGON, 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	\$7,945,929	5,661	3.2	56,070	0.7	\$215	\$142	
MISC. HEMATOLOGICAL	5,222,893	351	0.2	3,588	0.6	2,358	1,456	
ANALGESICS - Narcotic	4,727,391	24,786	14.0	229,925	0.4	50	21	
ANTICONVULSANT	4,576,460	5,970	3.4	60,119	0.7	107	76	
ANTIDEPRESSANTS	4,133,107	14,472	8.2	141,057	0.5	55	29	
ANTIASTHMATIC	3,380,078	16,093	9.1	156,677	0.3	71	22	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	2,761,831	4,821	2.7	45,950	0.7	88	60	
ANTIDIABETIC	1,783,989	4,094	2.3	40,437	0.6	71	44	
ANTIVIRAL	1,498,899	1,379	0.8	13,322	0.3	350	113	
ULCER DRUGS	1,464,470	7,468	4.2	72,774	0.4	50	20	
Total	37,495,047	85,095	n.a.	819,919	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Oregon, 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^{a, b, c}
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	All Top 10 Drug Groups							ANTIPSYCHOTICS			MISC. HEMATOLOGICAL		
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	
All	390,152	\$37,495,047	5,661	3.2	56,070	0.7	\$142	351	0.2	3,588	0.6	\$1,456	
Female													
All Females	238,891	18,272,293	2,955	2.9	29,401	0.6	129	186	0.2	1,930	0.6	64	
Female, Disabled													
All Ages	132,121	11,977,758	1,752	20.1	18,392	0.7	157	157	1.8	1,685	0.6	66	
5 and younger	676	50,029	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
6-14	4,221	380,536	85	12.3	876	0.6	117	0	0.0	0	0.0	0	
15-20	5,862	591,168	123	16.8	1,266	0.8	148	1	0.1	12	0.1	11	
21-44	35,288	3,640,327	696	24.2	7,353	0.7	159	12	0.4	144	0.6	75	
45-64	85,851	7,283,147	845	20.6	8,862	0.7	160	143	3.5	1,522	0.6	66	
65-74	201	28,686	3	23.1	35	1.4	452	1	7.7	7	0.3	35	
75-84	14	3,690	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	8	175	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
Female, Other Eligibles													
All Ages	106,770	6,294,535	1,203	1.3	11,009	0.5	83	29	0.0	245	0.4	50	
5 and younger	3,422	210,840	8	0.0	63	0.7	103	0	0.0	0	0.0	0	
6-14	14,709	1,068,331	218	1.0	2,228	0.7	105	0	0.0	0	0.0	0	
15-20	15,935	892,358	323	2.2	2,728	0.6	85	0	0.0	0	0.0	0	
21-44	58,030	3,153,491	531	1.9	4,785	0.4	73	13	0.0	90	0.5	48	
45-64	13,852	913,214	117	5.1	1,148	0.4	70	13	0.6	119	0.4	51	
65-74	658	53,068	4	4.3	48	1.2	338	2	2.2	24	0.5	66	
75-84	108	2,125	1	1.4	2	1.0	60	1	1.4	12	0.2	19	
85 and older	56	1,108	1	2.1	7	1.7	45	0	0.0	0	0.0	0	
Male													
All Males	151,261	19,222,754	2,706	3.6	26,669	0.7	155	165	0.2	1,658	0.7	3,075	
Male, Disabled													
All Ages	92,473	14,116,873	1,771	19.6	17,990	0.8	180	142	1.6	1,429	0.7	2,990	
5 and younger	1,422	87,380	9	2.1	86	0.4	65	1	0.2	12	0.2	30	
6-14	9,800	2,792,838	255	19.8	2,655	0.7	128	8	0.6	85	1.0	21,370	
15-20	9,959	1,151,334	306	26.1	3,212	0.8	165	0	0.0	0	0.0	0	
21-44	23,844	5,406,332	664	23.6	6,531	0.8	194	16	0.6	141	0.6	16,840	
45-64	47,339	4,671,400	535	16.1	5,492	0.8	198	116	3.5	1,187	0.6	68	
65-74	109	7,589	2	13.3	14	0.4	39	1	6.7	4	1.0	126	
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^{a, b, c}
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				MISC. HEMATOLOGICAL				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	58,788	5,105,881	935	1.4	8,679	0.6	105	23	0.0	229	0.6	3,609
5 and younger	5,454	315,129	30	0.1	302	0.4	62	0	0.0	0	0.0	0
6-14	26,306	2,895,065	481	2.1	4,834	0.6	110	4	0.0	48	1.1	17,026
15-20	12,764	975,115	288	2.8	2,394	0.7	113	0	0.0	0	0.0	0
21-44	9,043	553,393	104	1.9	888	0.3	73	5	0.1	45	0.2	27
45-64	4,655	340,804	25	2.1	204	0.5	104	12	1.0	121	0.5	50
65-74	342	16,365	6	7.3	54	0.6	59	1	1.2	12	1.1	134
75-84	189	9,165	1	1.9	3	1.7	347	1	1.9	3	1.0	136
85 and older	35	845	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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

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^{a, b, c}
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTICONVULSANT					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
All	24,786	14.0	229,925	0.4	\$21	5,970	3.4	60,119	0.7	\$76	14,472	8.2	141,057	0.5	\$29
Female															
All Females	18,032	17.7	165,718	0.4	18	3,713	3.6	37,425	0.7	70	10,346	10.1	100,200	0.5	30
Female, Disabled															
All Ages	5,006	57.3	52,701	0.6	41	2,225	25.5	23,918	0.8	81	4,105	47.0	43,955	0.6	36
5 and younger	15	4.7	166	0.1	1	34	10.7	348	0.7	68	3	0.9	36	0.7	3
6-14	62	9.0	687	0.1	1	135	19.5	1,510	0.8	90	63	9.1	660	0.6	17
15-20	164	22.3	1,735	0.2	3	189	25.7	1,974	0.9	114	154	21.0	1,609	0.7	27
21-44	1,481	51.5	15,511	0.5	37	747	26.0	8,000	0.8	96	1,204	41.9	12,742	0.6	35
45-64	3,277	79.9	34,550	0.7	46	1,118	27.3	12,062	0.7	65	2,677	65.3	28,863	0.6	37
65-74	7	53.8	52	0.9	59	1	7.7	12	1.0	223	3	23.1	33	0.6	59
75-84	0	0.0	0	0.0	0	1	50.0	12	1.1	307	1	50.0	12	0.1	1
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	13,026	14.0	113,017	0.3	8	1,488	1.6	13,507	0.5	51	6,241	6.7	56,245	0.4	25
5 and younger	274	1.1	2,688	0.1	1	32	0.1	321	0.5	67	3	0.0	36	0.3	4
6-14	606	2.7	5,799	0.1	1	144	0.6	1,348	0.6	75	395	1.8	3,809	0.6	16
15-20	2,196	15.2	19,254	0.2	1	222	1.5	1,914	0.6	64	1,218	8.5	10,517	0.4	20
21-44	8,877	31.0	75,007	0.3	9	892	3.1	7,946	0.5	43	3,894	13.6	34,835	0.4	26
45-64	1,045	45.5	10,006	0.5	15	185	8.0	1,846	0.5	49	714	31.1	6,872	0.5	31
65-74	22	23.9	216	0.8	37	9	9.8	88	1.0	72	14	15.2	154	0.5	32
75-84	3	4.2	31	0.3	4	4	5.6	44	0.6	10	1	1.4	7	0.4	5
85 and older	3	6.3	16	0.2	8	0	0.0	0	0.0	0	2	4.2	15	0.1	6
Male															
All Males	6,754	8.9	64,207	0.4	26	2,257	3.0	22,694	0.8	86	4,126	5.5	40,857	0.6	29
Male, Disabled															
All Ages	3,007	33.3	30,500	0.6	45	1,710	18.9	17,778	0.8	95	2,408	26.6	25,054	0.6	32
5 and younger	37	8.5	373	0.1	1	48	11.1	517	0.8	55	3	0.7	36	0.4	11
6-14	94	7.3	1,028	0.1	1	226	17.6	2,439	0.8	107	168	13.1	1,815	0.7	25
15-20	169	14.4	1,825	0.2	4	236	20.1	2,489	0.8	119	256	21.8	2,776	0.6	26
21-44	822	29.2	8,325	0.5	38	639	22.7	6,518	0.9	103	718	25.5	7,344	0.6	34
45-64	1,883	56.6	18,942	0.8	56	561	16.9	5,815	0.8	74	1,260	37.9	13,060	0.6	33
65-74	2	13.3	7	1.4	11	0	0.0	0	0.0	0	3	20.0	23	1.0	31
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^{a, b, c}
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic						ANTICONVULSANT					ANTIDEPRESSANTS				
	Number of Users	Users as % of All Benes		Mean Number of		Number of Users	Users as % of All Benes		Mean Number of		Number of Users	Users as % of All Benes		Mean Number of		
		Among Users	Benefit Months	Rx per Benefit Month	Mean Rx \$ Benefit		Among Users	Benefit Months	Rx per Benefit Month	Mean Rx \$ Benefit		Among Users	Benefit Months	Rx per Benefit Month	Mean Rx \$ Benefit	
Male, Other Eligibles																
All Ages	3,747	5.6	33,707	0.3	9	547	0.8	4,916	0.6	54	1,718	2.6	15,803	0.5	24	
5 and younger	376	1.4	3,602	0.1	1	46	0.2	328	0.5	34	17	0.1	168	0.3	4	
6-14	655	2.8	6,341	0.1	1	195	0.8	1,876	0.6	63	503	2.2	5,073	0.6	22	
15-20	940	9.3	8,521	0.2	2	122	1.2	1,065	0.7	57	604	6.0	5,248	0.6	24	
21-44	1,352	24.8	11,365	0.4	18	128	2.4	1,122	0.5	47	403	7.4	3,514	0.4	22	
45-64	404	33.8	3,700	0.5	22	49	4.1	463	0.5	41	174	14.6	1,672	0.5	30	
65-74	14	17.1	149	0.4	7	3	3.7	36	1.1	38	10	12.2	87	0.5	24	
75-84	5	9.3	27	0.3	6	4	7.4	26	0.7	13	6	11.1	39	0.8	47	
85 and older	1	2.6	2	4.0	36	0	0.0	0	0.0	0	1	2.6	2	0.5	35	
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	

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

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^{a, b, c}
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	ANTIASTHMATIC					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIDIABETIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	16,093	9.1	156,677	0.3	\$22	4,821	2.7	45,950	0.7	\$60	4,094	2.3	40,437	0.6	\$44
Female															
All Females	9,337	9.2	91,113	0.3	22	1,616	1.6	15,730	0.7	61	2,713	2.7	26,808	0.6	43
Female, Disabled															
All Ages	3,189	36.5	34,728	0.4	34	359	4.1	3,774	0.7	76	1,681	19.3	17,854	0.6	48
5 and younger	66	20.8	721	0.2	15	1	0.3	4	0.3	110	0	0.0	0	0.0	0
6-14	166	24.0	1,847	0.3	16	116	16.8	1,174	0.7	65	3	0.4	36	0.4	15
15-20	120	16.3	1,323	0.4	41	68	9.3	698	0.7	58	32	4.4	341	0.7	37
21-44	711	24.7	7,758	0.3	27	72	2.5	795	0.6	76	288	10.0	3,115	0.6	42
45-64	2,118	51.7	22,992	0.4	38	102	2.5	1,103	0.6	100	1,357	33.1	14,350	0.6	49
65-74	8	61.5	87	0.4	44	0	0.0	0	0.0	0	1	7.7	12	0.5	37
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	6,148	6.6	56,385	0.2	15	1,257	1.3	11,956	0.7	56	1,032	1.1	8,954	0.5	33
5 and younger	1,198	4.8	11,113	0.2	12	33	0.1	297	0.5	48	1	0.0	11	0.7	53
6-14	1,450	6.4	13,672	0.2	14	727	3.2	7,228	0.7	55	65	0.3	582	0.8	56
15-20	1,012	7.0	9,107	0.2	11	283	2.0	2,569	0.7	58	98	0.7	795	0.6	33
21-44	2,082	7.3	18,508	0.3	17	182	0.6	1,572	0.5	58	616	2.2	5,261	0.5	27
45-64	392	17.1	3,834	0.4	30	32	1.4	290	0.6	60	225	9.8	2,005	0.6	43
65-74	14	15.2	151	0.3	34	0	0.0	0	0.0	0	22	23.9	240	0.5	27
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	7.0	60	0.4	6
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male															
All Males	6,756	8.9	65,564	0.3	20	3,205	4.2	30,220	0.7	60	1,381	1.8	13,629	0.7	47
Male, Disabled															
All Ages	1,776	19.6	18,768	0.4	34	662	7.3	6,784	0.7	71	964	10.7	10,020	0.7	48
5 and younger	130	30.0	1,369	0.3	19	12	2.8	138	0.5	37	1	0.2	12	1.3	20
6-14	301	23.4	3,319	0.4	23	335	26.0	3,362	0.8	63	14	1.1	154	0.7	66
15-20	167	14.2	1,868	0.4	25	207	17.7	2,187	0.7	67	28	2.4	311	0.6	41
21-44	287	10.2	3,058	0.4	23	62	2.2	601	0.6	69	156	5.5	1,586	0.7	52
45-64	883	26.6	9,100	0.5	44	46	1.4	496	0.8	157	763	23.0	7,949	0.7	47
65-74	8	53.3	54	0.9	79	0	0.0	0	0.0	0	2	13.3	8	1.1	82
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^{a, b, c}
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	ANTIASTHMATIC					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIDIABETIC				
	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	
		Benefit Months		Rx per Benefit	Rx per Benefit		Rx per Benefit		Rx per Benefit	Rx per Benefit		Rx per Benefit			
Male, Other Eligibles															
All Ages	4,980	7.5	46,796	0.2	15	2,543	3.8	23,436	0.7	56	417	0.6	3,609	0.6	43
5 and younger	1,941	7.3	18,178	0.2	13	78	0.3	766	0.4	26	0	0.0	0	0.0	0
6-14	1,936	8.4	18,664	0.3	16	1,843	8.0	17,072	0.7	56	57	0.2	493	1.0	69
15-20	685	6.8	6,323	0.3	17	584	5.8	5,283	0.7	60	53	0.5	484	0.6	55
21-44	285	5.2	2,382	0.3	17	28	0.5	226	0.4	58	147	2.7	1,161	0.6	36
45-64	115	9.6	1,093	0.4	28	10	0.8	89	0.8	122	137	11.5	1,261	0.5	38
65-74	12	14.6	135	0.3	23	0	0.0	0	0.0	0	7	8.5	56	0.8	51
75-84	6	11.1	21	0.7	41	0	0.0	0	0.0	0	15	27.8	152	0.5	25
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	2.6	2	0.5	3
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Oregon, 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^{a, b, c}
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	ANTIVIRAL					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 Beneficiaries	Number of Benefit Months
All	1,379	0.8	13,322	0.3	\$113	7,468	4.2	72,774	0.4	\$20	177,543	883,917
Female												
All Females	966	0.9	9,245	0.3	67	5,017	4.9	49,052	0.4	19	101,992	496,649
Female, Disabled												
All Ages	292	3.3	3,197	0.3	98	2,422	27.7	25,731	0.5	26	8,732	70,788
5 and younger	3	0.9	24	0.3	105	54	17.0	573	0.4	21	318	2,471
6-14	22	3.2	246	0.2	13	64	9.3	710	0.5	28	691	6,074
15-20	21	2.9	212	0.2	11	83	11.3	877	0.5	27	734	6,181
21-44	95	3.3	1,069	0.4	125	607	21.1	6,379	0.5	23	2,874	22,360
45-64	151	3.7	1,646	0.4	104	1,609	39.3	17,133	0.5	28	4,099	33,590
65-74	0	0.0	0	0.0	0	4	30.8	47	0.6	14	13	87
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	13
85 and older	0	0.0	0	0.0	0	1	100.0	12	0.7	15	1	12
Female, Other Eligibles												
All Ages	674	0.7	6,048	0.2	50	2,595	2.8	23,321	0.3	12	93,260	425,861
5 and younger	37	0.1	367	0.1	4	248	1.0	2,109	0.2	13	25,210	108,354
6-14	59	0.3	558	0.2	21	210	0.9	2,060	0.2	13	22,525	118,297
15-20	120	0.8	1,029	0.2	9	411	2.9	3,554	0.2	7	14,402	68,074
21-44	394	1.4	3,458	0.3	50	1,371	4.8	12,205	0.3	12	28,613	116,571
45-64	64	2.8	636	0.3	169	322	14.0	3,066	0.4	17	2,299	13,089
65-74	0	0.0	0	0.0	0	16	17.4	158	0.5	29	92	616
75-84	0	0.0	0	0.0	0	9	12.7	92	0.4	9	71	503
85 and older	0	0.0	0	0.0	0	8	16.7	77	0.5	8	48	357
Male												
All Males	413	0.5	4,077	0.4	216	2,451	3.2	23,722	0.4	22	75,550	387,265
Male, Disabled												
All Ages	256	2.8	2,569	0.5	296	1,467	16.2	14,999	0.5	26	9,041	69,256
5 and younger	4	0.9	44	0.3	34	80	18.5	823	0.4	23	433	3,269
6-14	16	1.2	191	0.1	7	90	7.0	961	0.5	29	1,286	11,276
15-20	15	1.3	164	0.3	50	90	7.7	1,012	0.5	30	1,172	9,867
21-44	86	3.1	816	0.5	287	394	14.0	3,932	0.5	25	2,811	20,719
45-64	135	4.1	1,354	0.6	381	811	24.4	8,258	0.5	27	3,324	24,050
65-74	0	0.0	0	0.0	0	2	13.3	13	0.8	64	15	75
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^{a, b, c}
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	ANTIVIRAL						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 Beneficiaries	Number of Benefit Months
Male, Other Eligibles												
All Ages	157	0.2	1,508	0.2	80	984	1.5	8,723	0.3	13	66,509	318,009
5 and younger	38	0.1	396	0.1	5	281	1.1	2,295	0.3	14	26,514	115,285
6-14	49	0.2	520	0.2	8	167	0.7	1,672	0.2	10	23,060	119,903
15-20	30	0.3	285	0.4	138	159	1.6	1,417	0.3	8	10,124	53,038
21-44	24	0.4	136	0.3	158	243	4.5	2,066	0.3	17	5,441	22,473
45-64	16	1.3	171	0.4	316	114	9.5	1,082	0.4	18	1,195	6,087
65-74	0	0.0	0	0.0	0	8	9.8	96	0.7	11	82	517
75-84	0	0.0	0	0.0	0	9	16.7	70	0.4	10	54	428
85 and older	0	0.0	0	0.0	0	3	7.7	25	1.0	28	39	278
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	3

Source: Data for this table are from the MAX 2006 file for Oregon, 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^{a, b}
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	\$456	7.3	259	2,374
Age				
0-64	522	8.4	213	1,974
65-74	809	9.3	5	49
75-84	66	1.4	19	161
85 and older	9	0.6	22	190
Unknown	0	0.0	0	0
Gender				
Female	481	7.5	129	1,210
Male	430	7.2	130	1,164
Unknown	0	0.0	0	0
Race				
White	431	7.1	224	2,060
African American	695	9.9	14	121
Other/unknown	569	8.2	21	193
Basis of Eligibility^c				
Aged	130	2.0	45	399
Disabled	522	8.4	214	1,975
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2006 file for Oregon, 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 448 beneficiaries who were in nursing facilities for part of their enrollment and their 3,472 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^{a, b, c, d, e}
 NONDUAL BENEFICIARIES, OREGON, 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	0.6	0.1	0.0	0.5	\$28	\$17	\$0	\$11	\$47	\$139	\$39	\$23	902	\$42,355	150	57.9	1,491
Biologicals	0.1	0.1	0.0	0.0	5	3	0	2	34	32	0	37	40	1,347	27	10.4	294
Antineoplastic Agents	1.0	0.1	0.0	0.9	56	23	0	33	57	245	0	37	124	7,043	12	4.6	126
Endocrine/Metabolic Drugs	1.2	0.4	0.0	0.7	50	35	3	13	43	88	60	18	1,100	47,713	97	37.5	950
Cardiovascular Agents	2.1	0.4	0.0	1.6	65	36	0	28	31	82	34	17	2,059	63,822	110	42.5	985
Respiratory Agents	0.9	0.4	0.0	0.4	54	47	0	7	62	110	0	16	707	43,720	80	30.9	806
Gastrointestinal Agents	1.1	0.3	0.1	0.8	49	30	3	16	45	107	48	21	1,311	58,672	125	48.3	1,201
Genitourinary Agents	0.6	0.2	0.1	0.4	27	15	5	7	45	96	79	18	357	16,039	57	22.0	593
CNS Drugs	2.0	0.7	0.1	1.2	161	123	11	27	79	169	86	23	3,750	296,061	189	73.0	1,843
Stimulants/Anti-obesity/Anorexia	1.1	1.1	0.0	0.0	188	188	0	0	163	163	0	0	31	5,064	3	1.2	27
Miscellaneous Psychological/Neurological Agents	0.9	0.9	0.0	0.0	303	301	0	2	321	334	0	38	151	48,409	18	6.9	160
Analgesics and Anesthetics	1.7	0.1	0.0	1.6	93	6	0	87	56	89	59	54	2,133	118,590	137	52.9	1,276
Neuromuscular Agents	1.9	0.7	0.0	1.2	172	124	1	46	89	174	78	39	2,804	249,476	139	53.7	1,454
Nutritional Products	0.9	0.0	0.0	0.9	17	1	1	16	18	26	13	18	740	13,511	80	30.9	791
Hematological Agents	1.3	0.3	0.0	0.9	85	70	1	14	66	243	18	14	705	46,693	61	23.6	551
Topical Products	0.5	0.1	0.0	0.3	15	8	2	5	32	59	66	16	443	14,107	88	34.0	919
Miscellaneous Products	0.3	0.0	0.0	0.2	8	1	0	6	30	148	0	26	26	786	10	3.9	104
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	56	0	0	0	142	0	0	0	61	8,679	13	5.0	156
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	17,444	1,082,087	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Oregon, 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 448 beneficiaries who were in nursing facilities for part of their enrollment and their 3,472 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 Oregon, 0.3 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.
 Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NONDUAL BENEFICIARIES, OREGON, 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	\$180,903	84	32.4	869	0.9	\$223	\$208	
ANTICONVULSANT	211,537	155	59.8	1,655	1.2	110	128	
ANTIDEPRESSANTS	83,978	180	69.5	1,786	0.9	52	47	
ANALGESICS - Narcotic	109,088	164	63.3	1,530	1.2	59	71	
ULCER DRUGS	52,905	149	57.5	1,504	0.7	49	35	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	48,505	23	8.9	208	0.7	315	233	
ANTIASTHMATIC	39,801	89	34.4	889	0.6	74	45	
ANTIDIABETIC	36,327	83	32.0	832	1.0	43	44	
MUSCULOSKELETAL THERAPY AGENTS	34,807	66	25.5	693	1.1	46	50	
ANTIANSXIETY AGENTS	18,544	119	45.9	1,160	0.8	20	16	
Total	816,395	1,112	n.a.	11,126	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Oregon, 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 448 beneficiaries who were in nursing facilities for part of their enrollment and their 3,472 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, OREGON, 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 \$
All	10,538	\$816,395	84	32.4	869	0.9	\$208	155	59.8	1,655	1.2	\$128
Female												
All Females	5,392	446,446	44	34.1	456	1.0	216	78	60.5	842	1.1	136
Female, Disabled												
All Ages	5,094	421,579	40	38.1	413	0.9	199	75	71.4	810	1.1	140
64 or younger	5,094	421,579	40	38.1	413	0.9	199	75	71.4	810	1.1	140
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
Female, Other Eligibles												
All Ages	298	24,867	4	16.7	43	1.5	383	3	12.5	32	0.7	21
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	230	23,670	3	100.0	36	1.4	449	2	66.7	24	0.8	16
75-84	20	461	0	0.0	0	0.0	0	1	10.0	8	0.3	35
85 and older	48	736	1	9.1	7	1.7	45	0	0.0	0	0.0	0
Male												
All Males	5,146	369,949	40	30.8	413	0.9	200	77	59.2	813	1.2	120
Male, Disabled												
All Ages	4,955	356,563	39	35.8	410	0.9	199	76	69.7	810	1.2	120
64 or younger	4,955	356,563	39	36.1	410	0.9	199	76	70.4	810	1.2	120
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
Male, Other Eligibles												
All Ages	191	13,386	1	4.8	3	1.7	347	1	4.8	3	1.0	32
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	34	2,791	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	141	10,397	1	11.1	3	1.7	347	1	11.1	3	1.0	32
85 and older	16	198	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Oregon, 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 448 beneficiaries who were in nursing facilities for part of their enrollment and their 3,472 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^a, b, c, d
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ANALGESICS - Narcotic					ULCER DRUGS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	180	69.5	1,786	0.9	\$47	164	63.3	1,530	1.2	\$71	149	57.5	1,504	0.7	\$35
Female															
All Females	79	61.2	792	0.9	48	78	60.5	765	1.2	76	81	62.8	845	0.7	38
Female, Disabled															
All Ages	78	74.3	780	0.9	48	76	72.4	741	1.1	72	74	70.5	769	0.7	41
64 or younger	78	74.3	780	0.9	48	76	72.4	741	1.1	72	74	70.5	769	0.7	41
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
Female, Other Eligibles															
All Ages	1	4.2	12	0.7	3	2	8.3	24	2.3	195	7	29.2	76	0.7	6
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	12	0.7	3	2	66.7	24	2.3	195	2	66.7	24	1.1	8
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	30.0	28	0.6	6
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	18.2	24	0.5	5
Male															
All Males	101	77.7	994	0.9	47	86	66.2	765	1.2	67	68	52.3	659	0.7	32
Male, Disabled															
All Ages	97	89.0	965	0.9	46	84	77.1	760	1.2	67	66	60.6	644	0.7	33
64 or younger	97	89.8	965	0.9	46	84	77.8	760	1.2	67	66	61.1	644	0.7	33
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	4	19.0	29	0.9	60	2	9.5	5	2.2	18	2	9.5	15	0.5	14
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	3	33.3	27	1.0	62	1	11.1	3	1.0	7	2	22.2	15	0.5	14
85 and older	1	9.1	2	0.5	35	1	9.1	2	4.0	36	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Oregon, 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 448 beneficiaries who were in nursing facilities for part of their enrollment and their 3,472 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIASTHMATIC					ANTIDIABETIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	23	8.9	208	0.7	\$233	89	34.4	889	0.6	\$45	83	32.0	832	1.0	\$44
Female															
All Females	12	9.3	98	0.9	406	45	34.9	508	0.6	43	42	32.6	434	1.1	43
Female, Disabled															
All Ages	11	10.5	91	0.9	435	43	41.0	484	0.6	43	38	36.2	386	1.1	47
64 or younger	11	10.5	91	0.9	435	43	41.0	484	0.6	43	38	36.2	386	1.1	47
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
Female, Other Eligibles															
All Ages	1	4.2	7	0.9	32	2	8.3	24	0.5	33	4	16.7	48	0.6	8
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	24	0.5	33	4	133.3	48	0.6	8
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	1	9.1	7	0.9	32	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male															
All Males	11	8.5	110	0.6	79	44	33.8	381	0.6	47	41	31.5	398	1.0	45
Male, Disabled															
All Ages	9	8.3	86	0.5	58	40	36.7	360	0.7	49	34	31.2	324	0.9	38
64 or younger	9	8.3	86	0.5	58	40	37.0	360	0.7	49	34	31.5	324	0.9	38
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	2	9.5	24	1.1	154	4	19.0	21	0.4	20	7	33.3	74	1.0	75
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	1	100.0	12	0.1	1	3	300.0	36	0.9	76
75-84	2	22.2	24	1.1	154	3	33.3	9	0.8	46	3	33.3	36	1.3	78
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	9.1	2	0.5	3
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Oregon, 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 448 beneficiaries who were in nursing facilities for part of their enrollment and their 3,472 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^{a, b, c, d}
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	MUSCULOSKELETAL THERAPY AGENTS						ANTI-ANXIETY AGENTS						
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	66	25.5	693	1.1	\$50		119	45.9	1,160	0.8	\$16	259	2,374
Female													
All Females	37	28.7	389	1.1	45		53	41.1	551	0.8	16	129	1,210
Female, Disabled													
All Ages	36	34.3	377	1.2	44		49	46.7	503	0.8	17	105	1,008
64 or younger	36	34.3	377	1.2	44		49	46.7	503	0.8	17	105	1,008
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
Female, Other Eligibles													
All Ages	1	4.2	12	1.1	74		4	16.7	48	0.7	5	24	202
64 or younger	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
65-74	1	33.3	12	1.1	74		2	66.7	24	0.7	7	3	36
75-84	0	0.0	0	0.0	0		1	10.0	12	0.2	1	10	72
85 and older	0	0.0	0	0.0	0		1	9.1	12	1.4	7	11	94
Male													
All Males	29	22.3	304	1.0	57		66	50.8	609	0.8	16	130	1,164
Male, Disabled													
All Ages	29	26.6	304	1.0	57		55	50.5	506	0.9	19	109	967
64 or younger	29	26.9	304	1.0	57		55	50.9	506	0.9	19	108	966
65-74	0	0.0	0	0.0	0		0	0.0	0	0.0	0	1	1
75-84	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
Male, Other Eligibles													
All Ages	0	0.0	0	0.0	0		11	52.4	103	0.3	5	21	197
64 or younger	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
65-74	0	0.0	0	0.0	0		1	100.0	12	0.2	3	1	12
75-84	0	0.0	0	0.0	0		5	55.6	48	0.4	9	9	89
85 and older	0	0.0	0	0.0	0		5	45.5	43	0.1	1	11	96
Unknown	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2006 file for Oregon, 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 448 beneficiaries who were in nursing facilities for part of their enrollment and their 3,472 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^{a,b}
 OREGON, 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 Nonduals Rx \$	Total Number of Beneficiaries	
All	23,399	13.2	0.7	119,725	\$9	\$1,548,840	\$13	2.6	177,543	
Age										
5 and younger	5,383	10.3	0.2	12,184	3	172,816	14	8.1	52,475	
6-14	3,615	7.6	0.2	10,609	4	198,337	19	2.1	47,562	
15-20	2,492	9.4	0.3	8,158	4	98,388	12	1.6	26,432	
21-44	7,140	18.0	0.9	37,045	11	452,549	12	2.3	39,739	
45-64	4,614	42.3	4.6	49,682	56	608,582	12	2.8	10,917	
65-74	62	30.7	3.6	736	37	7,420	10	4.5	202	
75-84	55	43.3	5.4	692	40	5,039	7	18.4	127	
85 and older	38	43.2	7.0	619	65	5,709	9	103.1	88	
Unknown	0	0.0	0.0	0	0	0	0	0.0	1	
Basis of Eligibility^c										
Aged	154	37.9	4.7	1,904	41	16,755	9	7.1	406	
Disabled	6,723	37.8	4.1	72,672	57	1,013,910	14	2.6	17,773	
Adults	6,309	15.2	0.5	21,660	5	220,563	10	2.4	41,437	
Children	10,051	8.6	0.2	22,653	2	288,207	13	2.8	117,531	
Unknown	162	40.9	2.1	836	24	9,405	11	1.6	396	
Gender										
Female	14,891	14.6	0.7	76,189	10	980,055	13	3.0	101,993	
Male	8,508	11.3	0.6	43,536	8	568,785	13	2.1	75,550	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Race										
White	17,365	14.4	0.8	97,392	11	1,282,927	13	2.6	120,996	
African American	572	8.0	0.4	2,898	8	56,232	19	4.1	7,136	
Other/unknown	5,462	11.1	0.4	19,435	4	209,681	11	2.6	49,411	
Use of Nursing Facilities^d										
Entire year	193	74.5	11.8	3,053	274	70,888	23	6.6	259	
Part year	350	78.1	11.1	4,956	205	91,725	19	5.3	448	
None	22,856	12.9	0.6	111,716	8	1,386,227	12	2.4	176,836	
Maintenance Assistance Status										
Cash	11,559	18.1	1.3	80,898	17	1,065,786	13	2.6	63,793	
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0	
Poverty related	5,449	7.5	0.2	11,175	1	107,908	10	3.0	72,330	
Other/unknown	6,391	15.4	0.7	27,652	9	375,146	14	2.6	41,420	

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

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

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

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

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

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

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
All	0.1	\$2	\$13	\$0	\$0	883,917
Age						
5 and younger	0.1	1	14	0	0	229,379
6-14	0.0	1	19	0	0	255,550
15-20	0.1	1	12	0	0	137,160
21-44	0.2	2	12	0	1	182,123
45-64	0.6	8	12	0	3	76,816
65-74	0.6	6	10	0	1	1,295
75-84	0.7	5	7	0	1	944
85 and older	1.0	9	9	0	2	647
Unknown	0.0	0	0	0	0	3
Basis of Eligibility^c						
Aged	0.7	6	9	0	1	2,928
Disabled	0.5	7	14	0	2	140,044
Adults	0.1	1	10	0	1	168,921
Children	0.0	1	13	0	0	568,508
Unknown	0.2	3	11	0	1	3,516
Gender						
Female	0.2	2	13	0	1	496,652
Male	0.1	1	13	0	0	387,265
Unknown	0.0	0	0	0	0	0
Race						
White	0.2	2	13	0	1	638,868
African American	0.1	2	19	0	0	26,956
Other/unknown	0.1	1	11	0	0	218,093
Use of Nursing Facilities^d						
Entire year	1.3	30	23	0	7	2,374
Part year	1.4	26	19	0	5	3,472
None	0.1	2	12	0	0	878,071
Maintenance Assistance Status						
Cash	0.2	3	13	0	1	338,716
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	0	10	0	0	289,945
Other/unknown	0.1	1	14	0	0	255,256

Source: Data for this table are from the MAX 2006 file for Oregon, 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^{a,b,c}
 OREGON, 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				
All	30,185	\$51	\$1,548,840	100.0		119,725	\$13	100.0	
Anorexia or weight loss/gain	5	146	730	0.0		19	38	0.0	
Fertility drugs	2	26	52	0.0		2	26	0.0	
Drugs for cosmetic purposes	0	0	0	0.0		0	0	0.0	
Cough and cold medications	4,705	24	111,151	7.2		8,064	14	6.7	
Vitamins and minerals	4,673	34	157,891	10.2		14,327	11	12.0	
Non-prescription drugs	12,557	61	771,216	49.8		55,245	14	46.1	
Barbiturates	208	50	10,486	0.7		1,605	7	1.3	
Benzodiazepines	7,486	59	439,683	28.4		38,581	11	32.2	
Other Part D Excl Rx Drugs	549	105	57,631	3.7		1,882	31	1.6	

Source: Data for this table are from the MAX 2006 file for Oregon, 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^{a, b}
 NONDUAL BENEFICIARIES, OREGON, 2006

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
All	388,847	1,095	43,070	84,354	259,932	396	3,398,469	10,928	450,992	686,448	2,246,553	3,548
Age												
5 and younger	118,001	0	1,579	0	116,422	0	998,369	0	16,680	0	981,689	0
6-14	105,521	0	4,736	13	100,772	0	954,734	0	52,065	77	902,592	0
15-20	53,213	0	4,130	7,456	41,626	1	452,436	0	44,067	55,823	352,537	9
21-44	84,432	2	13,554	69,686	1,104	86	715,809	24	140,169	565,304	9,685	627
45-64	26,584	83	19,003	7,190	1	307	266,547	931	197,528	65,183	6	2,899
65-74	648	576	65	5	0	2	6,283	5,773	458	39	0	13
75-84	315	311	2	2	0	0	3,116	3,089	13	14	0	0
85 and older	130	123	1	2	4	0	1,146	1,111	12	8	15	0
Unknown	3	0	0	0	3	0	29	0	0	0	29	0
Gender												
Female	221,285	663	22,314	69,417	128,495	396	1,926,915	6,728	236,835	566,898	1,112,906	3,548
Male	167,562	432	20,756	14,937	131,437	0	1,471,554	4,200	214,157	119,550	1,133,647	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	264,061	738	35,329	66,571	161,088	335	2,316,424	7,556	369,004	542,413	1,394,410	3,041
African American	20,755	52	2,458	4,389	13,846	10	192,884	511	26,021	38,384	127,881	87
Other/unknown	104,031	305	5,283	13,394	84,998	51	889,161	2,861	55,967	105,651	724,262	420
Use of Nursing Facilities^c												
Entire year	432	55	376	0	1	0	4,219	521	3,686	0	12	0
Part year	687	30	640	15	1	1	6,651	279	6,207	147	12	6
None	387,728	1,010	42,054	84,339	259,930	395	3,387,599	10,128	441,099	686,301	2,246,529	3,542
Maintenance Assistance Status												
Cash	151,736	778	36,814	37,583	76,561	0	1,414,430	8,446	405,394	312,340	688,250	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	147,245	0	8	18,602	128,239	396	1,133,398	0	72	106,512	1,023,266	3,548
Other/unknown	89,866	317	6,248	28,169	55,132	0	850,641	2,482	45,526	267,596	535,037	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	82,812	297	13,253	16,486	52,388	388	673,055	2,508	123,455	117,445	426,177	3,470
FFS part year, with Rx claims	22,074	58	2,910	9,354	9,744	8	215,327	590	29,165	87,428	98,066	78
FFS part year, no Rx claims	72,657	51	1,610	15,597	55,399	0	610,291	397	13,907	117,743	478,244	0
MC all year, with Rx claims	36,580	216	14,021	14,413	7,930	0	386,278	2,404	160,540	142,365	80,969	0
MC all year, no Rx claims	174,724	473	11,276	28,504	134,471	0	1,513,518	5,029	123,925	221,467	1,163,097	0

Source: Data for this table are from the MAX 2006 file for Oregon, 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 I of Table 1 for methodology used to determine nursing facility residence.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

APPENDIX TABLE A.2
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 NONDUAL BENEFICIARIES, OREGON, 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 Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	388,847	3,398,469	177,543	883,917	0	2,514,552
Fee-for-service (FFS) all year	82,812	673,055	82,812	673,055	0	0
FFS part year, with Rx claims	22,074	215,327	22,074	76,846	0	138,481
FFS part year, with no Rx claims	72,657	610,291	72,657	134,016	0	476,275
Managed care (MC) all year, with Rx claims	36,580	386,278	0	0	0	386,278
MC all year, with no Rx claims	174,724	1,513,518	0	0	0	1,513,518

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