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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, ILLINOIS, 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	2,076,456	13,935	172,936	504,192	1,384,521	872	19,923,198	136,635	1,873,271	4,142,210	13,763,665	7,417
Age												
5 and younger	544,285	0	2,214	13	542,058	0	5,203,079	0	24,224	86	5,178,769	0
6-14	599,842	2	10,889	68	588,883	0	6,229,147	20	123,645	486	6,104,996	0
15-20	304,085	1	14,984	36,614	252,472	14	2,942,431	9	161,967	307,524	2,472,825	106
21-44	471,249	0	54,842	415,236	1,027	144	4,032,045	0	604,991	3,419,420	6,551	1,083
45-64	137,763	74	84,788	52,151	42	708	1,321,443	242	900,869	413,904	223	6,205
65-74	11,462	6,729	4,619	104	4	6	116,985	65,225	50,975	747	15	23
75-84	5,607	5,087	510	5	5	0	57,093	51,414	5,618	31	30	0
85 and older	2,131	2,042	88	0	1	0	20,694	19,725	968	0	1	0
Unknown	32	0	2	1	29	0	281	0	14	12	255	0
Gender												
Female	1,215,502	8,902	86,969	425,829	692,931	871	11,462,853	87,876	953,672	3,569,579	6,844,321	7,405
Male	860,954	5,033	85,967	78,363	691,590	1	8,460,345	48,759	919,599	572,631	6,919,344	12
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	736,860	3,924	62,467	209,525	460,422	522	6,969,271	37,866	661,551	1,688,914	4,576,456	4,484
African American	689,396	2,117	86,724	156,330	444,010	215	6,737,973	20,070	952,437	1,353,197	4,410,416	1,853
Other/unknown	650,200	7,894	23,745	138,337	480,089	135	6,215,954	78,699	259,283	1,100,099	4,776,793	1,080
Use of Nursing Facilities^c												
Entire year	7,481	689	6,779	7	6	0	84,282	7,246	76,936	39	61	0
Part year	6,702	676	5,791	222	8	5	69,416	6,476	60,665	2,143	90	42
None	2,062,273	12,570	160,366	503,963	1,384,507	867	19,769,500	122,913	1,735,670	4,140,028	13,763,514	7,375
Maintenance Assistance Status												
Cash	184,998	2,977	105,661	11,053	65,307	0	1,914,927	33,297	1,213,638	97,912	570,080	0
Medically needy	307,466	7,225	36,983	258,681	4,577	0	2,592,357	68,103	328,783	2,169,615	25,856	0
Poverty-related	1,274,606	1,226	8,747	33,396	1,230,365	872	12,637,604	11,751	84,196	210,255	12,323,985	7,417
Other/unknown	309,386	2,507	21,545	201,062	84,272	0	2,778,310	23,484	246,654	1,664,428	843,744	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	1,901,943	13,929	172,560	463,122	1,251,461	871	18,586,990	136,569	1,870,612	3,840,569	12,731,826	7,414
FFS part year, with Rx claims	83,740	1	297	22,928	60,513	1	508,748	6	2,089	138,151	368,499	3
FFS part year, no Rx claims	35,293	0	69	5,572	29,652	0	197,146	0	461	28,338	168,347	0

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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, ILLINOIS, 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	61.8	6.9	\$453	\$66	\$2,876	15.8	2,076,456
Age							
5 and younger	64.7	3.3	164	50	1,960	8.4	544,285
6-14	55.0	3.4	259	77	1,146	22.6	599,842
15-20	56.7	4.3	317	74	1,988	15.9	304,085
21-44	66.3	9.0	567	63	3,603	15.7	471,249
45-64	75.9	33.1	2,228	67	12,422	17.9	137,763
65-74	67.5	28.8	1,645	57	11,130	14.8	11,462
75-84	56.3	19.1	988	52	9,225	10.7	5,607
85 and older	44.6	12.7	607	48	11,440	5.3	2,131
Unknown	59.4	2.6	83	32	912	9.1	32
Basis of Eligibility^e							
Aged	57.4	18.0	970	54	7,835	12.4	13,935
Disabled	76.8	33.0	2,630	80	16,432	16.0	172,936
Adults	64.9	7.3	347	47	1,878	18.5	504,192
Children	58.8	3.4	213	63	1,488	14.3	1,384,521
Unknown	85.1	26.7	3,249	122	15,584	20.8	872
Gender							
Female	63.8	7.4	426	57	2,628	16.2	1,215,502
Male	59.0	6.2	492	79	3,225	15.2	860,954
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	64.5	8.8	595	67	3,168	18.8	736,860
African American	60.6	6.9	461	67	3,528	13.1	689,396
Other/unknown	60.1	4.8	285	59	1,854	15.4	650,200
Use of Nursing Facilities^f							
Entire year	94.9	85.8	6,470	75	54,841	11.8	7,481
Part year	93.9	57.8	4,273	74	63,309	6.7	6,702
None	61.6	6.5	419	65	2,491	16.8	2,062,273
Maintenance Assistance Status							
Cash	71.7	19.8	1,464	74	7,164	20.4	184,998
Medically needy	67.6	11.1	658	59	4,900	13.4	307,466
Poverty related	59.7	3.5	208	60	1,462	14.2	1,274,606
Other/unknown	58.8	9.3	657	71	4,124	15.9	309,386

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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, ILLINOIS, 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	0.7	\$47	15.8	38.2	50.3	4.8	4.4	1.9	0.5	\$300	2,076,456	19,923,198
Age												
5 and younger	0.3	17	8.4	35.3	60.8	2.7	1.0	0.2	0.0	205	544,285	5,203,079
6-14	0.3	25	22.6	45.0	50.0	2.9	1.8	0.3	0.0	110	599,842	6,229,147
15-20	0.4	33	15.9	43.3	49.8	3.9	2.4	0.5	0.1	206	304,085	2,942,431
21-44	1.1	66	15.7	33.7	47.9	8.2	7.3	2.4	0.5	421	471,249	4,032,045
45-64	3.5	232	17.9	24.1	23.3	10.4	21.5	15.6	5.2	1,295	137,763	1,321,443
65-74	2.8	161	14.8	32.5	20.4	9.3	20.6	13.6	3.6	1,091	11,462	116,985
75-84	1.9	97	10.7	43.7	22.4	7.9	15.5	9.0	1.4	906	5,607	57,093
85 and older	1.3	63	5.3	55.4	21.4	6.1	9.7	6.3	1.1	1,178	2,131	20,694
Unknown	0.3	9	9.1	40.6	56.3	0.0	3.1	0.0	0.0	104	32	281
Basis of Eligibility^e												
Aged	1.8	99	12.4	42.6	23.3	8.9	16.1	7.9	1.3	799	13,935	136,635
Disabled	3.0	243	16.0	23.2	27.2	10.0	20.1	14.7	4.8	1,517	172,936	1,873,271
Adults	0.9	42	18.5	35.1	48.4	7.8	6.5	1.8	0.4	229	504,192	4,142,210
Children	0.3	22	14.3	41.2	54.1	2.9	1.5	0.2	0.0	150	1,384,521	13,763,665
Unknown	3.1	382	20.8	14.9	25.0	15.3	29.7	12.5	2.6	1,832	872	7,417
Gender												
Female	0.8	45	16.2	36.2	51.2	5.2	4.7	2.0	0.6	279	1,215,502	11,462,853
Male	0.6	50	15.2	41.0	48.9	4.1	3.9	1.6	0.4	328	860,954	8,460,345
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	0.9	63	18.8	35.5	49.5	5.9	5.8	2.5	0.8	335	736,860	6,969,271
African American	0.7	47	13.1	39.4	49.0	4.6	4.4	2.0	0.6	361	689,396	6,737,973
Other/unknown	0.5	30	15.4	39.9	52.6	3.6	2.7	1.0	0.2	194	650,200	6,215,954
Use of Nursing Facilities^f												
Entire year	7.6	574	11.8	5.1	6.0	4.0	20.3	39.8	24.8	4,868	7,481	84,282
Part year	5.6	413	6.7	6.1	13.1	9.5	28.3	31.0	12.1	6,112	6,702	69,416
None	0.7	44	16.8	38.4	50.5	4.7	4.3	1.6	0.4	260	2,062,273	19,769,500
Maintenance Assistance Status												
Cash	1.9	141	20.4	28.3	40.4	8.0	12.9	8.1	2.3	692	184,998	1,914,927
Medically needy	1.3	78	13.4	32.4	44.8	8.7	9.2	3.9	1.0	581	307,466	2,592,357
Poverty related	0.3	21	14.2	40.3	55.0	2.9	1.5	0.3	0.1	148	1,274,606	12,637,604
Other/unknown	1.0	73	15.9	41.2	42.3	6.5	6.4	2.7	0.9	459	309,386	2,778,310

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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, ILLINOIS, 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	0.7	\$47	\$66	0.2	\$36	\$171	0.0	\$2	\$112	0.5	\$9	\$19
Age												
5 and younger	0.3	17	50	0.1	12	167	0.0	1	76	0.3	5	18
6-14	0.3	25	77	0.1	20	148	0.0	1	108	0.2	4	21
15-20	0.4	33	74	0.2	26	166	0.0	1	119	0.3	5	20
21-44	1.1	66	63	0.3	50	178	0.0	3	119	0.7	13	18
45-64	3.5	232	67	0.9	174	187	0.1	13	122	2.4	46	19
65-74	2.8	161	57	0.8	116	145	0.1	10	97	1.9	35	18
75-84	1.9	97	52	0.5	68	126	0.1	6	87	1.3	23	18
85 and older	1.3	63	48	0.4	44	122	0.1	5	89	0.9	14	16
Unknown	0.3	9	32	0.1	4	61	0.0	1	79	0.2	4	20
Basis of Eligibility^d												
Aged	1.8	99	54	0.5	69	129	0.1	7	96	1.2	23	19
Disabled	3.0	243	80	0.9	191	214	0.1	11	126	2.1	40	19
Adults	0.9	42	47	0.2	29	132	0.0	2	106	0.7	11	17
Children	0.3	22	63	0.1	17	148	0.0	1	96	0.2	4	19
Unknown	3.1	382	122	0.8	308	370	0.1	15	158	2.2	59	27
Gender												
Female	0.8	45	57	0.2	33	154	0.0	2	108	0.6	10	18
Male	0.6	50	79	0.2	40	194	0.0	2	118	0.4	8	20
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	0.9	63	67	0.3	48	164	0.0	3	116	0.6	11	19
African American	0.7	47	67	0.2	36	190	0.0	2	110	0.5	9	19
Other/unknown	0.5	30	59	0.1	22	160	0.0	1	104	0.4	7	18
Use of Nursing Facilities^e												
Entire year	7.6	574	75	2.4	466	193	0.2	20	122	5.0	87	17
Part year	5.6	413	74	1.6	323	208	0.2	20	134	3.9	69	18
None	0.7	44	65	0.2	33	169	0.0	2	111	0.5	9	19
Maintenance Assistance Status												
Cash	1.9	141	74	0.5	111	203	0.1	6	116	1.3	24	19
Medically needy	1.3	78	59	0.3	57	166	0.0	4	121	0.9	17	18
Poverty related	0.3	21	60	0.1	16	148	0.0	1	96	0.2	4	19
Other/unknown	1.0	73	71	0.3	57	173	0.0	4	119	0.7	13	19

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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 Illinois, 0.6 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, ILLINOIS, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users ^e				
	Patented Brand-Name		Off-Patent Brand-Name Generic		Patented Brand-Name		Off-Patent Brand-Name Generic		Patented Brand-Name		Off-Patent Brand-Name Generic		Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months
	Total	Name	Name	Generic	Total	Name	Name	Generic	Total	Name	Name	Generic					
Anti-infective Agents	0.2	0.0	0.0	0.2	\$13	\$8	\$1	\$4	\$57	\$328	\$121	\$21	2,073,785	\$118,836,084	849,553	40.9	9,157,282
Biologicals	0.2	0.2	0.0	0.0	288	288	0	0	1168	1,168	0	0	19,972	23,322,113	7,781	0.4	80,989
Antineoplastic Agents	0.5	0.2	0.0	0.4	233	208	5	20	424	1,199	440	55	42,307	17,949,238	7,287	0.4	77,182
Endocrine/Metabolic Drugs	0.4	0.2	0.0	0.3	25	19	1	6	58	121	67	22	1,473,981	86,057,545	329,059	15.8	3,477,975
Cardiovascular Agents	1.2	0.2	0.1	0.9	46	23	6	17	38	96	80	19	1,882,581	71,699,036	147,071	7.1	1,559,794
Respiratory Agents	0.4	0.2	0.0	0.1	27	24	0	3	73	110	75	18	1,679,290	122,078,870	421,636	20.3	4,572,759
Gastrointestinal Agents	0.3	0.1	0.0	0.3	19	12	1	6	56	172	144	22	563,565	31,583,198	151,710	7.3	1,628,489
Genitourinary Agents	0.2	0.1	0.0	0.1	11	7	1	3	52	93	88	24	175,609	9,084,965	80,850	3.9	848,876
CNS Drugs	0.9	0.3	0.0	0.5	83	73	2	9	96	218	80	17	1,855,905	178,938,089	200,606	9.7	2,150,950
Stimulants/Anti-obesity/Anorexia	0.7	0.6	0.0	0.1	73	70	1	2	102	119	48	21	443,525	45,391,973	55,473	2.7	619,715
Miscellaneous Psychological/Neurological Agents	0.2	0.2	0.0	0.1	69	63	0	6	279	324	91	115	50,547	14,080,916	18,807	0.9	203,665
Analgesics and Anesthetics	0.3	0.0	0.0	0.3	8	3	1	4	25	293	315	12	1,649,891	40,702,803	500,747	24.1	5,344,903
Neuromuscular Agents	0.7	0.2	0.0	0.4	58	44	6	8	88	178	175	22	863,806	76,329,528	121,705	5.9	1,319,319
Nutritional Products	0.3	0.1	0.0	0.3	7	2	0	4	22	43	32	17	280,485	6,073,247	89,015	4.3	892,650
Hematological Agents	0.6	0.2	0.0	0.4	136	129	0	6	220	619	38	15	229,408	50,484,264	34,568	1.7	371,549
Topical Products	0.2	0.0	0.0	0.2	6	3	0	2	29	100	68	15	966,206	28,318,762	463,711	22.3	5,017,662
Miscellaneous Products	0.2	0.1	0.0	0.0	32	30	1	1	206	234	301	55	90,917	18,700,458	54,244	2.6	590,630
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	7	0	0	0	46	0	0	0	35,580	1,636,599	21,122	1.0	229,152
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.	14,377,360	941,267,688	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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 Illinois, 0.6 percent of drug claims have missing values for brand status. Thus, the sum of the three groups in this table may be smaller than all prescriptions combined.
 - For information about this classification method, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 - e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2007.
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE ND.7
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP^{a, b, c}
 NONDUAL BENEFICIARIES, ILLINOIS, 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	\$138,924,973	94,603	4.6	1,060,477	0.6	\$219	\$131	
ANTIASTHMATIC	101,722,592	443,072	21.3	4,847,023	0.3	81	21	
ANTICONVULSANT	71,310,246	87,355	4.2	964,104	0.6	115	74	
ANTIVIRAL	60,355,787	28,974	1.4	311,965	0.4	491	193	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	45,389,864	63,375	3.1	711,458	0.6	102	64	
ANTIDEPRESSANTS	35,751,312	166,535	8.0	1,787,886	0.4	45	20	
ANTIDIABETIC	35,065,219	83,258	4.0	889,830	0.6	64	39	
MISC. HEMATOLOGICAL	28,560,018	10,013	0.5	109,843	0.6	453	260	
CONTRACEPTIVES	26,977,035	148,494	7.2	1,529,090	0.3	56	18	
ANTIHYPERLIPIDEMIC	26,634,164	63,112	3.0	684,549	0.6	70	39	
Total	570,691,210	1,188,791	n.a.	12,896,225	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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 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, ILLINOIS, 2007

Beneficiary Characteristics	All Top 10 Drug Groups			ANTIPSYCHOTICS				ANTIASTHMATIC				
	Number of Rx	Rx \$	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	5,349,596	\$570,691,210	94,603	4.6	1,060,477	0.6	\$131	443,072	21.3	4,847,023	0.3	\$21
Female												
All Females	3,198,576	293,409,192	48,652	4.0	541,459	0.5	115	238,616	19.6	2,600,268	0.3	22
Female, Disabled												
All Ages	1,368,113	141,820,126	24,882	28.6	288,367	0.7	145	45,551	52.4	527,713	0.4	37
5 and younger	2,534	301,631	11	1.2	130	0.4	80	478	51.6	5,548	0.3	28
6-14	16,900	2,462,340	308	8.4	3,521	0.6	127	1,344	36.5	15,784	0.3	29
15-20	32,028	4,254,032	880	15.2	10,171	0.6	128	1,507	26.1	17,635	0.3	30
45-64	337,940	42,282,989	9,173	35.1	106,576	0.6	144	10,835	41.5	126,284	0.4	29
45-64	926,181	88,338,900	13,970	29.7	161,740	0.7	147	29,985	63.8	346,300	0.5	40
65-74	50,119	4,009,012	501	16.6	5,785	0.8	156	1,336	44.1	15,425	0.5	41
75-84	2,224	164,727	36	10.1	408	0.7	113	61	17.1	679	0.4	40
85 and older	187	6,495	3	5.1	36	0.7	57	5	8.5	58	0.8	10
Female, Other Eligibles												
All Ages	1,830,453	151,588,700	23,770	2.1	253,092	0.4	81	193,060	17.1	2,072,495	0.2	18
5 and younger	128,243	10,284,208	236	0.1	2,704	0.3	57	59,683	22.2	647,434	0.2	14
6-14	304,444	31,251,744	4,511	1.5	50,774	0.5	110	53,038	18.1	595,257	0.2	18
15-20	313,110	26,698,356	5,562	3.3	61,908	0.4	91	22,150	13.3	243,739	0.2	17
21-44	857,957	65,963,732	11,433	3.2	117,569	0.3	64	48,058	13.5	486,725	0.3	20
45-64	175,099	13,955,352	1,710	4.9	16,703	0.4	84	8,835	25.1	84,995	0.4	32
65-74	29,037	2,007,905	134	3.1	1,401	0.5	89	647	14.8	7,121	0.4	36
75-84	18,696	1,194,455	122	3.8	1,345	0.5	74	523	16.5	5,852	0.3	30
85 and older	3,867	232,948	62	4.6	688	0.5	59	126	9.3	1,372	0.3	25
Male												
All Males	2,151,020	277,282,018	45,951	5.3	519,018	0.7	148	204,456	23.7	2,246,755	0.3	20
Male, Disabled												
All Ages	1,012,870	151,522,905	26,237	30.5	302,586	0.7	164	26,941	31.3	308,225	0.4	35
5 and younger	3,997	1,474,706	23	1.8	260	0.4	80	814	63.2	9,246	0.3	25
6-14	43,769	8,157,064	1,138	15.8	13,264	0.6	142	2,965	41.1	34,705	0.3	27
15-20	50,128	11,451,554	1,693	18.4	19,416	0.6	158	2,153	23.4	25,148	0.3	30
21-44	317,000	56,215,984	11,222	39.1	129,829	0.8	176	5,719	19.9	65,893	0.4	30
45-64	574,718	72,112,326	11,742	31.1	135,045	0.8	157	14,683	38.9	166,580	0.5	40
65-74	21,727	1,980,221	389	24.4	4,440	0.8	141	565	35.5	6,189	0.5	39
75-84	1,287	112,807	26	17.0	284	0.9	171	35	22.9	392	0.5	47
85 and older	244	18,243	4	13.8	48	1.4	215	7	24.1	72	0.3	6
Male, Other Eligibles												
All Ages	1,138,145	125,758,655	19,714	2.5	216,432	0.5	124	177,512	22.9	1,938,503	0.2	18
5 and younger	188,935	16,871,966	625	0.2	7,095	0.4	73	81,479	29.8	881,146	0.2	15
6-14	565,606	65,513,404	10,583	3.6	120,117	0.6	126	70,380	23.8	790,211	0.2	20
15-20	195,921	25,880,369	6,037	4.9	66,458	0.6	139	17,218	14.0	187,027	0.2	21
21-44	90,306	9,325,486	1,825	3.0	16,565	0.4	86	5,325	8.8	49,485	0.3	23
45-64	71,678	6,258,419	459	2.6	4,295	0.4	93	2,202	12.4	21,034	0.4	37
65-74	14,626	1,097,303	93	3.8	940	0.5	117	431	17.5	4,543	0.4	37
75-84	9,102	677,637	69	3.6	716	0.6	102	375	19.5	4,018	0.4	38
85 and older	1,971	134,071	23	3.4	246	0.4	63	102	15.0	1,039	0.4	40
Unknown	15	824	0	0.0	0	0.0	0	8	25.0	87	0.1	9

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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 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, ILLINOIS, 2007

Beneficiary Characteristics	ANTICONVULSANT					ANTIVIRAL					STIMULANTS/ANTI-OBESITY/ANOREXIANTS				
	Number of Users	Users as % of All Benes	Number of 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 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 Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	87,355	4.2	964,104	0.6	\$74	28,974	1.4	311,965	0.4	\$194	63,375	3.1	711,458	0.6	\$64
Female															
All Females	51,956	4.3	570,009	0.6	65	19,553	1.6	207,841	0.3	133	19,627	1.6	218,715	0.6	61
Female, Disabled															
All Ages	25,065	28.8	289,710	0.7	77	4,474	5.1	51,230	0.5	310	1,589	1.8	18,490	0.6	64
5 and younger	79	8.5	912	0.7	106	13	1.4	150	0.3	75	11	1.2	130	0.8	220
6-14	496	13.5	5,738	0.8	117	51	1.4	592	0.7	331	425	11.6	4,942	0.6	68
15-20	882	15.3	10,098	0.8	123	157	2.7	1,819	0.4	236	306	5.3	3,577	0.6	64
21-44	8,508	32.6	99,026	0.8	100	1,713	6.6	19,641	0.5	304	432	1.7	5,008	0.6	55
45-64	14,472	30.8	166,732	0.7	60	2,481	5.3	28,360	0.6	323	404	0.9	4,713	0.6	66
65-74	598	19.8	6,865	0.7	48	57	1.9	644	0.4	170	10	0.3	108	0.9	86
75-84	27	7.6	303	0.9	55	2	0.6	24	0.1	11	1	0.3	12	0.5	1
85 and older	3	5.1	36	1.2	57	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	26,891	2.4	280,299	0.5	53	15,079	1.3	156,611	0.3	75	18,038	1.6	200,225	0.6	60
5 and younger	938	0.3	10,467	0.5	68	1,064	0.4	11,724	0.1	11	646	0.2	6,978	0.3	45
6-14	3,279	1.1	36,933	0.6	92	1,432	0.5	16,455	0.2	81	11,618	4.0	131,239	0.6	62
15-20	3,857	2.3	43,018	0.5	77	2,289	1.4	24,688	0.2	54	3,445	2.1	38,858	0.6	61
21-44	15,165	4.3	153,978	0.4	40	9,472	2.7	95,511	0.3	77	2,006	0.6	20,097	0.5	49
45-64	3,060	8.7	29,388	0.5	38	741	2.1	7,307	0.4	200	315	0.9	2,961	0.6	64
65-74	316	7.2	3,427	0.5	25	54	1.2	628	0.3	147	3	0.1	32	0.5	3
75-84	227	7.2	2,567	0.5	22	23	0.7	250	0.1	10	3	0.1	36	0.2	1
85 and older	49	3.6	521	0.5	23	4	0.3	48	0.1	7	2	0.1	24	0.5	6
Male															
All Males	35,399	4.1	394,095	0.7	87	9,421	1.1	104,124	0.5	314	43,748	5.1	492,743	0.6	65
Male, Disabled															
All Ages	21,021	24.5	241,366	0.8	92	5,561	6.5	62,562	0.7	463	3,358	3.9	38,870	0.7	65
5 and younger	110	8.5	1,226	0.8	97	6	0.5	72	0.5	89	37	2.9	422	0.4	36
6-14	893	12.4	10,456	0.8	119	81	1.1	966	0.7	263	1,596	22.1	18,488	0.7	67
15-20	1,496	16.3	17,185	0.8	130	89	1.0	1,021	0.5	218	980	10.6	11,317	0.7	69
21-44	8,507	29.6	98,107	0.8	113	2,053	7.1	22,644	0.7	434	548	1.9	6,400	0.7	62
45-64	9,683	25.6	110,587	0.7	67	3,291	8.7	37,400	0.8	494	191	0.5	2,171	0.7	49
65-74	304	19.1	3,495	0.8	56	40	2.5	451	0.7	409	6	0.4	72	1.0	20
75-84	26	17.0	286	0.7	42	1	0.7	8	0.3	2	0	0.0	0	0.0	0
85 and older	2	6.9	24	0.9	10	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	14,378	1.9	152,729	0.6	78	3,860	0.5	41,562	0.2	90	40,390	5.2	453,873	0.6	65
5 and younger	1,243	0.5	13,914	0.5	68	1,103	0.4	12,218	0.1	7	1,867	0.7	20,804	0.4	39
6-14	5,289	1.8	60,056	0.6	90	1,184	0.4	13,573	0.2	73	30,814	10.4	348,323	0.6	66
15-20	3,583	2.9	39,094	0.6	100	676	0.6	7,418	0.2	92	7,151	5.8	79,871	0.6	70
21-44	2,838	4.7	25,894	0.5	43	588	1.0	5,423	0.4	197	471	0.8	4,094	0.5	53
45-64	1,145	6.5	10,723	0.5	39	273	1.5	2,514	0.5	346	84	0.5	756	0.7	83
65-74	145	5.9	1,581	0.5	32	26	1.1	310	0.3	146	2	0.1	21	0.3	14
75-84	109	5.7	1,194	0.5	31	10	0.5	106	0.2	64	1	0.1	4	0.3	2
85 and older	26	3.8	273	0.5	27	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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 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, ILLINOIS, 2007

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIDIABETIC					MISC. HEMATOLOGICAL				
	Number of Users	Users as % of All Benes	Number of Months Among Users	Mean	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Months Among Users	Mean	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Months Among Users	Mean	Mean Rx \$ per Benefit Month
				Rx per Benefit Month					Rx per Benefit Month						
All	166,535	8.0	1,787,886	0.4	\$20	83,258	4.0	889,830	0.6	\$39	10,013	0.5	109,843	0.6	\$260
Female															
All Females	122,389	10.1	1,308,849	0.4	20	55,398	4.6	594,569	0.6	39	5,541	0.5	61,307	0.6	74
Female, Disabled															
All Ages	40,721	46.8	470,862	0.6	24	28,897	33.2	333,650	0.7	42	4,069	4.7	46,698	0.6	76
5 and younger	3	0.3	36	0.2	3	0	0.0	0	0.0	0	2	0.2	24	0.2	23
6-14	144	3.9	1,675	0.4	14	43	1.2	509	0.7	79	4	0.1	46	0.3	6,056
15-20	786	13.6	9,050	0.4	18	148	2.6	1,683	0.6	65	8	0.1	96	0.4	52
21-44	11,828	45.3	137,121	0.5	23	4,080	15.6	47,395	0.6	38	249	1.0	2,856	0.5	60
45-64	27,079	57.6	312,807	0.6	25	22,794	48.5	262,739	0.7	43	3,495	7.4	40,077	0.6	71
65-74	840	27.8	9,723	0.6	23	1,753	57.9	20,450	0.7	40	293	9.7	3,402	0.6	71
75-84	38	10.6	414	0.6	19	75	21.0	826	0.6	29	18	5.0	197	0.7	72
85 and older	3	5.1	36	1.0	15	4	6.8	48	0.5	20	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	81,668	7.2	837,987	0.4	18	26,501	2.3	260,919	0.5	35	1,472	0.1	14,609	0.5	68
5 and younger	106	0.0	1,202	0.2	6	141	0.1	1,543	0.6	59	16	0.0	161	0.1	109
6-14	4,449	1.5	50,381	0.4	12	1,202	0.4	13,436	0.7	68	9	0.0	93	0.2	563
15-20	11,223	6.7	124,283	0.3	13	1,377	0.8	14,783	0.5	51	13	0.0	142	0.2	16
21-44	55,482	15.6	561,942	0.4	19	13,845	3.9	134,967	0.5	31	465	0.1	4,542	0.4	61
45-64	9,367	26.6	88,670	0.5	24	7,139	20.2	65,494	0.6	35	565	1.6	5,224	0.6	68
65-74	544	12.4	5,924	0.4	17	1,739	39.7	18,838	0.6	30	189	4.3	2,060	0.5	64
75-84	385	12.1	4,386	0.5	17	894	28.2	10,050	0.6	30	168	5.3	1,911	0.6	69
85 and older	112	8.2	1,199	0.5	18	164	12.0	1,808	0.5	21	47	3.5	476	0.5	58
Male															
All Males	44,146	5.1	479,037	0.5	20	27,860	3.2	295,261	0.6	41	4,472	0.5	48,536	0.6	495
Male, Disabled															
All Ages	22,986	26.7	262,014	0.5	22	16,825	19.6	190,940	0.7	39	3,298	3.8	37,231	0.6	445
5 and younger	3	0.2	32	0.4	2	2	0.2	24	0.2	24	4	0.3	48	0.8	22,454
6-14	415	5.8	4,849	0.5	15	46	0.6	545	0.6	61	16	0.2	190	0.7	13,117
15-20	1,077	11.7	12,270	0.5	19	142	1.5	1,615	0.7	66	22	0.2	264	0.5	15,314
21-44	7,887	27.5	90,238	0.5	23	2,879	10.0	32,990	0.6	40	260	0.9	2,954	0.5	1,874
45-64	13,276	35.2	150,911	0.6	22	13,111	34.7	148,468	0.7	39	2,839	7.5	31,987	0.6	102
65-74	312	19.6	3,530	0.7	23	614	38.6	6,938	0.7	38	148	9.3	1,686	0.6	73
75-84	14	9.2	160	0.7	22	25	16.3	288	0.9	39	6	3.9	66	0.8	81
85 and older	2	6.9	24	0.8	41	6	20.7	72	0.9	61	3	10.3	36	0.8	47
Male, Other Eligibles															
All Ages	21,160	2.7	217,023	0.4	17	11,035	1.4	104,321	0.6	43	1,174	0.2	11,305	0.6	659
5 and younger	157	0.1	1,744	0.2	4	184	0.1	2,016	0.6	52	46	0.0	523	0.4	1,977
6-14	6,291	2.1	71,202	0.5	13	1,002	0.3	11,191	0.7	71	47	0.0	525	0.5	7,195
15-20	5,507	4.5	59,766	0.4	17	893	0.7	9,536	0.7	73	22	0.0	246	0.3	3,351
21-44	6,543	10.8	59,096	0.4	20	3,399	5.6	30,212	0.6	35	227	0.4	2,066	0.6	583
45-64	2,274	12.8	20,973	0.5	23	4,260	24.0	37,415	0.6	38	539	3.0	4,766	0.6	83
65-74	192	7.8	2,113	0.5	17	833	33.8	8,913	0.6	29	164	6.7	1,769	0.6	67
75-84	162	8.4	1,752	0.5	18	388	20.2	4,206	0.5	25	105	5.5	1,150	0.6	69
85 and older	34	5.0	377	0.6	24	76	11.1	832	0.5	18	24	3.5	260	0.6	74
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 Illinois, released by CMS in 5/2010. 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 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, ILLINOIS, 2007

Beneficiary Characteristics	CONTRACEPTIVES					ANTIHYPERTENSIVE					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month		
All	148,494	7.2	1,529,090	0.3	\$18	63,112	3.0	684,549	0.6	\$39	2,076,456	19,923,198
Female												
All Females	148,357	12.2	1,527,776	0.3	18	39,304	3.2	429,578	0.5	38	1,215,482	11,462,654
Female, Disabled												
All Ages	6,793	7.8	80,028	0.3	16	23,837	27.4	276,831	0.6	41	86,968	953,660
5 and younger	0	0.0	0	0.0	0	1	0.1	10	0.7	27	927	10,046
6-14	79	2.1	930	0.2	11	7	0.2	84	0.3	22	3,679	41,475
15-20	1,566	27.1	18,289	0.3	13	22	0.4	258	0.3	26	5,779	60,576
21-44	4,666	17.9	55,085	0.4	17	2,641	10.1	30,777	0.5	33	26,110	294,347
45-64	482	1.0	5,724	0.4	18	19,678	41.8	228,386	0.6	41	47,030	508,830
65-74	0	0.0	0	0.0	0	1,423	47.0	16,578	0.7	46	3,027	33,847
75-84	0	0.0	0	0.0	0	64	17.9	726	0.6	40	357	3,887
85 and older	0	0.0	0	0.0	0	1	1.7	12	0.9	25	59	652
Female, Other Eligibles												
All Ages	141,563	12.5	1,447,744	0.3	18	15,467	1.4	152,747	0.5	33	1,128,514	10,508,994
5 and younger	9	0.0	92	0.3	23	33	0.0	369	0.1	6	268,325	2,543,105
6-14	2,250	0.8	25,358	0.3	12	65	0.0	735	0.4	26	293,648	3,018,326
15-20	44,864	27.0	482,011	0.3	16	150	0.1	1,654	0.3	25	166,301	1,581,653
21-44	93,422	26.2	930,561	0.3	19	6,846	1.9	67,550	0.4	27	356,070	2,990,119
45-64	1,018	2.9	9,722	0.4	20	5,960	16.9	55,671	0.5	37	35,257	287,737
65-74	0	0.0	0	0.0	0	1,485	33.9	16,270	0.6	40	4,380	42,723
75-84	0	0.0	0	0.0	0	790	24.9	8,972	0.6	39	3,172	32,194
85 and older	0	0.0	0	0.0	0	138	10.1	1,526	0.6	38	1,361	13,137
Male												
All Males	137	0.0	1,314	0.3	18	23,808	2.8	254,971	0.6	41	860,942	8,460,263
Male, Disabled												
All Ages	21	0.0	237	0.3	12	15,389	17.9	176,835	0.6	42	85,966	919,597
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1,287	14,178
6-14	0	0.0	0	0.0	0	12	0.2	143	0.7	42	7,210	82,170
15-20	2	0.0	22	0.1	4	55	0.6	624	0.4	26	9,205	101,391
21-44	8	0.0	96	0.2	11	2,792	9.7	32,544	0.6	38	28,732	310,644
45-64	10	0.0	110	0.3	11	11,985	31.7	137,250	0.6	43	37,758	392,039
65-74	1	0.1	9	0.7	54	518	32.5	5,960	0.7	43	1,592	17,128
75-84	0	0.0	0	0.0	0	25	16.3	290	0.8	48	153	1,731
85 and older	0	0.0	0	0.0	0	2	6.9	24	0.8	9	29	316
Male, Other Eligibles												
All Ages	116	0.0	1,077	0.3	19	8,419	1.1	78,136	0.5	38	774,976	7,540,666
5 and younger	5	0.0	38	0.2	16	47	0.0	536	0.2	8	273,746	2,635,750
6-14	9	0.0	90	0.2	17	88	0.0	989	0.4	26	295,305	3,087,176
15-20	36	0.0	367	0.3	18	152	0.1	1,599	0.4	28	122,800	1,198,811
21-44	65	0.1	573	0.3	20	3,124	5.2	28,419	0.4	32	60,337	436,935
45-64	1	0.0	9	0.1	51	3,868	21.8	34,137	0.6	42	17,718	132,837
65-74	0	0.0	0	0.0	0	679	27.6	7,389	0.6	42	2,463	23,287
75-84	0	0.0	0	0.0	0	402	20.9	4,418	0.6	44	1,925	19,281
85 and older	0	0.0	0	0.0	0	59	8.7	649	0.7	41	682	6,589
Unknown	1	3.1	4	1.0	13	0	0.0	0	0.0	0	32	281

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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 Beneficiaries

TABLE ND.8
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
 BY BENEFICIARY CHARACTERISTIC^{a, b}
 NONDUAL BENEFICIARIES, ILLINOIS, 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	\$574	7.6	7,481	84,282
Age				
0-64	630	8.2	6,149	69,832
65-74	454	6.7	640	7,113
75-84	205	3.6	340	3,741
85 and older	114	2.4	352	3,596
Unknown	0	0.0	0	0
Gender				
Female	575	7.9	3,248	36,424
Male	574	7.4	4,233	47,858
Unknown	0	0.0	0	0
Race				
White	585	7.9	3,769	42,293
African American	569	7.3	3,040	34,362
Other/unknown	542	7.4	672	7,627
Basis of Eligibility^c				
Aged	186	3.4	689	7,246
Disabled	611	8.0	6,779	76,936
Adults	852	14.2	7	39
Children	309	6.8	6	61
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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 6,702 beneficiaries who were in nursing facilities for part of their enrollment and their 69,416 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, ILLINOIS, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	Patented Brand-Name		Off-Patent Brand-Name		Patented Brand-Name		Off-Patent Brand-Name		Patented Brand-Name		Off-Patent Brand-Name		Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
	Total	Generic	Total	Generic	Total	Generic	Total	Generic	Total	Generic							
Anti-infective Agents	0.5	0.2	0.0	0.3	\$80	\$70	\$1	\$9	\$169	\$395	\$285	\$30	21,232	\$3,594,326	3,927	52.5	44,933
Biologicals	0.1	0.1	0.0	0.0	7	7	0	0	70	70	0	0	850	59,339	730	9.8	8,674
Antineoplastic Agents	0.6	0.1	0.0	0.5	87	48	9	30	151	887	1,477	58	3,114	470,517	480	6.4	5,407
Endocrine/Metabolic Drugs	1.3	0.4	0.0	0.8	61	45	2	13	48	109	103	16	42,817	2,062,132	2,973	39.7	33,890
Cardiovascular Agents	2.0	0.3	0.1	1.5	61	27	8	26	32	87	76	17	106,338	3,351,251	4,770	63.8	54,510
Respiratory Agents	0.8	0.3	0.0	0.5	43	37	0	6	51	108	65	12	28,908	1,464,281	2,994	40.0	34,197
Gastrointestinal Agents	1.0	0.5	0.0	0.5	79	73	1	6	80	143	97	12	42,162	3,389,191	3,765	50.3	42,749
Genitourinary Agents	0.6	0.4	0.0	0.2	44	39	0	5	69	94	45	21	9,119	626,474	1,235	16.5	14,234
CNS Drugs	2.7	1.1	0.0	1.6	289	256	2	31	106	239	72	19	193,303	20,540,045	6,185	82.7	70,995
Stimulants/Anti-obesity/Anorexia	1.0	0.1	0.0	0.9	24	14	0	10	25	183	0	11	800	20,053	72	1.0	836
Miscellaneous Psychological/Neurological Agents	0.7	0.7	0.0	0.1	162	157	0	5	219	233	295	71	6,764	1,479,595	793	10.6	9,157
Analgesics and Anesthetics	1.1	0.0	0.1	1.1	28	2	15	11	24	152	195	10	42,131	1,028,706	3,249	43.4	36,827
Neuromuscular Agents	1.5	0.5	0.0	1.0	115	87	8	21	76	171	181	21	79,049	5,987,949	4,487	60.0	51,954
Nutritional Products	0.7	0.0	0.0	0.7	10	0	0	9	14	29	16	13	13,181	181,901	1,675	22.4	18,704
Hematological Agents	1.1	0.3	0.0	0.8	112	103	0	9	98	298	34	11	34,206	3,348,122	2,668	35.7	29,947
Topical Products	0.4	0.1	0.0	0.3	13	8	1	5	29	78	60	14	14,356	422,643	2,837	37.9	32,669
Miscellaneous Products	0.3	0.1	0.0	0.3	40	30	0	10	117	437	260	38	2,428	284,543	647	8.6	7,145
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	25	0	0	0	85	0	0	0	1,114	94,193	335	4.5	3,782
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.	641,872	48,405,261	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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 6,702 beneficiaries who were in nursing facilities for part of their enrollment and their 69,416 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 Illinois, 0.6 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, ILLINOIS, 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	\$18,528,819	9,234	123.4	107,929	1.0	\$164	\$172	
ANTICONVULSANT	5,450,673	4,784	63.9	55,529	1.0	98	98	
ULCER DRUGS	2,947,880	3,948	52.8	45,171	0.7	93	65	
ANTIVIRAL	2,767,677	527	7.0	5,914	0.8	568	468	
ANTIDIABETIC	1,745,246	3,800	50.8	43,655	0.8	48	40	
ANTIDEPRESSANTS	1,696,615	5,046	67.5	58,039	0.8	38	29	
ANTIHYPERLIPIDEMIC	1,511,116	2,926	39.1	33,979	0.8	57	44	
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	1,510,198	1,150	15.4	13,280	0.6	191	114	
ANTICOAGULANTS	1,465,293	1,630	21.8	17,900	0.8	99	82	
HEMATOPOIETIC AGENTS	1,349,561	2,119	28.3	24,081	0.7	81	56	
Total	38,973,078	35,164	n.a.	405,477	n.a.	n.a.	n.a.	

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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 6,702 beneficiaries who were in nursing facilities for part of their enrollment and their 69,416 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 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, ILLINOIS, 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	353,158	\$38,973,078	9,234	123.4	107,929	1.0	\$172	4,784	63.9	55,529	1.0	\$98
Female												
All Females	153,744	16,606,854	3,852	118.6	44,887	1.1	174	2,019	62.2	23,328	1.0	92
Female, Disabled												
All Ages	146,901	16,075,186	3,741	133.6	43,693	1.1	176	1,963	70.1	22,746	1.0	94
64 or younger	134,826	14,874,346	3,473	140.5	40,596	1.1	176	1,803	72.9	20,916	1.0	95
65-74	10,884	1,099,188	241	91.6	2,793	1.0	178	143	54.4	1,637	0.9	73
75-84	1,005	91,904	24	48.0	268	0.7	143	14	28.0	157	1.0	77
85 and older	186	9,748	3	18.8	36	0.7	57	3	18.8	36	1.2	57
Female, Other Eligibles												
All Ages	6,843	531,668	111	24.8	1,194	0.7	96	56	12.5	582	0.8	46
64 or younger	73	7,792	2	50.0	10	2.3	402	2	50.0	10	1.3	151
65-74	2,130	205,127	39	66.1	417	0.8	129	24	40.7	257	0.8	58
75-84	2,573	177,686	35	24.8	373	0.6	89	19	13.5	201	0.9	36
85 and older	2,067	141,063	35	14.4	394	0.5	59	11	4.5	114	0.6	29
Male												
All Males	199,414	22,366,224	5,382	127.1	63,042	1.0	170	2,765	65.3	32,201	1.0	102
Male, Disabled												
All Ages	195,313	21,985,506	5,310	133.5	62,252	1.1	170	2,727	68.6	31,797	1.0	103
64 or younger	183,842	20,869,512	5,061	138.1	59,363	1.1	171	2,583	70.5	30,124	1.0	104
65-74	10,517	1,030,523	232	87.5	2,699	1.0	156	129	48.7	1,513	1.0	78
75-84	678	57,352	13	35.1	142	1.1	219	13	35.1	136	0.8	31
85 and older	276	28,119	4	40.0	48	1.4	215	2	20.0	24	0.9	10
Male, Other Eligibles												
All Ages	4,101	380,718	72	28.2	790	0.8	155	38	14.9	404	0.9	73
64 or younger	243	18,074	6	85.7	71	0.8	115	4	57.1	38	0.7	14
65-74	1,239	123,519	23	43.4	240	1.0	219	15	28.3	169	0.8	66
75-84	1,760	175,092	30	26.8	335	0.8	156	13	11.6	133	1.0	111
85 and older	859	64,033	13	15.7	144	0.5	67	6	7.2	64	1.0	45
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 Illinois, released by CMS in 5/2010. 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 6,702 beneficiaries who were in nursing facilities for part of their enrollment and their 69,416 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, ILLINOIS, 2007

Beneficiary Characteristics	ULCER DRUGS					ANTIVIRAL					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	3,948	52.8	45,171	0.7	\$65	527	7.0	5,914	0.8	\$468	3,800	50.8	43,655	0.8	\$40
Female															
All Females	1,753	54.0	20,054	0.7	64	198	6.1	2,245	0.7	373	1,871	57.6	21,483	0.9	40
Female, Disabled															
All Ages	1,633	58.3	18,746	0.7	64	185	6.6	2,095	0.7	385	1,749	62.4	20,153	0.9	41
64 or younger	1,481	59.9	17,031	0.7	64	182	7.4	2,059	0.7	386	1,573	63.6	18,204	0.9	41
65-74	136	51.7	1,551	0.7	68	3	1.1	36	0.3	305	152	57.8	1,703	1.0	47
75-84	13	26.0	128	0.7	56	0	0.0	0	0.0	0	21	42.0	210	0.7	40
85 and older	3	18.8	36	0.6	74	0	0.0	0	0.0	0	3	18.8	36	0.6	24
Female, Other Eligibles															
All Ages	120	26.8	1,308	0.7	65	13	2.9	150	0.5	217	122	27.3	1,330	0.7	29
64 or younger	3	75.0	12	0.6	16	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	35	59.3	401	0.8	70	11	18.6	126	0.5	258	39	66.1	407	0.8	38
75-84	42	29.8	458	0.7	70	0	0.0	0	0.0	0	53	37.6	599	0.8	29
85 and older	40	16.5	437	0.6	57	2	0.8	24	0.1	1	30	12.3	324	0.6	18
Male															
All Males	2,195	51.9	25,117	0.7	66	329	7.8	3,669	0.9	526	1,929	45.6	22,172	0.8	40
Male, Disabled															
All Ages	2,116	53.2	24,257	0.7	66	329	8.3	3,669	0.9	526	1,883	47.3	21,636	0.8	40
64 or younger	1,959	53.4	22,503	0.7	66	313	8.5	3,510	0.9	534	1,738	47.4	20,008	0.8	40
65-74	146	55.1	1,636	0.7	57	15	5.7	151	0.6	362	132	49.8	1,484	0.8	36
75-84	8	21.6	88	0.8	69	1	2.7	8	0.3	2	7	18.9	72	0.9	30
85 and older	3	30.0	30	0.5	66	0	0.0	0	0.0	0	6	60.0	72	0.9	61
Male, Other Eligibles															
All Ages	79	31.0	860	0.7	76	0	0.0	0	0.0	0	46	18.0	536	0.7	29
64 or younger	4	57.1	48	0.6	58	0	0.0	0	0.0	0	1	14.3	12	1.2	72
65-74	22	41.5	226	0.8	82	0	0.0	0	0.0	0	20	37.7	232	0.8	45
75-84	36	32.1	392	0.7	78	0	0.0	0	0.0	0	14	12.5	168	0.5	11
85 and older	17	20.5	194	0.8	68	0	0.0	0	0.0	0	11	13.3	124	0.7	21
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 Illinois, released by CMS in 5/2010. 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 6,702 beneficiaries who were in nursing facilities for part of their enrollment and their 69,416 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, ILLINOIS, 2007

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTHYPERLIPIDEMIC					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	5,046	67.5	58,039	0.8	\$29	2,926	39.1	33,979	0.8	\$45	1,150	15.4	13,280	0.6	\$114
Female															
All Females	2,330	71.7	26,701	0.8	31	1,288	39.7	14,909	0.8	46	497	15.3	5,797	0.6	148
Female, Disabled															
All Ages	2,217	79.2	25,493	0.8	31	1,210	43.2	14,055	0.8	46	405	14.5	4,751	0.6	157
64 or younger	2,055	83.1	23,672	0.8	32	1,094	44.3	12,752	0.8	45	344	13.9	4,049	0.6	165
65-74	139	52.9	1,583	0.8	30	102	38.8	1,163	0.8	54	54	20.5	618	0.8	117
75-84	20	40.0	202	0.8	28	13	26.0	128	0.6	43	7	14.0	84	0.7	100
85 and older	3	18.8	36	1.0	15	1	6.3	12	0.9	25	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	113	25.3	1,208	0.7	28	78	17.4	854	0.8	43	92	20.6	1,046	0.8	107
64 or younger	4	100.0	19	1.3	73	2	50.0	4	1.0	103	0	0.0	0	0.0	0
65-74	37	62.7	402	0.8	31	18	30.5	203	0.7	44	22	37.3	252	0.7	101
75-84	40	28.4	449	0.6	25	36	25.5	413	0.7	41	32	22.7	360	0.7	105
85 and older	32	13.2	338	0.7	24	22	9.1	234	0.9	43	38	15.6	434	0.9	111
Male															
All Males	2,716	64.2	31,338	0.8	28	1,638	38.7	19,070	0.8	44	653	15.4	7,483	0.6	87
Male, Disabled															
All Ages	2,645	66.5	30,533	0.8	28	1,588	39.9	18,532	0.8	43	605	15.2	7,017	0.5	86
64 or younger	2,502	68.2	28,929	0.8	27	1,492	40.7	17,440	0.8	43	535	14.6	6,201	0.5	82
65-74	136	51.3	1,525	0.8	32	86	32.5	976	0.8	43	59	22.3	696	0.7	109
75-84	5	13.5	55	0.8	44	9	24.3	104	0.9	52	6	16.2	60	0.5	83
85 and older	2	20.0	24	0.8	41	1	10.0	12	1.0	17	5	50.0	60	0.9	136
Male, Other Eligibles															
All Ages	71	27.8	805	0.7	29	50	19.6	538	0.8	51	48	18.8	466	0.8	112
64 or younger	4	57.1	48	1.0	17	3	42.9	36	0.8	47	0	0.0	0	0.0	0
65-74	20	37.7	228	0.7	23	14	26.4	159	0.9	58	9	17.0	108	0.7	100
75-84	33	29.5	363	0.7	29	24	21.4	243	0.8	48	25	22.3	234	0.7	111
85 and older	14	16.9	166	0.7	39	9	10.8	100	0.9	50	14	16.9	124	0.8	124
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 Illinois, released by CMS in 5/2010. 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 6,702 beneficiaries who were in nursing facilities for part of their enrollment and their 69,416 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, ILLINOIS, 2007

Beneficiary Characteristics	ANTICOAGULANTS					HEMATOPOIETIC AGENTS					All-Year Nursing Facility Residents	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	1,630	21.8	17,900	0.8	\$82	2,119	28.3	24,081	0.7	\$56	7,481	84,282
Female												
All Females	720	22.2	7,885	0.8	92	828	25.5	9,399	0.6	59	3,248	36,424
Female, Disabled												
All Ages	650	23.2	7,128	0.9	97	717	25.6	8,143	0.7	66	2,801	31,757
64 or younger	567	22.9	6,265	0.9	101	634	25.6	7,230	0.7	67	2,472	28,054
65-74	73	27.8	773	0.9	70	66	25.1	719	0.7	69	263	2,945
75-84	9	18.0	78	0.5	55	14	28.0	158	0.4	15	50	569
85 and older	1	6.3	12	0.3	96	3	18.8	36	0.6	3	16	189
Female, Other Eligibles												
All Ages	70	15.7	757	0.7	43	111	24.8	1,256	0.6	17	447	4,667
64 or younger	1	25.0	1	1.0	273	0	0.0	0	0.0	0	4	13
65-74	15	25.4	156	0.5	67	17	28.8	198	0.6	16	59	656
75-84	28	19.9	306	0.9	42	40	28.4	456	0.6	20	141	1,552
85 and older	26	10.7	294	0.6	30	54	22.2	602	0.6	14	243	2,446
Male												
All Males	910	21.5	10,015	0.8	74	1,291	30.5	14,682	0.7	54	4,233	47,858
Male, Disabled												
All Ages	863	21.7	9,543	0.8	74	1,237	31.1	14,056	0.7	56	3,978	45,179
64 or younger	790	21.5	8,784	0.8	73	1,127	30.7	12,804	0.7	57	3,666	41,692
65-74	68	25.7	711	1.0	86	100	37.7	1,136	0.7	56	265	2,961
75-84	2	5.4	24	1.5	24	8	21.6	92	0.7	5	37	412
85 and older	3	30.0	24	0.4	72	2	20.0	24	0.7	5	10	114
Male, Other Eligibles												
All Ages	47	18.4	472	0.8	85	54	21.2	626	0.5	8	255	2,679
64 or younger	4	57.1	48	0.5	32	2	28.6	24	0.5	71	7	73
65-74	14	26.4	126	0.5	39	11	20.8	118	0.5	4	53	551
75-84	20	17.9	215	1.1	125	23	20.5	276	0.6	4	112	1,208
85 and older	9	10.8	83	0.9	83	18	21.7	208	0.5	9	83	847
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 Illinois, released by CMS in 5/2010. 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 6,702 beneficiaries who were in nursing facilities for part of their enrollment and their 69,416 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}
 ILLINOIS, 2007

Beneficiary Characteristics	Number of Beneficiaries with 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	557,916	26.9	1.1	2,184,441	\$9	\$19,647,713	\$9	2.1	2,076,456
Age									
5 and younger	196,450	36.1	1.1	591,192	7	3,910,852	7	4.4	544,285
6-14	132,528	22.1	0.5	312,667	5	2,712,959	9	1.7	599,842
15-20	56,144	18.5	0.5	140,453	4	1,359,112	10	1.4	304,085
21-44	101,174	21.5	0.9	434,981	10	4,719,677	11	1.8	471,249
45-64	63,336	46.0	4.5	625,409	46	6,365,604	10	2.1	137,763
65-74	5,231	45.6	4.5	52,034	34	387,910	7	2.1	11,462
75-84	2,192	39.1	3.5	19,706	25	137,562	7	2.5	5,607
85 and older	853	40.0	3.7	7,971	25	53,909	7	4.2	2,131
Unknown	8	25.0	0.9	28	4	128	5	4.8	32
Basis of Eligibility^c									
Aged	5,134	36.8	3.0	42,018	21	291,089	7	2.2	13,935
Disabled	83,316	48.2	4.8	827,059	52	8,984,150	11	2.0	172,936
Adults	98,778	19.6	0.7	329,031	6	3,100,435	9	1.8	504,192
Children	370,308	26.7	0.7	984,304	5	7,247,859	7	2.5	1,384,521
Unknown	380	43.6	2.3	2,029	28	24,180	12	0.9	872
Gender									
Female	329,162	27.1	1.1	1,304,904	9	11,531,838	9	2.2	1,215,502
Male	228,754	26.6	1.0	879,537	9	8,115,875	9	1.9	860,954
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	152,965	20.8	0.9	677,613	9	6,355,589	9	1.5	736,860
African American	206,185	29.9	1.2	808,164	11	7,907,521	10	2.5	689,396
Other/unknown	198,766	30.6	1.1	698,664	8	5,384,603	8	2.9	650,200
Use of Nursing Facilities^d									
Entire year	6,367	85.1	13.5	101,061	108	808,114	8	1.7	7,481
Part year	5,616	83.8	8.9	59,680	93	624,382	10	2.2	6,702
None	545,933	26.5	1.0	2,023,700	9	18,215,217	9	2.1	2,062,273
Maintenance Assistance Status									
Cash	79,082	42.7	3.0	551,663	31	5,673,924	10	2.1	184,998
Medically needy	76,885	25.0	1.3	384,655	12	3,741,203	10	1.8	307,466
Poverty related	340,138	26.7	0.7	914,262	5	6,795,020	7	2.6	1,274,606
Other/unknown	61,811	20.0	1.1	333,861	11	3,437,566	10	1.7	309,386

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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}
 ILLINOIS, 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	\$1	\$9	\$0	\$0	19,923,198
Age						
5 and younger	0.1	1	7	0	0	5,203,079
6-14	0.1	0	9	0	0	6,229,147
15-20	0.0	0	10	0	0	2,942,431
21-44	0.1	1	11	0	0	4,032,045
45-64	0.5	5	10	0	1	1,321,443
65-74	0.4	3	7	0	1	116,985
75-84	0.3	2	7	0	0	57,093
85 and older	0.4	3	7	0	0	20,694
Unknown	0.1	0	5	0	0	281
Basis of Eligibility^c						
Aged	0.3	2	7	0	0	136,635
Disabled	0.4	5	11	0	1	1,873,271
Adults	0.1	1	9	0	0	4,142,210
Children	0.1	1	7	0	0	13,763,665
Unknown	0.3	3	12	0	1	7,417
Gender						
Female	0.1	1	9	0	0	11,462,853
Male	0.1	1	9	0	0	8,460,345
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	1	9	0	0	6,969,271
African American	0.1	1	10	0	0	6,737,973
Other/unknown	0.1	1	8	0	0	6,215,954
Use of Nursing Facilities^d						
Entire year	1.2	10	8	0	3	84,282
Part year	0.9	9	10	0	2	69,416
None	0.1	1	9	0	0	19,769,500
Maintenance Assistance Status						
Cash	0.3	3	10	0	1	1,914,927
Medically needy	0.1	1	10	0	0	2,592,357
Poverty related	0.1	1	7	0	0	12,637,604
Other/unknown	0.1	1	10	0	0	2,778,310

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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}
ILLINOIS, 2007

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D		Number Rx as a Percentage of All Part D	
				Excluded Rx \$	Total Number Rx. \$ per Rx	Excluded Rx	Excluded Rx
All	668,821	\$29	\$19,647,713	100.0	2,184,441	\$9	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	24	78	1,864	0.0	45	41	0.0
Drugs for cosmetic purposes	298	15	4,596	0.0	469	10	0.0
Cough and cold medications	69,551	20	1,374,961	7.0	101,743	14	4.7
Vitamins and minerals	22,578	107	2,409,731	12.3	119,270	20	5.5
Non-prescription drugs	480,565	22	10,654,327	54.2	1,507,965	7	69.0
Barbiturates	3,634	82	299,339	1.5	31,280	10	1.4
Benzodiazepines	69,458	50	3,470,863	17.7	373,382	9	17.1
Other Part D Excl Rx Drugs	22,713	63	1,432,032	7.3	50,287	28	2.3

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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 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, ILLINOIS, 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	2,115,273	13,935	172,940	508,092	1,419,434	872	20,966,233	136,641	1,874,958	4,314,918	14,632,291	7,425
Age												
5 and younger	552,284	0	2,215	13	550,056	0	5,479,587	0	24,553	86	5,454,948	0
6-14	619,584	2	10,890	68	608,624	0	6,668,152	20	124,209	493	6,543,430	0
15-20	311,313	1	14,984	36,672	259,642	14	3,110,246	9	162,231	321,152	2,626,748	106
21-44	474,651	0	54,843	418,634	1,030	144	4,177,641	0	605,392	3,564,556	6,610	1,083
45-64	138,209	74	84,789	52,595	43	708	1,335,506	242	900,998	427,824	229	6,213
65-74	11,462	6,729	4,619	104	4	6	116,998	65,225	50,975	760	15	23
75-84	5,607	5,087	510	5	5	0	57,103	51,420	5,618	35	30	0
85 and older	2,131	2,042	88	0	1	0	20,694	19,725	968	0	1	0
Unknown	32	0	2	1	29	0	306	0	14	12	280	0
Gender												
Female	1,235,742	8,902	86,970	429,328	709,671	871	12,058,129	87,882	954,480	3,730,355	7,277,999	7,413
Male	879,531	5,033	85,970	78,764	709,763	1	8,908,104	48,759	920,478	584,563	7,354,292	12
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	738,621	3,924	62,467	209,833	461,875	522	7,035,370	37,866	661,633	1,704,792	4,626,595	4,484
African American	718,375	2,117	86,728	159,342	469,973	215	7,427,749	20,076	953,845	1,473,658	4,978,309	1,861
Other/unknown	658,277	7,894	23,745	138,917	487,586	135	6,503,114	78,699	259,480	1,136,468	5,027,387	1,080
Use of Nursing Facilities^c												
Entire year	7,481	689	6,779	7	6	0	84,282	7,246	76,936	39	61	0
Part year	6,702	676	5,791	222	8	5	69,462	6,476	60,702	2,152	90	42
None	2,101,090	12,570	160,370	507,863	1,419,420	867	20,812,489	122,919	1,737,320	4,312,727	14,632,140	7,383
Maintenance Assistance Status												
Cash	188,427	2,977	105,665	11,216	68,569	0	2,008,494	33,297	1,214,844	108,865	651,488	0
Medically needy	310,133	7,225	36,983	261,332	4,593	0	2,698,994	68,109	329,175	2,274,989	26,721	0
Poverty related	1,306,144	1,226	8,747	33,432	1,261,867	872	13,423,095	11,751	84,274	213,960	13,105,685	7,425
Other/unknown	310,569	2,507	21,545	202,112	84,405	0	2,835,650	23,484	246,665	1,717,104	848,397	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	1,901,943	13,929	172,560	463,122	1,251,461	871	18,588,018	136,569	1,870,613	3,841,589	12,731,833	7,414
FFS part year, with Rx claims	83,740	1	297	22,928	60,513	1	949,400	12	3,427	251,618	694,332	11
FFS part year, no Rx claims	35,293	0	69	5,572	29,652	0	384,619	0	763	53,719	330,137	0
MC all year, with Rx claims	55,480	5	10	12,570	42,895	0	630,318	60	109	135,156	494,993	0
MC all year, no Rx claims	38,680	0	4	3,763	34,913	0	413,470	0	46	32,428	380,996	0

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. 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, ILLINOIS, 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
All	2,115,273	20,966,233	2,076,456	19,923,198	0	1,043,035
Fee-for-service (FFS) all year	1,901,943	18,588,018	1,901,943	18,586,990	0	1,028
FFS part year, with Rx claims	83,740	949,400	83,740	508,748	0	440,652
FFS part year, with no Rx claims	35,293	384,619	35,293	197,146	0	187,473
Managed care (MC) all year, with Rx claims	55,480	630,318	55,480	630,314	0	4
MC all year, with no Rx claims	38,680	413,470	0	0	0	413,470

Source: Data for this table are from the MAX 2007 file for Illinois, released by CMS in 5/2010. This table was produced on 10/06/2010.
 a. Benefit months are months during which beneficiaries had pharmacy benefit coverage.
 Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.

All Medicaid Beneficiaries