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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, ALABAMA, 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	703,122	562	113,682	140,153	448,283	442	6,532,248	5,220	1,236,169	1,128,926	4,157,841	4,092
Age												
5 and younger	193,807	0	6,608	5	187,194	0	1,763,555	0	70,038	12	1,693,505	0
6-14	196,216	0	17,994	23	178,199	0	1,923,793	0	206,960	101	1,716,732	0
15-20	104,538	0	14,199	7,706	82,633	0	952,477	0	159,106	48,199	745,172	0
21-44	162,034	0	32,152	129,522	256	104	1,411,042	0	350,159	1,057,552	2,431	900
45-64	44,593	0	41,368	2,889	0	336	461,123	0	434,952	22,992	0	3,179
65-74	1,124	88	1,026	8	0	2	12,213	819	11,311	70	0	13
75-84	500	239	261	0	0	0	5,110	2,259	2,851	0	0	0
85 and older	310	235	74	0	1	0	2,935	2,142	792	0	1	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	421,957	376	58,606	137,842	224,691	442	3,863,926	3,441	645,010	1,111,904	2,099,479	4,092
Male	273,987	186	55,076	2,311	216,414	0	2,625,413	1,779	591,159	17,022	2,015,453	0
Unknown	7,178	0	0	0	7,178	0	42,909	0	0	0	42,909	0
Race												
White	301,643	210	44,033	63,797	193,351	252	2,769,353	1,765	472,331	505,446	1,787,566	2,245
African American	339,648	281	56,213	68,481	214,498	175	3,207,061	2,696	626,520	575,376	2,000,762	1,707
Other/unknown	61,831	71	13,436	7,875	40,434	15	555,834	759	137,318	48,104	369,513	140
Use of Nursing Facilities^c												
Entire year	1,301	145	1,156	0	0	0	13,694	1,423	12,271	0	0	0
Part year	935	46	878	7	2	2	9,429	424	8,891	66	24	24
None	700,886	371	111,648	140,146	448,281	440	6,509,125	3,373	1,215,007	1,128,860	4,157,817	4,068
Maintenance Assistance Status												
Cash	182,582	287	112,640	25,211	44,444	0	1,871,783	3,060	1,225,894	220,781	422,048	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	407,319	7	21	24,297	382,552	442	3,692,489	74	200	153,848	3,534,275	4,092
Other/unknown	113,221	268	1,021	90,645	21,287	0	967,976	2,086	10,075	754,297	201,518	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	703,083	548	113,657	140,153	448,283	442	6,532,043	5,154	1,236,030	1,128,926	4,157,841	4,092
FFS part year, with Rx claims	17	5	12	0	0	0	75	18	57	0	0	0
FFS part year, no Rx claims	22	9	13	0	0	0	130	48	82	0	0	0

Source: Data for this table are from the MAX 2007 file for Alabama, 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, ALABAMA, 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	63.9	8.8	\$563	\$64	\$2,779	20.2	703,122
Age							
5 and younger	74.2	5.4	289	53	2,025	14.3	193,807
6-14	65.7	5.7	445	78	2,119	21.0	196,216
15-20	62.0	5.8	419	73	2,839	14.8	104,538
21-44	44.3	8.2	540	66	2,720	19.8	162,034
45-64	86.5	45.2	2,651	59	8,596	30.8	44,593
65-74	77.0	40.8	2,286	56	12,825	17.8	1,124
75-84	39.6	10.0	451	45	11,023	4.1	500
85 and older	35.8	4.8	157	33	17,053	0.9	310
Unknown	0.0	0.0	0	0	0	0.0	0
Basis of Eligibility^e							
Aged	39.5	9.2	375	41	14,292	2.6	562
Disabled	82.0	29.4	2,218	76	7,725	28.7	113,682
Adults	38.0	4.4	171	39	1,569	10.9	140,153
Children	67.4	4.9	265	54	1,877	14.1	448,283
Unknown	85.3	28.6	1,833	64	14,968	12.2	442
Gender							
Female	60.5	9.2	516	56	2,628	19.6	421,957
Male	69.5	8.4	646	77	3,035	21.3	273,987
Unknown	49.4	2.4	166	69	1,888	8.8	7,178
Race							
White	69.2	11.0	690	63	3,067	22.5	301,643
African American	59.7	6.9	449	65	2,499	18.0	339,648
Other/unknown	61.0	8.4	569	68	2,914	19.5	61,831
Use of Nursing Facilities^f							
Entire year	92.5	77.0	5,111	66	58,178	8.8	1,301
Part year	96.0	65.8	4,288	65	32,285	13.3	935
None	63.8	8.6	549	64	2,637	20.8	700,886
Maintenance Assistance Status							
Cash	78.4	21.5	1,524	71	5,486	27.8	182,582
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	67.6	4.8	248	51	1,774	14.0	407,319
Other/unknown	27.1	2.7	147	55	2,033	7.2	113,221

Source: Data for this table are from the MAX 2007 file for Alabama, 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, ALABAMA, 2007

Beneficiary Characteristics	Number of Rx, Percentage with:										Number	
	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10	Mean \$, All Medicaid FFS \$ ^d	Beneficiaries	Benefit Months
All	0.9	\$61	20.2	36.1	48.5	6.6	5.7	2.5	0.5	\$299	703,122	6,532,248
Age												
5 and younger	0.6	32	14.3	25.8	65.2	6.7	2.2	0.1	0.0	223	193,807	1,763,555
6-14	0.6	45	21.0	34.3	55.4	6.1	3.8	0.4	0.0	216	196,216	1,923,793
15-20	0.6	46	14.8	38.0	50.9	6.4	3.9	0.7	0.0	312	104,538	952,477
21-44	0.9	62	19.8	55.7	27.8	6.1	7.1	2.9	0.4	312	162,034	1,411,042
45-64	4.4	256	30.8	13.5	16.6	11.0	28.5	24.1	6.5	831	44,593	461,123
65-74	3.8	210	17.8	23.0	17.0	8.1	23.3	22.3	6.2	1,180	1,124	12,213
75-84	1.0	44	4.1	60.4	25.6	2.6	5.2	4.6	1.6	1,079	500	5,110
85 and older	0.5	17	0.9	64.2	26.8	2.6	3.5	2.6	0.3	1,801	310	2,935
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Basis of Eligibility^e												
Aged	1.0	40	2.6	60.5	23.3	4.1	6.0	4.4	1.6	1,539	562	5,220
Disabled	2.7	204	28.7	18.0	32.8	11.9	20.9	13.3	3.1	710	113,682	1,236,169
Adults	0.5	21	10.9	62.0	28.0	4.7	4.0	1.1	0.1	195	140,153	1,128,926
Children	0.5	29	14.1	32.6	59.0	5.9	2.4	0.2	0.0	202	448,283	4,157,841
Unknown	3.1	198	12.2	14.7	22.6	15.2	33.9	12.7	0.9	1,617	442	4,092
Gender												
Female	1.0	56	19.6	39.5	44.9	6.2	5.7	2.9	0.7	287	421,957	3,863,926
Male	0.9	67	21.3	30.5	54.2	7.3	5.8	1.9	0.3	317	273,987	2,625,413
Unknown	0.4	28	8.8	50.6	43.0	5.0	1.3	0.1	0.0	316	7,178	42,909
Race												
White	1.2	75	22.5	30.8	49.4	8.1	7.3	3.4	0.8	334	301,643	2,769,353
African American	0.7	48	18.0	40.3	47.8	5.5	4.4	1.7	0.3	265	339,648	3,207,061
Other/unknown	0.9	63	19.5	39.0	47.8	5.2	4.8	2.6	0.6	324	61,831	555,834
Use of Nursing Facilities^f												
Entire year	7.3	486	8.8	7.5	8.0	3.4	20.8	37.1	23.2	5,527	1,301	13,694
Part year	6.5	425	13.3	4.0	8.0	6.3	27.2	37.3	17.2	3,201	935	9,429
None	0.9	59	20.8	36.2	48.7	6.6	5.7	2.4	0.5	284	700,886	6,509,125
Maintenance Assistance Status												
Cash	2.1	149	27.8	21.6	40.7	10.9	15.9	9.0	2.0	535	182,582	1,871,783
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.5	27	14.0	32.4	59.2	5.9	2.3	0.2	0.0	196	407,319	3,692,489
Other/unknown	0.3	17	7.2	72.9	22.9	2.2	1.4	0.4	0.1	238	113,221	967,976

Source: Data for this table are from the MAX 2007 file for Alabama, 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, ALABAMA, 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	\$61	\$64	0.2	\$41	\$163	0.0	\$4	\$98	0.7	\$16	\$24
Age												
5 and younger	0.6	32	53	0.1	19	171	0.0	2	60	0.5	11	24
6-14	0.6	45	78	0.2	35	145	0.0	2	87	0.3	9	27
15-20	0.6	46	73	0.2	34	169	0.0	2	101	0.4	10	23
21-44	0.9	62	66	0.2	42	187	0.0	4	118	0.7	16	23
45-64	4.4	256	59	1.0	155	160	0.2	22	113	3.2	79	25
65-74	3.8	210	56	0.9	129	151	0.2	17	110	2.7	64	23
75-84	1.0	44	45	0.2	25	116	0.0	3	94	0.7	16	22
85 and older	0.5	17	33	0.1	11	84	0.0	1	60	0.4	5	13
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	1.0	40	41	0.2	23	93	0.0	3	77	0.7	15	21
Disabled	2.7	204	76	0.7	143	200	0.1	14	116	1.9	47	25
Adults	0.5	21	39	0.1	12	98	0.0	2	99	0.4	8	20
Children	0.5	29	54	0.1	18	124	0.0	2	69	0.4	9	24
Unknown	3.1	198	64	0.8	131	173	0.1	13	129	2.2	54	24
Gender												
Female	1.0	56	56	0.2	35	146	0.0	4	100	0.7	17	24
Male	0.9	67	77	0.3	49	185	0.0	4	96	0.6	15	26
Unknown	0.4	28	69	0.1	20	377	0.0	1	51	0.3	7	22
Race												
White	1.2	75	63	0.3	49	155	0.1	5	100	0.8	21	25
African American	0.7	48	65	0.2	33	169	0.0	3	95	0.5	12	23
Other/unknown	0.9	63	68	0.2	43	190	0.0	4	96	0.7	16	25
Use of Nursing Facilities^e												
Entire year	7.3	486	66	1.8	307	167	0.3	29	102	5.2	148	29
Part year	6.5	425	65	1.4	258	182	0.3	37	117	4.8	129	27
None	0.9	59	64	0.2	40	163	0.0	4	98	0.6	16	24
Maintenance Assistance Status												
Cash	2.1	149	71	0.5	102	190	0.1	10	113	1.5	36	25
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.5	27	51	0.1	17	119	0.0	2	69	0.4	9	24
Other/unknown	0.3	17	55	0.1	12	122	0.0	1	86	0.2	5	23

Source: Data for this table are from the MAX 2007 file for Alabama, 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 Alabama, 0.4 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, ALABAMA, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users						\$ per Rx			Users ^e				
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months		
		Brand-Name	Brand-Name		Brand-Name	Brand-Name		Brand-Name	Brand-Name							Brand-Name	Generic
Anti-infective Agents	0.3	0.0	0.0	0.2	\$11	\$4	\$1	\$7	\$45	\$282	\$94	\$29	817,048	\$37,142,860	310,208	44.1	3,267,984
Biologicals	0.4	0.4	0.0	0.0	538	538	0	0	1469	1,469	0	0	10,519	15,454,614	3,048	0.4	28,710
Antineoplastic Agents	0.5	0.1	0.0	0.3	136	116	1	19	287	820	532	58	13,080	3,747,787	2,542	0.4	27,509
Endocrine/Metabolic Drugs	0.4	0.1	0.0	0.2	21	15	0	6	59	136	56	24	440,183	25,782,672	112,875	16.1	1,218,974
Cardiovascular Agents	1.2	0.2	0.0	0.9	41	18	3	20	35	93	90	21	746,213	26,269,357	59,047	8.4	643,714
Respiratory Agents	0.4	0.2	0.0	0.2	21	15	0	5	53	98	34	22	1,138,058	59,791,594	268,699	38.2	2,846,015
Gastrointestinal Agents	0.4	0.0	0.1	0.2	26	7	14	6	69	151	115	27	313,781	21,766,764	78,336	11.1	837,235
Genitourinary Agents	0.2	0.1	0.0	0.1	11	6	1	5	52	98	75	31	59,548	3,088,633	25,561	3.6	270,343
CNS Drugs	0.8	0.3	0.0	0.5	79	67	0	12	100	218	169	24	732,586	73,082,121	85,592	12.2	928,210
Stimulants/Anti-obesity/Anorexia	0.7	0.5	0.0	0.1	70	65	1	4	104	121	47	34	233,365	24,208,654	31,484	4.5	345,308
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	0.0	258	256	0	2	460	496	0	42	6,196	2,852,327	992	0.1	11,057
Analgesics and Anesthetics	0.4	0.0	0.0	0.4	10	3	1	7	28	252	221	19	637,610	17,771,725	162,493	23.1	1,729,598
Neuromuscular Agents	0.7	0.3	0.0	0.4	66	46	6	15	94	183	172	35	422,964	39,867,475	54,905	7.8	600,961
Nutritional Products	0.3	0.1	0.0	0.2	8	4	0	4	23	34	23	17	129,103	3,003,928	37,020	5.3	376,010
Hematological Agents	0.4	0.1	0.0	0.2	96	91	0	5	255	673	33	21	82,092	20,936,126	20,890	3.0	217,040
Topical Products	0.2	0.0	0.0	0.2	8	4	1	3	39	93	81	22	380,741	14,823,607	176,802	25.1	1,872,469
Miscellaneous Products	0.4	0.2	0.0	0.2	187	168	6	13	459	809	329	69	11,758	5,396,478	2,706	0.4	28,892
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	8	0	0	0	51	0	0	0	14,686	742,637	8,165	1.2	90,682
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.	6,189,531	395,729,359	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Alabama, 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 Alabama, 0.4 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.

Nondual Medicaid Beneficiaries

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, ALABAMA, 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	\$52,360,816	32,258	4.6	360,241	0.6	\$260	\$145
ANTIASTHMATIC	39,243,399	177,146	25.2	1,926,265	0.3	80	20
ANTICONVULSANT	36,570,447	43,043	6.1	477,432	0.6	126	77
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	24,208,654	36,948	5.3	408,147	0.6	104	59
ULCER DRUGS	17,593,499	71,339	10.1	771,207	0.3	72	23
MISC. HEMATOLOGICAL	16,882,243	3,075	0.4	34,243	0.5	899	493
PASSIVE IMMUNIZING AGENTS	15,442,032	2,758	0.4	25,389	0.4	1,515	608
ANTIDEPRESSANTS	15,226,248	61,598	8.8	674,319	0.5	50	23
ANTIDIABETIC	13,536,938	29,203	4.2	324,786	0.6	74	42
ANTIVIRAL	10,849,681	15,811	2.2	171,200	0.2	326	63
Total	241,913,957	473,179	n.a.	5,173,229	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Alabama, 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, ALABAMA, 2007

Beneficiary Characteristics	All Top 10 Drug Groups			ANTI PSYCHOTICS					ANTI ASTHMATIC				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	
All	2,010,583	\$241,913,957	32,258	4.6	360,241	0.6	\$145	177,146	25.2	1,926,265	0.3	\$20	
Female													
All Females	1,144,202	120,901,979	16,986	4.0	188,910	0.5	134	88,115	20.9	962,089	0.3	20	
Female, Disabled													
All Ages	774,004	84,868,654	12,549	21.4	142,734	0.6	155	28,076	47.9	322,880	0.3	27	
5 and younger	11,815	3,118,788	47	1.6	541	0.5	71	1,827	63.7	21,233	0.3	25	
6-14	46,400	5,855,575	770	12.6	9,024	0.5	116	3,104	50.9	36,574	0.3	28	
15-20	34,752	4,922,944	919	17.9	10,623	0.5	126	1,598	31.1	18,702	0.3	25	
21-44	196,695	24,304,332	4,625	25.8	52,080	0.5	145	6,314	35.2	72,880	0.3	22	
45-64	472,600	45,611,990	6,028	23.6	68,680	0.6	172	14,911	58.3	169,795	0.4	30	
65-74	11,278	1,025,302	151	20.6	1,680	0.8	190	312	42.6	3,584	0.5	33	
75-84	416	27,672	8	4.1	94	0.5	84	10	5.1	112	0.7	32	
85 and older	48	2,051	1	1.7	12	0.7	83	0	0.0	0	0.0	0	
Female, Other Eligibles													
All Ages	370,198	36,033,325	4,437	1.2	46,176	0.4	72	60,039	16.5	639,209	0.2	17	
5 and younger	66,464	8,707,520	164	0.2	1,817	0.3	45	23,230	26.6	248,228	0.2	14	
6-14	128,164	11,909,489	1,168	1.3	12,947	0.4	85	22,937	25.7	248,271	0.2	20	
15-20	56,830	5,254,243	1,080	1.9	11,365	0.4	75	7,070	12.7	74,519	0.2	17	
21-44	101,997	8,874,093	1,825	1.4	18,129	0.3	65	6,051	4.7	60,666	0.2	14	
45-64	15,907	1,238,673	191	7.0	1,823	0.3	51	724	26.6	7,235	0.3	25	
65-74	316	24,807	4	7.4	48	0.7	75	9	16.7	104	0.3	20	
75-84	339	18,363	2	1.2	19	1.0	201	7	4.3	69	0.4	12	
85 and older	181	6,137	3	1.8	28	0.4	6	11	6.7	117	0.3	7	
Male													
All Males	863,447	120,178,383	15,271	5.6	171,319	0.6	158	88,062	32.1	955,706	0.3	21	
Male, Disabled													
All Ages	490,822	79,826,213	11,299	20.5	128,227	0.6	177	19,902	36.1	227,084	0.3	28	
5 and younger	18,793	4,984,773	182	4.9	2,077	0.5	84	2,988	79.9	34,661	0.3	25	
6-14	108,620	20,153,885	2,381	20.0	27,761	0.6	130	6,515	54.8	76,547	0.3	28	
15-20	60,030	11,587,987	1,902	21.0	22,050	0.6	152	2,285	25.2	26,746	0.3	25	
21-44	115,502	22,043,156	3,767	26.5	42,285	0.6	205	2,157	15.2	24,263	0.3	24	
45-64	184,802	20,707,021	2,999	19.0	33,282	0.7	201	5,842	37.0	63,665	0.5	34	
65-74	2,818	313,803	63	21.5	712	0.8	229	100	34.1	1,027	0.4	23	
75-84	244	35,109	5	7.8	60	1.2	302	13	20.3	151	0.6	43	
85 and older	13	479	0	0.0	0	0.0	0	2	12.5	24	0.1	1	
Male, Other Eligibles													
All Ages	372,625	40,352,170	3,972	1.8	43,092	0.5	100	68,160	31.1	728,622	0.2	18	
5 and younger	95,904	12,582,618	299	0.3	3,249	0.3	57	32,957	35.6	350,962	0.2	15	
6-14	213,903	21,117,597	2,304	2.6	25,463	0.5	103	29,050	32.7	312,949	0.3	21	
15-20	52,799	5,732,275	1,214	3.5	12,960	0.5	107	5,745	16.5	60,916	0.2	19	
21-44	6,846	628,888	127	6.6	1,184	0.4	84	272	14.0	2,444	0.3	22	
45-64	2,621	253,409	20	4.0	168	0.4	77	118	23.6	1,146	0.3	20	
65-74	102	5,163	0	0.0	0	0.0	0	6	13.6	64	0.4	37	
75-84	333	24,671	6	7.8	44	1.0	165	11	14.3	132	0.3	21	
85 and older	117	7,549	2	2.8	24	0.5	131	1	1.4	9	0.1	7	
Unknown	2,934	833,595	1	0.0	12	0.1	1	969	13.5	8,470	0.2	11	

Source: Data for this table are from the MAX 2007 file for Alabama, 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, ALABAMA, 2007

Beneficiary Characteristics	ANTICONVULSANT					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ULCER DRUGS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	43,043	6.1	477,432	0.6	\$77	36,948	5.3	408,147	0.6	\$59	71,339	10.1	771,207	0.3	\$23
Female															
All Females	27,329	6.5	302,634	0.6	72	11,290	2.7	124,506	0.5	57	46,649	11.1	509,654	0.3	23
Female, Disabled															
All Ages	19,695	33.6	224,235	0.6	80	3,017	5.1	35,125	0.6	62	24,029	41.0	276,540	0.4	32
5 and younger	272	9.5	3,102	0.7	107	60	2.1	698	0.3	26	502	17.5	5,541	0.3	22
6-14	1,224	20.1	14,335	0.8	137	1,691	27.7	19,828	0.6	63	723	11.9	8,535	0.3	25
15-20	1,145	22.3	13,158	0.7	113	656	12.8	7,656	0.6	62	891	17.3	10,433	0.3	19
21-44	6,705	37.4	75,928	0.6	85	342	1.9	3,879	0.5	62	6,583	36.7	76,159	0.3	26
45-64	10,179	39.8	115,859	0.6	65	265	1.0	3,028	0.5	72	14,986	58.6	172,034	0.5	36
65-74	160	21.8	1,735	0.7	65	3	0.4	36	0.2	16	326	44.5	3,628	0.5	39
75-84	8	4.1	94	0.5	26	0	0.0	0	0.0	0	17	8.6	198	0.6	32
85 and older	2	3.4	24	1.1	10	0	0.0	0	0.0	0	1	1.7	12	0.4	52
Female, Other Eligibles															
All Ages	7,634	2.1	78,399	0.4	49	8,273	2.3	89,381	0.5	54	22,620	6.2	233,114	0.2	13
5 and younger	299	0.3	3,270	0.4	56	474	0.5	5,308	0.3	29	5,767	6.6	55,915	0.2	11
6-14	1,001	1.1	11,084	0.5	66	6,124	6.9	66,387	0.6	56	4,763	5.3	52,603	0.2	11
15-20	1,365	2.5	14,414	0.4	57	1,237	2.2	13,251	0.5	55	4,098	7.4	43,117	0.2	10
21-44	4,463	3.5	44,602	0.4	42	406	0.3	4,093	0.5	47	7,136	5.6	72,878	0.2	17
45-64	484	17.8	4,797	0.5	41	32	1.2	342	0.6	89	830	30.5	8,308	0.4	29
65-74	7	13.0	80	0.8	63	0	0.0	0	0.0	0	11	20.4	118	0.4	35
75-84	9	5.6	89	0.7	22	0	0.0	0	0.0	0	9	5.6	108	0.5	34
85 and older	6	3.6	63	0.7	49	0	0.0	0	0.0	0	6	3.6	67	0.4	12
Male															
All Males	15,707	5.7	174,741	0.7	85	25,653	9.4	283,581	0.6	61	24,231	8.8	258,354	0.3	22
Male, Disabled															
All Ages	12,479	22.7	140,886	0.7	91	7,833	14.2	91,527	0.6	64	10,844	19.7	122,289	0.4	32
5 and younger	364	9.7	4,173	0.7	92	267	7.1	3,067	0.4	34	630	16.8	7,043	0.3	24
6-14	2,021	17.0	23,467	0.7	105	5,329	44.8	62,456	0.6	65	1,167	9.8	13,700	0.3	27
15-20	1,601	17.7	18,497	0.7	120	1,880	20.7	22,013	0.6	64	843	9.3	9,853	0.3	22
21-44	4,150	29.2	46,684	0.7	102	276	1.9	3,075	0.6	62	2,593	18.3	29,445	0.4	31
45-64	4,266	27.0	47,196	0.6	63	81	0.5	916	0.6	77	5,531	35.0	61,366	0.5	37
65-74	71	24.2	807	0.7	69	0	0.0	0	0.0	0	77	26.3	851	0.6	33
75-84	6	9.4	62	0.7	111	0	0.0	0	0.0	0	3	4.7	31	0.8	50
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	3,228	1.5	33,855	0.5	58	17,820	8.1	192,054	0.6	59	13,387	6.1	136,065	0.2	12
5 and younger	475	0.5	5,165	0.4	55	1,114	1.2	12,247	0.3	29	6,824	7.4	65,208	0.2	12
6-14	1,341	1.5	14,741	0.5	60	14,300	16.1	154,108	0.6	60	4,156	4.7	45,973	0.2	12
15-20	901	2.6	9,370	0.5	64	2,385	6.9	25,512	0.6	65	1,901	5.5	20,182	0.2	13
21-44	403	20.8	3,563	0.5	46	19	1.0	176	0.7	64	344	17.8	3,122	0.4	30
45-64	97	19.4	893	0.4	32	2	0.4	11	1.1	109	149	29.7	1,428	0.4	33
65-74	1	2.3	12	1.0	17	0	0.0	0	0.0	0	4	9.1	47	0.7	29
75-84	8	10.4	90	0.6	43	0	0.0	0	0.0	0	5	6.5	60	1.0	69
85 and older	2	2.8	21	1.1	55	0	0.0	0	0.0	0	4	5.6	45	0.6	10
Unknown	7	0.1	57	0.4	40	5	0.1	60	0.5	44	459	6.4	3,199	0.2	13

Source: Data for this table are from the MAX 2007 file for Alabama, 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, ALABAMA, 2007

Beneficiary Characteristics	MISC. HEMATOLOGICAL					PASSIVE IMMUNIZING AGENTS					ANTIDEPRESSANTS				
	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	3,075	0.4	34,243	0.5	\$493	2,758	0.4	25,389	0.4	\$608	61,598	8.8	674,319	0.5	\$23
Female															
All Females	1,821	0.4	20,519	0.5	81	1,219	0.3	11,213	0.4	594	44,951	10.7	491,122	0.4	23
Female, Disabled															
All Ages	1,691	2.9	19,152	0.5	77	366	0.6	3,763	0.4	685	27,230	46.5	310,280	0.5	27
5 and younger	2	0.1	24	0.2	7	347	12.1	3,535	0.4	574	26	0.9	304	0.3	6
6-14	1	0.0	12	0.7	2,521	3	0.0	36	0.7	1,401	668	11.0	7,848	0.4	17
15-20	5	0.1	58	0.7	5,291	5	0.1	60	0.4	1,992	1,268	24.7	14,668	0.4	21
21-44	156	0.9	1,740	0.5	80	6	0.0	72	0.4	2,674	9,010	50.2	102,667	0.4	25
45-64	1,481	5.8	16,807	0.5	58	5	0.0	60	0.7	3,125	15,984	62.5	181,632	0.6	29
65-74	45	6.1	500	0.6	66	0	0.0	0	0.0	0	258	35.2	2,970	0.6	28
75-84	1	0.5	11	0.3	7	0	0.0	0	0.0	0	15	7.6	179	0.7	39
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1.7	12	0.1	1
Female, Other Eligibles															
All Ages	130	0.0	1,367	0.4	133	853	0.2	7,450	0.4	549	17,721	4.9	180,842	0.3	15
5 and younger	0	0.0	0	0.0	0	826	0.9	7,210	0.4	556	94	0.1	1,052	0.3	6
6-14	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2,033	2.3	22,420	0.4	13
15-20	3	0.0	32	0.7	3,718	8	0.0	65	0.1	13	3,995	7.2	41,624	0.3	14
21-44	73	0.1	753	0.4	47	19	0.0	175	0.2	445	10,544	8.2	105,317	0.3	16
45-64	46	1.7	498	0.4	48	0	0.0	0	0.0	0	1,032	37.9	10,190	0.4	22
65-74	3	5.6	31	0.6	73	0	0.0	0	0.0	0	8	14.8	80	0.7	27
75-84	2	1.2	24	0.3	19	0	0.0	0	0.0	0	10	6.2	105	0.6	24
85 and older	3	1.8	29	0.6	20	0	0.0	0	0.0	0	5	3.0	54	0.4	11
Male															
All Males	1,254	0.5	13,724	0.6	1,109	1,382	0.5	13,104	0.4	617	16,644	6.1	183,172	0.5	23
Male, Disabled															
All Ages	1,182	2.1	13,026	0.6	1,122	420	0.8	4,425	0.4	665	11,431	20.8	127,809	0.5	26
5 and younger	14	0.4	166	0.6	4,329	403	10.8	4,236	0.4	591	47	1.3	544	0.3	6
6-14	21	0.2	240	1.1	28,019	8	0.1	96	1.0	1,769	1,433	12.0	16,740	0.4	18
15-20	13	0.1	154	1.1	18,462	5	0.1	56	0.9	2,699	1,529	16.9	17,764	0.5	23
21-44	98	0.7	1,098	0.5	3,175	4	0.0	37	1.0	3,158	3,591	25.3	39,718	0.5	29
45-64	1,025	6.5	11,263	0.6	74	0	0.0	0	0.0	0	4,778	30.2	52,480	0.6	26
65-74	11	3.8	105	0.5	44	0	0.0	0	0.0	0	51	17.4	539	0.7	31
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	1.6	12	0.4	11
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	6.3	12	0.9	38
Male, Other Eligibles															
All Ages	72	0.0	698	0.5	873	962	0.4	8,679	0.4	592	5,213	2.4	55,363	0.4	17
5 and younger	9	0.0	107	0.4	3,299	957	1.0	8,631	0.4	590	132	0.1	1,470	0.2	4
6-14	4	0.0	42	0.5	5,354	4	0.0	36	1.2	671	2,622	2.9	29,057	0.4	15
15-20	1	0.0	12	0.1	3	1	0.0	12	1.8	1,863	1,798	5.2	18,946	0.4	20
21-44	23	1.2	226	0.5	54	0	0.0	0	0.0	0	516	26.6	4,527	0.4	21
45-64	30	6.0	252	0.6	67	0	0.0	0	0.0	0	132	26.3	1,213	0.4	22
65-74	2	4.5	23	0.3	34	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	3	3.9	36	0.6	46	0	0.0	0	0.0	0	11	14.3	126	0.6	18
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	2.8	24	0.8	19
Unknown	0	0.0	0	0.0	0	157	2.2	1,072	0.5	649	3	0.0	25	0.2	1

Source: Data for this table are from the MAX 2007 file for Alabama, 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, ALABAMA, 2007

Beneficiary Characteristics	ANTIDIABETIC						ANTIVIRAL					
	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 Beneficiaries	Number of Benefit Months
All	29,203	4.2	324,786	0.6	\$42	15,811	2.2	171,200	0.2	\$63	703,122	6,532,248
Female												
All Females	21,779	5.2	243,564	0.6	40	9,484	2.2	102,286	0.2	60	421,957	3,863,926
Female, Disabled												
All Ages	17,330	29.6	198,848	0.6	42	2,648	4.5	30,441	0.3	149	58,606	645,010
5 and younger	7	0.2	84	0.5	66	88	3.1	1,056	0.2	38	2,866	29,873
6-14	83	1.4	996	0.6	63	227	3.7	2,667	0.2	42	6,100	70,271
15-20	231	4.5	2,671	0.4	42	163	3.2	1,904	0.2	61	5,137	57,936
21-44	3,420	19.1	39,625	0.5	37	983	5.5	11,301	0.4	190	17,950	198,830
45-64	13,218	51.7	151,200	0.6	43	1,175	4.6	13,369	0.3	157	25,565	277,186
65-74	367	50.1	4,228	0.7	49	12	1.6	144	0.3	94	733	8,146
75-84	2	1.0	20	0.3	16	0	0.0	0	0.0	0	197	2,152
85 and older	2	3.4	24	0.3	8	0	0.0	0	0.0	0	58	616
Female, Other Eligibles												
All Ages	4,449	1.2	44,716	0.4	34	6,836	1.9	71,845	0.1	23	363,351	3,218,916
5 and younger	40	0.0	423	0.5	76	1,692	1.9	18,383	0.1	6	87,472	804,024
6-14	457	0.5	4,882	0.6	70	2,117	2.4	22,980	0.1	10	89,214	858,458
15-20	623	1.1	6,473	0.4	39	1,185	2.1	12,092	0.2	18	55,615	484,282
21-44	2,704	2.1	26,747	0.4	25	1,763	1.4	17,508	0.2	59	127,945	1,046,411
45-64	596	21.9	5,888	0.5	32	78	2.9	870	0.2	76	2,724	22,263
65-74	12	22.2	124	0.6	44	0	0.0	0	0.0	0	54	525
75-84	14	8.6	149	0.7	34	1	0.6	12	0.1	1	162	1,497
85 and older	3	1.8	30	0.9	3	0	0.0	0	0.0	0	165	1,456
Male												
All Males	7,424	2.7	81,222	0.6	46	6,300	2.3	68,640	0.2	68	273,987	2,625,413
Male, Disabled												
All Ages	6,412	11.6	71,049	0.6	44	1,799	3.3	20,212	0.4	206	55,076	591,159
5 and younger	9	0.2	100	1.1	137	131	3.5	1,504	0.2	22	3,742	40,165
6-14	135	1.1	1,569	0.6	78	345	2.9	4,078	0.2	51	11,894	136,689
15-20	172	1.9	1,996	0.6	64	160	1.8	1,899	0.2	95	9,062	101,170
21-44	1,323	9.3	14,784	0.6	42	550	3.9	5,827	0.5	273	14,202	151,329
45-64	4,718	29.9	51,994	0.6	42	611	3.9	6,894	0.5	310	15,803	157,766
65-74	54	18.4	596	0.6	28	2	0.7	10	1.0	610	293	3,165
75-84	1	1.6	10	1.0	192	0	0.0	0	0.0	0	64	699
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	16	176
Male, Other Eligibles												
All Ages	1,012	0.5	10,173	0.6	62	4,501	2.1	48,428	0.1	11	218,911	2,034,254
5 and younger	62	0.1	722	0.7	89	1,912	2.1	20,828	0.1	5	92,599	847,070
6-14	300	0.3	3,224	0.6	75	2,061	2.3	22,074	0.1	10	88,961	857,905
15-20	305	0.9	3,102	0.6	70	483	1.4	5,120	0.1	18	34,721	309,073
21-44	214	11.0	1,973	0.5	33	29	1.5	256	0.2	136	1,937	14,472
45-64	112	22.4	981	0.5	36	16	3.2	150	0.4	416	501	3,908
65-74	6	13.6	46	0.5	10	0	0.0	0	0.0	0	44	377
75-84	10	13.0	89	0.4	29	0	0.0	0	0.0	0	77	762
85 and older	3	4.2	36	1.0	63	0	0.0	0	0.0	0	71	687
Unknown	0	0.0	0	0.0	0	27	0.4	274	0.1	5	7,178	42,909

Source: Data for this table are from the MAX 2007 file for Alabama, 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, ALABAMA, 2007

Beneficiary Characteristics	Rx \$ per Benefit Month	Number of Rx per Benefit Month	Number of All-Year Nursing Facility Residents	Benefit Months Among All-Year Nursing Facility Residents
All	\$486	7.3	1,301	13,694
Age				
0-64	551	8.2	1,047	11,120
65-74	409	6.5	91	937
75-84	141	2.6	72	719
85 and older	40	1.1	91	918
Unknown	0	0.0	0	0
Gender				
Female	495	7.5	702	7,474
Male	475	7.0	599	6,220
Unknown	0	0.0	0	0
Race				
White	493	7.6	619	6,466
African American	461	6.9	576	6,025
Other/unknown	571	8	106	1,203
Basis of Eligibility^c				
Aged	79	2.0	145	1,423
Disabled	533	7.9	1,156	12,271
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 Alabama, 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 935 beneficiaries who were in nursing facilities for part of their enrollment and their 9,429 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 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, ALABAMA, 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	0.4	0.0	0.0	0.4	\$31	\$18	\$1	\$12	\$75	\$493	\$99	\$33	3,471	\$258,803	764	58.7	8,483	
Biologicals	0.1	0.1	0.0	0.0	2	2	0	0	24	24	0	0	51	1,234	49	3.8	556	
Antineoplastic Agents	0.5	0.1	0.0	0.5	95	43	0	52	181	745	0	111	388	70,368	72	5.5	737	
Endocrine/Metabolic Drugs	1.3	0.5	0.0	0.7	85	67	2	16	67	131	58	22	7,539	502,716	541	41.6	5,943	
Cardiovascular Agents	2.2	0.2	0.1	2.0	63	16	7	40	28	85	79	21	17,833	504,305	756	58.1	7,990	
Respiratory Agents	0.8	0.2	0.0	0.5	41	26	1	15	53	116	50	27	5,243	276,057	608	46.7	6,681	
Gastrointestinal Agents	1.1	0.2	0.3	0.7	76	25	31	20	68	158	124	28	9,310	631,266	769	59.1	8,308	
Genitourinary Agents	0.7	0.4	0.0	0.3	57	39	1	17	81	99	90	56	2,345	189,301	302	23.2	3,342	
CNS Drugs	1.8	0.7	0.0	1.1	167	141	1	25	92	189	124	24	18,695	1,719,144	957	73.6	10,299	
Stimulants/Anti-obesity/Anorexia	0.5	0.3	0.0	0.2	70	65	1	5	136	236	69	21	129	17,532	21	1.6	249	
Miscellaneous Psychological/Neurological Agents	1.0	1.0	0.0	0.0	248	248	0	0	259	259	0	0	1,073	278,040	98	7.5	1,123	
Analgesics and Anesthetics	1.1	0.0	0.0	1.1	55	7	1	47	50	213	107	44	7,883	390,459	668	51.3	7,142	
Neuromuscular Agents	1.7	0.6	0.0	1.1	151	101	4	46	87	178	99	41	14,673	1,273,473	766	58.9	8,427	
Nutritional Products	0.7	0.0	0.0	0.7	12	0	0	12	17	18	26	17	3,452	58,947	440	33.8	4,780	
Hematological Agents	0.9	0.3	0.0	0.7	69	58	0	11	73	217	19	17	3,931	286,868	392	30.1	4,144	
Topical Products	0.5	0.1	0.0	0.3	21	12	1	8	44	85	58	25	3,580	156,866	650	50.0	7,361	
Miscellaneous Products	0.4	0.1	0.0	0.3	19	8	0	12	49	67	0	42	305	15,070	72	5.5	773	
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	25	0	0	0	74	0	0	0	260	19,318	71	5.5	788	
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.	100,161	6,649,767	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2007 file for Alabama, 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 935 beneficiaries who were in nursing facilities for part of their enrollment and their 9,429 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 Alabama, 0.4 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, ALABAMA, 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	
ANTIPSYCHOTICS	\$1,184,423	517	39.7	5,755	0.9	\$233	\$206	
ANTICONVULSANT	1,125,634	951	73.1	10,789	1.0	102	104	
ULCER DRUGS	465,844	731	56.2	8,187	0.7	86	57	
ANTIDEPRESSANTS	427,110	874	67.2	9,793	0.8	53	44	
ANTIDIABETIC	417,052	583	44.8	6,480	1.0	63	64	
ANALGESICS - Narcotic	327,967	802	61.6	8,804	0.7	54	37	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	278,040	113	8.7	1,306	0.8	259	213	
ANTIASTHMATIC	192,490	574	44.1	6,335	0.5	67	30	
ANTIHYPERTENSIVE	160,812	588	45.2	6,440	0.8	30	25	
MISC. ENDOCRINE	129,479	90	6.9	1,051	0.6	194	123	
Total	4,708,851	5,823	n.a.	64,940	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2007 file for Alabama, 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 935 beneficiaries who were in nursing facilities for part of their enrollment and their 9,429 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.

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, ALABAMA, 2007

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTICONSULSANT				
	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	52,267	\$4,708,851	517	39.7	5,755	0.9	\$206	951	73.1	10,789	1.0	\$104
Female												
All Females	29,657	2,664,154	302	43.0	3,390	0.9	209	493	70.2	5,583	1.0	99
Female, Disabled												
All Ages	28,918	2,626,321	294	48.8	3,307	0.9	212	479	79.6	5,432	1.0	101
64 or younger	26,624	2,418,708	254	47.9	2,867	0.9	217	447	84.3	5,097	1.0	104
65-74	2,179	196,807	39	83.0	428	1.0	185	31	66.0	323	0.7	57
75-84	115	10,806	1	7.7	12	1.2	75	1	7.7	12	1.1	51
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	739	37,833	8	8.0	83	0.7	76	14	14.0	151	0.8	38
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	254	15,013	4	30.8	48	0.7	75	5	38.5	56	0.7	22
75-84	235	11,625	1	3.1	7	1.7	361	5	15.6	50	0.8	29
85 and older	250	11,195	3	5.5	28	0.4	6	4	7.3	45	1.0	67
Male												
All Males	22,610	2,044,697	215	35.9	2,365	0.9	201	458	76.5	5,206	1.0	110
Male, Disabled												
All Ages	22,077	2,011,199	207	37.4	2,297	0.9	203	451	81.4	5,131	1.1	111
64 or younger	21,162	1,911,186	193	37.3	2,129	0.8	195	432	83.6	4,903	1.1	112
65-74	692	67,279	9	36.0	108	1.1	293	16	64.0	192	0.9	72
75-84	190	28,887	5	55.6	60	1.2	302	3	33.3	36	1.0	183
85 and older	33	3,847	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	533	33,498	8	17.8	68	0.8	153	7	15.6	75	0.6	39
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	24	851	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	371	23,647	6	33.3	44	1.0	165	5	27.8	54	0.4	33
85 and older	138	9,000	2	9.5	24	0.5	131	2	9.5	21	1.1	55
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 Alabama, 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 935 beneficiaries who were in nursing facilities for part of their enrollment and their 9,429 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.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, ALABAMA, 2007

Beneficiary Characteristics	ULCER DRUGS					ANTIDEPRESSANTS					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 \$
		Facility Residents	Among Users	of Rx	Rx \$		Facility Residents	Among Users	of Rx	Rx \$		Facility Residents	Among Users	of Rx	Rx \$
All	731	56.2	8,187	0.7	\$57	874	67.2	9,793	0.8	\$44	583	44.8	6,480	1.0	\$64
Female															
All Females	400	57.0	4,534	0.7	56	518	73.8	5,857	0.8	45	375	53.4	4,174	1.0	68
Female, Disabled															
All Ages	393	65.3	4,466	0.7	57	501	83.2	5,688	0.8	45	363	60.3	4,046	1.1	69
64 or younger	367	69.2	4,187	0.7	56	467	88.1	5,301	0.8	46	318	60.0	3,533	1.1	70
65-74	23	48.9	243	0.6	68	32	68.1	363	0.8	39	45	95.7	513	0.9	67
75-84	3	23.1	36	0.6	40	2	15.4	24	0.8	44	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	7	7.0	68	0.6	31	17	17.0	169	0.6	19	12	12.0	128	0.7	27
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	3	23.1	25	0.8	63	6	46.2	57	0.7	23	3	23.1	31	0.5	38
75-84	1	3.1	12	0.3	6	7	21.9	69	0.6	20	6	18.8	67	0.7	32
85 and older	3	5.5	31	0.5	16	4	7.3	43	0.4	10	3	5.5	30	0.9	3
Male															
All Males	331	55.3	3,653	0.7	58	356	59.4	3,936	0.8	42	208	34.7	2,306	1.0	58
Male, Disabled															
All Ages	326	58.8	3,596	0.7	58	346	62.5	3,822	0.8	43	205	37.0	2,281	1.0	58
64 or younger	317	61.3	3,498	0.6	58	334	64.6	3,699	0.8	43	203	39.3	2,257	1.0	58
65-74	8	32.0	86	0.8	57	10	40.0	99	0.9	38	2	8.0	24	0.8	32
75-84	1	11.1	12	1.0	9	1	11.1	12	0.4	11	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	1	33.3	12	0.9	38	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	5	11.1	57	0.9	39	10	22.2	114	0.7	23	3	6.7	25	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	1	16.7	12	0.9	58	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	2	11.1	24	1.1	54	8	44.4	90	0.7	24	3	16.7	25	0.6	26
85 and older	2	9.5	21	0.7	11	2	9.5	24	0.8	19	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 Alabama, 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 935 beneficiaries who were in nursing facilities for part of their enrollment and their 9,429 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.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, ALABAMA, 2007

Beneficiary Characteristics	ANALGESICS - Narcotic					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIASTHMATIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	802	61.6	8,804	0.7	\$37	113	8.7	1,306	0.8	\$213	574	44.1	6,335	0.5	\$30
Female															
All Females	452	64.4	4,999	0.6	27	69	9.8	803	0.8	261	327	46.6	3,714	0.5	30
Female, Disabled															
All Ages	444	73.8	4,926	0.6	27	60	10.0	705	0.8	285	305	50.7	3,480	0.5	32
64 or younger	418	78.9	4,653	0.6	27	48	9.1	562	0.8	324	282	53.2	3,214	0.5	32
65-74	24	51.1	249	0.5	14	11	23.4	131	0.8	139	22	46.8	254	0.5	30
75-84	2	15.4	24	1.0	181	1	7.7	12	0.4	77	1	7.7	12	0.1	8
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	8	8.0	73	0.8	41	9	9.0	98	0.9	92	22	22.0	234	0.3	8
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	4	30.8	33	1.1	67	2	15.4	19	0.9	149	5	38.5	60	0.3	6
75-84	3	9.4	31	0.5	26	2	6.3	19	0.6	63	6	18.8	57	0.4	13
85 and older	1	1.8	9	0.3	0	5	9.1	60	0.9	84	11	20.0	117	0.3	7
Male															
All Males	350	58.4	3,805	0.8	51	44	7.3	503	0.8	135	247	41.2	2,621	0.4	31
Male, Disabled															
All Ages	343	61.9	3,721	0.8	51	39	7.0	446	0.8	134	238	43.0	2,516	0.4	31
64 or younger	335	64.8	3,625	0.8	52	34	6.6	386	0.8	136	217	42.0	2,298	0.4	32
65-74	6	24.0	72	0.5	25	3	12.0	36	0.8	111	15	60.0	146	0.2	13
75-84	2	22.2	24	0.2	1	0	0.0	0	0.0	0	4	44.4	48	0.8	55
85 and older	0	0.0	0	0.0	0	2	66.7	24	0.8	140	2	66.7	24	0.1	1
Male, Other Eligibles															
All Ages	7	15.6	84	0.8	36	5	11.1	57	0.9	147	9	20.0	105	0.3	14
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	1	16.7	12	1.1	13	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	4	22.2	48	1.0	60	3	16.7	36	0.9	144	8	44.4	96	0.4	15
85 and older	2	9.5	24	0.4	1	2	9.5	21	0.9	152	1	4.8	9	0.1	7
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 Alabama, 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 935 beneficiaries who were in nursing facilities for part of their enrollment and their 9,429 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, ALABAMA, 2007

Beneficiary Characteristics	ANTIHYPERTENSIVE					MISC. ENDOCRINE					Benefit Months Among All-Year Nursing Facility Residents	
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	All-Year Nursing Facility Residents	Nursing Facility Residents
All	588	45.2	6,440	0.8	\$25	90	6.9	1,051	0.6	\$123	1,301	13,694
Female												
All Females	315	44.9	3,456	0.8	25	63	9.0	735	0.7	75	702	7,474
Female, Disabled												
All Ages	301	50.0	3,323	0.8	25	61	10.1	711	0.7	77	602	6,495
64 or younger	277	52.3	3,065	0.8	26	57	10.8	663	0.7	78	530	5,750
65-74	24	51.1	258	0.8	12	2	4.3	24	0.7	67	47	485
75-84	0	0.0	0	0.0	0	2	15.4	24	0.7	59	13	136
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	12	124
Female, Other Eligibles												
All Ages	14	14.0	133	0.7	21	2	2.0	24	0.9	15	100	979
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	5	38.5	50	0.7	15	0	0.0	0	0.0	0	13	128
75-84	4	12.5	38	0.7	28	1	3.1	12	1.1	17	32	292
85 and older	5	9.1	45	0.7	22	1	1.8	12	0.7	12	55	559
Male												
All Males	273	45.6	2,984	0.9	25	27	4.5	316	0.5	236	599	6,220
Male, Disabled												
All Ages	261	47.1	2,846	0.9	26	26	4.7	304	0.5	244	554	5,776
64 or younger	248	48.0	2,700	0.8	25	25	4.8	292	0.5	251	517	5,370
65-74	11	44.0	122	1.0	32	1	4.0	12	1.0	84	25	262
75-84	2	22.2	24	1.0	52	0	0.0	0	0.0	0	9	108
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	36
Male, Other Eligibles												
All Ages	12	26.7	138	0.9	10	1	2.2	12	0.4	30	45	444
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	6	62
75-84	9	50.0	102	0.8	10	0	0.0	0	0.0	0	18	183
85 and older	3	14.3	36	1.0	11	1	4.8	12	0.4	30	21	199
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 Alabama, released by CMS in 3/2010. This table was produced on 10/06/2010.

- 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 935 beneficiaries who were in nursing facilities for part of their enrollment and their 9,429 benefit months were excluded from the analysis.
- 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.
- 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>.
 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}
 ALABAMA, 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	188,868	26.9	1.0	675,609	\$17	\$11,642,757	\$17	2.9	703,122	
Age										
5 and younger	61,270	31.6	0.7	131,156	11	2,224,651	17	4.0	193,807	
6-14	49,746	25.4	0.5	107,245	13	2,512,979	23	2.9	196,216	
15-20	21,487	20.6	0.5	49,628	10	1,066,283	21	2.4	104,538	
21-44	29,933	18.5	0.9	149,262	15	2,372,375	16	2.7	162,034	
45-64	25,529	57.2	5.2	230,432	76	3,366,880	15	2.8	44,593	
65-74	625	55.6	5.4	6,036	72	81,301	13	3.2	1,124	
75-84	180	36.0	2.6	1,290	24	12,209	9	5.4	500	
85 and older	98	31.6	1.8	560	20	6,079	11	12.5	310	
Unknown	0	0.0	0.0	0	0	0	0	0.0	0	
Basis of Eligibility^c										
Aged	185	32.9	2.0	1,096	21	11,687	11	5.5	562	
Disabled	51,512	45.3	3.3	372,604	66	7,524,316	20	3.0	113,682	
Adults	18,170	13.0	0.5	63,121	6	842,737	13	3.5	140,153	
Children	118,793	26.5	0.5	237,633	7	3,249,596	14	2.7	448,283	
Unknown	208	47.1	2.6	1,155	33	14,421	12	1.8	442	
Gender										
Female	109,801	26.0	1.0	434,658	17	7,120,150	16	3.3	421,957	
Male	78,077	28.5	0.9	239,111	16	4,494,460	19	2.5	273,987	
Unknown	990	13.8	0.3	1,840	4	28,147	15	2.4	7,178	
Race										
White	93,684	31.1	1.2	372,847	21	6,297,068	17	3.0	301,643	
African American	78,037	23.0	0.7	239,660	12	3,976,317	17	2.6	339,648	
Other/unknown	17,147	27.7	1.0	63,102	22	1,369,372	22	3.9	61,831	
Use of Nursing Facilities^d										
Entire year	808	62.1	7.4	9,576	122	158,383	17	2.4	1,301	
Part year	720	77.0	6.8	6,379	116	108,855	17	2.7	935	
None	187,340	26.7	0.9	659,654	16	11,375,519	17	3.0	700,886	
Maintenance Assistance Status										
Cash	74,260	40.7	2.4	442,721	46	8,322,855	19	3.0	182,582	
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0	
Poverty related	105,798	26.0	0.5	210,552	7	2,879,584	14	2.9	407,319	
Other/unknown	8,810	7.8	0.2	22,336	4	440,318	20	2.7	113,221	

Source: Data for this table are from the MAX 2007 file for Alabama, 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}
 ALABAMA, 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	0.1	\$2	\$17	\$0	\$0	6,532,248
Age						
5 and younger	0.1	1	17	0	0	1,763,555
6-14	0.1	1	23	0	0	1,923,793
15-20	0.1	1	21	0	0	952,477
21-44	0.1	2	16	0	1	1,411,042
45-64	0.5	7	15	0	2	461,123
65-74	0.5	7	13	0	2	12,213
75-84	0.3	2	9	0	1	5,110
85 and older	0.2	2	11	0	1	2,935
Unknown	0.0	0	0	0	0	0
Basis of Eligibility^c						
Aged	0.2	2	11	0	1	5,220
Disabled	0.3	6	20	0	1	1,236,169
Adults	0.1	1	13	0	0	1,128,926
Children	0.1	1	14	0	0	4,157,841
Unknown	0.3	4	12	0	1	4,092
Gender						
Female	0.1	2	16	0	0	3,863,926
Male	0.1	2	19	0	0	2,625,413
Unknown	0.0	1	15	0	0	42,909
Race						
White	0.1	2	17	0	1	2,769,353
African American	0.1	1	17	0	0	3,207,061
Other/unknown	0.1	2	22	0	0	555,834
Use of Nursing Facilities^d						
Entire year	0.7	12	17	1	5	13,694
Part year	0.7	12	17	0	4	9,429
None	0.1	2	17	0	0	6,509,125
Maintenance Assistance Status						
Cash	0.2	4	19	0	1	1,871,783
Medically needy	0.0	0	0	0	0	0
Poverty related	0.1	1	14	0	0	3,692,489
Other/unknown	0.0	0	20	0	0	967,976

Source: Data for this table are from the MAX 2007 file for Alabama, 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}
 ALABAMA, 2007

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a		Number Rx as a	
				Percentage of All Part D Excluded Rx \$	Total Number Rx. \$ per Rx	Percentage of All Part D Excluded Rx	Excluded Rx
All	244,078	\$48	\$11,642,757	100.0	675,609	\$17	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	10	46	464	0.0	10	46	0.0
Drugs for cosmetic purposes	102	14	1,396	0.0	131	11	0.0
Cough and cold medications	118,127	26	3,080,018	26.5	214,718	14	31.8
Vitamins and minerals	13,432	86	1,151,509	9.9	65,502	18	9.7
Non-prescription drugs	77,261	56	4,364,448	37.5	196,576	22	29.1
Barbiturates	1,622	57	92,623	0.8	12,657	7	1.9
Benzodiazepines	26,012	83	2,166,924	18.6	168,079	13	24.9
Other Part D Excl Rx Drugs	7,512	105	785,375	6.7	17,936	44	2.7

Source: Data for this table are from the MAX 2007 file for Alabama, 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, ALABAMA, 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	703,187	576	113,733	140,153	448,283	442	6,533,149	5,427	1,236,863	1,128,926	4,157,841	4,092
Age												
5 and younger	193,807	0	6,608	5	187,194	0	1,763,555	0	70,038	12	1,693,505	0
6-14	196,216	0	17,994	23	178,199	0	1,923,793	0	206,960	101	1,716,732	0
15-20	104,538	0	14,199	7,706	82,633	0	952,477	0	159,106	48,199	745,172	0
21-44	162,040	0	32,158	129,522	256	104	1,411,108	0	350,225	1,057,552	2,431	900
45-64	44,608	0	41,383	2,889	0	336	461,324	0	435,153	22,992	0	3,179
65-74	1,143	93	1,040	8	0	2	12,470	869	11,518	70	0	13
75-84	518	244	274	0	0	0	5,395	2,349	3,046	0	0	0
85 and older	317	239	77	0	1	0	3,027	2,209	817	0	1	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Gender												
Female	421,990	382	58,633	137,842	224,691	442	3,864,426	3,542	645,409	1,111,904	2,099,479	4,092
Male	274,019	194	55,100	2,311	216,414	0	2,625,814	1,885	591,454	17,022	2,015,453	0
Unknown	7,178	0	0	0	7,178	0	42,909	0	0	0	42,909	0
Race												
White	301,654	212	44,042	63,797	193,351	252	2,769,490	1,808	472,425	505,446	1,787,566	2,245
African American	339,693	292	56,247	68,481	214,498	175	3,207,728	2,848	627,035	575,376	2,000,762	1,707
Other/unknown	61,840	72	13,444	7,875	40,434	15	555,931	771	137,403	48,104	369,513	140
Use of Nursing Facilities^c												
Entire year	1,305	148	1,157	0	0	0	13,741	1,467	12,274	0	0	0
Part year	935	46	878	7	2	2	9,457	446	8,897	66	24	24
None	700,947	382	111,698	140,146	448,281	440	6,509,951	3,514	1,215,692	1,128,860	4,157,817	4,068
Maintenance Assistance Status												
Cash	182,637	295	112,687	25,211	44,444	0	1,872,565	3,183	1,226,553	220,781	422,048	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	407,321	8	22	24,297	382,552	442	3,692,516	89	212	153,848	3,534,275	4,092
Other/unknown	113,229	273	1,024	90,645	21,287	0	968,068	2,155	10,098	754,297	201,518	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	703,083	548	113,657	140,153	448,283	442	6,532,043	5,154	1,236,030	1,128,926	4,157,841	4,092
FFS part year, with Rx claims	17	5	12	0	0	0	200	56	144	0	0	0
FFS part year, no Rx claims	22	9	13	0	0	0	232	79	153	0	0	0
MC all year, with Rx claims	20	4	16	0	0	0	222	48	174	0	0	0
MC all year, no Rx claims	45	10	35	0	0	0	452	90	362	0	0	0

Source: Data for this table are from the MAX 2007 file for Alabama, 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, ALABAMA, 2007

	Beneficiaries and Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	703,187	6,533,149	703,122	6,532,248	0	901
Fee-for-service (FFS) all year	703,083	6,532,043	703,083	6,532,043	0	0
FFS part year, with Rx claims	17	200	17	75	0	125
FFS part year, with no Rx claims	22	232	22	130	0	102
Managed care (MC) all year, with Rx claims	20	222	0	0	0	222
MC all year, with no Rx claims	45	452	0	0	0	452

Source: Data for this table are from the MAX 2007 file for Alabama, 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