

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 2004 COLORADO

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TABLE ND.2  
CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
NONDUAL BENEFICIARIES, COLORADO, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown
<b>All</b>	<b>394,622</b>	<b>4,279</b>	<b>37,210</b>	<b>87,188</b>	<b>265,788</b>	<b>157</b>	<b>3,109,467</b>	<b>34,250</b>	<b>344,306</b>	<b>574,471</b>	<b>2,155,284</b>	<b>1,156</b>
<b>Age</b>												
5 and younger	134,172	0	2,533	0	131,639	0	1,068,179	0	23,175	0	1,045,004	0
6-14	100,440	0	5,057	0	95,383	0	851,996	0	50,413	0	801,583	0
15-20	47,619	0	3,871	5,566	38,182	0	371,153	0	37,151	28,674	305,328	0
21-44	88,554	0	12,190	75,972	379	13	627,376	0	114,885	509,716	2,682	93
45-64	19,106	0	13,384	5,580	0	142	154,449	0	117,752	35,639	0	1,058
65-74	2,706	2,524	173	8	0	1	20,721	19,758	922	38	0	3
75-84	1,381	1,378	0	3	0	0	11,453	11,436	0	17	0	0
85 and older	387	375	0	9	2	1	3,123	3,044	0	71	6	2
Unknown	257	2	2	50	203	0	1,017	12	8	316	681	0
<b>Gender</b>												
Female	230,205	2,659	20,080	72,624	134,685	157	1,785,300	21,611	185,910	486,920	1,089,703	1,156
Male	164,415	1,620	17,129	14,564	131,102	0	1,324,154	12,639	158,384	87,551	1,065,580	0
Unknown	2	0	1	0	1	0	13	0	12	0	1	0
<b>Race</b>												
White	151,454	1,395	16,287	29,229	104,493	50	1,225,383	11,728	158,605	187,950	866,737	363
African American	28,885	102	1,838	4,628	22,316	1	237,408	753	17,394	31,359	187,895	7
Other/unknown	214,283	2,782	19,085	53,331	138,979	106	1,646,676	21,769	168,307	355,162	1,100,652	786
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	707	217	490	0	0	0	7,070	2,155	4,915	0	0	0
Part year	567	105	461	1	0	0	5,150	896	4,243	11	0	0
None	393,348	3,957	36,259	87,187	265,788	157	3,097,247	31,199	335,148	574,460	2,155,284	1,156
<b>Maintenance Assistance Status</b>												
Cash	224,695	3,988	33,729	57,520	129,458	0	1,842,691	32,004	310,210	401,514	1,098,963	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	123,126	2	5	17,356	105,606	157	865,009	24	40	85,700	778,089	1,156
Other/unknown	46,801	289	3,476	12,312	30,724	0	401,767	2,222	34,056	87,257	278,232	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	360,596	4,095	34,325	81,929	240,090	157	2,938,639	33,274	330,226	552,983	2,021,000	1,156
FFS part year, with Rx claims	16,984	111	2,230	3,214	11,429	0	97,861	657	11,612	15,175	70,417	0
FFS part year, no Rx claims	17,042	73	655	2,045	14,269	0	72,967	319	2,468	6,313	63,867	0

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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<sup>a, b</sup>  
NONDUAL BENEFICIARIES, COLORADO, 2004

Beneficiary Characteristics	Percentage with at Least One Rx	Mean Number of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Medicaid FFS \$ <sup>c</sup>	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>d</sup>	Number of Beneficiaries
<b>All</b>	<b>46.2 %</b>	<b>5.3</b>	<b>\$348</b>	<b>\$66</b>	<b>\$2,903</b>	<b>12.0 %</b>	<b>394,622</b>
<b>Age</b>							
5 and younger	43.7	2.1	103	50	1,628	6.3	134,172
6-14	38.8	3.1	231	75	1,735	13.3	100,440
15-20	49.9	4.8	352	73	3,884	9.0	47,619
21-44	53.2	7.4	483	65	4,025	12.0	88,554
45-64	60.4	27.5	1,918	70	9,404	20.4	19,106
65-74	50.1	16.8	877	52	5,274	16.6	2,706
75-84	57.6	21.1	1,002	48	8,576	11.7	1,381
85 and older	53.5	23.6	1,030	44	13,875	7.4	387
Unknown	6.2	0.2	4	28	740	0.6	257
<b>Basis of Eligibility<sup>e</sup></b>							
Aged	54.2	19.3	955	50	7,216	13.2	4,279
Disabled	67.0	25.3	2,081	82	12,633	16.5	37,210
Adults	49.7	4.6	209	45	2,342	8.9	87,188
Children	42.0	2.5	140	57	1,648	8.5	265,788
Unknown	91.1	21.0	1,996	95	15,114	13.2	157
<b>Gender</b>							
Female	48.6	5.7	343	60	2,854	12.0	230,205
Male	42.8	4.6	356	77	2,971	12.0	164,415
Unknown	50.0	6.0	1,068	178	2,026	52.7	2
<b>Race</b>							
White	49.9	6.2	434	70	3,221	13.5	151,454
African American	41.3	3.9	259	67	2,332	11.1	28,885
Other/unknown	44.3	4.8	299	62	2,755	10.9	214,283
<b>Use of Nursing Facilities<sup>f</sup></b>							
Entire year	89.8	81.8	5,696	70	54,589	10.4	707
Part year	88.7	75.2	4,686	62	50,199	9.3	567
None	46.1	5.0	332	66	2,742	12.1	393,348
<b>Maintenance Assistance Status</b>							
Cash	48.8	6.6	436	66	2,868	15.2	224,695
Medically needy	0.0	0.0	0	0	0	0.0	0
Poverty related	38.8	1.9	85	45	1,438	5.9	123,126
Other/unknown	53.2	8.0	619	77	6,925	8.9	46,801

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 seven states (DE, IA, NE, NY, TX, UT, 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 seven states (DE, IA, NE, NY, TX, UT, 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<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

Beneficiary Characteristics	Mean Number of Rx	Mean Rx \$	Rx \$ as a Percentage of All Medicaid FFS \$ <sup>c</sup>	Number of Rx, Percentage with:						Mean \$, All Medicaid FFS \$ <sup>d</sup>	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
<b>All</b>	<b>0.7</b>	<b>\$44</b>	<b>12.0 %</b>	<b>53.8 %</b>	<b>36.2 %</b>	<b>4.0 %</b>	<b>3.8 %</b>	<b>1.6 %</b>	<b>0.6 %</b>	<b>\$368</b>	<b>394,622</b>	<b>3,109,467</b>
<b>Age</b>												
5 and younger	0.3	13	6.3	56.3	40.8	1.8	0.9	0.2	0.1	205	134,172	1,068,179
6-14	0.4	27	13.3	61.2	32.8	2.9	2.5	0.5	0.1	205	100,440	851,996
15-20	0.6	45	9.0	50.1	39.1	5.3	4.3	0.9	0.2	498	47,619	371,153
21-44	1.0	68	12.0	46.8	37.0	6.8	6.2	2.4	0.8	568	88,554	627,376
45-64	3.4	237	20.4	39.6	16.5	8.1	16.6	13.2	6.0	1,163	19,106	154,449
65-74	2.2	115	16.6	49.9	17.6	8.6	14.6	7.9	1.4	689	2,706	20,721
75-84	2.5	121	11.7	42.4	18.0	8.7	17.6	10.6	2.8	1,034	1,381	11,453
85 and older	2.9	128	7.4	46.5	10.6	7.5	17.1	15.5	2.8	1,719	387	3,123
Unknown	0.0	1	0.6	93.8	5.8	0.4	0.0	0.0	0.0	187	257	1,017
<b>Basis of Eligibility<sup>e</sup></b>												
Aged	2.4	119	13.2	45.8	17.6	8.7	16.1	9.7	2.1	902	4,279	34,250
Disabled	2.7	225	16.5	33.0	25.0	9.4	16.9	11.0	4.7	1,365	37,210	344,306
Adults	0.7	32	8.9	50.3	37.7	6.2	4.4	1.2	0.3	356	87,188	574,471
Children	0.3	17	8.5	58.0	37.7	2.5	1.6	0.2	0.1	203	265,788	2,155,284
Unknown	2.9	271	13.2	8.9	27.4	19.7	33.8	9.6	0.6	2,053	157	1,156
<b>Gender</b>												
Female	0.7	44	12.0	51.4	37.7	4.4	4.0	1.8	0.7	368	230,205	1,785,300
Male	0.6	44	12.0	57.2	34.2	3.4	3.5	1.3	0.4	369	164,415	1,324,154
Unknown	0.9	164	52.7	50.0	50.0	0.0	0.0	0.0	0.0	312	2	13
<b>Race</b>												
White	0.8	54	13.5	50.1	38.1	4.7	4.6	1.9	0.7	398	151,454	1,225,383
African American	0.5	31	11.1	58.7	33.9	3.4	2.8	0.9	0.2	284	28,885	237,408
Other/unknown	0.6	39	10.9	55.7	35.2	3.7	3.4	1.4	0.5	359	214,283	1,646,676
<b>Use of Nursing Facilities<sup>f</sup></b>												
Entire year	8.2	570	10.4	10.2	5.7	2.5	19.2	34.5	27.9	5,459	707	7,070
Part year	8.3	516	9.3	11.3	4.4	4.1	20.3	33.7	26.3	5,527	567	5,150
None	0.6	42	12.1	53.9	36.3	4.0	3.8	1.5	0.5	348	393,348	3,097,247
<b>Maintenance Assistance Status</b>												
Cash	0.8	53	15.2	51.2	36.6	4.6	4.7	2.2	0.8	350	224,695	1,842,691
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.3	12	5.9	61.2	34.9	2.4	1.3	0.2	0.0	205	123,126	865,009
Other/unknown	0.9	72	8.9	46.8	38.0	5.6	6.4	2.3	0.9	807	46,801	401,767

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 seven states (DE, IA, NE, NY, TX, UT, 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 seven states (DE, IA, NE, NY, TX, UT, 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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

Beneficiary 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
<b>All</b>	<b>0.7</b>	<b>\$44</b>	<b>\$66</b>	<b>0.2</b>	<b>\$33</b>	<b>\$134</b>	<b>0.0</b>	<b>\$3</b>	<b>\$72</b>	<b>0.4</b>	<b>\$8</b>	<b>\$22</b>
<b>Age</b>												
5 and younger	0.3	13	50	0.1	10	127	0.0	1	42	0.2	2	15
6-14	0.4	27	75	0.2	23	123	0.0	1	75	0.2	4	22
15-20	0.6	45	73	0.3	35	134	0.0	3	76	0.3	7	22
21-44	1.0	68	65	0.3	50	145	0.1	4	74	0.6	14	22
45-64	3.4	237	70	1.2	169	142	0.2	16	91	2.0	51	25
65-74	2.2	115	52	0.8	82	100	0.1	6	52	1.3	27	21
75-84	2.5	121	48	0.9	87	92	0.1	5	43	1.5	28	19
85 and older	2.9	128	44	1.1	89	78	0.2	9	44	1.6	30	19
Unknown	0.0	1	28	0.0	1	50	0.0	0	0	0.0	1	20
<b>Basis of Eligibility<sup>d</sup></b>												
Aged	2.4	119	50	0.9	86	95	0.1	6	48	1.4	28	20
Disabled	2.7	225	82	1.0	170	163	0.2	15	91	1.5	40	26
Adults	0.7	32	45	0.2	21	104	0.0	2	55	0.5	9	18
Children	0.3	17	57	0.1	14	113	0.0	1	54	0.2	3	18
Unknown	2.9	271	95	0.9	210	228	0.2	12	68	1.8	49	28
<b>Gender</b>												
Female	0.7	44	60	0.3	32	126	0.0	3	69	0.4	9	21
Male	0.6	44	77	0.2	35	146	0.0	2	77	0.3	7	23
Unknown	0.9	164	178	0.5	160	297	0.0	0	0	0.4	5	12
<b>Race</b>												
White	0.8	54	70	0.3	41	136	0.0	3	75	0.4	9	22
African American	0.5	31	67	0.2	25	138	0.0	2	65	0.3	5	19
Other/unknown	0.6	39	62	0.2	29	133	0.0	2	70	0.4	8	21
<b>Use of Nursing Facilities<sup>e</sup></b>												
Entire year	8.2	570	70	3.0	422	140	0.5	31	61	4.6	117	25
Part year	8.3	516	62	2.8	359	130	0.5	40	80	5.0	116	23
None	0.6	42	66	0.2	32	134	0.0	3	72	0.4	8	22
<b>Maintenance Assistance Status</b>												
Cash	0.8	53	66	0.3	39	138	0.0	3	77	0.5	11	22
Medically needy	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0
Poverty related	0.3	12	45	0.1	9	103	0.0	1	44	0.2	3	16
Other/unknown	0.9	72	77	0.4	58	138	0.1	4	70	0.5	11	23

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

- 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 Colorado, 0.2 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 combined. For information about this classification method, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).
- 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

Therapeutic Category	Number of Rx per Benefit Month Among Users				\$ per Benefit Month Among Users				\$ per Rx				Users <sup>e</sup>				
	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 Benes	Number of Benefit Months
Anti-infective Agents	0.2	0.1	0.0	0.2	\$12	\$8	\$1	\$3	\$49	\$111	\$71	\$20	265,855	\$13,025,613	110,641	28.0 %	1,077,393
Biologicals	0.5	0.5	0.0	0.0	642	600	10	32	1262	1,252	917	1,712	3,590	4,530,743	745	0.2	7,054
Antineoplastic Agents	0.6	0.2	0.0	0.4	192	163	4	25	330	893	164	66	4,800	1,582,075	826	0.2	8,256
Endocrine/Metabolic Drugs	0.5	0.2	0.1	0.3	25	17	2	6	49	97	29	22	185,533	9,099,527	37,012	9.4	358,407
Cardiovascular Agents	1.0	0.3	0.0	0.7	40	28	1	12	39	84	41	17	187,098	7,233,667	17,993	4.6	179,381
Respiratory Agents	0.4	0.2	0.0	0.2	23	19	0	4	55	86	29	19	265,771	14,539,212	65,444	16.6	645,589
Gastrointestinal Agents	0.5	0.2	0.0	0.3	34	24	3	7	74	155	79	25	95,335	7,015,349	21,243	5.4	208,752
Genitourinary Agents	0.3	0.1	0.0	0.1	13	9	2	2	47	76	39	21	31,995	1,516,076	13,095	3.3	121,189
CNS Drugs	1.0	0.5	0.0	0.4	98	81	4	13	100	166	94	29	339,950	34,008,548	35,558	9.0	346,785
Stimulants/Anti-obesity/Anorexia	0.7	0.5	0.0	0.2	61	54	1	6	82	101	74	32	61,362	5,059,938	8,162	2.1	82,710
Miscellaneous Psychological/																	
Neurological Agents	0.6	0.5	0.0	0.0	281	280	0	1	509	526	114	46	4,748	2,417,640	855	0.2	8,602
Analgesics and Anesthetics	0.5	0.1	0.0	0.4	22	13	1	7	44	161	137	18	259,810	11,409,575	55,216	14.0	526,167
Neuromuscular Agents	0.8	0.3	0.1	0.4	75	52	12	11	91	154	126	28	154,475	14,121,069	18,713	4.7	188,877
Nutritional Products	0.4	0.0	0.0	0.3	10	2	1	7	26	48	35	22	52,591	1,372,482	16,121	4.1	134,186
Hematological Agents	0.8	0.2	0.0	0.5	145	135	1	9	188	544	41	18	21,419	4,018,992	2,809	0.7	27,773
Topical Products	0.2	0.1	0.0	0.2	8	5	1	3	36	83	63	18	134,929	4,923,762	58,656	14.9	580,377
Miscellaneous Products	0.6	0.1	0.1	0.4	90	61	15	14	150	454	284	35	8,771	1,313,720	1,475	0.4	14,543
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	7	0	0	0	33	0	0	0	4,589	153,107	2,142	0.5	22,106
<b>TOTAL NO. OF RX AND RX \$</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>	<b>2,082,621</b>	<b>137,341,095</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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.medispans.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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 Colorado, 0.2 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.medispans.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

e. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 2004.

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

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	\$22,264,902	15,147	3.8 %	160,637	0.7	\$195	\$139
ANTICONVULSANT	12,099,350	13,112	3.3	138,209	0.8	114	88
ANTIDEPRESSANTS	9,765,435	29,326	7.4	292,927	0.5	64	33
ANTIASTHMATIC	8,552,354	45,721	11.6	464,925	0.3	62	18
ANALGESICS - Narcotic	6,284,113	58,580	14.8	577,588	0.3	36	11
STIMULANTS/ANTI-OBESITY/ANOREXIANTS	4,975,382	9,255	2.3	96,454	0.6	82	52
PASSIVE IMMUNIZING AGENTS	4,438,147	705	0.2	6,768	0.5	1,269	656
ANTIVIRAL	3,723,176	3,591	0.9	35,958	0.3	310	104
ULCER DRUGS	3,668,267	18,457	4.7	187,251	0.3	58	20
ANTIDIABETIC	3,504,659	7,939	2.0	80,833	0.7	63	43
<b>Total</b>	<b>79,275,785</b>	<b>201,833</b>		<b>2,041,550</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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.

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

Beneficiary Characteristics	All Top 10 Drug Groups		ANTIPSYCHOTICS					ANTICONVULSANT				
	Number of Rx	Rx \$	Number of Users	Users as % of All Benes	Number of Months Among Users	Number of Rx per Month	Mean Rx \$ per Month	Number of Users	Users as % of All Benes	Number of Months Among Users	Number of Rx per Month	Mean Rx \$ per Month
<b>All</b>	<b>880,179</b>	<b>\$79,275,785</b>	<b>15,147</b>	<b>3.8 %</b>	<b>160,637</b>	<b>0.7</b>	<b>\$139</b>	<b>13,112</b>	<b>3.3 %</b>	<b>138,209</b>	<b>0.8</b>	<b>\$88</b>
<b>Female</b>	526,475	42,042,423	7,810	3.4	81,623	0.6	118	7,715	3.4	80,274	0.7	83
<b>Disabled</b>	267,419	24,878,413	4,124	20.5	45,256	0.7	146	4,670	23.3	51,079	0.8	94
5 and younger	2,934	741,693	3	0.3	36	0.5	57	79	7.1	841	0.7	80
6-14	10,212	1,125,665	215	10.4	2,331	0.7	132	322	15.5	3,595	0.9	105
15-20	12,554	1,474,253	327	19.4	3,610	0.7	164	317	18.8	3,496	0.9	126
21-44	96,862	9,241,392	1,768	25.2	19,336	0.7	140	2,017	28.7	21,884	0.8	96
45-64	144,635	12,277,333	1,809	22.4	19,919	0.8	150	1,934	23.9	21,251	0.8	87
65-74	222	18,077	2	1.8	24	1.3	252	1	0.9	12	0.3	77
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
<b>Other Eligibles</b>	259,052	17,163,940	3,686	1.8	36,367	0.5	84	3,045	1.5	29,195	0.6	63
5 and younger	17,858	2,060,529	48	0.1	513	0.4	41	124	0.2	1,206	0.6	67
6-14	42,785	3,725,364	893	1.9	9,661	0.6	121	415	0.9	4,446	0.6	76
15-20	40,208	2,852,518	1,021	3.8	10,236	0.5	92	522	2.0	5,122	0.6	80
21-44	127,061	6,601,662	1,412	2.2	12,899	0.4	49	1,647	2.5	15,110	0.5	55
45-64	14,314	940,906	118	3.0	1,010	0.4	51	167	4.3	1,519	0.6	65
65-74	9,356	567,126	79	4.9	863	0.7	134	100	6.2	1,095	0.6	47
75-84	5,342	291,681	72	8.9	748	0.8	107	51	6.3	520	0.6	27
85 and older	2,128	124,154	43	16.7	437	0.6	67	19	7.4	177	0.7	33
<b>Male</b>	353,698	37,231,493	7,337	4.5	79,014	0.8	160	5,397	3.3	57,935	0.8	94
<b>Disabled</b>	182,632	21,481,544	4,050	23.6	45,056	0.9	183	3,602	21.0	39,890	0.9	107
5 and younger	4,647	1,095,537	22	1.6	232	0.5	84	102	7.2	1,110	0.8	123
6-14	26,027	2,962,536	725	24.3	8,152	0.8	146	560	18.8	6,366	0.9	112
15-20	21,105	2,748,961	680	31.1	7,657	0.8	185	516	23.6	5,876	0.9	115
21-44	62,870	7,987,466	1,604	31.0	17,955	0.9	196	1,459	28.2	16,308	1.0	118
45-64	67,837	6,678,277	1,017	19.2	11,036	0.9	188	964	18.2	10,218	0.8	79
65-74	146	8,767	2	3.3	24	0.9	141	1	1.7	12	0.2	19
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
<b>Other Eligibles</b>	171,063	15,749,931	3,287	2.2	33,958	0.7	130	1,795	1.2	18,045	0.6	66
5 and younger	28,921	3,303,594	100	0.1	1,085	0.5	87	167	0.2	1,747	0.5	44
6-14	78,486	6,988,401	1,632	3.4	17,471	0.7	133	758	1.6	7,922	0.6	66
15-20	36,650	3,752,502	1,282	7.5	12,970	0.7	136	508	3.0	5,025	0.7	81
21-44	14,787	896,723	171	1.5	1,441	0.4	77	221	2.0	1,955	0.5	50
45-64	4,601	337,580	24	1.3	202	0.4	69	68	3.7	625	0.6	64
65-74	4,136	292,672	44	4.7	474	0.8	164	40	4.3	446	0.9	74
75-84	2,681	137,484	26	4.6	248	0.5	46	27	4.8	277	0.9	52
85 and older	801	40,975	8	6.2	67	0.6	59	6	4.7	48	0.7	13
<b>Unknown</b>	13	1,957	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

Beneficiary Characteristics	ANTIDEPRESSANTS					ANTIASTHMATIC					ANALGESICS - Narcotic				
	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
<b>All</b>	<b>29,326</b>	<b>7.4 %</b>	<b>292,927</b>	<b>0.5</b>	<b>\$33</b>	<b>45,721</b>	<b>11.6 %</b>	<b>464,925</b>	<b>0.3</b>	<b>\$18</b>	<b>58,580</b>	<b>14.8 %</b>	<b>577,588</b>	<b>0.3</b>	<b>\$11</b>
<b>Female</b>	21,350	9.3	211,571	0.5	33	24,346	10.6	246,205	0.3	18	44,756	19.5	438,199	0.3	10
<b>Disabled</b>	7,907	39.4	85,396	0.6	39	5,832	29.0	63,756	0.4	28	11,316	56.4	123,377	0.5	26
5 and younger	2	0.2	18	0.4	2	329	29.5	3,506	0.3	22	67	6.0	766	0.1	4
6-14	169	8.2	1,839	0.6	28	469	22.6	5,142	0.3	24	198	9.6	2,236	0.1	2
15-20	351	20.9	3,816	0.6	40	332	19.7	3,585	0.4	31	466	27.7	5,158	0.2	3
21-44	3,244	46.2	34,917	0.6	37	1,789	25.5	19,398	0.4	25	4,930	70.3	53,310	0.5	22
45-64	4,135	51.2	44,738	0.6	40	2,913	36.1	32,125	0.5	31	5,641	69.8	61,784	0.5	33
65-74	6	5.3	68	0.6	31	0	0.0	0	0.0	0	14	12.4	123	0.4	13
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
<b>Other Eligibles</b>	13,443	6.4	126,175	0.4	29	18,514	8.8	182,449	0.3	15	33,439	15.9	314,816	0.2	4
5 and younger	33	0.1	343	0.3	12	5,684	8.8	57,577	0.2	12	1,008	1.6	10,451	0.1	1
6-14	1,160	2.5	12,296	0.5	29	4,723	10.0	48,722	0.3	18	1,920	4.1	20,229	0.1	1
15-20	2,459	9.2	23,652	0.4	28	2,482	9.3	23,923	0.3	14	5,985	22.4	56,667	0.2	2
21-44	8,555	13.1	78,181	0.4	28	4,934	7.6	45,440	0.3	15	22,570	34.7	208,695	0.3	4
45-64	816	21.0	7,298	0.5	37	389	10.0	3,645	0.3	20	1,220	31.3	10,997	0.4	14
65-74	211	13.2	2,252	0.6	25	159	9.9	1,731	0.5	29	398	24.9	4,308	0.3	12
75-84	141	17.3	1,469	0.6	31	96	11.8	974	0.4	25	242	29.8	2,556	0.4	9
85 and older	68	26.4	684	0.7	39	47	18.2	437	0.4	26	96	37.2	913	0.5	18
<b>Male</b>	7,976	4.9	81,356	0.6	36	21,375	13.0	218,720	0.3	19	13,823	8.4	139,377	0.3	13
<b>Disabled</b>	3,642	21.3	39,177	0.6	41	3,645	21.3	39,831	0.4	30	5,031	29.4	53,693	0.5	26
5 and younger	7	0.5	77	0.3	7	547	38.6	5,890	0.3	25	102	7.2	1,123	0.1	1
6-14	407	13.6	4,474	0.6	34	905	30.3	10,120	0.4	33	279	9.3	3,157	0.1	2
15-20	442	20.2	4,952	0.7	45	439	20.1	4,892	0.4	22	400	18.3	4,446	0.2	2
21-44	1,295	25.0	13,992	0.7	45	620	12.0	6,860	0.4	26	1,743	33.7	18,802	0.4	25
45-64	1,487	28.0	15,652	0.6	39	1,125	21.2	11,993	0.5	35	2,491	47.0	26,001	0.6	35
65-74	4	6.7	30	0.4	20	9	15.0	76	0.5	22	16	26.7	164	0.3	7
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
<b>Other Eligibles</b>	4,334	2.9	42,179	0.5	30	17,730	12.0	178,889	0.3	16	8,791	6.0	85,673	0.2	4
5 and younger	62	0.1	633	0.3	12	8,816	13.1	88,618	0.2	14	1,421	2.1	14,663	0.1	1
6-14	1,536	3.2	16,269	0.5	28	6,546	13.6	67,462	0.3	18	1,923	4.0	20,172	0.1	1
15-20	1,646	9.7	15,636	0.5	34	1,652	9.7	16,448	0.3	17	2,229	13.1	22,085	0.1	2
21-44	743	6.6	6,352	0.4	28	384	3.4	3,239	0.3	23	2,407	21.3	20,901	0.3	8
45-64	194	10.6	1,703	0.5	35	129	7.0	1,076	0.3	42	457	25.0	4,008	0.4	14
65-74	68	7.3	698	0.6	28	97	10.4	999	0.4	24	185	19.8	2,059	0.3	15
75-84	62	10.9	646	0.6	33	82	14.4	814	0.3	21	142	25.0	1,514	0.3	8
85 and older	23	17.8	242	0.9	41	24	18.6	233	0.4	25	27	20.9	271	0.6	36
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	1.2	29	0.2	1

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

Beneficiary Characteristics	STIMULANTS/ANTI-OBESITY/ANOREXIANTS					PASSIVE IMMUNIZING AGENTS					ANTIVIRAL				
	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
<b>All</b>	<b>9,255</b>	<b>2.3 %</b>	<b>96,454</b>	<b>0.6</b>	<b>\$52</b>	<b>705</b>	<b>0.2 %</b>	<b>6,768</b>	<b>0.5</b>	<b>\$656</b>	<b>3,591</b>	<b>0.9 %</b>	<b>35,958</b>	<b>0.3</b>	<b>\$104</b>
<b>Female</b>	2,782	1.2	29,355	0.6	50	298	0.1	2,936	0.5	652	2,528	1.1	25,134	0.3	71
<b>Disabled</b>	627	3.1	6,970	0.6	57	90	0.4	965	0.6	765	679	3.4	7,361	0.4	143
5 and younger	7	0.6	76	0.3	16	82	7.3	869	0.5	634	10	0.9	111	0.3	10
6-14	168	8.1	1,828	0.7	58	4	0.2	48	0.6	1,208	36	1.7	404	0.3	82
15-20	97	5.8	1,073	0.7	58	1	0.1	12	1.5	830	23	1.4	265	0.2	45
21-44	185	2.6	2,105	0.5	57	1	0.0	12	0.6	2,238	325	4.6	3,455	0.5	180
45-64	170	2.1	1,888	0.5	58	2	0.0	24	2.6	3,836	285	3.5	3,126	0.3	124
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
<b>Other Eligibles</b>	2,155	1.0	22,385	0.6	48	208	0.1	1,971	0.5	597	1,849	0.9	17,773	0.2	41
5 and younger	70	0.1	775	0.4	20	205	0.3	1,942	0.5	570	167	0.3	1,733	0.1	11
6-14	1,371	2.9	14,487	0.6	48	1	0.0	12	1.0	4,849	199	0.4	2,120	0.2	23
15-20	389	1.5	3,960	0.6	51	1	0.0	12	1.3	1,010	294	1.1	2,843	0.2	15
21-44	289	0.4	2,830	0.4	48	1	0.0	5	0.2	19	1,074	1.7	9,976	0.3	48
45-64	32	0.8	290	0.5	61	0	0.0	0	0.0	0	71	1.8	644	0.4	175
65-74	2	0.1	24	0.2	18	0	0.0	0	0.0	0	16	1.0	162	0.2	102
75-84	1	0.1	12	0.1	1	0	0.0	0	0.0	0	21	2.6	228	0.1	12
85 and older	1	0.4	7	0.1	1	0	0.0	0	0.0	0	7	2.7	67	0.1	8
<b>Male</b>	6,473	3.9	67,099	0.6	52	407	0.2	3,832	0.5	658	1,060	0.6	10,788	0.4	180
<b>Disabled</b>	1,180	6.9	12,980	0.7	57	106	0.6	1,130	0.5	716	567	3.3	5,736	0.6	290
5 and younger	27	1.9	257	0.4	27	99	7.0	1,049	0.5	689	13	0.9	147	0.3	27
6-14	643	21.5	7,068	0.7	57	3	0.1	36	0.6	766	25	0.8	253	0.3	26
15-20	290	13.3	3,268	0.7	62	2	0.1	24	0.4	797	16	0.7	182	0.3	12
21-44	134	2.6	1,473	0.6	53	1	0.0	12	0.2	170	288	5.6	2,843	0.6	267
45-64	86	1.6	914	0.6	58	1	0.0	9	1.8	4,128	225	4.2	2,311	0.7	385
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
<b>Other Eligibles</b>	5,293	3.6	54,119	0.6	51	301	0.2	2,702	0.5	634	493	0.3	5,052	0.2	56
5 and younger	237	0.4	2,462	0.4	27	297	0.4	2,668	0.5	614	180	0.3	1,833	0.1	5
6-14	4,047	8.4	41,676	0.7	51	3	0.0	31	1.1	2,155	150	0.3	1,598	0.2	45
15-20	938	5.5	9,314	0.7	58	1	0.0	3	0.7	3,303	66	0.4	714	0.3	111
21-44	50	0.4	477	0.4	48	0	0.0	0	0.0	0	59	0.5	521	0.4	148
45-64	17	0.9	153	0.5	47	0	0.0	0	0.0	0	19	1.0	180	0.4	227
65-74	1	0.1	12	0.5	88	0	0.0	0	0.0	0	6	0.6	66	0.5	33
75-84	2	0.4	18	0.2	2	0	0.0	0	0.0	0	6	1.1	66	0.2	16
85 and older	1	0.8	7	0.3	24	0	0.0	0	0.0	0	7	5.4	74	0.1	8
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	1.2	36	0.1	51

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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<sup>a, b, c</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

Beneficiary Characteristics	ULCER DRUGS					ANTIDIABETIC					Number of Beneficiaries	Number of Benefit Months
	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Benefit per Rx \$ per Month	Number of Users	Users as % of All Benes	Number of Benefit Months Among Users	Mean Number of Rx per Benefit Month	Mean Benefit per Rx \$ per Month		
<b>All</b>	<b>18,457</b>	<b>4.7 %</b>	<b>187,251</b>	<b>0.3</b>	<b>\$20</b>	<b>7,939</b>	<b>2.0 %</b>	<b>80,833</b>	<b>0.7</b>	<b>\$43</b>	<b>394,622</b>	<b>3,109,467</b>
<b>Female</b>	12,409	5.4	126,102	0.3	19	5,551	2.4	56,541	0.7	42	230,079	1,784,805
<b>Disabled</b>	5,207	25.9	57,261	0.4	25	3,091	15.4	33,394	0.7	46	20,080	185,910
5 and younger	165	14.8	1,761	0.4	23	1	0.1	6	0.3	23	1,116	10,139
6-14	169	8.2	1,867	0.5	26	22	1.1	241	0.7	72	2,072	20,371
15-20	209	12.4	2,302	0.3	24	46	2.7	482	0.6	45	1,683	15,781
21-44	1,673	23.8	18,412	0.4	23	674	9.6	7,233	0.7	41	7,016	66,122
45-64	2,982	36.9	32,820	0.5	26	2,344	29.0	25,396	0.7	47	8,080	72,919
65-74	9	8.0	99	0.6	27	4	3.5	36	0.9	133	113	578
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
<b>Other Eligibles</b>	7,201	3.4	68,829	0.3	13	2,460	1.2	23,147	0.6	36	209,999	1,598,895
5 and younger	1,086	1.7	9,797	0.3	12	24	0.0	256	0.7	66	64,461	511,879
6-14	657	1.4	6,931	0.2	12	125	0.3	1,179	1.0	72	47,133	396,195
15-20	1,044	3.9	10,070	0.2	10	193	0.7	1,807	0.6	40	26,761	199,811
21-44	3,400	5.2	31,807	0.2	13	1,196	1.8	10,566	0.5	30	65,080	444,320
45-64	380	9.8	3,510	0.3	19	305	7.8	2,814	0.6	35	3,892	24,999
65-74	365	22.8	3,915	0.4	20	400	25.0	4,273	0.7	35	1,601	12,745
75-84	201	24.7	2,119	0.4	18	178	21.9	1,831	0.7	35	813	6,842
85 and older	68	26.4	680	0.6	24	39	15.1	421	0.7	42	258	2,104
<b>Male</b>	6,048	3.7	61,149	0.4	22	2,387	1.5	24,280	0.7	47	164,284	1,323,632
<b>Disabled</b>	2,813	16.4	30,424	0.5	29	1,533	9.0	16,178	0.7	45	17,127	158,376
5 and younger	254	17.9	2,590	0.4	21	5	0.4	59	1.1	102	1,417	13,036
6-14	243	8.1	2,797	0.5	40	31	1.0	348	0.7	56	2,985	30,042
15-20	211	9.6	2,388	0.4	34	30	1.4	356	0.9	53	2,188	21,370
21-44	820	15.9	9,062	0.5	30	317	6.1	3,369	0.8	50	5,173	48,751
45-64	1,280	24.1	13,536	0.5	26	1,145	21.6	12,018	0.7	43	5,304	44,833
65-74	5	8.3	51	0.2	8	5	8.3	28	0.6	47	60	344
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
<b>Other Eligibles</b>	3,235	2.2	30,725	0.3	15	854	0.6	8,102	0.7	50	147,157	1,165,256
5 and younger	1,394	2.1	12,745	0.2	13	39	0.1	390	0.6	47	67,177	533,124
6-14	564	1.2	5,903	0.2	12	114	0.2	1,141	0.9	74	48,250	405,388
15-20	389	2.3	3,841	0.2	12	80	0.5	791	1.0	87	16,987	134,191
21-44	448	4.0	3,893	0.3	20	188	1.7	1,662	0.7	49	11,284	68,171
45-64	128	7.0	1,124	0.4	29	147	8.0	1,231	0.5	34	1,830	11,698
65-74	177	19.0	1,881	0.4	19	168	18.0	1,709	0.7	42	932	7,054
75-84	106	18.7	1,071	0.5	22	106	18.7	1,059	0.6	35	568	4,611
85 and older	29	22.5	267	0.5	28	12	9.3	119	1.0	24	129	1,019
<b>Unknown</b>	1	0.4	12	0.3	5	1	0.4	12	0.1	2	259	1,030

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. 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 2004. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

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
<b>All</b>	<b>\$570</b>	<b>8.2</b>	<b>707</b>	<b>7,070</b>
<b>Age</b>				
0-64	678	9.1	488	4,901
65-74	438	6.6	61	639
75-84	324	6.7	86	856
85 and older	218	5.2	72	674
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	566	8.3	367	3,762
Male	573	8.0	340	3,308
Unknown	0	0.0	0	0
<b>Race</b>				
White	575	8.2	414	4,256
African American	436	8.6	22	210
Other/unknown	571	8.1	271	2,604
<b>Basis of Eligibility<sup>c</sup></b>				
Aged	324	6.2	217	2,155
Disabled	677	9.1	490	4,915
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 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

a. Table ND.8 includes the beneficiaries represented by Cell L of Table 1, those who resided in nursing facilities throughout their 2004 Medicaid enrollment. A total of 567 beneficiaries who were in nursing facilities for part of their enrollment and their 5,150 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<sup>a, b, c, d, e</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

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	0.3	0.0	0.3	\$60	\$48	\$3	\$9	\$101	\$174	\$73	\$33	2,483	\$251,189	391	55.3 %	4,168
Biologicals	0.1	0.0	0.0	0.1	2	0	0	2	29	0	0	29	3	86	3	0.4	36
Antineoplastic Agents	0.5	0.0	0.0	0.5	39	4	0	35	78	166	0	74	111	8,708	22	3.1	222
Endocrine/Metabolic Drugs	1.4	0.5	0.3	0.7	59	38	7	14	41	77	24	22	4,860	200,269	314	44.4	3,380
Cardiovascular Agents	1.8	0.5	0.0	1.4	58	34	1	23	32	73	47	17	8,063	254,540	412	58.3	4,379
Respiratory Agents	0.9	0.6	0.0	0.3	53	46	0	6	56	76	43	19	2,332	130,636	236	33.4	2,480
Gastrointestinal Agents	1.2	0.2	0.0	0.9	43	20	2	21	37	108	39	23	4,353	161,999	356	50.4	3,741
Genitourinary Agents	0.8	0.5	0.0	0.3	44	37	1	5	55	76	37	19	1,331	73,126	151	21.4	1,659
CNS Drugs	2.5	1.3	0.1	1.0	293	239	10	44	117	177	76	43	14,168	1,660,898	526	74.4	5,663
Stimulants/Anti-obesity/Anorexia	0.8	0.5	0.0	0.3	76	65	2	9	97	140	122	30	221	21,329	28	4.0	280
Miscellaneous Psychological/Neurological Agents	1.0	1.0	0.0	0.0	305	305	0	0	308	308	0	0	735	226,178	68	9.6	742
Analgesics and Anesthetics	1.5	0.5	0.0	1.0	81	62	3	16	53	124	75	16	5,969	317,706	372	52.6	3,924
Neuromuscular Agents	1.7	0.5	0.2	1.0	130	74	22	34	76	148	96	35	7,009	531,972	377	53.3	4,077
Nutritional Products	0.8	0.0	0.0	0.7	14	1	0	13	18	48	15	18	1,656	30,005	205	29.0	2,155
Hematological Agents	1.9	0.3	0.0	1.6	68	54	0	14	35	165	13	9	2,596	92,135	136	19.2	1,355
Topical Products	0.5	0.1	0.1	0.3	18	9	2	6	37	65	46	21	1,584	58,210	303	42.9	3,296
Miscellaneous Products	0.6	0.0	0.0	0.5	11	7	1	3	19	606	226	5	243	4,713	44	6.2	431
Unknown Therapeutic Category	0.2	0.0	0.0	0.0	8	0	0	0	32	0	0	0	97	3,069	35	5.0	402
<b>TOTAL NO. OF RX AND RX \$</b>	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	57,814	4,026,768	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 567 beneficiaries who were in nursing facilities for part of their enrollment and their 5,150 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 2004. 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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

In Colorado, 0.2 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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

Top 10 Drug Groups in Nursing Facilities	Total Medicaid Rx \$	Users			Among Users		
		Number of Users	As a Percentage of All-Year Nursing Facility Residents	Number of Benefit Months	Number of Rx per Benefit Month	\$ per Rx	Rx \$ per Benefit Month
ANTIPSYCHOTICS	\$1,332,321	531	75.1 %	5,978	1.3	\$178	\$223
ANTICONVULSANT	403,807	399	56.4	4,341	1.1	84	93
ANTIDEPRESSANTS	285,268	483	68.3	5,181	0.9	61	55
MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL	226,178	79	11.2	855	0.9	308	265
ANALGESICS - Narcotic	197,266	418	59.1	4,300	1.0	44	46
ANTIDIABETIC	128,347	265	37.5	2,876	0.9	48	45
ULCER DRUGS	104,371	349	49.4	3,700	0.7	38	28
ANTIVIRAL	105,041	56	7.9	605	0.4	491	174
ANTIASTHMATIC	100,354	249	35.2	2,660	0.6	59	38
ANTIHYPERLIPIDEMIC	103,376	145	20.5	1,631	0.8	79	63
<b>Total</b>	<b>2,986,329</b>	<b>2,974</b>		<b>32,127</b>	<b>n.a.</b>	<b>n.a.</b>	<b>n.a.</b>

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 567 beneficiaries who were in nursing facilities for part of their enrollment and their 5,150 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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.

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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

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 \$
<b>All</b>	<b>30,780</b>	<b>\$2,986,329</b>	<b>531</b>	<b>75.1 %</b>	<b>5,978</b>	<b>1.3</b>	<b>\$223</b>	<b>399</b>	<b>56.4 %</b>	<b>4,341</b>	<b>1.1</b>	<b>\$93</b>
<b>Female</b>	16,582	1,611,842	281	76.6	3,215	1.2	211	215	58.6	2,352	1.1	95
<b>Disabled</b>	12,549	1,294,890	200	86.6	2,320	1.3	236	179	77.5	1,969	1.1	101
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	0.0	0
75-84	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
85 and older	4,033	316,952	81	59.6	895	0.9	146	36	26.5	383	1.0	60
<b>Other Eligibles</b>	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younger	1,368	134,176	26	81.3	301	1.0	226	13	40.6	156	1.1	88
65-74	1,705	123,137	32	57.1	345	0.9	139	17	30.4	165	1.0	46
75-84	960	59,639	23	47.9	249	0.6	60	6	12.5	62	1.0	27
85 and older												
<b>Male</b>	14,198	1,374,487	250	73.5	2,763	1.4	237	184	54.1	1,989	1.1	91
<b>Disabled</b>	12,151	1,220,818	219	84.6	2,443	1.4	244	163	62.9	1,790	1.1	91
64 or younger	12,121	1,216,854	217	84.4	2,419	1.4	246	162	63.0	1,778	1.1	92
65-74	30	3,964	2	100.0	24	0.9	141	1	50.0	12	0.2	19
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
<b>Other Eligibles</b>	2,047	153,669	31	38.3	320	1.0	179	21	25.9	199	1.3	90
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	751	76,187	18	66.7	195	1.1	242	8	29.6	83	1.7	153
75-84	775	46,891	7	23.3	76	0.8	85	9	30.0	87	1.0	54
85 and older	521	30,591	6	25.0	49	0.7	77	4	16.7	29	0.9	17
<b>Unknown</b>	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 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 567 beneficiaries who were in nursing facilities for part of their enrollment and their 5,150 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medspan.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

Beneficiary Characteristics	ANTIDEPRESSANTS					MISC PSYCHOTHERAPEUTIC AND NEUROLOGICAL					ANALGESICS - Narcotic				
	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>483</b>	<b>68.3 %</b>	<b>5,181</b>	<b>0.9</b>	<b>\$55</b>	<b>79</b>	<b>11.2 %</b>	<b>855</b>	<b>0.9</b>	<b>\$265</b>	<b>418</b>	<b>59.1 %</b>	<b>4,300</b>	<b>1.0</b>	<b>\$46</b>
<b>Female</b>	281	76.6	3,045	0.9	55	58	15.8	649	0.9	304	244	66.5	2,528	1.0	46
<b>Disabled</b>	191	82.7	2,087	0.9	56	33	14.3	381	0.9	438	164	71.0	1,733	1.1	48
64 or younger	191	82.7	2,087	0.9	56	33	14.3	381	0.9	438	164	71.0	1,733	1.1	48
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
<b>Other Eligibles</b>	90	66.2	958	0.8	51	25	18.4	268	0.9	112	80	58.8	795	0.8	42
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	22	68.8	242	0.8	56	1	3.1	12	1.0	139	17	53.1	181	1.5	117
75-84	36	64.3	387	0.8	47	11	19.6	115	1.0	130	33	58.9	361	0.7	19
85 and older	32	66.7	329	0.9	53	13	27.1	141	0.8	95	30	62.5	253	0.6	22
<b>Male</b>	202	59.4	2,136	0.9	56	21	6.2	206	0.8	141	174	51.2	1,772	1.1	46
<b>Disabled</b>	165	63.7	1,741	0.9	57	15	5.8	155	0.7	151	136	52.5	1,355	1.2	49
64 or younger	165	64.2	1,741	0.9	57	15	5.8	155	0.7	151	135	52.5	1,343	1.2	49
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	50.0	12	0.2	1
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
<b>Other Eligibles</b>	37	45.7	395	0.8	51	6	7.4	51	0.9	112	38	46.9	417	0.7	38
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	8	29.6	83	0.9	44	0	0.0	0	0.0	0	8	29.6	91	0.5	19
75-84	14	46.7	155	0.8	54	3	10.0	24	0.8	124	18	60.0	207	0.6	26
85 and older	15	62.5	157	0.9	53	3	12.5	27	1.0	101	12	50.0	119	1.0	72
<b>Unknown</b>	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 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 567 beneficiaries who were in nursing facilities for part of their enrollment and their 5,150 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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

TABLE ND.10C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY  
 AMONG ALL-YEAR NURSING FACILITY RESIDENTS, BY SEX, BASIS OF ELIGIBILITY, AND AGE<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

Beneficiary Characteristics	ANTIDIABETIC					ULCER DRUGS					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 \$	Number of Users	Users as % of All-Year Nursing Facility Residents	Number of Benefit Months Among Users	Mean Number of Rx	Mean Rx \$
<b>All</b>	<b>265</b>	<b>37.5 %</b>	<b>2,876</b>	<b>0.9</b>	<b>\$45</b>	<b>349</b>	<b>49.4 %</b>	<b>3,700</b>	<b>0.7</b>	<b>\$28</b>	<b>56</b>	<b>7.9 %</b>	<b>605</b>	<b>0.4</b>	<b>\$174</b>
<b>Female</b>	145	39.5	1,609	0.9	43	179	48.8	1,939	0.7	27	31	8.4	341	0.2	50
<b>Disabled</b>	102	44.2	1,108	0.9	45	122	52.8	1,343	0.7	29	17	7.4	182	0.3	81
64 or younger	102	44.2	1,108	0.9	45	122	52.8	1,343	0.7	29	17	7.4	182	0.3	81
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	43	31.6	501	0.9	38	57	41.9	596	0.7	21	14	10.3	159	0.2	14
<b>Other Eligibles</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
64 or younger	18	56.3	207	0.9	36	21	65.6	233	0.7	21	0	0.0	0	0.0	0
65-74	19	33.9	228	0.9	45	20	35.7	222	0.7	22	12	21.4	144	0.2	14
75-84	6	12.5	66	0.6	23	16	33.3	141	0.7	21	2	4.2	15	0.2	14
85 and older															
<b>Male</b>	120	35.3	1,267	1.0	47	170	50.0	1,761	0.7	30	25	7.4	264	0.5	334
<b>Disabled</b>	89	34.4	930	1.0	55	137	52.9	1,430	0.8	30	18	6.9	193	0.7	454
64 or younger	87	33.9	926	1.0	55	137	53.3	1,430	0.8	30	18	7.0	193	0.7	454
65-74	2	100.0	4	1.0	86	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
<b>Other Eligibles</b>	31	38.3	337	0.8	26	33	40.7	331	0.7	28	7	8.6	71	0.1	8
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	8	29.6	96	0.8	23	9	33.3	105	0.8	28	2	7.4	20	0.2	3
75-84	16	53.3	169	0.7	25	15	50.0	153	0.7	31	0	0.0	0	0.0	0
85 and older	7	29.2	72	1.1	33	9	37.5	73	0.6	23	5	20.8	51	0.1	10
<b>Unknown</b>	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 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 567 beneficiaries who were in nursing facilities for part of their enrollment and their 5,150 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispain.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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<sup>a, b, c, d</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

Beneficiary Characteristics	ANTIASTHMATIC					ANTHYPERLIPIDEMIC					Benefit Months	
	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	Among All-Year Nursing Facility Residents
<b>All</b>	<b>249</b>	<b>35.2 %</b>	<b>2,660</b>	<b>0.6</b>	<b>\$38</b>	<b>145</b>	<b>20.5 %</b>	<b>1,631</b>	<b>0.8</b>	<b>\$63</b>	<b>707</b>	<b>7,070</b>
<b>Female</b>	133	36.2	1,420	0.5	31	69	18.8	762	0.9	66	367	3,762
<b>Disabled</b>	99	42.9	1,092	0.6	34	55	23.8	603	0.9	68	231	2,392
64 or younger	99	42.9	1,092	0.6	34	55	23.8	603	0.9	68	231	2,392
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
<b>Other Eligibles</b>	34	25.0	328	0.5	21	14	10.3	159	0.8	60	136	1,370
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	9	28.1	97	0.5	18	3	9.4	30	0.8	67	32	350
75-84	17	30.4	175	0.5	25	8	14.3	93	0.8	66	56	570
85 and older	8	16.7	56	0.2	14	3	6.3	36	0.6	41	48	450
<b>Male</b>	116	34.1	1,240	0.8	45	76	22.4	869	0.7	61	340	3,308
<b>Disabled</b>	77	29.7	841	0.9	57	61	23.6	707	0.7	61	259	2,523
64 or younger	77	30.0	841	0.9	57	61	23.7	707	0.7	61	257	2,509
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	2	14
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
<b>Other Eligibles</b>	39	48.1	399	0.4	20	15	18.5	162	0.8	63	81	785
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
65-74	9	33.3	99	0.5	14	5	18.5	60	0.8	74	27	275
75-84	18	60.0	188	0.4	24	10	33.3	102	0.8	56	30	286
85 and older	12	50.0	112	0.4	20	0	0.0	0	0.0	0	24	224
<b>Unknown</b>	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 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A total of 567 beneficiaries who were in nursing facilities for part of their enrollment and their 5,150 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 2004. 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 2004 Medicaid reimbursement for all-year nursing facility residents in this state. For information about these drug groups, see Wolters Kluwer Health, <http://www.medispn.com/marketing/ContentPage.aspx?contentId=09e0f1ed-80a9-4a87-8bc9-ad778d7b6615> (October 26, 2007).

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<sup>a,b</sup>  
 COLORADO, 2004

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
<b>All</b>	<b>35,755</b>	<b>9.1 %</b>	<b>0.3</b>	<b>137,464</b>	<b>\$9</b>	<b>\$3,567,335</b>	<b>\$26</b>	<b>2.6 %</b>	<b>394,622</b>
<b>Age</b>									
5 and younger	13,423	10.0	0.2	27,973	5	650,743	23	4.7	134,172
6-14	6,883	6.9	0.2	18,926	7	664,701	35	2.9	100,440
15-20	3,412	7.2	0.2	8,621	6	280,821	33	1.7	47,619
21-44	6,733	7.6	0.4	38,801	11	987,185	25	2.3	88,554
45-64	4,547	23.8	2.0	38,491	48	916,982	24	2.5	19,106
65-74	411	15.2	0.9	2,405	14	38,766	16	1.6	2,706
75-84	262	19.0	1.2	1,694	15	20,452	12	1.5	1,381
85 and older	83	21.4	1.4	552	20	7,675	14	1.9	387
Unknown	1	0.4	0.0	1	0	10	10	0.9	257
<b>Basis of Eligibility<sup>c</sup></b>									
Aged	741	17.3	1.1	4,574	15	65,130	14	1.6	4,279
Disabled	8,638	23.2	2.0	73,311	61	2,251,383	31	2.9	37,210
Adults	4,743	5.4	0.2	18,817	4	335,864	18	1.8	87,188
Children	21,570	8.1	0.2	40,522	3	911,066	22	2.4	265,788
Unknown	63	40.1	1.5	240	25	3,892	16	1.2	157
<b>Gender</b>									
Female	21,002	9.1	0.4	86,664	9	2,112,785	24	2.7	230,205
Male	14,753	9.0	0.3	50,800	9	1,454,550	29	2.5	164,415
Unknown	0	0.0	0.0	0	0	0	0	0.0	2
<b>Race</b>									
White	15,059	9.9	0.4	61,482	10	1,558,551	25	2.4	151,454
African American	1,569	5.4	0.2	5,912	5	148,850	25	2.0	28,885
Other/unknown	19,127	8.9	0.3	70,070	9	1,859,934	27	2.9	214,283
<b>Use of Nursing Facilities<sup>d</sup></b>									
Entire year	368	52.1	5.7	4,062	107	75,540	19	1.9	707
Part year	343	60.5	5.4	3,042	110	62,352	20	2.3	567
None	35,044	8.9	0.3	130,360	9	3,429,443	26	2.6	393,348
<b>Maintenance Assistance Status</b>									
Cash	23,131	10.3	0.5	102,157	12	2,707,743	27	2.8	224,695
Medically needy	0	0.0	0.0	0	0	0	0	0.0	0
Poverty related	8,059	6.5	0.1	15,031	3	319,622	21	3.1	123,126
Other/unknown	4,565	9.8	0.4	20,276	12	539,970	27	1.9	46,801

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

- 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 2004.
- b. The statute establishing the Medicare Part D prescription program that started in 2006 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 2006 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<sup>a,b</sup>  
 COLORADO, 2004

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
<b>All</b>	<b>0.0</b>	<b>\$1</b>	<b>\$26</b>	<b>\$0</b>	<b>\$0</b>	<b>3,109,467</b>
<b>Age</b>						
5 and younger	0.0	1	23	0	0	1,068,179
6-14	0.0	1	35	0	0	851,996
15-20	0.0	1	33	0	0	371,153
21-44	0.1	2	25	0	1	627,376
45-64	0.2	6	24	0	3	154,449
65-74	0.1	2	16	0	1	20,721
75-84	0.1	2	12	0	1	11,453
85 and older	0.2	2	14	0	1	3,123
Unknown	0.0	0	10	0	0	1,017
<b>Basis of Eligibility<sup>c</sup></b>						
Aged	0.1	2	14	0	1	34,250
Disabled	0.2	7	31	0	3	344,306
Adults	0.0	1	18	0	0	574,471
Children	0.0	0	22	0	0	2,155,284
Unknown	0.2	3	16	0	3	1,156
<b>Gender</b>						
Female	0.0	1	24	0	0	1,785,300
Male	0.0	1	29	0	0	1,324,154
Unknown	0.0	0	0	0	0	13
<b>Race</b>						
White	0.1	1	25	0	1	1,225,383
African American	0.0	1	25	0	0	237,408
Other/unknown	0.0	1	27	0	0	1,646,676
<b>Use of Nursing Facilities<sup>d</sup></b>						
Entire year	0.6	11	19	0	6	7,070
Part year	0.6	12	20	0	5	5,150
None	0.0	1	26	0	0	3,097,247
<b>Maintenance Assistance Status</b>						
Cash	0.1	1	27	0	1	1,842,691
Medically needy	0.0	0	0	0	0	0
Poverty related	0.0	0	21	0	0	865,009
Other/unknown	0.1	1	27	0	1	401,767

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004.

b. The statute establishing the Medicare Part D prescription program that started in 2006 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 2006 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.13  
 USE AND REIMBURSEMENT FOR DRUGS EXCLUDED BY STATUTE FROM MEDICARE PART D  
 FOR SELECTED DRUG CATEGORIES AMONG NONDUALS<sup>a,b,c</sup>  
 COLORADO, 2004

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
<b>All</b>	<b>38,646</b>	<b>\$92</b>	<b>\$3,567,335</b>	<b>100.0 %</b>	<b>137,464</b>	<b>\$26</b>	<b>100.0 %</b>
Anorexia or weight loss/gain	1	358	358	0.0	4	90	0.0
Fertility drugs	4	47	187	0.0	6	31	0.0
Drugs for cosmetic purposes	133	15	1,986	0.1	215	9	0.2
Cough and cold medications	21,626	37	795,935	22.3	37,192	21	27.1
Vitamins and minerals	3,030	165	500,933	14.0	22,884	22	16.6
Non-prescription drugs	1,489	49	72,890	2.0	5,659	13	4.1
Barbiturates	494	64	31,700	0.9	4,019	8	2.9
Benzodiazepines	10,118	124	1,253,609	35.1	59,089	21	43.0
Other Part D Excl Rx Drugs	1,751	520	909,737	25.5	8,396	108	6.1

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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 2004. A user is a beneficiary who had at least one prescription filled for a Part D excluded drug in 2004. 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 2006 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 2006 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.

APPENDIX TABLE A.1  
 CHARACTERISTICS OF MEDICAID BENEFICIARIES WITH AT LEAST ONE MONTH OF PHARMACY BENEFIT COVERAGE, BY BASIS OF ELIGIBILITY<sup>a, b</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

Beneficiary Characteristics	Number of Beneficiaries						Number of Benefit Months					
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>451,491</b>	<b>4,943</b>	<b>47,374</b>	<b>94,744</b>	<b>304,273</b>	<b>157</b>	<b>3,860,553</b>	<b>42,295</b>	<b>479,450</b>	<b>665,634</b>	<b>2,672,018</b>	<b>1,156</b>
<b>Age</b>												
5 and younger	150,422	0	2,885	0	147,537	0	1,297,448	0	28,564	0	1,268,884	0
6-14	119,548	0	6,337	0	113,211	0	1,099,383	0	68,124	0	1,031,259	0
15-20	54,205	0	4,735	6,540	42,930	0	452,170	0	48,663	35,294	368,213	0
21-44	98,029	0	15,649	81,979	388	13	751,910	0	161,270	587,582	2,965	93
45-64	23,871	0	17,580	6,149	0	142	215,073	0	171,773	42,242	0	1,058
65-74	3,113	2,919	185	8	0	1	25,470	24,389	1,040	38	0	3
75-84	1,616	1,611	1	4	0	0	14,423	14,390	8	25	0	0
85 and older	422	410	0	9	2	1	3,576	3,497	0	71	6	2
Unknown	265	3	2	55	205	0	1,100	19	8	382	691	0
<b>Gender</b>												
Female	261,742	3,092	25,857	78,964	153,672	157	2,203,677	26,835	263,316	565,940	1,346,430	1,156
Male	189,747	1,851	21,516	15,780	150,600	0	1,656,863	15,460	216,122	99,694	1,325,587	0
Unknown	2	0	1	0	1	0	13	0	12	0	1	0
<b>Race</b>												
White	171,255	1,577	20,315	31,837	117,476	50	1,482,352	13,912	211,232	215,731	1,041,114	363
African American	34,591	125	2,692	5,304	26,469	1	311,106	1,015	28,432	38,319	243,333	7
Other/unknown	245,645	3,241	24,367	57,603	160,328	106	2,067,095	27,368	239,786	411,584	1,387,571	786
<b>Use of Nursing Facilities<sup>c</sup></b>												
Entire year	808	246	562	0	0	0	8,281	2,480	5,801	0	0	0
Part year	650	116	533	1	0	0	6,303	1,042	5,250	11	0	0
None	450,033	4,581	46,279	94,743	304,273	157	3,845,969	38,773	468,399	665,623	2,672,018	1,156
<b>Maintenance Assistance Status</b>												
Cash	261,840	4,636	43,357	63,128	150,719	0	2,353,610	39,869	438,277	472,821	1,402,643	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	138,696	3	5	18,252	120,279	157	1,050,752	34	47	94,011	955,504	1,156
Other/unknown	50,955	304	4,012	13,364	33,275	0	456,191	2,392	41,126	98,802	313,871	0
<b>Managed Care (MC) Status</b>												
Fee-for-service (FFS) all year	360,596	4,095	34,325	81,929	240,090	157	2,938,639	33,274	330,226	552,983	2,021,000	1,156
FFS part year, with Rx claims	16,984	111	2,230	3,214	11,429	0	180,390	1,226	25,337	30,934	122,893	0
FFS part year, no Rx claims	17,042	73	655	2,045	14,269	0	167,896	763	7,023	17,659	142,451	0
MC all year, with Rx claims	4,021	48	889	724	2,360	0	41,761	514	10,258	6,700	24,289	0
MC all year, no Rx claims	52,848	616	9,275	6,832	36,125	0	531,867	6,518	106,606	57,358	361,385	0

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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<sup>a</sup>  
 NONDUAL BENEFICIARIES, COLORADO, 2004

	Beneficiaries and		Included in Cell K of Table 1		Excluded from Cell K of Table 1	
	Benefit Months in Cell J of Table 1		Number of Benefit		Number of Benefit	
	Number of	Number of Benefit	Beneficiaries	Months	Beneficiaries	Months
	Beneficiaries	Months				
<b>All</b>	<b>451,491</b>	<b>3,860,553</b>	<b>394,622</b>	<b>3,109,467</b>	<b>0</b>	<b>751,086</b>
Fee-for-service (FFS) all year	360,596	2,938,639	360,596	2,938,639	0	0
FFS part year, with Rx claims	16,984	180,390	16,984	97,861	0	82,529
FFS part year, with no Rx claims	17,042	167,896	17,042	72,967	0	94,929
Managed care (MC) all year, with Rx claims	4,021	41,761	0	0	0	41,761
MC all year, with no Rx claims	52,848	531,867	0	0	0	531,867

Source: Data for this table are from the MAX 2004 file for Colorado, released by CMS in 02/2008. This table was produced on 03/25/2008.

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.