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STATISTICAL COMPENDIUM:
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2007
RHODE ISLAND

LIST OF TABLES

CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY[a, b]

NONDUAL BENEFICIARIES, RHODE ISLAND, 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	**63,836**	**1,066**	**20,948**	**15,651**	**25,735**	**436**	**380,882**	**10,959**	**220,203**	**47,724**	**97,805**	**4,191**
Age												
5 and younger	9,686	0	753	0	8,933	0	30,479	0	6,480	0	23,999	0
6-14	13,741	0	2,266	0	11,475	0	72,229	0	24,192	0	48,037	0
15-20	8,151	0	1,754	1,104	5,281	12	45,367	0	17,761	2,082	25,400	124
21-44	19,832	0	7,027	12,605	43	157	113,871	0	73,666	38,420	339	1,446
45-64	11,157	1	8,951	1,939	2	264	105,843	3	96,011	7,212	24	2,593
65-74	751	577	168	3	0	3	7,709	5,891	1,780	10	0	28
75-84	388	366	22	0	0	0	4,095	3,866	229	0	0	0
85 and older	129	122	7	0	0	0	1,283	1,199	84	0	0	0
Unknown	1	0	0	0	1	0	6	0	0	0	6	0
Gender												
Female	35,827	710	10,757	11,342	12,582	436	209,372	7,305	115,053	35,564	47,259	4,191
Male	28,009	356	10,191	4,309	13,153	0	171,510	3,654	105,150	12,160	50,546	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	23,152	149	11,081	5,542	6,071	309	167,783	1,573	118,628	16,295	28,295	2,992
African American	5,963	80	2,355	1,433	2,080	15	40,282	828	24,669	4,922	9,714	149
Other/unknown	34,721	837	7,512	8,676	17,584	112	172,817	8,558	76,906	26,507	59,796	1,050
Use of Nursing Facilities[c]												
Entire year	428	53	375	0	0	0	4,989	563	4,426	0	0	0
Part year	310	39	270	1	0	0	3,285	349	2,932	4	0	0
None	63,098	974	20,303	15,650	25,735	436	372,608	10,047	212,845	47,720	97,805	4,191
Maintenance Assistance Status												
Cash	23,425	137	17,483	2,203	3,602	0	197,001	1,384	185,881	3,671	6,065	0
Medically needy	79	3	70	6	0	0	728	24	697	7	0	0
Poverty-related	10,067	0	2	854	8,775	436	31,076	0	15	1,472	25,398	4,191
Other/unknown	30,265	926	3,393	12,588	13,358	0	152,077	9,551	33,610	42,574	66,342	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	28,806	1,063	19,512	2,426	5,376	429	295,813	10,951	213,057	18,456	49,205	4,144
FFS part year, with Rx claims	6,131	2	663	2,657	2,805	4	29,222	5	3,944	11,057	14,191	25
FFS part year, no Rx claims	28,899	1	773	10,568	17,554	3	55,847	3	3,202	18,211	34,409	22

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. 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.

ANNUAL MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC[a, b]
NONDUAL BENEFICIARIES, RHODE ISLAND, 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	**41.5**	**11.4**	**$929**	**$82**	**$8,282**	**11.2**	**63,836**
Age							
5 and younger	17.8	1.1	58	54	3,756	1.5	9,686
6-14	29.9	3.0	160	54	4,007	4.0	13,741
15-20	31.8	4.0	252	63	8,008	3.1	8,151
21-44	43.2	10.7	922	86	8,699	10.6	19,832
45-64	76.6	36.2	3,086	85	16,540	18.7	11,157
65-74	76.8	22.9	1,591	70	10,193	15.6	751
75-84	74.5	20.2	1,291	64	11,325	11.4	388
85 and older	59.7	14.2	712	50	22,314	3.2	129
Unknown	0.0	0.0	0	0	0	0.0	1
Basis of Eligibility[e]							
Aged	75.6	19.7	1,301	66	10,936	11.9	1,066
Disabled	77.8	30.3	2,649	88	19,493	13.6	20,948
Adults	24.8	2.2	50	23	2,417	2.0	15,651
Children	20.0	1.2	44	36	2,613	1.7	25,735
Unknown	76.1	15.7	1,198	76	8,307	14.4	436
Gender							
Female	43.3	13.1	1,021	78	7,492	13.6	35,827
Male	39.1	9.2	812	88	9,292	8.7	28,009
Unknown	0.0	0.0	0	0	0	0.0	0
Race							
White	54.6	19.1	1,582	83	12,941	12.2	23,152
African American	44.0	10.5	960	92	8,038	11.9	5,963
Other/unknown	32.3	6.4	489	77	5,217	9.4	34,721
Use of Nursing Facilities[f]							
Entire year	78.3	60.4	5,147	85	156,313	3.3	428
Part year	93.2	72.1	5,724	79	108,746	5.3	310
None	41.0	10.8	877	82	6,784	12.9	63,098
Maintenance Assistance Status							
Cash	61.7	24.2	2,165	89	15,079	14.4	23,425
Medically needy	87.3	38.6	3,689	96	43,489	8.5	79
Poverty related	17.3	1.2	62	52	1,860	3.3	10,067
Other/unknown	33.7	4.8	254	53	5,066	5.0	30,265

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. 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 fost 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.

Beneficiary Characteristics	Mean Number of Rx	Mean Rx $	Rx $ as a Percentage of All Medicaid FFS $[c]	Number of Rx, Percentage with: 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]	Number Beneficiaries	Benefit Months
All	**1.9**	**$156**	**11.2**	**58.5**	**19.9**	**6.4**	**9.4**	**4.7**	**1.1**	**$1,388**	**63,836**	**380,882**
Age												
5 and younger	0.3	18	1.5	82.2	14.5	1.9	1.2	0.1	0.0	1,194	9,686	30,479
6-14	0.6	30	4.0	70.1	22.8	3.8	3.0	0.3	0.0	762	13,741	72,229
15-20	0.7	45	3.1	68.2	22.1	4.8	4.1	0.8	0.1	1,439	8,151	45,367
21-44	1.9	161	10.6	56.8	20.3	7.5	10.1	4.3	0.8	1,515	19,832	113,871
45-64	3.8	325	18.7	23.4	17.5	11.5	25.6	17.2	4.7	1,744	11,157	105,843
65-74	2.2	155	15.6	23.2	28.4	16.4	23.6	7.1	1.5	993	751	7,709
75-84	1.9	122	11.4	25.5	30.4	14.4	23.5	5.7	0.5	1,073	388	4,095
85 and older	1.4	72	3.2	40.3	34.1	8.5	9.3	7.8	0.0	2,244	129	1,283
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	6
Basis of Eligibility[e]												
Aged	1.9	127	11.9	24.4	31.3	16.4	21.9	5.5	0.5	1,064	1,066	10,959
Disabled	2.9	252	13.6	22.2	26.9	12.0	22.6	13.1	3.3	1,854	20,948	220,203
Adults	0.7	16	2.0	75.2	14.9	4.9	4.0	0.9	0.1	793	15,651	47,724
Children	0.3	12	1.7	80.0	16.5	2.1	1.3	0.1	0.0	688	25,735	97,805
Unknown	1.6	125	14.4	23.9	38.8	15.6	16.3	5.0	0.5	864	436	4,191
Gender												
Female	2.2	175	13.6	56.7	19.3	6.7	10.1	5.7	1.5	1,282	35,827	209,372
Male	1.5	133	8.7	60.9	20.6	5.9	8.5	3.3	0.7	1,518	28,009	171,510
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	2.6	218	12.2	45.4	21.4	8.3	13.9	8.6	2.4	1,786	23,152	167,783
African American	1.5	142	11.9	56.0	23.4	6.5	9.1	4.3	0.7	1,190	5,963	40,282
Other/unknown	1.3	98	9.4	67.7	18.3	5.0	6.4	2.1	0.4	1,048	34,721	172,817
Use of Nursing Facilities[f]												
Entire year	5.2	442	3.3	21.7	8.6	4.4	23.6	28.5	13.1	13,410	428	4,989
Part year	6.8	540	5.3	6.8	13.2	10.0	17.1	31.3	21.6	10,262	310	3,285
None	1.8	149	12.9	59.0	20.0	6.4	9.3	4.4	0.9	1,149	63,098	372,608
Maintenance Assistance Status												
Cash	2.9	257	14.4	38.3	21.1	9.3	17.9	10.6	2.8	1,793	23,425	197,001
Medically needy	4.2	400	8.5	12.7	21.5	7.6	32.9	21.5	3.8	4,719	79	728
Poverty related	0.4	20	3.3	82.7	13.4	2.1	1.5	0.2	0.0	602	10,067	31,076
Other/unknown	0.9	51	5.0	66.3	21.1	5.5	5.3	1.5	0.2	1,008	30,265	152,077

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. 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, RHODE ISLAND, 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	**1.9**	**$156**	**$82**	**0.7**	**$113**	**$170**	**0.1**	**$11**	**$140**	**1.2**	**$32**	**$27**
Age												
5 and younger	0.3	18	54	0.1	14	130	0.0	1	44	0.2	3	15
6-14	0.6	30	54	0.3	24	90	0.0	2	56	0.3	5	18
15-20	0.7	45	63	0.3	35	113	0.0	3	94	0.4	7	19
21-44	1.9	161	86	0.6	120	197	0.1	9	133	1.2	31	27
45-64	3.8	325	85	1.3	230	178	0.2	25	161	2.4	70	30
65-74	2.2	155	70	0.8	109	131	0.1	11	120	1.3	35	27
75-84	1.9	122	64	0.7	85	116	0.1	8	109	1.1	29	26
85 and older	1.4	72	50	0.4	46	106	0.1	6	74	0.9	20	22
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Basis of Eligibility[d]												
Aged	1.9	127	66	0.7	89	122	0.1	9	109	1.1	29	26
Disabled	2.9	252	88	1.0	183	184	0.1	17	150	1.8	51	29
Adults	0.7	16	23	0.2	9	46	0.0	1	36	0.5	6	13
Children	0.3	12	36	0.1	8	62	0.0	1	51	0.2	2	14
Unknown	1.6	125	76	0.5	90	174	0.1	6	96	1.1	29	27
Gender												
Female	2.2	175	78	0.8	125	165	0.1	12	133	1.4	38	27
Male	1.5	133	88	0.6	98	178	0.1	9	151	0.9	25	28
Unknown	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Race												
White	2.6	218	83	0.9	155	170	0.1	16	147	1.6	47	29
African American	1.5	142	92	0.5	107	215	0.1	9	147	1.0	26	26
Other/unknown	1.3	98	77	0.5	73	158	0.0	6	120	0.8	19	25
Use of Nursing Facilities[e]												
Entire year	5.2	442	85	1.8	327	185	0.2	24	111	3.2	89	28
Part year	6.8	540	79	2.0	378	185	0.2	31	128	4.5	130	29
None	1.8	149	82	0.6	108	169	0.1	10	141	1.1	30	27
Maintenance Assistance Status												
Cash	2.9	257	89	1.0	187	188	0.1	18	156	1.8	52	29
Medically needy	4.2	400	96	1.3	281	212	0.2	18	118	2.6	82	31
Poverty related	0.4	20	52	0.1	14	118	0.0	1	70	0.3	5	20
Other/unknown	0.9	51	53	0.3	36	105	0.0	3	81	0.6	11	20

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. 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 Rhode Island, 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.

Therapeutic Category	Number of Rx per Benefit Month Among Users				$ per Benefit Month Among Users				$ per Rx				Total Number of Rx	Total Rx $	Users[e]		Number of Benefit Months
	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			Number of Users	As a Percentage of All Benes	
Anti-infective Agents	0.3	0.1	0.0	0.2	$38	$31	$1	$7	$126	$471	$130	$29	45,006	$5,654,958	14,078	22.1	148,125
Biologicals	0.4	0.4	0.0	0.0	545	545	0	0	1544	1,544	0	0	101	155,952	30	0.0	286
Antineoplastic Agents	0.6	0.2	0.0	0.4	182	161	1	19	307	711	3,063	52	2,531	776,535	395	0.6	4,267
Endocrine/Metabolic Drugs	0.6	0.2	0.0	0.3	41	31	1	8	68	135	50	25	51,513	3,490,658	8,214	12.9	86,180
Cardiovascular Agents	0.9	0.3	0.0	0.6	54	34	5	14	57	102	109	25	94,623	5,366,079	9,238	14.5	100,208
Respiratory Agents	0.6	0.4	0.0	0.2	41	33	3	5	65	93	67	23	66,016	4,303,756	9,885	15.5	104,953
Gastrointestinal Agents	0.6	0.3	0.0	0.3	63	43	7	12	106	160	153	45	49,554	5,255,076	7,617	11.9	83,957
Genitourinary Agents	0.4	0.2	0.0	0.2	22	16	0	6	62	85	60	35	8,503	524,051	2,167	3.4	23,509
CNS Drugs	1.3	0.5	0.0	0.8	129	104	4	21	102	222	124	27	170,011	17,372,485	12,591	19.7	135,014
Stimulants/Anti-obesity/Anorexia	0.7	0.6	0.0	0.2	52	47	0	5	71	83	44	28	15,934	1,131,333	2,093	3.3	21,556
Miscellaneous Psychological/ Neurological Agents	0.5	0.5	0.0	0.0	190	189	0	0	377	380	0	53	1,545	582,796	269	0.4	3,075
Analgesics and Anesthetics	0.7	0.0	0.0	0.6	35	10	9	16	50	224	351	25	96,166	4,856,218	13,045	20.4	137,913
Neuromuscular Agents	0.8	0.3	0.0	0.5	70	48	6	16	83	163	137	31	72,498	5,989,760	7,811	12.2	85,545
Nutritional Products	0.3	0.0	0.0	0.3	6	1	0	5	16	32	32	15	5,087	83,761	1,476	2.3	14,807
Hematological Agents	0.7	0.2	0.0	0.4	76	68	0	8	114	312	37	17	12,248	1,395,431	1,663	2.6	18,293
Topical Products	0.3	0.1	0.0	0.2	14	9	1	4	47	99	70	22	31,688	1,497,612	9,749	15.3	104,680
Miscellaneous Products	0.3	0.2	0.0	0.1	78	68	2	8	285	379	131	101	2,473	706,009	852	1.3	9,035
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	33	0	0	0	145	0	0	0	1,137	164,495	438	0.7	4,946
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.	726,634	59,306,965	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. 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 Rhode Island, 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.
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, RHODE ISLAND, 2007

Top 10 Drug Groups	Total Medicaid Rx $	Users			Among Users		
		Number of Users	As a Percentage of All Beneficiaries	Number of Benefit Months	Number of Rx per Benefit Month	$ per Rx	Rx $ per Benefit Month
ANTIPSYCHOTICS	$11,445,370	6,238	9.8	70,246	0.6	$251	$163
ANTICONVULSANT	5,424,162	6,967	10.9	78,149	0.7	98	69
ANTIDEPRESSANTS	4,700,617	13,248	20.8	147,167	0.6	57	32
ANTIVIRAL	4,213,900	1,296	2.0	14,601	0.5	576	289
ULCER DRUGS	4,066,145	7,045	11.0	79,851	0.5	110	51
ANALGESICS - Narcotic	3,407,724	13,546	21.2	150,662	0.4	54	23
ANTIASTHMATIC	3,290,147	10,855	17.0	119,832	0.4	73	27
ANTIHYPERLIPIDEMIC	2,638,369	5,314	8.3	59,967	0.6	77	44
ANTIDIABETIC	2,396,537	5,000	7.8	55,773	0.5	91	43
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	1,117,349	2,284	3.6	24,634	0.6	71	45
Total	42,700,320	71,793	n.a.	800,882	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. 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, RHODE ISLAND, 2007

Note: Column-group headers across the top read "All Top 10 Drug Groups", "ANTIPSYCHOTICS", and "ANTICONVULSANT". The data shown comprises the 7 columns under All Top 10 Drug Groups and 5 columns under the first drug group.

Beneficiary Characteristics	All Top 10 Drug Groups							ANTIPSYCHOTICS				
	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	411,616	$42,700,320	6,238	9.8	70,246	0.6	$163	6,967	10.9	78,149	0.7	$69
Female												
All Females	258,358	25,603,672	3,380	9.4	38,165	0.6	154	4,330	12.1	48,654	0.7	68
Female, Disabled												
All Ages	234,747	24,359,498	3,129	29.1	35,709	0.6	160	3,942	36.6	45,244	0.7	71
5 and younger	848	81,978	3	1.0	36	0.8	33	37	12.9	422	0.7	129
6-14	3,548	292,771	52	8.0	570	0.6	86	97	15.0	1,109	0.7	78
15-20	4,298	342,559	98	16.1	1,086	0.5	80	132	21.6	1,496	0.7	75
21-44	68,876	7,568,786	1,372	37.2	15,593	0.6	150	1,514	41.1	17,262	0.7	78
45-64	154,910	15,887,528	1,580	29.3	18,154	0.7	175	2,142	39.7	24,757	0.7	64
65-74	2,237	184,337	24	21.1	270	1.1	142	20	17.5	198	0.5	45
75-84	30	1,539	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	23,611	1,244,174	251	1.0	2,456	0.6	72	388	1.5	3,410	0.5	33
5 and younger	341	7,563	0	0.0	0	0.0	0	4	0.1	26	0.8	31
6-14	2,887	134,088	44	0.8	421	0.5	63	37	0.6	403	0.5	60
15-20	2,628	182,931	68	1.9	744	0.9	118	55	1.6	571	0.6	63
21-44	8,092	248,944	82	0.9	713	0.3	39	192	2.0	1,490	0.5	16
45-64	3,884	226,028	26	1.8	233	0.4	19	61	4.3	475	0.5	22
65-74	3,458	268,390	12	2.9	141	0.5	50	16	3.9	184	0.5	39
75-84	1,832	138,178	16	7.1	168	0.5	89	17	7.6	203	0.5	35
85 and older	489	38,052	3	3.7	36	1.1	251	6	7.3	58	1.1	74
Male												
All Males	153,258	17,096,648	2,858	10.2	32,081	0.7	174	2,637	9.4	29,495	0.7	72
Male, Disabled												
All Ages	138,575	16,363,291	2,629	25.8	29,888	0.7	181	2,451	24.1	27,864	0.7	74
5 and younger	1,404	93,140	8	1.7	96	0.3	67	45	9.7	505	0.7	62
6-14	10,999	848,931	273	16.9	3,080	0.6	84	219	13.5	2,532	0.7	56
15-20	8,756	746,445	247	21.6	2,796	0.7	94	207	18.1	2,396	0.8	78
21-44	42,917	6,080,161	1,144	34.2	13,017	0.7	221	975	29.2	11,139	0.8	87
45-64	73,857	8,537,283	953	26.8	10,851	0.7	184	998	28.1	11,208	0.7	64
65-74	584	53,637	3	5.6	36	0.3	14	6	11.1	72	0.5	62
75-84	58	3,694	1	10.0	12	0.3	12	1	10.0	12	1.0	10
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	14,683	733,357	229	1.3	2,193	0.6	75	186	1.0	1,631	0.6	37
5 and younger	702	21,277	4	0.1	35	0.4	12	5	0.1	60	0.4	89
6-14	5,695	241,149	87	1.5	851	0.6	72	39	0.7	380	0.8	33
15-20	2,940	185,288	87	3.0	881	0.7	92	58	2.0	584	0.6	40
21-44	1,861	67,000	26	0.8	180	0.3	47	40	1.2	213	0.6	27
45-64	1,119	32,727	7	0.9	61	0.3	16	19	2.4	128	0.4	27
65-74	1,262	106,247	10	5.7	89	0.4	47	16	9.1	168	0.5	47
75-84	987	71,412	7	4.9	84	0.5	87	8	5.6	89	0.6	21
85 and older	117	8,257	1	2.5	12	1.0	102	1	2.5	9	0.3	33
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

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.

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, RHODE ISLAND, 2007

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIVIRAL					ULCER DRUGS				
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	**13,248**	**20.8**	**147,167**	**0.6**	**$32**	**1,296**	**2.0**	**14,601**	**0.5**	**$289**	**7,045**	**11.0**	**79,851**	**0.5**	**$51**
Female															
All Females	9,061	25.3	100,823	0.6	33	812	2.3	9,163	0.5	242	4,800	13.4	54,671	0.5	51
Female, Disabled															
All Ages	7,879	73.2	90,203	0.6	36	680	6.3	7,927	0.5	269	4,163	38.7	48,272	0.5	55
5 and younger	1	0.3	12	0.1	0	1	0.3	12	0.2	1	56	19.5	590	0.4	22
6-14	74	11.4	828	0.6	10	12	1.9	144	0.4	117	62	9.6	724	0.5	45
15-20	144	23.6	1,616	0.5	14	15	2.5	175	0.2	7	77	12.6	882	0.4	48
21-44	2,702	73.3	30,827	0.5	35	251	6.8	2,922	0.5	248	1,147	31.1	13,350	0.4	43
45-64	4,905	90.9	56,328	0.6	37	399	7.4	4,656	0.5	299	2,768	51.3	32,170	0.5	60
65-74	52	45.6	580	0.7	29	2	1.8	18	0.2	42	53	46.5	556	0.5	54
75-84	1	8.3	12	0.2	2	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	1,182	4.7	10,620	0.4	14	132	0.5	1,236	0.3	64	637	2.5	6,399	0.3	26
5 and younger	0	0.0	0	0.0	0	3	0.1	21	0.5	8	21	0.5	176	0.2	7
6-14	53	0.9	531	0.5	8	4	0.1	33	0.2	3	36	0.6	386	0.3	30
15-20	110	3.1	1,124	0.5	12	14	0.4	130	0.2	17	41	1.2	410	0.3	16
21-44	687	7.3	5,717	0.4	10	91	1.0	829	0.3	48	231	2.5	2,141	0.3	11
45-64	209	14.8	1,858	0.5	24	13	0.9	139	0.4	230	112	7.9	1,115	0.4	30
65-74	71	17.4	809	0.4	15	4	1.0	48	0.2	102	116	28.5	1,297	0.4	37
75-84	37	16.5	427	0.5	16	3	1.3	36	0.1	11	66	29.5	711	0.4	41
85 and older	15	18.3	154	0.7	31	0	0.0	0	0.0	0	14	17.1	163	0.6	58
Male															
All Males	4,187	14.9	46,344	0.6	29	484	1.7	5,438	0.6	368	2,245	8.0	25,180	0.5	50
Male, Disabled															
All Ages	3,832	37.6	43,203	0.6	30	453	4.4	5,185	0.6	382	1,995	19.6	22,753	0.5	53
5 and younger	5	1.1	44	0.5	5	6	1.3	31	0.3	11	67	14.4	706	0.6	45
6-14	206	12.7	2,355	0.6	11	13	0.8	156	0.4	159	107	6.6	1,245	0.5	47
15-20	214	18.7	2,457	0.6	16	12	1.0	128	0.4	173	87	7.6	1,023	0.5	42
21-44	1,371	41.0	15,525	0.6	32	141	4.2	1,597	0.5	345	556	16.6	6,435	0.4	51
45-64	2,022	56.9	22,664	0.6	33	278	7.8	3,237	0.6	425	1,166	32.8	13,203	0.5	56
65-74	14	25.9	158	0.5	23	2	3.7	24	0.3	196	11	20.4	129	0.5	62
75-84	0	0.0	0	0.0	0	1	10.0	12	0.1	1	1	10.0	12	0.1	1
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	355	2.0	3,141	0.5	13	31	0.2	253	0.3	84	250	1.4	2,427	0.4	25
5 and younger	1	0.0	6	0.2	7	5	0.1	44	0.3	4	35	0.8	290	0.3	7
6-14	85	1.5	833	0.5	8	4	0.1	46	0.4	9	35	0.6	361	0.3	26
15-20	81	2.8	800	0.6	14	7	0.2	65	0.1	4	39	1.4	403	0.3	21
21-44	106	3.1	727	0.5	14	8	0.2	42	0.4	192	44	1.3	369	0.4	15
45-64	36	4.5	255	0.4	10	5	0.6	32	0.3	21	14	1.8	108	0.6	32
65-74	23	13.1	251	0.5	21	1	0.6	12	0.7	813	37	21.0	384	0.3	35
75-84	21	14.8	245	0.5	14	1	0.7	12	0.3	151	35	24.6	387	0.4	35
85 and older	2	5.0	24	0.9	35	0	0.0	0	0.0	0	11	27.5	125	0.4	30
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. This table was produced on 10/06/2010.
a. Table ND.7B includes the beneficiaries represented by Cell K of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. A beneficiary who used drugs from two or more drug groups was counted as a user for each group.

Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.

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

c. The top 10 drug groups were determined based on total Medicaid reimbursement in the state for 2007. For information about these drug groups, see Wolters Kluwer Health, http://www.medi-span.com/master-drug-database.aspx.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; $ = Medicaid reimbursement.

Nondual Medicaid Beneficiaries

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, RHODE ISLAND, 2007

	ANALGESICS - Narcotic					ANTIASTHMATIC					ANTIHYPERLIPIDEMIC				
Beneficiary Characteristics	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month
All	**13,546**	**21.2**	**150,662**	**0.4**	**$23**	**10,855**	**17.0**	**119,832**	**0.4**	**$28**	**5,314**	**8.3**	**59,967**	**0.6**	**$44**
Female															
All Females	8,887	24.8	99,075	0.4	20	7,028	19.6	78,291	0.4	29	3,378	9.4	38,419	0.6	44
Female, Disabled															
All Ages	7,413	68.9	85,462	0.4	23	5,759	53.5	66,627	0.4	33	2,856	26.6	33,106	0.6	45
5 and younger	10	3.5	118	0.1	1	92	32.1	1,052	0.3	13	0	0.0	0	0.0	0
6-14	38	5.9	425	0.1	1	190	29.3	2,194	0.3	17	1	0.2	3	1.0	21
15-20	103	16.9	1,189	0.2	1	136	22.3	1,604	0.2	14	3	0.5	36	0.5	38
21-44	2,824	76.6	32,565	0.4	17	1,641	44.5	18,948	0.3	26	361	9.8	4,200	0.5	37
45-64	4,391	81.4	50,678	0.5	27	3,656	67.7	42,361	0.4	37	2,420	44.8	28,093	0.6	47
65-74	47	41.2	487	0.4	9	43	37.7	456	0.5	45	70	61.4	762	0.6	47
75-84	0	0.0	0	0.0	0	1	8.3	12	0.1	1	1	8.3	12	0.7	50
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	1,474	5.9	13,613	0.2	4	1,269	5.1	11,664	0.3	10	522	2.1	5,313	0.5	35
5 and younger	17	0.4	173	0.1	1	140	3.2	1,138	0.2	4	0	0.0	0	0.0	0
6-14	54	0.9	577	0.1	1	388	6.8	3,670	0.2	7	1	0.0	12	0.3	8
15-20	126	3.6	1,206	0.1	1	132	3.7	1,225	0.2	7	1	0.0	12	0.1	4
21-44	884	9.4	7,724	0.2	3	404	4.3	3,565	0.3	6	104	1.1	933	0.5	13
45-64	240	17.0	2,206	0.3	6	125	8.9	1,143	0.4	20	131	9.3	1,160	0.6	31
65-74	87	21.4	992	0.2	6	46	11.3	517	0.4	34	180	44.2	2,020	0.6	44
75-84	55	24.6	618	0.2	5	29	12.9	346	0.3	25	90	40.2	1,007	0.5	41
85 and older	11	13.4	117	0.3	4	5	6.1	60	0.7	50	15	18.3	169	0.5	39
Male															
All Males	4,659	16.6	51,587	0.4	27	3,827	13.7	41,541	0.4	24	1,936	6.9	21,548	0.6	44
Male, Disabled															
All Ages	4,148	40.7	46,999	0.4	29	2,823	27.7	32,233	0.4	29	1,667	16.4	18,991	0.6	46
5 and younger	28	6.0	321	0.1	1	159	34.1	1,796	0.3	12	0	0.0	0	0.0	0
6-14	87	5.4	1,015	0.1	2	501	31.0	5,740	0.3	17	3	0.2	34	0.6	9
15-20	132	11.5	1,547	0.1	5	241	21.1	2,790	0.3	18	5	0.4	60	0.3	19
21-44	1,534	45.9	17,482	0.4	19	571	17.1	6,587	0.3	24	323	9.7	3,688	0.5	40
45-64	2,351	66.2	26,442	0.5	39	1,331	37.5	15,109	0.5	39	1,313	36.9	14,946	0.6	48
65-74	15	27.8	180	0.5	36	18	33.3	187	0.3	14	21	38.9	239	0.6	45
75-84	1	10.0	12	1.3	151	2	20.0	24	0.3	11	2	20.0	24	0.3	23
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	511	2.9	4,588	0.2	5	1,004	5.6	9,308	0.3	9	269	1.5	2,557	0.5	29
5 and younger	23	0.5	206	0.1	1	226	4.9	1,973	0.3	6	0	0.0	0	0.0	0
6-14	56	1.0	565	0.1	1	508	8.8	4,803	0.3	8	1	0.0	12	0.1	1
15-20	95	3.3	945	0.1	1	141	4.9	1,379	0.2	6	2	0.1	22	0.6	40
21-44	180	5.3	1,409	0.4	8	63	1.9	487	0.4	11	67	2.0	545	0.5	14
45-64	81	10.2	628	0.3	8	15	1.9	120	0.3	11	68	8.5	569	0.6	18
65-74	43	24.4	456	0.2	5	19	10.8	205	0.4	36	75	42.6	783	0.5	41
75-84	28	19.7	320	0.2	4	31	21.8	329	0.3	39	54	38.0	611	0.5	37
85 and older	5	12.5	59	0.1	2	1	2.5	12	0.9	84	2	5.0	15	0.3	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 Rhode Island, released by CMS in 4/2010. 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.

Beneficiary Characteristics	ANTIDIABETIC						STIMULANTS/ANTI-OBESITY/ANOREXIANTS						
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month		Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Rx $ per Benefit Month	Number of Beneficiaries	Number of Benefit Months
All	**5,000**	**7.8**	**55,773**	**0.5**	**$43**		**2,284**	**3.6**	**24,634**	**0.6**	**$45**	**63,836**	**380,882**
Female													
All Females	3,337	9.3	37,459	0.5	44		792	2.2	8,536	0.6	53	35,826	209,366
Female, Disabled													
All Ages	2,807	26.1	32,306	0.5	46		471	4.4	5,375	0.6	71	10,757	115,053
5 and younger	0	0.0	0	0.0	0		3	1.0	34	0.1	1	287	2,454
6-14	6	0.9	72	0.5	16		110	17.0	1,259	0.7	48	648	7,013
15-20	21	3.4	225	0.5	18		95	15.6	1,075	0.7	44	610	6,073
21-44	405	11.0	4,611	0.5	40		138	3.7	1,594	0.6	69	3,685	39,207
45-64	2,307	42.7	26,658	0.5	48		124	2.3	1,401	0.7	115	5,397	58,926
65-74	67	58.8	728	0.4	38		1	0.9	12	0.4	75	114	1,210
75-84	1	8.3	12	1.6	75		0	0.0	0	0.0	0	12	122
85 and older	0	0.0	0	0.0	0		0	0.0	0	0.0	0	4	48
Female, Other Eligibles													
All Ages	530	2.1	5,153	0.4	29		321	1.3	3,161	0.6	24	25,069	94,313
5 and younger	4	0.1	44	0.3	5		0	0.0	0	0.0	0	4,320	11,743
6-14	5	0.1	40	0.8	34		191	3.4	1,870	0.6	22	5,701	23,719
15-20	7	0.2	48	0.5	15		92	2.6	942	0.6	28	3,522	13,579
21-44	122	1.3	971	0.5	13		34	0.4	318	0.5	21	9,403	31,051
45-64	112	7.9	905	0.5	30		4	0.3	31	0.4	25	1,410	6,890
65-74	192	47.2	2,148	0.4	36		0	0.0	0	0.0	0	407	4,145
75-84	82	36.6	937	0.4	28		0	0.0	0	0.0	0	224	2,397
85 and older	6	7.3	60	0.2	8		0	0.0	0	0.0	0	82	789
Male													
All Males	1,663	5.9	18,314	0.5	42		1,492	5.3	16,098	0.6	41	28,009	171,510
Male, Disabled													
All Ages	1,446	14.2	16,258	0.5	44		879	8.6	9,955	0.7	50	10,191	105,150
5 and younger	0	0.0	0	0.0	0		13	2.8	142	0.2	13	466	4,026
6-14	7	0.4	84	0.7	55		476	29.4	5,379	0.7	44	1,618	17,179
15-20	28	2.4	284	0.6	47		238	20.8	2,676	0.7	45	1,144	11,688
21-44	245	7.3	2,765	0.5	51		112	3.4	1,292	0.7	64	3,342	34,459
45-64	1,147	32.3	12,907	0.5	43		40	1.1	466	0.6	122	3,554	37,085
65-74	17	31.5	194	0.6	64		0	0.0	0	0.0	0	54	570
75-84	2	20.0	24	0.5	32		0	0.0	0	0.0	0	10	107
85 and older	0	0.0	0	0.0	0		0	0.0	0	0.0	0	3	36
Male, Other Eligibles													
All Ages	217	1.2	2,056	0.5	21		613	3.4	6,143	0.6	27	17,818	66,360
5 and younger	1	0.0	2	1.0	151		8	0.2	81	0.2	4	4,613	12,256
6-14	12	0.2	94	0.6	19		445	7.7	4,398	0.6	26	5,774	24,318
15-20	6	0.2	40	0.5	21		151	5.3	1,596	0.6	31	2,875	14,027
21-44	43	1.3	331	0.5	11		8	0.2	56	0.6	28	3,402	9,154
45-64	49	6.2	461	0.6	11		1	0.1	12	0.7	10	796	2,942
65-74	66	37.5	684	0.4	35		0	0.0	0	0.0	0	176	1,784
75-84	36	25.4	405	0.3	17		0	0.0	0	0.0	0	142	1,469
85 and older	4	10.0	39	0.3	21		0	0.0	0	0.0	0	40	410
Unknown	0	0.0	0	0.0	0		0	0.0	0	0.0	0	1	6

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. 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.

MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,
BY BENEFICIARY CHARACTERISTIC[a, b]
NONDUAL BENEFICIARIES, RHODE ISLAND, 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	**$442**	**5.2**	**428**	**4,989**
Age				
0-64	486	5.5	366	4,318
65-74	227	3.5	19	215
75-84	189	4.0	16	173
85 and older	75	2.3	27	283
Unknown	0	0.0	0	0
Gender				
Female	471	5.9	199	2,317
Male	416	4.6	229	2,672
Unknown	0	0.0	0	0
Race				
White	458	5.2	303	3,606
African American	484	7.4	29	344
Other/unknown	370	4.3	96	1,039
Basis of Eligibility[c]				
Aged	116	2.9	53	563
Disabled	483	5.5	375	4,426
Adults	0	0.0	0	0
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. 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 310 beneficiaries who were in nursing facilities for part of their enrollment and their 3,285 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, RHODE ISLAND, 2007

Therapeutic Category	Number of Rx per Benefit Month Among Users				$ per Benefit Month Among Users				$ per Rx				Users				
	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total	Patented Brand-Name	Off-Patent Brand-Name	Generic	Total Number of Rx	Total Rx $	Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months
Anti-infective Agents	0.4	0.1	0.0	0.3	$46	$37	$1	$7	$123	$380	$258	$27	810	$99,642	184	43.0	2,182
Biologicals	0.0	0.0	0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0.0	0
Antineoplastic Agents	0.6	0.1	0.0	0.5	85	43	0	42	152	519	0	88	67	10,210	10	2.3	120
Endocrine/Metabolic Drugs	1.0	0.3	0.1	0.6	61	42	4	15	59	124	55	24	1,716	100,895	141	32.9	1,665
Cardiovascular Agents	1.5	0.4	0.1	1.0	58	38	3	17	39	93	58	16	2,962	116,308	171	40.0	2,005
Respiratory Agents	0.8	0.4	0.1	0.3	57	38	10	9	74	99	78	34	1,067	78,514	116	27.1	1,384
Gastrointestinal Agents	1.2	0.5	0.1	0.7	104	64	11	30	87	137	174	45	2,358	206,213	167	39.0	1,977
Genitourinary Agents	0.8	0.4	0.0	0.4	52	35	1	16	65	87	27	44	510	33,235	54	12.6	635
CNS Drugs	2.0	0.8	0.0	1.2	233	192	5	36	115	246	132	30	6,857	789,191	286	66.8	3,385
Stimulants/Anti-obesity/Anorexia	1.0	0.5	0.0	0.5	93	76	0	18	92	147	0	36	73	6,722	6	1.4	72
Miscellaneous Psychological/ Neurological Agents	0.8	0.8	0.0	0.0	235	235	0	0	295	295	0	0	129	38,107	14	3.3	162
Analgesics and Anesthetics	1.0	0.0	0.1	0.9	38	2	12	24	40	83	164	28	1,307	52,132	116	27.1	1,369
Neuromuscular Agents	1.8	0.8	0.1	0.8	211	165	12	34	120	197	142	41	4,389	527,564	210	49.1	2,498
Nutritional Products	0.7	0.0	0.0	0.7	9	1	0	9	13	15	25	12	309	3,945	36	8.4	417
Hematological Agents	2.0	0.2	0.0	1.9	60	49	0	12	30	283	0	6	1,463	43,715	63	14.7	723
Topical Products	0.6	0.2	0.0	0.5	32	19	1	12	50	116	61	26	1,693	84,373	225	52.6	2,666
Miscellaneous Products	0.3	0.1	0.0	0.2	20	6	0	13	69	62	0	73	55	3,806	17	4.0	194
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	20	0	0	0	85	0	0	0	97	8,293	35	8.2	417
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.	25,862	2,202,865	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. 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 310 beneficiaries who were in nursing facilities for part of their enrollment and their 3,285 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 Rhode Island, 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.

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, RHODE ISLAND, 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	$616,733	214	50.0	2,539	1.1	$225	$243
ANTICONVULSANT	505,203	261	61.0	3,109	1.2	134	162
ANTIDEPRESSANTS	150,052	284	66.4	3,374	0.9	50	44
ULCER DRUGS	144,817	141	32.9	1,660	0.8	106	87
DERMATOLOGICAL	71,406	375	87.6	4,441	0.3	57	16
ANTIHYPERLIPIDEMIC	60,115	93	21.7	1,089	0.8	66	55
MISC. ENDOCRINE	48,518	35	8.2	420	0.8	149	116
ANTIASTHMATIC	46,429	78	18.2	933	0.6	85	50
ANTIVIRAL	43,674	15	3.5	179	0.5	480	244
ANALGESICS - Narcotic	43,607	94	22.0	1,095	0.8	49	40
Total	1,730,554	1,590	n.a.	18,839	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. 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 310 beneficiaries who were in nursing facilities for part of their enrollment and their 3,285 benefit months were excluded from the analysis.
b. A user is a beneficiary who had at least one prescription filled in a given drug group during 2007. A beneficiary who used drugs from two or more drug groups was counted as a user for each group. Therefore, the sum of users across drug groups may exceed the total number of individual users. Benefit months are months during which beneficiaries had fee-for-service pharmacy benefits.
c. Medicaid reimbursement amounts presented in this table do not reflect federally required rebates from drug manufacturers to the state.
d. The top 10 drug groups were determined based on total 2007 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, http://www.medi-span.com/master-drug-database.aspx.
Bene Mo(s) = benefit month(s); CMS = Centers for Medicare & Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; $ = Medicaid reimbursement; n.a. = not applicable.

Nondual Medicaid Beneficiaries

TABLE ND.10A
MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED AND FIRST
AND SECOND TOP DRUG GROUPS SEPARATELY AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE[a, b, c, d]
NONDUAL BENEFICIARIES, RHODE ISLAND, 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	**14,923**	**$1,730,554**	**214**	**50.0**	**2,539**	**1.1**	**$243**	**261**	**61.0**	**3,109**	**1.2**	**$163**
Female												
All Females	7,637	845,449	107	53.8	1,280	1.2	230	127	63.8	1,508	1.2	158
Female, Disabled												
All Ages	7,362	827,780	102	60.4	1,220	1.2	234	123	72.8	1,460	1.2	161
64 or younger	7,053	814,152	96	58.9	1,148	1.1	241	123	75.5	1,460	1.2	161
65-74	309	13,628	6	100.0	72	2.4	112	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles												
All Ages	275	17,669	5	16.7	60	0.9	162	4	13.3	48	1.0	50
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	11	380	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	116	7,851	3	33.3	36	0.8	132	1	11.1	12	1.0	139
85 and older	148	9,438	2	12.5	24	1.1	208	3	18.8	36	0.9	20
Male												
All Males	7,286	885,105	107	46.7	1,259	1.0	256	134	58.5	1,601	1.3	167
Male, Disabled												
All Ages	6,966	864,551	99	48.1	1,170	1.0	271	128	62.1	1,529	1.3	174
64 or younger	6,966	864,551	99	48.8	1,170	1.0	271	128	63.1	1,529	1.3	174
65-74	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles												
All Ages	320	20,554	8	34.8	89	0.5	56	6	26.1	72	0.6	21
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	98	5,656	3	50.0	29	0.3	6	4	66.7	48	0.5	9
75-84	181	11,501	4	57.1	48	0.5	74	2	28.6	24	1.0	43
85 and older	41	3,397	1	10.0	12	1.0	102	0	0.0	0	0.0	0
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. 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 310 beneficiaries who were in nursing facilities for part of their enrollment and their 3,285 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.

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, RHODE ISLAND, 2007

Beneficiary Characteristics	ANTIDEPRESSANTS					ULCER DRUGS					DERMATOLOGICAL				
	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	**284**	**66.4**	**3,374**	**0.9**	**$45**	**141**	**32.9**	**1,660**	**0.8**	**$87**	**375**	**87.6**	**4,441**	**0.3**	**$16**
Female															
All Females	144	72.4	1,708	0.9	45	69	34.7	812	0.8	81	151	75.9	1,792	0.3	21
Female, Disabled															
All Ages	134	79.3	1,592	0.9	47	64	37.9	756	0.9	84	146	86.4	1,741	0.3	21
64 or younger	129	79.1	1,532	0.9	47	63	38.7	744	0.9	84	139	85.3	1,657	0.3	22
65-74	5	83.3	60	1.1	45	1	16.7	12	0.5	69	7	116.7	84	0.3	8
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	10	33.3	116	0.8	25	5	16.7	56	0.7	35	5	16.7	51	0.1	3
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	1	20.0	12	0.9	32	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	3	33.3	32	1.3	26	1	11.1	8	0.5	5	2	22.2	20	0.1	7
85 and older	6	37.5	72	0.6	23	4	25.0	48	0.8	40	3	18.8	31	0.2	0
Male															
All Males	140	61.1	1,666	0.9	44	72	31.4	848	0.8	94	224	97.8	2,649	0.3	13
Male, Disabled															
All Ages	128	62.1	1,522	0.9	44	67	32.5	788	0.8	96	210	101.9	2,481	0.3	13
64 or younger	128	63.1	1,522	0.9	44	67	33.0	788	0.8	96	210	103.4	2,481	0.3	13
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	12	52.2	144	0.8	41	5	21.7	60	0.7	65	14	60.9	168	0.2	11
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	4	66.7	48	0.9	55	0	0.0	0	0.0	0	2	33.3	24	0.2	10
75-84	7	100.0	84	0.7	29	4	57.1	48	0.9	76	9	128.6	108	0.2	4
85 and older	1	10.0	12	1.2	67	1	10.0	12	0.3	21	3	30.0	36	0.3	31
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 Rhode Island, released by CMS in 4/2010. 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 310 beneficiaries who were in nursing facilities for part of their enrollment and their 3,285 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.

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, RHODE ISLAND, 2007

Beneficiary Characteristics	ANTIHYPERLIPIDEMIC					MISC. ENDOCRINE					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	**93**	**21.7**	**1,089**	**0.8**	**$55**	**35**	**8.2**	**420**	**0.8**	**$116**	**78**	**18.2**	**933**	**0.6**	**$50**
Female															
All Females	47	23.6	541	0.9	58	26	13.1	312	0.8	129	47	23.6	561	0.6	48
Female, Disabled															
All Ages	45	26.6	517	0.9	61	26	15.4	312	0.8	129	46	27.2	549	0.6	49
64 or younger	44	27.0	505	0.9	62	25	15.3	300	0.8	131	46	28.2	549	0.6	49
65-74	1	16.7	12	1.1	30	1	16.7	12	1.0	74	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Female, Other Eligibles															
All Ages	2	6.7	24	0.5	1	0	0.0	0	0.0	0	1	3.3	12	0.2	10
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	2	22.2	24	0.5	1	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	1	6.3	12	0.2	10
Male															
All Males	46	20.1	548	0.8	52	9	3.9	108	0.7	76	31	13.5	372	0.6	53
Male, Disabled															
All Ages	42	20.4	500	0.8	53	8	3.9	96	0.7	84	30	14.6	360	0.7	55
64 or younger	42	20.7	500	0.8	53	8	3.9	96	0.7	84	30	14.8	360	0.7	55
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
Male, Other Eligibles															
All Ages	4	17.4	48	0.7	49	1	4.3	12	0.2	12	1	4.3	12	0.1	1
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	2	33.3	24	0.9	90	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	2	28.6	24	0.6	9	1	14.3	12	0.2	12	1	14.3	12	0.1	1
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
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 Rhode Island, released by CMS in 4/2010. 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 310 beneficiaries who were in nursing facilities for part of their enrollment and their 3,285 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.

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, RHODE ISLAND, 2007

| | ANTIVIRAL | | | | | ANALGESICS - Narcotic | | | | | | |
Beneficiary Characteristics	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	**15**	**3.5**	**179**	**0.5**	**$244**	**94**	**22.0**	**1,095**	**0.8**	**$40**	**428**	**4,989**
Female												
All Females	6	3.0	72	0.2	48	52	26.1	612	1.0	50	199	2,317
Female, Disabled												
All Ages	6	3.6	72	0.2	48	50	29.6	588	1.0	52	169	2,005
64 or younger	6	3.7	72	0.2	48	48	29.4	564	1.0	54	163	1,933
65-74	0	0.0	0	0.0	0	2	33.3	24	0.6	4	6	72
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	0	0.0	0	0.0	0	2	6.7	24	0.6	16	30	312
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	5	54
75-84	0	0.0	0	0.0	0	2	22.2	24	0.6	16	9	98
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	16	160
Male												
All Males	9	3.9	107	0.7	376	42	18.3	483	0.6	27	229	2,672
Male, Disabled												
All Ages	9	4.4	107	0.7	376	42	20.4	483	0.6	27	206	2,421
64 or younger	9	4.4	107	0.7	376	42	20.7	483	0.6	27	203	2,385
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	24
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	1	12
Male, Other Eligibles												
All Ages	0	0.0	0	0.0	0	0	0.0	0	0.0	0	23	251
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	6	65
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	7	75
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	10	111
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 Rhode Island, released by CMS in 4/2010. 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 310 beneficiaries who were in nursing facilities for part of their enrollment and their 3,285 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.

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	**12,740**	**20.0**	**1.4**	**87,831**	**$14**	**$872,043**	**$10**	**1.5**	**63,836**
Age									
5 and younger	624	6.4	0.2	1,537	1	13,027	8	2.3	9,686
6-14	1,045	7.6	0.2	3,007	2	31,764	11	1.4	13,741
15-20	694	8.5	0.3	2,512	3	25,022	10	1.2	8,151
21-44	4,066	20.5	1.3	26,516	12	247,791	9	1.4	19,832
45-64	5,652	50.7	4.5	50,487	47	524,685	10	1.5	11,157
65-74	391	52.1	2.7	2,055	23	17,641	9	1.5	751
75-84	200	51.5	3.3	1,276	24	9,205	7	1.8	388
85 and older	68	52.7	3.4	441	23	2,908	7	3.2	129
Unknown	0	0.0	0.0	0	0	0	0	0.0	1
Basis of Eligibility[c]									
Aged	530	49.7	2.6	2,787	19	20,174	7	1.5	1,066
Disabled	9,482	45.3	3.8	78,967	38	803,421	10	1.4	20,948
Adults	1,230	7.9	0.2	2,943	2	24,623	8	3.2	15,651
Children	1,352	5.3	0.1	2,463	1	18,484	8	1.6	25,735
Unknown	146	33.5	1.5	671	12	5,341	8	1.0	436
Gender									
Female	8,398	23.4	1.7	60,845	17	625,602	10	1.7	35,827
Male	4,342	15.5	1.0	26,986	9	246,441	9	1.1	28,009
Unknown	0	0.0	0.0	0	0	0	0	0.0	0
Race									
White	6,454	27.9	2.4	55,392	25	587,164	11	1.6	23,152
African American	1,184	19.9	1.2	7,173	11	64,006	9	1.1	5,963
Other/unknown	5,102	14.7	0.7	25,266	6	220,873	9	1.3	34,721
Use of Nursing Facilities[d]									
Entire year	266	62.1	9.7	4,144	64	27,198	7	1.2	428
Part year	240	77.4	8.0	2,467	71	22,089	9	1.2	310
None	12,234	19.4	1.3	81,220	13	822,756	10	1.5	63,098
Maintenance Assistance Status									
Cash	8,636	36.9	3.1	72,976	32	747,451	10	1.5	23,425
Medically needy	43	54.4	3.2	252	27	2,170	9	0.7	79
Poverty related	589	5.9	0.1	1,393	1	9,453	7	1.5	10,067
Other/unknown	3,472	11.5	0.4	13,210	4	112,969	9	1.5	30,265

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. 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.

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	**0.2**	**$2**	**$10**	**$0**	**$1**	**380,882**
Age						
5 and younger	0.1	0	8	0	0	30,479
6-14	0.0	0	11	0	0	72,229
15-20	0.1	1	10	0	0	45,367
21-44	0.2	2	9	0	1	113,871
45-64	0.5	5	10	0	2	105,843
65-74	0.3	2	9	0	0	7,709
75-84	0.3	2	7	0	0	4,095
85 and older	0.3	2	7	0	1	1,283
Unknown	0.0	0	0	0	0	6
Basis of Eligibility[c]						
Aged	0.3	2	7	0	0	10,959
Disabled	0.4	4	10	0	2	220,203
Adults	0.1	1	8	0	0	47,724
Children	0.0	0	8	0	0	97,805
Unknown	0.2	1	8	0	0	4,191
Gender						
Female	0.3	3	10	0	1	209,372
Male	0.2	1	9	0	1	171,510
Unknown	0.0	0	0	0	0	0
Race						
White	0.3	3	11	0	2	167,783
African American	0.2	2	9	0	1	40,282
Other/unknown	0.1	1	9	0	0	172,817
Use of Nursing Facilities[d]						
Entire year	0.8	5	7	0	1	4,989
Part year	0.8	7	9	0	3	3,285
None	0.2	2	10	0	1	372,608
Maintenance Assistance Status						
Cash	0.4	4	10	0	2	197,001
Medically needy	0.3	3	9	0	2	728
Poverty related	0.0	0	7	0	0	31,076
Other/unknown	0.1	1	9	0	0	152,077

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. Table ND.12 includes the beneficaries 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 beneficaries 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]

RHODE ISLAND, 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	**18,001**	**$48**	**$872,043**	**100.0**	**87,831**	**$10**	**100.0**
Anorexia or weight loss/gain	4	35	139	0.0	5	28	0.0
Fertility drugs	0	0	0	0.0	0	0	0.0
Drugs for cosmetic purposes	59	12	681	0.1	88	8	0.1
Cough and cold medications	2,692	56	151,199	17.3	5,638	27	6.4
Vitamins and minerals	827	67	55,482	6.4	3,423	16	3.9
Non-prescription drugs	8,493	27	225,845	25.9	37,961	6	43.2
Barbiturates	168	81	13,555	1.6	1,868	7	2.1
Benzodiazepines	5,128	69	355,242	40.7	36,124	10	41.1
Other Part D Excl Rx Drugs	630	111	69,900	8.0	2,724	26	3.1

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. This table was produced on 10/06/2010.

a. Table ND.13 includes the beneficaries 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, RHODE ISLAND, 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	**177,231**	**1,066**	**24,797**	**52,337**	**98,594**	**437**	**1,770,853**	**10,975**	**273,248**	**500,946**	**981,452**	**4,232**
Age												
5 and younger	36,994	0	1,389	1	35,604	0	352,538	0	14,877	8	337,653	0
6-14	46,480	0	4,060	1	42,419	0	490,373	0	46,706	12	443,655	0
15-20	26,110	0	2,949	2,685	20,464	12	257,147	0	33,168	24,451	199,403	125
21-44	49,652	0	7,186	42,207	102	157	486,001	0	78,863	404,983	699	1,456
45-64	16,713	1	9,016	7,427	4	265	171,576	3	97,538	71,376	36	2,623
65-74	763	577	168	15	0	3	7,813	5,898	1,783	104	0	28
75-84	389	366	22	1	0	0	4,107	3,866	229	12	0	0
85 and older	129	122	7	0	0	0	1,292	1,208	84	0	0	0
Unknown	1	0	0	0	1	0	6	0	0	0	6	0
Gender												
Female	101,242	710	12,133	39,274	48,688	437	1,016,613	7,315	134,928	384,318	485,820	4,232
Male	75,989	356	12,664	13,063	49,906	0	754,240	3,660	138,320	116,628	495,632	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	56,518	149	12,215	19,962	23,883	309	579,911	1,573	135,142	194,755	245,438	3,003
African American	14,553	80	2,799	4,429	7,230	15	150,218	837	30,828	43,211	75,183	159
Other/unknown	106,160	837	9,783	27,946	67,481	113	1,040,724	8,565	107,278	262,980	660,831	1,070
Use of Nursing Facilities[c]												
Entire year	428	53	375	0	0	0	4,995	563	4,432	0	0	0
Part year	310	39	270	1	0	0	3,326	349	2,965	12	0	0
None	176,493	974	24,152	52,336	98,594	437	1,762,532	10,063	265,851	500,934	981,452	4,232
Maintenance Assistance Status												
Cash	50,999	137	21,224	8,162	21,476	0	538,568	1,385	237,061	78,733	221,389	0
Medically needy	93	3	70	20	0	0	921	24	703	194	0	0
Poverty related	36,036	0	2	1,417	34,180	437	357,623	0	15	9,544	343,832	4,232
Other/unknown	90,103	926	3,501	42,738	42,938	0	873,741	9,566	35,469	412,475	416,231	0
Managed Care (MC) Status												
Fee-for-service (FFS) all year	28,806	1,063	19,512	2,426	5,376	429	295,813	10,951	213,057	18,456	49,205	4,144
FFS part year, with Rx claims	6,131	2	663	2,657	2,805	4	63,886	12	7,616	26,680	29,534	44
FFS part year, no Rx claims	28,899	1	773	10,568	17,554	3	255,263	12	8,245	89,559	157,415	32
MC all year, with Rx claims	1,968	0	69	1,062	836	1	20,737	0	718	11,102	8,905	12
MC all year, no Rx claims	111,427	0	3,780	35,624	72,023	0	1,135,154	0	43,612	355,149	736,393	0

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. 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.

MEDICAID BENEFICIARIES AND THEIR BENEFIT MONTHS WITH OR WITHOUT FEE-FOR-SERVICE PHARMACY BENEFITS[a]

NONDUAL BENEFICIARIES, RHODE ISLAND, 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	**177,231**	**1,770,853**	**63,836**	**380,882**	**0**	**1,389,971**
Fee-for-service (FFS) all year	28,806	295,813	28,806	295,813	0	0
FFS part year, with Rx claims	6,131	63,886	6,131	29,222	0	34,664
FFS part year, with no Rx claims	28,899	255,263	28,899	55,847	0	199,416
Managed care (MC) all year, with Rx claims	1,968	20,737	0	0	0	20,737
MC all year, with no Rx claims	111,427	1,135,154	0	0	0	1,135,154

Source: Data for this table are from the MAX 2007 file for Rhode Island, released by CMS in 4/2010. 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.