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

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TABLE ND.2
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY^{a, b}
NONDUAL BENEFICIARIES, PENNSYLVANIA, 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	687,238	8,502	124,913	169,200	382,933	1,690	4,235,601	49,603	1,017,420	846,071	2,309,692	12,815
Age												
5 and younger	148,252	0	9,150	0	139,102	0	882,190	0	61,028	0	821,162	0
6-14	160,675	0	24,999	0	135,676	0	1,092,865	0	220,642	0	872,223	0
15-20	120,003	0	16,440	0	103,536	27	740,714	0	143,554	0	597,020	140
21-44	188,510	0	34,045	149,198	4,528	739	1,044,740	0	271,954	748,899	19,157	4,730
45-64	61,038	6	40,116	19,995	0	921	424,720	31	319,593	97,160	0	7,936
65-74	3,622	3,454	158	7	0	3	20,899	20,241	637	12	0	9
75-84	2,589	2,589	0	0	0	0	16,197	16,197	0	0	0	0
85 and older	2,458	2,453	5	0	0	0	13,146	13,134	12	0	0	0
Unknown	91	0	0	0	91	0	130	0	0	0	130	0
Gender												
Female	387,164	5,525	58,402	126,929	194,618	1,690	2,346,221	32,082	487,599	647,130	1,166,595	12,815
Male	300,074	2,977	66,511	42,271	188,315	0	1,889,380	17,521	529,821	198,941	1,143,097	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	475,784	4,377	99,151	114,316	256,672	1,268	3,411,462	25,510	874,851	685,639	1,815,824	9,638
African American	112,942	1,889	14,441	29,397	66,975	240	439,984	12,537	80,309	82,954	262,391	1,793
Other/unknown	98,512	2,236	11,321	25,487	59,286	182	384,155	11,556	62,260	77,478	231,477	1,384
Use of Nursing Facilities^c												
Entire year	2,912	919	1,991	1	0	1	30,260	9,806	20,449	3	0	2
Part year	2,816	542	2,157	109	3	5	19,892	4,291	14,968	576	24	33
None	681,510	7,041	120,765	169,090	382,930	1,684	4,185,449	35,506	982,003	845,492	2,309,668	12,780
Maintenance Assistance Status												
Cash	278,491	1,947	67,249	91,778	117,517	0	1,743,493	17,567	633,859	429,687	662,380	0
Medically needy	19,841	20	386	8,588	10,847	0	120,025	136	1,966	53,037	64,886	0
Poverty-related	275,035	3,119	52,374	18,888	198,964	1,690	1,646,171	12,585	345,276	67,288	1,208,207	12,815
Other/unknown	113,871	3,416	4,904	49,946	55,605	0	725,912	19,315	36,319	296,059	374,219	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	426,081	6,856	91,346	93,266	233,001	1,612	3,656,371	45,718	925,195	696,008	1,977,076	12,374
FFS part year, with Rx claims	44,405	459	11,376	14,769	17,750	51	160,087	1,449	42,039	40,568	75,715	316
FFS part year, no Rx claims	216,752	1,187	22,191	61,165	132,182	27	419,143	2,436	50,186	109,495	256,901	125

Source: Data for this table are from the MAX 2007 file for Pennsylvania, 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, PENNSYLVANIA, 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	44.1	6.9	\$470	\$68	\$3,941	11.9	687,238
Age							
5 and younger	40.9	2.1	110	51	2,593	4.3	148,252
6-14	40.8	3.9	294	75	2,466	11.9	160,675
15-20	41.9	4.6	341	75	2,954	11.6	120,003
21-44	45.4	7.5	514	68	4,210	12.2	188,510
45-64	63.2	28.7	1,917	67	10,953	17.5	61,038
65-74	35.2	15.2	800	53	13,165	6.1	3,622
75-84	28.5	9.7	449	46	12,879	3.5	2,589
85 and older	19.8	4.7	150	32	12,050	1.2	2,458
Unknown	0.0	0.0	0	0	0	0.0	91
Basis of Eligibility^e							
Aged	28.6	10.4	494	47	12,801	3.9	8,502
Disabled	66.6	22.9	1,735	76	11,004	15.8	124,913
Adults	41.2	5.0	246	49	3,003	8.2	169,200
Children	38.3	2.5	141	58	1,838	7.7	382,933
Unknown	64.0	16.8	3,789	226	7,693	49.3	1,690
Gender							
Female	45.2	7.4	460	62	3,881	11.8	387,164
Male	42.7	6.2	483	77	4,018	12.0	300,074
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	53.6	8.8	594	67	3,998	14.9	475,784
African American	22.3	3.0	206	69	4,314	4.8	112,942
Other/unknown	23.1	2.3	174	75	3,237	5.4	98,512
Use of Nursing Facilities^f							
Entire year	85.2	83.1	4,772	57	71,894	6.6	2,912
Part year	87.8	52.5	3,226	61	47,581	6.8	2,816
None	43.7	6.4	440	69	3,470	12.7	681,510
Maintenance Assistance Status							
Cash	45.8	9.6	666	69	4,945	13.5	278,491
Medically needy	38.3	3.2	152	48	2,260	6.7	19,841
Poverty related	40.8	4.2	298	71	2,764	10.8	275,035
Other/unknown	49.0	7.5	460	61	4,619	10.0	113,871

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

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ ^c	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ ^d	Number	
				None	More than 0, but 1 or Less	More than 1, but 2 or Less	More than 2, but 5 or Less	More than 5, but 10 or Less	More than 10		Beneficiaries	Benefit Months
All	1.1	\$76	11.9	55.9	30.2	5.1	5.6	2.4	0.8	\$639	687,238	4,235,601
Age												
5 and younger	0.4	19	4.3	59.1	37.8	2.1	0.9	0.1	0.0	436	148,252	882,190
6-14	0.6	43	11.9	59.2	32.6	4.2	3.4	0.5	0.0	363	160,675	1,092,865
15-20	0.7	55	11.6	58.1	31.4	5.2	4.3	0.9	0.1	479	120,003	740,714
21-44	1.4	93	12.2	54.6	27.4	7.1	7.5	2.7	0.6	760	188,510	1,044,740
45-64	4.1	276	17.5	36.8	14.7	8.8	18.9	14.9	6.0	1,574	61,038	424,720
65-74	2.6	139	6.1	64.8	10.1	4.8	8.8	7.7	3.8	2,282	3,622	20,899
75-84	1.5	72	3.5	71.5	11.7	3.5	6.2	5.1	1.9	2,059	2,589	16,197
85 and older	0.9	28	1.2	80.2	10.6	2.2	3.9	2.2	0.8	2,253	2,458	13,146
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	91	130
Basis of Eligibility^e												
Aged	1.8	85	3.9	71.4	10.8	3.7	6.6	5.2	2.2	2,194	8,502	49,603
Disabled	2.8	213	15.8	33.4	25.5	10.5	17.0	10.0	3.7	1,351	124,913	1,017,420
Adults	1.0	49	8.2	58.8	26.9	6.4	6.0	1.7	0.2	601	169,200	846,071
Children	0.4	23	7.7	61.7	33.7	2.8	1.6	0.2	0.0	305	382,933	2,309,692
Unknown	2.2	500	49.3	36.0	27.6	10.7	16.3	8.0	1.4	1,015	1,690	12,815
Gender												
Female	1.2	76	11.8	54.8	30.7	5.3	5.6	2.7	0.9	640	387,164	2,346,221
Male	1.0	77	12.0	57.3	29.6	5.0	5.5	2.1	0.6	638	300,074	1,889,380
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	1.2	83	14.9	46.4	36.6	6.2	6.9	3.0	0.9	558	475,784	3,411,462
African American	0.8	53	4.8	77.7	14.9	2.7	2.8	1.3	0.5	1,107	112,942	439,984
Other/unknown	0.6	45	5.4	76.9	17.2	2.6	2.3	0.8	0.2	830	98,512	384,155
Use of Nursing Facilities^f												
Entire year	8.0	459	6.6	14.8	7.2	3.2	14.9	29.3	30.5	6,919	2,912	30,260
Part year	7.4	457	6.8	12.2	8.7	5.8	18.6	25.6	29.1	6,736	2,816	19,892
None	1.0	72	12.7	56.3	30.4	5.1	5.5	2.2	0.5	565	681,510	4,185,449
Maintenance Assistance Status												
Cash	1.5	106	13.5	54.2	28.5	5.6	6.8	3.6	1.3	790	278,491	1,743,493
Medically needy	0.5	25	6.7	61.7	31.2	4.4	2.3	0.3	0.1	374	19,841	120,025
Poverty related	0.7	50	10.8	59.2	31.7	4.0	3.7	1.2	0.2	462	275,035	1,646,171
Other/unknown	1.2	72	10.0	51.0	30.9	6.8	7.7	2.8	0.8	725	113,871	725,912

Source: Data for this table are from the MAX 2007 file for Pennsylvania, 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, PENNSYLVANIA, 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	1.1	\$76	\$68	0.4	\$59	\$167	0.0	\$5	\$101	0.7	\$12	\$17
Age												
5 and younger	0.4	19	51	0.1	13	180	0.0	2	73	0.3	4	15
6-14	0.6	43	75	0.3	36	129	0.0	2	91	0.3	5	19
15-20	0.7	55	75	0.3	45	151	0.0	3	88	0.4	7	18
21-44	1.4	93	68	0.4	71	189	0.0	6	116	0.9	16	17
45-64	4.1	276	67	1.2	209	182	0.2	20	108	2.8	45	16
65-74	2.6	139	53	0.7	105	141	0.1	10	90	1.8	24	13
75-84	1.5	72	46	0.5	55	115	0.1	4	67	1.0	12	12
85 and older	0.9	28	32	0.2	19	83	0.0	3	58	0.6	6	10
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility^d												
Aged	1.8	85	47	0.5	63	124	0.1	6	80	1.2	15	13
Disabled	2.8	213	76	0.9	169	182	0.1	14	110	1.7	30	17
Adults	1.0	49	49	0.2	35	142	0.0	3	97	0.7	11	15
Children	0.4	23	58	0.1	18	131	0.0	2	79	0.3	4	17
Unknown	2.2	500	226	0.7	437	614	0.1	23	217	1.4	34	25
Gender												
Female	1.2	76	62	0.4	57	160	0.1	5	101	0.8	13	16
Male	1.0	77	77	0.3	62	176	0.0	5	103	0.6	11	18
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	1.2	83	67	0.4	64	165	0.1	6	102	0.8	13	17
African American	0.8	53	69	0.2	42	176	0.0	3	102	0.5	8	16
Other/unknown	0.6	45	75	0.2	37	198	0.0	2	94	0.4	6	15
Use of Nursing Facilities^e												
Entire year	8.0	459	57	2.2	349	156	0.3	31	93	5.4	77	14
Part year	7.4	457	61	1.8	336	185	0.3	33	108	5.3	86	16
None	1.0	72	69	0.3	56	167	0.0	5	102	0.7	11	17
Maintenance Assistance Status												
Cash	1.5	106	69	0.5	82	175	0.1	7	108	1.0	17	17
Medically needy	0.5	25	48	0.2	18	115	0.0	2	67	0.3	5	16
Poverty related	0.7	50	71	0.2	39	165	0.0	3	94	0.4	7	17
Other/unknown	1.2	72	61	0.4	55	151	0.0	5	96	0.8	12	16

Source: Data for this table are from the MAX 2007 file for Pennsylvania, 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 Pennsylvania, 0.7 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, PENNSYLVANIA, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users			\$ per Benefit Month Among Users			\$ per Rx			Users ^e							
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All Benes	Number of Benefit Months			
		Brand-Name	Brand-Name		Brand-Name	Brand-Name		Brand-Name	Brand-Name						Generic	Generic	Generic
Anti-infective Agents	0.3	0.0	0.0	0.2	\$13	\$8	\$1	\$4	\$51	\$308	\$99	\$20	484,556	\$24,728,445	186,588	27.2	1,889,010
Biologicals	0.1	0.1	0.0	0.0	68	68	0	0	465	465	0	0	13,411	6,241,358	8,648	1.3	91,594
Antineoplastic Agents	0.8	0.3	0.0	0.4	459	416	11	32	594	1,266	592	75	24,010	14,257,530	3,261	0.5	31,054
Endocrine/Metabolic Drugs	0.5	0.2	0.0	0.3	29	22	1	6	56	122	53	19	442,667	24,899,894	84,226	12.3	844,256
Cardiovascular Agents	1.2	0.2	0.1	0.9	38	22	7	10	32	88	68	11	590,134	18,638,518	50,070	7.3	487,335
Respiratory Agents	0.4	0.3	0.0	0.2	31	26	2	2	70	102	83	14	423,231	29,436,550	93,548	13.6	956,914
Gastrointestinal Agents	0.5	0.1	0.0	0.3	32	22	3	6	68	160	135	20	230,688	15,572,584	48,873	7.1	493,856
Genitourinary Agents	0.3	0.1	0.0	0.2	13	10	1	3	47	88	76	18	53,386	2,493,770	18,345	2.7	185,045
CNS Drugs	1.1	0.4	0.0	0.6	85	72	3	10	79	182	97	15	910,180	71,929,185	87,922	12.8	848,138
Stimulants/Anti-obesity/Anorexia	0.8	0.6	0.0	0.1	68	65	1	3	84	100	48	17	209,650	17,516,609	25,078	3.6	257,932
Miscellaneous Psychological/Neurological Agents	0.3	0.2	0.0	0.0	63	61	0	2	240	248	0	122	33,449	8,029,544	12,124	1.8	127,637
Analgesics and Anesthetics	0.5	0.0	0.0	0.5	22	10	4	8	40	270	311	17	525,072	21,206,031	100,843	14.7	984,244
Neuromuscular Agents	0.8	0.3	0.0	0.5	63	50	5	8	79	160	164	18	380,905	29,941,891	48,258	7.0	476,540
Nutritional Products	0.3	0.0	0.0	0.2	5	2	0	3	19	50	19	13	101,739	1,892,934	39,601	5.8	384,915
Hematological Agents	0.7	0.3	0.0	0.4	193	188	0	4	258	665	32	9	93,887	24,262,384	13,217	1.9	125,871
Topical Products	0.2	0.0	0.0	0.2	8	5	1	3	37	102	60	17	214,909	8,034,564	94,659	13.8	979,200
Miscellaneous Products	0.2	0.2	0.0	0.1	50	44	1	5	203	263	229	65	14,051	2,859,200	5,508	0.8	56,822
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	19	0	0	0	85	0	0	0	12,136	1,035,341	5,193	0.8	55,144
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.	4,758,061	322,976,332	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Pennsylvania, 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 Pennsylvania, 0.7 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>.
- 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, PENNSYLVANIA, 2007

Top 10 Drug Groups	Users				Among Users			
	Total Medicaid Rx \$	Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month	
ANTIPSYCHOTICS	\$52,956,393	43,121	6.3	437,719	0.6	\$187	\$121	
ANTICONVULSANT	26,327,785	37,693	5.5	382,343	0.7	96	69	
ANTIASTHMATIC	22,697,214	90,360	13.1	939,133	0.3	76	24	
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	17,450,267	28,158	4.1	297,469	0.7	84	59	
ANTIDEPRESSANTS	16,404,248	79,308	11.5	796,617	0.5	39	21	
ANTINEOPLASTICS	14,131,352	4,571	0.7	43,526	0.5	593	325	
ANALGESICS - Narcotic	13,800,756	111,563	16.2	1,132,875	0.3	37	12	
MISC. HEMATOLOGICAL	13,057,488	3,965	0.6	39,297	0.7	511	332	
ANTIDIABETIC	11,655,110	24,749	3.6	246,920	0.7	70	47	
ANTIVIRAL	10,207,019	6,432	0.9	63,712	0.4	443	160	
Total	198,687,632	429,920	n.a.	4,379,611	n.a.	n.a.	n.a.	

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

Beneficiary Characteristics	All Top 10 Drug Groups							ANTIPSYCHOTICS			ANTICONVULSANT		
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx \$ per Benefit Month	
All	2,097,327	\$198,687,632	43,121	6.3	437,719	0.6	\$121	37,693	5.5	382,343	0.7	\$69	
Female													
All Females	1,185,355	99,863,449	21,320	5.5	217,772	0.6	111	22,114	5.7	226,325	0.7	63	
Female, Disabled													
All Ages	746,008	67,957,155	12,938	22.2	137,353	0.7	130	14,329	24.5	152,174	0.8	74	
5 and younger	5,043	424,515	53	1.6	597	0.4	71	158	4.7	1,708	0.7	90	
6-14	51,750	4,877,936	1,363	17.0	15,108	0.6	97	976	12.2	10,932	0.7	93	
15-20	45,945	4,372,659	1,636	25.5	17,579	0.6	91	1,201	18.7	12,892	0.8	91	
21-44	226,731	21,861,765	4,876	27.3	50,971	0.6	124	5,569	31.2	58,752	0.7	82	
45-64	415,967	36,368,806	5,002	22.1	53,052	0.8	158	6,409	28.3	67,775	0.8	60	
65-74	572	51,474	8	9.8	46	0.8	292	16	19.5	115	0.6	45	
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
Female, Other Eligibles													
All Ages	439,347	31,906,294	8,382	2.5	80,419	0.5	78	7,785	2.4	74,151	0.5	41	
5 and younger	15,862	1,054,150	73	0.1	824	0.4	61	123	0.2	1,298	0.5	53	
6-14	59,650	5,101,186	1,222	1.8	12,831	0.6	100	499	0.7	5,273	0.6	71	
15-20	69,067	5,121,632	2,213	3.9	21,127	0.5	88	1,279	2.3	12,622	0.5	59	
21-44	220,529	13,159,847	3,832	3.2	35,946	0.4	62	4,617	3.9	43,588	0.5	33	
45-64	55,147	6,204,706	736	6.0	6,392	0.5	81	974	8.0	8,318	0.5	35	
65-74	12,481	921,856	161	7.8	1,782	0.9	145	201	9.8	2,125	0.9	44	
75-84	4,669	271,477	86	5.3	928	0.6	76	66	4.1	699	0.8	34	
85 and older	1,942	71,440	59	3.2	589	0.5	35	26	1.4	228	0.7	20	
Male													
All Males	911,972	98,824,183	21,801	7.3	219,947	0.7	131	15,579	5.2	156,018	0.8	78	
Male, Disabled													
All Ages	598,338	70,556,665	14,138	21.3	148,968	0.7	139	11,089	16.7	115,978	0.8	86	
5 and younger	10,172	1,146,236	183	3.2	2,025	0.5	81	237	4.1	2,608	0.7	68	
6-14	139,550	14,039,961	4,313	25.4	48,233	0.7	109	1,845	10.9	20,752	0.8	87	
15-20	81,509	11,147,698	2,752	27.5	29,725	0.7	126	1,628	16.3	17,712	0.8	94	
21-44	143,815	20,718,117	3,908	24.2	38,879	0.7	164	3,813	23.6	38,522	0.8	103	
45-64	222,757	23,452,544	2,972	17.0	30,035	0.8	172	3,561	20.4	36,347	0.8	65	
65-74	535	52,109	10	13.2	71	1.2	222	5	6.6	37	0.7	63	
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	
Male, Other Eligibles													
All Ages	313,634	28,267,518	7,663	3.3	70,979	0.6	115	4,490	1.9	40,040	0.6	53	
5 and younger	24,817	1,766,354	169	0.2	1,856	0.4	57	170	0.2	1,752	0.4	47	
6-14	105,582	11,046,857	2,400	3.5	25,355	0.7	117	688	1.0	7,088	0.7	69	
15-20	80,347	7,704,063	2,936	6.2	26,696	0.7	128	1,148	2.4	10,451	0.7	69	
21-44	64,225	4,709,472	1,557	4.4	12,073	0.5	93	1,709	4.8	14,097	0.5	41	
45-64	30,107	2,334,180	452	5.2	3,497	0.6	112	614	7.0	4,930	0.6	35	
65-74	5,348	462,874	90	6.4	893	0.8	154	96	6.8	1,040	0.9	66	
75-84	2,387	200,140	39	4.0	419	0.9	121	45	4.6	479	1.0	54	
85 and older	821	43,578	20	3.3	190	0.6	69	20	3.3	203	0.7	11	
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 Pennsylvania, 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.

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, PENNSYLVANIA, 2007

Beneficiary Characteristics	ANTIASTHMATIC					STIMULANTS/ANTI-OBESITY/ANOREXIANTS					ANTIDEPRESSANTS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month
All	90,360	13.1	939,133	0.3	\$24	28,158	4.1	297,469	0.7	\$59	79,308	11.5	796,617	0.5	\$21
Female															
All Females	49,743	12.8	518,516	0.3	25	8,637	2.2	91,476	0.7	55	53,498	13.8	544,064	0.5	21
Female, Disabled															
All Ages	20,489	35.1	223,103	0.4	36	3,941	6.7	43,152	0.7	58	26,366	45.1	281,417	0.6	27
5 and younger	774	23.2	8,455	0.3	18	93	2.8	981	0.4	32	13	0.4	145	0.4	5
6-14	1,990	24.9	22,687	0.3	20	2,058	25.7	22,627	0.7	56	1,018	12.7	11,239	0.5	12
15-20	1,267	19.7	14,264	0.3	22	849	13.2	9,503	0.7	53	2,063	32.1	22,340	0.5	15
21-44	5,552	31.1	60,213	0.4	30	574	3.2	6,115	0.7	58	10,181	57.0	107,546	0.6	25
45-64	10,878	48.0	117,330	0.5	44	367	1.6	3,926	0.8	94	13,072	57.6	140,014	0.7	31
65-74	28	34.1	154	0.4	33	0	0.0	0	0.0	0	19	23.2	133	0.8	48
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	29,254	8.9	295,413	0.2	17	4,696	1.4	48,324	0.6	52	27,132	8.3	262,647	0.4	16
5 and younger	6,786	10.0	69,865	0.2	12	183	0.3	1,931	0.4	32	38	0.1	420	0.3	6
6-14	6,942	10.2	73,620	0.3	19	2,631	3.9	28,006	0.7	55	1,335	2.0	14,067	0.4	10
15-20	4,626	8.2	46,616	0.2	16	1,035	1.8	10,412	0.6	56	4,913	8.8	48,103	0.4	12
21-44	8,655	7.3	84,019	0.3	16	754	0.6	7,166	0.5	42	17,315	14.6	167,693	0.4	16
45-64	1,822	14.9	16,901	0.4	31	91	0.7	789	0.7	70	3,058	25.1	27,455	0.5	23
65-74	242	11.7	2,556	0.5	47	1	0.0	12	0.3	2	262	12.7	2,784	0.7	27
75-84	128	7.9	1,261	0.4	31	0	0.0	0	0.0	0	126	7.8	1,301	0.7	20
85 and older	53	2.9	575	0.4	19	1	0.1	8	0.6	3	85	4.6	824	0.5	8
Male															
All Males	40,617	13.5	420,617	0.3	23	19,521	6.5	205,993	0.7	60	25,810	8.6	252,553	0.6	19
Male, Disabled															
All Ages	14,872	22.4	160,049	0.4	31	10,110	15.2	110,738	0.8	61	15,159	22.8	157,383	0.6	22
5 and younger	1,432	24.7	15,657	0.3	21	299	5.1	3,168	0.4	28	29	0.5	340	0.3	3
6-14	4,245	25.0	48,145	0.3	22	6,713	39.5	74,076	0.8	60	2,115	12.4	23,945	0.5	12
15-20	1,782	17.8	19,796	0.3	24	2,410	24.1	26,350	0.8	67	2,181	21.8	23,467	0.6	18
21-44	2,223	13.7	23,381	0.4	31	552	3.4	5,736	0.7	55	5,095	31.5	50,813	0.6	22
45-64	5,159	29.6	52,900	0.5	45	136	0.8	1,408	0.8	83	5,716	32.8	58,668	0.7	26
65-74	31	40.8	170	0.7	44	0	0.0	0	0.0	0	23	30.3	150	0.6	15
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	25,745	11.0	260,568	0.3	18	9,411	4.0	95,255	0.7	60	10,651	4.6	95,170	0.5	15
5 and younger	9,714	13.7	99,564	0.2	13	437	0.6	4,636	0.4	30	49	0.1	532	0.2	4
6-14	9,280	13.7	97,200	0.3	20	6,037	8.9	62,701	0.7	58	1,555	2.3	16,400	0.5	13
15-20	3,975	8.4	39,174	0.3	22	2,549	5.4	24,888	0.7	70	3,533	7.4	32,142	0.5	14
21-44	1,692	4.8	14,985	0.3	21	343	1.0	2,646	0.6	55	3,841	10.8	31,970	0.4	16
45-64	845	9.7	7,323	0.4	37	41	0.5	357	0.4	49	1,467	16.8	12,085	0.5	21
65-74	135	9.6	1,349	0.6	41	1	0.1	12	0.2	2	120	8.6	1,190	0.7	22
75-84	74	7.6	701	0.4	39	2	0.2	9	0.6	4	51	5.2	518	0.6	12
85 and older	30	5.0	272	0.4	29	1	0.2	6	0.3	2	35	5.8	333	0.6	16
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 Pennsylvania, 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.

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, PENNSYLVANIA, 2007

Beneficiary Characteristics	ANTINEOPLASTICS					ANALGESICS - Narcotic					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	4,571	0.7	43,526	0.5	\$325	111,563	16.2	1,132,875	0.3	\$12	3,965	0.6	39,297	0.7	\$332
Female															
All Females	3,289	0.8	32,124	0.5	296	75,958	19.6	783,186	0.3	11	2,014	0.5	20,805	0.6	87
Female, Disabled															
All Ages	1,751	3.0	16,999	0.6	298	28,815	49.3	312,216	0.4	17	1,585	2.7	16,923	0.7	93
5 and younger	37	1.1	357	0.7	76	116	3.5	1,299	0.1	1	1	0.0	12	0.2	1
6-14	103	1.3	1,146	0.6	87	475	5.9	5,436	0.1	1	11	0.1	125	0.4	1,578
15-20	73	1.1	775	0.5	185	1,370	21.3	15,752	0.1	3	3	0.0	36	0.5	8
21-44	479	2.7	4,676	0.5	303	11,723	65.6	126,661	0.4	15	163	0.9	1,706	0.5	136
45-64	1,056	4.7	10,024	0.6	337	15,109	66.6	162,923	0.5	21	1,402	6.2	15,003	0.7	76
65-74	3	3.7	21	0.8	96	22	26.8	145	0.7	43	5	6.1	41	0.8	77
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	1,538	0.5	15,125	0.5	293	47,143	14.3	470,970	0.2	6	429	0.1	3,882	0.6	62
5 and younger	4	0.0	42	0.9	22	640	0.9	6,932	0.1	1	0	0.0	0	0.0	0
6-14	26	0.0	278	0.7	503	1,865	2.7	20,290	0.1	1	3	0.0	36	0.2	7
15-20	41	0.1	353	0.5	129	7,575	13.5	78,405	0.1	2	7	0.0	73	0.3	29
21-44	457	0.4	4,537	0.4	234	32,510	27.4	322,015	0.3	7	96	0.1	830	0.4	55
45-64	949	7.8	9,372	0.6	331	3,985	32.7	37,552	0.4	11	175	1.4	1,500	0.6	63
65-74	35	1.7	322	0.6	220	351	17.0	3,718	0.5	14	79	3.8	796	0.7	74
75-84	14	0.9	135	0.6	89	130	8.1	1,267	0.5	15	46	2.9	445	0.7	75
85 and older	12	0.6	86	0.4	67	87	4.7	791	0.4	5	23	1.2	202	0.5	37
Male															
All Males	1,282	0.4	11,402	0.6	406	35,605	11.9	349,689	0.4	16	1,951	0.7	18,492	0.7	608
Male, Disabled															
All Ages	1,051	1.6	9,425	0.6	442	17,258	25.9	177,643	0.5	22	1,510	2.3	14,959	0.7	623
5 and younger	44	0.8	429	0.8	80	179	3.1	2,015	0.1	1	13	0.2	151	0.4	2,154
6-14	80	0.5	860	0.7	135	849	5.0	9,807	0.1	1	17	0.1	204	0.4	3,846
15-20	76	0.8	825	0.6	123	1,368	13.7	15,526	0.2	3	18	0.2	197	0.8	13,449
21-44	220	1.4	1,800	0.7	566	6,338	39.2	64,000	0.4	23	145	0.9	1,368	0.6	2,544
45-64	628	3.6	5,501	0.5	525	8,500	48.8	86,149	0.6	28	1,310	7.5	12,998	0.7	160
65-74	3	3.9	10	1.0	634	24	31.6	146	0.6	17	7	9.2	41	0.7	37
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	231	0.1	1,977	0.5	232	18,347	7.9	172,046	0.3	9	441	0.2	3,533	0.6	545
5 and younger	12	0.0	127	0.3	40	1,111	1.6	12,015	0.1	1	6	0.0	61	0.3	1,155
6-14	18	0.0	207	0.6	213	1,918	2.8	21,123	0.1	1	6	0.0	72	0.6	20,405
15-20	31	0.1	319	0.6	134	4,121	8.7	41,568	0.2	3	7	0.0	42	0.4	3,855
21-44	67	0.2	528	0.5	298	8,427	23.7	73,639	0.4	14	105	0.3	797	0.5	60
45-64	59	0.7	440	0.6	258	2,572	29.5	21,704	0.5	18	220	2.5	1,631	0.6	73
65-74	21	1.5	136	0.3	339	127	9.1	1,330	0.5	15	56	4.0	500	0.7	69
75-84	17	1.7	165	0.4	281	54	5.5	496	0.4	7	31	3.2	336	0.6	53
85 and older	6	1.0	55	0.3	48	17	2.8	171	0.5	21	10	1.7	94	0.7	68
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 Pennsylvania, 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.

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, PENNSYLVANIA, 2007

Beneficiary Characteristics	ANTIDIABETIC					ANTIVIRAL						
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Rx per Benefit Month	Mean Rx \$ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
All	24,749	3.6	246,920	0.7	\$47	6,432	0.9	63,712	0.4	\$160	687,238	4,235,601
Female												
All Females	15,208	3.9	154,949	0.7	46	4,364	1.1	43,974	0.3	119	387,123	2,346,168
Female, Disabled												
All Ages	10,785	18.5	114,337	0.7	49	1,726	3.0	18,369	0.4	183	58,402	487,599
5 and younger	43	1.3	418	0.7	27	24	0.7	260	0.4	14	3,341	23,044
6-14	394	4.9	4,284	0.6	48	69	0.9	777	0.3	44	8,004	70,397
15-20	270	4.2	3,026	0.5	44	123	1.9	1,405	0.3	89	6,422	54,878
21-44	1,967	11.0	20,702	0.6	43	777	4.3	7,890	0.4	182	17,867	149,222
45-64	8,086	35.6	85,724	0.7	51	733	3.2	8,037	0.5	219	22,683	189,730
65-74	25	30.5	183	0.8	54	0	0.0	0	0.0	0	82	321
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	7
Female, Other Eligibles												
All Ages	4,423	1.3	40,612	0.6	36	2,638	0.8	25,605	0.3	74	328,721	1,858,569
5 and younger	31	0.0	291	0.6	58	111	0.2	1,126	0.2	21	68,003	401,325
6-14	199	0.3	2,036	0.7	67	214	0.3	2,336	0.2	47	68,007	437,723
15-20	399	0.7	4,007	0.5	42	491	0.9	4,829	0.2	55	56,121	317,104
21-44	2,078	1.7	18,732	0.5	31	1,630	1.4	15,445	0.3	79	118,862	605,861
45-64	1,108	9.1	9,472	0.6	35	168	1.4	1,630	0.3	155	12,203	64,492
65-74	408	19.8	4,046	0.8	46	17	0.8	164	0.1	53	2,061	12,425
75-84	144	8.9	1,445	0.7	33	3	0.2	36	0.1	7	1,612	10,123
85 and older	56	3.0	583	0.7	18	4	0.2	39	0.1	8	1,852	9,516
Male												
All Males	9,541	3.2	91,971	0.7	50	2,068	0.7	19,738	0.5	251	300,024	1,889,303
Male, Disabled												
All Ages	7,039	10.6	70,872	0.7	50	1,262	1.9	12,363	0.6	314	66,511	529,821
5 and younger	57	1.0	519	0.6	28	31	0.5	356	0.2	15	5,809	37,984
6-14	471	2.8	4,976	0.6	50	125	0.7	1,390	0.3	70	16,995	150,245
15-20	325	3.2	3,547	0.7	63	75	0.7	871	0.2	66	10,018	88,676
21-44	1,448	9.0	14,212	0.7	54	453	2.8	4,102	0.6	368	16,178	122,732
45-64	4,723	27.1	47,497	0.7	49	577	3.3	5,635	0.6	391	17,433	129,863
65-74	15	19.7	121	0.8	68	1	1.3	9	0.6	638	76	316
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	5
Male, Other Eligibles												
All Ages	2,502	1.1	21,099	0.6	47	806	0.3	7,375	0.3	146	233,513	1,359,482
5 and younger	22	0.0	214	0.6	62	122	0.2	1,240	0.1	4	71,099	419,837
6-14	190	0.3	1,993	0.6	59	192	0.3	2,099	0.3	96	67,669	434,500
15-20	254	0.5	2,390	0.7	75	162	0.3	1,544	0.2	45	47,442	280,056
21-44	857	2.4	7,136	0.6	44	207	0.6	1,624	0.4	282	35,603	166,925
45-64	934	10.7	7,136	0.6	40	114	1.3	760	0.5	433	8,719	40,635
65-74	159	11.3	1,456	0.7	42	8	0.6	96	0.5	151	1,403	7,837
75-84	70	7.2	611	0.8	37	1	0.1	12	0.1	3	977	6,074
85 and older	16	2.7	163	0.4	13	0	0.0	0	0.0	0	601	3,618
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	91	130

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

TABLE ND.8
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
BY BENEFICIARY CHARACTERISTIC^{a, b}
NONDUAL BENEFICIARIES, PENNSYLVANIA, 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	\$459	8.0	2,912	30,260
Age				
0-64	604	10.1	1,982	20,408
65-74	350	7.1	228	2,496
75-84	155	3.4	298	3,228
85 and older	49	1.6	404	4,128
Unknown	0	0.0	0	0
Gender				
Female	454	8.0	1,607	17,207
Male	467	8.0	1,305	13,053
Unknown	0	0.0	0	0
Race				
White	460	8.2	1,851	18,745
African American	467	7.7	827	9,149
Other/unknown	421	7.6	234	2,366
Basis of Eligibility^c				
Aged	158	3.6	919	9,806
Disabled	604	10.1	1,991	20,449
Adults	290	7.7	1	3
Children	0	0.0	0	0
Unknown	377	11.5	1	2

Source: Data for this table are from the MAX 2007 file for Pennsylvania, 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 2,816 beneficiaries who were in nursing facilities for part of their enrollment and their 19,892 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, PENNSYLVANIA, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx \$	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.6	0.2	0.0	0.4	\$65	\$54	\$2	\$10	\$104	\$288	\$146	\$23	10,449	\$1,089,770	1,534	52.7	16,707
Biologicals	0.1	0.1	0.0	0.0	3	3	0	0	35	35	0	0	95	3,294	89	3.1	967
Antineoplastic Agents	0.7	0.3	0.0	0.4	221	182	17	21	325	682	807	55	673	218,953	99	3.4	992
Endocrine/Metabolic Drugs	1.4	0.6	0.0	0.8	67	55	2	10	48	96	75	12	17,928	858,183	1,174	40.3	12,872
Cardiovascular Agents	2.3	0.3	0.1	1.8	56	28	9	20	25	84	63	11	42,582	1,057,322	1,733	59.5	18,720
Respiratory Agents	1.0	0.4	0.1	0.5	61	44	12	5	60	109	82	11	10,025	600,949	914	31.4	9,900
Gastrointestinal Agents	1.0	0.3	0.0	0.7	41	26	5	10	39	94	109	14	15,410	607,504	1,358	46.6	14,799
Genitourinary Agents	0.8	0.4	0.0	0.4	42	32	1	8	50	76	42	22	5,555	277,770	597	20.5	6,685
CNS Drugs	2.1	0.8	0.1	1.2	154	134	6	14	74	169	76	12	44,592	3,304,788	1,971	67.7	21,446
Stimulants/Anti-obesity/Anorexia	1.1	0.5	0.0	0.6	86	82	0	4	79	165	0	7	521	40,912	43	1.5	476
Miscellaneous Psychological/Neurological Agents	1.0	1.0	0.0	0.0	317	316	0	1	318	320	0	118	3,275	1,040,443	308	10.6	3,280
Analgesics and Anesthetics	1.5	0.0	0.1	1.3	49	6	22	21	33	134	162	16	19,271	640,106	1,249	42.9	13,066
Neuromuscular Agents	1.9	0.6	0.0	1.3	125	95	4	25	64	154	125	20	31,483	2,022,304	1,455	50.0	16,240
Nutritional Products	0.8	0.0	0.0	0.8	14	0	0	13	17	26	15	17	6,714	114,183	788	27.1	8,447
Hematological Agents	1.6	0.4	0.0	1.2	113	105	0	8	69	246	14	7	19,150	1,328,623	1,106	38.0	11,711
Topical Products	0.8	0.2	0.0	0.5	30	18	4	9	40	92	74	17	12,477	498,469	1,496	51.4	16,604
Miscellaneous Products	0.4	0.2	0.0	0.2	60	45	0	15	139	210	0	70	1,003	139,620	217	7.5	2,333
Unknown Therapeutic Category	0.4	0.0	0.0	0.0	25	0	0	0	64	0	0	0	838	53,820	189	6.5	2,139
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.	242,041	13,897,013	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Pennsylvania, 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 2,816 beneficiaries who were in nursing facilities for part of their enrollment and their 19,892 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 Pennsylvania, 0.7 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, PENNSYLVANIA, 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	\$2,577,099	1,373	47.1	15,490	1.0	\$172	\$166
ANTICONVULSANT	1,720,275	1,689	58.0	19,126	1.3	71	90
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	1,042,257	398	13.7	4,200	0.8	311	248
ANTIDIABETIC	674,990	1,187	40.8	13,188	1.0	50	51
ANTIDEPRESSANTS	610,152	1,757	60.3	19,607	0.9	35	31
HEMATOPOIETIC AGENTS	568,272	940	32.3	10,187	0.7	80	56
ANALGESICS - Narcotic	559,370	1,483	50.9	15,403	1.0	35	36
ANTIASTHMATIC	527,055	1,184	40.7	12,754	0.7	63	41
ANTICOAGULANTS	501,345	762	26.2	7,869	1.5	41	64
ANTIVIRAL	500,557	143	4.9	1,603	0.7	461	312
Total	9,281,372	10,916	n.a.	119,427	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Pennsylvania, 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 2,816 beneficiaries who were in nursing facilities for part of their enrollment and their 19,892 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.

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, PENNSYLVANIA, 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	118,236	\$9,281,372	1,373	47.1	15,490	1.0	\$166	1,689	58.0	19,126	1.3	\$90
Female												
All Females	66,819	5,225,411	790	49.2	8,984	1.0	162	919	57.2	10,456	1.3	82
Female, Disabled												
All Ages	56,206	4,628,027	623	61.5	7,108	1.0	179	793	78.3	9,010	1.3	87
64 or younger	56,071	4,605,487	623	61.9	7,108	1.0	179	792	78.6	8,998	1.3	87
65-74	135	22,540	0	0.0	0	0.0	0	1	16.7	12	1.3	54
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	10,613	597,384	167	28.1	1,876	0.8	100	126	21.2	1,446	1.0	52
64 or younger	125	7,447	3	100.0	16	0.5	17	4	133.3	38	1.2	110
65-74	5,233	335,721	69	55.2	808	1.0	155	76	60.8	890	1.1	54
75-84	3,361	191,423	56	29.9	632	0.7	72	35	18.7	407	1.0	47
85 and older	1,894	62,793	39	14.0	420	0.6	40	11	3.9	111	1.0	34
Male												
All Males	51,417	4,055,961	583	44.7	6,506	1.0	172	770	59.0	8,670	1.3	100
Male, Disabled												
All Ages	45,786	3,648,961	499	51.0	5,557	1.0	179	698	71.4	7,835	1.3	102
64 or younger	45,666	3,635,226	495	51.0	5,517	1.0	178	697	71.8	7,823	1.3	102
65-74	120	13,735	4	57.1	40	1.3	242	1	14.3	12	1.0	149
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	5,631	407,000	84	25.7	949	0.8	135	72	22.0	835	1.1	76
64 or younger	11	88	1	100.0	3	1.0	14	0	0.0	0	0.0	0
65-74	2,992	229,336	44	48.9	514	0.7	139	41	45.6	490	1.2	90
75-84	1,833	133,030	27	24.3	305	1.1	149	23	20.7	263	1.3	66
85 and older	795	44,546	12	9.6	127	0.7	87	8	6.4	82	0.7	19
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 Pennsylvania, 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 2,816 beneficiaries who were in nursing facilities for part of their enrollment and their 19,892 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, PENNSYLVANIA, 2007

Beneficiary Characteristics	MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANTIDIABETIC					ANTIDEPRESSANTS				
	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Users as % of All-Year Nursing Facility Residents		Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
	Number of Users	Facility Residents			Number of Users	Facility Residents					Number of Users	Facility Residents			
All	398	13.7	4,200	0.8	\$248	1,187	40.8	13,188	1.0	\$51	1,757	60.3	19,607	0.9	\$31
Female															
All Females	233	14.5	2,529	0.8	294	689	42.9	7,754	1.0	51	1,032	64.2	11,626	0.9	32
Female, Disabled															
All Ages	164	16.2	1,783	0.8	379	545	53.8	6,126	1.1	53	840	82.9	9,535	0.9	34
64 or younger	163	16.2	1,771	0.8	370	543	53.9	6,119	1.1	53	837	83.1	9,510	0.9	34
65-74	1	16.7	12	4.3	1,656	2	33.3	7	1.1	79	3	50.0	25	1.0	51
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	69	11.6	746	0.8	91	144	24.2	1,628	1.0	42	192	32.3	2,091	0.8	23
64 or younger	0	0.0	0	0.0	0	1	33.3	12	0.9	31	3	100.0	16	1.6	146
65-74	16	12.8	183	0.8	130	80	64.0	879	1.1	52	78	62.4	902	0.9	29
75-84	29	15.5	323	0.8	87	39	20.9	456	0.8	37	65	34.8	708	0.8	21
85 and older	24	8.6	240	0.7	66	24	8.6	281	0.7	21	46	16.5	465	0.6	10
Male															
All Males	165	12.6	1,671	0.8	179	498	38.2	5,434	1.0	52	725	55.6	7,981	0.9	30
Male, Disabled															
All Ages	114	11.7	1,189	0.8	212	433	44.3	4,683	1.0	52	642	65.6	7,057	0.9	31
64 or younger	112	11.5	1,177	0.8	213	433	44.6	4,683	1.0	52	638	65.7	7,027	0.9	31
65-74	2	28.6	12	0.7	81	0	0.0	0	0.0	0	4	57.1	30	0.7	15
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	51	15.6	482	0.8	99	65	19.9	751	0.9	46	83	25.4	924	0.8	24
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	13	14.4	142	0.9	131	36	40.0	419	1.0	51	42	46.7	478	0.8	32
75-84	17	15.3	178	0.8	106	21	18.9	238	1.0	53	24	21.6	275	0.7	10
85 and older	21	16.8	162	0.6	63	8	6.4	94	0.4	10	17	13.6	171	0.8	25
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 Pennsylvania, 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 2,816 beneficiaries who were in nursing facilities for part of their enrollment and their 19,892 benefit months were excluded from the analysis.

b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

d. The top 10 drug groups were determined based on total 2007 Medicaid reimbursement for all-year nursing facility residents in this state.

For information about these drug groups, see Wolters Kluwer Health, <http://www.medi-span.com/master-drug-database.aspx>.
 Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

Nondual Medicaid Beneficiaries

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

Beneficiary Characteristics	HEMATOPOIETIC AGENTS					ANALGESICS - Narcotic					ANTIASTHMATIC				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
All	940	32.3	10,187	0.7	\$56	1,483	50.9	15,403	1.0	\$36	1,184	40.7	12,754	0.7	\$41
Female															
All Females	535	33.3	5,985	0.7	60	824	51.3	8,902	1.0	37	641	39.9	7,088	0.6	41
Female, Disabled															
All Ages	377	37.2	4,213	0.7	73	689	68.0	7,464	1.1	39	521	51.4	5,752	0.7	45
64 or younger	377	37.4	4,213	0.7	73	684	67.9	7,433	1.1	39	520	51.6	5,747	0.7	45
65-74	0	0.0	0	0.0	0	5	83.3	31	0.6	5	1	16.7	5	0.2	2
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	158	26.6	1,772	0.6	28	135	22.7	1,438	0.8	22	120	20.2	1,336	0.4	27
64 or younger	1	33.3	12	1.0	5	3	100.0	16	1.3	13	0	0.0	0	0.0	0
65-74	35	28.0	394	0.7	36	51	40.8	578	1.0	39	58	46.4	635	0.4	28
75-84	61	32.6	696	0.6	46	40	21.4	460	0.8	17	30	16.0	347	0.5	29
85 and older	61	21.9	670	0.6	6	41	14.7	384	0.5	4	32	11.5	354	0.5	23
Male															
All Males	405	31.0	4,202	0.7	50	659	50.5	6,501	1.1	36	543	41.6	5,666	0.7	41
Male, Disabled															
All Ages	306	31.3	3,095	0.8	52	602	61.6	5,901	1.1	38	476	48.7	4,936	0.7	42
64 or younger	305	31.4	3,093	0.8	52	595	61.3	5,869	1.1	38	475	48.9	4,924	0.7	42
65-74	1	14.3	2	0.5	3	7	100.0	32	0.6	16	1	14.3	12	0.4	3
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	99	30.3	1,107	0.7	47	57	17.4	600	0.7	16	67	20.5	730	0.5	37
64 or younger	0	0.0	0	0.0	0	1	100.0	3	2.7	15	0	0.0	0	0.0	0
65-74	34	37.8	379	0.8	53	31	34.4	342	0.8	13	28	31.1	325	0.8	47
75-84	36	32.4	411	0.6	53	17	15.3	169	0.6	13	25	22.5	269	0.4	36
85 and older	29	23.2	317	0.7	31	8	6.4	86	0.5	32	14	11.2	136	0.4	18
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 Pennsylvania, released by CMS on 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 2,816 beneficiaries who were in nursing facilities for part of their enrollment and their 19,892 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, PENNSYLVANIA, 2007

Beneficiary Characteristics	ANTICOAGULANTS						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	762	26.2	7,869	1.5	\$64	143	4.9	1,603	0.7	\$312	2,912	30,260
Female												
All Females	390	24.3	4,230	1.5	57	70	4.4	831	0.5	227	1,607	17,207
Female, Disabled												
All Ages	319	31.5	3,454	1.6	61	60	5.9	720	0.6	261	1,013	10,815
64 or younger	318	31.6	3,449	1.6	61	60	6.0	720	0.6	261	1,007	10,793
65-74	1	16.7	5	2.8	11	0	0.0	0	0.0	0	6	22
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Female, Other Eligibles												
All Ages	71	12.0	776	1.3	40	10	1.7	111	0.1	7	594	6,392
64 or younger	1	33.3	2	1.5	8	0	0.0	0	0.0	0	3	16
65-74	31	24.8	347	1.4	34	4	3.2	48	0.1	5	125	1,408
75-84	25	13.4	293	1.3	59	2	1.1	24	0.1	10	187	2,058
85 and older	14	5.0	134	1.2	16	4	1.4	39	0.1	8	279	2,910
Male												
All Males	372	28.5	3,639	1.5	72	73	5.6	772	0.8	404	1,305	13,053
Male, Disabled												
All Ages	341	34.9	3,325	1.6	76	67	6.9	700	0.8	425	978	9,634
64 or younger	340	35.0	3,313	1.6	76	67	6.9	700	0.8	425	971	9,596
65-74	1	14.3	12	0.1	25	0	0.0	0	0.0	0	7	38
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Male, Other Eligibles												
All Ages	31	9.5	314	1.3	27	6	1.8	72	0.6	200	327	3,419
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	3
65-74	14	15.6	168	1.5	27	5	5.6	60	0.7	239	90	1,028
75-84	14	12.6	125	0.8	21	1	0.9	12	0.1	3	111	1,170
85 and older	3	2.4	21	2.7	67	0	0.0	0	0.0	0	125	1,218
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 Pennsylvania, 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 2,816 beneficiaries who were in nursing facilities for part of their enrollment and their 19,892 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}
 PENNSYLVANIA, 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	109,138	15.9	0.8	521,810	\$9	\$6,230,374	\$12	1.9	687,238
Age									
5 and younger	22,805	15.4	0.3	47,328	3	471,029	10	2.9	148,252
6-14	19,344	12.0	0.3	50,856	4	664,665	13	1.4	160,675
15-20	14,749	12.3	0.4	43,405	5	547,554	13	1.3	120,003
21-44	28,689	15.2	0.8	154,850	11	2,106,052	14	2.2	188,510
45-64	21,702	35.6	3.4	207,440	38	2,296,444	11	2.0	61,038
65-74	815	22.5	2.2	8,003	19	69,191	9	2.4	3,622
75-84	553	21.4	2.2	5,678	18	46,808	8	4.0	2,589
85 and older	481	19.6	1.7	4,250	12	28,631	7	7.8	2,458
Unknown	0	0.0	0.0	0	0	0	0	0.0	91
Basis of Eligibility^c									
Aged	1,797	21.1	2.1	17,548	17	140,840	8	3.4	8,502
Disabled	39,177	31.4	2.6	319,958	32	4,040,313	13	1.9	124,913
Adults	20,578	12.2	0.5	80,416	6	947,588	12	2.3	169,200
Children	47,138	12.3	0.3	101,622	3	1,071,114	11	2.0	382,933
Unknown	448	26.5	1.3	2,266	18	30,519	13	0.5	1,690
Gender									
Female	65,814	17.0	0.9	335,179	10	3,783,848	11	2.1	387,164
Male	43,324	14.4	0.6	186,631	8	2,446,526	13	1.7	300,074
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	92,538	19.4	1.0	458,660	12	5,603,174	12	2.0	475,784
African American	8,673	7.7	0.3	36,956	3	367,106	10	1.6	112,942
Other/unknown	7,927	8.0	0.3	26,194	3	260,094	10	1.5	98,512
Use of Nursing Facilities^d									
Entire year	2,058	70.7	10.4	30,357	105	304,942	10	2.2	2,912
Part year	1,985	70.5	7.0	19,784	94	265,749	13	2.9	2,816
None	105,095	15.4	0.7	471,669	8	5,659,683	12	1.9	681,510
Maintenance Assistance Status									
Cash	52,183	18.7	1.1	316,730	13	3,736,694	12	2.0	278,491
Medically needy	1,859	9.4	0.3	5,025	3	59,160	12	2.0	19,841
Poverty related	35,757	13.0	0.4	112,751	5	1,372,583	12	1.7	275,035
Other/unknown	19,339	17.0	0.8	87,304	9	1,061,937	12	2.0	113,871

Source: Data for this table are from the MAX 2007 file for Pennsylvania, 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}
 PENNSYLVANIA, 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	\$12	\$0	\$0	4,235,601
Age						
5 and younger	0.1	1	10	0	0	882,190
6-14	0.0	1	13	0	0	1,092,865
15-20	0.1	1	13	0	0	740,714
21-44	0.1	2	14	0	1	1,044,740
45-64	0.5	5	11	0	2	424,720
65-74	0.4	3	9	0	1	20,899
75-84	0.4	3	8	0	1	16,197
85 and older	0.3	2	7	0	1	13,146
Unknown	0.0	0	0	0	0	130
Basis of Eligibility^c						
Aged	0.4	3	8	0	1	49,603
Disabled	0.3	4	13	0	1	1,017,420
Adults	0.1	1	12	0	0	846,071
Children	0.0	0	11	0	0	2,309,692
Unknown	0.2	2	13	0	1	12,815
Gender						
Female	0.1	2	11	0	0	2,346,221
Male	0.1	1	13	0	0	1,889,380
Unknown	0.0	0	0	0	0	0
Race						
White	0.1	2	12	0	0	3,411,462
African American	0.1	1	10	0	0	439,984
Other/unknown	0.1	1	10	0	0	384,155
Use of Nursing Facilities^d						
Entire year	1.0	10	10	0	3	30,260
Part year	1.0	13	13	0	3	19,892
None	0.1	1	12	0	0	4,185,449
Maintenance Assistance Status						
Cash	0.2	2	12	0	1	1,743,493
Medically needy	0.0	0	12	0	0	120,025
Poverty related	0.1	1	12	0	0	1,646,171
Other/unknown	0.1	1	12	0	0	725,912

Source: Data for this table are from the MAX 2007 file for Pennsylvania, 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}
 PENNSYLVANIA, 2007

Drug Category	Number of Users	Rx \$ per User	Total Rx \$	Rx \$ as a Percentage of All Part D Excluded Rx \$	Total Number Rx.	\$ per Rx	Number Rx as a Percentage of All Part D Excluded Rx
All	135,848	\$46	\$6,230,374	100.0	521,810	\$12	100.0
Anorexia or weight loss/gain	0	0	0	0.0	0	0	0.0
Fertility drugs	97	78	7,524	0.1	214	35	0.0
Drugs for cosmetic purposes	491	27	13,161	0.2	793	17	0.2
Cough and cold medications	16,929	27	460,776	7.4	25,744	18	4.9
Vitamins and minerals	14,874	59	875,355	14.0	51,463	17	9.9
Non-prescription drugs	68,632	34	2,347,609	37.7	233,846	10	44.8
Barbiturates	1,123	55	62,305	1.0	9,559	7	1.8
Benzodiazepines	30,981	55	1,691,096	27.1	191,713	9	36.7
Other Part D Excl Rx Drugs	2,721	284	772,548	12.4	8,478	91	1.6

Source: Data for this table are from the MAX 2007 file for Pennsylvania, 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, PENNSYLVANIA, 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	1,685,074	14,425	350,265	366,252	952,436	1,696	16,273,090	123,564	3,810,688	3,262,784	9,062,904	13,150
Age												
5 and younger	375,038	0	21,267	0	353,771	0	3,476,961	0	222,619	0	3,254,342	0
6-14	430,502	0	72,513	0	357,989	0	4,386,524	0	819,382	0	3,567,142	0
15-20	277,540	0	47,145	0	230,368	27	2,707,836	0	527,673	0	2,180,021	142
21-44	419,257	0	91,823	316,477	10,216	741	3,878,534	0	981,541	2,830,842	61,266	4,885
45-64	167,844	8	117,158	49,753	0	925	1,697,451	54	1,257,434	431,849	0	8,114
65-74	8,065	7,686	354	22	0	3	75,765	73,640	2,023	93	0	9
75-84	4,020	4,020	0	0	0	0	33,636	33,636	0	0	0	0
85 and older	2,717	2,711	5	0	1	0	16,253	16,234	16	0	3	0
Unknown	91	0	0	0	91	0	130	0	0	0	130	0
Gender												
Female	950,973	9,436	169,008	285,566	485,267	1,696	9,209,841	80,472	1,856,001	2,625,074	4,635,144	13,150
Male	734,101	4,989	181,257	80,686	467,169	0	7,063,249	43,092	1,954,687	637,710	4,427,760	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	913,181	5,942	213,998	203,311	488,659	1,271	8,667,916	45,202	2,310,279	1,786,378	4,516,187	9,870
African American	475,343	3,190	84,859	101,593	285,459	242	4,815,510	28,784	943,022	953,387	2,888,444	1,873
Other/unknown	296,550	5,293	51,408	61,348	178,318	183	2,789,664	49,578	557,387	523,019	1,658,273	1,407
Use of Nursing Facilities^c												
Entire year	2,916	919	1,995	1	0	1	30,301	9,810	20,486	3	0	2
Part year	2,939	547	2,264	120	3	5	28,224	4,820	22,307	1,037	27	33
None	1,679,219	12,959	346,006	366,131	952,433	1,690	16,214,565	108,934	3,767,895	3,261,744	9,062,877	13,115
Maintenance Assistance Status												
Cash	812,401	4,478	241,376	198,442	368,105	0	8,233,697	48,190	2,761,884	1,801,487	3,622,136	0
Medically needy	36,958	21	407	16,350	20,180	0	339,631	161	3,555	158,011	177,904	0
Poverty related	545,544	6,114	100,519	24,285	412,930	1,696	4,890,579	51,718	967,837	145,113	3,712,761	13,150
Other/unknown	290,171	3,812	7,963	127,175	151,221	0	2,809,183	23,495	77,412	1,158,173	1,550,103	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	426,081	6,856	91,346	93,266	233,001	1,612	3,656,371	45,718	925,195	696,008	1,977,076	12,374
FFS part year, with Rx claims	44,405	459	11,376	14,769	17,750	51	397,577	3,931	108,024	117,685	167,420	517
FFS part year, no Rx claims	216,752	1,187	22,191	61,165	132,182	27	1,780,188	9,390	194,765	477,015	1,098,781	237
MC all year, with Rx claims	1,931	21	545	468	897	0	18,612	160	6,029	4,347	8,076	0
MC all year, no Rx claims	995,905	5,902	224,807	196,584	568,606	6	10,420,342	64,365	2,576,675	1,967,729	5,811,551	22

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

	Beneficiaries and					
	Benefit Months in Cell J of Table 1		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months	Number of Beneficiaries	Number of Benefit Months
All	1,685,074	16,273,090	687,238	4,235,601	0	12,037,489
Fee-for-service (FFS) all year	426,081	3,656,371	426,081	3,656,371	0	0
FFS part year, with Rx claims	44,405	397,577	44,405	160,087	0	237,490
FFS part year, with no Rx claims	216,752	1,780,188	216,752	419,143	0	1,361,045
Managed care (MC) all year, with Rx claims	1,931	18,612	0	0	0	18,612
MC all year, with no Rx claims	995,905	10,420,342	0	0	0	10,420,342

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