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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, CALIFORNIA, 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	5,659,583	76,396	484,006	3,030,257	2,061,462	7,462	38,341,647	719,612	5,083,893	21,509,316	10,958,586	70,240
Age												
5 and younger	952,853	0	16,191	1	936,659	2	4,557,293	0	143,596	3	4,413,690	4
6-14	683,644	0	40,003	38	643,603	0	4,123,733	0	426,178	144	3,697,411	0
15-20	911,215	0	36,956	410,549	463,691	19	6,141,144	0	393,894	2,969,632	2,777,498	120
21-44	2,533,379	0	134,542	2,379,618	17,478	1,741	18,535,334	0	1,428,147	17,022,564	69,896	14,727
45-64	491,509	18	246,096	239,743	14	5,638	4,149,782	89	2,578,973	1,515,680	52	54,988
65-74	54,315	45,134	8,872	247	0	62	513,688	414,224	97,962	1,101	0	401
75-84	26,047	24,846	1,164	36	1	0	256,732	243,410	13,176	144	2	0
85 and older	6,613	6,398	182	25	8	0	63,929	61,889	1,967	48	25	0
Unknown	8	0	0	0	8	0	12	0	0	0	12	0
Gender												
Female	3,865,469	47,354	235,579	2,498,011	1,077,070	7,455	27,079,183	449,071	2,511,571	18,249,053	5,799,302	70,186
Male	1,794,110	29,042	248,425	532,246	984,390	7	11,262,448	270,541	2,572,314	3,260,263	5,159,276	54
Unknown	4	0	2	0	2	0	16	0	8	0	8	0
Race												
White	1,241,127	10,213	179,145	650,261	399,708	1,800	9,492,262	99,589	1,885,941	4,639,353	2,849,662	17,717
African American	486,983	2,388	90,160	220,553	173,423	459	3,294,820	22,551	948,200	1,375,572	944,146	4,351
Other/unknown	3,931,473	63,795	214,701	2,159,443	1,488,331	5,203	25,554,565	597,472	2,249,752	15,494,391	7,164,778	48,172
Use of Nursing Facilities^c												
Entire year	7,660	1,631	5,934	36	55	4	82,762	17,435	64,495	245	559	28
Part year	9,109	1,580	7,144	283	69	33	91,077	15,549	72,761	1,925	539	303
None	5,642,814	73,185	470,928	3,029,938	2,061,338	7,425	38,167,808	686,628	4,946,637	21,507,146	10,957,488	69,909
Maintenance Assistance Status												
Cash	1,830,818	8,632	414,897	498,018	909,271	0	12,231,947	93,108	4,511,265	2,562,865	5,064,709	0
Medically needy	294,654	60,291	40,078	57,054	137,231	0	1,749,961	559,799	329,449	217,937	642,776	0
Poverty-related	331,125	6,942	14,916	79,014	222,791	7,462	1,682,322	62,048	124,499	403,594	1,021,941	70,240
Other/unknown	3,202,986	531	14,115	2,396,171	792,169	0	22,677,417	4,657	118,680	18,324,920	4,229,160	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	4,511,179	72,364	456,993	2,695,651	1,278,858	7,313	34,507,172	702,766	4,948,337	20,438,721	8,347,831	69,517
FFS part year, with Rx claims	337,218	2,060	17,686	102,763	214,601	108	1,396,717	10,293	98,005	414,177	873,655	587
FFS part year, no Rx claims	811,186	1,972	9,327	231,843	568,003	41	2,437,758	6,553	37,551	656,418	1,737,100	136

Source: Data for this table are from the MAX 2007 file for California, 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, CALIFORNIA, 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	31.5	3.4	\$372	\$109	\$2,210	16.8	5,659,583
Age							
5 and younger	32.4	1.2	66	58	1,512	4.4	952,853
6-14	27.5	1.7	225	135	1,840	12.2	683,644
15-20	24.8	1.3	160	125	1,388	11.5	911,215
21-44	29.1	2.1	243	117	1,504	16.1	2,533,379
45-64	54.7	18.7	2,040	109	8,192	24.9	491,509
65-74	67.7	16.8	1,532	91	7,392	20.7	54,315
75-84	64.4	15.7	1,377	88	8,306	16.6	26,047
85 and older	53.2	13.3	1,025	77	13,205	7.8	6,613
Unknown	0.0	0.0	0	0	6	0.0	8
Basis of Eligibility^e							
Aged	64.8	14.8	1,318	89	7,134	18.5	76,396
Disabled	74.4	25.6	3,220	126	15,585	20.7	484,006
Adults	26.1	1.1	84	77	624	13.5	3,030,257
Children	28.2	1.1	87	77	1,191	7.3	2,061,462
Unknown	69.9	12.7	1,583	124	9,397	16.8	7,462
Gender							
Female	32.1	3.1	298	96	1,762	16.9	3,865,469
Male	30.4	4.1	532	131	3,174	16.8	1,794,110
Unknown	0.0	0.0	0	0	1,208	0.0	4
Race							
White	37.8	6.3	708	112	3,567	19.9	1,241,127
African American	32.0	5.0	587	117	3,727	15.8	486,983
Other/unknown	29.5	2.3	239	105	1,593	15.0	3,931,473
Use of Nursing Facilities^f							
Entire year	88.7	77.3	6,840	89	90,285	7.6	7,660
Part year	92.0	57.3	5,452	95	71,454	7.6	9,109
None	31.4	3.2	355	111	1,978	17.9	5,642,814
Maintenance Assistance Status							
Cash	43.7	7.6	870	115	4,682	18.6	1,830,818
Medically needy	40.6	6.7	703	105	5,569	12.6	294,654
Poverty related	31.8	2.1	205	96	2,373	8.6	331,125
Other/unknown	23.8	0.8	74	88	470	15.8	3,202,986

Source: Data for this table are from the MAX 2007 file for California, 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, CALIFORNIA, 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	0.5	\$55	16.8	68.5	25.1	2.4	2.8	1.0	0.2	\$326	5,659,583	38,341,647
Age												
5 and younger	0.2	14	4.4	67.6	29.8	1.9	0.7	0.1	0.0	316	952,853	4,557,293
6-14	0.3	37	12.2	72.5	24.1	2.0	1.2	0.2	0.0	305	683,644	4,123,733
15-20	0.2	24	11.5	75.2	22.4	1.3	0.9	0.2	0.0	206	911,215	6,141,144
21-44	0.3	33	16.1	70.9	25.4	1.5	1.6	0.5	0.1	206	2,533,379	18,535,334
45-64	2.2	242	24.9	45.3	19.8	8.4	16.6	8.0	1.8	970	491,509	4,149,782
65-74	1.8	162	20.7	32.3	31.3	13.3	17.2	4.9	0.9	782	54,315	513,688
75-84	1.6	140	16.6	35.6	30.6	12.4	16.2	4.3	0.8	843	26,047	256,732
85 and older	1.4	106	7.8	46.8	26.1	8.9	12.8	4.7	0.8	1,366	6,613	63,929
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	4	8	12
Basis of Eligibility^e												
Aged	1.6	140	18.5	35.2	31.6	12.9	15.7	3.9	0.7	757	76,396	719,612
Disabled	2.4	307	20.7	25.6	28.3	11.5	21.9	10.4	2.3	1,484	484,006	5,083,893
Adults	0.2	12	13.5	73.9	24.0	1.1	0.8	0.1	0.0	88	3,030,257	21,509,316
Children	0.2	16	7.3	71.8	25.6	1.7	0.7	0.1	0.0	224	2,061,462	10,958,586
Unknown	1.4	168	16.8	30.1	37.2	14.5	15.5	2.5	0.2	998	7,462	70,240
Gender												
Female	0.4	43	16.9	67.9	26.5	2.0	2.4	0.9	0.2	252	3,865,469	27,079,183
Male	0.6	85	16.8	69.6	22.1	3.1	3.6	1.3	0.3	506	1,794,110	11,262,448
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	302	4	16
Race												
White	0.8	93	19.9	62.2	26.6	3.4	4.9	2.4	0.5	466	1,241,127	9,492,262
African American	0.7	87	15.8	68.0	22.2	3.3	4.4	1.7	0.4	551	486,983	3,294,820
Other/unknown	0.4	37	15.0	70.5	25.0	1.9	1.9	0.6	0.1	245	3,931,473	25,554,565
Use of Nursing Facilities^f												
Entire year	7.2	633	7.6	11.3	6.7	3.9	19.2	35.7	23.3	8,356	7,660	82,762
Part year	5.7	545	7.6	8.0	11.3	9.1	28.2	29.5	13.9	7,146	9,109	91,077
None	0.5	53	17.9	68.6	25.1	2.4	2.7	1.0	0.2	293	5,642,814	38,167,808
Maintenance Assistance Status												
Cash	1.1	130	18.6	56.3	29.2	4.7	6.5	2.7	0.6	701	1,830,818	12,231,947
Medically needy	1.1	118	12.6	59.4	24.3	6.3	7.3	2.2	0.5	938	294,654	1,749,961
Poverty related	0.4	40	8.6	68.2	27.1	2.2	2.0	0.5	0.1	467	331,125	1,682,322
Other/unknown	0.1	11	15.8	76.2	22.6	0.7	0.4	0.1	0.0	66	3,202,986	22,677,417

Source: Data for this table are from the MAX 2007 file for California, 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, CALIFORNIA, 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	0.5	\$55	\$109	0.2	\$40	\$225	0.0	\$6	\$132	0.3	\$9	\$33
Age												
5 and younger	0.2	14	58	0.0	10	216	0.0	1	61	0.2	3	17
6-14	0.3	37	135	0.1	31	272	0.0	2	109	0.1	4	28
15-20	0.2	24	125	0.1	19	247	0.0	2	121	0.1	3	30
21-44	0.3	33	117	0.1	24	238	0.0	3	136	0.2	6	36
45-64	2.2	242	109	0.8	169	218	0.2	29	142	1.2	43	35
65-74	1.8	162	91	0.7	112	166	0.2	22	122	0.9	27	29
75-84	1.6	140	88	0.6	97	154	0.2	20	117	0.8	22	28
85 and older	1.4	106	77	0.5	72	143	0.1	15	105	0.7	19	26
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	1.6	140	89	0.6	98	157	0.2	20	119	0.8	22	28
Disabled	2.4	307	126	0.9	227	257	0.2	31	144	1.3	47	36
Adults	0.2	12	77	0.1	7	139	0.0	2	118	0.1	3	34
Children	0.2	16	77	0.1	12	196	0.0	1	88	0.1	3	20
Unknown	1.4	168	124	0.5	122	266	0.1	20	161	0.8	26	33
Gender												
Female	0.4	43	96	0.2	29	190	0.0	5	128	0.2	8	33
Male	0.6	85	131	0.2	65	280	0.1	7	140	0.4	12	33
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.8	93	112	0.3	66	219	0.1	11	138	0.4	16	35
African American	0.7	87	117	0.2	64	263	0.1	9	145	0.4	14	32
Other/unknown	0.4	37	105	0.1	27	220	0.0	4	123	0.2	6	31
Use of Nursing Facilities^e												
Entire year	7.2	633	89	2.2	428	194	0.5	54	112	4.4	145	33
Part year	5.7	545	95	1.8	374	213	0.4	55	127	3.5	113	32
None	0.5	53	111	0.2	38	226	0.0	6	133	0.3	9	33
Maintenance Assistance Status												
Cash	1.1	130	115	0.4	95	243	0.1	14	137	0.6	21	33
Medically needy	1.1	118	105	0.4	86	214	0.1	14	126	0.6	18	30
Poverty related	0.4	40	96	0.1	28	240	0.0	5	131	0.3	7	27
Other/unknown	0.1	11	88	0.0	7	150	0.0	1	110	0.1	2	38

Source: Data for this table are from the MAX 2007 file for California, 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 California, 2.7 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, CALIFORNIA, 2007

Therapeutic Category	Number of Rx per Benefit Month												Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
	Among Users				\$ per Benefit Month Among Users				\$ per Rx								
	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	\$26	\$18	\$3	\$4	\$103	\$437	\$97	\$24	1,958,235	\$200,949,015	855,759	15.1	7,848,904
Biologicals	0.2	0.2	0.0	0.0	208	208	0	0	1075	1,075	0	0	20,819	22,385,778	10,938	0.2	107,551
Antineoplastic Agents	0.5	0.2	0.0	0.3	197	167	3	28	431	976	983	97	71,901	30,963,099	14,871	0.3	156,841
Endocrine/Metabolic Drugs	0.4	0.2	0.0	0.2	36	25	3	8	92	140	96	45	2,639,939	241,871,281	696,150	12.3	6,662,365
Cardiovascular Agents	1.1	0.3	0.2	0.6	77	41	21	14	72	134	109	26	2,945,655	212,750,438	265,925	4.7	2,779,104
Respiratory Agents	0.4	0.2	0.0	0.1	34	28	2	3	82	116	106	23	1,560,737	127,336,962	390,273	6.9	3,787,303
Gastrointestinal Agents	0.5	0.3	0.0	0.2	67	59	4	4	139	200	270	25	1,113,419	154,224,651	221,476	3.9	2,300,734
Genitourinary Agents	0.2	0.1	0.0	0.1	15	9	1	4	71	103	108	41	385,533	27,240,950	192,860	3.4	1,850,250
CNS Drugs	1.0	0.4	0.1	0.4	164	130	17	17	165	295	141	39	3,181,882	523,689,644	303,877	5.4	3,196,583
Stimulants/Anti-obesity/Anorexia	0.5	0.4	0.0	0.1	78	70	2	5	144	162	162	57	179,211	25,770,367	30,949	0.5	331,472
Miscellaneous Psychological/ Neurological Agents	0.5	0.5	0.0	0.0	153	152	1	0	333	335	154	138	42,850	14,252,297	8,263	0.1	93,417
Analgesics and Anesthetics	0.4	0.0	0.0	0.4	26	9	5	11	62	429	465	29	2,159,875	134,128,190	538,758	9.5	5,177,652
Neuromuscular Agents	0.8	0.3	0.0	0.5	93	60	6	27	119	219	174	57	1,420,671	168,912,874	166,965	3.0	1,812,175
Nutritional Products	0.2	0.0	0.0	0.2	5	0	0	4	20	50	27	19	194,993	3,906,780	89,297	1.6	818,555
Hematological Agents	0.5	0.2	0.0	0.3	233	225	0	8	472	1,455	42	24	283,131	133,744,787	55,480	1.0	573,258
Topical Products	0.3	0.1	0.0	0.2	12	8	0	4	46	109	81	22	933,847	43,130,758	405,375	7.2	3,694,896
Miscellaneous Products	0.3	0.2	0.0	0.1	87	78	4	5	340	420	312	87	93,231	31,679,721	40,250	0.7	364,906
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	31	0	0	0	134	0	0	0	64,932	8,684,572	26,021	0.5	278,971
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.	19,250,861	2,105,622,164	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for California, 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 California, 2.7 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>.
- 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, CALIFORNIA, 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	Rx \$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$364,841,430	169,571	3.0	1,897,889	0.6	\$315	\$192
ANTICONVULSANT	153,418,514	157,642	2.8	1,731,670	0.6	144	89
ANTIVIRAL	128,158,650	53,615	0.9	547,535	0.5	494	234
ULCER DRUGS	119,315,681	213,729	3.8	2,271,050	0.4	143	53
CONTRACEPTIVES	109,773,455	530,626	9.4	5,009,068	0.2	94	22
ANTIDEPRESSANTS	104,907,767	244,994	4.3	2,651,568	0.5	84	40
ANTIASTHMATIC	99,619,520	357,221	6.3	3,550,715	0.3	98	28
MISC. HEMATOLOGICAL	93,669,987	14,478	0.3	159,562	0.5	1,232	587
ANTIHYPERLIPIDEMIC	91,252,057	147,757	2.6	1,613,125	0.4	128	57
ANALGESICS - Narcotic	90,276,578	377,430	6.7	3,847,230	0.3	72	23
Total	1,355,233,639	2,267,063	n.a.	23,279,412	n.a.	n.a.	n.a.

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

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTICONSULSANT			
	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	8,777,465	\$1,355,233,639	169,571	3.0	1,897,889	0.6	\$192	157,642	2.8	1,731,670	0.6	\$89
Female												
All Females	5,533,884	707,478,234	84,698	2.2	946,251	0.6	171	89,536	2.3	983,400	0.6	82
Female, Disabled												
All Ages	3,325,472	490,800,610	68,557	29.1	788,022	0.6	186	69,798	29.6	795,468	0.6	89
5 and younger	18,211	2,260,970	27	0.4	307	0.4	88	570	8.4	6,192	0.7	97
6-14	54,999	8,987,493	1,062	7.8	12,162	0.5	161	2,417	17.8	27,540	0.7	141
15-20	72,623	12,146,540	2,285	16.7	25,861	0.5	161	2,820	20.6	32,196	0.8	148
21-44	770,519	129,574,656	23,659	38.9	270,156	0.6	190	20,963	34.5	237,371	0.7	110
45-64	2,339,519	328,542,234	40,430	30.1	467,051	0.6	185	41,937	31.2	479,687	0.6	72
65-74	65,661	8,850,243	1,019	18.8	11,666	0.7	215	1,035	19.1	11,844	0.6	66
75-84	3,889	436,243	75	10.2	819	0.7	165	56	7.6	638	0.6	45
85 and older	51	2,231	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	2,208,412	216,677,624	16,141	0.4	158,229	0.4	99	19,738	0.5	187,932	0.4	56
5 and younger	64,598	4,586,152	82	0.0	808	0.4	67	363	0.1	3,206	0.6	66
6-14	97,427	12,776,914	2,855	0.9	31,389	0.6	165	1,581	0.5	16,168	0.6	99
15-20	313,303	30,479,632	3,640	0.6	37,135	0.5	126	2,566	0.4	24,883	0.5	91
21-44	1,343,978	123,317,343	6,084	0.3	54,252	0.3	64	8,933	0.4	81,191	0.4	52
45-64	190,290	20,352,645	1,963	1.2	17,911	0.3	55	3,215	1.9	28,258	0.4	45
65-74	115,002	15,068,263	798	2.8	8,754	0.4	88	1,839	6.4	20,318	0.3	29
75-84	67,419	8,312,769	496	3.3	5,548	0.4	73	998	6.7	11,229	0.4	26
85 and older	16,395	1,783,906	223	5.6	2,432	0.5	68	243	6.1	2,679	0.4	29
Male												
All Males	3,243,581	647,755,405	84,873	4.7	951,638	0.6	213	68,106	3.8	748,270	0.7	97
Male, Disabled												
All Ages	2,616,122	557,259,919	71,313	28.7	812,002	0.7	223	57,674	23.2	650,483	0.7	101
5 and younger	23,065	4,340,298	91	1.0	973	0.4	70	686	7.3	7,390	0.7	92
6-14	104,524	46,571,486	3,684	13.9	41,640	0.6	172	3,643	13.8	41,521	0.7	128
15-20	114,753	36,118,249	4,827	20.8	54,378	0.6	200	4,086	17.6	46,268	0.8	147
21-44	800,996	195,566,999	31,059	42.1	352,727	0.7	235	21,361	29.0	241,348	0.7	119
45-64	1,536,571	269,723,943	31,040	27.8	355,260	0.7	221	27,356	24.5	307,853	0.6	77
65-74	34,669	4,757,486	591	17.1	6,775	0.7	196	519	15.0	5,844	0.7	62
75-84	1,507	179,202	21	4.9	249	1.0	240	21	4.9	235	0.7	50
85 and older	37	2,256	0	0.0	0	0.0	0	2	3.7	24	0.8	17
Male, Other Eligibles												
All Ages	627,459	90,495,486	13,560	0.9	139,636	0.5	158	10,432	0.7	97,787	0.5	70
5 and younger	96,955	7,916,079	158	0.0	1,653	0.4	104	492	0.1	4,390	0.5	79
6-14	147,981	25,171,881	5,771	1.8	63,109	0.6	182	2,367	0.7	24,471	0.6	93
15-20	105,843	23,147,273	4,776	2.0	49,074	0.6	164	2,424	1.0	23,568	0.6	96
21-44	107,343	12,262,601	1,516	0.4	12,522	0.3	88	2,402	0.6	18,778	0.4	50
45-64	62,539	7,930,718	468	0.6	3,869	0.4	89	1,196	1.6	9,733	0.4	47
65-74	63,848	8,595,644	484	2.9	5,249	0.5	114	945	5.6	10,263	0.4	37
75-84	35,844	4,677,967	288	2.9	3,110	0.4	62	504	5.0	5,465	0.4	30
85 and older	7,106	793,323	99	4.1	1,050	0.4	67	102	4.2	1,119	0.4	28
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 California, 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, CALIFORNIA, 2007

Beneficiary Characteristics	ANTIVIRAL					ULCER DRUGS					CONTRACEPTIVES				
	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	53,615	0.9	547,535	0.5	\$234	213,729	3.8	2,271,050	0.4	\$53	530,626	9.4	5,009,068	0.2	\$22
Female															
All Females	30,610	0.8	310,990	0.3	133	137,878	3.6	1,470,486	0.4	52	530,516	13.7	5,008,038	0.2	22
Female, Disabled															
All Ages	11,011	4.7	126,014	0.5	270	84,922	36.0	976,067	0.4	59	7,829	3.3	91,126	0.3	21
5 and younger	64	0.9	721	0.4	96	731	10.8	7,608	0.4	37	1	0.0	12	0.1	11
6-14	192	1.4	2,216	0.6	233	1,150	8.5	13,283	0.4	53	99	0.7	1,153	0.2	17
15-20	249	1.8	2,886	0.4	183	1,326	9.7	15,265	0.3	41	1,243	9.1	14,343	0.2	18
21-44	3,355	5.5	37,717	0.6	305	14,408	23.7	165,069	0.4	50	5,580	9.2	65,006	0.3	22
45-64	7,025	5.2	81,030	0.5	261	65,013	48.3	748,484	0.4	62	904	0.7	10,588	0.3	25
65-74	121	2.2	1,394	0.3	131	2,173	40.2	24,963	0.4	61	2	0.0	24	0.2	40
75-84	4	0.5	38	0.4	8	114	15.4	1,320	0.4	54	0	0.0	0	0.0	0
85 and older	1	0.8	12	0.2	4	7	5.5	75	0.3	5	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	19,599	0.5	184,976	0.2	39	52,956	1.5	494,419	0.3	37	522,687	14.4	4,916,912	0.2	22
5 and younger	240	0.1	2,208	0.2	22	2,899	0.6	21,711	0.2	13	32	0.0	266	0.2	17
6-14	620	0.2	6,187	0.3	85	3,266	1.0	31,007	0.2	15	1,250	0.4	10,212	0.2	18
15-20	2,441	0.4	22,652	0.2	29	5,064	0.8	46,745	0.2	18	105,365	16.5	931,446	0.2	19
21-44	13,942	0.7	130,717	0.2	29	18,812	0.9	166,858	0.2	33	405,590	20.4	3,873,232	0.2	23
45-64	1,721	1.0	16,004	0.3	102	9,319	5.5	78,792	0.3	49	10,444	6.1	101,692	0.3	24
65-74	413	1.4	4,669	0.2	103	8,136	28.4	88,393	0.3	49	3	0.0	28	0.3	18
75-84	175	1.2	1,995	0.2	30	4,464	30.0	49,895	0.3	52	2	0.0	24	0.6	27
85 and older	47	1.2	544	0.1	24	996	24.9	11,018	0.4	53	1	0.0	12	0.1	8
Male															
All Males	23,005	1.3	236,545	0.6	368	75,851	4.2	800,564	0.4	54	110	0.0	1,030	0.3	22
Male, Disabled															
All Ages	16,476	6.6	180,155	0.7	458	51,549	20.8	582,256	0.4	60	39	0.0	423	0.4	32
5 and younger	53	0.6	593	0.4	131	868	9.2	9,323	0.4	37	0	0.0	0	0.0	0
6-14	232	0.9	2,698	0.6	268	1,592	6.0	18,340	0.4	52	1	0.0	12	0.3	16
15-20	266	1.1	3,071	0.5	292	1,702	7.3	19,441	0.4	50	4	0.0	45	0.1	11
21-44	6,162	8.4	65,501	0.7	461	11,693	15.8	132,063	0.4	55	23	0.0	259	0.3	26
45-64	9,667	8.7	107,231	0.8	467	34,604	31.0	390,775	0.4	63	11	0.0	107	0.6	55
65-74	94	2.7	1,040	0.9	413	1,038	30.0	11,699	0.4	55	0	0.0	0	0.0	0
75-84	2	0.5	21	0.1	11	50	11.7	595	0.4	48	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	2	3.7	20	0.4	62	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	6,529	0.4	56,390	0.3	80	24,302	1.6	218,308	0.3	38	71	0.0	607	0.2	16
5 and younger	244	0.1	2,118	0.3	53	3,537	0.7	26,133	0.2	15	5	0.0	31	0.3	41
6-14	453	0.1	4,634	0.2	70	2,625	0.8	25,436	0.2	18	1	0.0	12	0.1	12
15-20	756	0.3	6,641	0.3	115	2,681	1.1	24,836	0.2	22	30	0.0	277	0.2	13
21-44	3,909	1.0	32,316	0.3	47	5,575	1.4	45,674	0.3	42	34	0.0	275	0.2	17
45-64	797	1.1	6,565	0.4	204	3,675	4.9	28,223	0.3	52	1	0.0	12	0.2	8
65-74	242	1.4	2,677	0.3	124	3,659	21.8	39,783	0.3	51	0	0.0	0	0.0	0
75-84	111	1.1	1,251	0.2	65	2,123	21.2	23,619	0.3	50	0	0.0	0	0.0	0
85 and older	17	0.7	188	0.2	38	427	17.6	4,604	0.4	55	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 California, 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, CALIFORNIA, 2007

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIASTHMATIC					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	244,994	4.3	2,651,568	0.5	\$40	357,221	6.3	3,550,715	0.3	\$28	14,478	0.3	159,562	0.5	\$587
Female															
All Females	163,393	4.2	1,758,704	0.5	39	194,732	5.0	1,973,859	0.3	29	7,227	0.2	80,719	0.5	71
Female, Disabled															
All Ages	110,028	46.7	1,255,225	0.5	42	90,115	38.3	1,033,118	0.3	37	5,195	2.2	59,344	0.5	72
5 and younger	23	0.3	266	0.3	8	2,671	39.6	29,270	0.3	38	7	0.1	83	0.3	2,051
6-14	680	5.0	7,604	0.5	29	4,210	31.0	48,732	0.3	33	11	0.1	127	0.8	225
15-20	2,012	14.7	22,679	0.4	31	3,008	21.9	34,902	0.3	28	7	0.1	76	0.4	399
21-44	26,274	43.2	296,642	0.5	41	17,369	28.6	199,015	0.3	30	247	0.4	2,800	0.4	126
45-64	79,367	59.0	908,801	0.5	43	60,904	45.3	699,269	0.4	40	4,674	3.5	53,388	0.5	66
65-74	1,606	29.7	18,447	0.5	36	1,854	34.3	20,879	0.4	39	234	4.3	2,690	0.5	72
75-84	65	8.8	774	0.6	44	97	13.1	1,045	0.5	42	15	2.0	180	0.6	66
85 and older	1	0.8	12	0.4	20	2	1.6	6	0.3	4	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	53,365	1.5	503,479	0.4	32	104,617	2.9	940,741	0.2	19	2,032	0.1	21,375	0.4	66
5 and younger	70	0.0	673	0.3	16	34,983	7.6	282,845	0.2	14	4	0.0	32	0.2	13
6-14	2,587	0.8	27,512	0.4	29	21,869	6.8	209,031	0.2	18	6	0.0	62	0.2	1,801
15-20	6,792	1.1	67,713	0.4	28	11,843	1.9	114,071	0.2	18	4	0.0	41	0.3	108
21-44	28,873	1.5	263,872	0.3	32	22,943	1.2	206,975	0.2	21	115	0.0	999	0.3	45
45-64	10,041	5.9	88,415	0.4	36	7,016	4.1	61,811	0.3	30	291	0.2	2,317	0.4	54
65-74	2,954	10.3	32,535	0.3	25	3,073	10.7	33,649	0.3	32	842	2.9	9,216	0.4	62
75-84	1,645	11.1	18,421	0.4	28	2,243	15.1	25,187	0.3	33	613	4.1	6,945	0.4	63
85 and older	403	10.1	4,338	0.4	31	647	16.2	7,172	0.3	36	157	3.9	1,763	0.5	64
Male															
All Males	81,601	4.5	892,864	0.5	40	162,489	9.1	1,576,856	0.3	27	7,251	0.4	78,843	0.5	1,116
Male, Disabled															
All Ages	63,971	25.8	721,743	0.5	42	61,160	24.6	693,114	0.4	37	5,315	2.1	59,890	0.5	1,229
5 and younger	46	0.5	499	0.3	10	3,969	42.0	43,109	0.3	34	27	0.3	279	0.8	6,070
6-14	1,693	6.4	19,096	0.5	33	8,022	30.3	92,460	0.3	31	51	0.2	603	1.3	47,909
15-20	2,855	12.3	32,275	0.5	37	4,461	19.2	51,772	0.3	29	36	0.2	417	1.1	32,734
21-44	20,148	27.3	225,711	0.5	43	10,776	14.6	122,656	0.3	31	298	0.4	3,284	0.5	6,317
45-64	38,523	34.5	436,103	0.5	42	32,780	29.4	370,111	0.4	42	4,745	4.3	53,522	0.5	159
65-74	686	19.8	7,824	0.5	36	1,094	31.6	12,325	0.4	43	152	4.4	1,713	0.4	68
75-84	20	4.7	235	0.7	48	57	13.4	669	0.4	35	6	1.4	72	0.7	105
85 and older	0	0.0	0	0.0	0	1	1.9	12	0.1	15	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	17,630	1.1	171,121	0.4	33	101,329	6.6	883,742	0.2	20	1,936	0.1	18,953	0.4	758
5 and younger	85	0.0	886	0.2	12	50,247	10.6	401,774	0.2	16	21	0.0	163	0.4	2,125
6-14	3,807	1.2	40,695	0.5	35	29,726	9.2	280,028	0.2	20	30	0.0	266	0.9	13,047
15-20	4,996	2.1	50,354	0.4	35	9,602	4.1	92,183	0.2	21	25	0.0	215	0.9	35,556
21-44	4,648	1.1	39,822	0.3	32	4,963	1.2	42,005	0.2	23	122	0.0	818	0.4	2,096
45-64	2,286	3.0	19,659	0.4	33	2,397	3.2	20,227	0.3	33	378	0.5	2,589	0.5	72
65-74	1,087	6.5	11,888	0.4	26	2,272	13.5	24,481	0.3	39	748	4.5	8,144	0.4	69
75-84	599	6.0	6,513	0.4	30	1,713	17.1	18,628	0.3	40	538	5.4	5,931	0.4	66
85 and older	122	5.0	1,304	0.4	26	409	16.9	4,416	0.3	32	74	3.0	827	0.5	65
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 California, 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, CALIFORNIA, 2007

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANALGESICS - Narcotic						
	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	147,757	2.6	1,613,125	0.4	\$57	377,430	6.7	3,847,230	0.3	\$24	5,659,583	38,341,647
Female												
All Females	88,272	2.3	971,002	0.4	56	247,862	6.4	2,505,811	0.3	21	3,865,464	27,079,175
Female, Disabled												
All Ages	60,465	25.7	696,943	0.5	58	119,292	50.6	1,358,825	0.4	33	235,579	2,511,571
5 and younger	9	0.1	97	0.4	19	272	4.0	3,029	0.1	1	6,752	60,392
6-14	27	0.2	309	0.5	29	837	6.2	9,701	0.1	3	13,562	145,498
15-20	91	0.7	1,028	0.4	36	2,294	16.7	26,248	0.2	3	13,714	146,801
21-44	5,563	9.2	63,930	0.4	50	28,625	47.1	323,781	0.3	29	60,759	652,535
45-64	52,500	39.0	605,226	0.5	59	84,947	63.2	969,741	0.4	35	134,516	1,436,229
65-74	2,162	40.0	25,019	0.5	61	2,191	40.5	24,885	0.4	26	5,410	60,404
75-84	110	14.9	1,298	0.6	69	122	16.5	1,401	0.4	16	738	8,345
85 and older	3	2.3	36	0.4	40	4	3.1	39	0.2	2	128	1,367
Female, Other Eligibles												
All Ages	27,807	0.8	274,059	0.4	52	128,570	3.5	1,146,986	0.2	7	3,629,885	24,567,604
5 and younger	47	0.0	495	0.1	9	2,458	0.5	23,946	0.1	1	461,606	2,173,565
6-14	42	0.0	422	0.3	24	5,078	1.6	51,783	0.1	1	321,709	1,843,835
15-20	153	0.0	1,392	0.2	26	18,581	2.9	166,120	0.2	2	639,472	4,345,310
21-44	4,247	0.2	37,834	0.3	37	79,071	4.0	681,188	0.2	7	1,989,457	14,612,483
45-64	7,702	4.5	63,282	0.4	51	14,963	8.8	131,830	0.3	14	170,113	1,142,363
65-74	10,225	35.7	110,647	0.4	56	5,051	17.6	54,921	0.2	5	28,639	264,169
75-84	4,760	32.0	52,996	0.4	57	2,782	18.7	30,792	0.2	6	14,885	147,086
85 and older	631	15.8	6,991	0.4	57	586	14.6	6,406	0.2	7	4,004	38,793
Male												
All Males	59,485	3.3	642,123	0.5	57	129,568	7.2	1,341,419	0.3	29	1,794,107	11,262,444
Male, Disabled												
All Ages	42,915	17.3	489,618	0.5	59	81,872	33.0	916,067	0.4	39	248,425	2,572,314
5 and younger	12	0.1	125	0.3	19	422	4.5	4,801	0.1	2	9,439	83,204
6-14	39	0.1	451	0.4	29	1,414	5.3	16,358	0.1	3	26,441	280,680
15-20	176	0.8	2,018	0.4	33	2,695	11.6	30,989	0.2	4	23,242	247,093
21-44	7,292	9.9	83,840	0.5	51	21,424	29.0	238,348	0.3	33	73,781	775,604
45-64	34,290	30.7	390,388	0.5	60	54,759	49.1	612,549	0.4	44	111,580	1,142,744
65-74	1,062	30.7	12,275	0.5	61	1,116	32.2	12,534	0.4	26	3,462	37,558
75-84	43	10.1	513	0.5	63	41	9.6	476	0.3	9	426	4,831
85 and older	1	1.9	8	1.0	54	1	1.9	12	0.1	1	54	600
Male, Other Eligibles												
All Ages	16,570	1.1	152,505	0.4	52	47,696	3.1	425,352	0.2	8	1,545,682	8,690,130
5 and younger	59	0.0	627	0.2	17	3,512	0.7	34,247	0.1	1	475,054	2,240,124
6-14	51	0.0	527	0.3	24	5,633	1.7	57,006	0.1	1	321,932	1,853,720
15-20	170	0.1	1,473	0.3	34	10,672	4.5	97,719	0.2	2	234,787	1,401,940
21-44	3,116	0.8	24,854	0.3	40	17,910	4.4	143,159	0.3	13	409,380	2,494,704
45-64	4,967	6.6	36,161	0.4	51	5,812	7.7	48,483	0.3	20	75,300	428,446
65-74	5,212	31.0	55,922	0.4	58	2,521	15.0	26,915	0.2	7	16,804	151,557
75-84	2,681	26.8	29,467	0.4	57	1,343	13.4	14,719	0.2	5	9,998	96,470
85 and older	314	12.9	3,474	0.4	55	293	12.1	3,104	0.2	5	2,427	23,169
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	12	28

Source: Data for this table are from the MAX 2007 file for California, 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, CALIFORNIA, 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	\$633	7.2	7,660	82,762
Age				
0-64	719	7.9	5,510	59,742
65-74	592	7.0	918	10,012
75-84	353	4.7	654	7,046
85 and older	172	2.7	578	5,962
Unknown	0	0.0	0	0
Gender				
Female	643	7.2	3,784	41,251
Male	623	7.1	3,876	41,511
Unknown	0	0.0	0	0
Race				
White	663	7.2	2,874	30,804
African American	633	7.3	1,402	15,204
Other/unknown	608	7	3,384	36,754
Basis of Eligibility^c				
Aged	346	4.6	1,631	17,435
Disabled	708	7.8	5,934	64,495
Adults	566	7.9	36	245
Children	982	8.3	55	559
Unknown	1,207	12.9	4	28

Source: Data for this table are from the MAX 2007 file for California, 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 9,109 beneficiaries who were in nursing facilities for part of their enrollment and their 91,077 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, CALIFORNIA, 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	0.1	0.0	0.3	\$60	\$42	\$4	\$14	\$134	\$286	\$132	\$53	21,227	\$2,841,926	4,243	55.4	47,464
Biologicals	0.1	0.1	0.0	0.0	20	20	0	0	188	188	0	0	2,762	518,035	2,255	29.4	26,417
Antineoplastic Agents	0.5	0.0	0.0	0.5	101	39	0	62	186	843	0	126	3,166	590,390	543	7.1	5,845
Endocrine/Metabolic Drugs	1.4	0.5	0.0	0.8	84	63	3	18	60	115	64	23	47,078	2,843,562	3,051	39.8	33,839
Cardiovascular Agents	2.2	0.4	0.4	1.4	102	37	35	30	47	94	87	22	106,715	5,007,813	4,458	58.2	49,167
Respiratory Agents	1.4	0.4	0.0	0.9	86	60	4	22	63	143	101	25	42,518	2,693,832	2,838	37.0	31,273
Gastrointestinal Agents	1.2	0.6	0.0	0.6	112	93	4	15	95	155	207	27	53,615	5,076,200	4,117	53.7	45,256
Genitourinary Agents	0.6	0.3	0.0	0.3	50	32	4	14	77	109	99	44	10,178	780,708	1,379	18.0	15,678
CNS Drugs	1.9	0.8	0.1	0.9	267	216	16	35	143	265	112	39	107,879	15,448,450	5,201	67.9	57,942
Stimulants/Anti-obesity/Anorexia	0.6	0.3	0.0	0.2	85	61	1	24	155	203	38	103	247	38,165	41	0.5	447
Miscellaneous Psychological/Neurological Agents	0.9	0.9	0.0	0.0	242	242	0	0	262	262	0	0	5,371	1,408,315	513	6.7	5,831
Analgesics and Anesthetics	1.1	0.1	0.1	0.9	65	11	26	27	59	149	259	30	37,875	2,243,918	3,164	41.3	34,737
Neuromuscular Agents	1.7	0.5	0.0	1.2	154	81	5	68	89	179	133	55	80,944	7,232,512	4,163	54.3	46,959
Nutritional Products	0.6	0.0	0.0	0.6	13	1	0	12	21	52	32	20	11,445	238,458	1,657	21.6	18,156
Hematological Agents	1.3	0.3	0.0	1.0	149	134	1	15	118	493	21	15	31,849	3,753,687	2,340	30.5	25,156
Topical Products	0.6	0.1	0.0	0.4	23	12	1	11	42	92	69	25	23,474	987,572	3,714	48.5	42,151
Miscellaneous Products	0.3	0.0	0.0	0.3	26	13	0	13	83	404	0	46	2,507	207,493	746	9.7	8,099
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	58	0	0	0	159	0	0	0	3,025	481,200	732	9.6	8,325
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.	591,875	52,392,236	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for California, 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 9,109 beneficiaries who were in nursing facilities for part of their enrollment and their 91,077 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 California, 2.7 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, CALIFORNIA, 2007

Top 10 Drug Groups in Nursing Facilities	Users				Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
ANTIPSYCHOTICS	\$12,130,142	4,564	59.6	52,102	0.9	\$255	\$233	
ANTICONVULSANT	6,001,376	4,810	62.8	54,509	1.1	102	110	
ULCER DRUGS	3,965,268	4,322	56.4	47,757	0.8	106	83	
HEMATOPOIETIC AGENTS	2,708,510	1,487	19.4	16,199	0.7	232	167	
ANTIDIABETIC	2,460,389	3,995	52.2	44,450	0.9	59	55	
ANTIASTHMATIC	2,347,285	4,161	54.3	46,015	0.8	61	51	
ANTIDEPRESSANTS	2,160,859	3,533	46.1	39,901	0.8	67	54	
ANALGESICS - Narcotic	1,937,149	3,620	47.3	39,501	0.8	63	49	
ANTIHYPERLIPIDEMIC	1,815,543	1,979	25.8	22,421	0.8	96	81	
ANTIVIRAL	1,453,210	420	5.5	4,574	0.7	476	318	
Total	36,979,731	32,891	n.a.	367,429	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2007 file for California, 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 9,109 beneficiaries who were in nursing facilities for part of their enrollment and their 91,077 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, CALIFORNIA, 2007

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIPSYCHOTICS				ANTICONVULSANT			
	Number of Rx	Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	320,913	\$36,979,731	4,564	59.6	52,102	0.9	\$233	4,810	62.8	54,509	1.1	\$110
Female												
All Females	160,945	18,516,625	2,343	61.9	26,774	0.9	231	2,254	59.6	25,661	1.1	113
Female, Disabled												
All Ages	135,614	16,107,782	2,014	74.1	23,123	0.9	246	1,995	73.4	22,719	1.1	118
64 or younger	121,414	14,380,316	1,764	73.9	20,312	0.9	241	1,795	75.2	20,444	1.1	119
65-74	12,334	1,514,371	207	78.4	2,353	1.0	294	178	67.4	2,034	1.2	122
75-84	1,854	212,487	43	76.8	458	0.9	208	22	39.3	241	1.0	68
85 and older	12	608	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	25,331	2,408,843	329	30.9	3,651	0.7	140	259	24.3	2,942	0.9	74
64 or younger	1,548	157,670	8	20.0	42	0.4	111	22	55.0	208	0.8	89
65-74	10,281	1,071,276	135	50.8	1,531	0.8	201	114	42.9	1,315	0.9	78
75-84	8,600	770,178	113	30.9	1,287	0.6	88	85	23.2	982	1.0	62
85 and older	4,902	409,719	73	18.6	791	0.7	108	38	9.7	437	0.8	80
Male												
All Males	159,968	18,463,106	2,221	57.3	25,328	0.9	234	2,556	65.9	28,848	1.1	107
Male, Disabled												
All Ages	143,623	16,780,193	2,008	62.5	22,904	0.9	242	2,350	73.1	26,553	1.1	109
64 or younger	136,459	15,983,039	1,875	61.9	21,341	0.9	243	2,244	74.1	25,321	1.1	110
65-74	6,619	739,722	124	76.5	1,455	0.9	223	100	61.7	1,167	1.2	100
75-84	535	57,244	9	45.0	108	1.2	220	5	25.0	53	1.2	110
85 and older	10	188	0	0.0	0	0.0	0	1	25.0	12	0.8	16
Male, Other Eligibles												
All Ages	16,345	1,682,913	213	32.2	2,424	0.7	164	206	31.2	2,295	1.0	84
64 or younger	2,132	239,378	10	18.2	101	0.5	115	31	56.4	293	1.0	124
65-74	8,173	860,227	113	50.0	1,313	0.8	203	117	51.8	1,325	1.0	83
75-84	4,331	456,803	59	27.8	658	0.7	125	45	21.2	521	1.1	72
85 and older	1,709	126,505	31	18.5	352	0.7	106	13	7.7	156	1.0	54
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 California, 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 9,109 beneficiaries who were in nursing facilities for part of their enrollment and their 91,077 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, CALIFORNIA, 2007

Beneficiary Characteristics	ULCER DRUGS					HEMATOPOIETIC 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 \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	4,322	56.4	47,757	0.8	\$83	1,487	19.4	16,199	0.7	\$167	3,995	52.2	44,450	0.9	\$55
Female															
All Females	2,088	55.2	23,275	0.8	84	734	19.4	8,131	0.7	168	2,143	56.6	23,898	1.0	58
Female, Disabled															
All Ages	1,625	59.8	18,038	0.8	84	520	19.1	5,688	0.7	188	1,650	60.7	18,372	1.0	58
64 or younger	1,455	61.0	16,201	0.8	84	472	19.8	5,152	0.7	193	1,458	61.1	16,245	1.0	60
65-74	148	56.1	1,600	0.8	88	36	13.6	409	0.7	153	166	62.9	1,829	1.0	49
75-84	22	39.3	237	0.8	83	11	19.6	115	0.7	115	26	46.4	298	1.0	50
85 and older	0	0.0	0	0.0	0	1	7.7	12	0.3	3	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	463	43.5	5,237	0.8	86	214	20.1	2,443	0.6	123	493	46.3	5,526	0.9	56
64 or younger	24	60.0	231	0.8	94	6	15.0	62	0.5	437	12	30.0	111	0.8	52
65-74	166	62.4	1,846	0.8	91	63	23.7	726	0.6	168	225	84.6	2,498	1.0	56
75-84	151	41.3	1,746	0.8	89	75	20.5	875	0.7	138	176	48.1	1,997	1.0	59
85 and older	122	31.0	1,414	0.8	74	70	17.8	780	0.6	38	80	20.4	920	0.8	47
Male															
All Males	2,234	57.6	24,482	0.8	82	753	19.4	8,068	0.7	166	1,852	47.8	20,552	0.9	53
Male, Disabled															
All Ages	1,960	61.0	21,429	0.8	82	634	19.7	6,769	0.7	163	1,571	48.9	17,346	0.9	54
64 or younger	1,861	61.4	20,379	0.8	82	589	19.4	6,324	0.7	171	1,482	48.9	16,406	0.9	54
65-74	95	58.6	1,002	0.8	78	42	25.9	419	0.7	40	82	50.6	856	0.8	48
75-84	4	20.0	48	0.7	90	3	15.0	26	0.6	31	7	35.0	84	0.8	54
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	274	41.5	3,053	0.8	79	119	18.0	1,299	0.7	183	281	42.5	3,206	0.9	47
64 or younger	38	69.1	400	0.6	52	6	10.9	61	0.6	508	9	16.4	79	0.9	36
65-74	122	54.0	1,382	0.8	91	44	19.5	496	0.8	190	149	65.9	1,726	0.9	50
75-84	71	33.5	803	0.7	77	45	21.2	485	0.7	209	95	44.8	1,087	0.8	48
85 and older	43	25.6	468	0.7	67	24	14.3	257	0.7	44	28	16.7	314	0.7	27
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 California, 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 9,109 beneficiaries who were in nursing facilities for part of their enrollment and their 91,077 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, CALIFORNIA, 2007

Beneficiary Characteristics	ANTIASTHMATIC					ANTIDEPRESSANTS					ANALGESICS - Narcotic				
	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	4,161	54.3	46,015	0.8	\$51	3,533	46.1	39,901	0.8	\$54	3,620	47.3	39,501	0.8	\$49
Female															
All Females	1,982	52.4	21,870	0.8	49	1,916	50.6	21,636	0.8	55	1,903	50.3	20,960	0.8	49
Female, Disabled															
All Ages	1,598	58.8	17,614	0.8	51	1,604	59.0	18,190	0.8	56	1,580	58.1	17,426	0.8	55
64 or younger	1,409	59.1	15,692	0.8	52	1,431	60.0	16,256	0.8	56	1,436	60.2	15,871	0.9	58
65-74	158	59.8	1,645	0.7	41	155	58.7	1,721	0.8	53	130	49.2	1,414	0.7	33
75-84	31	55.4	277	0.7	59	17	30.4	201	0.8	67	14	25.0	141	0.6	30
85 and older	0	0.0	0	0.0	0	1	7.7	12	0.4	20	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	384	36.1	4,256	0.6	41	312	29.3	3,446	0.7	49	323	30.3	3,534	0.5	20
64 or younger	59	147.5	577	1.3	102	13	32.5	126	0.8	35	24	60.0	188	0.9	78
65-74	94	35.3	1,083	0.7	37	119	44.7	1,319	0.8	54	103	38.7	1,127	0.5	20
75-84	127	34.7	1,448	0.5	32	110	30.1	1,246	0.7	47	129	35.2	1,470	0.4	15
85 and older	104	26.5	1,148	0.4	27	70	17.8	755	0.7	47	67	17.0	749	0.5	14
Male															
All Males	2,179	56.2	24,145	0.9	53	1,617	41.7	18,265	0.8	54	1,717	44.3	18,541	0.8	49
Male, Disabled															
All Ages	1,907	59.3	21,117	0.9	51	1,466	45.6	16,534	0.8	55	1,530	47.6	16,501	0.8	53
64 or younger	1,797	59.3	19,901	0.9	52	1,397	46.1	15,768	0.8	54	1,462	48.3	15,747	0.8	54
65-74	99	61.1	1,084	0.6	39	62	38.3	682	0.9	63	67	41.4	742	0.6	27
75-84	11	55.0	132	0.6	46	7	35.0	84	1.1	79	1	5.0	12	0.1	1
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	272	41.1	3,028	0.8	61	151	22.8	1,731	0.8	47	187	28.3	2,040	0.4	15
64 or younger	77	140.0	790	1.6	143	9	16.4	99	0.5	44	17	30.9	168	0.4	49
65-74	85	37.6	985	0.8	32	73	32.3	834	0.8	48	93	41.2	1,040	0.5	16
75-84	77	36.3	873	0.4	36	47	22.2	536	0.8	52	46	21.7	526	0.4	9
85 and older	33	19.6	380	0.4	21	22	13.1	262	0.7	32	31	18.5	306	0.3	6
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 California, 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 9,109 beneficiaries who were in nursing facilities for part of their enrollment and their 91,077 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, CALIFORNIA, 2007

Beneficiary Characteristics	ANTIHYPERTENSIVE						ANTIVIRAL					
	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	1,979	25.8	22,421	0.8	\$81	420	5.5	4,574	0.7	\$318	7,660	82,762
Female												
All Females	1,002	26.5	11,372	0.8	81	179	4.7	1,980	0.6	247	3,784	41,251
Female, Disabled												
All Ages	788	29.0	8,938	0.8	80	159	5.8	1,749	0.6	277	2,719	29,925
64 or younger	681	28.5	7,731	0.8	80	153	6.4	1,696	0.6	285	2,386	26,355
65-74	86	32.6	967	0.9	78	4	1.5	39	0.4	15	264	2,841
75-84	20	35.7	228	0.9	82	2	3.6	14	0.9	18	56	590
85 and older	1	7.7	12	0.3	28	0	0.0	0	0.0	0	13	139
Female, Other Eligibles												
All Ages	214	20.1	2,434	0.9	86	20	1.9	231	0.2	22	1,065	11,326
64 or younger	1	2.5	12	1.1	125	3	7.5	27	0.3	12	40	336
65-74	97	36.5	1,081	0.9	89	6	2.3	72	0.3	48	266	2,906
75-84	78	21.3	919	0.8	83	6	1.6	72	0.1	8	366	3,992
85 and older	38	9.7	422	0.8	83	5	1.3	60	0.1	13	393	4,092
Male												
All Males	977	25.2	11,049	0.8	81	241	6.2	2,594	0.7	372	3,876	41,511
Male, Disabled												
All Ages	850	26.4	9,577	0.8	81	220	6.8	2,352	0.7	390	3,215	34,570
64 or younger	798	26.3	9,014	0.8	80	219	7.2	2,340	0.7	385	3,029	32,555
65-74	47	29.0	503	0.9	84	1	0.6	12	1.7	1,295	162	1,755
75-84	5	25.0	60	1.0	87	0	0.0	0	0.0	0	20	221
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	39
Male, Other Eligibles												
All Ages	127	19.2	1,472	0.9	84	21	3.2	242	0.5	194	661	6,941
64 or younger	1	1.8	12	0.9	40	2	3.6	24	1.1	435	55	496
65-74	64	28.3	756	0.9	92	10	4.4	110	0.4	177	226	2,510
75-84	47	22.2	524	0.9	80	8	3.8	96	0.6	177	212	2,243
85 and older	15	8.9	180	0.8	64	1	0.6	12	0.1	2	168	1,692
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 California, 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 9,109 beneficiaries who were in nursing facilities for part of their enrollment and their 91,077 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}
 CALIFORNIA, 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	938,477	16.6	0.6	3,197,861	\$15	\$82,595,261	\$26	3.9	5,659,583
Age									
5 and younger	246,588	25.9	0.6	609,423	20	19,197,299	32	30.4	952,853
6-14	92,342	13.5	0.3	236,968	19	13,168,058	56	8.6	683,644
15-20	83,680	9.2	0.2	183,675	7	6,733,440	37	4.6	911,215
21-44	306,692	12.1	0.3	776,553	6	15,876,397	20	2.6	2,533,379
45-64	168,996	34.4	2.4	1,161,901	48	23,645,856	20	2.4	491,509
65-74	25,018	46.1	2.6	140,403	43	2,334,719	17	2.8	54,315
75-84	12,273	47.1	2.7	70,985	47	1,229,466	17	3.4	26,047
85 and older	2,888	43.7	2.7	17,953	62	410,026	23	6.0	6,613
Unknown	0	0.0	0.0	0	0	0	0	0.0	8
Basis of Eligibility^c									
Aged	33,857	44.3	2.3	178,627	40	3,034,894	17	3.0	76,396
Disabled	225,158	46.5	3.4	1,634,495	111	53,639,568	33	3.4	484,006
Adults	315,852	10.4	0.2	569,925	3	7,673,004	13	3.0	3,030,257
Children	360,984	17.5	0.4	804,701	9	18,092,545	22	10.0	2,061,462
Unknown	2,626	35.2	1.4	10,113	21	155,250	15	1.3	7,462
Gender									
Female	619,833	16.0	0.5	2,034,564	12	45,419,128	22	3.9	3,865,469
Male	318,644	17.8	0.6	1,163,297	21	37,176,133	32	3.9	1,794,110
Unknown	0	0.0	0.0	0	0	0	0	0.0	4
Race									
White	186,125	15.0	0.8	932,992	21	25,979,896	28	3.0	1,241,127
African American	78,428	16.1	0.7	344,252	20	9,582,044	28	3.4	486,983
Other/unknown	673,924	17.1	0.5	1,920,617	12	47,033,321	24	5.0	3,931,473
Use of Nursing Facilities^d									
Entire year	4,647	60.7	7.4	56,352	252	1,927,113	34	3.7	7,660
Part year	6,672	73.2	6.4	57,861	210	1,909,111	33	3.8	9,109
None	927,158	16.4	0.5	3,083,648	14	78,759,037	26	3.9	5,642,814
Maintenance Assistance Status									
Cash	474,136	25.9	1.2	2,154,593	33	60,291,430	28	3.8	1,830,818
Medically needy	61,886	21.0	0.9	262,661	23	6,899,293	26	3.3	294,654
Poverty related	65,624	19.8	0.5	161,456	11	3,566,948	22	5.3	331,125
Other/unknown	336,831	10.5	0.2	619,151	4	11,837,590	19	5.0	3,202,986

Source: Data for this table are from the MAX 2007 file for California, 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}
 CALIFORNIA, 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	\$26	\$0	\$0	38,341,647
Age						
5 and younger	0.1	4	32	0	0	4,557,293
6-14	0.1	3	56	0	0	4,123,733
15-20	0.0	1	37	0	0	6,141,144
21-44	0.0	1	20	0	0	18,535,334
45-64	0.3	6	20	0	2	4,149,782
65-74	0.3	5	17	0	1	513,688
75-84	0.3	5	17	0	1	256,732
85 and older	0.3	6	23	0	1	63,929
Unknown	0.0	0	0	0	0	12
Basis of Eligibility^c						
Aged	0.2	4	17	0	1	719,612
Disabled	0.3	11	33	0	2	5,083,893
Adults	0.0	0	13	0	0	21,509,316
Children	0.1	2	22	0	0	10,958,586
Unknown	0.1	2	15	0	1	70,240
Gender						
Female	0.1	2	22	0	0	27,079,183
Male	0.1	3	32	0	0	11,262,448
Unknown	0.0	0	0	0	0	16
Race						
White	0.1	3	28	0	1	9,492,262
African American	0.1	3	28	0	0	3,294,820
Other/unknown	0.1	2	24	0	0	25,554,565
Use of Nursing Facilities^d						
Entire year	0.7	23	34	1	7	82,762
Part year	0.6	21	33	0	6	91,077
None	0.1	2	26	0	0	38,167,808
Maintenance Assistance Status						
Cash	0.2	5	28	0	1	12,231,947
Medically needy	0.2	4	26	0	1	1,749,961
Poverty related	0.1	2	22	0	0	1,682,322
Other/unknown	0.0	1	19	0	0	22,677,417

Source: Data for this table are from the MAX 2007 file for California, 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}
CALIFORNIA, 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	
All	1,116,437	\$74	\$82,595,261	100.0	3,197,861	\$26	100.0
Anorexia or weight loss/gain	105	215	22,615	0.0	314	72	0.0
Fertility drugs	7	183	1,280	0.0	15	85	0.0
Drugs for cosmetic purposes	24	20	473	0.0	36	13	0.0
Cough and cold medications	116,069	34	4,002,328	4.8	210,382	19	6.6
Vitamins and minerals	63,043	52	3,263,620	4.0	155,093	21	4.8
Non-prescription drugs	834,553	73	60,561,001	73.3	2,266,376	27	70.9
Barbiturates	6,845	80	546,520	0.7	50,916	11	1.6
Benzodiazepines	90,849	140	12,706,319	15.4	502,544	25	15.7
Other Part D Excl Rx Drugs	4,942	302	1,491,105	1.8	12,185	122	0.4

Source: Data for this table are from the MAX 2007 file for California, 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, CALIFORNIA, 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	8,475,020	92,269	644,088	3,704,563	4,025,478	8,622	75,213,932	901,157	7,085,560	30,343,050	36,802,068	82,097
Age												
5 and younger	1,651,163	0	27,444	1	1,623,716	2	14,526,343	0	293,644	3	14,232,692	4
6-14	1,579,365	0	70,751	38	1,508,576	0	15,552,754	0	811,882	149	14,740,723	0
15-20	1,357,032	0	56,586	445,367	855,056	23	11,739,389	0	639,067	3,479,941	7,620,237	144
21-44	3,076,029	0	173,021	2,862,872	38,093	2,043	25,541,636	0	1,910,761	23,405,010	208,308	17,557
45-64	706,336	22	304,252	395,572	17	6,473	6,811,683	121	3,295,367	3,452,290	58	63,847
65-74	66,184	54,955	10,525	623	0	81	650,976	527,642	117,711	5,078	0	545
75-84	31,200	29,838	1,302	59	1	0	315,304	299,976	14,870	456	2	0
85 and older	7,700	7,454	207	31	8	0	75,826	73,418	2,258	123	27	0
Unknown	11	0	0	0	11	0	21	0	0	0	21	0
Gender												
Female	5,426,899	57,253	318,406	2,993,319	2,049,306	8,615	47,633,532	562,549	3,552,823	24,812,375	18,623,742	82,043
Male	3,048,117	35,016	325,680	711,244	1,976,170	7	27,580,375	338,608	3,532,720	5,530,675	18,178,318	54
Unknown	4	0	2	0	2	0	25	0	17	0	8	0
Race												
White	1,651,407	11,850	221,608	780,060	635,799	2,090	14,747,723	118,185	2,406,829	6,301,663	5,900,176	20,870
African American	836,635	2,648	121,272	318,562	393,664	489	7,975,912	25,881	1,346,119	2,696,178	3,903,015	4,719
Other/unknown	5,986,978	77,771	301,208	2,605,941	2,996,015	6,043	52,490,297	757,091	3,332,612	21,345,209	26,998,877	56,508
Use of Nursing Facilities^c												
Entire year	7,845	1,652	6,089	41	59	4	84,805	17,685	66,258	265	569	28
Part year	9,514	1,619	7,471	306	84	34	99,262	16,532	78,902	2,761	752	315
None	8,457,661	88,998	630,528	3,704,216	4,025,335	8,584	75,029,865	866,940	6,940,400	30,340,024	36,800,747	81,754
Maintenance Assistance Status												
Cash	3,991,067	10,190	561,398	1,062,293	2,357,186	0	41,032,947	112,133	6,365,613	10,130,768	24,424,433	0
Medically needy	519,510	72,937	47,452	96,817	302,304	0	4,367,940	703,787	408,984	678,001	2,577,168	0
Poverty related	478,942	8,573	17,275	79,019	365,453	8,622	3,758,993	80,004	152,737	426,348	3,017,807	82,097
Other/unknown	3,485,501	569	17,963	2,466,434	1,000,535	0	26,054,052	5,233	158,226	19,107,933	6,782,660	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	4,511,179	72,364	456,993	2,695,651	1,278,858	7,313	34,507,172	702,766	4,948,337	20,438,721	8,347,831	69,517
FFS part year, with Rx claims	337,218	2,060	17,686	102,763	214,601	108	3,295,355	21,239	198,453	978,556	2,095,983	1,124
FFS part year, no Rx claims	811,186	1,972	9,327	231,843	568,003	41	7,521,788	18,410	98,687	2,070,074	5,334,259	358
MC all year, with Rx claims	59,216	237	29,627	11,204	18,126	22	673,073	2,629	348,316	125,227	196,658	243
MC all year, no Rx claims	2,756,221	15,636	130,455	663,102	1,945,890	1,138	29,216,544	156,113	1,491,767	6,730,472	20,827,337	10,855

Source: Data for this table are from the MAX 2007 file for California, 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, CALIFORNIA, 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	Number of Beneficiaries	Number of Benefit Months
All	8,475,020	75,213,932	5,659,583	38,341,647	0	36,872,285
Fee-for-service (FFS) all year	4,511,179	34,507,172	4,511,179	34,507,172	0	0
FFS part year, with Rx claims	337,218	3,295,355	337,218	1,396,717	0	1,898,638
FFS part year, with no Rx claims	811,186	7,521,788	811,186	2,437,758	0	5,084,030
Managed care (MC) all year, with Rx claims	59,216	673,073	0	0	0	673,073
MC all year, with no Rx claims	2,756,221	29,216,544	0	0	0	29,216,544

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