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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, WASHINGTON, 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	611,238	7,072	99,667	249,840	254,182	477	3,924,160	73,012	1,013,141	1,541,984	1,291,783	4,240
Age												
5 and younger	104,703	0	4,027	3	100,673	0	465,368	0	39,622	9	425,737	0
6-14	115,137	1	10,358	219	104,559	0	708,298	3	113,114	1,229	593,952	0
15-20	109,834	7	8,866	52,109	48,852	0	746,577	78	94,689	380,116	271,694	0
21-44	222,436	18	34,137	188,092	97	92	1,459,658	163	339,175	1,119,140	395	785
45-64	52,114	145	42,188	9,396	0	385	472,174	1,254	426,055	41,410	0	3,455
65-74	4,297	4,192	89	16	0	0	44,094	43,567	462	65	0	0
75-84	2,185	2,180	2	3	0	0	22,691	22,659	24	8	0	0
85 and older	532	529	0	2	1	0	5,300	5,288	0	7	5	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	402,676	4,448	50,471	221,268	126,012	477	2,644,357	46,089	522,780	1,428,764	642,484	4,240
Male	208,513	2,619	49,189	28,570	128,135	0	1,279,572	26,879	490,292	113,214	649,187	0
Unknown	49	5	7	2	35	0	231	44	69	6	112	0
Race												
White	305,035	3,132	68,708	102,106	130,810	279	1,991,414	33,546	701,062	540,728	713,675	2,403
African American	35,689	332	8,962	11,066	15,313	16	213,809	3,438	90,283	49,817	70,140	131
Other/unknown	270,514	3,608	21,997	136,668	108,059	182	1,718,937	36,028	221,796	951,439	507,968	1,706
Use of Nursing Facilities^c												
Entire year	863	164	696	1	2	0	7,873	1,558	6,303	2	10	0
Part year	1,681	134	1,526	17	3	1	16,341	1,356	14,874	93	12	6
None	608,694	6,774	97,445	249,822	254,177	476	3,899,946	70,098	991,964	1,541,889	1,291,761	4,234
Maintenance Assistance Status												
Cash	155,321	4,666	90,342	25,014	35,299	0	1,215,411	49,973	915,747	94,023	155,668	0
Medically needy	1,315	77	1,000	35	203	0	10,588	849	8,577	139	1,023	0
Poverty-related	153,847	30	84	41,784	111,472	477	807,229	228	650	245,525	556,586	4,240
Other/unknown	300,755	2,299	8,241	183,007	107,208	0	1,890,932	21,962	88,167	1,202,297	578,506	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	369,292	6,790	93,068	168,514	100,450	470	3,175,031	71,279	974,153	1,252,555	872,827	4,217
FFS part year, with Rx claims	93,457	238	5,583	43,563	44,066	7	350,166	1,527	34,184	164,004	150,428	23
FFS part year, no Rx claims	148,489	44	1,016	37,763	109,666	0	398,963	206	4,804	125,425	268,528	0

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

a. Table ND.2 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.

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

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

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

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid		Number of Beneficiaries
						FFS \$ ^d		
All	43.0	7.6	\$510	\$67	\$3,421	14.9		611,238
Age								
5 and younger	34.9	1.5	80	55	2,407	3.3		104,703
6-14	37.5	2.9	298	101	1,810	16.4		115,137
15-20	35.0	2.7	231	85	2,131	10.8		109,834
21-44	43.0	6.3	434	69	3,320	13.1		222,436
45-64	82.5	42.1	2,602	62	10,976	23.7		52,114
65-74	87.1	38.4	1,750	46	10,312	17.0		4,297
75-84	87.2	38.2	1,643	43	14,517	11.3		2,185
85 and older	78.2	30.4	1,138	38	18,608	6.1		532
Unknown	0.0	0.0	0	0	0	0.0		0
Basis of Eligibility^e								
Aged	86.8	38.0	1,693	45	12,092	14.0		7,072
Disabled	84.1	34.3	2,590	76	12,373	20.9		99,667
Adults	33.4	2.0	73	36	1,600	4.6		249,840
Children	35.0	1.7	89	51	1,436	6.2		254,182
Unknown	89.7	24.2	1,880	78	15,940	11.8		477
Gender								
Female	42.0	7.4	429	58	3,105	13.8		402,676
Male	45.0	7.9	667	84	4,032	16.5		208,513
Unknown	38.8	7.6	312	41	1,569	19.9		49
Race								
White	51.5	10.8	723	67	4,313	16.8		305,035
African American	47.4	8.3	496	60	4,112	12.1		35,689
Other/unknown	32.9	3.9	272	69	2,323	11.7		270,514
Use of Nursing Facilities^f								
Entire year	94.1	79.6	5,014	63	67,512	7.4		863
Part year	98.8	81.2	4,993	62	61,186	8.2		1,681
None	42.8	7.3	491	67	3,170	15.5		608,694
Maintenance Assistance Status								
Cash	68.5	21.5	1,552	72	7,133	21.8		155,321
Medically needy	86.2	35.0	2,663	76	14,349	18.6		1,315
Poverty related	38.1	1.7	66	40	1,622	4.1		153,847
Other/unknown	32.2	3.3	190	57	2,376	8.0		300,755

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

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, WASHINGTON, 2006

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months
All	1.2	\$80	14.9	57.0	27.0	5.1	6.3	3.4	1.2	\$533	611,238	3,924,160
Age												
5 and younger	0.3	18	3.3	65.1	30.1	3.0	1.5	0.2	0.0	542	104,703	465,368
6-14	0.5	48	16.4	62.5	29.7	4.1	3.1	0.5	0.1	294	115,137	708,298
15-20	0.4	34	10.8	65.0	27.3	3.9	3.0	0.7	0.1	314	109,834	746,577
21-44	1.0	66	13.1	57.0	26.5	5.8	6.8	3.0	0.9	506	222,436	1,459,658
45-64	4.6	287	23.7	17.5	17.2	10.1	24.5	21.8	8.9	1,211	52,114	472,174
65-74	3.7	171	17.0	12.9	21.9	13.2	29.1	18.1	4.7	1,005	4,297	44,094
75-84	3.7	158	11.3	12.8	22.7	12.5	27.9	19.4	4.6	1,398	2,185	22,691
85 and older	3.1	114	6.1	21.8	22.0	11.1	25.6	17.3	2.3	1,868	532	5,300
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^e												
Aged	3.7	164	14.0	13.2	22.3	13.0	28.5	18.5	4.6	1,171	7,072	73,012
Disabled	3.4	255	20.9	15.9	28.3	11.5	22.5	15.9	6.0	1,217	99,667	1,013,141
Adults	0.3	12	4.6	66.6	24.4	4.0	3.5	1.2	0.3	259	249,840	1,541,984
Children	0.3	18	6.2	65.0	29.2	3.4	2.0	0.3	0.1	283	254,182	1,291,783
Unknown	2.7	212	11.8	10.3	29.8	17.6	31.4	10.1	0.8	1,793	477	4,240
Gender												
Female	1.1	65	13.8	58.0	26.8	4.7	5.8	3.4	1.3	473	402,676	2,644,357
Male	1.3	109	16.5	55.0	27.6	5.8	7.2	3.5	1.0	657	208,513	1,279,572
Unknown	1.6	66	19.9	61.2	18.4	4.1	8.2	8.2	0.0	333	49	231
Race												
White	1.6	111	16.8	48.5	29.6	6.5	8.5	5.0	1.9	661	305,035	1,991,414
African American	1.4	83	12.1	52.6	28.5	6.3	7.5	3.9	1.2	686	35,689	213,809
Other/unknown	0.6	43	11.7	67.1	23.9	3.4	3.6	1.6	0.4	366	270,514	1,718,937
Use of Nursing Facilities^f												
Entire year	8.7	550	7.4	5.9	5.8	3.0	17.4	34.4	33.5	7,400	863	7,873
Part year	8.4	514	8.2	1.2	6.1	5.5	23.7	34.7	28.8	6,294	1,681	16,341
None	1.1	77	15.5	57.2	27.1	5.1	6.2	3.3	1.1	495	608,694	3,899,946
Maintenance Assistance Status												
Cash	2.7	198	21.8	31.5	29.1	9.6	15.9	10.3	3.6	912	155,321	1,215,411
Medically needy	4.4	331	18.6	13.8	19.2	10.1	26.5	24.1	6.2	1,782	1,315	10,588
Poverty related	0.3	13	4.1	61.9	32.3	3.5	1.9	0.3	0.1	309	153,847	807,229
Other/unknown	0.5	30	8.0	67.8	23.3	3.6	3.5	1.4	0.5	378	300,755	1,890,932

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

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, WASHINGTON, 2006

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
All	1.2	\$80	\$67	0.4	\$62	\$173	0.0	\$3	\$103	0.8	\$15	\$18
Age												
5 and younger	0.3	18	55	0.1	13	158	0.0	1	49	0.2	4	17
6-14	0.5	48	101	0.2	42	199	0.0	1	81	0.3	5	19
15-20	0.4	34	85	0.1	28	192	0.0	1	92	0.2	5	19
21-44	1.0	66	69	0.3	51	190	0.0	3	112	0.7	12	19
45-64	4.6	287	62	1.3	215	164	0.1	11	115	3.2	61	19
65-74	3.7	171	46	1.2	129	108	0.1	5	80	2.5	36	15
75-84	3.7	158	43	1.2	121	97	0.1	4	65	2.4	33	14
85 and older	3.1	114	38	0.9	84	90	0.1	3	53	2.0	27	13
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	3.7	164	45	1.2	124	104	0.1	5	74	2.4	35	14
Disabled	3.4	255	76	1.0	202	197	0.1	9	116	2.3	44	19
Adults	0.3	12	36	0.1	7	94	0.0	1	86	0.2	4	16
Children	0.3	18	51	0.1	14	115	0.0	1	55	0.2	3	16
Unknown	2.7	212	78	0.8	167	213	0.1	17	269	1.9	28	15
Gender												
Female	1.1	65	58	0.3	49	151	0.0	3	101	0.8	14	18
Male	1.3	109	84	0.4	89	207	0.0	3	107	0.8	16	20
Unknown	1.6	66	41	0.6	50	77	0.1	4	51	0.9	13	15
Race												
White	1.6	111	67	0.5	86	172	0.0	4	110	1.1	21	19
African American	1.4	83	60	0.4	65	163	0.0	3	82	1.0	16	17
Other/unknown	0.6	43	69	0.2	34	181	0.0	2	90	0.4	7	17
Use of Nursing Facilities^e												
Entire year	8.7	550	63	2.5	406	163	0.2	20	87	6.0	123	21
Part year	8.4	514	62	2.1	369	177	0.2	21	126	6.1	123	20
None	1.1	77	67	0.3	60	173	0.0	3	103	0.8	14	18
Maintenance Assistance Status												
Cash	2.7	198	72	0.8	157	191	0.1	7	113	1.9	35	19
Medically needy	4.4	331	76	1.3	257	203	0.1	14	157	3.0	59	20
Poverty related	0.3	13	40	0.1	9	96	0.0	1	71	0.2	3	15
Other/unknown	0.5	30	57	0.2	23	133	0.0	1	87	0.3	6	18

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

a. Table ND.5 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Washington, 0.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

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

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

TABLE ND.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, WASHINGTON, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.0	0.0	0.2	\$20	\$14	\$0	\$5	\$66	\$315	\$49	\$21	349,292	\$22,950,788	135,661	22.2	1,171,417
Biologicals	0.1	0.1	0.0	0.0	80	78	0	2	565	580	0	259	5,528	3,120,840	3,697	0.6	38,948
Antineoplastic Agents	0.6	0.2	0.0	0.4	155	136	0	18	260	667	212	47	13,593	3,539,554	2,293	0.4	22,881
Endocrine/Metabolic Drugs	0.7	0.3	0.0	0.4	36	27	1	7	52	106	49	18	479,236	25,006,455	79,104	12.9	702,817
Cardiovascular Agents	1.4	0.4	0.0	1.0	50	37	1	12	34	87	60	12	716,175	24,566,468	50,380	8.2	495,968
Respiratory Agents	0.6	0.2	0.0	0.3	35	28	1	7	62	112	63	22	402,030	24,771,397	77,082	12.6	702,310
Gastrointestinal Agents	0.6	0.3	0.0	0.3	47	37	5	5	83	145	491	15	232,863	19,282,132	42,627	7.0	411,521
Genitourinary Agents	0.3	0.1	0.0	0.2	14	8	2	4	41	85	80	16	53,538	2,192,167	17,328	2.8	158,131
CNS Drugs	1.2	0.4	0.1	0.8	110	91	5	14	91	225	100	18	867,709	78,657,037	77,396	12.7	715,704
Stimulants/Anti-obesity/Anorexia	0.8	0.6	0.0	0.2	75	71	0	4	91	111	106	22	116,219	10,619,559	15,208	2.5	141,715
Miscellaneous Psychological/Neurological Agents	0.6	0.6	0.0	0.0	335	335	0	0	564	568	90	60	8,228	4,643,249	1,349	0.2	13,846
Analgesics and Anesthetics	0.7	0.0	0.0	0.7	26	11	2	13	35	211	303	20	666,418	23,630,154	106,801	17.5	920,383
Neuromuscular Agents	0.8	0.3	0.0	0.5	71	56	2	13	83	182	95	25	371,298	30,952,948	45,311	7.4	438,534
Nutritional Products	0.3	0.0	0.0	0.3	5	1	0	4	13	24	14	13	85,613	1,142,748	31,995	5.2	245,350
Hematological Agents	0.7	0.2	0.0	0.5	298	287	1	10	435	1,599	23	22	59,265	25,788,969	8,833	1.4	86,559
Topical Products	0.3	0.1	0.0	0.2	11	7	0	4	39	97	51	20	197,276	7,618,093	75,482	12.3	696,337
Miscellaneous Products	0.3	0.2	0.0	0.1	51	43	3	5	203	248	254	76	15,738	3,192,526	6,578	1.1	62,541
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	11	0	0	0	59	0	0	0	2,823	166,648	1,439	0.2	14,986
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.	4,642,842	311,841,732	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. For information about these therapeutic categories, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Washington, 0.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2006.

Benef(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

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

Top 10 Drug Groups	Users			Among Users				
	Total Medicaid Rx \$	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
ANTIPSYCHOTICS	\$57,016,655	33,011	5.4	342,790	0.7	\$238	\$166	
ANTICONVULSANT	27,815,977	30,987	5.1	320,315	0.8	113	87	
MISC. HEMATOLOGICAL	21,153,541	2,534	0.4	26,358	0.6	1,263	803	
ANTIASTHMATIC	18,339,858	69,563	11.4	676,512	0.4	72	27	
ANTIDEPRESSANTS	17,046,569	73,434	12.0	720,325	0.6	41	24	
ULCER DRUGS	14,911,979	46,319	7.6	465,336	0.5	65	32	
ANTIVIRAL	12,592,425	8,336	1.4	80,930	0.4	365	156	
ANTIHYPERTENSIVE	12,135,608	22,302	3.6	237,003	0.7	77	51	
ANALGESICS - Narcotic	12,134,713	118,826	19.4	1,098,930	0.4	26	11	
ANTIDIABETIC	11,663,149	25,508	4.2	258,464	0.7	62	45	
Total	204,810,474	430,820	n.a.	4,226,963	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

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>.

Benef(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement; n.a. = not applicable.

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, WASHINGTON, 2006

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTICONVULSANT			
	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	2,244,899	\$204,810,474	33,011	5.4	342,790	0.7	\$166	30,987	5.1	320,315	0.8	\$87
Female												
All Females	1,406,444	107,724,909	17,309	4.3	179,484	0.7	151	18,618	4.6	191,745	0.8	84
Female, Disabled												
All Ages	1,130,384	94,699,129	14,201	28.1	154,337	0.7	163	15,164	30.0	165,962	0.8	89
5 and younger	6,029	608,285	8	0.5	75	0.4	21	171	10.0	1,897	0.9	158
6-14	18,055	2,278,825	334	9.7	3,722	0.6	148	671	19.5	7,721	0.9	150
15-20	25,367	2,822,001	662	19.6	7,417	0.6	141	690	20.4	7,925	0.9	138
21-44	337,583	30,499,855	6,557	37.3	69,873	0.7	157	6,074	34.6	65,444	0.8	96
45-64	742,964	58,468,624	6,638	27.3	73,235	0.7	171	7,551	31.1	82,922	0.8	71
65-74	386	21,539	2	3.8	15	0.1	22	7	13.5	53	0.7	15
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	276,060	13,025,780	3,108	0.9	25,147	0.5	79	3,454	1.0	25,783	0.6	52
5 and younger	9,024	432,864	9	0.0	88	0.5	86	94	0.2	739	0.6	44
6-14	24,399	1,590,114	458	0.9	4,736	0.6	106	384	0.7	3,660	0.7	76
15-20	31,320	1,589,565	665	0.9	6,042	0.5	84	476	0.6	4,185	0.6	69
21-44	119,029	4,332,596	1,445	0.9	9,146	0.4	54	1,843	1.1	11,142	0.5	47
45-64	24,599	1,136,018	224	3.4	1,667	0.4	62	300	4.5	2,038	0.6	43
65-74	44,969	2,704,711	186	7.0	2,142	0.7	126	246	9.2	2,785	0.6	34
75-84	19,206	1,066,162	89	6.7	984	0.5	67	84	6.4	951	0.6	33
85 and older	3,514	173,750	32	9.0	342	0.7	107	27	7.6	283	0.6	12
Male												
All Males	838,256	97,075,336	15,701	7.5	163,297	0.7	183	12,368	5.9	128,558	0.8	92
Male, Disabled												
All Ages	702,426	87,932,937	13,538	27.5	143,049	0.8	193	10,663	21.7	114,170	0.8	95
5 and younger	8,050	731,162	44	1.9	497	0.6	101	226	9.8	2,412	0.7	102
6-14	38,887	13,215,830	1,333	19.3	15,245	0.7	159	1,099	15.9	12,698	0.8	135
15-20	35,475	8,821,383	1,234	22.5	13,711	0.7	167	950	17.3	10,662	0.8	130
21-44	230,475	31,201,958	6,713	40.5	68,812	0.8	203	4,483	27.1	46,907	0.8	105
45-64	389,335	33,948,603	4,212	23.6	44,772	0.8	198	3,901	21.8	41,467	0.7	63
65-74	204	14,001	2	5.4	12	0.9	101	4	10.8	24	1.5	94
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Medicaid Beneficiaries

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

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
Male, Other Eligibles												
All Ages	135,830	9,142,399	2,163	1.4	20,248	0.6	117	1,705	1.1	14,388	0.6	62
5 and younger	13,158	773,329	31	0.1	330	0.5	120	118	0.2	960	0.6	85
6-14	34,129	2,753,366	1,028	1.9	10,530	0.6	116	567	1.1	5,568	0.7	75
15-20	20,384	1,883,730	641	2.5	6,125	0.6	121	351	1.4	3,234	0.6	70
21-44	22,909	973,542	275	1.2	1,434	0.6	106	382	1.6	1,981	0.6	43
45-64	8,561	440,245	50	1.5	289	0.5	93	107	3.3	581	0.5	42
65-74	23,079	1,428,957	69	4.5	812	0.8	159	115	7.5	1,314	0.6	36
75-84	11,592	781,658	50	5.8	525	0.7	100	57	6.6	663	0.5	28
85 and older	2,018	107,572	19	10.7	203	0.4	47	8	4.5	87	0.3	6
Unknown	199	10,229	1	2.0	9	1.0	216	1	2.0	12	1.1	50

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

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

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

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

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, WASHINGTON, 2006

Beneficiary Characteristics	MISC. HEMATOLOGICAL					ANTIASTHMATIC					ANTIDEPRESSANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ 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 \$ 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 \$ Benefit Month
All	2,534	0.4	26,358	0.6	\$803	69,563	11.4	676,512	0.4	\$27	73,434	12.0	720,325	0.6	\$24
Female															
All Females	1,347	0.3	14,343	0.6	295	41,974	10.4	412,697	0.4	28	49,862	12.4	483,729	0.6	24
Female, Disabled															
All Ages	1,101	2.2	11,927	0.6	342	24,951	49.4	276,973	0.4	33	34,196	67.8	369,390	0.6	28
5 and younger	3	0.2	29	0.1	10	647	37.7	7,211	0.3	22	9	0.5	100	0.6	6
6-14	2	0.1	24	0.1	7	909	26.4	10,311	0.3	25	370	10.7	4,209	0.6	16
15-20	4	0.1	41	0.4	20	804	23.8	9,058	0.3	18	943	27.9	10,587	0.5	19
21-44	95	0.5	1,006	0.6	68	7,205	41.0	79,563	0.4	26	11,983	68.2	127,762	0.6	27
45-64	993	4.1	10,798	0.6	371	15,378	63.3	170,773	0.5	38	20,877	85.9	226,654	0.7	29
65-74	4	7.7	29	0.8	94	8	15.4	57	0.5	64	14	26.9	78	0.7	27
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	246	0.1	2,416	0.6	63	17,023	4.8	135,724	0.3	16	15,666	4.4	114,339	0.4	14
5 and younger	1	0.0	11	0.2	4	3,115	6.3	24,493	0.2	12	23	0.0	219	0.3	5
6-14	1	0.0	12	0.1	35	4,054	7.8	36,189	0.3	13	842	1.6	8,351	0.5	12
15-20	6	0.0	47	0.6	81	2,589	3.4	21,914	0.2	11	2,301	3.1	20,264	0.4	10
21-44	33	0.0	204	0.4	41	5,281	3.2	34,528	0.3	16	9,503	5.8	59,203	0.4	14
45-64	21	0.3	119	0.5	53	760	11.4	5,027	0.4	28	1,561	23.5	10,114	0.6	19
65-74	108	4.0	1,191	0.6	68	788	29.5	8,818	0.5	36	952	35.6	10,824	0.6	17
75-84	63	4.8	694	0.6	65	358	27.1	3,917	0.4	32	390	29.5	4,387	0.6	14
85 and older	13	3.7	138	0.7	65	78	22.0	838	0.4	21	94	26.6	977	0.6	17
Male															
All Males	1,187	0.6	12,015	0.6	1,408	27,578	13.2	263,737	0.4	27	23,568	11.3	236,564	0.6	22
Male, Disabled															
All Ages	952	1.9	9,854	0.6	1,637	14,202	28.9	153,223	0.4	34	19,002	38.6	198,515	0.6	24
5 and younger	2	0.1	23	0.7	449	1,105	47.8	12,127	0.3	22	23	1.0	273	0.4	7
6-14	9	0.1	108	1.5	74,714	1,801	26.1	20,879	0.3	25	959	13.9	10,985	0.6	18
15-20	8	0.1	91	1.1	47,524	961	17.5	10,908	0.3	21	1,190	21.7	13,465	0.6	21
21-44	81	0.5	841	0.6	3,163	3,100	18.7	32,827	0.4	26	7,130	43.0	72,183	0.6	25
45-64	850	4.8	8,779	0.6	122	7,226	40.4	76,452	0.5	43	9,695	54.2	101,572	0.6	24
65-74	2	5.4	12	0.8	98	9	24.3	30	0.9	69	5	13.5	37	0.8	39
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Medicaid Beneficiaries

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

Beneficiary Characteristics	MISC. HEMATOLOGICAL						ANTIASTHMATIC					ANTIDEPRESSANTS			
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Benefit	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Benefit	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Month	Mean Rx \$ per Benefit
Male, Other Eligibles															
All Ages	235	0.1	2,161	0.6	364	13,376	8.4	110,514	0.3	17	4,566	2.9	38,049	0.5	14
5 and younger	5	0.0	32	0.7	2,115	4,681	9.1	36,899	0.2	12	26	0.1	202	0.4	7
6-14	3	0.0	25	0.4	5,767	5,171	9.8	45,030	0.3	14	1,129	2.1	11,376	0.5	12
15-20	6	0.0	59	0.6	7,616	1,616	6.3	13,478	0.3	12	1,091	4.3	10,055	0.5	15
21-44	25	0.1	132	0.7	54	785	3.3	4,110	0.4	23	1,300	5.5	7,032	0.5	16
45-64	37	1.1	167	0.6	63	274	8.4	1,622	0.4	32	372	11.4	2,134	0.5	17
65-74	89	5.8	1,017	0.6	61	450	29.5	5,003	0.5	45	390	25.5	4,483	0.6	16
75-84	59	6.9	630	0.6	66	348	40.4	3,832	0.5	50	208	24.2	2,252	0.5	13
85 and older	11	6.2	99	0.6	47	51	28.7	540	0.4	40	50	28.1	515	0.6	13
Unknown	0	0.0	0	0.0	0	11	22.4	78	0.8	36	4	8.2	32	0.8	21

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

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

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

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

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

Nondual Medicaid Beneficiaries

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

Beneficiary Characteristics	ULCER DRUGS					ANTIVIRAL					ANTHYPERLIPIDEMIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean	
				Rx per Benefit Month	Mean Rx \$ per Benefit Month				Rx per Benefit Month	Mean Rx \$ per Benefit Month				Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	46,319	7.6	465,336	0.5	\$32	8,336	1.4	80,930	0.4	\$156	22,302	3.6	237,003	0.7	\$51
Female															
All Females	30,788	7.6	309,759	0.5	32	5,670	1.4	53,826	0.3	92	13,654	3.4	147,369	0.7	51
Female, Disabled															
All Ages	20,720	41.1	229,304	0.5	36	2,731	5.4	30,541	0.4	135	10,825	21.4	120,093	0.7	51
5 and younger	380	22.2	4,028	0.5	32	23	1.3	248	0.4	54	2	0.1	21	0.1	1
6-14	353	10.2	4,051	0.4	37	51	1.5	582	0.2	35	6	0.2	70	0.5	36
15-20	526	15.5	5,917	0.4	26	95	2.8	1,060	0.2	77	16	0.5	182	0.4	26
21-44	6,091	34.7	66,824	0.5	30	1,159	6.6	12,903	0.4	140	1,724	9.8	18,952	0.6	44
45-64	13,358	55.0	148,383	0.6	40	1,403	5.8	15,748	0.4	140	9,063	37.3	100,758	0.7	53
65-74	12	23.1	101	0.3	8	0	0.0	0	0.0	0	14	26.9	110	0.8	60
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	10,068	2.9	80,455	0.4	20	2,939	0.8	23,285	0.3	36	2,829	0.8	27,276	0.6	47
5 and younger	682	1.4	4,560	0.4	19	97	0.2	789	0.2	6	2	0.0	24	0.1	4
6-14	639	1.2	5,997	0.2	13	204	0.4	1,901	0.2	30	3	0.0	34	0.1	5
15-20	1,280	1.7	10,813	0.2	9	484	0.6	4,317	0.2	26	17	0.0	135	0.4	24
21-44	4,573	2.8	30,386	0.3	13	1,934	1.2	14,230	0.3	36	488	0.3	2,914	0.5	29
45-64	844	12.7	5,603	0.5	30	124	1.9	934	0.4	91	449	6.7	3,063	0.6	40
65-74	1,360	50.8	15,344	0.5	32	65	2.4	753	0.3	71	1,273	47.6	14,371	0.7	51
75-84	569	43.0	6,451	0.5	33	24	1.8	287	0.2	30	540	40.8	6,107	0.7	51
85 and older	121	34.2	1,301	0.6	30	7	2.0	74	0.1	7	57	16.1	628	0.7	49
Male															
All Males	15,527	7.4	155,537	0.5	32	2,665	1.3	27,101	0.6	281	8,643	4.1	89,585	0.7	52
Male, Disabled															
All Ages	11,497	23.4	122,934	0.5	35	2,107	4.3	22,452	0.7	329	6,963	14.2	74,233	0.7	53
5 and younger	416	18.0	4,417	0.4	33	23	1.0	248	0.2	20	4	0.2	32	0.3	20
6-14	532	7.7	6,217	0.4	36	82	1.2	953	0.2	27	10	0.1	114	0.4	13
15-20	524	9.6	5,954	0.4	24	65	1.2	772	0.3	87	38	0.7	423	0.4	22
21-44	3,406	20.6	36,061	0.5	32	887	5.4	9,083	0.7	349	1,462	8.8	15,592	0.6	46
45-64	6,613	37.0	70,247	0.6	37	1,049	5.9	11,393	0.7	362	5,442	30.4	58,032	0.7	55
65-74	6	16.2	38	0.7	48	1	2.7	3	0.3	9	7	18.9	40	0.7	79
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Nondual Medicaid Beneficiaries

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

Beneficiary Characteristics	ULCER DRUGS					ANTIVIRAL					ANTIHYPERTENSIVE					
	Number of Users	Users as % of All	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All	Number of Benefit Months Among Users	Mean		Number of Users	Users as % of All	Number of Benefit Months Among Users	Mean		
		Benes		Rx per Benefit Month	Mean Rx \$ per Benefit Month		Rx per Benefit Month		Benes	Rx per Benefit Month		Mean Rx \$ per Benefit Month		Rx per Benefit Month	Benes	Rx per Benefit Month
Male, Other Eligibles																
All Ages	4,030	2.5	32,603	0.4	24	558	0.4	4,649	0.2	50	1,680	1.1	15,352	0.7	50	
5 and younger	852	1.7	5,892	0.3	20	89	0.2	787	0.2	7	5	0.0	42	0.1	3	
6-14	556	1.1	5,170	0.3	18	170	0.3	1,644	0.2	27	11	0.0	97	0.4	25	
15-20	479	1.9	4,276	0.3	12	99	0.4	886	0.2	20	16	0.1	165	0.3	18	
21-44	823	3.5	4,210	0.4	24	126	0.5	673	0.4	140	304	1.3	1,697	0.5	36	
45-64	295	9.0	1,644	0.5	30	31	0.9	188	0.6	263	294	9.0	1,570	0.6	41	
65-74	632	41.4	7,082	0.5	27	22	1.4	235	0.3	81	690	45.2	7,788	0.7	53	
75-84	328	38.1	3,625	0.6	41	19	2.2	212	0.2	17	309	35.9	3,430	0.7	57	
85 and older	65	36.5	704	0.6	36	2	1.1	24	0.1	3	51	28.7	563	0.7	47	
Unknown	4	8.2	40	0.8	30	1	2.0	3	2.3	19	5	10.2	49	0.8	58	

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

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

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

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

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

Nondual 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, WASHINGTON, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTIDIABETIC					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	118,826	19.4	1,098,930	0.4	\$11	25,508	4.2	258,464	0.7	\$45	611,238	3,924,160
Female												
All Females	80,265	19.9	738,128	0.4	10	16,565	4.1	169,725	0.7	44	402,676	2,644,357
Female, Disabled												
All Ages	41,996	83.2	459,893	0.5	14	12,156	24.1	133,499	0.7	48	50,471	522,780
5 and younger	203	11.8	2,283	0.1	1	9	0.5	108	0.6	59	1,715	17,054
6-14	499	14.5	5,809	0.1	2	61	1.8	709	0.8	75	3,447	37,518
15-20	1,193	35.2	13,594	0.2	2	126	3.7	1,425	0.6	38	3,385	36,228
21-44	16,051	91.4	174,486	0.4	11	2,476	14.1	26,874	0.7	42	17,565	179,184
45-64	24,036	98.9	263,600	0.6	17	9,473	39.0	104,300	0.8	49	24,305	252,478
65-74	14	26.9	121	0.6	19	11	21.2	83	0.7	27	52	294
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	38,269	10.9	278,235	0.3	3	4,409	1.3	36,226	0.7	32	352,205	2,121,577
5 and younger	743	1.5	6,459	0.1	1	23	0.0	183	0.7	54	49,344	207,300
6-14	1,969	3.8	18,061	0.1	1	183	0.4	1,569	0.8	56	51,858	295,406
15-20	6,502	8.6	52,031	0.2	1	221	0.3	1,708	0.5	40	75,376	510,362
21-44	24,860	15.1	164,032	0.3	4	1,661	1.0	9,937	0.5	26	164,622	1,029,303
45-64	2,200	33.1	15,109	0.5	7	605	9.1	3,752	0.7	33	6,654	34,004
65-74	1,303	48.7	14,742	0.3	5	1,136	42.5	12,651	0.7	32	2,675	27,855
75-84	564	42.7	6,424	0.3	4	513	38.8	5,736	0.7	32	1,322	13,869
85 and older	128	36.2	1,377	0.3	2	67	18.9	690	0.7	25	354	3,478
Male												
All Males	38,558	18.5	360,786	0.4	13	8,943	4.3	88,739	0.8	47	208,513	1,279,572
Male, Disabled												
All Ages	25,746	52.3	269,811	0.5	16	6,852	13.9	71,553	0.8	49	49,189	490,292
5 and younger	328	14.2	3,646	0.1	1	9	0.4	96	0.7	42	2,312	22,568
6-14	863	12.5	10,008	0.1	1	56	0.8	582	0.7	61	6,911	75,596
15-20	1,419	25.9	15,930	0.2	2	96	1.8	1,078	0.7	69	5,481	58,461
21-44	9,266	55.9	95,151	0.4	13	1,462	8.8	15,139	0.7	50	16,571	159,979
45-64	13,859	77.5	145,024	0.6	22	5,224	29.2	54,648	0.8	48	17,877	173,520
65-74	11	29.7	52	0.6	6	5	13.5	10	0.8	52	37	168
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Nondual Medicaid Beneficiaries

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

Beneficiary Characteristics	ANALGESICS - Narcotic						ANTIDIABETIC					
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of		Number of Beneficiaries	Number of Benefit Months
				Rx per Month	Mean Rx \$ Benefit per Month				Rx per Month	Mean Rx \$ Benefit per Month		
Male, Other Eligibles												
All Ages	12,812	8.0	90,975	0.3	4	2,091	1.3	17,186	0.7	37	159,324	789,280
5 and younger	1,084	2.1	9,191	0.1	1	17	0.0	165	0.5	24	51,303	218,354
6-14	2,028	3.8	18,580	0.1	1	120	0.2	979	0.8	48	52,915	299,758
15-20	2,848	11.1	23,503	0.2	1	136	0.5	948	0.8	64	25,592	141,526
21-44	4,957	20.9	24,075	0.5	7	459	1.9	2,371	0.6	41	23,675	91,174
45-64	958	29.3	5,272	0.6	10	384	11.7	2,000	0.7	36	3,272	12,115
65-74	544	35.6	6,072	0.3	4	658	43.1	7,290	0.7	34	1,528	15,733
75-84	328	38.1	3,572	0.2	4	276	32.1	2,999	0.6	30	861	8,798
85 and older	65	36.5	710	0.3	3	41	23.0	434	0.7	23	178	1,822
Unknown	3	6.1	16	0.5	8	0	0.0	0	0.0	0	49	231

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

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

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

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

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

Nondual Medicaid Beneficiaries

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, WASHINGTON, 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	\$550	8.7	863	7,873
Age				
0-64	617	9.5	695	6,285
65-74	427	7.8	62	609
75-84	246	5.1	60	558
85 and older	125	2.8	46	421
Unknown	0	0.0	0	0
Gender				
Female	560	9.0	471	4,519
Male	536	8.4	392	3,354
Unknown	0	0.0	0	0
Race				
White	567	9	600	5,479
African American	633	8.8	67	642
Other/unknown	465	7.8	196	1,752
Basis of Eligibility^c				
Aged	285	5.6	164	1,558
Disabled	616	9.5	696	6,303
Adults	0	0.0	1	2
Children	119	2.4	2	10
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

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 1,681 beneficiaries who were in nursing facilities for part of their enrollment and their 16,341 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, WASHINGTON, 2006

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	Patented Brand-Name		Off-Patent Brand-Name		Patented Brand-Name		Off-Patent Brand-Name		Patented Brand-Name		Off-Patent Brand-Name		Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
	Total	Name	Total	Name	Total	Name	Total	Name	Total	Name	Total	Name					
Anti-infective Agents	0.8	0.2	0.0	0.5	\$81	\$61	\$1	\$19	\$104	\$269	\$94	\$35	4,089	\$425,280	552	64.0	5,264
Biologicals	0.1	0.0	0.0	0.1	3	1	0	2	30	24	0	35	40	1,210	38	4.4	366
Antineoplastic Agents	0.6	0.2	0.0	0.4	187	153	0	34	332	797	0	92	197	65,386	42	4.9	349
Endocrine/Metabolic Drugs	1.5	0.6	0.0	0.8	69	55	3	12	47	89	87	14	6,315	294,923	434	50.3	4,267
Cardiovascular Agents	2.1	0.6	0.0	1.5	74	52	1	20	34	86	74	13	11,388	391,819	560	64.9	5,300
Respiratory Agents	0.8	0.4	0.0	0.4	63	48	1	13	79	120	65	36	2,501	196,472	326	37.8	3,143
Gastrointestinal Agents	1.1	0.4	0.0	0.7	63	48	3	12	56	126	229	17	4,892	274,609	461	53.4	4,333
Genitourinary Agents	0.6	0.2	0.0	0.5	22	12	1	9	34	74	77	20	1,435	49,314	220	25.5	2,264
CNS Drugs	2.0	0.7	0.1	1.2	163	133	10	21	83	189	97	18	12,288	1,019,393	654	75.8	6,259
Stimulants/Anti-obesity/Anorexia	0.7	0.0	0.0	0.7	5	0	0	5	8	0	0	8	109	839	17	2.0	158
Miscellaneous Psychological/ Neurological Agents	0.8	0.8	0.0	0.0	462	462	0	0	568	568	0	0	397	225,322	45	5.2	488
Analgesics and Anesthetics	1.9	0.2	0.0	1.7	55	19	2	34	28	97	93	20	9,452	268,093	526	61.0	4,859
Neuromuscular Agents	1.6	0.5	0.0	1.1	122	87	2	33	77	192	71	30	7,814	603,958	492	57.0	4,954
Nutritional Products	0.7	0.0	0.0	0.7	12	0	0	12	17	15	24	17	1,858	31,975	275	31.9	2,559
Hematological Agents	1.2	0.3	0.1	0.9	130	115	0	15	105	399	8	17	3,123	328,935	293	34.0	2,532
Topical Products	0.6	0.1	0.1	0.4	27	11	7	10	49	109	82	26	2,480	121,839	440	51.0	4,505
Miscellaneous Products	0.3	0.0	0.0	0.3	31	11	6	14	96	225	268	55	263	25,129	79	9.2	798
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	16	0	0	0	60	0	0	0	44	2,633	17	2.0	166
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.	68,685	4,327,129	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

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 1,681 beneficiaries who were in nursing facilities for part of their enrollment and their 16,341 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 Washington, 0.2 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.

Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Medicaid Beneficiaries

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, WASHINGTON, 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	\$729,658	362	41.9	3,787	0.9	\$204	\$193	
ANTICONVULSANT	536,460	483	56.0	5,063	1.1	97	106	
ANTIDEPRESSANTS	249,704	716	83.0	7,133	0.8	42	35	
ANTIDIABETIC	221,396	395	45.8	4,048	1.0	53	55	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	225,322	47	5.4	522	0.8	568	432	
ULCER DRUGS	211,864	508	58.9	5,043	0.7	57	42	
ANTHYPERLIPIDEMIC	191,125	261	30.2	2,772	0.8	82	69	
HEMATOPOIETIC AGENTS	177,378	123	14.3	1,141	0.7	238	155	
ANALGESICS - Narcotic	176,523	618	71.6	5,901	1.4	21	30	
ANTIASTHMATIC	160,541	369	42.8	3,623	0.5	89	44	
Total	2,879,971	3,882	n.a.	39,033	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 1,681 beneficiaries who were in nursing facilities for part of their enrollment and their 16,341 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, WASHINGTON, 2006

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	36,483	\$2,879,971	362	41.9	3,787	0.9	\$193	483	56.0	5,063	1.1	\$106
Female												
All Females	21,893	1,791,693	221	46.9	2,369	0.9	194	274	58.2	2,995	1.1	112
Female, Disabled												
All Ages	19,193	1,619,249	184	50.3	1,956	0.9	205	252	68.9	2,740	1.1	118
64 or younger	19,145	1,617,179	183	50.4	1,944	1.0	206	250	68.9	2,716	1.1	119
65-74	48	2,070	1	33.3	12	0.1	26	2	66.7	24	0.9	14
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	2,700	172,444	37	35.2	413	0.9	141	22	21.0	255	0.9	53
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,512	105,637	25	69.4	289	0.8	132	13	36.1	156	1.0	59
75-84	724	39,601	6	19.4	52	1.0	128	6	19.4	69	0.8	50
85 and older	464	27,206	6	16.7	72	1.1	189	3	8.3	30	0.8	31
Male												
All Males	14,590	1,088,278	141	36.0	1,418	1.0	191	209	53.3	2,068	1.1	97
Male, Disabled												
All Ages	12,733	936,680	118	35.8	1,172	1.0	197	200	60.6	1,969	1.1	98
64 or younger	12,724	935,582	118	35.9	1,172	1.0	197	199	60.5	1,966	1.1	98
65-74	9	1,098	0	0.0	0	0.0	0	1	100.0	3	0.7	155
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	1,857	151,598	23	37.1	246	1.0	166	9	14.5	99	1.1	64
64 or younger	13	789	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	887	78,990	10	45.5	119	0.9	154	6	27.3	63	1.1	58
75-84	822	60,056	12	41.4	120	1.1	178	3	10.3	36	1.2	76
85 and older	135	11,763	1	10.0	7	0.6	162	0	0.0	0	0.0	0
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

a. Table ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 1,681 beneficiaries who were in nursing facilities for part of their enrollment and their 16,341 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, WASHINGTON, 2006

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIDIABETIC					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	716	83.0	7,133	0.8	\$35	395	45.8	4,048	1.0	\$55	47	5.4	522	0.8	\$432
Female															
All Females	436	92.6	4,483	0.8	36	226	48.0	2,362	1.1	61	26	5.5	286	0.7	661
Female, Disabled															
All Ages	375	102.5	3,843	0.8	38	184	50.3	1,924	1.1	65	16	4.4	169	0.9	1,093
64 or younger	375	103.3	3,843	0.8	38	184	50.7	1,924	1.1	65	16	4.4	169	0.9	1,093
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	61	58.1	640	0.9	30	42	40.0	438	1.1	45	10	9.5	117	0.5	35
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	33	91.7	358	0.9	32	18	50.0	208	1.2	57	4	11.1	45	0.4	17
75-84	17	54.8	156	0.8	34	14	45.2	124	1.3	50	3	9.7	36	0.6	28
85 and older	11	30.6	126	0.8	20	10	27.8	106	0.8	14	3	8.3	36	0.4	66
Male															
All Males	280	71.4	2,650	0.9	33	169	43.1	1,686	0.9	46	21	5.4	236	0.8	154
Male, Disabled															
All Ages	244	73.9	2,298	0.9	34	138	41.8	1,403	0.9	47	9	2.7	108	0.8	196
64 or younger	244	74.2	2,298	0.9	34	137	41.6	1,400	0.9	47	9	2.7	108	0.8	196
65-74	0	0.0	0	0.0	0	1	100.0	3	0.7	36	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	36	58.1	352	0.8	25	31	50.0	283	0.9	40	12	19.4	128	0.8	119
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	17	77.3	193	0.8	23	18	81.8	187	1.0	46	6	27.3	72	0.8	117
75-84	15	51.7	132	0.8	33	11	37.9	92	0.9	28	3	10.3	30	1.0	149
85 and older	4	40.0	27	0.7	4	2	20.0	4	1.3	45	3	30.0	26	0.7	90
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.
 a. Table ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 1,681 beneficiaries who were in nursing facilities for part of their enrollment and their 16,341 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, WASHINGTON, 2006

Beneficiary Characteristics	ULCER DRUGS					ANTHYPERLIPIDEMIC					HEMATOPOIETIC AGENTS							
	Number of Users	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
		Residents	Among Users					Residents	Among Users					Residents	Among Users			
All	508	58.9	5,043	0.7	\$42	261	30.2	2,772	0.8	\$69	123	14.3	1,141	0.7	\$156			
Female																		
All Females	280	59.4	2,859	0.7	39	159	33.8	1,738	0.8	68	62	13.2	596	0.7	146			
Female, Disabled																		
All Ages	232	63.4	2,371	0.7	40	132	36.1	1,439	0.8	70	48	13.1	459	0.6	163			
64 or younger	232	63.9	2,371	0.7	40	130	35.8	1,415	0.8	70	47	12.9	447	0.6	168			
65-74	0	0.0	0	0.0	0	2	66.7	24	0.5	37	1	33.3	12	0.3	2			
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
Female, Other Eligibles																		
All Ages	48	45.7	488	0.7	32	27	25.7	299	0.8	61	14	13.3	137	0.9	89			
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	19	52.8	212	0.8	42	15	41.7	172	0.9	85	2	5.6	24	0.9	180			
75-84	14	45.2	136	0.6	19	7	22.6	73	0.8	38	7	22.6	70	0.9	103			
85 and older	15	41.7	140	0.6	31	5	13.9	54	0.6	16	5	13.9	43	0.8	15			
Male																		
All Males	228	58.2	2,184	0.7	46	102	26.0	1,034	0.9	71	61	15.6	545	0.6	166			
Male, Disabled																		
All Ages	199	60.3	1,896	0.7	46	81	24.5	814	0.8	65	53	16.1	464	0.6	151			
64 or younger	197	59.9	1,890	0.7	46	81	24.6	814	0.8	65	53	16.1	464	0.6	151			
65-74	2	200.0	6	0.5	77	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
Male, Other Eligibles																		
All Ages	29	46.8	288	0.9	48	21	33.9	220	1.0	93	8	12.9	81	0.6	247			
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			
65-74	12	54.5	115	0.9	64	9	40.9	108	0.8	73	4	18.2	48	0.5	394			
75-84	14	48.3	145	0.9	29	10	34.5	98	1.2	121	2	6.9	14	1.0	72			
85 and older	3	30.0	28	0.7	81	2	20.0	14	1.1	47	2	20.0	19	0.5	3			
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0			

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.
 a. Table ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 1,681 beneficiaries who were in nursing facilities for part of their enrollment and their 16,341 benefit months were excluded from the analysis.
 b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2006. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 d. The top 10 drug groups were determined based on total 2006 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, WASHINGTON, 2006

Beneficiary Characteristics	ANALGESICS - Narcotic						ANTIASTHMATIC						
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$		Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	618	71.6	5,901	1.4	\$30		369	42.8	3,623	0.5	\$44	863	7,873
Female													
All Females	357	75.8	3,581	1.3	25		225	47.8	2,259	0.5	41	471	4,519
Female, Disabled													
All Ages	319	87.2	3,177	1.5	28		196	53.6	1,996	0.5	42	366	3,521
64 or younger	318	87.6	3,174	1.4	27		196	54.0	1,996	0.5	42	363	3,494
65-74	1	33.3	3	2.7	174		0	0.0	0	0.0	0	3	27
75-84	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
Female, Other Eligibles													
All Ages	38	36.2	404	0.5	8		29	27.6	263	0.3	32	105	998
64 or younger	0	0.0	0	0.0	0		0	0.0	0	0.0	0	2	3
65-74	21	58.3	238	0.5	6		12	33.3	136	0.4	39	36	370
75-84	14	45.2	136	0.6	14		11	35.5	78	0.3	33	31	288
85 and older	3	8.3	30	0.3	0		6	16.7	49	0.2	8	36	337
Male													
All Males	261	66.6	2,320	1.5	37		144	36.7	1,364	0.5	50	392	3,354
Male, Disabled													
All Ages	239	72.4	2,097	1.5	40		126	38.2	1,178	0.5	47	330	2,782
64 or younger	239	72.6	2,097	1.5	40		124	37.7	1,172	0.5	47	329	2,779
65-74	0	0.0	0	0.0	0		2	200.0	6	0.3	10	1	3
75-84	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
Male, Other Eligibles													
All Ages	22	35.5	223	0.8	11		18	29.0	186	0.8	67	62	572
64 or younger	0	0.0	0	0.0	0		2	200.0	18	0.7	44	1	9
65-74	8	36.4	87	0.9	9		2	9.1	15	0.9	62	22	209
75-84	13	44.8	127	0.7	13		10	34.5	105	0.7	55	29	270
85 and older	1	10.0	9	0.1	1		4	40.0	48	0.9	105	10	84
Unknown	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

a. Table ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2006. A total of 1,681 beneficiaries who were in nursing facilities for part of their enrollment and their 16,341 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}
 WASHINGTON, 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	108,512	17.8	1.2	719,387	\$13	\$8,181,797	\$11	2.6	611,238	
Age										
5 and younger	14,698	14.0	0.3	32,165	3	281,016	9	3.4	104,703	
6-14	14,081	12.2	0.3	37,868	4	444,423	12	1.3	115,137	
15-20	10,311	9.4	0.3	28,926	3	335,485	12	1.3	109,834	
21-44	34,469	15.5	0.8	188,925	10	2,192,744	12	2.3	222,436	
45-64	30,115	57.8	7.0	364,621	83	4,305,768	12	3.2	52,114	
65-74	2,969	69.1	9.4	40,373	89	381,064	9	5.1	4,297	
75-84	1,529	70.0	9.8	21,437	91	197,854	9	5.5	2,185	
85 and older	340	63.9	9.5	5,072	82	43,443	9	7.2	532	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Basis of Eligibility^c										
Aged	4,899	69.3	9.6	67,665	89	630,415	9	5.3	7,072	
Disabled	52,872	53.0	5.4	539,688	65	6,519,645	12	2.5	99,667	
Adults	21,159	8.5	0.2	51,379	2	509,161	10	2.8	249,840	
Children	29,322	11.5	0.2	59,122	2	505,832	9	2.2	254,182	
Unknown	260	54.5	3.2	1,533	35	16,744	11	1.9	477	
Gender										
Female	68,910	17.1	1.2	476,209	14	5,480,083	12	3.2	402,676	
Male	39,592	19.0	1.2	243,104	13	2,700,766	11	1.9	208,513	
Unknown	10	20.4	1.5	74	19	948	13	6.2	49	
Race										
White	63,983	21.0	1.6	474,080	18	5,636,253	12	2.6	305,035	
African American	7,490	21.0	1.3	47,424	13	451,735	10	2.6	35,689	
Other/unknown	37,039	13.7	0.7	197,883	8	2,093,809	11	2.8	270,514	
Use of Nursing Facilities^d										
Entire year	610	70.7	7.6	6,526	125	108,284	17	2.5	863	
Part year	1,487	88.5	13.1	21,940	166	279,084	13	3.3	1,681	
None	106,415	17.5	1.1	690,921	13	7,794,429	11	2.6	608,694	
Maintenance Assistance Status										
Cash	60,974	39.3	3.4	532,920	40	6,252,691	12	2.6	155,321	
Medically needy	779	59.2	5.0	6,609	62	81,598	12	2.3	1,315	
Poverty related	16,197	10.5	0.2	31,944	2	273,484	9	2.7	153,847	
Other/unknown	30,562	10.2	0.5	147,914	5	1,574,024	11	2.8	300,755	

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

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

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

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

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

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

TABLE ND.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 WASHINGTON, 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	0.2	\$2	\$11	\$0	\$0	3,924,160
Age						
5 and younger	0.1	1	9	0	0	465,368
6-14	0.1	1	12	0	0	708,298
15-20	0.0	0	12	0	0	746,577
21-44	0.1	2	12	0	0	1,459,658
45-64	0.8	9	12	0	2	472,174
65-74	0.9	9	9	0	1	44,094
75-84	0.9	9	9	0	1	22,691
85 and older	1.0	8	9	0	1	5,300
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.9	9	9	0	1	73,012
Disabled	0.5	6	12	0	2	1,013,141
Adults	0.0	0	10	0	0	1,541,984
Children	0.0	0	9	0	0	1,291,783
Unknown	0.4	4	11	0	1	4,240
Gender						
Female	0.2	2	12	0	0	2,644,357
Male	0.2	2	11	0	0	1,279,572
Unknown	0.3	4	13	0	0	231
Race						
White	0.2	3	12	0	1	1,991,414
African American	0.2	2	10	0	0	213,809
Other/unknown	0.1	1	11	0	0	1,718,937
Use of Nursing Facilities^d						
Entire year	0.8	14	17	0	4	7,873
Part year	1.3	17	13	0	4	16,341
None	0.2	2	11	0	0	3,899,946
Maintenance Assistance Status						
Cash	0.4	5	12	0	1	1,215,411
Medically needy	0.6	8	12	0	2	10,588
Poverty related	0.0	0	9	0	0	807,229
Other/unknown	0.1	1	11	0	0	1,890,932

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

a. Table ND.12 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2006.

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

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

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

TABLE ND.13
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
 WASHINGTON, 2006

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a		Total Number Rx.	\$ per Rx	Number Rx as a	
				Percentage of All Part D Excluded Rx \$	Percentage of All Part D Excluded Rx				
All	146,033	\$56	\$8,181,797	100.0		719,387	\$11	100.0	
Anorexia or weight loss/gain	0	0	0	0.0		0	0	0.0	
Fertility drugs	2	56	111	0.0		2	56	0.0	
Drugs for cosmetic purposes	225	16	3,544	0.0		358	10	0.0	
Cough and cold medications	20,906	28	594,212	7.3		40,399	15	5.6	
Vitamins and minerals	9,608	76	730,451	8.9		46,486	16	6.5	
Non-prescription drugs	84,795	54	4,570,428	55.9		455,229	10	63.3	
Barbiturates	877	64	56,443	0.7		6,653	8	0.9	
Benzodiazepines	26,466	72	1,901,195	23.2		160,464	12	22.3	
Other Part D Excl Rx Drugs	3,154	103	325,413	4.0		9,796	33	1.4	

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2006. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2006. A beneficiary who used drugs from two or more Part D excluded categories was counted as a user for each category. Therefore, the sum of users across drug categories may exceed the total number of individual users as noted on Table ND11.

b. Includes OTC drugs as well as prescription drugs.

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

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

Nondual 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, WASHINGTON, 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	1,041,601	7,175	101,145	310,380	622,424	477	9,768,048	75,343	1,056,110	2,542,321	6,089,990	4,284
Age												
5 and younger	237,698	0	4,064	4	233,630	0	2,253,055	0	43,453	37	2,209,565	0
6-14	282,189	1	10,397	220	271,571	0	2,890,235	3	118,022	1,350	2,770,860	0
15-20	179,548	7	8,881	53,669	116,991	0	1,642,314	78	96,937	436,694	1,108,605	0
21-44	274,805	18	34,735	239,729	231	92	2,324,237	163	355,441	1,966,864	955	814
45-64	60,229	145	42,974	16,725	0	385	583,661	1,285	441,754	137,152	0	3,470
65-74	4,387	4,268	92	27	0	0	45,825	45,151	479	195	0	0
75-84	2,208	2,202	2	4	0	0	23,284	23,238	24	22	0	0
85 and older	537	534	0	2	1	0	5,437	5,425	0	7	5	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	631,508	4,520	51,254	267,932	307,325	477	5,855,679	47,692	545,463	2,236,406	3,021,834	4,284
Male	410,015	2,650	49,884	42,445	315,036	0	3,911,753	27,607	510,578	305,883	3,067,685	0
Unknown	78	5	7	3	63	0	616	44	69	32	471	0
Race												
White	528,241	3,184	69,807	142,931	312,040	279	5,008,977	34,499	731,509	1,202,454	3,038,078	2,437
African American	64,763	335	9,096	17,025	38,291	16	621,470	3,512	94,119	145,095	378,613	131
Other/unknown	448,597	3,656	22,242	150,424	272,093	182	4,137,601	37,332	230,482	1,194,772	2,673,299	1,716
Use of Nursing Facilities^c												
Entire year	876	166	707	1	2	0	8,037	1,583	6,439	2	13	0
Part year	1,704	136	1,537	26	4	1	16,972	1,397	15,301	233	35	6
None	1,039,021	6,873	98,901	310,353	622,418	476	9,743,039	72,363	1,034,370	2,542,086	6,089,942	4,278
Maintenance Assistance Status												
Cash	229,836	4,754	91,781	40,376	92,925	0	2,297,361	51,513	956,685	351,346	937,817	0
Medically needy	1,322	77	1,005	35	205	0	12,042	856	9,141	160	1,885	0
Poverty related	352,422	30	85	42,758	309,072	477	3,440,465	228	679	350,080	3,085,194	4,284
Other/unknown	458,021	2,314	8,274	227,211	220,222	0	4,018,180	22,746	89,605	1,840,735	2,065,094	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	369,292	6,790	93,068	168,514	100,450	470	3,175,190	71,279	974,167	1,252,561	872,966	4,217
FFS part year, with Rx claims	93,460	238	5,583	43,563	44,069	7	890,863	2,538	57,391	399,766	431,101	67
FFS part year, no Rx claims	148,513	44	1,016	37,764	109,689	0	1,294,888	441	9,870	319,623	964,954	0
MC all year, with Rx claims	32,406	11	307	10,578	21,510	0	355,649	106	2,654	113,415	239,474	0
MC all year, no Rx claims	397,916	92	1,171	49,961	346,692	0	4,051,401	979	12,028	456,956	3,581,438	0

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

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

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

	Beneficiaries and		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Benefit Months in Cell J of Table 1					
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	1,041,601	9,768,048	611,238	3,924,160	27	5,843,888
Fee-for-service (FFS) all year	369,292	3,175,190	369,292	3,175,031	0	159
FFS part year, with Rx claims	93,460	890,863	93,457	350,166	3	540,697
FFS part year, with no Rx claims	148,513	1,294,888	148,489	398,963	24	895,925
Managed care (MC) all year, with Rx claims	32,406	355,649	0	0	0	355,649
MC all year, with no Rx claims	397,916	4,051,401	0	0	0	4,051,401

Source: Data for this table are from the MAX 2006 file for Washington, released by CMS in 7/2009. This table was produced on 02/12/2010.

a. Benefit months are months during which beneficiaries had pharmacy benefit coverage.

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

Nondual Medicaid Beneficiaries