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**STATISTICAL COMPENDIUM:  
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2007  
COLORADO**

**LIST OF TABLES**

**OVERVIEW OF STUDY POPULATION**

**TABLE 1. OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION**

**FOR ALL MEDICAID BENEFICIARIES**

**TABLE 2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY**

**TABLE 3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC**

**TABLE 4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC**

**TABLE 5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC**

**TABLE 6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY**

**TABLE 7. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP**

**FOR ALL NONDUAL BENEFICIARIES**

**TABLE ND.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY**

**TABLE ND.3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC**

**TABLE ND.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC**

**TABLE ND.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC**

**TABLE ND.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY**

**TABLE ND.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP**

**TABLE ND.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC**

**TABLE ND.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY**

**TABLE ND.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP**

**TABLE ND.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC**

**TABLE ND.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC**

**TABLE ND.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS**

**FOR DUAL ELIGIBLE BENEFICIARIES**

**TABLE D.2. CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY**

**TABLE D.3. ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC**

**TABLE D.4. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC**

**TABLE D.5. AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC**

**TABLE D.6. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY**

**TABLE D.7-7D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP**

TABLE D.8. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BENEFICIARY CHARACTERISTIC  
TABLE D.9. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS, BY BRAND STATUS AND THERAPEUTIC CATEGORY  
TABLE D.10-10D. MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY TOP 10 DRUG GROUP  
TABLE D.11. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS, BY BENEFICIARY CHARACTERISTIC  
TABLE D.12. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC  
TABLE D.13. USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS

**SUPPLEMENTAL TABLES**

SUPPLEMENTAL TABLE 1. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES  
SUPPLEMENTAL TABLE 1A. MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65  
SUPPLEMENTAL TABLE 1B. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER  
SUPPLEMENTAL TABLE 1C. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74  
SUPPLEMENTAL TABLE 1D. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84  
SUPPLEMENTAL TABLE 1E. MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER

**APPENDIX TABLES**

APPENDIX TABLE A.1. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, NONDUAL BENEFICIARIES  
APPENDIX TABLE A.2. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, NONDUAL BENEFICIARIES  
APPENDIX TABLE A.3. CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY, DUAL ELIGIBLE BENEFICIARIES  
APPENDIX TABLE A.4. MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS, DUAL ELIGIBLE BENEFICIARIES

**TABLE D.2**  
**CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>**  
**DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007**

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>65,269</b>	<b>38,219</b>	<b>26,575</b>	<b>457</b>	<b>13</b>	<b>5</b>	<b>677,074</b>	<b>390,357</b>	<b>283,258</b>	<b>3,289</b>	<b>146</b>	<b>24</b>
<b>Age</b>												
5 and younger	7	0	7	0	0	0	82	0	82	0	0	0
6-14	10	0	10	0	0	0	98	0	98	0	0	0
15-20	105	0	93	0	12	0	1,152	0	1,008	0	144	0
21-44	10,098	0	9,810	287	1	0	106,878	0	104,734	2,142	2	0
45-64	16,134	0	15,983	148	0	3	172,194	0	171,165	1,013	0	16
65-74	14,579	14,037	522	18	0	2	152,168	147,512	4,535	113	0	8
75-84	13,540	13,411	125	4	0	0	139,392	138,015	1,356	21	0	0
85 and older	10,796	10,771	25	0	0	0	105,110	104,830	280	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	41,054	27,048	13,697	299	5	5	428,238	279,257	146,701	2,206	50	24
Male	24,215	11,171	12,878	158	8	0	248,836	111,100	136,557	1,083	96	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	25,642	14,631	10,901	102	7	1	274,718	153,234	120,633	761	84	6
African American	1,518	726	775	16	1	0	15,544	7,634	7,778	120	12	0
Other/unknown	38,109	22,862	14,899	339	5	4	386,812	229,489	154,847	2,408	50	18
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	8,096	7,232	864	0	0	0	82,136	72,519	9,617	0	0	0
Part year	5,051	4,372	678	1	0	0	48,081	40,982	7,087	12	0	0
None	52,122	26,615	25,033	456	13	5	546,857	276,856	266,554	3,277	146	24
<b>Maintenance Assistance Status</b>												
Cash	47,851	26,477	20,966	407	1	0	505,529	280,822	221,743	2,962	2	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	595	374	192	23	1	5	5,828	3,684	1,972	136	12	24
Other/unknown	16,823	11,368	5,417	27	11	0	165,717	105,851	59,543	191	132	0
<b>Dual Medicare Status<sup>d</sup></b>												
Full dual, all year	62,607	36,943	25,218	428	13	5	649,257	377,406	268,710	2,971	146	24
Full dual, part year	2,662	1,276	1,357	29	0	0	27,817	12,951	14,548	318	0	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	63,574	37,134	25,980	442	13	5	667,330	383,944	279,984	3,232	146	24
FFS part year, with Rx claims	351	166	181	4	0	0	2,099	981	1,100	18	0	0
FFS part year, no Rx claims	1,344	919	414	11	0	0	7,645	5,432	2,174	39	0	0

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.2 includes the beneficiaries represented by Cell G 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.

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 2007. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

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 D.3**  
**ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>**  
**DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007**

Beneficiary Characteristics	Percentage with at		Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ <sup>c</sup>	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>d</sup>	Number of Beneficiaries
	Least One Rx	Mean Number of Rx					
<b>All</b>	<b>22.3</b>	<b>3.0</b>	<b>\$194</b>	<b>\$64</b>	<b>\$15,531</b>	<b>1.2</b>	<b>65,269</b>
<b>Age</b>							
5 and younger	14.3	4.4	314	71	31,916	1.0	7
6-14	40.0	4.3	1,323	308	8,536	15.5	10
15-20	63.8	17.5	2,738	156	14,146	19.4	105
21-44	27.9	5.5	503	92	14,118	3.6	10,098
45-64	26.0	4.2	246	59	15,100	1.6	16,134
65-74	20.7	2.7	150	55	9,702	1.5	14,579
75-84	17.5	1.5	52	36	15,795	0.3	13,540
85 and older	19.0	1.2	36	30	25,047	0.1	10,796
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>e</sup></b>							
Aged	19.3	1.8	83	45	16,322	0.5	38,219
Disabled	26.3	4.6	339	74	14,605	2.3	26,575
Adults	31.5	8.8	726	83	2,814	25.8	457
Children	92.3	53.2	8,959	168	33,290	26.9	13
Unknown	80.0	12.2	721	59	3,638	19.8	5
<b>Gender</b>							
Female	23.3	3.1	185	61	15,256	1.2	41,054
Male	20.5	2.9	208	71	15,997	1.3	24,215
Unknown	0.0	0.0	0	0	0	0.0	0
<b>Race</b>							
White	23.4	3.0	175	59	19,338	0.9	25,642
African American	18.8	2.6	264	100	14,316	1.8	1,518
Other/unknown	21.6	3.0	204	67	13,018	1.6	38,109
<b>Use of Nursing Facilities<sup>f</sup></b>							
Entire year	28.8	2.5	90	35	43,828	0.2	8,096
Part year	33.2	2.8	123	44	27,429	0.4	5,051
None	20.2	3.1	216	70	9,983	2.2	52,122
<b>Maintenance Assistance Status</b>							
Cash	21.6	3.2	215	68	11,928	1.8	47,851
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	12.6	1.1	99	91	5,428	1.8	595
Other/unknown	24.4	2.6	136	52	26,136	0.5	16,823

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.3 includes beneficiaries represented by Cell G 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 eight states (DE, IA, IL, NE, NY, TN, TX, 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 eight states (DE, IA, IL, NE, NY, TN, TX, and WV) the Rx share of expenditures for all Medicaid services shown in this column is higher than it would be if all expenditures for these other services, including services provided in capitated managed care plans and long-term-care services, were included.

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

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

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

**TABLE D.4**  
**MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>**  
**DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007**

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>c</sup>	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ <sup>d</sup>	Beneficiaries	Benefit Months
<b>All</b>	<b>0.3</b>	<b>\$19</b>	<b>1.2</b>	<b>77.7</b>	<b>17.4</b>	<b>2.0</b>	<b>1.8</b>	<b>0.8</b>	<b>0.2</b>	<b>\$1,497</b>	<b>65,269</b>	<b>677,074</b>
<b>Age</b>												
5 and younger	0.4	27	1.0	85.7	0.0	0.0	14.3	0.0	0.0	2,725	7	82
6-14	0.4	135	15.5	60.0	30.0	0.0	10.0	0.0	0.0	871	10	98
15-20	1.6	250	19.4	36.2	32.4	10.5	14.3	3.8	2.9	1,289	105	1,152
21-44	0.5	48	3.6	72.1	18.7	3.1	3.7	2.0	0.4	1,334	10,098	106,878
45-64	0.4	23	1.6	74.0	19.4	2.8	2.4	1.2	0.3	1,415	16,134	172,194
65-74	0.3	14	1.5	79.3	16.0	2.0	1.9	0.7	0.1	930	14,579	152,168
75-84	0.1	5	0.3	82.5	15.5	1.1	0.7	0.2	0.0	1,534	13,540	139,392
85 and older	0.1	4	0.1	81.0	17.3	0.9	0.5	0.2	0.0	2,573	10,796	105,110
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	0.2	8	0.5	80.7	16.4	1.4	1.1	0.4	0.1	1,598	38,219	390,357
Disabled	0.4	32	2.3	73.7	18.9	2.8	2.8	1.5	0.3	1,370	26,575	283,258
Adults	1.2	101	25.8	68.5	12.5	3.5	8.8	5.5	1.3	391	457	3,289
Children	4.7	798	26.9	7.7	23.1	7.7	38.5	0.0	23.1	2,964	13	146
Unknown	2.5	150	19.8	20.0	20.0	40.0	0.0	20.0	0.0	758	5	24
<b>Gender</b>												
Female	0.3	18	1.2	76.7	18.4	2.0	1.8	0.9	0.2	1,463	41,054	428,238
Male	0.3	20	1.3	79.5	15.7	2.0	1.8	0.8	0.2	1,557	24,215	248,836
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	0.3	16	0.9	76.6	19.0	2.0	1.6	0.7	0.2	1,805	25,642	274,718
African American	0.3	26	1.8	81.2	13.8	1.8	2.4	0.7	0.1	1,398	1,518	15,544
Other/unknown	0.3	20	1.6	78.4	16.5	2.0	2.0	0.9	0.2	1,283	38,109	386,812
<b>Use of Nursing Facilities<sup>f</sup></b>												
Entire year	0.3	9	0.2	71.2	25.1	2.1	1.0	0.3	0.2	4,320	8,096	82,136
Part year	0.3	13	0.4	66.8	29.1	2.1	1.2	0.7	0.2	2,882	5,051	48,081
None	0.3	21	2.2	79.8	15.1	2.0	2.0	0.9	0.2	952	52,122	546,857
<b>Maintenance Assistance Status</b>												
Cash	0.3	20	1.8	78.4	16.4	2.0	2.1	0.9	0.2	1,129	47,851	505,529
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.1	10	1.8	87.4	10.1	0.8	1.3	0.3	0.0	554	595	5,828
Other/unknown	0.3	14	0.5	75.6	20.5	1.9	1.2	0.6	0.2	2,653	16,823	165,717

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

- a. Table D.4 includes the beneficiaries represented by Cell G 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 eight states (DE, IA, IL, NE, NY, TN, TX, 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 eight states (DE, IA, IL, NE, NY, TN, TX, 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 D.5**  
**AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>**  
**DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007**

Beneficiary Characteristics	All Rx			Patented Brand-Name Drugs			Off-Patent Brand-Name Drugs			Generic Drugs		
	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx	Number of Rx	Rx \$	\$ per Rx
<b>All</b>	<b>0.3</b>	<b>\$19</b>	<b>\$64</b>	<b>0.1</b>	<b>\$12</b>	<b>\$196</b>	<b>0.0</b>	<b>\$1</b>	<b>\$108</b>	<b>0.2</b>	<b>\$6</b>	<b>\$25</b>
<b>Age</b>												
5 and younger	0.4	27	71	0.0	0	0	0.0	1	24	0.3	26	76
6-14	0.4	135	308	0.1	107	809	0.1	20	154	0.2	7	42
15-20	1.6	250	156	0.6	212	345	0.1	10	108	0.9	28	32
21-44	0.5	48	92	0.1	34	234	0.0	2	148	0.4	11	31
45-64	0.4	23	59	0.1	14	187	0.0	1	103	0.3	8	26
65-74	0.3	14	55	0.1	9	161	0.0	1	79	0.2	5	23
75-84	0.1	5	36	0.0	3	122	0.0	0	80	0.1	2	19
85 and older	0.1	4	30	0.0	2	135	0.0	0	81	0.1	2	15
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	0.2	8	45	0.0	5	149	0.0	0	79	0.1	3	20
Disabled	0.4	32	74	0.1	21	214	0.0	2	125	0.3	9	28
Adults	1.2	101	83	0.3	62	200	0.0	4	91	0.9	34	40
Children	4.7	798	168	1.8	712	405	0.2	17	74	2.8	69	25
Unknown	2.5	150	59	0.8	126	159	0.0	0	0	1.8	24	14
<b>Gender</b>												
Female	0.3	18	61	0.1	11	191	0.0	1	99	0.2	6	24
Male	0.3	20	71	0.1	13	203	0.0	1	125	0.2	6	27
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
<b>Race</b>												
White	0.3	16	59	0.1	10	190	0.0	1	112	0.2	5	24
African American	0.3	26	100	0.0	20	396	0.0	1	137	0.2	5	24
Other/unknown	0.3	20	67	0.1	13	193	0.0	1	105	0.2	6	26
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	0.3	9	35	0.0	4	135	0.0	1	213	0.2	4	19
Part year	0.3	13	44	0.0	7	149	0.0	1	98	0.2	5	21
None	0.3	21	70	0.1	14	203	0.0	1	104	0.2	6	27
<b>Maintenance Assistance Status</b>												
Cash	0.3	20	68	0.1	14	198	0.0	1	109	0.2	6	26
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.1	10	91	0.0	7	345	0.0	0	142	0.1	3	32
Other/unknown	0.3	14	52	0.0	8	184	0.0	1	104	0.2	5	22

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.5 includes the beneficiaries represented by Cell G 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 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 D.6**  
**MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>**  
**DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007**

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users <sup>e</sup>				
	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	As a Percentage of Dual Benes	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	\$46	\$38	\$1	\$7	\$153	\$483	\$259	\$33	6,250	\$958,148	1,883	2.9	20,724
Biologicals	0.4	0.4	0.0	0.0	731	731	0	0	1880	1,880	0	0	14	26,318	3	0.0	36
Antineoplastic Agents	0.4	0.2	0.0	0.2	176	162	0	13	421	904	156	56	454	191,044	103	0.2	1,085
Endocrine/Metabolic Drugs	0.6	0.2	0.0	0.4	39	28	3	8	61	120	146	20	13,015	788,566	1,876	2.9	20,284
Cardiovascular Agents	0.9	0.2	0.1	0.6	43	24	5	15	47	103	72	24	23,996	1,121,333	2,403	3.7	25,813
Respiratory Agents	0.5	0.2	0.1	0.2	41	29	5	7	76	119	80	32	8,452	646,111	1,422	2.2	15,602
Gastrointestinal Agents	0.5	0.1	0.0	0.3	37	23	4	9	81	177	136	32	7,684	622,364	1,566	2.4	17,032
Genitourinary Agents	0.4	0.2	0.0	0.2	29	21	1	7	71	99	84	38	2,262	161,150	510	0.8	5,609
CNS Drugs	0.6	0.1	0.0	0.5	33	21	1	11	51	210	125	21	74,470	3,809,997	10,727	16.4	116,943
Stimulants/Anti-obesity/Anorexia	0.5	0.4	0.0	0.1	83	79	0	3	169	209	30	34	631	106,919	114	0.2	1,292
Miscellaneous Psychological/Neurological Agents	0.5	0.5	0.0	0.0	195	195	0	0	405	405	0	38	896	362,794	169	0.3	1,857
Analgesics and Anesthetics	0.7	0.1	0.0	0.6	41	16	1	25	62	298	275	40	17,501	1,076,849	2,421	3.7	26,058
Neuromuscular Agents	0.7	0.1	0.0	0.5	45	26	3	15	66	207	153	28	27,564	1,817,866	3,681	5.6	40,751
Nutritional Products	0.4	0.0	0.0	0.4	7	2	0	5	18	115	14	14	4,398	78,484	1,010	1.5	11,238
Hematological Agents	0.5	0.1	0.0	0.4	39	33	0	5	79	308	49	14	3,577	280,972	660	1.0	7,248
Topical Products	0.3	0.1	0.0	0.2	20	15	0	5	65	134	60	25	4,247	277,394	1,231	1.9	13,691
Miscellaneous Products	0.6	0.4	0.0	0.2	296	279	3	15	484	731	200	70	570	275,996	90	0.1	931
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	18	0	0	0	93	0	0	0	318	29,666	149	0.2	1,648
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>196,299</b>	<b>12,631,971</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.6 includes the beneficiaries represented by Cell G of Table 1. A beneficiary who used drugs from two or more categories 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. 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 Colorado, 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 2007.

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



TABLE D.7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007

Top 10 Drug Groups	Total Medicaid Rx \$	Users		Among Users			
		Number of Users	As a Percentage of Dual Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	Rx \$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$2,016,690	1,274	2.0	13,924	0.6	\$248	\$145
ANTICONVULSANT	1,656,936	3,510	5.4	39,091	0.6	71	42
ANTIANKXIETY AGENTS	884,672	8,343	12.8	90,969	0.5	20	10
ANALGESICS - Narcotic	715,340	2,728	4.2	29,431	0.4	57	24
ANTIDEPRESSANTS	656,339	2,111	3.2	22,877	0.4	65	29
ANTIVIRAL	617,183	218	0.3	2,357	0.4	673	262
ANTIHYPERLIPIDEMIC	537,127	1,318	2.0	14,376	0.4	92	37
ANTIDIABETIC	492,320	1,334	2.0	14,432	0.4	77	34
ANTIASTHMATIC	413,049	1,265	1.9	14,042	0.3	92	29
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	362,759	200	0.3	2,191	0.4	405	166
Total	8,352,415	22,301	n.a.	243,690	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.7 includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. 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 2007. 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.

Dual Medicaid Beneficiaries

TABLE D.7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of Dual 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 Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>117,942</b>	<b>\$8,352,415</b>	<b>1,274</b>	<b>2.0</b>	<b>13,924</b>	<b>0.6</b>	<b>\$145</b>	<b>3,510</b>	<b>5.4</b>	<b>39,091</b>	<b>0.6</b>	<b>\$42</b>
<b>Female</b>												
All Females	74,955	4,841,375	670	1.6	7,295	0.5	124	2,209	5.4	24,653	0.6	38
<b>Female, Disabled</b>												
All Ages	42,175	3,474,501	527	3.8	5,782	0.5	130	1,466	10.7	16,480	0.6	47
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	4	8,351	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	187	41,281	12	29.3	144	0.4	164	10	24.4	120	0.4	88
21-44	16,934	1,828,426	323	7.1	3,561	0.5	126	636	14.1	7,071	0.6	65
45-64	24,500	1,552,988	185	2.1	2,009	0.5	134	808	9.3	9,174	0.6	32
65-74	550	43,455	7	2.4	68	0.4	90	12	4.1	115	0.5	63
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>												
All Ages	32,780	1,366,874	143	0.5	1,513	0.5	102	743	2.7	8,173	0.6	20
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	80	10,644	2	50.0	24	0.6	111	1	25.0	12	0.8	115
21-44	1,311	110,658	25	11.3	229	0.5	111	40	18.1	359	0.5	64
45-64	364	32,127	2	2.8	24	0.9	282	10	14.1	81	0.5	54
65-74	14,265	772,371	79	0.9	857	0.5	109	358	4.0	4,075	0.5	22
75-84	9,257	270,061	23	0.2	247	0.4	77	220	2.4	2,427	0.6	14
85 and older	7,503	171,013	12	0.1	132	0.5	48	114	1.3	1,219	0.6	10
<b>Male</b>												
All Males	42,987	3,511,040	604	2.5	6,629	0.7	168	1,301	5.4	14,438	0.6	50
<b>Male, Disabled</b>												
All Ages	31,861	2,899,697	547	4.2	6,007	0.7	172	1,055	8.2	11,843	0.7	56
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	361	82,030	20	38.5	240	0.6	212	13	25.0	156	0.6	134
21-44	14,920	1,690,109	371	7.0	4,070	0.7	173	547	10.3	6,158	0.7	69
45-64	16,351	1,110,820	153	2.1	1,661	0.6	166	492	6.8	5,504	0.7	40
65-74	229	16,738	3	1.3	36	0.4	126	3	1.3	25	0.5	11
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Male, Other Eligibles</b>												
All Ages	11,126	611,343	57	0.5	622	0.7	127	246	2.2	2,595	0.5	24
5 and younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	233	29,287	6	75.0	72	1.9	260	2	25.0	24	1.8	205
21-44	269	25,596	3	4.5	19	0.5	41	8	11.9	70	0.5	72
45-64	363	46,857	0	0.0	0	0.0	0	7	8.8	63	0.6	53
65-74	5,977	348,449	30	0.6	343	0.6	134	128	2.6	1,399	0.5	21
75-84	2,862	126,638	13	0.3	137	0.5	69	70	1.7	741	0.5	23
85 and older	1,422	34,516	5	0.2	51	0.5	81	31	1.5	298	0.6	10
<b>Unknown</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.7A includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. 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 2007. 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.

Dual Medicaid Beneficiaries

**TABLE D.7B**  
**MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS**  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007

Beneficiary Characteristics	ANTI-ANXIETY AGENTS					ANALGESICS - Narcotic					ANTIDEPRESSANTS				
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>8,343</b>	<b>12.8</b>	<b>90,969</b>	<b>0.5</b>	<b>\$10</b>	<b>2,728</b>	<b>4.2</b>	<b>29,431</b>	<b>0.4</b>	<b>\$24</b>	<b>2,111</b>	<b>3.2</b>	<b>22,877</b>	<b>0.4</b>	<b>\$29</b>
<b>Female</b>															
All Females	5,764	14.0	63,183	0.5	9	1,811	4.4	19,702	0.4	23	1,437	3.5	15,517	0.4	29
<b>Female, Disabled</b>															
All Ages	2,092	15.3	23,960	0.5	11	1,260	9.2	13,847	0.4	26	1,006	7.3	10,943	0.4	32
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	4.9	24	0.2	3	8	19.5	96	0.1	1	9	22.0	108	0.3	22
21-44	653	14.4	7,446	0.4	10	627	13.9	6,923	0.4	28	471	10.4	5,163	0.5	35
45-64	1,423	16.3	16,333	0.5	11	600	6.9	6,570	0.5	24	505	5.8	5,482	0.4	30
65-74	14	4.8	157	0.5	6	25	8.6	258	0.5	55	21	7.2	190	0.4	20
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>															
All Ages	3,672	13.4	39,223	0.5	8	551	2.0	5,855	0.4	16	431	1.6	4,574	0.4	22
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	50.0	24	0.7	10	2	50.0	24	0.1	1	0	0.0	0	0.0	0
21-44	40	18.1	372	0.4	5	85	38.5	783	0.6	33	53	24.0	483	0.5	43
45-64	9	12.7	85	0.4	4	28	39.4	221	0.5	30	19	26.8	132	0.5	27
65-74	1,128	12.5	12,676	0.5	9	309	3.4	3,468	0.3	13	247	2.7	2,746	0.4	20
75-84	1,183	12.7	12,761	0.5	9	82	0.9	893	0.3	12	64	0.7	719	0.4	16
85 and older	1,310	15.1	13,305	0.4	7	45	0.5	466	0.5	18	48	0.6	494	0.4	20
<b>Male</b>															
All Males	2,579	10.7	27,786	0.5	11	917	3.8	9,729	0.5	27	674	2.8	7,360	0.5	28
<b>Male, Disabled</b>															
All Ages	1,464	11.4	16,543	0.6	13	688	5.3	7,273	0.5	28	533	4.1	5,838	0.5	29
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	3.8	24	0.4	5	5	9.6	53	0.2	1	12	23.1	133	0.6	14
21-44	528	10.0	6,040	0.5	12	342	6.5	3,612	0.5	31	288	5.4	3,187	0.5	29
45-64	925	12.8	10,403	0.6	14	333	4.6	3,550	0.5	25	227	3.1	2,456	0.5	29
65-74	9	3.9	76	0.4	8	8	3.5	58	0.5	8	6	2.6	62	0.5	29
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Male, Other Eligibles</b>															
All Ages	1,115	9.8	11,243	0.4	8	229	2.0	2,456	0.4	23	141	1.2	1,522	0.5	26
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	12.5	12	1.3	46	1	12.5	12	0.1	0	1	12.5	12	1.3	15
21-44	5	7.5	36	0.5	5	20	29.9	177	0.6	31	9	13.4	85	0.6	44
45-64	4	5.0	34	0.3	11	19	23.8	150	1.4	137	12	15.0	107	0.5	35
65-74	446	8.9	4,826	0.5	9	150	3.0	1,716	0.3	15	88	1.8	972	0.4	25
75-84	387	9.5	3,937	0.4	8	27	0.7	278	0.4	18	22	0.5	248	0.5	21
85 and older	272	12.9	2,398	0.4	7	12	0.6	123	0.2	3	9	0.4	98	0.4	18
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.7B includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. 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 2007. 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.

Dual Medicaid Beneficiaries

TABLE D.7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007

Beneficiary Characteristics	ANTIVIRAL					ANTIHYPERTENSIVE					ANTIDIABETIC				
	Number of Users	Users as % of Dual 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 Dual 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 Dual Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
<b>All</b>	<b>218</b>	<b>0.3</b>	<b>2,357</b>	<b>0.4</b>	<b>\$262</b>	<b>1,318</b>	<b>2.0</b>	<b>14,376</b>	<b>0.4</b>	<b>\$37</b>	<b>1,334</b>	<b>2.0</b>	<b>14,432</b>	<b>0.4</b>	<b>\$34</b>
<b>Female</b>															
All Females	117	0.3	1,313	0.3	280	809	2.0	8,797	0.4	36	880	2.1	9,415	0.4	33
<b>Female, Disabled</b>															
All Ages	95	0.7	1,081	0.3	286	328	2.4	3,563	0.4	36	396	2.9	4,251	0.5	39
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	25.0	12	0.3	696	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	1	2.4	12	0.2	165	1	2.4	12	0.4	47	1	2.4	12	0.1	3
21-44	54	1.2	606	0.3	342	72	1.6	797	0.4	36	127	2.8	1,315	0.6	48
45-64	39	0.4	451	0.4	203	244	2.8	2,663	0.4	36	254	2.9	2,780	0.5	35
65-74	0	0.0	0	0.0	0	11	3.8	91	0.5	45	14	4.8	144	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
<b>Female, Other Eligibles</b>															
All Ages	22	0.1	232	0.3	251	481	1.8	5,234	0.4	35	484	1.8	5,164	0.4	29
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	1	0.5	9	0.4	4	3	1.4	36	0.4	53	7	3.2	84	0.5	59
45-64	0	0.0	0	0.0	0	8	11.3	58	0.5	64	11	15.5	91	0.8	70
65-74	17	0.2	175	0.3	313	351	3.9	3,860	0.3	33	355	3.9	3,841	0.4	29
75-84	3	0.0	36	0.4	91	98	1.0	1,064	0.4	42	81	0.9	869	0.4	22
85 and older	1	0.0	12	0.1	1	21	0.2	216	0.4	39	30	0.3	279	0.4	29
<b>Male</b>															
All Males	101	0.4	1,044	0.5	240	509	2.1	5,579	0.4	40	454	1.9	5,017	0.4	36
<b>Male, Disabled</b>															
All Ages	73	0.6	726	0.5	258	289	2.2	3,133	0.5	43	258	2.0	2,799	0.5	42
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2	3.8	24	0.4	301	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	46	0.9	437	0.5	229	111	2.1	1,175	0.5	45	86	1.6	887	0.5	46
45-64	24	0.3	257	0.5	310	170	2.3	1,880	0.4	41	164	2.3	1,825	0.5	40
65-74	1	0.4	8	0.1	10	8	3.5	78	0.5	58	8	3.5	87	0.5	30
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Male, Other Eligibles</b>															
All Ages	28	0.2	318	0.4	198	220	1.9	2,446	0.4	37	196	1.7	2,218	0.4	28
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	5	62.5	60	0.3	81	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	3	4.5	24	0.3	173	6	9.0	64	0.4	37	3	4.5	28	0.7	132
45-64	2	2.5	23	0.7	615	4	5.0	34	0.8	42	2	2.5	16	1.3	211
65-74	11	0.2	127	0.6	225	157	3.1	1,784	0.4	35	147	2.9	1,699	0.4	25
75-84	5	0.1	60	0.4	181	44	1.1	479	0.5	46	34	0.8	374	0.4	29
85 and older	2	0.1	24	0.1	18	9	0.4	85	0.3	18	10	0.5	101	0.4	19
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.7C includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. 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 2007. 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.

Dual Medicaid Beneficiaries

TABLE D.7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c</sup>  
 DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007

Beneficiary Characteristics	ANTIASTHMATIC					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL							
	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of Dual Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Beneficiaries	Number of Benefit Months	
<b>All</b>	<b>1,265</b>	<b>1.9</b>	<b>14,042</b>	<b>0.3</b>	<b>\$29</b>	<b>200</b>	<b>0.3</b>	<b>2,191</b>	<b>0.4</b>	<b>\$166</b>	<b>65,269</b>	<b>677,074</b>	
<b>Female</b>													
All Females	872	2.1	9,768	0.3	27	121	0.3	1,352	0.4	201	41,054	428,238	
<b>Female, Disabled</b>													
All Ages	592	4.3	6,700	0.3	27	51	0.4	585	0.4	356	13,697	146,701	
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	48	
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	45	
15-20	4	9.8	48	0.4	43	0	0.0	0	0.0	0	41	439	
21-44	254	5.6	2,849	0.3	24	25	0.6	288	0.4	370	4,521	48,422	
45-64	326	3.7	3,716	0.3	29	26	0.3	297	0.4	343	8,734	94,062	
65-74	8	2.7	87	0.5	37	0	0.0	0	0.0	0	291	2,579	
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	82	886	
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	20	220	
<b>Female, Other Eligibles</b>													
All Ages	280	1.0	3,068	0.3	27	70	0.3	767	0.4	82	27,357	281,537	
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	
15-20	3	75.0	36	1.0	177	0	0.0	0	0.0	0	4	48	
21-44	23	10.4	223	0.2	16	1	0.5	12	0.2	264	221	1,686	
45-64	1	1.4	7	0.3	70	0	0.0	0	0.0	0	71	472	
65-74	169	1.9	1,938	0.3	24	26	0.3	301	0.4	127	9,051	96,336	
75-84	49	0.5	537	0.3	22	19	0.2	195	0.3	32	9,350	97,529	
85 and older	35	0.4	327	0.4	40	24	0.3	259	0.5	60	8,660	85,466	
<b>Male</b>													
All Males	393	1.6	4,274	0.4	35	79	0.3	839	0.4	109	24,215	248,836	
<b>Male, Disabled</b>													
All Ages	280	2.2	3,034	0.4	33	42	0.3	468	0.5	151	12,878	136,557	
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	34	
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	53	
15-20	8	15.4	96	0.1	12	0	0.0	0	0.0	0	52	569	
21-44	129	2.4	1,383	0.3	32	21	0.4	236	0.4	181	5,289	56,312	
45-64	139	1.9	1,539	0.4	35	20	0.3	220	0.5	123	7,249	77,103	
65-74	4	1.7	16	1.0	61	1	0.4	12	0.4	69	231	1,956	
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	43	470	
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	60	
<b>Male, Other Eligibles</b>													
All Ages	113	1.0	1,240	0.4	39	37	0.3	371	0.4	56	11,337	112,279	
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	
15-20	1	12.5	12	0.2	4	0	0.0	0	0.0	0	8	96	
21-44	0	0.0	0	0.0	0	1	1.5	12	0.2	17	67	458	
45-64	0	0.0	0	0.0	0	0	0.0	0	0.0	0	80	557	
65-74	77	1.5	858	0.4	43	17	0.3	186	0.4	58	5,006	51,297	
75-84	28	0.7	302	0.3	34	8	0.2	86	0.5	70	4,065	40,507	
85 and older	7	0.3	68	0.3	16	11	0.5	87	0.3	43	2,111	19,364	
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>	

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.



a. Table D.7D includes the beneficiaries represented by Cell G of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. 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 2007. 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.

Dual Medicaid Beneficiaries

TABLE D.8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Benefit Months Among All-Year	
			Facility Residents	Nursing Facility Residents
<b>All</b>	<b>\$9</b>	<b>0.3</b>	<b>8,096</b>	<b>82,136</b>
<b>Age</b>				
0-64	35	0.7	857	9,559
65-74	16	0.4	1,000	10,435
75-84	5	0.2	2,401	24,090
85 and older	3	0.1	3,838	38,052
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	6	0.2	5,672	57,969
Male	15	0.3	2,424	24,167
Unknown	0	0.0	0	0
<b>Race</b>				
White	8	0.3	4,146	43,445
African American	6	0.2	147	1,575
Other/unknown	10	0.3	3,803	37,116
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	5	0.2	7,232	72,519
Disabled	36	0.7	864	9,617
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.8 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their 2007 Medicaid enrollment. A total of 5,051 beneficiaries who were in nursing facilities for part of their enrollment and their 48,081 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

**TABLE D.9**  
**MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,**  
**BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d, e</sup>**  
**DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007**

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users									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 Dual All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.3	0.1	0.0	0.2	\$17	\$10	\$1	\$6	\$61	\$101	\$209	\$36	196	\$11,875	66	0.8	690
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	1.2	0.7	0.0	0.5	305	171	0	134	261	256	0	269	14	3,659	1	0.0	12
Endocrine/Metabolic Drugs	0.8	0.3	0.0	0.4	82	27	48	7	107	92	1,164	16	613	65,291	75	0.9	794
Cardiovascular Agents	1.1	0.2	0.1	0.8	44	21	4	19	40	100	48	23	1,173	46,445	100	1.2	1,056
Respiratory Agents	0.4	0.2	0.1	0.2	30	19	7	4	71	114	72	25	187	13,314	42	0.5	445
Gastrointestinal Agents	0.5	0.1	0.0	0.4	35	27	1	7	72	292	100	19	388	27,953	73	0.9	799
Genitourinary Agents	0.6	0.3	0.0	0.3	48	37	0	12	80	108	0	44	157	12,579	25	0.3	261
CNS Drugs	0.6	0.1	0.0	0.5	18	8	0	10	30	137	75	19	12,220	367,220	1,949	24.1	20,568
Stimulants/Anti-obesity/Anorexia	0.4	0.2	0.0	0.2	48	46	0	2	132	234	0	13	13	1,719	3	0.0	36
Miscellaneous Psychological/Neurological Agents	0.6	0.6	0.0	0.0	65	65	0	0	117	117	0	0	126	14,787	21	0.3	229
Analgesics and Anesthetics	0.9	0.1	0.0	0.8	29	6	0	23	33	76	59	29	809	26,947	89	1.1	915
Neuromuscular Agents	0.8	0.1	0.0	0.7	28	13	0	15	33	161	80	20	2,801	93,611	310	3.8	3,401
Nutritional Products	0.3	0.0	0.0	0.3	5	2	0	3	16	192	13	10	773	12,462	219	2.7	2,429
Hematological Agents	0.6	0.0	0.0	0.5	9	5	0	4	17	138	0	8	927	15,465	149	1.8	1,674
Topical Products	0.3	0.1	0.0	0.2	16	12	1	3	53	134	41	17	181	9,663	57	0.7	612
Miscellaneous Products	0.1	0.1	0.0	0.1	93	92	0	0	694	1,843	0	5	8	5,555	6	0.1	60
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	1	0	0	0	12	0	0	0	16	190	13	0.2	149
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>20,602</b>	<b>728,735</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

- a. Table D.9 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 5,051 beneficiaries who were in nursing facilities for part of their enrollment and their 48,081 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 2007. 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 Colorado, 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.

TABLE D.10  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY TOP-10 DRUG GROUP<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Users			Among Users			
		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	
ANTIANKXIETY AGENTS	\$185,125	1,784	22.0	18,809	0.5	\$19	\$10	
ANTIPSYCHOTICS	125,296	77	1.0	824	0.8	191	152	
ANTICONVULSANT	84,687	317	3.9	3,479	0.8	32	24	
MISC. ENDOCRINE	43,150	20	0.2	208	0.4	533	207	
ANTIDEPRESSANTS	31,604	104	1.3	1,115	0.5	59	28	
ANTIHYPERLIPIDEMIC	27,303	57	0.7	613	0.4	102	45	
HYPNOTICS	25,112	138	1.7	1,466	0.8	21	17	
ANTIDIABETIC	22,945	72	0.9	748	0.6	56	31	
ANALGESICS - Narcotic	21,371	93	1.1	932	0.7	32	23	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	14,787	28	0.3	302	0.4	117	49	
Total	581,380	2,690	n.a.	28,496	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.10 includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 5,051 beneficiaries who were in nursing facilities for part of their enrollment and their 48,081 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 2007. 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 2007 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.

Dual Medicaid Beneficiaries

TABLE D.10A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST  
 AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007

Beneficiary Characteristics	All Top 10 Drug Groups		ANTI-ANXIETY AGENTS					ANTI-PSYCHOTICS				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>16,388</b>	<b>\$581,380</b>	<b>1,784</b>	<b>22.0</b>	<b>18,809</b>	<b>0.5</b>	<b>\$10</b>	<b>77</b>	<b>1.0</b>	<b>824</b>	<b>0.8</b>	<b>\$152</b>
<b>Female</b>												
All Females	10,375	284,787	1,249	22.0	13,291	0.5	9	38	0.7	395	0.6	121
<b>Female, Disabled</b>												
All Ages	1,737	61,827	139	38.9	1,554	0.6	11	11	3.1	94	0.8	194
64 or younger	1,737	61,827	139	39.2	1,554	0.6	11	11	3.1	94	0.8	194
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>												
All Ages	8,638	222,960	1,110	20.9	11,737	0.5	9	27	0.5	301	0.6	99
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,994	89,554	160	28.3	1,782	0.5	11	14	2.5	162	0.7	157
75-84	2,894	58,731	349	21.8	3,707	0.5	10	7	0.4	79	0.3	26
85 and older	3,750	74,675	601	19.1	6,248	0.5	7	6	0.2	60	0.5	37
<b>Male</b>												
All Males	6,013	296,593	535	22.1	5,518	0.6	12	39	1.6	429	1.0	181
<b>Male, Disabled</b>												
All Ages	3,104	212,756	168	33.1	1,858	0.7	17	22	4.3	247	1.3	264
64 or younger	3,043	208,614	165	32.9	1,840	0.7	17	22	4.4	247	1.3	264
65-74	61	4,142	3	60.0	18	0.7	10	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Male, Other Eligibles</b>												
All Ages	2,909	83,837	367	19.1	3,660	0.5	9	17	0.9	182	0.5	67
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1,219	42,232	96	22.4	1,072	0.6	12	10	2.3	106	0.6	84
75-84	1,046	28,872	159	19.9	1,626	0.4	9	5	0.6	55	0.5	51
85 and older	644	12,733	112	16.2	962	0.5	8	2	0.3	21	0.5	27
<b>Unknown</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

- a. Table D.10A includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 5,051 beneficiaries who were in nursing facilities for part of their enrollment and their 48,081 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 2007. 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. The top 10 drug groups were determined based on total 2007 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>.
- d. 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 D.10B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007

Beneficiary Characteristics	ANTICONVULSANT					MISC. ENDOCRINE					ANTIDEPRESSANTS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>317</b>	<b>3.9</b>	<b>3,479</b>	<b>0.8</b>	<b>\$24</b>	<b>20</b>	<b>0.2</b>	<b>208</b>	<b>0.4</b>	<b>\$208</b>	<b>104</b>	<b>1.3</b>	<b>1,115</b>	<b>0.5</b>	<b>\$28</b>
<b>Female</b>															
All Females	186	3.3	2,067	0.8	20	18	0.3	184	0.3	25	65	1.1	681	0.5	25
<b>Female, Disabled</b>															
All Ages	43	12.0	483	0.8	28	2	0.6	13	0.3	27	18	5.0	158	0.5	28
64 or younger	43	12.1	483	0.8	28	2	0.6	13	0.3	27	18	5.1	158	0.5	28
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>															
All Ages	143	2.7	1,584	0.8	18	16	0.3	171	0.3	25	47	0.9	523	0.4	25
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	47	8.3	537	0.7	27	8	1.4	90	0.3	25	17	3.0	204	0.5	34
75-84	53	3.3	582	0.8	15	3	0.2	29	0.5	36	8	0.5	87	0.5	17
85 and older	43	1.4	465	0.7	12	5	0.2	52	0.3	20	22	0.7	232	0.4	19
<b>Male</b>															
All Males	131	5.4	1,412	0.7	30	2	0.1	24	0.9	1,603	39	1.6	434	0.5	33
<b>Male, Disabled</b>															
All Ages	72	14.2	816	0.7	40	2	0.4	24	0.9	1,603	21	4.1	241	0.6	43
64 or younger	72	14.3	816	0.7	40	2	0.4	24	0.9	1,603	20	4.0	229	0.6	42
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	20.0	12	0.9	70
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Male, Other Eligibles</b>															
All Ages	59	3.1	596	0.7	17	0	0.0	0	0.0	0	18	0.9	193	0.5	20
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	4.4	190	0.7	20	0	0.0	0	0.0	0	8	1.9	79	0.5	18
75-84	24	3.0	265	0.6	19	0	0.0	0	0.0	0	3	0.4	36	0.6	31
85 and older	16	2.3	141	0.7	11	0	0.0	0	0.0	0	7	1.0	78	0.4	18
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.10B includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 5,051 beneficiaries who were in nursing facilities for part of their enrollment and their 48,081 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 2007. 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 2007 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 D.10C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007

Beneficiary Characteristics	ANTIHYPERTENSIVE					HYPNOTICS					ANTIDIABETIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>57</b>	<b>0.7</b>	<b>613</b>	<b>0.4</b>	<b>\$45</b>	<b>138</b>	<b>1.7</b>	<b>1,466</b>	<b>0.8</b>	<b>\$17</b>	<b>72</b>	<b>0.9</b>	<b>748</b>	<b>0.6</b>	<b>\$31</b>
<b>Female</b>															
All Females	30	0.5	302	0.4	35	75	1.3	792	0.7	12	41	0.7	384	0.6	27
<b>Female, Disabled</b>															
All Ages	7	2.0	57	0.5	36	11	3.1	116	0.7	7	12	3.4	89	0.7	31
64 or younger	7	2.0	57	0.5	36	11	3.1	116	0.7	7	12	3.4	89	0.7	31
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Female, Other Eligibles</b>															
All Ages	23	0.4	245	0.4	34	64	1.2	676	0.7	13	29	0.5	295	0.6	26
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	16	2.8	190	0.3	29	22	3.9	255	0.7	16	11	1.9	132	0.4	17
75-84	3	0.2	29	0.4	25	20	1.2	210	0.6	13	11	0.7	115	0.7	29
85 and older	4	0.1	26	0.9	86	22	0.7	211	0.9	11	7	0.2	48	0.8	46
<b>Male</b>															
All Males	27	1.1	311	0.5	54	63	2.6	674	0.9	23	31	1.3	364	0.5	34
<b>Male, Disabled</b>															
All Ages	12	2.4	140	0.6	87	26	5.1	294	1.2	27	11	2.2	132	0.6	56
64 or younger	10	2.0	116	0.6	88	26	5.2	294	1.2	27	9	1.8	108	0.5	58
65-74	2	40.0	24	0.6	82	0	0.0	0	0.0	0	2	40.0	24	1.0	48
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
<b>Male, Other Eligibles</b>															
All Ages	15	0.8	171	0.4	28	37	1.9	380	0.7	20	20	1.0	232	0.4	22
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	11	2.6	126	0.4	32	18	4.2	192	0.8	24	12	2.8	144	0.4	23
75-84	2	0.3	24	0.3	21	12	1.5	119	0.6	20	5	0.6	55	0.3	17
85 and older	2	0.3	21	0.4	11	7	1.0	69	0.7	9	3	0.4	33	0.4	23
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

- a. Table D.10C includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 5,051 beneficiaries who were in nursing facilities for part of their enrollment and their 48,081 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 2007. 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 2007 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 D.10D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007

Beneficiary Characteristics	ANALGESICS - Narcotic						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 \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
<b>All</b>	<b>93</b>	<b>1.1</b>	<b>932</b>	<b>0.7</b>	<b>\$23</b>		<b>28</b>	<b>0.3</b>	<b>302</b>	<b>0.4</b>	<b>\$49</b>	<b>8,096</b>	<b>82,136</b>
<b>Female</b>													
All Females	57	1.0	557	0.8	26		19	0.3	204	0.4	44	5,672	57,969
<b>Female, Disabled</b>													
All Ages	17	4.8	128	1.0	24		0	0.0	0	0.0	0	357	3,964
64 or younger	17	4.8	128	1.0	24		0	0.0	0	0.0	0	355	3,948
65-74	0	0.0	0	0.0	0		0	0.0	0	0.0	0	2	16
75-84	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
<b>Female, Other Eligibles</b>													
All Ages	40	0.8	429	0.7	27		19	0.4	204	0.4	44	5,315	54,005
64 or younger	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
65-74	11	1.9	130	0.7	33		7	1.2	84	0.4	56	565	5,963
75-84	8	0.5	92	0.8	6		6	0.4	60	0.3	22	1,604	16,460
85 and older	21	0.7	207	0.7	32		6	0.2	60	0.4	50	3,146	31,582
<b>Male</b>													
All Males	36	1.5	375	0.7	18		9	0.4	98	0.5	60	2,424	24,167
<b>Male, Disabled</b>													
All Ages	23	4.5	249	0.7	20		2	0.4	24	0.8	87	507	5,653
64 or younger	23	4.6	249	0.7	20		2	0.4	24	0.8	87	502	5,611
65-74	0	0.0	0	0.0	0		0	0.0	0	0.0	0	5	42
75-84	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
<b>Male, Other Eligibles</b>													
All Ages	13	0.7	126	0.7	15		7	0.4	74	0.4	51	1,917	18,514
64 or younger	0	0.0	0	0.0	0		0	0.0	0	0.0	0	0	0
65-74	6	1.4	65	0.8	15		3	0.7	36	0.4	75	428	4,414
75-84	5	0.6	40	0.6	21		4	0.5	38	0.3	27	797	7,630
85 and older	2	0.3	21	0.3	3		0	0.0	0	0.0	0	692	6,470
<b>Unknown</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>		<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.10D includes the beneficiaries represented by Cell H of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 5,051 beneficiaries who were in nursing facilities for part of their enrollment and their 48,081 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 2007. 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 2007 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 D.11  
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
AMONG DUALS, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
COLORADO, 2007

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 Dual Rx \$	Total Number of Beneficiaries
<b>All</b>	<b>12,168</b>	<b>18.6</b>	<b>1.2</b>	<b>79,313</b>	<b>\$21</b>	<b>\$1,374,109</b>	<b>\$17</b>	<b>10.9</b>	<b>65,269</b>
<b>Age</b>									
5 and younger	1	14.3	2.4	17	287	2,006	118	91.3	7
6-14	1	10.0	1.0	10	40	403	40	3.0	10
15-20	16	15.2	1.4	152	28	2,889	19	1.0	105
21-44	1,849	18.3	1.3	13,017	26	264,147	20	5.2	10,098
45-64	3,489	21.6	1.7	27,311	32	513,528	19	12.9	16,134
65-74	2,467	16.9	1.1	15,371	18	255,619	17	11.7	14,579
75-84	2,302	17.0	1.0	13,363	15	196,865	15	28.2	13,540
85 and older	2,043	18.9	0.9	10,072	13	138,652	14	35.5	10,796
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Basis of Eligibility<sup>c</sup></b>									
Aged	6,778	17.7	1.0	38,581	15	587,483	15	18.6	38,219
Disabled	5,315	20.0	1.5	40,224	29	776,882	19	8.6	26,575
Adults	70	15.3	0.9	432	19	8,564	20	2.6	457
Children	5	38.5	5.8	76	91	1,180	16	1.0	13
Unknown	0	0.0	0.0	0	0	0	0	0.0	5
<b>Gender</b>									
Female	8,171	19.9	1.3	52,059	21	877,269	17	11.5	41,054
Male	3,997	16.5	1.1	27,254	21	496,840	18	9.9	24,215
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
<b>Race</b>									
White	5,415	21.1	1.5	38,504	26	662,776	17	14.8	25,642
African American	208	13.7	0.8	1,252	11	17,034	14	4.2	1,518
Other/unknown	6,545	17.2	1.0	39,557	18	694,299	18	9.0	38,109
<b>Use of Nursing Facilities<sup>d</sup></b>									
Entire year	2,220	27.4	1.8	14,178	32	257,634	18	35.4	8,096
Part year	1,625	32.2	1.5	7,751	24	122,861	16	19.7	5,051
None	8,323	16.0	1.1	57,384	19	993,614	17	8.8	52,122
<b>Maintenance Assistance Status</b>									
Cash	8,307	17.4	1.1	54,550	19	928,865	17	9.0	47,851
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	59	9.9	0.3	189	5	2,797	15	4.8	595
Other/unknown	3,802	22.6	1.5	24,574	26	442,447	18	19.3	16,823

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.11 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2007.

b. The statute establishing the Medicare Part D prescription program that started in 2007 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 2007 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 D.12  
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
AMONG DUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
COLORADO, 2007

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazapine \$ per Benefit Month	Number of Benefit Months
<b>All</b>	<b>0.1</b>	<b>\$2</b>	<b>\$17</b>	<b>\$0</b>	<b>\$2</b>	<b>677,074</b>
<b>Age</b>						
5 and younger	0.2	24	118	0	0	82
6-14	0.1	4	40	0	0	98
15-20	0.1	3	19	0	1	1,152
21-44	0.1	2	20	0	2	106,878
45-64	0.2	3	19	0	3	172,194
65-74	0.1	2	17	0	1	152,168
75-84	0.1	1	15	0	1	139,392
85 and older	0.1	1	14	0	1	105,110
Unknown	0.0	0	0	0	0	0
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.1	2	15	0	1	390,357
Disabled	0.1	3	19	0	2	283,258
Adults	0.1	3	20	0	2	3,289
Children	0.5	8	16	2	2	146
Unknown	0.0	0	0	0	0	24
<b>Gender</b>						
Female	0.1	2	17	0	2	428,238
Male	0.1	2	18	0	2	248,836
Unknown	0.0	0	0	0	0	0
<b>Race</b>						
White	0.1	2	17	0	2	274,718
African American	0.1	1	14	0	1	15,544
Other/unknown	0.1	2	18	0	2	386,812
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.2	3	18	0	3	82,136
Part year	0.2	3	16	0	2	48,081
None	0.1	2	17	0	2	546,857
<b>Maintenance Assistance Status</b>						
Cash	0.1	2	17	0	2	505,529
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	0	15	0	0	5,828
Other/unknown	0.1	3	18	0	2	165,717

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.12 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2007.

b. The statute establishing the Medicare Part D prescription program that started in 2007 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 2007 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 D.13  
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG DUALS<sup>a,b,c</sup>  
COLORADO, 2007

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$	Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
<b>All</b>	<b>13,083</b>	<b>\$105</b>	<b>\$1,374,109</b>	<b>100.0</b>	<b>79,313</b>	<b>\$17</b>	<b>100.0</b>
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	4	20	80	0.0	11	7	0.0
Cough and cold medications	71	119	8,450	0.6	185	46	0.2
Vitamins and minerals	920	58	53,764	3.9	3,865	14	4.9
Non-prescription drugs	1,244	29	35,557	2.6	6,498	5	8.2
Barbiturates	284	64	18,151	1.3	2,454	7	3.1
Benzodiazepines	10,315	117	1,205,152	87.7	65,334	18	82.4
Other Part D Excl Rx Drugs	245	216	52,955	3.9	966	55	1.2

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table D.13 includes the beneficiaries represented by Cell G of Table 1. Beneficiaries include all dual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 2007. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2007. 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 D11.

b. Includes OTC drugs as well as prescription drugs.

c. The statute establishing the Medicare Part D prescription program that started in 2007 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 2007 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.

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES<sup>a, b</sup>  
 COLORADO, 2007

Total Number of Dual Eligible Beneficiaries: 65,269  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries: \$12,631,971  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary: \$193

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	50,742	77.7	\$0	0.0
1-500	11,198	17.2	1,156,408	9.2
501-1,000	1,044	1.6	742,583	5.9
1,001-1,500	474	0.7	582,263	4.6
1,501-2,000	309	0.5	536,364	4.2
2,001-2,500	226	0.3	504,463	4.0
2,501-3,000	168	0.3	461,352	3.7
3,001-3,500	167	0.3	540,868	4.3
3,501-4,000	126	0.2	474,500	3.8
4,001-4,500	105	0.2	445,015	3.5
4,501-5,000	74	0.1	350,562	2.8
5,001-5,500	67	0.1	351,643	2.8
5,501-6,000	60	0.1	344,830	2.7
6,001-6,500	53	0.1	329,448	2.6
6,501-7,000	45	0.1	302,355	2.4
7,001-7,500	42	0.1	305,061	2.4
7,501-8,000	43	0.1	333,994	2.6
8,001-8,500	27	0.0	223,694	1.8
8,501-9,000	30	0.0	263,137	2.1
9,001-9,500	32	0.0	295,383	2.3
9,501-10,000	21	0.0	204,611	1.6
10,001+	216	0.3	3,883,437	30.7

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2007.

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

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1A  
 MEDICAID PHARMACY REIMBURSEMENT FOR DISABLED DUAL ELIGIBLE BENEFICIARIES UNDER AGE 65<sup>a, b, c</sup>  
 COLORADO, 2007

Total Number of Disabled Dual Eligible Beneficiaries, Age < 65: 25,903  
 Total Pharmacy Reimbursement for Disabled Dual Eligible Beneficiaries, Age < 65: \$8,911,655  
 Mean Pharmacy Reimbursement per Disabled Dual Eligible Beneficiary, Age < 65: \$344

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Disabled Dual Beneficiaries,		Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
		Age < 65	Pharmacy Reimbursement		
\$0	18,968	73.2	\$0	0.0	
1-500	4,782	18.5	570,693	6.4	
501-1,000	605	2.3	431,746	4.8	
1,001-1,500	289	1.1	353,989	4.0	
1,501-2,000	193	0.7	333,805	3.7	
2,001-2,500	143	0.6	319,240	3.6	
2,501-3,000	104	0.4	285,146	3.2	
3,001-3,500	108	0.4	349,316	3.9	
3,501-4,000	78	0.3	293,555	3.3	
4,001-4,500	75	0.3	317,761	3.6	
4,501-5,000	55	0.2	260,183	2.9	
5,001-5,500	51	0.2	267,902	3.0	
5,501-6,000	44	0.2	252,505	2.8	
6,001-6,500	44	0.2	273,417	3.1	
6,501-7,000	38	0.1	254,861	2.9	
7,001-7,500	34	0.1	246,305	2.8	
7,501-8,000	33	0.1	256,153	2.9	
8,001-8,500	18	0.1	149,324	1.7	
8,501-9,000	24	0.1	210,133	2.4	
9,001-9,500	23	0.1	211,826	2.4	
9,501-10,000	16	0.1	155,938	1.7	
10,001+	178	0.7	3,117,857	35.0	

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

- a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2007.
- b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.
- c. This table is limited to dual eligible beneficiaries who were under age 65 and also indicated as disabled in the MAX files. Therefore, dual eligible beneficiaries under age 65 in "adults" or "children" basis-of-eligibility categories in Table D.2 are excluded because they were not classified as disabled in the MAX files. Disabled dual eligible beneficiaries age 65 and older are included in Supplemental Tables 1B through 1E, depending on their age.

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1B  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 AND OLDER<sup>a, b</sup>  
 COLORADO, 2007

Total Number of Dual Eligible Beneficiaries, Age 65+: 38,915  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65+: \$3,271,083  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65+: \$84

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	31,482	80.9	\$0	0.0
1-500	6,348	16.3	573,965	17.5
501-1,000	418	1.1	295,441	9.0
1,001-1,500	177	0.5	218,517	6.7
1,501-2,000	106	0.3	184,864	5.7
2,001-2,500	79	0.2	176,323	5.4
2,501-3,000	56	0.1	154,539	4.7
3,001-3,500	57	0.1	184,694	5.6
3,501-4,000	43	0.1	162,216	5.0
4,001-4,500	26	0.1	110,068	3.4
4,501-5,000	14	0.0	66,256	2.0
5,001-5,500	15	0.0	78,408	2.4
5,501-6,000	13	0.0	75,104	2.3
6,001-6,500	8	0.0	49,932	1.5
6,501-7,000	7	0.0	47,494	1.5
7,001-7,500	5	0.0	36,603	1.1
7,501-8,000	10	0.0	77,841	2.4
8,001-8,500	6	0.0	49,744	1.5
8,501-9,000	5	0.0	44,155	1.3
9,001-9,500	9	0.0	83,557	2.6
9,501-10,000	4	0.0	38,776	1.2
10,001+	27	0.1	562,586	17.2

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

- a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2007.
- b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1C  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 65 TO 74<sup>a, b</sup>  
 COLORADO, 2007

Total Number of Dual Eligible Beneficiaries, Age 65-74: 14,579  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 65-74: \$2,183,146  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 65-74: \$149

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 65-74	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	11,567	79.3	\$0	0.0
1-500	2,274	15.6	250,292	11.5
501-1,000	268	1.8	190,175	8.7
1,001-1,500	128	0.9	159,302	7.3
1,501-2,000	69	0.5	119,588	5.5
2,001-2,500	57	0.4	127,127	5.8
2,501-3,000	41	0.3	112,342	5.1
3,001-3,500	44	0.3	141,846	6.5
3,501-4,000	20	0.1	75,156	3.4
4,001-4,500	21	0.1	89,019	4.1
4,501-5,000	9	0.1	42,672	2.0
5,001-5,500	9	0.1	46,809	2.1
5,501-6,000	8	0.1	46,188	2.1
6,001-6,500	7	0.0	43,908	2.0
6,501-7,000	7	0.0	47,494	2.2
7,001-7,500	3	0.0	22,047	1.0
7,501-8,000	8	0.1	62,198	2.8
8,001-8,500	3	0.0	24,724	1.1
8,501-9,000	4	0.0	35,189	1.6
9,001-9,500	8	0.1	74,318	3.4
9,501-10,000	4	0.0	38,776	1.8
10,001+	20	0.1	433,976	19.9

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

- a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2007.
- b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

Dual Medicaid Beneficiaries



SUPPLEMENTAL TABLE 1D  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 75 TO 84<sup>a, b</sup>  
 COLORADO, 2007

Total Number of Dual Eligible Beneficiaries, Age 75-84: 13,540  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 75-84: \$696,905  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 75-84: \$51

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 75-84	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	11,166	82.5	\$0	0.0
1-500	2,127	15.7	185,742	26.7
501-1,000	109	0.8	75,653	10.9
1,001-1,500	35	0.3	42,090	6.0
1,501-2,000	27	0.2	47,902	6.9
2,001-2,500	14	0.1	31,769	4.6
2,501-3,000	9	0.1	25,497	3.7
3,001-3,500	10	0.1	33,288	4.8
3,501-4,000	18	0.1	68,136	9.8
4,001-4,500	4	0.0	16,745	2.4
4,501-5,000	2	0.0	9,186	1.3
5,001-5,500	4	0.0	21,348	3.1
5,501-6,000	4	0.0	22,985	3.3
6,001-6,500	0	0.0	0	0.0
6,501-7,000	0	0.0	0	0.0
7,001-7,500	2	0.0	14,556	2.1
7,501-8,000	1	0.0	7,990	1.1
8,001-8,500	2	0.0	16,598	2.4
8,501-9,000	0	0.0	0	0.0
9,001-9,500	1	0.0	9,239	1.3
9,501-10,000	0	0.0	0	0.0
10,001+	5	0.0	68,181	9.8

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

- a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2007.
- b. Medicaid reimbursement amounts in this table do not reflect federally required rebates from drug manufacturers to states.

Dual Medicaid Beneficiaries

SUPPLEMENTAL TABLE 1E  
 MEDICAID PHARMACY REIMBURSEMENT FOR DUAL ELIGIBLE BENEFICIARIES AGE 85 AND OLDER<sup>a, b</sup>  
 COLORADO, 2007

Total Number of Dual Eligible Beneficiaries, Age 85+: 10,796  
 Total Pharmacy Reimbursement for Dual Eligible Beneficiaries, Age 85+: \$391,032  
 Mean Pharmacy Reimbursement per Dual Eligible Beneficiary, Age 85+: \$36

Annual Pharmacy Reimbursement per Beneficiary	Number of Beneficiaries	Percent of Dual Beneficiaries, Age 85+	Pharmacy Reimbursement	Percent of Total Pharmacy Reimbursement
\$0	8,749	81.0	\$0	0.0
1-500	1,947	18.0	137,931	35.3
501-1,000	41	0.4	29,613	7.6
1,001-1,500	14	0.1	17,125	4.4
1,501-2,000	10	0.1	17,374	4.4
2,001-2,500	8	0.1	17,427	4.5
2,501-3,000	6	0.1	16,700	4.3
3,001-3,500	3	0.0	9,560	2.4
3,501-4,000	5	0.0	18,924	4.8
4,001-4,500	1	0.0	4,304	1.1
4,501-5,000	3	0.0	14,398	3.7
5,001-5,500	2	0.0	10,251	2.6
5,501-6,000	1	0.0	5,931	1.5
6,001-6,500	1	0.0	6,024	1.5
6,501-7,000	0	0.0	0	0.0
7,001-7,500	0	0.0	0	0.0
7,501-8,000	1	0.0	7,653	2.0
8,001-8,500	1	0.0	8,422	2.2
8,501-9,000	1	0.0	8,966	2.3
9,001-9,500	0	0.0	0	0.0
9,501-10,000	0	0.0	0	0.0
10,001+	2	0.0	60,429	15.5

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. This table is based on prescription drug claims for beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefit coverage during some or all months of Medicaid enrollment in 2007.

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

Dual Medicaid Beneficiaries

APPENDIX TABLE A.3  
 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
 DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown	All	Aged	Blind/ Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>68,733</b>	<b>40,260</b>	<b>27,988</b>	<b>467</b>	<b>13</b>	<b>5</b>	<b>724,751</b>	<b>418,698</b>	<b>302,460</b>	<b>3,423</b>	<b>146</b>	<b>24</b>
<b>Age</b>												
5 and younger	7	0	7	0	0	0	82	0	82	0	0	0
6-14	10	0	10	0	0	0	98	0	98	0	0	0
15-20	108	0	96	0	12	0	1,198	0	1,054	0	144	0
21-44	10,595	0	10,301	293	1	0	113,665	0	111,436	2,227	2	0
45-64	17,045	0	16,890	152	0	3	184,520	0	183,442	1,062	0	16
65-74	15,629	15,075	534	18	0	2	167,063	162,230	4,712	113	0	8
75-84	14,265	14,136	125	4	0	0	149,390	148,013	1,356	21	0	0
85 and older	11,074	11,049	25	0	0	0	108,735	108,455	280	0	0	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Gender</b>												
Female	43,100	28,374	14,412	304	5	5	456,306	297,595	156,354	2,283	50	24
Male	25,633	11,886	13,576	163	8	0	268,445	121,103	146,106	1,140	96	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	26,503	15,064	11,327	104	7	1	286,204	159,082	126,254	778	84	6
African American	1,960	961	982	16	1	0	21,077	10,509	10,433	123	12	0
Other/unknown	40,270	24,235	15,679	347	5	4	417,470	249,107	165,773	2,522	50	18
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	8,202	7,321	881	0	0	0	83,630	73,767	9,863	0	0	0
Part year	5,128	4,436	691	1	0	0	49,410	42,033	7,365	12	0	0
None	55,403	28,503	26,416	466	13	5	591,711	302,898	285,232	3,411	146	24
<b>Maintenance Assistance Status</b>												
Cash	51,087	28,404	22,266	416	1	0	549,187	307,088	239,020	3,077	2	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	598	375	194	23	1	5	6,196	3,967	2,049	144	12	24
Other/unknown	17,048	11,481	5,528	28	11	0	169,368	107,643	61,391	202	132	0
<b>Dual Status<sup>d</sup></b>												
Full dual, all year	66,066	38,981	26,629	438	13	5	696,427	405,351	287,801	3,105	146	24
Full dual, part year	2,667	1,279	1,359	29	0	0	28,324	13,347	14,659	318	0	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	63,574	37,134	25,980	442	13	5	667,330	383,944	279,984	3,232	146	24
FFS part year, with Rx claims	351	166	181	4	0	0	3,869	1,820	2,014	35	0	0
FFS part year, no Rx claims	1,344	919	414	11	0	0	14,657	9,966	4,597	94	0	0
MC all year, with Rx claims	72	33	38	1	0	0	839	385	445	9	0	0
MC all year, no Rx claims	3,392	2,008	1,375	9	0	0	38,056	22,583	15,420	53	0	0
	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

a. Table A.3 includes the beneficiaries represented by Cell F 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.

d. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 2007. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of

their enrollment. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.  
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.4  
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS<sup>a</sup>  
 DUAL ELIGIBLE BENEFICIARIES, COLORADO, 2007

Beneficiary Characteristics	Beneficiaries and					
	Benefit Months in Cell F of Table 1		Included in Cell G of Table 1		Excluded from Cell G of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
<b>All</b>	<b>68,733</b>	<b>724,751</b>	<b>65,269</b>	<b>677,074</b>	<b>0</b>	<b>47,677</b>
Fee-for-service (FFS) all year	63,574	667,330	63,574	667,330	0	0
FFS part year, with Rx claims	351	3,869	351	2,099	0	1,770
FFS part year, with no Rx claims	1,344	14,657	1,344	7,645	0	7,012
Managed care (MC) all year, with Rx claims	72	839	0	0	0	839
MC all year, with no Rx claims	3,392	38,056	0	0	0	38,056

Source: Data for this table are from the MAX 2007 file for Colorado, released by CMS in 5/2010. This table was produced on 10/06/2010.

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 and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

Dual Medicaid Beneficiaries