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

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TABLE NO.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, TEXAS, 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	3,267,871	6,809	335,353	445,553	2,478,593	1,563	22,934,401	61,603	3,385,735	2,151,283	17,322,210	13,570
Age												
5 and younger	1,210,716	1	20,997	557	1,189,160	1	8,444,990	6	207,549	3,279	8,234,152	4
6-14	1,028,347	2	58,976	879	968,490	0	7,534,844	18	629,607	4,498	6,900,721	0
15-20	433,993	0	37,876	76,105	320,003	9	2,933,076	0	399,430	353,793	2,179,796	57
21-44	432,382	3	90,484	340,637	604	654	2,565,272	23	913,693	1,641,431	4,699	5,426
45-64	155,150	35	126,665	27,238	329	883	1,392,504	152	1,233,883	147,716	2,808	7,945
65-74	3,969	2,941	275	133	4	16	30,345	28,331	1,326	529	21	138
75-84	2,196	2,152	42	2	0	0	19,668	19,491	153	24	0	0
85 and older	1,716	1,675	38	2	1	0	13,691	13,582	94	13	2	0
Unknown	2	0	0	0	2	0	11	0	0	0	11	0
Gender												
Female	1,802,195	4,314	164,338	409,512	1,222,468	1,563	12,257,730	38,825	1,674,802	1,973,315	8,557,218	13,570
Male	1,465,621	2,492	171,011	36,040	1,256,078	0	10,676,395	22,765	1,710,918	177,966	8,764,746	0
Unknown	55	3	4	1	47	0	276	13	15	2	246	0
Race												
White	722,229	2,365	98,518	127,613	492,976	757	5,119,325	20,010	991,113	638,088	3,463,571	6,543
African American	633,519	1,378	86,666	107,716	437,562	197	4,173,094	12,538	854,659	481,022	2,823,216	1,659
Other/unknown	1,912,123	3,066	150,169	210,224	1,548,055	609	13,641,982	29,055	1,539,963	1,032,173	11,035,423	5,368
Use of Nursing Facilities^c												
Entire year	4,310	901	3,402	6	1	0	44,660	8,833	35,783	41	3	0
Part year	4,665	607	4,008	27	21	2	46,013	5,814	39,776	221	183	19
None	3,258,896	5,301	327,943	445,520	2,478,571	1,561	22,843,728	46,956	3,310,176	2,151,021	17,322,024	13,551
Maintenance Assistance Status												
Cash	544,560	4,119	327,685	62,484	150,272	0	4,822,575	41,614	3,316,242	303,174	1,161,545	0
Medically needy	76,467	0	0	75,392	1,075	0	507,390	0	0	501,108	6,282	0
Poverty-related	2,267,262	19	47	251,303	2,014,330	1,563	15,021,186	212	420	1,056,921	13,950,063	13,570
Other/unknown	379,582	2,671	7,621	56,374	312,916	0	2,583,250	19,777	69,073	290,080	2,204,320	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	1,736,852	6,019	263,121	270,543	1,195,623	1,546	14,092,334	54,054	2,727,786	1,522,739	9,774,267	13,488
FFS part year, with Rx claims	794,778	183	28,179	109,274	657,128	14	3,641,928	749	171,004	319,144	3,150,967	64
FFS part year, no Rx claims	320,903	37	4,280	22,648	293,935	3	1,229,357	179	22,585	53,592	1,152,983	18

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
a. Table ND.2 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
c. Please refer to footnote 1 of Table 1 for methodology used to determine nursing facility residence.
Beneficiaries = 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 NO.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, TEXAS, 2006

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid FFS \$ ^d	Number of Beneficiaries
All	72.1	6.6	\$458	\$70	\$2,570	17.8	3,267,871
Age							
5 and younger	76.5	5.9	235	40	2,032	11.5	1,210,716
6-14	66.9	5.0	363	72	1,502	24.2	1,028,347
15-20	66.3	5.1	398	78	2,283	17.4	433,993
21-44	75.7	7.6	695	91	4,255	16.3	432,382
45-64	79.5	23.0	2,304	100	9,609	24.0	155,150
65-74	69.1	17.7	1,528	86	9,329	16.4	3,369
75-84	46.1	9.7	655	68	9,588	6.8	2,196
85 and older	38.1	8.2	492	60	10,601	4.6	1,716
Unknown	50.0	1.5	115	76	1,577	7.3	2
Basis of Eligibility^e							
Aged	54.5	13.4	1,040	78	9,927	10.5	6,809
Disabled	80.4	19.5	2,240	115	11,183	20.0	335,353
Adults	75.6	5.1	271	53	2,339	11.6	445,553
Children	70.4	5.0	248	49	1,419	17.5	2,478,593
Unknown	56.9	8.1	1,182	146	12,659	9.3	1,563
Gender							
Female	73.6	6.7	441	66	2,524	17.5	1,802,195
Male	70.3	6.4	478	74	2,626	18.2	1,465,621
Unknown	21.8	1.7	239	137	2,017	11.9	55
Race							
White	72.6	7.9	672	86	3,373	19.9	722,229
African American	63.8	5.7	419	74	2,344	17.9	633,519
Other/unknown	74.7	6.4	390	61	2,341	16.6	1,912,123
Use of Nursing Facilities^f							
Entire year	92.0	79.9	6,316	79	42,653	14.8	4,310
Part year	93.4	59.5	4,695	79	43,846	10.7	4,665
None	72.1	6.4	444	69	2,457	18.1	3,258,896
Maintenance Assistance Status							
Cash	77.1	14.1	1,467	104	7,187	20.4	544,560
Medically needy	71.1	6.5	463	71	2,844	16.3	76,467
Poverty related	71.0	4.8	224	46	1,312	17.1	2,267,262
Other/unknown	72.0	6.1	404	67	3,401	11.9	379,582

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.

a. Table NO.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, IN, 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, IN, NC, NE, NY, TN, TX, UT, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.

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

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

Benef(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 NO.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, TEXAS, 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number		
	Mean Number of Rx	Mean Rx \$ of All Medicaid FFS ^c	Rx \$ as a Percentage of All Medicaid FFS ^c		More than 0, but 1 or Less		More than 1, but 2 or Less		More than 2, but 5 or Less		Mean \$, All Medicaid FFS ^d	Beneficiaries	Benefit Months
			None	Less	Less	Less	Less	10					
All	0.9	\$65	17.8	27.9	50.6	10.1	7.8	2.4	1.3	\$366	3,267,871	22,934,401	
Age													
5 and younger	0.8	34	11.5	23.5	55.9	10.2	7.1	2.2	1.2	291	1,210,716	8,444,990	
6-14	0.7	50	24.2	33.1	51.3	7.5	5.6	1.6	0.8	205	1,028,347	7,534,844	
15-20	0.8	59	17.4	33.7	48.6	8.0	6.6	2.2	0.9	338	433,993	2,933,076	
21-44	1.3	117	16.3	24.3	45.2	14.1	10.7	3.7	1.9	717	432,382	2,565,272	
45-64	2.6	257	24.0	20.5	26.1	20.5	22.1	6.7	4.1	1,071	155,150	1,392,504	
65-74	2.0	170	16.4	30.9	29.1	15.1	15.6	6.2	3.1	1,036	3,369	30,345	
75-84	1.1	73	6.8	53.9	28.9	6.5	6.9	4.1	1.8	1,071	2,196	19,668	
85 and older	1.0	62	4.6	61.9	21.8	4.5	6.8	4.3	0.6	1,329	1,716	13,691	
Unknown	0.3	21	7.3	50.0	50.0	0.0	0.0	0.0	0.0	287	2	11	
Basis of Eligibility													
Aged	1.5	115	10.5	45.5	27.2	9.7	10.3	5.1	2.2	1,097	6,809	61,603	
Disabled	1.9	222	20.0	19.6	37.4	17.0	17.7	5.3	2.9	1,108	335,353	3,385,735	
Adults	1.1	56	11.6	24.4	46.9	13.5	9.9	3.6	1.7	484	445,553	2,151,283	
Children	0.7	36	17.5	29.6	53.1	8.5	6.0	1.8	1.0	203	2,478,593	17,322,210	
Unknown	0.9	136	9.3	43.1	28.4	19.9	8.4	0.1	0.1	1,458	1,563	13,570	
Gender													
Female	1.0	65	17.5	26.4	50.8	10.5	8.2	2.7	1.4	371	1,802,195	12,257,730	
Male	0.9	66	18.2	29.7	50.3	9.5	7.3	2.1	1.1	361	1,465,621	10,676,395	
Unknown	0.3	48	11.9	78.2	16.4	3.6	1.8	0.0	0.0	402	55	276	
Race													
White	1.1	95	19.9	27.4	48.6	10.9	8.8	2.7	1.6	476	722,229	5,119,325	
African American	0.9	64	17.9	36.2	44.5	8.3	7.2	2.6	1.3	356	633,519	4,173,094	
Other/unknown	0.9	55	16.6	25.3	53.3	10.4	7.5	2.3	1.2	328	1,912,123	13,641,982	
Use of Nursing Facilities^f													
Entire year	7.7	610	14.8	8.0	7.1	4.1	17.8	37.7	25.3	4,116	4,310	44,660	
Part year	6.0	476	10.7	6.6	9.4	8.7	29.7	29.6	16.0	4,445	4,665	46,013	
None	0.9	63	18.1	27.9	50.7	10.1	7.7	2.3	1.2	351	3,258,896	22,843,728	
Maintenance Assistance Status													
Cash	1.6	166	20.4	22.9	42.4	14.6	13.8	4.1	2.3	812	544,560	4,822,575	
Medically needy	1.0	70	16.3	28.9	46.1	16.9	7.6	0.4	0.2	429	76,467	507,390	
Poverty related	0.7	34	17.1	29.0	52.0	8.9	6.6	2.3	1.2	198	2,267,262	15,021,186	
Other/unknown	0.9	59	11.9	28.0	54.5	9.1	6.3	1.4	0.6	500	379,582	2,583,250	

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 a. Table NO.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, IN, 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, IN, 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 NO.5
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 NONDUAL BENEFICIARIES, TEXAS, 2006

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	0.9	\$65	\$70	0.3	\$48	\$150	0.1	\$5	\$74	0.5	\$12	\$22
Age												
5 and younger	0.8	34	40	0.2	21	94	0.1	3	37	0.5	10	18
6-14	0.7	50	72	0.3	39	136	0.1	3	56	0.3	8	22
15-20	0.8	59	78	0.3	46	159	0.0	4	92	0.4	9	21
21-44	1.3	117	91	0.4	90	202	0.1	10	151	0.8	18	23
45-64	2.6	257	100	1.0	192	197	0.1	25	170	1.4	40	28
65-74	2.0	170	86	0.8	126	158	0.1	18	145	1.0	26	25
75-84	1.1	73	68	0.4	53	128	0.1	8	107	0.6	13	22
85 and older	1.0	62	60	0.4	45	119	0.1	5	87	0.6	12	20
Unknown	0.3	21	76	0.3	21	76	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	1.5	115	78	0.6	85	145	0.1	12	128	0.8	19	23
Disabled	1.9	222	115	0.8	177	223	0.1	17	150	1.0	28	28
Adults	1.1	56	53	0.3	37	113	0.0	7	136	0.7	13	18
Children	0.7	36	49	0.2	24	107	0.1	3	43	0.4	8	19
Unknown	0.9	136	146	0.4	105	288	0.1	17	316	0.5	14	26
Gender												
Female	1.0	65	66	0.3	47	142	0.1	6	82	0.6	12	21
Male	0.9	66	74	0.3	50	159	0.1	5	65	0.5	11	22
Unknown	0.3	48	137	0.3	41	163	0.0	1	44	0.1	6	69
Race												
White	1.1	95	86	0.4	72	169	0.1	8	109	0.6	15	24
African American	0.9	64	74	0.3	49	158	0.0	4	89	0.5	10	21
Other/unknown	0.9	55	61	0.3	39	136	0.1	5	59	0.5	11	21
Use of Nursing Facilities^e												
Entire year	7.7	610	79	2.8	449	160	0.4	51	114	4.4	110	25
Part year	6.0	476	79	2.0	344	169	0.3	39	120	3.7	93	25
None	0.9	63	69	0.3	47	149	0.1	5	74	0.5	11	21
Maintenance Assistance Status												
Cash	1.6	166	104	0.6	130	209	0.1	13	130	0.9	23	26
Medically needy	1.0	70	71	0.3	50	161	0.0	7	138	0.6	14	22
Poverty related	0.7	34	46	0.2	23	99	0.1	3	47	0.4	8	19
Other/unknown	0.9	59	67	0.3	45	142	0.1	4	65	0.5	11	21

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 a. Table ND.5 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 b. The Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Texas, 1.0 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.med-span.com/master-drug-database.aspx>.
 d. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services.
 e. Please refer to footnote 1 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, TEXAS, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Patented		Off-Patent		Patented		Off-Patent		Patented		Off-Patent		Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
	Total	Brand-Name	Brand-Name	Generic	Total	Brand-Name	Brand-Name	Generic	Total	Brand-Name	Brand-Name	Generic					
Anti-infective Agents	0.3	0.1	0.0	0.2	\$15	\$9	\$1	\$5	\$52	\$135	\$50	\$25	3,872,375	\$199,979,363	1,609,342	49.2	13,182,725
Biologicals	0.4	0.4	0.0	0.0	621	610	10	1	1569	1,557	2,796	1,979	11,794	18,502,614	4,083	0.1	29,781
Antineoplastic Agents	0.4	0.1	0.0	0.3	136	117	1	18	341	935	241	67	30,768	10,489,128	7,864	0.2	77,123
Endocrine/Metabolic Drugs	0.3	0.1	0.0	0.2	25	18	1	6	82	200	74	30	1,182,912	97,147,757	455,398	13.9	3,820,853
Cardiovascular Agents	0.7	0.2	0.1	0.4	48	29	10	8	66	118	171	20	1,189,625	78,944,941	173,934	5.3	1,653,145
Respiratory Agents	0.4	0.2	0.1	0.2	22	16	2	4	50	94	36	19	5,374,347	268,146,358	1,463,172	44.8	12,080,452
Gastrointestinal Agents	0.3	0.2	0.0	0.1	30	24	3	2	91	134	351	18	848,755	77,359,708	297,174	9.1	2,619,802
Genitourinary Agents	0.3	0.1	0.0	0.1	15	9	2	4	58	90	91	29	234,842	13,542,285	126,226	3.9	886,945
CNS Drugs	0.7	0.3	0.1	0.3	95	81	7	7	143	259	132	23	1,871,306	268,081,739	307,870	9.4	2,820,895
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.1	75	72	1	2	123	133	206	37	631,981	77,716,282	111,279	3.4	1,040,114
Miscellaneous Psychological/Neurological Agents	0.4	0.3	0.0	0.0	128	125	0	4	350	374	149	110	26,210	9,169,738	7,065	0.2	71,375
Analgesics and Anesthetics	0.3	0.0	0.0	0.3	10	5	1	4	34	240	296	15	2,398,878	80,529,947	963,531	29.5	8,012,298
Neuromuscular Agents	0.6	0.2	0.0	0.3	70	54	4	12	120	226	161	39	886,921	106,524,757	156,572	4.8	1,516,408
Nutritional Products	0.3	0.1	0.0	0.1	7	5	0	2	29	50	37	13	457,842	13,098,654	249,773	7.6	1,766,482
Hematological Agents	0.4	0.2	0.0	0.1	116	112	1	3	331	573	65	20	178,411	59,066,868	68,048	2.1	509,552
Topical Products	0.3	0.1	0.0	0.1	12	9	0	3	47	86	52	19	2,203,107	103,437,196	1,020,638	31.2	8,570,046
Miscellaneous Products	0.4	0.2	0.0	0.2	210	179	18	14	492	857	437	78	25,438	12,503,662	5,892	0.2	59,459
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	7	0	0	0	51	0	0	0	25,146	1,279,455	19,531	0.6	172,596
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.	21,450,658	1,495,520,452	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2005. This table was produced on 02/12/2010.
 a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 c. For information about these therapeutic categories, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Texas, 1.0 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 NO.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, TEXAS, 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	\$181,836,804	115,735	3.5	1,183,914	0.5	\$317	\$154
ANTIASTHMATIC	137,289,970	782,097	23.9	6,910,592	0.2	81	20
ANTI CONVULSANT	95,090,257	108,413	3.3	1,111,264	0.5	161	86
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	74,983,894	124,808	3.8	1,189,871	0.5	123	63
DERMATOLOGICAL	66,284,084	1,049,041	32.1	9,358,382	0.2	45	7
COUGH/COLD/ALLERGY	63,367,320	1,537,629	47.1	13,562,460	0.2	25	5
ANTIDEPRESSANTS	56,863,066	184,230	5.6	1,752,439	0.4	86	32
ULCER DRUGS	54,615,604	214,108	6.6	1,952,465	0.3	101	28
CEPHALOSPORINS	54,357,120	617,309	18.9	5,568,202	0.1	66	10
ANTIDIABETIC	42,303,762	94,015	2.9	922,544	0.4	113	46
Total	826,991,881	4,827,385	n.a.	43,512,133	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 a. Table NO.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>.
 Benef(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.

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, TEXAS, 2006

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIASTHMATIC			
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefits Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefits Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	9,855,452	\$826,991,881	115,735	3.5	1,183,914	0.5	\$154	782,097	23.9	6,910,592	0.2	\$20
Female												
All Females	5,047,149	418,668,974	55,264	3.1	556,121	0.5	146	367,675	20.4	3,247,159	0.2	19
Female, Disabled												
All Ages	1,521,256	210,489,096	36,094	22.0	388,483	0.5	162	53,130	32.3	581,857	0.3	30
5 and younger	59,025	4,727,658	230	2.6	2,517	0.4	84	5,461	62.8	59,350	0.3	30
6-14	162,246	19,206,042	3,245	16.9	35,542	0.5	125	8,183	42.5	92,546	0.3	28
15-20	110,312	15,689,107	3,254	22.5	35,606	0.5	143	3,783	26.1	42,810	0.3	26
45-64	385,309	63,469,929	14,063	29.9	149,592	0.4	164	10,170	21.6	110,059	0.3	25
45-64	803,538	107,316,542	15,288	20.5	165,136	0.5	174	25,496	34.1	276,853	0.3	33
65-74	764	75,274	13	8.2	87	0.4	99	34	21.5	234	0.2	25
75-84	47	4,288	1	3.3	3	0.3	193	1	3.3	2	0.5	45
85 and older	15	256	0	0.0	0	0.0	0	2	6.9	3	0.7	38
Female, Other Eligibles												
All Ages	3,525,893	208,179,878	19,170	1.2	167,638	0.4	108	314,545	19.2	2,665,302	0.2	17
5 and younger	1,676,711	68,106,355	645	0.1	6,552	0.4	78	155,843	26.8	1,356,902	0.2	15
6-14	1,040,484	73,116,919	6,339	1.3	62,015	0.5	123	105,177	21.8	908,611	0.2	21
15-20	369,564	29,126,623	5,086	2.2	46,269	0.5	115	27,982	12.0	228,530	0.2	18
21-44	362,671	29,725,968	6,016	1.9	43,171	0.3	81	22,716	7.2	147,379	0.3	18
45-64	55,144	5,997,893	696	3.5	5,524	0.3	81	2,304	11.7	18,222	0.3	28
65-74	13,570	1,504,342	216	11.4	2,374	0.7	213	339	17.9	3,752	0.3	29
75-84	4,569	360,220	87	6.7	882	0.6	95	102	7.8	1,080	0.3	22
85 and older	3,180	241,558	85	7.1	851	0.5	89	82	6.9	826	0.2	12
Male												
All Males	4,808,231	408,310,934	60,469	4.1	627,776	0.5	161	414,418	28.3	3,663,394	0.3	20
Male, Disabled												
All Ages	1,297,495	190,351,163	39,826	23.3	431,854	0.5	175	48,180	28.2	527,491	0.3	29
5 and younger	89,738	7,364,637	687	5.6	7,297	0.4	89	8,802	71.6	94,875	0.3	31
6-14	368,070	46,835,189	10,102	25.4	110,439	0.5	133	17,370	43.7	194,111	0.3	27
15-20	172,527	26,940,424	6,110	26.1	66,966	0.5	163	6,032	25.8	68,161	0.3	27
21-44	294,354	58,413,378	13,582	31.2	146,756	0.5	209	4,964	11.4	53,778	0.3	26
45-64	372,358	50,761,364	9,337	18.0	100,335	0.5	186	10,978	21.1	116,390	0.3	34
65-74	445	36,109	8	6.8	61	0.5	110	34	29.1	176	0.4	25
75-84	2	49	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	1	13	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

TABLE ND.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, TEXAS, 2006

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIASTHMATIC			
	Number of Rx	Rx \$	Number of Users	Users as % of All Benefes Among Users	Number of Benefit Months	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benefes	Number of Benefit Months	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	3,510,734	217,959,597	20,643	1.6	195,922	0.5	129	366,238	28.3	3,135,903	0.2	19
5 and younger	1,906,054	82,575,865	1,553	0.3	15,041	0.4	81	206,572	34.0	1,777,187	0.2	16
6-14	1,246,420	100,627,011	12,650	2.6	122,231	0.5	129	134,499	27.6	1,149,339	0.3	22
15-20	300,472	28,594,078	5,450	3.4	50,930	0.5	142	22,891	14.1	192,275	0.3	21
21-44	30,817	3,320,440	618	2.4	4,323	0.3	114	1,348	5.3	9,343	0.3	22
45-64	16,895	1,851,311	153	1.7	1,084	0.4	113	595	6.8	4,386	0.3	29
65-74	6,512	694,010	137	11.4	1,491	0.6	148	208	17.3	2,150	0.3	29
75-84	2,421	212,828	52	6.1	512	0.7	146	75	8.9	749	0.2	22
85 and older	1,143	84,054	30	6.2	310	0.6	80	50	10.4	474	0.3	16
Unknown	74	12,147	2	3.5	17	0.9	300	4	7.0	39	0.4	32

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 a. Table ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Benefe(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Beneficiaries

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

Beneficiary Characteristics	ANTICONVULSANT					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					DERMATOLOGICAL				
	Number of Users	Users as % of All Beneficiaries	Number of Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Month	Number of Users	Users as % of All Beneficiaries	Number of Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Month	Number of Users	Users as % of All Beneficiaries	Number of Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Month
All	108,413	3.3	1,111,264	0.5	\$86	124,808	3.8	1,189,871	0.5	\$63	1,049,041	32.1	9,358,382	0.2	\$7
Female															
All Females	63,298	3.5	639,011	0.5	81	36,592	2.0	350,405	0.5	61	562,352	31.2	4,975,911	0.2	7
Female, Disabled															
All Ages	42,725	26.0	468,515	0.5	89	9,419	5.7	103,669	0.5	65	52,520	32.0	585,074	0.2	10
5 and younger	987	11.3	10,652	0.7	110	361	4.2	3,881	0.4	41	4,904	56.4	53,458	0.2	6
6-14	3,601	18.7	40,355	0.7	122	5,437	28.2	59,994	0.5	60	8,835	45.9	100,407	0.1	7
15-20	3,307	22.8	36,984	0.7	131	1,766	12.2	19,678	0.4	62	5,309	36.6	60,684	0.1	8
21-44	14,926	31.7	162,751	0.5	103	1,039	2.2	11,315	0.4	75	12,144	25.8	134,824	0.2	10
45-64	19,876	26.6	217,569	0.5	64	816	1.1	8,801	0.4	97	21,278	28.5	235,297	0.2	12
65-74	24	15.2	166	0.6	58	0	0.0	0	0.0	0	46	29.1	376	0.3	20
75-84	2	6.7	24	0.9	115	0	0.0	0	0.0	0	4	13.3	28	0.1	5
85 and older	2	6.9	14	0.9	10	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	20,573	1.3	170,496	0.4	60	27,173	1.7	246,736	0.5	59	509,832	31.1	4,390,837	0.2	7
5 and younger	1,412	0.2	12,586	0.4	55	1,752	0.3	16,601	0.4	42	281,315	48.4	2,428,210	0.2	6
6-14	3,875	0.8	36,496	0.5	76	19,555	4.1	178,579	0.5	61	141,117	29.3	1,277,837	0.1	9
15-20	4,064	1.7	35,442	0.5	78	4,423	1.9	40,921	0.5	61	51,556	22.0	441,015	0.2	11
21-44	9,294	2.9	69,152	0.3	48	1,313	0.4	9,608	0.4	60	32,344	10.2	212,243	0.2	10
45-64	1,558	7.9	12,776	0.3	44	119	0.6	926	0.5	67	2,747	14.0	23,335	0.2	10
65-74	232	12.3	2,593	0.5	43	7	0.4	62	0.2	41	435	23.0	4,771	0.2	10
75-84	86	6.6	899	0.5	31	1	0.1	6	0.2	40	173	13.2	1,887	0.2	15
85 and older	52	4.4	552	0.5	30	3	0.3	33	0.5	27	145	12.1	1,539	0.2	11
Male															
All Males	45,112	3.1	472,223	0.6	91	88,212	6.0	839,425	0.5	64	486,684	33.2	4,382,421	0.2	7
Male, Disabled															
All Ages	33,247	19.4	365,396	0.6	98	26,332	15.4	290,243	0.5	65	47,975	28.1	535,741	0.2	9
5 and younger	1,313	10.7	14,402	0.6	90	1,188	9.7	12,795	0.4	40	6,714	54.6	73,175	0.1	5
6-14	6,391	16.1	70,980	0.6	105	18,842	47.4	207,062	0.5	66	14,299	36.0	162,255	0.1	7
15-20	4,324	18.5	48,408	0.7	132	4,955	21.2	55,476	0.5	65	7,767	33.2	88,717	0.1	9
21-44	11,499	26.5	127,068	0.6	114	1,035	2.4	11,569	0.4	75	8,760	20.2	98,216	0.2	11
45-64	9,707	18.7	104,438	0.5	61	312	0.6	3,341	0.4	83	10,412	20.0	113,206	0.2	12
65-74	12	10.3	90	0.5	33	0	0.0	0	0.0	0	23	19.7	172	0.3	17
75-84	1	8.3	10	0.1	3	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

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

Beneficiary Characteristics	ANTICONVULSANT					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					DERMATOLOGICAL				
	Users		Number of Benefit Months	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Users		Number of Benefit Months	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Users		Number of Benefit Months	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
	as % of All Benefit Months	Benes				as % of All Benefit Months	Benes				as % of All Benefit Months	Benes			
Male, Other Eligibles															
All Ages	11,865	0.9	106,827	0.5	67	61,880	4.8	549,182	0.5	63	438,709	33.9	3,846,680	0.2	6
5 and younger	1,867	0.3	16,505	0.5	55	4,713	0.8	43,599	0.4	39	279,598	46.0	2,411,487	0.2	5
6-14	5,291	1.1	49,913	0.5	70	48,768	10.0	430,938	0.6	65	116,056	23.8	1,055,553	0.1	7
15-20	2,699	1.7	24,494	0.5	81	8,209	5.1	73,334	0.5	69	39,630	24.5	352,265	0.2	12
21-44	1,244	4.9	9,391	0.4	49	150	0.6	1,037	0.5	68	2,160	8.5	16,343	0.2	10
45-64	587	6.7	4,616	0.4	48	39	0.4	262	0.4	66	843	9.6	6,419	0.2	9
65-74	131	10.9	1,404	0.5	54	0	0.0	0	0.0	0	233	19.4	2,575	0.2	11
75-84	30	3.5	343	0.4	49	0	0.0	0	0.0	0	132	15.6	1,436	0.2	10
85 and older	16	3.3	161	0.5	31	1	0.2	12	0.7	86	57	11.8	602	0.2	9
Unknown	3	5.3	30	0.2	59	4	7.0	41	0.5	60	5	8.8	50	0.1	3

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 a. Table ND.7B includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.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 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, TEXAS, 2006

Beneficiary Characteristics	COUGH/COLD/ALLERGY					ANTIDEPRESSANTS					ULCER DRUGS				
	Number of Users	Users as % of All Benefes	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 Benefes	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 Benefes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	1,537,629	47.1	13,562,460	0.2	\$5	184,230	5.6	1,752,439	0.4	\$32	214,108	6.6	1,952,465	0.3	\$28
Female															
All Females	787,156	43.7	6,921,593	0.2	5	126,642	7.0	1,173,651	0.4	34	135,057	7.5	1,219,398	0.3	29
Female, Disabled															
All Ages	58,658	35.7	655,984	0.2	4	62,797	38.2	680,041	0.4	38	44,742	27.2	488,910	0.4	47
5 and younger	6,720	77.3	73,739	0.2	4	90	1.0	973	0.4	14	1,339	15.4	13,758	0.3	29
6-14	10,677	55.5	121,635	0.1	4	2,599	13.5	28,551	0.4	25	2,081	10.8	23,599	0.3	37
15-20	5,759	39.8	65,873	0.1	4	3,622	25.0	39,865	0.4	31	2,136	14.7	24,235	0.3	35
21-44	13,915	29.6	154,774	0.1	4	20,452	43.5	219,281	0.4	38	10,561	22.5	115,033	0.3	40
45-64	21,567	28.9	239,784	0.2	5	35,993	48.2	391,145	0.4	39	28,586	38.3	312,007	0.4	52
65-74	17	10.8	154	0.2	8	38	24.1	217	0.5	40	37	23.4	274	0.5	53
75-84	3	10.0	25	0.2	4	2	6.7	7	0.4	29	2	6.7	4	0.5	62
85 and older	0	0.0	0	0.0	0	1	3.4	2	0.5	4	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	728,498	44.5	6,265,609	0.2	5	63,845	3.9	493,610	0.3	28	90,315	5.5	730,488	0.2	18
5 and younger	414,125	71.2	3,544,957	0.2	5	395	0.1	4,037	0.3	9	22,311	3.8	183,448	0.2	10
6-14	211,960	44.0	1,900,471	0.2	4	9,257	1.9	88,946	0.4	22	21,471	4.5	198,632	0.2	12
15-20	57,329	24.5	498,284	0.1	4	14,566	6.2	122,359	0.4	26	15,949	6.8	132,614	0.2	16
21-44	40,938	12.9	285,181	0.2	4	34,393	10.9	234,929	0.3	31	25,885	8.2	175,467	0.3	28
45-64	3,382	17.2	28,097	0.2	4	4,542	23.1	35,971	0.3	34	3,848	19.6	31,395	0.3	42
65-74	451	23.8	5,055	0.1	4	395	20.9	4,332	0.5	37	541	28.6	5,831	0.4	44
75-84	196	15.0	2,222	0.2	5	167	12.8	1,683	0.5	32	173	13.2	1,784	0.4	40
85 and older	117	9.8	1,342	0.2	4	130	10.9	1,353	0.5	33	137	11.5	1,317	0.4	36
Male															
All Males	750,470	51.2	6,640,838	0.2	5	57,588	3.9	578,788	0.4	30	79,050	5.4	733,061	0.3	26
Male, Disabled															
All Ages	52,663	30.8	590,583	0.1	4	35,028	20.5	376,044	0.4	33	25,623	15.0	276,869	0.4	45
5 and younger	9,841	80.0	107,605	0.2	4	201	1.6	2,109	0.3	14	1,757	14.3	18,351	0.3	28
6-14	20,014	50.4	227,133	0.1	4	5,734	14.4	63,128	0.4	24	2,999	7.5	33,888	0.3	34
15-20	7,804	33.4	89,243	0.1	4	4,497	19.2	49,407	0.4	30	2,263	9.7	25,720	0.3	38
21-44	7,462	17.2	83,903	0.1	4	10,913	25.1	116,383	0.4	38	6,079	14.0	66,123	0.4	47
45-64	7,536	14.5	82,648	0.2	5	13,664	26.3	144,890	0.4	35	12,505	24.1	132,643	0.4	51
65-74	5	4.3	39	0.7	11	19	16.2	127	0.5	33	20	17.1	144	0.4	52
75-84	1	8.3	12	0.1	2	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Beneficiaries

TABLE ND.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, TEXAS, 2006

Beneficiary Characteristics	COUGH/COLD/ALLERGY					ANTIDEPRESSANTS					ULCER DRUGS				
	Number of Users	Users	Number of Benefit Months Among Users	Mean	Mean Rx \$ per Benefit Month	Number of Users	Users	Number of Benefit Months Among Users	Mean	Mean Rx \$ per Benefit Month	Number of Users	Users	Number of Benefit Months Among Users	Mean	Mean Rx \$ per Benefit Month
		as % of All Benes		Rx per Benefit Month			as % of All Benes		Rx per Benefit Month			as % of All Benes		Rx per Benefit Month	
Male, Other Eligibles															
All Ages	697,807	53.9	6,050,255	0.2	5	22,560	1.7	202,744	0.4	24	53,427	4.1	456,192	0.2	14
5 and younger	449,272	73.9	3,828,009	0.2	5	621	0.1	6,054	0.3	9	25,244	4.2	204,677	0.2	10
6-14	203,885	41.8	1,827,061	0.2	4	11,337	2.3	106,922	0.4	22	16,886	3.5	156,060	0.2	13
15-20	40,602	25.1	363,340	0.1	4	7,094	4.4	63,057	0.4	28	7,297	4.5	64,842	0.2	18
21-44	2,727	10.7	20,310	0.2	4	2,238	8.8	16,160	0.3	31	2,371	9.3	17,341	0.3	40
45-64	891	10.1	6,755	0.2	4	994	11.3	7,721	0.3	30	1,222	13.9	9,077	0.4	44
65-74	248	20.6	2,707	0.1	4	162	13.5	1,718	0.4	32	273	22.7	2,881	0.4	39
75-84	125	14.8	1,451	0.1	4	69	8.2	702	0.5	32	87	10.3	858	0.5	42
85 and older	57	11.8	622	0.1	3	45	9.3	410	0.5	22	47	9.7	456	0.4	43
Unknown	3	5.3	29	0.1	2	0	0.0	0	0.0	0	1	1.8	6	0.7	179

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 a. Table ND.7C includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.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 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, TEXAS, 2006

Beneficiary Characteristics	CEPHALOSPORINS					ANTIDIABETIC					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	617,309	18.9	5,568,202	0.1	\$10	94,015	2.9	922,544	0.4	\$46	3,267,871	22,934,401
Female												
All Females	329,022	18.3	2,918,311	0.1	10	66,100	3.7	645,144	0.4	46	1,802,194	12,257,724
Female, Disabled												
All Ages	28,481	17.3	318,077	0.1	7	44,270	26.9	484,897	0.4	47	164,338	1,674,802
5 and younger	3,657	42.0	39,972	0.1	10	29	0.3	323	0.5	49	8,697	85,481
6-14	5,473	28.4	62,102	0.1	11	239	1.2	2,627	0.6	66	19,247	206,280
15-20	2,957	20.4	33,911	0.1	7	672	4.6	7,489	0.5	51	14,487	153,182
21-44	6,687	14.2	74,324	0.1	5	6,823	14.5	74,236	0.4	44	47,016	480,717
45-64	9,694	13.0	107,665	0.1	5	36,451	48.8	399,799	0.4	47	74,674	748,156
65-74	13	8.2	103	0.2	19	55	34.8	411	0.5	43	158	827
75-84	0	0.0	0	0.0	0	1	3.3	12	0.9	14	30	91
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	29	68
Female, Other Eligibles												
All Ages	300,541	18.3	2,600,234	0.2	10	21,830	1.3	160,247	0.4	43	1,637,856	10,582,922
5 and younger	149,525	25.7	1,338,674	0.2	10	101	0.0	801	0.7	72	581,521	4,024,505
6-14	86,057	17.9	786,293	0.1	12	1,709	0.4	14,124	0.7	64	481,738	3,433,560
15-20	30,489	13.0	249,104	0.1	7	2,167	0.9	16,851	0.5	48	234,052	1,445,045
21-44	32,585	10.3	209,519	0.2	6	12,350	3.9	82,647	0.4	40	316,473	1,526,506
45-64	1,647	8.4	14,092	0.1	6	4,542	23.1	35,513	0.3	42	19,680	114,163
65-74	147	7.8	1,576	0.1	4	690	36.5	7,465	0.4	39	1,891	17,902
75-84	47	3.6	504	0.1	5	187	14.3	1,972	0.4	29	1,306	11,864
85 and older	44	3.7	472	0.1	4	84	7.0	874	0.5	25	1,195	9,377
Male												
All Males	288,285	19.7	2,649,876	0.1	10	27,915	1.9	277,400	0.4	46	1,465,620	10,676,390
Male, Disabled												
All Ages	26,743	15.6	299,910	0.1	8	20,962	12.3	224,124	0.4	45	171,011	1,710,918
5 and younger	5,182	42.1	56,794	0.1	10	31	0.3	288	0.7	72	12,300	122,068
6-14	9,060	22.8	103,232	0.1	10	269	0.7	2,977	0.6	54	39,728	423,321
15-20	3,815	16.3	43,588	0.1	7	525	2.2	5,947	0.5	52	23,388	246,242
21-44	4,122	9.5	46,525	0.1	5	3,796	8.7	40,462	0.4	46	43,467	432,974
45-64	4,557	8.8	49,724	0.1	4	16,323	31.4	174,327	0.4	44	51,991	485,727
65-74	6	5.1	42	0.1	15	18	15.4	123	0.8	52	117	499
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	12	62
85 and older	1	12.5	5	0.2	3	0	0.0	0	0.0	0	8	25

Nondual Beneficiaries

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, TEXAS, 2006

Beneficiary Characteristics	CEPHALOSPORINS					ANTIDIABETIC						
	Number of Users	Users as % of All Benefes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benefes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
Male, Other Eligibles												
All Ages	261,540	20.2	2,349,956	0.2	10	6,953	0.5	53,276	0.5	54	1,294,609	8,965,472
5 and younger	163,597	26.9	1,461,872	0.2	10	182	0.0	1,537	0.8	75	608,177	4,212,851
6-14	78,214	16.0	714,774	0.1	11	1,240	0.3	10,242	0.7	73	487,612	3,471,539
15-20	17,584	10.9	156,396	0.1	7	1,103	0.7	8,692	0.6	71	162,060	1,088,578
21-44	1,507	5.9	11,293	0.2	6	1,969	7.7	13,928	0.4	42	25,424	125,071
45-64	499	5.7	4,111	0.1	6	2,052	23.3	14,643	0.4	43	8,805	44,458
65-74	85	7.1	954	0.1	6	285	23.7	2,993	0.5	40	1,202	11,112
75-84	31	3.7	320	0.1	4	88	10.4	872	0.5	30	846	7,643
85 and older	23	4.8	236	0.1	9	34	7.0	369	0.4	21	483	4,220
Unknown	4	7.0	25	0.2	11	0	0.0	0	0.0	0	57	287

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 a. Table ND.7D includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2006. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Benefe(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription (s) or pharmacy; \$ = Medicaid reimbursement.

Nondual Beneficiaries

TABLE NO. 8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, TEXAS, 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	\$610	7.7	4,310	44,660
Age				
0-64	701	8.8	3,393	35,727
65-74	463	5.9	252	2,542
75-84	186	3.0	318	3,083
85 and older	131	2.2	347	3,308
Unknown	0	0.0	0	0
Gender				
Female	635	8.0	2,313	24,324
Male	580	7.4	1,996	20,331
Unknown	0	0.0	1	5
Race				
White	639	8	2,241	22,731
African American	572	7.4	947	9,973
Other/unknown	585	7.3	1,122	11,956
Basis of Eligibility^c				
Aged	243	3.5	901	8,833
Disabled	700	8.8	3,402	35,783
Adults	825	9.2	6	41
Children	298	9.3	1	3
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 a. Table NO. 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 4,665 beneficiaries who were in nursing facilities for part of their enrollment and their 46,013 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.

TABLE NO.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, TEXAS, 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	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	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	0.4	0.1	0.0	0.3	\$41	\$29	\$1	\$11	\$96	\$237	\$171	\$36	11,901	\$1,143,180	2,566	59.5	27,985
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.4	0.1	0.0	0.3	71	31	0	40	173	457	158	117	968	167,253	223	5.2	2,369
Endocrine/Metabolic Drugs	1.3	0.5	0.0	0.7	75	56	4	15	57	103	103	20	27,642	1,568,287	1,924	44.6	20,835
Cardiovascular Agents	2.1	0.6	0.2	1.3	91	41	27	24	43	73	122	18	62,598	2,698,887	2,779	64.5	29,575
Respiratory Agents	0.8	0.3	0.0	0.4	46	35	3	8	58	115	74	19	17,757	1,032,108	2,064	47.9	22,583
Gastrointestinal Agents	1.2	0.5	0.0	0.6	87	70	2	15	74	133	198	24	32,149	2,375,738	2,538	58.9	27,359
Genitourinary Agents	0.6	0.4	0.0	0.2	46	35	3	8	74	92	93	39	6,221	461,082	886	20.6	9,932
CNS Drugs	2.0	1.0	0.1	0.9	253	217	15	21	125	214	99	24	72,558	9,049,194	3,303	76.6	35,772
Stimulants/Anti-obesity/Anorexia	0.6	0.5	0.0	0.2	96	91	0	6	152	189	40	37	406	61,781	60	1.4	642
Miscellaneous Psychological/ Neurological Agents	0.9	0.9	0.0	0.0	193	191	0	2	212	214	0	102	5,404	1,147,057	554	12.9	5,957
Analgesics and Anesthetics	1.1	0.2	0.0	0.9	60	27	15	18	56	151	320	21	26,026	1,448,973	2,239	51.9	24,105
Neuromuscular Agents	1.6	0.5	0.0	1.1	127	79	1	46	82	176	109	42	40,663	3,323,385	2,397	55.6	26,219
Nutritional Products	0.7	0.0	0.0	0.7	12	1	0	11	17	30	36	16	9,391	157,307	1,194	27.7	13,106
Hematological Agents	0.9	0.4	0.0	0.5	111	103	0	7	118	266	21	14	13,968	1,643,473	1,418	32.9	14,837
Topical Products	0.6	0.2	0.2	0.3	33	17	11	6	56	88	70	24	15,452	868,444	2,355	54.6	25,963
Miscellaneous Products	0.3	0.0	0.0	0.2	19	14	0	5	74	312	0	23	902	66,906	324	7.5	3,470
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	13	0	0	0	62	0	0	0	173	10,810	70	1.6	809
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.	344,179	27,223,865	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 a. Table NO.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 4,665 beneficiaries who were in nursing facilities for part of their enrollment and their 46,013 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.med-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.med-span.com/master-drug-database.aspx>.
 In Texas, 1.0 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, TEXAS, 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	\$6,583,478	2,724	63.2	30,614	0.8	\$258	\$215	
ANTICONVULSANT	2,867,090	2,840	65.9	31,498	0.9	97	91	
ANTIDEPRESSANTS	1,870,285	3,200	74.2	35,181	0.8	69	53	
ULCER DRUGS	1,856,143	2,463	57.1	26,702	0.7	95	70	
ANTIDIABETIC	1,353,366	2,335	54.2	25,257	1.0	56	54	
ANTHYPERLIPIDEMIC	1,214,266	1,429	33.2	15,729	0.7	105	77	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	1,147,105	713	16.5	7,666	0.7	212	150	
HEMATOPOIETIC AGENTS	764,457	626	14.5	6,701	0.7	169	114	
ANALGESICS - Narcotic	754,748	2,513	58.3	27,070	0.7	42	28	
ANTIASTHMATIC	741,496	2,119	49.2	23,181	0.5	70	32	
Total	19,152,434	20,962	n.a.	229,599	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 4,665 beneficiaries who were in nursing facilities for part of their enrollment and their 46,013 benefit months were excluded from the analysis.
 b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 d. The top 10 drug groups were determined based on total 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.med-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement; n.a. = not applicable.

Nondual Beneficiaries

TABLE ND.10A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST
 AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, TEXAS, 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	176,192	\$19,152,434	2,724	63.2	30,614	0.8	\$215	2,840	65.9	31,498	0.9	\$91	
Female													
All Females	98,496	10,966,346	1,462	63.2	16,495	0.9	224	1,522	65.8	17,024	0.9	93	
Female, Disabled													
All Ages	89,132	10,011,304	1,271	73.3	14,408	0.9	231	1,405	81.0	15,749	1.0	96	
64 or younger	88,861	9,990,623	1,268	73.5	14,400	0.9	231	1,398	81.0	15,675	1.0	96	
65-74	228	17,629	3	37.5	8	0.9	56	4	50.0	38	1.3	90	
75-84	32	2,926	0	0.0	0	0.0	0	2	200.0	24	0.9	115	
85 and older	11	126	0	0.0	0	0.0	0	1	100.0	12	0.9	11	
Female, Other Eligibles													
All Ages	9,364	955,042	191	33.0	2,087	0.7	175	117	20.2	1,275	0.8	54	
64 or younger	222	14,849	2	40.0	24	0.9	265	2	40.0	17	1.2	35	
65-74	4,479	524,401	93	69.9	1,058	0.9	241	65	48.9	734	0.9	67	
75-84	2,521	218,695	45	22.2	481	0.6	99	31	15.3	297	0.7	36	
85 and older	2,142	197,097	51	21.5	524	0.6	106	19	8.0	227	0.5	37	
Male													
All Males	77,696	8,186,088	1,262	63.2	14,119	0.8	204	1,318	66.0	14,474	0.9	89	
Male, Disabled													
All Ages	72,349	7,634,941	1,156	69.3	13,002	0.8	207	1,253	75.2	13,789	0.9	90	
64 or younger	72,150	7,618,641	1,152	69.5	12,959	0.8	207	1,251	75.5	13,770	0.9	90	
65-74	199	16,300	4	40.0	43	0.6	148	2	20.0	19	0.8	48	
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	5,347	551,147	106	32.2	1,117	0.8	174	65	19.8	685	0.8	65	
64 or younger	89	3,865	2	33.3	8	0.8	48	2	33.3	11	1.7	112	
65-74	2,968	321,180	56	56.0	623	0.8	199	42	42.0	443	0.9	75	
75-84	1,498	154,328	31	27.2	300	0.8	176	11	9.6	122	0.6	55	
85 and older	792	71,774	17	15.6	186	0.7	95	10	9.2	109	0.6	33	
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 Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 a. Table ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 4,665 beneficiaries who were in nursing facilities for part of their enrollment and their 46,013 benefit months were excluded from the analysis.
 b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 d. The top 10 drug groups were determined based on total 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.med-span.com/master-drug-database.aspx>.
 Bene M(b) = 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, TEXAS, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					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	3,200	74.2	35,181	0.8	\$53	2,463	57.1	26,702	0.7	\$70	2,335	54.2	25,257	1.0	\$54
Female															
All Females	1,797	77.7	19,986	0.8	56	1,300	56.2	14,300	0.7	71	1,335	57.7	14,714	1.0	53
Female, Disabled															
All Ages	1,575	90.8	17,568	0.8	58	1,161	66.9	12,796	0.7	72	1,174	67.7	12,904	1.0	56
64 or younger	1,567	90.8	17,510	0.8	58	1,154	66.9	12,736	0.7	72	1,169	67.8	12,854	1.0	56
65-74	8	100.0	58	0.7	35	7	87.5	60	0.8	76	4	50.0	38	1.1	46
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	100.0	12	0.9	14
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	222	38.4	2,418	0.7	44	139	24.0	1,504	0.6	56	161	27.9	1,810	0.7	37
64 or younger	3	60.0	36	0.4	44	2	40.0	24	0.7	58	3	60.0	29	1.3	65
65-74	85	63.9	959	0.8	51	42	31.6	473	0.8	79	74	55.6	836	0.8	42
75-84	71	35.0	726	0.6	37	40	19.7	439	0.6	60	50	24.6	556	0.7	35
85 and older	63	26.6	697	0.6	41	55	23.2	568	0.5	34	34	14.3	389	0.5	27
Male															
All Males	1,403	70.3	15,195	0.8	49	1,163	58.3	12,402	0.7	68	1,000	50.1	10,543	0.9	54
Male, Disabled															
All Ages	1,296	77.7	14,143	0.8	50	1,081	64.8	11,591	0.7	69	905	54.3	9,604	1.0	56
64 or younger	1,290	77.9	14,097	0.8	50	1,076	64.9	11,572	0.7	69	900	54.3	9,555	1.0	56
65-74	6	60.0	46	0.7	44	5	50.0	19	0.7	107	5	50.0	49	1.1	59
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	107	32.5	1,052	0.7	41	82	24.9	811	0.7	62	95	28.9	939	0.8	36
64 or younger	3	50.0	11	1.1	33	2	33.3	11	0.7	37	3	50.0	10	0.6	12
65-74	41	41.0	431	0.8	55	37	37.0	369	0.7	63	52	52.0	516	0.9	42
75-84	35	30.7	356	0.6	36	29	25.4	306	0.7	58	29	25.4	281	0.8	32
85 and older	28	25.7	254	0.6	24	14	12.8	125	0.6	70	11	10.1	132	0.6	27
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 Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 a. Table ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 4,665 beneficiaries who were in nursing facilities for part of their enrollment and their 46,013 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 M(O) = 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, TEXAS, 2006

Beneficiary Characteristics	ANTHYPERLIPIDEMIC					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					HEMATOPOIETIC AGENTS							
	Users as % of All-Year		Number of Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Users as % of All-Year		Number of Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Users as % of All-Year		Number of Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
	Number of Users						Number of Users						Number of Users					
All	1,429	33.2	15,729	0.7	\$77	713	16.5	7,666	0.7	\$150	626	14.5	6,701	0.7	\$114			
Female																		
All Females	776	33.5	8,629	0.8	81	405	17.5	4,366	0.7	176	293	12.7	3,194	0.6	145			
Female, Disabled																		
All Ages	683	39.4	7,611	0.8	83	290	16.7	3,164	0.7	208	237	13.7	2,547	0.7	165			
64 or younger	682	39.5	7,609	0.8	83	288	16.7	3,154	0.7	209	237	13.7	2,547	0.7	165			
65-74	1	12.5	2	1.0	112	2	25.0	10	1.0	112	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	93	16.1	1,018	0.6	65	115	19.9	1,202	0.6	90	56	9.7	647	0.6	65			
64 or younger	5	100.0	53	0.4	37	0	0.0	0	0.0	0	2	40.0	24	0.5	3			
65-74	35	26.3	404	0.7	79	27	20.3	307	0.6	93	22	16.5	258	0.5	71			
75-84	35	17.2	375	0.6	62	40	19.7	363	0.6	84	22	10.8	255	0.6	61			
85 and older	18	7.6	186	0.5	49	48	20.3	532	0.6	94	10	4.2	110	0.6	74			
Male																		
All Males	653	32.7	7,100	0.7	73	308	15.4	3,300	0.7	115	333	16.7	3,507	0.7	86			
Male, Disabled																		
All Ages	588	35.3	6,445	0.7	74	227	13.6	2,490	0.7	121	291	17.5	3,063	0.7	89			
64 or younger	585	35.3	6,430	0.7	74	227	13.7	2,490	0.7	121	291	17.6	3,063	0.7	89			
65-74	3	30.0	15	0.7	84	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	65	19.8	655	0.7	63	81	24.6	810	0.7	98	42	12.8	444	0.6	71			
64 or younger	3	50.0	8	0.9	68	0	0.0	0	0.0	0	1	16.7	7	0.9	6			
65-74	38	38.0	422	0.8	73	28	28.0	301	0.8	115	21	21.0	219	0.6	56			
75-84	18	15.8	175	0.5	46	28	24.6	272	0.6	83	12	10.5	131	0.7	115			
85 and older	6	5.5	50	0.4	47	25	22.9	237	0.6	93	8	7.3	87	0.5	44			
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 a. Table ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 4,665 beneficiaries who were in nursing facilities for part of their enrollment and their 46,013 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>.
 Benefit 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, TEXAS, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIASTHMATIC					Benefit Months Among All-Year Nursing Facility Residents	
	Number of Users	Users as % of All-Year Nursing Facility Residents Among Users	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents Among Users	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	2,513	58.3	27,070	0.7	\$28	2,119	49.2	23,181	0.5	\$32	4,310	44,660
Female												
All Females	1,430	61.8	15,706	0.7	28	1,124	48.6	12,639	0.5	32	2,313	24,324
Female, Disabled												
All Ages	1,281	73.8	14,142	0.7	30	1,013	58.4	11,371	0.5	34	1,735	18,504
64 or younger	1,276	74.0	14,092	0.7	30	1,008	58.4	11,325	0.5	34	1,725	18,422
65-74	5	62.5	50	0.5	75	5	62.5	46	0.2	8	8	58
75-84	0	0.0	0	0.0	0	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	1	12
Female, Other Eligibles												
All Ages	149	25.8	1,564	0.5	14	111	19.2	1,268	0.3	20	578	5,820
64 or younger	6	120.0	65	0.8	6	5	100.0	60	0.5	10	5	53
65-74	53	39.8	584	0.6	15	37	27.8	426	0.4	29	133	1,429
75-84	40	19.7	437	0.5	22	32	15.8	369	0.3	23	203	2,039
85 and older	50	21.1	478	0.4	8	37	15.6	413	0.3	10	237	2,299
Male												
All Males	1,083	54.3	11,364	0.6	27	995	49.8	10,542	0.5	32	1,996	20,331
Male, Disabled												
All Ages	1,003	60.2	10,575	0.6	28	908	54.5	9,619	0.5	33	1,667	17,279
64 or younger	997	60.2	10,534	0.6	28	900	54.3	9,590	0.5	33	1,657	17,230
65-74	6	60.0	41	0.8	10	8	80.0	29	0.5	14	10	49
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	80	24.3	789	0.4	16	87	26.4	923	0.3	22	329	3,052
64 or younger	2	33.3	7	0.9	67	3	50.0	15	1.3	21	6	22
65-74	35	35.0	337	0.6	24	36	36.0	399	0.3	26	100	1,001
75-84	28	24.6	293	0.4	6	26	22.8	283	0.3	28	114	1,032
85 and older	15	13.8	152	0.3	13	22	20.2	226	0.2	9	109	997
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	5

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 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 4,665 beneficiaries who were in nursing facilities for part of their enrollment and their 46,013 benefit months were excluded from the analysis.
 b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 d. The top 10 drug groups were determined based on total 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.med-span.com/master-drug-database.aspx>.
 Benefit Mo(M) = 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}
 TEXAS, 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
All	1,261,620	38.6	1.3	4,385,658	\$18	\$58,066,544	\$13	3.9	3,267,871
Age									
5 and younger	615,813	50.9	2.1	2,492,626	22	27,206,391	11	9.6	1,210,716
6-14	353,328	34.4	0.9	952,203	14	14,322,180	15	3.8	1,028,347
15-20	113,680	26.2	0.6	266,574	10	4,481,531	17	2.6	433,993
21-44	116,048	26.8	0.8	338,834	13	5,694,897	17	1.9	432,382
45-64	60,563	39.0	2.1	324,847	40	6,189,309	19	1.7	155,150
65-74	1,176	34.9	1.6	5,471	28	93,467	17	1.8	3,369
75-84	630	28.7	1.4	3,140	23	50,984	16	3.5	2,196
85 and older	382	22.3	1.1	1,963	16	27,785	14	3.3	1,716
Unknown	0	0.0	0.0	0	0	0	0	0.0	2
Basis of Eligibility^c									
Aged	2,083	30.6	1.5	10,246	24	165,901	16	2.3	6,809
Disabled	135,553	40.4	2.0	685,376	38	12,801,477	19	1.7	335,353
Adults	107,504	24.1	0.5	215,737	7	2,993,597	14	2.5	445,553
Children	1,016,156	41.0	1.4	3,473,551	17	42,092,501	12	6.8	2,478,593
Unknown	324	20.7	0.5	748	8	13,068	17	0.7	1,563
Gender									
Female	684,595	38.0	1.3	2,319,614	17	31,312,027	13	3.9	1,802,195
Male	577,025	39.4	1.4	2,066,044	18	26,754,517	13	3.8	1,465,621
Unknown	0	0.0	0.0	0	0	0	0	0.0	55
Race									
White	217,223	30.1	0.9	619,732	14	10,370,264	17	2.1	722,229
African American	165,218	26.1	0.7	436,845	10	6,230,936	14	2.3	633,519
Other/unknown	879,179	46.0	1.7	3,329,081	22	41,465,344	12	5.6	1,912,123
Use of Nursing Facilities^d									
Entire year	2,648	61.4	6.7	28,893	104	447,421	15	1.6	4,310
Part year	3,082	66.1	5.1	23,594	82	380,460	16	1.7	4,665
None	1,255,890	38.5	1.3	4,333,171	18	57,238,663	13	4.0	3,258,896
Maintenance Assistance Status									
Cash	221,719	40.7	1.9	1,043,014	32	17,237,830	17	2.2	544,560
Medically needy	20,783	27.2	0.7	53,724	12	905,372	17	2.6	76,467
Poverty related	868,460	38.3	1.2	2,771,150	15	34,263,622	12	6.7	2,267,262
Other/unknown	150,658	39.7	1.4	517,770	15	5,659,720	11	3.7	379,582

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.

a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all 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 1 on Table 1 for methodology used to determine use of nursing facilities.

Benef(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}
 TEXAS, 2006

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month		Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
		\$3	\$13			
All	0.2	\$3	\$13	\$0	\$0	22,934,401
Age						
5 and younger	0.3	3	11	0	0	8,444,990
6-14	0.1	2	15	0	0	7,534,844
15-20	0.1	2	17	0	0	2,933,076
21-44	0.1	2	17	0	1	2,565,272
45-64	0.2	4	19	0	2	1,392,504
65-74	0.2	3	17	0	1	30,345
75-84	0.2	3	16	0	1	19,668
85 and older	0.1	2	14	0	1	13,691
Unknown	0.0	0	0	0	0	11
Basis of Eligibility^c						
Aged	0.2	3	16	0	1	61,603
Disabled	0.2	4	19	0	2	3,385,735
Adults	0.1	1	14	0	0	2,151,283
Children	0.2	2	12	0	0	17,322,210
Unknown	0.1	1	17	0	0	13,570
Gender						
Female	0.2	3	13	0	0	12,257,730
Male	0.2	3	13	0	0	10,676,395
Unknown	0.0	0	0	0	0	276
Race						
White	0.1	2	17	0	1	5,119,325
African American	0.1	1	14	0	0	4,173,094
Other/unknown	0.2	3	12	0	0	13,641,982
Use of Nursing Facilities^d						
Entire year	0.6	10	15	0	5	44,660
Part year	0.5	8	16	0	5	46,013
None	0.2	3	13	0	0	22,843,728
Maintenance Assistance Status						
Cash	0.2	4	17	0	1	4,822,575
Medically needy	0.1	2	17	0	1	507,390
Poverty related	0.2	2	12	0	0	15,021,186
Other/unknown	0.2	2	11	0	0	2,583,250

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all non-dual 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 1 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}
 TEXAS, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D		Number Rx as a Percentage of All Part D Excluded Rx	
				Excluded Rx \$	Total Number Rx.	\$ per Rx	Excluded Rx
All	1,768,967	\$33	\$58,066,544	100.0	4,385,658	\$13	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	24	65	1,563	0.0	29	54	0.0
Drugs for cosmetic purposes	428	15	6,387	0.0	558	11	0.0
Cough and cold medications	735,907	37	26,875,010	46.3	1,294,998	21	29.5
Vitamins and minerals	111,095	24	2,675,623	4.6	208,763	13	4.8
Non-prescription drugs	814,877	25	20,388,030	35.1	2,448,002	8	55.8
Barbiturates	5,216	55	286,910	0.5	33,491	9	0.8
Benzodiazepines	82,228	79	6,537,026	11.3	367,528	18	8.4
Other Part D Excl Rx Drugs	19,192	68	1,295,995	2.2	32,289	40	0.7

Sources: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2008. This table was produced on 02/12/2010.
 a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2006. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2006. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table ND11.
 b. Includes OTC drugs as well as prescription drugs.
 c. The statute establishing the Medicare Part D prescription program that started in 2006 excludes several types of drugs from coverage. State Medicaid programs have been allowed to exclude these drugs since 1990, but many states have chosen to cover them, and if states cover them for any Medicaid beneficiaries they must also cover them for dual eligibles, who as of 2006 receive the remainder of their prescription drug coverage through Part D. Excluded drugs include benzodiazepines; barbiturates; nonprescription (OTC) medications; prescription vitamins and minerals (not including prenatal vitamins and fluoride preparations); and drugs used for anorexia, weight loss, or weight gain. Other excluded drugs include those that promote fertility; those used for cosmetic purposes or hair growth, for symptomatic relief of coughs and colds; or drugs for which the manufacturer requires that associated tests or monitoring services be purchased exclusively from the manufacturer.
 Bene(s) = beneficiary (or beneficiaries); CMS = Centers for Medicare & Medicaid Services; Excl = excluded; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Beneficiaries

APPENDIX TABLE A.1
 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
 NONDUAL BENEFICIARIES, TEXAS, 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	3,453,875	6,949	341,392	460,090	2,643,881	1,563	29,641,666	64,404	3,618,321	2,795,117	23,150,208	13,616
Age												
5 and younger	1,288,509	1	21,278	601	1,266,628	1	11,197,842	6	228,524	5,689	10,963,619	4
6-14	1,093,124	2	60,475	936	1,031,711	0	9,973,470	18	683,700	7,915	9,281,837	0
15-20	461,920	0	38,891	78,447	344,573	9	3,820,768	0	426,732	497,647	2,896,332	57
21-44	445,896	3	92,346	352,266	627	654	3,107,932	23	977,413	2,119,713	5,324	5,459
45-64	156,986	35	128,031	27,703	334	883	1,475,030	152	1,300,287	163,579	3,054	7,958
65-74	3,436	2,992	291	133	4	16	31,978	29,879	1,407	533	21	138
75-84	2,263	2,219	42	2	0	0	20,647	20,459	164	24	0	0
85 and older	1,738	1,697	38	2	1	0	13,987	13,867	94	17	9	0
Unknown	3	0	0	0	3	0	12	0	0	0	12	0
Gender												
Female	1,898,503	4,400	166,543	422,818	1,303,179	1,563	15,859,199	40,594	1,781,287	2,591,087	11,432,615	13,616
Male	1,555,314	2,546	174,845	37,271	1,340,652	0	13,782,149	23,797	1,837,019	204,022	11,717,311	0
Unknown	58	3	4	1	50	0	318	13	15	8	282	0
Race												
White	757,097	2,398	99,461	131,140	523,341	757	6,202,248	20,531	1,034,635	796,634	4,343,884	6,564
African American	679,127	1,427	89,602	111,580	476,321	197	5,760,534	13,384	952,786	650,632	4,142,070	1,662
Other/unknown	2,017,651	3,124	152,329	217,370	1,644,219	609	17,678,884	30,489	1,630,900	1,347,851	14,664,254	5,390
Use of Nursing Facilities^c												
Entire year	4,311	901	3,403	6	1	0	44,728	8,833	35,851	41	3	0
Part year	4,665	607	4,008	27	21	2	47,664	5,869	41,353	223	200	19
None	3,444,899	5,441	333,981	460,057	2,643,859	1,561	29,549,274	49,702	3,541,117	2,794,853	23,150,005	13,597
Maintenance Assistance Status												
Cash	560,816	4,249	333,691	65,055	157,821	0	5,573,576	44,307	3,547,103	422,209	1,559,957	0
Medically needy	76,467	0	0	75,392	1,075	0	521,558	0	0	514,492	7,066	0
Poverty related	2,391,761	19	47	260,567	2,129,565	1,563	20,450,731	220	441	1,505,762	18,930,692	13,616
Other/unknown	424,831	2,681	7,654	59,076	355,420	0	3,095,801	19,877	70,777	352,654	2,652,493	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	1,736,852	6,019	263,121	270,543	1,195,623	1,546	14,092,334	54,054	2,727,786	1,522,739	9,774,267	13,488
FFS part year, with Rx claims	794,778	183	28,179	109,274	657,128	14	7,805,416	1,948	317,120	840,698	6,645,543	107
FFS part year, no Rx claims	320,903	37	4,280	22,648	293,935	3	2,654,109	358	44,325	125,965	2,483,440	21
MC all year, with Rx claims	415,338	570	39,773	43,088	331,907	0	3,970,782	6,621	464,360	255,808	3,243,993	0
MC all year, no Rx claims	186,004	140	6,039	14,537	165,288	0	1,119,025	1,423	64,730	49,907	1,002,965	0

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.

a. Table A.1 includes the beneficiaries represented by Cell J of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit coverage.
 b. Medicaid basis of eligibility is classified as aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
 c. Please refer to footnote 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, TEXAS, 2006

	Beneficiaries and					
	Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	3,453,875	29,641,666	3,267,871	22,934,401	0	6,707,265
Fee-for-service (FFS) all year	1,736,852	14,092,334	1,736,852	14,092,334	0	0
FFS part year, with Rx claims	794,778	7,805,416	794,778	3,641,928	0	4,163,488
FFS part year, with no Rx claims	320,903	2,654,109	320,903	1,229,357	0	1,424,752
Managed care (MC) all year, with Rx claims	415,338	3,970,782	415,338	3,970,782	0	0
MC all year, with no Rx claims	186,004	1,119,025	0	0	0	1,119,025

Source: Data for this table are from the MAX 2006 file for Texas, released by CMS in 9/2009. This table was produced on 02/12/2010.
 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.

All Medicaid Beneficiaries