

STATISTICAL COMPENDIUM: MEDICAID PHARMACY BENEFIT USE AND REIMBURSEMENT IN 1999 COLORADO

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

Inclusion Criteria (1999)	No. of Dual and Non-dual Eligible Benes (Cell)	No. of Dual Eligible Benes (Cell) ^g
1. Benes who were eligible for Medicaid during at least one month ^a	357,814 (A)	65,503 (E)
2. Benes who had Medicaid pharmacy benefits during at least one month ^b	333,322 (B)	56,434 (F)
3. Benes who had fee-for-service pharmacy benefit coverage during at least one month ^{c, d, e}	140,350 (C)	10,062 (G)
4. Benes who were all-year nursing facility residents ^f	1,994 (D)	1,826 (H)

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 Colorado in 1999 was \$149,460,641, of which \$130,113,726 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 21.0 percent were restricted benefit months without a pharmacy benefit in Colorado, 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^{a,b}
 COLORADO, 1999

Beneficiary Characteristics	No. of Benes						No. of Bene Mos					
	All	Aged	Disabled	Adults	Children	Other/Unknown	All	Aged	Disabled	Adults	Children	Other/Unknown
All	140,350	7,104	11,750	33,734	87,701	21	306,340	18,182	33,593	73,778	180,707	80
Age												
5 and younger	50,636	0	840	0	49,796	0	104,836	0	2,298	0	102,538	0
6-14	29,983	0	926	0	29,057	0	62,146	0	2,573	0	59,573	0
15-20	16,921	0	957	7,118	8,846	0	37,234	0	2,618	16,026	18,590	0
21-44	30,100	0	4,432	25,664	2	2	68,640	0	12,821	55,805	6	8
45-64	5,537	0	4,582	950	0	5	15,125	0	13,171	1,944	0	10
65-74	2,373	2,307	52	1	0	13	6,466	6,295	109	2	0	60
75-84	2,580	2,579	0	1	0	0	6,667	6,666	0	1	0	0
85 and older	2,219	2,218	0	0	0	1	5,223	5,221	0	0	0	2
Unknown	1	0	1	0	0	3	0	0	3	0	0	0
Gender												
Female	85,148	4,811	5,769	30,850	43,703	15	186,932	12,284	16,208	67,963	90,420	57
Male	55,202	2,293	6,021	2,884	43,998	6	119,408	5,898	17,385	5,815	90,287	23
Unknown	0	0	0	0	0	0	0	0	0	0	0	0
Race												
White	65,380	5,172	6,325	17,109	36,759	15	138,622	13,090	17,698	35,552	72,222	60
African American	10,955	216	535	2,737	7,467	0	24,344	592	1,521	6,120	16,111	0
Other/unknown	64,015	1,716	4,930	13,888	43,475	6	143,374	4,500	14,374	32,106	92,374	20
Use of Nursing Facilities												
All year	1,994	1,757	237	0	0	0	4,475	3,871	604	0	0	0
Part year	1,844	1,399	441	2	0	2	5,249	3,851	1,389	4	0	5
None	136,512	3,948	11,112	33,732	87,701	19	296,616	10,460	31,600	73,774	180,707	75
Maintenance Assistance Status												
Cash	57,511	3,170	9,927	16,829	27,576	9	127,133	8,083	27,677	35,453	55,894	26
Medically needy	0	0	0	0	0	0	0	0	0	0	0	0
Poverty-related	66,999	218	249	15,501	51,031	0	144,101	1,278	1,470	34,222	107,131	0
Other/unknown	15,840	3,716	1,614	1,404	9,094	12	35,106	8,821	4,446	4,103	17,682	54
Dual Medicare Status^c												
Full dual, all year	8,900	6,089	2,698	100	2	11	20,376	13,554	6,568	211	4	39
Full dual, part year	1,162	628	528	2	0	4	6,983	3,708	3,235	16	0	24
Non-dual, all year	130,288	387	8,564	33,632	87,699	6	278,981	920	23,790	73,551	180,703	17
Managed Care Status												
FFS all year	23,412	1,444	2,351	7,314	12,295	8	52,441	3,694	7,462	17,348	23,889	48
FFS part year, with Rx claims	52,894	4,249	6,124	15,411	27,101	9	115,303	10,739	16,348	33,347	54,845	24
FFS part year, no Rx claims	64,044	1,411	3,315	11,009	48,305	4	138,596	3,749	9,783	23,083	101,973	8

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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^{a, b}
 COLORADO, 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 \$ ^c	No. of Benefes
All	39.4 %	3.6	\$138	\$38	\$2,731	5.0 %	\$2	140,350
Age								
5 and younger	32.8	1.2	24	20	1,756	1.4	0	50,636
6-14	27.4	1.4	51	37	1,140	4.5	0	29,983
15-20	46.7	2.6	106	41	3,521	3.0	1	16,921
21-44	50.0	4.2	183	43	2,986	6.1	2	30,100
45-64	56.5	15.3	741	49	7,646	9.7	11	5,537
65-74	58.5	18.8	693	37	6,363	10.9	12	2,373
75-84	62.8	22.9	780	34	9,682	8.1	12	2,580
85 and older	64.7	22.3	695	31	12,797	5.4	5	2,219
Unknown	0.0	0.0	0	0	0	0.0	0	1
Basis of Eligibility								
Aged	62.0	21.4	726	34	9,574	7.6	10	7,104
Disabled	53.9	12.3	681	56	8,286	8.2	8	11,790
Adults	50.2	2.9	86	30	2,072	4.1	1	33,734
Children	31.5	1.3	37	28	1,684	2.2	0	87,701
Unknown	52.4	19.0	885	47	4,371	20.2	6	21
Gender								
Female	42.7	4.0	139	35	2,591	5.4	2	85,148
Male	34.4	3.1	136	44	2,948	4.6	1	55,202
Unknown	0.0	0.0	0	0	0	0.0	0	0
Race								
White	45.4	5.1	197	38	3,256	6.1	2	65,380
African American	31.7	2.0	72	36	2,144	3.4	1	10,955
Other/unknown	34.6	2.4	89	37	2,296	3.9	1	64,015
Use of Nursing Facilities								
Entire year	67.9	29.5	1,055	36	19,834	5.3	11	1,994
Part year	77.8	33.3	1,255	38	20,009	6.3	12	1,844
None	38.5	2.9	109	38	2,248	4.9	1	136,512
Maintenance Assistance Status								
Cash	38.9	4.3	180	42	2,600	6.9	2	57,511
Medically needy	0.0	0.0	0	0	0	0.0	0	0
Poverty related	37.2	1.5	36	24	1,646	2.2	0	66,999
Other/unknown	50.8	10.3	415	40	7,801	5.3	5	15,840

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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^{a,b}
 COLORADO, 1999

Beneficiary Characteristics	Mean No. of Rx	Mean Rx \$	Rx \$ as % of All Services	No. of Rx, % with:					Mean \$, All Services	Benes	Bene Mos	
				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
All	1.7	\$63	5.0 %	60.6 %	16.8 %	6.7 %	7.6 %	3.8 %	4.6 %	\$1,251	140,350	306,340
Age												
5 and younger	0.6	12	1.4	67.2	17.3	6.2	6.1	2.2	0.9	848	50,636	104,836
6-14	0.7	25	4.5	72.6	13.6	4.9	5.1	2.1	1.7	550	29,983	62,146
15-20	1.2	48	3.0	53.3	21.4	8.8	9.9	4.0	2.6	1,600	16,921	37,234
21-44	1.8	80	6.1	50.0	20.2	9.0	10.6	5.3	5.0	1,309	30,100	68,640
45-64	5.6	271	9.7	43.5	9.8	5.0	10.8	9.4	21.5	2,799	5,537	15,125
65-74	6.9	254	10.9	41.5	8.6	4.6	9.3	10.6	25.5	2,335	2,373	6,466
75-84	8.9	302	8.1	37.2	6.0	3.7	8.6	11.0	33.4	3,747	2,580	6,667
85 and older	9.5	295	5.4	35.3	4.1	3.7	9.6	11.7	35.6	5,437	2,219	5,223
Unknown	0.0	0	0.0	100.0	0.0	0.0	0.0	0.0	0.0	0	1	3
Basis of Eligibility												
Aged	8.4	284	7.6	38.0	6.3	4.0	9.1	11.1	31.5	3,741	7,104	18,182
Disabled	4.3	239	8.2	46.1	11.9	5.6	10.6	8.7	17.2	2,908	11,790	33,593
Adults	1.3	39	4.1	49.8	22.4	9.7	10.6	4.5	2.9	948	33,734	73,778
Children	0.7	18	2.2	68.5	16.1	5.9	5.9	2.3	1.3	817	87,701	180,707
Unknown	5.0	232	20.2	47.6	4.8	9.5	9.5	14.3	14.3	1,147	21	80
Gender												
Female	1.8	63	5.4	57.3	18.1	7.4	8.3	4.0	4.9	1,180	85,148	186,932
Male	1.4	63	4.6	65.6	14.7	5.6	6.6	3.5	4.0	1,363	55,202	119,408
Unknown	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Race												
White	2.4	93	6.1	54.6	17.2	7.6	9.0	4.8	6.7	1,536	65,380	138,622
African American	0.9	32	3.4	68.3	15.8	5.4	5.7	2.7	2.0	965	10,955	24,344
Other/unknown	1.1	40	3.9	65.4	16.4	5.9	6.6	2.9	2.8	1,025	64,015	143,374
Use of Nursing Facilities												
Entire year	13.2	470	5.3	32.1	2.4	2.7	7.9	12.2	42.8	8,838	1,994	4,475
Part year	11.7	441	6.3	22.2	5.5	4.1	10.3	14.0	43.9	7,029	1,844	5,249
None	1.3	50	4.9	61.5	17.1	6.8	7.6	3.5	3.5	1,035	136,512	296,616
Maintenance Assistance Status												
Cash	1.9	82	6.9	61.1	14.9	6.1	7.8	4.3	5.8	1,176	57,511	127,133
Medically needy	0.0	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0	0	0
Poverty related	0.7	17	2.2	62.8	19.5	7.3	7.0	2.4	1.0	765	66,999	144,101
Other/unknown	4.6	187	5.3	49.2	11.9	6.1	9.9	7.6	15.4	3,520	15,840	35,106

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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^{a, b, c}
 COLORADO, 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 \$
All	1.7	\$63	0.5	\$38	0.2	\$10	0.9	\$13
Age								
5 and younger	0.6	12	0.1	6	0.0	1	0.4	4
6-14	0.7	25	0.2	15	0.0	3	0.4	6
15-20	1.2	48	0.4	29	0.1	8	0.6	11
21-44	1.8	80	0.5	50	0.2	12	1.0	15
45-64	5.6	271	2.0	172	0.7	40	2.7	49
65-74	6.9	254	2.4	151	1.1	44	3.1	50
75-84	8.9	302	2.9	174	1.8	59	3.9	58
85 and older	9.5	295	2.8	164	2.1	56	4.2	64
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Basis of Eligibility								
Aged	8.4	284	2.7	163	1.6	53	3.7	57
Disabled	4.3	239	1.5	155	0.6	35	2.1	41
Adults	1.3	39	0.3	22	0.1	6	0.8	10
Children	0.7	18	0.2	11	0.0	2	0.4	5
Unknown	5.0	232	2.1	153	0.8	26	1.9	40
Gender								
Female	1.8	63	0.6	38	0.2	10	0.9	13
Male	1.4	63	0.5	39	0.2	9	0.8	13
Unknown	0.0	0	0.0	0	0.0	0	0.0	0
Race								
White	2.4	93	0.8	56	0.3	15	1.2	19
African American	0.9	32	0.3	21	0.1	4	0.5	7
Other/unknown	1.1	40	0.3	24	0.1	5	0.6	9
Use of Nursing Facilities								
Entire year	13.2	470	4.2	273	2.6	88	5.9	94
Part year	11.7	441	3.6	263	2.4	79	5.3	85
None	1.3	50	0.4	31	0.1	7	0.7	11
Maintenance Assistance								
Status								
Cash	1.9	82	0.6	51	0.2	12	1.0	16
Medically needy	0.0	0	0.0	0	0.0	0	0.0	0
Poverty related	0.7	17	0.2	9	0.1	2	0.4	5
Other/unknown	4.6	187	1.6	114	0.8	32	2.1	35

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 Colorado, 4.5 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.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^{a, b, c, d}
 COLORADO, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users				\$ per Bene Mo among Users				Total No. of Rx	Total Rx \$	No.	As % of All Benes	No. of Bene Mos				
	Patented		Off-Patent		Patented		Off-Patent										
	Total	Brand-Name	Generic	Total	Brand-Name	Generic	Total	Brand-Name						Generic			
Anti-infective Agents	1.0	0.4	0.0	0.6	\$36	\$29	\$1	\$7	\$36	\$78	\$59	\$11	69,874	\$2,494,802	31,634	22.5%	68,438
Biologics	0.7	0.6	0.0	0.1	570	569	0	1	841	916	0	10	120	100,893	74	0.1	177
Antineoplastic Agents	1.6	0.6	0.4	0.6	258	183	47	29	157	281	130	45	1,567	245,363	367	0.3	951
Endocrine/Metabolic Drugs	2.0	0.8	0.4	0.8	53	34	8	10	27	43	22	12	41,864	1,109,695	9,015	6.4	21,044
Cardiovascular Agents	3.7	1.1	0.8	1.8	96	48	24	24	26	46	32	13	61,627	1,617,994	6,738	4.8	16,883
Respiratory Agents	1.5	0.6	0.1	0.9	46	30	2	15	30	51	23	17	51,271	1,547,603	15,458	11.0	33,293
Gastrointestinal Agents	1.8	0.8	0.3	0.8	118	81	20	17	65	104	71	22	25,452	1,647,568	5,921	4.2	13,949
Genitourinary Agents	0.9	0.6	0.0	0.3	26	22	0	4	30	36	24	17	10,224	306,730	5,114	3.6	11,671
CNS Drugs	2.8	1.3	0.4	1.1	173	118	39	17	61	92	90	15	68,867	4,225,378	10,188	7.3	24,399
Stimulants/Anti-obesity/Anorexia	2.5	0.3	0.3	1.9	90	10	16	63	35	38	50	33	7,795	275,372	1,469	1.0	3,068
Miscellaneous Psychological/Neurological Agents	1.8	1.2	0.0	0.5	170	160	1	10	95	129	50	18	1,605	152,832	381	0.3	899
Analgesics and Anesthetics	1.7	0.3	0.1	1.3	49	27	8	13	29	93	57	11	54,104	1,575,341	13,817	9.8	31,934
Neuromuscular Agents	2.4	0.9	0.3	1.2	112	74	13	25	47	85	41	20	29,390	1,371,077	5,068	3.6	12,275
Nutritional Products	1.1	0.0	0.3	0.8	26	2	8	17	24	89	25	21	23,173	544,810	8,949	6.4	20,850
Hematological Agents	3.0	0.3	1.7	1.0	152	75	36	41	51	285	21	42	12,749	655,685	1,720	1.2	4,306
Topical Products	1.0	0.2	0.1	0.7	21	10	3	8	21	49	31	12	31,082	662,641	14,786	10.5	30,915
Miscellaneous Products	1.9	0.4	0.3	1.2	192	99	67	26	101	259	220	22	1,538	155,125	324	0.2	806
Unknown Therapeutic Category	1.1	0.0	0.0	0.0	36	0	0	0	34	0	0	0	19,581	658,006	8,068	5.7	18,070
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	511,883	19,346,915	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 (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 Colorado, 4.5 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 (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^{a, b, c}
 COLORADO, 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	
ANTIDEPRESSANTS	\$273,579	1,332 0.9 %	3,954	1.2	\$57	\$69	
ANTIPSYCHOTICS	254,119	669 0.5	2,024	1.2	101	126	
ULCER DRUGS	151,821	765 0.5	2,147	1.1	67	71	
ANTICONVULSANT	146,814	623 0.4	1,914	1.4	56	77	
ANTIASTHMATIC	133,499	1,765 1.3	4,815	0.9	30	28	
ANALGESICS - Narcotic	130,146	2,379 1.7	6,500	0.9	23	20	
MULTIVITAMINS	97,078	3,069 2.2	7,594	0.7	19	13	
ANTIVIRAL	85,425	170 0.1	541	0.8	201	158	
ANTIDIABETIC	73,835	510 0.4	1,550	1.4	34	48	
ANTIHYPERTENSIVE	73,302	644 0.5	2,045	1.2	29	36	

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 (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^{a,b,c}
 COLORADO, 1999

Beneficiary Characteristics	All Top 10 Drug Groups				ANTIDEPRESSANTS				ANTIPSYCHOTICS			
	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 \$
All	32,511	\$1,419,618	1,332	0.9 %	3,954	1.2	\$69	669	0.5 %	2,024	1.2	\$126
Female	22,055	829,815	890	1.0	2,554	1.2	72	358	0.4	960	1.2	111
Disabled	5,549	299,997	283	4.9	909	1.2	69	136	2.4	404	1.3	150
5 and younger	95	4,026	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	83	3,095	5	1.4	21	0.2	10	0	0.0	0	0.0	0
15-20	160	8,674	6	1.5	18	1.1	40	10	2.5	27	1.0	66
21-44	1,941	113,992	124	6.0	358	1.2	75	70	3.4	218	1.2	141
45-64	3,226	168,479	148	5.9	512	1.1	68	56	2.2	159	1.5	175
65-74	44	1,731	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
Other Eligibles	16,506	529,818	607	0.8	1,645	1.3	73	222	0.3	556	1.2	83
5 and younger	390	7,523	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	769	31,139	47	0.3	129	1.5	77	11	0.1	22	2.7	215
15-20	3,029	77,727	92	0.8	263	1.1	72	45	0.4	101	1.1	64
21-44	7,120	187,618	263	1.1	627	1.0	66	99	0.4	247	0.8	40
45-64	282	13,961	17	2.7	41	2.1	134	1	0.2	4	0.5	62
65-74	1,618	75,140	56	3.9	186	1.4	76	12	0.8	42	1.8	201
75-84	1,876	78,068	74	4.4	239	1.4	68	34	2.0	93	1.4	107
85 and older	1,422	58,642	58	3.4	160	1.8	88	20	1.2	47	1.6	139
Male	10,456	589,803	442	0.8	1,400	1.2	65	311	0.6	1,064	1.3	139
Disabled	4,873	352,520	183	3.0	612	1.1	65	157	2.6	607	1.2	156
5 and younger	102	3,394	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	403	21,387	16	2.8	47	1.6	99	20	3.4	100	0.7	68
15-20	209	16,034	12	2.2	44	0.8	39	11	2.0	41	1.3	180
21-44	1,920	173,730	75	3.2	255	1.1	61	75	3.2	300	1.1	170
45-64	2,226	137,353	80	3.9	266	1.2	67	50	2.4	165	1.6	178
65-74	13	622	0	0.0	0	0.0	0	1	4.3	1	3.0	56
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
Other Eligibles	5,583	237,283	259	0.5	788	1.2	65	154	0.3	457	1.3	116
5 and younger	545	13,419	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1,149	52,825	62	0.4	174	1.2	57	35	0.2	88	1.9	228
15-20	914	52,101	92	2.2	265	1.1	74	54	1.3	191	1.3	99
21-44	481	16,267	20	0.9	52	1.0	54	16	0.7	27	0.9	42
45-64	135	7,802	7	2.2	13	2.2	172	2	0.6	5	0.8	40
65-74	893	39,315	26	2.9	119	1.1	52	12	1.3	29	1.9	194
75-84	932	35,323	36	4.1	116	1.4	58	22	2.5	69	1.1	53
85 and older	534	20,231	16	3.0	49	1.8	74	13	2.5	48	0.9	55
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 (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^{a, b, c}
 COLORADO, 1999

Beneficiary Characteristics	ULCER DRUGS				ANTICONVULSANT				ANTIASTHMATIC						
	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	No. of Rx	Mean Rx \$	
All	765	0.5 %	2,147	1.1	\$71	623	0.4 %	1,914	1.4	\$77	1,765	1.3 %	4,815	0.9	\$28
Female	511	0.6	1,392	1.1	71	343	0.4	951	1.4	72	1,067	1.3	2,951	0.9	27
Disabled	141	2.4	424	1.1	81	175	3.0	523	1.4	74	224	3.9	810	0.8	29
5 and younger	8	2.0	24	0.9	45	6	1.5	22	0.9	32	18	4.5	78	0.6	29
6-14	1	0.3	1	1.0	70	4	1.2	8	2.9	143	21	6.1	70	0.6	21
15-20	5	1.2	17	0.5	35	11	2.7	40	1.1	94	9	2.2	32	0.6	13
21-44	45	2.2	118	1.1	83	72	3.5	205	1.5	83	62	3.0	219	0.7	22
45-64	79	3.1	260	1.1	85	82	3.3	248	1.2	65	112	4.5	407	0.9	34
65-74	3	10.3	4	3.5	250	0	0.0	0	0.0	0	2	6.9	4	5.8	149
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
Other Eligibles	370	0.5	968	1.1	66	168	0.2	428	1.5	68	843	1.1	2,141	1.0	26
5 and younger	52	0.2	103	0.9	20	5	0.0	12	0.8	29	135	0.6	337	0.8	14
6-14	12	0.1	30	0.5	23	29	0.2	63	1.3	90	136	0.9	316	0.9	24
15-20	35	0.3	101	0.6	23	30	0.3	80	1.2	53	131	1.1	344	0.8	16
21-44	112	0.5	258	0.8	51	55	0.2	139	1.2	67	306	1.3	723	0.9	22
45-64	7	1.1	16	1.2	69	5	0.8	14	1.1	53	6	0.9	12	1.9	65
65-74	57	4.0	176	1.1	80	12	0.8	37	2.5	112	57	4.0	193	1.2	45
75-84	54	3.2	167	1.3	94	19	1.1	51	2.2	64	38	2.2	129	1.7	67
85 and older	41	2.4	117	1.9	125	13	0.8	32	1.7	46	34	2.0	87	1.7	47
Male	254	0.5	755	1.1	71	280	0.5	963	1.3	82	698	1.3	1,864	0.9	29
Disabled	103	1.7	333	1.2	87	178	3.0	654	1.4	88	156	2.6	521	0.8	28
5 and younger	13	3.0	36	0.8	15	3	0.7	11	1.2	81	17	3.9	58	0.8	27
6-14	2	0.3	5	0.4	37	28	4.8	114	1.1	59	19	3.3	49	0.9	30
15-20	6	1.1	21	0.8	60	13	2.4	43	1.3	101	3	0.5	12	1.6	36
21-44	31	1.3	108	1.4	111	79	3.3	303	1.3	90	37	1.6	122	0.7	22
45-64	49	2.4	157	1.2	95	55	2.7	183	1.7	99	77	3.7	275	0.9	30
65-74	2	8.7	6	0.3	27	0	0.0	0	0.0	0	3	13.0	5	0.8	31
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
Other Eligibles	151	0.3	422	1.0	58	102	0.2	309	1.2	69	542	1.1	1,343	1.0	29
5 and younger	60	0.2	142	0.7	23	3	0.0	7	1.4	26	196	0.8	463	0.8	16
6-14	12	0.1	35	0.6	29	21	0.1	53	1.5	97	173	1.2	397	1.0	33
15-20	12	0.3	27	0.9	42	37	0.9	126	1.0	69	47	1.1	114	0.7	19
21-44	14	0.6	26	1.1	85	12	0.5	24	1.0	52	17	0.7	40	1.1	36
45-64	9	2.8	20	1.2	81	1	0.3	2	3.0	181	3	0.9	6	3.0	191
65-74	19	2.1	80	1.0	70	13	1.5	59	1.0	57	50	5.6	144	1.0	33
75-84	18	2.0	66	1.2	89	11	1.3	26	2.3	75	36	4.1	119	1.2	42
85 and older	7	1.3	26	2.5	146	4	0.8	12	1.2	41	20	3.8	60	2.1	74
Unknown	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 Colorado, released by CMS in 9/2003. 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 (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 BENEFIT MONTH FOR SIXTH TO EIGHTH TOP DRUG GROUPS SEPARATELY,
 BY SEX, BOE, AND AGE^{a, b, c}
 COLORADO, 1999

Beneficiary Characteristics	ANALGESICS - Narcotic				MULTIVITAMINS				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 \$
All	2,379	1.7 %	6,500	0.9	\$20	3,069	2.2 %	7,594	0.7	\$13	170	0.1 %	541	0.8	\$155
Female	1,845	2.2	4,877	0.8	17	3,059	3.6	7,572	0.7	13	103	0.1	310	0.6	72
Disabled	357	6.2	1,043	1.1	35	21	0.4	65	0.6	8	23	0.4	81	0.7	151
5 and younger	1	0.2	5	0.2	2	0	0.0	0	0.0	0	1	0.2	1	1.0	5
6-14	2	0.6	7	0.4	3	0	0.0	0	0.0	0	2	0.6	5	0.4	19
15-20	10	2.5	22	1.0	38	4	1.0	12	0.4	7	0	0.0	0	0.0	0
21-44	152	7.3	415	1.0	31	14	0.7	48	0.6	8	8	0.4	26	0.9	196
45-64	191	7.6	591	1.3	39	3	0.1	5	1.4	12	12	0.5	49	0.7	144
65-74	1	3.4	3	0.3	2	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
Other Eligibles	1,488	1.9	3,834	0.8	12	3,038	3.8	7,507	0.7	13	80	0.1	229	0.6	45
5 and younger	16	0.1	45	0.4	4	1	0.0	2	2.0	31	3	0.0	7	0.6	17
6-14	40	0.3	92	0.6	4	13	0.1	41	0.5	9	4	0.0	13	0.7	16
15-20	279	2.4	704	0.5	3	1,146	9.7	2,844	0.6	12	15	0.1	40	0.6	47
21-44	929	4.0	2,337	0.7	8	1,868	8.0	4,599	0.7	13	48	0.2	133	0.6	57
45-64	29	4.6	60	1.2	65	6	0.9	16	0.8	15	1	0.2	2	1.0	23
65-74	61	4.3	205	1.3	42	2	0.1	2	1.5	39	2	0.1	10	0.3	13
75-84	80	4.7	218	1.4	31	1	0.1	1	1.0	7	1	0.1	3	0.3	9
85 and older	54	3.2	173	1.2	33	1	0.1	2	1.5	13	6	0.4	21	0.3	8
Male	534	1.0	1,623	0.9	30	10	0.0	22	1.0	17	67	0.1	231	1.0	273
Disabled	221	3.7	766	1.0	44	4	0.1	8	1.1	21	49	0.8	177	1.2	343
5 and younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
6-14	1	0.2	2	0.5	11	0	0.0	0	0.0	0	1	0.2	8	0.4	5
15-20	6	1.1	24	0.5	18	0	0.0	0	0.0	0	0	0.0	0	0.0	0
21-44	113	4.8	382	0.9	42	3	0.1	7	1.0	19	39	1.7	142	1.0	313
45-64	101	4.9	358	1.1	48	1	0.0	1	2.0	35	9	0.4	27	2.3	602
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
Other Eligibles	313	0.6	857	0.8	17	6	0.0	14	1.0	14	18	0.0	54	0.5	41
5 and younger	23	0.1	55	0.5	4	4	0.0	9	0.6	5	7	0.0	20	0.6	71
6-14	48	0.3	116	0.5	4	0	0.0	0	0.0	0	0	0.0	0	0.0	0
15-20	50	1.2	129	0.5	4	1	0.0	2	0.5	4	1	0.0	1	1.0	21
21-44	94	4.1	246	0.9	16	0	0.0	0	0.0	0	2	0.1	3	0.7	66
45-64	18	5.7	34	1.0	32	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	39	4.4	164	1.0	30	0	0.0	0	0.0	0	0	0.0	0	0.0	0
75-84	31	3.5	90	1.2	32	1	0.1	3	1.0	14	3	0.3	18	0.2	17
85 and older	10	1.9	23	1.9	32	0	0.0	0	0.0	0	5	1.0	12	0.4	18
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Table 7C

All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 (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^{a, b, c}
 COLORADO, 1999

Beneficiary Characteristics	ANTIDIABETIC					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
	510	0.4 %	1,550	1.4	\$48	644	0.5 %	2,045	1.2	\$36	140,350	306,340
Female												
Disabled												
5 and younger	110	1.9	377	1.2	48	120	2.1	397	1.0	33	5,768	16,205
6-14	0	0.0	0	0.0	0	1	0.2	6	0.2	1	402	1,111
15-20	3	0.7	9	1.7	56	2	0.6	3	2.0	13	345	908
21-44	27	1.3	74	1.4	59	23	1.1	67	0.9	34	2,069	5,854
45-64	80	3.2	294	1.1	46	94	3.7	321	1.0	33	2,515	7,168
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	29	60
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
Other Eligibles												
5 and younger	230	0.3	612	1.7	54	247	0.3	777	1.3	38	79,379	170,724
6-14	4	0.0	7	2.6	102	2	0.0	5	0.6	5	24,290	50,057
15-20	5	0.0	9	3.6	126	8	0.1	21	2.7	39	14,439	29,671
21-44	79	0.3	202	1.4	49	40	0.2	88	1.0	14	11,806	26,167
45-64	6	0.9	19	1.3	39	11	1.7	22	1.2	24	23,386	51,218
65-74	49	3.4	134	1.7	58	67	4.7	261	1.0	31	637	1,284
75-84	62	3.6	170	1.4	48	58	3.4	221	1.3	42	1,700	3,939
85 and older	25	1.5	71	2.5	68	53	3.1	140	1.8	50	1,694	4,444
Male												
Disabled												
5 and younger	88	1.5	293	1.1	33	107	1.8	356	1.2	36	6,021	17,385
6-14	0	0.0	0	0.0	0	4	0.9	17	0.5	4	438	1,187
15-20	1	0.2	4	1.5	39	18	3.1	75	1.0	18	581	1,665
21-44	0	0.0	0	0.0	0	4	0.7	12	1.3	40	549	1,514
45-64	15	0.6	54	1.4	39	20	0.8	81	1.1	32	2,363	6,967
65-74	72	3.5	235	1.1	31	61	3.0	171	1.3	48	2,067	6,003
75-84	0	0.0	0	0.0	0	0	0.0	0	0.0	0	23	49
85 and older	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0
Other Eligibles												
5 and younger	82	0.2	268	1.4	48	170	0.3	515	1.4	35	49,181	102,023
6-14	1	0.0	3	1.3	36	3	0.0	13	1.0	10	25,506	52,481
15-20	7	0.0	18	1.2	35	43	0.3	122	1.5	20	14,618	29,902
21-44	3	0.1	14	0.9	40	14	0.3	48	1.1	14	4,158	8,449
45-64	10	0.4	27	1.7	65	10	0.4	16	2.4	94	2,282	4,601
65-74	7	2.2	17	0.8	38	3	0.9	7	1.1	65	318	670
75-84	24	2.7	99	1.1	42	35	3.9	125	1.3	38	894	2,418
85 and older	18	2.0	49	2.7	86	43	4.9	133	1.3	36	880	2,223
Unknown												
	0	0.0	0	0.0	0	0	0.0	0	0.0	0	1	3

Table 7D

All Medicaid Beneficiaries

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 (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^{a, b}
 COLORADO, 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
All	\$470	13.2	1,994	4,475
Age				
0-64	740	15.3	233	597
65-74	508	14.0	250	602
75-84	412	12.7	639	1,443
85 and older	416	12.5	872	1,833
Unknown	0	0.0	0	0
Gender				
Female	478	13.8	1,273	2,764
Male	458	12.1	721	1,711
Unknown	0	0.0	0	0
Race				
White	456	13.5	1,633	3,596
African American	399	10.8	49	126
Other/unknown	549	12.1	312	753
Basis of Eligibility				
Aged	429	12.8	1,757	3,871
Disabled	734	15.2	237	604
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 1999 file for Colorado, released by CMS in 9/2003. 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 1,844 beneficiaries who were in nursing facilities for part of their enrollment and their 5,249 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^{a, b, c, d, e}
 COLORADO, 1999

Therapeutic Category	No. of Rx per Bene Mo among Users			\$ per Bene Mo among Users			Total # of Rx			Total 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	Generic	Total	Total Rx \$	No.	As % of All-Year NF Residents			
														No.	%		
Anti-infective Agents	1.4	0.8	0.0	0.6	\$86	\$71	\$7	\$7	\$61	\$94	\$154	\$12	2,674	835	41.9	%	
Biologicals	0.4	0.0	0.0	0.4	6	0	0	6	15	0	0	15	2	2	0.1		
Antineoplastic Agents	2.0	0.7	0.4	0.9	266	185	45	37	133	248	120	42	257	58	2.9		
Endocrine/Metabolic Drugs	4.1	1.6	0.7	1.8	86	58	9	19	21	36	12	11	5,494	602	30.2		
Cardiovascular Agents	5.9	1.5	1.4	3.0	127	56	37	34	22	38	26	11	12,009	897	45.0		
Respiratory Agents	3.8	1.3	0.1	2.3	121	59	2	60	32	45	18	26	3,499	402	20.2		
Gastrointestinal Agents	3.2	1.0	0.6	1.6	159	86	40	32	50	88	63	21	4,272	579	29.0		
Genitourinary Agents	2.1	1.0	0.0	1.0	74	56	1	17	36	55	30	17	1,109	240	12.0		
CNS Drugs	4.5	2.3	0.6	1.6	260	189	50	21	57	82	85	13	9,377	895	44.9		
Stimulants/Anti-obesity/Anorexia	3.2	0.0	0.0	3.2	41	0	0	41	13	0	0	13	119	16	0.8		
Miscellaneous Psychological/Neurological Agents	2.1	2.0	0.0	0.1	239	238	0	1	113	117	0	10	402	82	4.1		
Analgesics and Anesthetics	3.3	1.0	0.4	2.0	93	60	14	19	28	63	40	9	4,792	628	31.5		
Neuromuscular Agents	4.1	1.3	0.9	1.9	164	85	45	34	40	63	49	18	4,041	413	20.7		
Nutritional Products	2.6	0.1	0.9	1.6	82	1	19	63	32	14	21	39	2,760	468	23.5		
Hematological Agents	5.4	0.3	3.9	1.1	103	41	45	17	19	124	11	15	3,820	312	15.6		
Topical Products	1.7	0.6	0.3	0.8	47	27	10	10	28	49	31	12	2,010	527	26.4		
Miscellaneous Products	1.5	0.0	0.0	1.5	21	4	0	18	14	72	0	12	183	51	2.6		
Unknown Therapeutic Category	2.1	0.0	0.0	0.0	68	0	0	0	32	0	0	0	2,057	434	21.8		
TOTAL NO. OF RX AND RX \$	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	n.a.	58,897	n.a.	n.a.	n.a.	n.a.

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 1,844 beneficiaries who were in nursing facilities for part of their enrollment and their 5,249 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 (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 (May 13 2003). In Colorado, 4.5 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^{a, b, c, d}
 COLORADO, 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
ANTIPSYCHOTICS	\$45,448	87	4.4 %	253	1.9	\$95	\$180
ANTIDEPRESSANTS	34,147	129	6.5	375	1.8	50	91
ULCER DRUGS	23,033	65	3.3	173	2.1	63	133
ANTICONVULSANT	16,241	51	2.6	151	2.5	43	108
ANALGESICS - Narcotic	12,063	91	4.6	231	1.9	27	52
ANTIHYPERTENSIVE	11,991	72	3.6	174	2.3	30	69
ANTIASTHMATIC	13,394	76	3.8	204	1.9	34	66
ANTIPARKINSONIAN	5,947	32	1.6	77	2.1	37	77
ANTIIDIABETIC	10,189	57	2.9	149	2.5	27	68
MINERALS & ELECTROLYTES	7,514	83	4.2	238	1.7	18	32

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 1,844 beneficiaries who were in nursing facilities for part of their enrollment and their 5,249 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 (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^{a, b, c, d} COLORADO, 1999

Beneficiary Characteristics	All Top 10 Drug Groups					ANTIPSYCHOTICS					ANTIDEPRESSANTS						
	No. of Rx	Rx \$	No. of Users	Residents	of All-Year NF Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	of All-Year NF Mos among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	of All-Year NF Mos among Users	Mean No. of Rx	Mean Rx \$
All	4,081	\$179,967	87	4.4 %	253	1.9	\$180	129	6.5 %	375	1.8	\$91					
Female	2,382	100,801	41	3.2	115	1.9	194	83	6.5	224	1.9	101					
Disabled	404	24,084	7	8.0	25	3.5	378	12	13.6	43	1.7	103					
64 or younger	404	24,084	7	8.0	25	3.5	378	12	13.6	43	1.7	103					
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					
Other Eligibles	1,978	76,717	34	2.9	90	1.5	143	71	6.0	181	2.0	100					
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	342	14,977	4	3.1	12	2.1	268	11	8.5	33	2.1	94					
75-84	811	30,975	17	4.4	46	1.4	114	34	8.7	87	1.7	88					
85 and older	825	30,765	13	2.0	32	1.5	138	26	3.9	61	2.4	121					
Male	1,699	79,166	46	6.4	138	1.8	168	46	6.4	151	1.7	77					
Disabled	548	35,135	21	14.1	61	2.5	273	8	5.4	33	1.4	75					
64 or younger	545	35,025	20	13.8	60	2.5	277	8	5.5	33	1.4	75					
65-74	3	110	1	25.0	1	2.0	8	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					
Other Eligibles	1,151	44,031	25	4.4	77	1.3	85	38	6.6	118	1.7	78					
64 or younger	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					
65-74	271	10,681	5	4.3	10	2.3	174	9	7.8	29	1.6	85					
75-84	520	19,264	11	4.4	37	1.4	73	20	8.0	62	1.6	72					
85 and older	360	14,086	9	4.3	30	0.9	69	9	4.3	27	2.2	82					
Unknown	0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0					

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 1,844 beneficiaries who were in nursing facilities for part of their enrollment and their 5,249 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 (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^{a, b, c, d}
 COLORADO, 1999

Beneficiary Characteristics	ULCER DRUGS					ANTICONVULSANT					ANALGESICS - Narcotic				
	Users as %			Mean		Users as %			Mean		Users as %			Mean	
	No. of Users	No. of Bene Mos among Users	No. of Bene NF Residents	Mean Rx	No. of Rx	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean Rx	No. of Rx	No. of Users	No. of Bene NF Residents	No. of Bene Mos among Users	Mean Rx	No. of Rx
All	65	3.3 %	173	2.1	\$133	51	2.6 %	151	2.5	\$108	91	4.6 %	231	1.9	\$52
Female	40	3.1	103	2.1	123	31	2.4	82	2.5	89	60	4.7	146	2.2	58
Disabled	5	5.7	8	3.0	272	7	8.0	14	3.1	144	6	6.8	19	2.6	99
64 or younger	5	5.7	8	3.0	272	7	8.0	14	3.1	144	6	6.8	19	2.6	99
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
Other Eligibles	35	3.0	95	2.0	110	24	2.0	68	2.4	77	54	4.6	127	2.1	52
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0
65-74	4	3.1	11	2.1	130	5	3.8	13	3.4	145	7	5.4	26	2.1	61
75-84	16	4.1	42	1.6	86	10	2.6	28	2.8	77	23	5.9	47	2.3	35
85 and older	15	2.3	42	2.4	130	9	1.4	27	1.6	45	24	3.6	54	2.1	62
Male	25	3.5	70	2.1	148	20	2.8	69	2.4	130	31	4.3	85	1.4	42
Disabled	9	6.0	23	1.9	141	9	6.0	40	2.7	175	9	6.0	26	1.2	25
64 or younger	8	5.5	22	1.9	143	9	6.2	40	2.7	175	9	6.2	26	1.2	25
65-74	1	25.0	1	1.0	102	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
Other Eligibles	16	2.8	47	2.2	152	11	1.9	29	2.1	68	22	3.8	59	1.5	50
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	6	5.2	13	2.0	142	4	3.4	12	1.8	64	6	5.2	22	2.2	66
75-84	8	3.2	27	1.2	95	4	1.6	8	3.4	97	12	4.8	28	1.1	42
85 and older	2	1.0	7	6.6	389	3	1.4	9	1.2	50	4	1.9	9	1.2	37
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 1,844 beneficiaries who were in nursing facilities for part of their enrollment and their 5,249 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 (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^{a, b, c, d}
 COLORADO, 1999

Beneficiary Characteristics	ANTIHYPERTENSIVE					ANTIASTHMATIC					ANTIPARKINSONIAN				
	Users as %					Users as %					Users as %				
	No. of Users	Residents	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	No. of Bene among Users	Mean No. of Rx	Mean Rx \$	No. of Users	Residents	No. of Bene among Users	Mean No. of Rx	Mean Rx \$
All	72	3.6 %	174	2.3	\$69	76	3.8 %	204	1.9	\$66	32	1.6 %	77	2.1	\$77
Female	36	2.8	89	2.4	64	37	2.9	85	2.4	81	19	1.5	50	1.6	74
Disabled	1	1.1	5	5.8	202	7	8.0	17	2.0	62	3	3.4	11	1.4	86
64 or younger	1	1.1	5	5.8	202	7	8.0	17	2.0	62	3	3.4	11	1.4	86
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
Other Eligibles	35	3.0	84	2.2	56	30	2.5	68	2.5	86	16	1.4	39	1.7	70
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	7	5.4	26	1.1	34	3	2.3	7	2.9	145	2	1.5	5	2.6	85
75-84	12	3.1	26	2.7	67	10	2.6	28	3.4	111	5	1.3	11	1.6	90
85 and older	16	2.4	32	2.6	65	17	2.6	33	1.6	51	9	1.4	23	1.5	58
Male	36	5.0	85	2.2	74	39	5.4	119	1.6	55	13	1.8	27	3.0	84
Disabled	6	4.0	17	1.8	102	5	3.4	20	1.1	37	7	4.7	13	2.2	37
64 or younger	6	4.1	17	1.8	102	5	3.4	20	1.1	37	7	4.8	13	2.2	37
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
Other Eligibles	30	5.2	68	2.3	67	34	5.9	99	1.7	58	6	1.0	14	3.7	127
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	6	5.2	15	1.7	39	14	12.1	26	1.3	33	2	1.7	5	1.6	43
75-84	16	6.4	32	2.4	60	11	4.4	44	1.1	35	3	1.2	6	5.8	227
85 and older	8	3.9	21	2.5	98	9	4.3	29	3.1	116	1	0.5	3	3.0	66
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0.0	0	0.0	0

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 1,844 beneficiaries who were in nursing facilities for part of their enrollment and their 5,249 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 (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 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^{a, b, c, d}
 COLORADO, 1999

Beneficiary Characteristics	ANTIDIABETIC					MINERALS & ELECTROLYTES					Mean Rx \$	Mean No. of Rx	All-Year NF Residents	Bene Mos among All-Year NF Residents		
	Users as %		No. of Bene Mos among Users		Mean		Users as %		No. of Bene Mos among Users						Mean	
	No. of Users	Residents	No. of Users	Residents	No. of Rx	Rx \$	No. of Users	Residents	No. of Users	Residents					No. of Rx	Rx \$
All	57	2.9 %	149	2.5	668	83	4.2 %	238	1.7	332	1,994	4,475				
Female	40	3.1	97	2.5	69	50	3.9	136	1.8	34	1,273	2,764				
Disabled	2	2.3	4	7.3	209	5	5.7	13	1.5	24	88	215				
64 or younger	2	2.3	4	7.3	209	5	5.7	13	1.5	24	88	215				
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				
Other Eligibles	38	3.2	93	2.3	63	45	3.8	123	1.8	35	1,185	2,549				
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0				
65-74	3	2.3	8	5.0	110	4	3.1	10	2.5	57	130	302				
75-84	24	6.2	54	1.4	52	22	5.6	57	1.5	35	390	883				
85 and older	11	1.7	31	3.2	69	19	2.9	56	1.9	32	665	1,364				
Male	17	2.4	52	2.4	68	33	4.6	102	1.7	28	721	1,711				
Disabled	5	3.4	16	2.3	74	12	8.1	40	1.2	25	149	389				
64 or younger	5	3.4	16	2.3	74	12	8.3	40	1.2	25	145	382				
65-74	0	0.0	0	0.0	0	0	0.0	0	0.0	0	4	7				
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				
Other Eligibles	12	2.1	36	2.5	65	21	3.7	62	2.0	30	572	1,322				
64 or younger	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0				
65-74	5	4.3	17	1.1	23	5	4.3	14	1.4	27	116	293				
75-84	5	2.0	14	4.4	129	12	4.8	39	1.5	24	249	560				
85 and older	2	1.0	5	2.2	30	4	1.9	9	4.7	62	207	469				
Unknown	0	0.0	0	0.0	0	0	0.0	0	0.0	0	0	0				

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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 1,844 beneficiaries who were in nursing facilities for part of their enrollment and their 5,249 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 (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^{a, b}
 COLORADO, 1999

Beneficiary Characteristics	No. of Beneficiaries					No. of Beneficiaries with Pharmacy Benefit Coverage					
	All	Aged	Disabled	Adults	Children	All	Aged	Disabled	Adults	Children	Unknown
All	333,322	39,857	60,279	54,568	178,505	2,922,069	410,859	642,421	368,332	1,499,250	1,207
Age											
5 and younger	91,834	0	2,281	0	89,553	0	0	22,333	0	722,802	0
6-14	77,007	0	5,649	0	71,358	0	0	61,176	0	640,848	0
15-20	31,315	0	4,001	9,733	17,580	1	0	41,782	61,517	135,488	12
21-44	66,474	0	23,722	42,670	14	68	0	255,217	289,842	112	770
45-64	26,012	0	23,844	2,163	0	5	0	253,614	16,969	0	39
65-74	15,747	14,968	740	1	0	38	160,316	7,837	3	0	384
75-84	13,685	13,653	31	1	0	0	141,844	355	1	0	0
85 and older	11,247	11,236	10	0	0	1	109,055	104	0	0	2
Unknown	1	0	1	0	0	0	0	3	0	0	0
Gender											
Female	198,622	29,025	31,288	49,772	88,487	50	302,468	337,130	337,377	740,717	523
Male	134,700	10,832	28,991	4,796	90,018	63	1,203,854	305,291	30,955	758,533	684
Unknown	0	0	0	0	0	0	0	0	0	0	0
Race											
White	163,567	25,211	33,993	27,582	76,725	56	1,435,668	362,941	183,672	634,916	577
African American	25,874	1,552	2,783	5,000	16,525	14	232,398	29,642	38,304	147,671	163
Other/unknown	143,881	13,094	23,503	21,986	85,255	43	1,254,003	249,838	146,356	716,663	467
Use of Nursing Facilities											
All year	10,420	9,167	1,251	0	0	2	103,628	13,319	0	0	16
Part year	5,503	4,346	1,148	5	0	4	52,022	11,384	43	0	47
None	317,399	26,344	57,880	54,563	178,505	107	2,766,419	617,718	368,289	1,499,250	1,144
Maintenance Assistance Status											
Cash	170,175	27,061	54,294	30,330	58,459	31	1,609,098	291,198	229,585	507,522	317
Medically needy	0	0	0	0	0	0	0	0	0	0	0
Poverty related	120,024	221	262	20,696	98,845	0	920,963	2,409	110,804	805,061	0
Other/unknown	43,123	12,575	5,723	3,542	21,201	82	392,008	117,252	27,943	186,667	890
Dual Status^c											
Full dual, all year	55,258	35,823	19,198	195	5	37	581,003	368,308	210,832	1,434	386
Full dual, part year	1,176	636	534	2	0	4	12,477	6,760	23	0	36
Non-dual, all year	276,888	3,398	40,547	54,371	178,500	72	2,328,589	35,791	366,875	1,499,207	785
Managed Care Status											
FFS all year	23,412	1,444	2,351	7,314	12,295	8	52,441	3,694	17,348	23,889	48
FFS part year, with Rx claims	52,894	4,249	6,124	15,411	27,101	9	448,089	36,782	117,673	237,272	83
FFS part year, no Rx claims	64,044	1,411	3,315	11,009	48,305	4	481,127	10,577	70,803	372,020	19
MC all year, with Rx claims	95,286	25,321	28,818	8,881	32,235	31	1,027,234	279,862	75,850	336,835	360
MC all year, no Rx claims	97,686	7,432	19,671	11,953	58,569	61	913,178	79,944	86,658	529,234	697

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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
 COLORADO, 1999

	Benes and					
	Bene Mos in Cell B of Table 1		Included in Cell C of Table 1		Excluded from 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
All	333,322	2,922,069	140,350	306,340	192,972	2,615,729
FFS all year	23,412	52,441	23,412	52,441	0	0
FFS part year, with Rx claims	52,894	448,089	52,894	115,303	0	332,786
FFS part year, with no Rx claims	64,044	481,127	64,044	138,596	0	342,531
MC all year, with Rx claims	95,286	1,027,234	0	0	95,286	1,027,234
MC all year, with no Rx claims	97,686	913,178	0	0	97,686	913,178

Source: Data for this table are from the MAX 1999 file for Colorado, released by CMS in 9/2003. 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.