

# STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 1999 ALASKA

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TABLE 1  
 OVERVIEW OF BENEFICIARY SELECTION CRITERIA FOR STUDY POPULATION  
 ALASKA, 1999

Inclusion Criteria (1999)	No. of Dual and Non-dual Eligible Benes (Cell)	No. of Dual Eligible Benes (Cell) <sup>g</sup>
1. Benes who were eligible for Medicaid during at least one month <sup>a</sup>	103,789 (A)	9,756 (E)
2. Benes who had Medicaid pharmacy benefits during at least one month <sup>b</sup>	103,713 (B)	9,692 (F)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month <sup>c, d, e</sup>	103,713 (C)	9,692 (G)
4. Benes who were all-year nursing facility residents <sup>f</sup>	532 (D)	452 (H)

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. MAX data element "Eligible Months Count" was used to determine an individual's Medicaid eligibility. All individuals who had a value greater than zero were considered as beneficiaries and counted in Cell A.

b. Counts in Cell B were obtained by excluding from Cell A beneficiaries who never had pharmacy benefit coverage during their Medicaid enrollment in 1999 (based on MAX data element "Eligible Restricted Benefits Flag"). Characteristics of beneficiaries represented by Cell B are shown in Appendix Table A.1.

c. Cell C represents the study population for Tables 2 through 7D. Cell C was obtained by excluding from Cell B beneficiaries who were under MC plans during all months of Medicaid eligibility in 1999, because the MAX files would not include separate prescription drug claims for those beneficiaries. MC plans include HMOs, PHPs, or other MC organizations that provided pharmacy benefits under capitation arrangements. Beneficiaries included are those who were in fee-for-service, PCCM, or PHP plans in selected states. Beneficiaries in PHPs were included if they were in one of 18 states where no PHP in the state provided a pharmacy benefit (see footnote e). For all other states, beneficiaries in PHPs were excluded. For example, if a beneficiary was under fee-for-service, PCCM, or PHPs in one of the 18 states for three months of the year but enrolled in an MC plan for the remaining nine months, only the three months were counted toward the number of benefit months associated with the beneficiary. Therefore, benefit months included represent the benefit months with fee-for-service pharmacy benefits. Beneficiaries and their benefit months included and excluded based on this criterion are shown in Appendix Table A.2.

d. The total Medicaid pharmacy reimbursement for Alaska in 1999 was \$43,515,472, of which \$1,619,589 was excluded from our analysis because those claims were made for beneficiaries who were outside the study population or took place during months that were excluded from the analysis.

e. The 18 states where no PHP provided a pharmacy benefit in 1999 were AL, AR, CO, FL, GA, IA, IL, KY, MA, MI, MT, NE, NY, NC, OR, PA, UT, and WI. This list was constructed based on consultation with CMS staff and two CMS documents, which can be found at <http://www.cms.hhs.gov/medicaid/managedcare/mmcms699.asp> and at <http://www.cms.hhs.gov/medicaid/managedcare/mmcms99.asp>.

f. Cell D represents the study population for Tables 8 through 10D. All-year nursing facility residents are the beneficiaries who resided in nursing facilities throughout their enrollment in 1999. These beneficiaries were identified by comparing the number of months during which the MAX files contained at least one claim from nursing facilities to the number of Medicaid eligible months. If the former is greater than or equal to the latter, the beneficiary was considered an all-year resident. If the former is less than the latter but not equal to zero, the beneficiary was considered a part-year resident. Part-year residents were excluded from the analysis because they are likely to be short-term residents and the level and pattern of their pharmacy benefit use may differ substantially from longer-term residents. The number of part-year residents and their benefit months are presented in footnotes to Tables 8 through 10D. Residents of mental hospitals for the aged, inpatient psychiatric facilities for individuals under age 21, or intermediate care facilities for the mentally retarded were excluded from the analysis.

g. Pharmacy benefit use and reimbursement among full dual eligible beneficiaries are presented in Tables 11 through 18. To determine Medicaid-Medicare dual eligibility status, two MAX data elements ("Eligible Medicare Crossover Code -- Annual New Values" and "Eligible Restricted Benefits Flag") were used in combination.

Beneficiaries represented in Cell G, the dual study population, include all dual eligible beneficiaries who had a fee-for-service pharmacy benefit at least during one month in 1999. All benefit months of such dual eligible beneficiaries, of which 0.0 percent were restricted benefit months without a pharmacy benefit in Alaska, were used in the dual tables.

Characteristics of dual eligible beneficiaries represented by Cell F are shown in Appendix Table A.3, and characteristics of beneficiaries and their benefit months included in Cell F but excluded from Cell G are shown in Appendix Table A.4.

Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; HMO = health maintenance organization; MAX = Medicaid Analytic Extract; MC = managed care; PCCM = primary care case management; PHP = prepaid health plan.

TABLE 2  
 CHARACTERISTICS OF MEDICAID STUDY POPULATION BENEFICIARIES, BY BASIS OF ELIGIBILITY<sup>a,b</sup>  
 ALASKA, 1999

Beneficiary Characteristics	No. of Benes							No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Other/ Unknown	All	Aged	Disabled	Adults	Children	Other/ Unknown		
<b>All</b>	<b>103,713</b>	<b>5,989</b>	<b>10,378</b>	<b>25,538</b>	<b>61,808</b>	<b>0</b>	<b>840,549</b>	<b>61,944</b>	<b>107,515</b>	<b>181,402</b>	<b>489,688</b>	<b>0</b>		
<b>Age</b>														
5 and younger	25,081	0	281	0	24,800	0	192,818	0	2,654	0	190,164	0		
6-14	29,472	0	755	2	28,715	0	244,691	0	8,036	12	236,643	0		
15-20	12,098	0	493	3,462	8,143	0	89,856	0	5,056	22,607	62,193	0		
21-44	23,962	3	4,164	19,645	150	0	183,381	27	43,413	139,253	688	0		
45-64	6,740	21	4,332	2,387	0	0	64,202	193	44,817	19,192	0	0		
65-74	3,418	3,054	323	41	0	0	35,144	31,542	3,266	336	0	0		
75-84	2,176	2,154	22	0	0	0	22,766	22,546	220	0	0	0		
85 and older	765	757	8	0	0	0	7,689	7,636	53	0	0	0		
Unknown	1	0	0	1	0	2	0	0	0	2	0	0		
<b>Gender</b>														
Female	58,584	3,813	5,203	19,344	30,224	0	472,125	39,801	54,320	138,219	239,785	0		
Male	45,129	2,176	5,175	6,194	31,584	0	368,424	22,143	53,195	43,183	249,903	0		
Unknown	0	0	0	0	0	0	0	0	0	0	0	0		
<b>Race</b>														
White	45,064	2,173	5,930	11,840	25,121	0	363,819	21,511	61,093	83,951	197,264	0		
African American	5,784	154	570	1,381	3,679	0	49,035	1,560	5,677	10,607	31,191	0		
Other/unknown	52,865	3,662	3,878	12,317	33,008	0	427,695	38,873	40,745	86,844	261,233	0		
<b>Use of Nursing Facilities</b>														
All year	532	395	136	1	0	0	5,252	3,898	1,353	1	0	0		
Part year	313	217	95	1	0	0	2,950	1,978	963	9	0	0		
None	102,868	5,377	10,147	25,536	61,808	0	832,347	56,068	105,199	181,392	489,688	0		
<b>Maintenance Assistance Status</b>														
Cash	57,413	5,401	9,764	16,947	25,301	0	513,708	56,485	101,255	133,031	222,937	0		
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0		
Poverty-related	36,373	7	1	6,049	30,316	0	247,789	66	10	30,982	216,731	0		
Other/unknown	9,927	581	613	2,542	6,191	0	79,052	5,393	6,250	17,389	50,020	0		
<b>Dual Medicare Status<sup>c</sup></b>														
Full dual, all year	9,680	5,424	4,143	113	0	0	100,661	56,280	43,523	858	0	0		
Full dual, part year	12	10	2	0	0	0	100	80	20	0	0	0		
Non-dual, all year	94,021	555	6,233	25,425	61,808	0	739,788	5,584	63,972	180,544	489,688	0		
<b>Managed Care Status</b>														
FFS all year	103,713	5,989	10,378	25,538	61,808	0	840,549	61,944	107,515	181,402	489,688	0		
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0		
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0		

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

Table 2

All Medicaid Beneficiaries

a. Table 2 includes the beneficiaries represented by Cell C 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. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid fee-for-service pharmacy benefits during all months of Medicaid enrollment in 1999. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. The "Non-dual, all year" group includes beneficiaries who were never dually eligible or dually eligible but never had Medicaid fee-for-service pharmacy benefits. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; Rx = pharmacy benefit.

TABLE 3  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFICIARY, BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 ALASKA, 1999

Beneficiary Characteristics	% with at Least One Rx	Mean No. of Rx	Mean Rx \$	\$ per Rx	Mean \$, All Services	Rx \$ as % of All Services	Mean OTC Drug \$ <sup>c</sup>	No. of Beneficiaries
All	50.5 %	7.2	\$404	\$56	\$3,998	10.1 %	\$3	103,713
<b>Age</b>								
5 and younger	45.7	1.7	66	38	2,349	2.8	0	25,081
6-14	35.4	1.9	151	80	2,120	7.1	0	29,472
15-20	44.2	2.7	128	48	3,700	3.5	1	12,098
21-44	62.2	9.6	652	68	4,832	13.5	3	23,962
45-64	75.4	28.9	1,617	56	9,181	17.6	19	6,740
65-74	78.1	27.1	1,155	43	7,393	15.6	15	3,418
75-84	82.7	32.3	1,256	39	12,128	10.4	14	2,176
85 and older	86.8	39.1	1,376	35	25,112	5.5	12	765
Unknown	0.0	0.0	0	0	0	0.0	0	1
<b>Basis of Eligibility</b>								
Aged	80.6	30.5	1,214	40	11,256	10.8	14	5,989
Disabled	81.2	30.7	2,363	77	14,202	16.6	16	10,378
Adults	57.1	5.6	237	42	2,839	8.3	2	25,538
Children	39.7	1.7	66	39	2,061	3.2	0	61,808
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Gender</b>								
Female	54.6	8.6	401	47	4,056	9.9	4	58,584
Male	45.1	5.4	408	75	3,924	10.4	3	45,129
Unknown	0.0	0.0	0	0	0	0.0	0	0
<b>Race</b>								
White	59.7	10.6	617	58	4,587	13.5	5	45,064
African American	56.9	7.3	341	47	3,347	10.2	4	5,784
Other/unknown	41.9	4.3	229	53	3,568	6.4	2	52,865
<b>Use of Nursing Facilities</b>								
Entire year	96.6	58.5	2,972	51	81,779	3.6	36	532
Part year	96.8	60.2	2,747	46	50,207	5.5	34	313
None	50.1	6.8	384	56	3,456	11.1	3	102,868
<b>Maintenance Assistance Status</b>								
Cash	58.1	10.8	629	58	4,394	14.3	5	57,413
Medically needy	0.0	0.0	0	0	0	0.0	0	0
Poverty related	37.9	1.4	55	38	2,145	2.6	1	36,373
Other/unknown	52.7	7.9	381	49	8,501	4.5	3	9,927

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

Table 3

All Medicaid Beneficiaries

a. Table 3 includes beneficiaries represented by Cell C 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. Information about OTC drugs appears in this column only. OTC drugs are not part of the reimbursement amount for prescription drugs.

Bene(s) = beneficiary (or beneficiaries); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; OTC = over-the-counter; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 4  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BENEFICIARY CHARACTERISTIC<sup>a,b</sup>  
 ALASKA, 1999

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:						Mean \$, All Services	Benes	Bene Mos
				49.5 % None	38.3 % More than 0, but 1 or Less	4.2 % More than 1, but 2 or Less	4.9 % More than 2, but 5 or Less	2.3 % More than 5, but 10 or Less	0.8 % More than 10			
<b>All</b>	0.9	\$50	10.1 %	49.5 %	38.3 %	4.2 %	4.9 %	2.3 %	0.8 %	\$493	103,713	840,549
<b>Age</b>												
5 and younger	0.2	9	2.8	54.3	44.2	1.2	0.3	0.0	0.0	306	25,081	192,818
6-14	0.2	18	7.1	64.6	32.4	1.7	1.1	0.1	0.0	255	29,472	244,691
15-20	0.4	17	3.5	55.8	39.0	3.2	1.7	0.2	0.0	498	12,098	89,856
21-44	1.3	85	13.5	37.8	42.6	7.5	8.1	3.1	0.8	631	23,962	183,381
45-64	3.0	170	17.6	24.6	29.6	10.4	18.4	12.1	4.8	964	6,740	64,202
65-74	2.6	112	15.6	21.9	33.4	11.2	19.3	10.1	4.0	719	3,418	35,144
75-84	3.1	120	10.4	17.3	33.5	12.2	18.7	12.5	5.7	1,159	2,176	22,766
85 and older	3.9	137	5.5	13.2	28.5	11.4	22.9	16.6	7.5	2,499	765	7,689
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	2
<b>Basis of Eligibility</b>												
Aged	2.9	117	10.8	19.4	32.9	11.4	19.6	11.6	5.1	1,088	5,989	61,944
Disabled	3.0	228	16.6	18.8	31.2	12.0	21.2	12.1	4.7	1,371	10,378	107,515
Adults	0.8	33	8.3	42.9	44.2	6.1	5.0	1.5	0.3	400	25,538	181,402
Children	0.2	8	3.2	60.3	37.5	1.5	0.7	0.1	0.0	260	61,808	489,688
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Gender</b>												
Female	1.1	50	9.9	45.4	40.3	4.8	5.5	2.9	1.1	503	58,584	472,125
Male	0.7	50	10.4	54.9	35.6	3.5	4.0	1.5	0.5	481	45,129	368,424
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
<b>Race</b>												
White	1.3	77	13.5	40.3	42.1	5.5	6.9	3.8	1.4	568	45,064	363,819
African American	0.9	40	10.2	43.1	45.0	4.4	4.6	2.1	0.9	395	5,784	49,035
Other/unknown	0.5	28	6.4	58.1	34.2	3.1	3.2	1.0	0.3	441	52,865	427,695
<b>Use of Nursing Facilities</b>												
Entire year	5.9	301	3.6	3.4	6.2	12.0	32.9	32.0	13.5	8,284	532	5,252
Part year	6.4	292	5.5	3.2	12.8	11.5	30.0	24.3	18.2	5,327	313	2,950
None	0.8	47	11.1	49.9	38.5	4.2	4.7	2.1	0.7	427	102,868	832,347
<b>Maintenance Assistance Status</b>												
Cash	1.2	70	14.3	41.9	39.9	5.8	7.5	3.6	1.3	491	57,413	513,708
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.2	8	2.6	62.1	35.7	1.6	0.6	0.1	0.0	315	36,373	247,789
Other/unknown	1.0	48	4.5	47.3	38.3	5.1	5.4	2.7	1.2	1,068	9,927	79,052

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

Table 4

All Medicaid Beneficiaries

- a. Table 4 includes the beneficiaries represented by Cell C 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.
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE 5  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH, BY BRAND STATUS AND BENEFICIARY CHARACTERISTIC<sup>a, b, c</sup>  
 ALASKA, 1999

Beneficiary Characteristics	All Rx		Patented Brand-Name Drugs		Off-Patent Brand-Name Drugs		Generic Drugs	
	No. of Rx	Rx \$	No. of Rx	\$ per Rx	No. of Rx	Rx \$	No. of Rx	Rx \$
<b>All</b>	<b>0.9</b>	<b>\$50</b>	<b>0.3</b>	<b>\$34</b>	<b>0.1</b>	<b>\$8</b>	<b>0.4</b>	<b>\$6</b>
<b>Age</b>								
5 and younger	0.2	9	0.1	6	0.0	1	0.1	2
6-14	0.2	18	0.1	14	0.0	2	0.1	2
15-20	0.4	17	0.1	12	0.0	3	0.2	2
21-44	1.3	85	0.5	61	0.2	12	0.6	9
45-64	3.0	170	1.2	111	0.5	28	1.2	22
65-74	2.6	112	1.0	66	0.5	21	1.0	17
75-84	3.1	120	1.1	69	0.6	24	1.2	19
85 and older	3.9	137	1.3	77	0.8	26	1.6	26
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Basis of Eligibility</b>								
Aged	2.9	117	1.1	68	0.6	23	1.1	19
Disabled	3.0	228	1.2	163	0.4	34	1.1	23
Adults	0.8	33	0.3	21	0.1	5	0.4	5
Children	0.2	8	0.1	6	0.0	1	0.1	2
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Gender</b>								
Female	1.1	50	0.4	32	0.2	8	0.5	7
Male	0.7	50	0.3	36	0.1	7	0.3	5
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
<b>Race</b>								
White	1.3	77	0.5	52	0.2	12	0.6	10
African American	0.9	40	0.3	27	0.1	6	0.4	6
Other/unknown	0.5	28	0.2	19	0.1	5	0.2	4
<b>Use of Nursing Facilities</b>								
Entire year	5.9	301	1.9	169	1.0	54	2.6	62
Part year	6.4	292	2.3	176	1.1	51	2.7	50
None	0.8	47	0.3	32	0.1	7	0.4	6
<b>Maintenance Assistance Status</b>								
Cash	1.2	70	0.5	48	0.2	11	0.5	8
Medically needy	0.0	0	0.0	0	0.0	0	0.0	0
Poverty related	0.2	8	0.1	5	0.0	1	0.1	2
Other/unknown	1.0	48	0.4	30	0.1	8	0.4	8
<b>\$ per Rx</b>								
<b>All</b>		<b>\$50</b>		<b>\$34</b>		<b>\$8</b>		<b>\$6</b>
<b>All</b>								<b>\$17</b>

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 5 includes the beneficiaries represented by Cell C 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.

Table 5

All Medicaid Beneficiaries

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 Alaska, 6.4 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 6  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY BRAND STATUS AND THERAPEUTIC CATEGORY<sup>a, b, c, d</sup>  
 ALASKA, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users							
	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Total	Patented	Off-Patent	Generic	Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos		
																Brand-Name	Brand-Name
Anti-infective Agents	0.3	0.1	0.0	0.1	\$14	\$12	\$0	\$2	\$56	\$94	\$43	\$13	74,402	\$4,130,150	30,988	29.9%	297,351
Biologics	0.2	0.2	0.0	0.0	316	316	0	1	1289	1,381	0	40	479	617,438	214	0.2	1,952
Antineoplastic Agents	0.5	0.2	0.1	0.2	88	64	15	9	174	364	112	45	2,741	478,100	520	0.5	5,456
Endocrine/Metabolic Drugs	0.6	0.3	0.1	0.2	19	13	4	3	30	42	24	15	66,680	1,994,964	10,538	10.2	103,548
Cardiovascular Agents	1.3	0.5	0.3	0.5	42	23	12	7	33	50	40	14	107,922	3,578,683	8,185	7.9	85,808
Respiratory Agents	0.4	0.2	0.0	0.2	19	14	1	4	43	60	29	22	56,208	2,429,634	13,279	12.8	130,702
Gastrointestinal Agents	0.5	0.3	0.1	0.2	45	33	8	4	87	124	81	26	37,341	3,230,601	6,917	6.7	71,496
Genitourinary Agents	0.3	0.2	0.0	0.1	10	8	0	1	39	49	39	17	9,134	352,677	3,566	3.4	34,968
CNS Drugs	1.0	0.5	0.1	0.4	72	50	15	6	74	111	108	17	123,964	9,136,964	12,694	12.2	127,279
Stimulants/Anti-obesity/Anorexia	0.6	0.2	0.1	0.3	23	6	6	11	37	43	42	32	12,427	457,800	2,013	1.9	19,670
Miscellaneous Psychological/Neurological Agents	0.6	0.5	0.0	0.1	77	75	0	2	123	144	25	23	1,002	123,394	153	0.1	1,598
Analgesics and Anesthetics	0.6	0.1	0.1	0.4	28	18	5	5	50	138	67	15	99,956	5,001,319	18,176	17.5	175,672
Neuromuscular Agents	0.7	0.3	0.1	0.4	36	23	5	8	50	91	42	23	52,975	2,654,063	7,198	6.9	73,895
Nutritional Products	0.4	0.0	0.1	0.2	6	0	3	3	16	16	25	12	16,366	255,013	5,031	4.9	46,232
Hematological Agents	0.7	0.1	0.3	0.3	289	252	32	5	396	1,943	106	18	10,730	4,244,114	1,427	1.4	14,689
Topical Products	0.2	0.1	0.0	0.1	7	3	1	2	29	51	37	15	36,275	1,039,982	16,295	15.7	159,530
Miscellaneous Products	0.6	0.2	0.2	0.2	115	61	46	8	192	298	236	41	1,513	290,206	236	0.2	2,524
Unknown Therapeutic Category	0.3	0.0	0.0	0.0	15	0	0	0	48	0	0	0	39,197	1,880,781	12,108	11.7	121,695
<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.	749,312	41,895,883	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

- a. Table 6 includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given therapeutic category during 1999. 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- 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 Alaska, 6.4 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; CNS = Central Nervous System; MAX = Medicaid Analytic Extract; n.a. = not applicable; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 7  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT, BY TOP 10 DRUG GROUP<sup>a, b, c</sup>  
 ALASKA, 1999

Top 10 Drug Groups	Users					Among Users		
	Total Medicaid Rx \$	No. As % of All Benes	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo		
ANTIPSYCHOTICS	\$4,381,110	4.195	44,877	0.7	\$144	\$98		
ANTIDEPRESSANTS	3,767,982	11.115	113,518	0.5	61	33		
MISC. HEMATOLOGICAL	3,695,990	3.23	3,362	0.7	1,503	1,099		
ANALGESICS - Narcotic	3,280,929	19.686	195,543	0.3	48	17		
ULCER DRUGS	2,337,007	6.351	66,864	0.4	86	35		
ANTICONVULSANT	2,056,232	4.172	44,446	0.7	64	46		
ANTIASTHMATIC	1,535,363	11.753	118,279	0.3	42	13		
ANTIVIRAL	1,434,486	1.395	14,280	0.4	252	100		
ANALGESICS - ANTI-INFLAMMATORY	1,229,772	10.746	108,198	0.2	47	11		
ANTIHYPERTENSIVE	1,139,571	4.640	49,376	0.6	36	23		

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

- a. Table 7 includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 7A  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR TOP 10 DRUG GROUPS COMBINED  
 AND FIRST AND SECOND GROUPS SEPARATELY, BY SEX, BOE, AND AGE<sup>a,b,c</sup>  
 ALASKA, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>321,732</b>	<b>\$24,858,442</b>	<b>4,195</b>	<b>4.0 %</b>	<b>44,877</b>	<b>0.7</b>	<b>\$98</b>	<b>11,115</b>	<b>10.7 %</b>	<b>113,518</b>	<b>0.5</b>	<b>\$33</b>					
<b>Female</b>	209,782	12,619,377	2,285	3.9	24,306	0.6	79	7,881	13.5	80,262	0.5	34					
<b>Disabled</b>	94,973	7,103,607	1,363	26.2	15,167	0.7	103	2,967	57.0	32,719	0.6	43					
5 and younger	325	21,016	2	1.5	24	0.3	45	0	0.0	0	0.0	0					
6-14	1,227	75,341	10	3.6	115	0.8	51	34	12.4	368	0.6	33					
15-20	1,250	98,155	34	20.0	388	0.6	79	55	32.4	601	0.5	40					
21-44	37,152	3,135,652	748	37.5	8,335	0.7	112	1,219	61.0	13,491	0.6	42					
45-64	51,910	3,608,865	548	22.6	6,090	0.7	96	1,588	65.5	17,519	0.7	44					
65-74	2,819	149,237	16	8.4	165	0.8	50	60	31.6	625	0.6	36					
75-84	239	12,453	4	26.7	44	0.3	20	10	66.7	104	0.8	31					
85 and older	51	2,888	1	25.0	6	0.7	140	1	25.0	11	1.2	14					
<b>Other Eligibles</b>	114,809	5,515,770	922	1.7	9,139	0.5	39	4,914	9.2	47,543	0.5	27					
5 and younger	2,136	51,883	9	0.1	88	0.2	18	24	0.2	234	0.3	14					
6-14	5,313	216,565	103	0.7	1,033	0.4	37	310	2.2	3,076	0.4	20					
15-20	6,118	226,759	112	1.7	1,033	0.3	23	465	7.2	4,234	0.3	22					
21-44	45,546	2,260,727	346	2.2	3,290	0.3	34	2,740	17.7	25,753	0.4	26					
45-64	6,852	392,118	49	3.6	499	0.4	52	359	26.5	3,485	0.5	31					
65-74	22,073	1,143,207	124	6.7	1,326	0.7	46	478	25.6	5,159	0.7	32					
75-84	18,153	835,320	108	7.8	1,125	0.8	56	370	26.6	3,877	0.8	33					
85 and older	8,618	389,191	71	12.7	745	0.8	39	168	30.1	1,725	1.1	37					
<b>Male</b>	111,950	12,239,065	1,910	4.2	20,571	0.7	120	3,234	7.2	33,256	0.6	32					
<b>Disabled</b>	65,586	9,821,013	1,396	27.0	15,683	0.8	140	1,655	32.0	18,137	0.6	38					
5 and younger	347	23,036	4	2.6	45	0.6	146	2	1.3	22	1.0	61					
6-14	3,683	2,055,995	70	14.6	787	0.7	98	90	18.7	974	0.5	25					
15-20	1,921	188,104	67	20.7	745	0.6	108	71	22.0	748	0.5	31					
21-44	29,627	5,135,700	866	40.0	9,712	0.8	154	756	34.9	8,276	0.6	43					
45-64	28,561	2,338,007	383	20.1	4,323	0.8	123	719	37.7	7,945	0.6	35					
65-74	1,388	76,557	6	4.5	71	0.8	54	17	12.8	172	0.6	45					
75-84	28	1,757	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
85 and older	31	1,857	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
<b>Other Eligibles</b>	46,364	2,418,052	514	1.3	4,888	0.5	56	1,579	4.0	15,119	0.5	25					
5 and younger	3,434	81,300	6	0.0	49	0.3	50	26	0.2	251	0.4	14					
6-14	9,510	560,870	222	1.5	2,249	0.6	60	530	3.6	5,360	0.4	22					
15-20	4,389	243,304	112	2.2	944	0.6	53	315	6.2	2,814	0.5	29					
21-44	7,131	366,909	42	1.0	331	0.3	44	289	6.6	2,456	0.3	21					
45-64	3,352	233,739	18	1.7	175	0.4	68	118	11.2	1,079	0.4	26					
65-74	9,205	477,437	42	3.4	429	0.6	74	144	11.7	1,542	0.7	31					
75-84	7,179	361,838	52	6.8	493	0.6	45	125	16.4	1,291	0.8	29					
85 and older	2,164	92,655	20	10.1	218	0.7	26	32	16.2	326	1.2	48					
<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 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 7A includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mdmb.asp](http://www.Medi-Span.com/products/product_mdmb.asp) (May 13 2003).

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

TABLE 7B  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR THIRD TO FIFTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 ALASKA, 1999

Beneficiary Characteristics	MISC. HEMATOLOGICAL				ANALGESICS - Narcotic				ULCER DRUGS						
	No. of Users	Users as % of All Benes	No. of Bene among Mos	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene among Mos	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene among Mos	Mean Rx \$			
<b>All</b>	<b>323</b>	<b>0.3 %</b>	<b>3,362</b>	<b>0.7</b>	<b>\$1,099</b>	<b>19,686</b>	<b>19.0 %</b>	<b>195,543</b>	<b>0.3</b>	<b>\$17</b>	<b>6,351</b>	<b>6.1 %</b>	<b>66,864</b>	<b>0.4</b>	<b>\$35</b>
<b>Female</b>	188	0.3	1,964	0.7	41	13,975	23.9	139,109	0.4	16	4,309	7.4	45,600	0.4	34
<b>Disabled</b>	56	1.1	616	0.5	41	3,695	71.0	40,993	0.5	29	1,578	30.3	17,549	0.4	41
5 and younger	0	0.0	0	0.0	0	9	6.9	107	0.1	1	17	13.1	185	0.5	54
6-14	0	0.0	0	0.0	0	30	10.9	354	0.2	2	17	6.2	193	0.3	29
15-20	0	0.0	0	0.0	0	39	22.9	431	0.1	4	13	7.6	149	0.5	39
21-44	7	0.4	83	0.7	72	1,530	76.6	16,815	0.5	31	492	24.6	5,501	0.4	36
45-64	43	1.8	470	0.5	38	1,989	82.1	22,197	0.5	30	960	39.6	10,676	0.5	43
65-74	5	2.6	51	0.7	32	88	46.3	984	0.4	14	70	36.8	766	0.5	46
75-84	1	6.7	12	0.1	10	8	53.3	88	0.6	10	7	46.7	62	0.6	73
85 and older	0	0.0	0	0.0	0	2	50.0	17	0.9	38	2	50.0	17	0.5	41
<b>Other Eligibles</b>	132	0.2	1,348	0.7	41	10,280	19.3	98,116	0.3	10	2,731	5.1	28,051	0.4	30
5 and younger	0	0.0	0	0.0	0	175	1.4	1,691	0.1	2	55	0.5	518	0.2	10
6-14	0	0.0	0	0.0	0	516	3.6	5,037	0.1	2	130	0.9	1,288	0.2	11
15-20	0	0.0	0	0.0	0	1,271	19.6	11,279	0.2	2	171	2.6	1,554	0.2	11
21-44	2	0.0	17	0.5	33	6,222	40.3	57,634	0.3	12	944	6.1	9,042	0.2	22
45-64	2	0.1	21	0.1	13	538	39.7	5,280	0.4	11	198	14.6	1,980	0.3	29
65-74	46	2.5	467	0.7	43	775	41.6	8,645	0.3	13	583	31.3	6,543	0.5	39
75-84	62	4.5	637	0.7	42	567	40.8	6,315	0.3	10	447	32.2	4,962	0.6	39
85 and older	20	3.6	206	0.7	36	216	38.6	2,235	0.4	21	203	36.3	2,164	0.7	48
<b>Male</b>	135	0.3	1,398	0.8	2,587	5,711	12.7	56,434	0.3	20	2,042	4.5	21,264	0.4	36
<b>Disabled</b>	64	1.2	650	1.2	5,278	2,199	42.5	23,934	0.4	32	930	18.0	10,274	0.5	43
5 and younger	0	0.0	0	0.0	0	8	5.3	87	0.1	1	17	11.3	182	0.4	34
6-14	6	1.2	67	5.0	26,966	38	7.9	426	0.2	2	24	5.0	277	0.7	55
15-20	1	0.3	3	0.3	3	52	16.1	562	0.2	3	14	4.3	156	0.4	33
21-44	13	0.6	112	2.5	14,381	945	43.6	10,301	0.4	30	321	14.8	3,575	0.5	46
45-64	38	2.0	416	0.4	29	1,109	58.1	12,020	0.5	38	508	26.6	5,572	0.5	42
65-74	5	3.8	50	0.4	30	46	34.6	526	0.3	19	43	32.3	485	0.4	34
75-84	0	0.0	0	0.0	0	1	14.3	12	0.1	2	2	28.6	17	0.8	72
85 and older	1	25.0	2	1.5	61	0	0.0	0	0.0	0	1	25.0	10	0.8	100
<b>Other Eligibles</b>	71	0.2	748	0.5	247	3,512	8.8	32,500	0.3	10	1,112	2.8	10,990	0.4	30
5 and younger	0	0.0	0	0.0	0	252	2.0	2,430	0.1	1	81	0.6	738	0.2	11
6-14	1	0.0	11	1.5	10,864	541	3.7	5,341	0.1	2	88	0.6	828	0.2	17
15-20	1	0.0	6	1.5	5,877	565	11.1	4,958	0.2	2	84	1.6	751	0.2	14
21-44	3	0.1	28	0.4	29	1,262	29.0	10,709	0.4	17	183	4.2	1,555	0.2	25
45-64	4	0.4	44	0.2	23	278	26.4	2,486	0.5	27	103	9.8	997	0.3	29
65-74	32	2.6	354	0.6	49	345	28.0	3,740	0.3	10	292	23.7	3,125	0.4	36
75-84	24	3.1	236	0.5	38	219	28.7	2,351	0.3	11	221	28.9	2,373	0.5	38
85 and older	6	3.0	69	0.4	33	50	25.3	485	0.3	10	60	30.3	623	0.6	41
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

All Medicaid Beneficiaries

Table 7B

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

- a. Table 7B includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE 7C  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,  
 BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 ALASKA, 1999

Beneficiary Characteristics	ANTICONVULSANT				ANTIASTHMATIC				ANTIVIRAL						
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>4,172</b>	<b>4.0 %</b>	<b>44,446</b>	<b>0.7</b>	<b>\$46</b>	<b>11,753</b>	<b>11.3 %</b>	<b>118,279</b>	<b>0.3</b>	<b>\$13</b>	<b>1,395</b>	<b>1.3 %</b>	<b>14,280</b>	<b>0.4</b>	<b>\$101</b>
<b>Female</b>	2,493	4.3	26,618	0.7	44	7,310	12.5	73,964	0.3	13	830	1.4	8,353	0.3	48
<b>Disabled</b>	1,464	28.1	16,348	0.8	54	2,009	38.6	22,157	0.4	18	226	4.3	2,576	0.3	84
5 and younger	11	8.5	125	0.7	38	30	23.1	332	0.3	13	3	2.3	35	0.1	6
6-14	61	22.3	686	0.7	57	35	12.8	395	0.4	18	3	1.1	30	0.2	6
15-20	60	35.3	658	0.7	57	27	15.9	292	0.2	9	0	0.0	0	0.0	0
21-44	765	38.3	8,506	0.8	60	626	31.3	6,798	0.3	14	120	6.0	1,374	0.4	108
45-64	552	22.8	6,211	0.8	48	1,192	49.2	13,269	0.4	20	98	4.0	1,113	0.3	61
65-74	14	7.4	152	1.3	43	93	48.9	1,017	0.5	24	2	1.1	24	0.2	12
75-84	1	6.7	10	0.1	1	5	33.3	48	0.3	14	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	1	25.0	6	0.3	37	0	0.0	0	0.0	0
<b>Other Eligibles</b>	1,029	1.9	10,270	0.6	27	5,301	9.9	51,807	0.3	11	604	1.1	5,777	0.2	32
5 and younger	24	0.2	228	0.3	15	890	7.4	8,400	0.2	3	52	0.4	518	0.1	6
6-14	93	0.7	940	0.5	23	752	5.3	7,130	0.2	8	53	0.4	525	0.1	6
15-20	96	1.5	891	0.4	25	444	6.8	4,089	0.2	7	53	0.8	450	0.2	7
21-44	512	3.3	4,958	0.4	26	1,660	10.7	15,514	0.3	9	362	2.3	3,356	0.2	41
45-64	64	4.7	617	0.5	27	236	17.4	2,260	0.3	12	30	2.2	335	0.3	88
65-74	114	6.1	1,241	0.9	34	689	37.0	7,590	0.4	20	29	1.6	327	0.2	14
75-84	94	6.8	1,054	1.1	29	458	32.9	5,010	0.4	21	20	1.4	206	0.3	13
85 and older	32	5.7	341	0.8	23	172	30.8	1,814	0.5	24	5	0.9	60	0.1	8
<b>Male</b>	1,679	3.7	17,828	0.7	50	4,443	9.8	44,315	0.3	13	565	1.3	5,927	0.6	174
<b>Disabled</b>	1,115	21.5	12,340	0.8	59	1,018	19.7	11,186	0.4	21	416	8.0	4,499	0.7	216
5 and younger	12	7.9	138	0.6	42	26	17.2	280	0.2	7	0	0.0	0	0.0	0
6-14	121	25.2	1,349	0.8	69	111	23.1	1,251	0.4	23	5	1.0	60	0.1	3
15-20	85	26.3	940	0.8	69	33	10.2	372	0.3	20	1	0.3	3	0.3	230
21-44	580	26.8	6,366	0.8	61	235	10.8	2,578	0.3	15	278	12.8	2,954	0.8	231
45-64	305	16.0	3,412	0.8	51	555	29.1	6,071	0.5	24	132	6.9	1,482	0.6	196
65-74	12	9.0	135	0.7	24	55	41.4	611	0.5	22	0	0.0	0	0.0	0
75-84	0	0.0	0	0.0	0	1	14.3	9	0.2	6	0	0.0	0	0.0	0
85 and older	0	0.0	0	0.0	0	2	50.0	14	0.1	6	0	0.0	0	0.0	0
<b>Other Eligibles</b>	564	1.4	5,488	0.6	30	3,425	8.6	33,129	0.3	10	149	0.4	1,428	0.2	42
5 and younger	25	0.2	263	0.5	14	1,314	10.4	12,522	0.2	4	26	0.2	256	0.1	6
6-14	220	1.5	2,267	0.6	31	884	6.1	8,425	0.2	8	36	0.2	324	0.1	6
15-20	91	1.8	758	0.7	34	203	4.0	1,886	0.3	11	16	0.3	160	0.1	5
21-44	89	2.0	802	0.4	26	195	4.5	1,587	0.2	7	32	0.7	280	0.2	25
45-64	35	3.3	303	0.5	30	99	9.4	844	0.4	21	12	1.1	111	0.5	313
65-74	57	4.6	631	0.6	26	395	32.1	4,285	0.4	20	11	0.9	123	0.1	11
75-84	39	5.1	395	0.7	37	269	35.2	2,861	0.4	21	14	1.8	150	0.4	85
85 and older	8	4.0	69	0.9	46	66	33.3	719	0.4	19	2	1.0	24	0.1	4
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

- a. Table 7C includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE 7D  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT PER BENEFIT MONTH FOR NINTH AND TENTH TOP DRUG GROUPS  
 SEPARATELY, BY SEX, BOE, AND AGE<sup>a, b, c</sup>  
 ALASKA, 1999

Beneficiary Characteristics	ANALGESICS - ANTI-INFLAMMATORY				ANTIHYPERTENSIVE							
	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Users as % of All Benes	No. of Bene Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Benes	No. of Bene Mos
<b>All</b>	<b>10,746</b>	<b>10.4%</b>	<b>108,198</b>	<b>0.2</b>	<b>\$11</b>	<b>4,640</b>	<b>4.5%</b>	<b>49,376</b>	<b>0.6</b>	<b>\$23</b>	<b>103,713</b>	<b>840,549</b>
<b>Female</b>	7,806	13.3	78,824	0.2	12	2,728	4.7	29,045	0.6	24	58,583	472,123
<b>Disabled</b>	2,038	39.2	22,817	0.3	20	890	17.1	9,664	0.7	24	5,203	54,320
5 and younger	2	1.5	24	0.1	4	3	2.3	35	0.7	9	130	1,203
6-14	11	4.0	127	0.2	3	21	7.7	242	0.6	18	274	2,948
15-20	22	12.9	249	0.2	3	3	1.8	36	0.2	12	170	1,780
21-44	745	37.3	8,347	0.3	15	154	7.7	1,652	0.6	22	1,997	21,039
45-64	1,175	48.5	13,161	0.3	24	633	26.1	6,902	0.7	25	2,423	25,244
65-74	78	41.1	852	0.3	18	71	37.4	755	0.7	28	190	1,929
75-84	4	26.7	46	0.6	36	5	33.3	42	0.3	10	15	154
85 and older	1	25.0	11	0.7	30	0	0.0	0	0.0	0	4	23
<b>Other Eligibles</b>	5,768	10.8	56,007	0.2	9	1,838	3.4	19,381	0.6	23	53,380	417,803
5 and younger	154	1.3	1,482	0.1	2	13	0.1	143	0.5	10	12,105	92,897
6-14	278	2.0	2,729	0.1	2	64	0.5	672	0.6	11	14,161	116,733
15-20	692	10.7	6,182	0.2	3	10	0.2	89	0.2	6	6,495	46,744
21-44	3,088	20.0	28,767	0.2	6	259	1.7	2,499	0.4	14	15,450	110,388
45-64	388	28.6	3,786	0.2	12	125	9.2	1,158	0.5	21	1,356	11,250
65-74	635	34.1	7,116	0.3	21	644	34.5	7,014	0.7	26	1,864	19,398
75-84	399	28.7	4,482	0.4	18	515	37.1	5,625	0.7	26	1,390	14,737
85 and older	134	24.0	1,463	0.5	24	208	37.2	2,181	0.8	24	559	5,656
<b>Male</b>	2,940	6.5	29,374	0.2	9	1,912	4.2	20,331	0.6	23	45,129	368,424
<b>Disabled</b>	1,022	19.7	11,326	0.3	12	741	14.3	8,053	0.7	26	5,175	53,195
5 and younger	0	0.0	0	0.0	0	5	3.3	58	0.9	19	151	1,451
6-14	10	2.1	108	0.1	2	47	9.8	524	0.7	16	481	5,088
15-20	32	9.9	354	0.2	6	10	3.1	106	0.7	24	323	3,276
21-44	428	19.8	4,720	0.2	8	162	7.5	1,745	0.7	29	2,167	22,374
45-64	524	27.4	5,824	0.3	15	464	24.3	5,021	0.7	27	1,909	19,573
65-74	28	21.1	320	0.4	17	48	36.1	546	0.7	27	133	1,337
75-84	0	0.0	0	0.0	0	2	28.6	21	0.5	22	7	66
85 and older	0	0.0	0	0.0	0	3	75.0	32	0.6	21	4	30
<b>Other Eligibles</b>	1,918	4.8	18,048	0.2	7	1,171	2.9	12,278	0.6	20	39,954	315,229
5 and younger	197	1.6	1,884	0.1	2	34	0.3	351	0.6	13	12,695	97,267
6-14	250	1.7	2,298	0.1	2	217	1.5	2,255	0.6	11	14,556	119,922
15-20	312	6.1	2,747	0.1	2	29	0.6	285	0.4	13	5,110	38,056
21-44	586	13.5	5,091	0.2	7	70	1.6	625	0.4	17	4,348	29,580
45-64	183	17.4	1,736	0.2	10	90	8.6	813	0.6	23	1,052	8,135
65-74	211	17.1	2,305	0.3	15	359	29.2	3,960	0.6	24	1,231	12,480
75-84	145	19.0	1,625	0.3	12	299	39.1	3,225	0.6	22	764	7,809
85 and older	34	17.2	362	0.4	14	73	36.9	764	0.7	22	198	1,980
<b>Unknown</b>	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	2

Table 7D

All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

- a. Table 7D includes the beneficiaries represented by Cell C of Table 1. A user is a beneficiary who had at least one prescription filled in a given drug group during 1999. 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 1999. For information about these drug groups, see Wolters Kluwer Health, [http://www.Medi-Span.com/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE 8  
 MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT FOR ALL-YEAR NURSING FACILITY RESIDENTS,  
 BY BENEFICIARY CHARACTERISTIC<sup>a, b</sup>  
 ALASKA, 1999

Beneficiary Characteristics	Rx \$ per Bene Mo	No. of Rx per Bene Mo	No. of All-Year NF Residents	Bene Mos among All-Year NF Residents
<b>All</b>	<b>\$301</b>	<b>5.9</b>	<b>532</b>	<b>5,252</b>
<b>Age</b>				
0-64	393	6.3	120	1,211
65-74	301	5.9	106	1,048
75-84	305	6.2	160	1,535
85 and older	220	5.3	146	1,458
Unknown	0	0.0	0	0
<b>Gender</b>				
Female	293	6.0	335	3,332
Male	315	5.7	197	1,920
Unknown	0	0.0	0	0
<b>Race</b>				
White	311	6.4	320	3,084
African American	369	6.8	25	231
Other/unknown	277	5.1	187	1,937
<b>Basis of Eligibility</b>				
Aged	272	5.7	395	3,898
Disabled	387	6.4	136	1,353
Adults	0	0.0	1	1
Children	0	0.0	0	0
Unknown	0	0.0	0	0

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 8 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their 1999 Medicaid enrollment. A total of 313 beneficiaries who were in nursing facilities for part of their enrollment and their 2,950 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.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy; \$ = Medicaid reimbursement.

TABLE 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>  
 ALASKA, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			\$ per Rx			Users							
	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total	Patented Brand-Name	Off-Patent Brand-Name	Total # of Rx	Total Rx \$	No.	As % of All-Year NF Residents	No. of Bene Mos			
Anti-infective Agents	0.4	0.2	0.0	0.2	\$25	\$22	\$1	\$3	\$68	\$113	\$79	\$15	1,233	\$83,654	321	60.3 %	3,317
Biologicals	0.1	0.0	0.0	0.1	4	0	0	4	38	17	0	41	27	1,033	25	4.7	280
Antineoplastic Agents	0.8	0.1	0.4	0.3	119	43	60	17	157	388	154	64	241	37,857	36	6.8	317
Endocrine/Metabolic Drugs	1.3	0.6	0.1	0.6	43	29	3	10	33	50	42	16	2,294	75,133	181	34.0	1,758
Cardiovascular Agents	1.7	0.4	0.5	0.8	52	19	20	13	30	49	38	16	5,745	172,870	334	62.8	3,330
Respiratory Agents	0.9	0.2	0.0	0.6	42	13	2	28	49	55	40	47	1,338	65,452	152	28.6	1,550
Gastrointestinal Agents	1.2	0.6	0.2	0.4	88	60	15	13	74	106	79	30	3,715	273,154	307	57.7	3,091
Genitourinary Agents	0.6	0.3	0.1	0.2	29	21	3	6	48	63	53	25	543	25,979	82	15.4	883
CNS Drugs	1.5	0.8	0.1	0.6	96	72	12	12	63	88	110	20	5,327	338,113	350	65.8	3,504
Stimulants/Anti-obesity/Anorexia	0.9	0.0	0.2	0.7	14	0	2	12	16	0	12	17	86	1,384	10	1.9	96
Miscellaneous Psychological/Neurological Agents	0.9	0.9	0.0	0.0	114	114	0	0	132	132	0	0	120	15,792	13	2.4	138
Analgesics and Anesthetics	0.9	0.3	0.1	0.5	42	26	5	10	45	97	49	19	2,275	103,134	247	46.4	2,454
Neuromuscular Agents	1.0	0.2	0.2	0.5	50	16	13	21	52	79	58	39	2,573	133,670	252	47.4	2,648
Nutritional Products	0.8	0.0	0.4	0.4	19	0	13	6	24	12	32	16	993	23,906	121	22.7	1,251
Hematological Agents	1.1	0.1	0.5	0.5	75	50	14	11	65	542	26	21	1,395	90,765	121	22.7	1,214
Topical Products	0.5	0.1	0.1	0.2	16	8	4	4	35	55	43	18	1,378	48,083	278	52.3	3,042
Miscellaneous Products	1.3	0.6	0.0	0.6	188	143	0	45	145	221	0	70	44	6,399	3	0.6	34
Unknown Therapeutic Category	0.6	0.0	0.0	0.0	28	0	0	0	48	0	0	0	1,781	84,741	292	54.9	3,003
<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.	31,108	1,581,119	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 9 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 313 beneficiaries who were in nursing facilities for part of their enrollment and their 2,950 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 1999. 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

In Alaska, 6.4 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.

Table 9

All Medicaid Beneficiaries

Bene Mo(s) = benefit month(s); CMS = Center for Medicare and 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 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>  
 ALASKA, 1999

Top 10 Drug Groups in Nursing Facilities	Users				Among Users		
	Total Medicaid Rx \$	No. of Users	As % of All-Year NF Residents	No. of Bene Mos	No. of Rx per Bene Mo	\$ per Rx	Rx \$ per Bene Mo
ULCER DRUGS	\$189,164	251	47.2 %	2,580	0.8	\$95	\$73
ANTIDEPRESSANTS	173,573	339	63.7	3,438	0.9	55	50
ANTIPSYCHOTICS	124,349	167	31.4	1,769	0.7	101	70
ANTICONVULSANT	76,177	140	26.3	1,489	1.0	54	51
ANTIHYPERTENSIVE	70,923	178	33.5	1,840	0.8	46	39
ANALGESICS - Narcotic	61,749	256	48.1	2,518	0.5	45	25
ANTIASTHMATIC	58,445	181	34.0	1,930	0.6	50	30
MISC. GI	54,814	143	26.9	1,471	0.8	49	37
ANTIDIABETIC	47,004	132	24.8	1,367	0.8	41	34
ANTIPARKINSONIAN	43,028	141	26.5	1,524	0.5	58	28

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 10 includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 313 beneficiaries who were in nursing facilities for part of their enrollment and their 2,950 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 1999. 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 1999 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.



TABLE 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, BOE, AND AGE<sup>a, b, c, d</sup> ALASKA, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ULCER DRUGS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	No. of Users	Residents	Mean No. of Rx	No. of Users	Residents	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>14,884</b>	<b>\$899,226</b>	<b>251</b>	<b>47.2 %</b>	<b>0.8</b>	<b>2,580</b>	<b>0.8</b>	<b>\$73</b>	<b>\$73</b>	<b>339</b>	<b>63.7 %</b>	<b>0.9</b>	<b>\$51</b>	<b>3,438</b>	<b>0.9</b>	<b>\$51</b>	
<b>Female</b>	9,248	557,217	155	46.3	0.8	1,619	0.8	70	70	223	66.6	0.9	49	2,225	0.9	49	
<b>Disabled</b>	1,829	129,603	32	46.4	0.8	331	0.8	84	84	49	71.0	0.9	52	516	0.9	52	
64 or younger	1,392	105,719	24	43.6	0.8	256	0.8	80	80	31	56.4	0.9	61	327	0.9	61	
65-74	204	11,790	3	50.0	1.0	32	1.0	89	89	9	150.0	0.8	39	93	0.8	39	
75-84	183	9,282	3	60.0	1.0	26	1.0	141	141	8	160.0	0.9	35	85	0.9	35	
85 and older	50	2,812	2	66.7	1.1	17	1.1	41	41	1	33.3	1.2	14	11	1.2	14	
<b>Other Eligibles</b>	7,419	427,614	123	46.2	0.8	1,288	0.8	66	66	174	65.4	0.9	48	1,709	0.9	48	
64 or younger	338	19,860	3	42.9	1.1	34	1.1	76	76	6	85.7	1.3	58	64	1.3	58	
65-74	1,598	97,643	25	50.0	0.8	256	0.8	67	67	37	74.0	0.9	54	381	0.9	54	
75-84	2,966	179,621	49	49.5	0.8	505	0.8	73	73	71	71.7	0.9	47	678	0.9	47	
85 and older	2,517	130,490	46	41.8	0.7	493	0.7	57	57	60	54.5	1.0	44	586	1.0	44	
<b>Male</b>	5,636	342,009	96	48.7	0.8	961	0.8	80	80	116	58.9	0.9	53	1,213	0.9	53	
<b>Disabled</b>	2,407	150,573	42	62.7	0.7	437	0.7	78	78	42	62.7	0.9	62	449	0.9	62	
64 or younger	1,968	124,455	36	63.2	0.7	367	0.7	73	73	37	64.9	0.9	60	389	0.9	60	
65-74	411	24,446	5	62.5	0.7	60	0.7	100	100	5	62.5	1.1	75	60	1.1	75	
75-84	0	0	0	0.0	0.0	0	0.0	0	0	0	0.0	0.0	0	0	0.0	0	
85 and older	28	1,672	1	50.0	0.8	10	0.8	100	100	0	0.0	0.0	0	0	0.0	0	
<b>Other Eligibles</b>	3,229	191,436	54	41.5	0.8	524	0.8	82	82	74	56.9	0.9	48	764	0.9	48	
64 or younger	48	7,366	0	0.0	0.0	0	0.0	0	0	1	100.0	0.9	107	12	0.9	107	
65-74	984	65,358	17	40.5	0.7	174	0.7	69	69	26	61.9	0.9	54	277	0.9	54	
75-84	1,557	86,486	25	44.6	0.8	238	0.8	91	91	34	60.7	0.9	42	347	0.9	42	
85 and older	640	32,226	12	38.7	0.9	112	0.9	82	82	13	41.9	1.1	45	128	1.1	45	
<b>Unknown</b>	0	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 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 10A includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 313 beneficiaries who were in nursing facilities for part of their enrollment and their 2,950 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 1999. 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 1999 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE 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, BOE, AND AGE<sup>a, b, c, d</sup>  
 ALASKA, 1999

Beneficiary Characteristics	ANTI-PSYCHOTICS						ANTICONVULSANT						ANTI-HYPERTENSIVE					
	Users as %			Users as %			Users as %			Users as %			Users as %			Users as %		
	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx	No. of Users	No. of Bene Mos among Users	Mean No. of Rx
<b>All</b>	167	1,769	0.7	140	1,489	1.0	178	1,840	33.5 %	178	1,840	0.8	178	1,840	0.8	178	1,840	\$39
<b>Female</b>	95	990	0.8	81	880	1.0	97	974	29.0	97	974	0.9	97	974	0.9	97	974	39
<b>Disabled</b>	25	251	0.6	29	310	1.0	15	136	21.7	15	136	1.0	15	136	1.0	15	136	51
64 or younger	18	173	0.7	29	310	0.9	12	120	21.8	12	120	1.0	12	120	1.0	12	120	52
65-74	4	48	0.4	0	0	0.0	2	14	33.3	2	14	1.1	2	14	1.1	2	14	42
75-84	2	24	0.4	0	0	0.0	0	2	20.0	0	2	1.5	0	2	1.5	0	2	65
85 and older	1	6	0.7	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0
<b>Other Eligibles</b>	70	739	0.8	52	570	1.0	82	838	30.8	82	838	0.8	82	838	0.8	82	838	37
64 or younger	3	34	1.1	5	59	0.9	1	11	14.3	1	11	1.7	1	11	1.7	1	11	94
65-74	12	124	1.0	17	164	1.0	23	233	46.0	23	233	0.9	23	233	0.9	23	233	41
75-84	23	240	0.9	20	229	1.1	26	250	26.3	26	250	0.8	26	250	0.8	26	250	37
85 and older	32	341	0.6	10	118	0.7	32	344	29.1	32	344	0.8	32	344	0.8	32	344	31
<b>Male</b>	72	779	0.6	59	609	0.9	81	866	41.1	81	866	0.8	81	866	0.8	81	866	38
<b>Disabled</b>	35	401	0.6	29	320	1.0	24	276	35.8	24	276	0.8	24	276	0.8	24	276	43
64 or younger	33	377	0.6	26	284	1.1	17	196	29.8	17	196	0.7	17	196	0.7	17	196	41
65-74	2	24	1.0	3	36	0.7	5	60	62.5	5	60	1.3	5	60	1.3	5	60	54
75-84	0	0	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	2	20	100.0	2	20	0.8	2	20	0.8	2	20	28
<b>Other Eligibles</b>	37	378	0.7	30	289	0.8	57	590	43.8	57	590	0.8	57	590	0.8	57	590	36
64 or younger	2	24	1.1	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0
65-74	13	134	0.7	11	124	0.8	18	204	42.9	18	204	1.0	18	204	1.0	18	204	42
75-84	13	120	0.7	15	137	0.8	23	232	41.1	23	232	0.7	23	232	0.7	23	232	37
85 and older	9	100	0.5	4	28	0.8	16	154	51.6	16	154	0.7	16	154	0.7	16	154	28
<b>Unknown</b>	0	0	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 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 10B includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 313 beneficiaries who were in nursing facilities for part of their enrollment and their 2,950 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 1999. 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 1999 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

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

TABLE 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, BOE, AND AGE<sup>a, b, c, d</sup>  
 ALASKA, 1999

Beneficiary Characteristics	ANALGESICS - Narcotic					ANTI-ASTHMATIC					MISC. GI							
	Users as %					Users as %					Users as %							
	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	Mean No. of Rx	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$	No. of Users	No. of Bene Users	Mean No. of Rx	Mean Rx \$
<b>All</b>	<b>256</b>	<b>2,518</b>	<b>0.5</b>	<b>\$25</b>	<b>0.5</b>	<b>181</b>	<b>1,930</b>	<b>0.6</b>	<b>\$30</b>	<b>0.6</b>	<b>143</b>	<b>1,471</b>	<b>0.8</b>	<b>\$37</b>				
<b>Female</b>																		
<b>Disabled</b>																		
64 or younger	28	273	0.7	31	0.7	17	183	0.5	28	0.5	12	129	0.8	46				
65-74	19	177	0.7	37	0.7	14	153	0.4	22	0.4	8	89	0.9	53				
75-84	3	32	0.3	16	0.3	2	24	1.0	59	1.0	0	0	0.0	0				
85 and older	4	47	0.9	17	0.9	0	0	0.0	0	0.0	2	23	0.6	45				
<b>Other Eligibles</b>																		
64 or younger	2	17	0.9	38	0.9	1	6	0.3	37	0.3	2	17	0.3	12				
65-74	133	1,333	0.6	27	0.6	90	973	0.6	31	0.6	84	857	0.7	32				
75-84	3	35	1.0	45	1.0	1	12	1.1	38	1.1	4	47	0.6	27				
85 and older	23	224	0.5	16	0.5	23	247	0.4	21	0.4	14	126	0.7	44				
<b>Male</b>																		
<b>Disabled</b>																		
64 or younger	48	481	0.5	25	0.5	42	455	0.7	33	0.7	30	307	0.7	26				
65-74	59	593	0.5	33	0.5	24	259	0.6	37	0.6	36	377	0.7	33				
75-84	95	912	0.5	18	0.5	74	774	0.6	30	0.6	47	485	0.8	45				
85 and older	37	369	0.5	18	0.5	31	352	0.6	30	0.6	25	257	0.9	49				
<b>Other Eligibles</b>																		
64 or younger	33	321	0.5	15	0.5	23	266	0.5	26	0.5	23	243	0.9	51				
65-74	4	48	0.6	37	0.6	7	84	0.7	43	0.7	1	12	0.9	10				
75-84	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	1	2	0.5	19	0.5	1	2	1.0	15				
<b>Unknown</b>																		
	58	543	0.4	19	0.4	43	422	0.7	30	0.7	22	228	0.8	40				
64 or younger	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0				
65-74	16	161	0.4	18	0.4	14	113	0.4	13	0.4	7	79	0.5	27				
75-84	21	195	0.5	25	0.5	20	223	0.9	40	0.9	12	126	0.9	46				
85 and older	21	187	0.4	13	0.4	9	86	0.5	27	0.5	3	23	1.2	58				
	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 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

- a. Table 10C includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 313 beneficiaries who were in nursing facilities for part of their enrollment and their 2,950 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 1999. 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 1999 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).
- BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; Rx = prescription(s) or pharmacy benefit; \$ = Medicaid reimbursement.

TABLE 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, BOE, AND AGE<sup>a, b, c, d</sup>  
 ALASKA, 1999

Beneficiary Characteristics	ANTIDIABETIC					ANTIPARKINSONIAN					Mean Rx \$	All-Year NF Residents	Bene Mos among All-Year NF Residents
	Users as %		No. of Bene		Mean No. of Rx	Users as %		No. of Bene		Mean No. of Rx			
	No. of Users	Residents	NF Residents	All-Year NF Residents		No. of Users	Residents	NF Residents	All-Year NF Residents				
<b>All</b>	132	24.8 %	1,367	0.8	\$34	141	26.5 %	1,524	0.5	\$28	532	5,252	
<b>Female</b>	75	22.4	806	0.9	34	95	28.4	1,040	0.5	33	335	3,332	
<b>Disabled</b>	12	17.4	108	1.0	45	5	7.2	47	0.7	17	69	690	
64 or younger	10	18.2	84	0.8	39	5	9.1	47	0.7	16	55	566	
65-74	1	16.7	12	2.1	112	0	0.0	0	0.0	0	6	53	
75-84	1	20.0	12	1.0	25	0	0.0	0	0.0	0	5	49	
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	3	22	
<b>Other Eligibles</b>	63	23.7	698	0.8	33	90	33.8	993	0.5	33	266	2,642	
64 or younger	1	14.3	12	1.2	14	2	28.6	23	0.6	26	7	69	
65-74	10	20.0	112	1.0	40	17	34.0	172	0.5	37	50	476	
75-84	32	32.3	342	0.8	33	37	37.4	413	0.6	54	99	955	
85 and older	20	18.2	232	0.8	30	34	30.9	385	0.3	9	110	1,142	
<b>Male</b>	57	28.9	561	0.8	34	46	23.4	484	0.5	19	197	1,920	
<b>Disabled</b>	25	37.3	270	0.8	39	10	14.9	106	0.3	10	67	663	
64 or younger	17	29.8	184	0.8	39	8	14.0	82	0.3	12	57	564	
65-74	7	87.5	84	0.9	38	2	25.0	24	0.1	3	8	87	
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0	
85 and older	1	50.0	2	1.0	26	0	0.0	0	0.0	0	2	12	
<b>Other Eligibles</b>	32	24.6	291	0.8	31	36	27.7	378	0.6	22	130	1,257	
64 or younger	0	0.0	0	0.0	0	1	100.0	12	0.9	34	1	12	
65-74	8	19.0	68	0.7	21	7	16.7	78	0.6	21	42	432	
75-84	20	35.7	192	0.9	35	18	32.1	190	0.5	23	56	531	
85 and older	4	12.9	31	0.6	25	10	32.3	98	0.6	18	31	282	
<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 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table 10D includes the beneficiaries represented by Cell D of Table 1, those who resided in nursing facilities throughout their Medicaid enrollment in 1999. A total of 313 beneficiaries who were in nursing facilities for part of their enrollment and their 2,950 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 1999. 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 1999 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/products/product\\_mddb.asp](http://www.Medi-Span.com/products/product_mddb.asp) (May 13 2003).

Bene Mo(s) = benefit month(s); BOE = basis of eligibility; CMS = Center for Medicare and Medicaid Services; MAX = Medicaid Analytic Extract; NF = nursing facility; 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>  
ALASKA, 1999

Beneficiary Characteristics	No. of Benes					No. of Bene Mos						
	All	Aged	Disabled	Adults	Children	Unknown	All	Aged	Disabled	Adults	Children	Unknown
<b>All</b>	<b>103,713</b>	<b>5,989</b>	<b>10,378</b>	<b>25,538</b>	<b>61,808</b>	<b>0</b>	<b>840,549</b>	<b>61,944</b>	<b>107,515</b>	<b>181,402</b>	<b>489,688</b>	<b>0</b>
<b>Age</b>												
5 and younger	25,081	0	281	0	24,800	0	192,818	0	2,654	0	190,164	0
6-14	29,472	0	755	2	28,715	0	244,691	0	8,036	12	236,643	0
15-20	12,098	0	493	3,462	8,143	0	89,856	0	5,056	22,607	62,193	0
21-44	23,962	3	4,164	19,645	150	0	183,381	27	43,413	139,253	688	0
45-64	6,740	21	4,332	2,387	0	0	64,202	193	44,817	19,192	0	0
65-74	3,418	3,054	323	41	0	0	35,144	31,542	3,266	336	0	0
75-84	2,176	2,154	22	0	0	0	22,766	22,546	220	0	0	0
85 and older	765	757	8	0	0	0	7,689	7,636	53	0	0	0
Unknown	1	0	0	1	0	2	0	0	0	2	0	0
<b>Gender</b>												
Female	58,584	3,813	5,203	19,344	30,224	0	472,125	39,801	54,320	138,219	239,785	0
Male	45,129	2,176	5,175	6,194	31,584	0	368,424	22,143	53,195	43,183	249,903	0
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
<b>Race</b>												
White	45,064	2,173	5,930	11,840	25,121	0	363,819	21,511	61,093	83,951	197,264	0
African American	5,784	154	570	1,381	3,679	0	49,035	1,560	5,677	10,607	31,191	0
Other/unknown	52,865	3,662	3,878	12,317	33,008	0	427,695	38,873	40,745	86,844	261,233	0
<b>Use of Nursing Facilities</b>												
All year	532	395	136	1	0	0	5,252	3,898	1,353	1	0	0
Part year	313	217	95	1	0	0	2,950	1,978	963	9	0	0
None	102,868	5,377	10,147	25,536	61,808	0	832,347	56,068	105,199	181,392	489,688	0
<b>Maintenance Assistance Status</b>												
Cash	57,413	5,401	9,764	16,947	25,301	0	513,708	56,485	101,255	133,031	222,937	0
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty related	36,373	7	1	6,049	30,316	0	247,789	66	10	30,982	216,731	0
Other/unknown	9,927	581	613	2,542	6,191	0	79,052	5,393	6,250	17,389	50,020	0
<b>Dual Status<sup>c</sup></b>												
Full dual, all year	9,680	5,424	4,143	113	0	0	100,661	56,280	43,523	858	0	0
Full dual, part year	12	10	2	0	0	0	100	80	20	0	0	0
Non-dual, all year	94,021	555	6,233	25,425	61,808	0	739,788	5,584	63,972	180,544	489,688	0
<b>Managed Care Status</b>												
FFS all year	103,713	5,989	10,378	25,538	61,808	0	840,549	61,944	107,515	181,402	489,688	0
FFS part year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
FFS part year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0	0	0	0	0	0	0
MC all year, no Rx claims	0	0	0	0	0	0	0	0	0	0	0	0

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

a. Table A.1 includes the beneficiaries represented by Cell B of Table 1. Benefit months are months during which beneficiaries had pharmacy benefit.

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. The "Full dual, all year" group contains beneficiaries who had Medicare as well as Medicaid pharmacy benefits during all months of Medicaid enrollment in 1999. The "Full dual, part year" group contains beneficiaries who had such benefits for some, but not all, months of their enrollment. The "Non-dual, all year" group includes beneficiaries who were never dually eligible or dually eligible but never had pharmacy benefits. Refer to footnote g of Table 1 for more information about how we determined dual eligibility status.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and 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  
 ALASKA, 1999

	Bene Mos in Cell B of Table 1		Bene Mos in Cell C of Table 1		Bene Mos in Cell C of Table 1	
	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos	No. of Benes	No. of Bene Mos
<b>All</b>	<b>103,713</b>	<b>840,549</b>	<b>103,713</b>	<b>840,549</b>	<b>0</b>	<b>0</b>
FFS all year	103,713	840,549	103,713	840,549	0	0
FFS part year, with Rx claims	0	0	0	0	0	0
FFS part year, with no Rx claims	0	0	0	0	0	0
MC all year, with Rx claims	0	0	0	0	0	0
MC all year, with no Rx claims	0	0	0	0	0	0

Source: Data for this table are from the MAX 1999 file for Alaska, released by CMS in 10/2003. This table was produced on 06/25/2004.

Bene(s) = beneficiary (or beneficiaries); Bene Mo(s) = benefit month(s); CMS = Center for Medicare and Medicaid Services; FFS = fee-for-service pharmacy benefit; MAX = Medicaid Analytic Extract; MC = managed care; Rx = pharmacy benefit.