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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, UNITED STATES, 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	35,456,693	257,613	4,260,070	10,334,553	20,568,080	36,377	269,351,694	2,314,782	43,539,729	69,672,807	153,535,032	289,344
Age												
5 and younger	8,850,586	15	210,959	1,114	8,638,494	4	63,014,334	49	2,042,788	6,564	60,964,905	28
6-14	8,544,511	15	556,752	2,416	7,985,325	3	69,121,500	96	5,938,358	12,708	63,170,311	27
15-20	5,252,884	23	430,952	1,032,974	3,788,093	842	40,017,559	181	4,527,043	6,814,498	28,670,305	5,532
21-44	9,610,374	170	1,255,533	8,277,274	63,372	14,025	69,040,900	1,174	12,880,658	55,762,859	297,806	98,403
45-64	2,800,019	1,489	1,767,916	1,008,040	1,335	21,239	25,001,874	12,848	17,766,369	7,030,792	8,335	183,530
65-74	163,247	129,740	31,174	2,052	17	264	1,509,617	1,184,099	313,056	10,547	91	1,824
75-84	88,622	82,879	5,507	231	5	0	820,612	760,206	58,866	1,482	58	0
85 and older	44,607	43,206	1,270	108	23	0	369,057	355,874	12,538	531	114	0
Unknown	101,843	76	7	10,344	91,416	0	456,241	255	53	32,826	423,107	0
Gender												
Female	21,112,608	165,968	2,121,266	8,498,189	10,290,821	36,364	159,083,797	1,497,068	21,957,897	58,421,042	76,918,582	289,208
Male	14,270,945	91,492	2,138,639	1,832,851	10,207,950	13	109,887,414	816,847	21,580,489	11,244,242	76,245,700	136
Unknown	73,140	153	165	3,513	69,309	0	380,483	867	1,343	7,523	370,750	0
Race												
White	14,701,985	77,590	1,973,912	4,221,764	8,408,449	20,270	115,401,674	677,811	20,058,917	28,250,805	66,258,622	155,519
African American	8,523,327	41,393	1,123,027	2,175,942	5,177,820	5,145	66,470,254	372,077	11,497,123	14,581,585	39,980,104	39,365
Other/unknown	12,231,381	138,630	1,163,131	3,936,847	6,981,811	10,962	87,479,766	1,264,894	11,983,689	26,840,417	47,296,306	94,460
Use of Nursing Facilities^c												
Entire year	76,248	17,022	58,597	383	243	3	805,767	172,492	628,256	2,784	2,230	5
Part year	84,344	10,511	68,496	3,890	1,376	71	807,684	98,221	667,903	30,790	10,117	653
None	35,296,101	230,080	4,132,977	10,330,280	20,566,461	36,303	267,738,243	2,044,069	42,243,570	69,639,233	153,522,685	288,686
Maintenance Assistance Status												
Cash	10,875,603	72,836	3,460,318	2,711,198	4,631,251	0	87,723,801	730,798	36,498,215	17,041,225	33,453,563	0
Medically needy	1,605,466	94,490	184,661	759,134	567,181	0	11,578,557	861,962	1,504,785	5,419,846	3,791,964	0
Poverty-related	13,148,440	33,687	173,763	1,325,815	11,578,798	36,377	97,998,890	256,140	1,321,828	6,763,684	89,367,894	289,344
Other/unknown	9,827,184	56,600	441,328	5,538,406	3,790,850	0	72,050,446	465,882	4,214,901	40,448,052	26,921,611	0
Fee-for-service (FFS) all year	24,575,002	233,709	3,774,913	7,415,245	13,117,390	33,745	214,048,750	2,169,234	40,179,929	55,841,503	115,584,136	273,948
FFS part year, with Rx claims	3,926,028	10,467	236,553	1,183,145	2,493,775	2,088	18,369,303	54,804	1,320,526	4,805,309	12,176,193	12,471
FFS part year, no Rx claims	4,955,471	7,791	109,949	1,199,019	3,638,198	514	15,368,856	25,349	413,607	3,419,053	11,508,161	2,686

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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.

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, UNITED STATES, 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	54.6	6.9	\$520	\$76	\$3,346	15.5	35,456,693
Age							
5 and younger	57.1	3.5	177	51	2,113	8.4	8,850,586
6-14	52.8	4.0	328	81	1,871	17.5	8,544,511
15-20	50.0	4.2	341	81	2,697	12.6	5,252,884
21-44	51.9	7.0	541	77	3,757	14.4	9,610,374
45-64	72.1	30.0	2,397	80	10,861	22.1	2,800,019
65-74	66.2	22.8	1,550	68	10,329	15.0	163,247
75-84	55.5	16.7	1,067	64	10,621	10.0	88,622
85 and older	35.4	9.4	508	54	13,351	3.8	44,607
Unknown	9.0	0.4	19	44	592	3.2	101,843
Basis of Eligibility^e							
Aged	57.6	18.0	1,170	65	10,197	11.5	257,613
Disabled	77.3	28.3	2,624	93	14,542	18.0	4,260,070
Adults	48.3	4.7	272	58	1,992	13.6	10,334,553
Children	53.1	3.4	199	59	1,611	12.4	20,568,080
Unknown	71.9	14.6	1,450	100	9,999	14.5	36,377
Gender							
Female	55.2	7.2	485	68	3,076	15.8	21,112,608
Male	54.0	6.5	574	88	3,760	15.3	14,270,945
Unknown	12.8	0.5	30	55	791	3.7	73,140
Race							
White	60.5	9.0	660	73	3,817	17.3	14,701,985
African American	53.6	6.0	461	77	3,425	13.5	8,523,327
Other/unknown	48.3	4.9	393	80	2,726	14.4	12,231,381
Use of Nursing Facilities^f							
Entire year	85.6	75.0	5,632	75	69,472	8.1	76,248
Part year	90.9	59.3	4,736	80	62,854	7.5	84,344
None	54.5	6.6	499	75	3,061	16.3	35,296,101
Maintenance Assistance Status							
Cash	60.9	12.2	1,027	85	5,745	17.9	10,875,603
Medically needy	58.6	7.8	564	73	4,745	11.9	1,605,466
Poverty related	57.0	3.8	209	55	1,744	12.0	13,148,440
Other/unknown	44.0	5.1	368	73	2,608	14.1	9,827,184

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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.

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 ND.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, UNITED STATES, 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	0.9	\$69	15.5	45.4	40.1	5.9	5.7	2.2	0.8	\$441	35,456,693	269,351,694
Age												
5 and younger	0.5	25	8.4	42.9	49.1	4.8	2.4	0.5	0.2	297	8,850,586	63,014,334
6-14	0.5	41	17.5	47.2	43.9	4.7	3.3	0.6	0.2	231	8,544,511	69,121,500
15-20	0.6	45	12.6	50.0	40.3	5.0	3.6	0.8	0.2	354	5,252,884	40,017,559
21-44	1.0	75	14.4	48.1	34.7	7.0	7.1	2.4	0.8	523	9,610,374	69,040,900
45-64	3.4	268	22.1	27.9	20.7	10.6	21.7	13.7	5.3	1,216	2,800,019	25,001,874
65-74	2.5	168	15.0	33.8	24.2	11.1	18.1	9.4	3.3	1,117	1,633,247	1,509,617
75-84	1.8	115	10.0	44.5	23.3	8.9	14.4	6.9	1.8	1,147	88,622	820,612
85 and older	1.1	61	3.8	64.6	17.3	4.9	7.8	4.5	1.0	1,614	44,607	369,057
Unknown	0.1	4	3.2	91.0	5.5	1.3	1.4	0.6	0.2	132	101,843	456,241
Basis of Eligibility^e												
Aged	2.0	130	11.5	42.4	23.4	9.6	15.0	7.3	2.3	1,135	257,613	2,314,782
Disabled	2.8	257	18.0	22.7	29.1	11.6	20.7	11.7	4.2	1,423	4,260,070	43,539,729
Adults	0.7	40	13.6	51.7	34.5	6.2	5.5	1.5	0.5	295	10,334,553	69,672,807
Children	0.5	27	12.4	46.9	45.4	4.5	2.5	0.5	0.2	216	20,568,080	153,535,032
Unknown	1.8	182	14.5	28.1	33.4	14.2	18.6	5.0	0.7	1,257	36,377	289,344
Gender												
Female	1.0	64	15.8	44.8	40.2	6.0	5.8	2.4	0.9	408	21,112,608	159,083,797
Male	0.8	75	15.3	46.0	40.1	5.8	5.5	2.0	0.7	488	14,270,945	109,887,414
Unknown	0.1	6	3.7	87.2	10.7	1.2	0.7	0.1	0.0	152	73,140	380,483
Race												
White	1.1	84	17.3	39.5	41.9	7.1	7.4	3.0	1.1	486	14,701,985	115,401,674
African American	0.8	59	13.5	46.4	41.1	5.3	4.8	1.8	0.6	439	8,523,327	66,470,254
Other/unknown	0.7	55	14.4	51.7	37.1	4.8	4.3	1.5	0.6	381	12,231,381	87,479,766
Use of Nursing Facilities^f												
Entire year	7.1	533	8.1	14.4	9.1	4.6	16.5	30.3	25.1	6,574	76,248	805,767
Part year	6.2	495	7.5	9.1	12.9	8.3	23.9	27.7	18.1	6,564	84,344	807,684
None	0.9	66	16.3	45.5	40.2	5.9	5.6	2.1	0.7	404	35,296,101	267,738,243
Maintenance Assistance Status												
Cash	1.5	127	17.9	39.1	37.7	7.6	9.7	4.4	1.5	712	10,875,603	87,723,801
Medically needy	1.1	78	11.9	41.4	39.3	7.7	7.8	2.7	1.0	658	1,605,466	11,578,557
Poverty related	0.5	28	12.0	43.0	47.6	5.2	3.1	0.8	0.3	234	13,148,440	97,998,890
Other/unknown	0.7	50	14.1	56.0	32.8	4.6	4.4	1.6	0.6	356	9,827,184	72,050,446

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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

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

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

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

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

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

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

TABLE ND.5
 AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
 NONDUAL BENEFICIARIES, UNITED STATES, 2006

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	\$69	\$76	0.3	\$51	\$164	0.0	\$4	\$99	0.5	\$13	\$23
Age												
5 and younger	0.5	25	51	0.1	18	133	0.0	1	43	0.3	6	18
6-14	0.5	41	81	0.2	33	147	0.0	2	68	0.3	6	23
15-20	0.6	45	81	0.2	35	171	0.0	2	92	0.3	7	22
21-44	1.0	75	77	0.3	56	183	0.0	5	118	0.6	14	23
45-64	3.4	268	80	1.2	197	168	0.1	19	129	2.0	52	26
65-74	2.5	168	68	1.0	125	130	0.1	12	108	1.4	31	22
75-84	1.8	115	64	0.7	86	118	0.1	8	100	1.0	21	21
85 and older	1.1	61	54	0.4	45	109	0.1	4	81	0.7	12	18
Unknown	0.1	4	44	0.0	2	141	0.0	1	208	0.1	1	15
Basis of Eligibility^d												
Aged	2.0	130	65	0.8	97	122	0.1	9	103	1.1	24	21
Disabled	2.8	257	93	1.0	199	196	0.1	15	126	1.6	42	26
Adults	0.7	40	58	0.2	27	133	0.0	3	111	0.5	10	21
Children	0.5	27	59	0.2	20	126	0.0	1	55	0.3	6	20
Unknown	1.8	182	100	0.6	141	240	0.1	14	166	1.2	28	24
Gender												
Female	1.0	64	68	0.3	46	149	0.0	5	101	0.6	13	22
Male	0.8	75	88	0.3	59	185	0.0	4	95	0.5	12	25
Unknown	0.1	6	55	0.0	4	183	0.0	0	89	0.1	2	19
Race												
White	1.1	84	73	0.4	62	156	0.1	6	105	0.7	16	23
African American	0.8	59	77	0.3	45	173	0.0	3	97	0.5	11	22
Other/unknown	0.7	55	80	0.2	42	171	0.0	3	88	0.4	10	24
Use of Nursing Facilities^e												
Entire year	7.1	533	75	2.4	399	168	0.3	30	98	4.4	103	23
Part year	6.2	495	80	2.0	367	186	0.3	30	118	4.0	97	25
None	0.9	66	75	0.3	49	163	0.0	4	98	0.5	12	23
Maintenance Assistance Status												
Cash	1.5	127	85	0.5	97	184	0.1	8	116	0.9	23	25
Medically needy	1.1	78	73	0.4	57	160	0.0	5	112	0.7	16	23
Poverty related	0.5	28	55	0.2	20	120	0.0	2	62	0.3	6	20
Other/unknown	0.7	50	73	0.2	38	152	0.0	3	97	0.4	9	22

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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 the U.S., 0.5 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 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, UNITED STATES, 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	0.1	0.0	0.2	\$20	\$14	\$1	\$5	\$73	\$255	\$61	\$25	31,620,607	\$2,305,472,540	12,211,698	34.4	117,188,200
Biologicals	0.3	0.3	0.0	0.0	338	334	3	1	1186	1,206	2,709	172	315,319	373,986,093	114,520	0.3	1,105,590
Antineoplastic Agents	0.5	0.2	0.0	0.3	184	157	2	25	354	878	370	73	631,642	223,654,180	119,484	0.3	1,215,659
Endocrine/Metabolic Drugs	0.4	0.2	0.0	0.3	29	20	2	7	64	125	66	26	21,899,831	1,408,073,661	5,047,624	14.2	48,873,094
Cardiovascular Agents	1.1	0.4	0.1	0.7	53	34	7	12	47	87	121	18	29,225,587	1,382,661,541	2,584,163	7.3	26,135,798
Respiratory Agents	0.4	0.2	0.0	0.2	25	20	1	4	60	104	47	19	33,373,827	1,989,577,690	8,149,930	23.0	78,723,481
Gastrointestinal Agents	0.4	0.2	0.0	0.2	39	31	4	4	91	150	336	19	11,739,359	1,070,856,623	2,774,901	7.8	27,663,884
Genitourinary Agents	0.2	0.1	0.0	0.1	13	7	3	4	56	87	85	28	3,073,802	171,708,067	1,355,897	3.8	12,719,675
CNS Drugs	0.9	0.4	0.1	0.5	101	82	7	11	110	213	107	25	35,288,260	3,898,602,584	3,918,507	11.1	38,738,148
Stimulants/Anti-obesity/Anorexia	0.7	0.6	0.0	0.1	71	67	1	3	104	117	140	33	7,245,163	757,076,956	1,063,493	3.0	10,679,364
Miscellaneous Psychological/Neurological Agents	0.4	0.3	0.0	0.0	123	118	0	5	340	376	127	101	538,748	183,117,511	142,478	0.4	1,486,572
Analgesics and Anesthetics	0.4	0.0	0.0	0.4	18	7	2	8	42	205	278	21	28,259,864	1,199,837,738	7,074,296	20.0	67,898,379
Neuromuscular Agents	0.7	0.3	0.0	0.4	63	47	2	15	92	181	107	36	15,711,795	1,441,872,907	2,234,450	6.3	22,785,168
Nutritional Products	0.3	0.1	0.0	0.2	6	2	0	4	20	39	25	16	4,546,334	92,587,361	1,730,950	4.9	15,162,346
Hematological Agents	0.5	0.2	0.0	0.3	151	143	1	7	281	717	35	23	3,372,999	946,445,415	638,502	1.8	6,252,151
Topical Products	0.2	0.1	0.0	0.2	11	8	0	3	48	99	60	22	16,220,112	774,064,340	6,954,043	19.6	67,793,095
Miscellaneous Products	0.3	0.2	0.0	0.1	71	60	4	7	270	369	310	79	734,592	198,067,407	273,112	0.8	2,796,736
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	11	0	0	0	63	0	0	0	360,223	22,839,122	199,807	0.6	2,054,051
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.	244,158,064	18,440,501,736	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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 the U.S., 0.5 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.

Nondual Medicaid Beneficiaries

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, UNITED STATES, 2006

Top 10 Drug Groups	Total Medicaid Rx \$	Users		Among Users			
		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	\$2,600,389,863	1,653,710	4.7	17,664,642	0.6	\$248	\$147
ANTIASTHMATIC	1,346,347,744	6,130,498	17.3	61,599,505	0.3	77	22
ANTICONVULSANT	1,279,501,702	1,601,177	4.5	16,904,823	0.6	120	76
ANTIVIRAL	1,184,453,930	706,787	2.0	7,216,568	0.4	442	164
ANTIDEPRESSANTS	942,888,287	3,166,531	8.9	32,223,014	0.5	62	29
ULCER DRUGS	781,659,972	2,539,413	7.2	25,824,247	0.4	85	30
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	743,256,287	1,198,646	3.4	12,346,044	0.6	105	60
ANALGESICS - Narcotic	632,005,360	6,072,834	17.1	59,805,349	0.3	38	11
ANTIDIABETIC	629,214,981	1,382,760	3.9	14,225,963	0.6	76	44
ANTIHYPERTENSIVE	614,026,612	1,102,200	3.1	11,724,335	0.5	102	52
Total	10,753,744,738	25,554,556	n.a.	259,534,490	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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, UNITED STATES, 2006

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIASTHMATIC			
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	103,866,781	\$10,753,744,738	1,653,710	4.7	17,664,642	0.6	\$147	6,130,498	17.3	61,599,505	0.3	\$22
Female												
All Females	61,261,622	5,767,105,289	845,142	4.0	8,988,262	0.6	133	3,254,814	15.4	32,820,166	0.3	22
Female, Disabled												
All Ages	36,209,636	3,862,185,253	550,007	25.9	6,142,867	0.6	155	944,841	44.5	10,594,341	0.4	32
5 and younger	296,661	30,088,583	1,111	1.3	12,403	0.4	82	44,042	51.0	488,121	0.3	27
6-14	1,238,003	156,584,884	25,495	13.8	286,114	0.6	130	65,970	35.8	754,479	0.3	28
15-20	1,169,685	152,183,478	32,971	20.4	368,659	0.6	135	40,055	24.8	456,175	0.3	25
21-44	9,655,285	1,143,925,337	211,898	33.1	2,350,524	0.6	151	226,869	35.4	2,548,465	0.3	26
45-64	23,546,328	2,351,750,981	274,981	26.8	3,085,559	0.7	163	560,657	54.7	6,268,936	0.4	36
65-74	281,449	25,850,468	3,253	16.6	36,297	0.7	171	6,690	34.1	71,932	0.4	35
75-84	20,523	1,683,361	264	7.1	2,957	0.7	129	511	13.8	5,710	0.4	30
85 and older	1,702	118,161	34	3.6	354	0.5	87	47	5.0	523	0.3	17
Female, Other Eligibles												
All Ages	25,049,474	1,904,831,907	295,116	1.6	2,845,340	0.4	87	2,309,724	12.2	22,224,609	0.2	17
5 and younger	1,987,792	139,519,097	3,423	0.1	36,015	0.4	69	766,040	18.1	7,362,199	0.2	15
6-14	4,222,744	382,500,931	56,712	1.4	596,576	0.5	110	650,415	16.4	6,519,061	0.2	18
15-20	3,236,786	250,206,515	65,408	2.2	658,350	0.5	96	268,468	9.0	2,624,879	0.2	15
21-44	11,259,365	759,660,165	135,302	1.9	1,222,941	0.3	68	490,754	7.0	4,423,023	0.3	17
45-64	3,188,430	277,750,384	25,352	3.9	234,639	0.4	88	108,811	16.5	1,021,484	0.4	29
65-74	746,980	63,534,518	5,014	6.0	55,619	0.7	141	15,247	18.2	166,277	0.4	34
75-84	316,421	25,346,543	2,407	4.7	25,812	0.5	87	7,546	14.6	81,892	0.4	30
85 and older	90,956	6,313,754	1,498	4.9	15,388	0.5	68	2,443	8.0	25,794	0.4	26
Male												
All Males	42,597,612	4,986,194,084	808,509	5.7	8,675,937	0.6	162	2,873,669	20.2	28,763,642	0.3	22
Male, Disabled												
All Ages	25,062,005	3,278,047,598	543,300	25.4	6,034,427	0.7	179	622,955	29.1	6,920,161	0.4	31
5 and younger	479,681	47,947,415	3,875	3.1	42,489	0.5	89	72,576	58.2	805,238	0.3	28
6-14	3,005,038	381,245,606	85,291	22.9	957,349	0.6	139	140,485	37.7	1,601,320	0.3	26
15-20	1,940,602	277,303,702	66,281	24.6	743,738	0.6	161	58,326	21.6	664,588	0.3	26
21-44	7,136,214	1,083,218,483	212,190	34.5	2,345,771	0.7	196	100,001	16.3	1,111,365	0.4	26
45-64	12,368,266	1,474,804,452	173,644	23.4	1,922,825	0.7	188	248,042	33.4	2,701,232	0.5	38
65-74	123,190	12,700,537	1,869	16.2	20,603	0.8	180	3,226	27.9	33,212	0.4	37
75-84	8,289	769,270	135	7.5	1,477	0.8	175	283	15.7	3,017	0.4	30
85 and older	725	58,133	15	4.5	175	0.7	138	16	4.8	189	0.2	10

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, UNITED STATES, 2006

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTIASTHMATIC			
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	17,532,781	1,708,025,195	265,187	2.2	2,641,449	0.5	122	2,250,389	18.6	21,841,552	0.2	19
5 and younger	2,876,247	213,631,241	8,566	0.2	88,866	0.4	77	1,055,945	24.0	10,087,016	0.2	16
6-14	7,205,941	715,529,018	123,739	3.1	1,287,993	0.6	125	854,114	21.2	8,525,146	0.3	20
15-20	2,734,006	283,951,030	74,323	4.0	749,650	0.6	131	203,930	11.1	2,014,374	0.3	18
21-44	2,525,677	253,044,270	40,263	2.9	341,792	0.4	100	79,881	5.8	679,390	0.3	22
45-64	1,665,924	195,536,153	13,559	3.6	122,983	0.5	116	41,342	11.1	375,184	0.4	32
65-74	335,687	30,519,547	2,843	5.9	30,706	0.7	145	8,609	17.9	91,291	0.4	37
75-84	155,557	13,343,865	1,374	4.4	14,375	0.6	102	5,237	16.7	55,261	0.4	35
85 and older	33,742	2,470,071	520	4.1	5,084	0.5	71	1,331	10.6	13,890	0.4	30
Unknown	12,885	654,785	100	0.1	559	0.6	102	2,589	2.2	18,842	0.2	13

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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, UNITED STATES, 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIVIRAL					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	Mean 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
All	1,601,177	4.5	16,904,823	0.6	\$76	706,787	2.0	7,216,568	0.4	\$164	3,166,531	8.9	32,223,014	0.5	\$29
Female															
All Females	971,744	4.6	10,195,440	0.6	71	421,401	2.0	4,247,857	0.3	125	2,232,996	10.6	22,558,545	0.5	30
Female, Disabled															
All Ages	608,165	28.7	6,793,648	0.7	81	123,961	5.8	1,385,963	0.5	246	1,056,118	49.8	11,758,491	0.5	35
5 and younger	8,879	10.3	98,458	0.7	93	2,038	2.4	22,876	0.3	45	567	0.7	6,272	0.4	11
6-14	33,919	18.4	385,632	0.8	123	5,511	3.0	63,706	0.4	141	18,916	10.3	212,736	0.5	21
15-20	33,444	20.7	378,688	0.8	123	5,577	3.5	63,823	0.4	158	37,616	23.3	420,930	0.5	27
21-44	215,619	33.7	2,399,123	0.7	91	48,401	7.6	535,417	0.5	247	347,107	54.2	3,849,516	0.5	33
45-64	312,940	30.5	3,494,956	0.6	64	62,012	6.1	695,594	0.5	270	646,422	63.1	7,209,142	0.6	37
65-74	3,083	15.7	33,570	0.7	51	399	2.0	4,279	0.4	166	5,119	26.1	55,742	0.6	34
75-84	247	6.7	2,872	0.6	34	22	0.6	256	0.2	68	336	9.1	3,775	0.6	28
85 and older	34	3.6	349	0.5	16	1	0.1	12	0.1	6	35	3.7	378	0.5	18
Female, Other Eligibles															
All Ages	363,562	1.9	3,401,740	0.5	52	297,405	1.6	2,861,741	0.2	66	1,176,730	6.2	10,799,614	0.4	24
5 and younger	10,470	0.2	103,010	0.5	58	43,401	1.0	446,029	0.1	7	3,004	0.1	30,337	0.3	10
6-14	37,710	1.0	387,480	0.6	79	51,741	1.3	542,211	0.1	25	80,578	2.0	838,262	0.4	19
15-20	50,233	1.7	497,651	0.5	70	42,093	1.4	407,260	0.2	36	183,806	6.2	1,794,554	0.4	20
21-44	210,902	3.0	1,893,151	0.4	44	140,492	2.0	1,269,494	0.3	89	748,747	10.7	6,639,648	0.4	24
45-64	43,301	6.6	400,794	0.5	45	17,916	2.7	177,066	0.5	241	138,290	21.0	1,254,755	0.5	32
65-74	6,878	8.2	75,509	0.6	39	1,161	1.4	12,964	0.2	97	13,742	16.4	150,386	0.5	27
75-84	3,070	5.9	33,680	0.5	29	459	0.9	5,177	0.2	34	6,048	11.7	65,648	0.5	24
85 and older	998	3.2	10,465	0.5	24	142	0.5	1,540	0.1	24	2,515	8.2	26,024	0.5	24
Male															
All Males	629,361	4.4	6,708,856	0.7	83	285,263	2.0	2,967,733	0.4	221	933,371	6.6	9,663,607	0.5	29
Male, Disabled															
All Ages	450,334	21.1	4,999,922	0.7	90	126,922	5.9	1,371,870	0.6	353	552,492	25.8	6,066,386	0.5	32
5 and younger	11,999	9.6	132,870	0.7	87	2,671	2.1	30,318	0.2	29	1,315	1.1	14,673	0.4	11
6-14	57,868	15.5	656,603	0.7	107	8,246	2.2	95,535	0.3	104	45,161	12.1	510,667	0.5	22
15-20	46,378	17.2	524,004	0.8	121	4,901	1.8	56,279	0.4	171	47,336	17.6	532,639	0.5	29
21-44	165,202	26.9	1,834,452	0.8	102	45,594	7.4	476,847	0.6	355	189,279	30.8	2,065,849	0.5	33
45-64	167,186	22.5	1,833,632	0.7	63	65,170	8.8	709,238	0.7	413	267,309	36.0	2,920,296	0.5	33
65-74	1,579	13.7	16,974	0.7	54	328	2.8	3,509	0.8	317	1,972	17.1	20,916	0.6	33
75-84	113	6.3	1,291	0.7	40	12	0.7	144	0.3	126	103	5.7	1,156	0.6	28
85 and older	9	2.7	96	0.5	23	0	0.0	0	0.0	0	17	5.1	190	0.5	27

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, UNITED STATES, 2006

Beneficiary Characteristics	ANTICONVULSANT					ANTIVIRAL					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	Mean 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
Male, Other Eligibles															
All Ages	179,004	1.5	1,708,848	0.5	63	158,300	1.3	1,595,698	0.3	107	380,733	3.1	3,596,715	0.4	24
5 and younger	14,176	0.3	139,358	0.5	56	46,658	1.1	479,731	0.1	7	4,606	0.1	46,924	0.3	9
6-14	54,161	1.3	558,418	0.6	73	48,878	1.2	511,518	0.1	23	107,074	2.7	1,109,909	0.5	20
15-20	36,292	2.0	359,960	0.6	80	16,950	0.9	170,228	0.2	52	96,006	5.2	943,487	0.4	24
21-44	48,185	3.5	406,789	0.5	47	28,456	2.1	260,703	0.6	290	115,463	8.3	968,337	0.4	26
45-64	20,840	5.6	186,834	0.5	47	16,262	4.4	161,554	0.7	436	49,271	13.2	439,469	0.5	30
65-74	3,395	7.0	36,472	0.6	45	717	1.5	7,828	0.4	154	5,042	10.5	54,405	0.5	26
75-84	1,529	4.9	16,546	0.5	33	319	1.0	3,484	0.2	47	2,481	7.9	26,247	0.5	25
85 and older	426	3.4	4,471	0.5	22	60	0.5	652	0.1	31	790	6.3	7,937	0.5	21
Unknown	112	0.1	665	0.6	68	199	0.2	1,296	0.2	31	458	0.4	1,808	0.5	27

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

Nondual Medicaid Beneficiaries

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, UNITED STATES, 2006

Beneficiary Characteristics	ULCER DRUGS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANALGESICS - Narcotic				
	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	2,539,413	7.2	25,824,247	0.4	\$30	1,198,646	3.4	12,346,044	0.6	\$60	6,072,834	17.1	59,805,349	0.3	\$11
Female															
All Females	1,671,043	7.9	17,050,720	0.4	30	372,263	1.8	3,834,781	0.5	58	4,294,762	20.4	41,889,482	0.3	9
Female, Disabled															
All Ages	739,159	34.8	8,299,139	0.5	41	86,945	4.1	975,984	0.6	64	1,313,338	61.9	14,673,203	0.4	19
5 and younger	14,493	16.8	153,579	0.4	30	1,947	2.3	21,085	0.4	41	6,803	7.9	76,822	0.1	1
6-14	17,797	9.7	205,158	0.4	40	39,326	21.4	441,557	0.6	60	19,682	10.7	227,608	0.1	2
15-20	20,988	13.0	239,527	0.3	30	16,115	10.0	182,707	0.6	60	44,628	27.6	508,901	0.2	3
21-44	188,968	29.5	2,128,620	0.4	35	15,653	2.4	174,228	0.5	68	448,045	70.0	5,002,853	0.3	16
45-64	489,322	47.8	5,489,173	0.5	45	13,848	1.4	155,797	0.5	80	786,279	76.7	8,771,232	0.4	22
65-74	6,869	35.0	74,965	0.5	41	52	0.3	574	0.5	79	7,328	37.4	79,393	0.4	13
75-84	635	17.1	7,155	0.4	34	4	0.1	36	0.4	4	519	14.0	5,822	0.3	6
85 and older	87	9.3	962	0.3	23	0	0.0	0	0.0	0	54	5.8	572	0.3	6
Female, Other Eligibles															
All Ages	931,551	4.9	8,750,197	0.3	20	285,317	1.5	2,858,795	0.5	56	2,980,683	15.7	27,213,572	0.2	4
5 and younger	127,728	3.0	1,095,834	0.2	12	10,763	0.3	110,540	0.4	36	102,110	2.4	1,049,615	0.1	1
6-14	113,335	2.9	1,172,370	0.2	14	188,693	4.8	1,919,388	0.6	57	212,357	5.4	2,208,487	0.1	1
15-20	131,014	4.4	1,285,836	0.2	12	50,226	1.7	510,749	0.5	56	526,600	17.7	4,972,892	0.2	2
21-44	408,500	5.9	3,712,105	0.3	21	31,280	0.4	278,152	0.5	56	1,912,210	27.4	16,826,641	0.2	5
45-64	109,295	16.6	1,033,760	0.4	30	4,190	0.6	38,259	0.5	72	194,828	29.6	1,800,445	0.3	11
65-74	25,669	30.6	277,051	0.4	41	99	0.1	1,022	0.5	51	20,696	24.7	227,459	0.3	8
75-84	12,350	23.9	134,701	0.4	40	41	0.1	438	0.4	62	9,078	17.5	99,363	0.3	7
85 and older	3,660	11.9	38,540	0.5	39	25	0.1	247	0.5	27	2,804	9.1	28,670	0.3	10
Male															
All Males	867,399	6.1	8,767,324	0.4	31	826,327	5.8	8,510,749	0.6	61	1,777,371	12.5	17,912,390	0.3	13
Male, Disabled															
All Ages	412,372	19.3	4,549,393	0.5	41	213,837	10.0	2,398,803	0.6	65	774,073	36.2	8,436,047	0.4	22
5 and younger	18,800	15.1	201,098	0.4	31	6,879	5.5	75,229	0.4	36	11,415	9.2	129,374	0.1	1
6-14	26,077	7.0	301,156	0.4	39	139,008	37.3	1,558,255	0.6	64	34,198	9.2	395,705	0.1	1
15-20	22,837	8.5	261,118	0.4	35	48,315	17.9	548,625	0.6	68	49,248	18.3	561,156	0.2	3
21-44	109,843	17.9	1,218,597	0.5	39	14,007	2.3	155,295	0.6	70	250,221	40.7	2,720,689	0.3	19
45-64	231,636	31.2	2,533,542	0.5	44	5,596	0.8	61,078	0.6	83	425,649	57.3	4,594,582	0.5	28
65-74	2,894	25.0	30,712	0.5	42	31	0.3	309	0.7	64	3,166	27.4	32,575	0.4	16
75-84	258	14.3	2,875	0.5	43	1	0.1	12	0.1	2	159	8.8	1,792	0.3	9
85 and older	27	8.1	295	0.5	32	0	0.0	0	0.0	0	17	5.1	174	0.3	5

Nondual Medicaid Beneficiaries

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, UNITED STATES, 2006

Beneficiary Characteristics	ULCER DRUGS					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANALGESICS - Narcotic				
	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
Male, Other Eligibles															
All Ages	454,676	3.8	4,216,555	0.3	19	612,485	5.1	6,111,921	0.6	60	1,002,465	8.3	9,473,055	0.2	6
5 and younger	151,289	3.4	1,296,256	0.2	13	29,435	0.7	300,762	0.4	34	139,258	3.2	1,424,872	0.1	1
6-14	94,516	2.3	979,044	0.2	15	468,324	11.6	4,681,250	0.6	60	217,041	5.4	2,255,416	0.1	1
15-20	58,734	3.2	586,425	0.2	16	104,161	5.7	1,042,155	0.6	65	233,669	12.7	2,300,598	0.1	2
21-44	82,812	6.0	713,287	0.3	27	8,692	0.6	71,281	0.5	60	306,956	22.2	2,534,164	0.3	13
45-64	48,773	13.0	445,028	0.4	29	1,788	0.5	15,579	0.5	74	91,285	24.4	807,363	0.4	17
65-74	11,076	23.0	116,896	0.4	40	41	0.1	439	0.5	87	9,090	18.9	96,330	0.3	9
75-84	5,948	19.0	63,690	0.4	40	35	0.1	369	0.4	37	4,210	13.4	44,638	0.2	6
85 and older	1,528	12.2	15,929	0.4	36	9	0.1	86	0.3	19	956	7.6	9,674	0.3	7
Unknown	1,655	1.4	8,963	0.3	13	62	0.1	541	0.5	62	2,275	1.9	9,472	0.3	3

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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, UNITED STATES, 2006

Beneficiary Characteristics	ANTI-DIABETIC					ANTIHYPERLIPIDEMIC					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ 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	1,382,760	3.9	14,225,963	0.6	\$44	1,102,200	3.1	11,724,335	0.5	\$52	35,456,693	269,351,694
Female												
All Females	921,815	4.4	9,543,937	0.6	44	684,647	3.2	7,354,136	0.5	52	21,090,425	159,006,747
Female, Disabled												
All Ages	578,849	27.3	6,440,899	0.6	47	471,240	22.2	5,298,073	0.5	55	2,121,265	21,957,891
5 and younger	266	0.3	3,014	0.6	59	255	0.3	2,752	0.2	8	86,350	835,658
6-14	2,973	1.6	33,667	0.6	62	366	0.2	4,136	0.4	28	184,176	1,969,731
15-20	6,007	3.7	67,739	0.6	49	1,131	0.7	12,840	0.4	36	161,488	1,694,718
21-44	97,121	15.2	1,084,583	0.5	42	66,095	10.3	747,667	0.5	46	640,419	6,665,608
45-64	463,088	45.2	5,149,139	0.6	47	395,792	38.6	4,446,096	0.5	56	1,024,579	10,542,447
65-74	8,625	44.0	94,225	0.6	42	6,969	35.5	77,389	0.6	61	19,610	200,739
75-84	712	19.2	7,905	0.5	33	580	15.6	6,610	0.5	56	3,709	39,797
85 and older	57	6.1	627	0.5	25	52	5.6	583	0.4	42	934	9,193
Female, Other Eligibles												
All Ages	342,924	1.8	3,102,927	0.5	37	213,391	1.1	2,055,966	0.4	44	18,969,160	137,048,856
5 and younger	1,715	0.0	16,009	0.6	58	3,585	0.1	31,476	0.1	3	4,227,314	29,827,098
6-14	15,916	0.4	155,243	0.6	62	1,316	0.0	13,372	0.3	23	3,964,860	31,342,143
15-20	22,788	0.8	213,817	0.5	44	2,818	0.1	27,418	0.3	26	2,980,815	21,715,360
21-44	161,138	2.3	1,376,200	0.5	33	74,225	1.1	687,480	0.4	35	6,971,506	47,927,492
45-64	96,773	14.7	866,525	0.6	39	87,824	13.3	824,798	0.5	48	658,340	4,741,062
65-74	29,582	35.3	313,953	0.6	37	28,956	34.5	311,816	0.5	55	83,847	770,406
75-84	12,606	24.4	135,758	0.5	32	12,577	24.3	137,227	0.5	54	51,755	476,446
85 and older	2,406	7.8	25,422	0.6	28	2,090	6.8	22,379	0.5	52	30,723	248,849
Male												
All Males	460,859	3.2	4,681,559	0.6	46	417,525	2.9	4,369,937	0.5	53	14,247,780	109,806,222
Male, Disabled												
All Ages	304,956	14.3	3,306,412	0.6	46	287,907	13.5	3,184,751	0.6	56	2,138,636	21,580,461
5 and younger	372	0.3	3,946	0.6	59	333	0.3	3,546	0.2	7	124,602	1,207,055
6-14	3,484	0.9	39,319	0.7	61	628	0.2	7,267	0.4	26	372,559	3,968,429
15-20	5,267	2.0	59,204	0.6	60	1,783	0.7	20,010	0.4	38	269,457	2,832,254
21-44	56,373	9.2	614,495	0.6	44	58,133	9.5	651,505	0.5	49	615,071	6,214,688
45-64	235,903	31.7	2,551,633	0.6	45	223,895	30.1	2,468,316	0.6	58	743,253	7,223,330
65-74	3,311	28.6	35,204	0.6	40	2,908	25.2	31,534	0.5	58	11,562	112,293
75-84	221	12.3	2,321	0.5	26	212	11.8	2,393	0.5	48	1,798	19,069
85 and older	25	7.5	290	0.6	25	15	4.5	180	0.4	39	334	3,343

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, UNITED STATES, 2006

Beneficiary Characteristics	ANTIDIABETIC					ANTHYPERLIPIDEMIC						
	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	155,844	1.3	1,374,979	0.6	46	129,598	1.1	1,185,057	0.5	46	12,109,144	88,225,761
5 and younger	2,144	0.0	20,243	0.6	58	4,221	0.1	37,239	0.1	4	4,397,321	31,073,088
6-14	12,645	0.3	122,848	0.7	69	1,831	0.0	18,623	0.3	23	4,022,036	31,834,988
15-20	12,022	0.7	111,314	0.7	73	2,528	0.1	24,846	0.3	31	1,840,728	13,772,736
21-44	46,448	3.4	373,363	0.5	42	40,869	3.0	351,640	0.4	40	1,383,255	8,232,284
45-64	62,673	16.8	539,351	0.6	42	59,478	15.9	532,537	0.5	51	373,755	2,494,396
65-74	13,085	27.2	136,103	0.6	36	13,426	27.9	142,385	0.5	55	48,174	425,801
75-84	5,826	18.6	61,473	0.5	32	6,301	20.1	67,822	0.5	55	31,307	285,028
85 and older	1,001	8.0	10,284	0.5	27	944	7.5	9,965	0.5	49	12,568	107,440
Unknown	187	0.2	746	0.8	55	64	0.1	488	0.3	20	118,488	538,725

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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, UNITED STATES, 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	\$533	7.1	76,248	805,767
Age				
0-64	629	8.2	56,474	603,685
65-74	435	6.4	6,565	70,232
75-84	207	3.5	6,178	62,757
85 and older	90	1.9	7,031	69,093
Unknown	0	0.0	0	0
Gender				
Female	538	7.4	39,567	421,669
Male	528	6.8	36,650	383,884
Unknown	72	1.5	31	214
Race				
White	541	7.6	40,168	417,650
African American	546	6.9	21,620	233,796
Other/unknown	492	5.9	14,460	154,321
Basis of Eligibility^c				
Aged	225	3.8	17,022	172,492
Disabled	617	8.0	58,597	628,256
Adults	775	4.0	383	2,784
Children	475	5.3	243	2,230
Unknown	864	5.6	3	5

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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 84,344 beneficiaries who were in nursing facilities for part of their enrollment and their 807,684 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.

Benef(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, UNITED STATES, 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	0.3	0.0	0.4	\$96	\$81	\$2	\$13	\$152	\$321	\$144	\$35	269,755	\$41,128,739	39,320	51.6	430,138
Biologicals	0.1	0.1	0.0	0.0	21	20	0	1	195	260	0	39	7,002	1,366,530	5,553	7.3	64,207
Antineoplastic Agents	0.6	0.1	0.0	0.5	98	54	1	43	177	638	251	93	20,943	3,699,698	3,612	4.7	37,880
Endocrine/Metabolic Drugs	1.4	0.5	0.1	0.8	71	53	4	13	52	101	76	17	420,326	21,977,089	28,565	37.5	311,160
Cardiovascular Agents	2.1	0.6	0.1	1.4	81	45	12	24	38	77	109	16	954,967	35,947,036	41,414	54.3	446,429
Respiratory Agents	1.0	0.4	0.0	0.6	55	42	2	11	55	112	71	18	289,253	16,041,445	27,006	35.4	293,647
Gastrointestinal Agents	1.2	0.5	0.0	0.7	77	62	3	12	66	131	181	18	466,645	30,679,890	36,880	48.4	399,318
Genitourinary Agents	0.7	0.3	0.1	0.3	45	29	7	9	66	89	92	32	104,253	6,916,380	13,864	18.2	154,800
CNS Drugs	2.1	0.9	0.1	1.1	234	197	11	26	110	211	91	25	1,214,147	134,059,904	52,304	68.6	572,037
Stimulants/Anti-obesity/Anorexia	0.8	0.3	0.0	0.5	68	59	0	8	82	182	50	16	7,536	616,316	858	1.1	9,117
Miscellaneous Psychological/Neurological Agents	0.9	0.9	0.0	0.0	223	222	0	1	244	246	161	101	68,749	16,785,487	6,814	8.9	75,176
Analgesics and Anesthetics	1.3	0.2	0.1	1.1	66	28	14	24	50	142	180	23	489,576	24,247,386	34,230	44.9	367,523
Neuromuscular Agents	1.6	0.5	0.0	1.1	118	73	2	43	72	160	66	37	673,978	48,590,336	37,159	48.7	412,644
Nutritional Products	0.8	0.0	0.0	0.7	15	1	1	14	20	35	19	20	159,718	3,182,833	19,169	25.1	206,102
Hematological Agents	1.2	0.4	0.0	0.8	124	111	0	12	104	318	16	15	291,074	30,271,570	23,141	30.3	244,091
Topical Products	0.6	0.2	0.1	0.4	30	15	6	8	47	96	65	22	246,402	11,620,050	35,241	46.2	390,575
Miscellaneous Products	0.4	0.1	0.0	0.3	26	15	1	10	69	209	226	34	25,366	1,743,407	6,247	8.2	66,678
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	16	0	0	0	50	0	0	0	11,235	559,519	3,190	4.2	35,585
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.	5,720,925	429,433,615	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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 84,344 beneficiaries who were in nursing facilities for part of their enrollment and their 807,894 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 the U.S., 0.5 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, UNITED STATES, 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	\$104,896,472	46,260	60.7	525,087	1.0	\$210	\$200
ANTICONVULSANT	41,312,669	40,907	53.6	458,180	1.1	84	90
ANTIVIRAL	27,250,988	6,547	8.6	72,635	0.9	439	375
ULCER DRUGS	23,353,798	37,456	49.1	409,885	0.7	77	57
ANTIDEPRESSANTS	22,972,715	45,100	59.1	499,447	0.8	55	46
ANTIDIABETIC	17,910,188	33,373	43.8	366,017	0.9	53	49
HEMATOPOIETIC AGENTS	16,829,537	15,720	20.6	170,013	0.7	141	99
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	16,863,118	8,822	11.6	97,291	0.7	237	173
ANTIHYPERTENSIVE	15,640,574	19,475	25.5	218,069	0.8	91	72
ANALGESICS - Narcotic	13,538,106	36,713	48.1	390,022	0.9	39	35
Total	300,568,165	290,373	n.a.	3,206,646	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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 84,344 beneficiaries who were in nursing facilities for part of their enrollment and their 807,684 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, UNITED STATES, 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 Among Users	Number of Benefit Months	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents Among Users	Number of Benefit Months	Mean Number of Rx	Mean Rx \$
All	2,820,919	\$300,568,165	46,260	60.7	525,087	1.0	\$200	40,907	53.6	458,180	1.1	\$90
Female												
All Females	1,524,204	158,240,515	24,258	61.3	276,757	1.0	200	21,047	53.2	237,015	1.1	90
Female, Disabled												
All Ages	1,325,131	141,302,219	20,996	73.7	240,455	1.0	208	18,941	66.5	213,842	1.1	93
64 or younger	1,276,676	136,325,303	19,999	74.4	229,084	1.0	209	18,282	68.1	206,447	1.1	94
65-74	42,651	4,440,497	871	70.4	9,936	1.0	203	597	48.2	6,667	1.0	69
75-84	5,339	502,438	113	38.6	1,285	0.8	147	54	18.4	633	0.9	61
85 and older	465	33,981	13	13.4	150	0.6	103	8	8.2	95	0.7	26
Female, Other Eligibles												
All Ages	199,073	16,938,296	3,262	29.5	36,302	0.8	147	2,106	19.0	23,173	0.9	59
64 or younger	3,943	864,082	58	21.4	532	0.8	226	83	30.6	821	0.9	130
65-74	96,277	8,867,024	1,558	61.5	17,918	0.9	193	1,088	43.0	12,225	1.0	67
75-84	57,542	4,517,518	902	26.1	9,873	0.8	118	589	17.0	6,464	0.9	50
85 and older	41,311	2,689,672	744	15.5	7,979	0.6	76	346	7.2	3,663	0.8	32
Male												
All Males	1,296,538	142,318,344	21,999	60.0	248,310	1.0	200	19,855	54.2	221,123	1.1	90
Male, Disabled												
All Ages	1,189,022	131,926,621	20,162	67.0	228,684	1.0	203	18,477	61.4	206,234	1.1	92
64 or younger	1,160,609	128,897,505	19,504	67.4	221,244	1.0	203	18,043	62.3	201,435	1.1	93
65-74	25,847	2,747,420	599	62.9	6,773	0.9	180	401	42.1	4,416	1.0	76
75-84	2,154	238,729	49	31.6	552	1.0	228	32	20.6	378	1.1	62
85 and older	412	42,967	10	24.4	115	0.8	159	1	2.4	5	1.6	10
Male, Other Eligibles												
All Ages	107,516	10,391,723	1,837	28.0	19,626	0.8	164	1,378	21.0	14,889	1.0	65
64 or younger	6,252	1,478,690	76	19.9	699	0.9	237	116	30.4	1,170	1.1	104
65-74	53,952	5,119,993	927	50.4	10,314	0.9	183	742	40.3	8,148	1.0	72
75-84	33,937	2,952,090	602	26.6	6,348	0.8	149	374	16.5	4,018	0.9	55
85 and older	13,375	840,950	232	11.2	2,265	0.7	95	146	7.1	1,553	0.8	26
Unknown	177	9,306	3	9.7	20	0.8	165	5	16.1	42	1.2	21

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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 84,344 beneficiaries who were in nursing facilities for part of their enrollment and their 807,684 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, UNITED STATES, 2006

Beneficiary Characteristics	ANTIVIRAL					ULCER DRUGS					ANTIDEPRESSANTS				
	Number of Users	Users as % of All-Year Nursing Facility Residents Among Users	Number of Benefit Months	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents Among Users	Number of Benefit Months	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents Among Users	Number of Benefit Months	Mean Number of Rx	Mean Rx \$
All	6,547	8.6	72,635	0.9	\$375	37,456	49.1	409,885	0.7	\$57	45,100	59.1	499,447	0.8	\$46
Female															
All Females	2,681	6.8	30,342	0.7	300	19,564	49.4	216,599	0.7	56	25,305	64.0	282,292	0.8	48
Female, Disabled															
All Ages	2,419	8.5	27,410	0.8	312	16,282	57.1	180,776	0.7	57	21,598	75.8	241,959	0.9	49
64 or younger	2,386	8.9	27,028	0.8	314	15,614	58.1	173,490	0.8	57	20,935	77.9	234,584	0.9	49
65-74	29	2.3	334	0.3	113	576	46.5	6,287	0.7	61	572	46.2	6,356	0.8	46
75-84	3	1.0	36	0.9	383	85	29.0	915	0.6	54	84	28.7	935	0.7	38
85 and older	1	1.0	12	0.1	6	7	7.2	84	0.2	21	7	7.2	84	0.6	28
Female, Other Eligibles															
All Ages	262	2.4	2,932	0.4	187	3,282	29.6	35,823	0.7	52	3,707	33.5	40,333	0.8	39
64 or younger	90	33.2	1,000	0.9	506	79	29.2	805	0.7	54	77	28.4	568	0.6	35
65-74	67	2.6	758	0.2	40	1,237	48.9	13,988	0.8	59	1,533	60.5	17,346	0.8	46
75-84	52	1.5	595	0.1	8	983	28.4	10,669	0.7	52	1,064	30.8	11,537	0.7	37
85 and older	53	1.1	579	0.1	12	983	20.4	10,361	0.6	41	1,033	21.5	10,882	0.7	28
Male															
All Males	3,866	10.5	42,293	0.9	429	17,888	48.8	193,265	0.7	58	19,792	54.0	217,119	0.8	44
Male, Disabled															
All Ages	3,615	12.0	39,676	1.0	432	16,032	53.3	173,844	0.7	59	17,945	59.6	197,633	0.8	45
64 or younger	3,584	12.4	39,329	1.0	432	15,626	54.0	169,500	0.7	59	17,575	60.7	193,539	0.8	45
65-74	29	3.0	323	0.8	359	366	38.4	3,916	0.7	60	341	35.8	3,760	0.8	45
75-84	2	1.3	24	0.1	22	33	21.3	355	0.7	60	22	14.2	254	0.8	41
85 and older	0	0.0	0	0.0	0	7	17.1	73	0.6	26	7	17.1	80	0.8	45
Male, Other Eligibles															
All Ages	251	3.8	2,617	0.8	395	1,856	28.3	19,421	0.7	52	1,847	28.2	19,486	0.8	37
64 or younger	134	35.1	1,384	1.2	686	116	30.4	1,229	0.8	66	94	24.6	718	0.9	43
65-74	60	3.3	637	0.3	88	781	42.5	8,349	0.7	57	828	45.0	9,228	0.8	41
75-84	39	1.7	406	0.2	61	612	27.1	6,317	0.7	50	628	27.8	6,564	0.7	35
85 and older	18	0.9	190	0.1	20	347	16.8	3,526	0.6	37	297	14.4	2,976	0.6	25
Unknown	0	0.0	0	0.0	0	4	12.9	21	0.9	73	3	9.7	36	0.5	13

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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 84,344 beneficiaries who were in nursing facilities for part of their enrollment and their 807,684 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, UNITED STATES, 2006

Beneficiary Characteristics	ANTIDIABETIC					HEMATOPOIETIC AGENTS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Number of Users	Users as %	Number of	Mean	Mean	Number of Users	Users as %	Number of	Mean	Mean	Number of Users	Users as %	Number of	Mean	Mean
		of All-Year					Benefit					of All-Year			
Residents Among	Months	Rx	Rx \$	Residents Among	Months	Rx	Rx \$	Residents Among	Months	Rx	Rx \$	Residents Among	Months	Rx	Rx \$
All	33,373	43.8	366,017	0.9	\$49	15,720	20.6	170,013	0.7	\$99	8,822	11.6	97,291	0.7	\$173
Female															
All Females	19,130	48.3	211,765	0.9	50	8,041	20.3	88,240	0.7	100	5,052	12.8	56,005	0.7	206
Female, Disabled															
All Ages	15,877	55.7	175,932	1.0	52	5,980	21.0	65,758	0.7	115	3,430	12.0	38,397	0.8	256
64 or younger	15,022	55.9	166,578	1.0	52	5,692	21.2	62,622	0.7	116	3,223	12.0	36,008	0.8	266
65-74	737	59.5	8,132	0.9	46	224	18.1	2,429	0.6	94	165	13.3	1,910	0.7	119
75-84	111	37.9	1,138	0.8	36	49	16.7	547	0.6	63	37	12.6	419	0.8	109
85 and older	7	7.2	84	0.7	36	15	15.5	160	0.6	4	5	5.2	60	0.5	68
Female, Other Eligibles															
All Ages	3,253	29.4	35,833	0.8	41	2,061	18.6	22,482	0.6	57	1,622	14.6	17,608	0.7	97
64 or younger	42	15.5	339	0.8	51	40	14.8	326	0.5	80	11	4.1	104	0.3	29
65-74	1,643	64.9	18,621	0.9	47	564	22.3	6,397	0.7	75	442	17.5	5,102	0.8	117
75-84	995	28.8	10,675	0.8	37	662	19.1	7,307	0.7	71	571	16.5	5,994	0.8	98
85 and older	573	11.9	6,198	0.7	29	795	16.5	8,452	0.6	31	598	12.4	6,408	0.7	80
Male															
All Males	14,241	38.9	154,243	0.9	48	7,672	20.9	81,729	0.7	98	3,768	10.3	41,271	0.7	129
Male, Disabled															
All Ages	12,602	41.9	136,724	0.9	49	6,335	21.0	67,588	0.7	105	2,876	9.6	31,697	0.7	138
64 or younger	12,185	42.1	132,265	0.9	49	6,150	21.2	65,602	0.7	105	2,758	9.5	30,335	0.7	140
65-74	374	39.3	4,025	0.8	40	152	16.0	1,636	0.7	104	98	10.3	1,136	0.7	105
75-84	37	23.9	362	0.8	28	24	15.5	254	0.6	73	12	7.7	130	0.9	115
85 and older	6	14.6	72	0.9	48	9	22.0	96	0.6	64	8	19.5	96	0.6	94
Male, Other Eligibles															
All Ages	1,639	25.0	17,519	0.8	39	1,337	20.4	14,141	0.7	66	892	13.6	9,574	0.7	99
64 or younger	36	9.4	332	0.8	53	42	11.0	397	0.5	187	14	3.7	122	0.5	72
65-74	877	47.7	9,584	0.9	44	408	22.2	4,466	0.7	92	343	18.7	3,872	0.8	110
75-84	540	23.9	5,717	0.8	36	485	21.4	5,147	0.7	68	329	14.5	3,465	0.7	99
85 and older	186	9.0	1,886	0.6	23	402	19.4	4,131	0.6	22	206	10.0	2,115	0.6	81
Unknown	2	6.5	9	1.1	60	7	22.6	44	0.7	4	2	6.5	15	0.4	57

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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 84,344 beneficiaries who were in nursing facilities for part of their enrollment and their 807,684 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.

Nondual Medicaid Beneficiaries

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, UNITED STATES, 2006

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANALGESICS - Narcotic					All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		
All	19,475	25.5	218,069	0.8	\$72	36,713	48.1	390,022	0.9	\$35	76,248	805,767
Female												
All Females	10,543	26.6	118,933	0.8	73	20,231	51.1	218,732	0.9	34	39,567	421,669
Female, Disabled												
All Ages	8,832	31.0	99,979	0.8	74	17,474	61.3	189,504	0.9	36	28,492	309,083
64 or younger	8,419	31.3	95,348	0.8	74	16,945	63.1	183,964	0.9	36	26,864	291,531
65-74	354	28.6	3,981	0.8	73	470	38.0	4,909	0.8	26	1,238	13,337
75-84	54	18.4	594	0.8	71	54	18.4	571	0.6	23	293	3,180
85 and older	5	5.2	56	0.7	72	5	5.2	60	0.1	2	97	1,035
Female, Other Eligibles												
All Ages	1,711	15.4	18,954	0.8	65	2,757	24.9	29,228	0.6	21	11,075	112,586
64 or younger	27	10.0	257	0.6	56	74	27.3	578	0.4	12	271	2,097
65-74	816	32.2	9,345	0.8	74	1,115	44.0	12,433	0.7	24	2,532	27,652
75-84	577	16.7	6,268	0.7	62	821	23.7	8,673	0.6	19	3,460	35,232
85 and older	291	6.0	3,084	0.6	47	747	15.5	7,544	0.5	19	4,812	47,605
Male												
All Males	8,931	24.4	99,132	0.8	71	16,475	45.0	171,244	0.9	36	36,650	383,884
Male, Disabled												
All Ages	7,971	26.5	88,849	0.8	71	15,176	50.4	158,391	0.9	38	30,100	319,144
64 or younger	7,743	26.7	86,312	0.8	71	14,900	51.5	155,580	0.9	38	28,952	306,939
65-74	208	21.8	2,311	0.8	73	261	27.4	2,631	0.7	22	952	10,087
75-84	17	11.0	190	0.7	62	14	9.0	168	0.5	12	155	1,690
85 and older	3	7.3	36	0.2	11	1	2.4	12	1.3	9	41	428
Male, Other Eligibles												
All Ages	960	14.7	10,283	0.8	66	1,299	19.8	12,853	0.6	17	6,550	64,740
64 or younger	34	8.9	301	0.7	58	83	21.7	650	0.5	18	382	3,089
65-74	493	26.8	5,442	0.8	69	579	31.5	6,011	0.7	18	1,839	19,124
75-84	330	14.6	3,498	0.8	68	423	18.7	4,205	0.6	18	2,262	22,586
85 and older	103	5.0	1,042	0.6	48	214	10.4	1,987	0.5	11	2,067	19,941
Unknown	1	3.2	4	0.8	43	7	22.6	46	0.5	31	31	214

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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 84,344 beneficiaries who were in nursing facilities for part of their enrollment and their 807,684 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}
UNITED STATES, 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	8,271,052	23.3	0.9	32,946,259	\$14	\$480,181,419	\$15	2.6	35,456,693	
Age										
5 and younger	2,565,265	29.0	0.8	7,516,859	10	92,159,945	12	5.9	8,850,586	
6-14	1,733,252	20.3	0.5	4,290,927	8	72,627,280	17	2.6	8,544,511	
15-20	843,882	16.1	0.4	2,121,724	7	37,424,880	18	2.1	5,252,884	
21-44	1,806,144	18.8	0.8	7,575,576	12	114,100,943	15	2.2	9,610,374	
45-64	1,199,114	42.8	3.7	10,427,842	54	152,209,796	15	2.3	2,800,019	
65-74	71,106	43.6	3.6	592,293	43	6,958,476	12	2.8	163,247	
75-84	34,343	38.8	3.2	286,110	37	3,292,386	12	3.5	88,622	
85 and older	12,402	27.8	2.7	121,234	30	1,334,025	11	5.9	44,607	
Unknown	5,544	5.4	0.1	13,694	1	73,688	5	3.9	101,843	
Basis of Eligibility^c										
Aged	99,427	38.6	3.2	826,080	37	9,454,325	11	3.1	257,613	
Disabled	1,806,906	42.4	3.5	14,828,791	60	256,013,703	17	2.3	4,260,070	
Adults	1,683,863	16.3	0.5	5,169,962	6	66,036,133	13	2.4	10,334,553	
Children	4,670,512	22.7	0.6	12,077,059	7	148,068,763	12	3.6	20,568,080	
Unknown	10,344	28.4	1.2	44,367	17	608,495	14	1.2	36,377	
Gender										
Female	4,959,281	23.5	1.0	20,341,150	14	288,411,790	14	2.8	21,112,608	
Male	3,307,131	23.2	0.9	12,594,780	13	191,691,273	15	2.3	14,270,945	
Unknown	4,640	6.3	0.1	10,329	1	78,356	8	3.6	73,140	
Race										
White	3,403,018	23.1	1.0	15,129,356	16	229,312,493	15	2.4	14,701,985	
African American	1,739,705	20.4	0.7	5,999,971	10	84,195,039	14	2.1	8,523,327	
Other/unknown	3,128,329	25.6	1.0	11,816,932	14	166,673,887	14	3.5	12,231,381	
Use of Nursing Facilities^d										
Entire year	47,730	62.6	11.3	862,141	143	10,890,640	13	2.5	76,248	
Part year	61,583	73.0	8.5	719,082	139	11,705,960	16	2.9	84,344	
None	8,161,739	23.1	0.9	31,365,036	13	457,584,819	15	2.6	35,296,101	
Maintenance Assistance Status										
Cash	3,191,671	29.3	1.6	17,104,135	25	274,488,403	16	2.5	10,875,603	
Medically needy	443,088	27.6	1.2	1,859,197	15	23,997,906	13	2.7	1,605,466	
Poverty related	2,959,332	22.5	0.6	7,676,599	7	94,490,580	12	3.4	13,148,440	
Other/unknown	1,676,961	17.1	0.6	6,306,328	9	87,204,530	14	2.4	9,827,184	

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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 excluded 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 or adoptive services.

d. Please refer to footnote I 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}
 UNITED STATES, 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	\$15	\$0	\$0	269,351,694
Age						
5 and younger	0.1	1	12	0	0	63,014,334
6-14	0.1	1	17	0	0	69,121,500
15-20	0.1	1	18	0	0	40,017,559
21-44	0.1	2	15	0	1	69,040,900
45-64	0.4	6	15	0	2	25,001,874
65-74	0.4	5	12	0	1	1,509,617
75-84	0.3	4	12	0	1	820,612
85 and older	0.3	4	11	0	1	369,057
Unknown	0.0	0	5	0	0	456,241
Basis of Eligibility^c						
Aged	0.4	4	11	0	1	2,314,782
Disabled	0.3	6	17	0	2	43,539,729
Adults	0.1	1	13	0	0	69,672,807
Children	0.1	1	12	0	0	153,535,032
Unknown	0.2	2	14	0	1	289,344
Gender						
Female	0.1	2	14	0	0	159,083,797
Male	0.1	2	15	0	0	109,887,414
Unknown	0.0	0	8	0	0	380,483
Race						
White	0.1	2	15	0	1	115,401,674
African American	0.1	1	14	0	0	66,470,254
Other/unknown	0.1	2	14	0	0	87,479,766
Use of Nursing Facilities^d						
Entire year	1.1	14	13	0	4	805,767
Part year	0.9	14	16	0	3	807,684
None	0.1	2	15	0	0	267,738,243
Maintenance Assistance Status						
Cash	0.2	3	16	0	1	87,723,801
Medically needy	0.2	2	13	0	0	11,578,557
Poverty related	0.1	1	12	0	0	97,998,890
Other/unknown	0.1	1	14	0	0	72,050,446

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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 excluded 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}
 UNITED STATES, 2006
 drug category

All	10,354,326	\$46	\$480,181,419	100.0	32,946,259	\$15	100.0
Anorexia or weight loss/gain	777	152	117,738	0.0	2,245	52	0.0
Fertility drugs	371	103	38,235	0.0	639	60	0.0
Drugs for cosmetic purposes	7,137	15	108,852	0.0	10,314	11	0.0
Cough and cold medications	2,922,147	33	95,545,191	19.9	5,009,610	19	15.2
Vitamins and minerals	702,917	57	39,755,034	8.3	2,325,846	17	7.1
Non-prescription drugs	5,248,894	40	211,145,869	44.0	17,818,363	12	54.1
Barbiturates	58,568	63	3,690,110	0.8	468,003	8	1.4
Benzodiazepines	1,195,225	78	93,087,548	19.4	6,716,187	14	20.4
Other Part D Excl Rx Drugs	218,290	168	36,692,842	7.6	595,052	62	1.8

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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 excluded 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, UNITED STATES, 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	48,001,567	296,367	5,160,903	13,212,233	29,294,370	37,694	446,237,549	2,808,858	55,771,676	109,831,999	277,511,324	313,692
Age												
5 and younger	12,146,942	18	256,333	1,233	11,889,354	4	111,296,546	86	2,729,316	9,878	108,557,238	28
6-14	12,478,225	23	724,049	2,828	11,751,322	3	125,069,906	181	8,212,005	22,035	116,835,655	30
15-20	7,165,329	32	543,933	1,176,157	5,444,360	847	66,167,367	284	6,030,997	9,157,109	50,973,072	5,905
21-44	12,138,070	190	1,502,622	10,507,949	112,897	14,412	104,284,233	1,356	16,225,600	87,291,073	658,615	107,589
45-64	3,625,696	1,622	2,091,012	1,509,453	1,467	22,142	35,618,025	14,339	22,126,810	13,268,792	9,979	198,105
65-74	193,877	154,492	35,744	3,338	17	286	1,895,505	1,502,099	370,042	21,238	91	2,035
75-84	100,405	94,218	5,879	302	6	0	969,788	903,759	63,677	2,282	70	0
85 and older	47,183	45,690	1,323	146	24	0	400,630	386,428	13,164	902	136	0
Unknown	105,840	82	8	10,827	94,923	0	535,549	326	65	58,690	476,468	0
Gender												
Female	28,054,719	190,364	2,576,811	10,632,355	14,617,508	37,681	258,377,647	1,811,147	28,156,306	89,425,741	138,670,897	313,556
Male	19,869,284	105,842	2,583,925	2,576,110	14,603,394	13	187,429,315	996,668	27,613,921	20,394,406	138,424,184	136
Unknown	77,564	161	167	3,768	73,468	0	430,587	1,043	1,449	11,852	416,243	0
Race												
White	19,006,161	84,124	2,343,615	5,318,365	11,239,406	20,651	175,939,756	760,311	25,023,296	43,741,570	106,249,679	164,900
African American	11,803,991	45,845	1,411,385	2,868,747	7,472,825	5,189	114,955,781	437,396	15,404,599	25,018,230	74,051,384	44,172
Other/unknown	17,191,415	166,398	1,405,903	5,025,121	10,582,139	11,854	155,342,012	1,611,151	15,343,781	41,072,199	97,210,261	104,620
Use of Nursing Facilities^c												
Entire year	76,832	17,155	59,012	405	257	3	813,416	174,201	633,974	2,928	2,308	5
Part year	86,059	10,619	69,737	4,147	1,484	72	870,894	101,463	714,977	39,888	13,896	670
None	47,838,676	268,593	5,032,154	13,207,681	29,292,629	37,619	444,553,239	2,533,194	54,422,725	109,789,183	277,495,120	313,017
Maintenance Assistance Status												
Cash	16,608,482	83,145	4,268,107	4,179,421	8,077,809	0	167,059,277	881,370	47,404,919	37,486,685	81,286,303	0
Medically needy	2,100,906	109,994	198,471	903,959	888,482	0	18,146,543	1,037,165	1,720,435	7,555,519	7,833,424	0
Poverty related	16,703,411	41,375	229,531	1,414,699	14,980,112	37,694	152,629,234	364,346	2,101,101	8,799,847	141,050,248	313,692
Other/unknown	12,588,768	61,853	464,794	6,714,154	5,347,967	0	108,402,495	525,977	4,545,221	55,989,948	47,341,349	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	24,575,002	233,709	3,774,913	7,415,245	13,117,390	33,745	214,052,519	2,169,240	40,180,145	55,841,977	115,587,215	273,942
FFS part year, with Rx claims	3,926,031	10,467	236,553	1,183,145	2,493,778	2,088	39,670,790	110,649	2,605,025	11,147,372	25,785,830	21,914
FFS part year, no Rx claims	4,955,499	7,791	109,949	1,199,020	3,638,225	514	45,761,542	71,276	1,090,815	10,347,134	34,247,123	5,194
MC all year, with Rx claims	2,440,119	7,545	305,261	641,561	1,485,711	41	26,442,731	86,794	3,576,533	6,701,410	16,077,645	349
MC all year, no Rx claims	12,104,255	36,855	734,218	2,773,052	8,558,824	1,306	120,309,035	370,899	8,319,132	25,793,884	85,812,827	12,293

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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

APPENDIX TABLE A.2
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 NONDUAL BENEFICIARIES, UNITED STATES, 2006

	Beneficiaries and		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Benefit Months in Cell J of Table 1		Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	48,001,567	446,237,549	35,456,693	269,351,694	439,958	176,885,855
Fee-for-service (FFS) all year	24,575,002	214,052,519	24,575,002	214,048,750	0	3,769
FFS part year, with Rx claims	3,926,031	39,670,790	3,926,028	18,369,303	3	21,301,487
FFS part year, with no Rx claims	4,955,499	45,761,542	4,955,471	15,368,856	28	30,392,686
Managed care (MC) all year, with Rx claims	2,440,119	26,442,731	2,000,192	21,564,785	439,927	4,877,946
MC all year, with no Rx claims	12,104,255	120,309,035	0	0	0	120,309,035

Unknown

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

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

APPENDIX TABLE A.3
MANAGED CARE PENETRATION RATES, ALL STATES COMBINED AND BY STATE, BY BASIS OF ELIGIBILITY
NONDUAL BENEFICIARIES, UNITED STATES, 2006a,b

	All Nonduals		Aged/Disabled			Adults/Children		
	Number of Beneficiaries	Percentage of Beneficiaries Enrolled in MC all Year	Number of Beneficiaries	Number of Beneficiaries Enrolled in MC all Year	Percentage of Beneficiaries Enrolled in MC all Year	Number of Beneficiaries	Number of Beneficiaries Enrolled in MC all Year	Percentage of Beneficiaries Enrolled in MC all Year
All States	48,001,567	30.3	5,457,270	1,083,879	19.9	42,506,603	13,459,148	31.7
Alabama	762,948	0.0	113,265	55	0.0	649,310	0	0.0
Alaska	117,172	0.0	9,288	0	0.0	107,720	0	0.0
Arizona	1,191,401	85.9	85,108	55,593	65.3	1,106,135	967,690	87.5
Arkansas	651,412	0.0	74,499	0	0.0	576,342	0	0.0
California	8,441,537	33.7	719,765	166,148	23.1	7,713,156	2,674,835	34.7
Colorado	476,925	3.9	48,511	3,670	7.6	428,153	15,116	3.5
Connecticut	433,597	67.6	33,156	87	0.3	400,185	293,239	73.3
Delaware	153,218	94.4	12,127	12,087	99.7	141,033	132,479	93.9
D.C.	144,065	64.3	25,463	2,752	10.8	118,602	89,812	75.7
Florida	2,345,350	26.6	310,586	86,383	27.8	2,034,439	536,326	26.4
Georgia	1,479,681	2.4	158,269	137	0.1	1,318,884	34,850	2.6
Hawaii	199,523	68.9	16,374	1,324	8.1	183,109	136,185	74.4
Idaho	195,435	0.0	20,780	0	0.0	174,655	0	0.0
Illinois	2,048,050	4.2	190,895	33	0.0	1,856,474	86,433	4.7
Indiana	871,341	48.7	80,319	10,478	13.0	790,758	413,870	52.3
Iowa	388,411	1.1	35,086	0	0.0	353,083	4,186	1.2
Kansas	295,049	19.6	35,039	5	0.0	259,808	57,869	22.3

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

a. Appendix Table A.3 was derived from data contained in Appendix Table A.1 for each state.

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.

CMS = Centers for Medicare & Medicaid Services; D.C. = District of Columbia; MAX = Medicaid Analytic Extract; MC = managed care.

Nondual Medicaid Beneficiaries

APPENDIX TABLE A.3
MANAGED CARE PENETRATION RATES, ALL STATES COMBINED AND BY STATE, BY BASIS OF ELIGIBILITY
NONDUAL BENEFICIARIES, UNITED STATES, 2006a,b

	All Nonduals		Aged/Disabled			Adults/Children		
	Number of Beneficiaries	Percentage of Beneficiaries Enrolled in MC all Year	Number of Beneficiaries	Number of Beneficiaries Enrolled in MC all Year	Percentage of Beneficiaries Enrolled in MC all Year	Number of Beneficiaries	Number of Beneficiaries Enrolled in MC all Year	Percentage of Beneficiaries Enrolled in MC all Year
Kentucky	701,783	21.9	140,529	23,669	16.8	560,788	130,063	23.2
Louisiana	1,023,291	0.0	126,803	0	0.0	895,394	0	0.0
Maine								
Maryland	726,691	61.1	91,532	59,689	65.2	634,741	384,467	60.6
Massachusetts	948,471	32.9	147,937	23,065	15.6	800,534	288,849	36.1
Michigan	1,556,670	45.8	181,499	110,094	60.7	1,373,880	603,493	43.9
Minnesota	623,418	36.7	60,412	2,617	4.3	562,540	226,255	40.2
Mississippi	610,794	0.0	93,362	0	0.0	517,212	0	0.0
Missouri	933,902	40.7	103,287	337	0.3	830,030	379,971	45.8
Montana	81,580	0.0	11,687	0	0.0	69,865	1	0.0
Nebraska	220,641	53.7	17,112	10,044	58.7	203,153	108,347	53.3
Nevada	210,088	31.3	22,567	0	0.0	187,347	65,781	35.1
New Hampshire	115,128	0.0	9,565	0	0.0	105,563	0	0.0
New Jersey	857,511	59.9	107,124	37,115	34.6	750,048	476,766	63.6
New Mexico	454,337	39.8	38,536	24,783	64.3	415,480	156,055	37.6
New York	3,715,382	53.0	468,474	102,788	21.9	3,246,058	1,867,868	57.5
North Carolina	1,333,796	0.1	160,916	27	0.0	1,172,880	1,281	0.1
North Dakota	58,802	0.4	4,791	0	0.0	54,011	244	0.5
Ohio	1,855,546	28.7	227,029	2,116	0.9	1,628,517	531,304	32.6
Oklahoma	647,824	0.0	57,915	0	0.0	583,279	0	0.0
Oregon	388,847	54.3	44,165	25,986	58.8	344,286	185,318	53.8
Pennsylvania	1,683,827	60.6	350,673	223,891	63.8	1,331,661	795,957	59.8
Rhode Island	180,326	67.1	25,789	3,931	15.2	154,140	117,031	75.9

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

a. Appendix Table A.3 was derived from data contained in Appendix Table A.1 for each state.

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.

CMS = Centers for Medicare & Medicaid Services; D.C. = District of Columbia; MAX = Medicaid Analytic Extract; MC = managed care.

Nondual Medicaid Beneficiaries

APPENDIX TABLE A.3
MANAGED CARE PENETRATION RATES, ALL STATES COMBINED AND BY STATE, BY BASIS OF ELIGIBILITY
NONDUAL BENEFICIARIES, UNITED STATES, 2006a,b

	All Nonduals		Aged/Disabled			Adults/Children		
	Number of Beneficiaries	Percentage of Beneficiaries Enrolled in MC all Year	Number of Beneficiaries	Number of Beneficiaries Enrolled in MC all Year	Percentage of Beneficiaries Enrolled in MC all Year	Number of Beneficiaries	Number of Beneficiaries Enrolled in MC all Year	Percentage of Beneficiaries Enrolled in MC all Year
South Carolina	798,196	6.6	87,381	5,345	6.1	710,057	47,576	6.7
South Dakota	110,258	0.0	8,826	0	0.0	101,356	0	0.0
Tennessee	1,177,660	0.0	168,969	0	0.0	1,005,899	0	0.0
Texas	3,453,875	17.4	348,341	46,522	13.4	3,103,971	554,820	17.9
Utah	241,987	0.0	19,861	11	0.1	221,866	0	0.0
Vermont	125,402	0.0	9,572	0	0.0	115,704	0	0.0
Virginia	728,541	44.6	88,793	40,369	45.5	639,251	284,368	44.5
Washington	1,041,601	41.3	108,320	1,581	1.5	932,804	428,741	46.0
West Virginia	317,467	32.9	72,190	904	1.3	245,017	103,531	42.3
Wisconsin	813,195	34.2	79,604	243	0.3	733,175	278,171	37.9
Wyoming	69,615	0.0	5,179	0	0.0	64,250	0	0.0

Source: Data for this table are from the MAX 2006 file for the U.S., released by CMS in 1/2010. This table was produced on 03/29/2010.

a. Appendix Table A.3 was derived from data contained in Appendix Table A.1 for each state.

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.

CMS = Centers for Medicare & Medicaid Services; D.C. = District of Columbia; MAX = Medicaid Analytic Extract; MC = managed care.

Nondual Medicaid Beneficiaries