MDCR UTLZN D 2

Medicare Part D Utilization: Average Annual Gross Drug Costs Per Part D Enrollee, by Type of Plan, Low Income Subsidy (LIS) Eligibility, and Brand/Generic Drug Classification, Calendar Years 2012-2017

	Calendar Years 2012-2017																
	2012	2012	2012	2013	2013	2013	2014	2014	2014	2015	2015	2015	2016	2016	2016	2017	2017
	Total Part D	Stand-Alone Prescription Drug Plan	Medicare Advantage Prescription Drug Plan	Total Part D	Stand-Alone Prescription Drug Plan	Medicare Advantage Prescription Drug Plan	Total Part D	Stand-Alone Prescription Drug Plan	Medicare Advantage Prescription Drug Plan	Total Part D	Stand-Alone Prescription Drug Plan	Medicare Advantage Prescription Drug Plan	Total Part D	Stand-Alone Prescription Drug Plan	Medicare Advantage Prescription Drug Plan	Total Part D	Stand-Alone Prescription Drug Plan
Medicare Part D Enrollees																	
Overall Enrollees	31,807,992	19,903,861	11,904,130	35,679,758	22,661,451	13,018,307	37,720,840	23,437,148	14,283,691	39,505,335	24,092,868	15,412,467	41,203,627	24,831,079	16,372,548	42,728,443	25,243,684
Beneficiaries with No LIS	20,660,191	11,376,820	9,283,371	24,239,579	14,192,514	10,047,065	25,953,921	15,055,269	10,898,652	27,377,918	15,855,131	11,522,788	28,787,701	16,626,385	12,161,316	30,474,213	17,449,704
LIS Applicants	1,433,956	963,143	470,812	1,439,317	930,702	508,615	1,453,382	906,182	547,199	1,484,251	883,842	600,410	1,500,438	857,506	642,932	1,398,100	766,119
Beneficiaries Deemed Eligible for LIS ¹	9,713,845	7,563,898	2,149,948	10,000,861	7,538,234	2,462,627	10,313,537	7,475,698	2,837,840	10,643,165	7,353,896	3,289,269	10,915,488	7,347,188	3,568,300	10,856,130	7,027,861
Total Drug Costs																	
Overall Gross Drug Cost	\$89,831,646,902	\$64,044,471,995	\$25,787,174,907	\$103,700,731,902	\$74,402,836,412	\$29,297,895,490	\$121,460,557,892	\$84,442,391,072	\$37,018,166,820	\$137,378,037,828	\$93,349,323,538	\$44,028,714,291	\$146,150,496,279	\$97,790,747,523	\$48,359,748,756	\$154,814,263,061	\$100,860,454,647
Brand Name	68,125,848,092	49,355,292,448	18,770,555,645	77,731,560,413	56,586,454,972	21,145,105,442	92,940,043,343	65,565,634,954	27,374,408,389	107,947,589,307	74,308,573,906	33,639,015,402	115,063,392,035	78,036,979,663	37,026,412,372	122,836,396,706	80,785,724,812
Generic Drug	21,392,037,631	14,485,757,459	6,906,280,172	25,605,703,548	17,575,167,233	8,030,536,315	28,100,889,385	18,609,130,543	9,491,758,842	28,943,024,116	18,738,510,310	10,204,513,806	30,580,918,491	19,450,477,844	11,130,440,647	31,429,819,609	19,760,489,498
Other	313,761,179	203,422,088	110,339,091	363,467,941	241,214,208	122,253,733	419,625,164	267,625,575	151,999,589	487,424,405	302,239,322	185,185,083	506,185,753	303,290,016	202,895,737	548,046,746	314,240,337
Average Drug Costs Per Part D Enrollee																	
Average Gross Drug Cost	\$2,824	\$3,218	\$2,166	\$2,906	\$3,283	\$2,251	\$3,220	\$3,603	\$2,592	\$3,478	\$3,875	\$2,857	\$3,547	\$3,938	\$2,954	\$3,623	\$3,996
Beneficiaries with No LIS	1,983	2,245	1,662	2,127	2,433	1,696	2,332	2,648	1,894	2,507	2,837	2,054	2,559	2,902	2,090	2.620	2,962
LIS Applicants	3,464	3,513		3,690	3,774	3,537	4,256	4,360	4,085	4,748	4,882	4,552	4,937	5,098	4,722	5,604	5,803
Beneficiaries Deemed Eligible for LIS ¹	4,519	4,644	4,081	4,682	4,824	4,246	5,309	5,434	4,982	5,796	5,990	5,361	5,963	6,149	5,579	6,184	6,365
Average Plan Drug Cost	1,722	1,914	1,400	1,782	1,988	1,423	1,972	2,172	1,644	2,190	2,406	1,853	2,264	2,484	1,931	2,362	2,576
Covered	1,575	1,819	1,167	1,643	1,868	1,251	1,891	2,124	1,509	2,121	2,365	1,738	2,192	2,441	1,814	2,283	2,530
Non-Covered	147	95	233	139	120	172	81	48	135	70	41	115	72	43	117	79	46
Average Brand Name Drug Costs Per Part D Enrollee ²																	
Average Brand Name Gross Drug Cost	\$2,142	\$2,480	\$1,577	\$2,179	\$2,497	\$1,624	\$2,464	\$2,798	\$1,917	\$2,733	\$3,084	\$2,183	\$2,793	\$3,143	\$2,262	\$2,875	\$3,200
Beneficiaries with No LIS	1,448	1,680	1,163	1,553	1,822	1,172	1,735	2,019	1,342	1,927	2,226	1,516	1,973	2,278	1,557	2,031	2,326
LIS Applicants	2,746	2,814	2,605	2,898	2,993	2,725	3,390	3,511	3,190	3,887	4,045	3,653	4,054	4,261	3,777	4,654	4,878
Beneficiaries Deemed Eligible for LIS ¹	3,529	3,639	3,139	3,592	3,707	3,242	4,168	4,279	3,877	4,643	4,820	4,248	4,780	4,970	4,388	5,015	5,187
Average Brand Name Plan Drug Cost	1,334	1,512	1,036	1,365	1,550	1,045	1,566	1,757	1,253	1,792	1,999	1,469	1,867	2,079	1,544	1,971	2,176
Covered	1,241	1,454	883	1,283	1,476	948	1,512	1,718	1,175	1,746	1,966	1,401	1,815	2,043	1,469	1,912	2,136
Non-Covered	93	58	152	82	74	97	54	39	78	46	32	68	52	36	76	59	40
Average Generic Drug Costs Per Part D Enrollee ²																	
Average Generic Gross Drug Cost	\$673	\$728	\$580	\$718	\$776	\$617	\$745	\$794	\$665	\$733	\$778	\$662	\$742	\$783	\$680	\$736	\$783
Beneficiaries with No LIS	528	557	493	568	603	518	589	621	545	572	602	530	578	616	526	581	627
LIS Applicants	706	688	742	780	770	797	851	836	877	845	822	878	865	821	923	929	907
Beneficiaries Deemed Eligible for LIS ¹	975	990	922	1,073	1,102	984	1,122	1,137	1,082	1,131	1,150	1,086	1,160	1,158	1,162	1,144	1,156
Average Generic Plan Drug Cost	383	397	359	412	433	374	400	410	385	392	401	377	391	399	380	385	394
Covered	331	361	280	356	388	300	373	401	328	369	393	331	371	392	339	364	388
Non-Covered	53	36	80	56	46	74	27	9	56	23	8	46	20	7	41	21	6

Includes certain groups of Medicare beneficiaries who are automatically deemed eligible for the low-income subsidy and do not have to apply. The following groups are deemed eligible: Full-benefit dual eligibles, that is, persons eligible for both Medicare and full Medicaid benefits; Supplemental Security Income (SSI) recipients, including SSI recipients who do not qualify for Medicaid, and individuals deemed to be SSI recipients; and Medicare beneficiaries who are participants in the Medicare Savings Programs (MSP).

2 Generic drugs are identified using the Food and Drug Administration's NSDE Marketing Category.

NOTE: Enrollee counts are determined using a person-year methodology that accounts for the number of months a beneficiary is enrolled in the calendar year.

SOURCE: Centers for Medicare & Medicaid Services, Office of Enterprise Data and Analytics, CMS Chronic Conditions Data Warehouse.

Medicare
Advantage
Prescription Drug
Plan

17,484,759 13,024,509 631,981 3,828,269

\$53,953,808,413 42,050,671,894 11,669,330,111 233,806,409

\$3,086 2,162 5,363 5,853 2,053 1,926

\$2,40 1,6: 4,38 4,69 1,6: 1,58