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STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2007
ALASKA

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 ND.2
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
 NONDUAL BENEFICIARIES, ALASKA, 2007

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
All	112,318	764	8,808	26,353	76,234	159	995,206	7,952	93,231	195,109	697,799	1,115
Age												
5 and younger	30,272	1	517	0	29,754	0	264,092	3	5,091	0	258,998	0
6-14	33,811	0	968	2	32,841	0	327,242	0	10,738	12	316,492	0
15-20	19,234	0	844	5,002	13,384	4	166,764	0	9,024	36,539	121,179	22
21-44	21,201	1	2,439	18,427	255	79	161,337	11	26,060	133,737	1,130	399
45-64	6,903	21	3,890	2,916	0	76	66,473	210	40,786	24,783	0	694
65-74	511	364	142	5	0	0	5,251	3,765	1,454	32	0	0
75-84	307	299	8	0	0	0	3,260	3,182	78	0	0	0
85 and older	78	78	0	0	0	0	781	781	0	0	0	0
Unknown	1	0	0	1	0	0	6	0	0	6	0	0
Gender												
Female	61,879	497	4,371	19,692	37,160	159	538,220	5,243	46,948	143,813	341,101	1,115
Male	50,437	267	4,437	6,661	39,072	0	456,973	2,709	46,283	51,296	356,685	0
Unknown	2	0	0	0	2	0	13	0	0	0	13	0
Race												
White	43,650	158	4,517	10,956	27,893	126	380,538	1,535	47,709	78,472	251,941	881
African American	6,341	14	553	1,270	4,498	6	57,190	131	5,753	9,496	41,770	40
Other/unknown	62,327	592	3,738	14,127	43,843	27	557,478	6,286	39,769	107,141	404,088	194
Use of Nursing Facilities^c												
Entire year	69	15	54	0	0	0	730	164	566	0	0	0
Part year	124	18	98	6	0	2	1,263	204	987	57	0	15
None	112,125	731	8,656	26,347	76,234	157	993,213	7,584	91,678	195,052	697,799	1,100
Maintenance Assistance Status												
Cash	40,505	736	7,887	14,808	17,074	0	373,147	7,698	83,491	121,071	160,887	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	58,560	0	0	9,513	48,888	159	496,790	0	0	57,293	438,382	1,115
Other/unknown	13,253	28	921	2,032	10,272	0	125,269	254	9,740	16,745	98,530	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	112,318	764	8,808	26,353	76,234	159	995,206	7,952	93,231	195,109	697,799	1,115
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.
 a. Table ND.2 includes the beneficiaries represented by Cell K of Table 1. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 b. Medicaid basis of eligibility is classified as: aged, disabled, adults, and children. The disabled group includes beneficiaries of any age who were determined to be eligible because of disability or blindness. The children's group includes children receiving foster care and adoptive services. The total includes some beneficiaries with unknown basis of eligibility and some whose age categories are not consistent with basis of eligibility.
 c. Please refer to footnote f of Table 1 for methodology used to determine nursing facility residence.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; Rx = pharmacy benefit.

TABLE ND.3
ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, ALASKA, 2007

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ ^c	Rx \$ as a Percentage of All Medicaid FFS \$ ^d	Number of Beneficiaries
All	53.5	7.8	\$632	\$81	\$6,215	10.2	112,318
Age							
5 and younger	51.6	2.4	214	91	4,473	4.8	30,272
6-14	43.0	3.0	272	90	3,551	7.7	33,811
15-20	50.7	4.8	503	104	7,407	6.8	19,234
21-44	66.4	12.0	935	78	7,783	12.0	21,201
45-64	78.8	45.2	3,418	76	16,929	20.2	6,903
65-74	76.5	43.8	2,576	59	18,881	13.6	511
75-84	68.1	46.5	2,321	50	20,548	11.3	307
85 and older	53.8	27.9	1,565	56	29,445	5.3	78
Unknown	0.0	0.0	0	0	0	0.0	1
Basis of Eligibility^e							
Aged	69.5	40.0	2,276	57	20,404	11.2	764
Disabled	80.6	48.6	4,431	91	27,666	16.0	8,808
Adults	63.1	7.5	497	66	5,158	9.6	26,353
Children	46.8	2.8	220	79	3,934	5.6	76,234
Unknown	72.3	18.5	1,835	99	18,731	9.8	159
Gender							
Female	57.0	8.8	648	73	6,246	10.4	61,879
Male	49.2	6.4	612	95	6,177	9.9	50,437
Unknown	0.0	0.0	0	0	252	0.0	2
Race							
White	56.5	10.2	870	85	6,592	13.2	43,650
African American	54.4	8.7	601	69	5,041	11.9	6,341
Other/unknown	51.2	5.9	468	79	6,071	7.7	62,327
Use of Nursing Facilities^f							
Entire year	89.9	87.4	8,080	92	140,395	5.8	69
Part year	92.7	83.7	7,157	86	104,813	6.8	124
None	53.4	7.6	620	81	6,024	10.3	112,125
Maintenance Assistance Status							
Cash	61.9	15.6	1,269	82	8,685	14.6	40,505
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	47.1	2.6	195	74	4,061	4.8	58,560
Other/unknown	56.1	6.6	612	93	8,185	7.5	13,253

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.3 includes beneficiaries represented by Cell K of Table 1.

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

c. In 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 ND.4
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, ALASKA, 2007

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Number of Rx, Percentage with:								Mean \$, All Medicaid FFS \$ ^d	Number	
			Rx \$ as a Percentage of All Medicaid FFS \$ ^c	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Beneficiaries		Benefit Months	
All	0.9	\$71	10.2	46.5	42.4	4.2	4.1	1.7	1.0	\$701	112,318	995,206	
Age													
5 and younger	0.3	25	4.8	48.4	49.1	1.8	0.7	0.0	0.0	513	30,272	264,092	
6-14	0.3	28	7.7	57.0	38.6	2.2	1.6	0.3	0.2	367	33,811	327,242	
15-20	0.6	58	6.8	49.3	42.8	3.8	2.8	0.8	0.4	854	19,234	166,764	
21-44	1.6	123	12.0	33.6	44.4	8.7	8.7	3.1	1.4	1,023	21,201	161,337	
45-64	4.7	355	20.2	21.2	27.8	10.1	18.7	13.3	8.9	1,758	6,903	66,473	
65-74	4.3	251	13.6	23.5	23.5	10.8	21.1	15.1	6.1	1,837	511	5,251	
75-84	4.4	219	11.3	31.9	18.2	10.1	20.5	8.5	10.7	1,935	307	3,260	
85 and older	2.8	156	5.3	46.2	14.1	14.1	12.8	7.7	5.1	2,941	78	781	
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	6	
Basis of Eligibility^e													
Aged	3.8	219	11.2	30.5	20.5	10.5	20.0	10.9	7.6	1,960	764	7,952	
Disabled	4.6	419	16.0	19.4	28.4	10.9	18.9	12.5	9.9	2,614	8,808	93,231	
Adults	1.0	67	9.6	36.9	45.7	7.7	7.1	2.2	0.4	697	26,353	195,109	
Children	0.3	24	5.6	53.2	43.2	2.1	1.2	0.2	0.1	430	76,234	697,799	
Unknown	2.6	262	9.8	27.7	26.4	15.7	22.0	6.3	1.9	2,671	159	1,115	
Gender													
Female	1.0	75	10.4	43.0	44.2	4.7	4.7	2.2	1.1	718	61,879	538,220	
Male	0.7	68	9.9	50.8	40.3	3.5	3.3	1.2	0.8	682	50,437	456,973	
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	39	2	13	
Race													
White	1.2	100	13.2	43.5	41.9	5.1	5.5	2.6	1.4	756	43,650	380,538	
African American	1.0	67	11.9	45.6	43.5	4.3	3.9	1.5	1.2	559	6,341	57,190	
Other/unknown	0.7	52	7.7	48.8	42.7	3.5	3.2	1.2	0.7	679	62,327	557,478	
Use of Nursing Facilities^f													
Entire year	8.3	764	5.8	10.1	10.1	5.8	24.6	27.5	21.7	13,270	69	730	
Part year	8.2	703	6.8	7.3	5.6	9.7	29.0	21.0	27.4	10,290	124	1,263	
None	0.9	70	10.3	46.6	42.5	4.2	4.1	1.7	1.0	680	112,125	993,213	
Maintenance Assistance Status													
Cash	1.7	138	14.6	38.1	40.9	6.4	8.1	4.0	2.5	943	40,505	373,147	
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0	
Poverty related	0.3	23	4.8	52.9	43.0	2.4	1.3	0.3	0.1	479	58,560	496,790	
Other/unknown	0.7	65	7.5	43.9	44.7	5.1	4.5	1.2	0.5	866	13,253	125,269	

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

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

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

c. In 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 ND.5
AVERAGE MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC^{a, b, c}
NONDUAL BENEFICIARIES, ALASKA, 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
All	0.9	\$71	\$81	0.3	\$50	\$164	0.1	\$5	\$86	0.5	\$16	\$32
Age												
5 and younger	0.3	25	91	0.1	18	267	0.0	2	63	0.2	5	27
6-14	0.3	28	90	0.1	22	151	0.0	2	83	0.1	5	31
15-20	0.6	58	104	0.2	45	212	0.0	4	84	0.3	9	31
21-44	1.6	123	78	0.5	83	169	0.1	8	97	1.0	31	31
45-64	4.7	355	76	1.6	229	140	0.3	31	93	2.7	94	35
65-74	4.3	251	59	1.5	159	109	0.3	25	71	2.4	65	27
75-84	4.4	219	50	1.4	134	97	0.4	23	62	2.6	61	24
85 and older	2.8	156	56	1.0	100	96	0.2	14	71	1.5	42	27
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	3.8	219	57	1.2	135	108	0.3	26	84	2.3	58	25
Disabled	4.6	419	91	1.8	302	172	0.3	29	90	2.5	86	34
Adults	1.0	67	66	0.3	40	157	0.1	5	100	0.7	21	30
Children	0.3	24	79	0.1	17	157	0.0	2	73	0.2	5	29
Unknown	2.6	262	99	1.0	187	188	0.2	22	109	1.4	53	37
Gender												
Female	1.0	75	73	0.3	49	146	0.1	6	87	0.6	19	31
Male	0.7	68	95	0.3	50	191	0.1	5	86	0.4	13	33
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	1.2	100	85	0.4	70	158	0.1	8	102	0.7	22	33
African American	1.0	67	69	0.4	46	128	0.1	5	86	0.5	15	28
Other/unknown	0.7	52	79	0.2	36	180	0.1	4	72	0.4	12	31
Use of Nursing Facilities^e												
Entire year	8.3	764	92	2.0	499	249	0.2	18	79	6.0	247	41
Part year	8.2	703	86	2.4	418	174	0.5	64	126	5.3	217	41
None	0.9	70	81	0.3	49	163	0.1	5	86	0.5	16	31
Maintenance Assistance Status												
Cash	1.7	138	82	0.6	95	164	0.1	10	91	1.0	32	33
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.3	23	74	0.1	16	157	0.0	2	72	0.2	5	28
Other/unknown	0.7	65	93	0.3	49	175	0.0	4	86	0.4	12	32

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

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

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

c. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Alaska, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.

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

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

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

TABLE ND.6
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d}
 NONDUAL BENEFICIARIES, ALASKA, 2007

Therapeutic Category	Number of Rx per Benefit Month												Total Number of Rx		Total Rx \$		Users ^e		Number of Benefit Months
	Among Users			\$ per Benefit Month Among Users						\$ per Rx			Number of Users	As a Percentage of All Benes					
	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	Patented Brand-Name	Off-Patent Brand-Name Generic							
Anti-infective Agents	0.2	0.0	0.0	0.2	\$16	\$7	\$2	\$6	\$67	\$274	\$86	\$35	85,745	\$5,784,830	36,290	32.3	368,719		
Biologicals	0.4	0.4	0.0	0.0	603	603	0	0	1451	1,451	0	0	2,195	3,185,851	544	0.5	5,286		
Antineoplastic Agents	0.5	0.1	0.0	0.4	155	135	1	19	286	931	226	49	2,673	765,124	475	0.4	4,923		
Endocrine/Metabolic Drugs	0.6	0.2	0.1	0.3	35	23	3	9	58	109	42	28	69,277	4,026,107	11,684	10.4	116,665		
Cardiovascular Agents	1.5	0.3	0.2	1.0	61	27	12	22	41	85	64	23	109,917	4,490,832	7,004	6.2	73,655		
Respiratory Agents	0.4	0.2	0.0	0.1	30	24	3	4	74	100	68	27	78,803	5,814,686	18,552	16.5	192,143		
Gastrointestinal Agents	0.6	0.3	0.0	0.3	62	41	5	16	101	138	132	58	52,774	5,332,955	8,367	7.4	86,052		
Genitourinary Agents	0.3	0.2	0.0	0.1	19	13	1	5	62	83	88	36	10,457	643,158	3,425	3.0	34,111		
CNS Drugs	1.4	0.7	0.0	0.7	137	111	4	22	100	163	105	33	172,387	17,178,353	12,245	10.9	125,079		
Stimulants/Anti-obesity/Anorexia	0.7	0.5	0.0	0.1	83	76	2	5	122	140	101	43	22,270	2,706,282	3,042	2.7	32,776		
Miscellaneous Psychological/Neurological Agents	0.3	0.3	0.0	0.0	77	76	0	1	255	259	155	106	3,418	872,928	1,066	0.9	11,360		
Analgesics and Anesthetics	0.5	0.0	0.0	0.4	28	11	3	13	58	295	394	31	101,519	5,888,447	21,711	19.3	213,101		
Neuromuscular Agents	1.0	0.4	0.1	0.5	87	55	11	21	86	140	108	40	78,219	6,697,872	7,378	6.6	77,119		
Nutritional Products	0.4	0.0	0.0	0.4	7	1	0	6	18	42	20	16	18,380	327,466	4,594	4.1	44,170		
Hematological Agents	0.8	0.3	0.1	0.4	286	277	1	7	369	1,005	28	16	10,577	3,899,905	1,320	1.2	13,656		
Topical Products	0.2	0.0	0.0	0.1	11	6	1	4	55	130	73	27	47,579	2,605,296	22,544	20.1	232,975		
Miscellaneous Products	0.2	0.1	0.0	0.0	22	19	1	3	136	139	175	111	3,533	479,365	2,053	1.8	22,020		
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	49	0	0	0	148	0	0	0	1,606	237,636	465	0.4	4,845		
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	871,329	70,937,093	n.a.	n.a.	n.a.		

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

- a. Table ND.6 includes the beneficiaries represented by Cell K of Table 1. A beneficiary who used drugs from two or more categories was counted as a user for each category. Therefore, the sum of users across categories may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
 - b. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
 - c. For information about these therapeutic categories, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 - d. Brand-name drugs, sometimes called "innovator single-source drugs," are drugs whose patents have not yet expired. Off-patent brand-name drugs, sometimes called "innovator multiple-source drugs," are brand-name drugs whose patents have expired. Generic drugs, sometimes called "non-innovator multiple-source drugs," are off-patent drugs manufactured and sold by companies other than the original patent holder. In Alaska, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.
 - e. For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
- f. 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 ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, ALASKA, 2007

Top 10 Drug Groups	Users			Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$11,419,431	5,293	4.7	57,592	1.1	\$181	\$198
ANTICONVULSANT	5,829,077	4,914	4.4	53,074	1.0	109	110
ANTIDEPRESSANTS	4,124,912	9,718	8.7	101,027	0.8	54	41
ULCER DRUGS	4,027,214	7,295	6.5	75,890	0.5	98	53
ANTIASTHMATIC	3,909,193	17,121	15.2	179,551	0.3	85	22
ANALGESICS - Narcotic	3,876,952	23,695	21.1	236,447	0.3	54	16
PASSIVE IMMUNIZING AGENTS	3,156,468	370	0.3	3,422	0.6	1,602	922
MISC. HEMATOLOGICAL	2,875,837	287	0.3	3,161	0.9	974	910
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	2,706,282	3,481	3.1	37,768	0.6	122	72
ANTIVIRAL	1,960,853	1,787	1.6	18,316	0.4	292	107
Total	43,886,219	73,961	n.a.	766,248	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.
 a. Table ND.7 includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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.

Nondual Medicaid Beneficiaries

TABLE ND.7A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS COMBINED
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, ALASKA, 2007

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	384,623	\$43,886,219	5,293	4.7	57,592	1.1	\$198	4,914	4.4	53,074	1.0	\$110
Female												
All Females	230,811	22,844,436	2,776	4.5	29,887	1.0	174	3,029	4.9	32,428	1.0	107
Female, Disabled												
All Ages	121,078	12,670,172	1,325	30.3	15,059	1.4	242	1,453	33.2	16,604	1.3	137
5 and younger	811	330,824	1	0.4	12	0.2	23	22	9.6	223	0.7	110
6-14	2,520	379,094	74	22.8	860	0.7	137	85	26.2	959	0.9	176
15-20	3,787	479,827	82	26.8	954	0.9	175	91	29.7	1,063	1.1	182
21-44	35,690	3,973,466	500	39.7	5,657	1.2	249	454	36.0	5,194	1.5	165
45-64	75,755	7,285,157	643	29.9	7,316	1.6	257	783	36.5	8,978	1.2	114
65-74	2,465	215,895	24	24.7	248	2.2	289	18	18.6	187	1.1	60
75-84	50	5,909	1	12.5	12	0.1	46	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	109,733	10,174,264	1,451	2.5	14,828	0.6	105	1,576	2.7	15,824	0.6	75
5 and younger	5,634	1,520,084	13	0.1	145	0.5	75	35	0.2	352	0.4	68
6-14	14,898	1,452,073	258	1.6	2,851	0.8	147	157	1.0	1,710	0.8	110
15-20	20,239	1,639,842	452	4.6	4,835	0.8	110	276	2.8	2,874	0.9	109
21-44	51,982	4,015,305	590	4.0	5,701	0.4	77	884	5.9	8,598	0.5	60
45-64	12,281	1,191,801	115	6.6	1,027	0.5	115	190	11.0	1,888	0.5	59
65-74	2,490	197,789	14	5.9	165	1.2	141	24	10.1	284	0.8	101
75-84	1,834	128,321	7	3.6	80	0.8	82	8	4.1	94	1.4	74
85 and older	375	29,049	2	3.8	24	0.2	39	2	3.8	24	2.5	91
Male												
All Males	153,812	21,041,783	2,517	5.0	27,705	1.2	225	1,885	3.7	20,646	1.1	115
Male, Disabled												
All Ages	85,620	12,994,359	1,345	30.3	15,095	1.5	286	1,111	25.0	12,667	1.3	134
5 and younger	1,181	324,314	7	2.4	84	1.5	157	31	10.7	355	0.8	112
6-14	7,369	1,409,401	210	32.6	2,406	1.0	189	135	21.0	1,565	1.0	139
15-20	7,776	3,147,388	211	39.2	2,415	1.1	216	164	30.5	1,890	1.0	130
21-44	27,281	3,436,478	538	45.7	5,981	1.7	328	360	30.6	4,111	1.4	141
45-64	40,916	4,586,133	372	21.3	4,137	1.8	322	414	23.8	4,662	1.3	131
65-74	1,097	90,645	7	15.6	72	2.6	458	7	15.6	84	2.1	82
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	68,192	8,047,424	1,172	2.5	12,610	0.8	151	774	1.7	7,979	0.7	84
5 and younger	8,513	2,016,185	22	0.1	242	0.4	95	75	0.5	775	0.4	70
6-14	27,678	3,001,568	583	3.5	6,599	0.9	159	231	1.4	2,535	0.9	88
15-20	16,301	1,636,012	424	4.9	4,440	1.0	161	195	2.2	2,046	1.0	119
21-44	9,575	851,768	101	2.6	921	0.3	77	188	4.9	1,751	0.5	64
45-64	4,618	400,248	36	2.8	341	0.4	84	72	5.6	727	0.4	43
65-74	713	72,698	1	0.8	12	1.1	739	8	6.1	85	0.6	45
75-84	642	58,886	4	3.9	43	1.4	188	5	4.9	60	0.5	25
85 and older	152	10,059	1	4.0	12	4.0	264	0	0.0	0	0.0	0
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.
 a. Table ND.7A includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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.

Nondual Medicaid Beneficiaries

TABLE ND.7B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, ALASKA, 2007

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					ANTIASTHMATIC				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	9,718	8.7	101,027	0.8	\$41	7,295	6.5	75,890	0.5	\$53	17,121	15.2	179,551	0.3	\$22
Female															
All Females	7,050	11.4	72,508	0.7	42	4,949	8.0	51,077	0.5	53	9,543	15.4	99,478	0.3	23
Female, Disabled															
All Ages	2,430	55.6	27,465	1.1	58	1,749	40.0	19,768	0.8	81	2,052	46.9	23,256	0.4	39
5 and younger	1	0.4	12	0.4	6	46	20.2	490	0.3	22	79	34.6	905	0.3	23
6-14	47	14.5	555	0.6	26	44	13.6	496	0.4	49	81	25.0	922	0.3	18
15-20	82	26.8	937	0.9	39	45	14.7	529	0.5	49	61	19.9	688	0.2	17
21-44	736	58.4	8,267	1.1	57	405	32.1	4,620	0.8	73	503	39.9	5,783	0.3	31
45-64	1,532	71.4	17,330	1.1	61	1,157	53.9	13,022	0.9	88	1,265	58.9	14,202	0.5	45
65-74	31	32.0	352	1.2	62	48	49.5	563	1.0	103	62	63.9	744	0.5	46
75-84	1	12.5	12	0.9	81	4	50.0	48	0.4	40	1	12.5	12	0.1	9
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	4,620	8.0	45,043	0.5	32	3,200	5.6	31,309	0.3	36	7,491	13.0	76,222	0.2	18
5 and younger	5	0.0	55	0.5	63	244	1.7	2,360	0.2	17	1,973	13.6	20,562	0.2	11
6-14	310	1.9	3,407	0.6	23	253	1.6	2,710	0.3	29	1,826	11.3	19,495	0.2	16
15-20	857	8.8	8,768	0.6	28	495	5.1	4,979	0.3	25	1,104	11.4	11,324	0.2	19
21-44	2,857	19.2	26,892	0.4	32	1,611	10.8	15,093	0.3	34	1,997	13.4	18,932	0.2	20
45-64	516	29.8	5,066	0.6	42	426	24.6	4,223	0.5	51	459	26.5	4,419	0.3	32
65-74	44	18.6	497	0.8	36	107	45.1	1,192	0.7	69	71	30.0	812	0.3	31
75-84	25	12.7	286	0.9	38	54	27.4	632	1.1	87	57	28.9	630	0.5	52
85 and older	6	11.3	72	1.2	70	10	18.9	120	1.3	131	4	7.5	48	0.5	51
Male															
All Males	2,668	5.3	28,519	0.8	39	2,346	4.7	24,813	0.6	53	7,578	15.0	80,073	0.2	21
Male, Disabled															
All Ages	1,275	28.7	14,296	1.1	50	1,021	23.0	11,366	0.9	78	1,089	24.5	12,248	0.4	41
5 and younger	1	0.3	12	1.1	40	37	12.8	395	0.3	36	112	38.8	1,267	0.3	24
6-14	96	14.9	1,119	0.8	27	49	7.6	539	0.5	60	133	20.7	1,547	0.4	28
15-20	113	21.0	1,284	0.8	35	58	10.8	660	0.7	60	69	12.8	780	0.5	56
21-44	375	31.8	4,185	1.3	52	231	19.6	2,620	0.9	67	186	15.8	2,101	0.3	33
45-64	679	39.0	7,586	1.1	54	623	35.7	6,899	0.9	88	569	32.6	6,343	0.4	47
65-74	11	24.4	110	1.7	59	23	51.1	253	1.3	85	20	44.4	210	0.6	54
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	1,393	3.0	14,223	0.6	28	1,325	2.9	13,447	0.3	31	6,489	14.1	67,825	0.2	17
5 and younger	12	0.1	142	0.4	10	320	2.1	3,078	0.2	16	2,816	18.5	29,031	0.2	13
6-14	409	2.4	4,563	0.6	25	245	1.5	2,735	0.2	25	2,346	14.0	25,504	0.2	18
15-20	443	5.1	4,535	0.7	30	185	2.1	1,957	0.3	24	773	8.9	7,965	0.2	21
21-44	356	9.3	3,272	0.4	28	309	8.0	2,989	0.3	37	303	7.9	2,753	0.3	21
45-64	156	12.2	1,514	0.4	34	216	16.9	2,133	0.4	48	171	13.4	1,715	0.4	41
65-74	9	6.8	101	0.4	12	32	24.2	339	0.5	57	38	28.8	393	0.5	63
75-84	5	4.9	60	1.1	36	16	15.7	192	1.1	83	39	38.2	436	0.5	67
85 and older	3	12.0	36	0.7	23	2	8.0	24	1.5	84	3	12.0	28	0.6	105
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.
 a. Table ND.7B includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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.

Nondual Medicaid Beneficiaries

TABLE ND.7C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, ALASKA, 2007

Beneficiary Characteristics	ANALGESICS - Narcotic					PASSIVE IMMUNIZING AGENTS					MISC. HEMATOLOGICAL				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	23,695	21.1	236,447	0.3	\$16	370	0.3	3,422	0.6	\$922	287	0.3	3,161	0.9	\$910
Female															
All Females	16,432	26.6	162,678	0.3	16	176	0.3	1,610	0.6	916	143	0.2	1,583	1.1	89
Female, Disabled															
All Ages	3,323	76.0	37,827	0.5	39	35	0.8	329	0.5	829	105	2.4	1,178	1.1	91
5 and younger	20	8.8	222	0.1	1	35	15.4	329	0.5	829	0	0.0	0	0.0	0
6-14	39	12.0	457	0.1	2	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	95	31.0	1,098	0.1	4	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	1,017	80.7	11,581	0.4	36	0	0.0	0	0.0	0	11	0.9	119	1.2	82
45-64	2,104	98.0	23,909	0.5	44	0	0.0	0	0.0	0	86	4.0	963	1.1	91
65-74	45	46.4	524	0.4	11	0	0.0	0	0.0	0	8	8.2	96	1.6	106
75-84	3	37.5	36	0.2	2	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	13,109	22.8	124,851	0.3	9	141	0.2	1,281	0.6	938	38	0.1	405	1.0	85
5 and younger	421	2.9	4,530	0.1	1	132	0.9	1,197	0.6	1,003	1	0.0	8	0.1	12
6-14	922	5.7	10,024	0.1	2	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	2,224	22.9	21,735	0.2	2	2	0.0	19	0.1	12	0	0.0	0	0.0	0
21-44	8,253	55.3	75,344	0.3	11	7	0.0	65	0.1	24	7	0.0	82	0.5	60
45-64	1,091	62.9	10,959	0.4	21	0	0.0	0	0.0	0	15	0.9	145	0.5	72
65-74	115	48.5	1,317	0.3	8	0	0.0	0	0.0	0	8	3.4	86	1.6	108
75-84	71	36.0	798	0.2	11	0	0.0	0	0.0	0	5	2.5	60	2.1	124
85 and older	12	22.6	144	0.2	4	0	0.0	0	0.0	0	2	3.8	24	0.6	91
Male															
All Males	7,263	14.4	73,769	0.3	17	194	0.4	1,812	0.6	928	144	0.3	1,578	0.8	1,733
Male, Disabled															
All Ages	2,026	45.7	22,220	0.4	35	29	0.7	273	0.5	768	107	2.4	1,180	0.8	2,247
5 and younger	26	9.0	296	0.1	1	29	10.0	273	0.5	768	0	0.0	0	0.0	0
6-14	61	9.5	710	0.2	5	0	0.0	0	0.0	0	1	0.2	12	1.2	37,557
15-20	98	18.2	1,085	0.2	3	0	0.0	0	0.0	0	5	0.9	56	1.0	37,805
21-44	532	45.2	5,896	0.3	14	0	0.0	0	0.0	0	5	0.4	57	0.6	90
45-64	1,289	74.0	14,030	0.5	49	0	0.0	0	0.0	0	93	5.3	1,019	0.8	74
65-74	20	44.4	203	0.3	31	0	0.0	0	0.0	0	3	6.7	36	0.6	87
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	5,237	11.4	51,549	0.2	9	165	0.4	1,539	0.6	957	37	0.1	398	0.6	208
5 and younger	543	3.6	5,774	0.1	1	165	1.1	1,539	0.6	957	1	0.0	12	0.1	309
6-14	978	5.8	10,551	0.1	2	0	0.0	0	0.0	0	1	0.0	12	0.3	4,659
15-20	1,442	16.6	14,388	0.1	3	0	0.0	0	0.0	0	3	0.0	31	0.4	11
21-44	1,668	43.4	14,865	0.4	21	0	0.0	0	0.0	0	9	0.2	87	0.5	65
45-64	532	41.6	5,133	0.4	17	0	0.0	0	0.0	0	14	1.1	152	0.4	61
65-74	45	34.1	500	0.3	16	0	0.0	0	0.0	0	4	3.0	47	2.1	135
75-84	27	26.5	314	0.2	3	0	0.0	0	0.0	0	2	2.0	21	0.2	27
85 and older	2	8.0	24	0.1	2	0	0.0	0	0.0	0	3	12.0	36	0.6	30
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

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

Nondual Medicaid Beneficiaries

TABLE ND.7D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c}
 NONDUAL BENEFICIARIES, ALASKA, 2007

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS						ANTIVIRAL					
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
All	3,481	3.1	37,768	0.6	\$72	1,787	1.6	18,316	0.4	\$107	112,318	995,206
Female												
All Females	1,134	1.8	12,315	0.6	77	1,266	2.0	12,761	0.3	79	61,879	538,220
Female, Disabled												
All Ages	196	4.5	2,248	0.7	110	233	5.3	2,611	0.7	202	4,371	46,948
5 and younger	1	0.4	12	0.7	16	4	1.8	47	0.4	23	228	2,238
6-14	44	13.6	505	0.5	64	6	1.9	63	0.3	61	324	3,632
15-20	29	9.5	330	0.9	119	4	1.3	48	0.2	54	306	3,319
21-44	57	4.5	663	0.9	133	84	6.7	943	0.6	221	1,261	13,740
45-64	65	3.0	738	0.6	119	127	5.9	1,423	0.9	215	2,147	22,915
65-74	0	0.0	0	0.0	0	6	6.2	63	0.2	40	97	1,026
75-84	0	0.0	0	0.0	0	2	25.0	24	0.6	97	8	78
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	938	1.6	10,067	0.5	69	1,033	1.8	10,150	0.2	48	57,508	491,272
5 and younger	23	0.2	233	0.3	56	103	0.7	1,124	0.1	6	14,559	126,961
6-14	474	2.9	5,251	0.6	64	125	0.8	1,377	0.1	8	16,089	155,007
15-20	213	2.2	2,261	0.5	54	161	1.7	1,667	0.2	25	9,722	82,379
21-44	195	1.3	1,982	0.5	92	577	3.9	5,288	0.2	59	14,917	106,886
45-64	32	1.8	328	0.6	130	58	3.3	588	0.8	195	1,734	14,905
65-74	0	0.0	0	0.0	0	7	3.0	82	0.1	10	237	2,454
75-84	1	0.5	12	0.1	12	2	1.0	24	0.1	11	197	2,127
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	53	553
Male												
All Males	2,347	4.7	25,453	0.6	69	521	1.0	5,555	0.5	171	50,436	456,967
Male, Disabled												
All Ages	388	8.7	4,452	0.7	90	177	4.0	1,884	1.1	447	4,437	46,283
5 and younger	9	3.1	97	0.5	53	12	4.2	142	0.3	74	289	2,853
6-14	188	29.2	2,169	0.7	81	6	0.9	60	0.4	32	644	7,106
15-20	115	21.4	1,334	0.8	97	7	1.3	74	0.6	39	538	5,705
21-44	48	4.1	552	0.6	86	64	5.4	701	1.2	425	1,178	12,320
45-64	28	1.6	300	0.7	146	85	4.9	893	1.1	589	1,743	17,871
65-74	0	0.0	0	0.0	0	3	6.7	14	0.3	134	45	428
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Male, Other Eligibles												
All Ages	1,959	4.3	21,001	0.6	65	344	0.7	3,671	0.1	29	45,999	410,684
5 and younger	88	0.6	936	0.3	34	101	0.7	1,069	0.1	7	15,195	132,031
6-14	1,392	8.3	15,126	0.6	66	119	0.7	1,325	0.1	10	16,753	161,493
15-20	434	5.0	4,535	0.5	64	53	0.6	538	0.2	12	8,668	75,361
21-44	36	0.9	322	0.4	69	54	1.4	564	0.3	132	3,845	28,391
45-64	7	0.5	63	0.7	203	12	0.9	115	0.2	34	1,279	10,782
65-74	1	0.8	12	0.2	38	3	2.3	36	0.1	7	132	1,343
75-84	1	1.0	7	0.1	2	2	2.0	24	0.1	20	102	1,055
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	25	228
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	19

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.
 a. Table ND.7D includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 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.

Nondual Medicaid Beneficiaries

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, ALASKA, 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
All	\$764	8.3	69	730
Age				
0-64	906	9.6	53	564
65-74	480	5.9	7	69
75-84	98	1.3	3	25
85 and older	154	2.7	6	72
Unknown	0	0.0	0	0
Gender				
Female	700	8.5	39	444
Male	862	7.9	30	286
Unknown	0	0.0	0	0
Race				
White	756	9.1	34	350
African American	709	7	4	41
Other/unknown	778	7.6	31	339
Basis of Eligibility^c				
Aged	278	3.8	15	164
Disabled	905	9.5	54	566
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 Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2007 Medicaid enrollment. A total of 124 beneficiaries who were in nursing facilities for part of their enrollment and their 1,263 benefit months were excluded from the analysis. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

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

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

Nondual Medicaid Beneficiaries

TABLE ND.9
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
BY BRAND STATUS AND THERAPEUTIC CATEGORY^{a, b, c, d, e}
NONDUAL BENEFICIARIES, ALASKA, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.6	0.2	0.0	0.4	\$150	\$133	\$0	\$16	\$236	\$553	\$0	\$41	278	\$65,708	39	56.5	439
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.7	0.0	0.0	0.7	89	0	0	89	134	0	0	134	22	2,946	3	4.3	33
Endocrine/Metabolic Drugs	1.5	0.6	0.0	0.9	85	69	1	16	58	114	80	18	434	25,202	27	39.1	295
Cardiovascular Agents	2.8	0.2	0.1	2.5	92	24	7	60	32	104	56	24	1,036	33,545	33	47.8	366
Respiratory Agents	0.7	0.3	0.3	0.1	57	43	9	5	77	136	34	32	159	12,322	19	27.5	216
Gastrointestinal Agents	1.6	0.5	0.0	1.1	112	80	1	31	68	158	274	27	786	53,484	43	62.3	477
Genitourinary Agents	0.6	0.4	0.0	0.2	55	44	1	10	90	122	52	42	54	4,870	8	11.6	89
CNS Drugs	2.1	0.8	0.0	1.2	211	156	2	53	102	197	71	43	1,046	106,705	45	65.2	505
Stimulants/Anti-obesity/Anorexia	0.8	0.3	0.0	0.5	91	75	0	16	115	277	0	31	35	4,023	4	5.8	44
Miscellaneous Psychological/ Neurological Agents	0.9	0.9	0.0	0.0	884	884	0	0	991	991	0	0	74	73,363	7	10.1	83
Analgesics and Anesthetics	1.1	0.1	0.0	1.0	149	57	3	89	130	798	139	85	482	62,838	40	58.0	423
Neuromuscular Agents	2.4	0.3	0.0	2.0	182	69	5	109	76	217	187	53	1,033	78,898	37	53.6	433
Nutritional Products	1.3	0.1	0.0	1.2	33	2	0	31	26	27	0	26	282	7,291	20	29.0	224
Hematological Agents	1.0	0.5	0.0	0.5	148	138	0	10	146	251	0	22	94	13,736	9	13.0	93
Topical Products	0.5	0.1	0.0	0.4	29	6	7	15	58	92	193	39	212	12,374	38	55.1	426
Miscellaneous Products	0.1	0.1	0.0	0.0	2	2	0	0	28	28	0	0	1	28	1	1.4	12
Unknown Therapeutic Category	0.1	0.0	0.0	0.0	7	0	0	0	60	0	0	0	3	179	2	2.9	24
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	6,031	557,512	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

- a. Table ND.9 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 124 beneficiaries who were in nursing facilities for part of their enrollment and their 1,263 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 Alaska, 0.5 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.
- Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.10
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR TOP 10 DRUG GROUPS AMONG ALL-YEAR NURSING FACILITY RESIDENTS,
 BY TOP-10 DRUG GROUP^{a, b, c, d}
 NONDUAL BENEFICIARIES, ALASKA, 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	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	\$73,363	7	10.1	83	0.9	\$991	\$884	
ANTIPSYCHOTICS	61,267	18	26.1	205	0.9	337	299	
ANTIVIRAL	57,081	9	13.0	101	0.9	614	565	
ANTICONVULSANT	56,285	36	52.2	429	1.1	119	131	
ULCER DRUGS	43,869	40	58.0	434	1.0	98	101	
ANTIDEPRESSANTS	39,060	49	71.0	567	1.2	56	69	
ANALGESICS - Narcotic	38,113	42	60.9	447	0.8	101	85	
ANALGESICS - ANTI-INFLAMMATORY	24,543	9	13.0	108	0.8	270	227	
MUSCULOSKELETAL THERAPY AGENTS	22,298	20	29.0	233	2.3	41	96	
ANTIDIABETIC	18,335	23	33.3	227	1.0	80	81	
Total	434,214	253	n.a.	2,834	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.10 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 124 beneficiaries who were in nursing facilities for part of their enrollment and their 1,263 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.

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

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

Nondual Medicaid Beneficiaries

TABLE ND.10A
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST
 AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, ALASKA, 2007

Beneficiary Characteristics	All Top 10 Drug Groups		MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIPSYCHOTICS				
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	3,201	\$434,214	7	10.1	83	0.9	\$884	18	26.1	205	0.9	\$299
Female												
All Females	2,006	242,941	5	12.8	60	0.9	527	10	25.6	120	0.8	257
Female, Disabled												
All Ages	1,729	214,484	4	14.3	48	0.8	622	6	21.4	72	0.8	260
64 or younger	1,729	214,484	4	14.3	48	0.8	622	6	21.4	72	0.8	260
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	277	28,457	1	9.1	12	1.0	145	4	36.4	48	0.8	252
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	229	23,835	1	16.7	12	1.0	145	3	50.0	36	0.9	310
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	48	4,622	0	0.0	0	0.0	0	1	25.0	12	0.3	77
Male												
All Males	1,195	191,273	2	6.7	23	1.0	1,815	8	26.7	85	1.0	359
Male, Disabled												
All Ages	1,148	188,196	2	7.7	23	1.0	1,815	7	26.9	73	1.1	391
64 or younger	1,147	187,177	2	8.0	23	1.0	1,815	7	28.0	73	1.1	391
65-74	1	1,019	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	47	3,077	0	0.0	0	0.0	0	1	25.0	12	0.8	165
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	16	2,182	0	0.0	0	0.0	0	1	50.0	12	0.8	165
85 and older	31	895	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.10A includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 124 beneficiaries who were in nursing facilities for part of their enrollment and their 1,263 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.

Nondual Medicaid Beneficiaries

TABLE ND.10B
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, ALASKA, 2007

Beneficiary Characteristics	ANTIVIRAL					ANTICONVULSANT					ULCER DRUGS				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	9	13.0	101	0.9	\$565	36	52.2	429	1.1	\$131	40	58.0	434	1.0	\$101
Female															
All Females	4	10.3	44	0.7	490	23	59.0	276	1.1	124	27	69.2	297	1.0	80
Female, Disabled															
All Ages	4	14.3	44	0.7	490	19	67.9	228	1.1	126	22	78.6	237	0.9	90
64 or younger	4	14.3	44	0.7	490	19	67.9	228	1.1	126	22	78.6	237	0.9	90
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	0	0.0	0	0.0	0	4	36.4	48	1.1	116	5	45.5	60	1.3	42
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	4	66.7	48	1.1	116	3	50.0	36	1.7	16
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	2	50.0	24	0.6	81
Male															
All Males	5	16.7	57	1.1	623	13	43.3	153	1.1	144	13	43.3	137	1.1	146
Male, Disabled															
All Ages	5	19.2	57	1.1	623	12	46.2	141	1.1	156	13	50.0	137	1.1	146
64 or younger	5	20.0	57	1.1	623	12	48.0	141	1.1	156	13	52.0	137	1.1	146
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	0	0.0	0	0.0	0	1	25.0	12	0.2	12	0	0.0	0	0.0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	1	50.0	12	0.2	12	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
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.10B includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 124 beneficiaries who were in nursing facilities for part of their enrollment and their 1,263 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 ND.10C
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, ALASKA, 2007

Beneficiary Characteristics	ANTIDEPRESSANTS					ANALGESICS - Narcotic					ANALGESICS - ANTI-INFLAMMATORY				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	49	71.0	567	1.2	\$69	42	60.9	447	0.8	\$85	9	13.0	108	0.8	\$227
Female															
All Females	27	69.2	322	1.3	75	24	61.5	279	0.8	94	9	23.1	108	0.8	227
Female, Disabled															
All Ages	24	85.7	286	1.4	78	23	82.1	267	0.8	98	9	32.1	108	0.8	227
64 or younger	24	85.7	286	1.4	78	23	82.1	267	0.8	98	9	32.1	108	0.8	227
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	3	27.3	36	0.6	52	1	9.1	12	0.9	10	0	0.0	0	0.0	0
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	2	33.3	24	0.6	53	1	16.7	12	0.9	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	0.0	0	0.0	0
85 and older	1	25.0	12	0.5	49	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male															
All Males	22	73.3	245	1.1	61	18	60.0	168	0.9	71	0	0.0	0	0.0	0
Male, Disabled															
All Ages	20	76.9	221	1.1	63	16	61.5	144	1.0	82	0	0.0	0	0.0	0
64 or younger	20	80.0	221	1.1	63	15	60.0	142	1.0	76	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	1	100.0	2	0.5	510	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	2	50.0	24	0.9	33	2	50.0	24	0.3	3	0	0.0	0	0.0	0
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	1	50.0	12	0.4	5	0	0.0	0	0.0	0
85 and older	2	100.0	24	0.9	33	1	50.0	12	0.2	1	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.10C includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 124 beneficiaries who were in nursing facilities for part of their enrollment and their 1,263 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 ND.10D
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS
 SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE^{a, b, c, d}
 NONDUAL BENEFICIARIES, ALASKA, 2007

Beneficiary Characteristics	MUSCULOSKELETAL THERAPY AGENTS					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 \$	All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	20	29.0	233	2.3	\$96	23	33.3	227	1.0	\$81	69	730
Female												
All Females	14	35.9	161	2.1	94	15	38.5	150	0.9	72	39	444
Female, Disabled												
All Ages	13	46.4	149	2.2	96	10	35.7	90	0.9	78	28	317
64 or younger	13	46.4	149	2.2	96	10	35.7	90	0.9	78	28	317
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	1	9.1	12	1.0	63	5	45.5	60	0.9	64	11	127
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	1	16.7	12	1.0	63	4	66.7	48	0.6	56	6	67
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	12
85 and older	0	0.0	0	0.0	0	1	25.0	12	2.0	98	4	48
Male												
All Males	6	20.0	72	2.8	100	8	26.7	77	1.2	98	30	286
Male, Disabled												
All Ages	6	23.1	72	2.8	100	7	26.9	65	1.3	114	26	249
64 or younger	6	24.0	72	2.8	100	7	28.0	65	1.3	114	25	247
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	2
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Male, Other Eligibles												
All Ages	0	0.0	0	0.0	0	1	25.0	12	0.6	6	4	37
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	0	0.0	0	0.0	0	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	2	13
85 and older	0	0.0	0	0.0	0	1	50.0	12	0.6	6	2	24
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.10D includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 2007. A total of 124 beneficiaries who were in nursing facilities for part of their enrollment and their 1,263 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 ND.11
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS, BY BENEFICIARY CHARACTERISTIC^{a,b}
 ALASKA, 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 Nondual Rx \$	Total Number of Beneficiaries
All	8,767	7.8	0.4	43,309	\$7	\$800,448	\$18	1.1	112,318
Age									
5 and younger	1,364	4.5	0.1	2,634	2	60,984	23	0.9	30,272
6-14	630	1.9	0.1	2,007	1	47,358	24	0.5	33,811
15-20	1,070	5.6	0.2	2,888	3	50,405	17	0.5	19,234
21-44	3,446	16.3	0.7	15,786	13	278,584	18	1.4	21,201
45-64	2,055	29.8	2.6	17,968	49	336,288	19	1.4	6,903
65-74	122	23.9	2.1	1,098	30	15,276	14	1.2	511
75-84	64	20.8	2.5	782	31	9,398	12	1.3	307
85 and older	16	20.5	1.9	146	28	2,155	15	1.8	78
Unknown	0	0.0	0.0	0	0	0	0	0.0	1
Basis of Eligibility^c									
Aged	168	22.0	2.3	1,741	33	25,119	14	1.4	764
Disabled	2,554	29.0	2.8	24,302	57	503,624	21	1.3	8,808
Adults	3,609	13.7	0.5	12,066	7	184,311	15	1.4	26,353
Children	2,410	3.2	0.1	5,092	1	85,387	17	0.5	76,234
Unknown	26	16.4	0.7	108	13	2,007	19	0.7	159
Gender									
Female	6,144	9.9	0.5	29,670	8	523,581	18	1.3	61,879
Male	2,623	5.2	0.3	13,639	5	276,867	20	0.9	50,437
Unknown	0	0.0	0.0	0	0	0	0	0.0	2
Race									
White	3,908	9.0	0.5	23,653	11	476,125	20	1.3	43,650
African American	332	5.2	0.3	1,990	5	29,887	15	0.8	6,341
Other/unknown	4,527	7.3	0.3	17,666	5	294,436	17	1.0	62,327
Use of Nursing Facilities^d									
Entire year	35	50.7	7.3	502	168	11,570	23	2.1	69
Part year	86	69.4	6.1	754	144	17,812	24	2.0	124
None	8,646	7.7	0.4	42,053	7	771,066	18	1.1	112,125
Maintenance Assistance Status									
Cash	5,459	13.5	0.9	34,684	16	639,521	18	1.2	40,505
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	2,437	4.2	0.1	5,146	1	70,351	14	0.6	58,560
Other/unknown	871	6.6	0.3	3,479	7	90,576	26	1.1	13,253

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.11 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 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 ND.12
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D
 AMONG NONDUALS PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC^{a,b}
 ALASKA, 2007

Beneficiary Characteristics	Number Rx per Benefit Month	Rx \$ per Benefit Month	\$ per Rx	Barbiturate \$ per Benefit Month	Benzodiazepine \$ per Benefit Month	Number of Benefit Months
All	0.0	\$1	\$18	\$0	\$0	995,206
Age						
5 and younger	0.0	0	23	0	0	264,092
6-14	0.0	0	24	0	0	327,242
15-20	0.0	0	17	0	0	166,764
21-44	0.1	2	18	0	1	161,337
45-64	0.3	5	19	0	3	66,473
65-74	0.2	3	14	0	1	5,251
75-84	0.2	3	12	0	0	3,260
85 and older	0.2	3	15	0	0	781
Unknown	0.0	0	0	0	0	6
Basis of Eligibility^c						
Aged	0.2	3	14	0	1	7,952
Disabled	0.3	5	21	0	3	93,231
Adults	0.1	1	15	0	1	195,109
Children	0.0	0	17	0	0	697,799
Unknown	0.1	2	19	0	1	1,115
Gender						
Female	0.1	1	18	0	1	538,220
Male	0.0	1	20	0	0	456,973
Unknown	0.0	0	0	0	0	13
Race						
White	0.1	1	20	0	1	380,538
African American	0.0	1	15	0	0	57,190
Other/unknown	0.0	1	17	0	0	557,478
Use of Nursing Facilities^d						
Entire year	0.7	16	23	0	5	730
Part year	0.6	14	24	0	4	1,263
None	0.0	1	18	0	0	993,213
Maintenance Assistance Status						
Cash	0.1	2	18	0	1	373,147
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	0	14	0	0	496,790
Other/unknown	0.0	1	26	0	0	125,269

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

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

TABLE ND.13
USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D FOR SELECTED DRUG CATEGORIES AMONG NONDUALS^{a,b,c}
ALASKA, 2007

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D			Number Rx as a Percentage of All Part D Excluded Rx	
				Excluded Rx \$	Total Number Rx.	\$ per Rx		
All	10,077	\$79	\$800,448	100.0	43,309	\$18		100.0
Anorexia or weight loss/gain	1	33	33	0.0	1	33		0.0
Fertility drugs	2	84	168	0.0	3	56		0.0
Drugs for cosmetic purposes	45	18	794	0.1	66	12		0.2
Cough and cold medications	534	111	59,102	7.4	1,038	57		2.4
Vitamins and minerals	1,694	103	173,885	21.7	8,605	20		19.9
Non-prescription drugs	3,079	32	97,529	12.2	9,824	10		22.7
Barbiturates	135	85	11,483	1.4	966	12		2.2
Benzodiazepines	3,922	105	411,711	51.4	20,671	20		47.7
Other Part D Excl Rx Drugs	665	69	45,743	5.7	2,135	21		4.9

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

a. Table ND.13 includes the beneficiaries represented by Cell K of Table 1. Beneficiaries include all nondual Medicaid beneficiaries who had Medicaid pharmacy benefits during at least one month in 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 ND11.

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.

Nondual Medicaid Beneficiaries

APPENDIX TABLE A.1
CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, ALASKA, 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
All	112,318	764	8,808	26,353	76,234	159	995,206	7,952	93,231	195,109	697,799	1,115
Age												
5 and younger	30,272	1	517	0	29,754	0	264,092	3	5,091	0	258,998	0
6-14	33,811	0	968	2	32,841	0	327,242	0	10,738	12	316,492	0
15-20	19,234	0	844	5,002	13,384	4	166,764	0	9,024	36,539	121,179	22
21-44	21,201	1	2,439	18,427	255	79	161,337	11	26,060	133,737	1,130	399
45-64	6,903	21	3,890	2,916	0	76	66,473	210	40,786	24,783	0	694
65-74	511	364	142	5	0	0	5,251	3,765	1,454	32	0	0
75-84	307	299	8	0	0	0	3,260	3,182	78	0	0	0
85 and older	78	78	0	0	0	0	781	781	0	0	0	0
Unknown	1	0	0	1	0	0	6	0	0	6	0	0
Gender												
Female	61,879	497	4,371	19,692	37,160	159	538,220	5,243	46,948	143,813	341,101	1,115
Male	50,437	267	4,437	6,661	39,072	0	456,973	2,709	46,283	51,296	356,685	0
Unknown	2	0	0	0	2	0	13	0	0	0	13	0
Race												
White	43,650	158	4,517	10,956	27,893	126	380,538	1,535	47,709	78,472	251,941	881
African American	6,341	14	553	1,270	4,498	6	57,190	131	5,753	9,496	41,770	40
Other/unknown	62,327	592	3,738	14,127	43,843	27	557,478	6,286	39,769	107,141	404,088	194
Use of Nursing Facilities^c												
Entire year	69	15	54	0	0	0	730	164	566	0	0	0
Part year	124	18	98	6	0	2	1,263	204	987	57	0	15
None	112,125	731	8,656	26,347	76,234	157	993,213	7,584	91,678	195,052	697,799	1,100
Maintenance Assistance Status												
Cash	40,505	736	7,887	14,808	17,074	0	373,147	7,698	83,491	121,071	160,887	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	58,560	0	0	9,513	48,888	159	496,790	0	0	57,293	438,382	1,115
Other/unknown	13,253	28	921	2,032	10,272	0	125,269	254	9,740	16,745	98,530	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	112,318	764	8,808	26,353	76,234	159	995,206	7,952	93,231	195,109	697,799	1,115
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. This table was produced on 10/06/2010.

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

APPENDIX TABLE A.2
 MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS^a
 NONDUAL BENEFICIARIES, ALASKA, 2007

	Beneficiaries and		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Benefit Months in Cell J of Table 1					
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	112,318	995,206	112,318	995,206	0	0
Fee-for-service (FFS) all year	112,318	995,206	112,318	995,206	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
Managed care (MC) all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 2007 file for Alaska, released by CMS in 3/2010. 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 & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

Nondual Medicaid Beneficiaries